



MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES  
 BUREAU OF ENVIRONMENTAL HEALTH SERVICES  
**FOOD ESTABLISHMENT INSPECTION REPORT**

TIME IN	10:30 am	TIME OUT	2:14 pm
DATE	June 10, 2016	PAGE	1 of 5

BASED ON AN INSPECTION THIS DAY, THE ITEMS NOTED BELOW IDENTIFY NONCOMPLIANCE IN OPERATIONS OR FACILITIES WHICH MUST BE CORRECTED BY THE NEXT ROUTINE INSPECTION, OR SUCH SHORTER PERIOD OF TIME AS MAY BE SPECIFIED IN WRITING BY THE REGULATORY AUTHORITY. FAILURE TO COMPLY WITH ANY TIME LIMITS FOR CORRECTIONS SPECIFIED IN THIS NOTICE MAY RESULT IN CESSATION OF YOUR FOOD OPERATIONS.

ESTABLISHMENT NAME: Spokes Pub and Grill		OWNER: Scott Enterprises		PERSON IN CHARGE: Kathy Barbee	
ADDRESS: 1627 West Columbia			ESTABLISHMENT NUMBER: 1559		COUNTY: 187
CITY/ZIP: Farmington 63640		PHONE: (573)756-6220		FAX: (573)756-0159	
PURPOSE <input type="checkbox"/> Pre-opening <input checked="" type="checkbox"/> Routine <input type="checkbox"/> Follow-up <input type="checkbox"/> Complaint <input checked="" type="checkbox"/> Other Risk Factor Study					
ESTABLISHMENT TYPE <input checked="" type="checkbox"/> BAKERY RESTAURANT <input type="checkbox"/> C. STORE SCHOOL <input type="checkbox"/> CATERER SENIOR CENTER <input type="checkbox"/> DELI SUMMER F.P. <input checked="" type="checkbox"/> GROCERY STORE TAVERN <input type="checkbox"/> INSTITUTION TEMP.FOOD <input type="checkbox"/> MOBILE VENDORS		FROZEN DESSERT <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Disapproved <input checked="" type="checkbox"/> Not Applicable License No. _____			
SEWAGE DISPOSAL <input checked="" type="checkbox"/> PUBLIC <input type="checkbox"/> PRIVATE		WATER SUPPLY <input checked="" type="checkbox"/> COMMUNITY <input type="checkbox"/> NON-COMMUNITY <input type="checkbox"/> PRIVATE Date Sampled _____    Results _____			

**RISK FACTORS AND INTERVENTIONS**

**Risk factors** are food preparation practices and employee behaviors most commonly reported to the Centers for Disease Control and Prevention as contributing factors in foodborne illness outbreaks. **Public health interventions** are control measures to prevent foodborne illness or injury.

Compliance	Demonstration of Knowledge	COS	R	Compliance	Potentially Hazardous Foods	COS	R
<input checked="" type="checkbox"/> OUT	Person in charge present, demonstrates knowledge, and performs duties			<input checked="" type="checkbox"/> OUT N/O N/A	Proper cooking, time and temperature		
	<b>Employee Health</b>			IN <input checked="" type="checkbox"/> OUT N/O N/A	Proper reheating procedures for hot holding		
IN <input checked="" type="checkbox"/> T	Management awareness; policy present			IN <input checked="" type="checkbox"/> OUT N/O N/A	Proper cooling time and temperatures		
IN <input checked="" type="checkbox"/> T	Proper use of reporting, restriction and exclusion			<input checked="" type="checkbox"/> OUT N/O N/A	Proper hot holding temperatures		
	<b>Good Hygienic Practices</b>			<input checked="" type="checkbox"/> OUT N/A	Proper cold holding temperatures		
<input checked="" type="checkbox"/> OUT N/O	Proper eating, tasting, drinking or tobacco use			IN <input checked="" type="checkbox"/> T N/C N/A	Proper date marking and disposition		
<input checked="" type="checkbox"/> OUT N/O	No discharge from eyes, nose and mouth			IN <input checked="" type="checkbox"/> OUT N/O <input checked="" type="checkbox"/> N/A	Time as a public health control (procedures / records)		
	<b>Preventing Contamination by Hands</b>				<b>Consumer Advisory</b>		
<input checked="" type="checkbox"/> OUT N/O	Hands clean and properly washed			IN <input checked="" type="checkbox"/> T N/A	Consumer advisory provided for raw or undercooked food		
<input checked="" type="checkbox"/> OUT N/O	No bare hand contact with ready-to-eat foods or approved alternate method properly followed				<b>Highly Susceptible Populations</b>		
IN <input checked="" type="checkbox"/> T	Adequate handwashing facilities supplied & accessible			IN <input checked="" type="checkbox"/> OUT N/O <input checked="" type="checkbox"/> N/A	Pasteurized foods used, prohibited foods not offered		
	<b>Approved Source</b>				<b>Chemical</b>		
<input checked="" type="checkbox"/> OUT	Food obtained from approved source			IN <input checked="" type="checkbox"/> OUT N/A	Food additives: approved and properly used		
<input checked="" type="checkbox"/> OUT N/C N/A	Food received at proper temperature			<input checked="" type="checkbox"/> OUT	Toxic substances properly identified, stored and used		
<input checked="" type="checkbox"/> OUT	Food in good condition, safe and unadulterated				<b>Conformance with Approved Procedures</b>		
IN <input checked="" type="checkbox"/> OUT N/O <input checked="" type="checkbox"/> N/A	Required records available: shellstock tags, parasite destruction			IN <input checked="" type="checkbox"/> OUT N/A	Compliance with approved Specialized Process and HACCP plan		
	<b>Protection from Contamination</b>				The letter to the left of each item indicates that item's status at the time of the inspection. IN = in compliance    OUT = not in compliance N/A = not applicable    N/O = not observed COS = Corrected On Site    R = Repeat Item		
IN <input checked="" type="checkbox"/> T N/A	Food separated and protected						
IN <input checked="" type="checkbox"/> T N/A	Food-contact surfaces cleaned & sanitized						
IN <input checked="" type="checkbox"/> T N/O	Proper disposition of returned, previously served, reconditioned, and unsafe food						

**GOOD RETAIL PRACTICES**

Good Retail Practices are preventative measures to control the introduction of pathogens, chemicals, and physical objects into foods.

IN	OUT	Safe Food and Water	COS	R	IN	OUT	Proper Use of Utensils	COS	R
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Pasteurized eggs used where required			<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	In-use utensils: properly stored		
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Water and ice from approved source			<input type="checkbox"/>	<input checked="" type="checkbox"/>	Utensils, equipment and linens: properly stored, dried, handled		
		<b>Food Temperature Control</b>			<input checked="" type="checkbox"/>	<input type="checkbox"/>	Single-use/single-service articles: properly stored, used		
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Adequate equipment for temperature control			<input checked="" type="checkbox"/>	<input type="checkbox"/>	Gloves used properly		
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Approved thawing methods used					<b>Utensils, Equipment and Vending</b>		
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Thermometers provided and accurate			<input checked="" type="checkbox"/>	<input type="checkbox"/>	Food and nonfood-contact surfaces cleanable, properly designed, constructed, and used		
		<b>Food Identification</b>			<input type="checkbox"/>	<input checked="" type="checkbox"/>	Warewashing facilities: installed, maintained, used; test strips used		
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Food properly labeled; original container			<input type="checkbox"/>	<input checked="" type="checkbox"/>	Nonfood-contact surfaces clean		
		<b>Prevention of Food Contamination</b>					<b>Physical Facilities</b>		
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Insects, rodents, and animals not present			<input checked="" type="checkbox"/>	<input type="checkbox"/>	Hot and cold water available; adequate pressure		
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Contamination prevented during food preparation, storage and display			<input type="checkbox"/>	<input checked="" type="checkbox"/>	Plumbing installed; proper backflow devices		
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Personal cleanliness: clean outer clothing, hair restraint, fingernails and jewelry			<input checked="" type="checkbox"/>	<input type="checkbox"/>	Sewage and wastewater properly disposed		
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Wiping cloths: properly used and stored			<input checked="" type="checkbox"/>	<input type="checkbox"/>	Toilet facilities: properly constructed, supplied, cleaned		
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Fruits and vegetables washed before use			<input checked="" type="checkbox"/>	<input type="checkbox"/>	Garbage/refuse properly disposed; facilities maintained		
					<input type="checkbox"/>	<input checked="" type="checkbox"/>	Physical facilities installed, maintained, and clean		

Person in Charge /Title: <i>Kathy Barbee</i>		Kathy Barbee		Date: June 10, 2016	
Inspector: <i>Rose Mier</i>		Rose Mier		Telephone No. (573)431-1947	EPHS No. 1390
				Follow-up: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
				Follow-up Date: _____	



MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES  
 BUREAU OF ENVIRONMENTAL HEALTH SERVICES  
**FOOD ESTABLISHMENT INSPECTION REPORT**

ESTABLISHMENT NAME Spokes Pub and Grill		ADDRESS 1627 West Columbia		CITY /ZIP Farmington 63640	
FOOD PRODUCT/LOCATION		TEMP. in ° F	FOOD PRODUCT/ LOCATION		TEMP. in ° F
Ambient, beer cooler, south side of bar		36	Flat grill prep cooler, top: cooked vege mix, turkey, tomat		39, 40, 39
Ambient, glass front cooler, north side bar		38	Flat grill perp cooler, bottom: ambient, hamburger, chicker		39, 39, 38
Ambient, beer cooler, north side of bar		22	Steam hot hold: baked potato, mashed potato		180, 165
Hamburger, cooked medium, grill		170	Steam hot hold: gravy, chili		160, 140
Maytag freezer, ambient		30-40	Fryer prep cooler, top: cheese, tomatoes, taco meat		38, 33, 41

Code Reference	PRIORITY ITEMS	Correct by (date)	Initial
----------------	----------------	-------------------	---------

NOTE

Temperatures, continued, in degrees Fahrenheit:  
 Fryer prep cooler, bottom: ambient 38, cooked chicken 38, boiled eggs 39  
 Chicken, grill: 183, 183  
 Walk-in cooler: ambient 38, cooked meatballs 41, boiled egg 39, cooked penne 38, cooked chicken 38  
 Walk-in freezer: ambient 18  
 Hot hold cabinet: ambient 150, baked potatoes 161, bacon 167  
 Truck delivery: raw shell egg 45, grated cheese 41  
 True cooler in server line: ambient, 39  
 Prep cooler in server line: ambient 41, cut lettuce 42

TO

|

Code Reference	CORE ITEMS	Correct by (date)	Initial
----------------	------------	-------------------	---------

6-301.12A There were no paper towels in the dispenser at the bar handwashing sink. Please supply disposable towels at all times. NOTE: disposable towels were obtained, but did not fit dispenser. Please provide disposable towels in a dispenser. 6/11/16 Ty

4-601.11C Debris on the ledge and deteriorating foam seal for the gliding door on the south side bar glasses cooler . Please remove foam debris and clean ledge. 6/11/16

3-303.11 A tray of condiments was stored in the ice bin in the bar area. The ice is used for consumption. Food shall be protected from contamination. Please dispose of ice. Do not place items into the ice for cooling. CORRECTED ON SITE by disposing of ice and discussion with manager. COS

3-302.11A There was no lid on the ice bin in the bar. Food shall be protected from contamination. Please keep ice covered. CORRECTED ON SITE by replacing cover. COS

6-501.12A Debris observed on the floor beneath the sinks and equipment in the bar area. Physical facilities shall be kept clean. Please thoroughly clean floor. 6/15/16

4-601.11C Sticky spill observed on the door area of the glass front cooler in the north side of bar. Please clean as often as needed to keep clean. CORRECTED ON SITE by cleaning. COS

6-202/15A Daylight observed at the base of the east entry door into the restaurant. Please seal to reduce pest entry points. 6/30/16

6-301.14 There was no handwashing sign in the men's bathroom (north side). Please install a sign to remind users of the importance of washing hands. 6/10/16

6-202.14 The doors to the men's bathroom and women's bathrooms (north side) did not fully self-close. Please adjust/repair to make both doors fully self-closing. 6/30/16

Ty

|

EDUCATION PROVIDED OR COMMENTS

Person in Charge /Title:		Kathy Barbee		Date: June 10, 2016	
Inspector:	Rose Mier	Telephone No. (573)431-1947	EPHS No. 1390	Follow-up: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Follow-up Date:



MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES  
 BUREAU OF ENVIRONMENTAL HEALTH SERVICES  
**FOOD ESTABLISHMENT INSPECTION REPORT**

ESTABLISHMENT NAME Spokes Pub and Grill		ADDRESS 1627 West Columbia		CITY /ZIP Farmington 63640	
FOOD PRODUCT/LOCATION		TEMP. in ° F	FOOD PRODUCT/ LOCATION		TEMP. in ° F

Code Reference	PRIORITY ITEMS Priority items contribute directly to the elimination, prevention or reduction to an acceptable level, hazards associated with foodborne illness or injury. <b>These items MUST RECEIVE IMMEDIATE ACTION within 72 hours or as stated.</b>	Correct by (date)	Initial
2-201.11A	The employee health policy was oral and partially developed. Please develop an employee health policy based on Chapter 2 of the Missouri Food Code and/or the FDA Employee Health and Personal Hygiene Handbook. Both documents are available online.	6/30/16	TJD
3-603.11B	A consumer advisory is provided on the menus, but not a disclosure. Please asterisk each food item that can be ordered raw or undercooked, or contains a raw or undercooked ingredient, to the consumer advisory warning. KITCHEN	6/30/16	
3-501.11	The Maytag freezer had an ambient temperature that ranged from 30 to 40F during this visit. The food in the door was thawing. Food held in the freezer shall be kept frozen. Please adjust thermostat, repair, or replace freezer to ensure food remains frozen, even during the greatest use.	6/30/16	

Code Reference	CORE ITEMS Core items relate to general sanitation, operational controls, facilities or structures, equipment design, general maintenance or sanitation standard operating procedures (SSOPs). <b>These items are to be corrected by the next regular inspection or as stated.</b>	Correct by (date)	Initial
6-202.15A	The south side entry is composed of two sets of double doors. Neither set is sealed against pest entry. Please seal the outer set of entry doors to reduce pest entry points.	6/30/16	
4-204.112A	A thermometer was not found in the glass-front cooler in the north side of the bar. Please install a thermometer in a convenient-to-read location in the warmest part of this cooler. CORRECTED ON SITE by installing thermometer. KITCHEN	COS	
4-601.11C	Debris observed on the bottom two shelves of the mobile cart next to the hot hold unit that held clean plates. Please clean as often as needed to keep clean.	6/10/16	
6-501.14A	Debris observed on the grates and/or blades of the fan sitting on top of the Maytag freezer and the wall-mounted fan by the Maytag freezer. Please clean as often as needed to keep clean.	6/15/16	
6-501.14A	Debris observed on the air-intake grate and the adjacent wall above the Maytag freezer. Ventilation systems shall not be a source of contamination. Please clean as often as needed to keep clean.	6/15/16	
6-101.11A	A floor tile in front of the flat grill was broken. Floors shall be smooth and in good repair. Please replace floor tile.	6/30/16	
3-304.12A, C	A disposable bowl was stored in the container of slaw in the flat grill prep cooler. In-use utensils shall be multi-use and have a handle. In-use utensils shall be stored with their handle above the surface of the food and lid, or on a surface that is washed, rinsed, and sanitized at least every four hours (unless stored in cooler). Please replace bowl with a handled utensil that is cleanable, and store correctly.	6/10/16	
4-203.11B	Two cook's thermometers were inaccurate, reading 40 and 50F when should have read 33F. Also, the thermometers read only to 160F. Please replace with accurate thermometers reading from 0 to 220F.	6/10/16	

EDUCATION PROVIDED OR COMMENTS

Person in Charge /Title:		Kathy Barbee		Date: June 10, 2016	
Inspector:	Rose Mier	Telephone No. (573)-431-1947	EPHS No. 1390	Follow-up: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Follow-up Date:



MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES  
 BUREAU OF ENVIRONMENTAL HEALTH SERVICES  
**FOOD ESTABLISHMENT INSPECTION REPORT**

ESTABLISHMENT NAME Spokes Pub and Grill		ADDRESS 1627 West Columbia		CITY / ZIP Farmington 63640	
FOOD PRODUCT/LOCATION		TEMP. in ° F	FOOD PRODUCT/ LOCATION		TEMP. in ° F

Code Reference	PRIORITY ITEMS Priority items contribute directly to the elimination, prevention or reduction to an acceptable level, hazards associated with foodborne illness or injury. <b>These items MUST RECEIVE IMMEDIATE ACTION within 72 hours or as stated.</b>	Correct by (date)	Initial
3-501.17A	<b>WALK-IN COOLER</b> Food was date labeled with the day of preparation. Potentially hazardous food that is prepared on-site, or commercially prepared and opened, is fully cooked, and is held for more than 24 hours shall be labeled with the date of disposition, which is the date of preparing or opening plus an additional six days. Please include the date of disposition on all food to which the rule applies.	6/10/16	TLP
3-501.18A	A package of cooked penne pasta was labeled with the preparation date of May 22. Food that is potentially hazardous and ready-to-eat shall be discarded after seven days, which was May 28. Please dispose of penne.	6/10/16	
3-302.11A	Raw hamburger was stored above cooked chicken and raw bacon on the mobile cart. Food shall be stored separately or in the following vertical order: raw poultry and eggs on bottom, then ground meats (including mechanically tenderized), then whole muscle meats, then fish and seafood. All other foods on top. Please rearrange into the correct order.	6/10/16	
4-601.11A	<b>PREP AREA</b> Debris observed on the meat/cheese slicer. Please disassemble and wash, rinse, sanitize entire slicer after use. Store covered to protect from blowing debris.	6/10/16	
4-601.11A	Accumulation of debris in the ribs of the hood over the cooking equipment. Please clean as often as needed to prevent drippage onto food.	6/30/16	
4-202.11A	The holder for the ice scoop on the ice maker was broken in the bottom. Please dispose of container and store scoop on a surface that drains and is cleaned and sanitized daily.	6/15/16	

Code Reference	CORE ITEMS Core items relate to general sanitation, operational controls, facilities or structures, equipment design, general maintenance or sanitation standard operating procedures (SSOPs). <b>These items are to be corrected by the next regular inspection or as stated.</b>	Correct by (date)	Initial
6-501.11	<b>WAREWASH AREA</b> The paint was peeling from the ceiling above glassware. Physical facilities shall be maintained in good condition. Please remove peeling paint and repair ceiling to make it smooth and cleanable.	6/30/16	TLP
6-501.14A	Dust accumulation observed on the air-intake grate by the Ansil chemical suppression boxes. Please clean as often as needed to keep clean.	6/30/16	
4-501.11B	The plastic "curtains" on the exit side of the mechanical dish washer were missing, and the one on the entrance side was missing most flaps; excessive steam was observed escaping into the kitchen when in use. Please replace both curtains. (NOTE: this was a repeat from previous inspection).	6/30/16	
6-101.11A	Broken floor tiles observed by the 3-vat sink. Please replace broken tiles to make floor smooth and cleanable.	6/30/16	

EDUCATION PROVIDED OR COMMENTS

Person in Charge / Title:		Kathy Barbee	Date:	June 10, 2016
Inspector:		Rose Mier	Telephone No.	(573)431-1947
			EPHS No.	1390
			Follow-up:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
			Follow-up Date:	



MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES  
 BUREAU OF ENVIRONMENTAL HEALTH SERVICES  
**FOOD ESTABLISHMENT INSPECTION REPORT**

ESTABLISHMENT NAME Spokes Pub and Grill		ADDRESS 1627 West Columbia		CITY / ZIP Farmington 63640	
FOOD PRODUCT/LOCATION		TEMP. in ° F	FOOD PRODUCT/ LOCATION		TEMP. in ° F

Code Reference	PRIORITY ITEMS Priority items contribute directly to the elimination, prevention or reduction to an acceptable level, hazards associated with foodborne illness or injury. <b>These items MUST RECEIVE IMMEDIATE ACTION within 72 hours or as stated.</b>	Correct by (date)	Initial
4-601.11A	PREP AREA Debris observed on the guard and housing of the dough mixer. Please wash, rinse, and sanitize entire unit after use.	6/10/16	TKL
5-203.14B	A hose was attached to the hose bibb by the ice maker. No backflow prevention was observed. Please install an American Society of Sanitary Engineering (ASSE) rated hose bibb vacuum breaker on the hose bibb to protect potable water from contamination from possible backflow.	6/11/16	
4-202.11A	Several rectangular, plastic containers (cooler inserts, storage) were observed cracked and/or marred on their inside surfaces. Food contact surfaces shall be smooth and free of imperfections. Please discard all containers that are cracked or marred.	6/11/16	
3-403.11A	Employee stated that chili that is made on site and reheated for hot holding is heated to at least 145F. Food that is made on-site or that is commercially packaged and previously opened shall be heated to 165F for 15 seconds before hot holding at 135F or higher. Food that is commercially prepared and sealed may be reheated to 135F. Please use an accurate thermometer to ensure food is reheated to the correct temperature.	6/11/16	

Code Reference	CORE ITEMS Core items relate to general sanitation, operational controls, facilities or structures, equipment design, general maintenance or sanitation standard operating procedures (SSOPs). <b>These items are to be corrected by the next regular inspection or as stated.</b>	Correct by (date)	Initial
4-901.11A	PREP AREA Some of the metal containers on the rack by the prep table were wet nested. Please re-wash, rinse, and sanitize all wet-nested equipment and allow complete air drying before storing nested.	6/10/16	TKL
4-101.19	CATERING CLOSET Cardboard was used as shelf liner on several metal open-wire shelves. The cardboard was observed stained. Surfaces exposed to splash or that require frequent cleaning shall be smooth and non-absorbent. Please discard cardboard.	6/30/16	
6-501.111B	SERVER LINE A purse was stored on top of a package of clean linens. Please store personal items in a designated area where food, single-use items, clean equipment, and clean linens cannot be contaminated.	6/10/16	
5-501.116	The outside of the trash can was dirty. Please clean all surfaces of trash receptacles when emptied. Clean in a location where food and food-related items cannot be contaminated.	6/11/16	

EDUCATION PROVIDED OR COMMENTS

Person in Charge /Title:	Kathy Barbee	Date: June 10, 2016
Inspector:	Rose Mier	Telephone No. (573)431-1947   EPHS No. 1390
		Follow-up: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
		Follow-up Date: