



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

TIME IN	10:30am	TIME OUT	12:45pm
DATE	1-23-17	PAGE	1 of 2

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: West County Middle School Cafeteria		OWNER: West County R-IV School District		PERSON IN CHARGE: Dee Giddon	
ADDRESS: 728 Highway M			ESTABLISHMENT NUMBER: 4798		COUNTY: 187
CITY/ZIP: Park Hills, 63601		PHONE: 573-562-7544		FAX: 573-562-2714	
PURPOSE <input type="checkbox"/> Pre-opening <input checked="" type="checkbox"/> Routine <input type="checkbox"/> Follow-up <input type="checkbox"/> Complaint <input type="checkbox"/> Other _____					
ESTABLISHMENT TYPE <input type="checkbox"/> BAKERY RESTAURANT <input checked="" type="checkbox"/> C. STORE SCHOOL <input type="checkbox"/> CATERER SENIOR CENTER <input type="checkbox"/> DELI SUMMER F.P. <input 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 type="checkbox"/> PUBLIC <input checked="" 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 type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> NO <input type="checkbox"/> N/A	Proper cooking, time and temperature		
	Employee Health			<input type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> NO <input type="checkbox"/> N/A	Proper reheating procedures for hot holding		
<input checked="" type="checkbox"/> OUT	Management awareness; policy present			<input type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> NO <input type="checkbox"/> N/A	Proper cooling time and temperatures		
<input checked="" type="checkbox"/> OUT	Proper use of reporting, restriction and exclusion			<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> NO <input type="checkbox"/> N/A	Proper hot holding temperatures		
	Good Hygienic Practices			<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> NO <input type="checkbox"/> N/A	Proper cold holding temperatures		
<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/O	Proper eating, tasting, drinking or tobacco use	✓		<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input type="checkbox"/> NO <input type="checkbox"/> N/A	Proper date marking and disposition		✓
<input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/O	No discharge from eyes, nose and mouth			<input type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> NO <input checked="" type="checkbox"/> N/A	Time as a public health control (procedures / records)		
	Preventing Contamination by Hands				Consumer Advisory		
<input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/O	Hands clean and properly washed			<input type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A	Consumer advisory provided for raw or undercooked food		
<input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/O	No bare hand contact with ready-to-eat foods or approved alternate method properly followed				Highly Susceptible Populations		
<input checked="" type="checkbox"/> OUT	Adequate handwashing facilities supplied & accessible			<input type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> NO <input checked="" type="checkbox"/> N/A	Pasteurized foods used, prohibited foods not offered		
	Approved Source				Chemical		
<input checked="" type="checkbox"/> OUT	Food obtained from approved source			<input type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A	Food additives: approved and properly used		
<input type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> COS <input type="checkbox"/> N/A	Food received at proper temperature			<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT	Toxic substances properly identified, stored and used		✓
<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT	Food in good condition, safe and unadulterated	✓			Conformance with Approved Procedures		
<input type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/O <input checked="" type="checkbox"/> N/A	Required records available: shellstock tags, parasite destruction			<input type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A	Compliance with approved Specialized Process and HACCP plan		
	Protection from Contamination				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		
<input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/A	Food separated and protected						
<input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/A	Food-contact surfaces cleaned & sanitized						
<input type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> NO	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 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	✓	
		Food Temperature Control			<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					Utensils, Equipment and Vending		
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Thermometers provided and accurate			<input checked="" type="checkbox"/>	<input type="checkbox"/>	Food and nonfood-contact surfaces cleanable, properly designed, constructed, and used		
		Food Identification			<input checked="" type="checkbox"/>	<input type="checkbox"/>	Warewashing facilities: installed, maintained, used; test strips used		
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Food properly labeled; original container			<input checked="" type="checkbox"/>	<input type="checkbox"/>	Nonfood-contact surfaces clean		
		Prevention of Food Contamination					Physical Facilities		
<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 checked="" type="checkbox"/>	<input type="checkbox"/>	Contamination prevented during food preparation, storage and display			<input checked="" type="checkbox"/>	<input 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 checked="" 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 checked="" type="checkbox"/>	<input type="checkbox"/>	Physical facilities installed, maintained, and clean		

Person in Charge Title: <i>Dee Giddon</i>		Dee Giddon		Date: January 23, 2017	
Inspector: <i>John Wiseman</i>		John Wiseman		Telephone No. (573)431-1947	EPHS No. 1507
				Follow-up: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
				Follow-up Date: _____	



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FOOD ESTABLISHMENT INSPECTION REPORT

ESTABLISHMENT NAME West County Middle School Cafeteria		ADDRESS 728 Highway M		CITY /ZIP Park Hills, 63601	
FOOD PRODUCT/LOCATION		TEMP. in ° F	FOOD PRODUCT/ LOCATION		TEMP. in ° F
Milk from milk cooler		36	Walk-in freezer		0
Service area cooler		32	Hot held broccoli		136
Service area hot holding cabinet		138	Hot held chicken nuggets		147
Frigidaire glass front cooler		28			
Walk-in cooler		32			

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. These items MUST RECEIVE IMMEDIATE ACTION within 72 hours or as stated.	Correct by (date)	Initial
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3-501.17A	A discard date was not observed on wrapped salads stored in the Traulsen cooler at the service line. According to the manager, these salads were prepared this day and any unsold salads will be offered for sale the following day. Potentially hazardous foods stored refrigerated shall be marked with the day or date, not to exceed seven day in total, by which time the food will be consumed or discarded. COS by marking with the discard date.	COS	
4-501.114 A 7-201.11	A bucket of soapy water with a rag, not containing a detectable concentration of an acceptable chemical sanitizer, was observed stored in one of the two basins of the food prep sink in the kitchen. According to the manager, this solution is used to clean and sanitized food prep surfaces in the kitchen. Only chemical sanitizers prepared at appropriate concentrations shall be permitted for use in a food establishment for surface sanitation. COS by discarding the solution. Toxic materials shall be stored so they cannot contaminate food, food contact surfaces, equipment and single service items. COS by removing the bucket from the food prep sink.	COS	
3-501.17A	A discard date was not observed on a large bowl of salad stored in the walk-in cooler. Potentially hazardous foods stored refrigerated shall be marked with the day or date, not to exceed seven day in total, by which time the food will be consumed or discarded. COS by marking with the discard date.	COS	
3-202.15	Damage to the top seal and side wall of a 6 lb can of pears was observed in storage in the dry storage room. Food packages shall be in good condition and protect the integrity of the contents. COS by discarding the damaged product.	COS	

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). These items are to be corrected by the next regular inspection or as stated.	Correct by (date)	Initial
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6-403.11A	A container of hard boiled eggs were stored on a shelf with sandwiches prepared for lunch. According to the manager, these are employee food. Employee food shall be located so that facility food is protected from contamination. COS by moving the eggs to the lowest shelf of the cooler marked 'STAFF'.	COS	D.G.
4-301.12A	Ware washing supplies in the form of dish detergent and a stainless steel pot scrubber was observed stored on the drainboard of the kitchen food prep sink. According to the manager, food equipment is occasionally washed in the prep sink. A sink with at least three compartments shall be provided for manually washing, rinsing, and sanitizing equipment and utensils. Please use either the mechanical dishwasher or the three compartment sink for ware washing. COS by discussion with the manager.	COS	
6-403.11A	An employee beverage was observed stored on the prep table in the kitchen. Employee food shall be located so that facility food and food contact surfaces are protected from contamination. COS by moving the beverage to the employee refrigerator.	COS	
5-501.17	The trash can in the employee restroom was without a lid. A toilet room used by females shall be provided with a covered receptacle. Please provide a covered trash can in the restroom.	next routine	
Note: The hot water sanitizing dishwasher was observed to be operating at adequate sanitation temperatures. The thermal label will be attached to the Health Center copy of the report.			

EDUCATION PROVIDED OR COMMENTS

Person in Charge / Title Dee Giddon		Date: January 23, 2017	
Inspector: John Wiseman	Telephone No. (573)431-1947	EPHS No. 1507	Follow-up: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Follow-up Date: