



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

TIME IN 10:56am	TIME OUT 3:05pm
DATE 8-31-17	PAGE 1 of 4

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: Big Dick's BBQ		OWNER: Richard Kossman	PERSON IN CHARGE: Richard Kossman	
ADDRESS: 2327 Highway , 63640		ESTABLISHMENT NUMBER: tbtd	COUNTY: 187	
CITY/ZIP: Farmington		PHONE: 314-960-9331	FAX: na	P.H. PRIORITY : <input checked="" type="checkbox"/> H <input type="checkbox"/> M <input type="checkbox"/> L
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 type="checkbox"/> GROCERY STORE TAVERN <input type="checkbox"/> INSTITUTION TEMP.FOOD <input type="checkbox"/> MOBILE VENDORS				
PURPOSE <input type="checkbox"/> Pre-opening <input checked="" type="checkbox"/> Routine <input type="checkbox"/> Follow-up <input type="checkbox"/> Complaint <input type="checkbox"/> Other _____				
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 type="checkbox"/> COMMUNITY <input type="checkbox"/> NON-COMMUNITY <input checked="" 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		
	<b>Employee Health</b>			<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input type="checkbox"/> NO <input type="checkbox"/> N/A	Proper reheating procedures for hot holding	<input checked="" type="checkbox"/>	
<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		
	<b>Good Hygienic Practices</b>			<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 type="checkbox"/> OUT <input checked="" type="checkbox"/> NO	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"/>	
<input checked="" type="checkbox"/> OUT <input type="checkbox"/> NO	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)		
	<b>Preventing Contamination by Hands</b>				<b>Consumer Advisory</b>		
<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input type="checkbox"/> NO	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"/> NO	No bare hand contact with ready-to-eat foods or approved alternate method properly followed				<b>Highly Susceptible Populations</b>		
<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		
	<b>Approved Source</b>				<b>Chemical</b>		
<input type="checkbox"/> IN <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"/> NO <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 checked="" type="checkbox"/>	
<input checked="" type="checkbox"/> OUT	Food in good condition, safe and unadulterated				<b>Conformance with Approved Procedures</b>		
<input type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> NO <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		
	<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    NO = not observed COS=Corrected On Site    R=Repeat Item			
<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/A	Food separated and protected						
<input type="checkbox"/> IN <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 checked="" type="checkbox"/>	<input type="checkbox"/>	Utensils, equipment and linens: properly stored, dried, handled		
		<b>Food Temperature Control</b>				<input checked="" 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 checked="" type="checkbox"/>	<input type="checkbox"/>	Thermometers provided and accurate			<input type="checkbox"/>	<input checked="" type="checkbox"/>	Food and nonfood-contact surfaces cleanable, properly designed, constructed, and used	<input checked="" type="checkbox"/>	
		<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		
	<input checked="" type="checkbox"/>	<b>Prevention of Food Contamination</b>					<b>Physical Facilities</b>		
<input type="checkbox"/>	<input checked="" 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 type="checkbox"/>	<input checked="" type="checkbox"/>	Wiping cloths: properly used and stored	<input checked="" type="checkbox"/>		<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 checked="" type="checkbox"/>	<input type="checkbox"/>	Physical facilities installed, maintained, and clean		

Person in Charge / Title: 		Richard Kossman		Date: August 31, 2017	
Inspector: 		John Wiseman	Telephone No. (573)431-1947	EPHS No. 1507	Follow-up: Follow-up Date: 9-14-17 <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No



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

ESTABLISHMENT NAME Big Dick's BBQ		ADDRESS 2327 Highway , 63640	CITY /ZIP Farmington	
FOOD PRODUCT/LOCATION		TEMP. in ° F	FOOD PRODUCT/ LOCATION	
Hot Hold: corn,grn beans, baked beans,		185,183,153	Kenmore R/F	
cheese sauce, beef brisket, pork ribs,		161,173,144	GE Freezer	
burgers, pulled pork		150, 153	Kenmore freezer	
Cold Hold: potato salad		36	Reheated pork shoulder	
Whirlpool R/F		40, 0	Glass front cooler at service area	
			86 adj to 190	
			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. <b>These items MUST RECEIVE IMMEDIATE ACTION within 72 hours or as stated.</b>	Correct by (date)	Initial
3-302.11A	Raw meat was observed intermingled with ready to eat foods in the GE freezer. Food shall be protected from cross contamination by storing raw animal proteins separate from and below ready to eat foods. COS by rearranging the foods.	COS	
3-201.11A	Packages of meat labeled "Not For Sale" and a piece of venison were observed stored in the GE freezer. Food shall be obtained from inspected and approved sources that comply with law. Please remove the food from the premises.	8-31-17	
3-501.17A	Discard dates were not observed on packages of sliced tomato, cut lettuce, thawing pork and an open package of hot dogs. Potentially hazardous foods held refrigerated shall be marked with the day or date, not to exceed seven days total, by which time the food shall be sold, consumed or discarded. COS by marking with a discard date.	COS	
4-601.11A	Food residue was observed on various pieces of food equipment in clean storage. Food contact surfaces shall be clean to sight and touch. Please wash, rinse and sanitize the food equipment.	9-3-17	
7-102.11	An unlabeled spray bottle was observed on a shelf near the hand wash sink in the kitchen area. Working containers of toxic materials shall be labeled with the common name of the material. COS by labeling the bottle.	COS	
7-204.11	The concentration of the quaternary ammonia sanitizer in a spray bottle in the kitchen was measured at greater than 500 ppm. Chemical sanitizers shall be prepared and used at concentrations approved by law. COS by remaking the sanitizer solutions.	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). <b>These items are to be corrected by the next regular inspection or as stated.</b>	Correct by (date)	Initial
6-202.15	Gaps were observed around the screen doors, especially at the top and bottom of the doors, in the kitchen area. The outer openings of a food establishment shall be protected against the entry of insects, rodents and other pests by use of self-closing, tight-fitting doors. Please seal the opening to the entry of insects and other pests.	9-14-17	
4-101.19	A cloth towel was observed in use to store an ice scoop at the ice machine. Non-food contact surfaces that are exposed to splash or spillage shall be non-absorbent and cleanable. COS by replacing the towel with a tray.	COS	
3-304.14B	A wet wiping rag was observed on a spray bottle of sanitizer in the kitchen. Wet wiping rags shall be stored in a container of chemical sanitizer when not in use. COS by moving the rag to a sanitizer bucket.	COS	
4-302.14	Quaternary ammonia sanitizer test strips were not available for determining correct sanitizer concentrations. A test kit or other device that accurately measures the concentration of sanitizing solutions shall be provided. Please obtain a quaternary ammonia test kit.	9-14-17	
4-601.11C	An accumulation of dust and debris was observed on the grill and blades of the large floor fan in the kitchen. Non-food contact surfaces shall be kept free of and accumulation of dust, dirt, food residue and debris. Please clean all surfaces of the fan so that it is not a source of contamination.		

EDUCATION PROVIDED OR COMMENTS

Person in Charge (Title): 	Richard Kossman	Date: August 31, 2017
Inspector: 	John Wiseman	Telephone No. (573)431-1947
	EPHS No. 1507	Follow-up: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
		Follow-up Date: 9-14-17



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

ESTABLISHMENT NAME Big Dick's BBQ		ADDRESS 2327 Highway , 63640		CITY /ZIP Farmington	
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
7-201.11B	Various chemicals were observed stored on top of the large floor fan in the kitchen. Toxic materials shall be stored where they are not a source of contamination. COS by removing the chemicals.	COS	
2-301.14H	Employees were observed changing single use gloves without washing their hands. Food employees shall wash their hands before donning gloves for working with food. Please ensure employees wash their hands between glove changes. Please be aware that employees are not required to wear gloves at all times. Glove use is required to prevent bare hand contact with ready to eat foods. Please be aware that habitual glove use by employees may foster the misperception that gloves exteriors are clean at all times. Glove exteriors can become contaminated when switching between activities. Please change gloves when switching between activities that may result in glove contamination.	8-31-17	
5-203.14	A hose bibb was observed on the wall beside the entry door to the kitchen. According to the owner, a hose it attached to the bibb and used for cleaning. A plumbing systems shall be installed to preclude the backflow of a solid, liquid or gas into the water system. Please install an American Society of Sanitary Engineers (A.S.S.E.) approved hose bibb vacuum breaker on this bibb.	9-14-17	
2-301.14	An employee at the service counter was observed using hand sanitizer without washing their hands and then touching food equipment. Hand sanitizer may not be used in place of hand washing. Please ensure that proper handwashing occurs prior to the use of hand sanitizers.	8-31-17	

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
5-205.11B 2-301.15 4-903.11A	The hand wash sink is present in a two basin sink located in the kitchen area. Both basins were observed being used for hand washing. Food utensils were observed being rinsed in the sink basins. Hand washing sinks shall be used for hand washing exclusively. Employees may not wash their hands in basins used for food preparation or ware washing. Please designate one of the basins as a hand wash sink and use it for hand washing only. Single use foam containers were observed stored beside the hand wash sink in the front service area. Single service items shall be stored where they are not exposed to splash, dust or other contaminants. Please protect these items from contamination.	9-14-17	

EDUCATION PROVIDED OR COMMENTS

Person in Charge /Title:		Richard Kossman	Date: August 31, 2017
Inspector:	John Wiseman	Telephone No. (573)-431-1947	EPHS No. 1507
Follow-up: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Follow-up Date: 9-14-17	



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

ESTABLISHMENT NAME Big Dick's BBQ		ADDRESS 2327 Highway , 63640		CITY /ZIP Farmington	
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
3-403.11A	A food employee was observed shredding reheated pork for hot holding. The temperature of the pork was 86F at 12:15pm. According to the owner, the pork had been placed in the oven to reheat at 10:30am. Potentially hazardous food that is cooked, cooled and reheated for hot holding shall be reheated so that all parts of the food reach a temperature of 165F within two hours. COS by rapidly heating the pork to 190F at 12:30pm prior to placing in hot holding.	COS	
7-204.11	The quaternary ammonia sanitizer in the spray bottles in the front service area were measured at a concentration greater than 500ppm. Chemical sanitizers shall be prepared and used at concentrations approved by law. Please remake the sanitizers at the manufacturer's recommended concentration of 200ppm.	9-3-17	
4-702.11	The quaternary ammonia sanitizer in the three compartment sink was measured at a concentration less than 100ppm. Food equipment shall be sanitized after cleaning and before use. COS by remaking the sanitizer to acceptable concentrations.	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). <b>These items are to be corrected by the next regular inspection or as stated.</b>	Correct by (date)	Initial

EDUCATION PROVIDED OR COMMENTS

Person in Charge/Title: Richard Kossman Date: August 31, 2017

Inspector: John Wiseman Telephone No. (573)431-1947 EPHS No. 1507 Follow-up:  Yes  No Follow-up Date: 9-14-17