



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

TIME IN DATE	8:19 am Dec. 20, 2017	TIME OUT PAGE	10:16 am 1 of 2
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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: Bismarck Senior Center	OWNER: Aging Matters	PERSON IN CHARGE: Betty Jellinek	
ADDRESS: 922 Center Street	ESTABLISHMENT NUMBER: 0768	COUNTY: St. Francois	
CITY/ZIP: Bismarck, MO 63624	PHONE: (573)734-2429	FAX: (573)734-2648	P.H. PRIORITY : <input checked="" type="checkbox"/> H <input type="checkbox"/> M <input type="checkbox"/> L
ESTABLISHMENT TYPE <input type="checkbox"/> BAKERY <input type="checkbox"/> C. STORE <input type="checkbox"/> CATERER <input type="checkbox"/> DELI <input type="checkbox"/> GROCERY STORE <input type="checkbox"/> INSTITUTION <input type="checkbox"/> MOBILE VENDORS <input checked="" type="checkbox"/> RESTAURANT <input type="checkbox"/> SCHOOL <input checked="" type="checkbox"/> SENIOR CENTER <input type="checkbox"/> SUMMER F.P. <input type="checkbox"/> TAVERN <input type="checkbox"/> TEMP.FOOD			
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 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 Date Sampled _____	<input type="checkbox"/> PRIVATE 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 <input type="checkbox"/> N/O <input type="checkbox"/> N/A	Proper cooking, time and temperature		
	Employee Health			<input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/O <input type="checkbox"/> N/A	Proper reheating procedures for hot holding		
<input checked="" type="checkbox"/> OUT	Management awareness; policy present			<input type="checkbox"/> OUT <input type="checkbox"/> N/O <input type="checkbox"/> N/A	Proper cooling time and temperatures		
<input checked="" type="checkbox"/> OUT	Proper use of reporting, restriction and exclusion			<input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/O <input type="checkbox"/> N/A	Proper hot holding temperatures		
	Good Hygienic Practices			<input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/C <input type="checkbox"/> N/A	Proper cold holding temperatures		
<input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/O	Proper eating, tasting, drinking or tobacco use			<input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/C <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"/> OUT <input type="checkbox"/> N/O <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"/> 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 checked="" type="checkbox"/> OUT <input type="checkbox"/> N/O <input 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"/> OUT <input checked="" type="checkbox"/> N/A	Food additives: approved and properly used		
<input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/C <input type="checkbox"/> N/A	Food received at proper temperature			<input checked="" type="checkbox"/> OUT	Toxic substances properly identified, stored and used		
<input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A	Food in good condition, safe and unadulterated				Conformance with Approved Procedures		
<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"/> 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.		
<input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/A	Food separated and protected				IN = in compliance	OUT = not in compliance	
<input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A	Food-contact surfaces cleaned & sanitized				N/A = not applicable	N/O = not observed	
<input type="checkbox"/> OUT <input type="checkbox"/> N/O	Proper disposition of returned, previously served, reconditioned, and unsafe food				COS=Corrected On Site	R=Repeat Item	

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

Person in Charge /Title: *Betty Jellinek*

Betty Jellinek

Date: December 20, 2017

Inspector: *Rose Mier*

Rose Mier

Telephone No.
(573)431-1947

EPHS No.
1390

Follow-up: Yes No
Follow-up Date: Jan. 9, 2018



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ESTABLISHMENT NAME Bismarck Senior Center	ADDRESS 922 Center Street	CITY / ZIP Bismarck, MO 63624	
FOOD PRODUCT/LOCATION	TEMP. in ° F	FOOD PRODUCT/ LOCATION	TEMP. in ° F
Whirlpool chest freezer, dining room, ambient	10	True cooler/kitchen: ambient, roasted turkey, milk	38, 42-46, 38
Hamburger, stove	191-193	True cooler/kitchen: ambient, sour cream, egg	41, 41, 38
Chili, stove, for hot holding	175	Walk-in cooler: ambient, salad, milk	34, 42, 35
Baked potatoes, oven, for hot holding	202-210	Milk, dispenser, in dining room	39
Walk-in freezer, ambient	10		
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)
4-601.11A	Food splatters observed in side the microwave located in the dining area. Food contact surfaces shall be clean to sight and touch. Please clean and sanitize inside of microwave at least every four hours.		12/20/17
4-202.11A	The nonstick coating on the Winco frying pan, hanging by the True 2-door cooler, was scratched and deteriorating. Food contact surfaces shall be smooth and free of imperfections. Please dispose of frying pan.		12/22/17
3-501.14A	A large pan of cooked turkey, held in the True 2-door cooler in the kitchen, had internal temperatures between 42 and 46F. According to the cook, the turkey was cooked yesterday, cooled on the counter, placed in the cooler until cool enough to slice, then placed back in the cooler as soon as it was sliced. There was no monitoring of temperatures during the cooling process. Potentially hazardous food shall be cooled from 135F to 70F in two hours, then from 70F to 41F within another four hours. If the first benchmark is not met, the food may be reheated to 165F for 15 seconds, then begin the cooling process again. If the second benchmark is not met, discard the food. Please use a log (provided) to record cooling time and temperatures for all food that is cooled and held cold. NOTE: the turkey was voluntarily discarded.		12/20/17
4-601.11A	Dust accumulation on the pipes and other areas under the hood. Please clean under hood frequently to protect food from contamination from falling debris.		12/27/17
3-202.15	A #10 can of Mexican hominy, stored on dry goods shelf in back room, was badly dented. Food packaging shall protect the contents. Please place can in a marked, designated area for returns, or discard the food (open can and discard contents).		12/20/17
NOTE	A copy of this inspection report will be emailed to Ms. Jellinek.		
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)
6-501.11	There was a hole in the floor tile below the handwashing sink in the men's bathroom. Flooring shall be smooth and easily cleanable. Please repair or replace the broken tile.		1/9/18
4-601.11B	Debris observed on the insert wells in the hot hold bars in both the kitchen and in the dining room. Please clean all surfaces of the hot hold bars after use.		1/9/18
4-601.11C	Food splatters observed on the plastic wrap dispenser, stored on the table below hanging pots and pans. Nonfood contact surfaces shall be cleaned at a frequency to prevent debris accumulation. Please clean all surfaces of dispenser as often as needed to keep clean.		12/21/17
4-601.11C	Debris observed on the outside surfaces of the True 2-door cooler, located next to the hanging pots and pans in the kitchen. Please clean cooler, including the area behind the handles, as often as needed to keep clean.		12/21/17
4-601.11C	Accumulation of debris observed on the heated plastic sealing machine. Please clean heat sealer as often as needed to keep clean.		12/21/17
6-501.12A	Accumulation of debris on pipes and floor under the sink area with the garbage disposal. Physical facilities shall be clean. Please clean under warewashing equipment as often as needed to keep clean.		1/9/18
6-501.112	Spider webs, mouse feces, and debris observed beneath and around the sides of the ice maker and other equipment in the middle work room. Please remove evidence of pests and clean floor in this room. Monitor facility for return of pests. If found, begin an approved method of pest control.		1/9/18

EDUCATION PROVIDED OR COMMENTS

Person in Charge /Title: *Betty Jellinek* Betty Jellinek Date: December 20, 2017

Inspector: <i>Rose Mier</i>	Rose Mier	Telephone No. (573)431-1947	EPHS No. 1390	Follow-up: <input type="checkbox"/> Yes	<input type="checkbox"/> No
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