



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

TIME IN	9:41am	TIME OUT	12:30pm
DATE	1-2-18	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: Casey's General Store #1300		OWNER: Casey's General Store, Inc.		PERSON IN CHARGE: Annette Dunlap	
ADDRESS: 226 South Front Street			ESTABLISHMENT NUMBER: 2187		COUNTY: 187
CITY/ZIP: Park Hills, 63601		PHONE: 573-431-2824		FAX: 573-431-2824	
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 checked="" 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 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 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 checked="" type="checkbox"/> IN <input 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"/> 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"/> N/O <input type="checkbox"/> N/A	Proper hot holding temperatures		
Good Hygienic Practices				<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <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 type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/O <input type="checkbox"/> N/A	Proper date marking and disposition		<input checked="" type="checkbox"/>
<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 checked="" type="checkbox"/> NO <input type="checkbox"/> N/A	Time as a public health control (procedures / records)		
Preventing Contamination by Hands				<input type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A	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"/> N/O <input checked="" type="checkbox"/> N/A	Pasteurized foods used, prohibited foods not offered		
Approved Source				<input type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A	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"/> 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				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 type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/A	Food-contact surfaces cleaned & sanitized	<input checked="" type="checkbox"/>					
<input type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> 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 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		
Food Temperature Control					<input type="checkbox"/>	<input checked="" type="checkbox"/>	Single-use/single-service articles: properly stored, used	<input checked="" type="checkbox"/>	
<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 type="checkbox"/>	<input checked="" type="checkbox"/>	Thermometers provided and accurate	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input checked="" type="checkbox"/>	Food and nonfood-contact surfaces cleanable, properly designed, constructed, and used	<input checked="" type="checkbox"/>	
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 type="checkbox"/>	<input checked="" 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 type="checkbox"/>	<input checked="" type="checkbox"/>	Contamination prevented during food preparation, storage and display	<input checked="" type="checkbox"/>		<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 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>Annette Dunlap</i>		Annette Dunlap		Date: January 2, 2018	
Inspector: <i>John Wiseman</i>		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 Casey's General Store #1300		ADDRESS 226 South Front Street		CITY /ZIP Park Hills, 63601	
FOOD PRODUCT/LOCATION		TEMP. in ° F	FOOD PRODUCT/ LOCATION		TEMP. in ° F
Pizza prep cooler amb		38	Cream from dispenser		40
Cold hold: chicken, beef, mushroom		35,35,35	W/I cooler/freezer		30, 0
Reheated: chicken strips, beef patty, popcorn chicken		201, 189, 211			
Heated display cabinets		162, 166			

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
3-501.17A	A discard date was not observed on an open container of lunch meat stored in the pizza prep cooler. Potentially hazardous foods held refrigerated shall be marked with a discard date that is no more than six days from the date of preparation or opening. COS by marking the food with a discard date.	COS	
4-501.114 A	A spray bottle of bleach was observed hanging from the hand wash sink in the kitchen. The manager was unable to identify the purpose of the bleach. Please be aware that chlorine bleach used as a food contact surface sanitizer must be in the concentration range of 50 - 100 ppm. If the bleach spray is to be used for non-food contact surface cleaning, label the spray bottle as "NOT FOR FOOD CONTACT SURFACES". COOS by discarding the bottle.	COS	
4-601.11A	Food residue was observed on the interior of the mixing bowl and on the attachment hub of the floor mixer in the kitchen. Food contact surfaces shall be clean to sight and touch. COS by washing, rinsing and sanitizing.	COS	
4-202.11A	A plastic lid on a tray of donut glaze was observed to be broken. Multi-use food contact surfaces shall be free of breaks, cracks, pits, and similar imperfections that adversely affect cleaning and sanitizing. Please replace the broken lid. COS by replacing the lid.	COS	
7-201.11B	Automotive fluids were observed stored with and above food items and single service items in the office area. Toxic materials shall be stored so they cannot contaminate food or single service items. COS by relocating the toxic materials.	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
5-205.11B	A leaking beverage can was observed stored in the hand wash sink in the kitchen. Hand wash sinks shall be used for hand washing exclusively. Do not use the hand wash sinks for storage, ware washing, nor disposal. COS by removing the beverage from the sink.	COS	
4-903.11A	An open case of single service items was observed stored adjacent to the kitchen hand wash sink and subject to splash contamination in this area. Single service items shall be protected from contamination by protecting them from splash, dust and other contamination. COS by relocating the items.	COS	
6-501.12A	Food debris was observed on the floor around the water conditioning tanks. Physical facilities shall be cleaned as often as necessary to keep them clean. COS by cleaning the floor.	COS	
4-601.11C	An accumulation of food debris was observed beneath the donut fryer in the kitchen. Non-food contact surfaces shall be kept free of an accumulation of dust, dirt, food residue and debris. COS by cleaning the area.	COS	
6-501.12A	Food debris was observed on the kitchen floor below equipment. Physical facilities shall be cleaned as often as necessary to keep them clean. COS by cleaning the floor.	COS	
4-203.11B	A dial/bi-metal food thermometer in use in the kitchen was checked for calibration. This thermometer indicated a temperature of 25F in ice water. Food thermometers shall be accurate to within two degrees F. Discontinue the use of the this thermometer until it has been calibrated. Digital food thermometers on hand were determined to be accurate.	COS	

EDUCATION PROVIDED OR COMMENTS

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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. These items MUST RECEIVE IMMEDIATE ACTION within 72 hours or as stated.	Correct by (date)	Initial
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6-501.12A	Pooling water and dust accumulation was observed on the counter below the soda fountain in the retail area. Physical facilities shall be cleaned as often as necessary to keep them clean. COS by cleaning the area.	COS	
4-601.11C	An accumulation of dust and soda drips was observed on the interior of soda lid dispensers in the retail area. Non-food contact surfaces shall be kept free of an accumulation of dust, dirt, food residue and debris. COS by cleaning the lid dispensers.	COS	
6-501.12A	An accumulation of debris and residue was observed on the floor of the walk-in cooler below storage shelving and beverage racks. Physical facilities shall be cleaned as often as necessary to keep them clean. COS by cleaning the floor below the racks.	COS	
4-601.11C	An accumulation of dust and residue was observed on plastic gravity fed trays and on the racks dispensing beverages in the walk-in cooler. Non-food contact surfaces shall be kept free of an accumulation of dust, dirt, food residue and debris. Please clean and sanitize all surfaces of the trays and racks.	next routine	
6-501.12A	A mop head and a cloth rag were observed frozen in an accumulation of ice at the threshold of the rear entry door. According to the manager, the condensation drain from the walk-in cooling unit froze and busted, leaking water onto the floor. The damaged drain has been repaired. Please remove the accumulated ice.	1-3-18	

EDUCATION PROVIDED OR COMMENTS

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Code Reference	PRIORITY ITEMS	Correct by (date)	Initial
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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.**

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Code Reference	CORE ITEMS	Correct by (date)	Initial
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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.**

6-501.18	The facility mop sink is dirty. Plumbing fixtures shall be cleaned as often as necessary to keep them clean. COS by cleaning the mop sink.	COS	JW
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