



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

TIME IN DATE 2-7-18	10:49am	TIME OUT 2:02pm
		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: Patti's Little Store	OWNER: Patti Mosier	PERSON IN CHARGE: Ben Mosier	
ADDRESS: 600 Center Street	ESTABLISHMENT NUMBER: 1503	COUNTY: 187	
CITY/ZIP: Bismarck, 63624	PHONE: 573-734-2560	FAX: 573-734-1063	P.H. PRIORITY : <input type="checkbox"/> H <input checked="" 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 type="checkbox"/> RESTAURANT <input type="checkbox"/> SCHOOL <input 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 type="checkbox"/> Not Applicable License No. _____	SEWAGE DISPOSAL <input type="checkbox"/> PUBLIC <input type="checkbox"/> PRIVATE	WATER SUPPLY <input type="checkbox"/> COMMUNITY <input type="checkbox"/> NON-COMMUNITY 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 <input type="checkbox"/> N/O <input type="checkbox"/> N/A	Proper cooking, time and temperature		
	Employee Health			<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"/> 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 type="checkbox"/> N/O <input type="checkbox"/> N/A	Proper hot holding temperatures		
	Good Hygienic Practices			<input type="checkbox"/> OUT <input type="checkbox"/> N/O <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 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 type="checkbox"/> OUT <input checked="" type="checkbox"/> N/O	Adequate handwashing facilities supplied & accessible			<input 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 type="checkbox"/> N/A	Food additives: approved and properly used		
<input type="checkbox"/> OUT <input 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 checked="" type="checkbox"/> OUT	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 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 checked="" type="checkbox"/> OUT <input 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 type="checkbox"/>	<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			<input type="checkbox"/>		Utensils, Equipment and Vending		
<input checked="" type="checkbox"/>		Thermometers provided and accurate			<input type="checkbox"/>	<input checked="" type="checkbox"/>	Food and nonfood-contact surfaces cleanable, properly designed, constructed, and used		
		Food Identification			<input type="checkbox"/>	<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 type="checkbox"/>	<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:

Ben Mosier

Date: February 7, 2018

Inspector:

John Wiseman

Telephone No.

(573)431-1947

EPHS No.

1507

Follow-up:

Yes

No

Follow-up Date: 2-22-18



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ESTABLISHMENT NAME Patti's Little Store		ADDRESS 600 Center Street		CITY / ZIP Bismarck, 63624	
FOOD PRODUCT/LOCATION		TEMP. in ° F	FOOD PRODUCT/ LOCATION		TEMP. in ° F
Pizza cooler amb		40	BBQ riblet in McCalls cooler		41
Cold hold: sausage, mushroom,		40, 39	Raw burger in McCalls cooler		41
American cheese, raw burger		39, 41	True freezer in ware washing		0
Hamburger as prepared		162	Nacho cheese from dispenser		155
McCall 3-door cooler amb		40	Hatco hot cabinet (no food present)		144
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
4-202.11A	A piece of heat damaged Cambro plasticware was observed in storage above the pizza prep cooler. Multi-use food contact surfaces shall be free of cracks, breaks, pits or other conditions that hinder cleaning and sanitizing. COS by removing the container from use.				COS
4-101.11	The painted upper interior surface of the kitchen micro wave is bubbling and flaking off. Materials used for the construction of food equipment may not allow the migration of deleterious substances into food. Please repair or replace the microwave to prevent physical contamination of food.				2-22-18
6-501.111	An aluminum tray has been placed below the drain line of the Giles counter-top oven in the kitchen. The tray is dirty, contains water and rodent droppings. The presence of insects and rodents shall be controlled to minimize their presence on the premises. Please clean the area of dirt, water and rodent droppings. If there is a leak at the oven drain; please repair it. Minimizing conditions that attract and harbor rodents will help control their presence on the premises.				
6-501.111	Rodent droppings were observed on the floor in the lower storage room and a dead mouse was observed in a large glass jug stored on the floor. The presence of insects and rodents shall be controlled to minimize their presence on the premises. Please take action to control the presence of rodents on the premises. Control measures shall include: closing holes and gaps around points of entry into the building, removing clutter and harborage conditions, using traps and professional services. Please take action to control rodents. Remove unused equipment and clutter. Remove the large glass jug.				
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 cleaning bucket was stored in the hand wash sink in the ware washing room and coffee had been poured into the sink. Hand wash sinks shall be used for hand washing only. COS by discussing this issue with the manager.				COS
5-205.15B	Cold water was not available at the hand wash sink as the cold water knob would not turn. A plumbing system shall be maintained in good repair. Please restore cold water to the sink.				2-22-18
6-501.11	A stained ceiling tile is located near the pizza oven in the kitchen. Physical facilities shall be maintained in good repair. Please paint or replace the stained tile and continue to monitor for possible leaks from above.				
6-501.14A	An accumulation of dust was observed on the AC intake vents beside the pizza oven. Intake and exhaust vents shall be cleaned so they are not a source of contamination by dust, dirt, and other materials. Please clean the vents.				
4-302.14	The facility uses chlorine bleach as a food contact surface sanitizer. The sanitizer test strips present are for use with quaternary ammonia sanitizers. A test kit to determine correct sanitizer concentrations shall be available. Please obtain chlorine sanitizer test strips.				
6-201.13A	The vinyl base molding is pulling away from the wall near the hand wash sink in the ware washing room and is missing from the other walls in this room. Floor and wall junctures shall be closed and coved to no larger than 1/32". Please replace and install cove molding where necessary.				

EDUCATION PROVIDED OR COMMENTS

Person in Charge /Title: Ben Mosier Date: February 7, 2018

Inspector: John Wiseman Telephone No. (573)431-1947 EPHS No. 1507 Follow-up: Yes No
Follow-up Date: 2-22-18



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FOOD PRODUCT/LOCATION		TEMP. in ° F	FOOD PRODUCT/ LOCATION		TEMP. in ° F
Walk-in cooler		34			
Walk-in freezer		0			
Beer cooler		34			
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)
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)
4-101.19	The fiberboard wall covering in use behind the three compartment sink is damaged. The water resistant coating is damaged in many places and the bottom of the panels are buckled by moisture. Non-food contact surfaces that are exposed to splash, spillage, or that require frequent cleaning shall be constructed of a corrosion-resistant, nonabsorbent, and smooth material. Please repair or replace the wall covering material so that it is not absorbent and is cleanable.				2-22-18
6-501.11	Holes were observed in the walls below the three compartment sink and around pipes entering the room. Physical facilities shall be maintained in good repair. Please close the holes to the entry of insects and other pests.				
4-101.19	Bare wood studs and exposed gypsum board is exposed at the entry to the ware washing room. Non-food contact surfaces that are exposed to splash, spillage, or that require frequent cleaning shall be constructed of a corrosion-resistant, nonabsorbent, and smooth material. Please put a cleanable surface over the wood and gypsum board.				
6-501.12A	An accumulation of dirt was observed on the floor in the lower storage room. Physical facilities shall be cleaned as often as necessary to keep them clean. Please clean the floor in the storage room.				
4-903.11A 3	Single service food items were stored on the floor in the storage room. Single service items shall be stored at least six inches off of the floor. Please store these items off of the floor.				

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Follow-up: Yes No
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6-202.11A	Unshielded incandescent light bulbs are installed in the APW pizza display case in the food bar area. Light bulbs installed in areas of food preparation, storage and display shall be shielded or shatter resistant. Please replace the bulbs with shatter resistant bulbs.				2-2-18
6-202.11A	An unshielded fluorescent light bulb is installed in the Hatco sandwich display case in the food bar area. Light bulbs installed in areas of food preparation, storage and display shall be shielded or shatter resistant. Please provide shielding to this bulb.				
6-501.12A	A syrup soaked cloth rag is on the floor below the bag-in-box soda syrups in the back room. Physical facilities shall be cleaned as often as necessary to keep them clean. Please remove the rag and clean the floor below the soda syrups.				
EDUCATION PROVIDED OR COMMENTS					
Person in Charge / Title: 		Ben Mosier		Date: February 7, 2018	
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: 2-22-18
MO 580-1814 (2-13) DISTRIBUTION: WHITE - OWNER'S COPY CANARY - FILE COPY E6.37A					