



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

TIME IN	10:40 am	TIME OUT	12:25 pm
DATE	April 2, 2018	PAGE	1 of 3

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: BJC Behavioral Health / Friends in Action		OWNER: BJC Behavioral Health	PERSON IN CHARGE: Bekah Metz	
ADDRESS: 657 Walton Drive		ESTABLISHMENT NUMBER: 4810	COUNTY: St. Francois	
CITY/ZIP: Farmington 63640		PHONE: (573)760-8360	FAX: (573)701-0328	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 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 checked="" type="checkbox"/> OUT <input type="checkbox"/> N/O <input type="checkbox"/> N/A	Proper cooking, time and temperature		
<b>Employee Health</b>				<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 checked="" type="checkbox"/> OUT <input type="checkbox"/> N/O <input type="checkbox"/> N/A	Proper cooling time and temperatures	<input checked="" type="checkbox"/>	
<input checked="" type="checkbox"/> OUT	Proper use of reporting, restriction and exclusion			<input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/O <input type="checkbox"/> N/A	Proper hot holding temperatures		
<b>Good Hygienic Practices</b>				<input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/O <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 checked="" type="checkbox"/>		<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 type="checkbox"/> N/O <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 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			<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"/> N/O <input checked="" type="checkbox"/> N/A	Pasteurized foods used, prohibited foods not offered		
<b>Approved Source</b>				<b>Chemical</b>			
<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 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"/> 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		
<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    N/O = 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 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 type="checkbox"/>	<input checked="" 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	<input checked="" type="checkbox"/>	
<b>Food Temperature Control</b>				<b>Utensils, Equipment and Vending</b>					
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Adequate equipment for temperature control			<input checked="" type="checkbox"/>	<input type="checkbox"/>	Single-use/single-service articles: properly stored, used		
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Approved thawing methods used			<input checked="" type="checkbox"/>	<input type="checkbox"/>	Gloves used properly		
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Thermometers provided and accurate			<input checked="" type="checkbox"/>	<input type="checkbox"/>	Food and nonfood-contact surfaces cleanable, properly designed, constructed, and used		
<b>Food Identification</b>				<b>Physical Facilities</b>					
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Food properly labeled; original container			<input type="checkbox"/>	<input checked="" type="checkbox"/>	Warewashing facilities: installed, maintained, used; test strips used		
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Insects, rodents, and animals not present			<input checked="" type="checkbox"/>	<input type="checkbox"/>	Nonfood-contact surfaces clean	<input checked="" type="checkbox"/>	
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Contamination prevented during food preparation, storage and display			<input checked="" type="checkbox"/>	<input type="checkbox"/>	Hot and cold water available; adequate pressure		
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Personal cleanliness: clean outer clothing, hair restraint, fingernails and jewelry			<input checked="" type="checkbox"/>	<input type="checkbox"/>	Plumbing installed; proper backflow devices		
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Wiping cloths: properly used and stored			<input checked="" type="checkbox"/>	<input type="checkbox"/>	Sewage and wastewater properly disposed		
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Fruits and vegetables washed before use			<input checked="" type="checkbox"/>	<input type="checkbox"/>	Toilet facilities: properly constructed, supplied, cleaned		
<input checked="" type="checkbox"/>	<input type="checkbox"/>				<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Garbage/refuse properly disposed; facilities maintained		
<input checked="" type="checkbox"/>	<input type="checkbox"/>				<input checked="" type="checkbox"/>	<input type="checkbox"/>	Physical facilities installed, maintained, and clean		

Person in Charge /Title: <i>Bekah Metz</i>		Bekah Metz		Date: April 2, 2018	
Inspector: <i>Rose Mier</i>		Rose Mier		Telephone No. (573)431-1947	EPHS No. 1390
Follow-up: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No				Follow-up Date: April 9, 2018	



MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES  
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 FOOD ESTABLISHMENT INSPECTION REPORT

ESTABLISHMENT NAME BJC Behavioral Health / Friends in Action		ADDRESS 657 Walton Drive		CITY /ZIP Farmington 63640	
FOOD PRODUCT/LOCATION		TEMP. in ° F	FOOD PRODUCT/ LOCATION		TEMP. in ° F
True freezer, ambient		0	Ham in roaster oven		173
Boiled eggs, prep cooler top		68	Hobart cooler: cooked hamburger, ambient		39, 39
Steam table: mashed potatoes, green beans		173, 185	Prep cooler, bottom: ambient, cut lettuce		30, 40
			Prep cooler, top: ham, cut tomatoes		40, 40

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
NOTE 3-501.14A	Hard boiled eggs were stored in the top of the prep cooler, placed in the cooler approximately 1 hour prior to this visit. The temperature of the eggs was 68F. According to manager, the cooling process is not monitored. Please record time and temperature during the cooling process: cool from 135F to 70F within 2 hours, then from 70F to 41F within an additional four hours. If the first benchmark is not met, reheat food to 165F for 15 seconds and begin the process again. If the second benchmark is not met, discard the food. To facilitate cooling: place in single layer in shallow pan and cool in freezer, cut into small pieces, stir with an ice paddle, add ice as an ingredient, allow venting of steam if covered, stir frequently. CORRECTED ON SITE by discussion; monitoring log was provided for staff use.	COS	
3-501.17A, B	Food held in the Hobart cooler were labeled with the date of preparation or opening. Potentially hazardous food that is fully cooked or ready-to-eat, and held for more than 24 hours, shall be labeled with a 7-day discard date, which is the day of preparation or opening, plus an additional six days. CORRECTED ON SITE by labeling these foods with a 7-day discard date.	COS	
2-401.11A	Cook was observed eating at the preparation table. Staff shall not eat, drink, use tobacco or other smoking gadgets while in the food preparation area. Please ensure all staff know not to eat in the kitchen. CORRECTED ON SITE by discussion with manager	COS	
3-302.11A	Chicken, ground meats, and steak were stored together in the bottom of the True freezer. Raw animal-derived foods shall be stored separated or vertically. Please store each type of meat in a different lidded container if not able to be stored separately: poultry (chicken and turkey), ground meats (hamburger, sausage, mechanically tenderized meats), whole muscle meats (bacon, steaks, roasts, chops, etc.), fish and seafood. If stored vertically, store in the following order: poultry on bottom, then ground meats, then whole muscle meats, then fish and seafood.	4/4/18	RM

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
4-601.11C	Debris observed in the bottom of the prep cooler. Nonfood contact surfaces shall be cleaned at a frequency to prevent debris accumulation. CORRECTED ON SITE by cleaning cooler.	COS	RM ↓
4-302.12A	A cook's thermometer was not available. Please supply an accurate thermometer that measures from 0 to 220F in two degree increments. Calibrate the thermometer prior to first use and frequently thereafter to ensure it is accurate.	4/4/18	
4-903.11A	Debris observed inside an unlidded container that held bowls and sieves, stored on the shelf below the prep table on the cook side of the kitchen. Clean equipment shall be protected while in storage. Please clean plastic container as often as needed to keep it clean.	4/3/18	
4-904.11B	Utensils were stored with handles down in a container on the clean equipment rack. Utensils shall be stored with their handles up to prevent contamination of the food-contact surface when retrieving. CORRECTED ON SITE by discussion and placing all handles up.	COS	
4-302.14	Heat sensitive test strips were not available to checking the surface temperature of equipment that is sanitized in the mechanical warewashing machine. Surface temperatures shall reach 160F. Please supply test strips (thermolabels) to ensure equipment is sanitized. Use a strip during the first cycle each day.	4/9/18	
4-901.11A	Glasses stored by the water/ice dispenser were wet-nested. Equipment shall be dried after cleaning. Please separate wet glasses and allow drying before storing nested. CORRECTED ON SITE by discussion and taking wet glasses to 3-vat sink.	COS	
5-501.114	There was no plug in the drain of the outside dumpster. Please ask the trash company to install a plug in the drain to prevent liquids from draining out, and to prevent pest attraction and access.	4/9/18	

EDUCATION PROVIDED OR COMMENTS

Lunch menu: baked ham, green beans, mashed potatoes, deviled eggs  
 NOTE: a line through an item on page one indicates the item is not applicable

Person in Charge /Title: <i>Bekah Metz</i> Bekah Metz		Date: April 2, 2018
Inspector: <i>Rose Mier</i> Rose Mier	Telephone No. (573)431-1947	EPHS No. 1390
Follow-up: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Follow-up Date: April 9, 2018



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ESTABLISHMENT NAME BJC Behavioral Health / Friends in Action	ADDRESS 657 Walton Drive	CITY / ZIP Farmington 63640
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FOOD PRODUCT/LOCATION	TEMP. in ° F	FOOD PRODUCT/ LOCATION	TEMP. in ° F
		Whirlpool refrigerator/freezer (members food only)	40/10

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7-201.11	A spray bottle of sanitizer was stored on the food preparation table. Chemicals shall be stored separately or below clean equipment, food, single-use items, and clean linens. Please store sanitizer where these items cannot be contaminated. <b>CORRECTED ON SITE</b> by moving container to area where these items cannot be contaminated.	COS	RM ↓
4-601.11A	Debris observed on the blades of a can opener, stored on the clean equipment rack. Food contact surfaces shall be clean to sight and touch. Please wash, rinse and sanitize can openers after use. <b>CORRECTED ON SITE</b> by discussion and taking can opener to 3-vat sink for cleaning.	COS	
4-601.11A	The insides of the nozzles on the water and ice dispenser were dirty and had lime build-up. Food contact surfaces shall be clean to sight and touch. Please wash, rinse, and sanitize these dispenser heads at least daily. Remove lime build-up as often as needed to keep free of build-up.	4/3/18	

A copy of this report will be emailed to Ms. Metz.

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
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EDUCATION PROVIDED OR COMMENTS

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