



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

TIME IN	12:46pm	TIME OUT	4:00pm
DATE	4-11-18	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: C-Barn #5		OWNER: Ray Johnson	PERSON IN CHARGE: Joyce Meadows	
ADDRESS: 13 West Karsch Blvd.		ESTABLISHMENT NUMBER: 0830	COUNTY: 187	
CITY/ZIP: Farmington, 63640		PHONE: 573-747-1205	FAX: na	P.H. PRIORITY : <input checked="" type="checkbox"/> H <input type="checkbox"/> M <input type="checkbox"/> L
ESTABLISHMENT TYPE <input type="checkbox"/> BAKERY RESTAURANT <input checked="" 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 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 type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> NO <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"/> NO <input type="checkbox"/> N/A	Proper hot holding temperatures		
Good Hygienic Practices				<input type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> NO <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"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> NO <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"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> NO <input checked="" 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 type="checkbox"/> IN <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"/> NO <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 checked="" 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 checked="" type="checkbox"/> IN <input type="checkbox"/> OUT	Toxic substances properly identified, stored and used		
<input type="checkbox"/> IN <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 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 type="checkbox"/>	<input checked="" type="checkbox"/>	Adequate equipment for temperature control			<input type="checkbox"/>	<input checked="" type="checkbox"/>	Gloves used properly		
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Approved thawing methods used			Utensils, Equipment and Vending				
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Thermometers provided and accurate			<input checked="" type="checkbox"/>	<input type="checkbox"/>	Food and nonfood-contact surfaces cleanable, properly designed, constructed, and used		
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 type="checkbox"/>	Plumbing installed; proper backflow devices		
<input type="checkbox"/>	<input checked="" 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 type="checkbox"/>	Toilet facilities: properly constructed, supplied, cleaned		
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Fruits and vegetables washed before use			<input type="checkbox"/>	<input checked="" 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:	Joyce Meadows	Date:	April 11, 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:	4-31-18



MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES
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ESTABLISHMENT NAME C-Barn #5		ADDRESS 13 West Karsch Blvd.	CITY /ZIP Farmington, 63640	
FOOD PRODUCT/LOCATION		TEMP. in ° F	FOOD PRODUCT/ LOCATION	
Hot bar: chicken, potato wedge, fish		154,164,175	Grab & go refrigerator	
Frigidaire freezer in kitchen		0	Walk-in cooler	
Frigidaire cooler in kitchen		30	Walk-in freezer	
Hot held chicken sauces		191		
Creamer from dispenser		58		

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
4-601.11A	Minor food debris was observed inside the kitchen microwave. Food contact surfaces shall be clean to sight and touch. Please clean and sanitize the microwave interior as often as necessary.	4-11-18	
4-601.11A	Dust and food debris was observed on food equipment in clean storage in the kitchen. Food contact surfaces shall clean to sight and touch. Please clean and sanitize the food equipment in clean storage.		
3-304.15	A kitchen employee was observed cleaning the kitchen fryer with gloved hands. The employee wiped their gloved hands on a dry cloth and proceeded to serve a customer food from the hot bar. Single use gloves shall be used for only one task. Gloves that have been soiled shall be replaced between tasks to avoid contaminating food. COS by discussion.	COS	
2-301.14H	The kitchen employee did not wash their hands between glove changes. Employees shall wash their hands before donning new single use gloves. Please wash hands prior to donning new gloves. COS by discussion	COS	
3-501.16B	The creamer in the dispenser at the beverage station was measured at 58F. Potentially hazardous foods held refrigerated shall be held at 41F or lower. The creamer cooler cannot maintain safe food temperatures. The creamer products in the dispenser were discarded. Discontinue use of the creamer dispenser until it has been repaired or replaced.	4-11-18	
4-601.11A	Dried soda syrup and debris was observed on the nozzle housing of the soda fountains at the beverage station. Food contact surfaces shall be clean to sight and touch. Please clean and sanitize this area.		

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
6-202.11A	The plastic shielding on the fluorescent bulbs in the hot bar is damaged and flaking off. Light bulbs installed in areas of food storage and preparation shall be shielded or shatter resistant. Please restore shielding to the bulbs in the hot bar.	4-31-18	
6-501.14A	Dust and debris was observed on the floor fan in the kitchen. Air handling systems shall be cleaned so they are not a source of contamination by dust, dirt, and other materials. Please clean the floor fan.		
3-501.13	Chicken was observed thawing in a container of water on the three compartment sink. Potentially hazardous food shall be thawed under temperature control, under cold running water, or as part of the cooking process. COS by putting the chicken under cold running water.		
4-903.11A	Flour and breading debris was observed on various items of food packaging and single use items on the wire shelf opposite the breading station. Equipment and single use items shall be stored where they are not expsed to splash, dust, or other contamination. Please clean these items and store in containers that prevent exposure to contamination.		
2-304.11	A grease and food debris laden apron was observed hanging from a storage rack in the kitchen. Food employees shall wear clean outer-clothing to prevent contamination of food, equipment and single service items. Please wear clean outer-clothing and refrain from reusing aprons from previous days' service.		

EDUCATION PROVIDED OR COMMENTS

Person in Charge Title: Joyce Meadows		Date: April 11, 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: 4-31-18



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ESTABLISHMENT NAME C-Barn #5	ADDRESS 13 West Karsch Blvd.	CITY /ZIP Farmington, 63640
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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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4-501.14	An accumulation of grease and food debris was observed in the basins of the three compartment sink and the prep sink. Sink compartments shall be cleaned at a frequency necessary to prevent an accumulation of debris or contamination of food or equipment. Please thoroughly clean the three compartment and prep sinks.	4-31-18	
6-501.12A	A heavy accumulation of grease and food debris was observed on the wall, window and adjacent refrigerator at the breading station in the kitchen. Physical facilities shall be cleaned as often as necessary to keep them clean. Please thoroughly clean this area.		
4-601.11C	An accumulation of food debris was observed on the rolling cart in the kitchen. Non-food contact surfaces shall be kept free of an accumulation of dust, dirt, food residue and debris. Please clean the cart.		
4-903.11A	A case of single use forks was observed on the floor in the kitchen. Single use items shall be protected from contamination by storing them at least six inches off of the floor. Please store these items off of the floor.		
6-501.12A	A heavy accumulation of grease and food debris was observed on the floor below the grill and fryers. An accumulation of debris and dirt was observed elsewhere on the kitchen floors; especially in corners and at wall/floor junctions. Please thoroughly clean the floor in the kitchen.		

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6-501.12A	Dirt, debris and sticky residue was observed on the floor of the walk-in cooler; especially below beverage racks and pallets. Physical facilities shall be cleaned as often as necessary to keep them clean. Please clean the floor of the walk-in cooler.	4-31-18	
4-601.11C	Mold and debris was observed on the beverage racks 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 the beverage racks in the walk-in cooler.		
6-501.12A	The back room area, including the bag-in-box syrup room is in need of cleaning. Please clean the floors in this area.		
6-501.12A	An accumulation of dust was observed on retail shelving throughout the retail area. Physical facilities shall be cleaned as often as necessary to keep them clean. Please clean all shelving in the retail area.		
5-501.113	One of the two facility dumpsters is missing a drain hole plug and the lids are damaged such that it cannot be closed to deter entry of rodents and vermin. Please install a plug in the drain hole and repair the lids to provide complete closure.		
5-501.114			
5-501.115	An accumulation of food debris and residue was observed on the ground around the facility dumpsters. A storage area or enclosure for refuse shall be kept clean. Please clean the pavement in the dumpster area to remove food debris that has accumulated in this area.		

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