



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

TIME IN	10:03 am	TIME OUT	11:47 am
DATE	Oct. 12, 2018	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: Leadwood Grab & Go	OWNER: Leadwood Grab N Go Truck Stop, LLC	PERSON IN CHARGE: Briana Dunn
ADDRESS: 422 Hunt Street	ESTABLISHMENT NUMBER: 4720	COUNTY: St. Francois
CITY/ZIP: Leadwood 63653	PHONE: 573.562.1211	FAX: 573.562.1022
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 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 checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/O <input checked="" 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 checked="" type="checkbox"/> IN <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 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/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"/> IN <input type="checkbox"/> OUT <input checked="" 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 checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/O <input type="checkbox"/> N/A	Time as a public health control (procedures / records)		
	Preventing Contamination by Hands				Consumer Advisory		
<input type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A	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				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"/> Q/C	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"/> 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 type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A	Food separated and protected						
<input type="checkbox"/> IN <input checked="" type="checkbox"/> Q/C <input type="checkbox"/> N/A	Food-contact surfaces cleaned & sanitized						
<input type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A	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 type="checkbox"/>	<input checked="" 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 checked="" type="checkbox"/>	<input type="checkbox"/>	Single-use/single-service articles: properly stored, used		
<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				<input checked="" type="checkbox"/>	Utensils, Equipment and Vending		
<input type="checkbox"/>	<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 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				<input checked="" type="checkbox"/>	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 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 type="checkbox"/>	<input checked="" type="checkbox"/>	Toilet facilities: properly constructed, supplied, cleaned		
<input type="checkbox"/>	<input checked="" 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: <i>Briana Dunn</i> Briana Dunn	Date: October 12, 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: Oct. 31, 2018



MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES
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ESTABLISHMENT NAME Leadwood Grab & Go		ADDRESS 422 Hunt Street	CITY /ZIP Leadwood 63653
FOOD PRODUCT/LOCATION		TEMP. in ° F	FOOD PRODUCT/ LOCATION
Frigidaire freezer/kitchen, ambient		10	Pizza prep table, top: pepperoni, sausage, hamburger
Citation freezer/kitchen, ambient		8	Pizza prep table, bottom: ambient
Nestle freezer/retail, ambient		20	
Dippin Dots freezer/retail, ambient		0	

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 3-304.12C	An in-use knife was stored on a cloth, and an in-use pizza cutting blade was stored on a surface that was soiled. Also, both utensils were observed with food debris on them. Food contact surfaces shall be clean to sight and touch. In-use utensils shall be stored on a surface that is clean and sanitized a minimum of every four hours. Utensils may not be stored on absorbent materials. Utensils that are used on potentially hazardous food shall be washed, rinsed, and sanitized a minimum of every four hours, more often if needed to keep clean. Please store these utensils on a clean and sanitized surface, and either clean and sanitize, or replace, the utensils at least every four hours.	10/12/18	B D
4-601.11A	The cutting board on the prep table was observed with black grooves. Food contact surfaces shall be clean to sight and touch. Please refinish, invert, or replace the cutting board.	10/31/18	
4-601.11A 4.101.11A	STORAGE ROOM Mold was observed on the bottom (outside) of the ice buckets, and hard water deposits observed on the inside of the buckets. Further, it is not known whether these buckets are made of food-grade materials. Please wash, rinse, and sanitize the buckets daily. Clean the cart on which they sit. Determine if the buckets are made from a material that will not impart deleterious substances to the food; if not, then replace the buckets with ones constructed from food-grade materials.	10/13/18	
3-304.12E	The in-use ice scoop was stored on a mobile cart that was dirty and moldy. In-use utensils shall be stored on a clean and sanitized surface. Please store scoop in a container or surface that is cleaned and sanitized at least daily.	10/12/18	
4-601.11A	Mold observed on the inside of the ice maker. Please discard ice, wash, rinse, sanitize, and air dry all inside surfaces of the ice maker before returning to service.	10/13/18	

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
6-501.18	KITCHEN The handwashing sink basin, handles area, and caulk behind the sink were soiled, and the caulk appeared to have mold growth on it. Sinks shall be kept clean. Please clean all surfaces of sink as often as needed to keep clean.	10/13/18	B D
5-205.15B	The faucet at the 3-vat sink leaked (would not fully turn off). Plumbing shall be maintained in good condition. Please repair.	10/31/18	
6-501.12A	Accumulation of debris observed on the pipes below the 3-vat sink. Facility shall be maintained clean. Please clean pipes and area under sink as often as needed to keep clean.	10/31/18	
4-601.11C	Encrustation of baked-on debris was observed on several flat baking trays; others were observed with rust. Baking equipment shall be free of encrusted baked on food and shall be free of imperfections. Please clean trays of encrustation; discard those that are marred, rusted, scratched, or that can no longer be effectively cleaned.	10/31/18	
4-204.112A	A thermometer was not found in the bottom of the prep cooler. Please install an accurate thermometer in a convenient-to-read location near the front of the cooler.	10/13/18	
4-601.11C	Debris and mold observed on the door seals, and debris on the outside surfaces, of the prep cooler. Please clean and sanitize surfaces inside the cooler, and clean the outside surfaces as often as needed to keep clean.	10/31/18	
4-601.11C	DRIVE-UP AREA Debris observed on the paper napkin dispenser. Nonfood contact surfaces shall be clean. Please clean dispenser as often as needed to keep clean.	10/31/18	

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
		Follow-up Date: Oct. 31, 2018



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FOOD PRODUCT/LOCATION		TEMP. in ° F	FOOD PRODUCT/ LOCATION		TEMP. in ° F
Walk-in cooler, ambient		41			
Nacho cheese, dispenser		151			
Chili, hot hold		174			
Roller grill food		137 to 150			

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7-201.11B	STORAGE ROOM, continued A bottle of Fabulosa cleaner was stored on top of the ice maker. Chemicals shall be stored where they cannot contaminate equipment or food. Please store chemicals in a designated location where food and food-related items cannot be contaminated.	10/12/18	SD
4-601.11A	RETAIL Mold observed on the ice chute of the Pepsi soda dispenser. Food contact surfaces shall be clean to sight and touch. Please wash, rinse, and sanitize the ice chute, soda nozzles, and housing around the nozzles daily.	10/12/18	

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3-305.11A	RETAIL An accumulation of frost was observed inside the Nestle novelty chest freezer. Food shall be protected from contamination while in storage. Please defrost freezer as often as needed to prevent frost accumulation	10/31/18	SD
4-601.11C	Debris observed on the ledges and glass doors of the Nestle novelty ice cream freezer. Please clean ledges, doors, and handles as often as needed to keep clean.		
6-501.12A	Accumulation of debris observed on the floor beneath racks in the walk-in cooler. Physical facilities shall be clean. Please clean floor as often as needed to keep clean.		
6-501.14A	Dust accumulation observed on the grates over the condenser fans in the walk-in cooler. Ventilation systems shall not be a source of contamination. Please clean condenser fans, covers and coils as often as needed to keep clean.		
4-501.11A	The base of the cheese sauce dispenser was broken; dried cheese sauce was observed to have accumulated in the base of the holder. Food equipment shall be maintained in good repair. Please replace the cheese sauce warmer/dispenser.		
5-501.113	OUTSIDE The lids on the trash receptacle were broken; one was open. Lids on outside receptacles shall be closed and tight fitting. Please have lids or trash receptacle replaced.		
5-501.1134	One lid on the recycling dumpster was open. Lids shall be kept closed on outside trash receptacles.		
4-601.11C	Algae growth and other debris were observed on the outside surfaces of the freezers holding pizza ingredients, cookies, and ice. Please clean freezers.		

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FOOD PRODUCT/LOCATION	TEMP. in ° F	FOOD PRODUCT/ LOCATION	TEMP. in ° F

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6-501.14A	CUSTOMER BATHROOMS Women's: The grate over the fan vent was dirty, the base of the toilet was dirty, and there was no lid on the trash can. Please clean fan cover, and clean all surfaces of toilet at least daily. Please provide a trash can with a lid. Men's: The cover over the fan vent was dirty. Please clean as often as needed to keep clean.	10/31/18	BD
6-501.12A			
5-501.17			
6-501.14A		10/31/18	

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