



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

TIME IN 8:45 am	TIME OUT 14:23 am
DATE August 4, 2017	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: Rhodes 101, #370	OWNER: PAJCO, Inc.	PERSON IN CHARGE: Allison Hayes
ADDRESS: 1609 West Columbia Street	ESTABLISHMENT NUMBER: 4602	COUNTY: St. Francois
CITY/ZIP: Farmington 63640	PHONE: (573)760-1150	FAX: (573)760-1150
PURPOSE <input type="checkbox"/> Pre-opening <input checked="" type="checkbox"/> Routine <input type="checkbox"/> Follow-up <input type="checkbox"/> Complaint <input type="checkbox"/> Other _____		P.H. PRIORITY : <input checked="" type="checkbox"/> H <input type="checkbox"/> M <input type="checkbox"/> L
ESTABLISHMENT TYPE <input type="checkbox"/> BAKERY <input type="checkbox"/> RESTAURANT <input type="checkbox"/> C. STORE <input type="checkbox"/> SCHOOL <input type="checkbox"/> CATERER <input type="checkbox"/> SENIOR CENTER <input type="checkbox"/> DELI <input type="checkbox"/> SUMMER F.P. <input type="checkbox"/> GROCERY STORE <input type="checkbox"/> TAVERN <input type="checkbox"/> INSTITUTION <input type="checkbox"/> 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"/> OUT N/O N/A	Proper cooking, time and temperature		
	Employee Health			<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT N/O N/A	Proper reheating procedures for hot holding	<input checked="" type="checkbox"/>	
<input checked="" type="checkbox"/> OUT	Management awareness; policy present			<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT N/O 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 N/O N/A	Proper hot holding temperatures		
	Good Hygienic Practices			<input checked="" type="checkbox"/> OUT N/A	Proper cold holding temperatures		
<input checked="" type="checkbox"/> OUT N/O	Proper eating, tasting, drinking or tobacco use			<input checked="" type="checkbox"/> OUT N/O N/A	Proper date marking and disposition		
<input checked="" type="checkbox"/> OUT N/O	No discharge from eyes, nose and mouth			<input checked="" type="checkbox"/> OUT N/O N/A	Time as a public health control (procedures / records)		
	Preventing Contamination by Hands				Consumer Advisory		
<input checked="" type="checkbox"/> OUT 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 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 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"/> OUT	Toxic substances properly identified, stored and used		
<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT	Food in good condition, safe and unadulterated	<input checked="" type="checkbox"/>			Conformance with Approved Procedures		
<input type="checkbox"/> IN <input type="checkbox"/> OUT 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						
<input checked="" type="checkbox"/> OUT N/A	Food separated and protected				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 N/A	Food-contact surfaces cleaned & sanitized						
<input type="checkbox"/> IN <input type="checkbox"/> OUT 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 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					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 type="checkbox"/>	<input checked="" 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 checked="" 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"/>	Garbage/refuse properly disposed; facilities maintained		
						<input checked="" type="checkbox"/>	Physical facilities installed, maintained, and clean		

Person in Charge / Title: <i>Allison Hayes</i>	Allison Hayes	Date: August 4, 2017
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: August 23, 2017



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

ESTABLISHMENT NAME Rhodes 101, #370		ADDRESS 1609 West Columbia Street		CITY /ZIP Farmington 63640	
FOOD PRODUCT/LOCATION		TEMP. in ° F	FOOD PRODUCT/ LOCATION		TEMP. in ° F
Nacho cheese, dispenser		139	Walk-in cooler: fish, chicken, ambient		39, 39, 40
Deli hot hold display case, ambient		138, 144	Water in food warmer (no food in unit)		171, 142
Deli hot hold display case: chicken, burrito		148, 152	Food cooling on counter: gravy, eggs, sausage, egg mix		127 to 140
			Hamburgers, pulled from oven		127 to 162
			Prep cooler, bottom: ambient, mac & cheese		39, 37

Code Reference	PRIORITY ITEMS	Correct by (date)	Initial
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.			
3-302.11A	WAREWASHING AND STORAGE AREAS Numerous flies were observed in the warewashing area. Please keep facility and equipment clean to reduce pest attraction, and begin approved methods of control for flies (such as non-insecticidal fly strips placed in areas where falling fly parts cannot clean equipment and utensils, food, single use items, or clean linens).	8/23/17	[Handwritten Initials]
7-201.11B	A can of foaming cleaner was stored on the clean equipment rack across from the 3-vat sink. Chemicals shall be stored below or separately from clean equipment and utensils. Please store cleaners where equipment cannot be contaminated.	8/4/17	
4-601.11A	The insides of the lids on two containers of breading, one holding spicy breading and the other fish breading, stored by the clean equipment rack, were caked with breading. Dry breading may be reused if sifted at least every four hours, and the containers are not caked, for up to seven days. Please place breading in clean containers once the containers are soiled. Wash, rinse, and sanitize the containers and lids when soiled, and at least every seven days.	8/4/17	
4-601.11A	DELI SERVICE AREA/KITCHEN Dried food debris observed inside the Hamilton Beach microwave. Food contact surfaces shall be clean to sight and touch. Please wash, rinse, and sanitize microwave a minimum of every four hours, more often if needed to keep clean.	8/4/17	
3-501.14	Food was being cooled on the counter. According to manager, the food is left on the counter for awhile, then placed in the bottom of the prep cooler. Cooling shall be monitored for time and temperature: food shall be cooled from 135F to 70F within two hours, and from 70F to 41F within an additional four hours. Please record time and temperature for every food that is cooled on a log. COS by discussion and logging temps.	COS	
3-501.15			

Code Reference	CORE ITEMS	Correct by (date)	Initial
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	WAREWASHING/STORAGE AREA The handwashing sink was dirty on the ledges, handles, and dried food in the vat. Handwashing sinks shall be kept cleaned and used only for handwashing. Please clean all surfaces of sink as often as needed to keep clean, and use the handwashing sink only for handwashing.	8/4/17	[Handwritten Initials]
5-205.11B	A leak was observed in the faucet at the mop sink. Plumbing shall be maintained in good repair. Please repair leak.	8/23/17	
6-501.12A	Accumulation of debris observed on the floor around the water softener, mop sink, and three-vat sink. Many flies were also in this area, attracted by the odor. Please clean the area as often as needed to keep clean.	8/7/17	
4-601.11C	Two pans were placed on the bottom shelf of the clean equipment rack to catch drips from drying equipment. The water in the pans was dirty, and numerous dead flies were in one. Please clean the pans at least daily.	8/4/17	
3-304.12B	The handles of the scoops stored in the bulk container of flour and in the bulk container of "batter dip" were in contact with the flour and dip. Handles shall be stored above the surface of the food to prevent contamination from hands. Please ensure all employees store handles of in-use scoops above the food.	8/4/17	
5-205.11B	Leaks observed in both chemical dispenser hoses, and in the faucet, of the 3-vat sink. Please repair to maintain plumbing in good repair.	8/23/17	
4-601.11C	Accumulation of debris observed on the inside and outside surfaces of the Alto Sham oven. Nonfood contact surfaces shall be cleaned at a frequency to prevent debris accumulation. Please clean all surfaces of oven as often as needed to keep clean, especially handle area and sides.	8/7/17	

EDUCATION PROVIDED OR COMMENTS

Person in Charge /Title:	<i>Allison Hayes</i>	Allison Hayes	Date:	August 4, 2017
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:	August 23, 2017



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

ESTABLISHMENT NAME Rhodes 101, #370		ADDRESS 1609 West Columbia Street		CITY /ZIP Farmington 63640	
FOOD PRODUCT/LOCATION		TEMP. in ° F	FOOD PRODUCT/ LOCATION		TEMP. in ° F
Chicken, deep fryer		190 to 199			
Ambient, open air deli cooler		38			
Cream, dispenser		39			

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
----------------	--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	-------------------	---------

3-501.16A	DELI SERVICE AREA/KITCHEN Hamburgers pulled from the oven for hot holding had internal temperatures ranging from 127F to 162F. The hamburgers were fully cooked prior to placing in the oven, so the internal temperature shall be 165F prior to hot holding. Please use a thermometer to ensure food reaches the correct internal temperature. COS by reheating hamburgers to 198-212F.	COS	GK
4-601.11A	DRIVE UP AREA The dispensing nozzles and inside of the cappuccino machine were dirty with powders that became moist. Please wash, rinse, and sanitize nozzles and clean inside of machine at least daily.	8/4/17	

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
----------------	---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	-------------------	---------

3-304.12B	DRIVE UP AREA The handle of the scoop, stored inside the ice maker, was in contact with the ice. Please store handle above the surface of the ice and pointed up to prevent contamination of ice from hands when retrieving scoop.	8/4/17	RK
2-401.11B	An opened can of Monster drink was stored on the counter near the cappuccino machine. Employees may drink from a container that has a lid and straw while working as long as the beverage is stored in a designated area where food, clean equipment, clean linens, and single-use items cannot be contaminated, and the container is handled to prevent contamination of hands. Employees shall wash hands after drinking. Please store employee drinks in designated area.	8/4/17	
4-601.11C	RETAIL The air intake vents in the open-air deli cooler were dusty. Please clean as often as needed to keep clean.	8/7/18	
4-601.11C	Accumulation of debris observed inside the trash can cabinet below the tea brewers, and the surface of bottom of the cabinet was deteriorating. Non-food contact surfaces requiring frequent cleaning shall be smooth, nonabsorbent, and cleanable. Please clean and repair cabinet.	8/23/17	
4-501.11A	The door to the trash can cabinet beneath the donut case was coming loose from the hinge. Equipment shall be maintained in good repair. Please repair door.	8/23/17	
4-601.11C	The inside of the cappuccino machine was dirty with moistened powders. Please clean inside of machine at least daily.	8/4/17	

EDUCATION PROVIDED OR COMMENTS

Person in Charge /Title: <i>Allison Hayes</i>		Allison Hayes		Date: August 4, 2017	
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: August 23, 2017



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

ESTABLISHMENT NAME Rhodes 101, #370		ADDRESS 1609 West Columbia Street		CITY / ZIP Farmington 63640	
FOOD PRODUCT/LOCATION		TEMP. in ° F	FOOD PRODUCT/ LOCATION		TEMP. in ° F
Ambient, ice cream chest freezer		0			
Ambient, walk-in freezer		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
----------------	--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	-------------------	---------

3-101.11	RETAIL Four packages of Zantac (4 caps each package) were expired 7/2017. Food shall be safe. CORRECTED ON SITE by removing from retail and placed in area for returns.	COS	adk
----------	-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	-----	-----

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
----------------	---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	-------------------	---------

6-501.12A 3-305.11A	RETAIL Spilled, sticky liquid in the door area of the cooler holding Red Bull and Monster drinks. Please clean. Accumulation of frost on the inside of the chest ice cream freezer, and debris on the door and door ledges. Food shall be protected from contamination while in storage. Please defrost freezer and clean ledges as often as needed to keep clean.	8/23/17 8/23/17	adk
6-501.12A	WALK-IN COOLER Debris on the floor beneath the shelves holding milk. Please clean floor beneath shelves.	8/23/17	
5-501.115	OUTDOORS Trash observed in the outside dumpster enclosure. Dumpster enclosures shall be kept clean of litter. Please remove trash.	8/23/17	
5-501.15	A trash can in the outside dumpster enclosure lacked a lid. Outside trash receptacles shall be covered. Please place lid on trash can, or remove trash can.	8/23/17	
6-501.12A 4-501.11A	BATHROOMS The seat on one toilet in the men's bathroom was deteriorating, preventing effective cleaning. Also, the base of the toilet was dirty. Please clean all surfaces of toilets, and replace the toilet seat to allow effective cleaning.	8/23/17	

EDUCATION PROVIDED OR COMMENTS

Person in Charge / Title: <i>Allison Hayes</i>	Allison Hayes	Date: August 4, 2017
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: August 23, 2017