



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

TIME IN	9:01am	TIME OUT	1:46pm
DATE	6-15-17	PAGE	1 of 5

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: Save-A-Lot		OWNER: Don Hawkins	PERSON IN CHARGE: Clint Price	
ADDRESS: 3 Northwood Drive		ESTABLISHMENT NUMBER: 0730	COUNTY: 187	
CITY/ZIP: Bonne Terre, 63628		PHONE: 573-358-2233	FAX: 573-358-4099	P.H. PRIORITY : <input type="checkbox"/> H <input type="checkbox"/> M <input checked="" type="checkbox"/> L
ESTABLISHMENT TYPE <input type="checkbox"/> BAKERY RESTAURANT <input type="checkbox"/> C. STORE SCHOOL <input type="checkbox"/> CATERER SENIOR CENTER <input type="checkbox"/> DELI SUMMER F.P. <input checked="" 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 type="checkbox"/> N/O <input checked="" type="checkbox"/> N/A	Proper cooking, time and temperature		
	Employee Health			<input type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/O <input checked="" 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 type="checkbox"/> N/O <input checked="" type="checkbox"/> N/A	Proper cooling time and temperatures		
<input checked="" type="checkbox"/> OUT	Proper use of reporting, restriction and exclusion			<input type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/O <input checked="" 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 checked="" 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"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/O <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 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)		
	Preventing Contamination by Hands				Consumer Advisory		
<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 type="checkbox"/> IN <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 checked="" type="checkbox"/> IN <input 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"/> 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 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 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 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		
		Food Identification			<input type="checkbox"/>	<input checked="" 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 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"/>	<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"/>	<input 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>Clint Price</i> Clint Price		Date: June 15, 2017	
Inspector: <i>John Wiseman</i> John Wiseman	Telephone No. (573)431-1947	EPHS No. 1507	Follow-up: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
		Follow-up Date: 6-29-17	



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

ESTABLISHMENT NAME Save-A-Lot		ADDRESS 3 Northwood Drive		CITY /ZIP Bonne Terre, 63628	
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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	Meat cutting room = 42F Meat cooler = 40FF Walk-in freezer = 0F Dairy walk-in cooler = 40F Retail fresh meat: beef=34F, chicken=30F, pork=32F Brat cooler=38F, chicken cooler=34F, hot dog cooler=30F RTE & Smoked meat cooler: 38F, 32F, 38F Dairy reach-in cooler: 34F, 36F, 38F Produce retail cooler: 40F, 40F Pick 5 freezer=0F, pizza freezer=20F, convenience food freezer=8F South wall freezers: 10F, 0F, 0F, 0F Aisle 8 coffin freezers: 12F, 0F, 0F, 0F, 0F, 20F, 5F, 0F, 8F, 0F Pepsi retail coolers: 38F, 44F, 36F		CP
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5-205.11B	Meat Dept Cleaning supplies were observed stored in the hand wash sink in the meat cutting room. Hand wash sinks shall be used for hand washing exclusively. Please remove items from the sink.	6-29-17	CP
6-301.11	Hand soap was not available in the dispenser at the hand wash sink in the meat cutting room. Hand wash sinks shall be provided with hand soap. Please provide soap in the dispenser.		
6-501.18	The basins of the three compartment sink in the meat cutting room are dirty. Plumbing fixtures shall be maintained clean. Please thoroughly clean the inside and outside of the three compartment sink.		
5-2305.15 B	A water leak was observed from a spigot located below the hand wash sink in the meat cutting room and pooling on the floor. Plumbing systems shall be maintained in good repair. Please repair the leak.		
4-601.11C	An accumulation of meat debris was observed on all surfaces of the wrapping station in the meat cutting room. Non-food contact surfaces shall be kept free of an accumulation of dust, dirt, food residue and debris. Please thoroughly clean all surfaces of the wrapping station.		
6-501.12A	An accumulation of meat debris was observed on the ceiling of the meat cutting room. Physical facilities shall be cleaned as often as necessary to keep them clean. Please clean the cutting room ceiling.		

EDUCATION PROVIDED OR COMMENTS

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4-601.11A	Dried food residue was observed in corners and crevices of the meat slicer in the meat cutting room. Food contact surfaces shall be clean to sight and touch. Please wash, rinse and sanitize the meat slicer after each use or every four hours if it is in continuous use.	6-15-17	CP
4-601.11A	Dried blood and debris was observed on the white plastic meat trays used in the cutting room. Food contact surfaces shall be clean to sight and touch. Please wash, rinse and sanitize the trays.		
4-601.11A	An accumulation of dried meat debris was observed on surfaces of the mixing paddle and auger of the meat grinder in the meat department. Food contact surfaces shall be clean to sight and touch. Please wash, rinse, and sanitize all parts of the meat grinder daily.		
7-201.11B	A cardboard tray of employee medicines, a spray bottle of disinfectant cleaner and employee beverages were observed stored on wooden storage shelving above single use items in the meat department dry storage area. Toxic materials shall be stored where they cannot contaminate food, equipment, single use items, or clean linens. Please locate these items where contamination cannot occur.		
7-201.11B	Cleaning supplies, WD40 and liquid adhesive were observed stored above toilet paper and paper towels in shelving beside the restroom in the back room. Toxic materials shall be stored where they cannot contaminate food, equipment, single use items, or clean linens. Please locate these items where contamination cannot occur.		

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4-601.11C	An accumulation of meat debris and dirt was observed on the lower surface and on plastic drawers stored on the lower surface of the steel table in the meat cutting room. Non-food contact surfaces shall be kept free of an accumulation of dust, dirt, food residue and debris. Please clean the table and plastic drawers.	6-29-17	CP
4-601.11C	An accumulation of dust and debris was observed on rails of the rolling racks in the meat cutting room. Non-food contact surfaces shall be kept free of an accumulation of dust, dirt, food residue and debris. Please clean all surfaces of the rolling racks.		
6-501.14A	An accumulation of dust was observed on surfaces and intakes of the ceiling mounted cooling unit in the meat cutting room. Intake and exhaust vents shall be cleaned so they are not a source of contamination. Please clean the cooling unit.		
6-501.12A	An accumulation of meat debris was observed on the floor around the meat grinder and in the foot-actuated grinder peddle in the meat department. Physical facilities shall be cleaned as often as necessary to keep them clean. Please clean the floor around the grinder and the grinder peddle.		
3-305.12	Mold and flaking paint were observed on the ceiling mounted cooling unit in the meat storage room. Food shall be protected from sources of contamination. Please clean the cooling unit.		

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3-302.11A	Ground beef patties were observed stored above whole muscle beef steaks in the fresh meat case. Food shall be protected from cross contamination by storing ground meats below whole muscle meats. Please place ground meats below or away from whole muscle meats.	6-15-17	CP
3-302.11A	Raw angus burgers were observed stored above fully cooked chicken and raw beef liver and raw ground turkey was observed stored above fully cooked meatballs in the south wall freezers. Food shall be protected from cross contamination by storing raw animal proteins below or away from fully cook and ready to eat foods. Please arrange foods such that raw meats are below ready to eat and cooked foods.		

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6-501.12A	An accumulation of dirt and debris was observed on the floor in the back room area, especially below shelving. Physical facilities shall be cleaned as often as necessary to keep them clean. Please clean the floor in the back room with specific attention to areas below shelving and equipment.	6-29-17	CP
6-301.12	Paper towels and soap were not available through dispensers at the hand wash sink in the produce prep area. Hand drying provisions and hand soap shall be provided in a sanitary manner. Please provide paper towels and soap in the dispensers.		
6-301.11	An accumulation of dirt was observed on surfaces of the wrapping station in the produce prep area. Non-food contact surfaces shall be kept free of an accumulation of dust, dirt, food residue and debris. Please thoroughly clean all surfaces of the wrapping station.		
4-601.11C	The cutting boards in use at the produce prep area were observed to be heavily abraded and stained. Cutting surfaces that can no longer be effectively cleaned shall be resurfaced or replaced. Please resurface or replace the cutting boards.		
4-501.12	Paper towels were not available through the dispenser in the rest room in the back room area. Hand drying provisions shall be provided in a sanitary manner. Please provide paper towels in the dispenser.		
6-301.12			

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5-501.17A	The restroom in the back room is not provided with a covered waste can. Toilet rooms used by females shall be provided with a covered waste can. Please provide a cover can in this room.	6-29-17	CJ
6-501.12A	An accumulation of dried milk was observed on the floor of the walk-in dairy cooler below the milk racks. Physical facilities shall be cleaned as often as necessary to keep them clean. Please clean the floor in this area.		
6-501.11	There appears to be water infiltration around a water main pipe entering the building through the west wall of the facility. The water appears to be from hydrostatic pressure or surface water infiltration and not a plumbing leak. Physical facilities shall be maintained in good repair. Please seal the leak.		
4-204.112	The integral thermometers in the brat cooler and in the hot dog cooler in the aisle in front of the meat cases were observed to be non-functional. Please provide accurate thermometers in these units.		
6-202.11A	Several fluorescent light bulbs installed in the produce case were observed without shielding. Light bulbs installed in areas of exposed food shall be shielded or shatter resistant. Please provide shielding for these bulbs.		
4-204.112	Thermometers were not observed in the aisle 8 coffin freezers. Mechanically cooled refrigerators and freezers shall be provided with accurate temperature measuring devices. Please place thermometers in each zone of the coffin freezers.		

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