



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

TIME IN	10:48 am	TIME OUT	1:06 pm
DATE	3-15-2018	PAGE	1 of 2

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: Tinkers Liquor and More	OWNER: William Tinker	PERSON IN CHARGE: William Tinker
ADDRESS: 812 E. Chestnut St.	ESTABLISHMENT NUMBER: 4468	COUNTY: St. Francois (187)
CITY/ZIP: Desloge, MO 63601	PHONE: 573-518-0358	FAX: Same
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 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"/> OUT N/O N/A	Proper cooking, time and temperature		
	Employee Health						
<input checked="" type="checkbox"/> OUT	Management awareness; policy present			<input type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/O N/A	Proper reheating procedures for hot holding		
<input checked="" type="checkbox"/> OUT	Proper use of reporting, restriction and exclusion			<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> N/O N/A	Proper cooling time and temperatures		
	Good Hygienic Practices						
<input checked="" type="checkbox"/> OUT N/O	Proper eating, tasting, drinking or tobacco use			<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/O N/A	Proper hot holding temperatures		<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/> OUT N/O	No discharge from eyes, nose and mouth			<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/O N/A	Proper cold holding temperatures		
	Preventing Contamination by Hands						
<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT N/O	Hands clean and properly washed	<input checked="" type="checkbox"/>		<input type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A	Proper date marking and disposition		
<input checked="" type="checkbox"/> OUT N/O	No bare hand contact with ready-to-eat foods or approved alternate method properly followed				Time as a public health control (procedures / records)		
<input checked="" type="checkbox"/> OUT	Adequate handwashing facilities supplied & accessible			<input type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/O N/A	Consumer Advisory		
	Approved Source				Consumer advisory provided for raw or undercooked food		
<input checked="" type="checkbox"/> OUT	Food obtained from approved source			<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A	Highly Susceptible Populations		
<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	Pasteurized foods used, prohibited foods not offered		
<input checked="" type="checkbox"/> OUT	Food in good condition, safe and unadulterated				Chemical		
<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 checked="" type="checkbox"/> OUT <input type="checkbox"/> N/A	Food additives: approved and properly used		
	Protection from Contamination				Toxic substances properly identified, stored and used		<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/> OUT N/A	Food separated and protected				Conformance with Approved Procedures		
<input checked="" type="checkbox"/> OUT N/A	Food-contact surfaces cleaned & sanitized				Compliance with approved Specialized Process and HACCP plan		
<input checked="" type="checkbox"/> OUT N/O	Proper disposition of returned, previously served, reconditioned, and unsafe food				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		

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 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 type="checkbox"/>	<input checked="" type="checkbox"/>	Food properly labeled; original container			<input checked="" type="checkbox"/>	<input 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 checked="" type="checkbox"/>	<input 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 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: William Tinker	Date: March 15, 2018
Inspector: Jon Peacock	Telephone No. (573)431-1947
EPHS No. 880	Follow-up: Follow-up Date: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No



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ESTABLISHMENT NAME Tinkers Liquor and More		ADDRESS 812 E. Chestnut St.		CITY /ZIP Desloge, MO 63601	
FOOD PRODUCT/LOCATION		TEMP. in ° F	FOOD PRODUCT/ LOCATION		TEMP. in ° F
Walk-in cooler/Ambient		40	Glass-front Beverage Aire Fridge/Ambient		32
Jordon refrigerator/Ambient		34	Pork steaks in glass-front hot holding cabinet		113, 114 and 124
BBQ pulled pork/Jordon fridge		36	Criterion chest freezer/Ambient		0
Gehl cheese/Gehl cheese dispenser		134	Pork steaks on Traeger grill		153
Baked beans/crock pot		140	Pork steaks in glass-front hot holding cabinet @ 12:25 pm		135

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	Pork steaks observed at 113-114F and 124F in the glass-front hot holding cabinet in the kitchen. According to Mr. Tinker pork steaks are cooked to 145F on a Traeger grill, removed from the grill, bbq sauce is applied and then placed in the glass-front hot holding cabinet. Potentially hazardous foods (PHF's) shall be held at hot at 135F. (Temperatures monitored at 12:25 pm and found at 135F)	COS	
3-502.12A	Cooked pulled pork and raw meats observed ROP packaged in the Criterion chest freezer in the kitchen. Reduced Oxygen packaged (ROP) foods are required to have an approved HACCP plan prior to engaging in ROP packaging. Please discontinue ROP packaging until a HACCP plan can be approved by the MO DHSS. According to Mr. Tinker the ROP packaged food was for a family get-together this weekend. Mr. Tinker was advised to remove this product from the premises.	3-15-18	
7-202.12A	A canister of Hot Shot Wasp and Hornet Killer was observed in the rear storage room. Only those toxic items that are approved for use in a food establishment may be stored or used on the premises. Please remove from the premises. (Corrected by voluntary discarding prior to leaving)	COS	
2-301.14	Mr. Tinker was observed placing gloves on his hands without any observed handwashing activities observed. Food employees shall wash their hands prior to handling/preparing foods, when changing gloves or after engaging in other activities tha contaminate their hands. (Corrected by discussion with Mr. Tinker)	COS	
Note:	Handwashing sink in the kitchen was observed with a bottle of Dawn dish detergent and three sink drainers lying in it upon arrival to this establishment. Handwashing sinks shall be available for use by food employees at all times.		

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
3-602.11A	Bagged ice was observed in the ice chest freezer was observed lacking labeling as to the location of the point of manufacture. Please provide labeling information as to the name of the facility and address of the point of manufacture on the ice bags.	3-15-18	
6-301.14	No handwashing signage was observed at the kitchen handwashing sink or the restroom handwashing sink. Handwashing signage shall be provided at all handwashing sinks reminding employees to wash their hands. (Corrected on-site by providing Mr. Tinker with handwashing signage.)	COS	
6-202.15A	Screening on door and in wall in outdoor cooking area observed torn and in poor repair in places. Gaps were observed between the wooden floor decking and along with wall where the screened in enclosure meets the building wall. This area should be fully enclosed to prevent the unwanted entry of insects or rodents, etc.	Next routine	
6-501.12A	Grease was observed pooling on the wooden floor in the outdoor cooking area. Physical facilities shall be cleaned as often as necessary to maintain cleanliness.	3-15-18	
Note:	A field visit will be conducted within this month to monitor PHF temperatures in the hot food cabinet, sanitary measures and to observe items designated for corrected this day. NO/NA =		

EDUCATION PROVIDED OR COMMENTS

Note: Mr. Tinker stated he would be constructing a bourbon sampling bar within this establishment. Mr. Tinker was instructed that an application for a food establishment would need to be completed and submitted to the SFCHC prior to the work occurring.

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Inspector: Jon Peacock	Telephone No. (573)431-1947	EPHS No. 880	Follow-up: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Follow-up Date: