



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

TIME IN	12:10 pm	TIME OUT	2:08 pm
DATE	March 7, 2017	PAGE	1 of 3

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: St. Francois County VFW Post #2426		OWNER: VFW Post #2426	PERSON IN CHARGE: Art Heidebur	
ADDRESS: 399 West Oak Street		ESTABLISHMENT NUMBER: 4612	COUNTY: St. Francois	
CITY/ZIP: Desloge 63601		PHONE: (573)431-3915	FAX: (573)431-5043	P.H. PRIORITY : <input type="checkbox"/> H <input checked="" type="checkbox"/> M <input type="checkbox"/> L
ESTABLISHMENT TYPE <input checked="" 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"/> IN <input type="checkbox"/> OUT	Person in charge present, demonstrates knowledge, and performs duties			<input checked="" 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 checked="" 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"/>	
<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT	Management awareness; policy present			<input checked="" 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"/> IN <input type="checkbox"/> OUT	Proper use of reporting, restriction and exclusion			<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> NO <input type="checkbox"/> N/A	Proper hot holding temperatures		
	Good Hygienic Practices			<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> NO <input type="checkbox"/> N/A	Proper cold holding temperatures		
<input checked="" type="checkbox"/> IN <input 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"/> NO <input type="checkbox"/> N/A	Proper date marking and disposition	<input checked="" type="checkbox"/>	
<input checked="" type="checkbox"/> IN <input 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				Consumer Advisory		
<input checked="" type="checkbox"/> IN <input 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"/> IN <input 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"/> IN <input 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				Chemical		
<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT	Food obtained from approved source	<input checked="" type="checkbox"/>		<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"/> YES <input 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 checked="" type="checkbox"/>	
<input checked="" type="checkbox"/> IN <input 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 checked="" type="checkbox"/>					
<input checked="" type="checkbox"/> IN <input 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"/> NO	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"/>	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 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 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: <i>Art Heidebur</i> Art Heidebur		Date: March 7, 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: March 10, 2017



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ESTABLISHMENT NAME St. Francois County VFW Post #2426		ADDRESS 399 West Oak Street	CITY /ZIP Desloge 63601	
FOOD PRODUCT/LOCATION		TEMP. in ° F	FOOD PRODUCT/ LOCATION	
Hotpoint freezer, ambient		5	Hot dogs and egg rolls, roller	
small chest freezer, ambient		0		
Upright freezer, kitchen: ambient		20		
Ambient, GE refrigerator/freezer, kitchen		40/10		
Ambient, GE chest freezer, kitchen		10		

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
7-102.11	A spray bottle of green liquid, stored in a crate under the 3-vat sink in the bar, was not labeled. Working containers of chemicals shall be labeled with the common name of the contents. Please label spray bottle. CORRECTED ON SITE by labeling bottle.	COS	AM
7-102.11	A spray bottle of green liquid, stored in the cabinet under the sink in the women's bathroom, and one stored in the sink cabinet in the men's bathroom, were not labeled. Please label with the common name of the contents. CORRECTED ON SITE by labeling both bottles	COS	AM
4-601.11A	Food splatters observed on the inside surfaces of the microwave in the bar. Food contact surfaces shall be clean to sight and touch. Please wash, rinse, and sanitize a minimum of every four hours while in continual use, or after each use if not in continual use. COS by cleaning	COS	
3-302.11A	Raw hamburger was stored on top of frozen vegetables and cheese sticks in the upright freezer in the kitchen. Raw animal-derived foods shall be stored below all other foods, and different kinds of raw animal-derived foods shall be stored separately. COS by rearranging so raw meat is lower than all other foods.	COS	
3-501.17B	A package of lettuce was opened and cut in the kitchen refrigerator. Once cut, lettuce becomes potentially hazardous food and requires date labeling. Please label food that is fully-cooked (or ready-to-eat), potentially hazardous, and held for more than 24 hours with the date of disposition, which is the day of opening (or preparing) plus an additional six days. COS	COS	
4-601.11A	The inside of the microwave in the kitchen was dirty. Please clean and sanitize after use. CORRECTED ON SITE by cleaning microwave.	COS	

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
5-205.15B	A leak was observed under the 3-vat sink in the bar. Plumbing shall be maintained in good repair. Please have leak repaired.	3/10/17	AM
6-501.18	Accumulation of debris observed on the pipes under the handwashing sink and under the 3-vat sink in the bar. Physical facilities shall be kept clean. Please clean pipes. COS by cleaning	COS	AM
6-501.12A	An accumulation of debris was observed on the pipes and on the wall inside the sink cabinet in the women's bathroom. Please clean pipes and wall.	3/10/17	
4-904-11A	A glass holding spoons by the coffee brewer, and a container holding utensils in the cabinet by the microwave, were stored with their handles down. Utensils shall be stored with their handles up to prevent contamination of food-contact surfaces when retrieving. Please invert utensils. COS	COS	
6-301.12	There were no paper towels in the dispenser at the kitchen handwashing sink. Please supply disposable towels at all times at all handwashing sinks. COS by supplying towels	COS	
6-301.114	There was no sign at the kitchen handwashing sink to remind users of importance of washing hands. Please install sign. COS sign was moved from 3-vat sink to handwashing sink	COS	
4-601.11C	Accumulation of debris observed in the storage area in the bottom of the stove and on the front of the stove, in the kitchen. Please clean non-food contact surfaces as often as needed to keep clean.	3/10/17	
4-204.112	Thermometers were not found in the kitchen freezer, the freezers outside the bar, or the GE freezer in the kitche. Please install thermometers in a convenient-to-read location in each freezer.	3/10/17	

EDUCATION PROVIDED OR COMMENTS

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ESTABLISHMENT NAME St. Francois County VFW Post #2426	ADDRESS 399 West Oak Street	CITY /ZIP Desloge 63601
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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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NOTE	The drainpipes for the 3-vat sink in the kitchen were directly plumbed. Equipment in which food or equipment are placed shall be indirectly plumbed to prevent possible contamination from sewage back-up. If a repair or remodel is conducted, please indirectly plumb drains of sink.		ASH
3-201.11B	Two home-canned jars of BBQ sauce were stored in the metal cabinet in the kitchen pantry. Food must be from an approved (inspected) source. Please remove home-canned food and use only food obtained from an inspected facility. COS by discarding sauce.	COS	↓
3-501.16A	The egg rolls on the hot dog cooker had internal temperatures of 100F. Food that is fully cooked shall be re-heated to 165F for 15 seconds, then held hot at 135F or higher. Please adjust thermostat to quickly heat food to 165F, then lower it to hold at 135F or higher. COS by adjusting thermostats to high setting.	COS	

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3-305.11A	The upright and chest freezers in the kitchen was in need of defrosting. Food shall be protected while in storage. Please defrost to protect food from contamination from the frost.	3/10/17	ASH
4-903.11A	A bag of potatoes, a bag of onions, and single-use cups were stored on the floor in the kitchen pantry. Food and single-use items shall be stored a minimum of six inches off floor. CORRECTED ON SITE by putting items on table.	COS	↓
4-203.12B	The thermometer in the GE refrigerator in the kitchen read 49F when the actual temperature was 40F. Thermometers shall be accurate. Please install an accurate thermometer in this refrigerator in a convenient-to-read location.	3/10/17	
4-904.11B	Two containers of plastic utensils were stored with the handles down. Please store utensils with the handles up to protect food-contact surface from contamination. COS by inverting.	COS	
4-601.11C	Mold and debris observed on the inside of the True glass-front cooler in the kitchen bar area. Please clean all surfaces of the inside of this cooler.	3/10/17	
4-501.11A	The True glass cooler in the kitchen bar area was not cooling. There was no food stored in the unit during this visit. Please do not store foods requiring refrigeration in this unit until it is serviced and reliably holds food at 41F or lower.	3/10/17	
6-501.11	Holes observed in the wall by the sink in the women's bathroom by the banquet hall. Please repair holes and seal wall to allow effective cleaning.	3/10/17	

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