



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

TIME IN 9:57 am	TIME OUT 1:30 pm
DATE June 12, 2018	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: Wal Mart Super Center #95	OWNER: Wal Mart Stores, Inc.	PERSON IN CHARGE: William Britton
ADDRESS: 407 North State Street	ESTABLISHMENT NUMBER: 4508	COUNTY: St. Francois
CITY/ZIP: Desloge 63601	PHONE: 573.431.5094	FAX: 573.431.1778
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 checked="" type="checkbox"/> BAKERY RESTAURANT <input type="checkbox"/> C. STORE SCHOOL <input type="checkbox"/> CATERER SENIOR CENTER <input checked="" 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		
<b>Employee Health</b>				<input checked="" type="checkbox"/> OUT N/O N/A			
<input checked="" type="checkbox"/> OUT	Management awareness; policy present			<input checked="" type="checkbox"/> OUT N/O N/A	Proper reheating procedures for hot holding		
<input checked="" type="checkbox"/> OUT	Proper use of reporting, restriction and exclusion			<input checked="" type="checkbox"/> OUT N/O N/A	Proper cooling time and temperatures		
<b>Good Hygienic Practices</b>				<input checked="" type="checkbox"/> OUT N/O N/A			
<input checked="" type="checkbox"/> OUT N/O	Proper eating, tasting, drinking or tobacco use			<input checked="" type="checkbox"/> OUT N/O N/A	Proper hot holding temperatures		
<input checked="" type="checkbox"/> OUT N/O	No discharge from eyes, nose and mouth			<input checked="" type="checkbox"/> OUT N/O N/A	Proper cold holding temperatures		
<b>Preventing Contamination by Hands</b>				<input checked="" type="checkbox"/> OUT N/O N/A			
<input checked="" type="checkbox"/> OUT N/O	Hands clean and properly washed			<input checked="" type="checkbox"/> OUT N/O 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			<input checked="" type="checkbox"/> OUT N/O N/A	Time as a public health control (procedures / records)		
<input checked="" type="checkbox"/> OUT	Adequate handwashing facilities supplied & accessible	✓		<input checked="" type="checkbox"/> OUT N/O N/A	Consumer Advisory		
<b>Approved Source</b>				<input checked="" type="checkbox"/> OUT N/O N/A			
<input checked="" type="checkbox"/> OUT	Food obtained from approved source			<input checked="" type="checkbox"/> OUT N/O N/A	Consumer advisory provided for raw or undercooked food		
<input checked="" type="checkbox"/> OUT	Food received at proper temperature			<input checked="" type="checkbox"/> OUT N/O N/A	Highly Susceptible Populations		
<input checked="" type="checkbox"/> OUT	Food in good condition, safe and unadulterated			<input checked="" type="checkbox"/> OUT N/O N/A	Pasteurized foods used, prohibited foods not offered		
<input checked="" type="checkbox"/> OUT	Required records available: shellstock tags, parasite destruction			<input checked="" type="checkbox"/> OUT N/O N/A	Chemical		
<b>Protection from Contamination</b>				<input checked="" type="checkbox"/> OUT N/O N/A			
<input checked="" type="checkbox"/> OUT N/A	Food separated and protected			<input checked="" type="checkbox"/> OUT N/O N/A	Food additives: approved and properly used		
<input checked="" type="checkbox"/> OUT N/A	Food-contact surfaces cleaned & sanitized			<input checked="" type="checkbox"/> OUT N/O N/A	Toxic substances properly identified, stored and used		
<input checked="" type="checkbox"/> OUT N/O	Proper disposition of returned, previously served, reconditioned, and unsafe food	✓		<input checked="" type="checkbox"/> OUT N/O N/A	Conformance with Approved Procedures		
				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	COS	R	IN	OUT	COS	R
<b>Safe Food and Water</b>				<b>Proper Use of Utensils</b>			
<input checked="" type="checkbox"/>	<input type="checkbox"/>			<input checked="" type="checkbox"/>	<input type="checkbox"/>		
<input checked="" type="checkbox"/>	<input type="checkbox"/>			<input checked="" type="checkbox"/>	<input type="checkbox"/>		
<input checked="" type="checkbox"/>	<input type="checkbox"/>			<input checked="" type="checkbox"/>	<input type="checkbox"/>		
<b>Food Temperature Control</b>				<b>Utensils, Equipment and Vending</b>			
<input checked="" type="checkbox"/>	<input type="checkbox"/>			<input checked="" type="checkbox"/>	<input type="checkbox"/>		
<input checked="" type="checkbox"/>	<input type="checkbox"/>			<input checked="" type="checkbox"/>	<input type="checkbox"/>		
<input checked="" type="checkbox"/>	<input type="checkbox"/>			<input checked="" type="checkbox"/>	<input type="checkbox"/>		
<b>Food Identification</b>				<b>Physical Facilities</b>			
<input checked="" type="checkbox"/>	<input type="checkbox"/>			<input checked="" type="checkbox"/>	<input type="checkbox"/>		
<input checked="" type="checkbox"/>	<input type="checkbox"/>			<input checked="" type="checkbox"/>	<input type="checkbox"/>		
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<input checked="" type="checkbox"/>	<input type="checkbox"/>			<input checked="" type="checkbox"/>	<input type="checkbox"/>		

Person in Charge /Title: William Britton	Date: June 12, 2018
Inspector: <i>Rose Mier</i> Rose Mier	Telephone No. (573)431-1947
EPHS No. 1390	Follow-up: Date: June 26, 2018
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	



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

ESTABLISHMENT NAME Wal Mart Super Center #95		ADDRESS 407 North State Street		CITY /ZIP Desloge 63601	
FOOD PRODUCT/LOCATION		TEMP. in ° F	FOOD PRODUCT/ LOCATION		TEMP. in ° F
Chicken egg rolls, deep fryer		168, 171	Deli meat lunch meat cooler: ambient		36 (left), 41 (right)
Rethermolizer water		199, 206	Deli meat cluch cooler: turkey (left), turkey (right)		39, 36
Deli walk-in cooler: ambient, ham		38, 37	Deli meat/cheese coolers: ambients		41, 40, 34
Deli walk-in freezer, ambient		20	Deli meat/cheese coolers: cheese, ham, ham		37, 39, 38
Bakery walk-in cooler and freezer, ambients		40, 5	Deli cold hold display case: ambient, potato salad, pasta		36, 35, 37

Code Reference	PRIORITY ITEMS	Correct by (date)	Initial
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	<p>Priority items contribute directly to the elimination, prevention or reduction to an acceptable level, hazards associated with foodborne illness or injury. <b>These items MUST RECEIVE IMMEDIATE ACTION within 72 hours or as stated.</b></p>		
NOTE	<p><b>DELI AND BAKERY</b>          Food held in the deli hot-hold display case are held by time. All food was labeled for discarding within four hours.</p>		<i>W</i>
NOTE	<p>The rinse water temperature gauge on the bakery dishwashing machine did not appear to be functioning correctly, as it always read between 190 and 205F. Please have service person check to ensure the guage works as intended. Always use thermo-labels to ensure the temperature of sanitizing rinse water is at least 160F at the surface of the equipment (180F minimum at the manifold).</p>		
4-601.11A	<p>One set of cutting boards on one table in the deli prep room were deeply grooved and stained. Food contact surfaces shall be clean to sight and touch, and free of imperfections. Please refinish or replace cutting boards that are no longer able to be effectively cleaned. NOTE: according to manager, new boards have been ordered.</p>	6/26/18	
3-101.11	<p><b>AISLES</b>          The following infant formulas and medicine were past their "use by" date: 3- 12.4 oz. containers of Similac (3/2018); 6- 8 fl. oz. of Pediasure (3/2018), and 4 125 tablets of Hyland's Tiny Cold Tablets. Please remove all infant formulas and medicines that are past their use by date from retail. COS by marking out and discarding.</p>	COS	

Code Reference	CORE ITEMS	Correct by (date)	Initial
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	<p>Core items relate to general sanitation, operational controls, facilities or structures, equipment design, general maintenance or sanitation standard operating procedures (SSOPs). <b>These items are to be corrected by the next regular inspection or as stated.</b></p>		
6-501.12A	<p><b>DELI AND BAKERY</b>          Debris build-up along floor-wall juncture under slicer tables. Physical facilities shall be cleaned at a frequency to prevent debris accumulation. Please clean under tables.</p>	6/15/18	<i>W</i>
6-501.12A	<p>Accumulation of grease observed on the floor beneath the deep fryers. Please clean beneath the equipment as often as needed to keep clean.</p>	6/15/18	
6-501.12A	<p>Ice and some debris was observed on the walk-in freezer floor, and ice built-up on the seal of the door, preventing a good seal. Please keep ice removed from freezer door; repair or replace seal if needed to provide a good seal.</p>	6/26/18	
4-501.11B	<p>Heat sensitive test labels (thermolabels) were not available upon request. Test strips for sanitizing cycles shall be available to ensure correct temperature is achieved during the sanitizing rinse. Please provide and use the labels at a minimum the first use of the day of the machine.</p>	6/15/18	
4-302.14	<p>There was no soap in the dispenser at the handwashing sink in the back bakery area. Soap shall be provided at all times at all sinks. COS by installing soap.</p>	COS	
6-301.11	<p>The fronts of the plastic stacked drawers in the back deli were dirty. Nonfood contact surfaces shall be cleaned at a frequency to prevent debris accumulation. Please clean drawers.</p>	6/15/18	
4-601.11C	<p><b>RETAIL AISLES</b>          The bottom shelf of the freezers in aisle 6 were dirty. Please clean all shelves that are dirty in this aisle of freezers.</p>	6/26/18	

EDUCATION PROVIDED OR COMMENTS

Person in Charge /Title:	<i>W</i> William Britton	Date:	June 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:	June 26, 2018



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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. <b>These items MUST RECEIVE IMMEDIATE ACTION within 72 hours or as stated.</b>	Correct by (date)	Initial
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NOTE	<p>TEMPERATURES, in degrees Fahrenheit:</p> <p>MTC2B - 32    LTA6D - -5    LTA11B-8, LTA11A-10, MTC5B-36, MTC5A-32, MTC6B-30, MTC6A-30          MTC2A - 35    LTA5C - -9    MTD9B-38, MTD9C-40, MTD9D-40, MTD10A-36, MTD10B-40          MTC1B - 35, 40    LTA5B - -6    MTD10C-40, MTC7B-34, MTC7A-34, MTC9B-32, MTC9A-34          MTC4B - 29    LTA5A - -2    MTC10B-36, MTC10A-40, MTC12C-34, MTC12B-34, MTC12A-32          MTC4A - 34    LTA3D - -6    MTD8A-34, MTD8B-34, MTD8C-38, MTD12          LTB9 - -7    LTA3C - 0    MTD9A-41, MTC14D-30, MTC14A-32, MTC14B-40          MTD4A - 35    LTA3B - 1    MTC11A-28, MTC11B-32, MTC11D-34, MTC11F-28, MTC11E-30          MTD4C - 41    LTA3A - 5    MTC11C-36, MTC13F-38, MTC13E-32, MTC13C-30, MTC13A-32          MTD5A - 36    LTA7A - -5    MTC13B-36, MTC13D-38, LTB8F-8, LTB8E-0, LTB8C-4, LTB8A-10          MTD5B - 36    LTA7B - -1    LTB8B-0, LTB8D-8, LTB5A-0, LTB6B-10, LTB6D-0, LTB5B-0          MTD5C - 38    LTA7C - 0    LTB6C-0, LTB6A-0          Berry - 41, 33    LTA7D - -3          LTB3A - 13    LTA9A - -5          LTB3B - 14    LTA9B - -2          LTB3C - 12    LTA9C - 5          LTB3D - -5    Front beverage coolers: 36, 37, 30, 38,          LTB4A - -9          LTB4B - -6          LTB4C - -15          LTB4D - -9</p>		
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6-501.11	CUSTOMER BATHROOMS One toilet paper dispenser was held together with duct tape. Tape is not an approved method of repair. Please repair or replace the dispenser.	6/26/18	
4-601.11C	The fold-down child seat inside one stall was dirty. Please clean all surfaces of seat at least daily.	6/12/18	
5-205.15B	WAREHOUSE A water leak was observed at the mop sink faucet outside the produce prep room. A plumbing system shall be maintained in good repair. Please repair the leak.	6/26/18	
2-301.15	Hand wash provisions (soap, paper towels, and signage) were installed at the mop sink in the grocery receiving room. Food employees shall clean their hands in a hand wash sink or approved automatic hand washing facility and may not clean their hands in a sink used for food preparation or warewashing, or in a service sink or a curbed cleaning facility used for the disposal of mop water and similar liquid waste. Please remove the soap, towels and hand wash sign from the mop sink area.	6/15/18	
6-501.11	A hole was observed in the wall beside the mop sink in the grocery receiving room. Physical facilities shall be maintained in good repair. Please repair the wall.	6/26/18	

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Follow-up: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Follow-up Date: June 26, 2018