



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

TIME IN	2:58pm	TIME OUT	5:00pm
DATE	11-17-18	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: American Legion Post #39		OWNER: American Legion Post #39	PERSON IN CHARGE: Wayne Byrn	
ADDRESS: 5073 Flat River Road		ESTABLISHMENT NUMBER: 4433	COUNTY: 187	
CITY/ZIP: Leadington, 63601		PHONE: 573-431-6039	FAX: na	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"/> 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			IN OUT N/O N/A	Proper reheating procedures for hot holding		
<input checked="" type="checkbox"/> OUT	Management awareness; policy present			IN OUT N/O N/A	Proper cooling time and temperatures		
<input checked="" type="checkbox"/> OUT	Proper use of reporting, restriction and exclusion			IN OUT N/O N/A	Proper hot holding temperatures		
	Good Hygienic Practices			<input checked="" type="checkbox"/> OUT N/O N/A	Proper cold holding temperatures		
<input checked="" type="checkbox"/> OUT N/O	Proper eating, tasting, drinking or tobacco use			IN OUT N/O N/A	Proper date marking and disposition		<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/> OUT N/O	No discharge from eyes, nose and mouth			IN 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			IN OUT 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			IN OUT N/O N/A	Pasteurized foods used, prohibited foods not offered		
	Approved Source				Chemical		
<input checked="" type="checkbox"/> OUT	Food obtained from approved source			IN OUT N/A	Food additives: approved and properly used		
IN OUT <input checked="" type="checkbox"/> N/A	Food received at proper temperature			<input checked="" 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		
IN OUT N/O <input checked="" type="checkbox"/>	Required records available: shellstock tags, parasite destruction			IN OUT N/A	Compliance with approved Specialized Process and HACCP plan		
	Protection from Contamination						
<input checked="" type="checkbox"/> OUT N/A	Food separated and protected						
<input checked="" type="checkbox"/> OUT N/A	Food-contact surfaces cleaned & sanitized						
IN OUT <input checked="" type="checkbox"/>	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 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 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 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 checked="" type="checkbox"/>	<input type="checkbox"/>	Physical facilities installed, maintained, and clean		

Person in Charge/Title: Wayne Byrn		Date: November 17, 2018	
Inspector: <i>John Wiseman</i>	Telephone No. (573) 431-1947	EPHS No. 1507	Follow-up: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Follow-up Date: 12-10-18



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 BUREAU OF ENVIRONMENTAL HEALTH SERVICES
FOOD ESTABLISHMENT INSPECTION REPORT

ESTABLISHMENT NAME American Legion Post #39		ADDRESS 5073 Flat River Road		CITY /ZIP Leadington, 63601	
FOOD PRODUCT/LOCATION		TEMP. in ° F	FOOD PRODUCT/ LOCATION		TEMP. in ° F
Kelvinator refrigerator/freezer		36, 0			
Hamburger from grill		182			
Bar beer cooler		38			

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
4-201.12	A glass food thermometer was observed on the prep table near the grill in the kitchen. Food temperature measuring devices may not have sensors or stems constructed of glass. COS by discarding the thermometer.	COS	
6-501.111	Mouse droppings were observed on the floor in the kitchen area. The presence of insects, rodents, and other pest shall be controlled to minimize their presence on the premises. Please take action to minimize the presence of pests.	12-10-18	
3-501.17A	A discard date was not observed on an open package of hot dogs in the Kelvinator refrigerator in the kitchen. Potentially hazardous foods held refrigerated shall be marked with a discard date that is not greater than six days from the date of preparation or opening. COS by marking with a discard date.	COS	
6-501.111	Debris and mouse droppings were observed on a white shelf in the bar area. The presence of insects, rodents, and other pest shall be controlled to minimize their presence on the premises. Please take action to minimize the presence of pests.	12-10-18	

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
6-501.18	The hand wash sink in the kitchen is dirty. Plumbing fixtures such as hand washing sinks toilets, and urinals shall be cleaned as often as necessary to keep them clean. Please clean the hand wash sink.	12-10-18	
4-204.112 A	Thermometers were not observed inside the Kelvinator refrigerator and freezer. Refrigerators and freezers shall be equipped with a thermometer that accurately indicates the ambient temperature to within three degrees of actual temperature. Please place a thermometer in the refrigerator and freezer.		
5-205.15B	A water leak was observed from the plumbing below the hand wash sink in the kitchen. A plumbing system shall be maintained in good repair. Please repair the leak.		
6-501.14A	An accumulation of dirt and debris was observed on the ceiling fan louvers in the kitchen. Intake and exhaust vents and ducts shall be cleaned so they are not a source of contamination by dust, dirt, and other materials. Please clean the ceiling fan louvers.		
5-205.15B	A water leak was observed from plumbing below the three compartment sink in the kitchen. The leak has attempted to be mended with duct tape. A plumbing system shall be maintained in good repair. Please repair the leak.		
6-501.12A	An accumulation of grease was observed on surfaces below the table to the left of the flat-top grill. Physical facilities shall be cleaned as often as necessary to keep them clean. Please clean this area.		

EDUCATION PROVIDED OR COMMENTS

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Follow-up: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Follow-up Date: 12-10-18



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ESTABLISHMENT NAME American Legion Post #39	ADDRESS 5073 Flat River Road	CITY /ZIP Leadington, 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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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
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6-501.12A	An accumulation of grease and food debris was observed on the wall, conduit and outlets in the kitchen; especially near the grill. Physical facilities shall be cleaned as often as necessary to keep them clean. Please clean the walls in the kitchen.	12-10-18	
4-601.11C	An accumulation of food debris was observed on shelving below the prep counter in the kitchen. Non-food contact surfaces shall be kept free of an accumulation of dust, dirt, food residue and debris. Please clean this area.		
6-501.12A	Minor dust accumulation was observed on most horizontal surfaces in the kitchen area. Physical facilities shall be cleaned as often as necessary to keep them clean. Please clean surfaces in the kitchen.		
6-501.12A	An accumulation of grease, dirt and debris was observed on the floor in the kitchen; especially around equipment. Physical facilities shall be cleaned as often as necessary to keep them clean. Please clean the floor in the kitchen.		
6-501.12A	Dirt and debris was observed on the floor in the bar area. Physical facilities shall be cleaned as often as necessary to keep them clean. Please clean the floor in the bar area.		
6-501.114 A	Various pieces of unused soda equipment such as tanks, dispensing nozzles, mixing valves, etc. were observed in the bar area. The facility shall be free of items that are unnecessary to the maintenance or operation of the establishment such as equipment that is nonfunctional or no longer used. Please remove unused equipment.		

EDUCATION PROVIDED OR COMMENTS

Person in Charge Title:	Wayne Byrn	Date:	November 17, 2018
Inspector:	John Wiseman	Telephone No.:	(573)-431-1947
		EPHS No.:	1507
		Follow-up:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
		Follow-up Date:	12-10-18



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FOOD PRODUCT/LOCATION	TEMP. in ° F	FOOD PRODUCT/ LOCATION	TEMP. in ° F

Code Reference	PRIORITY ITEMS	Correct by (date)	Initial
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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.**

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Code Reference	CORE ITEMS	Correct by (date)	Initial
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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	The three compartment sink in the bar area is dirty. Plumbing fixtures such as hand washing sinks toilets, and urinals shall be cleaned as often as necessary to keep them clean. Please clean the sink.	12-10-18	WFB
6-501.12	An accumulation of dirt, debris and dead insects were observed on the floor in the bar area wash room. Physical facilities shall be cleaned as often as necessary to keep then clean. Please clean this area.		

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Date: November 17, 2018

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