



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

TIME IN	10:15 am	TIME OUT	12:16 pm
DATE	Dec. 4, 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: Knights of Columbus #1088	OWNER: Knights of Columbus #1088	PERSON IN CHARGE: James E. McGrath
ADDRESS: 7897 Berry Road	ESTABLISHMENT NUMBER: 4582	COUNTY: St. Francois
CITY/ZIP: Bonne Terre 63628	PHONE: 573.358.8701	FAX: none
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 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 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 <input type="checkbox"/> N/O <input type="checkbox"/> N/A	Proper cooking, time and temperature		
	Employee Health			<input type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/O <input 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 checked="" type="checkbox"/> N/O <input 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 checked="" type="checkbox"/> N/O <input 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 type="checkbox"/> N/A	Proper cold holding temperatures		
<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 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 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/C <input type="checkbox"/> N/A	Food received at proper temperature			<input type="checkbox"/> IN <input checked="" type="checkbox"/> Q/C	Toxic substances properly identified, stored and used		
<input type="checkbox"/> IN <input checked="" type="checkbox"/> Q/C	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						
<input type="checkbox"/> IN <input checked="" type="checkbox"/> Q/C <input type="checkbox"/> N/A	Food separated and protected				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"/> Q/C <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 type="checkbox"/>	<input checked="" type="checkbox"/>	Utensils, equipment and linens: properly stored, dried, handled		
		Food Temperature Control			<input type="checkbox"/>	<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 type="checkbox"/>	<input checked="" 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 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 type="checkbox"/>	<input checked="" type="checkbox"/>	Garbage/refuse properly disposed; facilities maintained		<input checked="" type="checkbox"/>
					<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Physical facilities installed, maintained, and clean		

Person in Charge /Title: <i>James E. McGrath</i> James E. McGrath	Date: December 4, 2018
Inspector: <i>Rose Mier</i> Rose Mier	Telephone No. (573)431-1947
EPHS No. 1390	Follow-up: Follow-up Date: Dec. 6, 2018
	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

Daniel Huff
Daniel Huff, EPHS #1645



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ESTABLISHMENT NAME Knights of Columbus #1088		ADDRESS 7897 Berry Road		CITY /ZIP Bonne Terre 63628	
FOOD PRODUCT/LOCATION		TEMP. in ° F	FOOD PRODUCT/ LOCATION		TEMP. in ° F
Frigidaire freezer, ambient		22	True refrigerator: ambient		36
Whirlpool freezer, ambient		26	Walk-in cooler, ambient		40
Chicken, stovetop		195 to 200	Kenmore freezer, ambient		0

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
4-601.11A	Debris observed on the inside of the EPCO heated cabinet, including inside of door. Please clean inside of cabinet as often as needed to protect food that is held inside the unit from contamination.	12/6/18	JEM
3-302.11A	Raw chicken was stored above Parmesan cheese, raw ground meat above potato chips, and raw shrimp next to tortilla chips in the Whirlpool freezer. Food shall be stored to prevent cross contamination. Please store raw poultry on the bottom, then raw ground meats, then raw whole muscle meats, then raw fish and seafood. Store all other foods above or separately from the raw animal-derived foods.	↓	↓
4-601.11A	Spider webs observed in the hood above the stoves. Please clean as often as needed to prevent debris from falling into food.		
3-101.11	A No. 10 can of peaches and an no. 10 can of tomato sauce were dented on their seam and/or crimped.		
3-202.15	Packaging shall protect the contents, and food shall be safe. Please open and discard contents.		
NOTE	Chicken and broth are cooled, then used to make chicken and dumplings. The cooling process is not monitored. Please cool food from 135F to 70F within two hours, then from 70F to 41F within an additional four hours. If the first benchmark is not met, the food may be reheated to 165F for 15 minutes and begin the cooling process again. If the second benchmark is not met, discard the food. To facilitate cooling: spread or pour into shallow containers; nest containers in ice water; stir with a frozen food paddle; add ice as an ingredient; if covered, provide vents to allow escape of steam. Please monitor time and temperature during cooling.		
7-201.11B	Dry erase cleaner was stored in a cup on the shelf above clean equipment, located in the serving area. Toxic items shall be stored separately from or below food, clean equipment, clean linens, and single-use items. Please store in an area where these items are protected.		

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
4-601.11C	Pooled water and debris observed inside the Kenmore keg cooler, located in the room holding the soda dispenser. Nonfood contact surfaces shall be cleaned at a frequency to prevent debris accumulation. Please clean inside of the cooler. Determine source of liquid, and repair, if necessary, to keep dry.	12/6/18	JEM
6-501.12A	Accumulation of debris observed on the floor of the room holding the ice freezer and extra food equipment. Physical facilities shall be cleaned at a frequency to prevent debris accumulation. Please clean floor.	↓	↓
4-904.11B	Utensils were stored with their handles facing down in a container on the table used for preparing baked foods. Utensils shall be stored with their handles up to prevent contamination of the food-contact surface when retrieving. Please invert utensils so the handles face up.		
3-302.12	A container of liquid was stored on the shelf above clean equipment in the dry storage room. According to staff, the container held food-grade mineral oil. Containers holding food that is not easily identifiable shall be labeled. Please label bottle.		
4-203.11A	The following thermometers were not accurate: The ambient temperature inside the Frigidaire freezer was 22, the thermometer read 30; the ambient temperature of the True refrigerator was 36F, but the thermometer read 42F. Thermometers shall be accurate. Please replace thermometers with accurate thermometers.		
4-601.11C	Spilled salt and pepper was observed in the wall cabinet in the serving area. Please clean.		
4-601.11C	Spider webs observed in a base cabinet holding plates, located in the serving area. Please clean cabinet.		

EDUCATION PROVIDED OR COMMENTS

Person in Charge / Title: <i>JEM</i> James E. McGrath		Date: December 4, 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: Dec. 6, 2018



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4-601.11A	Debris observed on the tray holders of the mobile rack, located inside the walk-in cooler. Please clean the rack to protect food from contamination when trays are slid on or off.	12/6/18	JEM
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4-601.11C	Cobwebs and dust observed in some of the grates over the air intake vents and HVAC vents in the ceiling. Ventilation systems shall not be a source of contamination. Please clean all dirty vents.	12/6/18	JEM
4-601.11C	Mold observed on the grate over the condenser fans, and on the condenser body, inside the walk-in cooler. Please clean and sanitize to reduce mold growth.	12/6/18	J ↓
4-502.13A	A used single-service aluminum pan and lid were observed on the clean equipment rack in the dry storage room. Single-use items may not be reused. Please discard all single-use items after use.	12/6/18	
5-501.113B	One lid on the outside trash dumpster was open. Outside trash receptacles shall be lidded. CORRECTED ON SITE by closing the lid.	COS	

EDUCATION PROVIDED OR COMMENTS

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Follow-up: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Follow-up Date: Dec. 6, 2018