



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

TIME IN	8:52am	TIME OUT	12:03pm
DATE	3-6-19	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: Save-A-Lot	OWNER: Can Stockers, Inc.	PERSON IN CHARGE: Matt Bishop
ADDRESS: 140 Vierse Drive	ESTABLISHMENT NUMBER: 0116	COUNTY: 187
CITY/ZIP: Farmington, 63640	PHONE: 573-756-7272	FAX: 573-756-7453
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 type="checkbox"/> H <input type="checkbox"/> M <input checked="" type="checkbox"/> L
ESTABLISHMENT TYPE <input 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		
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 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 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"/> OUT	Management awareness; policy present			<input 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"/> OUT	Proper use of reporting, restriction and exclusion			<input 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 type="checkbox"/> NO <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"/> NO <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 checked="" type="checkbox"/> NO <input 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"/> NO <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"/> NO <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 type="checkbox"/> IN <input checked="" 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"/> NO <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 type="checkbox"/> IN <input checked="" 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"/>	<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				<input checked="" type="checkbox"/>	Utensils, Equipment and Vending		
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Thermometers provided and accurate			<input type="checkbox"/>	<input checked="" 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				<input checked="" type="checkbox"/>	Physical Facilities		
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Insects, rodents, and animals not present			<input type="checkbox"/>	<input checked="" 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 type="checkbox"/>	<input checked="" type="checkbox"/>	Physical facilities installed, maintained, and clean		

Person in Charge / Title:	Matt Bishop	Date:	March 6, 2019
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:	3-20-19



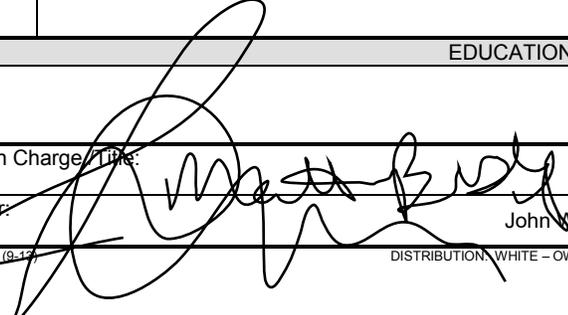
MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES
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ESTABLISHMENT NAME Save-A-Lot		ADDRESS 140 Vierse Drive		CITY /ZIP Farmington, 63640	
FOOD PRODUCT/LOCATION		TEMP. in ° F	FOOD PRODUCT/ LOCATION		TEMP. in ° F
Meat cutting room ambient		40	Coffin coolers at meat dept		40, 30
Grinder room ambient		30	Convenience food freezers		0, 0
Ground beef in cutting room		36	Produce cases, dairy cases		30-30, 36-38
Walk-in cooler/freezer		30, 0			
Fresh meat/RTE meat cases		34-38, 30-32			

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
7-201.11B	Temperatures (F) Aisle 8 coffin freezers:0,9,14,17,10,2,4,17,1,5,11,8,2,19 A wall-mounted supply of multi-purpose cleaner was observed leaking into basins of the three compartment sink in the meat cutting room. Cans of bathroom cleaner and disinfectant were observed stored on the drain-board of the sink as well. Toxic materials shall be stored so they cannot contaminate food, equipment, single use items and clean linens. Please repair the leak from the wall-mounted detergent dispenser and remove the bathroom cleaner and disinfectant from this area.	3-20-19	MB
4-601.11A	Dried food debris was observed on surfaces of the meat slicer in the meat cutting room. Food contact surfaces shall be clean to sight and touch. Please thoroughly clean and sanitize the slicer after using.	3-6-19	
4-601.11A	Dried meat debris was observed on inner surfaces of the meat grinder in the meat department. Food contact surfaces shall be clean to sight and touch. Please thoroughly clean all surfaces of the grinder daily. NOTE: A three compartment sink located in the warehouse area is no longer used to clean food equipment as produce is no longer packaged on-site. This sink is used as a hand wash sink and a mop sink. Please provide soap and paper towels from a dispenser at the left side basin of the sink and put a hand wash sign above it.	3-6-19	

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	The hand wash sink in the meat cutting room has become unattached from the wall. Plumbing systems shall be maintained in good repair. Please securely fasten the sink to the wall.	3-20-19	MS
5-205.15B	Cold water was not available at the three compartment sink in the meat cutting room. A plumbing system shall be maintained in good repair. Please restore cold water service to the sink.		
5-501.13A	A cardboard box was being used as a trashcan in the meat cutting room. Receptacles for refuse shall be durable, cleanable, non-absorbent and leakproof. Please provide a plastic trash can for the cutting room.		
6-501.11	A hole of approximately four inches in diameter was observed in the FRP-board wall near the meat saw in the meat cutting room. Physical facilities shall be maintained in good repair. Please repair the wall.		
4-601.11C	Dried meat debris was observed on surfaces of the wrapping station in the meat cutting room. Non-food contact surfaces shall be kept free of an accumulation of dust, dirt, food residue and debris. Please clean the wrapping station as often as necessary to keep it clean.		
6-501.12A	Blood splatters were observed on the walls neat the meat grinder in the meat department. Physical facilities shall be cleaned as often as necessary to keep clean. Please clean the walls in the grinder room.		

EDUCATION PROVIDED OR COMMENTS

Person in Charge/Title:  Matt Bishop		Date: March 6, 2019
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: 3-20-19



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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
3-302.11A	Raw eggs were stored atop a case of yogurt in the walk-in cooler. Food shall be protected from contamination by separating raw animal foods from ready to eat foods. COS by relocating the eggs.	COS	
2-401.11A	A container of employee food was stored on a shelf above eggs in the walk-in cooler. Employee foods shall be stored so that contamination of facility food, equipment and single use items cannot occur. Please store employee food and beverages away from facility food and equipment.	3-6-19	
3-302.11A	Raw salt pork and packages of raw bacon were stored above ready to eat foods in the bacon/lunchmeat cases. Food shall be protected from contamination by separating raw animal foods from ready to eat foods. Please relocated raw animal products so that they are not above ready to eat foods.	3-6-19	
3-202.15	Four cans of vegetables were observed with damage to the top seal of the can. Food packages shall be in good condition and protect the integrity of the contents. COS by removing these items from sale.	COS	

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6-202.11A	An unshielded fluorescent light bulb is installed in the produce case. Light bulbs installed in areas of food preparation or storage shall be fully shielded or shatter resistant. Please provide shielding for the bulb.	3-20-19 	
4-601.11C	An accumulation of food debris was observed on the upper panel of the cooler case above the refrigerated biscuits. 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	An accumulation of dirt, food debris and dead insects was observed on the floor below storage racks in the reach-in milk cooler. Physical facilities shall be cleaned as often as necessary to keep them clean. Please thoroughly clean the floor below the racks.		
6-202.11A	Some of the light bulbs in the milk reach-in cooler are without shielding and some are missing end-caps. Light bulbs installed in areas of food preparation or storage shall be fully shielded or shatter resistant. Please ensure that all light bulbs in the cooler are properly shielded.		

EDUCATION PROVIDED OR COMMENTS

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Inspector:		Telephone No. (573)-431-1947	EPHS No. 1507	Follow-up: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Follow-up Date: 3-20-19