



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

TIME IN	10:08am	TIME OUT	12:33pm
DATE	6-8-20	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: Huddle House		OWNER: J. B. Contracting		PERSON IN CHARGE: Lizzy Lesley	
ADDRESS: 8 Chat Road			ESTABLISHMENT NUMBER: 4598		COUNTY: 187
CITY/ZIP: Leadington, 63601		PHONE: 573-431-7000		FAX: na	
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 <input type="checkbox"/> C. STORE <input type="checkbox"/> CATERER <input type="checkbox"/> DELI <input type="checkbox"/> GROCERY STORE <input type="checkbox"/> INSTITUTION <input type="checkbox"/> MOBILE VENDORS <input checked="" type="checkbox"/> RESTAURANT <input type="checkbox"/> SCHOOL <input type="checkbox"/> SENIOR CENTER <input type="checkbox"/> SUMMER F.P. <input type="checkbox"/> TAVERN <input type="checkbox"/> TEMP.FOOD					
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		
	<b>Employee Health</b>			<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 checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/O <input type="checkbox"/> N/A	Proper hot holding temperatures		
	<b>Good Hygienic Practices</b>			<input type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/O <input type="checkbox"/> N/A	Proper cold holding temperatures		
<input type="checkbox"/> IN <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 checked="" type="checkbox"/> N/O <input type="checkbox"/> N/A	Time as a public health control (procedures / records)		
	<b>Preventing Contamination by Hands</b>				<b>Consumer Advisory</b>		
<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				<b>Highly Susceptible Populations</b>		
<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		
	<b>Approved Source</b>				<b>Chemical</b>		
<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/O <input type="checkbox"/> N/A	Food received at proper temperature			<input checked="" type="checkbox"/> IN <input 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	✓			<b>Conformance with Approved Procedures</b>		
<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		
	<b>Protection from Contamination</b>				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 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"/> 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 checked="" type="checkbox"/>	<input type="checkbox"/>	Utensils, equipment and linens: properly stored, dried, handled		
		<b>Food Temperature Control</b>			<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					<b>Utensils, Equipment and Vending</b>		
<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		
		<b>Food Identification</b>			<input type="checkbox"/>	<input checked="" type="checkbox"/>	Warewashing facilities: installed, maintained, used; test strips used		
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Food properly labeled; original container			<input checked="" type="checkbox"/>	<input type="checkbox"/>	Nonfood-contact surfaces clean		
		<b>Prevention of Food Contamination</b>					<b>Physical Facilities</b>		
<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 type="checkbox"/>	<input checked="" type="checkbox"/>	Physical facilities installed, maintained, and clean		

Person in Charge / Title: Lizzy Lesley		Date: June 8, 2020	
Inspector: John Wiseman	Telephone No. (573)431-1947	EPHS No. 1507	Follow-up: Follow-up Date: 6-22-20 <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No



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 FOOD ESTABLISHMENT INSPECTION REPORT

ESTABLISHMENT NAME Huddle House		ADDRESS 8 Chat Road	CITY/ZIP Leadington, 63601
FOOD PRODUCT/LOCATION		TEMP. in ° F	FOOD PRODUCT/ LOCATION
Hot hold: grits, white gravy		155, 143	Cooler drawers: ambient, raw burger,
Reach-in cooler below tea urns: ambient,		46	diced tomatoes, american cheese
baked potatoes, mac & cheese, chili		43-47, 46, 48	Delfield freezer
Grill cold table: ham, cheese, mushrooms		36, 40, 36	Delfield cooler: ambient, raw egg
Sausage from the grill		197	Condiment cooler
			40

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.**

4-601.11A	Temperatures cont. (F) Walk-in cooler: ambient = 34F, baked potatoes = 35F, raw beef steak = 35F, white gravy = 36F Walk-in freezer: ambient = 10F	6-8-20	
3-501.16B	Encrusted food debris was observed on the inside of the impeller of the Hamilton Beach mixer near the hand wash sink at the cookline. Food contact surfaces shall be cleaned to sight and touch. If in constant use, food contact surfaces shall be cleaned and sanitized at least every four hours.	6-22-20	
2-401.11	The ambient air temperature of the reach-in cooler below the tea urns at the cookline was measured at 46F. Foods in this cooler: baked potatoes = 43-47F, mac & cheese = 46F, chili = 48F. Potentially hazardous food held refrigerated shall be held at 41F or less. Potentially hazardous foods in this cooler were discarded. Do not place perishable foods in this cooler until it has been repaired or adjusted to hold food temperatures at 41F or less.	COS	
3-501.16B	A container of employee food in the form of non-dairy creamer was stored on a shelf above the work surface at the cookline. Employee food and personal articles shall be stored so that contamination of food, equipment and single use items cannot occur. COS by removing the food item.	6-22-20	ML
	The ambient temperature of the cooler drawers below the grill cold table was measured at 46F. Foods in the cooler drawers: raw hamburger = 43F, diced tomato = 48F, sliced American cheese = 47F. Potentially hazardous food held refrigerated shall be held at 41F or less. The tomatoes and cheese were discarded. Do not place perishable foods in this cooler until it has been repaired or adjusted to hold food temperatures at 41F or less.		

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.**

4-204.112	A thermometer was not present in the reach-in cooler below the tea urns in at the cookline. Mechanically refrigerated food cooling units shall be provided with a thermometer which accurately measures the ambient temperature to within three degrees F. Please place an accurate thermometer in the cooler.	6-22-20	
4-302.12A	A food thermometer was not present at the cookline for cooks' use. Food temperature measuring devices shall be provided and readily accessible for use in ensuring attainment and maintenance of food temperatures. The digital thermometer was retrieved from the office area and tested for accuracy. Please make the thermometer readily accessible for cooks' use.		
6-501.12A	Minor food debris was observed on the floor throughout the back room area. Physical facilities shall be cleaned as often as necessary to keep them clean. Please clean the floor.		
5-205.15B	A water leak was observed at the faucet at the three compartment sink in the back room area. A plumbing system shall be maintained in good repair. Please repair the leak.		
4-302.14	Chlorine sanitizer test strips were not available for checking sanitizer strength in the mechanical dishwasher. A test strip of kit shall be provided to measure sanitizer concentrations. Please provide appropriate test strips.		
5-501.113	The outside dumpster lids were open. Outside refuse storage shall be covered to discourage access by insects, rodents and vermin. Please close the dumpster lids after use.		

EDUCATION PROVIDED OR COMMENTS

Person in Charge /Title: <i>Lizzy Lesley</i>	Lizzy Lesley	Date: June 8, 2020
Inspector: <i>John Wiseman</i>	John Wiseman	Telephone No. (573)431-1947
	EPHS No. 1507	Follow-up: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
		Follow-up Date: 6-22-20



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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
4-601.11A	Minor food debris was observed in the microwave ovens at the cookline. Food contact surfaces shall be clean to sight and touch. It is recommended that sanitizer pails with wiping cloths be placed in the cookline areas for wiping and sanitizing surfaces such counters and equipment. Employee beverages were observed stored atop the ice machine in the back room. Employee food and personal articles shall be stored so that contamination of food, equipment and single use items cannot occur. Please store employee food so that it cannot contaminate anything. Quaternary sanitizer was not available at the three compartment sink. The reservoir was empty. COS by providing more sanitizer solution.	6-8-20	
2-401.11		6-8-20	
4-702.11		6-8-20	

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