



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

TIME IN	9:40am	TIME OUT	1:25pm
DATE	6/2/2020	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: Don Hawkins	PERSON IN CHARGE: Clint Price/ Manager
ADDRESS: 3 Northwood Drive	ESTABLISHMENT NUMBER: 0730	COUNTY: St. Francois
CITY/ZIP: Bonne Terre, 63628	PHONE: 573-358-2233	FAX: 573-358-4099
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 <input type="checkbox"/> C. STORE <input type="checkbox"/> CATERER <input type="checkbox"/> DELI <input checked="" type="checkbox"/> GROCERY STORE <input type="checkbox"/> INSTITUTION <input type="checkbox"/> MOBILE VENDORS <input 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. _____		WATER SUPPLY <input checked="" type="checkbox"/> PUBLIC <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 type="checkbox"/> N/O <input checked="" type="checkbox"/> N/A	Proper cooking, time and temperature		
	<b>Employee Health</b>			<input type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/O <input checked="" 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 type="checkbox"/> N/O <input checked="" 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 type="checkbox"/> N/O <input checked="" 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 checked="" type="checkbox"/> N/A	Proper cold holding temperatures		<input checked="" type="checkbox"/>
<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 checked="" 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)		
	<b>Preventing Contamination by Hands</b>				<b>Consumer Advisory</b>		
<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/O	Hands clean and properly washed	<input checked="" type="checkbox"/>		<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 type="checkbox"/> IN <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/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	<input checked="" type="checkbox"/>			<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 checked="" type="checkbox"/> OUT <input 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 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"/>	Single-use/single-service articles: properly stored, used		<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Adequate equipment for temperature control				<input checked="" type="checkbox"/>	Gloves used properly		<input checked="" type="checkbox"/>
<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 type="checkbox"/>	<input checked="" 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 type="checkbox"/>	<input checked="" type="checkbox"/>	Nonfood-contact surfaces clean		
		<b>Prevention of Food Contamination</b>				<input checked="" type="checkbox"/>	<b>Physical Facilities</b>		
<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 type="checkbox"/>	<input checked="" type="checkbox"/>	Contamination prevented during food preparation, storage and display	<input checked="" type="checkbox"/>		<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 type="checkbox"/>	<input checked="" type="checkbox"/>	Physical facilities installed, maintained, and clean		

Person in Charge /Title: <i>Clint Price</i>	Clint Price/ Manager	Date: 6/2/2020
Inspector: <i>Nicholas Joggerst</i>	Nicholas Joggerst	Telephone No. (573)431-1947
	EPHS No. 1687	Follow-up: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
		Follow-up Date: 6/16/2020



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**FOOD ESTABLISHMENT INSPECTION REPORT**

ESTABLISHMENT NAME Save-A-Lot		ADDRESS 3 Northwood Drive	CITY/ZIP Bonne Terre, 63628
FOOD PRODUCT/LOCATION	TEMP. in ° F	FOOD PRODUCT/ LOCATION	TEMP. in ° F
Chest Freezers (South)	18,13,20,11,15	Fresh meat case	36,34,31
Aisle 9 ice cream/Frozen Foods	2,14,16,20,7	R-T-E/Raw bacon and sausage case	39,40,40
West Wall Freezer (near receiving)	3,20,1	Hot dog Chest freezer	28
Pick 5 Freezer Case	-3,-8,0	Milk Cooler	38,36,40
Chicken Chest Freezer	22		

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
3-302.11A	Raw fish was in contact with packaged potatoes; also Raw sausage was above cooked sausage biscuits in the Pick 5 Case. Food Shall be protected from cross contamination by separating in the vertical order top to bottom: Ready-to-Eat, Seafood, Whole Muscle Meats, and Poultry/eggs. Please rearrange in the following order.	COS	CP
3-302.11A	Ground Turkey was above whole muscle Pork Butt in fresh food case. Food Shall be protected from cross contamination by separating in the vertical order top to bottom: Ready-to-Eat, Seafood, Whole Muscle Meats, and Poultry/eggs. Please rearrange in the following order.		
3-302.11A	Raw bacon was observed above cooked ham and cooked bacon in the R-T-E cooler/ raw bacon cooler. Food Shall be protected from cross contamination by separating in the vertical order top to bottom: Ready-to-Eat, Seafood, Whole Muscle Meats, and Poultry/eggs. COS by rearranging food items in correct order.		
3-202.15	A can of baked beans was dented and crimped on its seam. Food packages shall be in good condition to protect their contents. COS by discarding.		
4-601.11A	There was a build-up of debris inside the scale and on the slicer not being used in meat dept. Food-contact surfaces shall be clean to sight and touch. Please wash, rinse, and sanitize, these items and allow to air dry.		
2-301.14H	An Employee was observed donning gloves without washing hands in meat dept. Employees shall wash hands before donning gloves and before working with food. COS by discussion.		
4-501.114	No sanitizer was available at the 3-Vat possibly due to cold water being turned off. A chemical sanitizer used in a sanitizing solution for a manual operation at contact times specified under 4-703.11C shall be used in accordance with EPA-registered label-use instructions. Please provide sanitizer at the 3-vat.		

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). <b>These items are to be corrected by the next regular inspection or as stated.</b>	Correct by (date)	Initial	
4-601.11C	Debris was observed in the bottom of the Milk cooler and R-T-E Cooler. Non food-contact surfaces shall be clean to sight and touch. Please clean out the coolers so they are clean.	6/16/2020	CP	
5-205.11A, 5-205.15B	When trying to use the hand-wash sink in the meat cutting room the sink failed and started leaking; the problem was temporarily solved by turning off the cold water. A plumbing system shall be maintained in good repair; hand-washing sinks shall be maintained. Please repair the sink so it functions properly.			
6-101.11A3	Blocks of wood in the meat cutting room used to stabilize the plumbing system were unpainted and subject to moisture. Surfaces subject to moisture in prep areas shall be non-absorbent. Please paint these 2x4 blocks so they do not rot or support mold growth.			
6-201.13B	There was no coving in the meatpacking room observed. Floors in food establishments in which water flush cleaning is used shall be graded to drain and the floor and wall junctures shall be coved and sealed. Please Trim out the wall junctures with non-absorbent material.			
6-501.12A	Debris was observed beneath the slicer on the floor and beneath the 3-vat/hand-wash sink. Physical facilities shall be cleaned at a frequency to prevent an accumulation of debris. Please clean out the debris as necessary to prevent an accumulation.			
4-903.11A	Single-service items were stored on the floor of the meat packing room. Single service items shall be kept six inches up off the floor. COS by moving up off floor.			COS

**EDUCATION PROVIDED OR COMMENTS**

A line through an item on page 1 means not observed or not applicable.

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Inspector:	Nicholas Joggerst	Telephone No. (573)431-1947	EPHS No. 1687
		Follow-up: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Follow-up Date: 6/16/2020



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FOOD PRODUCT/LOCATION		TEMP. in ° F	FOOD PRODUCT/ LOCATION		TEMP. in ° F
Egg Case		35,33,36	Meat cutting Fridge overflow		40
Veggie Cooler (Cut Lettuce/Dressing)		45(adjusted)41	Storage Freezer		11
Pepsi coolers: Aisles 4,3,2		44,43,41			
Meat Room		45			

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4-602.11D2	When questioned, employees stated equipment in the meat packing room was cleaned every 24 hours. The temperature of the room was 45-48F. Utensils and equipment used to prepare potentially hazardous food may be cleaned less than every 24 hours based on temperature. This corresponding temperature has a cleaning frequency of 16 hours. Please clean equipment and utensils every 16 hours or turn temperature down so it maintains 41F.	6/3/2020	CP
3-501.16A2	Cut Lettuce was held at a temp of 45 degrees. Potentially hazardous Foods shall be held at 41F. COS by turning Temperature down on thermostat.	COS	
4-601.11A	There was a build-up of debris on the scale and on the station used to wrap food in the back staging room. Food-contact surfaces shall be clean to sight and touch. Please wash, rinse, and sanitize, these items and allow to air dry.	6/3/2020	
7-201.11A	Toxic Materials were stored near and on the sink used to wash vegetables. Toxic items shall be separated so they cannot contaminate food by the use of separation or a barrier. Please separate the items.		

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6-301.14	There was no hand wash sign in the bathroom next to the employee bathroom in the staging area. A sign or poster shall be provided at all hand-washing sinks used by food employees and shall be clearly visible to all employees. COS by providing signage.	COS	CP
6-501.114 A,B	There was an abundance of clutter and unused items on top of the freezers in storage. The premises shall be free of unused items and litter. Please dispose of unused items.	6/16/2020	

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