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

| TIME IN 9:22am | TIME OUT 11:00am |
|---|---|
| DATE 4-22-2021 | PAGE 1 of 2 |

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: Bismarck Senior Center | OWNER: Aging Matters | | PERSON IN CHARGE: Betty Jellinek/ Administrator |
|---|---|---|---|
| ADDRESS: 922 Center Street | | ESTABLISHMENT NUMBER: 0768 | COUNTY: St. Francois |
| CITY/ZIP: Bismarck, 63624 | PHONE: 573-734-2429 | FAX: 573-734-2648 | P.H. PRIORITY : ■ H ☐ M ☐ L |

ESTABLISHMENT TYPE
☐ BAKERY ☐ C. STORE ☐ CATERER ☐ DELI ☐ GROCERY STORE ☐ INSTITUTION ☐ MOBILE VENDORS
☐ RESTAURANT ☐ SCHOOL ■ SENIOR CENTER ☐ SUMMER F.P. ☐ TAVERN ☐ TEMP.FOOD

PURPOSE
☐ Pre-opening ■ Routine ☐ Follow-up ☐ Complaint ☐ Other _____

FROZEN DESSERT
☐ Approved ☐ Disapproved ■ Not Applicable
License No. _____

SEWAGE DISPOSAL
■ PUBLIC
☐ PRIVATE

WATER SUPPLY
■ COMMUNITY ☐ NON-COMMUNITY ☐ 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 |
|---|---|---|---|
| ✓IN OUT | Person in charge present, demonstrates knowledge, and performs duties | | |
| | **Employee Health** | | |
| ✓IN OUT | Management awareness; policy present | | |
| ✓IN OUT | Proper use of reporting, restriction and exclusion | | |
| | **Good Hygienic Practices** | | |
| IN ✓OUT N/O | Proper eating, tasting, drinking or tobacco use | ✓ | |
| ✓IN OUT N/O | No discharge from eyes, nose and mouth | | |
| | **Preventing Contamination by Hands** | | |
| ✓IN OUT N/O | Hands clean and properly washed | | |
| ✓IN OUT N/O | No bare hand contact with ready-to-eat foods or approved alternate method properly followed | | |
| ✓IN OUT | Adequate handwashing facilities supplied & accessible | | |
| | **Approved Source** | | |
| ✓IN OUT | Food obtained from approved source | | |
| IN OUT ✓N/O N/A | Food received at proper temperature | | |
| ✓IN OUT | Food in good condition, safe and unadulterated | | |
| IN OUT N/O ✓N/A | Required records available: shellstock tags, parasite destruction | | |
| | **Protection from Contamination** | | |
| ✓IN OUT N/A | Food separated and protected | | |
| ✓IN OUT N/A | Food-contact surfaces cleaned & sanitized | | |
| IN OUT ✓N/O | Proper disposition of returned, previously served, reconditioned, and unsafe food | | |

| Compliance | Potentially Hazardous Foods | COS | R |
|---|---|---|---|
| IN OUT ✓N/O N/A | Proper cooking, time and temperature | | |
| IN OUT ✓N/O N/A | Proper reheating procedures for hot holding | | |
| ✓IN OUT N/O N/A | Proper cooling time and temperatures | | |
| ✓IN OUT N/O N/A | Proper hot holding temperatures | | |
| ✓IN OUT N/A | Proper cold holding temperatures | | |
| IN ✓OUT N/O N/A | Proper date marking and disposition | ✓ | |
| IN OUT N/O ✓N/A | Time as a public health control (procedures / records) | | |
| | **Consumer Advisory** | | |
| IN OUT ✓N/A | Consumer advisory provided for raw or undercooked food | | |
| | **Highly Susceptible Populations** | | |
| ✓IN OUT N/O N/A | Pasteurized foods used, prohibited foods not offered | | |
| | **Chemical** | | |
| ✓IN OUT N/A | Food additives: approved and properly used | | |
| ✓IN OUT | Toxic substances properly identified, stored and used | | |
| | **Conformance with Approved Procedures** | | |
| IN OUT ✓N/A | Compliance with approved Specialized Process and HACCP plan | | |

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 |
|---|---|---|---|---|
| ✓ | | Pasteurized eggs used where required | | |
| ✓ | | Water and ice from approved source | | |
| | | **Food Temperature Control** | | |
| ✓ | | Adequate equipment for temperature control | | |
| ✓ | | Approved thawing methods used | | |
| ✓ | | Thermometers provided and accurate | | |
| | | **Food Identification** | | |
| ✓ | | Food properly labeled; original container | | |
| | | **Prevention of Food Contamination** | | |
| ✓ | | Insects, rodents, and animals not present | | |
| ✓ | | Contamination prevented during food preparation, storage and display | | |
| ✓ | | Personal cleanliness: clean outer clothing, hair restraint, fingernails and jewelry | | |
| ✓ | | Wiping cloths: properly used and stored | | |
| ✓ | | Fruits and vegetables washed before use | | |

| IN | OUT | Proper Use of Utensils | COS | R |
|---|---|---|---|---|
| ✓ | | In-use utensils: properly stored | | |
| ✓ | | Utensils, equipment and linens: properly stored, dried, handled | | |
| ✓ | | Single-use/single-service articles: properly stored, used | | |
| ✓ | | Gloves used properly | | |
| | | **Utensils, Equipment and Vending** | | |
| | ✓ | Food and nonfood-contact surfaces cleanable, properly designed, constructed, and used | | |
| ✓ | | Warewashing facilities: installed, maintained, used; test strips used | | |
| ✓ | | Nonfood-contact surfaces clean | | |
| | | **Physical Facilities** | | |
| ✓ | | Hot and cold water available; adequate pressure | | |
| ✓ | | Plumbing installed; proper backflow devices | | |
| ✓ | | Sewage and wastewater properly disposed | | |
| ✓ | | Toilet facilities: properly constructed, supplied, cleaned | | |
| ✓ | | Garbage/refuse properly disposed; facilities maintained | | |
| | ✓ | Physical facilities installed, maintained, and clean | | |

| Person in Charge/Title: Betty Jellinek/ Administrator | | | Date: April 22, 2021 |
|---|---|---|---|
| Inspector: Nicholas Joggerst | Telephone No. (573)431-1947 | EPHS No. 1687 | Follow-up: ☐ Yes ■ No<br>Follow-up Date: |

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**FOOD ESTABLISHMENT INSPECTION REPORT**



| ESTABLISHMENT NAME | ADDRESS | CITY /ZIP |
|---|---|---|
| Bismarck Senior Center | 922 Center Street | Bismarck, 63624 |

| FOOD PRODUCT/LOCATION | TEMP. in ° F | FOOD PRODUCT/ LOCATION | TEMP. in ° F |
|---|---|---|---|
| Hot Held green beans and bacon | 197 | Hot held turkey and noodles | 187 |
| True fridge 1 (amb.) cooling cole slaw 1 hour | 41/49 | True fridge 2 (amb.) sausage gravy | 32/34 |
| Walk-in Fridge (amb.) | 38 | Walk-in Freezer (amb.) | 17 |
| cooling cole slaw 2 hours | 44 | | |
| | | | |

| 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 |
|---|---|---|---|
| 2-401.11A | Lit cigarette was observed in staff area that directly adjoined the kitchen. Smoking shall take place in designated area where it cannot contaminate food and clean equipment. Please smoke in areas where smoke cannot enter food prep area. COS by discussion. | COS | |
| 3-501.17A | No potentially hazardous food in True fridge near the hot holding unit was observed with date labeling. Potentially hazardous food shall be clearly marked with a seven day disposition date. COS by having staff date label items and discard sausage gravy that was according to staff seven days old. | COS | |
| NOTE: | Discharge line of the ice maker in back prep area was observed beneath flood rim of drain. This interconnected to prep sink which appeared to create an air break affect for the ice maker. Please ensure this has appropriate back flow protection for the ice maker. | | |
| NOTE: | Dining area closed due to COVID-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 |
|---|---|---|---|
| 6-501.11 | Drop ceiling above the three vat appeared to be water stained. Physical facilities shall be maintained in good repair. Please replace the damaged ceiling tile and check for water leaks. | 5/15/2021 | |
| 4-101.17A | Wooden spoon was observed in the kitchen intermingled with other dishes. Wood may not be used as a food contact surface unless it is hard maple or similarly hard grained closed wood. Please remove of wood utensil products that do not meet this criteria. | 5/2/2021 | |

EDUCATION PROVIDED OR COMMENTS

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

| Person in Charge /Title: | Betty Jellinek/ Administrator | | Date: April 22, 2021 | |
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