

MO 580-1814 (9-13)

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

TIME IN 915			TIME OUT 1020		
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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: FAMILY DOLLAR PERSON IN CHARGE OWNER: WANDA AVITTS FAMILY DOLLAR STORES INC ADDRESS: 401 FIRST STREET COUNTY: 069 CITY/ZIP: KENNETT, MO FAX: PHONE 63857 H M 🔳 L P.H. PRIORITY: ESTABLISHMENT TYPE BAKERY RESTAU ■ INSTITUTION C. STORE CATERER SENIOR CENTER DELI
SUMMER F.P. GROCERY STORE ☐ MOBILE VENDORS TEMP.FOOD RESTAURANT TAVERN POSE ☐ Pre-opening ☐ Follow-up ☐ Complaint ☐ Other Routine FROZEN DESSERT SEWAGE DISPOSAL WATER SUPPLY ☐ PRIVATE ☐ Approved ☐ Disapproved PUBLIC COMMUNITY ■ NON-COMMUNITY □ PRIVATE Date Sampled Results License No NA 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 Compliance Potentially Hazardous Foods Person in charge present, demonstrates knowledge. Proper cooking, time and temperature OUT IN OUT N/O N and performs duties IN OUT N/O N Proper reheating procedures for hot holding Employee Health OUT IN OUT N/O N Proper cooling time and temperatures Management awareness; policy present OUT Proper use of reporting, restriction and exclusion OUT N/O Proper hot holding temperatures OUT N/A Proper cold holding temperatures Good Hygienic Practices OUT N/O Proper eating, tasting, drinking or tobacco use OUT N/O N/A Proper date marking and disposition No discharge from eyes, nose and mouth Time as a public health control (procedures / OUT N/O IN OUT N/O N records) Consumer Advisory Preventing Contamination by Hands Hands clean and properly washed Consumer advisory provided for raw or N/O OUT IN OUT undercooked food No bare hand contact with ready-to-eat foods or Highly Susceptible Populations OUT N/O approved alternate method properly followed Adequate handwashing facilities supplied & Pasteurized foods used, prohibited foods not OUT OUT N/O N/A accessible offered Approved Source Chemical OUT Food obtained from approved source OUT N/A Food additives: approved and properly used Food received at proper temperature Toxic substances properly identified, stored and IN OUT N N/A OUT OUT Food in good condition, safe and unadulterated Conformance with Approved Procedures Required records available: shellstock tags, parasite Compliance with approved Specialized Process NEE IN OUT N/O N/A IN OUT destruction and HACCP plan Protection from Contamination Food separated and protected The letter to the left of each item indicates that item's status at the time of the OUT N/A inspection. Food-contact surfaces cleaned & sanitized OUT = not in compliance OUT N/A IN = in compliance N/A = not applicable N/O = not observed Proper disposition of returned, previously served, IN OUT 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 R IN OUT cos R Safe Food and Water COS Proper Use of Utensils X Pasteurized eggs used where required × In-use utensils: properly stored Water and ice from approved source Utensils, equipment and linens: properly stored, dried, × × handled Food Temperature Control × Single-use/single-service articles: properly stored, used Adequate equipment for temperature control × Gloves used properly X Approved thawing methods used Utensils, Equipment and Vending Thermometers provided and accurate Food and nonfood-contact surfaces cleanable, properly × × designed, constructed, and used Food Identification Warewashing facilities: installed, maintained, used; test × strips used × Food properly labeled; original container × Nonfood-contact surfaces clean Prevention of Food Contamination Physical Facilities Insects, rodents, and animals not present × Hot and cold water available; adequate pressure Contamination prevented during food preparation, storage Plumbing installed; proper backflow devices × × and display Sewage and wastewater properly disposed Personal cleanliness: clean outer clothing, hair restraint, × X fingernails and jewelry Wiping cloths: properly used and stored Toilet facilities: properly constructed, supplied, cleaned × × Garbage/refuse properly disposed; facilities maintained Fruits and vegetables washed before use Physical facilities installed, maintained, and clean Person in Charge /Title: WANDA AVITTS Date: 01/28/2019 anole EPHS No. 1 No Telephone No. Follow-up: Inspector 573-888-9008 1647 Follow-up Date:

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TIME IN 915			TIME OUT 1020		
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FAMILY DOLLAR FOOD PRODUCT/LOCATION MILK/ FRONT COOLER ICE CREAM		ADDRESS 401 FIRST STREET ADDRESS KENNETT,			MO		
		TEMP. in ° F FOOD PRODUCT/ Lo		LOCATION	TEMP.	in ° F	
		38					
		14					
	PIZZA	11			-		
Code		PRIORITY	ITEMS		Correct by	Initial	
Reference	or injury. These items MUST RECE	ority items contribute directly to the elimination, prevention or reduction to an acceptable level, hazards associated with foodborne njury. These items MUST RECEIVE IMMEDIATE ACTION within 72 hours or as stated.					
5-203.14	NO BACKFLOW PREVENTION	ON MOPSINK, FAUCET NOZZ	LE IS LOWER THAN FLOOD	BASIN.	NRI	WA	
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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.						
6-202.15A3	(REPEAT) OBSERVED LAR				NRI	WH	
5-501.17	NO COVERED WASTEBASKET IN EMPLOYEES BATHROOM						
6-301.14	NO EMPLOYEE HAND WASHING SIGNAGE IN RESTROOM						
4-601.11C	DUST AND DEBRI BUILD UP UNDER AISLE RACKS IN MAIN LOBBY OF STORE						

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VRI	NEXT ROUTINE INSPECTIO	N					
cos	CORRECTED ON SIGHTS						
		EDUCATION PROV	IDED OR COMMENTS				
D 1 01				Date:			
Person in Charge /Title: WANDA AVITTS Wanek Av. 4 Date: 01/28/2							
Inspector:	11/1/11/11	Telephone No 573-888-900	. EPHS No.	Follow-up:	Yes	☑ No	
MO 580-1814 (9-13)	my you I fly	DISTRIBUTION: WHITE - OWNER'S COR		Follow-up Date:		E6.37A	