

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

TIME IN 1030 TIME OUT 1145

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BASED ON AN INSPECTION THIS DAY, THE ITEMS NOTINEXT ROUTINE INSPECTION, OR SUCH SHORTER PER WITH ANY TIME LIMITS FOR CORRECTIONS SPECIFIED ESTABLISHMENT NAME: KENNETT MIDDLE SCHOOL	IOD OF TIME AS MAY BE SPEC	CIFIED IN	I WRITI SATION	ING BY T N OF YOU	HE REGUL	ATORY AUTHORI	TY. F.	AILUR	E 10	COME	oLA SA LHE
ADDRESS: 510 COLLEGE					COUNTY: 06	39					
CITY/ZIP: KENNETT, MO 63857 PHONE: 573-717-1108			FAX: P.H. PRIORI				ΓY:		1]м[] L
ESTABLISHMENT TYPE BAKERY C. STORE CATERER CATERER SCHOOL SENIOR C			ROCEF WERN	RY STORI		NSTITUTION EMP.FOOD] MOE	IILE V	ENDO	RS
Purpose Routine Follow-up	☐ Complaint ☐ Other										
FROZEN DESSERT Approved Disapproved PUBLIC License No. NA		TER SU COMM			NON-COI Date Sar	MMUNITY mpled		PRI\ Re	VATE sults		
	RISK FACTORS AND										
Risk factors are food preparation practices and employee foodborne illness outbreaks. Public health interventions	behaviors most commonly reportant control measures to prevent	ted to the foodborn	e Cente e illness	rs for Disa s or injury						ırs in	
Compliance Demonstration of King	wiledge COS F	R Com	pliance			estentially Hazardi sking, time and ten				С	OS R
OUT Person in charge present, demonstrates knowledge, and performs dutles		-		/O N/A		-			ling	-	
OUT Management awareness; policy p	ih present					oling time and temp	beratui		nig	\pm	
OUT Proper use of reporting, restriction	clicies:	IN C N/O N/A Proper hot holding temperatures OUT N/A Proper cold holding temperatures									
OUT N/O Proper eating, tasting, drinking or	tobacco use	_		IO NIA	Proper det	e marking and disp public health contr	positio al (pro	n ocedur	es /	+	
OUT N/O Reducting notified eyes, note and		ם או	UT N	/O N	records)	Carlaumer Ad					
OUT N/O Hands clean and properly washed		IN	OUT	NB.	Consumer	advisory provided	for ra	W or			
OUT N/O No bare hand contact with ready-		+				ighty Susceptible I	opula	tions			
approved alternate method properly followed OUT Adequate handwashing facilities supplied &				d foods used, prof	nibited	foods	not				
accessible Approved Soun		-			offered	Cherica	E				
OUT Food obtained from approved sou			OUT	N/A		tives: approved and tances properly id				j	
IN OUT 1930 INDE		-		OUT	used	mance with Appro					
OUT Food in good condition, safe and IN OUT N/O Required records available: shells		OUT N/A Compliance With approved Specialize and HACCP plan									
destruction Protection from Conta	rinsion	+=			and HAGE	Ppian					
OUT N/A Food separated and protected			etter to	the left of	each item i	ndicates that item's	s statu	is at th	e time	of the)
OUT N/A Food-contact surfaces cleaned & sanitized		IN = in compliance OUT = not in compliance N/A = not applicable N/O = not observed									
IN OUT Proper disposition of returned, pre reconditioned, and unsafe food										AND DESCRIPTION OF THE PARTY OF	
Good Retail Practices are prevente	GOOD RETAIL stive measures to control the intro		of patho	gens, che	enticals, and	physical objects i	nto foc	ods.			
IN OUT Sala Four and Water	COS R	IN	TUO			ger Use of Utensil	ž iii			CDS	s R
Pasteurized eggs used where required Water and ice from approved source		×		In-use utensils: properly stored Utensils, equipment and linens: properly stored, dried,					ed,		
Flood Temperature Constal		×		handled Single-use/single-service articles: properly stored, used							
X Adequate equipment for temperature con		×		Gloves u	sed properl	y Equiposent and Vi	nzaclizita	4111			
X Approved thawing methods used X Thermometers provided and accurate		×		Food and	d nonfood-c	ontact surfaces cla ed, and used	anabl	e, proj	erly		
Food Identification		+	×	Warewa	shing faciliti	es: installed, maint	tained,	, used;	test		
X Food properly labeled; original container		×		Strips us Nonfood	-contact sur	faces clean					
Prevention of Food Contamin	ellor.	×		Physics Facilities Hot and cold water available; adequate pressure				-	_		
Insects, rodents, and animals not present Contamination prevented during food preparation, storage		×				proper backflow de					
Personal degaliness: clean outer clothing, hair restraint.		×		Sewage	and wastev	vater properly disp	osed				
fingernails and jewelry Wiping cloths: properly used and stored		×		Toilet facilities: properly constructed, supplied, cleaned						#	
X Fruits and vegetables washed before use		×				perly disposed; fac stalled, maintained			ned		
Person in Charge /Title: MARGARET WEE	3B ()) els	1-	-		te: 09/30/20					
Inspector: 7/1/	Telephone No.		E	EPHS No	o. Fo	llow-up:		Yes		7	Nα
MO 580-1814 (6-13)	573-888-9008			647 Canary - Fil		llow-up Date:	_	_	_	_	E6.37



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ESTABLISHME KENNE	NT NAME FT MIDDLE SCHOOL	ADDRESS 510 COLLEGE	INETT, MO 638	63857			
FOOD PRODUCT/LOCATION		TEMP. in ° F	FOOD PRODUCT/ LOCA	TION	TEMP. in		r F
Walk in Freezer		0 Rolls/Warmer				180	
	Walk in Cooler	37	Win Holt			135	
	Dish Washer	173					
	Mashed Potatoes	128					
	Green Beans/Stove Top	206					
Code Reference	Priority tems contribute directly to the or injury. These items MUST RECEIV	PRIORITY IT a mination, prevention or reduction E IMMEDIATE ACTION within 72 :	to an acceptable level, hazards astociate	ed with facultionne illness	Edela) Sieży	C14437 C1130 111	in Hal
3-501.17	Sliced ham and onion in cooler no	t dated, shall be dated with 7da		cos	7	DW	
3-501.16A	Mashed Potatoes in warmer temp		cos	1	hw		
Code Reference 4-501.11 4-301.12B	Winholt warmer temp at 135 d	s). These items are to be connecte egrees on high, shall be hott	wis. Todays, equipment example general man- if by the next regular inspection or as ter to hold temp on food 135 or a ge enough to properly wash, rins	above	Correct Idate		Mai
7-001.125							/
cos	Corrected onsite						
NRI	Next Routine Inspection	EDUCATION PROVID	DED OR COMMENTS				
	No. 10 PTAL			Date: eo (eo (oo			
Person in C	Charge /Title: MARGARET W		We .	Date: 09/30/20			k1:
Inspector:	for the	Telephore No. 573-888-9008	EPHS No. 1647 CANARY - FILE COPY	Follow-up: Follow-up Date:	Yes	7	No E5.37A