

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

TIME IN 900			TIME OUT 1030
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BASED ON AN INSPECTION THIS DAY, THE ITEMS NOTED BELOW IDENTIFY NONCOMPLIANCE IN OPERATIONS OF 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: OWNER:				R-2 SCHOOL DISTRICT			JODI FOWLER			
ADDRESS: HWY 53 SOUTH							COUNTY: 069			
CITY/ZIP: CAMPBELL, MO 63933 PHONE: 573-246-3109				FAX:			P.H. PRIORITY : [■ H □ N	1] L
STABLISHMENT TYPE BAKERY C. STORE CATERER DELI GROCERY STORE INSTITUTION MOBILE VENDORS RESTAURANT SCHOOL SENIOR CENTER SUMMER F.P. TAVERN TEMP.FOOD								.S		
PURPOSE Pre-opening Routine Follow-up Complaint Other										
FROZEN DESSERT □ Approved □ Disapproved □ PUBLIC □ PRIVATE □ PRIVATE □ Date Sampled □ PRIVATE □ PRIVATE										
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										
Compliance Period Theorem (Recyclific light Control measures to prevent foodborne illness or injury. Compliance Period Theorem (Recyclific light Cost of the Cost										
OUT	Person in charge present, demons and performs duties	trates knowledge.			OUT N/O N/A Proper cooking, time and temperature					
Employee Health OUT Management awareness; policy present				IN OUT NO N/A Proper reheating procedures for hot holding IN OUT NO N/A Proper cooling time and temperatures						
OUT	Proper use of reporting, restriction Scioc Hygierius Prace	and exclusion		OUT 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		OUT N/O N/A Proper date marking and disposition						
OUT N/O	, , ,		IN C	IN OUT N/O N records) Time as a public hearth control (procedures / records)					-	
OUT N/O Hands clean and properly washed				IN OUT Consumer advisory provided for raw or undercooked food						
OUT N/O No bare hand contact with ready-to-eat foods or approved alternate method properly followed						hly Susceptible Populati	ons			
OUT Adequate handwashing facilities supplied & accessible					OUT N/O N/A	Pasteurized offered	foods used, prohibited for	oods not		
■ OUT	Approved Source	\$			OUT N/A	Food additiv	Chemical es: approved and proper	rlv used	_	
IN OUT NI NIA Food obtained from approved source Food received at proper temperature				OUT Toxic substances properly identified, stored and used						
OUT Food in good condition, safe and unadulterated						. Conform	iance with Approved Pro With approved Specializ	cedures		
IN OUT N/O	destruction				OUT N/A	and HACCP				
OUT N/A	Food separated and protected	III THURCHT		The letter to the left of each item indicates that item's status at the time of the						
IN OF N/A Food-contact surfaces cleaned & sanitized			In spection. IN = in compliance OUT = not in compliance							
IN OUT	Proper disposition of returned, pre reconditioned, and unsafe food	viously served,		N/	A = not applicab	le	N/O = not observed			
	Good Retail Practices are prevente		D RETAIL F			emicels and r	hysical phiects into food	is.		
IN OUT	Sala e ios and Malei.	IVA MEASONAS ID CON		IN	OUT	Prese	er Use of Utensia		cos	R
Past Wat	teurized eggs used where required er and ice from approved source		_	×	In-use t Utensils	itensils: proper	ily stored nd linens: properly stored	d, dried,		
×				×	handled	handled Single-use/single-service articles: properly stored, used			-	
Fixed Temperature Control Adequate equipment for temperature control			×		used properly	ice articles, properly stol	reu, useu			
	roved thawing methods used						gribrieti ses merngum			
× The	rmometers provided and accurate			×		nd nonfood-car d, constructed	ntact surfaces cleanable, , and used	, properly		
Food identification				×	Warewa strips us	ashing facilities: installed, maintained, used; test				
Food properly labeled; original container Freysenlion of Fueld Contamination				×	Nonfood	d-contact surfaces clean				
X Insects, rodents, and animals not present				×	Hot and	cold water av	ailable; adequate pressu	Ire		
Contamination prevented during food preparation, storage and display				Plumbing installed; proper backflow devices						
Personal cleanliness: clean outer clothing, hair restraint, fingernails and jewelry				Sewage and wastewater properly disposed Toilet facilities: properly constructed, supplied, cleaned						
Wiping cloths: properly used and stored Fruits and vegetables washed before use				X	Garbag	e/refuse prope	rly disposed; facilities ma	aintained		
Person in Charge /Title: JODI FOWLER Person in Charge /Title: JODI FOWLER Date: 10/07/2020										
Inspector Telephone No. EPHS No. Follow-up: Yes No										
1.1/6	Mr. I Pier	2/3-88	90-9UUB		1647		ow-up Date:			E8.37



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ESTABLISHMENT NAME CAMPBELL R-2 SCHOOL		HWY 53 SOUTH	CAMPBELL, M	CAMPBELL, MO 63933			
FOOD PRODUCT/LOCATION Left Dairy Cooler Right Dairy Cooler McCall Hot Hold		TEMP. in ° F	FOOD PRODUCT/ LOCATION	TEMP. in " F			
		39	Mashed Potatoes/Warmer	135			
		3537	Dishwasher	170			
		180	Walk in Cooler	35			
	Chicken Strips/Warmer	155	Walk in Freezer	0			
	McCall Cooler	39					
Cock Reference	Priority tems contribute directly to the criming. These items MUST RECE	PRICRITY IT	to an acceptable level, tazards associated with food home a county or as statest.	inges datas			
Code Reference	Core items relate to general salatati standard operating procedures (SSG	CORE ITES Al operational controls facilities at St Ans). These Rems are to be connecti	45 Lizurus, equipment eosugi, qeneral maintenance or sandali ed by the next regular inspection of as stated.	Correct by Initial (charle)			
NRI CIP	Next Routine Inspection Correction in progress						
Person in	Charge /Title: JODI FOWLE	R Telephone No. 573-888-9008	Date: 10/07	☐ Yes ☑ No			