



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

TIME IN 830	TIME OUT 1300
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: Faulkners Grocery		OWNER: Mir W. Khan		PERSON IN CHARGE: Alyz Khosa	
ADDRESS: 108 S Frisco Street				COUNTY: Dunklin	
CITY/ZIP: Arbyrd, MO		PHONE: 573-654-3830		FAX:	
PURPOSE: <input type="checkbox"/> Pre-opening <input checked="" type="checkbox"/> Routine <input type="checkbox"/> Follow-up <input type="checkbox"/> Complaint <input type="checkbox"/> Other					
ESTABLISHMENT TYPE <input type="checkbox"/> BAKERY <input type="checkbox"/> RESTAURANT <input type="checkbox"/> C. STORE <input type="checkbox"/> SCHOOL <input type="checkbox"/> CATERER <input type="checkbox"/> SENIOR CENTER <input type="checkbox"/> DELI <input type="checkbox"/> SUMMER F.P. <input type="checkbox"/> GROCERY STORE <input type="checkbox"/> TAVERN <input type="checkbox"/> INSTITUTION <input type="checkbox"/> TEMP. FOOD <input type="checkbox"/> MOBILE VENDORS		P.H. PRIORITY: <input checked="" type="checkbox"/> H <input type="checkbox"/> M <input type="checkbox"/> L			
FROZEN DESSERT <input type="checkbox"/> Approved <input type="checkbox"/> Disapproved		SEWAGE DISPOSAL <input checked="" type="checkbox"/> PUBLIC <input type="checkbox"/> PRIVATE		WATER SUPPLY <input checked="" type="checkbox"/> COMMUNITY <input type="checkbox"/> NON-COMMUNITY Date Sampled _____	
License No. _____		PRIVATE 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			IN OUT N/O <input checked="" type="checkbox"/>	Proper cooking, time and temperature		
	Employee Health			IN OUT N/O <input checked="" type="checkbox"/>	Proper reheating procedures for hot holding		
<input checked="" type="checkbox"/> OUT	Management awareness; policy present			IN OUT N/O <input checked="" type="checkbox"/>	Proper cooling time and temperatures		
<input checked="" type="checkbox"/> OUT	Proper use of reporting, restriction and exclusion			<input checked="" type="checkbox"/> OUT N/O N/A	Proper hot holding temperatures		
	Good Hygienic Practices			IN <input checked="" type="checkbox"/> N/A	Proper cold holding temperatures		
IN OUT <input checked="" type="checkbox"/>	Proper eating, tasting, drinking or tobacco use			IN <input checked="" type="checkbox"/> N/O N/A	Proper date marking and disposition		
IN OUT <input checked="" type="checkbox"/>	No discharge from eyes, nose and mouth			IN OUT N/O <input checked="" type="checkbox"/>	Time as a public health control (procedures / records)		
	Preventing Contamination by Hands				Consumer Advisory		
<input checked="" type="checkbox"/> OUT N/O	Hands clean and properly washed			IN OUT <input checked="" type="checkbox"/>	Consumer advisory provided for raw or undercooked food		
IN OUT <input checked="" type="checkbox"/>	No bare hand contact with ready-to-eat foods or approved alternate method properly followed				Highly Susceptible Populations		
IN <input checked="" type="checkbox"/>	Adequate handwashing facilities supplied & accessible			<input checked="" type="checkbox"/> OUT N/O N/A	Pasteurized foods used, prohibited foods not offered		
	Approved Source				Chemical		
<input checked="" type="checkbox"/> OUT	Food obtained from approved source			<input checked="" type="checkbox"/> OUT N/A	Food additives: approved and properly used		
IN OUT <input checked="" type="checkbox"/> N/A	Food received at proper temperature			IN <input checked="" type="checkbox"/>	Toxic substances properly identified, stored and used		
IN <input checked="" type="checkbox"/>	Food in good condition, safe and unadulterated				Conformance with Approved Procedures		
IN OUT N/O <input checked="" type="checkbox"/>	Required records available: shellstock tags, parasite destruction			IN OUT <input checked="" type="checkbox"/>	Compliance with approved Specialized Process and HACCP plan		
	Protection from Contamination						
IN <input checked="" type="checkbox"/> N/A	Food separated and protected						
<input checked="" type="checkbox"/> <input checked="" type="checkbox"/> N/A	Food-contact surfaces cleaned & sanitized						
IN OUT <input checked="" type="checkbox"/>	Proper disposition of returned, previously served, reconditioned, and unsafe food						

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

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 checked="" type="checkbox"/>		Pasteurized eggs used where required			<input checked="" type="checkbox"/>		In-use utensils: properly stored		
<input checked="" type="checkbox"/>		Water and ice from approved source			<input checked="" type="checkbox"/>		Utensils, equipment and linens: properly stored, dried, handled		
		Food Temperature Control			<input checked="" type="checkbox"/>		Single-use/single-service articles: properly stored, used		
<input checked="" type="checkbox"/>		Adequate equipment for temperature control			<input checked="" type="checkbox"/>		Gloves used properly		
<input checked="" type="checkbox"/>		Approved thawing methods used					Utensils, Equipment and Vending		
	<input checked="" type="checkbox"/>	Thermometers provided and accurate			<input checked="" type="checkbox"/>		Food and nonfood-contact surfaces cleanable, properly designed, constructed, and used		
		Food Identification			<input checked="" type="checkbox"/>		Warewashing facilities: installed, maintained, used; test strips used		
	<input checked="" type="checkbox"/>	Food properly labeled; original container			<input checked="" type="checkbox"/>		Nonfood-contact surfaces clean		
		Prevention of Food Contamination					Physical Facilities		
<input checked="" type="checkbox"/>		Insects, rodents, and animals not present			<input checked="" type="checkbox"/>		Hot and cold water available; adequate pressure		
	<input checked="" type="checkbox"/>	Contamination prevented during food preparation, storage and display			<input checked="" type="checkbox"/>		Plumbing installed; proper backflow devices		
<input checked="" type="checkbox"/>		Personal cleanliness: clean outer clothing, hair restraint, fingernails and jewelry			<input checked="" type="checkbox"/>		Sewage and wastewater properly disposed		
	<input checked="" type="checkbox"/>	Wiping cloths: properly used and stored			<input checked="" type="checkbox"/>		Toilet facilities: properly constructed, supplied, cleaned		
<input checked="" type="checkbox"/>		Fruits and vegetables washed before use			<input checked="" type="checkbox"/>		Garbage/refuse properly disposed; facilities maintained		
					<input checked="" type="checkbox"/>		Physical facilities installed, maintained, and clean		

Person in Charge / Title: Alyz Khosa			Date: 03/2/2023		
Inspector: <i>[Signature]</i>		Telephone No. 573-888-9008		EPHS No. 1647	
		Follow-up: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Follow-up Date: 03/08/2023	



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ESTABLISHMENT NAME		ADDRESS		CITY/ZIP	
Faulkners Grocery		108 S Frisco Street		Arbyrd, MO	
FOOD PRODUCT/LOCATION		TEMP. in ° F	FOOD PRODUCT/ LOCATION		TEMP. in ° F
Produce Display		34	Mashed Potatoes/Hot Hold		171
Meat Display		39	Walk in Cooler Meat		39
Diary Cooler		Not Working	Migali		35
Chicken/Hot Hold		169	Kratos		-5
Produce walk in cooler		38	Walk in Freezer		
Code Reference	PRIORITY ITEMS			Correct by (date)	Initial
	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.				
3-501.17	Multiple items not dated correctly Coleslaw dated Feb 25 to March 04, Chicken salad Feb 28 to M04 - shall be dated with 7 day discard date			3/8/23	A.K.
3-501.17	Multiple ready to eat foods in deli not dated (Bolagna, Ham, Turkey, Sliced Tomatoes etc)			3/8/23	A.K.
7-102.11	Unlabeled spray bottle on pizza prep cooler =, if not in original container shall be labeled			3/8/23	A.K.
4-601.11A	Cutting board heavily scarred below scales in meat room, repair or replace			3/8/23	A.K.
3-501.17	Multiple ready to eat foods in Migali cooler not dated (Cooked Chicken)			3/8/23	A.K.
3-501.17	Ready to eat food not dated in walk in cooler (open potato salad, coleslaw)			3/8/23	A.K.
4-601.11A	Vent hood soiled with dust and debris			3/8/23	A.K.
3-501.18	Multiple items past Sell By Dates (Smoked sausage 3, Kielbaska 5, Bars Chicken 12pakcs)			COS	A.K.
3-701.11	Fat trimmings in produce cooler covered with green residue, discard			COS	A.K.
3-701.11	Two bags of vanilla laying on floor behind produce door soiled and past dates, discard			COS	A.K.
3-701.11	Dairy cooler not working (Eggs 70 degrees, Multiple cheeses 70 degrees - details will be listed on embargo paperwork)			Embargo	A.K.
Code Reference	CORE ITEMS			Correct by (date)	Initial
	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.				
3-302.12	Unlabeled dry goods below coffee maker, if not in original container shall be labeled			3/8/23	A.K.
3-304.14	Wiping cloths laying on counter in deli and meat room, shall be placed in sanitizer when not in use			3/8/23	A.K.
4-601.11B	Cardboard on shelving in walk in cooler, soiled, shall not use absorbent materials in high moisture				
4-204.112	No thermometer in pizza prep cooler			3/8/23	A.K.
4-302.14	No test strips for checking sanitizer			3/8/23	A.K.
6-301.12	No paper towels and Deli, Meat and restroom handsinks			3/8/23	A.K.
6-501.18	Handsink dirty in kitchen			3/8/23	A.K.
6-501.114	Unnessecary items below scales in meat prep room			3/8/23	A.K.
4-601.11B	Paper on shelving soiled with food and debris			3/8/23	A.K.
6-201.11	Floors soiled with food and debris in walk in cooler			3/8/23	A.K.
4-601.11B	Shelving rusted in walk in cooler repair or replace			3/8/23	A.K.
6-501.11	Ceiling tiles above Migali cooler wet and sagging repair or replace			3/8/23	A.K.
6-201.11	Floor in Vegetable prep room soiled with food and debris			3/8/23	A.K.
6-501.16	Mops laying in bucket shall be hung when not in use			3/8/23	A.K.
4-204.112	No thermometer in Walk in cooler Produce			3/8/23	A.K.
6-201.11	Floors soiled in rear stock room, clean			3/8/23	A.K.
6-501.114	Along outside of building and rear soiled with trash and debris			3/8/23	A.K.
EDUCATION PROVIDED OR COMMENTS					
re					
Person in Charge /Title: Alyz Khosa <i>ALYZ</i>				Date: 03/2/2023	
Inspector: <i>[Signature]</i>	Telephone No. 573-888-9008	EPHS No. 1647	Follow-up: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Follow-up Date: 03/08/2023		