



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

TIME IN 930	TIME OUT 1300
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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: Faulkners Grocery		OWNER: Amar Khowaja	PERSON IN CHARGE: Alyz Khosa
ADDRESS: 108 S Frisco Street		CITY/ZIP: Arbyrd, MO	COUNTY: Dunklin
PHONE: 573-654-3830	FAX:	P.H. PRIORITY: <input checked="" type="checkbox"/> H <input type="checkbox"/> M <input type="checkbox"/> L	
ESTABLISHMENT TYPE <input type="checkbox"/> BAKERY <input type="checkbox"/> C. STORE <input type="checkbox"/> CATERER <input type="checkbox"/> DELI <input type="checkbox"/> GROCERY STORE <input type="checkbox"/> INSTITUTION <input type="checkbox"/> MOBILE VENDORS <input type="checkbox"/> RESTAURANT <input type="checkbox"/> SCHOOL <input type="checkbox"/> SENIOR CENTER <input type="checkbox"/> SUMMER F.P. <input type="checkbox"/> TAVERN <input type="checkbox"/> TEMP. FOOD			
PURPOSE <input type="checkbox"/> Pre-opening <input type="checkbox"/> Routine <input checked="" type="checkbox"/> Follow-up <input type="checkbox"/> Complaint <input type="checkbox"/> Other			
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	<input type="checkbox"/> PRIVATE Date Sampled _____ Results _____
License No. _____			

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			IN <input checked="" type="checkbox"/> N/O N/A	Proper hot holding temperatures		
	Good Hygienic Practices			<input checked="" type="checkbox"/> OUT 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			<input checked="" type="checkbox"/> OUT	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"/>	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: 03/08/2023
Inspector: <i>[Signature]</i>	Telephone No. 573-888-9008
EPHS No. 1647	Follow-up: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	Follow-up Date: 03/09/2023



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ESTABLISHMENT NAME Faulkners Grocery		ADDRESS 108 S Frisco Street		CITY /ZIP Arbyrd, MO		
FOOD PRODUCT/LOCATION		TEMP. in ° F	FOOD PRODUCT/ LOCATION		TEMP. in ° F	
Produce Display			Cheeseburger/Hot Hold (temp. increased when identified)		130	
Meat Display			Walk in Cooler Meat			
Diary Cooler			Migali			
Pizza /Hot Hold (temp increased when identified)		119	Kratos			
Produce walk in cooler			Walk in Freezer			
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
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				3/09/23	AK
3-501.17	Multiple ready to eat foods in deli not dated (Bolagna, Ham, Turkey, Sliced Tomatoes etc)				3/09/23	AH
4-601.11A	Cutting board heavily scarred below scales in meat room, repair or replace				3/09/23	K
3-501.17	Multiple ready to eat foods in Migali cooler not dated (Cooked Chicken)				3/09/23	K
3-501.17	Ready to eat food not dated in walk in cooler (open potato salad, coleslaw)				3/9/23	.
4-601.11A	Vent hood soiled with dust and debris				3/9/23	A
3-501.16A	Pizza and cheeseburgers being hot held below 135 (120 and 130)- temperatures of hot hold units adjusted at time identified.				3/9/23	
3-701.11	Dairy cooler not working (Eggs 70 degrees, Multiple cheeses 70 degrees - details will be listed on embargo paperwork				Embargo	
	All items identified as past the 7-day discard date or without a date were voluntarily discarded.				COS	AH
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
4-204.112	No thermometer in pizza prep cooler				3/22/23	AK
4-302.14	No test strips for checking sanitizer				3/22/23	AK
6-301.12	No paper towels and Deli, Meat and restroom handsinks				3/22/23	AK
6-501.18	Handsink dirty in kitchen				3/22/23	AK
6-201.11	Floors soiled with food and debris in walk in cooler				3/22/23	AK
4-601.11B	Shelving rusted in walk in cooler repair or replace				3/22/23	AK
6-501.11	Ceiling tiles above Migali cooler wet and sagging repair or replace				3/22/23	AK
6-201.11	Floor in Vegetable prep room soiled with food and debris				3/22/23	AK
6-501.16	Mops laying in bucket shall be hung when not in use				3/22/23	AK
4-204.112	No thermometer in Walk in cooler Produce				3/22/23	AK
EDUCATION PROVIDED OR COMMENTS						
re						
Person in Charge /Title: Alyz Khosa <i>ALYZ</i>					Date: 03/08/2023	
Inspector: <i>John P. Blum</i>	Telephone No. 573-888-9008		EPHS No. 1647		Follow-up: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
					Follow-up Date: 03/09/2023	