



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

DATE 10.4.10	PAGE 1 OF 2
TIME IN 10:20	TIME OUT 11:50

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 Kingston K-14 School (MS Cafe)	OWNER Kingston K-14 School District	PERSON IN CHARGE Cheryl Belt
ADDRESS 10047 Diamond Road	ESTABLISHMENT LICENSE NO.	COUNTY Washington
CITY/ZIP CODE Cadet, MO 63630	TELEPHONE NUMBER 573.438.4982	FAX NUMBER 573.438.8818
ESTABLISHMENT TYPE		REGION Southeast

ESTABLISHMENT TYPE

Bakery  C. Store  Caterer  Deli  Grocery Store  Institution  Mobile

Restaurant  School  Senior Center  Summer F.P.  Tavern  Temporary

SEWAGE DISPOSAL <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private DNR Regulated	WATER SUPPLY DNR Regulated Collected by establish <input type="checkbox"/> Community <input checked="" type="checkbox"/> Non-Community <input type="checkbox"/> Private Date Sampled: 8-9-10 Result: Satisfactory	FROZEN DESSERT <input type="checkbox"/> Approved <input type="checkbox"/> Disapproved <input checked="" type="checkbox"/> Not Applicable License Number: _____
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PURPOSE

Pre-Opening  Follow-Up  Routine  Complaint  Other

FOOD PRODUCT	TEMP	LOCATION	FOOD PRODUCT	TEMP	LOCATION
Pizza	185°	Oven Cooking Temp.	Milk	39°	Large Walk-in Cooler
Milk	40°	Milk Cooler	Pizza	147	Metro Hot Hold
Cheese	40°	Small Walk-in Cooler			
Butter Noodles	187°	Serving Line Hot Hold			

**RISK FACTORS AND INTERVENTIONS**

COMPLIANCE	DEMONSTRATION OF KNOWLEDGE	CODE REF.	R	COS	COMPLIANCE	POTENTIALLY HAZARDOUS FOODS TIME & TEMPERATURE	CODE REF.	R	COS
<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT	Designated PIC, demonstration of knowledge and PIC duties	2-101.11 2-102.11 2-103.11			<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/O <input type="checkbox"/> N/A	Proper cooking, time and temperature	3-401.11-13		
<b>EMPLOYEE HEALTH</b>					<input type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/O <input checked="" type="checkbox"/> N/A	Reheating for hot holding	3-403.11		
<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT	Management awareness, policy present. Proper use of reporting restrictions and exclusion	2-201.11-15			<input type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/O <input checked="" type="checkbox"/> N/A	Cooling	3-501.14		
<b>GOOD HYGIENIC PRACTICES</b>					<input type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/O <input checked="" type="checkbox"/> N/A	Parasite destruction	3-402.11		
<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT	Eating, tasting, drinking or tobacco use	2-401.11			<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/O <input type="checkbox"/> N/A	Hot holding	3-501.16		
<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT	Discharges from eyes, nose, or mouth	2-401.12			<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/O <input type="checkbox"/> N/A	Cold holding	3-501.16		
<b>CONTROL OF HANDS AS A VEHICLE OF CONTAMINATION</b>					<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/O <input type="checkbox"/> N/A	Date marking and disposition	3-501.17 3-501.18		
<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT	Clean condition, cleaning procedure, when to wash, and where to wash	2-301.11-12 2-301.14-15			<input type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/O <input checked="" type="checkbox"/> N/A	Time as a public health control (procedures / records)	3-501.19		
<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT	Bare hand contact with ready-to-eat foods	3-301.11			<b>CONSUMER ADVISORY</b>				
<b>APPROVED SOURCE</b>					<input type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A	Consumer advisory for raw or undercooked food	3-603.11		
<input type="checkbox"/> IN <input type="checkbox"/> OUT	Food obtained from approved source	3-201.11-17			<b>HIGHLY SUSCEPTIBLE POPULATIONS</b>				
<input type="checkbox"/> IN <input checked="" type="checkbox"/> N/O	Receiving temperature / condition	3-202.11-19			<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/O <input type="checkbox"/> N/A	Pasteurized foods used, prohibited foods not offered	3-801.11		
<input type="checkbox"/> IN <input type="checkbox"/> OUT	Records: shellstock tags, parasite destruction, required HACCP plan	3-202.18 3-203.12 3-402.11-12			<b>CHEMICAL</b>				
<b>PROTECTION FROM CONTAMINATION</b>					<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A	Toxic substances properly identified, stored and used	7-1, 7-2, 7-3		
<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT	Food segregated, separated and protected	3-302.11			<input type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A	Additives / approved, unapproved	3-202.12 3-302.14		
<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT	Food contact surfaces cleaned & sanitized; cleaning frequency	4-601.11A 4-602.11			<b>CONFORMANCE WITH APPROVED PROCEDURES</b>				
<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT	Food display, consumer self-service, returned food / re-service of food	3-306.11-14			<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A	Compliance with HACCP plan, variance / specialized process			
<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT	Preventing contamination from equipment	3-304.11			<b>IN = In Compliance</b> <b>OUT = Not In Compliance</b> <b>N/A = not applicable</b>				
<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT	Discarding / reconditioning unsafe food	3-701.11			<b>COS = Corrected on Site</b> <b>R = Repeat</b> <b>N/O = Not Observed</b>				

RECEIVED BY (PERSON IN CHARGE/TITLE) Leta A. Lutz	DATE 10/6/2010
INSPECTOR/TELEPHONE NUMBER Jesse Douglas, EPHS 573-438-2164	EPHS NO. 945
FOLLOW-UP <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	DATE OF FOLLOW-UP



**FOOD ESTABLISHMENT INSPECTION REPORT**

10-4-10

2 OF 2

ESTABLISHMENT NAME <b>Kingston K-14 School</b>	ADDRESS <b>10047 Diamond Road</b>	CITY <b>Cadet, MO 63630</b>
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**FOOD CODE REFERENCES** **CRITICAL ITEMS**

2 MANAGEMENT/PERSONNEL	CODE REF.	DESCRIPTION: These items relate directly to factors which lead to foodborne illness. These items <b>MUST RECEIVE IMMEDIATE ACTION</b> within 72 hours or as stated.	CORRECT BY (DATE)	INIT.
2-1 Supervision	4-703.11(C)	Some pans were being dipped in sanitizer for approximately 3 seconds. The temperature was 85°F. The chlorine concentration was 75 parts per million. The pH was < 8.0. Provide sanitizer exposure time of at least 7 seconds for chlorine solution of 50 MG/L that has pH of 8 or less and temperature of at least 75°F.	Corrected	ZAF
2-2 Employee Health				
2-3 Personal Cleanliness				
2-4 Hygienic Practices				
3 FOOD				
3-1 Characteristics				
3-2 Sources, Containers & Records				
3-3 Protection from Contamination				
3-4 Cooking, Parasite Destruction, Reheating				
3-5 Limiting Growth of Organisms				
3-6 Food Presentation & Labeling				
3-7 Disposition of Contaminated Food				
3-8 Highly Susceptible Populations				
4 EQUIP. UTENSILS & LINENS				
4-1 Characteristics & Use Limitations				
4-2 Design & Construction				
4-3 Numbers & Capacities				
4-4 Location & Installation				
4-5 Maintenance & Operation				
4-6 Cleaning of Equipment				
4-7 Sanitization				
4-8 Laundry				
4-9 Protection of Clean Items				

**NON-CRITICAL ITEMS**

5 WATER, PLUMBING & WASTE	CODE REF.	DESCRIPTION: These items relate to maintenance of food operations and cleanliness. These items are to be corrected by the next regular inspection or as stated.	CORRECT BY (DATE)	INIT.
5-1 Water Source, Quality, Capacity	6-501.12(A)	There was a small amount of debris on floor in outside of large walk-in cooler. Routinely clean.	Next Routine Inspection	ZAF
5-2 Plumbing				
5-3 Mobile Water Tanks				
5-4 Sewage & Rainwater				
5-5 Refuse & Recyclables				
6 PHYSICAL FACILITIES				
6-1 Materials for Construction				
6-2 Design, Construction, Installation				
6-3 Numbers & Capacities				
6-4 Location & Placement				
6-5 Maintenance & Operation				
7 POISONOUS OR TOXIC ITEMS				
7-1 Labeling & Identification				
7-2 Supplies & Applications				
7-3 Storage & Display				

**EDUCATION PROVIDED OR COMMENTS**

RECEIVED BY (PERSON IN CHARGE/TITLE): *Lita A. [Signature]* DATE: **10/6/2010**

INSPECTOR/TELEPHONE NUMBER <b>Jesse Douglas, EPHS 573-438-2164</b>	EPHS NO. <b>945</b>	FOLLOW-UP <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	DATE OF FOLLOW-UP
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