

Kansas Department of Agriculture
Division of Food Safety and Lodging
 1320 Research Park Drive, Manhattan, KS 66502
 (office) 785-564-6767 (fax) 785-564-6779

KANSAS FOOD ESTABLISHMENT INSPECTION REPORT

Insp Date: 8/16/2012 **Business ID:** 114113FR
Business: REECE'S CAFE

Inspection: 06001975
Store ID:
Phone: 6205628023
Inspector: KDA06
Reason: 01 Routine
Results: No Follow-up

202 PIONEER
 ALDEN, KS 67512

Time In / Time Out

Date	In	Out	Insp	Travel	Total	Mileage	Notes:
08/16/12	11:00 AM	12:45 PM	1:45	1:00	2:45	0	
Total:			1:45	1:00	2:45	0	

FOOD ESTABLISHMENT PROFILE

Insp. Notification Email Critical Violations 1 Lic. Insp. No

Sent Notification To _____

Address Verified p

INSPECTION INFORMATION

Risk factors are improper practices or procedures identified as the most prevalent contributing factors of food-borne illness or injury. Public health interventions are control measures to prevent food-borne illness or injury.

Good Retail Practices are preventative measures to control the addition of pathogens, chemicals and physical objects into foods.

Violations cited in this report must be corrected within the time frames entered below, or as stated in sections 8-405.11 of the food code.

HACCP=Hazard Analysis-Critical Control Point, BHC=Bare Hand Contact, RTE=Ready to Eat, CRITICAL=Critical Violation, SWING=Swing Violation (May be critical or non-critical), HSP=Highly Susceptible Population, K.S.A.=Kansas Statutes Annotated, All temperatures are measured in degrees Fahrenheit (°F).

PLEASE CALL (785) 296-5600 OR VISIT www.ksda.gov/food_safety/ IF YOU HAVE ANY QUESTIONS.

COMPLIANCE KEY: Y=in compliance; N=not in compliance; O=not observed; A=not applicable; C=corrected on-site during inspection; R=repeat violation.

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

Demonstration of Knowledge

Y N O A C R

1. Certification by accredited program, compliance with Code, or correct responses.

.. .. p

Employee Health

Y N O A C R

2. Management awareness; policy present.

p

3. Proper use of reporting, restriction and exclusion.

p

Good Hygienic Practices

Y N O A C R

4. Proper eating, tasting, drinking, or tobacco use

p

KANSAS FOOD ESTABLISHMENT INSPECTION REPORT

Good Hygienic Practices		Y	N	O	A	C	R
-------------------------	--	---	---	---	---	---	---

5. No discharge from eyes, nose and mouth.		p
--	--	---	----	----	----	----	----

Preventing Contamination by Hands		Y	N	O	A	C	R
-----------------------------------	--	---	---	---	---	---	---

6. Hands clean and properly washed.		p
-------------------------------------	--	---	----	----	----	----	----

7. No bare hand contact with RTE foods or approved alternate method properly followed.		p
--	--	---	----	----	----	----	----

8. Adequate handwashing facilities supplied and accessible.		p
---	--	---	----	----	----	----	----

Approved Source		Y	N	O	A	C	R
-----------------	--	---	---	---	---	---	---

9. Food obtained from approved source.		p
--	--	---	----	----	----	----	----

10. Food received at proper temperature.		p
--	--	----	----	---	----	----	----

11. Food in good condition, safe and unadulterated.		p
---	--	---	----	----	----	----	----

12. Required records available: shellstock tags, parasite destruction.		p
--	--	----	----	----	---	----	----

Protection from Contamination		Y	N	O	A	C	R
-------------------------------	--	---	---	---	---	---	---

13. Food separated and protected.		p
-----------------------------------	--	---	----	----	----	----	----

14. Food-contact surfaces: cleaned and sanitized.		p
---	--	---	----	----	----	----	----

15. Proper disposition of returned, previously served, reconditioned and unsafe food.		p
---	--	---	----	----	----	----	----

Potentially Hazardous Food Time/Temperature		Y	N	O	A	C	R
---	--	---	---	---	---	---	---

16. Proper cooking time and temperatures.		p
---	--	---	----	----	----	----	----

This item has Notes. See Footnote 1 at end of questionnaire.

17. Proper reheating procedures for hot holding.		p
--	--	----	----	---	----	----	----

18. Proper cooling time and temperatures.		..	p	p	..
---	--	----	---	----	----	---	----

Fail Notes	3-501.14(B)*	<p><i>CRITICAL - Cooling PHF-ambient temp ingredients to 41°F within 4 hours</i> <i>[Brisket at 50 after cooling over night. Product was in a sealed plastic bag. COS (corrected on site) tossed product]</i></p>
------------	--------------	---

19. Proper hot holding temperatures.		p
--------------------------------------	--	----	----	---	----	----	----

20. Proper cold holding temperatures.		p
---------------------------------------	--	---	----	----	----	----	----

This item has Notes. See Footnote 2 at end of questionnaire.

21. Proper date marking and disposition.		p
--	--	---	----	----	----	----	----

22. Time as a public health control: procedures and record.		p
---	--	----	----	----	---	----	----

Consumer Advisory		Y	N	O	A	C	R
-------------------	--	---	---	---	---	---	---

23. Consumer advisory provided for raw or undercooked foods.		p
--	--	---	----	----	----	----	----

Highly Susceptible Populations		Y	N	O	A	C	R
--------------------------------	--	---	---	---	---	---	---

24. Pasteurized foods used; prohibited foods not offered.		p
---	--	----	----	----	---	----	----

Chemical		Y	N	O	A	C	R
----------	--	---	---	---	---	---	---

25. Food additives: approved and properly used.		p
---	--	---	----	----	----	----	----

26. Toxic substances properly identified, stored and used.		p
--	--	---	----	----	----	----	----

Conformance with Approved Procedures		Y	N	O	A	C	R
--------------------------------------	--	---	---	---	---	---	---

27. Compliance with variance, specialized process and HACCP plan.		p
---	--	----	----	----	---	----	----

GOOD RETAIL PRACTICES

KANSAS FOOD ESTABLISHMENT INSPECTION REPORT

Safe Food and Water	Y	N	O	A	C	R
28. Pasteurized eggs used where required.	..	..	..	p	..	..
29. Water and ice from approved source.	p	..	..	..	..	..
30. Variance obtained for specialized processing methods.	..	..	..	p	..	..
Food Temperature Control	Y	N	O	A	C	R
31. Proper cooling methods used; adequate equipment for temperature control.	p	..	..	..	..	..
32. Plant food properly cooked for hot holding.	..	..	p	..	..	..
33. Approved thawing methods used.	p	..	..	..	..	..
<i>This item has Notes. See Footnote 3 at end of questionnaire.</i>						
34. Thermometers provided and accurate.	p	..	..	..	..	..
Food Identification	Y	N	O	A	C	R
35. Food properly labeled; original container.	p	..	..	..	..	..
Prevention of Food Contamination	Y	N	O	A	C	R
36. Insects, rodents and animals not present; no unauthorized persons.	p	..	..	..	..	..
37. Contamination prevented during food preparation, storage and display.	p	..	..	..	..	..
38. Personal cleanliness.	p	..	..	..	..	..
39. Wiping cloths: properly used and stored.	p	..	..	..	..	..
<i>This item has Notes. See Footnote 4 at end of questionnaire.</i>						
40. Washing fruits and vegetables.	..	..	p	..	..	..
Proper Use of Utensils	Y	N	O	A	C	R
41. In-use utensils: properly stored.	p	..	..	..	..	..
42. Utensils, equipment and linens: properly stored, dried and handled.	..	p	..	..	p	..
<i>Fail Notes</i> | 4-903.11(B)(2) <i>Equipment/utensil/linen storage-covered or inverted [Dishes stored on top shelf with food surface exposed. COS inverted]</i>						
43. Single-use and single-service articles: properly used.	p	..	..	..	..	..
44. Gloves used properly.	p	..	..	..	..	..
Utensils, Equipment and Vending	Y	N	O	A	C	R
45a. Food and non-food contact surfaces cleanable, properly designed, constructed and used- Critical items	p	..	..	..	..	..
45b. Food and non-food contact surfaces cleanable, properly designed, constructed and used- non-critical items	p	..	..	..	..	..
46. Warewashing facilities: installed, maintained, and used; test strips.	p	..	..	..	..	..
47. Non-food contact surfaces clean.	..	p	..	..	p	..
<i>Fail Notes</i> | 4-601.11(C) <i>Nonfood contact surfaces of equipment clean [Bottom of equipment storage container with dried debris in bottom container. COS cleaned]</i>						
Physical Facilities	Y	N	O	A	C	R
48. Hot and cold water available; adequate pressure.	p	..	..	..	..	..
<i>This item has Notes. See Footnote 5 at end of questionnaire.</i>						
49. Plumbing installed; proper backflow devices.	p	..	..	..	..	..

KANSAS FOOD ESTABLISHMENT INSPECTION REPORT

Physical Facilities	Y	N	O	A	C	R
50. Sewage and waste water properly disposed.	p	..	..	..	..	..
51. Toilet facilities: properly constructed, supplied and cleaned.	..	p	..	..	..	..
<i>Fail Notes</i> | 6-202.14 <i>Toilet rooms completely enclosed-self closing door</i> <i>[Mens restroom door is not self closing]</i>						
52. Garbage and refuse properly disposed; facilities maintained.	p	..	..	..	..	..
53. Physical facilities installed, maintained and clean.	p	..	..	..	..	..
54. Adequate ventilation and lighting; designated areas used.	p	..	..	..	..	..
Administrative/Other	Y	N	O	A	C	R
55. Other violations	p	..	..	..	..	..

EDUCATIONAL MATERIALS

The following educational materials were provided ..

KANSAS FOOD ESTABLISHMENT INSPECTION REPORT

Footnote 1

Notes:

chicken breast 169

Footnote 2

Notes:

pasta salad 41 in 2 door RIC (reach in cooler) --Milk 41 1 door RIC--Soda RIC 39 air temp

Footnote 3

Notes:

chicken under running cold water

Footnote 4

Notes:

sanitizer 200 ppm quat

Footnote 5

Notes:

hot water 145 at hand sink

VOLUNTARY DESTRUCTION REPORT

Insp Date: 8/16/2012 **Business ID:** 114113FR
Business: REECE'S CAFE

202 PIONEER
ALDEN, KS 67512

Inspection: 06001975
Store ID:
Phone: 6205628023
Inspector: KDA06
Reason: 01 Routine

Time In / Time Out

Date	In	Out	Insp	Travel	Total	Mileage	Notes:
08/16/12	11:00 AM	12:45 PM	1:45	1:00	2:45	0	
Total:			1:45	1:00	2:45	0	

ACTIONS

Number of products Voluntarily Destroyed 1

VOLUNTARY DESTRUCTION REPORT

I have this day voluntarily destroyed, or caused to be destroyed, the merchandise described below. Said merchandise found in my possession was unfit for human consumption, misbranded, or otherwise unlawful. Destruction and final disposition of said merchandise has been done in a manner approved by the above named Inspector, representative of the Kansas Department of Agriculture.

I hereby release the Kansas Department of Agriculture, and its members, agents, and representatives from any and all liability.

1. Product cooked brisket Qty 8 Units lbs Value \$ 50,00

Description cooked meat not cooled with in time frame

Reason Product Destroyed Adulterated Method Product Destroyed Dumpster

Disposal Location Firm Embargo Hold Tag # N/A