

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: 3/5/2013 **Business ID:** 113171FE
Business: BARB'S PIZZERIA

 114 W MAIN
 ARLINGTON, KS 67514

Inspection: 10004003
Store ID:
Phone: 6205383290
Inspector: KDA10
Reason: 01 Routine
Results: No Follow-up

Time In / Time Out

Date	In	Out	Insp	Travel	Total	Mileage	Notes:
03/05/13	01:30 PM	02:30 PM	1:00	0:15	1:15	0	
Total:			1:00	0:15	1:15	0	

FOOD ESTABLISHMENT PROFILE	
Updated Risk Category <u>RAC# 04 Medium Risk</u>	Updated Sq. Footage <u>1. Under 5,000 sq feet</u>
Insp. Notification <u>Email</u>	Sent Notification To _____ Lic. Insp. <u>No</u>
Priority(P) Violations <u>1</u>	Priority foundation(Pf) Violations <u>0</u>
Certified Manager on Staff <input type="checkbox"/>	Certified Manager Present <input type="checkbox"/> Address Verified <input checked="" type="checkbox"/>

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.

P=Priority Violation, Pf=Priority foundation violation, HACCP=Hazard Analysis-Critical Control Point, BHC=Bare Hand Contact, RTE=Ready to Eat, 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

KANSAS FOOD ESTABLISHMENT INSPECTION REPORT

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

- | | |
|---|-----------------------|
| 4. Proper eating, tasting, drinking, or tobacco use | p " " " " " |
| 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 " " |
| 17. Proper reheating procedures for hot holding. | " " p " " " |
| 18. Proper cooling time and temperatures. | " " " p " " |
| 19. Proper hot holding temperatures. | " " p " " " |
| 20. Proper cold holding temperatures. | p " " " " " |
| <i>This item has Notes. See Footnote 1 at end of questionnaire.</i> | |
| 21. Proper date marking and disposition. | p " " " " " |
| <i>This item has Notes. See Footnote 2 at end of questionnaire.</i> | |
| 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

Safe Food and Water	Y N O A C R
----------------------------	-----------------------

- | | |
|---|-----------------------|
| 28. Pasteurized eggs used where required. | " " " p " " |
|---|-----------------------|

KANSAS FOOD ESTABLISHMENT INSPECTION REPORT

Safe Food and Water	Y	N	O	A	C	R
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	..	..	..	..	..
<i>This item has Notes. See Footnote 3 at end of questionnaire.</i>						
32. Plant food properly cooked for hot holding.	..	..	p	..	..	..
33. Approved thawing methods used.	..	..	p	..	..	..
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.	p	..	..	..	..	..
37. Contamination prevented during food preparation, storage and display.	p	..	..	..	..	..
38. Personal cleanliness.	p	..	..	..	..	..
39. Wiping cloths: properly used and stored.	p	..	..	..	..	..
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	..	..	..	..	..
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-P and Pf items	p	..	..	..	..	..
45b. Food and non-food contact surfaces cleanable, properly designed, constructed and used-Core items	p	..	..	..	..	..
46. Warewashing facilities: installed, maintained, and used; test strips.	p	..	..	..	..	..
47. Non-food contact surfaces clean.	p	..	..	..	..	..
Physical Facilities	Y	N	O	A	C	R
48. Hot and cold water available; adequate pressure.	p	..	..	..	..	..
49. Plumbing installed; proper backflow devices.	..	p	..	..	..	..
<i>Fail Notes</i> | 5-203.14 | <i>P - Backflow prevention device or air gap provided on plumbing fixtures as required [Water hose, attached to faucet at mop sink, without a backflow prevention device. Corrected on Site - Removed]</i>						
50. Sewage and waste water properly disposed.	p	..	..	..	..	..
51. Toilet facilities: properly constructed, supplied and cleaned.	p	..	..	..	..	..
52. Garbage and refuse properly disposed; facilities maintained.	p	..	..	..	..	..
53. Physical facilities installed, maintained and clean.	..	p	..	..	..	..

KANSAS FOOD ESTABLISHMENT INSPECTION REPORT

Physical Facilities	Y N O A C R
---------------------	-----------------------

<i>Fail Notes</i>	6-501.11 <i>Physical facilities maintained in good repair [Eight water damaged ceiling tiles in Prep area and eight water damaged ceiling tiles in dining area.]</i>
-------------------	--

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 .

This item has Notes. See Footnote 4 at end of questionnaire.

KANSAS FOOD ESTABLISHMENT INSPECTION REPORT

Footnote 1

Notes:

Pork Topping 42 (Make Table)

Footnote 2

Notes:

Note: Two packages of deli turkey (< 10 %) dated 10/3/12 in Make Table. As per Barb, Owner, that was the freezer date. The packages were removed from the freezer on 3/1/13.

Footnote 3

Notes:

Freezers OK

Footnote 4

Notes:

Note: No certified food manager on staff.