

**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:** 9/10/2013      **Business ID:** 102946FE  
**Business:** MCDONALDS

**Inspection:** 10004141  
**Store ID:**  
**Phone:** 6208425069  
**Inspector:** KDA10  
**Reason:** 02 Follow-up  
**Results:** Administrative Review

801 W MAIN  
 ANTHONY, KS 67003

**Time In / Time Out**

Date	In	Out	Insp	Travel	Total	Mileage	Notes:
09/10/13	11:30 AM	12:45 PM	1:15	0:30	1:45	0	
<b>Total:</b>			1:15	0:30	1:45	0	

**FOOD ESTABLISHMENT PROFILE**

Insp. Notification   Email   Sent Notification To \_\_\_\_\_ Lic. Insp.   No  

Priority(P) Violations   2   Priority foundation(Pf) Violations   1  

Certified Manager on Staff  Address Verified  Actual Sq. Ft.   2220  

Certified Manager Present

**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).

IF YOU HAVE ANY QUESTIONS PLEASE VISIT [www.agriculture.ks.gov](http://www.agriculture.ks.gov), EMAIL [fsl@kda.ks.gov](mailto:fsl@kda.ks.gov), OR CALL (785) 296-5600.

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**

<b>Demonstration of Knowledge</b>	Y	N	O	A	C	R
1. Certification by accredited program, compliance with Code, or correct responses.	..	..	..	..	..	..
<b>Employee Health</b>	Y	N	O	A	C	R
2. Management awareness; policy present.	..	..	..	..	..	..
3. Proper use of reporting, restriction and exclusion.	..	..	..	..	..	..
<b>Good Hygienic Practices</b>	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	..	..	..	..	..	..
5. No discharge from eyes, nose and mouth.	..	..	..	..	..	..
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.	..	..	..	..	..	..
8. Adequate handwashing facilities supplied and accessible.	..	..	..	..	..	..
Approved Source	Y	N	O	A	C	R
9. Food obtained from approved source.	..	..	..	..	..	..
10. Food received at proper temperature.	..	..	..	..	..	..
11. Food in good condition, safe and unadulterated.	..	..	..	..	..	..
12. Required records available: shellstock tags, parasite destruction.	..	..	..	..	..	..
Protection from Contamination	Y	N	O	A	C	R
13. Food separated and protected.	..	..	..	..	..	..
14. Food-contact surfaces: cleaned and sanitized.	..	p	..	..	p	p
<div style="display: flex; border-left: 1px solid black; padding-left: 5px;"> <div style="width: 100px; font-size: small; padding-right: 5px;">Fail Notes</div> <div style="font-size: small;">                     4-601.11(A) Pf - Food Contact Clean to Sight and Touch - EQUIPMENT FOOD-CONTACT SURFACES and UTENSILS shall be clean to sight and touch.                      [On the north wall storage racks: 2 of 15 containers, stored as clean, had dried food residue and a small piece/sliver of paper (tray liner) on the food contact surface. Corrected on Site - Items were removed and placed in warewashing area.]                 </div> </div>						
15. Proper disposition of returned, previously served, reconditioned and unsafe food.	..	..	..	..	..	..
Potentially Hazardous Food Time/Temperature	Y	N	O	A	C	R
16. Proper cooking time and temperatures.	..	..	..	..	..	..
17. Proper reheating procedures for hot holding.	..	..	..	..	..	..
18. Proper cooling time and temperatures.	..	..	..	..	..	..
19. Proper hot holding temperatures.	..	..	..	..	..	..
20. Proper cold holding temperatures.	..	..	..	..	..	..
21. Proper date marking and disposition.	..	..	..	..	..	..
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.	..	..	..	..	..	..
Highly Susceptible Populations	Y	N	O	A	C	R
24. Pasteurized foods used; prohibited foods not offered.	..	..	..	..	..	..
Chemical	Y	N	O	A	C	R
25. Food additives: approved and properly used.	..	..	..	..	..	..
26. Toxic substances properly identified, stored and used.	..	p	..	..	p	..

# KANSAS FOOD ESTABLISHMENT INSPECTION REPORT

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

<i>Fail Notes</i>	7-201.11(A)	<i>P - Chemical Storage (spacing/partitioning) POISONOUS OR TOXIC MATERIALS shall be stored so they cannot contaminate FOOD, EQUIPMENT, UTENSILS, LINENS, and SINGLE-SERVICE and SINGLE-USE ARTICLES by separating the POISONOUS OR TOXIC MATERIALS by spacing or partitioning. [A spray bottle of degreaser was stored/attached to the dishwashing machine. Corrected on Site - Relocated the degreaser]</i>
-------------------	-------------	---

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

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

<b>GOOD RETAIL PRACTICES</b>
------------------------------

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

28. Pasteurized eggs used where required.      .. .. . . . . .

29. Water and ice from approved source.      .. .. . . . . .

30. Variance obtained for specialized processing methods.      .. .. . . . . .

Food Temperature Control	Y N O A C R
--------------------------	-------------

31. Proper cooling methods used; adequate equipment for temperature control.      .. .. . . . . .

32. Plant food properly cooked for hot holding.      .. .. . . . . .

33. Approved thawing methods used.      .. .. . . . . .

34. Thermometers provided and accurate.      .. .. . . . . .

Food Identification	Y N O A C R
---------------------	-------------

35. Food properly labeled; original container.      .. .. . . . . .

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.      .. .. . . . . .

38. Personal cleanliness.      .. .. . . . . .

39. Wiping cloths: properly used and stored.      .. .. . . . . .

40. Washing fruits and vegetables.      .. .. . . . . .

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.      .. .. . . . . .

43. Single-use and single-service articles: properly used.      .. p .. .. . p p

<i>Fail Notes</i>	4-903.11(C)	<i>SINGLE-SERVICE and SINGLE-USE ARTICLES shall be stored as specified under ¶ 4-903.11(A) and shall be kept in the original protective PACKAGE or stored by using other means that afford protection from contamination until used. [Unpackaged single use plastic containers and lids, for salads, were stored with the food contact surfaces facing upwards (on the north wall shelf). Corrected on Site - Rearranged]</i>
-------------------	-------------	---

44. Gloves used properly.      .. .. . . . . .

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      .. .. . . . . .

# KANSAS FOOD ESTABLISHMENT INSPECTION REPORT

Utensils, Equipment and Vending	Y	N	O	A	C	R
---------------------------------	---	---	---	---	---	---

- |   |    |    |    |    |    |    |
|---|----|----|----|----|----|----|
| 45b. Food and non-food contact surfaces cleanable, properly designed, constructed and used-<br>Core items | .. | .. | .. | .. | .. | .. |
| 46. Warewashing facilities: installed, maintained, and used; test strips.                                 | .. | .. | .. | .. | .. | .. |
| 47. Non-food contact surfaces clean.  | .. | .. | .. | .. | .. | .. |

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

- |  |    |    |    |    |    |    |
|--|----|----|----|----|----|----|
| 48. Hot and cold water available; adequate pressure. | .. | .. | .. | .. | .. | .. |
| 49. Plumbing installed; proper backflow devices.     | .. | p  | .. | .. | .. | p  |

<i>Fail Notes</i>	<p>5-203.14 <i>P - A PLUMBING SYSTEM shall be installed to preclude backflow of a solid, liquid, or gas contaminant into the water supply system at each point of use at the FOOD ESTABLISHMENT, including on a hose bibb if a hose is attached or on a hose bibb if a hose is not attached and backflow prevention is required by LAW, by: Providing an air gap as specified under § 5-202.13; or, Installing an APPROVED backflow prevention device as specified under § 5-202.14.</i></p> <p><i>[There is two shut-offs downstream from an atmospheric vacuum breaker at the faucet for the service sink. Note: Y attachment with two hoses attached (one hose for filling mop buckets and the other hose is connected to a chemical dispenser).]</i></p>
-------------------	--

- |  |    |    |    |    |    |    |
|--|----|----|----|----|----|----|
| 50. Sewage and waste water properly disposed.                      | .. | .. | .. | .. | .. | .. |
| 51. Toilet facilities: properly constructed, supplied and cleaned. | .. | .. | .. | .. | .. | .. |
| 52. Garbage and refuse properly disposed; facilities maintained.   | .. | .. | .. | .. | .. | .. |
| 53. Physical facilities installed, maintained and clean.           | p  | .. | .. | .. | .. | .. |
| 54. Adequate ventilation and lighting; designated areas used.      | .. | .. | .. | .. | .. | .. |

Administrative/Other	Y	N	O	A	C	R
----------------------	---	---	---	---	---	---

- |                      |    |    |    |    |    |    |
|----------------------|----|----|----|----|----|----|
| 55. Other violations | .. | .. | .. | .. | .. | .. |
|----------------------|----|----|----|----|----|----|

EDUCATIONAL MATERIALS
-----------------------

The following educational materials were provided ..

## NOTICE OF NON COMPLIANCE WITH KANSAS LAW

**Insp Date:** 9/10/2013  
**Business:** MCDONALDS

**Business ID:** 102946FE

**Inspection:** 10004141

**Store ID:**

**Phone:** 6208425069

**Inspector:** KDA10

**Reason:** 02 Follow-up

801 W MAIN  
 ANTHONY, KS 67003

**Time In / Time Out**

Date	In	Out	Insp	Travel	Total	Mileage	Notes;
09/10/13	11:30 AM	12:45 PM	1:15	0:30	1:45	0	
Total:			1:15	0:30	1:45	0	

**NOTICE OF NON COMPLIANCE WITH KANSAS LAW**

The Kansas Food, Drug and Cosmetic Act, effective July 1, 2012 includes K.S.A. 65-619 et seq. and regulations promulgated pursuant thereto and grants the Kansas Department of Agriculture the authority to regulate food establishments and food processing plants.

The Kansas Food, Drug and Cosmetic Act requires that all violations shall be corrected no later than 10 days after this inspection unless otherwise directed on this form.

Failure to comply with the food safety law and its regulations may result in embargo of non-compliant products; immediate closure of your establishment; civil penalties of up to \$1,000.00 per violation; denial of license renewal, modification, suspension and/or revocation of any license or authority issued pursuant to the food safety law; and/or any other penalty authorized by law. Pursuant to K.S.A. 65-619 et seq, licensees issued authority under the Kansas Food, Drug and Cosmetic Act may apply to the secretary for an extension of the time prescribed above.

PLEASE CALL (785) 296-5600 IF YOU HAVE ANY QUESTIONS.

Follow up Scheduled \_\_\_\_\_

Inspection Report Number 10004141

Inspection Report Date 09/10/13

Establishment Name MCDONALDS

Physical Address 801 W MAIN City ANTHONY

Zip 67003

Additional Notes and Instructions

Follow up inspection will be determined by the Topeka Office.