

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: 5/15/2013 **Business ID:** 106882FE
Business: BRECK (THE)

Inspection: 11001620
Store ID:
Phone: 6204435612
Inspector: KDA11
Reason: 02 Follow-up
Results: No Follow-up

622 MAIN PO BOX 408
 AMERICUS, KS 66835

Time In / Time Out

Date	In	Out	Insp	Travel	Total	Mileage	Notes:
05/15/13	02:00 PM	03:00 PM	1:00	0:20	1:20	0	
Total:			1:00	0:20	1:20	0	

FOOD ESTABLISHMENT PROFILE	
Updated Risk Category _____	Updated Sq. Footage _____
Insp. Notification <u>Print</u> _____	Lic. Insp. <u>No</u> _____
Priority(P) Violations <u>0</u> _____	Priority foundation(Pf) Violations <u>0</u> _____
Certified Manager on Staff <u> </u> _____	Certified Manager Present <u> </u> _____
	Address Verified <u>p</u> _____

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.	..	..	..	..	..	..
Employee Health	Y	N	O	A	C	R
2. Management awareness; policy present.	..	..	..	..	..	..
3. Proper use of reporting, restriction and exclusion.	..	..	..	..	..	..
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 | .. | .. | .. | .. | .. | .. |
| 5. No discharge from eyes, nose and mouth. | .. | .. | .. | .. | .. | .. |

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

- | | | | | | | |
|--|----|----|----|----|----|----|
| 6. Hands clean and properly washed. | .. | .. | .. | .. | .. | .. |
| 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. | .. | .. | .. | .. | .. | .. |
| 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. | p | .. | .. | .. | .. | .. |
| <i>This item has Notes. See Footnote 1 at end of questionnaire.</i> | | | | | | |
| 21. Proper date marking and disposition. | p | .. | .. | .. | .. | .. |
| 22. Time as a public health control: procedures and record. | .. | .. | .. | .. | .. | .. |

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. | .. | .. | .. | .. | .. | .. |

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

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

GOOD RETAIL PRACTICES

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

- | | | | | | | |
|---|----|----|----|----|----|----|
| 28. Pasteurized eggs used where required. | .. | .. | .. | .. | .. | .. |
| 29. Water and ice from approved source. | .. | .. | .. | .. | .. | .. |

KANSAS FOOD ESTABLISHMENT INSPECTION REPORT

Safe Food and Water	Y	N	O	A	C	R
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.
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.
42. Utensils, equipment and linens: properly stored, dried and handled.
43. Single-use and single-service articles: properly used.
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
45b. Food and non-food contact surfaces cleanable, properly designed, constructed and used-Core items
46. Warewashing facilities: installed, maintained, and used; test strips.
47. Non-food contact surfaces clean.	..	p	..	..	..	p
<i>Fail Notes</i> | 4-602.13 | <i>Nonfood-contact surfaces cleaned at frequency to prevent buildup of residue [Grease and spilled food on floors and in the corners and under equipment in the kitchen and dish wash area]</i>						
Physical Facilities	Y	N	O	A	C	R
48. Hot and cold water available; adequate pressure.
49. Plumbing installed; proper backflow devices.
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	..	..	..	p
<i>Fail Notes</i> | 6-501.12(A) | <i>Physical facilities clean [Grease on walls and at floor wall junctures]</i>						

KANSAS FOOD ESTABLISHMENT INSPECTION REPORT

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

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 ..

KANSAS FOOD ESTABLISHMENT INSPECTION REPORT

Footnote 1

Notes:

Front WIC:
milk at 38.9 F

Make Table:
41.2 F diced tomatoes

RIC:
RtE ham 38.4 F

Front RIC
mashed potato 37.6 F
twice baked potato 39.5 F

Upright refrigerator:
43.5 cowboy beans
40.1 F nacho cheese