

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: 4/30/2013 **Business ID:** 101712FE
Business: OUR DAILY BREAD

Inspection: 21001619
Store ID:
Phone: 7857634269
Inspector: KDA21
Reason: 01 Routine
Results: Follow-up

23 N CENTER ST
 BARNES, KS 66933

Time In / Time Out

Date	In	Out	Insp	Travel	Total	Mileage	Notes:
04/30/13	11:00 AM	01:15 PM	2:15	0:05	2:20	1	
Total:			2:15	0:05	2:20	1	

FOOD ESTABLISHMENT PROFILE	
Updated Risk Category _____	Updated Sq. Footage _____
Insp. Notification <input type="checkbox"/> Email _____	Sent Notification To _____ Lic. Insp. _____
Priority(P) Violations <u>4</u>	Priority foundation(Pf) Violations <u>1</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	..	..	..	..
<i>Fail Notes</i> | 4-602.11(E)(4)(b) | <i>Non-PHF Food Contact Surface Cleaning Frequency-ice bins, soda nozzles-to preclude mold/soil build up [There is a build up of mold around the top gasket of the ice machine in the waitstaff area.]</i>						
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	..	..	p	..
<i>This item has Notes. See Footnote 1 at end of questionnaire.</i>						
<i>Fail Notes</i> | 3-501.16(A)(2)(a) | <i>P - PHF Cold Holding-<41°F [In the cold make table cut cantelope 45.9 Employee stated it had been placed in the cold make table around 10 am. from the under the counter reach in cooler. Corrected on site Employee put container of cut cantelope into under the counter reach in cooler ambient 38.8]</i>						
21. Proper date marking and disposition.	..	p	..	..	p	..
<i>Fail Notes</i> | 3-501.18(A)(1) | <i>P - RTE PHF, Disposition-discard if >7days at 41°F [In the cold make table a container of potato salad date marked 4/23, macaroni salad date marked 4/22. In the reach in cooler on the north wall of kitchen a container of potato salad date marked 4/23. Corrected on site Employee VD potato salad and macaroni salad.]</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

KANSAS FOOD ESTABLISHMENT INSPECTION REPORT

	Y	N	O	A	C	R
Highly Susceptible Populations						
24. Pasteurized foods used; prohibited foods not offered.	..	..	..	p	..	..
Chemical						
25. Food additives: approved and properly used.	p	..	..	..	..	..
26. Toxic substances properly identified, stored and used.	..	p	..	..	p	..
<i>Fail Notes</i>	7-201.11(B) P - Separation, Storage-chemicals above food, etc. [KDA inspector 57 observed Clorox Wipes stored above a food prep area and above an area where clean dishes are stored. Corrected on site Employee put moved both containers of Clorox wipes to safe location.]					
Conformance with Approved Procedures						
27. Compliance with variance, specialized process and HACCP plan.	..	..	..	p	..	..
GOOD RETAIL PRACTICES						
Safe Food and Water						
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						
31. Proper cooling methods used; adequate equipment for temperature control.	p	..	..	..	..	..
<i>This item has Notes. See Footnote 2 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						
35. Food properly labeled; original container.	p	..	..	..	..	..
Prevention of Food Contamination						
36. Insects, rodents and animals not present.	..	p	..	..	..	..
<i>Fail Notes</i>	6-501.111(C) P - Effective pest control measures in place [In the north east corner of the kitchen there is an accumulation of 50 fresh rodent droppings, on the south side of the business on the stairs leading downstairs there is an accumulation of 8-10 fresh rodent droppings and downstairs in dry storage on canned goods there is an accumulation of 10 fresh rodent droppings.]					
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						
41. In-use utensils: properly stored.	p	..	..	..	..	..
42. Utensils, equipment and linens: properly stored, dried and handled.	..	p	..	..	..	..
<i>Fail Notes</i>	4-903.11(B)(2) Equipment/utensil/linen storage-covered or inverted [On the north wall of the kitchen an assortment of food containers is stored with the food contact surface exposed.]					

KANSAS FOOD ESTABLISHMENT INSPECTION REPORT

Proper Use of Utensils	Y N O A C R
-------------------------------	-----------------------

- | | |
|--|----------------------------|
| 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 |

<i>Fail Notes</i>	4-501.11() <i>Equipment in good repair/adjustment [4-501.11(A) In the Hotpoint reach in cooler water is condensating dripping off the racks and pooling on the lid of a plastic container and there is black mold on the gasket of the door and across the bottom of the reach in cooler frame just below the freezer area.]</i>
-------------------	--

- | | |
|---|----------------------------|
| 46. Warewashing facilities: installed, maintained, and used; test strips. | .. p |
|---|----------------------------|

This item has Notes. See Footnote 3 at end of questionnaire.

<i>Fail Notes</i>	4-302.14 <i>Pf - Sanitizer test kit [No chlorine sanitizer kit.]</i>
-------------------	--

- | | |
|--------------------------------------|----------------------------|
| 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 |
| 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 |
| 54. Adequate ventilation and lighting; designated areas used. | p |

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

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

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

EDUCATIONAL MATERIALS

The following educational materials were provided p

<i>Material Distributed</i>	<i>Education Title #08 Date Marking</i>
	<i>Education Title #13 FBI Listeriosis</i>

KANSAS FOOD ESTABLISHMENT INSPECTION REPORT

Footnote 1

Notes:

Front of kitchen on north wall reach in cooler chicken enchilada 43.2. Middle of the kitchen on south wall reach in cooler buttermilk 38.9
Back of the kitchen reach in cooler cream cheese enchilada 38.7

Footnote 2

Notes:

All freezer units are working OK.

Footnote 3

Notes:

Employee ran a rack of food containers through dishmachine chlorine 50 ppm

Footnote 4

Notes:

Accompanied by inspector 57.

VOLUNTARY DESTRUCTION REPORT

Insp Date: 4/30/2013 **Business ID:** 101712FE
Business: OUR DAILY BREAD

23 N CENTER ST
 BARNES, KS 66933

Inspection: 21001619
Store ID:
Phone: 7857634269
Inspector: KDA21
Reason: 01 Routine

Time In / Time Out

Date	In	Out	Insp	Travel	Total	Mileage	Notes:
04/30/13	11:00 AM	01:15 PM	2:15	0:05	2:20	1	
Total:			2:15	0:05	2:20	1	

ACTIONS

Number of products Voluntarily Destroyed 2

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 Potato salad Qty 20 Units C Value \$ _____

Description Date marked 4/23

Reason Product Destroyed Adulterated Method Product Destroyed Garbage Disposal

Disposal Location Firm Embargo Hold Tag # N/A

2. Product Macaroni Salad Qty 10 Units C Value \$ _____

Description Date Marked 4/22

Reason Product Destroyed Adulterated Method Product Destroyed Garbage Disposal

Disposal Location Firm Embargo Hold Tag # N/A

