

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: 2/8/2012
Business: OAK TREE

Business ID: 112602FR

Inspection: 33001549

430 STATE ST
 AUGUSTA, KS 67010

Store ID:
Phone: 3167750601
Inspector: KDA33
Reason: 01 Routine
Results: No Follow-up

Time In / Time Out

Date	In	Out	Insp	Travel	Total	Mileage	Notes:
02/08/12	01:00 PM	03:15 PM	2:15	0:10	2:25	0	
Total:			2:15	0:10	2:25	0	

FOOD ESTABLISHMENT PROFILE

Updated Risk Category RAC# 06 High Risk Updated Sq. Footage _____
 Insp. Notification Email Critical Violations 5 Lic. Insp. _____
 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 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

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

Y N O A C R
 p

Employee Health

2. Management awareness; policy present.

Y N O A C R
 p

3. Proper use of reporting, restriction and exclusion.

p

Good Hygienic Practices

Y N O A C R

KANSAS FOOD ESTABLISHMENT INSPECTION REPORT

	Y	N	O	A	C	R
Good Hygienic Practices						
4. Proper eating, tasting, drinking, or tobacco use	p	..	..	..	..	..
5. No discharge from eyes, nose and mouth.	p	..	..	..	..	..
Preventing Contamination by Hands						
6. Hands clean and properly washed.	..	p	..	..	p	..
<i>Fail Notes</i> | 2-301.14(H)* <i>CRITICAL - When to Wash Hands - Before donning gloves for working with food [Cook donned gloves and handled bun and fixings for burger without washing hands before donning gloves. COS-educated]</i>						
7. No bare hand contact with RTE foods or approved alternate method properly followed.	p	..	..	..	..	..
8. Adequate handwashing facilities supplied and accessible.	..	p	..	..	..	..
<i>Fail Notes</i> | 6-301.11 <i>Handwash cleanser provided [No hand cleanser at handsink in kitchen.]</i>						
Approved Source						
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						
13. Food separated and protected.	..	p	..	..	p	..
<i>Fail Notes</i> | 3-302.11(A)(1)(b)* <i>CRITICAL - Separation-Raw & cooked RTE [Outside RIC, raw shell eggs stored on wire shelf above open box of lettuce and raw ribeye steaks stored on wire shelf above pan of beans. COS-moved RTE foods]</i>						
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						
16. Proper cooking time and temperatures.	p	..	..	..	..	..
<i>This item has Notes. See Footnote 1 at end of questionnaire.</i>						
17. Proper reheating procedures for hot holding.	..	..	p	..	..	..
18. Proper cooling time and temperatures.	..	..	p	..	..	..
19. Proper hot holding temperatures.	p	..	..	..	..	..
<i>This item has Notes. See Footnote 2 at end of questionnaire.</i>						
20. Proper cold holding temperatures.	..	p	..	..	p	..
<i>This item has Notes. See Footnote 3 at end of questionnaire.</i>						
<i>Fail Notes</i> | 3-501.16(A)(2)(a)* <i>CRITICAL - PHF Cold Holding-<41°F [Make table, sour cream at 52, prepared onsite salsa at 52, and sliced ham at 49. COS-voluntary destruction]</i>						
21. Proper date marking and disposition.	..	p	..	..	p	..
<i>Fail Notes</i> | 3-501.18(A)(2)* <i>CRITICAL - RTE PHF, Disposition-discard if in a container w/out a date [Reach in cooler(RIC), ribs cooked on Monday and ham sliced on Monday, not marked with date prepared. COS-dated]</i>						

KANSAS FOOD ESTABLISHMENT INSPECTION REPORT

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

Fail Notes | 3-501.18(A)(3)* *CRITICAL - RTE PHF, Disposition-discard if dated >7 days at 41°F or less*

[RIC, baked beans, marked 2/3-2/10, dated for >7days.COS-redated]

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

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

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

Fail Notes | 6-202.15(A)(3)* *SWING - Outer openings protected-solid, self-closing doors [East exit from dining room has approximately 1/2 inch gap along bottom of door that could allow for the entry of pests.]*

37. Contamination prevented during food preparation, storage and display. p

38. Personal cleanliness. p

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

Fail Notes | 3-304.14(B)(1) *Wet wiping cloths stored in sanitizer [Wet wiping cloth by fryer not stored in sanitizer.]*

40. Washing fruits and vegetables. p

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

41. In-use utensils: properly stored. p

KANSAS FOOD ESTABLISHMENT INSPECTION REPORT

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

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

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. | .. .. . |
| 52. Garbage and refuse properly disposed; facilities maintained. | p |
| 53. Physical facilities installed, maintained and clean. | .. p |
| <i>Fail Notes</i> 6-501.16 <i>Mops allowed to air dry after use</i>
<i>[Wet mop heads laying in the bottom of the mop sink.]</i> | |
| 54. Adequate ventilation and lighting; designated areas used. | .. p |
| <i>Fail Notes</i> 6-202.11() <i>Protective shielding on light bulbs over exposed</i>
<i>food/utensils/equipment</i>
<i>[No covers on lights in kitchen.]</i> | |

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

- | | |
|---|--------------|
| 55. Other violations | .. p |
| <i>Fail Notes</i> 8-304.11(A) <i>Post the license in a location in the Food Establishment</i>
<i>[License not posted in food establishment.]</i> | |

EDUCATIONAL MATERIALS

The following educational materials were provided

- | | | |
|-----------------------------|----------------------------|-----------------------------|
| <i>Material Distributed</i> | <i>Education Title #04</i> | <i>No Bare-Hand Contact</i> |
| | <i>Education Title #08</i> | <i>Date Marking</i> |
| | <i>Education Title #11</i> | <i>Employee Handwashing</i> |

KANSAS FOOD ESTABLISHMENT INSPECTION REPORT

Footnote 1

Notes:

Grill: burger 161

Footnote 2

Notes:

Steam table: chicken noodle soup 157, mashed potatoes 155, gravy 140

Footnote 3

Notes:

Make table: ham 43, tomatoes 43

RIC: raw steak 40, ribs 41, ham 41

Outside RIC: eggs 35, lettuce 37, ground beef 34

Bar RIC: milk 43

Waitstation RIC: butter 35

Walk in cooler: 35

VOLUNTARY DESTRUCTION REPORT

Insp Date: 2/8/2012
Business: OAK TREE

Business ID: 112602FR

Inspection: 33001549

Store ID:

Phone: 3167750601

Inspector: KDA33

Reason: 01 Routine

430 STATE ST
 AUGUSTA, KS 67010

Time In / Time Out

Date	In	Out	Insp	Travel	Total	Mileage	Notes:
02/08/12	01:00 PM	03:15 PM	2:15	0:10	2:25	0	
Total:			2:15	0:10	2:25	0	

ACTIONS

Number of products Voluntarily Destroyed 3

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 sour cream Qty 1 Units _____ Value \$ _____

Description 2 cups sour cream

Reason Product Destroyed Adulterated Method Product Destroyed Trash Can

Disposal Location Firm Embargo Hold Tag # N/A

2. Product homemade salsa Qty 0 Units _____ Value \$ _____

Description 1/2 gallon homemade salsa

Reason Product Destroyed Adulterated Method Product Destroyed Trash Can

Disposal Location Firm Embargo Hold Tag # N/A

VOLUNTARY DESTRUCTION REPORT

VOLUNTARY DESTRUCTION REPORT

3. Product sliced ham Qty _____ Units _____ Value \$ _____

Description 2lbs sliced ham

Reason Product Destroyed Adulterated Method Product Destroyed Trash Can

Disposal Location Firm Embargo Hold Tag # N/A