

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: 5/23/2013 **Business ID:** 106880FE
Business: BRICKS

Inspection: 33002245
Store ID:
Phone: 3167750001
Inspector: KDA33
Reason: 12 Expired License
Results: Follow-up

409 STATE ST
 AUGUSTA, KS 67010

Time In / Time Out

Date	In	Out	Insp	Travel	Total	Mileage	Notes:
05/23/13	12:30 PM	03:00 PM	2:30	0:05	2:35	0	
Total:			2:30	0:05	2:35	0	

FOOD ESTABLISHMENT PROFILE			
Updated Risk Category	<u>RAC# 05 High Risk</u>	Updated Sq. Footage	_____
Insp. Notification	<u>Email</u>	Sent Notification To	_____ Lic. Insp. <u>Yes</u>
Priority(P) Violations	<u>5</u>	Priority foundation(Pf) Violations	<u>0</u> Left App. <u>Yes</u> Lic. Approved <u>Yes</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.	..	..	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	..	..	p	..
<i>Fail Notes</i> | 3-301.11(B) | <i>P - No BHC w/ RTE food [Cook cut lettuce to put on taco salad with bare hands. Corrected on site(COS)-voluntary destruction and educated]</i>						
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	..	..	p	..
<i>Fail Notes</i> | 3-302.11(A)(1)(a) | <i>P - Separation-Raw & raw RTE food [RIC, wrapped head of lettuce sitting on top a ziplock of raw hamburger patties, no evidence of package leaking. Only incident of raw stored with RTE. COS-seperated and put ziplock of raw burgers in container]</i>						
14. Food-contact surfaces: cleaned and sanitized.	p	..	..	..	..	..
<i>This item has Notes. See Footnote 1 at end of questionnaire.</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	..	..	..	..	..
21. Proper date marking and disposition.	..	p	..	..	p	..
<i>Fail Notes</i> | 3-501.18(A)(2) | <i>P - RTE PHF, Disposition-discard if in a container w/out a date [RIC, small container of refried beans not marked with date opened, employee did not know when it was beans were opened, thought Monday or Tuesday, and chose to discarded beans. This was the only item not marked with prep date. COS]</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

KANSAS FOOD ESTABLISHMENT INSPECTION REPORT

Chemical	Y N O A C R
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| 25. Food additives: approved and properly used. | p |
| 26. Toxic substances properly identified, stored and used. | .. p .. . p .. |

<i>Fail Notes</i>	7-204.11	<i>P - Sanitizers, Criteria</i> <i>[Chlorine sanitizer in wiping cloth bucket at >200ppm, employee stated that wiping cloth was used in kitchen on food contact surfaces. COS-refilled at 200ppm]</i>
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Conformance with Approved Procedures	Y N O A C R
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| 27. Compliance with variance, specialized process and HACCP plan. | p |
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GOOD RETAIL PRACTICES

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

<i>Fail Notes</i>	4-204.112(B)	<i>Integrated or affixed thermometer in equipment</i> <i>[No thermometer in small black RIC.]</i>
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Food Identification	Y N O A C R
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| 35. Food properly labeled; original container. | p |
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Prevention of Food Contamination	Y N O A C R
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| 36. Insects, rodents and animals not present. | .. p |
| <i>Fail Notes</i> | 6-202.15(D)(1) <i>Outer openings protected-16 mesh to 1 inch screens</i>
<i>[Exit doors propped open for ventilation, no screens provided to prevent the entry of pests.]</i> |
| 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
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| 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
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|---|-----------|
| 45a. Food and non-food contact surfaces cleanable, properly designed, constructed and used-P and Pf items | p |
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Utensils, Equipment and Vending	Y N O A C R
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|---|----------------------------|
| 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
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| 48. Hot and cold water available; adequate pressure. | p |
| 49. Plumbing installed; proper backflow devices. | .. p p .. |
| <i>Fail Notes</i> 5-203.14 <i>P - Backflow prevention device or air gap provided on plumbing fixtures as required
[No backflow prevention device on mop sink with attached hose hanging down in the bottom of the sink. COS-disconnected hose]</i> | |
| 50. Sewage and waste water properly disposed. | p |
| 51. Toilet facilities: properly constructed, supplied and cleaned. | .. p |
| <i>Fail Notes</i> 5-501.17 <i>Receptacle in women's toilet room covered
[No covered trash receptacle in womens or unisex toilet room.]</i> | |
| 52. Garbage and refuse properly disposed; facilities maintained. | p |
| 53. Physical facilities installed, maintained and clean. | .. p |
| <i>Fail Notes</i> 6-501.11 <i>Physical facilities maintained in good repair
[Ceiling tile missing in kitchen.]</i> | |
| 54. Adequate ventilation and lighting; designated areas used. | p |

Administrative/Other	Y N O A C R
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|---|-----------------------------|
| 55. Other violations | |
| <i>Fail Notes</i> K.S.A. 65-689(a) <i>Operating without a food establishment license
[Facility did not renew license for 2013, application and fees of \$400 due immediately. Owner filled out application and check and placed in sealed envelope and mailed during inspection.]</i> | |

EDUCATIONAL MATERIALS

The following educational materials were provided ..

This item has Notes. See Footnote 2 at end of questionnaire.

<i>Material Distributed</i>		<i>Education Title #22 Focus On Food Safety Manual (on the Website) [Booklet]</i>
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KANSAS FOOD ESTABLISHMENT INSPECTION REPORT

Footnote 1

Notes:

200ppm quat sanitizer at bar and 3 vat in kitchen

Footnote 2

Notes:

Joint inspection conducted with KDA44

NOTICE OF NON COMPLIANCE WITH KANSAS LAW

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Phone: 3167750001

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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 06/02/13

Inspection Report Number 33002245

Inspection Report Date 05/23/13

Establishment Name BRICKS

Physical Address 409 STATE ST City AUGUSTA

Zip 67010

Additional Notes and Instructions

Follow-up conducted on or after 6/2/13