

**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:** 1/24/2013      **Business ID:** 95038FE  
**Business:** VENTURE FOODS  
  
 803 MAIN  
 ASHLAND, KS 67831

**Inspection:** 56003616  
**Store ID:**  
**Phone:** 6206352315  
**Inspector:** KDA56  
**Reason:** 01 Routine  
**Results:** Administrative Review

**Time In / Time Out**

Date	In	Out	Insp	Travel	Total	Mileage	Notes:
01/24/13	12:40 PM	02:35 PM	1:55	0:05	2:00	0	
<b>Total:</b>			1:55	0:05	2:00	0	

FOOD ESTABLISHMENT PROFILE			
Updated Risk Category	<u>RAC# 03 Medium Risk</u>	Updated Sq. Footage	<u>2. 5,000 - 10,000 sq feet</u>
Insp. Notification	<u>Fax</u> Critical (P) Violations <u>1</u>	Critical (Pf) Violations	<u>1</u> Lic. Insp. <u>Yes</u>
Sent Notification To	_____	Left App.	<u>Yes</u> Lic. Approved <u>Yes</u>
Certified Manager on Staff	___	Certified Manager Present	___ 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.

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 OR VISIT [www.ksda.gov/food\\_safety/](http://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						
<b>Demonstration of Knowledge</b>	Y	N	O	A	C	R
1. Certification by accredited program, compliance with Code, or correct responses.	..	..	p	..	..	..
<b>Employee Health</b>	Y	N	O	A	C	R
2. Management awareness; policy present.	p	..	..	..	..	..
3. Proper use of reporting, restriction and exclusion.	p	..	..	..	..	..
<b>Good Hygienic Practices</b>	Y	N	O	A	C	R

# KANSAS FOOD ESTABLISHMENT INSPECTION REPORT

<b>Good Hygienic Practices</b>	Y   N   O   A   C   R
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- |   |                       |
|---|-----------------------|
| 4. Proper eating, tasting, drinking, or tobacco use | p   "   "   "   "   " |
| 5. No discharge from eyes, nose and mouth.          | p   "   "   "   "   " |

<b>Preventing Contamination by Hands</b>	Y   N   O   A   C   R
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- |  |                       |
|--|-----------------------|
| 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   "   "   "   "   " |

<b>Approved Source</b>	Y   N   O   A   C   R
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- |  |                       |
|--|-----------------------|
| 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   "   "   " |

<b>Protection from Contamination</b>	Y   N   O   A   C   R
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- |                                   |                       |
|-----------------------------------|-----------------------|
| 13. Food separated and protected. | "   p   "   "   p   " |
|-----------------------------------|-----------------------|

<i>Fail Notes</i>	3-302.11(A)(1)(a)*	<i>CRITICAL P - Separation-Raw &amp; raw RTE food [There was a case of raw shell eggs stored over heads of cabbage in the walk in cooler. (Corrected on site)-eggs moved]. ]</i>
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|---|-----------------------|
| 14. Food-contact surfaces: cleaned and sanitized.                                     | p   "   "   "   "   " |
| 15. Proper disposition of returned, previously served, reconditioned and unsafe food. | "   "   p   "   "   " |

<b>Potentially Hazardous Food Time/Temperature</b>	Y   N   O   A   C   R
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- |  |                       |
|--|-----------------------|
| 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   "   "   "   "   " |

***This item has Notes. See Footnote 1 at end of questionnaire.***

- |   |                       |
|---|-----------------------|
| 21. Proper date marking and disposition.                    | "   "   p   "   "   " |
| 22. Time as a public health control: procedures and record. | "   "   "   p   "   " |

<b>Consumer Advisory</b>	Y   N   O   A   C   R
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|--|-----------------------|
| 23. Consumer advisory provided for raw or undercooked foods. | "   "   "   p   "   " |
|--|-----------------------|

<b>Highly Susceptible Populations</b>	Y   N   O   A   C   R
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|---|-----------------------|
| 24. Pasteurized foods used; prohibited foods not offered. | "   "   "   p   "   " |
|---|-----------------------|

<b>Chemical</b>	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   "   "   "   "   " |

<b>Conformance with Approved Procedures</b>	Y   N   O   A   C   R
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- |   |                       |
|---|-----------------------|
| 27. Compliance with variance, specialized process and HACCP plan. | "   "   "   p   "   " |
|---|-----------------------|

<b>GOOD RETAIL PRACTICES</b>
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# KANSAS FOOD ESTABLISHMENT INSPECTION REPORT

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	..	..	..	..
<i>Fail Notes</i>	3-602.11(B) <i>Label information (packaged in establishment)</i> [3-602.11(B)(2) <i>Packages of pasta salad and cole slaw, stored in the deli cooler, did not contain any ingredient label information. Packages of peanut squares, peko flakes, and chocolate peanut clusters did not contain any ingredient labeling information on the retail shelf. ]</i>						
Prevention of Food Contamination		Y	N	O	A	C	R
36. Insects, rodents and animals not present; no unauthorized persons.		..	p	..	..	..	..
<i>Fail Notes</i>	6-202.15(A)(3)* <i>SWING - Outer openings protected-solid, self-closing doors [(Non critical) There were gaps along the bottom of the overhead door in the storage area, gaps along the bottom of the double entrance doors, gap along the bottom of the west entrance door by the compressor room.]</i>						
37. Contamination prevented during food preparation, storage and display.		..	p	..	..	..	..
<i>Fail Notes</i>	3-305.11(A)(3) <i>Food stored 6" above floor [Cases of tortilla chips and fountain syrup were stored on the floor in the storage room. There were assorted cases of beef stored on the floor in the walk in freezer. ]</i>						
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
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(A)(3) <i>Equipment/utensil/linen storage-6" above floor [Single use meat trays were stored on the floor by the meat grinder and in the storage area west of the meat case. There cases of Ziplock containers stored on the floor on the retail sales floor. ]</i>  4-904.11(A) <i>Food-/lip-contact surfaces of utensils/single-service articles protected from contamination [Single use cups, lids, and coffee stir sticks were not stored in dispensing units on the customer self serve bar. ]</i>						
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

## KANSAS FOOD ESTABLISHMENT INSPECTION REPORT

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	..	..	..	..
<i>Fail Notes</i>   4-302.14 <i>Sanitizer test kit</i> [There were no chlorine sanitizer test strips available. ]						
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	..	..	..	..
<i>Fail Notes</i>   6-202.14 <i>Toilet rooms completely enclosed-self closing door</i> [The restroom doors were not self closing.]						
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</i> [There were several ceiling tiles with water throughout the facility. There was a ceiling tile missing in the ceiling by the mens restroom. There were holes in the wall on the south side of the compressor room.]						
6-501.12(A) <i>Physical facilities clean</i> [There was fountain syrup leaking on the floor in the fountain syrup storage area. ]						
54. Adequate ventilation and lighting; designated areas used.	..	p	..	..	p	..
<i>Fail Notes</i>   6-202.11() <i>Protective shielding on light bulbs over exposed</i> <i>food/utensils/equipment</i> [There were no protective shields over the lights in the meat room.]						
Administrative/Other	Y	N	O	A	C	R
55. Other violations	..	p	..	..	..	..
<i>Fail Notes</i>   K.S.A. 65-657(b) <i>Adulteration of drugs</i> [Containers of Bayer heart and health (expiration date of 3/11), Momentum back relief (expiration date of 6/11), and Midol (expiration date of 2/11) were held past the expiration dates on the retail shelf. (COS-removed from retail sale).]						

<b>EDUCATIONAL MATERIALS</b>
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The following educational materials were provided ..

## KANSAS FOOD ESTABLISHMENT INSPECTION REPORT

### Footnote 1

**Notes:**

Pepsi cooler: 41 F

Meat walk in cooler: 42 F

Walk in cooler: 43 F

Deli cooler: 39 F

Deli cooler #2: 43

Meat case: 40 F

Coke cooler: 43 F

Produce cooler: 43 F

Beer cooler: 43 F

Beer cooler #2: 43 F

Dairy cooler: 38 F

## KANSAS DEPARTMENT OF AGRICULTURE EGG INSPECTION

**Insp Date:** 1/24/2013      **Business ID:** 95038FE  
**Business:** VENTURE FOODS

803 MAIN  
 ASHLAND, KS 67831

**Inspection:** 56003616  
**Store ID:**  
**Phone:** 6206352315  
**Inspector:** KDA56  
**Reason:** 01 Routine

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**FULL OR LABEL INSPECTION**

TYPE OF INSPECTION   LABEL  

**CARTON INFORMATION**

USDA/EPIA # TX: 23950 P-1862 Or KS PERMIT # \_\_\_\_\_

LABEL NAME Shur Fine Medium Grade A CASE TEMPERATURE (° F) 39

BRAND NAME Shur Fine COOLER TEMPERATURE (° F) 39

MANUFACTURER ADDRESS PO Box 4057

MANUFACTURER CITY Portland STATE OR ZIP 97208

DISTRIBUTED BY Western Family Foods Inc.

DISTRIBUTER ADDRESS PO Box 4057

DISTRIBUTER CITY Portland STATE OR ZIP 97208

## FIELD WARNING LETTER

**Insp Date:** 1/24/2013      **Business ID:** 95038FE  
**Business:** VENTURE FOODS

803 MAIN  
ASHLAND, KS 67831

**Inspection:** 56003616  
**Store ID:**  
**Phone:** 6206352315  
**Inspector:** KDA56  
**Reason:** 01 Routine

**Reference:**

Time In / Time Out

Date	In	Out	Insp	Travel	Total	Mileage	Notes;
01/24/13	12:40 PM	02:35 PM	1:55	0:05	2:00	0	
Total:			1:55	0:05	2:00	0	

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## FIELD WARNING LETTER

The Kansas Food, Drug and Cosmetic Act, effective July 1, 2012, K.S.A. 65-619 *et seq.* and regulations promulgated pursuant thereto, grants the Kansas Department of Agriculture authority to regulate food establishments and food processing plants. The Kansas Food Code is adopted and amended by K.A.R. 4-28-8 through 15.

During the inspection today of the Food Establishment listed above, violations of the Kansas Food Code were observed. The violations are documented in the attached Kansas Food Establishment Inspection Report.

Although we will not take further action at this time based on this inspection report, repeated violations observed during future inspections 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 Kansas Food, Drug and Cosmetic Act;
- and/or any other penalty authorized by law.

Future inspections will be initiated during the next routine inspection cycle, unless we receive a complaint about the food establishment.