

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

COMPLIANCE KEY: Y=in compliance; N=not in compliance; O=not observed; A=not applicable; C=corrected on-site during inspection; R=repeat violation.

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.

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

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.

PLEASE CALL (785) 296-5600 IF YOU HAVE ANY QUESTIONS.

Insp Date: 1/5/2011 **Business ID:** 0710051R
Business: Graves Soda Fountain
 212 S. Summit
 Arkansas City, KS 67005

Inspection: 07000840
Store ID:
Phone: 6204428312
Inspector: KDA07
Reason: 10 Licensing

Time In / Time Out

Date	In	Out	Insp	Travel	Total	Mileage	Notes
01/05/11	01:10 PM	02:40 PM	1:30	0:05	1:35	0	
Total:			1:30	0:05	1:35	0	

Reference:

Time In: 1:10pm
Travel Time: 5
Educational Material: No
Risk Control Plan: No
Voluntary Destruction: Yes
Embargo Release: No
Left Application: Yes
Square Footage:

Time Out: 2:40pm
Risk Category: RAC# 05 High Risk
Notice of Non-compliance: No
Voluntary Closure: No
Embargo Notification: No
License Approved: Yes
CRITICAL VIOLATIONS: 2

FOODBORNE ILLNESS RISK FACTORS	Notes
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AND PUBLIC HEALTH INTERVENTIONS	Notes
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 Inspector

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KANSAS FOOD ESTABLISHMENT INSPECTION REPORT

Demonstration of Knowledge	Y	N	O	A	C	R	Notes
1. Certification by accredited program, compliance with Code, or correct responses.	X						

Employee Health	Y	N	O	A	C	R	Notes
2. Management awareness policy present.	X						
3. Proper use of reporting, restriction and exclusion.	X						

Good Hygienic Practices	Y	N	O	A	C	R	Notes
4. Proper eating, tasting, drinking, or tobacco use	X						
5. No discharge from eyes, nose and mouth.	X						

Preventing Contamination by Hands	Y	N	O	A	C	R	Notes
6. Hands clean and properly washed.	X						
7. No bare hand contact with RTE foods or approved alternate method properly followed.	X						
8. Adequate handwashing facilities supplied and accessible.		X			X		5-205.11(A) Handsink Accessible

Approved Source	Y	N	O	A	C	R	Notes
9. Food obtained from approved source.	X						
10. Food received at proper temperature.			X				
11. Food in good condition, safe and unadulterated.	X						
12. Required records available: shellstock tags, parasite destruction.				X			

Protection from Contamination	Y	N	O	A	C	R	Notes
13. Food separated and protected.		X			X		CRITICAL 3-302.11(A)(1)(a)* Separation-Raw & raw RTE
14. Food-contact surfaces: cleaned and sanitized.	X						
15. Proper disposition of returned, previously served, reconditioned and unsafe food.	X						

Potentially Hazardous Food Time/Temperature	Y	N	O	A	C	R	Notes
16. Proper cooking time and temperatures.	X						
17. Proper reheating procedures for hot holding.			X				
18. Proper cooling time and temperatures.			X				
19. Proper hot holding temperatures.			X				
20. Proper cold holding temperatures.		X			X		CRITICAL 3-501.16(A)(2)(a)* PHF Cold Holding-<41°F
21. Proper date marking and disposition.	X						
22. Time as a public health control: procedures and record.			X				

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KANSAS FOOD ESTABLISHMENT INSPECTION REPORT

Consumer Advisory	Y	N	O	A	C	R	Notes
23. Consumer advisory provided for raw or undercooked foods.				X			

Highly Susceptible Populations	Y	N	O	A	C	R	Notes
24. Pasteurized foods used							
prohibited foods not offered.				X			

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

Conformance with Approved Procedures	Y	N	O	A	C	R	Notes
27. Compliance with variance, specialized process and HACCP plan.			X				

GOOD RETAIL PRACTICES	Notes

Safe Food and Water	Y	N	O	A	C	R	Notes
28. Pasteurized eggs used where required.			X				
29. Water and ice from approved source.	X						
30. Variance obtained for specialized processing methods.				X			

Food Temperature Control	Y	N	O	A	C	R	Notes
31. Proper cooling methods used							
adequate equipment for temperature control.	X						
32. Plant food properly cooked for hot holding.			X				
33. Approved thawing methods used.	X						
34. Thermometers provided and accurate.		X					4-302.12 Food thermometers provided & accessible
Appropriate thermometer for measuring thin foods provided							

Food Identification	Y	N	O	A	C	R	Notes
35. Food properly labeled							
original container.	X						

Prevention of Food Contamination	Y	N	O	A	C	R	Notes
36. Insects, rodents and animals not present							
no unauthorized persons.	X						
37. Contamination prevented during food preparation, storage and display.	X						
38. Personal cleanliness.	X						

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KANSAS FOOD ESTABLISHMENT INSPECTION REPORT

39. Wiping cloths: properly used and stored.		X			X		3-304.14(B)(1) Wet wiping cloths stored in sanitizer
40. Washing fruits and vegetables.			X				

Proper Use of Utensils	Y	N	O	A	C	R	Notes
41. In-use utensils: properly stored.	X						
42. Utensils, equipment and linens: properly stored, dried and handled.	X						
43. Single-use and single-service articles: properly used.	X						
44. Gloves used properly.	X						

Utensils, Equipment and Vending	Y	N	O	A	C	R	Notes
45a. Food and non-food contact surfaces cleanable, properly designed, constructed and used-Critical items	X						
45b. Food and non-food contact surfaces cleanable, properly designed, constructed and used-non-critical items	X						
46. Warewashing facilities: installed, maintained, and used							
test strips.		X					4-302.14 Sanitizer test kit 4-501.116 Concentration of sanitizer solution determined by use of test kit
47. Non-food contact surfaces clean.	X						

Physical Facilities	Y	N	O	A	C	R	Notes
48. Hot and cold water available							
adequate pressure.	X						
49. Plumbing installed							
proper backflow devices.	X						
50. Sewage and waste water properly disposed.	X						
51. Toilet facilities: properly constructed, supplied and cleaned.	X						
52. Garbage and refuse properly disposed							
facilities maintained.	X						
53. Physical facilities installed, maintained and clean.		X					6-501.11 Physical facilities maintained in good repair
54. Adequate ventilation and lighting							
designated areas used.	X						

Administrative/Other	Y	N	O	A	C	R	Notes
55. Other violations			X				

Inspector _____

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KANSAS FOOD ESTABLISHMENT INSPECTION REPORT

Result:No Follow-up

Notes:

8. NC-Not Critical Hand wash sink blocked by trash can. COS-Corrected on site Moved by owner.

13. * Critical Eggs in refrigrator stored over ready to eat pie. COS-Eggs moved to bottom shelve.

20. * On counter diced tomatoes 64 degrees Fahrenheit (F) COS-Owner discarded VD.

34. NC-No thermometers available for checking internal temperatures of food.

39. NC-wet wiping towels not stored in sanitized water. COS-Owner replaced with water at 100 parts per million (PPM)

46. NC-No sanitizer test kit available

46. NC-water used for sanitizing registered no sanitizer present in the water. COS-Manager made water solution that registered 100ppm on inspectors test strips.

53. NC-Floor tiles missing and cracked behind bar and out in dining area.

Temperatures in degree (F) Reach in cooler Milk 42, Refrigerator behind bar Hot Dogs 38, 41, Milk 40 Baked beans 40, Diced Tomatoes 40, Pasta Salad 43, Potato salad 43, Chicken Breast 41, Back room refrigerator Pasta Salad 41, Ham sliced 41 Sliced turkey 41, Corned beef 40, Tuna salad 39.

Establishment took over ownership from Graves Drug after managing the store.

Questions please call Kansas Department of Agriculture at 785-296-5600.

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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.

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Arkansas City, KS 67005

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PRODUCT	Y	Notes
PRODUCT 1	X	VALUE: \$1 WEIGHT/AMT: 1 pound DESCRIPTION: Diced Tomatoes
PRODUCT 2		
PRODUCT 3		
PRODUCT 4		
PRODUCT 5		
PRODUCT 6		
PRODUCT 7		
PRODUCT 8		
PRODUCT 9		
PRODUCT 10		
OTHER PRODUCTS		

REASON	R	Notes
REASON PRODUCT DESTROYED	X	TEMPERATURE ABUSE

METHOD	M	Notes
METHOD PRODUCT DESTROYED	X	GARBAGE CAN

LOCATION	L	Notes
PRODUCT WAS DISPOSED OF:	X	KITCHEN

EMBARGO	Y	N	Notes

Inspector

Acknowledged Receipt

VOLUNTARY DESTRUCTION REPORT

PRODUCT EMBARGOED		X	
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Notes:

Inspector

Acknowledged Receipt