

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: 2/23/2011 **Business ID:** 58403FS
Business: ATCHISON COUNTRY MART

 2016 W 59 HWY PO BOX 690
 ATCHISON, KS 66002

Inspection: 12003080
Store ID:
Phone: 9133672151
Inspector: KDA12
Reason: 01 Routine

Reference:

Time In: 9:35
Travel Time: 55 min
Educational Material:
Risk Control Plan:
Voluntary Destruction: Yes
Embargo Release:
Left Application:
Square Footage:

Time Out: 11:15
Risk Category: RAC# 06 High Risk
Notice of Non-compliance:
Voluntary Closure:
Embargo Notification:
License Approved:
CRITICAL VIOLATIONS: 4

| | |
|---------------------------------------|--------------|
| FOODBORNE ILLNESS RISK FACTORS | Notes |
|---------------------------------------|--------------|

| | |
|--|--------------|
| AND PUBLIC HEALTH INTERVENTIONS | Notes |
|--|--------------|

| 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 | | | | | | | |

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KANSAS FOOD ESTABLISHMENT INSPECTION REPORT

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|--|---|--|--|--|--|--|--|
| 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 6-301.12 Hand Drying Provision. |

| 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 | | | | | | |
| 14. Food-contact surfaces: cleaned and sanitized. | | X | | | | X | CRITICAL 4-601.11A* Food Contact Clean to Sight and Touch |
| 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 | | | | X | CRITICAL 3-501.16(A)(1)* PHF Hot Holding->135°F |
| 20. Proper cold holding temperatures. | X | | | | | | |
| 21. Proper date marking and disposition. | | X | | | | X | CRITICAL 3-501.17(B)* RTE PHF, Date Marking-7 days (commercially prepared, opened, 41°F) |

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|---|--|--|--|---|--|--|--|
| 22. Time as a public health control: procedures and record. | | | | X | | | |
|---|--|--|--|---|--|--|--|

| 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 | | | |

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

| 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 | | | | | | |
| 39. Wiping cloths: properly used and stored. | X | | | | | | |
| 40. Washing fruits and vegetables. | | | X | | | | |

| Proper Use of Utensils | Y | N | O | A | C | R | Notes |
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| 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 | | | X | | CRITICAL 4-202.11(A)(2)* Food-contact surface cleanability-free of imperfections |
| 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 | | | | | 4-203.13 Warewash machine- Pressure devices accurate to + 2 pounds per square inch |
| 47. Non-food contact surfaces clean. | | X | | | | | 4-601.11(C) Nonfood contact surfaces of equipment clean |

| 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 | | | | | SWING 5-205.15(B) Plumbing system maintained in good repair |
| 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 | | | | | | |
| 54. Adequate ventilation and lighting designated areas used. | X | | | | | | |

| Administrative/Other | Y | N | O | A | C | R | Notes |
|-----------------------------|----------|----------|----------|----------|----------|----------|--------------|
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| 55. Other violations | X | | | | | | |
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Result:No Follow-up

Notes:

- 8 NC No paper towels at the ware washing room hand sink. (Corrected)
- 8 NC Hand sink blocked and inaccessible in the ware washing room. (Corrected-moved laundry bags).
- 14* Two pair of tongs hanging on storage rack had visible food particles on the blades. (Corrected-put into ware washing area to be washed).**
- 19* Mashed potatoes 135°F, Buffalo Chicken 133°F, Chicken Wings 120°F, Chicken Breast 124°F in deli hot hold case. (Corrected reheated to proper temperature. Manager stated these items had been in the hot case for 1 hour). Out of temperature hot dogs 75°F, and fried chicken 106°F in the Hobart Oven being hot held. (Corrected reheated)**
- 21* Meat Bologna, Old Fashioned Loaf date marking was unclear and deli manager could not verify when it was originally opened. Manager explained that the sell by date is supposed to be used as the expiration date, but the other employees are using the sold on date which is the open date of the deli meats. (Corrected - VD)**
- 45a* Four spatulas stored on the hanging rack has tears, chips, and cracks on the blades. (Corrected-thrown away)**
- 46 NC No test kit to test the sanitizer.
- 47 NC Door of WIF has visible debris buildup on the handle and door. Utensils storage rack has dust particles that could fall onto the clean utensils.
- 49 NC In the Deli RIC where the salads are kept a drain tube is missing and a collection container is being using for the condensation drainage. The salads have been moved away from this location.

- * **Critical Violation**
- NC Non Critical Violation**
- VD Voluntarily Destroyed**

Temps:

- Out of fryer: fried chicken breasts 185°F
- Hobart Oven: green beans 139°F
- Deli Hot Hold Fried Chicken 141°F
- Sausage Gravy 142°F, Chili 135°F
- Deli RIC: hot dogs 40°F, BBQ chicken 39°F
- Salad Bar: hard boiled eggs 43°F, cottage cheese 43°F, potato salad 42°F scrambled eggs 142°F, cheesy hash browns 135°F, ham 153°F, sausage links 148°F
- Deli Meat RIC: ham 41°F, potato salad 40°F, pasta salad 38°F, turkey 40°F
- WIC: potato salad 39°F, BBQ chicken 39°F

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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.

Insp Date: 2/23/2011 **Business ID:** 58403FS
Business: ATCHISON COUNTRY MART

Inspection: 12003080
Store ID:
Phone: 9133672151
Inspector: KDA12
Reason: 01 Routine

2016 W 59 HWY PO BOX 690
 ATCHISON, KS 66002

Reference:

| PRODUCT | Y | Notes |
|----------------|---|---|
| PRODUCT 1 | X | VALUE: \$ WEIGHT/AMT:1.45 lb DESCRIPTION:Meat Bologna |
| PRODUCT 2 | X | VALUE: \$ WEIGHT/AMT: 1.14 lb DESCRIPTION:Old Fashioned Loaf |
| 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 | IMPROPER DATE MARKING DISPOSITION |

| METHOD | M | Notes |
|--------------------------|---|-------------|
| METHOD PRODUCT DESTROYED | X | GARBAGE CAN |

| LOCATION | L | Notes |
|--------------------------|---|---------|
| PRODUCT WAS DISPOSED OF: | X | KITCHEN |

| EMBARGO | Y | N | Notes |
|-------------------|---|---|-------|
| PRODUCT EMBARGOED | | X | |

Notes:

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