



MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES
BUREAU OF ENVIRONMENTAL HEALTH SERVICES
FOOD ESTABLISHMENT INSPECTION REPORT

TIME IN	9:15 am	TIME OUT	12:30 pm
DATE	01/28/2020	PAGE	1 of 3

BASED ON AN INSPECTION THIS DAY, THE ITEMS NOTED BELOW IDENTIFY NONCOMPLIANCE IN OPERATIONS OR FACILITIES WHICH MUST BE CORRECTED BY THE NEXT ROUTINE INSPECTION, OR SUCH SHORTER PERIOD OF TIME AS MAY BE SPECIFIED IN WRITING BY THE REGULATORY AUTHORITY. FAILURE TO COMPLY WITH ANY TIME LIMITS FOR CORRECTIONS SPECIFIED IN THIS NOTICE MAY RESULT IN CESSATION OF YOUR FOOD OPERATIONS.

ESTABLISHMENT NAME: Subway	OWNER: Mike Reiss	PERSON IN CHARGE: Mary Bemis
ADDRESS: 620 N. Kingshighway	ESTABLISHMENT NUMBER:	COUNTY: Perry - 157
CITY/ZIP: Perryville, MO 63775	PHONE: 573-547-3535	FAX:
ESTABLISHMENT TYPE <input checked="" type="checkbox"/> BAKERY <input type="checkbox"/> C. STORE <input type="checkbox"/> CATERER <input type="checkbox"/> DELI <input type="checkbox"/> GROCERY STORE <input type="checkbox"/> INSTITUTION <input type="checkbox"/> MOBILE VENDORS <input checked="" type="checkbox"/> RESTAURANT <input type="checkbox"/> SCHOOL <input type="checkbox"/> SENIOR CENTER <input type="checkbox"/> SUMMER F.P. <input type="checkbox"/> TAVERN <input type="checkbox"/> TEMP.FOOD		P.H. PRIORITY: <input type="checkbox"/> H <input checked="" type="checkbox"/> M <input type="checkbox"/> L
PURPOSE <input type="checkbox"/> Pre-opening <input checked="" type="checkbox"/> Routine <input type="checkbox"/> Follow-up <input type="checkbox"/> Complaint <input type="checkbox"/> Other _____		
FROZEN DESSERT <input type="checkbox"/> Approved <input type="checkbox"/> Disapproved <input checked="" type="checkbox"/> Not Applicable License No. _____	SEWAGE DISPOSAL <input checked="" type="checkbox"/> PUBLIC <input type="checkbox"/> PRIVATE	WATER SUPPLY <input checked="" type="checkbox"/> COMMUNITY <input type="checkbox"/> NON-COMMUNITY <input type="checkbox"/> PRIVATE Date Sampled _____ Results _____

RISK FACTORS AND INTERVENTIONS

Risk factors are food preparation practices and employee behaviors most commonly reported to the Centers for Disease Control and Prevention as contributing factors in foodborne illness outbreaks. Public health interventions are control measures to prevent foodborne illness or injury.

Compliance	Demonstration of Knowledge	COS	R	Compliance	Potentially Hazardous Foods	COS	R
<input checked="" type="checkbox"/> OUT	Person in charge present, demonstrates knowledge, and performs duties			<input checked="" type="checkbox"/> OUT N/O N/A	Proper cooking, time and temperature		
Employee Health							
<input checked="" type="checkbox"/> OUT	Management awareness; policy present			IN OUT N/O <input checked="" type="checkbox"/> N/A	Proper reheating procedures for hot holding		
<input checked="" type="checkbox"/> OUT	Proper use of reporting, restriction and exclusion			IN OUT N/O <input checked="" type="checkbox"/> N/A	Proper cooling time and temperatures		
Good Hygienic Practices							
<input checked="" type="checkbox"/> OUT N/O	Proper eating, tasting, drinking or tobacco use			<input checked="" type="checkbox"/> OUT N/O N/A	Proper hot holding temperatures		
<input checked="" type="checkbox"/> OUT N/O	No discharge from eyes, nose and mouth			<input checked="" type="checkbox"/> OUT N/O N/A	Proper cold holding temperatures		
Preventing Contamination by Hands							
<input checked="" type="checkbox"/> OUT N/O	Hands clean and properly washed			IN OUT <input checked="" type="checkbox"/> N/A	Proper date marking and disposition		
<input checked="" type="checkbox"/> OUT N/O	No bare hand contact with ready-to-eat foods or approved alternate method properly followed				Time as a public health control (procedures / records)		
<input checked="" type="checkbox"/> OUT	Adequate handwashing facilities supplied & accessible			IN OUT N/O <input checked="" type="checkbox"/> N/A	Consumer Advisory		
Approved Source							
<input checked="" type="checkbox"/> OUT	Food obtained from approved source			IN OUT <input checked="" type="checkbox"/> N/A	Consumer advisory provided for raw or undercooked food		
IN OUT <input checked="" type="checkbox"/> N/A	Food received at proper temperature			<input checked="" type="checkbox"/> OUT	Highly Susceptible Populations		
<input checked="" type="checkbox"/> OUT	Food in good condition, safe and unadulterated			IN OUT N/O <input checked="" type="checkbox"/> N/A	Pasteurized foods used, prohibited foods not offered		
IN OUT N/O <input checked="" type="checkbox"/> N/A	Required records available: shellstock tags, parasite destruction			IN OUT <input checked="" type="checkbox"/> N/A	Chemical		
Protection from Contamination							
<input checked="" type="checkbox"/> OUT N/A	Food separated and protected			The letter to the left of each item indicates that item's status at the time of the inspection. IN = in compliance OUT = not in compliance N/A = not applicable N/O = not observed COS=Corrected On Site R=Repeat Item			
IN <input checked="" type="checkbox"/> T N/A	Food-contact surfaces cleaned & sanitized		<input checked="" type="checkbox"/>				
<input checked="" type="checkbox"/> OUT N/O	Proper disposition of returned, previously served, reconditioned, and unsafe food						

GOOD RETAIL PRACTICES

Good Retail Practices are preventative measures to control the introduction of pathogens, chemicals, and physical objects into foods.

IN	OUT	Safe Food and Water	COS	R	IN	OUT	Proper Use of Utensils	COS	R
<input checked="" type="checkbox"/>		Pasteurized eggs used where required			<input checked="" type="checkbox"/>		In-use utensils: properly stored		
<input checked="" type="checkbox"/>		Water and ice from approved source				<input checked="" type="checkbox"/>	Utensils, equipment and linens: properly stored, dried, handled		
Food Temperature Control									
<input checked="" type="checkbox"/>		Adequate equipment for temperature control			<input checked="" type="checkbox"/>		Single-use/single-service articles: properly stored, used		
<input checked="" type="checkbox"/>		Approved thawing methods used			<input checked="" type="checkbox"/>		Gloves used properly		
	<input checked="" type="checkbox"/>	Thermometers provided and accurate				<input checked="" type="checkbox"/>	Utensils, Equipment and Vending		
Food Identification									
<input checked="" type="checkbox"/>		Food properly labeled; original container			<input checked="" type="checkbox"/>		Food and nonfood-contact surfaces cleanable, properly designed, constructed, and used		
Prevention of Food Contamination									
<input checked="" type="checkbox"/>		Insects, rodents, and animals not present			<input checked="" type="checkbox"/>		Warewashing facilities: installed, maintained, used; test strips used		<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/>		Contamination prevented during food preparation, storage and display			<input checked="" type="checkbox"/>		Nonfood-contact surfaces clean		
		Personal cleanliness: clean outer clothing, hair restraint, fingernails and jewelry			<input checked="" type="checkbox"/>		Physical Facilities		
<input checked="" type="checkbox"/>		Wiping cloths: properly used and stored			<input checked="" type="checkbox"/>		Hot and cold water available; adequate pressure		
<input checked="" type="checkbox"/>		Fruits and vegetables washed before use			<input checked="" type="checkbox"/>		Plumbing installed; proper backflow devices		
					<input checked="" type="checkbox"/>		Sewage and wastewater properly disposed		
					<input checked="" type="checkbox"/>		Toilet facilities: properly constructed, supplied, cleaned		
					<input checked="" type="checkbox"/>		Garbage/refuse properly disposed; facilities maintained		
					<input checked="" type="checkbox"/>		Physical facilities installed, maintained, and clean		

Person in Charge / Title: Mary Bemis	Mary Bemis	Date: 01/28/2020
Inspector: Melanie Zernicke	Melanie Zernicke	Follow-up: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Telephone No. 573-547-6564	EPHS No. 1682	Follow-up Date: N/A



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ESTABLISHMENT NAME Subway		ADDRESS 620 N. Kingshighway	CITY/ZIP Perryville, MO 63775
FOOD PRODUCT/LOCATION		TEMP. in ° F	FOOD PRODUCT/ LOCATION
Norlake walk-in cooler		38.7	Slices tomatoes / cold holding in table prep cooler #2
Norlake walk-in freezer (defrosting)		20.0	Pre-cooked deli roast beef / cold holding in table prep cooler #1
Duke undercounter cooler		37.6	Cooked egg patty / holding in Norlake walk-in cooler
True beverage cooler		38.0	Pre-cooked chopped chicken / in Norlake walk-in cooler
Table prep cooler #1 / Table prep cooler #2		34.7 / 40.0	Chili / hot holding in steam well in front counter

Code Reference	PRIORITY ITEMS	Correct by (date)	Initial
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Priority items contribute directly to the elimination, prevention or reduction to an acceptable level, hazards associated with foodborne illness or injury. **These items MUST RECEIVE IMMEDIATE ACTION within 72 hours or as stated.**

4-202.11 (A)(2)	Inspector observed torn baking mats stored as clean on mat rack over manual 3-compartment sink. Multiuse food-contact surfaces shall be free of breaks, open seams, cracks, chips, inclusions, pits, and similar imperfections. COS: Inspector observed manager voluntarily discard torn baking mats during inspection.	01/28/20	
4-601.11 (A)	Inspector observed clean scrapers stored inbetween sink gap soiled with food like debris. Equipment food-contact surfaces and utensils shall be clean to sight and touch. COS: Inspector observed manager clean scrapers and stored to dry on above drying rack.	01/28/20	

Code Reference	CORE ITEMS	Correct by (date)	Initial
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Core items relate to general sanitation, operational controls, facilities or structures, equipment design, general maintenance or sanitation standard operating procedures (SSOPs). **These items are to be corrected by the next regular inspection or as stated.**

4-501.11	Inspector observed bread proofer leaking onto floor. Equipment shall be maintained in good repair.	02/28/20	
4-501.12	Inspector observed cutting boards on table prep coolers #1 & #2 heavily scratched. Surfaces such as cutting blocks and boards that are subject to scratching and scoring shall be resurfaced if they can no longer be effectively cleaned and sanitized, or discarded if they are not capable of being resurfaced.	02/28/20	
3-304.12 (A)(9)	Inspector observed clean knives stored under hand soap dispenser in front food prep area. Equipment, a cabinet used for the storage of food, or a cabinet that is used to store cleaned and sanitized equipment, utensils, laundered linens, and single-service and single-use articles may not be located under other sources of contamination. COS: Inspector observed manager move clean knives away from underneath hand soap dispenser.	01/28/20	
4-204.112 (A)	No thermometer were present in table prep cooler #1, table prep cooler #2, Duke undercounter cooler, and Norlake walk-in cooler. In a mechanically refrigerated or hot food storage unit, the sensor of a temperature measuring device shall be located to measure the air temperature or a simulated product temperature in the warmest part of a mechanically refrigerated unit and in the coolest part of a hot food storage unit.	02/28/20	

EDUCATION PROVIDED OR COMMENTS

Water for facility is provided by the city of Perryville, MO. Pest control is conducted by Depro on a monthly basis. Inspector discussed employee hygiene/illness reporting, food temperatures, and the use of the Sani Station. Sani Station is designed to have food (see page 3)

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Inspector: <i>Melanie Zernicke</i> Melanie Zernicke	Telephone No. 573-547-6564	EPHS No. 1682
Follow-up: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Follow-up Date: N/a



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FOOD PRODUCT/LOCATION		TEMP. in ° F	FOOD PRODUCT/ LOCATION		TEMP. in ° F
			Broccoli cheddar soup / hot holding in steam well		198.0

Code Reference	PRIORITY ITEMS	Correct by (date)	Initial
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Priority items contribute directly to the elimination, prevention or reduction to an acceptable level, hazards associated with foodborne illness or injury. **These items MUST RECEIVE IMMEDIATE ACTION within 72 hours or as stated.**

	<p>Note:</p> <p>Warewashing equipment: Manual 3-compartment sink - SSDC approved quaternary sanitizer - 200 parts per million (ppm). Inspector verified concentration of sanitizer using a quaternary test strip.</p> <p>Sanitizing food and non-food contact surfaces: Wiping cloth bucket - SSDC approved quaternary sanitizer - ppm. Inspector verified concentration of sanitizer using a quaternary test strip.</p> <p>***Note: Facility will be remodeled during the spring of 2020, a copy of new food facility plans shall be provided to the Health Department.</p>		
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Code Reference	CORE ITEMS	Correct by (date)	Initial
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Core items relate to general sanitation, operational controls, facilities or structures, equipment design, general maintenance or sanitation standard operating procedures (SSOPs). **These items are to be corrected by the next regular inspection or as stated.**

4-501.14	Inspector observed caulking around manual 3-compartment sink soiled with a black-like debris. A warewashing machine; the compartments of sinks, basins, or other receptacles used for washing and rinsing equipment, utensils, or raw foods, or laundering wiping cloths; and drainboards or other equipment used to substitute for drainboards shall be cleaned before use; throughout the day at a frequency necessary to prevent recontamination of equipment and utensils and to ensure that the equipment performs its intended function; and if used, at least every twenty-four (24) hours. COS: Inspector observed manager cleaning warewash sink caulking during inspection. Inspector recommends to replaced caulking.	01/28/20	
5-501.114	Inspector observed drain plug missing on dumpster. Drains in receptacles and waste handling units for refuse, recyclables, and returnables shall have drain plugs in place.	01/28/20	
		02/28/20	

EDUCATION PROVIDED OR COMMENTS

(continued) and then soaked in approved Sani Station detergent sanitizer for 60 seconds, and then air dried. Sani Station shall be cleaned every four (4) hours or when Sani station solution becomes too soiled to sanitized effectively.

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Inspector: <i>Melanie Zernicke</i> Melanie Zernicke	Telephone No. 573-547-6564	EPHS No. 1682	Follow-up: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Follow-up Date: N/a