



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

TIME IN 10:25 AM	TIME OUT 12:10 PM
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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: DEXTER BBQ	OWNER: BRUCE VANCE	PERSON IN CHARGE: WES FASSEL
ADDRESS: 1411 W BUSINESS 60		COUNTY: STODARD
CITY/ZIP: DEXTER 63841	PHONE: 624-8810	FAX:
ESTABLISHMENT TYPE <input 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 checked="" type="checkbox"/> RESTAURANT <input type="checkbox"/> SCHOOL <input type="checkbox"/> SENIOR CENTER <input type="checkbox"/> TEMP. FOOD <input type="checkbox"/> TAVERN <input type="checkbox"/> MOBILE VENDORS		P.H. PRIORITY: <input checked="" type="checkbox"/> H <input 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
IN	OUT	Person in charge present, demonstrates knowledge, and performs duties			IN	OUT N/O N/A	Proper cooking, time and temperature	
		Employee Health			IN	OUT N/O N/A	Proper reheating procedures for hot holding	
IN	OUT	Management awareness; policy present			IN	OUT N/O N/A	Proper cooling time and temperatures	
IN	OUT	Proper use of reporting, restriction and exclusion			IN	OUT N/O N/A	Proper hot holding temperatures	
		Good Hygienic Practices			IN	OUT N/A	Proper cold holding temperatures	
IN	OUT N/O	Proper eating, tasting, drinking or tobacco use			IN	OUT N/O N/A	Proper date marking and disposition	
IN	OUT N/O	No discharge from eyes, nose and mouth			IN	OUT N/O N/A	Time as a public health control (procedures / records)	
		Preventing Contamination by Hands					Consumer Advisory	
IN	OUT N/O	Hands clean and properly washed			IN	OUT N/A	Consumer advisory provided for raw or undercooked food	
IN	OUT N/O	No bare hand contact with ready-to-eat foods or approved alternate method properly followed					Highly Susceptible Populations	
IN	OUT	Adequate handwashing facilities supplied & accessible			IN	OUT N/O N/A	Pasteurized foods used, prohibited foods not offered	
		Approved Source					Chemical	
IN	OUT	Food obtained from approved source			IN	OUT N/A	Food additives: approved and properly used	
IN	OUT N/O N/A	Food received at proper temperature			IN	OUT	Toxic substances properly identified, stored and used	
IN	OUT	Food in good condition, safe and unadulterated					Conformance with Approved Procedures	
IN	OUT N/O N/A	Required records available: shellstock tags, parasite destruction			IN	OUT N/A	Compliance with approved Specialized Process and HACCP plan	
		Protection from Contamination			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 COS = Corrected On Site R = Repeat Item			
IN	OUT N/A	Food separated and protected						
IN	OUT N/A	Food-contact surfaces cleaned & sanitized						
IN	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
✓		Pasteurized eggs used where required			✓		In-use utensils: properly stored		
✓		Water and ice from approved source			✓		Utensils, equipment and linens: properly stored, dried, handled		
		Food Temperature Control			✓		Single-use/single-service articles: properly stored, used		
✓		Adequate equipment for temperature control			✓		Gloves used properly		
✓		Approved thawing methods used					Utensils, Equipment and Vending		
	X	Thermometers provided and accurate			✓		Food and nonfood-contact surfaces cleanable, properly designed, constructed, and used		
		Food Identification			✓		Warewashing facilities: installed, maintained, used; test strips used		
✓		Food properly labeled; original container			X		Nonfood-contact surfaces clean		
		Prevention of Food Contamination					Physical Facilities		
✓		Insects, rodents, and animals not present			✓		Hot and cold water available; adequate pressure		
✓		Contamination prevented during food preparation, storage and display			✓		Plumbing installed; proper backflow devices		
	X	Personal cleanliness: clean outer clothing, hair restraint, fingernails and jewelry			✓		Sewage and wastewater properly disposed		
✓		Wiping cloths: properly used and stored			✓		Toilet facilities: properly constructed, supplied, cleaned		
✓		Fruits and vegetables washed before use			✓		Garbage/refuse properly disposed; facilities maintained		
					X		Physical facilities installed, maintained, and clean		

Person in Charge / Title: Wesley Fassel	Date: 10-15-2021
Inspector: William A. Brandel	Telephone No.: 568-4593
EPHS No.: 1582	Follow-up: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Follow-up Date: N/A





TIME IN 10:55 AM	TIME OUT 12:10 PM
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Code Reference	CORE ITEMS 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.	Correct by (date)	Initial
4-204.112	HOT HOLD OVENS IN SMOKER ROOM - OUTSIDE THERM NOT ACCURATE - PLACE HOT TEMP THERM. IN EACH UNIT  SMALL PRKT TABLE NO THERMOMETER - REPLACE		
2-402.11	COOKING STAFF - NEED TO HAVE ALL HAIR RESTRAINED OR USE HAT/HAIKNET MANAGER W SHORT BEARD - SHOULD BE WEARING A BEARD GUARD		
4-601.11C	DIRTY NONFOOD CONTACT = FLOORS W BLACK DIRT/GREASE BUILDUP SODA FOUNTAIN LEAKING ON FLOOR FLOOR OF WALK IN COOLER, BLOOD, FOOD - CLEAN BETTER		

	EDUCATION PROVIDED OR COMMENTS

Person in Charge /Title: Wally Marshall			Date: 10/15/2001
Inspector: WILLIAM A. BRANDEI	Telephone No. 368-4593	EPHS No. 1502	Follow-up: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Follow-up Date: N/A