



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

TIME IN: 10:35	TIME OUT: 11:40
PAGE 1 of 2	

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: East Prairie Nutrition Center	OWNER:	PERSON IN CHARGE:
ADDRESS: 304 E Main		COUNTY: Mississippi
CITY/ZIP: East Prairie 63815	PHONE: 644-5805	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 type="checkbox"/> RESTAURANT <input type="checkbox"/> SCHOOL <input checked="" 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		
Approved Source				Highly Susceptible Populations			
IN OUT N/O	No bare hand contact with ready-to-eat foods or approved alternate method properly followed			IN OUT N/O N/A	Pasteurized foods used, prohibited foods not offered		
IN OUT	Adequate handwashing facilities supplied & accessible			IN OUT	Food additives: approved and properly used		
Approved Source				Chemical			
IN OUT	Food obtained from approved source			IN OUT N/A	Toxic substances properly identified, stored and used		
IN OUT N/O N/A	Food received at proper temperature			IN OUT	Compliance with approved Specialized Process and HACCP plan		
Protection from Contamination				Conformance with Approved Procedures			
IN OUT N/A	Food separated and protected			IN OUT N/A	The letter to the left of each item indicates that item's status at the time of the inspection.		
IN OUT N/A	Food-contact surfaces cleaned & sanitized				IN = in compliance	OUT = not in compliance	
IN OUT N/O	Proper disposition of returned, previously served, reconditioned, and unsafe food				N/A = not applicable	N/O = not observed	
					COS = Corrected On Site	R = Repeat Item	

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

Person in Charge / Title: Bailey Emerson / Delivery	Date: 12-15-2022
Inspector: Codie Marcum	Telephone No.: 513-683-2191
EPHS No.: 1681	Follow-up: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	Follow-up Date:



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PAGE 2 of 2	

ESTABLISHMENT NAME East Prairie Nutrition Center		ADDRESS 304 E. Main		CITY East Prairie		ZIP 63845	
FOOD PRODUCT/LOCATION Ambient Air (HAA) milk cooler		TEMP. 35°F		FOOD PRODUCT/LOCATION		TEMP.	
AA water in cooler		38°F					
Sausage / Steamwell		145°F					

Code Reference	PRIORITY ITEMS 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.	Correct by (date)	Initial
	none at this time		

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
	none at this time		

EDUCATION PROVIDED OR COMMENTS

Person in Charge / Title: Bailey Emerson / Delivery	Date: 12-15-2022
Inspector: Judie Marcum	Telephone No: 636-683-2191
EPHS No: 1081	Follow-up: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	Follow-up Date: