



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

TIME IN 12:35pm	TIME OUT 1:00pm
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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: East Prairie Nutrition Center	OWNER:	PERSON IN CHARGE: Sue Hunsley
ADDRESS: 304 E. Main	CITY/ZIP: East Prairie 63545	PHONE: 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 checked="" type="checkbox"/> INSTITUTION <input type="checkbox"/> MOBILE VENDORS <input 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		COUNTY: Mississippi
PURPOSE <input type="checkbox"/> Pre-opening <input type="checkbox"/> Routine <input checked="" type="checkbox"/> Follow-up <input type="checkbox"/> Complaint <input type="checkbox"/> Other		P.H. PRIORITY: <input type="checkbox"/> H <input checked="" type="checkbox"/> M <input type="checkbox"/> L
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	Person in charge present, demonstrates knowledge, and performs duties			IN	Proper cooking, time and temperature		
	<b>Employee Health</b>						
IN	Management awareness; policy present			IN	Proper reheating procedures for hot holding		
IN	Proper use of reporting, restriction and exclusion			IN	Proper cooling time and temperatures		
	<b>Good Hygienic Practices</b>			IN	Proper hot holding temperatures		
IN	Proper eating, tasting, drinking or tobacco use			IN	Proper cold holding temperatures		
IN	No discharge from eyes, nose and mouth			IN	Proper date marking and disposition		
	<b>Preventing Contamination by Hands</b>			IN	Time as a public health control (procedures / records)		
IN	Hands clean and properly washed			IN	<b>Consumer Advisory</b>		
IN	No bare hand contact with ready-to-eat foods or approved alternate method properly followed			IN	Consumer advisory provided for raw or undercooked food		
IN	Adequate handwashing facilities supplied & accessible			IN	<b>Highly Susceptible Populations</b>		
	<b>Approved Source</b>			IN	Pasteurized foods used, prohibited foods not offered		
IN	Food obtained from approved source			IN	<b>Chemical</b>		
IN	Food received at proper temperature			IN	Food additives: approved and properly used		
IN	Food in good condition, safe and unadulterated			IN	Toxic substances properly identified, stored and used		
IN	Required records available: shellstock tags, parasite destruction			IN	<b>Conformance with Approved Procedures</b>		
	<b>Protection from Contamination</b>			IN	Compliance with approved Specialized Process and HACCP plan		
IN	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	Food-contact surfaces cleaned & sanitized						
IN	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		
		<b>Food Temperature Control</b>					Single-use/single-service articles: properly stored, used		
		Adequate equipment for temperature control					Gloves used properly		
		Approved thawing methods used					<b>Utensils, Equipment and Vending</b>		
		Thermometers provided and accurate					Food and nonfood-contact surfaces cleanable, properly designed, constructed, and used		
		<b>Food Identification</b>					Warewashing facilities: installed, maintained, used; test strips used		
		Food properly labeled; original container					Nonfood-contact surfaces clean		
		<b>Prevention of Food Contamination</b>					<b>Physical Facilities</b>		
		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		
		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		
							Physical facilities installed, maintained, and clean		

Person in Charge /Title: Sue Hunsley	Date: 4/11/17
Inspector: D. E. Wabnitz	Telephone No.: 683-2191
EPHS No.: 1709	Follow-up: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	Follow-up Date:



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ESTABLISHMENT NAME East Prairie Nutrition Center		ADDRESS 304 E. Main		CITY East Prairie	ZIP 63545
FOOD PRODUCT/LOCATION		TEMP.	FOOD PRODUCT/LOCATION		TEMP.

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

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
6-501.12A	Corrected		
3-505.11			
6-501.12A			

EDUCATION PROVIDED OR COMMENTS

Person in Charge / Title: *[Signature]* Date: 4/1/11  
 Inspector: *[Signature]* Telephone No. 685 2191 EPHS No. 1209  
 Follow-up:  Yes  No  
 Follow-up Date: *[Signature]*