

## MISSOURI DEPARTMENT ( HEALTH AND SENIOR SERVICES BUREAU OF ENVIRONMEN ... L HEALTH SERVICES FOOD ESTABLISHMENT INSPECTION REPORT

TIME IN 1030	TIME OUT 1230		
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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. PERSON IN CHARGE: ESTABLISHMENT NAME: GRECIAN STEAK HOUSE OWNER: STEVE PANOUSIS Steve Panousis COUNTY: 069 ADDRESS: 1108 SOUTH BYPASS CITY/ZIP: KENNETT PHONE: 573-888-9522 FAX: P.H. PRIORITY: m H ESTABLISHMENT TYPE ☐ MOBILE VENDORS C. STORE ☐ CATERER
☐ SENIOR CENTER ☐ DELI☐ SUMMER F.P **GROCERY STORE** ☐ INSTITUTION □ BAKERY C. STORE TEMP.FOOD **TAVERN** RESTAURANT ☐ Other ☐ Complaint □ Pre-opening Routine ☐ Follow-up SEWAGE DISPOSAL FROZEN DESSERT WATER SUPPLY PRIVATE □ PRIVATE ■ NON-COMMUNITY Approved Disapproved PUBLIC COMMUNITY Results Date Sampled License No. 069-15884 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 COS R COS Compliance Potentially Hazardous Foods Demonstration of Knowledge Compliance Proper cooking, time and temperature Person in charge present, demonstrates knowledge, OUT OUT N/O N/A and performs duties Proper reheating procedures for hot holding N/O N/A Employee Health OUT Proper cooling time and temperatures OUT OUT N/O N/A Management awareness; policy present Proper use of reporting, restriction and exclusion N/O N/A Proper hot holding temperatures OUT OUT OUT N/A Proper cold holding temperatures Good Hygienic Practices Proper date marking and disposition OUT N/O Proper eating, tasting, drinking or tobacco use OUT N/O N/A Time as a public health control (procedures / No discharge from eyes, nose and mouth OUT N/O N/O OUT records) Preventing Contamination by Hands Consumer Advisory Consumer advisory provided for raw or Hands clean and properly washed OUT N/O OUT undercooked food Highly Susceptible Populations No bare hand contact with ready-to-eat foods or N/O OUT approved alternate method properly followed Adequate handwashing facilities supplied & Pasteurized foods used, prohibited foods not OUT IN OUT N/O offered accessible Chemical Approved Source N/A Food additives: approved and properly used Food obtained from approved source OUT OUT Food received at proper temperature Toxic substances properly identified, stored and OUT OUT N/O N/A Conformance with Approved Procedures Food in good condition, safe and unadulterated OUT Compliance with approved Specialized Process Required records available: shellstock tags, parasite OUT IN OUT N/O MIN and HACCP plan destruction Protection from Contamination The letter to the left of each item indicates that item's status at the time of the Food separated and protected IN N/A inspection. Food-contact surfaces cleaned & sanitized IN = in compliance OUT = not in compliance OUT N/A N/A = not applicable N/O = not observed Proper disposition of returned, previously served, OUT NED IN 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. cos R IN Proper Use of Utensils COS R OUT Safe Food and Water Pasteurized eggs used where required × In-use utensils: properly stored X Utensils, equipment and linens: properly stored, dried, Water and ice from approved source × handled Single-use/single-service articles: properly stored, used × Food Temperature Control Adequate equipment for temperature control × Gloves used properly Utensils, Equipment and Vending Approved thawing methods used X Food and nonfood-contact surfaces cleanable, properly Thermometers provided and accurate × × designed, constructed, and used Warewashing facilities: installed, maintained, used; test Food Identification × strips used × Nonfood-contact surfaces clean Food properly labeled; original container × **Physical Facilities** Prevention of Food Contamination × Hot and cold water available; adequate pressure Insects, rodents, and animals not present × Plumbing installed; proper backflow devices Contamination prevented during food preparation, storage × X × and display Sewage and wastewater properly disposed Personal cleanliness: clean outer clothing, hair restraint, × × fingernails and jewelry Wiping cloths: properly used and stored X Toilet facilities: properly constructed, supplied, cleaned Garbage/refuse properly disposed; facilities maintained Fruits and vegetables washed before use × ×C Physical facilities installed, maintained, and clean Person in Charge /Title: Steve Panousis Date: 02/21/2023 EPHS No. No Follow-up: Telephone No. 573-888-9008 1647 Follow-up Date:

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ESTABLISHMENT NAME GRECIAN STEAK HOUSE		ADDRESS CITY/ZIP KENNETT					
FOOD PRODUCT/LOCATION		TEMP. in ° F	FOOD PRODUCT/ LOCATION		TEMP. in ° F		
Walk in cooler		35		Walk in Cooler front		39	
Prep Cooler		41		Eggs/Prep Cooler			
	Dish Washer	160					
Walk in Freezer 0 Inline kitchen cooler				35			
Tomatoes/Prep Cooler 41							
Code		PRIORI	TYITEMS		Correct by	Initial	
Reference	Priority items contribute directly to the eli or injury. These items MUST RECEIVE	imination, prevention or redu  IMMEDIATE ACTION within	ction to an acceptable level, hazards n 72 hours or as stated.	associated with foodborne illness	(date)		
3-302.11	Raw whole shell eggs above				cos		
						-	
						1	
					,	-	
Code		CORE	ITEMS		Correct by	Initial	
Reference	5000				(date)		
6-501.11					CIP	J	
6-501.11					CIP	/	
3-305.11	Tan gada do como mar adoctina do como anticomo de como				COS	/	
3-305.11						/	
0 000.11	Opon bag of field in roas over						
	Thermometer						
NRI	Next Routine Inspection						
cos	Corrected onsite						
			OVER OR OOM # 15175				
		EDUCATION PR	OVIDED OR COMMENTS				
	AMPLO .	1		Doto:			
Person in Charge /Title: Steve Panousis Date: 02/21/20					023		
Inspector: Telephone No. EPHS No. Follow-up:					Yes	☑ No	
NO 500 APT (0.4	no july	573-888-9		Follow-up Date:		E6.37A	