



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

TIME IN 900 TIME OUT 1100
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: **ERNIES COUNTRY KITCHEN** OWNER: **RICHARD PATILLO** PERSON IN CHARGE: **RICHARD PATILLO**
ADDRESS: **211 S MAIN STREET** COUNTY: **069**
CITY/ZIP: **MALDEN, MO 63863** PHONE: **573-276-4255** FAX: P.H. PRIORITY: H M L
ESTABLISHMENT TYPE
 BAKERY C. STORE CATERER DELI GROCERY STORE INSTITUTION MOBILE VENDORS
 RESTAURANT SCHOOL SENIOR CENTER SUMMER F.P. TAVERN TEMP.FOOD
PURPOSE
 Pre-opening Routine Follow-up Complaint Other
FROZEN DESSERT Approved Disapproved SEWAGE DISPOSAL PUBLIC PRIVATE WATER SUPPLY COMMUNITY NON-COMMUNITY PRIVATE
Date Sampled _____ Results _____
License No. NA

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			IN OUT <input checked="" type="checkbox"/> N/A	Proper cooking, time and temperature		
	Employee Health			IN OUT <input checked="" type="checkbox"/> N/A	Proper reheating procedures for hot holding		
<input checked="" type="checkbox"/> OUT	Management awareness; policy present			IN OUT <input checked="" type="checkbox"/> N/A	Proper cooling time and temperatures		
<input checked="" type="checkbox"/> OUT	Proper use of reporting, restriction and exclusion			<input checked="" type="checkbox"/> OUT N/O N/A	Proper hot holding temperatures		
	Good Hygienic Practices			<input checked="" type="checkbox"/> OUT N/A	Proper cold holding temperatures		
<input checked="" type="checkbox"/> OUT N/O	Proper eating, tasting, drinking or tobacco use			IN <input checked="" type="checkbox"/> N/O N/A	Proper date marking and disposition		
<input checked="" type="checkbox"/> OUT N/O	No discharge from eyes, nose and mouth			IN OUT N/O <input checked="" type="checkbox"/>	Time as a public health control (procedures / records)		
	Preventing Contamination by Hands				Consumer Advisory		
<input checked="" type="checkbox"/> OUT N/O	Hands clean and properly washed			<input checked="" type="checkbox"/> OUT N/A	Consumer advisory provided for raw or undercooked food		
<input checked="" type="checkbox"/> OUT N/O	No bare hand contact with ready-to-eat foods or approved alternate method properly followed				Highly Susceptible Populations		
<input checked="" type="checkbox"/> OUT	Adequate handwashing facilities supplied & accessible			<input checked="" type="checkbox"/> OUT N/O N/A	Pasteurized foods used, prohibited foods not offered		
	Approved Source				Chemicals		
<input checked="" type="checkbox"/> OUT	Food obtained from approved source			<input checked="" type="checkbox"/> OUT N/A	Food additives: approved and properly used		
IN OUT <input checked="" type="checkbox"/> N/A	Food received at proper temperature			<input checked="" type="checkbox"/> OUT	Toxic substances properly identified, stored and used		
<input checked="" type="checkbox"/> OUT	Food in good condition, safe and unadulterated				Compliance with Approved Procedures		
IN OUT N/O <input checked="" type="checkbox"/>	Required records available: shellstock tags, parasite destruction			IN OUT <input checked="" type="checkbox"/>	Compliance with approved Specialized Process and HACCP plan		
	Prevention of Cross-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 N/O = not observed		
<input checked="" type="checkbox"/> OUT N/A	Food separated and protected						
IN <input checked="" type="checkbox"/> N/A	Food-contact surfaces cleaned & sanitized						
IN OUT <input checked="" type="checkbox"/>	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
X		Pasteurized eggs used where required			X		In-use utensils: properly stored		
X		Water and ice from approved source			X		Utensils, equipment and linens: properly stored, dried, handled		
		Food Temperature Control			X		Single-use/single-service articles: properly stored, used		
X		Adequate equipment for temperature control			X		Gloves used properly		
X		Approved thawing methods used					Aprons, Equipment and Clothing		
X		Thermometers provided and accurate			X		Food and nonfood-contact surfaces cleanable, properly designed, constructed, and used		
		Food Identification			X		Warewashing facilities: installed, maintained, used; test strips used		
X		Food properly labeled; original container			X		Nonfood-contact surfaces clean		
		Prevention of Food Contamination					Physical Facilities		
X		Insects, rodents, and animals not present			X		Hot and cold water available; adequate pressure		
X		Contamination prevented during food preparation, storage and display			X		Plumbing installed; proper backflow devices		
X		Personal cleanliness: clean outer clothing, hair restraint, fingernails and jewelry			X		Sewage and wastewater properly disposed		
	X	Wiping cloths: properly used and stored			X		Toilet facilities: properly constructed, supplied, cleaned		
X		Fruits and vegetables washed before use			X		Garbage/refuse properly disposed; facilities maintained		
					X		Physical facilities installed, maintained, and clean		

Person in Charge /Title: **RICHARD PATILLO** Date: **07/28/2020**
Inspector: *[Signature]* Telephone No. **573-888-9008** EPHS No. **1647** Follow-up: Yes No
Follow-up Date: _____



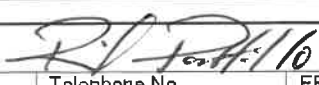
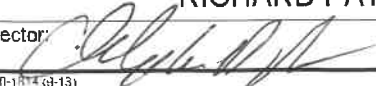
MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES
BUREAU OF ENVIRONMENTAL HEALTH SERVICES
FOOD ESTABLISHMENT INSPECTION REPORT

TIME IN 900	TIME OUT 1100
PAGE 2	of 2

ESTABLISHMENT NAME ERNIES COUNTRY KITCHEN		ADDRESS 211 S MAIN STREET		CITY/ZIP MALDEN, MO 63863		
FOOD PRODUCT/LOCATION		TEMP. in ° F	FOOD PRODUCT/ LOCATION		TEMP. in ° F	
Broccoli/Warmer		169	Frigidare		38	
Gravy/Warmer		168				
Coleslaw		37				
Whirlpool Fridge Left		38				
Whirlpool Fridge Right		39				
PRIORITY ITEMS						
Code Reference	Priority items contribute directly to the transmission, 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.				Corrected by (date)	Initial
3-501.17	Repeat: Large container of coleslaw in rear storage room refrigerator not dated, dated with 7 day discard date				COS	RP
4-601.11A	Can opener soiled with food and debris, clean				CIP	RP
CORE ITEMS						
Code Reference	Core items relate to general sanitation, operational controls, facilities or structures, equipment design, general maintenance or sanitation or standard operating procedures (SOPs). These items are to be corrected by the next regular inspection or as stated.				Corrected by (date)	Initial
5-203.13	No utility sink for mop water				CIP	RP
4-302.14	No test kit for sanitizer				CIP	RP
6-201.11	FLOORS NOT SEALED IN 3 VAT AREA, MUST BE SMOOTH, NON ABSORBANT AND EASILY CLEANABLE				NRI	RP
6-501.11	Multiple ceiling tiles wet and sagging in dining area. repair or replace				NRI	RP
3-304.14	Wiping cloths on counter top, shall be stored in sanitizer				NRI	RP
CIP	Correction in progress					
COS	CORRECTED ONSITE					
NRI	NEXT ROUTINE INSPECTION					

EDUCATION PROVIDED OR COMMENTS:

DISCUSSED WITH MANAGMENT (IF THERE IS ANY MODIFICATIONS TO 3VAT SINK AND AIR GAP MUST BE PLACED)
NRI= NEXT ROUTINE INSPECTION

Person in Charge /Title: RICHARD PATILLO 			Date: 07/28/2020
Inspector: 	Telephone No. 573-888-9008	EPHS No. 1647	Follow-up: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
			Follow-up Date: