

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

TIME IN 1000	TIME OUT 1130
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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: <b>Save Haven</b>		OWNER: <b>Family Counseling Center</b>		PERSON IN CHARGE: <b>Joyce Cole</b>	
ADDRESS: <b>1201 Ely Road</b>				COUNTY: <b>Dunklin</b>	
CITY/ZIP: <b>Kennett, MO 63857</b>		PHONE: <b>888-5925 (ext1219)</b>	FAX:	P.H. PRIORITY: <input checked="" type="checkbox"/> H <input type="checkbox"/> M <input type="checkbox"/> L	
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"/> 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
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		SEWAGE DISPOSAL		WATER SUPPLY	
<input type="checkbox"/> Approved <input type="checkbox"/> Disapproved		<input checked="" type="checkbox"/> PUBLIC <input type="checkbox"/> PRIVATE		<input checked="" type="checkbox"/> COMMUNITY <input type="checkbox"/> NON-COMMUNITY <input type="checkbox"/> PRIVATE	
License No.				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.

Foodborne illness outbreaks. Public health interventions are control measures to prevent additional cases of food-				COS		R		Compliance				COS				R			
Compliance				Demonstration of Knowledge				Compliance				Presumably Hazardous Foods				COS			
■	OUT			Person in charge present, demonstrates knowledge, and performs duties				■	OUT	N/O	N/A	Proper cooking, time and temperature							
				Person in charge				IN	OUT	■	N/A	Proper reheating procedures for hot holding							
■	OUT			Management awareness; policy present				IN	OUT	■	N/A	Proper cooling time and temperatures							
■	OUT			Proper use of reporting, restriction and exclusion				■	OUT	N/O	N/A	Proper hot holding temperatures							
				Good Hygienic Practices					OUT	N/A		Proper cold holding temperatures							
■	OUT	N/O		Proper eating, testing, drinking or tobacco use				■	OUT	N/O	N/A	Proper date marking and disposition							
■	OUT	N/O		No discharge from eyes, nose and mouth				IN	OUT	N/O	■	Time as a public health control (procedures / records)							
				Preventing Contamination by Hands								Consumer Advisory							
■	OUT	N/O		Hands clean and properly washed				IN	OUT	■		Consumer advisory provided for raw or undercooked food							
■	OUT	N/O		No bare hand contact with ready-to-eat foods or approved alternate method properly followed								Highly Susceptible Populations							
■	OUT			Adequate handwashing facilities supplied & accessible				■	OUT	N/O	N/A	Pasteurized foods used, prohibited foods not offered							
				Approved Source								Chemical							
■	OUT			Food obtained from approved source				■	OUT	N/A		Food additives: approved and properly used							
■	OUT	N/O	N/A	Food received at proper temperature				■	OUT			Toxic substances properly identified, stored and used							
■	OUT			Food in good condition, safe and unadulterated								Conformance with Approved Procedures							
IN	OUT	N/O	■	Required records available: shellstock tags, parasite destruction				IN	OUT	■		Compliance with approved Specialized Process and HACCP plan							
				Protection from Contamination															
■	OUT	N/A		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 N/A = not applicable OUT = not in compliance N/O = not observed											
■	OUT	N/A		Food-contact surfaces cleaned & sanitized															
IN	OUT	■		Proper disposition of returned, previously served, reconditioned, and unsafe food															

## FOOD REIN. PRACTICES

Good Retail Practices are preventative measures to control the introduction of pathogens, chemicals, and physical objects into foods.

Good Retail Practices are preventive measures to control the introduction of pathogens									
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					Proper Equipment and Vendors		
X		Thermometers provided and accurate			X		Food and nonfood-contact surfaces cleanable, properly designed, constructed, and used		
		Food Labeling and				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					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: Joyce Cole

Date: 05/17/2022

Inspector *Charles E. [Signature]* Telephone No. 573-888-9008

EPHS No. 1647	Follow-up: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Follow-up Date: 6/01/2022
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ESTABLISHMENT NAME <b>Save Haven</b>		ADDRESS <b>1201 Ely Road</b>		CITY/ZIP <b>Kennett, MO 63857</b>	
FOOD PRODUCT/LOCATION		TEMP. in ° F	FOOD PRODUCT/ LOCATION		TEMP. in ° F
True 2 Door		37	Sub sandwich		37
Avanto		3			
2 Door True		-0			
True 2 Door		38			
<p><b>PRIORITY ITEMS</b></p> <p>Priority items contribute directly to the elimination, prevention or reduction to an acceptable level hazards associated with foodborne illness or injury. These items <b>MUST RECEIVE IMMEDIATE ACTION</b> within 72 hours or as stated.</p>					
Code Reference	Dishwasher showing 0 parts per million on sanitizer, use 3 vat for sanitizing until dishwasher is repaired.				CIP JC
<p><b>CORE ITEMS</b></p> <p>Core items relate to general sanitation, operational controls, facilities or equipment essential to safe food handling practices. These items are to be corrected by the next regular inspection or as stated.</p>					
COS	Corrected onsite				
EDUCATION PROVIDED OR COMMENTS					
Person in Charge /Title: <b>Joyce Cole</b>				Date: <b>05/17/2022</b>	
Inspector: <b>Charles</b>	Telephone No. <b>573-888-9008</b>	EPHS No. <b>1647</b>	Follow-up: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Follow-up Date: <b>6/01/2022</b>		