



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

TIME IN 1030 TIME OUT 1200  
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: **MALDEN COUNTRY CLUB** OWNER: **MALDEN COUNTRY CLUB CORP.** PERSON IN CHARGE: **Linda Najar**  
ADDRESS: **P.O. BOX 291 MALDEN INDUSTRIAL DRIVE** COUNTY: **069**  
CITY/ZIP: **MALDEN, MO 63863** PHONE: **573-276-9991** 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 <input type="checkbox"/> N/O N/A	Proper hot holding temperatures		
	Good Hygienic Practices			IN <input checked="" type="checkbox"/> T 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"/> T 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"/> N/A	Time as a public health control (procedures / records)		
	Preventing Contamination by Hands				Consumer Advisory		
IN <input checked="" type="checkbox"/> T 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		
IN <input checked="" type="checkbox"/> T	Adequate handwashing facilities supplied & accessible			<input checked="" type="checkbox"/> OUT N/O N/A	Pasteurized foods used, prohibited foods not offered		
	Approved Source				Chemical		
<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				Conformance with Approved Procedures		
IN OUT N/O <input checked="" type="checkbox"/> N/A	Required records available: shellstock tags, parasite destruction			IN OUT <input checked="" type="checkbox"/> N/A	Compliance with approved Specialized Process and HACCP plan		
	Protection from Contamination						
IN <input checked="" type="checkbox"/> T N/A	Food separated and protected						
IN <input checked="" type="checkbox"/> T N/A	Food-contact surfaces cleaned & sanitized						
IN OUT <input checked="" type="checkbox"/> N/A	Proper disposition of returned, previously served, reconditioned, and unsafe food						

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

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

Person in Charge /Title: **Linda Najar** Date: **07/19/2023**  
Inspector: *[Signature]* Telephone No. **573-888-9008** EPHS No. **1647** Follow-up:  Yes  No  
Follow-up Date: **08/02/2023**



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FOOD PRODUCT/LOCATION		TEMP. in ° F	FOOD PRODUCT/ LOCATION		TEMP. in ° F
Crosley		38	Tue		39
Lettuce/ PREP COOLER		45			
True Prep		41			
<b>PRIORITY ITEMS</b>					
Code Reference	Priority items contribute directly to the elimination, prevention or reduction to an acceptable level, hazards associated with foodborne illness or injury. <b>These items MUST RECEIVE IMMEDIATE ACTION within 72 hours or as stated.</b>			Correct by (date)	Initial
4-703.11	No sanitizer for auto dishwasher, shall sanitize dishes in 3 vat until dishwasher has been repaired			8/2	<i>[Handwritten Initials]</i>
4-601.11A	can opener soiled with food and debris, wash rinse and sanitize			8/2	<i>[Handwritten Initials]</i>
4-601.11A	Meat slicer soiled with food and debris			8/2	<i>[Handwritten Initials]</i>
4-601.11A	Pots and pans laying on floor across from dishwasher soiled with food by slicer			8/2	<i>[Handwritten Initials]</i>
4-601.11A	Large pot laying in mop sink, this sink is for mop water only			8/2	<i>[Handwritten Initials]</i>
3-501.16B	Lettuce in prep cooler had a temp of 45 degrees, shall be 41 degrees and below			8/2	<i>[Handwritten Initials]</i>
3-501.17	Twice cooked baked potatoes in coke cooler not dated			8/2	<i>[Handwritten Initials]</i>
3-302.11	Raw eggs next to ready to eat bread in coke cooler			8/2	<i>[Handwritten Initials]</i>
<b>CORE ITEMS</b>					
Code Reference	Core items relate to general sanitation, operational controls, facilities or structures, equipment design, general maintenance or sanitation standard operating procedures (SSOPs). <b>These items are to be corrected by the next regular inspection or as stated.</b>			Correct by (date)	Initial
4-601.11C	Shelving below prep table soiled with food and debris			8/2	<i>[Handwritten Initials]</i>
4-601.11C	Top shelving above prep table soiled with food and debris			8/2	<i>[Handwritten Initials]</i>
6-501.12A	Floor in dishwashing area soiled			8/2	<i>[Handwritten Initials]</i>
6-301.11	No soap at handsink			8/2	<i>[Handwritten Initials]</i>
3-304.14	wiping cloths not stored in sanitizer in kitchen			8/2	<i>[Handwritten Initials]</i>
6-501.16	Mops laying on floor, shall be hung when not in use			8/2	<i>[Handwritten Initials]</i>
CIP	Correction in progress				
NRI	Next Routine Inspection				

EDUCATION PROVIDED OR COMMENTS

Person in Charge /Title: **Linda Najar** *[Signature]* Date: **07/19/2023**

Inspector: *[Signature]* Telephone No. **573-888-9008** EPHS No. **1647** Follow-up:  Yes  No  
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