



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

TIME IN	9:43 am	TIME OUT	12:06 pm
DATE	Nov. 2, 2017	PAGE	1 of 4

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: Dollar General #1210	OWNER: Dollar General Stores, Inc.	PERSON IN CHARGE: Tanya Stubblefield
ADDRESS: 106 Strauss Street	ESTABLISHMENT NUMBER: 4599	COUNTY: St. Francois
CITY/ZIP: Park Hills 63601	PHONE: (573)431-0252	FAX: none
PURPOSE <input type="checkbox"/> Pre-opening <input checked="" type="checkbox"/> Routine <input type="checkbox"/> Follow-up <input type="checkbox"/> Complaint <input type="checkbox"/> Other _____		
ESTABLISHMENT TYPE <input type="checkbox"/> BAKERY RESTAURANT <input type="checkbox"/> C. STORE SCHOOL <input type="checkbox"/> CATERER SENIOR CENTER <input type="checkbox"/> DELI SUMMER F.P. <input checked="" type="checkbox"/> GROCERY STORE TAVERN <input type="checkbox"/> INSTITUTION TEMP.FOOD <input type="checkbox"/> MOBILE VENDORS		
FROZEN DESSERT <input checked="" 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
<input checked="" type="checkbox"/> OUT	Person in charge present, demonstrates knowledge, and performs duties			<input type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/O <input checked="" type="checkbox"/> N/A	Proper cooking, time and temperature		
<b>Employee Health</b>				<input type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/O <input checked="" type="checkbox"/> N/A	Proper reheating procedures for hot holding		
<input checked="" type="checkbox"/> OUT	Management awareness; policy present			<input type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/O <input checked="" type="checkbox"/> N/A	Proper cooling time and temperatures		
<input checked="" type="checkbox"/> OUT	Proper use of reporting, restriction and exclusion			<input type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/O <input checked="" type="checkbox"/> N/A	Proper hot holding temperatures		
<b>Good Hygienic Practices</b>				<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/O <input checked="" type="checkbox"/> N/A	Proper cold holding temperatures		
<input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/O	Proper eating, tasting, drinking or tobacco use			<input type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/O <input checked="" type="checkbox"/> N/A	Proper date marking and disposition		
<input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/O	No discharge from eyes, nose and mouth			<input type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/O <input checked="" type="checkbox"/> N/A	Time as a public health control (procedures / records)		
<b>Preventing Contamination by Hands</b>				<input type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A	<b>Consumer Advisory</b>		
<input type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A	Hands clean and properly washed			<input type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A	Consumer advisory provided for raw or undercooked food		
<input type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A	No bare hand contact with ready-to-eat foods or approved alternate method properly followed				<b>Highly Susceptible Populations</b>		
<input checked="" type="checkbox"/> OUT	Adequate handwashing facilities supplied & accessible			<input type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/O <input checked="" type="checkbox"/> N/A	Pasteurized foods used, prohibited foods not offered		
<b>Approved Source</b>				<input type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A	<b>Chemical</b>		
<input checked="" type="checkbox"/> OUT	Food obtained from approved source			<input type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A	Food additives: approved and properly used		
<input type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A	Food received at proper temperature			<input type="checkbox"/> IN <input checked="" type="checkbox"/> Q/T	Toxic substances properly identified, stored and used		<input checked="" type="checkbox"/>
<input type="checkbox"/> IN <input checked="" type="checkbox"/> Q/T	Food in good condition, safe and unadulterated	<input checked="" type="checkbox"/>			<b>Conformance with Approved Procedures</b>		
<input type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/O <input checked="" type="checkbox"/> N/A	Required records available: shellstock tags, parasite destruction			<input type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A	Compliance with approved Specialized Process and HACCP plan		
<b>Protection from Contamination</b>				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			
<input type="checkbox"/> IN <input checked="" type="checkbox"/> Q/T <input type="checkbox"/> N/A	Food separated and protected	<input checked="" type="checkbox"/>					
<input type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A	Food-contact surfaces cleaned & sanitized						
<input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/O	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	COS	R	IN	OUT	COS	R
<b>Safe Food and Water</b>							
<input type="checkbox"/> IN <input type="checkbox"/> OUT	Pasteurized eggs used where required			<input type="checkbox"/> IN <input type="checkbox"/> OUT	In-use utensils: properly stored		
<input checked="" type="checkbox"/>	Water and ice from approved source			<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT	Utensils, equipment and linens: properly stored, dried, handled		
<b>Food Temperature Control</b>							
<input checked="" type="checkbox"/>	Adequate equipment for temperature control			<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT	Single-use/single-service articles: properly stored, used	<input checked="" type="checkbox"/>	
<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT	Approved thawing methods used			<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT	Gloves used properly		
<b>Utensils, Equipment and Vending</b>							
<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT	Thermometers provided and accurate			<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT	Food and nonfood-contact surfaces cleanable, properly designed, constructed, and used		
<b>Food Identification</b>							
<input type="checkbox"/> IN <input type="checkbox"/> OUT	Food properly labeled; original container			<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT	Warewashing facilities: installed, maintained, used; test strips used		
<b>Prevention of Food Contamination</b>							
<input checked="" type="checkbox"/>	Insects, rodents, and animals not present			<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT	Nonfood-contact surfaces clean		
<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT	Contamination prevented during food preparation, storage and display	<input checked="" type="checkbox"/>		<b>Physical Facilities</b>			
<input checked="" type="checkbox"/>	Personal cleanliness: clean outer clothing, hair restraint, fingernails and jewelry			<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT	Hot and cold water available; adequate pressure		
<input checked="" type="checkbox"/>	Wiping cloths: properly used and stored			<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT	Plumbing installed; proper backflow devices		
<input type="checkbox"/> IN <input type="checkbox"/> OUT	Fruits and vegetables washed before use			<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT	Sewage and wastewater properly disposed		
<input type="checkbox"/> IN <input type="checkbox"/> OUT				<input checked="" type="checkbox"/> IN <input checked="" type="checkbox"/> OUT	Toilet facilities: properly constructed, supplied, cleaned		
<input type="checkbox"/> IN <input type="checkbox"/> OUT				<input checked="" type="checkbox"/> IN <input checked="" type="checkbox"/> OUT	Garbage/refuse properly disposed; facilities maintained		
<input type="checkbox"/> IN <input type="checkbox"/> OUT				<input checked="" type="checkbox"/> IN <input checked="" type="checkbox"/> OUT	Physical facilities installed, maintained, and clean		

Person in Charge / Title: <i>Tanya Stubblefield</i> Tanya Stubblefield	Date: November 2, 2017
Inspector: <i>Rose Mier</i> Rose Mier	Telephone No. (573)431-1947
EPHS No. 1390	Follow-up: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Follow-up Date: Nov. 30, 2017	



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FOOD PRODUCT/LOCATION		TEMP. in ° F	FOOD PRODUCT/ LOCATION		TEMP. in ° F
Frozen food wall coolers, ambient		15, 0	Dessert wall freezer, ambient		12
Coca Cola Small beverage coolers, ambient		50	Beverage wall coolers, ambient		35, 40
Small beverage cooler, ambient		38	Dairy wall cooler, ambient		34
Beverage coolers in check out area		40, 52, 41	Deli meat wall cooler, ambient		37

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. <b>These items MUST RECEIVE IMMEDIATE ACTION within 72 hours or as stated.</b>	Correct by (date)	Initial
3-302.11A	Raw Smithfield sausage was stored above bacon, and bacon was stored touching LunchMakers in the deli cooler. Ground meats shall be stored below or separately from whole muscle meats, and raw meats shall be stored below or separately from ready-to-eat foods to prevent cross contamination. Please arrange cooler to prevent cross contamination between different kinds of meats and between raw meat and ready-to-eat food. <b>CORRECTED ON SITE</b> by rearranging with sausage below bacon, and separation of ready to eat food from raw meat.	COS	
3-202.15	The following foods held on the retail shelves had dents on a seal or the packaging was damaged in such a way as to possibly jeopardizing the safety of the contents: 15 oz. can Pampa fruit cocktail, Snack-pack chocolate pudding; 14.5 oz. can Swanson chicken broth; 14 oz. Clover Valley sweetened condensed milk; Packaging shall protect the contents. Please place in a designated location for discards or returns to distributor. <b>CORRECTED ON SITE</b> by placing in basket for damages to discard	COS	
7-201.11	Hand sanitizers were stored above medicines on the end display rack. Chemicals cannot be stored above food or medicines. <b>CORRECTED ON SITE</b> by moving hand sanitizers.	COS	

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). <b>These items are to be corrected by the next regular inspection or as stated.</b>	Correct by (date)	Initial
6-202.15A	The entry door would not self-close; when shut, daylight showed between the doors. Outside entry doors shall be self-closing and sealed. Please repair door so it will self-close and sealed.	11/30/17	TS
6-501.11 *	Holes and drywall damage observed in the wall by the cart storage area, and drywall was not painted behind the soda storage next to the wall beverage cooler.. Walls shall be in good repair and easily cleanable. Please repair and seal wall to allow effective cleaning.	11/30/17	
4-601.11C	Mold growth observed in the condenser fan area and back, top of the wall cooler holding A & W rootbeer soda. Also, soda spills observed on the inside shelves. Nonfood contact surfaces shall be cleaned at a frequency to prevent debris accumulation. Please wash, rinse, and sanitize the inside of this cooler.	11/9/17	
4-204.112	A thermometer was not found inside either of the wall coolers holding beverages. Thermometers shall be placed in a convenient-to-read location in the warmest part of coolers (not on the condenser fan grate). Please install an accurate thermometer.	11/3/17	
4-601.11C	Mold growth observed on the condenser fan area of the cooler holding Snapple. Please wash, rinse, and sanitize the inside of the refrigerator as often as needed to prevent mold growth.	11/9/17	
4-601.11C	Mold and debris observed on the inside surfaces and shelves of the dairy wall cooler. Please wash, rinse, and sanitize inside of cooler.	11/9/17	
4-601.11C	Accumulation of debris observed on the condenser fan area and shelves/inside of the deli meat cooler. Please wash, rinse, and sanitize inside of cooler.	11/9/17	
4-601.11C	Accumulation of debris observed on most of the air intake vents below the wall coolers. Please clean vents as often as needed to keep clean.	11/9/17	

EDUCATION PROVIDED OR COMMENTS

NOTE: a line drawn through the items on page 1 denotes that it is not applicable or not observed.

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4-904.11A	A box of Foam hinged lid trays and a box of aluminum roasters were stored on the floor in the aisle with single-use kitchen items. Single use items shall be stored a minimum of six inches off the floor. Please elevate the trays off the floor. CORRECTED ON SITE by removing from display	COS	TJ
4-501.11A	The small Coca Cola beverage cooler had an ambient temperature of 50F. There was no potentially hazardous food stored in this cooler during this visit. Please repair unit to hold at 41F or lower.	11/13/17	
3-307.11A	A package of Armour brand LunchMakers was inside a Dollar General bag, stored in the bottom of the wall cooler. According to manager, this was her lunch. Please do not store personal food in the retail coolers to prevent cross-contamination. CORRECTED ON SITE by removing from cooler.	COS	
4-501.11A	The door to the Coca Cola cooler in the check-out area would not shut, and the ambient temperature was 52F. There was no potentially hazardous food held in this cooler. Equipment shall be maintained in good repair, and coolers shall hold food at 41F or lower. Please repair or replace this cooler.	11/30/17	
6-501.11	The floor was in poor condition in several areas of the retail store with tiles broken, damaged, missing, or stained. Please repair or replace all damaged/missing tiles and thoroughly clean floor.	11/30/17	
6-501.18	The mop sink was dirty. Sinks shall be cleaned at a frequency to prevent debris accumulation. Please clean sink.	11/5/17	
5-501.17	There was no lidded trash can in the customer bathroom. Bathrooms used by females shall have a lidded trash can. Please supply a lidded trash can in this bathroom.	11/3/17	
6-202.14	The bathroom door to the customer bathroom did not self-close. Bathroom doors shall be self-closing. Please repair or replace the self-closing device. CORRECTED ON SITE by replacing screws	COS	

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6-304.11	The vent in the customer bathroom did not appear to be functioning. Bathrooms shall have mechanical ventilation. Please repair or replace the fan in this bathroom.	11/30/17	TS
6-501.18	The sink in the employee bathroom was dirty. Please clean sinks as often as needed to keep clean. The trash can in the employee bathroom was not lidded. Please supply a lidded trash can for this bathroom.	11/3/17	↓
6-202.14	The door to the employee bathroom did not self-close. Please repair or replace the self-closing device to this bathroom.	11/30/17	
6-501.12A	The wall around the sink in the employee bathroom was dirty. Please clean wall as often as needed to keep clean.	11/3/17	

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