



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

TIME IN	10:22am	TIME OUT	12:20pm
DATE	5-9-23	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: The Riverside Grill	OWNER: Maleya Brantley, LLC	PERSON IN CHARGE: Brandon Harden
ADDRESS: 7 East Main St.	ESTABLISHMENT NUMBER:	COUNTY: 187
CITY/ZIP: Park Hills, 63601	PHONE: 573-327-4199	FAX:
P.H. PRIORITY : <input checked="" type="checkbox"/> H <input type="checkbox"/> M <input type="checkbox"/> L		
ESTABLISHMENT TYPE <input checked="" type="checkbox"/> BAKERY <input type="checkbox"/> C. STORE <input type="checkbox"/> CATERER <input type="checkbox"/> DELI <input type="checkbox"/> GROCERY STORE <input type="checkbox"/> INSTITUTION <input type="checkbox"/> MOBILE VENDORS <input checked="" 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 <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Disapproved <input type="checkbox"/> Not Applicable	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 _____
License No. _____		

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 checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> NO <input type="checkbox"/> N/A	Proper cooking, time and temperature		
	Employee Health			<input checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> NO <input type="checkbox"/> N/A	Proper reheating procedures for hot holding	<input checked="" type="checkbox"/>	
<input checked="" type="checkbox"/> OUT	Management awareness; policy present			<input checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> NO <input 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 checked="" type="checkbox"/> NO <input type="checkbox"/> N/A	Proper hot holding temperatures		
	Good Hygienic Practices			<input checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> NO <input 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 checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> NO <input 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 checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> NO <input type="checkbox"/> N/A	Time as a public health control (procedures / records)		
	Preventing Contamination by Hands				Consumer Advisory		
<input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/O	Hands clean and properly washed			<input checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> NO <input type="checkbox"/> N/A	Consumer advisory provided for raw or undercooked food		
<input checked="" type="checkbox"/> OUT <input type="checkbox"/> 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 <input checked="" type="checkbox"/> NO <input type="checkbox"/> 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 <input checked="" type="checkbox"/> NO <input type="checkbox"/> N/A	Food additives: approved and properly used		
<input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/A	Food received at proper temperature			<input checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> NO <input type="checkbox"/> N/A	Toxic substances properly identified, stored and used		
<input checked="" type="checkbox"/> OUT	Food in good condition, safe and unadulterated				Conformance with Approved Procedures		
<input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/O <input checked="" type="checkbox"/> N/A	Required records available: shellstock tags, parasite destruction			<input checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> NO <input type="checkbox"/> N/A	Compliance with approved Specialized Process and HACCP plan		
	Protection from 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 COS=Corrected On Site R=Repeat Item			
<input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/A	Food separated and protected						
<input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/A	Food-contact surfaces cleaned & sanitized						
<input checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> NO	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
<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:	Brandon Harden	Date:	May 9, 2023
Inspector:	John Wiseman	Telephone No.:	(573) 431-1947
		EPHS No.:	1507
		Follow-up:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
		Follow-up Date:	5-23-23



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ESTABLISHMENT NAME The Riverside Grill		ADDRESS 7 East Main St.		CITY/ZIP Park Hills, 63601	
FOOD PRODUCT/LOCATION		TEMP. in ° F	FOOD PRODUCT/ LOCATION		TEMP. in ° F
Kitchen cold table: ambient, tomato, lettuce		34, 39, 39	Steam table: (10:30am) green beans, be peas,bkd beans		65, 65, 71
Mytag cooler:		38	Reheated: (11:00am) green beans, be peas, bkd beans		167, 183, 202
Gravy on stove-top		145	Back room cooler: ambient, raw fish, raw chicken		36, 40, 39
Cooler drawers: ambient, raw burger		44, 45	Dining room Traulsen cooler		32
raw chicken, raw bacon		50, 47			
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. These items MUST RECEIVE IMMEDIATE ACTION within 72 hours or as stated.				Correct by (date)
3-501.17A	Ready to eat potentially hazardous foods stored in the Maytag cooler in the kitchen were not marked with discard dates. Ready to eat potentially hazardous food held refrigerated shall be marked with a discard date that is not greater than six days from the date of preparation or opening from a manufacturer sealed package. Please mark all such foods with a discard date.				5-9-23
3-403.11	Green beans, black eyed peas, and baked beans were observed in the kitchen steam table at temperatures of 65F - 71F at 10:30am. According to the owner, these foods were waiting to be reheated for hot holding. Food reheated for hot holding shall be heated to at least 165F within two hours prior to placing in hot holding. The foods were heated on the stove to at least 165F at 11:00am and then placed in the steam table.				COS
3-501.16A	The temperature of foods in the cooler drawers below the grill were: raw hamburger = 45F, raw chicken = 50F, raw bacon = 47F. The ambient temperature of the this unit was measured at 44F. Potentially hazardous food held refrigerated shall be held at 41F or lower. Please repair the drawer coolers to hold foods at 41F or less. In the meanwhile, stored these foods in the cold table.				5-9-23
5-203.14	A garden hose was connected to the faucet at the mop sink without backflow protection. A plumbing system shall be installed to preclude backflow of a solid, liquid, or gas contaminant into the water supply. Please install a hose bib vacuum breaker between the faucet and the hose.				5-9-23
3-201.11	What appears to be a large jar of home-canned peppers was observed on the prep table in the back prep room. Only those foods with are from an inspected facility and which comply with law may be served in the facility. Please remove this food item from the facility.				5-9-23
4-601.11A	An accumulation of dried food debris was observed on the French fry cutters in the back prep room. Food contact surfaces shall be cleaned and sanitized after use and every four hours when in constant use. Please clean the fry cutters after use.				5-9-23
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). These items are to be corrected by the next regular inspection or as stated.				Correct by (date)
6-501.12A	The kitchen area, ware washing area, and back prep area are all in need of cleaning. Grease, grime, and debris was observed on the floor in these areas and food splatters were observed on walls. Physical facilities shall be cleaned as often as necessary to keep them clean. Please thoroughly clean the floors.				5-23-23
6-501.114	The kitchen and back prep area are generally cluttered with a variety of things of most surfaces. The facility shall be free of unnecessary items and clutter. Please remove unnecessary items so that surfaces can be accessed for cleaning.				
4-601.11C	Food debris was observed inside the Maytag cooler in the kitchen and in the door seals of this unit. Non food-contact surfaces shall be kept free of an accumulation of dust, dirt, food residue and debris. Please clean the cooler.				
4-601.11C	An accumulation of food debris was observed inside the cooler drawers in the kitchen area; such as the door seals, the storage trays, and the floor of the cooler. Non food-contact surfaces shall be kept free of an accumulation of dust, dirt, food residue and debris. Please clean the cooler drawers.				
4-601.11C	An excessive amount of food debris was observed inside and outside the back room refrigerator and in the door tracks of this unit. Non food-contact surfaces shall be kept free of an accumulation of dust, dirt, food residue and debris. Please clean and disinfect the refrigerator.				
3-305.11	A bag of onions was observed on the floor in the back room. Food shall be protected from contamination by storing it at least six inches off of the floor. Please store food items off of the floor.				
7-201.11B	A bar of unwrapped hand soap was observed on an open-wire shelf above the prep table in the back room. Toxic materials shall be stored to prevent contamination of food, equipment, and single use items. Please rel				
EDUCATION PROVIDED OR COMMENTS					
Person in Charge (Title)		Brandon Harden		Date: May 9, 2023	
Inspector:	John Wiseman	Telephone No.	EPHS No.	Follow-up:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
		(573)431-1947	1507	Follow-up Date:	5-23-23