



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

TIME IN 14:00 TIME OUT 14:29
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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: Hello Health		OWNER: Tara Qualls	PERSON IN CHARGE: Same	
ADDRESS: 301 Hwy 51 South			COUNTY: Bollinger	
CITY/ZIP: Marble Hill 63764		PHONE: Same	FAX: N/A	P.H. PRIORITY: <input type="checkbox"/> H <input type="checkbox"/> M <input checked="" 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 type="checkbox"/> INSTITUTION <input checked="" type="checkbox"/> MOBILE VENDORS <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 checked="" type="checkbox"/> Pre-opening <input type="checkbox"/> Routine <input type="checkbox"/> Follow-up <input type="checkbox"/> Complaint <input type="checkbox"/> Other				
FROZEN DESSERT <input type="checkbox"/> Approved <input type="checkbox"/> Disapproved		SEWAGE DISPOSAL <input checked="" type="checkbox"/> PUBLIC <input type="checkbox"/> PRIVATE		WATER SUPPLY <input type="checkbox"/> COMMUNITY <input type="checkbox"/> NON-COMMUNITY <input type="checkbox"/> PRIVATE Date Sampled _____ Results _____
License No. N/A				

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
IN	OUT					IN	OUT	N/O			
			Person in charge present, demonstrates knowledge, and performs duties					<input checked="" type="checkbox"/>	Proper cooking, time and temperature		
			Employee Health					<input checked="" type="checkbox"/>	Proper reheating procedures for hot holding		
		<input checked="" type="checkbox"/>	Management awareness; policy present					<input checked="" type="checkbox"/>	Proper cooling time and temperatures		
		<input checked="" type="checkbox"/>	Proper use of reporting, restriction and exclusion					<input checked="" type="checkbox"/>	Proper hot holding temperatures		
			Good Hygienic Practices					<input checked="" type="checkbox"/>	Proper cold holding temperatures		
		<input checked="" type="checkbox"/>	Proper eating, tasting, drinking or tobacco use					<input checked="" type="checkbox"/>	Proper date marking and disposition		
		<input checked="" type="checkbox"/>	No discharge from eyes, nose and mouth					<input checked="" type="checkbox"/>	Time as a public health control (procedures / records)		
			Preventing Contamination by Hands						Consumer Advisory		
		<input checked="" type="checkbox"/>	Hands clean and properly washed					<input checked="" type="checkbox"/>	Consumer advisory provided for raw or undercooked food		
		<input checked="" type="checkbox"/>	No bare hand contact with ready-to-eat foods or approved alternate method properly followed						Highly Susceptible Populations		
		<input checked="" type="checkbox"/>	Adequate handwashing facilities supplied & accessible					<input checked="" type="checkbox"/>	Pasteurized foods used, prohibited foods not offered		
			Approved Source						Chemical		
		<input checked="" type="checkbox"/>	Food obtained from approved source					<input checked="" type="checkbox"/>	Food additives: approved and properly used		
		<input checked="" type="checkbox"/>	Food received at proper temperature					<input checked="" type="checkbox"/>	Toxic substances properly identified, stored and used		
		<input checked="" type="checkbox"/>	Food in good condition, safe and unadulterated						Conformance with Approved Procedures		
		<input checked="" type="checkbox"/>	Required records available: shellstock tags, parasite destruction					<input checked="" type="checkbox"/>	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		
		<input checked="" type="checkbox"/>	Food separated and protected								
		<input checked="" type="checkbox"/>	Food-contact surfaces cleaned & sanitized								
		<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
		<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								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								Warewashing facilities: installed, maintained, used; test strips used		
					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		
					Wiping cloths: properly used and stored								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: Same <i>Tara Qualls</i>			Date: 10 Mar 25		
Inspector: <i>Lori S. Byer</i>		Telephone No. 573-238-2817	EPHS No. 1753	Follow-up: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Follow-up Date: _____					



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ESTABLISHMENT NAME Hello Health	ADDRESS 301 Hwy 51 South	CITY/ZIP Marble Hill 63764
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FOOD PRODUCT/LOCATION	TEMP. in ° F	FOOD PRODUCT/ LOCATION	TEMP. in ° F
Corn in warmer			

Code Reference	PRIORITY ITEMS	Correct by (date)	Initial
	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.		
	NO, violations noted at time of inspection.		

Code Reference	CORE ITEMS	Correct by (date)	Initial
	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.		

EDUCATION PROVIDED OR COMMENTS
 Discussed cooking and holding temperatures. Suggested regular bleach as a cleaning solution. Talked about date marking, hand washing and proper temperature management.

Person in Charge /Title: Same <i>MaGralls</i>	Date: 10 Mar 25
Inspector: <i>Don S. Cooper</i>	Telephone No. 573-238-2817
EPHS No. 1753	Follow-up: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	Follow-up Date: