CAPE GIRARDEAU COUNTY PUBLIC HEALTH CENTER
ENVIRONMENTAL SECTION
FOOD ESTABLISHMENT INSPECTION REPORT

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: Gibson Recovery Center
OWNER: Gibson Recovery Inc
PERSON IN CHARGE: Stephanie Brown
ADDRESS: 1112 Linden St
PHONE: 334-5513
FAX: 0397
CITY/ZIP: Cape Girardeau

ESTABLISHMENT #: 0397
COUNTY: Cape Girardeau

CCHD (10-13)
Inspector: Stephanie Brown

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.

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<th>IN</th>
<th>OUT</th>
<th>N/A</th>
<th>Non-Compliance</th>
<th>Notes</th>
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**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.

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<th>Compliance</th>
<th>Demonstration of Knowledge</th>
<th>COS</th>
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<th>Compliance</th>
<th>Potentially Hazardous Foods</th>
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**Employee Health**

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**Preventing Contamination by Hands**

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**Approved Source**

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**Protection from Contamination**

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**GOOD RETAIL PRACTICES**

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**Person in Charge / Title:** Stephanie Brown

**Telephone No.** 573-335-7846 X236

**EPHS No.** 947

**Follow-up:** Yes No

**Follow-up Date:** N/A

**Time In:** 10:55am

**Time Out:** 11:10am

**Page:** 1 of 2

CCDH (10-13)
**FOOD PRODUCT/LOCATION** | **TEMP. in ° F** | **FOOD PRODUCT/LOCATION** | **TEMP. in ° F**
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**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.**

- All items from 10-28-14 inspection have been corrected

**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.**

**EDUCATION PROVIDED OR COMMENTS**

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Person in Charge /Title: [Signature]

Date: 11-5-14

Inspector: [Signature]

Telephone No. 573-335-7846 X236

EPHS No. 947

Follow-up: ☐ Yes ☐ No

Follow-up Date: N/A