



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

TIME IN	1:26 pm	TIME OUT	4:01 pm
DATE	Sept. 26, 2017	PAGE	1 of 3

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: Steak-n-Shake	OWNER: In Sight, Partners, Inc.	PERSON IN CHARGE: David Kennedy, manager
ADDRESS: 796 Maple Valley Drive	ESTABLISHMENT NUMBER: 0009	COUNTY: St. Francois
CITY/ZIP: Farmington 63640	PHONE: (573)760-0100	FAX: (573)760-0550
PURPOSE <input type="checkbox"/> Pre-opening <input checked="" type="checkbox"/> Routine <input type="checkbox"/> Follow-up <input type="checkbox"/> Complaint <input type="checkbox"/> Other _____		P.H. PRIORITY : <input checked="" type="checkbox"/> H <input type="checkbox"/> M <input type="checkbox"/> L
ESTABLISHMENT TYPE <input checked="" type="checkbox"/> BAKERY RESTAURANT <input type="checkbox"/> C. STORE SCHOOL <input type="checkbox"/> CATERER SENIOR CENTER <input type="checkbox"/> DELI SUMMER F.P. <input 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 checked="" type="checkbox"/> OUT N/O N/A	Proper cooking, time and temperature		
	Employee Health			<input checked="" type="checkbox"/> OUT N/O 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 checked="" type="checkbox"/> N/O N/A	Proper cooling time and temperatures		
<input checked="" type="checkbox"/> OUT	Proper use of reporting, restriction and exclusion			<input checked="" type="checkbox"/> OUT N/O N/A	Proper hot holding temperatures		
	Good Hygienic Practices			<input type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A	Proper cold holding temperatures		
<input checked="" type="checkbox"/> OUT N/O	Proper eating, tasting, drinking or tobacco use			<input checked="" type="checkbox"/> OUT N/O N/A	Proper date marking and disposition		
<input checked="" type="checkbox"/> OUT 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)		
	Preventing Contamination by Hands				Consumer Advisory		
<input checked="" type="checkbox"/> OUT N/O	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 checked="" type="checkbox"/> OUT N/O	No bare hand contact with ready-to-eat foods or approved alternate method properly followed				Highly Susceptible Populations		
<input type="checkbox"/> IN <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		
	Approved Source				Chemical		
<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 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		
<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		
	Protection from Contamination						
<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/A	Food separated and protected		<input checked="" type="checkbox"/>		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"/> OUT <input type="checkbox"/> N/A	Food-contact surfaces cleaned & sanitized						
<input type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" 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	Safe Food and Water	COS	R	IN	OUT	Proper Use of Utensils	COS	R
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Pasteurized eggs used where required			<input checked="" type="checkbox"/>	<input type="checkbox"/>	In-use utensils: properly stored		
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Water and ice from approved source			<input checked="" type="checkbox"/>	<input type="checkbox"/>	Utensils, equipment and linens: properly stored, dried, handled		
		Food Temperature Control			<input checked="" type="checkbox"/>	<input type="checkbox"/>	Single-use/single-service articles: properly stored, used		
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Adequate equipment for temperature control			<input checked="" type="checkbox"/>	<input type="checkbox"/>	Gloves used properly		
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Approved thawing methods used					Utensils, Equipment and Vending		
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Thermometers provided and accurate			<input checked="" type="checkbox"/>	<input type="checkbox"/>	Food and nonfood-contact surfaces cleanable, properly designed, constructed, and used		
		Food Identification			<input type="checkbox"/>	<input checked="" type="checkbox"/>	Warewashing facilities: installed, maintained, used; test strips used		<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Food properly labeled; original container			<input type="checkbox"/>	<input checked="" type="checkbox"/>	Nonfood-contact surfaces clean		
		Prevention of Food Contamination					Physical Facilities		
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Insects, rodents, and animals not present			<input type="checkbox"/>	<input checked="" type="checkbox"/>	Hot and cold water available; adequate pressure		
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Contamination prevented during food preparation, storage and display			<input type="checkbox"/>	<input checked="" type="checkbox"/>	Plumbing installed; proper backflow devices		
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Personal cleanliness: clean outer clothing, hair restraint, fingernails and jewelry			<input checked="" type="checkbox"/>	<input type="checkbox"/>	Sewage and wastewater properly disposed		
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Wiping cloths: properly used and stored			<input checked="" type="checkbox"/>	<input type="checkbox"/>	Toilet facilities: properly constructed, supplied, cleaned		
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Fruits and vegetables washed before use			<input checked="" type="checkbox"/>	<input type="checkbox"/>	Garbage/refuse properly disposed; facilities maintained		
					<input type="checkbox"/>	<input checked="" type="checkbox"/>	Physical facilities installed, maintained, and clean		

Person in Charge /Title: <i>David Kennedy</i>	David Kennedy, manager	Date: September 25, 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: Oct. 3, 2017



MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES
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FOOD ESTABLISHMENT INSPECTION REPORT

ESTABLISHMENT NAME Steak-n-Shake		ADDRESS 796 Maple Valley Drive		CITY /ZIP Farmington 63640	
FOOD PRODUCT/LOCATION		TEMP. in ° F	FOOD PRODUCT/ LOCATION		TEMP. in ° F
Hoshizaki freezer, cook line, ambient		20	Sandwich prep cooler: tomatoes, lettuce		41, 42
Cheese, hot hold in dispenser, cook line		138	Refrigerated drawer 1: ambient, ham		41, 41
Hamburger, grill		180, 186	Refrigerated drawer 2: ambient, taco meat		50, 44
Grill side cooler: ambinet, hot dogs, beef		40, 41, 42	Pasta prep table: tomatoes, noodles, cooler ambient		48, 47, 40
Chicken, warmer at drive-up window		179	Hot hold drawer: ambient, chili, beans, onions		158,172,182,176

Code Reference	PRIORITY ITEMS	Correct by (date)	Initial
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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.**

NOTE	TEMPERATURES, continued, in degrees Fahrenheit Ice cream freezer, ambient 25; milk in dispenser 35; salad prep table, top: slaw 39, tomatoes 41, bottom: ambient 40; hot hold steamer soup: soup 189; chili in warmer 173; Hoshizake freezer, ambient 15		DJK
3-501.16A	The ambient temperature and food temperature of the bottom refrigerated drawer was 50 and 44F. Food shall be held at 41F or lower. Please discard food that was out of temperature more than 4 hours; if within four hours, please place in a cooler that is 41F or lower. Do not use drawer until repaired to hold food 41F	10/3/17	DJK
3-501.16A	The cut tomatoes and noodles, held in the top of the pasta prep cooler had temperatures of 48 and 47F. Temperature logs were reviewed and were at correct temperatures. According to manager, food temperatures are logged four times/day. Food that is out of temperature is placed in a cooler at 41F or lower, or discarded. COS by placing food in the walk-in cooler within four hours	COS	
3-302.11A	Raw hamburger was stored above cooked chicken breasts in the grill side cooler. Raw animal-derived foods shall be stored below all other foods. COS by moving chicken to top shelf.	COS	
4-601.11A	Debris observed on the table-mounted can opener blade and holster. Food contact surfaces shall be clean to sight and touch. Please clean after each use, or a minimal of every four hours while in continual use. COS by cleaning and sanitizing	COS	
4-202.11A	The top of the food processor was broken and a piece was held on with tape. Food contact surfaces shall be free of cracks, breaks, and other imperfections. COS by discarding processor top.	COS	
3-501.11A	Dried food debris observed on the slicer, stored on the table in the back food preparation area. Please clean a minimum of every four hours, or after each use. COS by cleaning and sanitizing	COS	

Code Reference	CORE ITEMS	Correct by (date)	Initial
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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.**

5-205.15B	There was no cold water at the handwashing sink in the kitchen line, nor at the sink by the shake making area. Cold water shall be available at all handwashing sinks. Please repair to supply cold water.	10/3/17	DJK
4-601.11C	The shipping protector film remained on the bottom of the Hoshizaki freezer. The film was peeling and dirty. CORRECTED ON SITE by removing film and cleaning bottom of freezer.	COS	
6-301.12	Disposable towels were not in a dispenser at the handwashing sink nearest the cash register. Towels shall be dispensed in a sanitary manner. Please install towels in a dispenser.	10/3/17	
4-601.11C	Accumulation of debris observed on the inside of the ice cream freezer (below shake making table). Please clean as often as needed to keep clean.	10/3/17	
6-501.18	The handles and area around the handles and faucet at the handwashing sink in the wait beverage area were dirty. Handwashing sinks shall be kept clean. Please clean all surfaces of sink as often as needed to keep clean. COS by cleaning all surfaces of sink	COS	
4-601.11C	Accumulation of debris observed inside the drawer in the back preparation area (by 2-vat sink). COS by cleaning drawer.	COS	
4-601.11C	Food splatters observed on the outside surfaces of the True refrigerator and McCall coolers in the back prep area. COS by cleaning outside surfaces	COS	
3-305.11A	Ice was dripping from the condenser onto food packaging in the walk-in freezer. Food shall be protected from contamination while in storage. Please repair unit to prevent drippage; protect food by using flattened cardboard, trays, or some other method to catch ice.	10/3/17	
6-501.12A	Debris/mold observed on the walk-in freezer door and walls in the walk-in cooler. Please clean and sanitize walls and door in the cooler.	10/3/17	

EDUCATION PROVIDED OR COMMENTS

Person in Charge /Title:	<i>int</i> David Kennedy, manager	Date:	September 25, 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:	Oct. 3, 2017



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Walk-in freezer, ambient		15	True refrigerator: ambient, chicken		40, 41
			McCall freezers, ambient		17, 10
			Walk-in cooler: ambient, liquid eggs		40, 41

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)	Initial
5-203.14B	The hose bibb vacuum breaker on the mop sink faucet was leaking, possibly jeopardizing the proper function of the device to prevent backflow of water. Please replace the vacuum breaker.	10/3/17	DLK

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)	Initial
5-205.15B	Leaks was observed under the one-vat sprayer sink and in the sprayer head, in the warewashing area. Plumbing shall be maintained in good repair. Please repair both leaks.	10/3/17	DLK
6-501.12A	Mold observed on the wall and pipes below the 1-vat pre-clean sink in the warewashing area. Please clean and sanitize wall and pipes as often as needed to keep clean.	10/3/17	
4-501.14	Debris observed on the top and under door ledge of the warewashing machine. Warewashing machines shall be cleaned at least daily. COS by cleaning machine	COS	
3-302.11A	A gallon of apple flavoring was stored in the storage room without a lid. Please cover food while in storage. COS by placing lid on container.	COS	

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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: Oct. 3, 2017