



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

TIME IN	8:35am	TIME OUT	10:20am
DATE	10-16-23	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: Steak N Shake	OWNER: In Sight Partners	PERSON IN CHARGE: Hailey Fuller
ADDRESS: 796 Maple Valley Dr.	ESTABLISHMENT NUMBER:	COUNTY: 187
CITY/ZIP: Farmington, 63640	PHONE: 573-760-0100	FAX:
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 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		P.H. PRIORITY : <input checked="" type="checkbox"/> H <input type="checkbox"/> M <input type="checkbox"/> L
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 checked="" 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 N/O N/A	Proper cooking, time and temperature		
	Employee Health			IN <input checked="" type="checkbox"/> OUT N/O N/A	Proper reheating procedures for hot holding	<input checked="" type="checkbox"/>	
<input checked="" type="checkbox"/> OUT	Management awareness; policy present			IN <input checked="" type="checkbox"/> OUT 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 checked="" type="checkbox"/> OUT 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			IN <input checked="" type="checkbox"/> OUT 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			IN <input checked="" type="checkbox"/> OUT 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 checked="" type="checkbox"/> OUT	Adequate handwashing facilities supplied & accessible			IN <input checked="" type="checkbox"/> OUT N/O N/A	Pasteurized foods used, prohibited foods not offered		
	Approved Source				Chemical		
<input checked="" type="checkbox"/> OUT	Food obtained from approved source			IN <input checked="" type="checkbox"/> OUT N/A	Food additives: approved and properly used		
IN <input checked="" 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		
IN <input checked="" type="checkbox"/> OUT N/O <input checked="" type="checkbox"/>	Required records available: shellstock tags, parasite destruction			IN <input checked="" type="checkbox"/> OUT 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 N/A	Food separated and protected						
IN <input checked="" type="checkbox"/> OUT N/A	Food-contact surfaces cleaned & sanitized	<input checked="" type="checkbox"/>					
IN <input checked="" type="checkbox"/> OUT <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		
	<input checked="" type="checkbox"/>	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"/>		<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		
<input checked="" type="checkbox"/>		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: <i>Hailey Fuller</i>	Hailey Fuller	Date: October 16, 2023
Inspector: <i>John Wiseman</i>	John Wiseman	Telephone No. (573) 431-1947
	EPHS No. 1507	Follow-up: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
		Follow-up Date:



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ESTABLISHMENT NAME Steak N Shake		ADDRESS 796 Maple Valley Dr.		CITY/ZIP Farmington, 63640	
FOOD PRODUCT/LOCATION		TEMP. in ° F	FOOD PRODUCT/ LOCATION		TEMP. in ° F
Grill cold table: ambient, raw burger, cheese		34, 41, 41	Heating cheese sauce: 8:55am/9:25am		65, 70
Hot hold: eggs, sausage, gravy		172, 138, 151	Hamburger from grill		202
Nacho cheese from dispenser		150	Shake station: cooler, soft serve mix		10, 39
Dine Dress cooler: sliced tomatoes		35	Reach-in cooler, hot held chili		30, 152
Salad table: sliced tomatoes, pasta		39, 41	Walk-in cooler: amb, raw burger, pasta, tomatoes		32, 35, 39, 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. These items MUST RECEIVE IMMEDIATE ACTION within 72 hours or as stated.				Correct by (date)
3-403.11	Sealed packages of cheese sauce heating inside a glass heated cabinet were measured at 65F at 8:55am and at 70F at 9:25am. Ready to eat potentially hazardous food from a commercially processed, hermetically sealed container or from an intact package shall be heated for hot holding to at least 135F within two hours. The facility has a commercial steam kettle that would be ideal for heating this product. I have instructed the manager to use the steam kettle for this purpose.				COS
4-601.11A	An accumulation of dried food residue was observed on the impellers and housing of the Hamilton Beach shake mixer at the shake station. Food contact surfaces shall be clean to sight and touch. Please clean and sanitized the shake mixer after use, or every four hours when in constant use.				10-16-23
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)
4-601.11C	An accumulation of food debris was observed inside the kitchen microwave. Non food-contact surfaces shall be kept free of an accumulation of dust, dirt, food residue and debris. Please clean the microwave as often as necessary.				10-20-23
4-601.11C	An accumulation of food debris was observed on equipment throughout the kitchen area, such as work surfaces, shelving, equipment and cooler surfaces, storage areas, and the underside of the shelving. Non food-contact surfaces shall be kept free of an accumulation of dust, dirt, food residue and debris. Please clean equipment surfaces in the kitchen area.				10-20-23
6-501.12A	An accumulation of food debris was observed on the floor below equipment in the kitchen area. Physical facilities shall be cleaned as often as necessary to keep them clean. Please clean the floor in the kitchen area.				
4-501.11A	A build-up of ice was observed on the floor and on the cooling unit in the walk-in freezer. Equipment shall be maintained in good repair. Please remove excess ice from the cooling unit and the floor of the freezer.				
EDUCATION PROVIDED OR COMMENTS					
Person in Charge Title:		Hailey Fuller		Date: October 16, 2023	
Inspector	John Wiseman	Telephone No.	EPHS No.	Follow-up:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
		(573)431-1947	1507	Follow-up Date:	