

# Food Establishment Inspection Report

Jackson County Health Department  
 PO Box 307 – 415 Health Department Rd  
 Murphysboro IL 62966 (618) 684-3143 ext. 128

Establishment: Steak 'n Shake - SIU License/Permit #: 1110

Street Address: 1255 Lincoln Drive

City/State: Carbondale, Illinois ZIP Code: 62901

No. of Risk Factor/Intervention Violations: 3 <sup>SW</sup> Date: 3/27/19

No. of Repeat Risk Factor/Intervention Violations: 0 Time In: 11:30

Permit Holder: Cameron Teleban Risk Category: II Time Out: 12:45

Purpose of Inspection: Routine

## FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

Circle designated compliance status (IN, OUT, N/O, N/A) for each numbered item  
**IN**=in compliance    **OUT**=not in compliance    **N/O**=not observed    **N/A**=not applicable  
 Mark "X" in appropriate box for COS and/or R  
**COS**=corrected on-site during inspection    **R**=repeat violation

**Risk factors** are important practices or procedures identified as the most prevalent contributing factors of foodborne illness or injury. Public health interventions are control measures to prevent foodborne illness or injury.

Compliance Status		Description	COS	R
<b>Supervision</b>				
1	<u>In</u> Out	Person in charge present, demonstrates knowledge, and performs duties		
2	In <u>Out</u> N/A	Certified Food Protection Manager (CFPM)		
<b>Employee Health</b>				
3	<u>In</u> Out	Management, food employee and conditional employee; knowledge, responsibilities and reporting		
4	<u>In</u> Out	Proper use of restriction and exclusion		
5	<u>In</u> Out	Procedures for responding to vomiting and diarrheal events		
<b>Good Hygienic Practices</b>				
6	In, Out, <u>N/O</u>	Proper eating, tasting, drinking, or tobacco use		
7	<u>In</u> Out, N/O	No discharge from eyes, nose, and mouth		
<b>Preventing Contamination by Hands</b>				
8	<u>In</u> Out, N/O	Hands clean and properly washed		
9	<u>In</u> Out, N/A, N/O	No bare hand contact with RTE food or a pre-approved alternative procedure properly allowed		
10	<u>In</u> Out	Adequate handwashing sinks properly supplied and accessible		
<b>Approved Source</b>				
11	<u>In</u> Out	Food obtained from approved source		
12	In, Out, N/A, <u>N/O</u>	Food received at proper temperature		
13	<u>In</u> Out	Food in good condition, safe, and unadulterated		
14	In, Out, <u>N/A</u> N/O	Required records available: shellstock tags, parasite destruction		

Compliance Status		Description	COS	R
<b>Protection from Contamination</b>				
15	<u>In</u> Out, N/A, N/O	Food separated and protected		
16	In, <u>Out</u> N/A	Food-contact surfaces; cleaned and sanitized		X
17	<u>In</u> Out	Proper disposition of returned, previously served, reconditioned and unsafe food		
<b>Time/Temperature Control for Safety</b>				
18	<u>In</u> Out, N/A, N/O	Proper cooking time and temperatures		
19	<u>In</u> Out, N/A, N/O	Proper reheating procedures for hot holding		
20	In, Out, <u>N/A</u> N/O	Proper cooling time and temperature		
21	<u>In</u> Out, N/A, N/O	Proper hot holding temperatures		
22	<u>In</u> Out, N/A, N/O	Proper cold holding temperatures		
23	In, <u>Out</u> N/A, N/O	Proper date marking and disposition		X
24	In, Out, <u>N/A</u> N/O	Time as a Public Health Control; procedures & records		
<b>Consumer Advisory</b>				
25	In, Out, <u>N/A</u>	Consumer advisory provided for raw/undercooked food		
<b>Highly Susceptible Populations</b>				
26	In, Out, <u>N/A</u>	Pasteurized foods used; prohibited foods not offered		
<b>Food/Color Additives and Toxic Substances</b>				
27	In, Out, <u>N/A</u>	Food additives: approved and properly used		
28	<u>In</u> Out, N/A	Toxic substances properly identified, stored, and used		
<b>Conformance with Approved Procedures</b>				
29	In, Out, <u>N/A</u>	Compliance with variance/specialized process/HACCP		

## GOOD RETAIL PRACTICES

Good Retail Practices are preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.  
 Mark "X" in box if numbered item is not in compliance    Mark "X" in appropriate box for COS and/or R    **COS**=corrected on-site during inspection    **R**=repeat violation

Compliance Status		Description	COS	R
<b>Safe Food and Water</b>				
30		Pasteurized eggs used where required		
31		Water and ice from approved source		
32		Variance obtained for specialized processing methods		
<b>Food Temperature Control</b>				
33		Proper cooling methods used; adequate equipment for temperature control		
34		Plant food properly cooked for hot holding		
35		Approved thawing methods used		
36		Thermometers provided & accurate		
<b>Food Identification</b>				
37		Food properly labeled; original container		
<b>Prevention of Food Contamination</b>				
38		Insects, rodents, and animals not present		
39		Contamination prevented during food preparation, storage and display		
40		Personal cleanliness		
41		Wiping cloths: properly used and stored		
42		Washing fruits and vegetables		

Compliance Status		Description	COS	R
<b>Proper Use of Utensils</b>				
43		In-use utensils: properly stored		
44		Utensils, equipment & linens: properly stored, dried, & handled		
45		Single-use/single-service articles: properly stored and used		
46		Gloves used properly		
<b>Utensils, Equipment and Vending</b>				
47		Food and non-food contact surfaces cleanable, properly designed, constructed, and used		
48		Warewashing facilities: installed, maintained, & used; test strips		
49	X	Non-food contact surfaces clean		
<b>Physical Facilities</b>				
50		Hot and cold water available; adequate pressure		
51		Plumbing installed; proper backflow devices		
52		Sewage and waste water properly disposed		
53		Toilet facilities: properly constructed, supplied, & cleaned		
54		Garbage & refuse properly disposed; facilities maintained		
55	X	Physical facilities installed, maintained, and clean		
56		Adequate ventilation and lighting; designated areas used		
<b>Employee Training</b>				
57		All food employees have food handler training		
58		Allergen training as required		

# Food Establishment Inspection Report

Establishment: Steak 'n Shake - SUV Establishment #: 1110

Water Supply:  Public  Private Waste Water System:  Public  Private

Sanitizer Type: Quat PPM: originally 10 ppm corrected to 200 ppm Heat: N/A

TEMPERATURE OBSERVATIONS					
Item/Location	Temp		Item/Location	Temp	
Shake Table	21°		Traulson Ice Cream Freezer	9.7°	
Milk Dispenser	33°				
Traulson 4 door			Walk-In Cooler	32.4°	
Make Table AA	39.7°		Walk-In Freezer	3°	
Sl. Tomatoes	37.5°				
			Traulson French Fry Freezer	-1°	
Traulson 1 Door Petty Fridge	34.2°				
HOT Dogs	32.8°		Hot Holding		
Burger Patties	29.3°		Chili	147.5°	

### OBSERVATIONS AND CORRECTIVE ACTIONS

Item Number	Violations cited in this report must be corrected within the time frames below.
16	Provide proper concentration of Quat sanitizer for Sani-buckets at front counter. Originally observed at 10 ppm. Corrected on site to 200 ppm.
16	Clean interior of Amana microwave in rear kitchen area. Burned on food debris. Corrected <del>by NPI</del> on site.
23	Label sliced tomatoes in walk in cooler with date sliced. 7 day max hold at refrigerated temperatures. COS
55	Map floor in dry storage area. Sticky. Correct by NPI
49	Clean filters in vent hood above deep fryers. Grease. Correct by NPI.
#2	Provide CFPM ID# + exp. date for PIC of this facility. Simone Lasan will email information to JCHD. Correct by 4/29/19.

CFPM Verification (name, expiration date, ID#):

Laura Jones #2145276 exp. 12/16/22	Simone Lasan - Has taken class - Sending info
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HACCP Topic: Handwashing, sanitizer strength

Person in Charge (Signature): [Signature] Date: 3/27/19

Inspector (Signature): Steph E. Williams Follow-up:  Yes  No (Check one) Follow-up Date: 4/29/19