

Food Establishment Inspection Report

Score: 90Establishment Name: STEAK N SHAKE 2704Establishment ID: 3034014017Location Address: 4684 N PATTERSON AVE☒ Inspection ☐ Re-InspectionCity: WINSTON SALEMState: NCDate: 08 / 27 / 2015 Status Code: AZip: 27105County: 34 ForsythTime In: 11 : 00 ☒ am ☐ pmTime Out: 02 : 10 ☐ am ☒ pmTotal Time: 3 hrs 10 minutesPermittee: STEAKERS AND SHAKERS LLCCategory #: IITelephone: (336) 744-3335FDA Establishment Type: Fast Food RestaurantWastewater System: ☒ Municipal/Community ☐ On-Site SystemNo. of Risk Factor/Intervention Violations: 3Water Supply: ☒ Municipal/Community ☐ On-Site SupplyNo. of Repeat Risk Factor/Intervention Violations: 1

Foodborne Illness Risk Factors and Public Health Interventions											
Risk factors: Contributing factors that increase the chance of developing foodborne illness.											
Public Health Interventions: Control measures to prevent foodborne illness or injury.											
IN	OUT	N/A	N/O	Compliance Status				OUT	CDI	R	VR
Supervision .2652											
1	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	PIC Present; Demonstration-Certification by accredited program and perform duties				<u>2</u>	<u>0</u>	<input type="checkbox"/>	<input type="checkbox"/>
Employee Health .2652											
2	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Management, employees knowledge; responsibilities & reporting				<u>3</u>	<u>15</u>	<u>0</u>	<input type="checkbox"/>
3	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper use of reporting, restriction & exclusion				<u>3</u>	<u>15</u>	<u>0</u>	<input type="checkbox"/>
Good Hygienic Practices .2652, .2653											
4	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper eating, tasting, drinking, or tobacco use				<u>2</u>	<u>1</u>	<u>0</u>	<input type="checkbox"/>
5	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	No discharge from eyes, nose or mouth				<u>1</u>	<u>05</u>	<u>0</u>	<input type="checkbox"/>
Preventing Contamination by Hands .2652, .2653, .2655, .2656											
6	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Hands clean & properly washed				<u>4</u>	<u>2</u>	<u>0</u>	<input type="checkbox"/>
7	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	No bare hand contact with RTE foods or pre-approved alternate procedure properly followed				<u>3</u>	<u>15</u>	<u>0</u>	<input type="checkbox"/>
8	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Handwashing sinks supplied & accessible				<u>2</u>	<u>1</u>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Approved Source .2653, .2655											
9	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food obtained from approved source				<u>2</u>	<u>1</u>	<u>0</u>	<input type="checkbox"/>
10	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Food received at proper temperature				<u>2</u>	<u>1</u>	<u>0</u>	<input type="checkbox"/>
11	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food in good condition, safe & unadulterated				<u>2</u>	<u>1</u>	<u>0</u>	<input type="checkbox"/>
12	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Required records available: shellstock tags, parasite destruction				<u>2</u>	<u>1</u>	<u>0</u>	<input type="checkbox"/>
Protection from Contamination .2653, .2654											
13	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food separated & protected				<u>3</u>	<u>15</u>	<u>0</u>	<input type="checkbox"/>
14	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Food-contact surfaces: cleaned & sanitized				<input checked="" type="checkbox"/>	<u>15</u>	<u>0</u>	<input checked="" type="checkbox"/>
15	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper disposition of returned, previously served, reconditioned, & unsafe food				<u>2</u>	<u>1</u>	<u>0</u>	<input type="checkbox"/>
Potentially Hazardous Food Time/Temperature .2653											
16	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper cooking time & temperatures				<u>3</u>	<u>15</u>	<u>0</u>	<input type="checkbox"/>
17	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper reheating procedures for hot holding				<u>3</u>	<u>15</u>	<u>0</u>	<input type="checkbox"/>
18	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper cooling time & temperatures				<u>3</u>	<u>15</u>	<u>0</u>	<input type="checkbox"/>
19	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper hot holding temperatures				<u>3</u>	<u>15</u>	<u>0</u>	<input type="checkbox"/>
20	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper cold holding temperatures				<u>3</u>	<u>15</u>	<u>0</u>	<input type="checkbox"/>
21	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Proper date marking & disposition				<u>3</u>	<u>15</u>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
22	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Time as a public health control: procedures & records				<u>2</u>	<u>1</u>	<u>0</u>	<input type="checkbox"/>
Consumer Advisory .2653											
23	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Consumer advisory provided for raw or undercooked foods				<u>1</u>	<u>05</u>	<u>0</u>	<input type="checkbox"/>
Highly Susceptible Populations .2653											
24	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Pasteurized foods used; prohibited foods not offered				<u>3</u>	<u>15</u>	<u>0</u>	<input type="checkbox"/>
Chemical .2653, .2657											
25	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Food additives: approved & properly used				<u>1</u>	<u>05</u>	<u>0</u>	<input type="checkbox"/>
26	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Toxic substances properly identified stored, & used				<u>2</u>	<u>1</u>	<u>0</u>	<input type="checkbox"/>
Conformance with Approved Procedures .2653, .2654, .2658											
27	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Compliance with variance, specialized process, reduced oxygen packing criteria or HACCP plan				<u>2</u>	<u>1</u>	<u>0</u>	<input type="checkbox"/>

Good Retail Practices											
Good Retail Practices: Preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.											
IN	OUT	N/A	N/O	Compliance Status				OUT	CDI	R	VR
Safe Food and Water .2653, .2655, .2658											
28	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Pasteurized eggs used where required				<u>1</u>	<u>05</u>	<u>0</u>	<input type="checkbox"/>
29	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Water and ice from approved source				<u>2</u>	<u>1</u>	<u>0</u>	<input type="checkbox"/>
30	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Variance obtained for specialized processing methods				<u>1</u>	<u>05</u>	<u>0</u>	<input type="checkbox"/>
Food Temperature Control .2653, .2654											
31	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper cooling methods used; adequate equipment for temperature control				<u>1</u>	<u>05</u>	<u>0</u>	<input type="checkbox"/>
32	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Plant food properly cooked for hot holding				<u>1</u>	<u>05</u>	<u>0</u>	<input type="checkbox"/>
33	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Approved thawing methods used				<u>1</u>	<u>05</u>	<u>0</u>	<input type="checkbox"/>
34	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Thermometers provided & accurate				<u>1</u>	<u>05</u>	<u>0</u>	<input type="checkbox"/>
Food Identification .2653											
35	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food properly labeled: original container				<u>2</u>	<u>1</u>	<u>0</u>	<input type="checkbox"/>
Prevention of Food Contamination .2652, .2653, .2654, .2656, .2657											
36	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Insects & rodents not present; no unauthorized animals				<u>2</u>	<u>1</u>	<u>0</u>	<input type="checkbox"/>
37	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Contamination prevented during food preparation, storage & display				<u>2</u>	<u>1</u>	<u>0</u>	<input type="checkbox"/>
38	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Personal cleanliness				<u>1</u>	<u>05</u>	<u>0</u>	<input type="checkbox"/>
39	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Wiping cloths: properly used & stored				<u>1</u>	<u>05</u>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
40	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Washing fruits & vegetables				<u>1</u>	<u>05</u>	<u>0</u>	<input type="checkbox"/>
Proper Use of Utensils .2653, .2654											
41	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	In-use utensils: properly stored				<u>1</u>	<u>05</u>	<u>0</u>	<input type="checkbox"/>
42	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Utensils, equipment & linens: properly stored, dried & handled				<u>1</u>	<u>05</u>	<u>0</u>	<input type="checkbox"/>
43	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Single-use & single-service articles: properly stored & used				<input checked="" type="checkbox"/>	<u>05</u>	<u>0</u>	<input checked="" type="checkbox"/>
44	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Gloves used properly				<u>1</u>	<u>05</u>	<u>0</u>	<input type="checkbox"/>
Utensils and Equipment .2653, .2654, .2663											
45	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Equipment, food & non-food contact surfaces approved, cleanable, properly designed, constructed, & used				<input checked="" type="checkbox"/>	<u>1</u>	<u>0</u>	<input checked="" type="checkbox"/>
46	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Warewashing facilities: installed, maintained, & used; test strips				<u>1</u>	<u>05</u>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
47	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Non-food contact surfaces clean				<input checked="" type="checkbox"/>	<u>05</u>	<u>0</u>	<input checked="" type="checkbox"/>
Physical Facilities .2654, .2655, .2656											
48	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Hot & cold water available; adequate pressure				<u>2</u>	<u>1</u>	<u>0</u>	<input type="checkbox"/>
49	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Plumbing installed; proper backflow devices				<u>2</u>	<input checked="" type="checkbox"/>	<u>0</u>	<input checked="" type="checkbox"/>
50	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Sewage & waste water properly disposed				<u>2</u>	<u>1</u>	<u>0</u>	<input type="checkbox"/>
51	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Toilet facilities: properly constructed, supplied & cleaned				<u>1</u>	<input checked="" type="checkbox"/>	<u>0</u>	<input type="checkbox"/>
52	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Garbage & refuse properly disposed; facilities maintained				<input checked="" type="checkbox"/>	<u>05</u>	<u>0</u>	<input checked="" type="checkbox"/>
53	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Physical facilities installed, maintained & clean				<u>1</u>	<input checked="" type="checkbox"/>	<u>0</u>	<input type="checkbox"/>
54	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Meets ventilation & lighting requirements; designated areas used				<u>1</u>	<u>05</u>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Total Deductions:										10	

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Comment Addendum to Food Establishment Inspection Report

Establishment Name: STEAK N SHAKE 2704

Location Address: 4684 N PATTERSON AVE

City: WINSTON SALEM State: NC

County: 34 Forsyth Zip: 27105

Wastewater System: ☒ Municipal/Community ☐ On-Site System

Water Supply: ☒ Municipal/Community ☐ On-Site System

Permittee: STEAKERS AND SHAKERS LLC

Telephone: (336) 744-3335

Establishment ID: 3034014017

☒ Inspection ☐ Re-Inspection Date: 08/27/2015

Comment Addendum Attached? ☐ Status Code: A

Category #: II

Email 1: SNS2704@TRIAD.RR.COM

Email 2:

Email 3:

Temperature Observations

Item	Location	Temp	Item	Location	Temp	Item	Location	Temp
Burger	Grill	202	Cooked	Steam well	176	Chlorine	Rinse cycle in ppm	0
Egg	Grill	206	Hot dogs	Prep table	42	SS Armando	Exp. 2/18/2019	0
Cheese	Grill cooler	45	Cooked	Prep table	45			
Raw ground	Grill cooler	42	Sliced	Walk in cooler	42			
Sliced cheese	Prep cooler	45	Lettuce	Walk in cooler	40			
Sliced	Prep cooler	38	Raw ground	Walk in cooler	42			
Lettuce	Prep cooler	45	Hot water	Three compartment sink	146			
Chili	Steam well	149	Quat sanitizer	Bucket in ppm	200			

Observations and Corrective Actions

Violations cited in this report must be corrected within the time frames below, or as stated in sections 8-405.11 of the food code.

- 8 0 pts - 5-205.11 Using a Handwashing Sink-Operation and Maintenance - PF - Front handsink does not dispense paper towels - handsinks must be stocked and available for use during hours of operation - CDI - manager placed roll of paper towels at front handsink
- 14 4-601.11 (A) Equipment, Food-Contact Surfaces, Nonfood-Contact Surfaces, and Utensils - P - Repeat - Slime build-up present inside soda fountain nozzles, 4 plates, 2 scoops, 4 lexan pans, 2 scoops, tomato slicer blade and hand mixer blade contained food debris - thoroughly clean and sanitize utensils and food contact equipment after use so they are clean to sight and touch - will require verification visit in 10 days to ensure items are clean - contact Kenneth Michaud at michaukb@forsyth.cc or (336) 703-3131 when complete; Significant food splatter present under lip of doors and top of dish machine - clean as often as necessary to prevent splatter build-up - contact Kenneth Michaud when complete
- 4-501.114 Manual and Mechanical Warewashing Equipment, Chemical Sanitization-Temperature, pH, Concentration and Hardness - P - Dish machine not dispensing chlorine sanitizer, not registering on test strips - called chemical company during
- 21 0 pts - 3-501.17 Ready-To-Eat Potentially Hazardous Food (Time/Temperature Control for Safety Food), Date Marking - PF - Date mark labels on potentially hazardous, ready to eat foods in walk in cooler had day but not date marked - ensure that date is marked as to adequately identify when food is to be discarded, used or consumed by - CDI - manager added dates on day dots



Person in Charge (Print & Sign): Armando ^{First} Garcia ^{Last}

Regulatory Authority (Print & Sign): Kenneth ^{First} Michaud ^{Last}

[Signature]

[Signature]

REHS ID: 2259 - Michaud, Kenneth

Verification Required Date: 09 / 06 / 2015

REHS Contact Phone Number: (336) 703 - 3131



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- 39 0 pts - 3-304.14 Wiping Cloths, Use Limitation - C - Observed one wet wiping cloth stored on rear prep table - wiping cloths must be stored in sanitizer solution when not in use
- 43 4-903.11 (A) and (C) Equipment, Utensils, Linens and Single-Service and Single-Use Articles-Storing - C - Repeat - Small stacks throughout facility stacked outside of sleeves - ensure that single service cups are stacked in sleeves or in proper dispenser where lip of top cup is protected from cross contamination
- 45 4-501.11 Good Repair and Proper Adjustment-Equipment - C - Repeat - Repair or replace peeling/oxidizing storage racks in walk in cooler, ice cream freezer and inside fryer freezer; Replace torn reach in fry freezer door gasket; Replace two broken lexan lids; Replace two cracked lexan pans
4-205.10 Food Equipment, Certification and Classification - C - Cup used as scoop in sprinkles box and sugar bin for tea urn - scoops must have handle as to help prevent hands from coming into contact with food
- 46 0 pts - 4-302.14 Sanitizing Solutions, Testing Devices - PF - Test strips present - must use test strips often to check strength of sanitizer- manager observed air bubbles in sanitizing dispenser line
- 47 4-601.11 (B) and (C) Equipment, Food-Contact Surfaces, Nonfood-Contact Surfaces, and Utensils - C - Repeat - Detailed cleaning needed under lips of most tables, inside fryer doors, underneath fryer door handles, in most cooler/freezer door gaskets, on walk in cooler, dry goods room and air drying storage racks, top ledge at steamer station, inside condiment bins at drive thru, in between fryer and prep table, in between fryer and reach in freezer, in between grill and prep table and inside drawer guide beside two compartment sink
- 49 5-203.14 Backflow Prevention Device, When Required - P - No backflow prevention devices observed on water supply line to tea or coffee maker - each appliance that has it's own water source must have backflow prevention device either on water line or built in to prevent back siphonage of possible contaminated water - have backflow prevention device at correct rating installed on water lines, if one is built in appliance, have documentation from manufacturer stating such provided on premises; Backflow prevention device on canwash is not rated for current set up under pressure - backflow prevention device rated for constant pressure is required between splitter and faucet of can wash or remove splitter and use open ended hose for current backflow prevention device - backflow prevention devices must be correct in 10 days - contact Kenneth Michaud at michaukb@forsyth.cc or (336) 703-3131 when complete
- 51 5-203.12 Toilets and Urinals - C - Replace broken men's toilet seat; Repair inoperable women's toilet



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- 52 5-501.15 Outside Receptacles - C - Repeat - Dumpster door open, cardboard dumpster lid broken - ensure that dumpster doors and lids are in good repair and shut to help prevent pest and rodent harborage
5-501.115 Maintaining Refuse Areas and Enclosures - C - Significant trash build-up on dumpster bad in between and around dumpsters - have removed immediately; Dumpster pad needs to be pressure washed as it contains significant grease runoff into parking lot
- 53 6-501.11 Repairing-Premises, Structures, Attachments, and Fixtures-Methods - C - Replace broken baseboard tile at bag-a-box station; Recaulk toilets to wall in restrooms; Recaulk handsinks to wall in service area and in rear; Recaulk backsplashes to wall throughout facility and bevel correctly to properly shed water
- 54 0 pts - 6-303.11 Intensity-Lighting - C - Although lighting was adequate, replace burned out light bulbs throughout



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