



Retail Food Establishment Inspection Report

<b>Establishment Information</b>	
Facility Name RUDYS DRIVE IN	Facility Type Restaurant
Facility ID # HSAT-7QX2E2	Facility Telephone # 608 782-2200
Facility Address 1004 LA CROSSE ST LA CROSSE , WI 54601	
Licensee Name RUDY GARY D	Licensee Address P O BOX 1351 LA CROSSE , WI 54602

<b>Inspection Information</b>		
Inspection Type Routine	Inspection Date 08/01/2016	Total Time Spent

<b>Equipment Temperatures</b>	
Description	Temperature (Fahrenheit)
Refrigeration	36, 36, 40.5, 39, 41, 37.5, 35, 33,
Freezer	39 3, 14, 7, 5

<b>Food Temperatures</b>	
Description	Temperature (Fahrenheit)
Cook - burger	196
Cold hold - ice cream	37, 35

<b>Warewashing Info</b>						
Machine Name	Sanitization Method	Thermo Label	PPM	Sanitizer Name	Sanitizer Type	Temperature
Four compartment sink	Chemical		NSU	Chlorine		
Glass washer	Chemical		0, 50	Chlorine		
3 compartment sink	Chemical		0, 50	Chlorine		

**OPERATOR** - The violations in operating procedure or physical arrangement indicated below must be corrected by the next routine inspection or by a date specified in this report.

<b>Observed Violations</b>
<p><b>Total # 4</b></p> <p><b>Risk/Intervention - 1A - Certified food manager: duties</b></p> <p>This is a core item</p> <p><b>OBSERVATION:</b> There is no Wisconsin Certified Food Manager for this establishment. ServSafe passed (4 employees), but have not sent for state certification.</p> <p><b>CORRECTIVE ACTION(S):</b> Provide a Wisconsin Certified Food Manager and post the state certificate in the food establishment within 90 days. Correct By: 01-Nov-2016</p> <p><b>CODE CITATION:</b> 12-201.11 (A) An individual who operates a FOOD ESTABLISHMENT or at least one MANAGER of a FOOD ESTABLISHMENT, shall have a certificate issued by the DEPARTMENT that states that the individual or MANAGER has passed a DEPARTMENT APPROVED examination on FOOD protection practices</p>

as required in s. 254.71, Stats.; provided, however, that:

(1) A NEW FOOD ESTABLISHMENT or a FOOD ESTABLISHMENT undergoing a change of OPERATOR shall have a certified FOOD MANAGER within 90 days of the initial day of operation or provide documentation that an individual is scheduled within three (3) months to take and pass an APPROVED examination as specified in § 12-301.11.

(2) A FOOD ESTABLISHMENT that is not in compliance because of EMPLOYEE turnover or other loss of a CERTIFIED FOOD MANAGER, shall have 90 days from the date of the loss of a CERTIFIED FOOD MANAGER to comply with this chapter or provide documentation that the individual designated to be the CERTIFIED FOOD MANAGER will become certified within the time specified in this subparagraph.

**Risk/Intervention - 06 - Hands cleaned and properly washed**

This is a priority item

**OBSERVATION:** Food employee observed improperly washing hands by drying hands on shirt.

**CORRECTIVE ACTION(S):** Train food employees in proper handwashing techniques. Correct By: 01-Aug-2016

**CODE CITATION:** 2-301.12 (A) Except as specified in ¶ (D) of this section, FOOD EMPLOYEES shall clean their hands and exposed portions of their arms including surrogate prosthetic devices for hands or arms for at least 20 seconds, using a cleaning compound in a HANDWASHING SINK that is equipped as specified under § 5-202.12 and Subpart 6-301. [P]

(B) FOOD EMPLOYEES shall use the following cleaning procedure in the order stated to clean their hands and exposed portions of their arms, including surrogate prosthetic devices for hands and arms:

- (1) Rinse under clean, running warm water; [P]
- (2) Apply an amount of cleaning compound recommended by the cleaning compound manufacturer; [P]
- (3) Rub together vigorously for at least 10 to 15 seconds while:
  - (a) Paying particular attention to removing soil from underneath the fingernails during the cleaning procedure, [P] and
  - (b) Creating friction on the surfaces of the hands and arms or surrogate prosthetic devices for hands and arms, finger tips, and areas between the fingers. [P]
- (4) Thoroughly rinse under clean, running warm water; [P] and
- (5) Immediately follow the cleaning procedure with thorough drying using a method as specified under § 6-301.12. [P]

(C) To avoid recontaminating their hands or surrogate prosthetic devices, FOOD EMPLOYEES may use disposable paper towels or similar clean barriers when touching surfaces such as manual operated faucet handles on a HANDWASHING SINK or the handle of a restroom door.

(D) If APPROVED and capable of removing the types of soils encountered in the FOOD operations involved, an automatic handwashing facility may be used by FOOD EMPLOYEES to clean their hands or surrogate prosthetic devices.

**Risk/Intervention - 14 - Food-contact surfaces: cleaned and sanitized**

This is a priority item

**OBSERVATION: (CORRECTED DURING INSPECTION):** The chlorine is not being used according to EPA registered label use instructions and is at 0 PPM in front dishwasher. Machine ran 3x, dispensed 50ppm Chlorine.

**CORRECTIVE ACTION(S):** Provide training to employees on proper use and concentration of sanitizer or repair or adjust warewashing equipment to provide proper sanitizer concentration. Correct By: 01-Aug-2016

**CODE CITATION:** 4-501.114 A chemical SANITIZER used in a SANITIZING solution for a manual or mechanical operation at contact times specified under ¶ 4-703.11 (C) shall meet the criteria specified in § 7-204.11 SANITIZERS, Criteria, shall be used in accordance with the EPA-registered label use instructions, and shall be used as follows: [P]

(A) A chlorine solution shall have a minimum temperature based on the concentration and pH of the solution as listed in the following chart; [P]

Concentration Range Minimum Temperature mg/L  
pH 10 or less °C (°F) pH 8 or less °C (°F)

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25-49 49 (120) 49 (120)

50-99 38 (100) 24 (75)

100 13 (55) 13 (55)

(B) An iodine solution shall have a:

- (1) Minimum temperature of 20°C (68°F), [P]
- (2) pH of 5.0 or less or a pH no higher than the level for which the manufacturer specifies the solution is effective, [P] and
- (3) Concentration between 12.5 mg/L and 25 mg/L; [P]

(C) A quaternary ammonium compound solution shall: [P]

- (1) Have a minimum temperature of 24°C (75°F), [P]
- (2) Have a concentration as specified under § 7-204.11 and as indicated by the manufacturer's use directions included in the labeling, [P] and

(3) Be used only in water with 500 mg/L hardness or less or in water having a hardness no greater than specified by the EPA-registered label use instructions; [P]

(D) If another solution of a chemical specified under ¶¶ (A) to (C) of this section is used, the PERMIT/LICENSE HOLDER shall demonstrate to the DEPARTMENT that the solution achieves SANITIZATION and the use of the solution shall be APPROVED; [P] or

(E) If a chemical SANITIZER other than chlorine, iodine, or a quaternary ammonium compound is used, it shall be applied in accordance with the EPA-registered label use instructions and be approved by the DEPARTMENT. [P]

**Risk/Intervention - 08 - Adequate handwashing facilities supplied and accessible**

This is a core item

**REPEAT OBSERVATION:** No handwashing signage provided at front handwashing sink.

**CORRECTIVE ACTION(S):** Provide handwashing signage at all handwashing sinks used by food employees.

Correct By: 01-Aug-2016

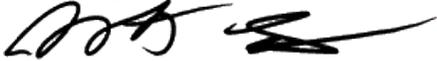
**CODE CITATION:** 6-301.14 A sign or poster that notifies FOOD EMPLOYEES to wash their hands shall be provided at all HANDWASHING SINKS used by FOOD EMPLOYEES and shall be clearly visible to FOOD EMPLOYEES.

**Comments**

1. [Menu review and risk assessment conducted.](#)

Any operator aggrieved by an order of this department under this chapter may request a hearing as provided in ch.227 statute, if state licensed, or a local ordinance if licensed by an agent health department.

Person in Charge



Sanitarian



**Nicole Frankfourth**  
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