

Food Establishment Inspection Report

Score: 96.5

Establishment Name: TJ'S DELI & GRILL

Establishment ID: 3034012723

Location Address: 5017 COUNTRY CLUB RD.

City: WINSTON SALEM State: North Carolina

Zip: 27104 County: 34 Forsyth

Permittee: IXNK, INC.

Telephone: (336) 760-0488

☒ Inspection ☐ Re-Inspection

Wastewater System:

☒ Municipal/Community ☐ On-Site System

Water Supply:

☒ Municipal/Community ☐ On-Site Supply

Date: 09/28/2022 Status Code: A

Time In: 1:00 PM Time Out: 3:15 PM

Category#: IV

FDA Establishment Type: Full-Service Restaurant

No. of Risk Factor/Intervention Violations: 3

No. 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

Compliance Status		OUT	CDI	R	VR
Supervision .2652					
1	<input checked="" type="checkbox"/> OUT/N/A	PIC Present, demonstrates knowledge, & performs duties	1	0	
2	<input checked="" type="checkbox"/> OUT/N/A	Certified Food Protection Manager	1	0	
Employee Health .2652					
3	<input checked="" type="checkbox"/> OUT	Management, food & conditional employee; knowledge, responsibilities & reporting	2	1	0
4	<input checked="" type="checkbox"/> OUT	Proper use of reporting, restriction & exclusion	3	1.5	0
5	<input checked="" type="checkbox"/> OUT	Procedures for responding to vomiting & diarrheal events	1	0.5	0
Good Hygienic Practices .2652, .2653					
6	<input checked="" type="checkbox"/> OUT	Proper eating, tasting, drinking or tobacco use	1	0.5	0
7	<input checked="" type="checkbox"/> OUT	No discharge from eyes, nose, and mouth	1	0.5	0
Preventing Contamination by Hands .2652, .2653, .2655, .2656					
8	<input checked="" type="checkbox"/> OUT	Hands clean & properly washed	4	2	0
9	<input checked="" type="checkbox"/> OUT/N/A/N/O	No bare hand contact with RTE foods or pre-approved alternate procedure properly followed	4	2	0
10	<input checked="" type="checkbox"/> OUT/N/A	Handwashing sinks supplied & accessible	2	1	0
Approved Source .2653, .2655					
11	<input checked="" type="checkbox"/> OUT	Food obtained from approved source	2	1	0
12	<input checked="" type="checkbox"/> IN OUT	Food received at proper temperature	2	1	0
13	<input checked="" type="checkbox"/> IN OUT	Food in good condition, safe & unadulterated	2	X	0 X X
14	<input checked="" type="checkbox"/> IN OUT	Required records available: shellstock tags, parasite destruction	2	1	0
Protection from Contamination .2653, .2654					
15	<input checked="" type="checkbox"/> IN OUT/N/A/N/O	Food separated & protected	3	1.5	X X
16	<input checked="" type="checkbox"/> OUT	Food-contact surfaces: cleaned & sanitized	3	1.5	0
17	<input checked="" type="checkbox"/> OUT	Proper disposition of returned, previously served, reconditioned & unsafe food	2	1	0
Potentially Hazardous Food Time/Temperature .2653					
18	<input checked="" type="checkbox"/> OUT/N/A/N/O	Proper cooking time & temperatures	3	1.5	0
19	<input checked="" type="checkbox"/> IN OUT/N/A/N/O	Proper reheating procedures for hot holding	3	1.5	0
20	<input checked="" type="checkbox"/> OUT/N/A/N/O	Proper cooling time & temperatures	3	1.5	0
21	<input checked="" type="checkbox"/> OUT/N/A/N/O	Proper hot holding temperatures	3	1.5	0
22	<input checked="" type="checkbox"/> OUT/N/A/N/O	Proper cold holding temperatures	3	1.5	0
23	<input checked="" type="checkbox"/> IN OUT/N/A/N/O	Proper date marking & disposition	3	1.5	X X
24	<input checked="" type="checkbox"/> IN OUT	Time as a Public Health Control; procedures & records	3	1.5	0
Consumer Advisory .2653					
25	<input checked="" type="checkbox"/> IN OUT	Consumer advisory provided for raw/undercooked foods	1	0.5	0
Highly Susceptible Populations .2653					
26	<input checked="" type="checkbox"/> IN OUT	Pasteurized foods used; prohibited foods not offered	3	1.5	0
Chemical .2653, .2657					
27	<input checked="" type="checkbox"/> OUT/N/A	Food additives: approved & properly used	1	0.5	0
28	<input checked="" type="checkbox"/> OUT/N/A	Toxic substances properly identified stored & used	2	1	0
Conformance with Approved Procedures .2653, .2654, .2658					
29	<input checked="" type="checkbox"/> IN OUT	Compliance with variance, specialized process, reduced oxygen packaging criteria or HACCP plan	2	1	0

Good Retail Practices

Good Retail Practices: Preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.

Compliance Status		OUT	CDI	R	VR
Safe Food and Water .2653, .2655, .2658					
30	<input checked="" type="checkbox"/> IN OUT	Pasteurized eggs used where required	1	0.5	0
31	<input checked="" type="checkbox"/> OUT	Water and ice from approved source	2	1	0
32	<input checked="" type="checkbox"/> IN OUT	Variance obtained for specialized processing methods	2	1	0
Food Temperature Control .2653, .2654					
33	<input checked="" type="checkbox"/> IN OUT	Proper cooling methods used; adequate equipment for temperature control	1	0.5	0 X
34	<input checked="" type="checkbox"/> OUT/N/A/N/O	Plant food properly cooked for hot holding	1	0.5	0
35	<input checked="" type="checkbox"/> OUT/N/A/N/O	Approved thawing methods used	1	0.5	0
36	<input checked="" type="checkbox"/> OUT	Thermometers provided & accurate	1	0.5	0
Food Identification .2653					
37	<input checked="" type="checkbox"/> IN OUT	Food properly labeled: original container	2	1	X
Prevention of Food Contamination .2652, .2653, .2654, .2656, .2657					
38	<input checked="" type="checkbox"/> OUT	Insects & rodents not present; no unauthorized animals	2	1	0
39	<input checked="" type="checkbox"/> OUT	Contamination prevented during food preparation, storage & display	2	1	0
40	<input checked="" type="checkbox"/> IN OUT	Personal cleanliness	1	0.5	0 X
41	<input checked="" type="checkbox"/> OUT	Wiping cloths: properly used & stored	1	0.5	0
42	<input checked="" type="checkbox"/> OUT/N/A	Washing fruits & vegetables	1	0.5	0
Proper Use of Utensils .2653, .2654					
43	<input checked="" type="checkbox"/> OUT	In-use utensils: properly stored	1	0.5	0
44	<input checked="" type="checkbox"/> IN OUT	Utensils, equipment & linens: properly stored, dried & handled	1	0.5	X
45	<input checked="" type="checkbox"/> OUT	Single-use & single-service articles: properly stored & used	1	0.5	0
46	<input checked="" type="checkbox"/> OUT	Gloves used properly	1	0.5	0
Utensils and Equipment .2653, .2654, .2663					
47	<input checked="" type="checkbox"/> IN OUT	Equipment, food & non-food contact surfaces approved, cleanable, properly designed, constructed & used	1	0.5	0 X
48	<input checked="" type="checkbox"/> IN OUT	Warewashing facilities: installed, maintained & used; test strips	1	0.5	X
49	<input checked="" type="checkbox"/> OUT	Non-food contact surfaces clean	1	0.5	0
Physical Facilities .2654, .2655, .2656					
50	<input checked="" type="checkbox"/> OUT/N/A	Hot & cold water available; adequate pressure	1	0.5	0
51	<input checked="" type="checkbox"/> IN OUT	Plumbing installed; proper backflow devices	2	X	0
52	<input checked="" type="checkbox"/> OUT	Sewage & wastewater properly disposed	2	1	0
53	<input checked="" type="checkbox"/> OUT/N/A	Toilet facilities: properly constructed, supplied & cleaned	1	0.5	0
54	<input checked="" type="checkbox"/> OUT	Garbage & refuse properly disposed; facilities maintained	1	0.5	0
55	<input checked="" type="checkbox"/> OUT	Physical facilities installed, maintained & clean	1	0.5	0
56	<input checked="" type="checkbox"/> OUT	Meets ventilation & lighting requirements; designated areas used	1	0.5	0
TOTAL DEDUCTIONS:					3.5



Comment Addendum to Food Establishment Inspection Report

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 Permittee: IXNK, INC.
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Establishment ID: 3034012723
☒ Inspection ☐ Re-Inspection Date: 09/28/2022
 Comment Addendum Attached? ☒ Status Code: A
 Water sample taken? ☐ Yes ☒ No Category #: IV
 Email 1: tsiprasl@yahoo.com
 Email 2:
 Email 3:

Temperature Observations

Effective January 1, 2019 Cold Holding is now 41 degrees or less

Item	Location	Temp	Item	Location	Temp	Item	Location	Temp
Maria Strates	Servsafe 12/27/26	0						
Lettuce	Cooling	47						
Lettuce	Cooling	41						
Quat Sani	Three-Comp	150						
Chicken Salad	Make Unit	38						
Slice Tomato	Make Unit	41						
Onion Rings	Final	178						
Chicken	Hot Hold	137						
Fried Chicken	Final	199						
Grill Chicken	Final	188						
Chicken Rice Soup	Hot Hold	175						
Hot Water	Three-Comp	110						
Potato Salad	Walkin	40						
Ambient	Walkin	41						
Slice Tomato	Walkin	40						
Chicken Salad	Cooling	57						
Slice Roast Beef	Make Unit	36						
Burger	Final	187						
Chili	Hot Hold	174						

First
 Person in Charge (Print & Sign): Maria
First
 Regulatory Authority (Print & Sign): Ebonie

Last
Strates
Last
Wilborn

Maria Strates
Ebonie Wilborn REHS

REHS ID: 3122 - Wilborn, Ebonie
 REHS Contact Phone Number:

Verification Required Date:

Authorize final report to
 be received via Email:



North Carolina Department of Health & Human Services

Page 1 of _____
 DHHS is an equal opportunity employer.
 Food Establishment Inspection Report, 10/2021

• Division of Public Health • Environmental Health Section • Food Protection Program



Comment Addendum to Inspection Report

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Establishment ID: 3034012723

Date: 09/28/2022 **Time In:** 1:00 PM **Time Out:** 3:15 PM

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.

- 13 3-202.15 Package Integrity (Pf) REPEAT Three dented cans found. Food packaging has be in good condition, intact and protect the food inside.CDI. Can relocated to area designated for returns.
- 15 3-304.15 (A) Gloves, Use Limitation (P) Employee working on cookline grabbed raw food with gloves then ready to eat foods without changing gloves and washing hands in between. Discard gloves after a task is complete or any time they are damaged or soiled. CDI Employee removed gloves and washed hands.
- 23 3-501.18 Ready-To-Eat Time / Temperature Control for Safety Food, Disposition (P) Two containers of chicken soup was dated 9/21 inside of the walk-in cooler. Discard the food requiring date labels once time/temperature window has expired, if it is not been labeled, or if the label is incorrect. CDI Both containers were discarded.
- 33 3-501.15 Cooling Methods (Pf) Shredded lettuce, sliced tomatoes and chicken salad found in walk-in cooler measured above 41F. Items were prepared today and placed into deep drum containers with plastic wrap, a lid and stacked on top of one another. Quickly cool foods. Use methods such as open/vented shallow pans, large ice baths and active stirring. Cold air must flow around product to remove the heat. CDI Lettuce was spread into three large containers. Chicken salad was spread into shallow metal pan and put on ice. Slice tomatoes were spread into wider containers with lids removed.
- 37 3-302.12 Food Storage Containers Identified with Common Name of Food (C) Add labels to bottles holding sauce or establish a method to distinguish between each. Label all working containers of food (oils, spices, salts) except food that is easy to identify such as dry pasta.
- 40 2-303.11 Prohibition - Jewelry (C) REPEAT Employees on cook line wearing bracelets. Remove jewelry on hands and arms while preparing food. A plain ring, such as a wedding band, is allowed.

2-402.11 Effectiveness - Hair Restraints (C) REPEAT Men need beard guards. Use head coverings, beard guards and clothing to restrain body hair from contacting exposed food, equipment, and utensils.
- 44 4-903.11 (A), (B), and (D) Equipment, Utensils, Linens and Single-Service and Single-Use Articles Storing (C) Lids stored in a soiled container. Store cleaned equipment, utensils, linens and packages in a clean, dry location and at least 6 inches off the floor.
- 47 4-501.11 Good Repair and Proper Adjustment - Equipment (C) REPEAT Torn gasket present on upright freezer in ice cream area and right door of right prep unit in main kitchen (back order). End caps missing on shelf end (PIC begin replacing). Equipment shall be in good repair.
- 48 4-501.18 Warewashing Equipment, Clean Solutions (C) Wash sink had a fly in water with dishes. Keep the wash, rinse, and sanitize solutions clean.
- 51 5-205.15 System Maintained in Good Repair (C) REPEAT Leak present from faucet above the wash vat. Maintain plumbing system in good repair.