

# Food Establishment Inspection Report

Score: 100

Establishment Name: HONEYBAKED HAM COMPANY #105

Establishment ID: 3034010891

Location Address: 148 STRATFORD COMMONS CT

City: WINSTON SALEM State: North Carolina

Zip: 27103 County: 34 Forsyth

Permittee: THE ORIGINAL HONEYBAKED HAM C

Telephone: (336) 765-2008

Inspection  Re-Inspection

**Wastewater System:**

Municipal/Community  On-Site System

**Water Supply:**

Municipal/Community  On-Site Supply

Date: 09/30/2022 Status Code: A

Time In: 10:05 AM Time Out: 11:05 AM

Category#: II

FDA Establishment Type: Full-Service Restaurant

No. of Risk Factor/Intervention Violations: 2

No. of Repeat Risk Factor/Intervention Violations: 0

**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 |
|--|--|-----|-----|---|----|
| <b>Supervision .2652</b>   |  |     |     |   |    |
| 1  | <input checked="" type="checkbox"/> OUT N/A  |     |     |   |    |
| PIC Present, demonstrates knowledge, & performs duties   |  | 1   | 0   |   |    |
| 2  | <input checked="" type="checkbox"/> IN <input checked="" type="checkbox"/> N/A         |     |     |   |    |
| Certified Food Protection Manager  |  | 1   |     |   |    |
| <b>Employee Health .2652</b>   |  |     |     |   |    |
| 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 |    |
| <b>Good Hygienic Practices .2652, .2653</b>  |  |     |     |   |    |
| 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 |    |
| <b>Preventing Contamination by Hands .2652, .2653, .2655, .2656</b>                            |  |     |     |   |    |
| 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 |    |
| <b>Approved Source .2653, .2655</b>  |  |     |     |   |    |
| 11   | <input checked="" type="checkbox"/> OUT  |     |     |   |    |
| Food obtained from approved source   |  | 2   | 1   | 0 |    |
| 12   | <input checked="" type="checkbox"/> IN OUT <input checked="" type="checkbox"/> N/A     |     |     |   |    |
| Food received at proper temperature  |  | 2   | 1   | 0 |    |
| 13   | <input checked="" type="checkbox"/> OUT  |     |     |   |    |
| Food in good condition, safe & unadulterated   |  | 2   | 1   | 0 |    |
| 14   | <input checked="" type="checkbox"/> IN OUT <input checked="" type="checkbox"/> N/A N/O |     |     |   |    |
| Required records available: shellstock tags, parasite destruction                              |  | 2   | 1   | 0 |    |
| <b>Protection from Contamination .2653, .2654</b>  |  |     |     |   |    |
| 15   | <input checked="" type="checkbox"/> OUT N/A N/O  |     |     |   |    |
| Food separated & protected   |  | 3   | 1.5 | 0 |    |
| 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 |    |
| <b>Potentially Hazardous Food Time/Temperature .2653</b>                                       |  |     |     |   |    |
| 18   | <input checked="" type="checkbox"/> IN OUT <input checked="" type="checkbox"/> 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"/> IN OUT N/A N/O                                     |     |     |   |    |
| Proper cooling time & temperatures   |  | 3   | 1.5 | 0 |    |
| 21   | <input checked="" type="checkbox"/> IN OUT <input checked="" type="checkbox"/> 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 <input checked="" type="checkbox"/> OUT N/A N/O |     |     |   |    |
| Proper date marking & disposition  |  | 3   | 1.5 |   | X  |
| 24   | <input checked="" type="checkbox"/> IN OUT <input checked="" type="checkbox"/> N/A N/O |     |     |   |    |
| Time as a Public Health Control; procedures & records  |  | 3   | 1.5 | 0 |    |
| <b>Consumer Advisory .2653</b>   |  |     |     |   |    |
| 25   | <input checked="" type="checkbox"/> IN OUT <input checked="" type="checkbox"/> N/A     |     |     |   |    |
| Consumer advisory provided for raw/undercooked foods   |  | 1   | 0.5 | 0 |    |
| <b>Highly Susceptible Populations .2653</b>  |  |     |     |   |    |
| 26   | <input checked="" type="checkbox"/> IN OUT <input checked="" type="checkbox"/> N/A     |     |     |   |    |
| Pasteurized foods used; prohibited foods not offered   |  | 3   | 1.5 | 0 |    |
| <b>Chemical .2653, .2657</b>   |  |     |     |   |    |
| 27   | <input checked="" type="checkbox"/> IN OUT <input checked="" type="checkbox"/> 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 |    |
| <b>Conformance with Approved Procedures .2653, .2654, .2658</b>                                |  |     |     |   |    |
| 29   | <input checked="" type="checkbox"/> IN OUT <input checked="" type="checkbox"/> N/A     |     |     |   |    |
| 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 |
|--|--|-----|-----|---|----|
| <b>Safe Food and Water .2653, .2655, .2658</b>   |  |     |     |   |    |
| 30   | <input checked="" type="checkbox"/> IN OUT <input checked="" type="checkbox"/> N/A     |     |     |   |    |
| 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 <input checked="" type="checkbox"/> N/A     |     |     |   |    |
| Variance obtained for specialized processing methods   |  | 2   | 1   | 0 |    |
| <b>Food Temperature Control .2653, .2654</b>   |  |     |     |   |    |
| 33   | <input checked="" type="checkbox"/> OUT  |     |     |   |    |
| Proper cooling methods used; adequate equipment for temperature control                                |  | 1   | 0.5 | 0 |    |
| 34   | <input checked="" type="checkbox"/> IN OUT <input checked="" type="checkbox"/> 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 |    |
| <b>Food Identification .2653</b>   |  |     |     |   |    |
| 37   | <input checked="" type="checkbox"/> OUT  |     |     |   |    |
| Food properly labeled: original container  |  | 2   | 1   | 0 |    |
| <b>Prevention of Food Contamination .2652, .2653, .2654, .2656, .2657</b>                              |  |     |     |   |    |
| 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"/> OUT  |     |     |   |    |
| Personal cleanliness   |  | 1   | 0.5 | 0 |    |
| 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 |    |
| <b>Proper Use of Utensils .2653, .2654</b>   |  |     |     |   |    |
| 43   | <input checked="" type="checkbox"/> OUT  |     |     |   |    |
| In-use utensils: properly stored   |  | 1   | 0.5 | 0 |    |
| 44   | <input checked="" type="checkbox"/> OUT  |     |     |   |    |
| Utensils, equipment & linens: properly stored, dried & handled   |  | 1   | 0.5 | 0 |    |
| 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 |    |
| <b>Utensils and Equipment .2653, .2654, .2663</b>  |  |     |     |   |    |
| 47   | <input checked="" type="checkbox"/> OUT  |     |     |   |    |
| Equipment, food & non-food contact surfaces approved, cleanable, properly designed, constructed & used |  | 1   | 0.5 | 0 |    |
| 48   | <input checked="" type="checkbox"/> OUT  |     |     |   |    |
| Warewashing facilities: installed, maintained & used; test strips                                      |  | 1   | 0.5 | 0 |    |
| 49   | <input checked="" type="checkbox"/> OUT  |     |     |   |    |
| Non-food contact surfaces clean  |  | 1   | 0.5 | 0 |    |
| <b>Physical Facilities .2654, .2655, .2656</b>   |  |     |     |   |    |
| 50   | <input checked="" type="checkbox"/> OUT N/A  |     |     |   |    |
| Hot & cold water available; adequate pressure  |  | 1   | 0.5 | 0 |    |
| 51   | <input checked="" type="checkbox"/> OUT  |     |     |   |    |
| Plumbing installed; proper backflow devices  |  | 2   | 1   | 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 |    |
| <b>TOTAL DEDUCTIONS: 0</b>   |  |     |     |   |    |



# Comment Addendum to Food Establishment Inspection Report

Establishment Name: HONEYBAKED HAM COMPANY #105  
 Location Address: 148 STRATFORD COMMONS CT  
 City: WINSTON SALEM State: NC  
 County: 34 Forsyth Zip: 27103  
 Wastewater System:  Municipal/Community  On-Site System  
 Water Supply:  Municipal/Community  On-Site System  
 Permittee: THE ORIGINAL HONEYBAKED HAM C  
 Telephone: (336) 765-2008

Establishment ID: 3034010891  
 Inspection  Re-Inspection Date: 09/30/2022  
 Comment Addendum Attached?  Status Code: A  
 Water sample taken?  Yes  No Category #: II  
 Email 1: z0105@hbham.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 |
|----------------|---------------|------|------|----------|------|------|----------|------|
| Lettuce        | Make Unit     | 38   |      |          |      |      |          |      |
| Slice Tomato   | Make Unit     | 37   |      |          |      |      |          |      |
| Slice Turkey   | Make Unit     | 41   |      |          |      |      |          |      |
| Slice Ham      | Make Unit     | 41   |      |          |      |      |          |      |
| Chicken Salad  | Make Cooler   | 40   |      |          |      |      |          |      |
| Ham Salad      | Make Cooler   | 40   |      |          |      |      |          |      |
| Broccoli Salad | Walkin        | 40   |      |          |      |      |          |      |
| Ham            | Walkin        | 37   |      |          |      |      |          |      |
| Ambient        | Walkin        | 32   |      |          |      |      |          |      |
| Chlorine Sani  | Three-Comp    | 100  |      |          |      |      |          |      |
| Ambient        | Make Cooler   | 31   |      |          |      |      |          |      |
| Hot Water      | Three-Comp    | 120  |      |          |      |      |          |      |
| Ambient        | Retail Cooler | 36   |      |          |      |      |          |      |

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

*Last*  
 Kokkonos  
*Last*  
 Wilborn

*SE OKOUST*  


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*Ebonie Wilborn REHS*  


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

Verification Required Date: \_\_\_\_\_  
 Authorize final report to be received via Email: \_\_\_\_\_

## Comment Addendum to Inspection Report

**Establishment Name:** HONEYBAKED HAM COMPANY #105

**Establishment ID:** 3034010891

**Date:** 09/30/2022 **Time In:** 10:05 AM **Time Out:** 11:05 AM

### 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.

- 2 2-102.12 (A) Certified Food Protection Manager (C) No one present during the inspection currently has a valid food protection certification. The person in charge shall be a certified food protection manager who has shown proficiency of required information through passing a test that is part of an accredited program.
  
- 23 3-501.17 Ready-To-Eat Time / Temperature Control for Safety Food, Date Marking (Pf) Chicken salad and ham salad did not have a date marking either prep date or discard date. Date mark all TCS foods that are ready-to-eat once opened or prepared and held more than 24hrs. CDI Employee stated it was prepared yesterday and date was added to each container.

### Additional Comments

Keep an eye on rusted shelf brackets above three-comp sink.