

Food Establishment Inspection Report

Score: 96

Establishment Name: FOOD LION #1044 PRODUCE

Establishment ID: 3034020723

Location Address: 1499 NEW WALKERTOWN RD

City: WINSTON SALEM State: North Carolina

Zip: 27101 County: 34 Forsyth

Permittee: FOOD LION, LLC

Telephone: (336) 724-0395

☒ Inspection ☐ Re-Inspection

Wastewater System:

☒ Municipal/Community ☐ On-Site System

Water Supply:

☒ Municipal/Community ☐ On-Site Supply

Date: 03/24/2023 Status Code: A
Time In: 1:40 PM Time Out: 3:30 PM
Category#: II Produce Department and Salad
FDA Establishment Type: Bar

No. of Risk Factor/Intervention Violations: 1

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"/> OUT | Food in good condition, safe & unadulterated | 2 | 1 | 0 |
| 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"/> 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 |
| Potentially Hazardous Food Time/Temperature .2653 | | | | | |
| 18 | <input checked="" type="checkbox"/> IN OUT | Proper cooking time & temperatures | 3 | 1.5 | 0 |
| 19 | <input checked="" type="checkbox"/> IN OUT | 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"/> IN OUT | Proper hot holding temperatures | 3 | 1.5 | 0 |
| 22 | <input checked="" type="checkbox"/> IN OUT | Proper cold holding temperatures | 3 | 0 | X |
| 23 | <input checked="" type="checkbox"/> OUT/N/A/N/O | Proper date marking & disposition | 3 | 1.5 | 0 |
| 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"/> IN OUT | 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"/> OUT | Proper cooling methods used; adequate equipment for temperature control | 1 | 0.5 | 0 |
| 34 | <input checked="" type="checkbox"/> IN OUT | Plant food properly cooked for hot holding | 1 | 0.5 | 0 |
| 35 | <input checked="" type="checkbox"/> IN OUT | 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"/> OUT | Food properly labeled: original container | 2 | 1 | 0 |
| 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"/> 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 |
| 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"/> 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 |
| Utensils and Equipment .2653, .2654, .2663 | | | | | |
| 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"/> IN | Non-food contact surfaces clean | 1 | 0 | X |
| Physical Facilities .2654, .2655, .2656 | | | | | |
| 50 | <input checked="" type="checkbox"/> OUT | Hot & cold water available; adequate pressure | 1 | 0.5 | 0 |
| 51 | <input checked="" type="checkbox"/> IN | Plumbing installed; proper backflow devices | 2 | 1 | X |
| 52 | <input checked="" type="checkbox"/> OUT | Sewage & wastewater properly disposed | 2 | 1 | 0 |
| 53 | <input checked="" type="checkbox"/> IN | Toilet facilities: properly constructed, supplied & cleaned | X | 0.5 | 0 |
| 54 | <input checked="" type="checkbox"/> IN | Garbage & refuse properly disposed; facilities maintained | 1 | 0.5 | X |
| 55 | <input checked="" type="checkbox"/> IN | Physical facilities installed, maintained & clean | X | 0.5 | 0 |
| 56 | <input checked="" type="checkbox"/> OUT | Meets ventilation & lighting requirements; designated areas used | 1 | 0.5 | 0 |
| TOTAL DEDUCTIONS: | | | | | 4 |



Comment Addendum to Food Establishment Inspection Report

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 Wastewater System: ☒ Municipal/Community ☐ On-Site System
 Water Supply: ☒ Municipal/Community ☐ On-Site System
 Permittee: FOOD LION, LLC
 Telephone: (336) 724-0395

Establishment ID: 3034020723
☒ Inspection ☐ Re-Inspection Date: 03/24/2023
 Comment Addendum Attached? ☒ Status Code: A
 Water sample taken? ☐ Yes ☒ No Category #: II
 Email 1: s1044gm@delhaize.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 |
|----------------|------------------------------------|------|------|----------|------|------|----------|------|
| CFPM | Holly Tissue exam passed 3/9/23 | 0 | | | | | | |
| hot water | 3 comp sink (use Diversey) | 105 | | | | | | |
| quat sanitizer | 3 comp sink | 400 | | | | | | |
| watermelon | prep | 41 | | | | | | |
| honeydew | prep | 41 | | | | | | |
| watermelon | retail | 39 | | | | | | |
| cantaloupe | retail | 44 | | | | | | |
| melon mix | retail | 45 | | | | | | |
| watermelon | walk in cooler | 41 | | | | | | |

First
 Person in Charge (Print & Sign): Holly

Last
 Tissue

Holly

First
 Regulatory Authority (Print & Sign): Lauren

Last
 Pleasants

Lauren

REHS ID: 2809 - Pleasants, Lauren

Verification Required Date:

REHS Contact Phone Number: (336) 703-3144

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

Establishment Name: FOOD LION #1044 PRODUCE

Establishment ID: 3034020723

Date: 03/24/2023 **Time In:** 1:40 PM **Time Out:** 3:30 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.

- 22 3-501.16 (A) (2) and (B) Time / Temperature Control for Safety Food, Hot and Cold Holding (P) -REPEAT- In retail self serve cooler, sliced melon mix 41-45F, and cut cantaloupe 44F. TCS foods shall be maintained cold at 41F or below. Allow foods to cool to 41F or less before placing in a holding cooler. CDI- Education provided about overstacking the shelves with containers as the ones up front measured closer to 45F than the ones on the back of the shelves (39F). Containers placed in walk in cooler.
- 49 4-602.13 Nonfood Contact Surfaces (C)- REPEAT- Cleaning needed on retail shelves and vents. Cleaning needed on shelves in the walk in cooler and on fans in the prep room. Nonfood-contact surfaces shall be free of dust, dirt, food residue, and debris.
- 51 5-205.15 (B) Maintain a plumbing system in good repair (C)- First toilet in the public men's restroom is leaking at the flusher onto the floor and there is standing water. Repair the pipe and maintain in good repair.
- 53 6-501.18 Cleaning of Plumbing Fixtures (C) - REPEAT- Cleaning needed on all surfaces of the urinals and toilets, and in handwashing sinks in the men's public and employee restrooms. The handwashing sink and 2 compartment prep sink need cleaning in the produce prep room. Plumbing fixtures such as handwashing sinks, toilets, and urinals shall be cleaned as often as necessary to keep them clean.
- 54 5-501.113 Covering Receptacles (C) - Top lids on dumpster were open during inspection. Keep dumpster and other outside waste handling containers for refuse, recyclables, and returnables covered with tight-fitting lids or doors.
- 55 6-501.12 Cleaning, Frequency and Restrictions (C)- REPEAT- Floor cleaning is needed in walk in cooler around floor perimeter and under racks, and wall cleaning is needed under the fan box. Floor and wall cleaning needed under the prep and 3 compartment sinks. Floor drains need cleaning. Floor and wall cleaning needed in the men's employee restroom. Physical facilities shall be cleaned as often as necessary to keep them clean.
- 6-501.11 Repairing - Premises, Structures, Attachments, and Fixtures - Methods (C) - Caulk along the coved based to the left of the handwashing sink. Physical facilities shall be maintained in good repair.