

Food Establishment Inspection Report

Score: 90

Establishment Name: GENGHIS GRILL
 Location Address: 3298 SILAS CREEK PKWY
 City: WINSTON SALEM State: NC
 Zip: 27103 County: 34 Forsyth
 Permittee: CHALAK RESTAURANTS WINSTON SALEM, LLC
 Telephone: (336) 722-2154 / (804) 350-9712

Establishment ID: 3034012228
 Inspection Re-Inspection
 Date: 02/01/2016 Status Code: A - Open For Business
 Time In: 2:30 PM Time Out: 6:30 PM
 Category#: III
 FDA Establishment Type: Full-Service Restaurant

Wastewater System: Municipal/Community On-Site System
 Water Supply: Municipal/Community On-Site Supply

No. of Risk Factor/Intervention Violations: 3
 No. of Repeat Risk Factor/Intervention Violations: 2

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

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"/>	<input type="checkbox"/>	Pasteurized eggs used where required	1	0.5	0	
29	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Water and ice from approved source	2	1	0	
30	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Variance obtained for specialized processing methods	1	0.5	0	
Food Temperature Control .2653, .2654									
31	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper cooling methods used; adequate equipment for temperature control	1	X	0	X
32	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Plant food properly cooked for hot holding	1	0.5	0	
33	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Approved thawing methods used	1	0.5	0	
34	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Thermometers provided and accurate	1	0.5	0	
Food Identification .2653									
35	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food properly labeled: original container	2	1	0	
Prevention of Food Contamination .2652, .2653, .2654, .2656, .2657									
36	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Insects and rodents not present; no unauthorized animals	2	1	0	
37	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Contamination prevented during food preparation, storage and display	X	1	0	X
38	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Personal cleanliness	X	0.5	0	X
39	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Wiping cloths: properly used and stored	1	0.5	0	
40	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Washing fruits and vegetables	1	0.5	0	
Proper Use of Utensils .2653, .2654									
41	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	In-use utensils: properly stored	1	0.5	0	
42	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Utensils, equipment and linens: properly stored, dried and handled	1	0.5	X	
43	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Single-use and single-service articles; properly stored and used	1	0.5	0	
44	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Gloves used properly	1	0.5	0	
Utensils and Equipment .2653, .2654, .2663									
45	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Equipment, food and non-food-contact surfaces approved; cleanable, properly designed, constructed and used	X	1	0	X
46	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Warewashing facilities: installed, maintained and used; test strips	1	.5	0	
47	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Non-food-contact surfaces clean	1	X	0	
Physical Facilities .2654, .2655, .2656									
48	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Hot and cold water available; adequate pressure	2	1	0	
49	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Plumbing installed; proper backflow devices	2	1	X	
50	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Sewage and waste water properly disposed	2	1	0	
51	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Toilet facilities: properly constructed, supplied and cleaned	1	.5	0	
52	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Garbage and refuse properly disposed; facilities maintained	1	.5	0	
53	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Physical facilities installed, maintained and clean	X	.5	0	X
54	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Meets ventilation and lighting requirements; designated areas used	1	X	0	X
TOTAL DEDUCTIONS:						10.0			

Comment Addendum to Food Establishment Report

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 Inspection Re-Inspection **Date:** 02/01/2016
Comment Addendum Attached ? **Status Code:** A
Category#: III
Email 1: bmcginnes@genghisgrill.com
Email 2: _____
Email 3: _____

Temperature Observations

Item/Location	Temp	Item/Location	Temp	Item/Location	Temp
Serv Safe/ Ashley Williams 4/17/18	0.0	spinach/ buffet line	45.0		
rice/ rice warmer	160.0	tofu/ buffet line	42.0		
rice/ rice warmer	180.0	chicken/ buffet line	38.0		
liquid egg/ ice bath	54.0	chicken/ walk in cooler	40.0		
liquid egg/ ice bath	51.0	noodles/ walk in cooler	70.0		
liquid egg/ ice bath	48.0				
tomatoes/ buffet line	50.0				
tofu/ buffet line	42.0				

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.

Item Number	Observations and Corrective Actions
6	2-301.12 Cleaning Procedure & 2-301.14 When to Wash - P - 0 points - Employee observed recontaminate hands after handwashing by operating faucet handles with bare hands. After recontaminating hands, employees must wash hands. To prevent recontamination of hands, use a clean barrier such as a papertowel to turn faucet handles off. CDI - Employee rewashed hands properly.
8	5-205.11 Using a Handwashing Sink-Operation and Maintenance - PF - Handwash sink near warewashing machine was blocked by large food storage containers. Handwashing sink near prep table blocked by trash can. Do not block access to handwash sink. CDI - Objects were removed.
20	3-501.16 (A)(2) and (B) Potentially Hazardous Food (Time/Temperature Control for Safety Food), Hot and Cold Holding - P - Repeat: Five containers of liquid egg in ice bath measured 48F-54F. Foods in cold holding must measure 45F or less at all times. CDI - PIC voluntarily discarded two containers of liquid egg. Other containers were placed in ice bath and sent to walk in cooler to chill.
31	3-501.15 Cooling Methods - PF - Noodles and pasta in walk in cooler observed cooling in closed plastic bags. While cooling, bags must be opened in order to facilitate heat transfer. Recommend storing pasta noodles in on sheet pan and leaving bags slightly open and cool in portions less than 4 inches thick. CDI - PIC placed noodles in food containers in thin portion.
37	3-306.11 Food Display-Preventing Contamination by Consumers - P - Repeat: Food guard necessary at grill's bar to protect containers storing food (storing chow mein noodles, sesame seeds, coconut, and peanuts) for consumer self service. Jars with lids have replaced Saint Jamar Unit. Jars do not effectively protect food from contamination. Submit spec sheet to Carla Day at (336) 703-3144 or daycc@forsyth.cc.
38	2-402.11 Effectiveness-Hair Restraints - C - Repeat: Employees with beard observed preparing food without wearing beard restraint. Employee working with food and clean equipment without wearing hair restraint. Food employees shall wear hair restraints (including hair and beard restraints) to keep hair from contacting exposed food, clean equipment, utensils, linens, and unwrapped single service articles.
42	4-903.11 (A), (B) and (D) Equipment, Utensils, Linens and Single-Service and Single-Use Articles-Storing - C - 0 points - Clean bowls at wait station and clean plates at grill stored food contact side facing up. Cleaned equipment and utensils must be stored covered or inverted. / 4-901.11 Equipment and Utensils, Air-Drying Required - C - Ramikens and bowls stacked while still wet. Clean equipment and utensils must be air dried before storing.



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Observations and Corrective Actions

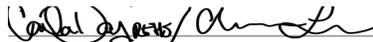
Item Number	Violations cited in this report must be corrected within the time frames below, or as stated in sections 8-405.11 of the food code.
Item Number	Observations and Corrective Actions
45	4-501.11 Good Repair and Proper Adjustment-Equipment - C - Equipment repair/replacement necessary on: finish on buffet lines is severely worn and the wood is now cracking (repeat), trim on swinging doors is chipped (repeat), some edges on buffet lines are rough or not finished (repeat), metal shelving unit used to store cooking sticks is in poor repair (repeat), handles of 2 rice cookers underneath prep table are missing (repeat), peeling splash guard trim on handwash sink next to prep table (repeat), replace broken storage containers on prep line (also, sterilite containers are not approved for storage of food. Obtain storage containers approved for commercial use), broken cambro lids and broken toilet tank cover in men's restroom. / 4-402.11 Fixed Equipment, Spacing or Sealing-Installation - C - Splash guard has been installed in between trays and handwash sink and buffet line; however, it has not been sealed. Specification sheet has not been submitted. Submit specification sheet to Carla Day at daycc@forsyth.cc or call (336) 703-3144. Install splash guard in between clean dish storage shelf and soiled dishes or provide 18 inches of separation at all times. Carla Day at daycc@forsyth.cc or call (336) 703-3144.
47	4-601.11 (B) and (C) Equipment, Food-Contact Surfaces, Nonfood-Contact Surfaces, and Utensils - C & 4-602.13 Nonfood Contact Surfaces - C - Equipment cleaning necessary: all shelving in walk in cooler, shelving unit for cooking stick storage, and shelving for clean dish storage. Presently, there are dried food particles/debris on them.
49	5-205.15 System Maintained in Good Repair - P - 0 points - Leak underneath bar's 3 compartment sink has been repaired by using duct tape. Duct tape is not an approved repair. Properly repair leak.
53	6-201.11 Floors, Walls and Ceilings-Cleanability - C - Repeat - Floors: Repeat: Grout worn, tiles peeling away from wall, and broken tiles present throughout kitchen. Repair. Floor damage is severe and is not allowing water to drain into floor drains properly. / 6-201.13 Floor and WallJunctures, Coved, and Enclosed or Sealed - C - Floors in restrooms are not coved. Baseboards shall be coved. Repair. Baseboard along buffet lines is torn. Repair. Walls: Wall cleaning necessary above and under dish machine and 3 compartment sink drainboards./ Handwash sinks are loose and must be tightened to walls and sealed. Caulk should be smooth and without bumps or indentions. / FRP at can wash has holes. FRP trim throughout prep/kitchen area is broken or missing. Repair. Supplies for establishment are stored in attic (access is in ceiling near restrooms). This area is not approved for use because it does not meet floor, wall, and ceiling requirements. However, staff has started to remove items from this area.
54	6-303.11 Intensity-Lighting - C - Repeat: Lighting at grill measures 18-38 foot candles. Increase lighting to a minimum of 50 foot candles. / Lighting at buffet measures 10-18 foot candles. Increase lighting to a minimum of 20 foot candles. (Lighting must be bright enough for times of cleaning.)

Person in Charge (Print & Sign): Ashley Williams

Regulatory Authority (Print & Sign): Carla Day REHS Andrew Lee REHSI

REHS ID: 2405 Day, Carla

REHS Contact Phone Number: (336)703-3144

Verification Required Date: _____

