

Food Establishment Inspection Report

Score: 98

Establishment Name: RECREATION BILLIARDS

Establishment ID: 3034011907

Location Address: 412 W 4TH STREET

Inspection Re-Inspection

City: WINSTON SALEM

State: NC

Date: 08 / 25 / 2014 Status Code: A

Zip: 27101

County: 34 Forsyth

Time In: 04 : 45 ^{am} _{pm} Time Out: 06 : 00 ^{am} _{pm}

Permittee: RECREATION BILLIARDS, INC.

Total Time: 1 hr 15 minutes

Telephone: (336) 725-6006

Category #: 1

Wastewater System: Municipal/Community On-Site System

FDA Establishment Type: _____

Water Supply: Municipal/Community On-Site Supply

No. of Risk Factor/Intervention Violations: 3

No. of Repeat Risk Factor/Intervention Violations: _____

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 type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	PIC Present; Demonstration-Certification by accredited program and perform duties			2	0		
Employee Health .2652										
2	<input type="checkbox"/>	<input checked="" type="checkbox"/>		Management, employees knowledge; responsibilities & reporting			3	1.5	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
3	<input checked="" type="checkbox"/>	<input type="checkbox"/>		Proper use of reporting, restriction & exclusion			3	1.5	0	
Good Hygienic Practices .2652, .2653										
4	<input checked="" type="checkbox"/>	<input type="checkbox"/>		Proper eating, tasting, drinking, or tobacco use			2	1	0	
5	<input checked="" type="checkbox"/>	<input type="checkbox"/>		No discharge from eyes, nose or mouth			1	0.5	0	
Preventing Contamination by Hands .2652, .2653, .2655, .2656										
6	<input checked="" type="checkbox"/>	<input type="checkbox"/>		Hands clean & properly washed			4	2	0	
7	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	No bare hand contact with RTE foods or pre-approved alternate procedure properly followed			3	1.5	0	
8	<input type="checkbox"/>	<input checked="" type="checkbox"/>		Handwashing sinks supplied & accessible			2	<input checked="" type="checkbox"/>	0	
Approved Source .2653, .2655										
9	<input checked="" type="checkbox"/>	<input type="checkbox"/>		Food obtained from approved source			2	1	0	
10	<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"/>		Food in good condition, safe & unadulterated			2	1	0	
12	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" 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"/>	Food separated & protected			3	1.5	0	
14	<input checked="" type="checkbox"/>	<input type="checkbox"/>		Food-contact surfaces: cleaned & sanitized			3	1.5	0	
15	<input checked="" type="checkbox"/>	<input type="checkbox"/>		Proper disposition of returned, previously served, reconditioned, & unsafe food			2	1	0	
Potentially Hazardous Food Time/Temperature .2653										
16	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Proper cooking time & temperatures			3	1.5	0	
17	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Proper reheating procedures for hot holding			3	1.5	0	
18	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Proper cooling time & temperatures			3	1.5	0	
19	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Proper hot holding temperatures			3	1.5	0	
20	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper cold holding temperatures			3	1.5	0	
21	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Proper date marking & disposition			3	1.5	0	
22	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Time as a public health control: procedures & records			2	1	0	
Consumer Advisory .2653										
23	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Consumer advisory provided for raw or undercooked foods			1	0.5	0	
Highly Susceptible Populations .2653										
24	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" 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"/>	Food additives: approved & properly used			1	0.5	0	
26	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Toxic substances properly identified stored, & used			2	1	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Conformance with Approved Procedures .2653, .2654, .2658										
27	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Compliance with variance, specialized process, reduced oxygen packing 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.										
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"/>	Pasteurized eggs used where required			1	0.5	0	
29	<input checked="" 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"/>	Variance obtained for specialized processing methods			1	0.5	0	
Food Temperature Control .2653, .2654										
31	<input checked="" type="checkbox"/>	<input type="checkbox"/>		Proper cooling methods used; adequate equipment for temperature control			1	0.5	0	
32	<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 checked="" type="checkbox"/>	Approved thawing methods used			1	0.5	0	
34	<input checked="" type="checkbox"/>	<input type="checkbox"/>		Thermometers provided & accurate			1	0.5	0	
Food Identification .2653										
35	<input checked="" 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"/>		Insects & rodents not present; no unauthorized animals			2	1	0	
37	<input checked="" type="checkbox"/>	<input type="checkbox"/>		Contamination prevented during food preparation, storage & display			2	1	0	
38	<input checked="" type="checkbox"/>	<input type="checkbox"/>		Personal cleanliness			1	0.5	0	
39	<input checked="" type="checkbox"/>	<input type="checkbox"/>		Wiping cloths: properly used & stored			1	0.5	0	
40	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Washing fruits & vegetables			1	0.5	0	
Proper Use of Utensils .2653, .2654										
41	<input type="checkbox"/>	<input checked="" type="checkbox"/>		In-use utensils: properly stored			1	<input checked="" type="checkbox"/>	0	
42	<input checked="" type="checkbox"/>	<input type="checkbox"/>		Utensils, equipment & linens: properly stored, dried & handled			1	0.5	0	
43	<input checked="" type="checkbox"/>	<input type="checkbox"/>		Single-use & single-service articles: properly stored & used			1	0.5	0	
44	<input checked="" type="checkbox"/>	<input type="checkbox"/>		Gloves used properly			1	0.5	0	
Utensils and Equipment .2653, .2654, .2663										
45	<input checked="" type="checkbox"/>	<input type="checkbox"/>		Equipment, food & non-food contact surfaces approved, cleanable, properly designed, constructed, & used			2	1	0	
46	<input type="checkbox"/>	<input checked="" type="checkbox"/>		Warewashing facilities: installed, maintained, & used; test strips			1	<input checked="" type="checkbox"/>	0	
47	<input type="checkbox"/>	<input checked="" type="checkbox"/>		Non-food contact surfaces clean			1	0.5	<input checked="" type="checkbox"/>	
Physical Facilities .2654, .2655, .2656										
48	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Hot & cold water available; adequate pressure			2	1	0	
49	<input checked="" type="checkbox"/>	<input type="checkbox"/>		Plumbing installed; proper backflow devices			2	1	0	
50	<input checked="" type="checkbox"/>	<input type="checkbox"/>		Sewage & waste water properly disposed			2	1	0	
51	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Toilet facilities: properly constructed, supplied & cleaned			1	0.5	<input checked="" type="checkbox"/>	
52	<input checked="" type="checkbox"/>	<input type="checkbox"/>		Garbage & refuse properly disposed; facilities maintained			1	0.5	0	
53	<input type="checkbox"/>	<input checked="" type="checkbox"/>		Physical facilities installed, maintained & clean			1	0.5	<input checked="" type="checkbox"/>	
54	<input checked="" type="checkbox"/>	<input type="checkbox"/>		Meets ventilation & lighting requirements; designated areas used			1	0.5	0	
Total Deductions:							2			



North Carolina Department of Health & Human Services • Division of Public Health • Environmental Health Section • Food Protection Program
DHHS is an equal opportunity employer.



Comment Addendum to Food Establishment Inspection Report

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County: 34 Forsyth **Zip:** 27101
Wastewater System: Municipal/Community On-Site System
Water Supply: Municipal/Community On-Site System
Permittee: RECREATION BILLIARDS, INC.
Telephone: (336) 725-6006

Establishment ID: 3034011907
 Inspection Re-Inspection **Date:** 08/25/2014
Comment Addendum Attached? **Status Code:** A
Category #: 1
Email 1: tunked@yahoo.com
Email 2:
Email 3:

Temperature Observations

Item	Location	Temp	Item	Location	Temp	Item	Location	Temp
Air	Reach in	38						
Air temp	Reach in	39						

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 2-201.11 (A), (B), (C), & (E) Responsibility of Permit Holder, Person in Charge, and Conditional Employees - P- GC - PIC shall inform employees of responsibilities for reporting to management when showing the 5 main symptoms of being ill or be diagnosed with the 5 main illnesses associated with foodborne illnesses. PIC received a state employee health policy. ✓ Spell
- 8 6-301.11 Handwashing Cleanser, Availability - PF - Soap was not available at the handwashing sink in the downstairs bar. Each handwashing sink shall be provided with a supply of hand cleaning liquid. Ensure that soap is available at all times at all handwashing sinks. // 6-301.12 Hand Drying Provision - PF - Handwashing sink at both bars do not have paper towels in immediate location. Each handwashing sink shall be provided with individual disposable paper towels. Install paper towel dispenser at handwashing sink to ensure all employees can dry hands properly. // 6-301.14 Handwashing Signage - C - Handwashing signs missing in restrooms and at bar handwashing sinks. A sign or poster shall be posted that notifies employees to wash hands at all handwashing sinks.
- 26 7-201.11 Separation-Storage - P - GC -Windex stored near single service items. Opened quat sanitizer powder packets stored near clean utensils. Store all poisonous or toxic items away from food, clean equipment, single service items, and utensils. CDI- Items were removed to ensure utensils and single service items are not contaminated.

Person in Charge (Print & Sign): Ben *First* Broderson *Last*

Regulatory Authority (Print & Sign): Wendy *First* Grijalva *Last*




REHS ID: 2442 - Grijalva, Wendy

Verification Required Date: ___ / ___ / ___

REHS Contact Phone Number: (336) 703 - 3157



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- 41 3-304.12 In-Use Utensils, Between-Use Storage - C - Ice scoop for ice machine is stored on dusty surface on top of machine. Ice scoops shall be stored on a clean protected location at all times. Store ice scoop in holder or container that protects scoop from contamination of dust or soil.
- 46 4-302.14 Sanitizing Solutions, Testing Devices - PF - Establishment uses quat sanitizer for the 3 compartment sink and chlorine for spray bottles. Establishment has chlorine test strips but does not have quat test strips. Quat test strips are required to ensure that the sanitizing solution reads at least 200ppm according to manufactures instructions. Maintain test strips in establishment. Test sanitizing solution as often as necessary.
- 47 4-602.13 Nonfood Contact Surfaces - C - GC - Cleaning needed on exposed plumbing of 3 compartment sinks. Clean as often as necessary.
- 51 5-501.17 Toilet Room Receptacle, Covered - C - GC -Women's restroom does not have a covered receptacle. Restrooms used by women shall have a covered receptacle for sanitary napkins.
- 53 6-201.11 Floors, Walls and Ceilings-Cleanability - C - GC - Walls: Recaulking needed on the handwashing sink of the men's restroom. Cleaning needed at the wall next to reach in cooler in the downstairs bar. Ceiling: Replace damaged ceiling tiles from previous water leaks.



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