

Food Establishment Inspection Report

Score: 96.5

Establishment Name: SALEM KITCHEN

Establishment ID: 3034020298

Location Address: 50 E MILLER ST

☒ Inspection ☐ Re-Inspection

City: WINSTON SALEM

State: NC

Date: 02 / 18 / 2015 Status Code: A

Zip: 27104

County: 34 Forsyth

Time In: 10 : 00 ^{am} _{pm} Time Out: 02 : 30 ^{am} _{pm}

Permittee: ANNE GEIS CATERING, INC.

Total Time: 4 hrs 30 minutes

Telephone: (336) 722-1155

Category #: IV

Wastewater System: ☒ Municipal/Community ☐ On-Site System

FDA Establishment Type: Full-Service Restaurant

Water Supply: ☒ Municipal/Community ☐ On-Site Supply

No. of Risk Factor/Intervention Violations: 1

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 checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | PIC Present; Demonstration-Certification by accredited program and perform duties | | | | 2 | 0 | <input type="checkbox"/> | <input type="checkbox"/> |
| Employee Health .2652 | | | | | | | | | | | |
| 2 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Management, employees knowledge; responsibilities & reporting | | | | 3 | 15 | 0 | <input type="checkbox"/> |
| 3 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Proper use of reporting, restriction & exclusion | | | | 3 | 15 | 0 | <input type="checkbox"/> |
| Good Hygienic Practices .2652, .2653 | | | | | | | | | | | |
| 4 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Proper eating, tasting, drinking, or tobacco use | | | | 2 | 1 | 0 | <input type="checkbox"/> |
| 5 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | No discharge from eyes, nose or mouth | | | | 1 | 05 | 0 | <input type="checkbox"/> |
| Preventing Contamination by Hands .2652, .2653, .2655, .2656 | | | | | | | | | | | |
| 6 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Hands clean & properly washed | | | | 4 | 2 | 0 | <input type="checkbox"/> |
| 7 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | No bare hand contact with RTE foods or pre-approved alternate procedure properly followed | | | | 3 | 15 | 0 | <input type="checkbox"/> |
| 8 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Handwashing sinks supplied & accessible | | | | 2 | 1 | 0 | <input type="checkbox"/> |
| Approved Source .2653, .2655 | | | | | | | | | | | |
| 9 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Food obtained from approved source | | | | 2 | 1 | 0 | <input type="checkbox"/> |
| 10 | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Food received at proper temperature | | | | 2 | 1 | 0 | <input type="checkbox"/> |
| 11 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Food in good condition, safe & unadulterated | | | | 2 | 1 | 0 | <input type="checkbox"/> |
| 12 | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Required records available: shellstock tags, parasite destruction | | | | 2 | 1 | 0 | <input type="checkbox"/> |
| Protection from Contamination .2653, .2654 | | | | | | | | | | | |
| 13 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Food separated & protected | | | | 3 | 15 | 0 | <input type="checkbox"/> |
| 14 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Food-contact surfaces: cleaned & sanitized | | | | 3 | 15 | 0 | <input type="checkbox"/> |
| 15 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Proper disposition of returned, previously served, reconditioned, & unsafe food | | | | 2 | 1 | 0 | <input type="checkbox"/> |
| Potentially Hazardous Food Time/Temperature .2653 | | | | | | | | | | | |
| 16 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Proper cooking time & temperatures | | | | 3 | 15 | 0 | <input type="checkbox"/> |
| 17 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Proper reheating procedures for hot holding | | | | 3 | 15 | 0 | <input type="checkbox"/> |
| 18 | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | Proper cooling time & temperatures | | | | 3 | <input checked="" type="checkbox"/> | 0 | <input checked="" type="checkbox"/> |
| 19 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Proper hot holding temperatures | | | | 3 | 15 | 0 | <input type="checkbox"/> |
| 20 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Proper cold holding temperatures | | | | 3 | 15 | 0 | <input type="checkbox"/> |
| 21 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Proper date marking & disposition | | | | 3 | 15 | 0 | <input type="checkbox"/> |
| 22 | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Time as a public health control: procedures & records | | | | 2 | 1 | 0 | <input type="checkbox"/> |
| Consumer Advisory .2653 | | | | | | | | | | | |
| 23 | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Consumer advisory provided for raw or undercooked foods | | | | 1 | 05 | 0 | <input type="checkbox"/> |
| Highly Susceptible Populations .2653 | | | | | | | | | | | |
| 24 | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Pasteurized foods used; prohibited foods not offered | | | | 3 | 15 | 0 | <input type="checkbox"/> |
| Chemical .2653, .2657 | | | | | | | | | | | |
| 25 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Food additives: approved & properly used | | | | 1 | 05 | 0 | <input type="checkbox"/> |
| 26 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Toxic substances properly identified stored, & used | | | | 2 | 1 | 0 | <input 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 | <input type="checkbox"/> |

| 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 | 05 | 0 | <input type="checkbox"/> |
| 29 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Water and ice from approved source | | | | 2 | 1 | 0 | <input type="checkbox"/> |
| 30 | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Variance obtained for specialized processing methods | | | | 1 | 05 | 0 | <input type="checkbox"/> |
| Food Temperature Control .2653, .2654 | | | | | | | | | | | |
| 31 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Proper cooling methods used; adequate equipment for temperature control | | | | 1 | 05 | 0 | <input type="checkbox"/> |
| 32 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Plant food properly cooked for hot holding | | | | 1 | 05 | 0 | <input type="checkbox"/> |
| 33 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Approved thawing methods used | | | | 1 | 05 | 0 | <input type="checkbox"/> |
| 34 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Thermometers provided & accurate | | | | 1 | 05 | 0 | <input type="checkbox"/> |
| Food Identification .2653 | | | | | | | | | | | |
| 35 | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | Food properly labeled: original container | | | | 2 | 1 | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Prevention of Food Contamination .2652, .2653, .2654, .2656, .2657 | | | | | | | | | | | |
| 36 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Insects & rodents not present; no unauthorized animals | | | | 2 | 1 | 0 | <input type="checkbox"/> |
| 37 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Contamination prevented during food preparation, storage & display | | | | 2 | 1 | 0 | <input type="checkbox"/> |
| 38 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Personal cleanliness | | | | 1 | 05 | 0 | <input type="checkbox"/> |
| 39 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Wiping cloths: properly used & stored | | | | 1 | 05 | 0 | <input type="checkbox"/> |
| 40 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Washing fruits & vegetables | | | | 1 | 05 | 0 | <input type="checkbox"/> |
| Proper Use of Utensils .2653, .2654 | | | | | | | | | | | |
| 41 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | In-use utensils: properly stored | | | | 1 | 05 | 0 | <input type="checkbox"/> |
| 42 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Utensils, equipment & linens: properly stored, dried & handled | | | | 1 | 05 | 0 | <input type="checkbox"/> |
| 43 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Single-use & single-service articles: properly stored & used | | | | 1 | 05 | 0 | <input type="checkbox"/> |
| 44 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Gloves used properly | | | | 1 | 05 | 0 | <input type="checkbox"/> |
| Utensils and Equipment .2653, .2654, .2663 | | | | | | | | | | | |
| 45 | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | Equipment, food & non-food contact surfaces approved, cleanable, properly designed, constructed, & used | | | | 2 | <input checked="" type="checkbox"/> | 0 | <input type="checkbox"/> |
| 46 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Warewashing facilities: installed, maintained, & used; test strips | | | | 1 | 05 | 0 | <input type="checkbox"/> |
| 47 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Non-food contact surfaces clean | | | | 1 | 05 | 0 | <input 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 | <input type="checkbox"/> |
| 49 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Plumbing installed; proper backflow devices | | | | 2 | 1 | 0 | <input type="checkbox"/> |
| 50 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Sewage & waste water properly disposed | | | | 2 | 1 | 0 | <input type="checkbox"/> |
| 51 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Toilet facilities: properly constructed, supplied & cleaned | | | | 1 | 05 | 0 | <input type="checkbox"/> |
| 52 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Garbage & refuse properly disposed; facilities maintained | | | | 1 | 05 | 0 | <input type="checkbox"/> |
| 53 | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | Physical facilities installed, maintained & clean | | | | 1 | <input checked="" type="checkbox"/> | 0 | <input type="checkbox"/> |
| 54 | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | Meets ventilation & lighting requirements; designated areas used | | | | 1 | <input checked="" type="checkbox"/> | 0 | <input type="checkbox"/> |
| Total Deductions: | | | | | | | | | | 3.5 | |

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Comment Addendum to Food Establishment Inspection Report

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Establishment ID: 3034020298

Location Address: 50 E MILLER ST

☒ Inspection ☐ Re-Inspection Date: 02/18/2015

City: WINSTON SALEM State: NC

Comment Addendum Attached? ☐ Status Code: A

County: 34 Forsyth Zip: 27104

Category #: IV

Wastewater System: ☒ Municipal/Community ☐ On-Site System

Water Supply: ☒ Municipal/Community ☐ On-Site System

Permittee: ANNE GEIS CATERING, INC.

Email 1:

Email 2:

Telephone: (336) 722-1155

Email 3:

Temperature Observations

| Item | Location | Temp | Item | Location | Temp | Item | Location | Temp |
|----------------|----------------------------|------|----------|------------------------|------|------|----------|------|
| hot water | three compartment sink | 151 | air temp | sandwich make unit | 41 | | | |
| wash wash | three compartment sink | 126 | air temp | four door refrigerator | 36 | | | |
| quat sanitizer | three compartment sink | 200 | ServSafe | 9/18/2018 | 0 | | | |
| air temp | front display cases | 41 | | | | | | |
| air temp | front freezer display case | 0 | | | | | | |
| ground beef | final cook temp | 165 | | | | | | |
| meat loaf | walk-in cooler | 42 | | | | | | |
| tea | walk-in cooler | 42 | | | | | | |

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.

- 18 3-501.14 Cooling - P
A speed rack with cooked chicken pies were cooling at room temperature. 88-120F was measured.
All "PHF" must be rapidly cooled from 135F to 70F within 2 HRS, and 70F to 41F within 4 HRS.
CDI - Speed rack was moved into the walk-in cooler.

Do not to wrap containers of cooling food tightly with Saran wrap and Aluminum Foil. Turn up a corner to let the cooked food to vent.
- 35 3-602.11 Food Labels - PF (Opts)
Labeling of containers instead of lids is needed in bakery area.
- 45 4-501.11 Good Repair and Proper Adjustment-Equipment - C
The Finish on the shelving unit next to the three compartment sink, outside of front display cases, and three mixers is chipping and wearing off. Repair
Cracked inserts protectors located on the insides of the sandwich make unit need to be repaired.
Small jell-o molds are in disrepair. Replace.



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

Regulatory Authority (Print & Sign): *First* *Last*
Craig Bethel

MC Dagenhart
Craig Bethel REHS

REHS ID: 1766 - Bethel, Craig

Verification Required Date: / /

REHS Contact Phone Number: (336) 703 - 3143



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- 53 6-501.12 Cleaning, Frequency and Restrictions - C
Debris build-up in corners of walk-ins that need to be cleaned.
Coved baseboards is coming away from the wall in the Produce walk-in cooler. Repair.
- 54 6-303.11 Intensity-Lighting - C
Low lighting was measured in the cook line and sandwich make line area. 18-65 f/c was measured.
50 f/c is required at all prep and cooking surfaces.



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✓
Spell



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