

# Food Establishment Inspection Report

Score: 89

Establishment Name: CHINA EXPRESS

Establishment ID: 3034012363

Location Address: 3055 WAUGHTOWN STREET

☒ Inspection ☐ Re-Inspection

City: WINSTON SALEM

State: NC

Date: 02 / 20 / 2015 Status Code: U

Zip: 27107

County: 34 Forsyth

Time In: 01 : 40 <sup>am</sup><sub>pm</sub> Time Out: 05 : 30 <sup>am</sup><sub>pm</sub>

Permittee: GAOS BROTHER INC.

Total Time: 3 hrs 50 minutes

Telephone: (336) 650-0068

Category #: IV

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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input 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"/>	<input type="checkbox"/>	Management, employees knowledge; responsibilities & reporting				3	<input checked="" type="checkbox"/>	0	
3	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper use of reporting, restriction & exclusion				3	15	0	
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	
5	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	No discharge from eyes, nose or mouth				1	03	0	
Preventing Contamination by Hands .2652, .2653, .2655, .2656											
6	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Hands clean & properly washed				4	<input checked="" type="checkbox"/>	0	
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	
8	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Handwashing sinks supplied & accessible				2	1	0	
Approved Source .2653, .2655											
9	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food obtained from approved source				2	1	0	
10	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food received at proper temperature				2	1	0	
11	<input checked="" type="checkbox"/>	<input 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	15	0	
14	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food-contact surfaces: cleaned & sanitized				3	15	0	
15	<input checked="" type="checkbox"/>	<input 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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper cooking time & temperatures				3	15	0	
17	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper reheating procedures for hot holding				3	15	0	
18	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper cooling time & temperatures				3	15	0	
19	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper hot holding temperatures				3	15	0	
20	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper cold holding temperatures				3	15	0	
21	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Proper date marking & disposition				3	<input checked="" type="checkbox"/>	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	03	0	
Highly Susceptible Populations .2653											
24	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Pasteurized foods used; prohibited foods not offered				3	15	0	
Chemical .2653, .2657											
25	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food additives: approved & properly used				1	03	0	
26	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Toxic substances properly identified stored, & used				2	1	0	
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	05	0	
29	<input checked="" 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"/>	Variance obtained for specialized processing methods				1	05	0	
Food Temperature Control .2653, .2654											
31	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Proper cooling methods used; adequate equipment for temperature control				1	<input checked="" type="checkbox"/>	0	
32	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Plant food properly cooked for hot holding				1	05	0	
33	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Approved thawing methods used				1	<input checked="" type="checkbox"/>	0	
34	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Thermometers provided & accurate				1	05	0	
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"/>	
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	
37	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Contamination prevented during food preparation, storage & display				2	<input checked="" type="checkbox"/>	0	
38	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Personal cleanliness				1	05	0	
39	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Wiping cloths: properly used & stored				1	05	0	
40	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Washing fruits & vegetables				1	05	0	
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	
42	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Utensils, equipment & linens: properly stored, dried & handled				1	<input checked="" type="checkbox"/>	0	
43	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Single-use & single-service articles: properly stored & used				1	05	0	
44	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Gloves used properly				1	05	0	
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	
46	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Warewashing facilities: installed, maintained, & used; test strips				1	05	0	
47	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Non-food contact surfaces clean				1	<input checked="" type="checkbox"/>	0	
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 type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Plumbing installed; proper backflow devices				2	<input checked="" type="checkbox"/>	0	
50	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Sewage & waste water properly disposed				2	1	0	
51	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Toilet facilities: properly constructed, supplied & cleaned				1	05	0	
52	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Garbage & refuse properly disposed; facilities maintained				1	05	0	
53	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Physical facilities installed, maintained & clean				1	<input checked="" type="checkbox"/>	0	
54	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Meets ventilation & lighting requirements; designated areas used				1	<input checked="" type="checkbox"/>	0	
Total Deductions:										11	

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Off

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Location Address: 3055 WAUGHTOWN STREET

☒ Inspection ☐ Re-Inspection Date: 02/20/2015

City: WINSTON SALEM State: NC

Comment Addendum Attached? ☐ Status Code: U

County: 34 Forsyth Zip: 27107

Category #: IV

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

Email 1: yunhuaigao666@gmail.com

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

Email 2:

Permittee: GAOS BROTHER INC.

Email 3:

Telephone: (336) 650-0068

## Temperature Observations

Item	Location	Temp	Item	Location	Temp	Item	Location	Temp
hot water	three compartment sink	143	chicken	walk-in cooler	41			
beef	make unit	41	beef	walk-in cooler	40			
chicken	make unit	40	sugar beef	walk-in cooler	40			
shrimp	make unit	40	hot soup	hot holding	175			
shrimp	make unit	39	ServSafe	Yunhuai Gao	0			
chopped beef	make unit	37						
air temp	make unit	36						
air temp	refrigeration with prep	36						

## 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  
No employee health policy is in place.  
Recommend having all employee's understand and have a signed copy be kept on file on the premises.
- 6 2-301.14 When to Wash - P  
Observed an employee take prepared food to the front, take money, and came back to the cook line to box another order with out wash his hands first.  
Must wash hands in between tasks.
- 21 to 3-501.17 Ready-To-Eat Potentially Hazardous Food (Time/Temperature Control for Safety Food), Date Marking - PF  
No date marking is in place at the time of inspection.  
Prepared and held in a FOOD ESTABLISHMENT for more than 24 hours shall be marked to indicate the date or day by which the FOOD shall be consumed on the PREMISES, sold, or discarded, based on the temperature and time combinations specified below. The day of preparation shall be counted as Day 1.

Person in Charge (Print & Sign): Yunhuai <sup>First</sup> Gao <sup>Last</sup>

Regulatory Authority (Print & Sign): Craig <sup>First</sup> Bethel <sup>Last</sup>

REHS ID: 1766 - Bethel, Craig

Verification Required Date:      /      /     

REHS Contact Phone Number: ( 336 ) 703 - 3143



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- 31 3-501.15 Cooling Methods - PF  
Chicken wings and noodles being cooled at room temperature. Chicken wings were measured at 109-122F and noodles 97-109F. Advanced prep must be properly cooled by refrigeration and not room temperature. Also, meet the cooling parameters of 135F-70 within 2 hours and then 70F to 41 with an additional 4 hours.  
  
CDI - Chicken and noodles were placed into the walk-in cooler.
- 33 3-501.13 Thawing - C  
Shrimp were being thawed in a bucket of water at the three compartment sink.  
All foods that need to be thawed use one of these methods: 1. Has part of the cooking process. 2. By mechanical refrigeration, 3. In a container with running water as to float any excess ice off. 4. microwave.
- 35 3-601.11 Standards of Identity - C  
Flour bin was not labeled at the time of inspection. Relabel
- 37 3-307.11 Miscellaneous Sources of Contamination - C  
Observed the thawing of shrimp in the middle vat of the three compartment sink that with soiled dishes in the vat beside it.  
No food prep is to be done at the three compartment sink.  
CDI - Shrimp were moved to the meat prep sink to continue proper thawing.
- 42 4-903.11 (A), (B) and (D) Equipment, Utensils, Linens and Single-Service and Single-Use Articles-Storing - C  
Ice scoop being stored in a container without a lid on top of a waist high ice machine.  
Ice scoops need to be kept in the ice bin with the handle up or in a container large enough to fit the ice scoop with a lid.
- 45 4-501.11 Good Repair and Proper Adjustment-Equipment - C  
See Transitional Comment Addendum for items that have not been completed at this time.  
#2 thru #9 and #11 thru #13.
- 47 4-601.11 (B) and (C) Equipment, Food-Contact Surfaces, Nonfood-Contact Surfaces, and Utensils - C  
Build up of grease and debris was noticed on the insides and undersides of equipment and prep areas, and shelving in both dry storage and refrigeration. Clean these areas.



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- 49 5-203.14 Backflow Prevention Device, When Required - P  
See Transitional Comment Addendum for items that have not been completed.  
#10
- 53 6-501.12 Cleaning, Frequency and Restrictions - C  
See Transitional Comment Addendum for items that have not been completed.  
#15  
Also, cleaning needed on walls under and behind equipment and shelving units.
- 54 6-303.11 Intensity-Lighting - C  
See Transitional Comment Addendum for items that have not been completed.  
#54



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✓  
Spell



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Spell

