

# Food Establishment Inspection Report

Score: 94

Establishment Name: EMBASSY SUITES / THE GRILLE

Establishment ID: 3034011728

Location Address: 460 N CHERRY ST

Inspection  Re-Inspection

City: WINSTON SALEM

State: NC

Date: 04 / 17 / 2015 Status Code: A

Zip: 27101

County: 34 Forsyth

Time In: 08 : 50  am  pm

Time Out: 11 : 15  am  pm

Permittee: NOBEL WINSTON SALEM ASSOC LLC

Category #: IV

Telephone: (336) 724-2300

Wastewater System:  Municipal/Community  On-Site System

FDA Establishment Type: \_\_\_\_\_

Water Supply:  Municipal/Community  On-Site Supply

No. of Risk Factor/Intervention Violations: 5

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.										
IN	OUT	N/A	N/O	Compliance Status			OUT	CDI	R	VR
<b>Supervision</b> .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"/>
<b>Employee Health</b> .2652										
2	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Management, employees knowledge; responsibilities & reporting			3	13	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"/>
<b>Good Hygienic Practices</b> .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	03	0	<input type="checkbox"/>
<b>Preventing Contamination by Hands</b> .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	13	0	<input type="checkbox"/>
8	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Handwashing sinks supplied & accessible			2	1	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<b>Approved Source</b> .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"/>
<b>Protection from Contamination</b> .2653, .2654										
13	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food separated & protected			3	13	0	<input type="checkbox"/>
14	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Food-contact surfaces: cleaned & sanitized			3	<input checked="" type="checkbox"/>	0	<input checked="" 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"/>
<b>Potentially Hazardous Food Time/Temperature</b> .2653										
16	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper cooking time & temperatures			3	13	0	<input type="checkbox"/>
17	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Proper reheating procedures for hot holding			3	13	0	<input type="checkbox"/>
18	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper cooling time & temperatures			3	13	0	<input type="checkbox"/>
19	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper hot holding temperatures			3	13	0	<input type="checkbox"/>
20	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Proper cold holding temperatures			3	<input checked="" type="checkbox"/>	0	<input type="checkbox"/>
21	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Proper date marking & disposition			3	13	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
22	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Time as a public health control: procedures & records			2	1	0	<input type="checkbox"/>
<b>Consumer Advisory</b> .2653										
23	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Consumer advisory provided for raw or undercooked foods			1	03	0	<input type="checkbox"/>
<b>Highly Susceptible Populations</b> .2653										
24	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Pasteurized foods used; prohibited foods not offered			3	13	0	<input type="checkbox"/>
<b>Chemical</b> .2653, .2657										
25	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Food additives: approved & properly used			1	03	0	<input type="checkbox"/>
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"/>
<b>Conformance with Approved Procedures</b> .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
<b>Safe Food and Water</b> .2653, .2655, .2658										
28	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Pasteurized eggs used where required			1	03	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	03	0	<input type="checkbox"/>
<b>Food Temperature Control</b> .2653, .2654										
31	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper cooling methods used; adequate equipment for temperature control			1	03	0	<input type="checkbox"/>
32	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Plant food properly cooked for hot holding			1	03	0	<input type="checkbox"/>
33	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Approved thawing methods used			1	03	0	<input type="checkbox"/>
34	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Thermometers provided & accurate			1	03	0	<input type="checkbox"/>
<b>Food Identification</b> .2653										
35	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food properly labeled: original container			2	1	0	<input type="checkbox"/>
<b>Prevention of Food Contamination</b> .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 type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Contamination prevented during food preparation, storage & display			2	<input checked="" type="checkbox"/>	0	<input type="checkbox"/>
38	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Personal cleanliness			1	03	0	<input type="checkbox"/>
39	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Wiping cloths: properly used & stored			1	03	<input checked="" type="checkbox"/>	<input type="checkbox"/>
40	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Washing fruits & vegetables			1	03	0	<input type="checkbox"/>
<b>Proper Use of Utensils</b> .2653, .2654										
41	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	In-use utensils: properly stored			1	03	0	<input type="checkbox"/>
42	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Utensils, equipment & linens: properly stored, dried & handled			<input checked="" type="checkbox"/>	03	0	<input checked="" type="checkbox"/>
43	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Single-use & single-service articles: properly stored & used			1	03	0	<input type="checkbox"/>
44	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Gloves used properly			1	03	0	<input type="checkbox"/>
<b>Utensils and Equipment</b> .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 checked="" type="checkbox"/>
46	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Warewashing facilities: installed, maintained, & used; test strips			1	03	<input checked="" type="checkbox"/>	<input type="checkbox"/>
47	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Non-food contact surfaces clean			1	03	0	<input type="checkbox"/>
<b>Physical Facilities</b> .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 type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Plumbing installed; proper backflow devices			2	1	<input checked="" type="checkbox"/>	<input checked="" 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	03	0	<input type="checkbox"/>
52	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Garbage & refuse properly disposed; facilities maintained			1	03	0	<input type="checkbox"/>
53	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Physical facilities installed, maintained & clean			1	03	<input checked="" type="checkbox"/>	<input type="checkbox"/>
54	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Meets ventilation & lighting requirements; designated areas used			1	03	0	<input type="checkbox"/>
<b>Total Deductions:</b>							<b>6</b>			



# Comment Addendum to Food Establishment Inspection Report

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**Location Address:** 460 N CHERRY ST  
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**County:** 34 Forsyth **Zip:** 27101  
**Wastewater System:**  Municipal/Community  On-Site System  
**Water Supply:**  Municipal/Community  On-Site System  
**Permittee:** NOBEL WINSTON SALEM ASSOC LLC  
**Telephone:** (336) 724-2300

**Establishment ID:** 3034011728  
 Inspection  Re-Inspection **Date:** 04/17/2015  
 Comment Addendum Attached?  **Status Code:** A  
**Category #:** IV  
**Email 1:** justin.harkey@twincityquarter.com  
**Email 2:**  
**Email 3:**

## Temperature Observations

Item	Location	Temp	Item	Location	Temp	Item	Location	Temp
grits	hot hold	160						
scrambled	hot hold	135						
sausage	hot hold	140						
honeydew	buffet	42						
tomatoes	make unit	40						
liquid eggs	cold hold at buffet	42						
* quat sanitizer	3 comp sink	200						
James Banks	#10938288 exp 4/22/19	0						

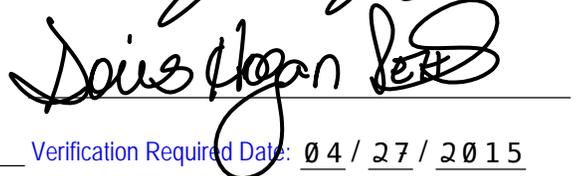
## Observations and Corrective Actions

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.

- 8 6-301.11 Handwashing Cleanser, Availability - PF- 0 points- No hand soap at the bar. Hand cleaner shall be provided. CDI- Soap provided. ✓  
Spell
- 14 4-601.11 (A) Equipment, Food-Contact Surfaces, Nonfood-Contact Surfaces, and Utensils - P- Glasses with lipstick, plates with food debris on the back sides. Ice machine with visible mold at the chute. Food contact surfaces shall be clean to sight and touch. Repeat.
- 20 3-501.16 (A)(2) and (B) Potentially Hazardous Food (Time/Temperature Control for Safety Food), Hot and Cold Holding - P- Chopped sausage 52F, chopped tomatoes 48F, milk 50-55F all items were on the buffet. Food shall be maintained at 45F or below. CDI- Items disposed. / Shell eggs sitting in a pan on ice at the buffet. Eggs that have not been treated for Salmonella (pasteurized) shall be stored in refrigerated equipment that maintains an ambient air temp of 45F or less.

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

Regulatory Authority (Print & Sign): Doris *First* Hogan *Last*

**REHS ID:** 1808 - Hogan, Doris

**Verification Required Date:** 04 / 27 / 2015

REHS Contact Phone Number: ( 336 ) 703 - 3133



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- 21 3-501.18 Ready-To-Eat Potentially Hazardous Food (Time/Temperature Control for Safety Food), Disposition - P- 0 points- One pan of cooked sausage in the walk-in past the discard date. Food shall be discarded if it exceeds the temperature and time combination (7 days at 41F). CDI- Pan of sausage discarded.
- 26 7-201.11 Separation-Storage - P- 0 points- One container of sanitizer stored on the prep line in the kitchen and one bucket of sanitizer stored on the buffet top. Sanitizer shall be located in an area that is not above food, equipment, utensils. CDI- Buckets moved.
- 37 3-306.11 Food Display-Preventing Contamination by Consumers - P- Brown sugar, raisins and granola for oatmeal not under sneeze guards. Container of bread not protected under sneeze guards. Food on display shall be protected from contamination by packaging, counter, service line, food guards or other effective means. Once the lid is up on the oatmeal toppings or the draw is open on the bread, these food items are not protected. Install proper sneeze guards or relocate items.
- 39 3-304.14 Wiping Cloths, Use Limitation - C- 0 points- Wet wiping cloth at buffet stored on the counter. Cloths for wiping counters and equipment shall be held between use in sanitizer at the proper concentration. CDI- Towel placed in sanitizer.
- 42 4-901.11 Equipment and Utensils, Air-Drying Required - C- Plates and bowls stacked wet. After cleaning and sanitizing, food contact surfaces shall be allowed to air dry. CDI- Wet items re-washed.
- 45 4-501.11 Good Repair and Proper Adjustment-Equipment - C- Reach-in refrigerator at buffet cook line at 51F. Shelving inside make unit on cook line rusty. Food and non-food contact surfaces shall be maintained in good repair. Properly repair refrigerator and replace shelving. Verification required. Refrigerator is to be repaired within 10 days.
- 46 4-501.14 Warewashing Equipment, Cleaning Frequency - C- 0 points- Interior of dish machine with visible food debris. Warewashing machines shall be cleaned before use, throughout the day to prevent recontamination of equipment and utensils and at least every 24 hours.



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- 49 5-203.14 Backflow Prevention Device, When Required - P- 0 points- Tea dispensers without backflow preventers. A plumbing system shall be installed to preclude backflow of solid, liquid or gas from contaminating the water supply at the point of use by installing an approved backflow device. Ensure that the ice machine and soda machine has the appropriate backflow devices as well. Verification required. The facility has 10 days to install or verify that current equipment has approved backflow./ 5-205.15 System Maintained in Good Repair - P- Toilet seats loose in restrooms. Plumbing system shall be maintained in good repair.
- 53 6-501.12 Cleaning, Frequency and Restrictions - C- 0 points- Floor cleaning needed in the bar. Facility shall be cleaned at a frequency necessary to maintain it clean.



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Spell



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Spell

