

Food Establishment Inspection Report

Score: 95

Establishment Name: CRT GOLDEN LAMB

Establishment ID: 3034160014

Location Address: 1515 GOLDEN LAMB COURT

☒ Inspection ☐ Re-Inspection

City: WINSTON SALEM

State: NC

Date: 05 / 17 / 2016 Status Code: A

Zip: 27105

County: 34 Forsyth

Time In: 09 : 30 ^{am} _{pm} Time Out: 11 : 45 ^{am} _{pm}

Total Time: 2 hrs 15 minutes

Permittee: CRT

Category #: IV

Telephone: (336) 727-9119

FDA Establishment Type: Nursing Home

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

No. of Risk Factor/Intervention Violations: 3

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

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 type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Hands clean & properly washed				4	2	<input checked="" type="checkbox"/>	<input checked="" 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 type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Food in good condition, safe & unadulterated				2	1	<input checked="" type="checkbox"/>	<input checked="" 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 type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Food separated & protected				3	<input checked="" type="checkbox"/>	0	<input checked="" 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 type="checkbox"/>	<input type="checkbox"/>	<input checked="" 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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper cooling time & temperatures				3	15	0	<input type="checkbox"/>
19	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" 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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input 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 type="checkbox"/>	<input type="checkbox"/>	<input checked="" 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 type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Thermometers provided & accurate				1	05	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Food Identification .2653											
35	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food properly labeled: original container				2	1	0	<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 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	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 type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Non-food contact surfaces clean				<input checked="" type="checkbox"/>	05	0	<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	<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 type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Garbage & refuse properly disposed; facilities maintained				1	<input checked="" type="checkbox"/>	0	<input type="checkbox"/>
53	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Physical facilities installed, maintained & clean				1	05	0	<input type="checkbox"/>
54	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Meets ventilation & lighting requirements; designated areas used				1	05	0	<input type="checkbox"/>
Total Deductions:										5	

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☒ Inspection ☐ Re-Inspection Date: 05/17/2016

City: WINSTON SALEM State: NC

Comment Addendum Attached? ☐ Status Code: A

County: 34 Forsyth Zip: 27105

Category #: IV

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

Email 1: crtgoldenlamb@yahoo.com

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

Email 2:

Permittee: CRT

Email 3:

Telephone: (336) 727-9119

Temperature Observations

Item	Location	Temp	Item	Location	Temp	Item	Location	Temp
Chicken	upright cooler	37	sanitizer	spray bottle (ppm)	100			
raw chicken	upright cooler	31	Angela Brown	9-2-20	0			
ham	upright cooler	38						
meat + pasta	upright cooler	44						
beef broth	in process	45						
spiral ham	hot hold	160						
T - Stick	three comp sink	172						
hot water	three comp	130						

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.

- 6 2-301.14 When to Wash - P One employee observed washing utensils and then beginning to put away sanitized cups without washing hands. Employees must wash hands whenever they are contaminated before handling food, clean utensils, or clean equipment. CDI: Employee washed hands. Other employees followed correct hand washing procedures. Have employees wash hands between handling clean and soiled utensils. Recommend two employees conduct warewashing to prevent contamination. 0 pts.
- 11 3-101.11 Safe, Unadulterated and Honestly Presented - P,PF One box of hot sauce packets past use by date with hot sauce discolored (dark green/yellow) Use by date was 12/2015. Discard foods and ingredients that are past use by dates and / or spoiled. // 3-202.15 Package Integrity - PF One sealed jar of pickles had discoloration and leaking around its lid. Discard any foods whose containers have ruptured or leaked without being opened by staff. CDI: PIC discarded hot sauce and pickles during inspection. 0 pts.
- 13 3-302.11 Packaged and Unpackaged Food-Separation, Packaging, and Segregation - P Multiple packages of self packaged and opened raw meats (fish, chicken, beef) in upright freezer over vegetables and ready to eat foods. Frozen and opened or self packaged raw meats must be stored according to final cooking temperatures. CDI: Meats moved to bottom shelf under vegetables and ready to eat products.

Person in Charge (Print & Sign): Angela First Brown Last

Regulatory Authority (Print & Sign): Joseph First Chrobak Last

REHS ID: 2450 - Chrobak, Joseph

Verification Required Date: / /

REHS Contact Phone Number: (336) 703 - 3164



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- 34 4-302.12 Food Temperature Measuring Devices - PF Thermometers on site are hot temperature only thermometers with not ability to test temperatures under 100F. Purchase a thermometer that can measure hot and cold temperatures and has a thin diameter probe for checking the temperatures of thin mass foods such as the deli meats, and cooked eggs.
- 37 3-305.11 Food Storage-Preventing Contamination from the Premises - C Shelves holding food and ingredients are in contact with the floor in the back hallway. All food and ingredients must be kept a minimum of six inches off the floor. Reposition shelves to be six inches off the floors. // 3-307.11 Miscellaneous Sources of Contamination - C One jar of pickled vegetables and okra with no labelling in dry storage commingled with resident food. PIC stated that pickled vegetables were one of the employees and never used for residents, PIC stated an employee home canned the items. Remove the pickled vegetables from the establishment. If home pickled items are not removed a variance would be required to verify safe creation and handling of the product..
- 45 4-205.10 Food Equipment, Certification and Classification - C Milk crates being used for storage in the establishment, Milk crates are not approved for reuse as they are not easily cleanable. Remove the crates. / two blenders and one electric can opener are labeled "for household use only". Only equipment approved by an ANSI accredited program may be used in the establishment. Remove the noted items from the kitchen. / Two freezers (Frigidaire and United) in back hall are not commercially rated and are holding frozen meats due to space restrictions. Remove potentially hazardous foods from units and keep them stored one of the two approved units.// 4-501.11 Good Repair and Proper Adjustment-Equipment - C Freezer in back hallway is leaking ice due to frozen drain line. Thaw the line and check for ice leaking. If problem persists have unit evaluated and repaired. One cutting board is stained and melted, remove from establishment. One cheese grater rusted, remove from establishment.
- 47 4-601.11 (B) and (C) Equipment, Food-Contact Surfaces, Nonfood-Contact Surfaces, and Utensils - C Repeat: Cleaning needed on shelving throughout the kitchen to remove dust build up. / Cleaning needed on upright fan to remove dust from blade and guard to prevent contamination to clean equipment, utensils, and food.
- 52 5-501.113 Covering Receptacles - C Dumpster lid is caved in and needs to be replaced to adequately cover the dumpster.
5-501.114 Using Drain Plugs - C Drain plug is broken and needs to be replaced to seal drain.
5-501.111 Area, Enclosures and Receptacles, Good Repair - C Dumpster is badly damaged with multiple areas of split metal. Replace the dumpster.



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Spell



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