

Food Establishment Inspection Report

Score: 96

Establishment Name: BROOKDALE REYNOLDA ROAD ASSISTED LIVING

Establishment ID: 3034160028

Location Address: 2980 REYNOLDA RD

Inspection Re-Inspection

City: WINSTON SALEM

State: NC

Date: 11 / 08 / 2018 Status Code: A

Zip: 27106 County: 34 Forsyth

Time In: 09 : 25 am pm Time Out: 11 : 45 am pm

Permittee: BROOKDALE SENIOR LIVING

Total Time: 2 hrs 20 minutes

Telephone: (336) 722-1617

Category #: IV

Wastewater System: Municipal/Community On-Site System

FDA Establishment Type: Nursing Home

Water Supply: Municipal/Community On-Site Supply

No. of Risk Factor/Intervention Violations: 2

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
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 0 0 0
Employee Health .2652						
2	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Management, employees knowledge; responsibilities & reporting	3	13 0 0 0
3	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper use of reporting, restriction & exclusion	3	13 0 0 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 0 0
5	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	No discharge from eyes, nose or mouth	1	03 0 0 0
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 0 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	13 0 0 0
8	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Handwashing sinks supplied & accessible	2	1 0 0 0
Approved Source .2653, .2655						
9	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food obtained from approved source	2	1 0 0 0
10	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Food received at proper temperature	2	1 0 0 0
11	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food in good condition, safe & unadulterated	2	1 0 0 0
12	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Required records available: shellstock tags, parasite destruction	2	1 0 0 0
Protection from Contamination .2653, .2654						
13	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food separated & protected	3	13 0 0 0
14	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Food-contact surfaces: cleaned & sanitized	3	13 0 0 0
15	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper disposition of returned, previously served, reconditioned, & unsafe food	2	1 0 0 0
Potentially Hazardous Food Time/Temperature .2653						
16	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper cooking time & temperatures	3	13 0 0 0
17	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Proper reheating procedures for hot holding	3	13 0 0 0
18	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Proper cooling time & temperatures	3	13 0 0 0
19	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Proper hot holding temperatures	3	13 0 0 0
20	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper cold holding temperatures	3	13 0 0 0
21	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Proper date marking & disposition	3	0 0 0 0
22	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Time as a public health control: procedures & records	2	1 0 0 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 0 0
Highly Susceptible Populations .2653						
24	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Pasteurized foods used; prohibited foods not offered	3	13 0 0 0
Chemical .2653, .2657						
25	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Food additives: approved & properly used	1	03 0 0 0
26	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Toxic substances properly identified stored, & used	2	1 0 0 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 0 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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Pasteurized eggs used where required	1	03 0 0 0
29	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Water and ice from approved source	2	1 0 0 0
30	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Variance obtained for specialized processing methods	1	03 0 0 0
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	03 0 0 0
32	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Plant food properly cooked for hot holding	1	03 0 0 0
33	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Approved thawing methods used	1	03 0 0 0
34	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Thermometers provided & accurate	1	03 0 0 0
Food Identification .2653						
35	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food properly labeled: original container	2	1 0 0 0
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 0 0
37	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Contamination prevented during food preparation, storage & display	2	0 0 0 0
38	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Personal cleanliness	1	03 0 0 0
39	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Wiping cloths: properly used & stored	1	03 0 0 0
40	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Washing fruits & vegetables	1	03 0 0 0
Proper Use of Utensils .2653, .2654						
41	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	In-use utensils: properly stored	1	03 0 0 0
42	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Utensils, equipment & linens: properly stored, dried & handled	1	03 0 0 0
43	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Single-use & single-service articles: properly stored & used	1	03 0 0 0
44	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Gloves used properly	1	03 0 0 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	0 0 0 0
46	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Warewashing facilities: installed, maintained, & used; test strips	1	03 0 0 0
47	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Non-food contact surfaces clean	1	03 0 0 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 0 0
49	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Plumbing installed; proper backflow devices	2	1 0 0 0
50	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Sewage & waste water properly disposed	2	1 0 0 0
51	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Toilet facilities: properly constructed, supplied & cleaned	1	03 0 0 0
52	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Garbage & refuse properly disposed; facilities maintained	1	03 0 0 0
53	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Physical facilities installed, maintained & clean	1	0 0 0 0
54	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Meets ventilation & lighting requirements; designated areas used	1	03 0 0 0
Total Deductions:					4	



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City: WINSTON SALEM **State:** NC
County: 34 Forsyth **Zip:** 27106
Wastewater System: Municipal/Community On-Site System
Water Supply: Municipal/Community On-Site System
Permittee: BROOKDALE SENIOR LIVING
Telephone: (336) 722-1617

Establishment ID: 3034160028
 Inspection Re-Inspection **Date:** 11/08/2018
Comment Addendum Attached? **Status Code:** A
Water sample taken? Yes No **Category #:** IV
Email 1: bpotter@brookdaleliving.com
Email 2:
Email 3:

Temperature Observations

Effective January 1, 2019 Cold Holding will change to 41 degrees

Item	Location	Temp	Item	Location	Temp	Item	Location	Temp
salad	upright cooler	40						
turkey	upright cooler	39						
hot water	3-compartment sink	152						
quat (ppm)	3-compartment sink	300						
hot plate temp	dish machine	166						
ServSafe	Ashley Whaley 8-12-21	0						
shrimp	final cook	155						

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.

- 14 4-601.11 (A) Equipment, Food-Contact Surfaces, Nonfood-Contact Surfaces, and Utensils - P - Repeat - Immersion blender had visible food residue on it and required additional cleaning. Food-contact surfaces of equipment and utensils shall be cleaned to sight and touch. CDI - Immersion blender washed, rinsed and sanitized in 3-compartment sink. 0 pts.
- 21 3-501.17 Ready-To-Eat Potentially Hazardous Food (Time/Temperature Control for Safety Food), Date Marking - PF - Ham had a receive date on package of 10-2, but no indication present on package of when the package was opened. Lettuce opened on Tuesday in upright cooler did not have a date mark. Potentially hazardous ready-to-eat foods, such as deli meats and cut lettuce, that come in a vacuum sealed package shall be date marked once the seal is broken. PH RTE foods shall be held for no longer than 7 days after the package is opened, with the date of opening being day 1. CDI - Lettuce and ham discarded.
- 37 3-307.11 Miscellaneous Sources of Contamination - C - Employee drink cup and employee cell phone on prep surfaces in kitchen. Employee items, such as food, beverages and cell phones, must not be stored on food preparation areas, or where they could potentially contaminate food or clean equipment. Store employee items in a segregated area and store employee beverages in the office or on a low shelf.

Lock Text



Person in Charge (Print & Sign): Reginald Gwynn Last

Regulatory Authority (Print & Sign): Andrew Lee Last




REHS ID: 2544 - Lee, Andrew

Verification Required Date: / /

REHS Contact Phone Number: (336) 703 - 3128



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



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- 45 4-501.11 Good Repair and Proper Adjustment-Equipment - C - Repeat - Torn gaskets present on both freezer doors, ice scoop is cracked, ice scoop container is cracked, water damage present in the cabinets underneath the juice machine, and chipping/rusted shelves present in upright cooler. Equipment shall be maintained in good repair. Repair/replace listed equipment.
- 49 5-205.15 (B) System Maintained in Good Repair - C - The mop sink hose is leaking. Plumbing fixtures shall be maintained in good repair. Repair leak. 0 pts.
- 53 6-501.12 Cleaning, Frequency and Restrictions - C - Repeat - Additional floor cleaning necessary underneath prep sink and 3-compartment sink in kitchen. Floors, walls and ceilings shall be cleaned at a frequency necessary to maintain them clean. // 6-201.11 Floors, Walls and Ceilings-Cleanability - C - Repeat - Dish machine drainboard needs to be resealed to wall, 3-compartment sink needs to be sealed to wall or spaced off the wall with enough space to clean behind sink, floor tiles damage and grout between floor tiles worn near dish machine, and back handsink needs to be resealed to the wall. Floors, walls and ceilings shall be easily cleanable.



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Spell



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