H	00)d	· E	Sl	ablishment inspection	Re	pc	ort						Score: <u>97.5</u>	5	_		
5	tal	olis	shn	ner	nt Name: IRIE RHYTHMS							E	ĒS	stablishment ID: 3034012315		_		
City: WINSTON SALEM State: NC									Date: <u>Ø 9</u> / 1 2 / 2 Ø 1 6 Status Code: A									
	-	27			County: 34 Forsyth		_			Time In: $03:15 \otimes pm$ Time Out: $05:40 \otimes pm$								
		nitt			MOORE HARMONY ENTERPRISES LLC					Total Time: 2 hrs 25 minutes								
				_						Category #: IV								
					(336) 768-0894						- FI	DA	E	Establishment Type: Full-Service Restaurant				
					System: ⊠Municipal/Community [-	/ste	em				f Risk Factor/Intervention Violations: 1		_		
N	ate	er S	Sup	ply	/ : ⊠Municipal/Community □ On-	Site S	Sup	ply						f Repeat Risk Factor/Intervention Violations:				
	=00	dh	orn	۱II م	noss Disk Easters and Dublic Health Int	oryon	tion							Good Potail Practices		_		
										ractices: Preventative measures to control the addition of pathogens, chemicals	i,							
F		_	_		ventions: Control measures to prevent foodborne illness or	or injury.								and physical objects into foods.				
		out		N/O	Compliance Status	OUT	CDI	R V	⊣⊢		ОИТ	_	_	N/O Compliance Status OUT CDI R Water .2653 .2655 .2658	₹ ۷	/R		
1		I VIS			PIC Present: Demonstration-Certification by	2 (ППГ		8 \Box	. T			Pasteurized eggs used where required	7	_		
·		loye		alth	accredited program and perform duties .2652				⊣⊢	9 🔀	+			Water and ice from approved source	╬	_		
2					Management, employees knowledge; responsibilities & reporting	3 1.5 (╗┼	+				Variance obtained for appointing proposing		_		
3	×				Proper use of reporting, restriction & exclusion	3 1.5 0			⊐I∟	0 L	d Ton	×		methods " " " " " " " " " " " " " " " " " " "	<u> </u>			
(і Ну	gien	ic Pr	ractices .2652, .2653					1 _		iper	au	ture Control .2653, .2654 Proper cooling methods used; adequate equipment for temperature control	7			
4	×				Proper eating, tasting, drinking, or tobacco use	210			ヿЬ	2 🔀			+	equipment for temperature control Plant food properly cooked for hot holding	+	_		
5	X				No discharge from eyes, nose or mouth	1 0.5	0 🗆		٦I⊢	_			+		+	_		
P	reve	entir	ıg C	onta	mination by Hands .2652, .2653, .2655, .2656				■H-	3 🗵		Ш	┞	Approved thawing methods used	4	_ _		
6	X				Hands clean & properly washed	420			-11 ⊨	4 🗵			L	Thermometers provided & accurate	<u> </u>	_		
7	×				No bare hand contact with RTE foods or pre- approved alternate procedure properly followed	3 1.5 (11 -	5 X	d Ider	ntific	cat	Action .2653 Food properly labeled: original container	71-			
8	X				Handwashing sinks supplied & accessible	210			⊣ור	_		n of	f F	Food Contamination .2652, .2653, .2654, .2656, .2657				
ŀ		ove	d So	urce	.2653, .2655					6 🗵	$\overline{}$		Ť	Insects & rodents not present; no unauthorized animals	7			
9	X				Food obtained from approved source	2 1 0			٦I⊢	7 🔀	+			Contamination prevented during food	7	_		
10				×	Food received at proper temperature	210			JI⊢	8 🔀	+			preparation, storage & display Personal cleanliness	+	_		
11	X				Food in good condition, safe & unadulterated	210			JI⊢	+	+		-		+	_		
12			X		Required records available: shellstock tags, parasite destruction	210			. Ⅱ⊢	9 🗆	_			Wiping cloths: properly used & stored	<u> </u>	_		
					ontamination .2653, .2654								f I	Washing fruits & vegetables 1 0.5 0	<u> </u>	_		
13	×				Food separated & protected	3 1.5 0				1 🔀		Se u	1	Utensils .2653, .2654 In-use utensils: properly stored	7	_		
14	X				Food-contact surfaces: cleaned & sanitized	3 1.5 0			JI⊢	2 🔀	+			Utensils, equipment & linens: properly stored,	7	_		
	X				Proper disposition of returned, previously served, reconditioned, & unsafe food	2 1 0			IJH	+	+-			dried & handled	<u> </u>	_		
F		ntial	_		dous Food Tlme/Temperature .2653				⊣⊢	3 🔀	+			Single-use & single-service articles: properly stored & used	4	_ _		
16				X	Proper cooking time & temperatures	3 1.5 0			⊣⊢	4 🗵			L	Gloves used properly]		
17				X	Proper reheating procedures for hot holding	3 1.5 0			⊒ -	Uter	Т	and	Ec	quipment .2653, .2654, .2663 Equipment, food & non-food contact surfaces	T			
18	X				Proper cooling time & temperatures	3 1.5 0] [4	5 🗆				approved, cleanable, properly designed, constructed, & used		_		
19		X			Proper hot holding temperatures	3 🗙 0			□ 4	6 🗵				Warewashing facilities: installed, maintained, & used; test strips		Ī		
20	X				Proper cold holding temperatures	3 1.5 0			4	7 🗵				Non-food contact surfaces clean][
21	X				Proper date marking & disposition	3 1.5 0			7	Phy:	sical	Faci	ilit	ities .2654, .2655, .2656				
22			×		Time as a public health control: procedures & records	210			_ 4	8 🗵				Hot & cold water available; adequate pressure				
(ons	ume	er A	dviso	ory .2653				4	9 🗆				Plumbing installed; proper backflow devices	⊐ ≥	X		
23			X		Consumer advisory provided for raw or undercooked foods	1 0.5 0			∐ 5	0 🗵				Sewage & waste water properly disposed				
H	ligh	ly Sı		ptib	le Populations .2653 Pasteurized foods used; prohibited foods not				5	1 🗵				Toilet facilities: properly constructed, supplied & cleaned	1	_		
24			×		offered	3 1.5 0	Щ□		IJH	2 🗵	+			Garbage & refuse properly disposed; facilities	╁	_		
25	her X	nica			.2653, .2657 Food additives: approved & properly used	1050			4	3 🔀	_			maintained Physical facilities installed, maintained & clean	+	_		
24		H			Toxic substances properly identified stored. & used	7 17			- -	1 -			_	Meets ventilation & lighting requirements;	- -	_		
						n 4 m 1 m t	2 H L	* 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	11111	-T 1 1					6.01			



Conformance with Approved Procedures .2653, .2654, .2658

Compliance with variance, specialized process, reduced oxygen packing criteria or HACCP plan



Total Deductions: 2.5

	Comment	Addend	ium to F	000 ES	stabiisnment inspect	on Report					
Establishn	nent Name: IRIE RHY	THMS			Establishment ID: 3034012315 Inspection Re-Inspection Date: 09/12/2016 Comment Addendum Attached? Status Code: A Category #: IV Email 1: mhe@mooreharmony.com Email 2: Email 3:						
City: _WIN County: _ Wastewate Water Sup Permittee	Address: 3252 SILAS NSTON SALEM 34 Forsyth er System: Municipal/C ply: Municipal/C e: MOORE HARMON ne: (336) 768-0894	ommunity 🗌 C	Zip: 27103 On-Site System On-Site System	te: NC							
			Tempe	rature O	, bservations						
ltem chicken	Location steam table	Temp 172	Item sliced tomato	Location make top	Temp Item 39	Location	Temp				
ox tail	steam table	142	lettuce	make ton	41						

	Temperature Observations								
ltem chicken	Location steam table	Temp 172	Item sliced tomato	Location make top	Temp 39	Item	Location	Temp	
ox tail	steam table	142	lettuce	make top	41				
plantains	steam table	116	cooling	walk in cooler	150				
plantains	final cook	185	diced tomato	walk in cooler	40				
chicken pattie	hot hold	168	callalu	walk in cooler	45				
beef pattie	hot hold	157	hot water	3 comp sink	168				
rice	hot hold	135	QA sanitizer	3 comp sink	150				
chicken	hot hold	125	Georjeane	Serv Safe 3/29/19	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.

3-501.16 (A)(1) Potentially Hazardous Food (Time/Temperature Control for Safety Food), Hot and Cold Holding - Plantains 19 (116F-120F) and chicken (125F-130F) measured less than 135F in hot holding. While foods are in hot holding, they must measure a minimum of 135F at all times. CDI - Food was voluntarily discarded by PIC.



- 3-501.15 Cooling Methods PF Cooling food pans of chicken in walk in cooler were stored with lid on them. While cooling, loosely cover food items to facilitate transfer of heat. CDI - Lids were loosened.
- 39 3-304.14 Wiping Cloths, Use Limitation - C - Wiping cloth bucket stored on the floor. Containers of chemical sanitizing solutions in which wet wiping cloths are held between uses shall be stored off the floor and used in a manner that prevents contamination of food, equipment, utensils, linens, single service, or single use articles. Recommend storing bucket on low shelf where contamination of food/equipment cannot occur.

First Last Georjeane Moore Person in Charge (Print & Sign): First Last Regulatory Authority (Print & Sign): Carla

Day

REHS ID: 2405 - Day, Carla

Verification Required Date: Ø 9

REHS Contact Phone Number: (3 3 6) 7 Ø 3 - 3 1 4 4





E . I II I I IDIE DI N/TI II IO	
Establishment Name: IRIE RHYTHMS	Establishment ID: 3034012315
ESTABLISHING IN MAINE. " " - " " · " · " · " · " · " · " · " ·	LSIADIISIIIICIII ID. 600 10 120 10

Observations	and	Corrective	Actions
Obselvations.	anu	COHECHVE	ACHORS

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.



45 4-501.11 Good Repair and Proper Adjustment-Equipment - C - 0 points - Laminate above and beside the steam table is peeling. Repair.

49 5-203.14 Backflow Prevention Device, When Required - P - 0 points - Verification Required - 9/22/16 Backflow prevention is required at each water line leading into beverage dispensing equipment (ex: tea maker, ice machine/soda fountain). Install an ASSE 1022 or provide documentation that backflow prevention is built into system.

6-303.11 Intensity-Lighting - C - 0 points - Lighting is low in the men's restroom. Replace light bulbs that no longer function.





Establishment Name: IRIE RHYTHMS Establishment ID: 3034012315

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.





Establishment Name: IRIE RHYTHMS Establishment ID: 3034012315

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.





Establishment Name: IRIE RHYTHMS Establishment ID: 3034012315

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.



