| Food Establishment Inspectio | n keport | Score: <u>95</u> | | | | |
|---|---------------------------|--|--|--|--|--|
| Establishment Name: CLEMMONS VILLAGE II ASS | SISTED LIVING | Establishment ID: 3034160012 | | | | |
| Location Address: 6441 HOLDER RD | | | | | | |
| City: CLEMMONS | State: NC | Date: Ø 4 / 19 / 2Ø 17 Status Code: A | | | | |
| Zip: 27012 County: 34 Forsyth | otate | Time In: $09:30\%$ am Time Out: $11:35\%$ am | | | | |
| | SIIC | Total Time: 2 hrs 5 minutes | | | | |
| | J LLO | Category #: IV | | | | |
| Telephone: (336) 778-8548 | | FDA Fotobliohment Type: Nursing Home | | | | |
| Wastewater System: ⊠Municipal/Community | ☐On-Site Sys | No. of Risk Factor/Intervention Violations: 3 | | | | |
| Water Supply: ⊠Municipal/Community □O | n-Site Supply | No. of Repeat Risk Factor/Intervention Violations: 1 | | | | |
| Foodborne Illness Risk Factors and Public Health I Risk factors: Contributing factors that increase the chance of developing fo Public Health Interventions: Control measures to prevent foodborne illnes | odborne illness. | 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 | | | | | |
| Supervision .2652 1 PIC Present; Demonstration-Certification by accredited program and perform duties | | Safe Food and Water .2653, .2655, .2658 | | | | |
| 1 ⊠ □ □ PIC Present; Demonstration-Certification by accredited program and perform duties Employee Health .2652 | | 28 Pasteurized eggs used where required | | | | |
| 2 Management, employees knowledge; responsibilities & reporting | 3150000 | 29 ☑ ☐ Water and ice from approved source 2110 ☐ ☐ | | | | |
| responsibilities & reporting Proper use of reporting, restriction & exclusion | 3 1.5 0 | 30 | | | | |
| Good Hygienic Practices .2652, .2653 | | Food Temperature Control .2653, .2654 Proper cooling methods used; adequate | | | | |
| 4 🗵 🗆 Proper eating, tasting, drinking, or tobacco use | 210 - | equipment for temperature control | | | | |
| 5 🗵 🗌 No discharge from eyes, nose or mouth | 1 0.5 0 | 32 | | | | |
| Preventing Contamination by Hands .2652, .2653, .2655, .2656 | | 33 🛛 🗆 🗆 Approved thawing methods used | | | | |
| 6 🗵 🗆 Hands clean & properly washed | 420 | 34 ☒ □ Thermometers provided & accurate 1 05 0 □ | | | | |
| 7 🗵 🗆 🗆 No bare hand contact with RTE foods or pre- | 3 1.5 0 | Food Identification .2653 | | | | |
| 8 🗵 🗆 Handwashing sinks supplied & accessible | | 35 Sood properly labeled: original container 2 1 X Society Soc | | | | |
| Approved Source .2653, .2655 | | Prevention of Food Contamination .2652, .2653, .2654, .2656, .2657 | | | | |
| 9 🗵 🗌 Food obtained from approved source | 210 | animals | | | | |
| 10 🗆 🔻 Food received at proper temperature | 210 - | 37 🛛 🗆 Contamination prevented during food preparation, storage & display | | | | |
| 11 🗵 🗌 Food in good condition, safe & unadulterated | 210 - | 38 🗵 | | | | |
| Required records available: shellstock tags, | | 39 ☑ | | | | |
| Protection from Contamination .2653 .2654 | | 40 ⊠ □ □ Washing fruits & vegetables | | | | |
| 13 | 38080 | Proper Use of Utensils .2653, .2654 | | | | |
| 14 🗆 🔀 Food-contact surfaces: cleaned & sanitized | 31.5 🗶 🗶 🗆 🗆 | 41 🛛 🔲 In-use utensils: properly stored | | | | |
| Proper disposition of returned, previously serve | | 42 🛛 🖂 Utensils, equipment & linens: properly stored, dried & handled | | | | |
| Potentially Hazardous Food Time/Temperature .2653 | | 43 Single-use & single-service articles: properly 1 5 | | | | |
| 16 🛛 🖂 🖂 Proper cooking time & temperatures | 31.50 | 44 🛛 Gloves used properly | | | | |
| 17 Proper reheating procedures for hot holding | 31.50 | Utensils and Equipment .2653, .2654, .2663 | | | | |
| 18 🛛 🖂 🖂 Proper cooling time & temperatures | 31.50 | Equipment, food & non-food contact surfaces approved, cleanable, properly designed, | | | | |
| 19 | 31.50 | constructed, & used Warewashing facilities: installed, maintained, & | | | | |
| | | used; test strips | | | | |
| 20 🗵 🗌 🔲 Proper cold holding temperatures | 3 1.5 0 | 47 | | | | |
| 21 Proper date marking & disposition | X 1.5 0 X X | Physical Facilities .2654, .2655, .2656 48 ☒ ☐ ☐ Hot & cold water available; adequate pressure 210 ☐ ☐ | | | | |
| 22 | 210 | | | | | |
| Consumer Advisory .2653 Consumer advisory provided for raw or | | 49 ⊠ | | | | |
| 23 Consumer advisory provided for raw or undercooked foods Highly Susceptible Populations .2653 | | Sewage & waste water properly disposed 2 1 0 0 | | | | |
| Pasteurized foods used; prohibited foods not | 3 1.5 0 | 51 🗷 🗆 Toilet facilities: properly constructed, supplied & cleaned | | | | |
| Chemical .2653, .2657 | | | | | | |
| 25 🗵 🗆 Food additives: approved & properly used | 1 0.5 0 | 53 🗵 Physical facilities installed, maintained & clean 1 05 0 🗆 🗆 | | | | |
| 26 🛮 🖂 Toxic substances properly identified stored, & used | 210 | 54 🗷 🗆 Meets ventilation & lighting requirements; 1 05 0 0 0 0 | | | | |
| Conformance with Approved Procedures .2653, .2654, .2658 | | Total Deductions: 5 | | | | |
| Compliance with variance enecialized process | | I OTAL HADILIDADE I DE LA LICENTE | | | | |



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



Total Deductions: 5

| Establishment Name: CLEMMONS VILLAGE II ASSISTED LIVING | | | | Establishment | D: 3034160012 | 1 - | | | |
|---|---|--|---|---|--|--|--|-----------------|--|
| Location Address: 6441 HOLDER RD | | | | ☐ Inspection ☐ Re-Inspection Date: 04/19/2017 | | | | | |
| City: CLE | MMONS | | Sta | ate: NC | Comment Addendu | • | Status Code: | | |
| - | County: 34 Forsyth Zip: 27012 | | | | | _ | Category #: | | |
| Wastewater System: Municipal/Community □ On-Site System | | | Email 1: INFO@CLEMMONSVILLAGE.COM | | | | | | |
| Water Supply: ✓ Municipal/Community ✓ On-Site System Permittee: CLEMMONS VILLAGE ASSISTED LIVING LLC | | | Email 2: | | | | | | |
| | Telephone: (336) 778-8548 | | | | | | | | |
| relephon | e. (330) 778-8348 | | T | | Email 3: | | | | |
| Item | Location | Temp | | Location Location | oservations Temp | o Item | Location | Tem | |
| ServSafe | Natasha Lawrence | 00 | BBQ | Final cook | 160 | o item | Location | 16111 | |
| Hot water | 3-compartment sink | 123 | Potatoes | Final cook | 184 | | | | |
| Rinse cycle | Dish machine | 168 | | | | | | | |
| Roast beef | Walk-in cooler | 43 | | | | | | | |
| Spinach | Walk-in cooler | 42 | | | | | | | |
| Quat ppm | 3-compartment sink | 200 | | | | | | | |
| Quat ppm | Bucket | 200 | | | | | | | |
| Water | Steam table | 186 | | | | | | | |
| opener b | (A) Equipment, Food- plade were soiled. Food opener washed, rinsed | -contact s | surfaces of eq | | | | | | |
| roast bee paramete maximun (Time/Te signs of s | Ready-To-Eat Potential of was dated 4-8-17 and ers shall be discarded. In of 7 days at 41F or semperature Control for spoilage. Potentially hardiscarded. | d measur Potentiall elow. CDI Safety Fo | ed 43F. Poten y hazardous fo l - Roast beef od), Date Mar | itially hazardo ood can be h discarded.//3 king - PF - A | ous food that has e leld for a maximum l-501.17 Ready-To n opened bag of sp | exceeded the time, of 4 days betwee -Eat Potentially Ha binach was not da | /temperature date en 42-45F, or for a azardous Food te marked and sho | marking owed | |
| Person in Cha | arge (Print & Sign): N | <i>Fi</i> atasha | irst | <i>La</i> Lawrence | ast | ntoh, 2 | for | / | |
| Regulatory A | uthority (Print & Sign): ^G | | irst | La Hodge | ast g | Trayson | Hodge | RH | |
| REHS ID: 2554 - Hodge, Grayson | | | | Verif | ication Required Dat | te: / / | | | |

Verification Required Date: ____/ ___/

REHS Contact Phone Number: (336)703 - 3383





Establishment Name: CLEMMONS VILLAGE II ASSISTED LIVING Establishment ID: 3034160012

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.



- 3-302.12 Food Storage Containers Identified with Common Name of Food C 0 pts Vinegar and flour in working containers were not labeled. Food that is removed from the manufacturer's packaging and is not easily recognizable shall be labeled. CDI Vinegar bottle and flour bin labeled.
- 43 4-903.11 (A) and (C) Equipment, Utensils, Linens and Single-Service and Single-Use Articles-Storing C 0 pts A box of single service cups were stored on the floor in the office. Person in charge stated that an order was delivered recently. Single service articles shall be stored at least 6 inches above the floor. Relocate cups to shelving.
- 4-205.10 Food Equipment, Certification and Classification C 0 pts A food processor rated for household domestic use is being used in the establishment. Except for toasters, mixers, microwaves, water heaters, and hoods, food equipment shall be certified from an ANSI-accredited program. Remove or replace food processor.//4-501.11 Good Repair and Proper Adjustment-Equipment C Evaluate walk-in freezer for a condensate leak (large amount of ice build-up around water line). The floor is starting to buckle in the walk-in freezer. Equipment and utensils shall be maintained in good repair.
- 4-601.11 (B) and (C) Equipment, Food-Contact Surfaces, Nonfood-Contact Surfaces, and Utensils C Detail cleaning is needed around the outside of the dish machine, floor of the walk-in freezer, and inside of the microwave in the dining room. A piece of gum was found on a food container lid. Nonfood contact surfaces shall be kept clean. CDI Container lid sent to be washed, rinsed, and sanitized.



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