

Food Establishment Inspection Report

Score: 95.5

Establishment Name: CHUCK E CHEESE'S

Establishment ID: 3034011235

Location Address: 620 HANES MALL BLVD

Inspection Re-Inspection

City: WINSTON SALEM

State: NC

Date: 11 / 23 / 2016 Status Code: A

Zip: 27103

County: 34 Forsyth

Time In: 01 : 45 ^{am} _{pm} Time Out: 04 : 20 ^{am} _{pm}

Total Time: 2 hrs 35 minutes

Permittee: CEC ENTERTAINMENT INC

Category #: II

Telephone: (336) 774-3722

FDA Establishment Type: Full-Service Restaurant

Wastewater System: Municipal/Community On-Site System

No. of Risk Factor/Intervention Violations: 4

Water Supply: Municipal/Community On-Site Supply

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	<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	1.5	0	<input type="checkbox"/>
3	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper use of reporting, restriction & exclusion			3	1.5	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	0.5	0	<input type="checkbox"/>
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	<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	1.5	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"/>
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 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"/>
Protection from Contamination .2653, .2654										
13	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food separated & protected			3	1.5	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"/>
Potentially Hazardous Food Time/Temperature .2653										
16	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Proper cooking time & temperatures			3	1.5	0	<input type="checkbox"/>
17	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Proper reheating procedures for hot holding			3	1.5	0	<input type="checkbox"/>
18	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Proper cooling time & temperatures			3	1.5	0	<input type="checkbox"/>
19	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Proper hot holding temperatures			3	1.5	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
20	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper cold holding temperatures			3	1.5	0	<input type="checkbox"/>
21	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Proper date marking & disposition			3	<input checked="" type="checkbox"/>	0	<input checked="" 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	0.5	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	1.5	0	<input type="checkbox"/>
Chemical .2653, .2657										
25	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Food additives: approved & properly used			1	0.5	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	0.5	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	0.5	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	0.5	0	<input type="checkbox"/>
32	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Plant food properly cooked for hot holding			1	0.5	0	<input type="checkbox"/>
33	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Approved thawing methods used			1	0.5	0	<input type="checkbox"/>
34	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Thermometers provided & accurate			1	0.5	0	<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	1	<input checked="" type="checkbox"/>	<input type="checkbox"/>
38	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Personal cleanliness			1	0.5	0	<input type="checkbox"/>
39	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Wiping cloths: properly used & stored			1	0.5	<input checked="" type="checkbox"/>	<input type="checkbox"/>
40	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Washing fruits & vegetables			1	0.5	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	0.5	0	<input type="checkbox"/>
42	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Utensils, equipment & linens: properly stored, dried & handled			1	0.5	0	<input type="checkbox"/>
43	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Single-use & single-service articles: properly stored & used			1	0.5	0	<input type="checkbox"/>
44	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Gloves used properly			1	0.5	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	1	<input checked="" type="checkbox"/>	<input type="checkbox"/>
46	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Warewashing facilities: installed, maintained, & used; test strips			1	<input checked="" type="checkbox"/>	0	<input checked="" type="checkbox"/>
47	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Non-food contact surfaces clean			1	0.5	0	<input 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 type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Plumbing installed; proper backflow devices			2	1	<input checked="" type="checkbox"/>	<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	0.5	0	<input type="checkbox"/>
52	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Garbage & refuse properly disposed; facilities maintained			1	0.5	0	<input type="checkbox"/>
53	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Physical facilities installed, maintained & clean			<input checked="" type="checkbox"/>	0.5	0	<input checked="" type="checkbox"/>
54	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Meets ventilation & lighting requirements; designated areas used			1	0.5	0	<input type="checkbox"/>
Total Deductions:							4.5			



Comment Addendum to Food Establishment Inspection Report

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City: WINSTON SALEM State: NC

Comment Addendum Attached? Status Code: A

County: 34 Forsyth Zip: 27103

Category #: II

Wastewater System: Municipal/Community On-Site System

Email 1:

Water Supply: Municipal/Community On-Site System

Email 2:

Permittee: CEC ENTERTAINMENT INC

Email 3:

Telephone: (336) 774-3722

Temperature Observations

Item	Location	Temp	Item	Location	Temp	Item	Location	Temp
ServSafe	Philip Marlow Exp.	00	Chicken	Make unit	42			
Sausage	Buffet	110	Hot water	3-compartment sink	140			
Salad	Buffet	44	Quat ppm	3-compartment sink	200			
Cheese Pizza	Buffet	138	Chlorine ppm	Dish machine	50			
Lettuce	Walk-in cooler	43	Mozzarella	Make unit	43			
Mozzarella	Walk-in cooler	35						
Ham	Upright cooler	40						
Sausage	Make unit	43						

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 5-205.11 Using a Handwashing Sink-Operation and Maintenance - PF - 0 pts - A bucket, condiment bottle, and wiping cloth were stored in a handsink during the start of the inspection. Handsinks shall only be used for handwashing and no other purpose. CDI - Items relocated away from the handsink.
- 14 4-601.11 (A) Equipment, Food-Contact Surfaces, Nonfood-Contact Surfaces, and Utensils - P - Several dough pans, a few pizza pans, the can opener blade, and the cutting board were soiled during the inspection. Food-contact surfaces of utensils and equipment shall be clean to sight and touch. CDI - Soiled dishes cleaned during the inspection.
- 19 3-501.16 (A)(1) Potentially Hazardous Food (Time/Temperature Control for Safety Food), Hot and Cold Holding - P - 0 pts - A few pieces of sausage pizza measured 108-110F on the buffet line. Manager stated that pizzas are removed from the buffet line after 30 minutes. Potentially hazardous food shall be held at 135F or above. To use time as a public health control for potentially hazardous food, submit a detailed procedure explaining the preparation and serving process to the local health department. The written procedure shall be in compliance with rule 3-501.19 Time as a Public Health Control in the 2009 Food Code. Contact Grayson Hodge at 336-703-3383 or hodgega@forsyth.cc if you plan to use time as a public health control. CDI - Pizza discarded.



Person in Charge (Print & Sign): Philip *First* Marlow *Last*

Philip Marlow

Regulatory Authority (Print & Sign): Grayson *First* Hodge *Last*

Grayson Hodge REHS

REHS ID: 2554 - Hodge, Grayson

Verification Required Date: 12 / 02 / 2016

REHS Contact Phone Number: (336) 703 - 3383



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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- 21 3-501.17 Ready-To-Eat Potentially Hazardous Food (Time/Temperature Control for Safety Food), Date Marking - PF - Repeat: Several items including: mozzarella cheese x2, cooked chicken x2, and turkey in the walk-in and reach-in coolers were not date marked or incorrectly date marked. Potentially hazardous food that is held in a food establishment for more than 24 hours shall be marked with the day of preparation or the day of discard. Potentially hazardous food can be held for a maximum of 4 days between 42-45F, or for 7 days at 41F or below. CDI - Food containers date marked.
- 37 3-305.11 Food Storage-Preventing Contamination from the Premises - C - 0 pts - 2 boxes of lettuce were stored on the floor of the walk-in cooler. Food shall be stored at least 6 inches above the floor. CDI - Boxes of lettuce relocated to shelving.
- 39 3-304.14 Wiping Cloths, Use Limitation - C - 0 pts 2 wet wiping cloths were stored on prep surfaces. Wet wiping cloths shall be stored in sanitizer solution maintained at the appropriate concentration. Provide sanitizer bucket or discard wet, disposable cloths after each use.
- 45 4-501.11 Good Repair and Proper Adjustment-Equipment - C - 0 pts - Replace the broken gasket on the reach-in cooler. Paint is chipping on the can opener blade. PVC pipe wrap is needed around the drain pipe of the condenser inside of the walk-in cooler. Equipment shall be maintained in good repair.
- 46 4-302.14 Sanitizing Solutions, Testing Devices - PF - There were no chlorine test strips available for the dish machine. Test strips or other testing devices shall be provided for each type of sanitizer used in a food establishment. Verification of test strips is required by 12-02-16, contact Grayson Hodge at 336-703-3383 or hodgega@forsyth.cc
- 49 5-205.15 System Maintained in Good Repair - C - 0 pts - Cold water was not dispensing at the middle handsink. Person in charge stated that the cold water was turned off because it makes a loud noise when it is in operation and a work order has been placed for repair. Cold water was turned on to verify that it is working./ The cold water faucet on the mop sink is missing. Replace. Plumbing systems shall be maintained in good repair.
- 53 6-201.11 Floors, Walls and Ceilings-Cleanability - C - Repeat: Wall tiles are missing in the women's restroom. Damaged baseboard present in the walk-in cooler. Recaulk around toilet bases where caulk is cracked or torn. RegROUT along floor tiles around the dish machine area. Floors, walls, and ceilings shall be smooth and easily cleanable./6-501.12 Cleaning, Frequency and Restrictions - C - Floor cleaning needed inside of the walk-in cooler and under the ice machine/upright freezer. Clean around vents in the dish room. Floors, walls, and ceilings shall be smooth and easily cleanable.



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✓
Spell



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