

Food Establishment Inspection Report

Score: 95

Establishment Name: DANBY HOUSE
Location Address: 3150 BURKE MILL RD
City: WINSTON-SALEM **State:** NC
Zip: 27103 **County:** 34 Forsyth
Permittee: KAPSON DANBY LLC
Telephone: (336) 659-0386
Wastewater System: Municipal/Community On-Site System
Water Supply: Municipal/Community On-Site Supply

Establishment ID: 3034160018
 Inspection Re-Inspection
Date: 02 / 13 / 2019 **Status Code:** A
Time In: 09 : 30 ^{am} _{pm} **Time Out:** 12 : 30 ^{am} _{pm}
Total Time: 3 hrs 0 minutes
Category #: IV
FDA Establishment Type: Nursing Home
No. of Risk Factor/Intervention Violations: 0
No. of Repeat Risk Factor/Intervention Violations: 0

| 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 | | |
| Employee Health .2652 | | | | | | | | |
| 2 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Management, employees knowledge; responsibilities & reporting | 3 | 13 | 0 | |
| 3 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Proper use of reporting, restriction & exclusion | 3 | 13 | 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 | |
| 5 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | No discharge from eyes, nose or mouth | 1 | 03 | 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 | |
| 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 | |
| 8 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Handwashing sinks supplied & accessible | 2 | 1 | 0 | |
| Approved Source .2653, .2655 | | | | | | | | |
| 9 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Food obtained from approved source | 2 | 1 | 0 | |
| 10 | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Food received at proper temperature | 2 | 1 | 0 | |
| 11 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Food in good condition, safe & unadulterated | 2 | 1 | 0 | |
| 12 | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Required records available: shellstock tags, parasite destruction | 2 | 1 | 0 | |
| Protection from Contamination .2653, .2654 | | | | | | | | |
| 13 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Food separated & protected | 3 | 13 | 0 | |
| 14 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Food-contact surfaces: cleaned & sanitized | 3 | 13 | 0 | |
| 15 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Proper disposition of returned, previously served, reconditioned, & unsafe food | 2 | 1 | 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 | |
| 17 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Proper reheating procedures for hot holding | 3 | 13 | 0 | |
| 18 | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Proper cooling time & temperatures | 3 | 13 | 0 | |
| 19 | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Proper hot holding temperatures | 3 | 13 | 0 | |
| 20 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Proper cold holding temperatures | 3 | 13 | 0 | |
| 21 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Proper date marking & disposition | 3 | 13 | 0 | |
| 22 | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Time as a public health control: procedures & records | 2 | 1 | 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 | |
| Highly Susceptible Populations .2653 | | | | | | | | |
| 24 | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Pasteurized foods used; prohibited foods not offered | 3 | 13 | 0 | |
| Chemical .2653, .2657 | | | | | | | | |
| 25 | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Food additives: approved & properly used | 1 | 03 | 0 | |
| 26 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Toxic substances properly identified stored, & used | 2 | 1 | 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 | |

| 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 | 03 | 0 | |
| 29 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Water and ice from approved source | 2 | 1 | 0 | |
| 30 | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Variance obtained for specialized processing methods | 1 | 03 | 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 | |
| 32 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Plant food properly cooked for hot holding | 1 | 03 | 0 | |
| 33 | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Approved thawing methods used | 1 | 03 | 0 | |
| 34 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Thermometers provided & accurate | 1 | 03 | 0 | |
| Food Identification .2653 | | | | | | | | |
| 35 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Food properly labeled: original container | 2 | 1 | 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 | |
| 37 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Contamination prevented during food preparation, storage & display | 2 | 1 | 0 | |
| 38 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Personal cleanliness | 1 | 03 | 0 | |
| 39 | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | Wiping cloths: properly used & stored | <input checked="" type="checkbox"/> | 03 | 0 | <input checked="" type="checkbox"/> |
| 40 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Washing fruits & vegetables | 1 | 03 | 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 | |
| 42 | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | Utensils, equipment & linens: properly stored, dried & handled | <input checked="" type="checkbox"/> | 03 | 0 | <input checked="" type="checkbox"/> |
| 43 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Single-use & single-service articles: properly stored & used | 1 | 03 | 0 | |
| 44 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Gloves used properly | 1 | 03 | 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 | <input checked="" type="checkbox"/> | 0 | <input checked="" type="checkbox"/> |
| 46 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Warewashing facilities: installed, maintained, & used; test strips | 1 | 03 | 0 | |
| 47 | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | Non-food contact surfaces clean | 1 | 03 | <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 | |
| 49 | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | Plumbing installed; proper backflow devices | 2 | <input checked="" type="checkbox"/> | 0 | <input checked="" type="checkbox"/> |
| 50 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Sewage & waste water properly disposed | 2 | 1 | 0 | |
| 51 | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | Toilet facilities: properly constructed, supplied & cleaned | 1 | <input checked="" type="checkbox"/> | 0 | <input checked="" type="checkbox"/> |
| 52 | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | Garbage & refuse properly disposed; facilities maintained | 1 | 03 | <input checked="" type="checkbox"/> | |
| 53 | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | Physical facilities installed, maintained & clean | 1 | <input checked="" type="checkbox"/> | 0 | |
| 54 | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | Meets ventilation & lighting requirements; designated areas used | 1 | 03 | <input checked="" type="checkbox"/> | |
| Total Deductions: | | | | | 5 | | | |



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 Wastewater System: Municipal/Community On-Site System
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 Permittee: KAPSON DANBY LLC
 Telephone: (336) 659-0386

Establishment ID: 3034160018
 Inspection Re-Inspection Date: 02/13/2019
 Comment Addendum Attached? Status Code: A
 Water sample taken? Yes No Category #: IV
 Email 1:
 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 |
|-----------|---------------------|------|------|----------|------|------|----------|------|
| servsafe | Tracy Pratt 4/20/23 | 0 | | | | | | |
| meatloaf | cook temp | 198 | | | | | | |
| potatoes | cook temp | 193 | | | | | | |
| broccoli | cook temp | 167 | | | | | | |
| hot water | 3 compartment sink | 133 | | | | | | |
| chlorine | dish machine | 100 | | | | | | |
| ham | walk in cooler | 38 | | | | | | |
| milk | walk in cooler | 37 | | | | | | |

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.

- 39 3-304.14 Wiping Cloths, Use Limitation - C Repeat violation. Wet wiping cloths stored in bucket of soapy water. Once they become wet, wiping cloths shall be held between uses in sanitizer at a concentration specified under 4-501.114. ✓ Spell
- 42 4-903.11 (A), (B) and (D) Equipment, Utensils, Linens and Single-Service and Single-Use Articles-Storing - C Repeat violation. Clean dish drainboard with racks of clean dishes on it had food debris present. Store clean dishes in a clean location that is not subject to splash or other contamination.
- 45 4-501.11 Good Repair and Proper Adjustment-Equipment - C Repeat violation(with improvements made). Repair freezer doors so that they seal properly on 3 door freezer. Recondition oxidized legs on 3 compartment sink. Replace torn gasket on walk in cooler. Resurface rusted/damaged racks in dry storage room. Recondition rusty shelf above 3 compartment sink. Recondition lower shelf and legs of corner prep table where oxidized. Replace missing sink stopper from left compartment of warewashing sink. Back prep table has been replaced since last inspection. Domestic equipment has been removed since last inspection. Equipment shall be in

Lock good repair.

Text

Person in Charge (Print & Sign): Tracy *First* Pratt *Last*
 Regulatory Authority (Print & Sign): Amanda *First* Taylor *Last*



REHS ID: 2543 - Taylor, Amanda

Verification Required Date: / /

REHS Contact Phone Number: (3 3 6) 7 0 3 - 3 1 3 6



North Carolina Department of Health & Human Services • Division of Public Health • Environmental Health Section • Food Protection Program
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- 47 4-601.11 (B) and (C) Equipment, Food-Contact Surfaces, Nonfood-Contact Surfaces, and Utensils - C 0 points. Minor dusting needed on backs of juice machine and ice machine. Clean debris from empty drawer on corner prep table. Non food contact surfaces of equipment shall be clean.
- 49 5-205.15 (B) System maintained in good repair - C Repeat violation. Repair minor drips at faucets on right side of 3 compartment sink, prep sink and back hand sink. Plumbing system shall be in good repair.
- 51 6-501.19 Closing Toilet Room Doors - C Repeat violation. Self closing mechanism needed on both restroom doors for employee restrooms. Restroom doors shall be self closing to prevent contamination of hands when leaving the restroom.
- 52 5-501.113 Covering Receptacles - C 0 points. Dumpster door observed open. Dumpsters shall be kept closed with tight fitting lids when not disposing of garbage.
- 53 6-501.12 Cleaning, Frequency and Restrictions - C 0 points. Additional floor cleaning needed under shelving and equipment in main kitchen. Dust overhead vent near dish machine. Remove debris from can wash. Physical facilities shall be kept clean.
- 54 6-303.11 Intensity-Lighting - C 0 points. Many new light bulbs throughout kitchen installed since last inspection. Lighting now compliant at hot holding line. Replace missing bulb under hoods. Current lighting at stove 35-40 footcandles. Increase to 50 footcandles.



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