

Food Establishment Inspection Report

Score: 96

Establishment Name: WALMART DELI

Establishment ID: 3034020391

Location Address: 4550 KESTER MILL RD

Inspection Re-Inspection

City: WINSTON SALEM

State: NC

Date: 08 / 14 / 2019 Status Code: A

Zip: 27103 County: 34 Forsyth

Time In: 09 : 49 am pm Time Out: 12 : 44 am pm

Permittee: WALMART INC

Total Time: 2 hrs 55 minutes

Category #: III

Telephone: _____

FDA Establishment Type: Deli Department

Wastewater System: Municipal/Community On-Site System

No. of Risk Factor/Intervention Violations: 2

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		
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 type="checkbox"/>	<input type="checkbox"/>	<input checked="" 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 checked="" type="checkbox"/>	<input type="checkbox"/>	Proper hot holding temperatures	3	X	0	X
20	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Proper cold holding temperatures	3	X	0	X
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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input 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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Wiping cloths: properly used & stored	1	03	0	
40	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" 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	1	03	X	X
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	1	X	X
46	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Warewashing facilities: installed, maintained, & used; test strips	1	03	0	
47	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Non-food contact surfaces clean	1	03	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	
49	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Plumbing installed; proper backflow devices	2	X	0	
50	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Sewage & waste water properly disposed	2	1	0	
51	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Toilet facilities: properly constructed, supplied & cleaned	1	03	0	
52	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Garbage & refuse properly disposed; facilities maintained	1	03	0	
53	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Physical facilities installed, maintained & clean	1	03	0	
54	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Meets ventilation & lighting requirements; designated areas used	1	03	0	
Total Deductions:								4



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 County: 34 Forsyth Zip: 27103
 Wastewater System: Municipal/Community On-Site System
 Water Supply: Municipal/Community On-Site System
 Permittee: WALMART INC
 Telephone: _____

Establishment ID: 3034020391
 Inspection Re-Inspection Date: 08/14/2019
 Comment Addendum Attached? Status Code: A
 Water sample taken? Yes No Category #: III
 Email 1: _____
 Email 2: _____
 Email 3: _____

Temperature Observations

Cold Holding Temperature is now 41 Degrees or less

Item	Location	Temp	Item	Location	Temp	Item	Location	Temp
C. Wings	final cook	184	Chicken Salad	deli display case	44	Italian Sub	walk-in cooler	39
C. Tenders	final cook	180	Broccoli Salad	deli display case	46	R Beef Sub	walk-in cooler	39
Roast Beef	deli display case	40	Fried Chicken	deli hot bar	172	PC Chicken	hot holding	110
O R Turkey	deli display case	36	Macaroni	deli hot bar	196	C. Sandwich	hot holding	121
D F Turkey	deli display case	38	M. Potatoes	deli hot bar	185	Egg Rolls	hot holding	112
Ham	deli display case	40	Tso's Chicken	deli hot bar	160	Hot Water	3-compartment sink	148
Deli Chicken	deli display case	41	Rotisserie	deli hot bar	167	Quat Sani	3-compartment sink	300
Rotini Salad	deli display case	44	Spicy Chicken	deli hot bar	157	Serv Safe	J. Myers 7-10-20	00

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.

- 19 3-501.16 (A)(1) Potentially Hazardous Food (Time/Temperature Control for Safety Food), Hot and Cold Holding - P: The following items prepared 3 hours prior measured at temperatures below 135 F: (display case) 12 chicken sandwiches (109 F-121 F), 6 containers of popcorn chicken (110 F), 6 packs of egg rolls (110 F-112 F) and 4 hot dogs (110 F). Potentially hazardous food shall be maintained at a temperature of 135 F or above. CDI: PIC discarded items and increased the temperature on the hot holding units.
- 20 3-501.16 (A)(2) and (B) Potentially Hazardous Food (Time/Temperature Control for Safety Food), Hot and Cold Holding-REPEAT - P: The following items measured at temperatures above 41 F: Rotini pasta salad (43 F-44 F), broccoli salad (46 F), chicken salad (44 F). Potentially hazardous food shall be maintained at a temperature of 41 F or below. CDI: The ambient temperature of the unit measured at 44 F. It was determined that an ice build up on the condenser caused the unit to freeze and made it unable to hold items at 41 F or below. Items were moved to the walk-in cooler until ice build up was removed from the unit.
- 42 4-903.11 (A), (B) and (D) Equipment, Utensils, Linens and Single-Service and Single-Use Articles-Storing - C: Utensils are being stored in a bucket soiled with food debris on the slicing station. Utensils shall be stored in a clean, dry location. CDI: PIC removed items to be cleaned

Lock Text

Person in Charge (Print & Sign): Everette *First* Pearson *Last*
 Regulatory Authority (Print & Sign): Victoria *First* Murphy *Last*




REHS ID: 2795 - Murphy, Victoria

Verification Required Date: / /

REHS Contact Phone Number: (336) 703 - 3814



North Carolina Department of Health & Human Services • Division of Public Health • Environmental Health Section • Food Protection Program
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- 45 4-501.11 Good Repair and Proper Adjustment-Equipment - C: Replace missing handle on deli case/Repair sanitizer dispenser. Equipment shall be maintained in good repair. *PIC stated that a work order has already been placed for the issues* 0-point
- 49 5-205.15 (B) System maintained in good repair - C: The following items need repair: leaking pipe at sanitizer vat of 3-compartment sink, leaking atmospheric backflow preventer, and stopper in the sanitizer vat of the 3-compartment sink. Plumbing fixtures shall be maintained in good repair.



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