Food Establishment Inspection Report														Score: <u>98.5</u>						
											tablishment ID: 3034020225	•				_				
					ress: 420 STRATFORD ROAD															
City: WINSTON SALEM State: NC								Date: 10 / 13 / 20 20 Status Code: A												
Zip: 27103 County: 34 Forsyth								Time In: <u>∅ 9</u> : <u>3 ∅ ⊗ am</u> Time Out: <u>1 ∅ : 5 ∅ ⊗ am</u>												
Permittee: HARRIS TEETER, INC.									Total Time: 1 hr 20 minutes											
	Telephone: (336) 723-2305										Category #: _III									
	Wastewater System: ⊠Municipal/Community ☐ On-Site Sys									-to	FDA Establishment Type: Meat and Poultry Department									
					y: ⊠Municipal/Community □On-				•	SIC	111	Ν	lo.	of	Risk Factor/Intervention Violations	s: <u>1</u>				
_	ate	er S	up	pli	y: Amunicipal/Community Don-	Sile	Su	pρ	ıy			Ν	0.	of	Repeat Risk Factor/Intervention V	iolatior	ıs:	_		_
Foodborne Illness Risk Factors and Public Health Interventions									Good Retail Practices											
Risk factors: Contributing factors that increase the chance of developing foodborne illnes Public Health Interventions: Control measures to prevent foodborne illness or injury.										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				╁	IN	Compliance Status	OUT CDI R VR								
Ç	Supe	rvis	rvision .2652								Safe Food and V			nd W	<u> </u>					
1	×				PIC Present; Demonstration-Certification by accredited program and perform duties	2	0			28	8 🗆				Pasteurized eggs used where required	1 0.5	5 0			
		oye	e He	alth	.2652 Management, employees knowledge;			- T-		2	9 🛛				Water and ice from approved source	21][0			
2	×				responsibilities & reporting	3 1.5		_ L		30	0 🗆				Variance obtained for specialized processing methods	1 0.5	5 0			Ē
3	X			:- D	Proper use of reporting, restriction & exclusion	3 1.5	0	4		1 —	$\overline{}$	Tei	mpe	ratu	re Control .2653, .2654					
	3000 X	□	gien	IC P	Proper eating, tasting, drinking, or tobacco use	2 1		7		3	1 🛛				Proper cooling methods used; adequate equipment for temperature control	1 0.5	5 0			E
⊢	X				No discharge from eyes, nose or mouth	H	0			32	2 🗆				Plant food properly cooked for hot holding	1 0.5	30			E
_	_		a Ca	onta	mination by Hands .2652, .2653, .2655, .2656	L 0.3		-11		3	3 🗷				Approved thawing methods used	1 0.5	30			
-	×		go		Hands clean & properly washed	4 2	0			34	4 🗵				Thermometers provided & accurate	1 0.5	5 0			
7	×				No bare hand contact with RTE foods or pre-	3 1.5	ПП	1	$\exists \Box$	_	Food	_	$\overline{}$	cati	on .2653					
-		×			approved alternate procedure properly followed Handwashing sinks supplied & accessible	2 🗶		3 [70	ΙЬ	5 🗵	_	_		Food properly labeled: original container	21	0			L
		ove	d So	urce				-			$\overline{}$	$\overline{}$	$\overline{}$	t Fo	ood Contamination .2652, .2653, .2654, .2656, Insects & rodents not present; no unauthorized					F
	×				Food obtained from approved source	21	0][30	+	×	+		animals Contamination prevented during food		×	<u> </u>		L
10				X	Food received at proper temperature	21	0			l⊢	7 🛚				preparation, storage & display	-+	+		_	L
11	×				Food in good condition, safe & unadulterated	21	0	10		I⊢	8 🗵		1		Personal cleanliness	1 0.5	+-	-	-	L
12			X		Required records available: shellstock tags, parasite destruction	21	0		5	3	9 🛛		1		Wiping cloths: properly used & stored	1 0.5	0			L
F	rote	ection from Contamination .2653, .2654								IЩ	40									L
13	X	Food separated & protected 3 15 0 -								T	$\overline{}$	$\overline{}$	f Ut	tensils .2653, .2654					F	
14	X				Food-contact surfaces: cleaned & sanitized	3 1.5	0][├	1 🗆	X			In-use utensils: properly stored Utensils, equipment & linens: properly stored,	1	+		X	Ł
15	×				Proper disposition of returned, previously served, reconditioned, & unsafe food	21	0			1	2 🔀				dried & handled	1 0.5	5 0		Ш	L
F	ote	ntial		azar	dous Food Tlme/Temperature .2653					4:	3 🗷]		Single-use & single-service articles: properly stored & used	1 0.5	5 0			E
16			X		Proper cooking time & temperatures	3 1.5	0][4	4 🛛		1		Gloves used properly	1 0.5	5 0			E
17			X		Proper reheating procedures for hot holding	3 1.5	0][1	Т	Т	and	Equ	Leguipment .2653, .2654, .2663 Equipment, food & non-food contact surfaces	-	F	Π		F
18				X	Proper cooling time & temperatures	3 1.5	0 [4!	5 🗷]		approved, cleanable, properly designed, constructed, & used	21	0			
19			X		Proper hot holding temperatures	3 1.5				4	6 🛛				Warewashing facilities: installed, maintained, 8 used; test strips	1 0.5	5 0			Ē
20	×				Proper cold holding temperatures	3 1.5	0][4	7 🛛]		Non-food contact surfaces clean	1 0.5	5 0			Ē
21				×	Proper date marking & disposition	3 1.5	0			F	Phys	ical	Fac	ilitie	es .2654, .2655, .2656					
22			X		Time as a public health control: procedures & records	21	0			48	8 🗷				Hot & cold water available; adequate pressure	21	0			
(cons	ume	r Ac	lvis	ory .2653					4	9 🗆	X			Plumbing installed; proper backflow devices	21	X			
⊢	×				Consumer advisory provided for raw or undercooked foods	1 0.5	0][50	0 🛛				Sewage & waste water properly disposed	21	0			F
		y Sı		ptib	le Populations .2653 Pasteurized foods used; prohibited foods not					5	1 🛛				Toilet facilities: properly constructed, supplied & cleaned	1 0.5	5 0			E
24	_	oice!	X		offered .2653, .2657	3 1.5	LOLL	니		5	2 🔀	Е			Garbage & refuse properly disposed; facilities maintained	1 0.5	5 0			E
25			×		.2053, .2057 Food additives: approved & properly used	1 0.5		7/-		ا ⊢	3 🔀		1		Physical facilities installed, maintained & clean		+			F
H	X				Toxic substances properly identified stored, & used	21		7 -		5	+		_	1	Meets ventilation & lighting requirements;		50			F
تا	سكا	ı]			ساحا	العا	-11	<u> </u>	٦١٧.	.	1	1	1	designated areas used	كالــا	14	1"	ı۳	1



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

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



Total Deductions:

					<u>tablish</u> ı	ment l	nspection	Report			
Establishme	nt Name: HARRIS TEE	ETER FOOI	D STAND #155	MM	Establish	ment ID	:_3034020225				
Location Ac	ddress: _ ^{420 STRATFOI} ГОN SALEM	RD ROAD	Sta	ate: NC			Re-Inspection Attached?	Date: <u>10/13/20</u> Status Code:			
County: 34	Forsyth		Zip: 27103		Water samp	le taken?	Yes X No	Category #:			
Water Supply	System: ☑ Municipal/Comr ': ☑ Municipal/Comr HARRIS TEETER, INC.	nunity 🗌 C			Email 1: Email 2:						
	(336) 723-2305	·			Email 3:						
r eleptione.			Tompo	ratura Oh		20					
				erature Ob							
ltem shrimp	Location display case		Item lamb	Location walk in coole		Temp 39	ltem	Location	Temp		
salmon	display case	41	ground beef	walk in coole	er	40					
crab cake	display case	41	hot water	three comp s	sink	129					
ambient	seafood display case	36	quat sani	three comp s	sink	200					
pork	display case	39	CFPM	Bo C. 3/27/2	4	00					
hamburger	display case	39									
chicken	display case	37	•								
ambient	walk in cooler	34.1									
section	12 Removing Dead or near display case fan mises at a frequency t	. Dead or	trapped birds	, insects, rod	ents, and o	ther pest	ts shall be remo	ved from control			
in-use ι	2 In-Use Utensils, Bet utensils in a clean, dry urticles to the drain.										
Lock Text		Fir	st.	La	s t		Λ				
Person in Char	rge (Print & Sign):			Crews		14	γ	ر ک	/		
	thority (Print & Sign): ^{Sh}	<i>Fir</i> annon	st	La: Maloney	st	H	MINON.	Wilson	M		
	REHS ID:	2826 - Ma	aloney, Shar	nnon		Verifica	ation Required Date	ie. / /			
		,	.,,			verille	mon Negulieu Da				

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Establishment Name: HARRIS TEETER FOOD STAND #155 MM Establishment ID: 3034020225

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.



5-205.15 (B) System maintained in good repair - Repair hose from sanitizer on three compartment sink that is leaking. Repair drain at slacking sink that is backed up with water and not draining properly. Maintain a plumbing system in good repair.





Establishment Name: HARRIS TEETER FOOD STAND #155 MM Establishment ID: 3034020225

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: HARRIS TEETER FOOD STAND #155 MM Establishment ID: 3034020225

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: HARRIS TEETER FOOD STAND #155 MM Establishment ID: 3034020225

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.



