

Food Establishment Inspection Report

Score: 92.5Establishment Name: DICKEY S BARBECUE PITEstablishment ID: 3034012372Location Address: 615 JONESTOWN RD☒ Inspection ☐ Re-InspectionCity: WINSTON SALEMState: NCDate: 02 / 27 / 2015 Status Code: UZip: 27103County: 34 ForsythTime In: 11 : 45 ☒ am ☐ pmTime Out: 02 : 30 ☐ am ☒ pmTotal Time: 2 hrs 45 minutesPermittee: BF FOODS LLCCategory #: IIITelephone: (336) 790-3246FDA Establishment Type: Fast Food RestaurantWastewater System: ☒ Municipal/Community ☐ On-Site SystemNo. of Risk Factor/Intervention Violations: 4Water Supply: ☒ Municipal/Community ☐ On-Site SupplyNo. of Repeat Risk Factor/Intervention Violations:

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 type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	PIC Present; Demonstration-Certification by accredited program and perform duties	2	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<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"/>	<input type="checkbox"/>	<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"/>	<input type="checkbox"/>	<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"/>	<input type="checkbox"/>	<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"/>	<input type="checkbox"/>	<input type="checkbox"/>
Preventing Contamination by Hands .2652, .2653, .2655, .2656										
6	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Hands clean & properly washed	4	<input checked="" type="checkbox"/>	0	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<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"/>	<input type="checkbox"/>	<input type="checkbox"/>
8	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Handwashing sinks supplied & accessible	2	<input checked="" type="checkbox"/>	0	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input 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"/>	<input type="checkbox"/>	<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"/>	<input type="checkbox"/>	<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"/>	<input type="checkbox"/>	<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"/>	<input type="checkbox"/>	<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"/>	<input type="checkbox"/>	<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 type="checkbox"/>	<input type="checkbox"/>	<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"/>	<input type="checkbox"/>	<input type="checkbox"/>
Potentially Hazardous Food Time/Temperature .2653										
16	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper cooking time & temperatures	3	1.5	0	<input type="checkbox"/>	<input type="checkbox"/>	<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"/>	<input type="checkbox"/>	<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"/>	<input type="checkbox"/>	<input type="checkbox"/>
19	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper hot holding temperatures	3	1.5	0	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
20	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper cold holding temperatures	3	1.5	0	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
21	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper date marking & disposition	3	1.5	0	<input type="checkbox"/>	<input type="checkbox"/>	<input 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"/>	<input type="checkbox"/>	<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"/>	<input type="checkbox"/>	<input type="checkbox"/>
Highly Susceptible Populations .2653										
24	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Pasteurized foods used; prohibited foods not offered	3	1.5	0	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Chemical .2653, .2657										
25	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food additives: approved & properly used	1	0.5	0	<input type="checkbox"/>	<input type="checkbox"/>	<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"/>	<input type="checkbox"/>	<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"/>	<input type="checkbox"/>	<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"/>	<input type="checkbox"/>	<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"/>	<input type="checkbox"/>	<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"/>	<input type="checkbox"/>	<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"/>	<input type="checkbox"/>	<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"/>	<input type="checkbox"/>	<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"/>	<input type="checkbox"/>	<input type="checkbox"/>
34	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Thermometers provided & accurate	1	0.5	0	<input type="checkbox"/>	<input type="checkbox"/>	<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"/>	<input type="checkbox"/>	<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"/>	<input type="checkbox"/>	<input type="checkbox"/>
37	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Contamination prevented during food preparation, storage & display	2	1	0	<input type="checkbox"/>	<input 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"/>	<input type="checkbox"/>	<input type="checkbox"/>
39	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Wiping cloths: properly used & stored	1	<input checked="" type="checkbox"/>	0	<input type="checkbox"/>	<input 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"/>	<input type="checkbox"/>	<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"/>	<input type="checkbox"/>	<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"/>	<input type="checkbox"/>	<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"/>	<input type="checkbox"/>	<input type="checkbox"/>
44	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Gloves used properly	1	0.5	0	<input type="checkbox"/>	<input type="checkbox"/>	<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	<input checked="" type="checkbox"/>	0	<input type="checkbox"/>	<input 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 type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
47	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Non-food contact surfaces clean	1	<input checked="" type="checkbox"/>	0	<input type="checkbox"/>	<input type="checkbox"/>	<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"/>	<input type="checkbox"/>	<input type="checkbox"/>
49	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Plumbing installed; proper backflow devices	2	1	0	<input type="checkbox"/>	<input 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"/>	<input type="checkbox"/>	<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"/>	<input type="checkbox"/>	<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"/>	<input type="checkbox"/>	<input type="checkbox"/>
53	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Physical facilities installed, maintained & clean	1	<input checked="" type="checkbox"/>	0	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
54	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Meets ventilation & lighting requirements; designated areas used	1	0.5	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Total Deductions:							7.5			

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Comment Addendum to Food Establishment Inspection Report

Establishment Name: DICKEY S BARBECUE PIT

Establishment ID: 3034012372

Location Address: 615 JONESTOWN RD

☒ Inspection ☐ Re-Inspection Date: 02/27/2015

City: WINSTON SALEM State: NC

Comment Addendum Attached? ☐ Status Code: U

County: 34 Forsyth Zip: 27103

Category #: III

Wastewater System: ☒ Municipal/Community ☐ On-Site System

Email 1: jbrooks@bffoodsnc.com

Water Supply: ☒ Municipal/Community ☐ On-Site System

Email 2:

Permittee: BF FOODS LLC

Email 3:

Telephone: (336) 790-3246

Temperature Observations

Item	Location	Temp	Item	Location	Temp	Item	Location	Temp
slaw	make top	39	hot water	prep sink	120			
lettuce	make top	43						
baked beaks	hot well	169						
green beans	hot well	173						
mashed	hot well	182						
bbq	hot hold unit	146						
bbq	hot hold unit	148						
chicken	final cook	181						

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.

- 1 2-102.12 Certified Food Protection Manager - C - 0 points - Person in charge during the inspection does not have food protection manager credential. By August 11, 2015 (180 days from date of permit issuance), PIC during the inspection must have ANSI accredited food protection manager certification and be present during all hours of operation.
- 6 2-301.14 When to Wash - P - Staff beginning to work with food after returning from breaks without first washing hands. Employee observed touching face and did not wash hands. Food employees shall clean their hands immediately before engaging in food preparation including working with exposed food, clean equipment and utensils, and unwrapped single service articles and after touching bare human body parts (other than clean hands). CDI - Employees prompted to wash hands. / 2-301.12 Cleaning Procedure - P - Employee observed rinsing hands in hand wash sink. Food employees shall use the following procedure: rinse hands under clean, running warm water, apply soap and rub hands together vigorously for 10-15 seconds, thoroughly rinse hands under running warm water, dry hands, and then use papertowel to turn off faucet handles. CDI - EHS instructed employee on proper handwashing procedure.
- 8 5-205.11 Using a Handwashing Sink-Operation and Maintenance - PF - Wet wiping cloth stored in front handwash sink. A handwashink sink must not be used for purposes other than handwashing. CDI - PIC removed wiping cloth.



Person in Charge (Print & Sign): Ichrisa First Glenn Last

Regulatory Authority (Print & Sign): Carla First Day Last

REHS ID: 2405 - Day, Carla

Verification Required Date: 03 / 09 / 2015

REHS Contact Phone Number: (336) 703 - 3144



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- 14 4-601.11 (A) Equipment, Food-Contact Surfaces, Nonfood-Contact Surfaces, and Utensils - P - Onion chopper has dried food debris. / Food pans and sheet pans have build up. / Food pans have sticker residue. Equipment food contact surfaces shall be clean to sight and touch. Chopper returned for cleaning. Verification Visit Required
- 39 3-304.14 Wiping Cloths, Use Limitation - C - Sanitizer bucket stored on floor behind cash register. Containers of chemical sanitizing solutions in which wet wiping cloths are held between uses shall be stored off the floor and used in a manner that prevents contamination of food, equipment, utensils, and single service articles. / Solution in sanitizer bucket was soiled. Chemical sanitizing solutions in which wet wiping cloths are held shall be free of food debris and visible soil. / Wet wiping cloth stored on handwash sink splash guard. Cloths in use for wiping counters and other equipment surfaces shall be held between uses in a chemical sanitizer container. CDI - PIC removed wiping cloth.
- 45 4-501.11 Good Repair and Proper Adjustment-Equipment - C - Equipment repair/replacement necessary on: chipped and rusting shelving in walk in cooler, reach in cooler, and reach in freezer, repair prep sink drain board so that it is sloped to drain, repair chipped face plates on hot hold unit and hot well units.
- 46 4-302.14 Sanitizing Solutions, Testing Devices - PF - Sanitizer test strips not available during the inspection. Test strips for sanitizing solutions shall be provided. Verification Visit Required.
- 47 4-602.13 Nonfood Contact Surfaces - C - Equipment cleaning necessary on: all shelving in reach in units, high shelving, under shelving above 3 compartment sink, clean dish storage shelving, excessive carbon build up inside of smoker, exposed plumbing and legs of equipment.
- 53 Floors: Concrete floor finish has worn away throughout the kitchen. Repair concrete floor so that it is smooth and easily cleanable. / Baseboard underneath warewashing sink has peeled away from wall. Repair.
Walls: Clean walls above prep table, prep sink, warewashing sink. Replace melted corner trim piece in between prep table and prep sink.
Ceilings: Dust/carbon build up on ceiling tiles around smoker. Clean.
- 54 6-303.11 Intensity-Lighting - C - 0 points - In the restrooms, lighting measures 10-14 foot candles at the toilets and handwash sink. Increase lighting to a minimum of 20 foot candles.



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✓
Spell



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Spell

