

Food Establishment Inspection Report

Score: 95.5

Establishment Name: ADDICTION RECOVERY CARE ASSOC

Establishment ID: 3034160038

Location Address: 1931 UNION CROSS RD

☒ Inspection ☐ Re-Inspection

City: WINSTON SALEM

State: NC

Date: 03 / 15 / 2017 Status Code: A

Zip: 27107

County: 34 Forsyth

Time In: 01 : 45 ^{am}_{pm} Time Out: 04 : 15 ^{am}_{pm}

Total Time: 2 hrs 30 minutes

Permittee: ARCA INC

Category #: IV

Telephone: (336) 784-9470

FDA Establishment Type: Nursing Home

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: _____

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	15	0	<input type="checkbox"/>
3	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper use of reporting, restriction & exclusion				3	15	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	05	0	<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	2	<input checked="" type="checkbox"/>	<input checked="" 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	15	0	<input type="checkbox"/>
8	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Handwashing sinks supplied & accessible				2	1	0	<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"/>
10	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Food received at proper temperature				2	1	0	<input type="checkbox"/>
11	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Food in good condition, safe & unadulterated				2	1	<input checked="" type="checkbox"/>	<input checked="" 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 type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Food separated & protected				3	<input checked="" type="checkbox"/>	0	<input checked="" type="checkbox"/>
14	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food-contact surfaces: cleaned & sanitized				3	15	0	<input 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	15	0	<input type="checkbox"/>
17	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Proper reheating procedures for hot holding				3	15	0	<input type="checkbox"/>
18	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Proper cooling time & temperatures				3	15	0	<input type="checkbox"/>
19	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Proper hot holding temperatures				3	15	0	<input type="checkbox"/>
20	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper cold holding temperatures				3	15	0	<input type="checkbox"/>
21	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper date marking & disposition				3	15	0	<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"/>
Consumer Advisory .2653											
23	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Consumer advisory provided for raw or undercooked foods				1	05	0	<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	15	0	<input type="checkbox"/>
Chemical .2653, .2657											
25	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Food additives: approved & properly used				1	05	0	<input type="checkbox"/>
26	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Toxic substances properly identified stored, & used				2	1	<input checked="" type="checkbox"/>	<input checked="" 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	05	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	05	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	05	0	<input type="checkbox"/>
32	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Plant food properly cooked for hot holding				1	05	0	<input type="checkbox"/>
33	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Approved thawing methods used				1	05	0	<input type="checkbox"/>
34	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Thermometers provided & accurate				1	05	0	<input type="checkbox"/>
Food Identification .2653											
35	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Food properly labeled: original container				2	1	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Prevention of Food Contamination .2652, .2653, .2654, .2656, .2657											
36	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Insects & rodents not present; no unauthorized animals				2	1	<input checked="" type="checkbox"/>	<input checked="" 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	05	0	<input type="checkbox"/>
39	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Wiping cloths: properly used & stored				1	05	0	<input type="checkbox"/>
40	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Washing fruits & vegetables				1	05	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	05	0	<input type="checkbox"/>
42	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Utensils, equipment & linens: properly stored, dried & handled				1	05	0	<input type="checkbox"/>
43	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Single-use & single-service articles: properly stored & used				1	05	<input checked="" type="checkbox"/>	<input type="checkbox"/>
44	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Gloves used properly				1	05	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	<input checked="" type="checkbox"/>	0	<input checked="" 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"/>
47	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Non-food contact surfaces clean				1	05	<input checked="" 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"/>
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	05	0	<input type="checkbox"/>
52	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Garbage & refuse properly disposed; facilities maintained				1	05	0	<input type="checkbox"/>
53	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Physical facilities installed, maintained & clean				<input checked="" type="checkbox"/>	05	0	<input checked="" type="checkbox"/>
54	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Meets ventilation & lighting requirements; designated areas used				1	<input checked="" type="checkbox"/>	0	<input checked="" type="checkbox"/>
Total Deductions:										4.5	

North Carolina Department of Health & Human Services • Division of Public Health • Environmental Health Section • Food Protection Program
DHHS is an equal opportunity employer.CR
Off

Comment Addendum to Food Establishment Inspection Report

Establishment Name: ADDICTION RECOVERY CARE ASSOC

Establishment ID: 3034160038

Location Address: 1931 UNION CROSS RD

☒ Inspection ☐ Re-Inspection Date: 03/15/2017

City: WINSTON SALEM State: NC

Comment Addendum Attached? ☐ Status Code: A

County: 34 Forsyth Zip: 27107

Category #: IV

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

Email 1: annec@arcanc.org

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

Email 2:

Permittee: ARCA INC

Email 3:

Telephone: (336) 784-9470

Temperature Observations

Item	Location	Temp	Item	Location	Temp	Item	Location	Temp
lettuce	walk in cooler	40						
ambient	walk in cooler	41						
ambient	reach in	42						
hot water	three comp	120						
quat sanitizer	three comp sink	200						
servsafe	Michael Marks 11-26-18	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.

- 6 2-301.14 When to Wash - P: 0 pts. One employee washed hands, then recontaminated hands by turning off the faucets without using a barrier, like a paper towel. Hands shall be washed when contaminated. CDI: Hands rewashed and paper towel used to turn off faucet after drying off hands.
- 11 3-202.15 Package Integrity - PF: . 0 pts. One dented can of baked beans. Packages shall prevent ingredients inside from potential adulteration. CDI: Can segregated.
- 13 3-302.11 Packaged and Unpackaged Food-Separation, Packaging, and Segregation - P: Raw bacon and raw sausage stored in walk in cooler above ready-to-eat cut melons. Foods shall be protected from cross contamination while in storage. CDI: Melons moved to another location in cooler.



Person in Charge (Print & Sign): Michael ^{First} Marks ^{Last}

Regulatory Authority (Print & Sign): Michelle ^{First} Bell REHS ^{Last}

REHS ID: 2464 - Bell, Michelle

Verification Required Date: / /

REHS Contact Phone Number: (336) 703 - 3141



North Carolina Department of Health & Human Services • Division of Public Health • Environmental Health Section • Food Protection Program
DHHS is an equal opportunity employer.



Comment Addendum to Food Establishment Inspection Report

Establishment Name: ADDICTION RECOVERY CARE ASSOC

Establishment ID: 3034160038

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.



- 26 7-102.11 Common Name-Working Containers - PF: One spray bottle unlabeled. Maintain chemicals labeled with common name of the food. CDI: Bottle ingredients discarded.//7-201.11 Separation-Storage - P: Disinfectant spray on shelving above prep surface. First aid chemicals (in kit) on same shelf. Maintain chemicals stored to prevent contamination of food, equipment, etc. CDI: Chemicals moved to chemical shelving.
- 35 3-302.12 Food Storage Containers Identified with Common Name of Food - C: Sugar and grits in containers unlabeled. Food removed from original bulk container that is not easily recognizable, like rice or pasta, shall be labeled with common name of food. CDI: Sugar and grits labeled.
- 36 6-501.111 Controlling Pests - PF: 0 pts. Bird entered kitchen from outside during inspection. Ensure facility is protected from the entrance of pests. CDI: Bird removed.
- 37 3-305.12 Food Storage, Prohibited Areas - C: 0 pts. Wrap condensate lines in walk in cooler and freezers with pvc flexible pipe wrap (as a secondary containment). Food shall not be stored under condensate lines that have not been wrapped in secondary containment.
- 43 4-502.13 Single-Service and Single-Use Articles-Use Limitations - C: 0 pts. Barbecue and chili containers being used to store condiment packets. Single use articles are required to be used as designed for original purpose, then discarded. Replace with multi-use containers.
- 45 4-501.11 Good Repair and Proper Adjustment-Equipment - C: REPEAT: Floor for outside walk in freezer buckling/rusting. Contact equipment manufacturer for proper repair./ Shelving in three door reach in chipping on ends. Handles of walk in coolers (inside and out) rusting/losing finish. Toilet fixture cracked at base. Metal flaking in one hood (over storage shelving). Paint chipping from outside of hood (over cookline). Coved base (stainless or aluminum) needed in walk in coolers and freezers either where walls/floors create 90 degree angle or where gaps exist due to panels being improperly installed/settling over time. Equipment shall be maintained in good repair.
- 46 4-501.14 Warewashing Equipment, Cleaning Frequency - C: Sanitizer vat and drainboard soiled. Warewashing equipment shall be cleaned at least every 24 hours and as frequently as needed.



Comment Addendum to Food Establishment Inspection Report

Establishment Name: ADDICTION RECOVERY CARE ASSOC

Establishment ID: 3034160038

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.



- 47 4-601.11 (B) and (C) Equipment, Food-Contact Surfaces, Nonfood-Contact Surfaces, and Utensils - C: 0 pts. Oil container, spice shelving, walk in cooler, and fryer lightly soiled. Maintain nonfood contact surfaces clean.
- 49 5-205.15 System Maintained in Good Repair - P: 0 pts. Small leak present at mopsink and left faucet of three comp sink. Maintain plumbing system in good repair.
- 53 6-201.11 Floors, Walls and Ceilings-Cleanability - C: REPEAT: Chipping paint from walls throughout facility. Some chipping paint on ceilings. Seal any gaps around pipe penetrations into ceiling. Grout wearing from mopsink. Seal escutcheon plates to walls where needed. Floors, walls, and ceilings shall be easily cleanable.//6-501.12 Cleaning, Frequency and Restrictions - C: Clean any exposed piping and maintain clean. Clean walls at tops of baseboards/windowsills. Floors, walls, and ceilings shall be maintained clean.//6-201.13 Floor and Wall Junctions, Coved, and Enclosed or Sealed - C: Coved base missing in some areas of kitchen and creating 90 degree floor/wall junctions. Add coved base in these areas.
- 54 6-303.11 Intensity-Lighting - C: Light burned out in 2nd walk in freezer. Lighting low in the following areas (in ftd): walk in freezer 1: 4 ftd, cookline 24-57, and serving line 22-34. Increase lighting to 10 ftd in food storage areas and 50 ftd in food prep areas.//6-202.11 Light Bulbs, Protective Shielding - C: A couple of lights unshielded and one shield cracked. Maintain lightbulbs shielded or shatterproof.//6-501.110 Using Dressing Rooms and Lockers - C: Employee purse stored in drawer with equipment. Maintain employee items stored in employee area and to prevent contamination of equipment.



Comment Addendum to Food Establishment Inspection Report

Establishment Name: ADDICTION RECOVERY CARE ASSOC

Establishment ID: 3034160038

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.

✓
Spell



Comment Addendum to Food Establishment Inspection Report

Establishment Name: ADDICTION RECOVERY CARE ASSOC

Establishment ID: 3034160038

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.

✓
Spell

