## **Food Establishment Inspection Report**

Report Score: 93	
LEMMONS Establishment ID: 3034160022	
Date: 07/01/2022 Status Code: A  Time In: 10:00 AM Time Out: 1:55 PM  Category#: I	
FDA Establishment Type: Nursing Home	—
No. of Risk Factor/Intervention Violations: 3  No. of Repeat Risk Factor/Intervention Violations: 0	

	٧			upply: nicipal/Community	, _								No	o. c	of F	Repeat Risk Factor/Intervention Violations: 0			<u> </u>			
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											Good Retail Practices  Good Retail Practices: Preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.											
	Compliance Status							OUT CDI R VR					Compliance Status									
	Sup	rvisi	on	.2652							Sa				Г							
1	X	оит	N/A	PIC Present, demonstrates knowledge, & performs duties	1		0						оит	N/A			. 0	-	0	$\Box$		
2	M	оит	N/A	Certified Food Protection Manager	1		0			1	31			-	$\dashv$	Water and ice from approved source 2	!	1 (	0	$\dashv$		
			Healt	_			-				32	IN	оит	<b>)X</b> A		Variance obtained for specialized processing methods	:	1 (	0			
3	i)X	оит		Management, food & conditional employee; knowledge, responsibilities & reporting	2	1	0				Food Temperature Control .2653, .2654											
4	i)X	OUT		Proper use of reporting, restriction & exclusion	3	1.5	0			$\dashv$	33	ìX	оит			Proper cooling methods used; adequate	T	$\Box$	$\Box$	П		
5	i iX	оит		Procedures for responding to vomiting & diarrheal events	1	0.5	0				34	1		NI/A	<b>.</b> V6		- 1	.5 (		$\dashv$		
	Goo	d Hyg	jienic	Practices .2652, .2653	$\perp$							_	OUT					.5 (		$\dashv$		
6	i)X	OUT		Proper eating, tasting, drinking or tobacco use		0.5			oxdot		36	X	оит				. 0	_	0			
		оит	$\perp$	No discharge from eyes, nose, and mouth		0.5	0		$\perp$		Fo	od	lder	tific	atio	on .2653						
			g Con	tamination by Hands .2652, .2653, .2655, .26	_		-				37	X	оит			Food properly labeled: original container 2	: [	1	0	$\Box$		
$\vdash$	_	оит		Hands clean & properly washed  No bare hand contact with RTE foods or pre-	4	2	0		+	$\dashv$	Pre	eve	ntio	n of	Foo	od Contamination .2652, .2653, .2654, .2656, .2657	,					
L			N/A N/O	approved alternate procedure properly followed	4			X		_	38	M	оит			Insects & rodents not present; no unauthorized animals	<u>.</u>	1 (	0	П		
		<b>ο)</b> (τ		Handwashing sinks supplied & accessible	2	X	0 /	^		$\dashv$					$\dashv$	Contamination prevented during food	+	$\top$	+	$\exists$		
		OUT	Sour	Food obtained from approved source	2	1	0		$\overline{}$	-	39	۱				preparation, storage & display	:	1	0			
_		OUT	NXO	• • • • • • • • • • • • • • • • • • • •	2	-	0		+	$\dashv$	40						-	.5 (	$\rightarrow$	$\Box$		
	3 IN			Food in good condition, safe & unadulterated	2		0 )	x	$\top$	7	41		_		$\dashv$		-	.5 (	$\rightarrow$	$\vdash$		
1	4 IN	оит	XAN/O	Required records available: shellstock tags,	2	1	0				42						. 0	.5 (	0	Ш		
Н	$\perp$	Ш		parasite destruction	工					-				e of	f Ute	ensils .2653, .2654	_	_				
				Contamination .2653, .2654	_	1	-			_	43	$\neg$		_	_		. (	).5 (	)	$\dashv$		
		оит। О <b>х</b> (т	N/AN/O	Food separated & protected Food-contact surfaces: cleaned & sanitized		1.5 1 <b>X</b> 5		X			44	M	оит			Utensils, equipment & linens: properly stored, dried & handled	. (	).5	ð			
1	7 X	оит		Proper disposition of returned, previously served, reconditioned & unsafe food	2	1	0				45	M	оит			Single-use & single-service articles: properly stored & used		).5	0			
				ardous Food Time/Temperature .2653	_						46	M	оит			Gloves used properly	. (	).5 (	0			
				Proper cooking time & temperatures  Proper reheating procedures for hot holding		1.5			+	-	Uto	ens	sils a	nd l	Equ	ipment .2653, .2654, .2663						
				Proper cooling time & temperatures	- 1	1.5			+	$\dashv$			٠.			Equipment, food & non-food contact surfaces	$\int$	_[		х		
2	1 j <u>X</u>	OUT	N/AN/O	Proper hot holding temperatures	3	1.5	0				47	IN	OX(1			approved, cleanable, properly designed, constructed & used	. 0	).5	9	^		
				Proper cold holding temperatures		1.5					$\vdash$			$\dashv$	$\dashv$	Warewashing facilities: installed, maintained &	+	+	+	$\dashv$		
$\vdash$				Proper date marking & disposition  Time as a Public Health Control; procedures &	+	1.5	_		-	-	48					used; test strips	. 0	).5	0			
2	4 IN	OUT	<b>X</b> AN/O	records	3	1.5	0				49	_	_				( (	).5 (	0	X		
_	_		r Advi		_		_		_	4			ical I		litie		_					
2	5 IN	оит	wXa.	Consumer advisory provided for raw/ undercooked foods	1	0.5	0				50 51			N/A	$\dashv$	Hot & cold water available; adequate pressure 1 Plumbing installed; proper backflow devices 2		1 (		$\dashv$		
	High	ly Su	scepti	ble Populations .2653	_				_		52					Sewage & wastewater properly disposed 2		1 (		$\dashv$		
	Ť	оит		Pasteurized foods used; prohibited foods not offered	3	1.5	0				53			N/A		Toilet facilities: properly constructed, supplied	T	).5				
	Che	nical		.2653, .2657					_		54	M.	ОПТ			Garbage & refuse properly disposed; facilities	$\dagger$	1	+	$\dashv$		
2	7 IN	OUT	₩	Food additives: approved & properly used		0.5	0				$\Box$					mamamed		).5 (	1 1			
2	ВЖ	оит	N/A	Toxic substances properly identified stored & used	2	1	0		Γ		55	IN	οχ(т				<b>S</b> (	).5 (	0	Х		
		П		ith Approved Procedures .2653, .2654, .2658	_		_		_		56	IN	о <b>)∢</b> т			Meets ventilation & lighting requirements; designated areas used	i	X5 (	0	Х		
2	9 IN	оит	×.	Compliance with variance, specialized process, reduced oxygen packaging criteria or HACCP plan	1 2	1	0				H		'			TOTAL DEDUCTIONS: 7	,					





Comment Addendum to Food Establishment Inspection Report Establishment ID: 3034160022 Establishment Name: ACCORDIUS HEALTH AT CLEMMONS Location Address: 3905 CLEMMONS RD Date: 07/01/2022 X Inspection Re-Inspection City: CLEMMONS State: NC Comment Addendum Attached? X Status Code: A County: 34 Forsyth Zip: 27012 Water sample taken? Yes X No Category #: Email 1:TMcDuffie@accordiushealth-clemmons.com Water Supply: Municipal/Community On-Site System Permittee: ACCORDIUS HEALTH LLC Email 2: Email 3:sdeiter@acordiushealth.com Telephone: (336) 766-9158 Temperature Observations Effective January 1, 2019 Cold Holding is now 41 degrees or less Item Location Temp Item Location Temp Item Temp 00 Servsafe - 1/7/2027 Corey Evans 100 hot water 3-comp sink 155 hot water dish machine 3-comp sink (after correction) 400 qt sanitizer (ppm) 400 qt sanitizer (ppm) sani bucket 50 CI sanitizer (ppm) dish machine 168 meatloaf final cook 193 carrots final cook 174 hot holding rice 161 brussel sprouts hot holding 41 baked beans walk-in cooler 41 walk-in cooler First Last Gorman Person in Charge (Print & Sign): Greg Last

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Addis

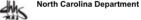
Regulatory Authority (Print & Sign): Travis

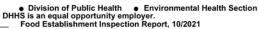
Verification Required Date:

REHS Contact Phone Number:

REHS ID:3095 - Addis, Travis

Authorize final report to be received via Email:









## **Comment Addendum to Inspection Report**

Establishment Name: ACCORDIUS HEALTH AT CLEMMONS Establishment ID: 3034160022

Date: 07/01/2022 Time In: 10:00 AM Time Out: 1:55 PM

## **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.

- 10 6-301.11 Handwashing Cleanser, Availability (Pf) Handsink in back of kitchen by walk-in cooler did not have soap available; dispenser was accidentally restocked with hand sanitizer. Each handwashing sink or group of 2 adjacent handwashing sinks shall be provided with a supply of hand cleaning liquid, powder, or bar soap. CDI: Dispenser was restocked with hand soap.
- 13 3-101.11 Safe, Unadulterated and Honestly Presented (P) One large unopened bag of shredded cheese stored in the walk-in cooler had visible signs of mold growth in several areas. Food shall be safe and unadulterated. CDI: Item was voluntarily discarded by PIC.
- 16 4-501.114 Manual and Mechanical Warewashing Equipment, Chemical Sanitization Temperature, pH, Concentration and Hardness (P) Sanitizer at the 3-comp sink and adjacent sink in dish area was measured at 0ppm. Upon further inspection it was determined both sanitizer dispensers were replaced with a cleaner instead of sanitizer. A quaternary ammonium compound solution shall have a concentration as specified under § 7-204.11 and as indicated by the manufacturer's use directions included in the labeling. CDI: Cleanser was replaced with qt sanitizer at both dispensers; concentration was measured at 400ppm in both locations after correction.
- 47 4-501.11 Good Repair and Proper Adjustment Equipment (C) REPEAT. Ice build up is present in walk-in freezer, frozen condensation on boxes under the evaporator. Pipes extending from evaporator boxed in both the walk-in cooler and walk-in freezer need to be wrapped in smooth pvc. Floor in walk-in cooler is rusted. Legs of equipment in dish room have significant chipping and rusting. Replace torn door gasket in walk-in cooler. Shelving used for clean dishes is rusted and needs replacement. Equipment shall be maintained in a state of good repair.
- 49 4-602.13 Nonfood Contact Surfaces (C) REPEAT. Additional cleaning is needed on top of dishwasher and top portions of sliding doors to remove accumulated residues. Clean door gasket in walk-in cooler. Clean inside base and sides of fryer. Clean fan guards in walk-in cooler. Nonfood-contact surfaces of equipment shall be cleaned at a frequency necessary to preclude accumulation of soil residues.
- 55 6-501.11 Repairing Premises, Structures, Attachments, and Fixtures Methods (C) REPEAT. Repair to floor, FRP walls, and ceiling is needed throughout establishment. Replace/repair coving on the base of walls throughout where it is missing/damaged. Replace warped/damaged FRP. Replace missing/broken floor tiles where needed. Replace missing vent above office entrance. Repair hole in ceiling above outside can wash. Replace/resurface rusted sprinklers on ceiling.
  - 6-501.12 Cleaning, Frequency and Restrictions (C) Cleaning needed on floors, walls, and ceilings throughout establishment, including but not limited to: floors under equipment and sinks, walls behind 3-comp sink and dishwasher, ceiling vents where mold/mildew growth is present, around drains throughout kitchen, can wash basin to remove accumulated debris and residues.
- 56 6-303.11 Intensity Lighting (C) REPEAT. Lighting is low in following areas: cook/serving line, under hood vents, and 2-comp sink/prep area. Lighting was measured at a range of 17-34 foot-candles (should be 50 in these areas). Lighting intensity shall be at least 50 foot candles at a surface where a food employee is working with food or working with utensils or equipment such as knives, slicers, grinders, or saws where employee safety is a factor.

## **Additional Comments**

Crates in walk-in cooler are not approved for use as shelving and need replacement with approved shelving units.