## **Food Establishment Inspection Report**

Establishment Name: BRC	OOKSTONE OF CLEMMONS	Establishment ID: 3034160008
Location Address: 4430 CLIN City: CLEMMONS Zip: 27012 Col Respective of REPONISTONE T	State: North Carolina unty: 34 Forsyth	Date: 11/22/2022 Status Code: A Time In: 10:15 AM Time Out: 11:30 AM
Permittee: BROOKSTONE TERRACE INC		Category#: IV
<b>Telephone</b> : (336) 766-5000		<u> </u>
	○ Re-Inspection	FDA Establishment Type: Nursing Home
Wastewater System:	On-Site System	No. of Risk Factor/Intervention Violations: 1  No. of Repeat Risk Factor/Intervention Violations: 0
Water Supply:  Municipal/Community	On-Site Supply	THO. OF Proposit Field Proposition Field Borner Strategies (Proposition Field Borner Strategies)

Municipal/Community  ○ On-Site Suppl	у													_
Foodborne Illness Risk Factors and Public Health Interventions Risk factors: Contributing factors that increase the chance of developing foodborne illness.				Good Retail Practices  Good Retail Practices: Preventative measures to control the addition of pathogens, chemicals,										
Public Health Interventions: Control measures to prevent foodborne illne						-	ou neu	an i ractices. I lev	and physical objects into foods.	attio	gono,	CHCIIII	icais,	
Compliance Status	OUT	CDI	R	VR	C	om	nplian	ice Status			OUT	CD	I R	١
Supervision .2652					Sat	fe F	ood an	d Water	.2653, .2655, .2658					۲
1 Nout N/A PIC Present, demonstrates knowledge, &	1	0	П				OUT N/A		ed eggs used where required	1	0.5	0		Г
periornis dudes		0			31	X	DUT		ice from approved source	2	_	0	$\top$	T
2 Nout N/A Certified Food Protection Manager	1	0					DUT IXA	Variance of	obtained for specialized processing					Г
Employee Health .2652					32	IIN (	JOI JAK	methods		2	1	0		L
Management, food & conditional employee; knowledge, responsibilities & reporting	2 1	0			Fo	od	Temper	ature Control	.2653, .2654					
4 Mout Proper use of reporting, restriction & exclusion	3 1.5	0				× .		Proper cod	oling methods used; adequate	Т				Γ
Procedures for responding to vemiting 8	-	_		$\vdash$	33	X	DUT		for temperature control	1	0.5	0		
diarrheal events	1 0.5	0					OUT N/A		properly cooked for hot holding		0.5		T	Г
Good Hygienic Practices .2652, .2653							DUT N/A		thawing methods used	1				
Proper eating, tasting, drinking or tobacco use	1 0.5				36	X	DUT	Thermome	eters provided & accurate	1	0.5	0		L
7 No discharge from eyes, nose, and mouth	1 0.5	0			Fo	od	Identific	cation	.2653					
Preventing Contamination by Hands .2652, .2653, .2655, .26					37	χ	DUT	Food prop	erly labeled: original container	2	1	0		Г
Hands clean & properly washed	4 2	0			Pre	eve	ntion of	Food Contamina	tion .2652, .2653, .2654, .2656, .26	657				
9 No bare hand contact with RTE foods or pre- approved alternate procedure properly followed	4 2	0			38	w .	NIT.	Insects & r	rodents not present; no unauthorized	Т	П	Т		Г
10 N out N/A Handwashing sinks supplied & accessible	2 1	0			36	~ '	JU1	animals	•	2	1	0		L
Approved Source .2653, .2655					39	M	оит		ation prevented during food n, storage & display	2	1	0		
11  X   out	2 1	0			40	M	DUT	Personal of	cleanliness	1	0.5	0	T	r
12 IN OUT NO Food received at proper temperature  13 IX OUT Food in good condition, safe & unadulterated		0			41	M	DUT	Wiping clo	ths: properly used & stored	1	0.5	0		Γ
Peguired records available: shellstock tags	-			$\vdash$	42	M	OUT N/A	Washing fi	ruits & vegetables	1	0.5	0		Г
parasite destruction	2 1	0			Pro	ope	r Use o	f Utensils	.2653, .2654					Ī
Protection from Contamination .2653, .2654					43	M	DUT	In-use uter	nsils: properly stored	1	0.5	0		Г
15  X out n/a n/o  Food separated & protected	3 1.5	0			44	M /	OUT	Utensils, e	equipment & linens: properly stored,					Γ
16 X оит Food-contact surfaces: cleaned & sanitized	3 1.5	0			***		JU1	dried & ha	ndled	1	0.5	0		
Proper disposition of returned, previously served, reconditioned & unsafe food	2 1	0			45	M	оит	Single-use stored & u	& single-service articles: properly sed	1	0.5	0		
Potentially Hazardous Food Time/Temperature .2653					46	M	DUT	Gloves use	ed properly	1	0.5	0		
18 IN OUT N/A PO Proper cooking time & temperatures	3 1.5				Ute	ens	ils and	Equipment	.2653, .2654, .2663					
19 IN OUT N/A NO Proper reheating procedures for hot holding	3 1.5			_	Т	Т		Equipment	t, food & non-food contact surfaces	Т	П	T		Г
20 IN OUT N/A N/O Proper cooling time & temperatures 21 IN OUT N/A N/O Proper hot holding temperatures	3 1.5 3 1.5				47	IN	<b>)X</b> (⊤	approved,	cleanable, properly designed,	1	0.5	X		
22   X out N/AN/O   Proper cold holding temperatures	3 1.5							constructe	d & used	$\perp$				L
23 IN OXTN/AN/O Proper date marking & disposition	3 1.5				48	IN C	<b>)</b> χ(τ		ing facilities: installed, maintained &	1	0X5	0	X	
Time as a Public Health Control; procedures & records	3 1.5	0			49			used; test Non-food	strips contact surfaces clean	1				
Consumer Advisory .2653					Ph	ysi	cal Faci	lities	.2654, .2655, .2656					
Consumer advisory provided for raw/	1 0.5	0			50	M	OUT N/A	Hot & cold	water available; adequate pressure	1	0.5	0		Г
undercooked foods	1 0.3			Щ	51	X	DUT	0	nstalled; proper backflow devices		1	0		
Highly Susceptible Populations .2653					52	M	DUT	,	wastewater properly disposed	2	1	0		Ĺ
Pasteurized foods used; prohibited foods not offered	3 1.5	0			53	×	OUT N/A	& cleaned	ities: properly constructed, supplied	1	0.5	0		
Chemical .2653, .2657				<u> </u>	54	M	DUT		refuse properly disposed; facilities	1	0.5	0		
Food additives: approved & properly used	1 0.5			$\square$	55			maintained	acilities installed, maintained & clean	1	0.5		+	$\vdash$
28 X out N/A Toxic substances properly identified stored & used Conformance with Approved Procedures .2653, .2654, .2658	d 2 1	U			56	$\neg$		Meets ven	tilation & lighting requirements;	1				F
Compliance with variance, specialized process, reduced oxygen packaging criteria or HACCP pla	n 2 1	0			H			designated	d areas used  TOTAL DEDUCTIONS:	+	0.5	3		
		_			_					_				-





Score: 99

CDI R VR

Comment Addendum to Food Establishment Inspection Report Establishment ID: 3034160008 Establishment Name: BROOKSTONE OF CLEMMONS Location Address: 4430 CLINARD RD Date: 11/22/2022 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 #: IV Email 1:Kevin@brookstoneofclemmons.com Water Supply: Municipal/Community On-Site System Permittee: BROOKSTONE TERRACE INC Email 2: Telephone: (336) 766-5000 Email 3: Temperature Observations Effective January 1, 2019 Cold Holding is now 41 degrees or less Item Location Temp Item Location Temp Item Temp 36 pot roast 3 door cooler 36 ham 3 door cooler 166 dish machine final rinse 130 3 comp sink hot water 200 quat sanitizer sani bucket (ppm) First Last Burns Person in Charge (Print & Sign): Kevin Last Regulatory Authority (Print & Sign): Aubrie Welch REHS ID:2519 - Welch, Aubrie Verification Required Date:



Authorize final report to

be received via Email:

REHS Contact Phone Number: (336) 703-3131

## **Comment Addendum to Inspection Report**

Establishment Name: BROOKSTONE OF CLEMMONS Establishment ID: 3034160008

Date: 11/22/2022 Time In: 10:15 AM Time Out: 11:30 AM

Certifications						
Name	Certificate #	Туре	Issue Date	Expiration Date		
Kevin Burns		Food Service		10/19/2027		
Violatio		servations and Cor		ons 8.405.11 of the food code		

- 23 3-501.17 Ready-To-Eat Time / Temperature Control for Safety Food, Date Marking (Pf) Opened container of ricotta cheese was not dated. Ready to eat time/temperature control for safety (TCS) food prepared/opened and held in an establishment for >24 hours must be date marked. CDI - ricotta was opened over the weekend and dated appropriately. All other opened foods were date marked.
- 47 4-501.11 Good Repair and Proper Adjustment Equipment (C) Interior top of microwave is rusted/damaged. Replace microwave. Equipment shall be maintained in good repair.
- 48 4-204.113 Warewashing Machine, Data Plate Operation Specifications (C) REPEAT Data plate could not be located on dish machine. A warewashing machine shall be provided with an easily accessible and readable data plate affixed to the machine by the manufacturer that indicates the machine's design and operation specifications including the temperatures required for washing, rinsing, and sanitizing; pressure required for the fresh water sanitizing rinse; and cycle time for stationary rack machines. Note: data plate has been ordered from chemical company per text shown by PIC.
- 55 6-501.11 Repairing Premises, Structures, Attachments, and Fixtures Methods (C) REPEAT Ceiling damage has increased since previous inspection. Repair damage to ceiling around FRP patches. Physical facilities shall be maintained in good repair.