Food Establishment Inspection Report

Establishment Name: SAGEBRUSH STEAK HOUSE #527

Date: <u>Ø 6</u> / <u>1 3</u> / <u>2 Ø 1 3</u> Status Code: A							
Time In: <u>Ø 9</u> :	3 5 ⊗ am	Time Out:	$\underline{\emptyset 1} : \underline{\emptyset \emptyset} \overset{\bigcirc}{\otimes} \overset{am}{\otimes} \overset{am}{pm}$				
Total Time: _3	3 hrs 25 minute	es					
Category #: _I	IV						
Establishment Type:							

Instructions:

1. Fill in the information below for the Food Establishment:

Location Address: 566 ARBOR HILL RD							
City: KERNERSVILLE							
State: NC Zip: 27284							
County: 34 Forsyth							
Permittee: SORSYTH LAND CO, INC.							
Telephone:							
⊗Inspection							
○Re-Inspection							
Wastewater System:							
⊗Municipal/Community							
On-Site System							
Water Supply:							
⊗Municipal/Community							
On-Site System							

2. Click/fill the appropriate circle For "IN, OUT, N/A, N/O".

IN= In Compliance, OUT= Not in compliance N/O=Not Observed, N/A= Not Applicable

3. Click/check the appropriate Boxes for CDI and/or R, VR.

CDI= Corrected During Inspection R= Repeat Violation VR= Verification Required

4. Continue to page 2 for "Good Retail Practices".

North Carolina Department of Health & Human Services ● Division of Public Health Environmental Health Section ● Food Protection Program

Establishment ID: 3034010865

Foodborne Illness Risk Factors and Public Health Interventions

Score: 95

Risk factors: Contributing factors that increase the chance of developing foodborne illness. **Public Health Interventions:** Control measures to prevent foodborne illness or injury

Pu	blic Health Interv	ventions: Control measures to prevent foodborne illness	or injury.			
	mpliance Statu		OUT	CDI	R	VR
Su	pervision	.2652				
1	⊗ ○ ○ IN OUT N/A	PIC Present; Demonstration-Certification by accredited program and perform duties	O O 2 0	0	0	0
En	nployee Health	.2652				
2	⊗ ○ IN OUT	Management, employees knowledge; responsibilities & reporting	0 0 0 3 1.5 0	0	0	0
3	⊗ ○ IN OUT	Proper use of reporting, restriction & exclusion	0 0 0 3 1.5 0	0	0	0
Go	od Hygienic P	Practices .2652, .2653	0.2			
4	⊗ ○ IN OUT	Proper eating, tasting, drinking, or tobacco use	O O O 2 1 0	0	0	0
5	⊗ ○ IN OUT	No discharge from eyes, nose, and mouth	0 0 0 1 0.5 0	0	0	0
Pre		amination by Hands .2652, .2653, .2655, .265	6			
6	⊗ ○ IN OUT	Hands clean & properly washed	$ \begin{smallmatrix} \bigcirc & \bigcirc & \bigcirc \\ 4 & 2 & 0 \end{smallmatrix} $	0	0	0
7	⊗ ○ ○ IN OUT N/O	No bare hand contact with RTE foods or pre-approved alternate procedure properly allowed	○ ○ ○ 3 1.5 0	0	0	0
8	⊗ ○ IN OUT	Handwashing sinks supplied & accessible	○ ○ ○ 2 1 0	0	0	0
Ap	proved Sourc	e .2653, .2655				
9	⊗ ○ IN OUT	Food obtained from approved source	$ \bigcirc \bigcirc \bigcirc \bigcirc \bigcirc 2 1 0 $	0	0	0
10	O O & IN OUT N/O	Food received at proper temperature	$ \bigcirc \bigcirc \bigcirc \bigcirc \bigcirc 2 \ 1 \ 0 $	0	0	0
11	⊗ ○ IN OUT	Food in good condition, safe & unadulterated	$ \bigcirc \bigcirc \bigcirc \bigcirc \bigcirc $ 2 1 0	0	0	0
12	O O 🗞 O IN OUT N/A N/O	Required records available: shellstock tags, parasite destruction	$ \bigcirc \bigcirc \bigcirc \bigcirc \bigcirc 2 \bigcirc 1 \bigcirc 0 $	0	0	0
Pro	otection from	Contamination .2653, .2654				
13	⊗ ○ ○ ○ ○ IN OUT N/A N/O	Food separated & protected	0 0 0 3 1.5 0	0	0	0
14	O & IN OUT	Food-contact surfaces: cleaned & sanitized	3 1.5 0 3 1.5 0	8	0	0
15	⊗ ○ IN OUT	Proper disposition of returned, previously served, reconditioned, & unsafe food	000	0	0	0
Po	tentially Haza	rdous Food Tlme/Temperature .2653				
16	⊗ ○ ○ ○ IN OUT N/A N/O	Proper cooking time & temperatures	○ ○ ○ 3 1.5 0	0	0	0
17	O O O S IN OUT N/A N/O	Proper reheating procedures for hot holding	○ ○ ○ 3 1.5 0	0	0	0
18	⊗ ○ ○ ○ IN OUT N/A N/O	Proper cooling time & temperatures	○ ○ ○ 3 1.5 0	0	0	0
19	OOO ⊗ IN OUT N/A N/O	Proper hot holding temperatures	○ ○ ○ 3 1.5 0	0	0	0
20	⊗ ○ ○ ○ IN OUT N/A N/O	Proper cold holding temperatures	○ ○ ○ 3 1.5 0	0	0	0
21	○ ⊗ ○ ○ IN OUT N/A N/O	Proper date marking & disposition	○ ○ ⊗ 3 1.5 0	8	0	0
22	O O & O IN OUT N/A N/O	Time as a public health control: procedures & records	$ \bigcirc \bigcirc \bigcirc \bigcirc \bigcirc $ 2 1 0	0	0	0
Со	nsumer Advis	ory .2653				
23	O 🗞 O	Consumer advisory provided for raw or undercooked foods	○ ○ ⊗ 1 0.5 0	8	0	0
Hiç	ghly Susceptil	ole Populations .2653				
24	O O & IN OUT N/A	Pasteurized foods used; prohibited foods not offered	0 0 0 3 1.5 0	0	0	0
Ch	emical	.2653, .2657				
25	⊗ ○ ○ IN OUT N/A	Food additives: approved & properly used	0 0 0 1 0.5 0	0	0	0
26	⊗ ○ ○ IN OUT N/A	Toxic substances properly identified stored, & used	$ \bigcirc \bigcirc \bigcirc \bigcirc \bigcirc $ 2 1 0	0	0	0
Co		th Approved Procedures .2653, .2654,	.2658			
27	O O &	Compliance with variance, specialized process, reduced oxygen packing criteria or HACCP plan	000		0	

Food Establishment Inspection Report, continued

Establishment Name: SAGEBRUSH STEAK HOUSE #527 Establishment ID: 3034010865

Instructions, continued:

5. Click the appropriate circle to fill-in for "IN, OUT, N/A, N/O".

IN= In Compliance, OUT= Not in compliance N/O=Not Observed, N/A= Not Applicable

- Click or check the appropriate boxes for CDI and/or R, VR CDI= Corrected during Inspection R= Repeat Violation VR= Verification Required Calculate the "Total Deductions" and record.
- 7. Sign and complete "Signature Block".
- 8. Fill in "No. Of Risk Factor Intervention Violations" and "No. of Repeat Risk Factor Intervention Violations".
- 9. Continue to page 3 for "Comment Addendum to Food Establishment Inspection Report".

Signature Block:

First

Marc

Last

Person in Charge (Print)

Jones

Gartner

Person in Charge (Signature)

First Greg Last

Regulatory Authority (Print)

Regulatory Authority (Signature)

Contact Number: (<u>336</u>) <u>703</u> - <u>3383</u>

Verification Required Date: ___/ ___/

REHS ID: 2360 - Gartner, Gregory

No. of Risk Factor/ Intervention Violations: 3 No. of Repeat Risk Factor/Intervention Violations:

Good Retail Practices									
Preventative measures to control the addition of pathogens,									
_	chemicals, and physical objects into foods.								
					OUT		CDI	R	VR
	ile F00	od and V	222, 222, 222	0	0	0			
28	IN	OUT	Pasteurized eggs used where required	1	0.5	0	0	C	0
29	ΙŇ	OŬT	Water and ice from approved source	<u>2</u>	1	<u>ŏ</u>	0	\circ	\Box
30	IN O	ŬT N/A	Variance obtained for specialized processing methods		0.5		0	0	
	od Tei	mperatu	re Control .2653, .2654 Proper cooling methods used; adequate equipment for	\bigcirc	0	0	_		
31	IÑ	ουτ ○ ⊗	temperature control		0.5	0	0	0	\circ
32	IN OU	ΓΝ/Α N/O	Plant food properly cooked for hot holding		0.5	Ŏ	0	0	0
33		N/A N/O	Approved thawing methods used	1	0.5	_	0	0	0
34	⊗ IN	OUT	Thermometers provided & accurate	1	0.5	0	0	0	0
		ntificati	ion .2653	_					
35	⊗ IN	OUT	Food properly labeled: original container	2	1	0	0	0	0
Pr		_	ood Contamination .2652, .2653, .2654, .2656	<u>, .</u>	_	$\overline{}$			
36	IN	OUT	Insects & rodents not present; no unauthorized animals	2	1	0	0	0	0
37	⊗ IN	OUT	Contamination prevented during food preparation, storage & display	2	1	0	0	0	0
38	⊗ IN	OUT	Personal cleanliness	1	0.5	0	0	0	0
39	⊗ IN	OUT	Wiping cloths: properly used & stored	0	0.5	0	0	0	0
40	⊗ IN	OUT	Washing fruits & vegetables	0	0.5	0	0	0	0
Pr		se of U	tensils .2653, .2654						
41	⊗ IN	OUT	In-use utensils: properly stored	0	0.5		0	0	0
42	O IN	⊗ OUT	Utensils, equipment & linens: properly stored, dried & handled	1	0.5		0	0	0
43	⊗ IN	OUT	Single-use & single-service articles: properly stored & used		O 0.5	0	0	0	0
44	⊗ IN	OUT	Gloves used properly	0	0.5	0	0	0	0
Ut	ensils		uipment .2653, .2654, .2663						
45	O IN	⊗ OUT	Equipment, food & non-food contact surfaces approved, cleanable, properly designed, constructed, & used	⊗ 2	1	0	0	8	0
46	⊗ IN	OUT	Warewashing facilities: installed, maintained, & used; test strips		0.5		0	0	0
47	O IN	⊗ OUT	Non-food contact surfaces clean		0.5		0	8	0
Pł	ıysical	Faciliti	es .2654, .2655, .2656						
48	⊗ IN	OUT	Hot & cold water available; adequate pressure	2	0	0	0	0	0
49	⊗ IN	OUT	Plumbing installed; proper backflow devices	2	0	0	0	0	0
50	⊗ IN	OUT	Sewage & waste water properly disposed	2	0	0	0	0	0
51	⊗ IN	OUT	Toilet facilities: properly constructed, supplied & cleaned	<u></u>	0.5	0	0	0	0
52	⊗ IN	OUT	Garbage & refuse properly disposed; facilities maintained	<u></u>	0.5		0	0	0
53	O IN	⊗ OUT	Physical facilities installed, maintained & clean		⊗ 0.5		0	0	0
54	O	⊗ OUT	Meets ventilation & lighting requirements; designated areas used		0.5		0	0	0
			Total Deductions:	5					

North Carolina Department of Health & Human Services ● Division of Public Health
Environmental Health Section ● Food Protection Program

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Location Address: 566 ARBOR HILL RD		Status Code: A
City: KERNERSVILLE State: NC		Category #:IV
County: 34 Forsyth Zip: 27284		Email 1:
Wastewater System: ⊗ Municipal/Community ○ On-Site System Water Supply: ⊗ Municipal/Community ○ On-Site System		Email 2:
Permittee: SORSYTH LAND CO, INC.		Email 3:
Telephone:		

	Temperature Observations								
Item romaine	Location Temp ne upright cooler 38		Item steak			Item plate	Location dish machine	Temp 164	
spinach	upright cooler	39	sliced cheese	cold drawer	39	hot water	3 vat sink	160	
shredded	salad make top	33	shrimp	cold drawer	39	hot water	clothes machine	136	
diced	salad make bottom	31	collards	walk in	38	air temps	beer coolers	40	
lettuce	large make	43	sweet potato	walk in	38	air temp	wait reach in	33	
tomato	large make	40	corn	walk in	38				
slaw	large make	41	penne	walk in	38				
cut potatoes	large make	42	baked potato	walk in	38				

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.

- Approximately 1-2 dozen utensils in different areas were removed from clean storage due to dried food residues on them and sent back to machine for rewashing. Clean utensils more thoroughly. Do not recommend storing bowls in unused steam table basins due to the collection of food debris inside.
- Datemarking is approximately 95% in compliance. Remember to date mark dairy products such as gallon milk and creamer once opened if 21 held for more than 24 hours. Pulled pork and potatoes are occasionally cooked, frozen, and thawed for later use. The date of cooking/freezing is Day 1 of datemarking, and should be reflected on the thawed portions in walk in cooler. For instance, a container of pulled pork in the walk in cooler should have at least two dates, the date originally cooked/frozen, and then an additional date for the day that it is thawed. 3-501.17 Ready-To-Eat Potentially Hazardous Food (Time/Temperature Control for Safety Food), Date Marking
- Consumer advisory in menu had foods asterisked to a footnote with a reminder, but no disclosure. A disclosure shall include a description of the food that may be undercooked OR a statement that says that the asterisked food may be cooked to order or may contain raw or undercooked foods. This advisory may be accomplished by using table tents or other effective means. Advisory must be on online and To Go
 - 3-603.11 Consumption of Animal Foods that are Raw, Undercooked, or Not Otherwise Processed to Eliminate Pathogens
- Two small stacks of plastic bowls stacked wet. All other utensils observed completely dry. Allow for complete air drying before stacking. 4-901.11 Equipment and Utensils, Air-Drying Required

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Replace or recoat rusted shelving and equpment legs and replace all torn cooler gaskets (Repeat Violations). Continue to replace badly burned utensils (plastic lids, rubber spatula, charred metal tongs. etc.) / All equipment resting on metal bins must be properly repaired with cleanable casters or 6" legs. / Cold drawer unit must be able to be easily separated with simple tools to clean between two drawer units. / Flooring in walk in freezer is cracked and must be repaired. Also, a coved trasition between the walls and floors of walk in must be installed to keep corners cleanable. / New steam table must have drainpipes terminate over floor drain beneat, currently positioned over floor. / Remount metal support brackets on undersides of tables such as air drying side of dish machine.
4-202.16 Nonfood-Contact Surfaces

47 Clean under fryers (Repeat Violation), shelving in dry storage room and overhead wall mounted shelving in prep areas. Clean undersides of dish machine tables (Repeat Violation).

Clean walls and floors behind fryers. Light floor cleaning needed in liquor room. / Repair or replace back door so that it completely seals to door jam. Seal around door knob. / Remove soda lines from floor in dry storage room, wrap and better organize lines, and seal around ceiling penetration. / Ceiling vents nearFlooring throughout kitchen, bar, and restrooms does not form a cleanable curved transition between walls and floors and must be reset.

6-201.13 Floor and Wall Junctures, Coved, and Enclosed or Sealed

Prep tables have been rearranged next to ice machine and now minimum lighting requirements are not met. Lighting must be minimum 50 foot candles (fc), currently 35fc. Also, in women's restroom, stall closest to handsink measures below the required minimum 20fc at 3fc. Increase lighting.



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