Food Establishment Inspection Report

Establishment Name: MIDTOWN CAFE AND DESSERTERY

Date: 11/29/2012	Status Code: A
Time In: $\underline{\emptyset \ 9}$: $\underline{\emptyset \ \emptyset} \overset{\otimes}{\bigcirc} \stackrel{\text{am}}{\bigcirc} \stackrel{\text{m}}{\bigcirc}$	Time Out: $\underline{12}$: $\underline{15} \overset{\bigcirc}{\otimes} pm$

Total Time: 3 hrs 15 minutes

Category #: IV

Establishment Type: Full-Service Restaurant

Instructions:

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

Location Address: 151 S STRATFORD RD							
City: _WINSTON SALEM							
State: NC Zip: 27104							
County: 34 Forsyth							
Permittee: MIDTOWN CAFE AND DESSERTY INC							
Telephone:_(336) 724-9800							
⊗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".

Foodborne Illness Risk Factors and Public Health Interventions

Score: 97.5

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

Establishment ID: 3034010885

Pu	blic Hea	alth Interv	ventions: Control measures to prevent foodborne illness	or injury.					
Со	mplian	OUT	CDI	R	VR				
Su	pervis	ion							
1		O O	PIC Present; Demonstration-Certification by accredited program and perform duties	O O 2 0	0	0	0		
En	<u> </u>	e 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	3 1.5 0	0	0	0		
Go	od Hy	gienic F	Practices .2652, .2653						
4	O IN	⊗ OUT	Proper eating, tasting, drinking, or tobacco use	O 8 O 2 1 0	0	0	0		
5	⊗ IN	OUT	No discharge from eyes, nose, and mouth	0 0 0	0	0	0		
Pre	eventii	ng Cont	amination by Hands .2652, .2653, .2655, .265	6					
6	⊗ IN	OUT	Hands clean & properly washed	$ \bigcirc \bigcirc \bigcirc \bigcirc $ $ 4 2 0 $	0	0	0		
7		O O	No bare hand contact with RTE foods or pre-approved alternate procedure properly allowed	0 0 0 3 1.5 0	0	0	0		
8	⊗ IN	OUT	Handwashing sinks supplied & accessible	$\begin{array}{c c} \bigcirc \bigcirc \bigcirc \bigcirc \\ 2 & 1 & 0 \end{array}$	0	0	0		
Ap	prove	d Sourc	e .2653, .2655						
9	⊗ IN	OUT	Food obtained from approved source	$\begin{array}{c c} \bigcirc \bigcirc \bigcirc \bigcirc \\ 2 & 1 & 0 \end{array}$	0	0	0		
10		O & UT N/O	Food received at proper temperature	$\begin{array}{c c} \bigcirc \bigcirc \bigcirc \bigcirc \\ 2 & 1 & 0 \end{array}$	0	0	0		
11	⊗ IN	OUT	Food in good condition, safe & unadulterated	$\begin{array}{c c} \bigcirc \bigcirc \bigcirc \bigcirc \\ 2 & 1 & 0 \end{array}$	0	0	0		
12	O O IN OUT	○ ⊗ N/A N/O	Required records available: shellstock tags, parasite destruction	$\begin{array}{c c} \bigcirc \bigcirc \bigcirc \bigcirc \\ 2 & 1 & 0 \end{array}$	0	0	0		
Pro	otectic	n from	Contamination .2653, .2654						
13	80	0 0	Food separated & protected	000		0	0		
14	8	N/A N/O	Food-contact surfaces: cleaned & sanitized	3 1.5 0	0	0	0		
15	IN & IN	0	OUT 3 1.5 0						
Dο			rdous Food Time/Temperature .2653	2 1 0	لتل	0	0		
16	⊗ ○	00	Proper cooking time & temperatures	000		0	0		
17	00	N/A N/O 🚫 🛞	Proper reheating procedures for hot holding	3 1.5 0		0	0		
18	IN OUT ⊗ ○	N/A N/O	Proper cooling time & temperatures	3 1.5 0	0				
19	⊗ ○	N/A N/O	Proper hot holding temperatures	3 1.5 0			0		
	IN OUT	N/A N/O	Proper cold holding temperatures	3 1.5 0	0	0	0		
20	IN OUT	N/A N/O		3 1.5 0	0	0	0		
21		N/A N/O	Proper date marking & disposition	3 1.5 0	0	0	0		
22	IN OUT	N/A N/O	Time as a public health control: procedures & records	2 1 0	0	0	0		
Co	_	er Advis							
23		UT N/A	Consumer advisory provided for raw or undercooked foods	1 0.5 0	0	0	0		
Hi	ghly S	usceptil	ble Populations .2653						
24		O &	Pasteurized foods used; prohibited foods not offered	3 1.5 0	0	0	0		
Ch	emica	I	.2653, .2657						
25	IN O	O O	Food additives: approved & properly used	0 0 0	0	0	0		
26		O O	Toxic substances properly identified stored, & used	$\begin{array}{c c} \bigcirc \bigcirc \bigcirc \bigcirc \\ 2 & 1 & 0 \end{array}$	0	0	0		
Со	nform	ance wi	th Approved Procedures .2653, .2654,	.2658					
27		O O	Compliance with variance, specialized process, reduced oxygen packing criteria or HACCP plan	999			0		

Food Establishment Inspection Report, continued

Establishment Name: MIDTOWN CAFE AND DESSERTERY Establishment ID: 3034010885

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:

Person in Charge (Print)

Person in Charge (Signature)

lark Sizenor

Regulatory Authority (Signature)

Contact Number: (<u>336</u>) <u>703</u> - <u>3128</u>

Verification Required Date: ___/ ___/

REHS ID: 944 - Sizemore, Clark

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

Good Retail Practices									
Preventative measures to control the addition of pathogens,									
chemicals, and physical objects into foods. Compliance Status OUT (
		d and V				R	VR		
28	⊗ IN	OUT	Pasteurized eggs used where required	0 0 0 1 0.5 0	0	0	0		
29	⊗ IN	OUT	Water and ice from approved source	O O O 2 1 0	0	0	0		
30		O ⊗ UT N/A	Variance obtained for specialized processing methods	0 0 0 1 0.5 0	0	0	0		
Food Temperature Control .2653, .2654									
31	O IN	⊗ OUT	Proper cooling methods used; adequate equipment for temperature control	○ ⊗ ○ 1 0.5 0	0	0	0		
32		○ ⊗ ΓΝ/Α Ν/Ο	Plant food properly cooked for hot holding	O O O 1 0.5 0	0	0	0		
33	⊗ ○ IN OUT	O O	Approved thawing methods used	0 0 0 1 0.5 0	0	0	0		
34	⊗ IN	OUT	Thermometers provided & accurate	0 0 0 1 0.5 0	0	0	0		
Fo		ntificat	ion .2653						
35	⊗ IN	OUT	Food properly labeled: original container	0 0 0 2 1 0	0	0	0		
Pr		-	ood Contamination .2652, .2653, .2654, .2656	0 0 0	ı				
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	$ \bigcirc \bigcirc \bigcirc \bigcirc \bigcirc $ 2 1 0	0	0	0		
38	O IN	⊗ OUT	Personal cleanliness	○ ○ ⊗ 1 0.5 0	0	0	0		
39	⊗ IN	OUT	Wiping cloths: properly used & stored	O O O 1 0.5 0	0	0	0		
40	⊗ IN	OUT	Washing fruits & vegetables	O O O 1 0.5 0	0	0	0		
Pr	•	lse of U	tensils .2653, .2654						
41	⊗ IN	OUT	In-use utensils: properly stored	0 0 0	0	0	0		
42	⊗ IN	OUT	Utensils, equipment & linens: properly stored, dried & handled	0 0 0	0	0	0		
43	⊗ IN	OUT	Single-use & single-service articles: properly stored & used	0 0 0	0	0	0		
44	⊗ IN	OUT	Gloves used properly	0 0 0	0	0	0		
Ut			uipment .2653, .2654, .2663						
45	IN	⊗ OUT	Equipment, food & non-food contact surfaces approved, cleanable, properly designed, constructed, & used	2 1 0	0	0	0		
46	IN	OUT	Warewashing facilities: installed, maintained, & used; test strips	0 0 0	0	0	0		
47	O IN	⊗ OUT	Non-food contact surfaces clean	○ ⊗ ○ 1 0.5 0	0	0	0		
Ph		Faciliti	es .2654, .2655, .2656						
48	IN	OUT	Hot & cold water available; adequate pressure	$\bigcirc \bigcirc \bigcirc$ \bigcirc \bigcirc \bigcirc \bigcirc \bigcirc \bigcirc \bigcirc	0	0	0		
49	⊗ IN	OUT	Plumbing installed; proper backflow devices	$\bigcirc \bigcirc \bigcirc$ \bigcirc \bigcirc \bigcirc \bigcirc \bigcirc \bigcirc \bigcirc	0	0	0		
50	⊗ IN	OUT	Sewage & waste water properly disposed	$\bigcirc \bigcirc \bigcirc$ \bigcirc \bigcirc \bigcirc \bigcirc \bigcirc \bigcirc	0	0	0		
51	⊗ IN	OUT	Toilet facilities: properly constructed, supplied & cleaned	0 0 0 1 0.5 0	0	0	0		
52	⊗ IN	OUT	Garbage & refuse properly disposed; facilities maintained	O O O 1 0.5 0	0	0	0		
53	O IN	⊗ OUT	Physical facilities installed, maintained & clean	○ ⊗ ○ 1 0.5 0	0	0	0		
54	⊗ IN	OUT	Meets ventilation & lighting requirements; designated areas used	0 0 0 1 0.5 0	0	0	0		
			Total Deductions:	2.5					

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

Comment Addendum to Food Establishment Inspection Report										
Establishment Name: MIDTOWN CAFE AND DESSERTERY Location Address: 151 S STRATFORD RD City: WINSTON SALEM State: NC County: 34 Forsyth Zip: 27104 Wastewater System: Municipal/Community On-Site System Water Supply: Municipal/Community On-Site System Permittee: MIDTOWN CAFE AND DESSERTY INC Telephone: (336) 724-9800				. NC	tablishment ID: 3	3034010885	Date: 11/29/2012 Status Code: A Category #: IV Email 1: Email 2: Email 3:			
Temperature Observations										
Item corned beef	Location bulk cooler	Temp 37	Item sausage	Location warmer	Temp 173	Item	Location	Temp		
omelette	cooked to	164	pasta	walk in	45					

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.

An employee cup with a lid was sitting on the clean drain board of the dish machine, cups must have a lid ,a straw and, be stored below the drain board or a food contact surface. 2-401.11

walk in

walk in

walk in

walk in

44

43

42

42



- Roast beef in walk in cooler was 141F and had be placed in the cooler for 10 min. The roast beef was tightly wrapped with plastic 31 wrap. The proper cooling method for hot foods is to cool from 135F to 70F in open pans in an ice bath to cool in 2 hours to 70F. When the food of 70F place in the walk in cooler to cool from 70F to 41F in 4 hours. 3-501.15
- Observed one employee cooking wearing a gold bracelet, employees may not wear jewelry while working with exposed food. Only 38 a plain wearing band may be worn. 2-303.11
- Two split gaskets found today on make units; replace. 4-201.11

make unit

make unit

make unit

make unit

make unit

make unit

tomatoes

pasta

turkey

ham

chicken salad

tuna salad

42

40

41

37

40 40 lasagna

cooked meat

heavy cream

tuna salad

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Spe

47 Need to clean side of oven with burners, gaskets, and around flip top of make units.4-601.11,4-602.13

Need to replace all chipped and broken floor tiles. Also grout is missing between floor tile at cook line area.6-201.11



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