# Food Establishment Inspection Report

Score: 95.5

**Establishment Name:** FIVE STAR INTERNATIONAL DELI
**Establishment ID:** 3034011454
**Location Address:** 3015 WAUGHTOWN STREET
☒ Inspection ☐ Re-Inspection
**City:** WINSTON SALEM **State:** NC
**Date:** 12 / 06 / 2013 **Status Code:** A
**Zip:** 27107 **County:** 34 Forsyth
**Time In:** 01 : 30 ○ am ⊗ pm **Time Out:** 03 : 00 ○ am ⊗ pm
**Permittee:** FIVE STAR INTERNATIONAL MKT INC
**Total Time:** 1 hr 30 minutes
**Telephone:**
**Category #:** IV
**Wastewater System:** ☒ Municipal/Community ☐ On-Site System
**FDA Establishment Type:**
**Water Supply:** ☒ Municipal/Community ☐ On-Site Supply
No. of Risk Factor/Intervention Violations: 0
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 | ☒ | ☐ | ☐ | | PIC Present; Demonstration-Certification by accredited program and perform duties | 2 | | 0 | ☐ | ☐ | ☐ |
| **Employee Health** .2652 | | | | | | | | | | | |
| 2 | ☒ | ☐ | | | Management, employees knowledge; responsibilities & reporting | 3 | 1.5 | 0 | ☐ | ☐ | ☐ |
| 3 | ☒ | ☐ | | | Proper use of reporting, restriction & exclusion | 3 | 1.5 | 0 | ☐ | ☐ | ☐ |
| **Good Hygienic Practices** .2652, .2653 | | | | | | | | | | | |
| 4 | ☒ | ☐ | | | Proper eating, tasting, drinking, or tobacco use | 2 | 1 | 0 | ☐ | ☐ | ☐ |
| 5 | ☒ | ☐ | | | No discharge from eyes, nose or mouth | 1 | 0.5 | 0 | ☐ | ☐ | ☐ |
| **Preventing Contamination by Hands** .2652, .2653, .2655, .2656 | | | | | | | | | | | |
| 6 | ☒ | ☐ | | | Hands clean & properly washed | 4 | 2 | 0 | ☐ | ☐ | ☐ |
| 7 | ☒ | ☐ | ☐ | ☐ | No bare hand contact with RTE foods or pre-approved alternate procedure properly followed | 3 | 1.5 | 0 | ☐ | ☐ | ☐ |
| 8 | ☒ | ☐ | | | Handwashing sinks supplied & accessible | 2 | 1 | 0 | ☐ | ☐ | ☐ |
| **Approved Source** .2653, .2655 | | | | | | | | | | | |
| 9 | ☒ | ☐ | | | Food obtained from approved source | 2 | 1 | 0 | ☐ | ☐ | ☐ |
| 10 | ☐ | ☐ | | ☒ | Food received at proper temperature | 2 | 1 | 0 | ☐ | ☐ | ☐ |
| 11 | ☒ | ☐ | | | Food in good condition, safe & unadulterated | 2 | 1 | 0 | ☐ | ☐ | ☐ |
| 12 | ☐ | ☐ | ☒ | ☐ | Required records available: shellstock tags, parasite destruction | 2 | 1 | 0 | ☐ | ☐ | ☐ |
| **Protection from Contamination** .2653, .2654 | | | | | | | | | | | |
| 13 | ☒ | ☐ | ☐ | ☐ | Food separated & protected | 3 | 1.5 | 0 | ☐ | ☐ | ☐ |
| 14 | ☒ | ☐ | | | Food-contact surfaces: cleaned & sanitized | 3 | 1.5 | 0 | ☐ | ☐ | ☐ |
| 15 | ☒ | ☐ | | | Proper disposition of returned, previously served, reconditioned, & unsafe food | 2 | 1 | 0 | ☐ | ☐ | ☐ |
| **Potentially Hazardous Food TIme/Temperature** .2653 | | | | | | | | | | | |
| 16 | ☒ | ☐ | ☐ | ☐ | Proper cooking time & temperatures | 3 | 1.5 | 0 | ☐ | ☐ | ☐ |
| 17 | ☒ | ☐ | ☐ | ☐ | Proper reheating procedures for hot holding | 3 | 1.5 | 0 | ☐ | ☐ | ☐ |
| 18 | ☒ | ☐ | ☐ | ☐ | Proper cooling time & temperatures | 3 | 1.5 | 0 | ☐ | ☐ | ☐ |
| 19 | ☒ | ☐ | ☐ | ☐ | Proper hot holding temperatures | 3 | 1.5 | 0 | ☐ | ☐ | ☐ |
| 20 | ☒ | ☐ | ☐ | ☐ | Proper cold holding temperatures | 3 | 1.5 | 0 | ☐ | ☐ | ☐ |
| 21 | ☒ | ☐ | ☐ | ☐ | Proper date marking & disposition | 3 | 1.5 | 0 | ☐ | ☐ | ☐ |
| 22 | ☐ | ☐ | ☒ | ☐ | Time as a public health control: procedures & records | 2 | 1 | 0 | ☐ | ☐ | ☐ |
| **Consumer Advisory** .2653 | | | | | | | | | | | |
| 23 | ☐ | ☐ | ☒ | | Consumer advisory provided for raw or undercooked foods | 1 | 0.5 | 0 | ☐ | ☐ | ☐ |
| **Highly Susceptible Populations** .2653 | | | | | | | | | | | |
| 24 | ☐ | ☐ | ☒ | | Pasteurized foods used; prohibited foods not offered | 3 | 1.5 | 0 | ☐ | ☐ | ☐ |
| **Chemical** .2653, .2657 | | | | | | | | | | | |
| 25 | ☒ | ☐ | ☐ | | Food additives: approved & properly used | 1 | 0.5 | 0 | ☐ | ☐ | ☐ |
| 26 | ☒ | ☐ | ☐ | | Toxic substances properly identified stored, & used | 2 | 1 | 0 | ☐ | ☐ | ☐ |
| **Conformance with Approved Procedures** .2653, .2654, .2658 | | | | | | | | | | | |
| 27 | ☐ | ☐ | ☒ | | Compliance with variance, specialized process, reduced oxygen packing criteria or HACCP plan | 2 | 1 | 0 | ☐ | ☐ | ☐ |

## 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 | ☐ | ☐ | ☒ | | Pasteurized eggs used where required | 1 | 0.5 | 0 | ☐ | ☐ | ☐ |
| 29 | ☒ | ☐ | | | Water and ice from approved source | 2 | 1 | 0 | ☐ | ☐ | ☐ |
| 30 | ☐ | ☐ | ☒ | | Variance obtained for specialized processing methods | 1 | 0.5 | 0 | ☐ | ☐ | ☐ |
| **Food Temperature Control** .2653, .2654 | | | | | | | | | | | |
| 31 | ☒ | ☐ | | | Proper cooling methods used; adequate equipment for temperature control | 1 | 0.5 | 0 | ☐ | ☐ | ☐ |
| 32 | ☒ | ☐ | ☐ | ☐ | Plant food properly cooked for hot holding | 1 | 0.5 | 0 | ☐ | ☐ | ☐ |
| 33 | ☒ | ☐ | ☐ | ☐ | Approved thawing methods used | 1 | 0.5 | 0 | ☐ | ☐ | ☐ |
| 34 | ☒ | ☐ | | | Thermometers provided & accurate | 1 | 0.5 | 0 | ☐ | ☐ | ☐ |
| **Food Identification** .2653 | | | | | | | | | | | |
| 35 | ☒ | ☐ | | | Food properly labeled: original container | 2 | 1 | 0 | ☐ | ☐ | ☐ |
| **Prevention of Food Contamination** .2652, .2653, .2654, .2656, .2657 | | | | | | | | | | | |
| 36 | ☒ | ☐ | | | Insects & rodents not present; no unauthorized animals | 2 | 1 | 0 | ☐ | ☐ | ☐ |
| 37 | ☒ | ☐ | | | Contamination prevented during food preparation, storage & display | 2 | 1 | 0 | ☐ | ☐ | ☐ |
| 38 | ☒ | ☐ | | | Personal cleanliness | 1 | 0.5 | 0 | ☐ | ☐ | ☐ |
| 39 | ☒ | ☐ | | | Wiping cloths: properly used & stored | 1 | 0.5 | 0 | ☐ | ☐ | ☐ |
| 40 | ☒ | ☐ | ☐ | | Washing fruits & vegetables | 1 | 0.5 | 0 | ☐ | ☐ | ☐ |
| **Proper Use of Utensils** .2653, .2654 | | | | | | | | | | | |
| 41 | ☒ | ☐ | | | In-use utensils: properly stored | 1 | 0.5 | 0 | ☐ | ☐ | ☐ |
| 42 | ☒ | ☐ | | | Utensils, equipment & linens: properly stored, dried & handled | 1 | 0.5 | 0 | ☐ | ☐ | ☐ |
| 43 | ☒ | ☐ | | | Single-use & single-service articles: properly stored & used | 1 | 0.5 | 0 | ☐ | ☐ | ☐ |
| 44 | ☒ | ☐ | | | Gloves used properly | 1 | 0.5 | 0 | ☐ | ☐ | ☐ |
| **Utensils and Equipment** .2653, .2654, .2663 | | | | | | | | | | | |
| 45 | ☐ | ☒ | | | Equipment, food & non-food contact surfaces approved, cleanable, properly designed, constructed, & used | ☒ | 1 | 0 | ☐ | ☒ | ☐ |
| 46 | ☒ | ☐ | | | Warewashing facilities: installed, maintained, & used; test strips | 1 | 0.5 | 0 | ☐ | ☐ | ☐ |
| 47 | ☒ | ☐ | | | Non-food contact surfaces clean | 1 | 0.5 | 0 | ☐ | ☐ | ☐ |
| **Physical Facilities** .2654, .2655, .2656 | | | | | | | | | | | |
| 48 | ☒ | ☐ | ☐ | | Hot & cold water available; adequate pressure | 2 | 1 | 0 | ☐ | ☐ | ☐ |
| 49 | ☒ | ☐ | | | Plumbing installed; proper backflow devices | 2 | 1 | 0 | ☐ | ☐ | ☐ |
| 50 | ☒ | ☐ | | | Sewage & waste water properly disposed | 2 | 1 | 0 | ☐ | ☐ | ☐ |
| 51 | ☐ | ☒ | ☐ | | Toilet facilities: properly constructed, supplied & cleaned | ☒ | 0.5 | 0 | ☐ | ☒ | ☐ |
| 52 | ☒ | ☐ | | | Garbage & refuse properly disposed; facilities maintained | 1 | 0.5 | 0 | ☐ | ☐ | ☐ |
| 53 | ☐ | ☒ | | | Physical facilities installed, maintained & clean | ☒ | 0.5 | 0 | ☐ | ☒ | ☐ |
| 54 | ☐ | ☒ | | | Meets ventilation & lighting requirements; designated areas used | 1 | ☒ | 0 | ☐ | ☐ | ☐ |
| | | | | | **Total Deductions:** | 4.5 | | | | | |

# Comment Addendum to Food Establishment Inspection Report

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Establishment ID: 3034011454

Location Address: 3015 WAUGHTOWN STREET

☒ Inspection ☐ Re-Inspection Date: 12/06/2013

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

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

Permittee: FIVE STAR INTERNATIONAL MKT INC

Email 1:

Email 2:

Telephone:

Email 3:

## Temperature Observations

| Item | Location | Temp | Item | Location | Temp | Item | Location | Temp |
|---|---|---|---|---|---|---|---|---|
| chicken | hot hold display | 167 | hot water | 3 comp sink | 137 | | | |
| beef | hot hold display | 160 | | | | | | |
| pork stomach | hot hold display | 170 | | | | | | |
| beef tongue | final cook | 175 | | | | | | |
| rice | hot hold | 169 | | | | | | |
| pork | hot hold | 164 | | | | | | |
| beef | walk in cooler | 42 | | | | | | |
| beans | walk in cooler | 41 | | | | | | |

## 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.

45 Repair or remove the damaged and non working rotisserie and standard ovens. Repair: the damaged walk in cooler door, the damaged rusting shelving, the non working walk in freezer, and the cracked area of the 3 compartment sink. Repair the larger hole in the bottom of the utensil drawer on the central prep table. Remove the sheet pan from the display case and install a proper sliding door..

Spell

51 Repair the damaged ceiling and wall joints of the men's restrooms.

53 Repair the damaged wall and floor tiles in the can wash area and properly install the baseboard tiles adjacent to the front wall of the walk in cooler.

Person in Charge (Print & Sign): Elsa (*First*) Sainz (*Last*)

Regulatory Authority (Print & Sign): M. Craig (*First*) Faircloth (*Last*)

REHS ID: 1938 - Faircloth, Craig

Verification Required Date: ___ / ___ / _____

REHS Contact Phone Number: (336) 703-3166

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54 Replace teh missing light shield over the fryer area.

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