

Food Establishment Inspection Report

Score: 95.5

Establishment Name: BOJANGLES

Establishment ID: 3034011773

Location Address: 1250 PETERS CREEK PARKWAY

Inspection Re-Inspection

City: WINSTON SALEM

State: NC

Date: 01 / 14 / 2020 Status Code: A

Zip: 27103 County: 34 Forsyth

Time In: 09 : 30 am pm Time Out: 11 : 45 am pm

Permittee: BOJANGLES RESTAURANTS INC

Total Time: 2 hrs 15 minutes

Category #: III

Telephone: _____

FDA Establishment Type: Fast Food Restaurant

Wastewater System: Municipal/Community On-Site System

No. of Risk Factor/Intervention Violations: 4

Water Supply: Municipal/Community On-Site Supply

No. of Repeat Risk Factor/Intervention Violations: 1

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	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	PIC Present; Demonstration-Certification by accredited program and perform duties	2	0		
Employee Health .2652								
2	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Management, employees knowledge; responsibilities & reporting	3	13	0	
3	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper use of reporting, restriction & exclusion	3	13	0	
Good Hygienic Practices .2652, .2653								
4	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper eating, tasting, drinking, or tobacco use	2	1	0	
5	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	No discharge from eyes, nose or mouth	1	03	0	
Preventing Contamination by Hands .2652, .2653, .2655, .2656								
6	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Hands clean & properly washed	4	2	0	
7	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	No bare hand contact with RTE foods or pre-approved alternate procedure properly followed	3	13	0	
8	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Handwashing sinks supplied & accessible	2	1	0	
Approved Source .2653, .2655								
9	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food obtained from approved source	2	1	0	
10	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Food received at proper temperature	2	1	0	
11	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food in good condition, safe & unadulterated	2	1	0	
12	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Required records available: shellstock tags, parasite destruction	2	1	0	
Protection from Contamination .2653, .2654								
13	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Food separated & protected	3	13	0	
14	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Food-contact surfaces: cleaned & sanitized	3	13	0	
15	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper disposition of returned, previously served, reconditioned, & unsafe food	2	1	0	
Potentially Hazardous Food Time/Temperature .2653								
16	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper cooking time & temperatures	3	13	0	
17	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Proper reheating procedures for hot holding	3	13	0	
18	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Proper cooling time & temperatures	3	13	0	
19	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Proper hot holding temperatures	3	13	0	
20	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Proper cold holding temperatures	3	13	0	
21	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper date marking & disposition	3	13	0	
22	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Time as a public health control: procedures & records	2	1	0	
Consumer Advisory .2653								
23	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Consumer advisory provided for raw or undercooked foods	1	03	0	
Highly Susceptible Populations .2653								
24	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Pasteurized foods used; prohibited foods not offered	3	13	0	
Chemical .2653, .2657								
25	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Food additives: approved & properly used	1	03	0	
26	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Toxic substances properly identified stored, & used	2	1	0	
Conformance with Approved Procedures .2653, .2654, .2658								
27	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	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	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Pasteurized eggs used where required	1	03	0	
29	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Water and ice from approved source	2	1	0	
30	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Variance obtained for specialized processing methods	1	03	0	
Food Temperature Control .2653, .2654								
31	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper cooling methods used; adequate equipment for temperature control	1	03	0	
32	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Plant food properly cooked for hot holding	1	03	0	
33	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Approved thawing methods used	1	03	0	
34	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Thermometers provided & accurate	1	03	0	
Food Identification .2653								
35	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food properly labeled: original container	2	1	0	
Prevention of Food Contamination .2652, .2653, .2654, .2656, .2657								
36	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Insects & rodents not present; no unauthorized animals	2	1	0	
37	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Contamination prevented during food preparation, storage & display	2	1	0	
38	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Personal cleanliness	1	03	0	
39	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Wiping cloths: properly used & stored	1	03	0	
40	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Washing fruits & vegetables	1	03	0	
Proper Use of Utensils .2653, .2654								
41	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	In-use utensils: properly stored	1	03	0	
42	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Utensils, equipment & linens: properly stored, dried & handled	1	03	0	
43	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Single-use & single-service articles: properly stored & used	1	03	0	
44	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Gloves used properly	1	03	0	
Utensils and Equipment .2653, .2654, .2663								
45	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Equipment, food & non-food contact surfaces approved, cleanable, properly designed, constructed, & used	2	1	0	
46	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Warewashing facilities: installed, maintained, & used; test strips	1	03	0	
47	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Non-food contact surfaces clean	1	03	0	
Physical Facilities .2654, .2655, .2656								
48	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Hot & cold water available; adequate pressure	2	1	0	
49	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Plumbing installed; proper backflow devices	2	1	0	
50	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Sewage & waste water properly disposed	2	1	0	
51	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Toilet facilities: properly constructed, supplied & cleaned	1	03	0	
52	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Garbage & refuse properly disposed; facilities maintained	1	03	0	
53	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Physical facilities installed, maintained & clean	1	03	0	
54	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Meets ventilation & lighting requirements; designated areas used	1	03	0	
Total Deductions:					4.5			



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 Wastewater System: Municipal/Community On-Site System
 Water Supply: Municipal/Community On-Site System
 Permittee: BOJANGLES RESTAURANTS INC
 Telephone: _____

Establishment ID: 3034011773
 Inspection Re-Inspection Date: 01/14/2020
 Comment Addendum Attached? Status Code: A
 Water sample taken? Yes No Category #: III
 Email 1: 599stores@bojangles.com
 Email 2: _____
 Email 3: _____

Temperature Observations

Cold Holding Temperature is now 41 Degrees or less

Item	Location	Temp	Item	Location	Temp	Item	Location	Temp
9-27-23	Justin Jones	0	chicken	final	178	quat	3 comp	200
rice	hot hold	178	chiken	final	185	water	3 comp	119
rst bites	hot hold	116	slaw	front cooler	38			
pintos	hot hold	160	liq egg	ice bath	43			
egg	hot hold	145	tomato	line	45			
chiken	hot hold	156	tomato	bottom at line	38			
homestyle	hot hold	153	slaw	walk in	40			
spicy	hot hold 111-120	111	salad	walk in	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.

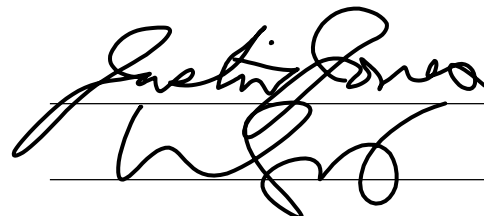
- 13 3-304.15 (A) Gloves, Use Limitation - P- Employee using gloved hands to place raw sausage patties on grill, took box away, went to line and picked up half sheet pan and began to wipe with cloth to use for biscuits all while wearing same pair of gloves. If used, single-use gloves shall be used for only one task such as working with ready-to-eat food or with raw animal food, used for no other purpose, and discarded when damaged or soiled, or when interruptions occur in the operation. CDI-Employee educated, they removed gloves, took pan to sink, and washed hands. // 3-302.11 Packaged and Unpackaged Food-Separation, Packaging, and Segregation - P- Raw country ham and raw bacon in cold hold drawers above pasteurized liquid eggs. Foods shall be protected from cross contamination during storage by storing in order of final cook temperatures. CDI-Eggs moved to above raw meats.
- 14 4-602.11 Equipment Food-Contact Surfaces and Utensils-Frequency - P- Clean inside of ice maker of buildup.
- 19 3-501.16 (A)(1) Potentially Hazardous Food (Time/Temperature Control for Safety Food), Hot and Cold Holding - P- REPEAT- Roasted bites and spicy chicken measured below 135F as noted in temperature log. Maintain foods at 135F or greater at all parts of the food when hot holding. CDI-Spicy strips discarded by employee, roasted bites reheated to above 165F, per manager.

Lock Text



Person in Charge (Print & Sign): Justin *First* Jones *Last*

Regulatory Authority (Print & Sign): Nora *First* Sykes *Last*



REHS ID: 2664 - Sykes, Nora

Verification Required Date: ___ / ___ / ___

REHS Contact Phone Number: (336) 703 - 3161



North Carolina Department of Health & Human Services • Division of Public Health • Environmental Health Section • Food Protection Program
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- 20 3-501.16 (A)(2) and (B) Potentially Hazardous Food (Time/Temperature Control for Safety Food), Hot and Cold Holding - P- Liquid eggs at 43F by grill in ice bath where ice had melted. Tomatoes on top of make line at 45F. Maintain potentially hazardous foods at 41F or less at all parts of the food. CDI-Ice added to ice bath for eggs. Tomatoes moved to walk in to cool.
- 38 2-302.11 Maintenance-Fingernails - PF- Employee with artificial, painted nails whisking mashed potatoes with no gloves. Unless wearing intact gloves in good repair, a food employee may not wear fingernail polish or artificial fingernails when working with exposed food. CDI-Employee educated, all employees educated. Procedure change. Gloves will be worn by all employees who have artificial and/or painted nails when working with exposed food.
- 45 4-501.11 Good Repair and Proper Adjustment-Equipment - C-Replace caulk on chicken warming tower where it is coming off. Replace torn gasket on small bev cooler at drive through. Seal to the counter the hot hold units at make unit. Maintain equipment in good repair.
- 47 4-601.11 (B) and (C) Equipment, Food-Contact Surfaces, Nonfood-Contact Surfaces, and Utensils - C- REPEAT-Nonfood contact surfaces need additional cleaning, including, but not limited to: Gaskets, make unit area, fan in chicken cooler, sides of equipment and crevices at make line, fryer cart, pass throughs on line, hot water brew table. Maintain nonfood contact surfaces clean.
- 49 5-205.15 (B) System maintained in good repair - C- Pipes under 3 comp sink leaking. Cold water not functioning at biscuit hand sink. Cold water pedal missing at one hand sink. Maintain plumbing in good repair.
- 51 6-501.18 Cleaning of Plumbing Fixtures - C- REPEAT-Cleaning needed on toilets in both restrooms. Maintain fixtures clean.
- 52 5-501.115 Maintaining Refuse Areas and Enclosures - C- Clean leaves and minor garbage accumulation from dumpster enclosure.



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✓
Spell



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