Food Establishment Inspection Report

Establishment Name: THE GRILL Establishment ID: 3034012023

Date: <u>Ø 1</u> / <u>1 Ø</u> / <u>2 Ø 1 3</u> Status Code: A					
Time In: $\underline{10}$: $\underline{50} \overset{\otimes}{\bigcirc} \overset{\text{am}}{\bigcirc}$ Time Out: $\underline{12}$: $\underline{40} \overset{\bigcirc}{\otimes} \overset{\text{am}}{\bigcirc}$					
Total Time: 1 hr 50 minutes					
Category #: _II					
Establishment Type:					

Instructions:

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

Location Address: 627A NORTH MAIN STREET	_					
City: KERNERSVILLE	_					
State: NC Zip: 27284						
County: 34 Forsyth						
Permittee: MERCY & GRACE ONE STOP LLC						
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".

Foodborne Illness Risk Factors and Public Health Interventions

Score: 97

Risk factors: Contributing factors that increase the chance of developing foodborne illness.

Public Health Interventions: Control measures to prevent foodborne illness or injury.

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Со	mpliance Statu	s	OUT	CDI	R	VR		
Su	Supervision .2652							
1		PIC Present; Demonstration-Certification by accredited program and perform duties	○ ○ 2 0	0	0	0		
Em	ployee Health	.2652						
2	O & IN OUT	Management, employees knowledge; responsibilities & reporting	○ ○ ⊗ 3 1.5 0	8	0	0		
3	⊗ ○ IN OUT	Proper use of reporting, restriction & exclusion	○ ○ ○ 3 1.5 0	0	0	0		
Go	od Hygienic P	Practices .2652, .2653						
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	0	0	0		
Pre		amination by Hands .2652, .2653, .2655, .265	6					
6	⊗ O IN OUT	Hands clean & properly washed	0 0 0 4 2 0	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	O & IN OUT	Handwashing sinks supplied & accessible	○ ⊗ ○ 2 1 0	0	0	8		
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 S 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	Required records available: shellstock tags, parasite destruction	$ \bigcirc \bigcirc \bigcirc \bigcirc \bigcirc $ 2 1 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	⊗ ○ IN OUT	Food-contact surfaces: cleaned & sanitized	3 1.5 0 3 1.5 0	0	0	0		
15	⊗ ○ IN OUT	Proper disposition of returned, previously served, reconditioned, & unsafe food	000	0	0	0		
Po	tentially Haza	rdous Food Time/Temperature .2653						
16	⊗ ○ ○ ○ IN OUT N/A N/O	Proper cooking time & temperatures	0 0 0 3 1.5 0	0	0	0		
17	⊗ ○ ○ ○ IN OUT N/A N/O	Proper reheating procedures for hot holding	○ ○ ○ 3 1.5 0	0	0	0		
18	O O & O IN OUT N/A N/O	Proper cooling time & temperatures	○ ○ ○ 3 1.5 0	0	0	0		
19	⊗ ○ ○ ○ 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	0	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		
Consumer Advisory .2653								
23	O O & IN OUT N/A	Consumer advisory provided for raw or undercooked foods	0 0 0 1 0.5 0	0	0	0		
Hiç	hly Susceptik	ple Populations .2653						
24	O O & IN OUT N/A	Pasteurized foods used; prohibited foods not offered	O O O 3 1.5 0	0	0	0		
Chemical .2653, .2657								
25	⊗ ○ ○ IN OUT N/A	Food additives: approved & properly used	0 0 0 1 0.5 0	0	0	0		
26	O & O	Toxic substances properly identified stored, & used	○ ⊗ ○ 2 1 0		0	0		
Conformance with Approved Procedures .2653, .2654, .2658								
27	O O & IN OUT N/A	Compliance with variance, specialized process, reduced oxygen packing criteria or HACCP plan	$\begin{array}{c} \bigcirc \bigcirc$		0	0		

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

Food Establishment Inspection Report, continued

Establishment Name: THE GRILL Establishment ID: 3034012023

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".
- 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)

Regulatory Authority (Print)

Regulatory Authority (Signature)

Contact Number: (<u>336</u>)<u>03</u>-<u>3383</u>

Verification Required Date: <u>Ø1</u>/<u>20</u>/<u>2013</u>

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.							
Co	mpliar	ice Statu	ıs	OUT	CDI	R	VR
Sa		od and V	Vater .2653, .2655, .2658				
28	⊗ IN	OUT	Pasteurized eggs used where required	1 0.5 0	0	0	0
29	⊗¤ (OUT	Water and ice from approved source	0 0 0 2 1 0	0	0	0
30	O (○ ⊗ UT N/A	Variance obtained for specialized processing methods	1 0.5 0	0	0	0
Fo	_	<u>.</u>	ure Control .2653, .2654				
31	⊗ IN ⊗ ○	OUT	Proper cooling methods used; adequate equipment for temperature control	1 0.5 0	0	0	0
32		TN/A N/C	Plant food properly cooked for hot holding	1 0.5 0	0	0	0
33		O O	Approved thawing methods used	1 0.5 0	0	0	0
34	⊗ IN	OUT	Thermometers provided & accurate	0 0 0	0	0	0
	-	entificat			I		
35	⊗ IN	OUT	Food properly labeled: original container	2 1 0	0	0	0
Pr	_	_	ood Contamination .2652, .2653, .2654, .2656				
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	$\begin{array}{c c} \bigcirc \bigcirc \bigcirc \bigcirc \\ 2 & 1 & 0 \end{array}$	0	0	0
38	⊗ IN	OUT	Personal cleanliness	1 0.5 0	0	0	0
39	⊗ IZ	OUT	Wiping cloths: properly used & stored	0 0 0 1 0.5 0	0	0	0
40	⊗≥	OUT	Washing fruits & vegetables	0 0 0	0	0	0
Pr	oper U	Jse 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	1 0.5 0	0	0	0
43	⊗ IN	OUT	Single-use & single-service articles: properly stored & used	1 0.5 0	0	0	0
44	⊗ IN	OUT	Gloves used properly	1 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	0	0
46	⊗ IN	OUT	Warewashing facilities: installed, maintained, & used; test strips	0 0 0	0	0	0
47	⊗ IN	OUT	Non-food contact surfaces clean	0 0 0 1 0.5 0	0	0	0
Physical Facilities .2654, .2655, .2656							
48	⊗ IN	OUT	Hot & cold water available; adequate pressure	0 0 0 2 1 0	0	0	0
49	⊗ IN	OUT	Plumbing installed; proper backflow devices	O O O 2 1 0	0	0	0
50	⊗ IN	OUT	Sewage & waste water properly disposed	O O O 2 1 0	0	0	0
51	⊗ IN	OUT	Toilet facilities: properly constructed, supplied & cleaned	0 0 0	0	0	0
52	○ Z	⊗ OUT	Garbage & refuse properly disposed; facilities maintained	0 0 8 1 0.5 0	0	0	0
53	⊗ IN	OUT	Physical facilities installed, maintained & clean	0 0 0 1 0.5 0	0	0	0
54	OIN	⊗ OUT	Meets ventilation & lighting requirements; designated areas used	○ ○ ⊗ 1 0.5 0	0	0	0
			Total Deductions:	3			

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

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Location Address: 627A NORTH MAIN	STREET		Status Code: A
City: KERNERSVILLE	State: NC		Category #:II
County: 34 Forsyth	Zip: <u>²⁷²⁸⁴ </u>		Email 1:
Wastewater System: ⊗ Municipal/Comm Water Supply: ⊗ Municipal/Comm	nunity On-Site System		Email 2:
Permittee: MERCY & GRACE ONE STO	OP LLC		Email 3:
Talanhana.			

Temperature Observations								
ltem potato	Location hot holding	Temp 154	Item cheese	Location Norlake upright	Temp 38	Item	Location	Temp
fried chicken	hot holding	147	tuna salad	Norlake upright	38			
nacho cheese	steam well	158	wash water	wash vat	121			
chili	steam well	155						
tomatoes	make top	38						
lettuce	make top	38						
hot dog	make bottom	38						
gyro	make bottom	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.

No employee health policy available upon request. An employee health policy must be in place that reflects the necessary requirements per 15A NCAC 18A .2652 ref. 2-201.11, 2-201.12, and 2-201.13. Refer to handout as example.



- No hot water available an men's restroom handsink. Water temperature measured 76°F. 15A NCAC 18A .2655 ref. 5-202.12(A): A handwshing sink shall be equipped to provide water at a temperature of at least 100°F through a mixing halve or combination faucet.
- Oven cleaner in unlabeled bottle. 15A NCAC 18A .2657 ref. 7-102.11: Working containers used for storing poisonous or toxic materials such as cleaners and sanitizers taken from bulk supplies shall be clearly and individually identified with the common name of the material. Corrected during inspection.
- 45 Replace the torn cooler gasket in left door of Norlake upright and central door of make unit.

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2 No dumpster plug in cardboard receptacle. 15A NCAC 18A .2655 ref. 5-501.114: Drains in receptacles and waste handling units for refuse, recyclables, and returnables shall be drain plugs in place.

Lighting measures below minimum required 20 foot candle (fc) intensity in the men's restroom (8fc) and women's restroom (15fc). Increase lighting.



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