Food Establishment Inspection Report

Establishment Name: HAM S RESTAURANT

Date: 12/06/2012 Status Code: A						
Time In: <u>Ø 9</u>	$: \underline{25} \overset{\otimes}{\bigcirc} \overset{am}{pm} \text{Time Out: } \underline{\emptyset1} : \underline{10} \overset{\bigcirc}{\otimes} \overset{am}{pm}$					
Total Time:	3 hrs 45 minutes					
Category #:	IV					
Establishme	nt Type:					

Instructions:

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

Location Address: 550 PINEVIEW DRIVE						
City: KERNERSVILLE						
State: NC Zip: 27284						
County: 34 Forsyth						
Permittee: RCR MARKETING 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".

Establishment ID: 3034012055

Foodborne Illness Risk Factors and Public Health Interventions

Score: 93

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

	Public Health Interventions: Control measures to prevent foodborne illness or injury.							
Compliance Status			OUT	CDI	R	VR		
Su	pervision	.2652						
1	⊗ ○ ○ IN OUT N/A	PIC Present; Demonstration-Certification by accredited program and perform duties	$\bigcirc \bigcirc$ 2 0	0	0	0		
Em	ployee Health							
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 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 1 0.5 0	0	0	0		
Pre		amination by Hands .2652, .2653, .2655, .265						
6	⊗ ○ 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	O O O 3 1.5 0	0	0	0		
8	○ ⊗ IN OUT	Handwashing sinks supplied & accessible	○ ○ ⊗ 2 1 0	8	0	0		
Ар	proved Sourc	e .2653, .2655						
9	⊗ ○ IN OUT	Food obtained from approved source	○ ○ ○ 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 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	⊗ ○ ○ ○ O IN OUT N/A N/O	Food separated & protected	○ ○ ○ 3 1.5 0	0	0	0		
14	○ ⊗ IN OUT	Food-contact surfaces: cleaned & sanitized	⊗ ○ ○ 3 1.5 0	8	8	8		
15	⊗ ○ IN OUT	Proper disposition of returned, previously served, reconditioned, & unsafe food	$ \bigcirc\bigcirc\bigcirc\bigcirc$ 2 1 0	0	0	0		
Po		rdous Food Time/Temperature .2653						
-	O O O S IN OUT N/A N/O	Proper cooking time & temperatures	0 0 0 3 1.5 0	0	0	0		
17	⊗ ○ ○ ○ O IN OUT N/A N/O	Proper reheating procedures for hot holding	0 0 0 3 1.5 0	0	0	0		
18	O O O S	Proper cooling time & temperatures	3 1.5 0	0	0	0		
19	OOO ⊗ IN OUT N/A N/O	Proper hot holding temperatures	0 0 0 3 1.5 0	0	0	0		
	O O O IN OUT N/A N/O	Proper cold holding temperatures	0 0 0 3 1.5 0	0	0	0		
21	O & O O 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	0 0 0 2 1 0	0	0	0		
Со	nsumer Advis							
23	⊗ ○ ○ IN OUT N/A	Consumer advisory provided for raw or undercooked foods	0 0 0	0	0	0		
Hig		ole Populations .2653	0 -					
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	O O ⊗ 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	0 0 0 2 1 0		0	0		
Со		th Approved Procedures .2653, .2654,						
27	O O & IN OUT N/A	Compliance with variance, specialized process, reduced oxygen packing criteria or HACCP plan	$\bigcirc \bigcirc \bigcirc$ \bigcirc \bigcirc \bigcirc \bigcirc \bigcirc \bigcirc 1 0		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: HAM S RESTAURANT Establishment ID: 3034012055

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:

MAISIC Milli Gan
Person in Charge (Print)

Person in Charge (Signature)

Greg Gartner REHSI
Regulatory Authority (Print)

Regulatory Authority (Signature)

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

Verification Required Date: $\frac{12}{16} / \frac{16}{2012}$

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. CDI R VR Compliance Status OUT Safe Food and Water .2653, .2655, .2658 0 0 0 OUT 0 28 Pasteurized eggs used where required \circ 0 O O O 2 1 0 29 0 0 0 Water and ice from approved source OUT O O & IN OUT N/A 0 0 0 1 0.5 0 Variance obtained for specialized processing methods 0 30 0 **Food Temperature Control** .2653...2654 Proper cooling methods used; adequate equipment for temperature control 0 0 0 OUT 0 0 O O S Plant food properly cooked for hot holding 0 0 0 1 0.5 0 32 0 0 0 ⊗ ○ ○ ○ Approved thawing methods used IN OUT N/A N/O 0 0 0 1 0.5 0 0 0 0 0 0 1 0.5 0 OUT 0 0 0 34 Thermometers provided & accurate **Food Identification** .2653 OUT Food properly labeled: original container 0 0 0 35 Prevention of Food Contamination .2652, .2653, .2654, .2656, .2657 OUT 0 0 36 Insects & rodents not present; no unauthorized animals 0 0 0 OUT Contamination prevented during food preparation, 37 0 0 \bigcirc storage & display ⊗ OUT 0 0 **&** 1 0.5 0 38 Personal cleanliness 0 0 0 ⊗ IN OUT 0 0 0 1 0.5 0 0 39 Wiping cloths: properly used & stored 0 0 OUT 0 0 0 1 0.5 0 40 Washing fruits & vegetables 0 0 **Proper Use of Utensils** .2653, .2654 0 0 0 1 0.5 0 ⊗ IN OUT In-use utensils: properly stored 41 0 0 080 Utensils, equipment & linens: properly stored, dried & handled 0 0 0 42 ΙŇ OUT 1 0.5 0 OIN 8 Single-use & single-service articles: properly 43 0 0 0 OUT 1 0.5 0 stored & used ⊗ IN OUT $\overline{000}$ Gloves used properly 0 0 44 0 1 0.5 0 Utensils and Equipment .2653, .2654, .2663 ⊗ OUT ○ **⊗** ○ 2 1 0 Equipment, food & non-food contact surfaces approved, 45 0 \bigcirc cleanable, properly designed, constructed, & used OIN ⊗ OUT 0 0 **8** 1 0.5 0 Warewashing facilities: installed, maintained, & used; 0 0 46 0 test strips ⊗ OUT ○ **⊗** ○ 1 0.5 0 0 0 0 47 Non-food contact surfaces clean **Physical Facilities** .2654, .2655, .2656 OUT $\begin{array}{c|c} \bigcirc & \bigcirc & \bigcirc \\ 2 & 1 & 0 \end{array}$ Hot & cold water available; adequate pressure 0 0 0 48 ⊗ IN OUT 49 Plumbing installed; proper backflow devices 0 0 0 ⊗ IN 0 0 OUT 50 0 0 0 Sewage & waste water properly disposed ⊗ IN OUT 0 0 0 1 0.5 0 Toilet facilities: properly constructed, supplied 0 0 51 0 ⊗ OUT **⊗** ○ ○ 1 0.5 0 Garbage & refuse properly disposed; 52 8 0 facilities maintained 8 $\circ \otimes \circ$ 53 Physical facilities installed, maintained & clean 0 0 0 OUT 1 0.5 0 OIN ⊗ OUT ○ **⊗** ○ 1 0.5 0 Meets ventilation & lighting requirements; 54 \bigcirc 8 0 **Total Deductions:**

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: HAM S RESTAURANT	Establishment ID: 3034012055	Date: 12/06/2012
Location Address: 550 PINEVIEW DRIVE		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: RCR MARKETING LLC		Email 3:
Telephone:		

	Temperature Observations							
Item macaroni	Location walk in	Temp 38	Item diced	Location left make	Temp 35	Item vegetable	Location reheat	Temp 186
tomato bisque	walk in	39	hb eggs	left make	35			
taco meat	walk in	41	sliced	central make	40			
broc cheese	walk in	40	sliced cheese	central make	40			
grilled chicken	walk in	37	lettuce	central make	40			
cooked ribs	walk in	40	spiral noodle	right make	37			
hot water	3 vat sink	139	macaroni	right make	37			
air temp	central reach in	37	air temps	bar coolers	37			

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.

Provide waste receptacles at all handsinks (dining room handsinks, bar hand sinks, and sink by office door. 15A NCAC 18A .2656 ref. 6-301.20 A handwashing sink that is provided with disposable towels shall be provided with a waste receptacle

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- Large and small metal pans, slicer, ceramic dip utensils, plastic containers, lids, and cups stored found with dried food or splash contamination on them. Take more time to wash, rinse, and sanitize utensils. Remove all unused utensils from facility. / Wash rinse and sanitize food prep sinks more thoroughly to remove food particles.
- Approximately 50% of foods are properly labeled. Remember that datemarking begins once commercially packaged item has been opened. 15A NCAC18A .2653 ref. 3-501.17 (A): Refrigerated, ready-to-eat, potentially hazardous food prepared and held in a food establishment for more than 24 hours shall be marked to indicate the date or day by which the food shall be consumed on the premises, sold, or discarded, based on the temperature and time combinations specified below. The day of preparation shall be counted as Day 1. (1): 41°F or less for a maximum of 7 days; or (2): between 41°F and 45°F for a maximum of 4 days *Commercially prepared and packaged foods must be marked once opened with appropriate date whereas the date opened is counted as Day 1.
- FYI: 15A NCAC 18A .2652 ref. 2-402.11 (A): Food employees shall wear hair restraints such as hats, hair coverings or nets, beard restraints, and clothing that covers body hair, that are designed and worn to effectively keep their hair from contacting exposed food; clean equipment, utensils, and linens; and unwrapped single-service and single-use articles / 15A NCAC 18A .2652 ref. 2-303.11: Except for a plain ring such as a wedding band, while preparing food, food employees may no wear jewelry on their arms or wrists / 15A NCAC 18A .2652 ref. 2-302.11 (B): Unless wearing intact gloves in good repair, a food employee may not wear fingernail polish or artificial fingernails when working with exposed food



Comment Addendum to Food Establishment Inspection Report Establishment Name: HAM S RESTAURANT Establishment ID: 3034012055 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. Ice scoop stored in unclean holster, plastic lids stored in wet bulk container on shelf, clean equipment blade sitting in pitted water of prep sink. Store utensils, in clean, dry areas. Plastic novelty beer cups unprotected during storage at bar. 15A NCAC18A .2654 ref. 4-904.11 (A): Single-service and single-use articles shall be handled, displayed, and dispensed so that contamination of food- and lip-contact surfaces is prevented. (C): Single-service articles that are intended for food- or lip-contact shall be furnished for consumer self-service with the original individual wrapper intact or from an approved dispenser. 45 Repair lo boy immediately. Air temperature inside measures 67°F but no food inside. Observed frost buildup along right inside. / Replace missing vent covers of bar coolers (Repeat Violation). Remove damaged utensils with sharp or uncleanable edges, including cracked ice buckets. / Some fryer baskets have fraying wires and must be replaced. / Remove corroding soda diffusers. Wash water in 3 vat sink measured below requirement at 98°F. 15A NCAC 18A .2654 ref. 4-501.19: The temperature of the wash solution in manual warewashing equipment shall be maintained at no less than 110°F or the temperature specified on the cleaning agent manufacturer's label instructions. / Sanitizer water measured below requirement at 68°F. 15A NCAC 18A .2654 ref. 4-501.114 (C)(1): A guaternary ammonium compound solution shall have a minimum temperature of 75°F. Clean piping under counter equipment and ice machine (Repeat Violation), undersides of dirty landing area of dish machine area, under beverage station and dump sink, outside of dry good containers, inside plastic drawers in dry storage area, etc.

Outside garbage dumpster had lid open. 15A NCAC 18A .2655 ref. 5-501.110: Refuse, recyclables, and returnables shall be stored in receptacles or waste handling units so that they are inaccessible to insects and rodents. / Several kitchen garbage cans have holes in them and must be replaced. 15A NCAC 18A .2655 ref. 5-501.11: Storage areas, enclosures, and receptacles for refuse,

recyclables, and returnables shall be maintained in good repair. / Remove damaged equipment and refuse from around can wash area. 15A NCAC 18A .2656 ref. 6-501.114(A): The premises shall be free of: (A) Items that are unnecessary to the operation or

Clean floors under ice machine and beverage station, other beverage station by door, and under bar equipment. Clean walls behind utensils storage shelf by walk in. In walk in, repair peeling baseboard tile around walk in freezer door perimeter.

maintenance of the establishment such as equipment that is nonfunctional or no longer used



Comment Addendum to Food Establishment Inspection Report

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Lighting measures below the required minimum 50 foot candles (fc) along the make line: small make (40-43fc), toaster prep table (26-35fc), central make <Repeat Violation> (21-28fc), small prep table (36fc), and ice bath table (36fc). Lighting is below the required minimum 10fc in the far end of the walk in freezer (5fc). Replace cracked light shielf over 2 vat prep sink. Lighting is below the required minimum 20fc at the waitress register handsink (6fc), both restroom handsinks (10fc), and all toilets and urinals (2-7fc). Increase lighting.



Comment Addendum to Food Establishment Inspection Report

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Observations and Corrective Actions

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