Food Establishment Inspection Report

Score: 97.5

Establishment Name: GRANDMA RUBY S COUNTRY COOKIN Establishment ID: 3034012162

Date: 02 / 11 / 2013 Status Code: A

Time In: 11 : 00 ⊗ am ○ pm Time Out: 12 : 45 ○ am ⊗ pm

Total Time: 1 hr 45 minutes

Category #: IV

Establishment Type: Full-Service Restaurant

Instructions:

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

Location Address: 6110 UNIVERSITY PARKWAY

City: WINSTON SALEM

State: NC Zip: 27105

County: 34 Forsyth

Permittee: GRANDMA RUBY S LLC

Telephone: (336) 377-9227

⊗ 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

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

	Compliance Status		OUT	CDI	R	VR
	Supervision .2652					
1	○ IN ⊗ OUT ○ N/A	PIC Present; Demonstration-Certification by accredited program and perform duties	○ 2 ⊗ 0	○	○	○
	Employee Health .2652					
2	⊗ IN ○ OUT	Management, employees knowledge; responsibilities & reporting	○ 3 ○ 1.5 ○ 0	○	○	○
3	○ IN ⊗ OUT	Proper use of reporting, restriction & exclusion	○ 3 ○ 1.5 ⊗ 0	⊗	○	○
	Good Hygienic Practices .2652, .2653					
4	⊗ IN ○ OUT	Proper eating, tasting, drinking, or tobacco use	○ 2 ○ 1 ○ 0	○	○	○
5	⊗ IN ○ OUT	No discharge from eyes, nose, and mouth	○ 1 ○ 0.5 ○ 0	○	○	○
	Preventing Contamination by Hands .2652, .2653, .2655, .2656					
6	⊗ IN ○ OUT	Hands clean & properly washed	○ 4 ○ 2 ○ 0	○	○	○
7	⊗ IN ○ OUT ○ N/O	No bare hand contact with RTE foods or pre-approved alternate procedure properly allowed	○ 3 ○ 1.5 ○ 0	○	○	○
8	⊗ IN ○ OUT	Handwashing sinks supplied & accessible	○ 2 ○ 1 ○ 0	○	○	○
	Approved Source .2653, .2655					
9	⊗ IN ○ OUT	Food obtained from approved source	○ 2 ○ 1 ○ 0	○	○	○
10	○ IN ○ OUT ⊗ N/O	Food received at proper temperature	○ 2 ○ 1 ○ 0	○	○	○
11	⊗ IN ○ OUT	Food in good condition, safe & unadulterated	○ 2 ○ 1 ○ 0	○	○	○
12	○ IN ○ OUT ⊗ N/A ○ N/O	Required records available: shellstock tags, parasite destruction	○ 2 ○ 1 ○ 0	○	○	○
	Protection from Contamination .2653, .2654					
13	⊗ IN ○ OUT ○ N/A ○ N/O	Food separated & protected	○ 3 ○ 1.5 ○ 0	○	○	○
14	⊗ IN ○ OUT	Food-contact surfaces: cleaned & sanitized	○ 3 ○ 1.5 ○ 0	○	○	○
15	⊗ IN ○ OUT	Proper disposition of returned, previously served, reconditioned, & unsafe food	○ 2 ○ 1 ○ 0	○	○	○
	Potentially Hazardous Food TIme/Temperature .2653					
16	⊗ IN ○ OUT ○ N/A ○ N/O	Proper cooking time & temperatures	○ 3 ○ 1.5 ○ 0	○	○	○
17	○ IN ○ OUT ○ N/A ⊗ N/O	Proper reheating procedures for hot holding	○ 3 ○ 1.5 ○ 0	○	○	○
18	○ IN ○ OUT ○ N/A ⊗ N/O	Proper cooling time & temperatures	○ 3 ○ 1.5 ○ 0	○	○	○
19	⊗ IN ○ OUT ○ N/A ○ N/O	Proper hot holding temperatures	○ 3 ○ 1.5 ○ 0	○	○	○
20	⊗ IN ○ OUT ○ N/A ○ N/O	Proper cold holding temperatures	○ 3 ○ 1.5 ○ 0	○	○	○
21	○ IN ⊗ OUT ○ N/A ○ N/O	Proper date marking & disposition	○ 3 ○ 1.5 ⊗ 0	⊗	○	○
22	⊗ IN ○ OUT ○ N/A ○ N/O	Time as a public health control: procedures & records	○ 2 ○ 1 ○ 0	○	○	○
	Consumer Advisory .2653					
23	○ IN ○ OUT ⊗ N/A	Consumer advisory provided for raw or undercooked foods	○ 1 ○ 0.5 ○ 0	○	○	○
	Highly Susceptible Populations .2653					
24	○ IN ○ OUT ⊗ N/A	Pasteurized foods used; prohibited foods not offered	○ 3 ○ 1.5 ○ 0	○	○	○
	Chemical .2653, .2657					
25	○ IN ○ OUT ⊗ N/A	Food additives: approved & properly used	○ 1 ○ 0.5 ○ 0	○	○	○
26	⊗ IN ○ OUT ○ N/A	Toxic substances properly identified stored, & used	○ 2 ○ 1 ○ 0	○	○	○
	Conformance with Approved Procedures .2653, .2654, .2658					
27	○ IN ○ OUT ⊗ N/A	Compliance with variance, specialized process, reduced oxygen packing criteria or HACCP plan	○ 2 ○ 1 ○ 0	○	○	○

Food Establishment Inspection Report, continued

Establishment Name: GRANDMA RUBY S COUNTRY COOKIN Establishment ID: 3034012162

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

6. 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:

Ruby W. Baugus
Person in Charge (Print)

Ruby W. Baugus
Person in Charge (Signature)

Kenneth Michaud
Regulatory Authority (Print)

Kenneth Michaud REHS
Regulatory Authority (Signature)

Contact Number: (____) ____ - _____

Verification Required Date: ___ / ___ / _____

REHS ID: 2259 - Michaud, Kenneth

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.

	Compliance Status		OUT	CDI	R	VR
	Safe Food and Water	.2653, .2655, .2658				
28	⊗ IN ○ OUT	Pasteurized eggs used where required	○ 1 ○ 0.5 ○ 0	○	○	○
29	⊗ IN ○ OUT	Water and ice from approved source	○ 2 ○ 1 ○ 0	○	○	○
30	○ IN ○ OUT ⊗ N/A	Variance obtained for specialized processing methods	○ 1 ○ 0.5 ○ 0	○	○	○
	Food Temperature Control	.2653, .2654				
31	⊗ IN ○ OUT	Proper cooling methods used; adequate equipment for temperature control	○ 1 ○ 0.5 ○ 0	○	○	○
32	○ IN ○ OUT ⊗ N/A ○ N/O	Plant food properly cooked for hot holding	○ 1 ○ 0.5 ○ 0	○	○	○
33	○ IN ○ OUT ○ N/A ⊗ N/O	Approved thawing methods used	○ 1 ○ 0.5 ○ 0	○	○	○
34	○ IN ⊗ OUT	Thermometers provided & accurate	○ 1 ⊗ 0.5 ○ 0	○	○	○
	Food Identification	.2653				
35	○ IN ⊗ OUT	Food properly labeled: original container	○ 2 ○ 1 ⊗ 0	○	○	○
	Prevention of Food Contamination	.2652, .2653, .2654, .2656, .2657				
36	⊗ IN ○ OUT	Insects & rodents not present; no unauthorized animals	○ 2 ○ 1 ○ 0	○	○	○
37	⊗ IN ○ OUT	Contamination prevented during food preparation, storage & display	○ 2 ○ 1 ○ 0	○	○	○
38	○ IN ⊗ OUT	Personal cleanliness	○ 1 ○ 0.5 ⊗ 0	○	○	○
39	⊗ IN ○ OUT	Wiping cloths: properly used & stored	○ 1 ○ 0.5 ○ 0	○	○	○
40	⊗ IN ○ OUT	Washing fruits & vegetables	○ 1 ○ 0.5 ○ 0	○	○	○
	Proper Use of Utensils	.2653, .2654				
41	⊗ IN ○ OUT	In-use utensils: properly stored	○ 1 ○ 0.5 ○ 0	○	○	○
42	○ IN ⊗ OUT	Utensils, equipment & linens: properly stored, dried & handled	○ 1 ⊗ 0.5 ○ 0	○	○	○
43	⊗ IN ○ OUT	Single-use & single-service articles: properly stored & used	○ 1 ○ 0.5 ○ 0	○	○	○
44	⊗ IN ○ OUT	Gloves used properly	○ 1 ○ 0.5 ○ 0	○	○	○
	Utensils and Equipment	.2653, .2654, .2663				
45	○ IN ⊗ OUT	Equipment, food & non-food contact surfaces approved, cleanable, properly designed, constructed, & used	○ 2 ⊗ 1 ○ 0	○	○	○
46	⊗ IN ○ OUT	Warewashing facilities: installed, maintained, & used; test strips	○ 1 ○ 0.5 ○ 0	○	○	○
47	⊗ IN ○ OUT	Non-food contact surfaces clean	○ 1 ○ 0.5 ○ 0	○	○	○
	Physical Facilities	.2654, .2655, .2656				
48	⊗ IN ○ OUT	Hot & cold water available; adequate pressure	○ 2 ○ 1 ○ 0	○	○	○
49	⊗ IN ○ OUT	Plumbing installed; proper backflow devices	○ 2 ○ 1 ○ 0	○	○	○
50	⊗ IN ○ OUT	Sewage & waste water properly disposed	○ 2 ○ 1 ○ 0	○	○	○
51	○ IN ⊗ OUT	Toilet facilities: properly constructed, supplied & cleaned	○ 1 ⊗ 0.5 ○ 0	○	○	○
52	⊗ IN ○ OUT	Garbage & refuse properly disposed; facilities maintained	○ 1 ○ 0.5 ○ 0	○	○	○
53	⊗ IN ○ OUT	Physical facilities installed, maintained & clean	○ 1 ○ 0.5 ○ 0	○	○	○
54	⊗ IN ○ OUT	Meets ventilation & lighting requirements; designated areas used	○ 1 ○ 0.5 ○ 0	○	○	○
		Total Deductions:	2.5			

Comment Addendum to Food Establishment Inspection Report

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Establishment ID: 3034012162

Date: 02/11/2013

Status Code: A

Category #: IV

Email 1: rubybaugus@msn.com

Email 2:

Email 3:

Location Address: 6110 UNIVERSITY PARKWAY

City: WINSTON SALEM State: NC

County: 34 Forsyth Zip: 27105

Wastewater System: ⊗ Municipal/Community ○ On-Site System

Water Supply: ⊗ Municipal/Community ○ On-Site System

Permittee: GRANDMA RUBY S LLC

Telephone: (336) 377-9227

Temperature Observations

Item	Location	Temp	Item	Location	Temp	Item	Location	Temp
Hamburger	Grill	173	Lettuce	Make unit	42			
Chicken	Grill	176	Slaw	Make unit	36			
Greens	Hot bar	193	Raw ground	Lower make unit	41			
Pintos	Hot bar	173	Sliced	Walk in cooler	40			
Pork loin	Hot bar	156	Slaw	Walk in cooler	39			
Chicken and	Hot bar	164						
Sliced	Make unit	39	Hot water	Three compartment sink	156			
Sliced cheese	Make unit	44	Chlorine	Sanitizing compartment	50			

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.

Spell

1 2-102.12 Certified Food Protection Manager - Manager does not have ANSI approved food safety course certificate - must have said certificate by Jan 1, 2014

3 2-201.12 Exclusions and Restrictions - Facility does not have employee health policy in place for employees - must have employee health policy in place, signed and on file - instructed manager on concept and applicability of policy

21 3-501.17 Ready-To-Eat Potentially Hazardous Food (Time/Temperature Control for Safety Food), Date Marking - Although most items in walk in cooler were date marked, some were not date marked and most had multiple dates - make sure to clearly identify which date is date opened/prepared and date consumed/discarded if using both dates

34 4-302.12 Food Temperature Measuring Devices - No proper thermometer present at time of inspection - must have, at minimum, a metal stem thermometer, accurate to within two degrees F and ranging from 0 - 220 deg F

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35 3-602.11 Food Labels - Unlabeled bin of oats in dry goods area - make sure all dry goods bins are labeled

38 2-402.11 Effectiveness-Hair Restraints - Employees must wear some type of hair restraint, this includes manager, while in food prep area

42 4-901.11 Equipment and Utensils, Air-Drying Required - Some pans stacked incorrectly while wet - make sure to cross stack or separate when wet to allow adequate air drying

45 4-501.11 Good Repair and Proper Adjustment-Equipment - Leak in walk in cooler needs to be repaired as soon as possible; Recover exposed screw caps in FRP tile in walk in cooler; Reseal loose FRP tile near door in walk in cooler

51 5-501.17 Toilet Room Receptacle, Covered - Women's restroom must have covered trash recepticle

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