Food Establishment Inspection Report

Establishment Name: NITTY GRITTY SOUL CAFE

Date: 12/20/201					
Time In: $\underline{12}$: $\underline{49}_{\otimes}^{\bigcirc}$ ar	Time Out: 03 : $45 \otimes pm$				
Total Time: 2 hrs 56 min	nutes				
Category #: IV					
Establishment Type:					

Instructions:

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

Location Address: 3003 S MAIN STREET						
City: _WINSTON SALEM						
State: NC Zip: 27107						
County: 34 Forsyth						
Permittee: THE NITTY GRITTY SOUL CAFE, 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: 92

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

Establishment ID: 3034014029

Public Health Interventions: Control measures to prevent foodborne illness or injury.							
Co	mplianc	e Statu	s	OUT	CDI	R	VR
Su	pervisio	on	.2652				
1	⊗ C IN OU		PIC Present; Demonstration-Certification by accredited program and perform duties	○ ○ 2 0	0	0	0
En	ployee	_	.2652				
2		OUT	Management, employees knowledge; responsibilities & reporting	0 0 0 3 1.5 0	0	0	0
3		OUT	Proper use of reporting, restriction & exclusion	0 0 0 3 1.5 0	0	0	0
Go		ienic F	Practices .2652, .2653				
4		OUT	Proper eating, tasting, drinking, or tobacco use	$\begin{array}{c c} \bigcirc \bigcirc \bigcirc \bigcirc \\ 2 & 1 & 0 \end{array}$	0	0	0
5	IN_	O OUT	No discharge from eyes, nose, and mouth	0 0 0	0	0	0
Pre		g Cont	amination by Hands .2652, .2653, .2655, .2656	5			
6	IN	OUT	Hands clean & properly washed	0 0 0 4 2 0	0	0	0
7	⊗ C IN OU	T N/O	No bare hand contact with RTE foods or pre-approved alternate procedure properly allowed	○ ○ ○ 3 1.5 0	0	0	0
8		OUT	Handwashing sinks supplied & accessible	0 0 0 2 1 0	0	0	0
Аp	proved	Sourc	e .2653, .2655				
9	⊗ IN	OUT	Food obtained from approved source		0	0	0
10	O C IN OU		Food received at proper temperature	$ \bigcirc \bigcirc \bigcirc \bigcirc \bigcirc $ 2 1 0	0	0	0
11		OUT	Food in good condition, safe & unadulterated	$ \bigcirc \bigcirc \bigcirc \bigcirc \bigcirc $ 2 1 0	0	0	0
12	O O (⊗ ○ I/A N/O	Required records available: shellstock tags, parasite destruction		0	0	0
Protection from Contamination .2653, .2654							
13	○ ⊗ I TUO NI	O O	Food separated & protected	⊗ ○ ○ 3 1.5 0	0	8	0
14	⊗ IN	O OUT	Food-contact surfaces: cleaned & sanitized	○ ○ ○ 3 1.5 0	0	0	0
15	⊗ IN	OUT	Proper disposition of returned, previously served, reconditioned, & unsafe food	$ \bigcirc \bigcirc \bigcirc \bigcirc \bigcirc $ 2 1 0	0	0	0
Potentially Hazardous Food Time/Temperature .2653							
16	⊗ ○ ⟨ IN OUT N	O O I/A N/O	Proper cooking time & temperatures	O O O 3 1.5 0	0	0	0
17	⊗ ○ ⊗ IN OUT N	O O I/A N/O	Proper reheating procedures for hot holding	○ ○ ○ 3 1.5 0	0	0	0
18	⊗ O (Proper cooling time & temperatures	0 0 0 3 1.5 0	0	0	0
19	⊗ O Ø IN OUT N	O O I/A N/O	Proper hot holding temperatures	0 0 0 3 1.5 0	0	0	0
20	INOUTN		Proper cold holding temperatures	○ ○ ○ 3 1.5 0	0	0	0
21	IN OUT N		Proper date marking & disposition	○ ○ ⊗ 3 1.5 0	8	0	0
22	O O (Time as a public health control: procedures & records	0 0 0 2 1 0	0	0	0
Consumer Advisory .2653							
23	O C IN OU		Consumer advisory provided for raw or undercooked foods	0 0 0 1 0.5 0	0	0	0
Ηiς	, ,	<u> </u>	ole Populations .2653				
24	IN OU		Pasteurized foods used; prohibited foods not offered	0 0 0 3 1.5 0	0	0	0
Chemical .2653, .2657							
25	⊗ C IN OU		Food additives: approved & properly used	0 0 0 1 0.5 0	0	0	0
26	⊗ C IN OU		Toxic substances properly identified stored, & used	$ \bigcirc \bigcirc \bigcirc \bigcirc \bigcirc $ 2 1 0		0	0
Со	nforma		th Approved Procedures .2653, .2654,	.2658			
27	O C IN OU		Compliance with variance, specialized process, reduced oxygen packing criteria or HACCP plan	$ \bigcirc \bigcirc \bigcirc \bigcirc \bigcirc $ 2 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: NITTY GRITTY SOUL CAFE Establishment ID: 3034014029

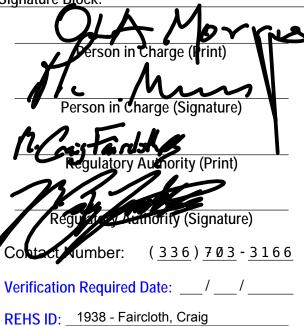
Instructions, continued:

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:



No. of Risk Factor/ Intervention Violations: 2 No. of Repeat Risk Factor/Intervention Violations: 1

Good Retail Practices								
Preventative measures to control the addition of pathogens,								
Co	mplian	ce Statu	chemicals, and physical objects into foods.	OU	IT .	CDI	R	VR
		d and V						
28	⊗ IN	OUT	Pasteurized eggs used where required	0 0		0	0	0
29	⊗ IN	OUT	Water and ice from approved source	O C		0	0	0
30		O & UT N/A	Variance obtained for specialized processing methods	0 0		0	0	0
Fo	od Tei	mperatu	ure Control .2653, .2654					
31	⊗ IN	OUT	Proper cooling methods used; adequate equipment for temperature control	0 0.		0	0	0
32	⊗ ○ IN OU	O O	Plant food properly cooked for hot holding	0.9		0	0	0
33	⊗ ○ IN OUT	O O	Approved thawing methods used	0 0		0	0	0
34	⊗ IN	OUT	Thermometers provided & accurate	O C		0	0	0
Fo		ntificat	ion .2653					
35	⊗ IN	OUT	Food properly labeled: original container	O C 2 1		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	O IN	⊗ OUT	Contamination prevented during food preparation, storage & display	○ 8 2 1	0	0	0	0
38	⊗ IN	OUT	Personal cleanliness	0 C 1 0.		0	0	0
39	⊗ IN	OUT	Wiping cloths: properly used & stored	1 0.		0	0	0
40	⊗ IN	OUT	Washing fruits & vegetables	O C		0	0	0
Proper Use of Utensils .2653, .2654								
41	IN	OUT	In-use utensils: properly stored	1 0.	5 0	0	0	0
42	⊗ IN	OUT	Utensils, equipment & linens: properly stored, dried & handled	1 0.	5 Ö	0	0	0
43	IN	OUT	Single-use & single-service articles: properly stored & used	1 0.		0	0	0
44	⊗ IN	OUT	Gloves used properly	0 C 1 0.		0	0	0
Ut			uipment .2653, .2654, .2663	0.0				
45	IN	⊗ OUT	Equipment, food & non-food contact surfaces approved, cleanable, properly designed, constructed, & used	2 1	0	0	8	0
46	⊗ IN	OUT	Warewashing facilities: installed, maintained, & used; test strips	1 0.	5 0	0	0	0
47	O IN	⊗ OUT	Non-food contact surfaces clean	O &	0 5 0	0	0	0
Physical Facilities .2654, .2655, .2656								
48	⊗ IN	OUT	Hot & cold water available; adequate pressure	2 1	0	0	0	0
49	⊗ IN	OUT	Plumbing installed; proper backflow devices	2 1	0	0	0	0
50	⊗ IN	OUT	Sewage & waste water properly disposed	O C 2 1	Ō	0	0	0
51	⊗ IN	OUT	Toilet facilities: properly constructed, supplied & cleaned	1 0.	5 0	0	0	0
52	⊗ IN	OUT	Garbage & refuse properly disposed; facilities maintained	O C 1 0.	5 0	0	0	0
53	O IN	⊗ OUT	Physical facilities installed, maintained & clean	⊗ ○ 1 0.	5 0	0	8	0
54	O IN	⊗ OUT	Meets ventilation & lighting requirements; designated areas used	O &) 5 0	0	0	0
			Total Deductions:	8				

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

Establishment Name: NITTY GRITTY SOUL CAFE	Establishment ID: 3034014029	Date: 12/20/2012
Location Address: 3003 S MAIN STREET		Status Code: A
City: WINSTON SALEM State: NC		Category #:IV
County: 34 Forsyth Zip: 27107		Email 1:
Wastewater System: ⊗ Municipal/Community ○ On-Site System		Email 2:
Water Supply: ⊗ Municipal/Community ○ On-Site System		EIIIdii Z.
Permittee: THE NITTY GRITTY SOUL CAFE, LLC		Email 3:
Telephone:		

Temperature Observations								
Item rice	Location hot hold	Temp 138	Item pork chops	Location reach in cooler	Temp 43	Item	Location	Temp
collard greens	hot hold	157	hot dogs	reach in cooler	42			
yams	hot hold	159	spaghetti	walk in cooler	40			
diced	make unit	41	broccoli and	walk in cooler	40			
potato salad	make unit	40	pork chops	walk in cooler	41			
mac and	hot hold	178	ground beef	walk in cooler	42			
baked	hot hold	169	chicken	walk in cooler	40			
raw chicken	reach in cooler	42	hot water	3 comp sink	146			

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.



- Raw ground beef and beef steaks were found stored shell eggs; raw pork chops were found stored above macaroni and cheese, green beans, cabbage, spaghetti, and broccoli and cheese in the walk in cooler. When storing food items on shelves in refrigeration units keep them in order of final cooking temperature. E.G. (from bottom to top shelves) poultry, ground beef, beef, pork, shell eggs, seafood (all fish and crustacean meat), and vegetables / cooked / ready to eat.
- A date marking procedure is not currently in place in this facility. A date marking procedure required so that items can be tracked and stock can be properly rotated. Food items must be either used or discarded within 4 days of initial prep.
- Cases of shrimp were found stored in the floor in the walk in cooler. Keep all food items in storage above the floor to prevent contamination.
- Replace the damaged / rusting shelving throughout the facility. The interior portions of the doors on both the stand up reach in cooler and freezer are cracked and damaged, repair or replace the doors. Remove or repair the non working reach in freezer. Remove or repair the broken ice machine. Repair the damaged handle on the first faucet of the 3 compartment sink. The front hand sink is draining slowly. Repair it. Replace the missing caster and remove the rust / corrosion on the cart in the dish cleaning area. The stainless steel prep table / storage unit in the rear prep area does not meet NSF standards of being smooth and easily cleanable. Remove or repair it.



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47 Detailed cleaning is needed on the fryers, the hood system, and the shelving.

- Extensive repair is needed on the ceiling throughout the facility. Replace the damaged or missing ceiling tiles throughout the facility, this includes both the men's and women's restrooms. Repair and reseal the damaged areas of the FRP and plaster walls throughout the facility. Replace the missing base boards in the men's restroom. Repair the damaged door and threshold on the employee restroom. Cleaning is needed on the floors below equipment and shelving along boards and in corners.
- The lighting levels above the cook line are too low ranging from 9 Ftc to 50 Ftc. The required lighting level for this area is 50 Ftc. Replace the non working and missing light bulbs. Replace the damaged light shield above the dish cleaning area.



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