Food Establishment Inspection Report

Establishment Name: NITTY GRITTY SOUL CAFE

| Date: <u>Ø 6</u> / <u>2 7</u> / <u>2 Ø 1 3</u> Status Code: A | |
|---|----------|
| Fime In: <u>∅ 1</u> : <u>3 ∅ ⊗ pm</u> Time Out: <u>∅ 4</u> : <u>∅ 8 ⊗</u> | am pm |
| Total Time: 2 hrs 38 minutes | |
| 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 | | | | | |

 Click/fill the appropriate circle For "IN, OUT, N/A, N/O".
 IN= In Compliance, OUT= Not in col

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".

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

| 4 | |
|-----------|--|
| Page 1 of | Food Establishment Inspection Report, 7/2012 |

Establishment ID: 3034014029

Foodborne Illness Risk Factors and Public Health Interventions

Score: 87.5

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

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

| 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 S O O PIC Present; Demonstration-Certification by accredited program and perform duties | 2 0 | 0 | 0 | 0 | |
| Employee Health .2652 | | | | | |
| 2 8 Omanagement, employees knowledge; responsibilities & reporting | 0 0 0 3 1.5 0 | 0 | 0 | 0 | |
| 3 N OUT Proper use of reporting, restriction & exclusion | 0 0 0 3 1.5 0 | 0 | 0 | 0 | |
| Good Hygienic Practices .2652, .2653 | | | | | |
| 4 8 OUT Proper eating, tasting, drinking, or tobacco use | 2 1 0 | 0 | 0 | 0 | |
| 5 No discharge from eyes, nose, and mouth | 0 0 0 | 0 | 0 | 0 | |
| Preventing Contamination by Hands .2652, .2653, .2655, .265 | T | | | | |
| 6 N OUT Hands clean & properly washed | 000 | 0 | 0 | 0 | |
| 7 S O No bare hand contact with RTE foods or pre-approved alternate procedure properly allowed | 0 0 0 3 1.5 0 | 0 | 0 | 0 | |
| 8 N OUT Handwashing sinks supplied & accessible | $\begin{array}{c c} \bigcirc \bigcirc \bigcirc \bigcirc \\ 2 & 1 & 0 \end{array}$ | 0 | 0 | 0 | |
| Approved Source .2653, .2655 | | | | | |
| 9 8 On Food obtained from approved source | $\begin{array}{c c} \bigcirc \bigcirc \bigcirc \bigcirc \\ 2 & 1 & 0 \end{array}$ | 0 | 0 | 0 | |
| 10 O NOUT N/O Food received at proper temperature | $ \bigcirc \bigcirc \bigcirc \bigcirc \bigcirc $ 2 1 0 | 0 | 0 | 0 | |
| 11 8 OUT Food in good condition, safe & unadulterated | $\begin{array}{c c} \bigcirc \bigcirc \bigcirc \bigcirc \\ 2 & 1 & 0 \end{array}$ | 0 | 0 | 0 | |
| 12 O & Required records available: shellstock tags, parasite destruction | $\begin{array}{c c} \bigcirc \bigcirc \bigcirc \bigcirc \\ 2 & 1 & 0 \end{array}$ | 0 | 0 | 0 | |
| Protection from Contamination .2653, .2654 | | | | | |
| 13 S O O Food separated & protected | ⊗ ○ ○ 3 1.5 0 | 0 | 8 | 0 | |
| 14 S O Food-contact surfaces: cleaned & sanitized | 0 0 0 3 1.5 0 | 0 | 0 | 0 | |
| 15 S OUT Proper disposition of returned, previously served, reconditioned, & unsafe food | $\begin{array}{c c} \bigcirc \bigcirc \bigcirc \bigcirc \\ 2 & 1 & 0 \end{array}$ | 0 | 0 | 0 | |
| Potentially Hazardous Food Tlme/Temperature .2653 | | | | | |
| 16 S C C Proper cooking time & temperatures | 0 0 0 3 1.5 0 | 0 | 0 | 0 | |
| 17 O S Proper reheating procedures for hot holding | 0 0 0 3 1.5 0 | 0 | 0 | 0 | |
| 18 S C C Proper cooling time & temperatures | 0 0 0 3 1.5 0 | 0 | 0 | 0 | |
| 19 SOUT N/A N/O Proper hot holding temperatures | 0 0 0 3 1.5 0 | 0 | 0 | 0 | |
| 20 S O Proper cold holding temperatures | ○ ⊗ ○ 3 1.5 0 | 8 | 0 | 0 | |
| 21 S O O Proper date marking & disposition | ○ ⊗ ○ 3 1.5 0 | 8 | 8 | 0 | |
| 22 O S O Time as a public health control: procedures & records | $\begin{array}{c c} \bigcirc \bigcirc \bigcirc \bigcirc \\ 2 & 1 & 0 \end{array}$ | 0 | 0 | 0 | |
| Consumer Advisory .2653 | | | | | |
| 23 O O S Consumer advisory provided for raw or undercooked foods | 0 0 0 | 0 | 0 | 0 | |
| Highly Susceptible Populations .2653 | | | | | |
| 24 O O N/A Pasteurized foods used; prohibited foods not offered | 3 1.5 0 | 0 | 0 | 0 | |
| Chemical .2653, .2657 | | | | | |
| 25 S O Food additives: approved & properly used | 1 0.5 0 | 0 | 0 | 0 | |
| 26 S O Toxic substances properly identified stored, & used | $\begin{array}{c c} \bigcirc \bigcirc \bigcirc \bigcirc \\ 2 & 1 & 0 \end{array}$ | 0 | 0 | 0 | |
| Conformance with Approved Procedures .2653, .2654, | .2658 | | | | |
| 27 O S Compliance with variance, specialized process, reduced oxygen packing criteria or HACCP plan | $\begin{array}{c c} \bigcirc \bigcirc \bigcirc \bigcirc \\ 2 & 1 & 0 \end{array}$ | 0 | 0 | 0 | |

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

- 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:

First TOTONYAS

Last

Person in Charge (Print)

BES

Person in Charge (Signature)

First Last

M. Craig Faircloth

Regulatory Authority (Print)

Contact Number: (<u>336</u>)<u>703</u>-<u>3166</u>

Verification Required Date: ___/ ___/

REHS ID: 1938 - Faircloth, Craig

No. of Risk Factor/ Intervention Violations: 3 No. of Repeat Risk Factor/Intervention Violations: 2

| | | | Good Retail Practices | | | | |
|----|--|------------|---|---|-------|-------|------|
| | Preventative measures to control the addition of pathogens, | | | | | | |
| Cc | chemicals, and physical objects into foods. Compliance Status OUT CDI R VR | | | | | | |
| - | | d and V | | 001 | СЫ | IX. | VIX |
| 28 | ⊗ IN | OUT | Pasteurized eggs used where required | 0 0 0 | 0 | 0 | 0 |
| 29 | ⊗ IN | OUT | Water and ice from approved source | 000 | 0 | 0 | 0 |
| 30 | 0 (| ○ ⊗ | Variance obtained for specialized processing methods | 000 | 0 | 0 | 0 |
| ш | | | ure Control .2653, .2654 | 1 0.5 0 | | | |
| 31 | ⊗ IN | OUT | Proper cooling methods used; adequate equipment for temperature control | 000 | 0 | 0 | 0 |
| 32 | ⊗ ○ IN OUT | O O | Plant food properly cooked for hot holding | 0 0 0 1 0.5 0 | 0 | 0 | 0 |
| 33 | ⊗ ○ | O O | Approved thawing methods used | 0 0 0 | 0 | 0 | 0 |
| 34 | ₩ IN | OUT | Thermometers provided & accurate | 0 0 0 | 0 | 0 | 0 |
| Fo | | ntificati | ion .2653 | | | | |
| 35 | ⊗ IN | OUT | Food properly labeled: original container | O O O 2 1 0 | 0 | 0 | 0 |
| Pr | eventi | on of Fo | ood Contamination .2652, .2653, .2654, .2656 | 5, .2657 | | | |
| 36 | ⊗ IN | $^{\circ}$ | Insects & rodents not present; no unauthorized animals | $\begin{array}{c c} \bigcirc \bigcirc \bigcirc \bigcirc \\ 2 & 1 & 0 \end{array}$ | 0 | 0 | 0 |
| 37 | OIN | ⊗ OUT | Contamination prevented during food preparation, storage & display | ⊗ ○ ○ 2 1 0 | 0 | 8 | 0 |
| 38 | ⊗ IN | OUT | Personal cleanliness | 0 0 0 1 0.5 0 | 0 | 0 | 0 |
| 39 | ⊗ IN | OUT | Wiping cloths: properly used & stored | 0 0 0 1 0.5 0 | 0 | 0 | 0 |
| 40 | ⊗ IN | OUT | Washing fruits & vegetables | 0 0 0 1 0.5 0 | 0 | 0 | 0 |
| Pr | oper U | se of U | tensils .2653, .2654 | | | | |
| 41 | ⊗ | OUT | In-use utensils: properly stored | 0 0 0 | 0 | 0 | 0 |
| 42 | O Z | ⊗ 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 | 0 0 0 1 0.5 0 | 0 | 0 | 0 |
| 44 | ⊗ IZ | OUT | Gloves used properly | 0 0 0 | 0 | 0 | 0 |
| Ut | ensils | and Eq | uipment .2653, .2654, .2663 | | | | |
| 45 | 1114 | ⊗ 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 | 0 0 0 1 0.5 0 | 0 | 0 | 0 |
| 47 | ○ N | ⊗ OUT | Non-food contact surfaces clean | ○ ⊗ ○ 1 0.5 0 | 0 | 0 | 0 |
| Ph | nysical | Faciliti | es .2654, .2655, .2656 | | | | |
| 48 | ⊗ IZ | OUT | Hot & cold water available; adequate pressure | O O O 2 1 0 | 0 | 0 | 0 |
| 49 | ⊗ IN | OUT | Plumbing installed; proper backflow devices | O O O 2 1 0 | 0 | 0 | 0 |
| 50 | ⊗ IS | 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 1 0.5 0 | 0 | 0 | 0 |
| 52 | ⊗ IN | OUT | Garbage & refuse properly disposed; facilities maintained | 0 0 0 1 0.5 0 | 0 | 0 | 0 |
| 53 | OIN | ⊗ OUT | Physical facilities installed, maintained & clean | ⊗ ○ ○ 1 0.5 0 | 0 | 8 | 0 |
| 54 | O Z | ⊗ OUT | Meets ventilation & lighting requirements; designated areas used | ⊗ ○ ○ 1 0.5 0 | 0 | 8 | 0 |
| | | | Total Deductions: | 12.5 | | | |
| | | | North Carolina Department of Health & Human Services | Division of | Publi | c Hea | alth |

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

Comment Addendum to Food Establishment Inspection Report

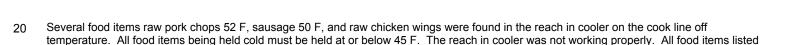
| Establishment Name: NITTY GRITTY SOUL CAFE | Establishment ID: 3034014029 | Date: 06/27/2013 |
|--|------------------------------|------------------|
| Location Address: 3003 S MAIN STREET | | Status Code: A |
| City: WINSTON SALEM State: NC | | Category #:IV |
| County: <u>34 Forsyth</u> Zip: <u>27107</u> | | Email 1: |
| Wastewater System: ⊗ Municipal/Community ○ On-Site System Water Supply: ⊗ Municipal/Community ○ On-Site System | | Email 2: |
| Permittee: THE NITTY GRITTY SOUL CAFE, LLC | • | Email 3: |
| Telephone: | | |

| Temperature Observations | | | | | | | | |
|--------------------------|----------------------|-------------|---------------|---------------------|-------------|------|----------|------|
| Item rice | Location hot hold | Temp 142 | Item wings | Location final cook | Temp 209 | Item | Location | Temp |
| chili | hot hold | 150 | ground beef | walk in cooler | 40 | | | |
| green beans | hot hold | 159 | greens | walk in cooler | 44 | | | |
| chili | hot hold | 150 | chicken | walk in cooler | 38 | | | |
| cut tomatoes | make unit | 42 | hot water | 3 comp sink | 155 | | | |
| slaw | make unit | 41 | | | | | | |
| boiled egg | make unit | 42 | | | | | | |
| cheese | reach in cooler | 43 | | | | | | |

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 Raw ground beef was found stored above shell eggs and various sauces in the walk in cooler. When stacking 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. All food items held longer than 24 hours beyond the prep date must be clearly marked with the discard / use by date.

Cases of french fries and pork were found stored in the floor in the walk in cooler. Keep all food items in storage above the floor to prevent contamination.

above were moved to the walk in cooler.

| Establishment Name: NITTY GRITTY SOUL CAFE | Establishment ID: 3034014029 |
|--|---|
| | nd Corrective Actions me frames below, or as stated in sections 8-405.11 of the food code. |
| Clean utensils were found stored in dirty storage bins. Clean the | |
| | |
| | |
| Replace the damaged / rusting shelving throughout the facility. The | ne interior portions of the doors on both the stand up reach in cooler and |
| freezer are cracked and damaged, repair or replace the doors. The the time of this inspection. Repair it. Remove or repair the non w | ne ambient air temperature of the reach in cooler on the cook line was 50 F at orking reach in freezer. Remove or repair the broken ice machine. Repair the e stainless steel prep table / storage unit in the rear prep area does not meet |
| | |
| Detailed cleaning is needed on the fryers, the hood system, and t | he shelving. |
| | |
| | |
| | Replace the damaged or missing ceiling tiles throughout the facility, this eal the damaged areas of the FRP and plaster walls throughout the facility. he damaged door and threshold on the employee restroom. |
| | |
| | |
| The lighting levels above the cook line are too low ranging from 9 non working and missing light bulbs. Replace the damaged light s | Ftc to 50 Ftc. The required lighting level for this area is 50 Ftc. Replace the shield above the dish cleaning area. |
| | |
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| | |



Comment Addendum to Food Establishment Inspection Report

Establishment Name: NITTY GRITTY SOUL CAFE Establishment ID: 3034014029

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Comment Addendum to Food Establishment Inspection Report

Establishment Name: NITTY GRITTY SOUL CAFE Establishment ID: 3034014029

Observations and Corrective Actions

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