

# Food Establishment Inspection Report

Score: 91.5

Establishment Name: LJVM COLISEUM #115

Establishment ID: 3034020203

Date: 01 / 22 / 2013 Status Code: A

Time In: 08 : 05  am  pm Time Out: 9 : 00  am  pm

Total Time: 55 minutes

Category #: II

Establishment Type: \_\_\_\_\_

**Instructions:**

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

Location Address: 2825 UNIVERSITY PKWY

City: WINSTON SALEM

State: NC Zip: 27105

County: 34 Forsyth

Permittee: CITY OF WINSTON SALEM

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".

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



# Food Establishment Inspection Report, continued

Establishment Name: LJVM COLISEUM #115

Establishment ID: 3034020203

**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:**

Chris McArthur  
Person in Charge (Print)

Chris McArthur  
Person in Charge (Signature)

Anthony Williams  
Regulatory Authority (Print)

Anthony Williams  
Regulatory Authority (Signature)

Contact Number: (\_\_\_\_) \_\_\_\_ - \_\_\_\_

Verification Required Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

REHS ID: 1846 - Williams, Tony

No. of Risk Factor/  
Intervention  
Violations: 8

No. of Repeat Risk  
Factor/Intervention  
Violations: \_\_\_\_\_

<b>Good Retail Practices</b>								
Preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.								
Compliance Status		OUT	CDI	R	VR			
<b>Safe Food and Water</b> .2653, .2655, .2658								
28	<input checked="" type="radio"/> IN <input type="radio"/> OUT	Pasteurized eggs used where required	1	0.5	0	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
29	<input checked="" type="radio"/> IN <input type="radio"/> OUT	Water and ice from approved source	2	1	0	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
30	<input type="radio"/> IN <input type="radio"/> OUT <input checked="" type="radio"/> N/A	Variance obtained for specialized processing methods	1	0.5	0	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>Food Temperature Control</b> .2653, .2654								
31	<input checked="" type="radio"/> IN <input type="radio"/> OUT	Proper cooling methods used; adequate equipment for temperature control	1	0.5	0	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
32	<input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O	Plant food properly cooked for hot holding	1	0.5	0	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
33	<input type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input checked="" type="radio"/> N/O	Approved thawing methods used	1	0.5	0	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
34	<input checked="" type="radio"/> IN <input type="radio"/> OUT	Thermometers provided & accurate	1	0.5	0	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>Food Identification</b> .2653								
35	<input checked="" type="radio"/> IN <input type="radio"/> OUT	Food properly labeled: original container	2	1	0	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>Prevention of Food Contamination</b> .2652, .2653, .2654, .2656, .2657								
36	<input type="radio"/> IN <input checked="" type="radio"/> OUT	Insects & rodents not present; no unauthorized animals	2	1	0	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
37	<input checked="" type="radio"/> IN <input type="radio"/> OUT	Contamination prevented during food preparation, storage & display	2	1	0	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
38	<input checked="" type="radio"/> IN <input type="radio"/> OUT	Personal cleanliness	1	0.5	0	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
39	<input type="radio"/> IN <input checked="" type="radio"/> OUT	Wiping cloths: properly used & stored	1	0.5	0	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
40	<input checked="" type="radio"/> IN <input type="radio"/> OUT	Washing fruits & vegetables	1	0.5	0	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>Proper Use of Utensils</b> .2653, .2654								
41	<input type="radio"/> IN <input checked="" type="radio"/> OUT	In-use utensils: properly stored	1	0.5	0	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
42	<input type="radio"/> IN <input checked="" type="radio"/> OUT	Utensils, equipment & linens: properly stored, dried & handled	1	0.5	0	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
43	<input type="radio"/> IN <input checked="" type="radio"/> OUT	Single-use & single-service articles: properly stored & used	1	0.5	0	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
44	<input checked="" type="radio"/> IN <input type="radio"/> OUT	Gloves used properly	1	0.5	0	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>Utensils and Equipment</b> .2653, .2654, .2663								
45	<input checked="" type="radio"/> IN <input type="radio"/> OUT	Equipment, food & non-food contact surfaces approved, cleanable, properly designed, constructed, & used	2	1	0	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
46	<input checked="" type="radio"/> IN <input type="radio"/> OUT	Warewashing facilities: installed, maintained, & used; test strips	1	0.5	0	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
47	<input checked="" type="radio"/> IN <input type="radio"/> OUT	Non-food contact surfaces clean	1	0.5	0	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>Physical Facilities</b> .2654, .2655, .2656								
48	<input checked="" type="radio"/> IN <input type="radio"/> OUT	Hot & cold water available; adequate pressure	2	1	0	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
49	<input checked="" type="radio"/> IN <input type="radio"/> OUT	Plumbing installed; proper backflow devices	2	1	0	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
50	<input checked="" type="radio"/> IN <input type="radio"/> OUT	Sewage & waste water properly disposed	2	1	0	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
51	<input checked="" type="radio"/> IN <input type="radio"/> OUT	Toilet facilities: properly constructed, supplied & cleaned	1	0.5	0	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
52	<input type="radio"/> IN <input checked="" type="radio"/> OUT	Garbage & refuse properly disposed; facilities maintained	1	0.5	0	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
53	<input type="radio"/> IN <input checked="" type="radio"/> OUT	Physical facilities installed, maintained & clean	1	0.5	0	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
54	<input checked="" type="radio"/> IN <input type="radio"/> OUT	Meets ventilation & lighting requirements; designated areas used	1	0.5	0	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>Total Deductions:</b>			<b>8.5</b>					

# Comment Addendum to Food Establishment Inspection Report

Establishment Name: LJVM COLISEUM #115

Establishment ID: 3034020203

Date: 01/22/2013

Location Address: 2825 UNIVERSITY PKWY

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: CITY OF WINSTON SALEM

Telephone: \_\_\_\_\_

Status Code: A

Category #: II

Email 1: \_\_\_\_\_

Email 2: \_\_\_\_\_

Email 3: \_\_\_\_\_

## Temperature Observations

Item	Location	Temp	Item	Location	Temp	Item	Location	Temp
chicken	hot holding cabinet	135						
chikcen	hot holding cabinet	122						
chicken	hot holding cabinet	135						
chicken	final cook	136						
chicken	final cook	208						
bbq	kiosk hot holding	126						
bbq	kiosk hot holding	152						

## 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.

- 2 Employee health policy is not implemented. Food employees and conditional employees must be informed of their responsibility to report in accordance with law, to the PIC, information about their health and activities as they relate to diseases that are transmissible through food.
  
- 6 Employee did not wash hands between glove changes. Ensure workers are washing hands:
  - During FOOD preparation, as often as necessary to remove soil and contamination and to prevent cross contamination when changing tasks;
  - When switching between working with raw FOOD and working with READY-TO-EAT FOOD;
  - Before donning gloves for working with FOOD; and
  - After engaging in other activities that contaminate the hands.
  
- 13 Ensure fries are stored above uncooked chicken tenders in refrigeration. Shelf may need to be provided in the refrigerator.
  
- 14 Ensure correct setup is maintained at the three comp. sink. Do not store clean dishes on the drainboard used for unclean dishes. Wash, rinse, and sanitize ice scoop to remove sticker residue.



Spell



# Comment Addendum to Food Establishment Inspection Report

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## 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.



- 16 Couple of chicken tenders pulled from fryer were below 165 F. Ensure chicken is cooked to 165 F throughout product for min. 15 seconds. Tenders returned to fryer for additional cooking and were found above 165 F.
- 17 Heat lamp was used to attempt reheating of chicken patty. Reheat items in equipment that achieves 165 F or above.
- 19 BBQ 126 F and supreme 122 F. When hot holding, maintain PHF at 135 F or above.
- 26 Sanitizer mislabeled. Ensure chemicals are properly labeled.
- 36 Rodent dropping discovered behind drink area where hose channel is located. Eliminate pests.
- 39 Ensure wet wiping cloths are stored in sanitizer.
- 41 Scoop handle in ice. Keep handle stored out of ice.

# Comment Addendum to Food Establishment Inspection Report

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## Observations and Corrective Actions

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Spell

- 42 Drinking water hose stored on the floor below hand sink. Wash, rinse, and sanitize. Store in place that protects it from splash contamination.
- 43 Store single service cups protected in plastic sleeve. Keep single service items stored away from splash contamination from hand sink at kiosk.
- 52 Properly dispose of garbage on the ground around dumpster. Replace missing drainplug.
- 53 Properly finish and enclose pipes and lines behind soda machines. Clean floors.

# Comment Addendum to Food Establishment Inspection Report

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Establishment ID: 3034020203

## 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

