

# Food Establishment Inspection Report

Score: 98.5

Establishment Name: FOOD LION #334 DELI

Establishment ID: 3034020508

Location Address: 617 N MAIN STREET

Inspection  Re-Inspection

City: KERNERSVILLE

State: NC

Date: 11 / 06 / 2018 Status Code: A

Zip: 27284 County: 34 Forsyth

Time In: 01 : 20 <sup>am</sup>  <sub>pm</sub>  Time Out: 04 : 00 <sup>am</sup>  <sub>pm</sub>

Permittee: FOOD LION LLC

Total Time: 2 hrs 40 minutes

Telephone: (336) 996-1386

Category #: III

Wastewater System:  Municipal/Community  On-Site System

FDA Establishment Type: Deli Department

Water Supply:  Municipal/Community  On-Site Supply

No. of Risk Factor/Intervention Violations: 2

No. of Repeat Risk Factor/Intervention Violations: 0

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.								
IN	OUT	N/A	N/O	Compliance Status	OUT	CDI	R	VR
<b>Supervision .2652</b>								
1	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	PIC Present; Demonstration-Certification by accredited program and perform duties	2	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>Employee Health .2652</b>								
2	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Management, employees knowledge; responsibilities & reporting	3	13	0	<input type="checkbox"/>
3	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper use of reporting, restriction & exclusion	3	13	0	<input type="checkbox"/>
<b>Good Hygienic Practices .2652, .2653</b>								
4	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper eating, tasting, drinking, or tobacco use	2	1	0	<input type="checkbox"/>
5	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	No discharge from eyes, nose or mouth	1	03	0	<input type="checkbox"/>
<b>Preventing Contamination by Hands .2652, .2653, .2655, .2656</b>								
6	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Hands clean & properly washed	4	2	0	<input type="checkbox"/>
7	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	No bare hand contact with RTE foods or pre-approved alternate procedure properly followed	3	13	0	<input type="checkbox"/>
8	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Handwashing sinks supplied & accessible	2	1	0	<input type="checkbox"/>
<b>Approved Source .2653, .2655</b>								
9	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food obtained from approved source	2	1	0	<input type="checkbox"/>
10	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Food received at proper temperature	2	1	0	<input type="checkbox"/>
11	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food in good condition, safe & unadulterated	2	1	0	<input type="checkbox"/>
12	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Required records available: shellstock tags, parasite destruction	2	1	0	<input type="checkbox"/>
<b>Protection from Contamination .2653, .2654</b>								
13	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food separated & protected	3	13	0	<input type="checkbox"/>
14	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food-contact surfaces: cleaned & sanitized	3	13	0	<input type="checkbox"/>
15	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper disposition of returned, previously served, reconditioned, & unsafe food	2	1	0	<input type="checkbox"/>
<b>Potentially Hazardous Food Time/Temperature .2653</b>								
16	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Proper cooking time & temperatures	3	13	0	<input type="checkbox"/>
17	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Proper reheating procedures for hot holding	3	13	0	<input type="checkbox"/>
18	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Proper cooling time & temperatures	3	13	0	<input type="checkbox"/>
19	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Proper hot holding temperatures	3	13	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
20	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper cold holding temperatures	3	13	0	<input type="checkbox"/>
21	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper date marking & disposition	3	13	0	<input type="checkbox"/>
22	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Time as a public health control: procedures & records	2	1	0	<input type="checkbox"/>
<b>Consumer Advisory .2653</b>								
23	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Consumer advisory provided for raw or undercooked foods	1	03	0	<input type="checkbox"/>
<b>Highly Susceptible Populations .2653</b>								
24	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Pasteurized foods used; prohibited foods not offered	3	13	0	<input type="checkbox"/>
<b>Chemical .2653, .2657</b>								
25	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Food additives: approved & properly used	1	03	0	<input type="checkbox"/>
26	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Toxic substances properly identified stored, & used	2	1	0	<input type="checkbox"/>
<b>Conformance with Approved Procedures .2653, .2654, .2658</b>								
27	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Compliance with variance, specialized process, reduced oxygen packing criteria or HACCP plan	2	1	0	<input type="checkbox"/>

Good Retail Practices								
Good Retail Practices: Preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.								
IN	OUT	N/A	N/O	Compliance Status	OUT	CDI	R	VR
<b>Safe Food and Water .2653, .2655, .2658</b>								
28	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Pasteurized eggs used where required	1	03	0	<input type="checkbox"/>
29	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Water and ice from approved source	2	1	0	<input type="checkbox"/>
30	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Variance obtained for specialized processing methods	1	03	0	<input type="checkbox"/>
<b>Food Temperature Control .2653, .2654</b>								
31	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper cooling methods used; adequate equipment for temperature control	1	03	0	<input type="checkbox"/>
32	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Plant food properly cooked for hot holding	1	03	0	<input type="checkbox"/>
33	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Approved thawing methods used	1	03	0	<input type="checkbox"/>
34	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Thermometers provided & accurate	1	03	0	<input type="checkbox"/>
<b>Food Identification .2653</b>								
35	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food properly labeled: original container	2	1	0	<input type="checkbox"/>
<b>Prevention of Food Contamination .2652, .2653, .2654, .2656, .2657</b>								
36	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Insects & rodents not present; no unauthorized animals	2	1	0	<input type="checkbox"/>
37	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Contamination prevented during food preparation, storage & display	2	1	0	<input type="checkbox"/>
38	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Personal cleanliness	1	03	0	<input type="checkbox"/>
39	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Wiping cloths: properly used & stored	1	03	0	<input type="checkbox"/>
40	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Washing fruits & vegetables	1	03	0	<input type="checkbox"/>
<b>Proper Use of Utensils .2653, .2654</b>								
41	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	In-use utensils: properly stored	1	03	0	<input type="checkbox"/>
42	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Utensils, equipment & linens: properly stored, dried & handled	1	03	0	<input type="checkbox"/>
43	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Single-use & single-service articles: properly stored & used	1	03	0	<input type="checkbox"/>
44	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Gloves used properly	1	03	0	<input type="checkbox"/>
<b>Utensils and Equipment .2653, .2654, .2663</b>								
45	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Equipment, food & non-food contact surfaces approved, cleanable, properly designed, constructed, & used	2	1	<input checked="" type="checkbox"/>	<input type="checkbox"/>
46	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Warewashing facilities: installed, maintained, & used; test strips	1	03	0	<input type="checkbox"/>
47	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Non-food contact surfaces clean	1	<input checked="" type="checkbox"/>	0	<input checked="" type="checkbox"/>
<b>Physical Facilities .2654, .2655, .2656</b>								
48	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Hot & cold water available; adequate pressure	2	1	0	<input type="checkbox"/>
49	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Plumbing installed; proper backflow devices	2	1	0	<input type="checkbox"/>
50	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Sewage & waste water properly disposed	2	1	0	<input type="checkbox"/>
51	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Toilet facilities: properly constructed, supplied & cleaned	1	03	0	<input type="checkbox"/>
52	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Garbage & refuse properly disposed; facilities maintained	1	03	0	<input type="checkbox"/>
53	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Physical facilities installed, maintained & clean	<input checked="" type="checkbox"/>	03	0	<input checked="" type="checkbox"/>
54	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Meets ventilation & lighting requirements; designated areas used	1	03	0	<input type="checkbox"/>
<b>Total Deductions:</b>					1.5			



# Comment Addendum to Food Establishment Inspection Report

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 City: KERNERSVILLE State: NC  
 County: 34 Forsyth Zip: 27284  
 Wastewater System:  Municipal/Community  On-Site System  
 Water Supply:  Municipal/Community  On-Site System  
 Permittee: FOOD LION LLC  
 Telephone: (336) 996-1386

Establishment ID: 3034020508  
 Inspection  Re-Inspection Date: 11/06/2018  
 Comment Addendum Attached?  Status Code: A  
 Water sample taken?  Yes  No Category #: III  
 Email 1:  
 Email 2:  
 Email 3:

## Temperature Observations

**Effective January 1, 2019 Cold Holding will change to 41 degrees**

Item	Location	Temp	Item	Location	Temp	Item	Location	Temp
Scott Norman	04/22/19	0	Chicken	Deli case	39	Air temp	Milk cooler	41
Hot water	3 comp sink	120	Pastrami	Deli case	44			
Quat sani.	3 comp sink	200	Ribs	Retail cooler	44			
Chicken wings	Walk-in	36	Chicken	Retail cooler	44			
Rotisserie	Walk-in	36	Mac & cheese	Retail cooler	41			
Lettuce	Walk-in	43	Rotisserie	Hot hold	168			
Ham	Deli case	35	Chicken	Hot hold	119			
Turkey	Deli case	36	Potato	Hot hold	140			

## 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.

- 1 2-103.11 (A)-(L) Person-In-Charge-Duties - PF- 0 pts. During the inspection, observed customer walk into the deli prep area. The PERSON IN CHARGE shall ensure that: PERSONS unnecessary to the FOOD ESTABLISHMENT operation are not allowed in the FOOD preparation, FOOD storage, or WAREWASHING areas, except that brief visits and tours may be authorized by the PERSON IN CHARGE if steps are taken to ensure that exposed FOOD; clean EQUIPMENT, UTENSILS, and LINENS; and unwrapped SINGLE-SERVICE and SINGLE-USE ARTICLES are protected from contamination. CDI- Conversation was held with all persons in charge to place a barrier to restrict customers from entering the deli prep area.
  
- 19 3-501.16 (A)(1) Potentially Hazardous Food (Time/Temperature Control for Safety Food), Hot and Cold Holding - P- 0 pts. Two bags of cooked chicken tenders were held at 119-130F in the hot bar. Potentially hazardous food shall be held at 135F or above. CDI- Chicken tenders were discarded.
  
- 45 4-501.11 Good Repair and Proper Adjustment-Equipment - C- 0 pts. Replace the torn gasket on the walk-in freezer door. Cover the foam pipes inside the walk-in freezer with FRP flexible pipe wrap as ice buildup is present. Equipment shall be maintained in good repair.

Lock Text



Person in Charge (Print & Sign): Michelle <sup>First</sup> Vanderburg <sup>Last</sup>  
 Regulatory Authority (Print & Sign): <sup>Eva</sup> <sup>First</sup> Robert <sup>Last</sup> REHS

Michelle Vanderburg  
Robert REHS

REHS ID: 2551 - Robert, Eva

Verification Required Date:     /     /    

REHS Contact Phone Number: ( 336 ) 703 - 3135



North Carolina Department of Health & Human Services • Division of Public Health • Environmental Health Section • Food Protection Program  
 DHHS is an equal opportunity employer.



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- 47 4-601.11 (B) and (C) Equipment, Food-Contact Surfaces, Nonfood-Contact Surfaces, and Utensils - C- REPEAT. Clean the plumbing underneath the three compartment sink, gasket on door of walk-in cooler, and the chicken dunnage rack inside the walk-in cooler. Nonfood-contact surfaces shall be kept clean.
- 53 6-501.12 Cleaning, Frequency and Restrictions - C- REPEAT. Floor cleaning is needed underneath three compartment sink and bakery prep table. Wall cleaning is needed under the three compartment sink and behind the chicken dunnage rack inside the walk-in cooler. Physical facilities shall be maintained clean.



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✓  
Spell



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