Food Establishment Inspection Report

Establishment Name: KOERNER PLACE MEALSITE

Date: $\underline{12}/\underline{\emptyset3}/\underline{2\emptyset12}$ Status Code: A

Time In: $\underline{11}:\underline{25} \overset{\otimes}{\bigcirc} \overset{am}{pm}$ Time Out: $\underline{12}:\underline{30} \overset{\odot}{\otimes} \overset{am}{pm}$ Total Time: $\underline{1 \text{ hr } 5 \text{ minutes}}$ Category #: IV

Instructions:

Establishment Type: _

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

Location Address: 8	12 BIRCH LANE							
City: KERNERSVILL	Ē							
State: NC	Zip:							
County: 34 Forsyth								
Permittee: SENIOR	SERVICES							
Telephone:								
⊗Inspection								
○Re-Inspection	○Re-Inspection							
Wastewater System:								
⊗Municipal/Comm	unity							
○On-Site System								
Water Supply:								
⊗Municipal/Comm	unity							
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".

Establishment ID: 3034090010

Foodborne Illness Risk Factors and Public Health Interventions

Score: 99.5

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

Public Health Interventions: Control measures to prevent foodborne illness or injury.										
Со	mpliance Statu	s	OUT	CDI	R	VR				
Su	Supervision .2652									
1		PIC Present; Demonstration-Certification by accredited program and perform duties	○ ○ 2 0	0	0	0				
En	nployee Health									
2	⊗ O IN OUT	Management, employees knowledge; responsibilities & reporting	3 1.5 0	0	0	0				
3	⊗ ○ IN OUT	Proper use of reporting, restriction & exclusion	0 0 0 3 1.5 0	0	0	0				
Go	od Hygienic P	Practices .2652, .2653								
4	⊗ O IN OUT	Proper eating, tasting, drinking, or tobacco use	0 0 0 2 1 0	0	0	0				
5	⊗ ○ IN OUT	No discharge from eyes, nose, and mouth	0 0 0 1 0.5 0	0	0	0				
Pro		amination by Hands .2652, .2653, .2655, .265	6							
6	Ø ○ IN OUT	Hands clean & properly washed	0 0 0 4 2 0	0	0	0				
7	⊗ ○ ○ IN OUT N/O	No bare hand contact with RTE foods or pre-approved alternate procedure properly allowed	○ ○ ○ 3 1.5 0	0	0	0				
8	O & IN OUT	Handwashing sinks supplied & accessible	○ ○ ⊗ 2 1 0	8	0	0				
Ap	proved Sourc	e .2653, .2655								
9	⊗ ○ IN OUT	Food obtained from approved source	$ \bigcirc \bigcirc \bigcirc \bigcirc \bigcirc $ 2 1 0	0	0	0				
10	O O S IN OUT N/O	Food received at proper temperature	$ \bigcirc \bigcirc \bigcirc \bigcirc \bigcirc $ 2 1 0	0	0	0				
11	⊗ ○ IN OUT	Food in good condition, safe & unadulterated	$ \bigcirc \bigcirc \bigcirc \bigcirc \bigcirc $ 2 1 0	0	0	0				
12	O O & O	Required records available: shellstock tags, parasite destruction	$ \bigcirc \bigcirc \bigcirc \bigcirc \bigcirc $ 2 1 0	0	0	0				
Pro	otection from	Contamination .2653, .2654								
13	Ø ○ ○ ○ IN OUT N/A N/O	Food separated & protected	0 0 0 3 1.5 0	0	0	0				
14	⊗ ○ IN OUT	Food-contact surfaces: cleaned & sanitized	3 1.5 0 3 1.5 0	0	0	0				
15	Ø ○ ÎN OUT	Proper disposition of returned, previously served, reconditioned, & unsafe food	000	0	0	0				
Po	tentially Haza	rdous Food Time/Temperature .2653								
16	O O & O	Proper cooking time & temperatures	0 0 0 3 1.5 0	0	0	0				
17	O O O S IN OUT N/A N/O	Proper reheating procedures for hot holding	0 0 0 3 1.5 0	0	0	0				
18	OOO ⊗ IN OUT N/A N/O	Proper cooling time & temperatures	○ ○ ○ 3 1.5 0	0	0	0				
19	⊗ ○ ○ ○ IN OUT N/A N/O	Proper hot holding temperatures	○ ○ ○ 3 1.5 0	0	0	0				
20	⊗ ○ ○ ○ IN OUT N/A N/O	Proper cold holding temperatures	○ ○ ○ 3 1.5 0	0	0	0				
21	O O 🗞 O IN OUT N/A N/O	Proper date marking & disposition	○ ○ ○ 3 1.5 0	0	0	0				
22	O O & O IN OUT N/A N/O	Time as a public health control: procedures & records	$ \bigcirc \bigcirc \bigcirc \bigcirc \bigcirc $ 2 1 0	0	0	0				
Со	nsumer Advis	sory .2653								
23	O O & IN OUT N/A	Consumer advisory provided for raw or undercooked foods	0 0 0 1 0.5 0	0	0	0				
Hiç	hly Susceptib	ole Populations .2653								
24	⊗ ○ ○ IN OUT N/A	Pasteurized foods used; prohibited foods not offered	O O O 3 1.5 0	0	0	0				
Ch	emical	.2653, .2657								
25	O O & IN OUT N/A	Food additives: approved & properly used	0 0 0 1 0.5 0	0	0	0				
26	⊗ ○ ○ IN OUT N/A	Toxic substances properly identified stored, & used	$ \bigcirc \bigcirc \bigcirc \bigcirc \bigcirc $ 2 1 0		0	0				
Со		th Approved Procedures .2653, .2654,	.2658							
27	O O & IN OUT N/A	Compliance with variance, specialized process, reduced oxygen packing criteria or HACCP plan	$\begin{array}{c} \bigcirc \bigcirc$		0	0				

Food Establishment Inspection Report, continued

O IN ⊗ OUT

OUT Proper Use of Utensils

39

40

Establishment Name: KOERNER PLACE MEALSITE

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:

Person in Charge (Print)

Person in Charge (Signature)

Regulatory Authority (Print)

Regulatory Authority (Signature)

Contact Number: (336)703-3383

Verification Required Date: ___/ ___/

REHS ID: 2360 - Gartner, Gregory

No. of Risk Factor/ Intervention Violations: 1

No. of Repeat Risk Factor/Intervention Violations:

Establishment ID: 3034090010 **Good Retail Practices** Preventative measures to control the addition of pathogens. chemicals, and physical objects into foods. Compliance Status CDI R VR Safe Food and Water .2653, .2655, .2658 ○ ○ ○ 1 0.5 0 OUT 28 Pasteurized eggs used where required \circ 0 O O O 0 0 0 29 Water and ice from approved source OUT O O & IN OUT N/A 0 0 0 1 0.5 0 Variance obtained for specialized processing methods 0 30 0 **Food Temperature Control** Proper cooling methods used; adequate equipment for temperature control 0 0 0 OUT 0 0 0 0 0 1 0.5 0 NOUT N/A N/O Plant food properly cooked for hot holding 32 0 0 0 O O S O Approved thawing methods used IN OUT N/A N/O 0 0 0 1 0.5 0 0 0 0 0 0 1 0.5 0 OUT Thermometers provided & accurate 0 0 34 **Food Identification** .2653 OUT Food properly labeled: original container 0 0 35 0 Prevention of Food Contamination .2652, .2653, .2654, .2656, .2657 ⊗ IN OUT 0 0 36 Insects & rodents not present; no unauthorized animals 0 0 0 OUT Contamination prevented during food preparation, 37 0 0 \bigcirc storage & display ○ ○ ○ 1 0.5 0 OUT 38 Personal cleanliness 0 0 0

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	0	0	0	0
43	⊗ IN	OUT	Single-use & single-service articles: properly stored & used	○ 1 0.5	0	0	0	0
44	⊗ IN	OUT	Gloves used properly	○ 1 0.5	0	0	0	0
Ut	Utensils and Equipment .2653, .2654, .2663							
45	⊗ IN	OUT	Equipment, food & non-food contact surfaces approved, cleanable, properly designed, constructed, & used	O O 1	0	0	0	0
46	⊗ IN	OUT	Warewashing facilities: installed, maintained, & used; test strips	○ 1 0.5	0	0	0	0
47	⊗ IN	OUT	Non-food contact surfaces clean	○ 1 0.5	0	0	0	0
Pł	Physical Facilities .2654, .2655, .2656							
	J							
48	⊗ IN	OUT	Hot & cold water available; adequate pressure	O O 2 1	0	0	0	0

.2653, .2654

Wiping cloths: properly used & stored

Washing fruits & vegetables

4/	IN	OUT	Non-tood contact surfaces clean	1 0.5 0			$ \cup $
Ph	nysical						
48	⊗ IN	OUT	Hot & cold water available; adequate pressure	$\bigcirc \bigcirc \bigcirc$ \bigcirc \bigcirc \bigcirc 1 0	0	0	0
49	⊗ IN	OUT	Plumbing installed; proper backflow devices	O O O 2 1 0	0	0	0
50	⊗ IN	OUT	Sewage & waste water properly disposed	0 0 0 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	⊗ IN	OUT	Physical facilities installed, maintained & clean	0 0 0 1 0.5 0	0	0	0
54	⊗ IN	OUT	Meets ventilation & lighting requirements; designated areas used	0 0 0 1 0.5 0	0	0	0
			Total Deductions:	0.5			

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

0 0 **8** 1 0.5 0

0 0 0 1 0.5 0

0 0

0 0

0

stablishment Name: KOERNER PLACE	MEALSITE	Establishment ID: 3034090010	Date: 12/03/2012
Location Address: 812 BIRCH LANE			Status Code:^
City: KERNERSVILLE	State: NC		Category #:
County: 34 Forsyth	Zip: 27284		Email 1:
Wastewater System: ⊗ Municipal/Com Water Supply: ⊗ Municipal/Com			Email 2:
Permittee: SENIOR SERVICES			Email 3:
Telephone:			

	Temperature Observations								
ltem chicken	Location steam well	Temp 146	Item	Location	Temp	Item	Location	Temp	
fettucinni	steam well	186							
carrots	steam well	200							
hot water	2 vat sink	130							
carton milk	cooler	45							
carton milk	domestic refrigerator	42							

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.

No waste receptacle near hand sink today. 15A NCAC 18A .2656 ref. 6-301.20 A handwashing sink that is provided with disposable towels shall be provided with a waste receptacle



- Wiping cloth stored improperly. 15A NCAC 18A .2653 ref. 3-304.14: (B) Cloths in-use for wiping counter and other equipment surfaces shall be (1) Held between used in a chemical sanitizer solution at proper concentration and (2) Laundered daily; (C) Cloths in-use for wiping surfaces in contact with raw animal foods shall be kept separate from cloths used for other purposes (D) chemical sanitizing solution shall be free of food debris and visible soil (E) Containers of chemical sanitizing solutions in which wet wiping cloths are held between uses shall be stored off the floor and used in a manner that prevents contamination of food, utensils, linens, and equipment.
- Styrofoam cup observed in ice tray. 15A NCAC 18A .2653 ref. 3-304.12 (B or E): During pauses in food preparation or dispensing, food dispensing utensils shall be stored in a clean in food that is not potentially hazardous with their handles above the top of the food withing containers or protected location if the utensils, such as ice scoops, are used only with a good that is not potentially hazardous.



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