

# Food Establishment Inspection Report

Score: 98.5

Establishment Name: VINCENZO'S

Establishment ID: 3034010477

Location Address: 3449 ROBINHOOD ROAD

City: WINSTON-SALEM State: North Carolina

Zip: 27106 County: 34 Forsyth

Permittee: VINCENT PATELLA

Telephone: (336) 765-3176

Inspection  Re-Inspection

**Wastewater System:**

Municipal/Community  On-Site System

**Water Supply:**

Municipal/Community  On-Site Supply

Date: 05/11/2022 Status Code: A

Time In: 1:55 PM Time Out: 4:50 PM

Category#: IV

FDA Establishment Type: Full-Service Restaurant

No. of Risk Factor/Intervention Violations: 4

No. of Repeat Risk Factor/Intervention Violations: 1

**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

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

**Good Retail Practices**

Good Retail Practices: 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 .2653, .2655, .2658</b>					
30	<input checked="" type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A <input checked="" type="checkbox"/> N/O				
Pasteurized eggs used where required		1	0.5	0	
31	<input checked="" type="checkbox"/> OUT				
Water and ice from approved source		2	1	0	
32	<input checked="" type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A <input checked="" type="checkbox"/> N/O				
Variance obtained for specialized processing methods		2	1	0	
<b>Food Temperature Control .2653, .2654</b>					
33	<input checked="" type="checkbox"/> OUT				
Proper cooling methods used; adequate equipment for temperature control		1	0.5	0	
34	<input checked="" type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A <input checked="" type="checkbox"/> N/O				
Plant food properly cooked for hot holding		1	0.5	0	
35	<input checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A <input checked="" type="checkbox"/> N/O				
Approved thawing methods used		1	0.5	0	
36	<input checked="" type="checkbox"/> OUT				
Thermometers provided & accurate		1	0.5	0	
<b>Food Identification .2653</b>					
37	<input checked="" type="checkbox"/> OUT				
Food properly labeled: original container		2	1	0	
<b>Prevention of Food Contamination .2652, .2653, .2654, .2656, .2657</b>					
38	<input checked="" type="checkbox"/> OUT				
Insects & rodents not present; no unauthorized animals		2	1	0	
39	<input checked="" type="checkbox"/> OUT				
Contamination prevented during food preparation, storage & display		2	1	0	
40	<input checked="" type="checkbox"/> OUT				
Personal cleanliness		1	0.5	0	
41	<input checked="" type="checkbox"/> OUT				
Wiping cloths: properly used & stored		1	0.5	0	
42	<input checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A				
Washing fruits & vegetables		1	0.5	0	
<b>Proper Use of Utensils .2653, .2654</b>					
43	<input checked="" type="checkbox"/> OUT				
In-use utensils: properly stored		1	0.5	0	
44	<input checked="" type="checkbox"/> OUT				
Utensils, equipment & linens: properly stored, dried & handled		1	0.5	0	
45	<input checked="" type="checkbox"/> OUT				
Single-use & single-service articles: properly stored & used		1	0.5	0	
46	<input checked="" type="checkbox"/> OUT				
Gloves used properly		1	0.5	0	
<b>Utensils and Equipment .2653, .2654, .2663</b>					
47	<input checked="" type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A <input checked="" type="checkbox"/> N/O				
Equipment, food & non-food contact surfaces approved, cleanable, properly designed, constructed & used		1	0.5	<input checked="" type="checkbox"/>	
48	<input checked="" type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A <input checked="" type="checkbox"/> N/O				
Warewashing facilities: installed, maintained & used; test strips		1	0.5	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
49	<input checked="" type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A <input checked="" type="checkbox"/> N/O				
Non-food contact surfaces clean		1	0.5	0	<input checked="" type="checkbox"/>
<b>Physical Facilities .2654, .2655, .2656</b>					
50	<input checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A				
Hot & cold water available; adequate pressure		1	0.5	0	
51	<input checked="" type="checkbox"/> OUT				
Plumbing installed; proper backflow devices		2	1	0	
52	<input checked="" type="checkbox"/> OUT				
Sewage & wastewater properly disposed		2	1	0	
53	<input checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A				
Toilet facilities: properly constructed, supplied & cleaned		1	0.5	0	
54	<input checked="" type="checkbox"/> OUT				
Garbage & refuse properly disposed; facilities maintained		1	0.5	0	
55	<input checked="" type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A <input checked="" type="checkbox"/> N/O				
Physical facilities installed, maintained & clean		<input checked="" type="checkbox"/>	0.5	0	
56	<input checked="" type="checkbox"/> OUT				
Meets ventilation & lighting requirements; designated areas used		1	0.5	0	
<b>TOTAL DEDUCTIONS:</b>					<b>1.5</b>



# Comment Addendum to Food Establishment Inspection Report

Establishment Name: VINCENZO'S  
 Location Address: 3449 ROBINHOOD ROAD  
 City: WINSTON-SALEM State: NC  
 County: 34 Forsyth Zip: 27106  
 Wastewater System:  Municipal/Community  On-Site System  
 Water Supply:  Municipal/Community  On-Site System  
 Permittee: VINCENT PATELLA  
 Telephone: (336) 765-3176

Establishment ID: 3034010477  
 Inspection  Re-Inspection Date: 05/11/2022  
 Comment Addendum Attached?  Status Code: A  
 Water sample taken?  Yes  No Category #: IV  
 Email 1: james.patella@allentate.com  
 Email 2:  
 Email 3:

## Temperature Observations

### Effective January 1, 2019 Cold Holding is now 41 degrees or less

Item	Location	Temp	Item	Location	Temp	Item	Location	Temp
Servsafe - 8/5/2024	Andrea Brothers	00						
hot water	prep sink	127						
qt sanitizer (ppm)	sanitizer bucket	200						
qt sanitizer (ppm)	spray bottle	200						
breaded chicken	final cook	187						
fried eggplant	active cooling @2:25	57						
fried eggplant	active cooling @3:15	44						
italian sausage	pizza prep unit (top)	40						
ground beef	pizza prep unit (top)	41						
american cheese	pizza prep unit reach in	39						
ground pork	walk-in cooler	40						
minestrone	walk-in cooler	41						
lasagna	walk-in cooler	39						
marinara	steam table	193						
hot water sanitization	dish machine	160						

Person in Charge (Print & Sign): Vincent *First* Patella *Last*  
 Regulatory Authority (Print & Sign): Travis *First* Addis *Last*

REHS ID: 3095 - Addis, Travis Verification Required Date: \_\_\_\_\_

REHS Contact Phone Number: \_\_\_\_\_



North Carolina Department of Health & Human Services

● Division of Public Health ● Environmental Health Section ● Food Protection Program  
 DHHS is an equal opportunity employer.



# Comment Addendum to Inspection Report

**Establishment Name:** VINCENZO'S

**Establishment ID:** 3034010477

**Date:** 05/11/2022 **Time In:** 1:55 PM **Time Out:** 4:50 PM

## 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.

- 3 2-201.11 (A), (B), (C), and (E) Responsibility of Permit Holder, Person in Charge and Conditional Employees (P) Employee health policy does not include salmonella non-typhoidal as a reportable illness. A food employee shall report to the person in charge (PIC) if they have any of the "big 6" reportable illnesses; norovirus, hepatitis A, shigella spp., shiga-toxin producing E. Coli, salmonella typhi, or salmonella non-typhoidal. CDI: Education and a new employee health policy were provided.
- 5 2-501.11 Clean-up of Vomiting and Diarrheal Event (Pf) Establishment does not have a written procedure and kit for the clean-up of vomiting and diarrheal events. A food establishment shall have a written procedure for employees to follow when responding to vomiting and diarrheal events that involve the discharge of vomitus or fecal matter onto surfaces in the food establishment. The procedure shall address the specific actions employees must take to minimize the spread of contamination and exposure to employees, consumers, food, and surfaces to vomitus or fecal matter. CDI: Education and a written procedure were provided to the person in charge.
- 16 4-601.11 (A) Equipment, Food-Contact Surfaces, Nonfood Contact Surfaces, and Utensils (Pf) Additional cleaning is needed on the soda dispenser nozzles to remove accumulated syrup residue. Repeat code violation, but in another area than previously reported- operator has made marked improvement in cleaning/sanitizing/storing dishware since last inspection. CDI: soda nozzles were removed and placed for washing in dishwashing area.
- 28 7-102.11 Common Name - Working Containers (Pf) Spray bottle of sanitizer was not labeled. Working containers used for storing poisonous or toxic materials such as cleaners and sanitizers taken from bulk supplies shall be clearly and individually identified with the common name of the material. CDI: Bottle was labeled as sanitizer.
- 47 4-501.11 Good Repair and Proper Adjustment - Equipment (C) Handle on stand up freezer by pizza prep area is cracked and needs repair/replacement so that it is smooth and cleanable. Equipment shall be maintained in a state of good repair.
- 48 4-302.13 Temperature Measuring Devices, Manual Warewashing (B) (Pf) The establishment does not have an irreversible registering temperature indicator. In hot water mechanical warewashing operations, an irreversible registering temperature indicator shall be provided and readily accessible for measuring the utensil surface temperature. CDI: Education was provided concerning new requirements per 2017 NC Food Code.
- 49 4-602.13 Nonfood Contact Surfaces (C) Repeat. Additional cleaning is needed on equipment throughout establishment, including but not limited to: inside bases of cooling/freezing units, hood vents above cook top in pizza prep area, casters of all cooking equipment to remove accumulation of food and soil residues. Establishment has made significant improvement in overall cleaning since last inspection including shelving units and the upstairs storage area. Nonfood-contact surfaces of equipment shall be cleaned at a frequency necessary to preclude accumulation of soil residues.
- 55 6-501.11 Repairing - Premises, Structures, Attachments, and Fixtures - Methods (C) Repeat. Repair is needed in the following areas; damaged flooring under oven, damaged cove base in mop sink, sagging ceiling over dish machine, sagging ceiling in upstairs storage area, replace corner stripping at mop sink entrance, caulk or seal area around electrical outlet that is hanging from kitchen ceiling. Physical facilities shall be maintained in good repair.  
6-501.12 Cleaning, Frequency and Restrictions (C) Repeat. Cleaning is needed for walls and floor, including tile wall behind steam table and oven, walls in prep areas where food splash is present. Dust on ceiling vents. Physical facilities shall be cleaned as often as necessary to keep them clean.