

Food Establishment Inspection Report

Score: 97

Establishment Name: RJ REYNOLDS PLAZA

Establishment ID: 3034010361

Location Address: 401 N MAIN ST

City: WINSTON SALEM State: North Carolina

Zip: 27101 County: 34 Forsyth

Permittee: RJ REYNOLDS TOBACCO

Telephone: (336) 741-5377

Inspection Re-Inspection Educational Visit

Wastewater System:

Municipal/Community On-Site System

Water Supply:

Municipal/Community On-Site Supply

Date: 04/25/2024 Status Code: A

Time In: 8:20 AM Time Out: 11:40 AM

Category#: IV

FDA Establishment Type: Full-Service Restaurant

No. of Risk Factor/Intervention Violations: 1

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

Compliance Status		OUT	CDI	R	VR
Supervision .2652					
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		
Employee Health .2652					
3	<input checked="" type="checkbox"/> OUT				
Management, food & conditional employee; knowledge, responsibilities & reporting		2	1	0	
4	<input checked="" type="checkbox"/> OUT				
Proper use of reporting, restriction & exclusion		3	1.5	0	
5	<input checked="" type="checkbox"/> OUT				
Procedures for responding to vomiting & diarrheal events		1	0.5	0	
Good Hygienic Practices .2652, .2653					
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	
Preventing Contamination by Hands .2652, .2653, .2655, .2656					
8	<input checked="" type="checkbox"/> OUT				
Hands clean & properly washed		4	2	0	
9	<input checked="" type="checkbox"/> OUT/N/A/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	
Approved Source .2653, .2655					
11	<input checked="" type="checkbox"/> OUT				
Food obtained from approved source		2	1	0	
12	<input checked="" type="checkbox"/> IN OUT				
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 OUT				
Required records available: shellstock tags, parasite destruction		2	1	0	
Protection from Contamination .2653, .2654					
15	<input checked="" type="checkbox"/> OUT/N/A/N/O				
Food separated & protected		3	1.5	0	
16	<input checked="" type="checkbox"/> OUT				
Food-contact surfaces: cleaned & sanitized		3	1.5	0	
17	<input checked="" type="checkbox"/> OUT				
Proper disposition of returned, previously served, reconditioned & unsafe food		2	1	0	
Potentially Hazardous Food Time/Temperature .2653					
18	<input checked="" type="checkbox"/> IN OUT/N/A				
Proper cooking time & temperatures		3	1.5	0	
19	<input checked="" type="checkbox"/> OUT/N/A/N/O				
Proper reheating procedures for hot holding		3	1.5	0	
20	<input checked="" type="checkbox"/> OUT/N/A/N/O				
Proper cooling time & temperatures		3	1.5	0	
21	<input checked="" type="checkbox"/> OUT/N/A/N/O				
Proper hot holding temperatures		3	1.5	0	
22	<input checked="" type="checkbox"/> IN OUT/N/A/N/O				
Proper cold holding temperatures		3	1.5	0	
23	<input checked="" type="checkbox"/> OUT/N/A/N/O				
Proper date marking & disposition		3	1.5	0	
24	<input checked="" type="checkbox"/> OUT/N/A/N/O				
Time as a Public Health Control; procedures & records		3	1.5	0	
Consumer Advisory .2653					
25	<input checked="" type="checkbox"/> IN OUT				
Consumer advisory provided for raw/undercooked foods		1	0.5	0	
Highly Susceptible Populations .2653					
26	<input checked="" type="checkbox"/> IN OUT				
Pasteurized foods used; prohibited foods not offered		3	1.5	0	
Chemical .2653, .2657					
27	<input checked="" type="checkbox"/> IN OUT				
Food additives: approved & properly used		1	0.5	0	
28	<input checked="" type="checkbox"/> OUT/N/A				
Toxic substances properly identified stored & used		2	1	0	
Conformance with Approved Procedures .2653, .2654, .2658					
29	<input checked="" type="checkbox"/> IN OUT				
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
Safe Food and Water .2653, .2655, .2658					
30	<input checked="" type="checkbox"/> IN OUT				
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 OUT				
Variance obtained for specialized processing methods		2	1	0	
Food Temperature Control .2653, .2654					
33	<input checked="" type="checkbox"/> IN				
Proper cooling methods used; adequate equipment for temperature control		1	0.5	0	X
34	<input checked="" type="checkbox"/> IN OUT/N/A				
Plant food properly cooked for hot holding		1	0.5	0	
35	<input checked="" type="checkbox"/> IN OUT/N/A				
Approved thawing methods used		1	0.5	0	
36	<input checked="" type="checkbox"/> OUT				
Thermometers provided & accurate		1	0.5	0	
Food Identification .2653					
37	<input checked="" type="checkbox"/> OUT				
Food properly labeled: original container		2	1	0	
Prevention of Food Contamination .2652, .2653, .2654, .2656, .2657					
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/N/A				
Washing fruits & vegetables		1	0.5	0	
Proper Use of Utensils .2653, .2654					
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	
Utensils and Equipment .2653, .2654, .2663					
47	<input checked="" type="checkbox"/> IN				
Equipment, food & non-food contact surfaces approved, cleanable, properly designed, constructed & used		1	0.5	0	
48	<input checked="" type="checkbox"/> IN				
Warewashing facilities: installed, maintained & used; test strips		1	0.5	0	X
49	<input checked="" type="checkbox"/> OUT				
Non-food contact surfaces clean		1	0.5	0	
Physical Facilities .2654, .2655, .2656					
50	<input checked="" type="checkbox"/> OUT/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/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"/> OUT				
Physical facilities installed, maintained & clean		1	0.5	0	
56	<input checked="" type="checkbox"/> OUT				
Meets ventilation & lighting requirements; designated areas used		1	0.5	0	
TOTAL DEDUCTIONS:					3



Comment Addendum to Food Establishment Inspection Report

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 Telephone: (336) 741-5377

Establishment ID: 3034010361
 Inspection Re-Inspection Date: 04/25/2024
 Educational Visit Status Code: A
 Comment Addendum Attached? Category #: IV
 Email 1: reinham@rjrt.com
 Email 2:
 Email 3:

Temperature Observations

Item/Location	Temp	Item/Location	Temp	Item/Location	Temp
hot water /three compartment sink	140	sliced turkey/salad station	43	long rice /walk-in cooler	36
quat sanitizer /three compartment sink in ppm	200	boiled eggs /salad staion	44	chicken thighs /walk-in cooler	36
sausage gravy/grill station	170	shreeded cheese /salad station	43	boiled eggs /walk-in cooler	36
oatmeal/grill station	183	corn and beans salad /salad station	44	pepperoni/walk-in cooler	36
grits/grill station	157	ambient air temp/salad make unit	43	liquid eggs /walk-in cooler downstairs	39
hashbrown casserole /grill station	160	sliced cheese /deli station	37		
sausage patties/grill station	154	tuna salad /deli station	37		
sausage link/grill station	150	chicken salad/deli station	36		
diced tomatoes /grill station	39	cooked chicken bites/deli station	36		
sliced tomatoes/grill station	38	spicy chicken bites/deli station	37		
pimento cheese /grill station	37	cut cucumber /deli station	38		
cooked chicken /grill station	37	lettuce/deli station	37		
cole slaw /grill station	38	vegetable soup/final cook temp	191		
raw chicken /grill station	36	diced ham/walk-in cooler	36		
raw hamburger /grill station	36	streak /walk-in cooler	36		
scrabbled eggs/final cook temp	172	ground beef/walk-in cooler	36		
sliced tomatoes /salad station	43	meatballs /walk-in cooler	36		
diced tomatoes /salad station	43	shredded cheese /walk-in cooler	36		
cooked fried chicken bites /salad station	44	pasta /walk-in cooler	36		
sliced ham/salad atation	43	bowtie pasta /walk-in cooler	36		

Person in Charge (Print & Sign):
 First _____ Last _____
 Regulatory Authority (Print & Sign): Craig _____ Bethel _____

Ryan A. Wiles

Craig Bethel

REHS ID: 1766 - Bethel, Craig Verification Dates: Priority: 04/26/2024 Priority Foundation: _____ Core: _____

REHS Contact Phone Number: (336) 462-3735 Authorize final report to be received via Email: _____

Comment Addendum to Inspection Report

Establishment Name: RJ REYNOLDS PLAZA

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Date: 04/25/2024 **Time In:** 8:20 AM **Time Out:** 11:40 AM

Certifications

Name	Certificate #	Type	Issue Date	Expiration Date
Jonathon Clark		Food Service	01/21/2020	01/21/2025
Jason Colunio	23220934	Food Service	06/20/2022	06/20/2028

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.

- 22 3-501.16 (A) (2) and (B) Time / Temperature Control for Safety Food, Hot and Cold Holding (P)
Food items measured 43-44F in the salad make unit. Sliced and diced tomatoes, fried chicken bites, sliced ham and turkey, boiled eggs, shredded cheese, and corn and bean salad.
All items were prepared at 9:30 am and lunch closes at 1:30 pm. Time as a Public Health Control will be used for the next 24-48 hrs.
- 33 4-301.11 Cooling, Heating, and Holding Capacities - Equipment (Pf)
Make unit in the Salad Station measured 43F.
EQUIPMENT for cooling and heating FOOD, and holding cold and hot FOOD, shall be sufficient in number and capacity to provide FOOD temperatures as specified under Chapter 3 of the 2017 FDA Food Code.
*** This violation requires a verification visit with in the next 24 hours. Call Craig Bethel @ 336-462-3735 when unit is repaired.****
- 47 4-501.11 Good Repair and Proper Adjustment - Equipment (C)
Shelving down in the dry storage room is showing signs of rust. Additional cleaning is needed in this area.
Ice is forming on the on the floor and back of the air compressor in the walk-in freezer downstairs.
(A) EQUIPMENT shall be maintained in a state of repair and condition that meets the requirements specified under Parts 4-1 and 4-2 of the 2017 FDA Food Code.
- 48 4-501.14 Warewashing Equipment, Cleaning Frequency (C)
Additional cleaning needed on the inside of the dishmachine in the wash area.
A WAREWASHING machine; the compartments of sinks, basins, or other receptacles used for washing and rinsing EQUIPMENT, UTENSILS, or raw FOODS, or laundering wiping cloths; and drainboards or other EQUIPMENT used to substitute for drainboards
as specified under § 4-301.13 shall be cleaned:
(A) Before use;
(B) Throughout the day at a frequency necessary to prevent recontamination of EQUIPMENT and UTENSILS and to ensure that the EQUIPMENT performs its intended function; and
(C) If used, at least every 24 hours.