

Food Establishment Inspection Report

Score: 97

Establishment Name: WFO NORTH CAMPUS DINING HALL
Location Address: 1834 WAKE FOREST ROAD BUILDING 63
City: WINSTON SALEM **State:** NC
Zip: 27106 **County:** 34 Forsyth
Permittee: WAKE FOREST UNIVERSITY
Telephone: (336) 758-7826 / (803) 457-5904

Establishment ID: 3034060025
☒ Inspection ☐ Re-Inspection
Date: 04/07/2015 **Status Code:** A - Open For Business
Time In: 10:40 AM **Time Out:** 1:20 PM
Category#: IV
FDA Establishment Type: Full-Service Restaurant
No. of Risk Factor/Intervention Violations: 1
No. of Repeat Risk Factor/Intervention Violations: 0

Wastewater System: ☒ Municipal/Community ☐ On-Site System
Water Supply: ☒ Municipal/Community ☐ On-Site Supply

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
Supervision .2652									
1	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	PIC present, Demonstration - Certification by accredited program, and performs duties	2	0		
Employee Health .2652									
2	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	No evidence of leaks into or out from sewer lines/manholes?	3	1.5	0	
3	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper use of reporting, restriction and exclusion	3	1.5	0	
Good Hygienic Practices .2652, .2653									
4	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper eating, tasting, drinking, or tobacco use	2	1	0	
5	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	No discharge from eyes, nose, and mouth	1	.5	0	
Preventing Contamination by Hands .2652, .2653, .2655, .2656									
6	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Hands clean and properly washed	4	2	0	
7	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Tanks pumped, cleaned out as needed?	3	1.5	0	
8	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Handwashing sinks, supplied and accessible	2	1	0	
Approved Source .2653, .2655									
9	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food obtained from approved source	2	1	0	
10	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Food received at proper temperature	2	1	0	
11	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food in good condition, safe and unadulterated	2	1	0	
12	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Required records available: shellstock tags, parasite destruction	2	1	0	
Protection from Contamination .2653, .2654									
13	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Panel breakers and switches left in active position after inspection?	3	1.5	0	
14	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	No evidence of effluent surfacing/reaching surface waters	3	1.5	X	X
15	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper disposition of returned, previously served, reconditioned, and unsafe food	2	1	0	
Potentially Hazardous Food Time/Temperature .2653									
16	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Surface water being effectively diverted away?	3	1.5	0	
17	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Diversions/ditches/swales/tile drains properly maintained?	3	1.5	0	
18	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper cooling time and temperatures	3	1.5	0	
19	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper hot holding temperatures	3	1.5	0	
20	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper cold holding temperatures	3	1.5	0	
21	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper date marking and disposition	3	1.5	0	
22	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Time as a Public Health Control: procedures and records	2	1	0	
Consumer Advisory .2653									
23	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Consumer advisory provided for raw or undercooked foods	1	.5	0	
Highly Susceptible Populations .2653									
24	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Laterals free of excess solids, cleaned out as needed?	3	1.5	0	
Chemical .2653, .2657									
25	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Pressure head is properly adjusted?	1	0.5	0	
26	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Toxic substances properly identified, stored, and used	2	1	0	
Conformance with Approved Procedures .2653, .2654, .2658									
27	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Compliance with variance, specialized process, reduced oxygen packaging criteria or HACCP plan	2	1	0	

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
Safe Food and Water .2653, .2655, .2658									
28	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Pasteurized eggs used where required	1	0.5	0	
29	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Water and ice from approved source	2	1	0	
30	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Variance obtained for specialized processing methods	1	0.5	0	
Food Temperature Control .2653, .2654									
31	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper cooling methods used; adequate equipment for temperature control	1	X	0	X
32	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Plant food properly cooked for hot holding	1	0.5	0	
33	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Approved thawing methods used	1	0.5	0	
34	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Thermometers provided and accurate	1	0.5	0	
Food Identification .2653									
35	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food properly labeled: original container	2	1	0	
Prevention of Food Contamination .2652, .2653, .2654, .2656, .2657									
36	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Insects and rodents not present; no unauthorized animals	2	X	0	
37	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Contamination prevented during food preparation, storage and display	2	1	0	
38	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Personal cleanliness	1	0.5	0	
39	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Wiping cloths: properly used and stored	1	0.5	0	
40	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Washing fruits and vegetables	1	0.5	0	
Proper Use of Utensils .2653, .2654									
41	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	In-use utensils: properly stored	1	0.5	X	X
42	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Utensils, equipment and linens: properly stored, dried and handled	1	0.5	0	
43	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Single-use and single-service articles: properly stored and used	1	0.5	0	
44	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Gloves used properly	1	0.5	0	
Utensils and Equipment .2653, .2654, .2663									
45	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Equipment, food and non-food-contact surfaces approved; cleanable, properly designed, constructed and used	2	X	0	
46	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Warewashing facilities: installed, maintained and used; test strips	1	.5	0	
47	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Non-food-contact surfaces clean	1	X	0	
Physical Facilities .2654, .2655, .2656									
48	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Hot and cold water available; adequate pressure	2	1	0	
49	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Plumbing installed; proper backflow devices	2	1	0	
50	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Sewage and waste water properly disposed	2	1	0	
51	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Toilet facilities: properly constructed, supplied and cleaned	1	.5	0	
52	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Garbage and refuse properly disposed; facilities maintained	1	.5	0	
53	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Physical facilities installed, maintained and clean	1	.5	0	
54	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Meets ventilation and lighting requirements; designated areas used	1	.5	0	
TOTAL DEDUCTIONS:						3.0			



Comment Addendum to Food Establishment Report

Establishment Name: WFU NORTH CAMPUS DINING HALL
Location Address: 1834 WAKE FOREST ROAD BUILDING
City: WINSTON SALEM⁶³ **State:** NC
County: 34 Forsyth **Zip:** 27106
Wastewater System: ☒ Municipal/Community ☐ On-Site System
Water Supply: ☒ Municipal/Community ☐ On-Site System
Permittee: WAKE FOREST UNIVERSITY
Telephone: (336) 758-7826 / (803) 457-5904

Establishment ID: 3034060025
☒ **Inspection** ☐ **Re-Inspection** **Date:** 04/07/2015
Comment Addendum Attached ? ☐ **Status Code:** A
Category#: IV
Email 1: knight-zeb@aramark.com
Email 2: _____
Email 3: _____

Temperature Observations

Item/Location	Temp	Item/Location	Temp	Item/Location	Temp
tomato/ Cold bar	39.0	stir fry/ hot bar	150.0	chicken brea/ final cook	172.0
egg/ Cold bar	40.0	cooked veget/ hot bar	170.0	rice/ make top	40.0
ham/ Cold bar	40.0	barley salad/ deli case	38.0	pasta/ upright cooler	39.0
lettuce/ Cold bar	41.0	salmon salad/ deli case	38.0	sanitizer (q/ buckets (ppm)	150.0
chicken fill/ fried final cook	200.0	pasta salad/ deli case	39.0	sanitizer (q/ three comp sink (ppm)	200.0
raw chicken/ low boy	37.0	steak/ walk in	40.0	hot plate te/ dish machine	163.0
melons cut/ Cold bar	37.0	noodles/ walk in	38.0	hot water/ three comp sink	135.0
melons cut/ reach in cold bar	36.0	mac and chee/ walk in	38.0	Zeb N. Knight/ 03/05/2019	0.0

Observations and Corrective Actions

Violatons cited in this report must be corrected within the time frames below , or as stated in sections 8-405.11 of the food code.



Item Number	Observations and Corrective Actions
14	4-601.11 (A) Equipment, Food-Contact Surfaces, Nonfood-Contact Surfaces, and Utensils - P One mandolin slicer had dried vegetable debris on its surface and blades. Food contact surfaces shall be maintained clean to sight and touch. CDI: Mandolin slicer washed and sanitized during inspection. CDI. 0 pts
31	3-501.15 Cooling Methods - PF Three large pans of pork cooked the morning of the inspection (4/7/2015) were wrapped tightly and stacked on top of each other. This does not allow for proper air flow to allow cooling. CDI: Employee readjusted the metal pans to be open and staggered so air flow could occur and properly cool the pork. CDI.
36	6-501.111 Controlling Pests - PF Flies present in the kitchen. Contact pest control to remove flies.
41	3-304.12 In-Use Utensils, Between-Use Storage - C Four tongs stored on pull bar of oven, storing tongs in this location can lead to clothing contact with the tongs. Utensils shall be stored in a location where contamination potential is limited. CDI: Employee removed tongs and put them in a clean pan on a prep surface. CDI. 0 pts
45	4-501.11 Good Repair and Proper Adjustment-Equipment - C Rice cooker is missing its top knob. Replace the knob. Cutting boards throughout the establishment are rough with deep cuts and stained. Cutting boards shall be maintained in good repair to be easily cleanable and non absorbent. Replace damaged cutting boards. Equipment shall be maintained in good repair.
47	4-601.11 (B) and (C) Equipment, Food-Contact Surfaces, Nonfood-Contact Surfaces, and Utensils - C Corners of the walk in cooler have food debris accumulation. One metal pan of grill top cleaning supplies stored in a low cabinet has grease build up in it and on the handles of the stored cleaning supplies. One thermometer with grease build up on the handle was stored in the fire suppression control cabinet. Thermometer was discarded by PIC during inspection. Non food contact surfaces shall be maintained clean.

Person in Charge (Print & Sign): Zeb N. Knight

Regulatory Authority (Print & Sign): Joseph Chrobak

REHS ID: 2450 Chrobak, Joseph

REHS Contact Phone Number: (336)703-3164

Verification Required Date: _____

