

Food Establishment Inspection Report

Score: 96.5

Establishment Name: KFC G135203

Establishment ID: 3034012220

Location Address: 1203 SILAS CREEK PKWY

☒ Inspection ☐ Re-Inspection

City: WINSTON SALEM

State: NC

Date: 06 / 17 / 2016 Status Code: A

Zip: 27127

County: 34 Forsyth

Time In: 10 : 00 ^{am}_{pm} Time Out: 01 : 45 ^{am}_{pm}

Permittee: FQSR, LLC

Total Time: 3 hrs 45 minutes

Telephone: (336) 723-8758

Category #: III

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

FDA Establishment Type:

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

No. of Risk Factor/Intervention Violations: 4

No. of Repeat Risk Factor/Intervention Violations:

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"/>	PIC Present; Demonstration-Certification by accredited program and perform duties				2	0	<input type="checkbox"/>	<input type="checkbox"/>
Employee Health .2652											
2	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Management, employees knowledge; responsibilities & reporting				3	15	0	<input type="checkbox"/>
3	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper use of reporting, restriction & exclusion				3	15	0	<input type="checkbox"/>
Good Hygienic Practices .2652, .2653											
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	05	0	<input type="checkbox"/>
Preventing Contamination by Hands .2652, .2653, .2655, .2656											
6	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Hands clean & properly washed				4	2	<input checked="" type="checkbox"/>	<input checked="" 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	15	0	<input type="checkbox"/>
8	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Handwashing sinks supplied & accessible				2	<input checked="" type="checkbox"/>	0	<input checked="" type="checkbox"/>
Approved Source .2653, .2655											
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"/>
Protection from Contamination .2653, .2654											
13	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food separated & protected				3	15	0	<input type="checkbox"/>
14	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Food-contact surfaces: cleaned & sanitized				3	15	<input checked="" type="checkbox"/>	<input checked="" 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"/>
Potentially Hazardous Food Time/Temperature .2653											
16	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper cooking time & temperatures				3	15	0	<input type="checkbox"/>
17	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper reheating procedures for hot holding				3	15	0	<input type="checkbox"/>
18	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Proper cooling time & temperatures				3	15	0	<input type="checkbox"/>
19	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Proper hot holding temperatures				3	15	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
20	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper cold holding temperatures				3	15	0	<input type="checkbox"/>
21	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper date marking & disposition				3	15	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"/>
Consumer Advisory .2653											
23	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Consumer advisory provided for raw or undercooked foods				1	05	0	<input type="checkbox"/>
Highly Susceptible Populations .2653											
24	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Pasteurized foods used; prohibited foods not offered				3	15	0	<input type="checkbox"/>
Chemical .2653, .2657											
25	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Food additives: approved & properly used				1	05	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"/>
Conformance with Approved Procedures .2653, .2654, .2658											
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
Safe Food and Water .2653, .2655, .2658											
28	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Pasteurized eggs used where required				1	05	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	05	0	<input type="checkbox"/>
Food Temperature Control .2653, .2654											
31	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper cooling methods used; adequate equipment for temperature control				1	05	0	<input type="checkbox"/>
32	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Plant food properly cooked for hot holding				1	05	0	<input type="checkbox"/>
33	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Approved thawing methods used				1	05	0	<input type="checkbox"/>
34	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Thermometers provided & accurate				1	05	0	<input type="checkbox"/>
Food Identification .2653											
35	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food properly labeled: original container				2	1	0	<input type="checkbox"/>
Prevention of Food Contamination .2652, .2653, .2654, .2656, .2657											
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	05	0	<input type="checkbox"/>
39	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Wiping cloths: properly used & stored				1	<input checked="" type="checkbox"/>	0	<input type="checkbox"/>
40	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Washing fruits & vegetables				1	05	0	<input type="checkbox"/>
Proper Use of Utensils .2653, .2654											
41	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	In-use utensils: properly stored				1	05	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
42	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Utensils, equipment & linens: properly stored, dried & handled				1	<input checked="" type="checkbox"/>	0	<input type="checkbox"/>
43	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Single-use & single-service articles: properly stored & used				1	05	0	<input type="checkbox"/>
44	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Gloves used properly				1	05	0	<input type="checkbox"/>
Utensils and Equipment .2653, .2654, .2663											
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 type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Warewashing facilities: installed, maintained, & used; test strips				1	05	<input checked="" type="checkbox"/>	<input type="checkbox"/>
47	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Non-food contact surfaces clean				1	05	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Physical Facilities .2654, .2655, .2656											
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 type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Plumbing installed; proper backflow devices				2	1	<input checked="" type="checkbox"/>	<input checked="" 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	05	0	<input type="checkbox"/>
52	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Garbage & refuse properly disposed; facilities maintained				1	05	0	<input type="checkbox"/>
53	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Physical facilities installed, maintained & clean				1	<input checked="" type="checkbox"/>	0	<input type="checkbox"/>
54	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Meets ventilation & lighting requirements; designated areas used				<input checked="" type="checkbox"/>	05	0	<input checked="" type="checkbox"/>
Total Deductions:										3.5	

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

Comment Addendum to Food Establishment Inspection Report

Establishment Name: KFC G135203

Location Address: 1203 SILAS CREEK PKWY

City: WINSTON SALEM State: NC

County: 34 Forsyth Zip: 27127

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

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

Permittee: FQSR, LLC

Telephone: (336) 723-8758

Establishment ID: 3034012220

☒ Inspection ☐ Re-Inspection Date: 06/17/2016

Comment Addendum Attached? ☐ Status Code: A

Category #: III

Email 1: 203@kbp-foods.com

Email 2:

Email 3:

Temperature Observations

Item	Location	Temp	Item	Location	Temp	Item	Location	Temp
cole slaw	walk-in cooler	37	fried chicken	final cook	190			
grilled chicken	walk-in cooler	36	hot water	3-compartment sink	147			
chicken pot	walk-in cooler	37	wash water	3-compartment sink	107			
baked beans	hot hold cabinet	99	ServSafe	Tiffany Sparks 10-16-19	0			
mac n cheese	hot hold cabinet	124	quat (ppm)	3-compartment sink	200			
popcorn	hot hold cabinet	143						
chicken strips	hot hold cabinet	155						
cole slaw	reach-in cooler	37						

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.

- 6 2-301.14 When to Wash - P - Two employees were preparing to work with food and did not wash hands before putting on gloves. Employees must wash hands prior to putting on gloves. Wearing gloves does not substitute for handwashing. CDI - Employees instructed to wash hands before putting on gloves and did so before working with food. 0 pts.
- 8 5-205.11 Using a Handwashing Sink-Operation and Maintenance - PF - Repeat - Handwash sink beside drive thru was being used to store whisk and pitcher. Handsinks must be maintained clear and only be used for handwashing. CDI - Whisk and pitcher removed by PIC.
- 14 114-501.114 Manual and Mechanical Warewashing Equipment, Chemical Sanitization-Temperature, pH, Concentration and Hardness - P - Employee observed sanitizing a large bowl for less than 30 seconds. Utensils must be sanitized according to manufacturer's instructions which indicate 60 seconds. CDI - Manager instructed on proper sanitize time. 0 pts.



Person in Charge (Print & Sign): *First* Tiffany *Last* Sparks

Regulatory Authority (Print & Sign): *First* Andrew Lee *Last* Tony Williams

T. Sparks

amz/

REHS ID: 1846 - Williams, Tony

Verification Required Date: 06 / 27 / 2016

REHS Contact Phone Number: (336) 703 - 3128



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 Food Establishment Inspection Report

Establishment Name: KFC G135203

Establishment ID: 3034012220

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.



- 19 3-501.16 (A)(1) Potentially Hazardous Food (Time/Temperature Control for Safety Food), Hot and Cold Holding - P - Large container of baked beans in hot hold cabinet measured 99F and small containers of mac n cheese measured between 119F and 124F. Potentially hazardous foods in hot holding must be kept at a minimum of 135F. CDI - Mac n cheese and baked beans reheated to above 165F.
- 39 3-304.14 Wiping Cloths, Use Limitation - C - Multiple sanitizer buckets were observed on the floor throughout the establishment. Sanitizer buckets must be stored off the floor.
- 41 3-304.12 In-Use Utensils, Between-Use Storage - C - Whisk used to stir tea at drive thru area was stored beside a handwash sink where it was exposed to splash. Pair of tongs stored on handle of hot hold unit. In-use utensils must be stored on a clean surface where they are not exposed to splash or other forms of contamination. 0 pts.
- 42 4-901.11 Equipment and Utensils, Air-Drying Required - C - 4 food pans were stacked while wet. Utensils and food-contact equipment must be air dried prior to stacking. / Clean utensil rack is stored within splash contamination of handwash sink. Install a taller splash guard (14 inches) or move shelving to the wall away from the handsink.
- 45 4-501.11 Good Repair and Proper Adjustment-Equipment - C - Torn gasket present in reach-in cooler, Hobart mixer has chipping paint, steel panels need to be resealed to the walls of the walk-in cooler, and 1 food pan cracked. Equipment shall be maintained in good repair. 0 pts.
- 46 4-501.19 Manual Warewashing Equipment, Wash Solution Temperature - PF - Warewashing water in the 3-compartment sink measured 107F while an employee was actively washing. Warewashing water must be at least 110F. CDI - Warewashing water refilled with 110F water. 0 pts.
- 47 4-602.13 Nonfood Contact Surfaces - C - Additional cleaning is needed underneath the beverage machine. 0 pts.



Comment Addendum to Food Establishment Inspection Report

Establishment Name: KFC G135203

Establishment ID: 3034012220

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.



- 49 5-203.14 Backflow Prevention Device, When Required - P - Backflow prevention devices are not present on ice machines. VR - Install ASSE 1024 backflow preventer on both water lines by 6/27/2016. Contact Andrew Lee at (336) 703-3128 when completed.
- 53 6-201.13 Floor and Wall Junctures, Coved, and Enclosed or Sealed - C - Coved base is not present in both restrooms and is peeling from wall in the walk-in cooler. Restrooms and food storage areas must have a coved base. Install a coved baseboard in the restrooms and walk-in cooler, or achieve a coved base by using epoxy grout to manually create coveed base. // 6-201.11 Floors, Walls and Ceilings-Cleanability - C - Caulking is needed at the 3-compartment sink, wall is bowing out beside prep sink, toilets in both restrooms need to be recaulked to the floor, baseboard is damaged beside prep sink and beside can wash, floor grout is worn beside 3-compartment sink, and holes above handsink and 3-compartment sink need to sealed.
- 54 6-303.11 Intensity-Lighting - C - Repeat - Lighting is low in men's restroom at the vanity and urinal: 10-12 foot candles, outdoor walk-in freezer: 3 foot candles, back kitchen cook line: 28-40 foot candles, and in walk-in cooler beside door: 5 foot candles. Lighting must be at least 10 foot candles in coolers and freezers, 20 foot candles in restrooms, and 50 foot candles where food is cooked or prepared. Raise lighting in these areas.



Comment Addendum to Food Establishment Inspection Report

Establishment Name: KFC G135203

Establishment ID: 3034012220

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.

✓
Spell



Comment Addendum to Food Establishment Inspection Report

Establishment Name: KFC G135203

Establishment ID: 3034012220

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.

✓
Spell

