

# Food Establishment Inspection Report

Score: 98.5

Establishment Name: FOOD LION #133 DELI

Establishment ID: 3034020496

Location Address: 7760 NORTH POINT BLVD

City: WINSTON SALEM State: North Carolina

Zip: 27106 County: 34 Forsyth

Permittee: FOOD LION LLC

Telephone: (336) 759-0400

☒ Inspection ☐ Re-Inspection ☐ Educational Visit**Wastewater System:**☒ Municipal/Community ☐ On-Site System**Water Supply:**☒ Municipal/Community ☐ On-Site Supply

Date: 05/09/2024

Status Code: A

Time In: 2:25 PM

Time Out: 4:35 PM

Category#: II

FDA Establishment Type: Deli Department

No. of Risk Factor/Intervention Violations: 2

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
<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"/> 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
<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"/> 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
<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 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
<b>Protection from Contamination .2653, .2654</b>					
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
<b>Potentially Hazardous Food Time/Temperature .2653</b>					
18	<input checked="" type="checkbox"/> OUT/N/A/N/O	Proper cooking time & temperatures	3	1.5	0
19	<input checked="" type="checkbox"/> IN 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	X
23	<input checked="" type="checkbox"/> OUT/N/A/N/O	Proper date marking & disposition	3	1.5	0
24	<input checked="" type="checkbox"/> IN OUT	Time as a Public Health Control; procedures & records	3	1.5	0
<b>Consumer Advisory .2653</b>					
25	<input checked="" type="checkbox"/> IN OUT	Consumer advisory provided for raw/undercooked foods	1	0.5	0
<b>Highly Susceptible Populations .2653</b>					
26	<input checked="" type="checkbox"/> IN OUT	Pasteurized foods used; prohibited foods not offered	3	1.5	0
<b>Chemical .2653, .2657</b>					
27	<input checked="" type="checkbox"/> IN OUT	Food additives: approved & properly used	1	0.5	0
28	<input checked="" type="checkbox"/> IN OUT/N/A	Toxic substances properly identified stored & used	2	X	0
<b>Conformance with Approved Procedures .2653, .2654, .2658</b>					
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
<b>Safe Food and Water .2653, .2655, .2658</b>					
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
<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 OUT	Plant food properly cooked for hot holding	1	0.5	0
35	<input checked="" type="checkbox"/> OUT	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"/> IN OUT	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"/> IN OUT	Utensils, equipment & linens: properly stored, dried & handled	1	0.5	X
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"/> OUT	Equipment, food & non-food contact surfaces approved, cleanable, properly designed, constructed & used	1	0.5	0
48	<input checked="" type="checkbox"/> OUT	Warewashing facilities: installed, maintained & used; test strips	1	0.5	0
49	<input checked="" type="checkbox"/> IN OUT	Non-food contact surfaces clean	1	0.5	X
<b>Physical Facilities .2654, .2655, .2656</b>					
50	<input checked="" type="checkbox"/> OUT	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"/> IN OUT	Toilet facilities: properly constructed, supplied & cleaned	1	0.5	X
54	<input checked="" type="checkbox"/> OUT	Garbage & refuse properly disposed; facilities maintained	1	0.5	0
55	<input checked="" type="checkbox"/> IN OUT	Physical facilities installed, maintained & clean	1	0.5	X
56	<input checked="" type="checkbox"/> OUT	Meets ventilation & lighting requirements; designated areas used	1	0.5	0
<b>TOTAL DEDUCTIONS:</b>					1.5



# Comment Addendum to Food Establishment Inspection Report

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Establishment ID: 3034020496  
☒ Inspection ☐ Re-Inspection Date: 05/09/2024  
☐ Educational Visit Status Code: A  
Comment Addendum Attached? ☒ Category #: II  
Email 1:  
Email 2:  
Email 3:

## Temperature Observations

Item/Location	Temp	Item/Location	Temp	Item/Location	Temp
nashville tenders @ 2:34/walk in cooler	101				
nashville tenders @ 3:14/walk in cooler	54				
wings @ 2:34/walk in cooler	69				
wings @ 3:14/walk in cooler	45				
ham/display case	36.5				
turkey/display case	37				
roast beef/under display case	40				
turkey/under display case	39				
Rotisserie chx/final cook	193				
chicken tender/final cook	180				
8 ct chx tenders/customer case	48				
lunch meats (packaged)/customer self serve	38				
tenders/customer case	44				
teriyaki wings/hot bar	156				
plain wing/hot bar	153				
quat ppm/3-comp	400				
hot water/3-comp	124				

First  
Person in Charge (Print & Sign): Felicia

Last  
Joyce

First  
Regulatory Authority (Print & Sign): Leslie

Last  
Easter

*[Signature]*

*[Signature]*

REHS ID: 1908 - Easter, Leslie

Verification Dates: Priority:

Priority Foundation:

Core:

REHS Contact Phone Number: (336) 703-3138

Authorize final report to  
be received via Email: \_\_\_\_\_



North Carolina Department of Health & Human Services

Page 2 of \_\_\_\_\_  
● Division of Public Health ● Environmental Health Section  
DHHS is an equal opportunity employer.  
Food Establishment Inspection Report, 12/2023

● Food Protection Program



## Comment Addendum to Inspection Report

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**Establishment ID:** 3034020496

**Date:** 05/09/2024 **Time In:** 2:25 PM **Time Out:** 4:35 PM

### Certifications

Name	Certificate #	Type	Issue Date	Expiration Date
Tamera Barr		Food Service		12/09/2026

### 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). Two containers of chicken in the customer self-service area above 41F. Cold TCS foods shall be held cold at 41F or below. CDI- foods discarded.
- 28 7-201.11 Separation - Storage (P). Multiple spray bottles of chemicals stored under slicers adjacent to individual dressings. Poisonous or toxic materials shall be stored so they cannot contaminate food, equipment, utensils, linens, and single-service and single-use articles. CDI - bottles relocated to chemical storage rack.
- 44 4-901.11 Equipment and Utensils, Air-Drying Required (C). Metal pans under rotisserie oven were stacked wet. Allow adequate time for pans to air dry prior to stacking.
- 49 4-602.13 Nonfood Contact Surfaces (C). Repeat. Tracks on deli and cheese cases have food/debris accumulation. Drainboard on sanitized end of 3-comp sink has soil accumulation. Non food contact surfaces of equipment shall be cleaned at a frequency necessary to preclude accumulation of soil residues.
- 53 6-302.11 Toilet Tissue, Availability (Pf). No toilet tissue provided in men's restroom and one stall of ladies' restroom. Supply toilet tissue at each toilet in the facility. CDI - management notified to supply toilet tissue in restrooms.
- 55 6-501.11 Repairing - Premises, Structures, Attachments, and Fixtures - Methods (C). Repeat. Hole in wall next to fire suppression pull. Floors, walls, and ceilings including the attachments such as soap and towel dispensers; light fixtures; and heat/ac vents shall be maintained in good repair.