

Food Establishment Inspection Report

Score: 95Establishment Name: HISTORIC BROOKSTOWN INN BREAKFAST ROOMEstablishment ID: 3034012314Location Address: 200 BROOKSTOWN AVENUE☒ Inspection ☐ Re-InspectionCity: WINSTON SALEMState: NCDate: 08 / 11 / 2014 Status Code: AZip: 27101County: 34 ForsythTime In: 07 : 45 ☒ am ☐ pmTime Out: 10 : 10 ☒ am ☐ pmPermittee: BROOKSTOWN HOSPITALITY LLCTotal Time: 2 hrs 25 minutesTelephone: (336) 725-1120Category #: IIWastewater System: ☒ Municipal/Community ☐ On-Site System

FDA Establishment Type: _____

Water Supply: ☒ Municipal/Community ☐ On-Site SupplyNo. of Risk Factor/Intervention Violations: 5

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 type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | PIC Present; Demonstration-Certification by accredited program and perform duties | | | | 2 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Employee Health .2652 | | | | | | | | | | | |
| 2 | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | Management, employees knowledge; responsibilities & reporting | | | | 3 | 1.5 | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
| 3 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Proper use of reporting, restriction & exclusion | | | | 3 | 1.5 | 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 | 0.5 | 0 | <input type="checkbox"/> |
| Preventing Contamination by Hands .2652, .2653, .2655, .2656 | | | | | | | | | | | |
| 6 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Hands clean & properly washed | | | | 4 | 2 | 0 | <input 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 | 1.5 | 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 | 1.5 | 0 | <input type="checkbox"/> |
| 14 | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | Food-contact surfaces: cleaned & sanitized | | | | 3 | <input checked="" type="checkbox"/> | 0 | <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 type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Proper cooking time & temperatures | | | | 3 | 1.5 | 0 | <input type="checkbox"/> |
| 17 | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Proper reheating procedures for hot holding | | | | 3 | 1.5 | 0 | <input type="checkbox"/> |
| 18 | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Proper cooling time & temperatures | | | | 3 | 1.5 | 0 | <input type="checkbox"/> |
| 19 | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Proper hot holding temperatures | | | | 3 | 1.5 | 0 | <input type="checkbox"/> |
| 20 | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | Proper cold holding temperatures | | | | 3 | <input checked="" type="checkbox"/> | 0 | <input checked="" type="checkbox"/> |
| 21 | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Proper date marking & disposition | | | | 3 | 1.5 | 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 | 0.5 | 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 | 1.5 | 0 | <input type="checkbox"/> |
| Chemical .2653, .2657 | | | | | | | | | | | |
| 25 | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Food additives: approved & properly used | | | | 1 | 0.5 | 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 | 0.5 | 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 | 0.5 | 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 | 0.5 | 0 | <input type="checkbox"/> |
| 32 | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Plant food properly cooked for hot holding | | | | 1 | 0.5 | 0 | <input type="checkbox"/> |
| 33 | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Approved thawing methods used | | | | 1 | 0.5 | 0 | <input type="checkbox"/> |
| 34 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Thermometers provided & accurate | | | | 1 | 0.5 | 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 type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | Contamination prevented during food preparation, storage & display | | | | 2 | <input checked="" type="checkbox"/> | 0 | <input type="checkbox"/> |
| 38 | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | Personal cleanliness | | | | 1 | 0.5 | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 39 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Wiping cloths: properly used & stored | | | | 1 | 0.5 | 0 | <input type="checkbox"/> |
| 40 | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Washing fruits & vegetables | | | | 1 | 0.5 | 0 | <input type="checkbox"/> |
| Proper Use of Utensils .2653, .2654 | | | | | | | | | | | |
| 41 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | In-use utensils: properly stored | | | | 1 | 0.5 | 0 | <input type="checkbox"/> |
| 42 | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | Utensils, equipment & linens: properly stored, dried & handled | | | | 1 | 0.5 | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 43 | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | Single-use & single-service articles: properly stored & used | | | | 1 | 0.5 | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 44 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Gloves used properly | | | | 1 | 0.5 | 0 | <input type="checkbox"/> |
| Utensils and Equipment .2653, .2654, .2663 | | | | | | | | | | | |
| 45 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Equipment, food & non-food contact surfaces approved, cleanable, properly designed, constructed, & used | | | | 2 | 1 | 0 | <input type="checkbox"/> |
| 46 | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | Warewashing facilities: installed, maintained, & used; test strips | | | | 1 | 0.5 | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 47 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Non-food contact surfaces clean | | | | 1 | 0.5 | 0 | <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 checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Plumbing installed; proper backflow devices | | | | 2 | 1 | 0 | <input 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 | 0.5 | 0 | <input type="checkbox"/> |
| 52 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Garbage & refuse properly disposed; facilities maintained | | | | 1 | 0.5 | 0 | <input type="checkbox"/> |
| 53 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Physical facilities installed, maintained & clean | | | | 1 | 0.5 | 0 | <input type="checkbox"/> |
| 54 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Meets ventilation & lighting requirements; designated areas used | | | | 1 | 0.5 | 0 | <input type="checkbox"/> |
| Total Deductions: | | | | | | | | | | 5 | |

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Comment Addendum to Food Establishment Inspection Report

Establishment Name: HISTORIC BROOKSTOWN INN BREAKFAST ROOM
Location Address: 200 BROOKSTOWN AVENUE
City: WINSTON SALEM State: NC
County: 34 Forsyth Zip: 27101
Wastewater System: ☒ Municipal/Community ☐ On-Site System
Water Supply: ☒ Municipal/Community ☐ On-Site System
Permittee: BROOKSTOWN HOSPITALITY LLC
Telephone: (336) 725-1120

Establishment ID: 3034012314
☒ Inspection ☐ Re-Inspection Date: 08/11/2014
Comment Addendum Attached? ☒ Status Code: A
Category #: II
Email 1: dlbryson@bellsouth.net
Email 2:
Email 3:

Temperature Observations

| Item | Location | Temp | Item | Location | Temp | Item | Location | Temp |
|--------------|------------|------|------|----------|------|------|----------|------|
| hot water | tap 3 comp | 142 | | | | | | |
| dish machine | temp | 135 | | | | | | |
| eggs | reach in | 32 | | | | | | |
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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.

- 1 2-102.12 Certified Food Protection Manager - C- Facility does not have an ANSI accredited certified Food safety manager. Facility must have a certified food manager. A list of courses is available at NCRLA.org /2-101.11 Assignment - PF- The certified food protection manager must be present at the facility during all hours of operation. GC
- 2 2-103.11 (M) Person in Charge-Duties - PF- Facility does not have an employee health policy. Facility is required to have an employee health policy. GC
- 8 5-205.11 Using a Handwashing Sink-Operation and Maintenance - PF- Handsink in kitchen covered with a grey bus tub. The handsink shall be accessible at all times. Do not block or cover the handsink. CDI- Inspector moved the bus tub. / 6-301.14 Handwashing Signage - C- No employee hand wash signs present. Handwash signs shall be posted and visible at all times.



Person in Charge (Print & Sign): Allison Southard
Regulatory Authority (Print & Sign): Doris Hogan

Handwritten signatures of Allison Southard and Doris Hogan.

REHS ID: 1808 - Hogan, Doris

Verification Required Date: 08 / 15 / 2014

REHS Contact Phone Number: (336) 703 - 3133



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Establishment ID: 3034012314

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- 14 4-501.114 Manual and Mechanical Warewashing Equipment, Chemical Sanitization-Temperature, pH, Concentration and Hardness - P- No available sanitizer in the dish machine. The sanitizer is required to be 50 ppm chlorine at all times. The dish machine is not be used until it is properly repaired. The chemical company has been called to repair the machine. Verification required. / 4-601.11 (A) Equipment, Food-Contact Surfaces, Nonfood-Contact Surfaces, and Utensils - P- Visible pink and black mold on the top interior and on the chute. All food contact surfaces shall be clean to sight and touch. Increase the cleaning frequency of the ice machine to ensure that mold does not build up.
- 20 3-501.16 (A)(2) and (B) Potentially Hazardous Food (Time/Temperature Control for Safety Food), Hot and Cold Holding - P- Milk in glass dispensing containers at 50F. All cold foods are to be maintained at 45 or below. Facility may need different dispensing containers in order the for milk to be maintained at 45F or below. Yogurt in bowl without refrigeration. Yogurt shall be maintained at 45F or below. CDI- Employee disposed of the milk and iced down the yogurt.
- 37 3-306.11 Food Display-Preventing Contamination by Consumers - P- Pastries and bagels out from under the sneeze guard. All food shall be protected from consumers by the sneeze guard. Arrange the containers of food to allow for all items to be under the sneeze guards at all times. / 3-307.11 Miscellaneous Sources of Contamination - C- Employees personal items (tortillas, to go container of food, hot pocket, freezie pops and other items) stored on the same shelves or above food for pay. Employees food shall be stored separately as to not contaminate food.
- 38 2-402.11 Effectiveness-Hair Restraints - C- No hair restraints worn by employees. All food service employees shall wear effective hair restraints. GC
- 42 • 4-903.11 (A), (B) and (D) Equipment, Utensils, Linens and Single-Service and Single-Use Articles-Storing - C- Containers of knives, spoons and forks stored with the eating-part up. Container of plastic spoons and forks on the buffet stored so that handles and eating parts are mixed. All items are to be stored inverted and protected. GC
- 43 4-903.11 (A) and (C) Equipment, Utensils, Linens and Single-Service and Single-Use Articles-Storing - C- Rims of the to-go Styrofoam cups no protected at the coffee station. The rims of the cup shall be protected from dust, splash or other contamination at all times. GC
- 46 4-501.14 Warewashing Equipment, Cleaning Frequency - C- Food debris and build-up on the top of the dish machine at the doors. The ware washing machine shall be cleaned as to not recontaminate the food contact surfaces. Increase the cleaning frequency. GC



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Spell

