

# Food Establishment Inspection Report

Score: 97.5

Establishment Name: RUBY TUESDAY #4947

Establishment ID: 3034011723

Location Address: 6412 SESSIONS COURT

Inspection  Re-Inspection

City: CLEMMONS

State: NC

Date: 06 / 20 / 2017 Status Code: A

Zip: 27012 County: 34 Forsyth

Time In: 11 : 00 <sup>am</sup> / <sub>pm</sub> Time Out: 01 : 35 <sup>am</sup> / <sub>pm</sub>

Permittee: RUBY TUESDAY INC

Total Time: 2 hrs 35 minutes

Telephone: (336) 766-3463

Category #: IV

Wastewater System:  Municipal/Community  On-Site System

FDA Establishment Type: Full-Service Restaurant

Water Supply:  Municipal/Community  On-Site Supply

No. of Risk Factor/Intervention Violations: 0

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	NO	Compliance Status	OUT	CDI	R	VR
<b>Supervision .2652</b>								
1	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	PIC Present; Demonstration-Certification by accredited program and perform duties	2	0		
<b>Employee Health .2652</b>								
2	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Management, employees knowledge; responsibilities & reporting	3	13	0	
3	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper use of reporting, restriction & exclusion	3	13	0	
<b>Good Hygienic Practices .2652, .2653</b>								
4	<input checked="" 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"/>	No discharge from eyes, nose or mouth	1	03	0	
<b>Preventing Contamination by Hands .2652, .2653, .2655, .2656</b>								
6	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Hands clean & properly washed	4	2	0	
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	13	0	
8	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Handwashing sinks supplied & accessible	2	1	0	
<b>Approved Source .2653, .2655</b>								
9	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food obtained from approved source	2	1	0	
10	<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"/>	Food in good condition, safe & unadulterated	2	1	0	
12	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Required records available: shellstock tags, parasite destruction	2	1	0	
<b>Protection from Contamination .2653, .2654</b>								
13	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food separated & protected	3	13	0	
14	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food-contact surfaces: cleaned & sanitized	3	13	0	
15	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper disposition of returned, previously served, reconditioned, & unsafe food	2	1	0	
<b>Potentially Hazardous Food Time/Temperature .2653</b>								
16	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper cooking time & temperatures	3	13	0	
17	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper reheating procedures for hot holding	3	13	0	
18	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper cooling time & temperatures	3	13	0	
19	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper hot holding temperatures	3	13	0	
20	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper cold holding temperatures	3	13	0	
21	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper date marking & disposition	3	13	0	
22	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Time as a public health control: procedures & records	2	1	0	
<b>Consumer Advisory .2653</b>								
23	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Consumer advisory provided for raw or undercooked foods	1	03	0	
<b>Highly Susceptible Populations .2653</b>								
24	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Pasteurized foods used; prohibited foods not offered	3	13	0	
<b>Chemical .2653, .2657</b>								
25	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food additives: approved & properly used	1	03	0	
26	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Toxic substances properly identified stored, & used	2	1	0	
<b>Conformance with Approved Procedures .2653, .2654, .2658</b>								
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	

Good Retail Practices								
Good Retail Practices: Preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.								
IN	OUT	N/A	NO	Compliance Status	OUT	CDI	R	VR
<b>Safe Food and Water .2653, .2655, .2658</b>								
28	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Pasteurized eggs used where required	1	03	0	
29	<input checked="" 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"/>	Variance obtained for specialized processing methods	1	03	0	
<b>Food Temperature Control .2653, .2654</b>								
31	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper cooling methods used; adequate equipment for temperature control	1	03	0	
32	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Plant food properly cooked for hot holding	1	03	0	
33	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Approved thawing methods used	1	03	0	
34	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Thermometers provided & accurate	1	03	0	
<b>Food Identification .2653</b>								
35	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Food properly labeled: original container	2	1		
<b>Prevention of Food Contamination .2652, .2653, .2654, .2656, .2657</b>								
36	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Insects & rodents not present; no unauthorized animals	2	1	0	
37	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Contamination prevented during food preparation, storage & display	2	1	0	
38	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Personal cleanliness	1	03	0	
39	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Wiping cloths: properly used & stored	1	03	0	
40	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Washing fruits & vegetables	1	03	0	
<b>Proper Use of Utensils .2653, .2654</b>								
41	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	In-use utensils: properly stored	1	03	0	
42	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Utensils, equipment & linens: properly stored, dried & handled	1	03	0	
43	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Single-use & single-service articles: properly stored & used	1	03		
44	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Gloves used properly	1	03	0	
<b>Utensils and Equipment .2653, .2654, .2663</b>								
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	
46	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Warewashing facilities: installed, maintained, & used; test strips	1	03		
47	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Non-food contact surfaces clean	1			
<b>Physical Facilities .2654, .2655, .2656</b>								
48	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Hot & cold water available; adequate pressure	2	1	0	
49	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Plumbing installed; proper backflow devices	2			
50	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Sewage & waste water properly disposed	2	1	0	
51	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Toilet facilities: properly constructed, supplied & cleaned	1	03	0	
52	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Garbage & refuse properly disposed; facilities maintained	1	03	0	
53	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Physical facilities installed, maintained & clean		03		
54	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Meets ventilation & lighting requirements; designated areas used	1	03		
<b>Total Deductions:</b>					2.5			



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City: CLEMMONS State: NC

Comment Addendum Attached?  Status Code: A

County: 34 Forsyth Zip: 27012

Category #: IV

Wastewater System:  Municipal/Community  On-Site System

Email 1: st4947@rubytuesday.com

Water Supply:  Municipal/Community  On-Site System

Email 2:

Permittee: RUBY TUESDAY INC

Email 3:

Telephone: (336) 766-3463

## Temperature Observations

Item	Location	Temp	Item	Location	Temp	Item	Location	Temp
NRFS	Alicia Cates 7-15-18	00	Mashed	Final cook	180	Lettuce	Salad bar	40
Potatoes	Final cook	173	Pasta	Walk-in cooler	44	Tomatoes	Salad bar	40
Grilled	Final cook	174	Salmon	Walk-in cooler	40	Mushrooms	Salad bar	39
Lettuce	Make unit	40	Raw beef	Walk-in cooler	38	Broccoli	Walk-in cooler	38
Tomatoes	Make unit	41	Hot water	3-compartment sink, bar	118	Hot water	Men's RR	102
Raw beef	Upright cooler	38	Quat ppm	Bucket	200	Ambient	Upright cooler	36
Broccoli	Make unit 2	41	Rinse cycle	Dish machine	167	Burger	Upright cooler	38
Queso	Reheat	178	Shrimp	Cooling drawer	40	Asparagus	Cooling drawer	42

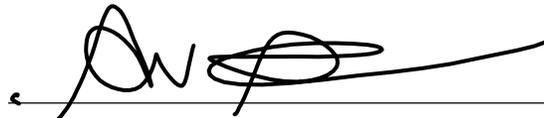
## Observations and Corrective Actions

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.

- 35 3-302.12 Food Storage Containers Identified with Common Name of Food - C - 0 pts - Continue labeling condiment bottles that are stored in the make units. Food that is removed from it's original packaging and is not easily recognizable shall be labeled with the common name of the food. ✓ Spell
- 43 4-903.11 (A) and (C) Equipment, Utensils, Linens and Single-Service and Single-Use Articles-Storing - C - 0 pts - 2 cup dispensers near the beverage machines are missing covers. Single-service cups shall be stored where they are not exposed to splash, dust, or other contamination. Provide lids or covers for the cup dispensers.
- 46 4-501.14 Warewashing Equipment, Cleaning Frequency - C - 0 pts - Light cleaning is needed inside of the dish machine door. Dish machines shall be cleaned at least once every 24 hours and at a frequency that prevents an accumulation of food debris.//4-203.13 Pressure Measuring Devices, Mechanical Warewashing Equipment - C - 0 pts - The pressure gauge on the dish machine is measuring 40 psi during the rinse cycle. Pressure gauges shall be accurate to +/- 2 psi in the range indicated on the data plate. Repair.

Person in Charge (Print & Sign): Alicia *First* Cates *Last*

Regulatory Authority (Print & Sign): Grayson *First* Hodge *Last*


REHS ID: 2554 - Hodge, Grayson

Verification Required Date: 06 / 30 / 2017

REHS Contact Phone Number: ( 336 ) 703 - 3383



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- 47 4-601.11 (B) and (C) Equipment, Food-Contact Surfaces, Nonfood-Contact Surfaces, and Utensils - C - Repeat: Cleaning needed inside of the upright cooler beside of the grill, around the gasket of the beverage walk-in cooler, inside of the reach-in cooler across from the ice cream freezer, remove sticker residue from around the outside of a few plastic containers, inside of fryer cabinets, and remove plastic from the rims of a few containers stored beside of the fryers.
- 49 5-203.14 Backflow Prevention Device, When Required - P - Repeat: Backflow preventers are not visible on the 2 tea urns. Backflow preventers are needed for the 2 soda dispensers, if they have a water line connected. A backflow preventer shall be installed on each water line in a food establishment. Provide documentation of a built-in backflow preventer/air gap, or install one on each water line according to plumbing code (ASSE 1022). A plumber has been contacted prior to the inspection. Verification of backflow preventers is required by 6-30-17, contact Grayson Hodge at 336-703-3383 or hodgega@forsyth.cc//5-205.15 System Maintained in Good Repair - C - Repair the drip leak under the handsink near the electrical closet. Plumbing systems shall be maintained in good repair.
- 53 6-201.11 Floors, Walls and Ceilings-Cleanability - C - Repeat: The baseboard inside and outside of the walk-in cooler is separating from the wall./Damaged grout and tiles around the drain that is under the ice machine. Worn grout throughout the cook line. /Recaulk the dish machine drainboard to the wall. Floors, walls, and ceilings shall be smooth and easily cleanable. Repair.// 6-501.12 Cleaning, Frequency and Restrictions - C - Repeat: Light floor cleaning needed under the dry storage shelves and inside of the electrical closet. Wall cleaning is needed behind cooking equipment and around the mop sink. Clean ceiling tiles around ceiling vents. Floors, walls, and ceilings shall be kept clean.
- 54 6-501.110 Using Dressing Rooms and Lockers - C - 0 pts - One employees jacket was stored in contact with one of the dry storage shelves. Lockers or other suitable facilities shall be used for the orderly storage of employee clothing and other possessions.//6-501.14 Cleaning Ventilation Systems, Nuisance and Discharge Prohibition - C - 0 pts - Clean around the ceiling vent inside of the men's restroom. Ventilation systems shall be kept clean.



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