

# Food Establishment Inspection Report

Score: 93

Establishment Name: CENTENARY UNITED METHODIST CH

Establishment ID: 3034011605

Location Address: 646 W 5TH ST

☒ Inspection ☐ Re-Inspection

City: WINSTON SALEM

State: NC

Date: 11 / 24 / 2015 Status Code: A

Zip: 27101

County: 34 Forsyth

Time In: 10 : 00 <sup>am</sup> <sub>pm</sub> Time Out: 12 : 25 <sup>am</sup> <sub>pm</sub>

Permittee: CENTENARY UMC

Total Time: 2 hrs 25 minutes

Telephone: (336) 724-6311

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: 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 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	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 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	<input checked="" type="checkbox"/>	0	<input type="checkbox"/>
15	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Proper disposition of returned, previously served, reconditioned, & unsafe food				2	1	<input checked="" type="checkbox"/>	<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 type="checkbox"/>	<input type="checkbox"/>	<input checked="" 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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper hot holding temperatures				3	15	0	<input 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 type="checkbox"/>	<input type="checkbox"/>	<input checked="" 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 type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Toxic substances properly identified stored, & used				2	<input checked="" type="checkbox"/>	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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Plant food properly cooked for hot holding				1	05	0	<input type="checkbox"/>
33	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Approved thawing methods used				1	05	0	<input type="checkbox"/>
34	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Thermometers provided & accurate				1	05	<input checked="" type="checkbox"/>	<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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Wiping cloths: properly used & stored				1	05	0	<input type="checkbox"/>
40	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Washing fruits & vegetables				1	05	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	05	0	<input type="checkbox"/>
42	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Utensils, equipment & linens: properly stored, dried & handled				1	05	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	<input checked="" type="checkbox"/>	0	<input type="checkbox"/>
46	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Warewashing facilities: installed, maintained, & used; test strips				1	05	0	<input type="checkbox"/>
47	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Non-food contact surfaces clean				1	<input checked="" type="checkbox"/>	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 type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Plumbing installed; proper backflow devices				2	<input checked="" type="checkbox"/>	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	05	0	<input type="checkbox"/>
52	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Garbage & refuse properly disposed; facilities maintained				1	<input checked="" type="checkbox"/>	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				1	05	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Total Deductions:										7	

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# Comment Addendum to Food Establishment Inspection Report

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☒ Inspection ☐ Re-Inspection Date: 11/24/2015

City: WINSTON SALEM State: NC

Comment Addendum Attached? ☐ Status Code: A

County: 34 Forsyth Zip: 27101

Category #: IV

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

Email 1: dmitchell@centenary.org

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

Email 2:

Permittee: CENTENARY UMC

Email 3:

Telephone: (336) 724-6311

## Temperature Observations

Item	Location	Temp	Item	Location	Temp	Item	Location	Temp
Chicken &	Warming cabinet	137	Rinse cycle	Dish machine	175			
Broccoli	Steamer	202	SS Donald	Exp. 6/19/2017	0			
Slaw	Reach in cooler	44						
Lettuce	Reach in cooler	43						
Cut tomatoes	Reach in cooler	42						
Cheese	Walk in cooler	41						
Hot water	Two compartment sink	136						
Chlorine	Spray bottle in ppm	50						

## 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.

- 8 5-202.12 Handwashing Sinks, Installation - PF - Handsink in men's restroom and women's restroom on far right side not able to maintain at least 100 deg F - handsinks must be able to maintain at least 100 deg F to wash hands - repair immediately - will require verification visit/contact in 10 days - contact Kenneth Michaud at michaukb@forsyth.cc or (336) 703-3131 when complete
- 14 6-301.14 Handwashing Signage - C - No employee handwash signs posted in kitchen or in restrooms - employee handwash signs must be located at handsinks used by employees
- 14 4-601.11 (A) Equipment, Food-Contact Surfaces, Nonfood-Contact Surfaces, and Utensils - P - Can opener contained food residue on blade and many metal shards behind blade - clean can opener, at minimum, every 24 hours to prevent debris build-up, also observed, one wisk and one pan contained food/seran wrap residue - thoroughly clean and sanitize utensils after use - CDI - items sent to dish wash area to be rewashed and sanitized; Clean behind gap in can opener mount on wood chopping table as it contains debris build-up - seal gap or remove can opener mount to prevent debris accumulation on wood chopping block; Slight pink slime build-up inside ice machine on guard - clean and sanitize internal components as often as necessary to prevent slime build-up - employee began cleaning items
- 15 0 pts - 3-701.11 Discarding or Reconditioning Unsafe, Adulterated, or Contaminated Food - P - 5 1 gallon jugs of milk were expired by at most 4 days, 1 unused container of sour cream expired by 1 month - ensure that expired food is discarded by sell by date - CDI - manager discarded items

Person in Charge (Print & Sign): Donald <sup>First</sup> Mitchell <sup>Last</sup>

Regulatory Authority (Print & Sign): Kenneth <sup>First</sup> Michaud <sup>Last</sup>

REHS ID: 2259 - Michaud, Kenneth

Verification Required Date: 12 / 04 / 2015

REHS Contact Phone Number: ( 336 ) 703 - 3131



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- 26 7-201.11 Separation-Storage - P - Cart of various chemicals and cleaners stored in between handsink and ice machine - cart was stored directly beside ice machine, chemicals also stored on window ledge directly above tea and coffee maker on table - chemicals must be stored below or away from any food contact/prep areas - this includes tables used to prepare drinks and areas beside handsinks and ice machines - CDI - manager moved chemicals to bottom shelf on cart and bottom shelf of table
- 7-102.11 Common Name-Working Containers - PF - Bottle of sanitizer has label that is worn off - relabel sanitizer bottle
- 34 0 pts - 4-203.11 Temperature Measuring Devices, Food-Accuracy - PF - Two of six thermometers off by 4 deg F - ensure that thermometers are calibrated often to ensure accuracy - CDI - recalibrated two thermometers
- 45 4-501.11 Good Repair and Proper Adjustment-Equipment - C - Replane and resurface wood chopping block as finish is wearing off in areas and exposing raw wood; Recondition or replace wire cart and casters as they are starting to rust; Repair or replace peeling storage racks in reach in cooler; Replace broken reach in cooler door handles; Replace cutting boards that are severely worn and are no longer easily cleanable; Recaulk inside hood on left side as caulking is peeling
- 4-205.10 Food Equipment, Certification and Classification - C - Trash bags used to cover food processor, mixers, etc - trash bags may not be used to cover food contact equipment - contact manufacturer to provide an approved cover or use a food grade bag to cover food contact equipment
- 47 4-601.11 (B) and (C) Equipment, Food-Contact Surfaces, Nonfood-Contact Surfaces, and Utensils - C - Detailed cleaning needed on air drying rack; inside fryer door and right side of grill so they are free from debris/grease build-up
- 49 5-203.14 Backflow Prevention Device, When Required - P - No backflow prevention device observed on water lines of tea and coffee maker, manager stated he did not know if a backflow prevention device or air gap was built internally of machines - appliances that have its own water source, must have backflow prevention device either on each water line or built internally with documentation provided - will require verification visit/contact in 10 days - contact Kenneth Michaud at michaukb@forsyth.cc or (336) 703-3131 when complete
- 52 5-501.15 Outside Receptacles - C - Dumpster lid damaged and will not fully close - contact dumpster provider to replace damaged lid so it adequately protects top opening
- 53 6-501.11 Repairing-Premises, Structures, Attachments, and Fixtures-Methods - C - Reattach and seal escutcheon cap behind ice machine to wall so no gaps are present; Caulk toilet bases to floor in restrooms used by employees to aid in cleaning



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54 0 pts - 6-303.11 Intensity-Lighting - C - Replace burned out light bulbs in walk in cooler so lighting is at least 10 ft candles



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Spell

