

Food Establishment Inspection Report

Score: 93

Establishment Name: LITTLE CAESARS 8

Establishment ID: 3034012831

Location Address: 7819 NORTHPOINT BLVD

Inspection Re-Inspection

City: WINSTON SALEM

State: NC

Date: 02 / 19 / 2020 Status Code: A

Zip: 27106 County: 34 Forsyth

Time In: 01 : 15 ^{am} _{pm} Time Out: 03 : 00 ^{am} _{pm}

Permittee: PREMIER STORES INC.

Total Time: 1 hr 45 minutes

Telephone: (336) 842-5548

Category #: II

Wastewater System: Municipal/Community On-Site System

FDA Establishment Type: Fast Food Restaurant

Water Supply: Municipal/Community On-Site Supply

No. of Risk Factor/Intervention Violations: 2

No. of Repeat Risk Factor/Intervention Violations: 1

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 checked="" 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	13	0	<input type="checkbox"/>
3	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper use of reporting, restriction & exclusion	3	13	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	03	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	13	0	<input type="checkbox"/>
8	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Handwashing sinks supplied & accessible	2	1	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	13	0	<input type="checkbox"/>
14	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Food-contact surfaces: cleaned & sanitized	<input checked="" type="checkbox"/>	13	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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper cooking time & temperatures	3	13	0	<input type="checkbox"/>
17	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Proper reheating procedures for hot holding	3	13	0	<input type="checkbox"/>
18	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Proper cooling time & temperatures	3	13	0	<input type="checkbox"/>
19	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper hot holding temperatures	3	13	0	<input type="checkbox"/>
20	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper cold holding temperatures	3	13	0	<input type="checkbox"/>
21	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper date marking & disposition	3	13	0	<input type="checkbox"/>
22	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input 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	03	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	13	0	<input type="checkbox"/>
Chemical .2653, .2657								
25	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Food additives: approved & properly used	1	03	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	03	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	03	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	03	0	<input type="checkbox"/>
32	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Plant food properly cooked for hot holding	1	03	0	<input type="checkbox"/>
33	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Approved thawing methods used	1	03	0	<input type="checkbox"/>
34	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Thermometers provided & accurate	1	03	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 checked="" type="checkbox"/>
38	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Personal cleanliness	1	03	0	<input type="checkbox"/>
39	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Wiping cloths: properly used & stored	1	03	0	<input type="checkbox"/>
40	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Washing fruits & vegetables	1	03	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	03	0	<input type="checkbox"/>
42	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Utensils, equipment & linens: properly stored, dried & handled	1	03	0	<input type="checkbox"/>
43	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Single-use & single-service articles: properly stored & used	1	03	0	<input type="checkbox"/>
44	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Gloves used properly	1	03	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	03	<input checked="" type="checkbox"/>	<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 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 type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Toilet facilities: properly constructed, supplied & cleaned	1	<input checked="" type="checkbox"/>	0	<input checked="" type="checkbox"/>
52	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Garbage & refuse properly disposed; facilities maintained	1	03	<input checked="" type="checkbox"/>	<input type="checkbox"/>
53	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Physical facilities installed, maintained & clean	<input checked="" type="checkbox"/>	03	0	<input checked="" type="checkbox"/>
54	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Meets ventilation & lighting requirements; designated areas used	1	03	0	<input type="checkbox"/>
Total Deductions: <u>7</u>								



Comment Addendum to Food Establishment Inspection Report

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 City: WINSTON SALEM State: NC
 County: 34 Forsyth Zip: 27106
 Wastewater System: Municipal/Community On-Site System
 Water Supply: Municipal/Community On-Site System
 Permittee: PREMIER STORES INC.
 Telephone: (336) 842-5548

Establishment ID: 3034012831
 Inspection Re-Inspection Date: 02/19/2020
 Comment Addendum Attached? Status Code: A
 Water sample taken? Yes No Category #: II
 Email 1: bcolborne@premierstoresinc.com
 Email 2:
 Email 3:

Temperature Observations

Cold Holding Temperature is now 41 Degrees or less

Item	Location	Temp	Item	Location	Temp	Item	Location	Temp
ServSafe	C. Garren 1/30/23	00	sausage	make unit	40			
active wash	3 comp sink	114	beef	make unit	35			
quat sani	ppm 3 comp sink	300	shrooms	reach in cooler	38			
pepperonipie	final cook	193	bruschetta	reach in cooler	38			
cheesepie	final cook	187	wings	holding cabinet	148			
mozzarella	make unit	40	pepperonipie	holding cabinet	144			
pepperoni	make unit	39	sauce	walk in cooler	41			
ham	make unit	36	veggiepie	walk in cooler	41			

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 2-103.11 (A)-(L)Person-In-Charge-Duties - PF- (B)- Person in charge has baby in carseat carrier on a chair in the kitchen because of childcare issue. Persons unnecessary to the food establishment operation are not allowed in the food preparation, food storage, or warewashing areas, except brief authorized visits and tours. CDI- Another caregiver picked up the child during inspection. 0 pts.

- 14 4-601.11 (A) Equipment, Food-Contact Surfaces, Nonfood-Contact Surfaces, and Utensils - P- REPEAT- Most dishes and utensils stored as clean with grease and food residue. Food-contact surfaces shall be clean to sight and touch. VERIFICATION required by 2/29/2020 of dish cleanliness. Contact Lauren Pleasants at (336)703-3144 or pleasaml@forsyth.cc when dishes are clean to sight and touch. Educate staff on spot-checking dishes before they are put away.

- 37 3-305.11 Food Storage-Preventing Contamination from the Premises - C- REPEAT- Bucket of pizza sauce stored on the floor in the walk-in cooler. Food shall be stored in a clean, dry location, where it is not exposed to splash, dust, or other contamination, and at least 6 inches off the floor.

Lock Text



Person in Charge (Print & Sign): Tonya *First* Lewis *Last*
 Regulatory Authority (Print & Sign): Lauren *First* Pleasants *Last*

REHS ID: 2809 - Pleasants, Lauren

Verification Required Date: 02 / 29 / 2020

REHS Contact Phone Number: (336) 703 - 3144



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



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- 45 4-501.11 Good Repair and Proper Adjustment-Equipment - C- Replace gaskets on middle hot holding cabinet that are melted and warped. Repair upright freezer to prevent ice buildup. Equipment shall be maintained in good repair. 0 pts.
- 46 4-501.18 Warewashing Equipment, Clean Solutions - C- Sanitizer solution in 3 compartment sink was visibly soiled. Maintain wash, rinse, and sanitize solutions free of visible soil and clean. CDI- Sanitizer vat emptied and new sanitizer made. 0 pts.
- 47 4-601.11 (B) and (C) Equipment, Food-Contact Surfaces, Nonfood-Contact Surfaces, and Utensils - C- Cleaning needed on the following equipment: all lower shelves for single-use boxes and flour; all shelving in walk-in cooler; all speed racks and storage racks; all dish shelving; splash zones and internal components of the dough rounder; gaskets and shelves in hot holding cabinets; lower shelves of prep tables; very dusty pizza oven control boxes and filters; rolling cart; tracks and rollers of pizza oven; pizza dough and crazy bread shelving. Nonfood-contact surfaces shall be free of dust, dirt, food residue, and other debris.
- 49 5-205.15 (B) System maintained in good repair - C- REPEAT- Repair or replace faucet handles at prep sink. Plumbing fixtures shall be maintained in good repair.
- 51 6-202.14 Toilet Rooms, Enclosed - C- REPEAT- Employee restroom door in kitchen area is not self-closing. A toilet room on the premises shall be completely enclosed and provided with a tight-fitting and self-closing door. Repair door to self-close.
5-501.17
Toilet Room Receptacle, Covered - C- Employee restroom has no covered receptacle. Any restroom used by a female shall have a covered receptacle for the disposal of sanitary products.
- 52 5-501.113 Covering Receptacles - C- One dumpster lid open. Maintain receptacles for refuse and recyclables closed with tight-fitting lids and doors. CDI- Lid closed. 0 pts.
- 53 6-501.11 Repairing-Premises, Structures, Attachments, and Fixtures-Methods - C- REPEAT- Remove moldy caulk and recaulk 3 compartment sink to the wall. Remove moldy caulk and recaulk can wash to wall inside. Recaulk toilets to the floor in the restrooms. Repaint ledge under electrical boxes by back door to be smooth and easily cleanable. Repair wall damage in employee storage area. There are several areas with peeling baseboard that needs to be removed, the wall be cleaned, and the baseboard be replaced. Physical facilities shall be maintained in good repair. // 6-501.12 Cleaning, Frequency and Restrictions - C- REPEAT- Wall and floor cleaning needed throughout, especially around perimeter baseboards, behind the 3 compartment sink, behind the dough mixer and prep sink, all floor drains, and under the hand dryer in the public restroom. Declutter and clean floor in dry storage room. Physical facilities shall be maintained clean.



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