

Food Establishment Inspection Report

Score: 94

Establishment Name: BOJANGLES 552

Establishment ID: 3034011041

Location Address: 585 NORTHWEST BLVD

City: WINSTON SALEM State: North Carolina

Zip: 27104 County: 34 Forsyth

Permittee: BOJANGLES RESTAURANTS INC

Telephone: (336) 722-4282

Inspection Re-Inspection Educational Visit

Wastewater System:

Municipal/Community On-Site System

Water Supply:

Municipal/Community On-Site Supply

Date: 05/14/2024 Status Code: A

Time In: 1:40 PM Time Out: 3:50 PM

Category#: III

FDA Establishment Type: Fast Food Restaurant

No. of Risk Factor/Intervention Violations: 3

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

Compliance Status		OUT	CDI	R	VR
Supervision .2652					
1	<input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/A				
PIC Present, demonstrates knowledge, & performs duties		1	0		
2	<input checked="" type="checkbox"/> IN <input type="checkbox"/> N/A				
Certified Food Protection Manager		<input checked="" type="checkbox"/>	0		
Employee Health .2652					
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	
Good Hygienic Practices .2652, .2653					
6	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT				
Proper eating, tasting, drinking or tobacco use		1	0.5	<input checked="" type="checkbox"/>	
7	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT				
No discharge from eyes, nose, and mouth		1	0.5	0	
Preventing Contamination by Hands .2652, .2653, .2655, .2656					
8	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT				
Hands clean & properly washed		<input checked="" type="checkbox"/>	2	0	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>
9	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> N/O				
No bare hand contact with RTE foods or pre-approved alternate procedure properly followed		4	2	0	
10	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A				
Handwashing sinks supplied & accessible		2	1	0	
Approved Source .2653, .2655					
11	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT				
Food obtained from approved source		2	1	0	
12	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A				
Food received at proper temperature		2	1	0	
13	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT				
Food in good condition, safe & unadulterated		2	1	0	
14	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A <input type="checkbox"/> N/O				
Required records available: shellstock tags, parasite destruction		2	1	0	
Protection from Contamination .2653, .2654					
15	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> N/O				
Food separated & protected		3	1.5	0	
16	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT				
Food-contact surfaces: cleaned & sanitized		3	1.5	0	
17	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT				
Proper disposition of returned, previously served, reconditioned & unsafe food		2	1	0	
Potentially Hazardous Food Time/Temperature .2653					
18	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> N/O				
Proper cooking time & temperatures		3	1.5	0	
19	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A <input checked="" type="checkbox"/> N/O				
Proper reheating procedures for hot holding		3	1.5	0	
20	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A <input checked="" type="checkbox"/> N/O				
Proper cooling time & temperatures		3	1.5	0	
21	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A <input checked="" type="checkbox"/> N/O				
Proper hot holding temperatures		3	1.5	0	
22	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A <input checked="" type="checkbox"/> N/O				
Proper cold holding temperatures		3	1.5	0	
23	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A <input checked="" type="checkbox"/> N/O				
Proper date marking & disposition		3	1.5	0	
24	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A <input checked="" type="checkbox"/> N/O				
Time as a Public Health Control; procedures & records		3	1.5	0	
Consumer Advisory .2653					
25	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A				
Consumer advisory provided for raw/undercooked foods		1	0.5	0	
Highly Susceptible Populations .2653					
26	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A				
Pasteurized foods used; prohibited foods not offered		3	1.5	0	
Chemical .2653, .2657					
27	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A				
Food additives: approved & properly used		1	0.5	0	
28	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A				
Toxic substances properly identified stored & used		2	1	0	
Conformance with Approved Procedures .2653, .2654, .2658					
29	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A				
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
Safe Food and Water .2653, .2655, .2658					
30	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A				
Pasteurized eggs used where required		1	0.5	0	
31	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT				
Water and ice from approved source		2	1	0	
32	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A				
Variance obtained for specialized processing methods		2	1	0	
Food Temperature Control .2653, .2654					
33	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT				
Proper cooling methods used; adequate equipment for temperature control		1	0.5	0	
34	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A <input checked="" type="checkbox"/> N/O				
Plant food properly cooked for hot holding		1	0.5	0	
35	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A <input checked="" type="checkbox"/> N/O				
Approved thawing methods used		1	0.5	0	
36	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT				
Thermometers provided & accurate		1	0.5	0	
Food Identification .2653					
37	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT				
Food properly labeled: original container		2	1	0	
Prevention of Food Contamination .2652, .2653, .2654, .2656, .2657					
38	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT				
Insects & rodents not present; no unauthorized animals		2	1	0	
39	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT				
Contamination prevented during food preparation, storage & display		2	1	0	
40	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT				
Personal cleanliness		1	0.5	0	
41	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT				
Wiping cloths: properly used & stored		1	0.5	0	
42	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A				
Washing fruits & vegetables		1	0.5	0	
Proper Use of Utensils .2653, .2654					
43	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT				
In-use utensils: properly stored		1	0.5	0	
44	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT				
Utensils, equipment & linens: properly stored, dried & handled		1	0.5	0	
45	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A				
Single-use & single-service articles: properly stored & used		1	0.5	<input checked="" type="checkbox"/>	
46	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT				
Gloves used properly		1	0.5	0	
Utensils and Equipment .2653, .2654, .2663					
47	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT				
Equipment, food & non-food contact surfaces approved, cleanable, properly designed, constructed & used		1	0.5	0	
48	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT				
Warewashing facilities: installed, maintained & used; test strips		1	0.5	0	
49	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT				
Non-food contact surfaces clean		1	0.5	0	
Physical Facilities .2654, .2655, .2656					
50	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A				
Hot & cold water available; adequate pressure		1	0.5	0	
51	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A				
Plumbing installed; proper backflow devices		2	1	<input checked="" type="checkbox"/>	
52	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT				
Sewage & wastewater properly disposed		2	1	0	
53	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A				
Toilet facilities: properly constructed, supplied & cleaned		1	0.5	0	
54	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A				
Garbage & refuse properly disposed; facilities maintained		1	0.5	<input checked="" type="checkbox"/>	
55	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A				
Physical facilities installed, maintained & clean		<input checked="" type="checkbox"/>	0.5	0	<input checked="" type="checkbox"/>
56	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A				
Meets ventilation & lighting requirements; designated areas used		1	0.5	<input checked="" type="checkbox"/>	
TOTAL DEDUCTIONS:					6



Comment Addendum to Food Establishment Inspection Report

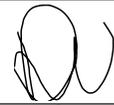
Establishment Name: BOJANGLES 552
 Location Address: 585 NORTHWEST BLVD
 City: WINSTON SALEM State: NC
 County: 34 Forsyth Zip: 27104
 Wastewater System: Municipal/Community On-Site System
 Water Supply: Municipal/Community On-Site System
 Permittee: BOJANGLES RESTAURANTS INC
 Telephone: (336) 722-4282

Establishment ID: 3034011041
 Inspection Re-Inspection Date: 05/14/2024
 Educational Visit Status Code: A
 Comment Addendum Attached? Category #: III
 Email 1: 552@stores.bojangles.com
 Email 2: irisfulton@stores.bojangles.com
 Email 3:

Temperature Observations

Item/Location	Temp	Item/Location	Temp	Item/Location	Temp
mac n cheese /walk in cooler	39				
ambinet/walk in cooler	37				
cheese /make top	41				
tomatoes /make top	40				
egg product /reach in cooler	39				
egg product /cold hold	41				
supremes /cook to	207				
hot water /3 comp sink	130				
quat sanitizer /3 comp sink - ppm	200				
ambinet/chicken cooler	40				

Person in Charge (Print & Sign): *First* Dom *Last* woodruff
 Regulatory Authority (Print & Sign): *First* Shannon *Last* Craver




REHS ID: 2848 - Craver, Shannon Verification Dates: Priority: _____ Priority Foundation: _____ Core: _____
 REHS Contact Phone Number: (743) 236-0012 Authorize final report to be received via Email: 

Comment Addendum to Inspection Report

Establishment Name: BOJANGLES 552

Establishment ID: 3034011041

Date: 05/14/2024 **Time In:** 1:40 PM **Time Out:** 3:50 PM

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.

- 2 2-102.12 (A) Certified Food Protection Manager (C). The PIC is not a certified food protection manager.
**(A) The PIC shall be a certified food protection manager who has shown proficiency of required information through passing a test that is part of an accredited program.

- 6 2-401.11 Eating, Drinking, or Using Tobacco (C). Employee drinks were on the top shelf above the steam table. This is not a good place due to the possibility of missing the shelf and the drink spilling, contaminating the food below.
**(A) An employee shall eat, drink, or use any form of tobacco only in designated areas where the contamination of exposed food; clean equipment, utensils, and linens; unwrapped single-service and single-use articles; or other items needing protection can not result.

- 8 2-301.14 When to Wash (P). Several employees were observed not washing hands before putting on gloves. Also observed food employees touching hair and then handling food handling utensils and handling the paper that goes into the boxes where food sits.
**Food employees shall clean their hands and exposed portions of their arms as specified under § 2-301.12 immediately before engaging in food preparation including working with exposed food, clean equipment and utensils, and unwrapped single-service and single-use articles and: (A) After touching bare human body parts other than clean hands and clean, exposed portions of arms; (B) After using the toilet room; (C) After caring for or handling service animals or aquatic animals as specified in 2-403.11(B); (D) Except as specified in 2-401.11(B), after coughing, sneezing, using a handkerchief or disposable tissue, using tobacco, eating, or drinking; (E) After handling soiled equipment or utensils; (F) During food preparation, as often as necessary to remove soil and contamination and to prevent cross contamination when changing tasks; (G) When switching between working with raw food and working with ready-to-eat food; (H) Before donning gloves to initiate a task that involves working with FOOD; and (I) After engaging in other activities that contaminate the hands.
CDI: Spoke with Person In Charge (PIC) about when all employees need to wash their hands.

- 45 4-903.11 (A) and (C) Equipment, Utensils, Linens and Single-Service and Single-Use Articles - Storing (C). Cups are at the drive thru window and the front counter without their protective covering.
**(C) Single-service and single-use articles shall be stored as specified under (A) of this section and shall be kept in the original protective package or stored by using other means that afford protection from contamination until used.

- 51 5-205.15 System Maintained in Good Repair (C). The faucet is leaking in the womens bathroom and the left faucet at the 3 compartment sink is leaking.
**A Plumbing system shall be: (B) maintained in good repair.

- 54 5-501.113 Covering Receptacles (C). The lid to the dumpster was open.
**Receptacles and waste handling units for refuse, recyclables, and returnables shall be kept covered: (B) with tight fitting lids or doors if kept outside the food establishment.

- 55 6-501.11 Repairing - Premises, Structures, Attachments, and Fixtures - Methods (C) -There are broken and damaged tiles and low grout in the walk in freezer that needs to be repaired. -There are wing nuts on bolts on the chicken walk in cooler door that need to be removed and repaired properly. - There is also low grout at the biscuit rack that needs to be refilled. - Low grout throughout the facility and missing tiles.
**Physical facilities shall be maintained in good repair.

6-501.12 Cleaning, Frequency and Restrictions (C). The floors need to be cleaned under the breading station, the fryers and behind the drink station at the drive thru window, and under large pieces of equipment. The customer self service cabinet needs to be cleaned as well.
**(A) Physical facilities shall be cleaned as often as necessary to keep them clean.

- 56 6-305.11 Designation - Dressing Areas and Lockers (C).Several employee phones were found sitting on the cutting boards and prep tables in the kitchen.
**(B) Lockers or other suitable facilities shall be provided for the orderly storage of employees' clothing and other possessions.