

Food Establishment Inspection Report

Score: 94

Establishment Name: MOE'S SOUTHWEST GRILL

Establishment ID: 3034012822

Location Address: 206 SOUTH STRATFORD RD

City: WINSTON SALEM State: North Carolina

Zip: 27103 County: 34 Forsyth

Permittee: IMAGINE DINING LLC

Telephone: (336) 724-5920

Inspection Re-Inspection Educational Visit

Wastewater System:

Municipal/Community On-Site System

Water Supply:

Municipal/Community On-Site Supply

Date: 05/16/2024 Status Code: A

Time In: 10:40 AM Time Out: 2:05 PM

Category#: IV

FDA Establishment Type: Full-Service Restaurant

No. of Risk Factor/Intervention Violations: 5

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/N/A				
PIC Present, demonstrates knowledge, & performs duties		1	0		
2	<input checked="" type="checkbox"/> OUT/N/A				
Certified Food Protection Manager		1	0		
Employee Health .2652					
3	<input checked="" type="checkbox"/> IN <input checked="" type="checkbox"/> OUT				
Management, food & conditional employee; knowledge, responsibilities & reporting		2	1	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
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"/> OUT				
Proper eating, tasting, drinking or tobacco use		1	0.5	0	
7	<input checked="" 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"/> OUT				
Hands clean & properly washed		4	2	0	
9	<input checked="" type="checkbox"/> OUT/N/A/N/O				
No bare hand contact with RTE foods or pre-approved alternate procedure properly followed		4	2	0	
10	<input checked="" type="checkbox"/> OUT/N/A				
Handwashing sinks supplied & accessible		2	1	0	
Approved Source .2653, .2655					
11	<input checked="" type="checkbox"/> OUT				
Food obtained from approved source		2	1	0	
12	<input checked="" type="checkbox"/> IN <input checked="" type="checkbox"/> OUT				
Food received at proper temperature		2	1	0	
13	<input checked="" type="checkbox"/> OUT				
Food in good condition, safe & unadulterated		2	1	0	
14	<input checked="" type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A/N/O				
Required records available: shellstock tags, parasite destruction		2	1	0	
Protection from Contamination .2653, .2654					
15	<input checked="" type="checkbox"/> OUT/N/A/N/O				
Food separated & protected		3	1.5	0	
16	<input checked="" type="checkbox"/> IN <input checked="" type="checkbox"/> OUT				
Food-contact surfaces: cleaned & sanitized		3	<input checked="" type="checkbox"/>	0	<input checked="" type="checkbox"/>
17	<input checked="" 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 checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A/N/O				
Proper cooking time & temperatures		3	1.5	0	
19	<input checked="" type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A/N/O				
Proper reheating procedures for hot holding		3	1.5	0	
20	<input checked="" type="checkbox"/> OUT/N/A/N/O				
Proper cooling time & temperatures		3	1.5	0	
21	<input checked="" type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A/N/O				
Proper hot holding temperatures		<input checked="" type="checkbox"/>	1.5	0	<input checked="" type="checkbox"/>
22	<input checked="" type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A/N/O				
Proper cold holding temperatures		3	1.5	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
23	<input checked="" type="checkbox"/> OUT/N/A/N/O				
Proper date marking & disposition		3	1.5	0	
24	<input checked="" type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A/N/O				
Time as a Public Health Control; procedures & records		3	1.5	0	
Consumer Advisory .2653					
25	<input checked="" type="checkbox"/> IN <input checked="" 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 checked="" 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 checked="" 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 checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A				
Toxic substances properly identified stored & used		2	1	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Conformance with Approved Procedures .2653, .2654, .2658					
29	<input checked="" type="checkbox"/> IN <input checked="" 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 checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A				
Pasteurized eggs used where required		1	0.5	0	
31	<input checked="" type="checkbox"/> OUT				
Water and ice from approved source		2	1	0	
32	<input checked="" type="checkbox"/> IN <input checked="" 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 checked="" type="checkbox"/> OUT				
Proper cooling methods used; adequate equipment for temperature control		1	<input checked="" type="checkbox"/>	0	<input checked="" type="checkbox"/>
34	<input checked="" type="checkbox"/> OUT <input checked="" 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"/> OUT <input checked="" type="checkbox"/> N/A <input checked="" type="checkbox"/> N/O				
Approved thawing methods used		1	0.5	0	
36	<input checked="" type="checkbox"/> OUT				
Thermometers provided & accurate		1	0.5	0	
Food Identification .2653					
37	<input checked="" 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"/> OUT				
Insects & rodents not present; no unauthorized animals		2	1	0	
39	<input checked="" type="checkbox"/> OUT				
Contamination prevented during food preparation, storage & display		2	1	0	
40	<input checked="" type="checkbox"/> OUT				
Personal cleanliness		1	0.5	0	
41	<input checked="" type="checkbox"/> OUT				
Wiping cloths: properly used & stored		1	0.5	0	
42	<input checked="" 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"/> OUT				
In-use utensils: properly stored		1	0.5	0	
44	<input checked="" type="checkbox"/> IN <input checked="" type="checkbox"/> OUT				
Utensils, equipment & linens: properly stored, dried & handled		<input checked="" type="checkbox"/>	0.5	0	<input checked="" type="checkbox"/>
45	<input checked="" type="checkbox"/> OUT				
Single-use & single-service articles: properly stored & used		1	0.5	0	
46	<input checked="" type="checkbox"/> OUT				
Gloves used properly		1	0.5	0	
Utensils and Equipment .2653, .2654, .2663					
47	<input checked="" type="checkbox"/> IN <input checked="" type="checkbox"/> OUT				
Equipment, food & non-food contact surfaces approved, cleanable, properly designed, constructed & used		1	0.5	<input checked="" type="checkbox"/>	
48	<input checked="" type="checkbox"/> OUT				
Warewashing facilities: installed, maintained & used; test strips		1	0.5	0	
49	<input checked="" type="checkbox"/> OUT				
Non-food contact surfaces clean		1	0.5	0	
Physical Facilities .2654, .2655, .2656					
50	<input checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A				
Hot & cold water available; adequate pressure		1	0.5	0	
51	<input checked="" type="checkbox"/> OUT				
Plumbing installed; proper backflow devices		2	1	0	
52	<input checked="" type="checkbox"/> OUT				
Sewage & wastewater properly disposed		2	1	0	
53	<input checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A				
Toilet facilities: properly constructed, supplied & cleaned		1	0.5	0	
54	<input checked="" type="checkbox"/> OUT				
Garbage & refuse properly disposed; facilities maintained		1	0.5	0	
55	<input checked="" type="checkbox"/> OUT				
Physical facilities installed, maintained & clean		1	0.5	0	
56	<input checked="" type="checkbox"/> OUT				
Meets ventilation & lighting requirements; designated areas used		1	0.5	0	
TOTAL DEDUCTIONS:					6



Comment Addendum to Food Establishment Inspection Report

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City: WINSTON SALEM **State:** NC
County: 34 Forsyth **Zip:** 27103
Wastewater System: Municipal/Community On-Site System
Water Supply: Municipal/Community On-Site System
Permittee: IMAGINE DINING LLC
Telephone: (336) 724-5920

Establishment ID: 3034012822
 Inspection Re-Inspection **Date:** 05/16/2024
 Educational Visit **Status Code:** A
Comment Addendum Attached? **Category #:** IV
Email 1: 260@moes1980.com
Email 2: _____
Email 3: _____

Temperature Observations

Item/Location	Temp	Item/Location	Temp	Item/Location	Temp
veggie wash/prep sink	7.81 ml/l	hot corn salsa/hot holding cabinet	166		
diced tomatoes @ 10:52/during prep	56	black beans/hot holding cabinet BOH	158		
diced tomatoes @ 11:30/walk in cooler (1 large container)	55	rice/final cook rice	208		
diced tomatoes @ 12:26/walk in cooler (3 containers)	56	hot water/3-comp sink	145		
lettuce/front service	36	quat ppm/3-comp sink corrected	200		
adobo chx/front service	138	tofu/walk in cooler	39		
black beans/front service	177	diced tomato/walk in cooler	41		
pintos/front service	175	pico/walk in cooler	42		
queso/front service	146				
corn salsa/low unit	40				
quat ppm/wiping bucket	200				
pico/front make unit	45				
lettuce/front make unit	39				
pico/make unit inside	40				
lettuce/make unit inside	39				
black beans/hot hold cabinet	147				
rice/hot hold cabinet	143				
seasoned rice/hot hold cabinet	163				
adobo chx (3+)/hot hold cabinet	100				
white meat chx/hot hold cabinet	120				

Person in Charge (Print & Sign): *First* Cordezmon *Last* James
Regulatory Authority (Print & Sign): *First* Leslie *Last* Easter

Cordezmon

Leslie Easter

REHS ID: 1908 - Easter, Leslie **Verification Dates:** _____ **Priority:** _____ **Priority Foundation:** _____ **Core:** _____

REHS Contact Phone Number: (336) 703-3138 **Authorize final report to be received via Email:** _____



Comment Addendum to Inspection Report

Establishment Name: MOE'S SOUTHWEST GRILL

Establishment ID: 3034012822

Date: 05/16/2024 **Time In:** 10:40 AM **Time Out:** 2:05 PM

Certifications

Name	Certificate #	Type	Issue Date	Expiration Date
Cordezman James		Food Service		09/17/2024

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.

- 3 2-201.11 (A), (B), (C), and (E) Responsibility of Permit Holder, Person in Charge and Conditional Employees (P) Establishment did not have an updated employee health policy that includes both types of salmonella (typhi/nontyphoidal). The permit holder shall require food employees and conditional employees to report to the person in charge information about their health and activities as they relate to diseases that are transmissible through food. CDI: An updated employee health policy was provided by REHS.
- 16 4-501.114 Manual and Mechanical Warewashing Equipment, Chemical Sanitization - Temperature, pH, Concentration and Hardness (P). Quat in sanitize compartment of 3-comp sink registered 0 ppm. Food contact surfaces shall be sanitized in proper strength sanitizer. CDI - sanitizer remade in 3-comp sink, but this time exceeded 400ppm. Food employee drained 1/2 the compartment and diluted with fresh cold water to a strength of 200 ppm.
4-601.11 (A) Equipment, Food-Contact Surfaces, Nonfood Contact Surfaces, and Utensils (Pf). Three spatulas (front service area) in pan were soiled with food debris, but stored with clean utensils. Prep sink vat soiled and has direct contact with food as observed when washing tomatoes. Nemco slicer for peppers & onions had food debris near blade. CDI - spatulas and slicer returned to warewashing area and washed during inspection. PIC instructed to have prep sink cleaned prior to using again.
- 21 3-501.16 (A) (1) Time / Temperature Control for Safety Food, Hot and Cold Holding (P) Repeat. All containers of chicken in the hot holding cabinet measured at 92-126F; PIC stated they were cooked this morning, approximately 10:24am. Time/temperature control for safety food shall be maintained at 135F or above. All containers of chicken was reheated to 165 or above, and placed back on hot holding.
- 22 3-501.16 (A) (2) and (B) Time / Temperature Control for Safety Food, Hot and Cold Holding (P). Four salsas on salsa bar were above 41F. Ambient of unit was 38F. Cold TCS foods shall be held at 41F or below. CDI - salsas removed and placed in walk in cooler to cool.
- 28 7-201.11 Separation - Storage (P). Three chemical spray bottles resting on the splashguard of the dirty end of 3-comp sink. Nozzles were directed at soiled dishes. Poisonous or toxic materials shall be stored so they cannot contaminate food, equipment, utensils, linens, and single-service and single-use articles. CDI - PIC located bottles with other chemical storage.
- 33 3-501.15 Cooling Methods (Pf). Very large bin of diced tomatoes prepared this morning (10:20am) was covered with plastic lid. Temperature of tomatoes did not move in over 1 hour, even after being placed into 3 smaller containers. When placed in cooling or cold holding equipment, food containers in which food is being cooled shall be: (1) Arranged in the equipment to provide maximum heat transfer through the container walls; and (2) Loosely covered, or uncovered during the cooling period to facilitate heat transfer from the surface of the food. CDI: PIC had downsized large batch into 3 smaller containers (still deep). REHS vented containers and rearranged on cart in WIC to maximize air flow around containers. After another hour, 1:45pm, three containers of tomatoes still at 56F. Employees instructed & observed to spread tomatoes on sheet pans and return to walk in cooler with only 50 minutes remaining in cooling window. PIC to verify cooling temp.
- 44 4-901.11 Equipment and Utensils, Air-Drying Required- Repeat. Metal containers in back clean utensil storage on the clean equipment rack were stacked wet. Allow adequate time for air drying prior to stacking.
- 47 4-501.11 Good Repair and Proper Adjustment - Equipment - Repeat. Front make unit (cold) has broken gasket on right door and standing water in bottom of unit. Maintain equipment in good repair. Zero points due to recent remodel and overall improvement.

Additional Comments

Current guac recipe does not contain TCS ingredients.