

# Food Establishment Inspection Report

Score: 98

Establishment Name: HARRIS TEETER PRODUCE MKT

Establishment ID: 3034020604

Location Address: 150 GRANT HILL DRIVE

Inspection  Re-Inspection

City: WINSTON SALEM

State: NC

Date: 01 / 13 / 2020 Status Code: A

Zip: 27104 County: 34 Forsyth

Time In: 01 : 15  am  pm Time Out: 02 : 25  am  pm

Permittee: HARRIS TEETER INC

Total Time: 1 hr 10 minutes

Telephone: (336) 245-0467

Category #: II

Wastewater System:  Municipal/Community  On-Site System

FDA Establishment Type: Produce Department and Salad Bar

Water Supply:  Municipal/Community  On-Site Supply

No. of Risk Factor/Intervention Violations: 2

No. of Repeat Risk Factor/Intervention Violations: 0

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
<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 type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Management, employees knowledge; responsibilities & reporting	3	1	0	
3	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper use of reporting, restriction & exclusion	3	1	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	0	3	
<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 type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	No bare hand contact with RTE foods or pre-approved alternate procedure properly followed	3	1	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	1	0	
14	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food-contact surfaces: cleaned & sanitized	3	1	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 type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Proper cooking time & temperatures	3	1	0	
17	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Proper reheating procedures for hot holding	3	1	0	
18	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Proper cooling time & temperatures	3	1	0	
19	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Proper hot holding temperatures	3	1	0	
20	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper cold holding temperatures	3	1	0	
21	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper date marking & disposition	3	1	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 type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Consumer advisory provided for raw or undercooked foods	1	0	3	
<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	1	0	
<b>Chemical .2653, .2657</b>								
25	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Food additives: approved & properly used	1	0	3	
26	<input type="checkbox"/>	<input checked="" 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	N/O	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	0	3	
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	0	3	
<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	0	3	
32	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Plant food properly cooked for hot holding	1	0	3	
33	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Approved thawing methods used	1	0	3	
34	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Thermometers provided & accurate	1	0	3	
<b>Food Identification .2653</b>								
35	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food properly labeled: original container	2	1	0	
<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 type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Personal cleanliness	1	0	3	
39	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Wiping cloths: properly used & stored	1	0	3	
40	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Washing fruits & vegetables	1	0	3	
<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	0	3	
42	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Utensils, equipment & linens: properly stored, dried & handled	1	0	3	
43	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Single-use & single-service articles: properly stored & used	1	0	3	
44	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Gloves used properly	1	0	3	
<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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Warewashing facilities: installed, maintained, & used; test strips	1	0	3	
47	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Non-food contact surfaces clean	1	0	3	
<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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Plumbing installed; proper backflow devices	2	1	0	
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	0	3	
52	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Garbage & refuse properly disposed; facilities maintained	1	0	3	
53	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Physical facilities installed, maintained & clean	1	0	3	
54	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Meets ventilation & lighting requirements; designated areas used	1	0	3	
<b>Total Deductions:</b>					<b>2</b>			



# Comment Addendum to Food Establishment Inspection Report

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 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: HARRIS TEETER INC  
 Telephone: (336) 245-0467

Establishment ID: 3034020604  
 Inspection  Re-Inspection Date: 01/13/2020  
 Comment Addendum Attached?  Status Code: A  
 Water sample taken?  Yes  No Category #: II  
 Email 1:  
 Email 2:  
 Email 3:

## Temperature Observations

**Cold Holding Temperature is now 41 Degrees or less**

Item	Location	Temp	Item	Location	Temp	Item	Location	Temp
tomato bean	ice bath	37						
ambient air	retail cooler	36						
ambient air	walk-in cooler	38						
quat (ppm)	3-compartment sink	200						
quat (ppm)	bottle	200						
hot water	3-compartment sink	121						
ServSafe	Jeremy Jones 5-21-20	0						

## 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 2-201.11 (A), (B), (C), & (E) Responsibility of Permit Holder, Person in Charge, and Conditional Employees - P - Only employee working in produce department could not state any symptoms or illnesses that are required to be reported to the manager. Health policy is posted on board in department, but employees must have knowledge of the policy. CDI - Health policy requirements went over with manager. Employees need to either know all the "Big 5" symptoms and illnesses, or they need to where the health policy is located if it posted. ✓ Spell
- 26 7-201.11 Separation-Storage - P - Sanitizer spray bottle stored on prep table top of wrap station. Toxic chemicals shall not be stored where it can contaminate food or food-contact equipment. CDI - Bottle moved to bottom shelf. 0 pts.
- 38 2-402.11 Effectiveness-Hair Restraints - C - Employee re-boxed a 7 layer bin dip and was not wearing a hair restraint. Food employees (employees who prepare food) shall wear a hair restraint. 0 pts.

Lock Text



Person in Charge (Print & Sign): Jeremy *First* Jones *Last*

Regulatory Authority (Print & Sign): Andrew *First* Lee *Last*

REHS ID: 2544 - Lee, Andrew

Verification Required Date:     /     /    

REHS Contact Phone Number: ( 336 ) 703 - 3128



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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- 47 4-602.13 Nonfood Contact Surfaces - C - Fan guards in walk-in cooler are dusty, shelf under wrap station needs to be cleaned, and spray arm head at prep sink needs to be cleaned. Nonfood contact surfaces of equipment shall be cleaned at a frequency necessary to maintain them clean.



Spell



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Spell

