

Food Establishment Inspection Report

Score: 97.5

Establishment Name: CREEKSIDE TERRACE

Establishment ID: 3034012336

Location Address: 3895 OLD VINEYARD RD

☒ Inspection ☐ Re-Inspection

City: WINSTON SALEM

State: NC

Date: 09 / 14 / 2020 Status Code: A

Zip: 27104 County: 34 Forsyth

Time In: 09 : 45 ☒ am ☐ pm Time Out: 11 : 45 ☒ am ☐ pm

Permittee: PH CREEKSIDE LLC

Total Time: 2 hrs 0 minutes

Telephone: (336) 768-5350

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	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 type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Handwashing sinks supplied & accessible			2	1	<input checked="" type="checkbox"/>	<input checked="" 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 type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Food separated & protected			3	13	<input checked="" type="checkbox"/>	<input checked="" 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 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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper reheating procedures for hot holding			3	13	0	<input type="checkbox"/>
18	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper cooling time & temperatures			3	13	0	<input type="checkbox"/>
19	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Proper hot holding temperatures			3	13	<input checked="" type="checkbox"/>	<input checked="" 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 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	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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Contamination prevented during food preparation, storage & display			2	1	0	<input type="checkbox"/>
38	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Personal cleanliness			1	03	<input checked="" type="checkbox"/>	<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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input 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 type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Utensils, equipment & linens: properly stored, dried & handled			1	<input checked="" type="checkbox"/>	0	<input checked="" type="checkbox"/>
43	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Single-use & single-service articles: properly stored & used			1	<input checked="" type="checkbox"/>	0	<input checked="" 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 checked="" type="checkbox"/>
46	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Warewashing facilities: installed, maintained, & used; test strips			1	03	0	<input type="checkbox"/>
47	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Non-food contact surfaces clean			1	03	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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Plumbing installed; proper backflow devices			2	1	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	03	0	<input type="checkbox"/>
52	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Garbage & refuse properly disposed; facilities maintained			1	03	0	<input type="checkbox"/>
53	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Physical facilities installed, maintained & clean			1	03	<input checked="" type="checkbox"/>	<input 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: 2.5										



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

CR
Off



Comment Addendum to Food Establishment Inspection Report

Establishment Name: CREEKSIDE TERRACE

Location Address: 3895 OLD VINEYARD RD

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: PH CREEKSIDE LLC

Telephone: (336) 768-5350

Establishment ID: 3034012336

☒ Inspection ☐ Re-Inspection Date: 09/14/2020

Comment Addendum Attached? ☐ Status Code: A

Water sample taken? ☐ Yes ☒ No Category #: IV

Email 1: tim.carpenter@holidaytouch.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
sausage	cooling (since 9:45AM)	70	hot water	3-compartment sink	155	ServSafe	Mark Reinhalter 7-26-21	0
cole slaw	walk-in cooler	41	quat (ppm)	3-comp dispenser	200			
shrimp scampi	walk-in cooler	40	quat (ppm)	mop sink dispenser	200			
chicken	walk-in cooler	40	hot plate temp	dish machine	167			
turkey	walk-in cooler	40	meat loaf	final cook	185			
ham	walk-in cooler	41	sausage	cooling (@11:30AM)	51			
melon	cooling (since 9AM)	50	melon	cooling (@11:30AM)	44			
mashed	cambro	130	mashed	reheat	170-			

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 5-205.11 Using a Handwashing Sink-Operation and Maintenance - PF - Disposable cups partially blocking handsink. Handwashing sinks shall be used for employee handwashing and no other purpose. CDI - Cups moved out of sink. 0 pts
- 13 3-302.11 Packaged and Unpackaged Food-Separation, Packaging, and Segregation - P - Box of unwashed apples on speed rack above portioned cups of dressing. Unwashed produce and vegetables must not be stored above ready-to-eat foods. CDI - Box moved to bottom shelf. 0 pts
- 14 4-601.11 (A) Equipment, Food-Contact Surfaces, Nonfood-Contact Surfaces, and Utensils - P - 2 knives, 2 scoops, 1 mixing spoon, peeler, and 3 metal pans had food debris on them. Food-contact surfaces of equipment and utensils shall be cleaned to sight and touch. CDI - Items taken to warewashing area. // 4-602.11 Equipment Food-Contact Surfaces and Utensils-Frequency - C - Ice machine shield has moldy buildup. Ice machines shall be cleaned at a frequency specified by the manufacturer or as often to maintain it clean.

Lock
Text



Person in Charge (Print & Sign): Mark First Last Reinhalter

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

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.



Comment Addendum to Food Establishment Inspection Report

Establishment Name: CREEKSIDE TERRACE

Establishment ID: 3034012336

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.

- 19 3-501.16 (A)(1) Potentially Hazardous Food (Time/Temperature Control for Safety Food), Hot and Cold Holding - P - Mashed potatoes in cambro were 130-133F. Potentially hazardous foods in hot holding shall measure at least 135F. CDI - Mashed potatoes were reheated to 170F in steamer. 0 pts.
- 38 2-402.11 Effectiveness-Hair Restraints - C - Manager not wearing hair restraint. All food employees shall wear a hair restraint such as a cap or hair net. 0 pts.
- 42 4-901.11 Equipment and Utensils, Air-Drying Required - C - Repeat - At least 4 stacks of metal pans and plastic trays were stacked on top of each other and were still wet. Utensils and food-contact equipment must be air dried prior to stacking. Do not towel dry.
- 43 4-903.11 (A) and (C) Equipment, Utensils, Linens and Single-Service and Single-Use Articles-Storing - C - Wrap station is directly beside handwashing sink and splash guard is only 4-8 inches tall, not providing adequate protection to wrap station. Maintain 18 inches of separation between handwashing sinks and food preparation areas or single-use/single-service articles or install a splash guard that is taller and can adequately protect wrap station from hand washing splash. CDI - Wrap station moved to prep table. // Box of disposable lids on floor in storage room and box of disposable cups on floor at front of kitchen. Unopened sleeve of styrofoam cups stored partially in front handwashing sink. Single-use and single-service articles shall be stored at least 6 inches off the floor and in areas where they cannot become easily contaminated (in the handsink).
- 45 4-501.11 Good Repair and Proper Adjustment-Equipment - C - Repeat - Walk-in cooler door does not fully close with adequate seal. 5 cracked tray lids found in lid dispenser. 2 cracks present in prep sink basin. Equipment shall be maintained in good repair. Repair/replace listed equipment. Weld prep sink cracks shut and polish them smooth. 0 pts.
- 53 6-501.12 Cleaning, Frequency and Restrictions - C - Floor cleaning necessary behind fryer. Floors, walls and ceilings shall be cleaned at a frequency necessary to maintain them clean. 0 pts.



Comment Addendum to Food Establishment Inspection Report

Establishment Name: CREEKSIDE TERRACE

Establishment ID: 3034012336

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.

✓
Spell



Comment Addendum to Food Establishment Inspection Report

Establishment Name: CREEKSIDE TERRACE

Establishment ID: 3034012336

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.

✓
Spell



Comment Addendum to Food Establishment Inspection Report

Establishment Name: CREEKSIDE TERRACE

Establishment ID: 3034012336

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.

✓
Spell

