۲	-ood Establishment Inspection Report Score: 96																	
Es	Stablishment Name: BROOKSTONE TERRACE Establishment ID: 3034160008																	
					ress: 4430 CLINARD RD					_								
City: CLEMMONS State: NC									Date: <u>Ø 8</u> / <u>1 5</u> / <u>2 Ø 1 6</u> Status Code: A									
Zii	o:	270	)12	:	County: 34 Forsyth				Time In: $09:45^{\otimes}$ am $000:45^{\otimes}$ Time Out: $12:45^{\otimes}$ pm									
•		nitt			BROOKSTONE TERRACE INC				Total Time: 3 hrs 0 minutes									
					(336) 766-5000					C	ate	goı	ry #: _IV				_	
						□On Si	ita Sv	ıcta	m	FI	DΑ	Es	tablishment Type: Nursing Home					
	No. of Risk Factor/Intervention Violations: 3																	
/\	Vater Supply: ⊠Municipal/Community □ On-Site Supply No. of Repeat Risk Factor/Intervention Violations:																	
F	Foodborne Illness Risk Factors and Public Health Interventions Good Retail Practices																	
	Risk factors: Contributing factors that increase the chance of developing foodborne illness.  Public Health Interventions: Control measures to prevent foodborne illness or injury.  Good Retail Practices: Preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.											ls,						
_				N/O	Compliance Status		DI R V	rR —	IN	OUT	N/A	N/O	Compliance Status		001	$\overline{}$	CDI	R VR
S		rvis		12	.2652	1 1	-1			Food	$\perp$							
1	X				PIC Present; Demonstration-Certification by accredited program and perform duties	2 0 [		<b>□</b> 28	×				Pasteurized eggs used where required		1 0.5	0		
E		oye	е Не	ealth	.2652			29	×				Water and ice from approved source	[:	2 1	0		
2	×			Ш	Management, employees knowledge; responsibilities & reporting	3 1.5 0		30			X		Variance obtained for specialized processing methods	[	1 0.5	0		
3	×			Ш	Proper use of reporting, restriction & exclusion	3 1.5 0		_ F	ood	Ten	pera		e Control .2653, .2654					
			gier	ic Pr	ractices .2652, .2653		اصلح	31	X				Proper cooling methods used; adequate equipment for temperature control		1 0.5	0		
4	X			$\vdash$	Proper eating, tasting, drinking, or tobacco use	2 1 0		32	X				Plant food properly cooked for hot holding	[·	1 0.5	0		
5	X	ntin	- C	onto	No discharge from eyes, nose or mouth	1 0.5 0		33				X	Approved thawing methods used		1 0.5	0		
6	X		ly C	Untai	mination by Hands .2652, .2653, .2655, .2656 Hands clean & properly washed	4 2 0	اصاد	34		×			Thermometers provided & accurate		1 🔀	0	X	
7	X		П	H	No bare hand contact with RTE foods or pre-	3 1.5 0		-  -   -	ood	Ider	ntific	atio	n .2653					
8		×			approved alternate procedure properly followed			35		X			Food properly labeled: original container		2 1	×		
			1 50	ource	Handwashing sinks supplied & accessible 2.2653, .2655				_	_	n of	Foc	d Contamination .2652, .2653, .2654, .2656 Insects & rodents not present; no unauthorize	d				
9	X		1 30	uicc	Food obtained from approved source	2 1 0		□l <del> </del> —	X	+			animals	Ŀ	-	0		
10				×	Food received at proper temperature	2 1 0		37	×				Contamination prevented during food preparation, storage & display		2 1	0		
11	_	×		$\vdash$	Food in good condition, safe & unadulterated	2 🗶 0 🔰		38	×				Personal cleanliness		1 0.5	0		
12			X	H	Required records available: shellstock tags,	210		39	X				Wiping cloths: properly used & stored		1 0.5	0		
_		ctio			parasite destruction Contamination .2653, .2654		_	40	×				Washing fruits & vegetables		1 0.5	0		
13	X				Food separated & protected	3 1.5 0		_ F	rop	er Us	se of	f <b>Ut</b> e	ensils .2653, .2654					
14	X			$\Box$	Food-contact surfaces: cleaned & sanitized	3 1.5 0		41	×				In-use utensils: properly stored			0		
15	X			$\Box$	Proper disposition of returned, previously served, reconditioned, & unsafe food	2 1 0	5 0 1	42		X			Utensils, equipment & linens: properly stored, dried & handled		1 🔀	0	X	
		ntial	ly H	azaro	dous Food Time/Temperature .2653			43	×				Single-use & single-service articles: properly stored & used		1 0.5	0		
16	×				Proper cooking time & temperatures	3 1.5 0		□ 44	X				Gloves used properly		1 0.5	0		
17				×	Proper reheating procedures for hot holding	3 1.5 0			Iten	sils a	nd E	Equi	pment .2653, .2654, .2663 Equipment, food & non-food contact surfaces					
18				×	Proper cooling time & temperatures	3 1.5 0		<u> </u>		×			approved, cleanable, properly designed, constructed, & used		2 🗶	0		
19				×	Proper hot holding temperatures	3 1.5 0		J 46	×				Warewashing facilities: installed, maintained, used; test strips	& [	1 0.5	0		
20	×				Proper cold holding temperatures	3 1.5 0	100	<b> </b>   47	$\vdash$	×			Non-food contact surfaces clean		1 0.5	X	П	
21		×		H	Proper date marking & disposition	3 1.5 <b>X</b> >		$\dashv$ $\sqcup$	I = I	ical	Facil	lities						
22	П	П	×	$\exists$	Time as a public health control: procedures &	210		48	×				Hot & cold water available; adequate pressure	e [	2 1	0		
	Cons	ume		dvisc	records ory .2653		-1-1-	49		X			Plumbing installed; proper backflow devices		2 🗶	0		
23			×		Consumer advisory provided for raw or undercooked foods	1 0.5 0		□   <sub>50</sub>	×				Sewage & waste water properly disposed		2 1	0		
H		ly Sι	ISC	ptibl	le Populations .2653			=	×	+			Toilet facilities: properly constructed, supplied & cleaned		1 0.5	0		
24	×			Ш	Pasteurized foods used; prohibited foods not offered	3 1.5 0		╝					Garbage & refuse properly disposed; facilities		1 0.5	X		
	Chen	nica			.2653, .2657 Food additives: approved & properly used	1 65 6				+-			maintained  Physical facilities installed, maintained & clea		1 0.5			
	X			$\vdash$	Toxic substances properly identified stored. & used	210	-    - -    -			+			Meets ventilation & lighting requirements;	.	1 6.			
/ C					LI ONIC SUPSIGNICES DIODENY (DENNIEU SIDIEU, & DSEO	11 4 11 1 11 11 11 11	111 111	11134	احان	11 1			desimaded and a confidence of the confidence of		I HOUSE	at O II	11	1 10 1

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Conformance with Approved Procedures .2653, .2654, .2658

Compliance with variance, specialized process, reduced oxygen packing criteria or HACCP plan



**Total Deductions:** 

E	stablishme	nt Name: BROOKSTO	NE TERR	RACE		Establishment ID: 3034160008						
	Location A	ddress: 4430 CLINARD	RD			Inspection  □ Re-Inspection  □ Date: 08/15/2016						
	City: CLEMI	MONS		St	tate: <u>NC</u>	Comment Addendun	n Attached?	Status Code:	Α			
	County: 34			Zip:_ <sup>27012</sup>				Category #: IV				
		System: 🛛 Municipal/Comm				Email 1: SHERRY_DUBE@YAHOO.COM Email 2: Email 3:						
	Water Supply	/:   Municipal/Comm  BROOKSTONE TERRA		On-Site System								
		(336) 766-5000	OL IIIO									
ſ	Тејерноне	. (666) 166 666		Tomp	Observations							
Ļ	tem	Location	Temp		Location	Temp	Item	Location	Temp			
	ServSafe	Kevin Burns Exp.	00	Potatoes	Final cook	200						
	Hot water	Handwash sink	105	Chicken	Final cook	184						
	Hot water	3-comp sink	143	Rice	Final cook	199						
	Sanitizer	3-comp sink quat ppm	300									
	Lettuce	Upright cooler	40									
	Refried beans	Upright cooler	37									
-	Milk	Upright cooler	43									
-	Beef	Upright cooler	43									
1	7-27-16, th	Safe, Unadulterated an ne celery showed signs d shall be discarded or	of spoi	lage. PIC stat	ed that he did	l not plan on using t	he celery. A food	for good quality that is unsafe c	expired on or			
:1	of mozzare	Ready-To-Eat Potentia ela cheese (low moistu ay of preparation or dis	ire) was	not date mar	ked in the upr	ight cooler. Potentia	ally hazardous foo					
P	erson in Char	rge (Print & Sign): <sup>Jea</sup>	-	irst .	La Eastwood	ast 	Jean C.C	Zastivo	<del>o c</del> b			
R	egulatory Aut	thority (Print & Sign):	<i>F</i> ayson Ho	irst odge	La Josh Jordan	ast Pr	Jean C. C.	ge Grang	ALKEN.			

REHS ID: 2554 - Hodge, Grayson

Verification Required Date: <u>Ø 8</u> / <u>2 2</u> / <u>2 Ø 1 6</u>

REHS Contact Phone Number: (336)703 - 3383





Establishment Name: BROOKSTONE TERRACE Establishment ID: 3034160008

Observations	and	Corrective	Actions
Obselvations.	anu	COHECHVE	ACHORS

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

4-203.11 Temperature Measuring Devices, Food-Accuracy - PF - One food thermometer read 5F above a calibrated thermometer. Food temperature measuring devices shall be accurate to +/- 2F in the intended range of use. CDI - The thermometer was calibrated to read 5F less.// 4-502.11 (B) Good Repair and Calibration - PF - The digital thin-probed thermometer was not functioning. Thermometers shall be calibrated and working according to the manufacturers instructions. Replace battery or repair. Verification required by 8-22-16, contact Grayson Hodge at 336-703-3383 or hodgega@forsyth.cc.

35 3-302.12 Food Storage Containers Identified with Common Name of Food - C - 0 pts - A few dressing and condiment bottles were not labeled. Foods removed from their original packaging shall be labeled with the common name of the food. Label.

- 42 4-903.11 (A), (B) and (D) Equipment, Utensils, Linens and Single-Service and Single-Use Articles-Storing C Several clean stacks of plates and bowls were not inverted to protect from dust and other contaminates. Equipment and utensils shall be stored to prevent contamination (covered or inverted). CDI Stacks inverted.// 4-901.11 Equipment and Utensils, Air-Drying Required C 5 stacks of bowls, baking sheets, and pans were wet stacked. Equipment and utensils shall be fully air dried before storing. Allow utensils and equipment to air dry.
- 4-501.11 Good Repair and Proper Adjustment-Equipment C The food processor used for purees is damaged along the casing and blade. Equipment shall be maintained in good repair. Repair or replace.// 4-502.11 (A) and (C) Good Repair and Calibration-Utensils and Temperature and Pressure Measuring Devices C The wash temperature gauge of the dish machine is not functioning properly. Temperature measuring devices shall be maintained in good repair. Repair.
- 4-602.13 Nonfood Contact Surfaces C 0 pts Cleaning needed on the backside of the ice machine and around the outside of the dish machine. Nonfood contact surfaces of equipment shall be kept clean. Clean frequently.
- 5-205.15 System Maintained in Good Repair C 0 pts Drip leak at the faucet of the prep sink. Plumbing systems shall be maintained in good repair. Repair.
- 52 5-501.15 Outside Receptacles C 0 pts One lid was opened on the cardboard dumpster outside. Doors and lids shall be closed when not in use. Close lid.





Establishment Name: BROOKSTONE TERRACE Establishment ID: 3034160008

Observations and Corrective Actions
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Establishment Name: BROOKSTONE TERRACE Establishment ID: 3034160008

## **Observations and Corrective Actions**

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Establishment Name: BROOKSTONE TERRACE Establishment ID: 3034160008

### **Observations and Corrective Actions**

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