-ood Establishment Inspection Report Scol												re:	8	<u> 55</u>						
Establishment Name: MEMORY CARE OF THE TRIAD Establishment ID: 3034160003																				
ocation Address: 413 N MAIN ST										Inspection ☐ Re-Inspection										
City: KERNERSVILLE State: NC									Date: 07 / 20 / 2015 Status Code: A											
Zip: 27284 County: 34 Forsyth								Time In: $\underline{10} : \underline{50} \overset{\otimes}{\bigcirc} \overset{am}{\bigcirc}$ Time Out: $\underline{02} : \underline{00} \overset{\bigcirc}{\otimes} \overset{am}{\bigcirc}$												
•							Total Time: 3 hrs 10 minutes													
	Permittee: BRADFORD VILLAGE EAST, LLC										Category #: IV									
	elephone: (336) 993-4696											stablishment Type: Nursing Home				-				
٧a	st	ew	ate	er S	System: 🛛 Municipal/Community [	$\square$ On-Site Sys	ster	n				Risk Factor/Intervention Violation	5					—		
Water Supply:   Municipal/Community □ On-Site Supply  No. of Repeat Risk Factor/Intervention Violations: 3																				
•															=					
	Foodborne Illness Risk Factors and Public Health Interventions Risk factors: Contributing factors that increase the chance of developing foodborne illness.										Good Retail Practices  Good Retail Practices: Preventative measures to control the addition of pathogens, chemicals,									
Public Health Interventions: Control measures to prevent foodborne illness or injury.								and physical objects into foods.												
	IN	TUC	N/A	N/O	Compliance Status	OUT CDI R VR		IN	OUT	N/A	N/O	Compliance Status		OUT	ī	CDI	R	VR		
$\overline{}$	ıper				.2652 PIC Present; Demonstration-Certification by				_	d an	d W	,,		Ŧ						
					accredited program and perform duties	2 0	╌	×	-			Pasteurized eggs used where required		1 0.5	0			$\Box$		
$\overline{}$		_	e He	alth	.2652		29	X				Water and ice from approved source		2 1	0					
+	X				Management, employees knowledge; responsibilities & reporting	3 1.5 0	30			X		Variance obtained for specialized processing methods		1 0.5	0					
_	×				Proper use of reporting, restriction & exclusion	3 1.5 0	F	ood	Ten	nper	atur	e Control .2653, .2654								
$\overline{}$	т		gien	ic Pr	ractices .2652, .2653		31	X				Proper cooling methods used; adequate equipment for temperature control	Ľ	0.5	0					
+	-				Proper eating, tasting, drinking, or tobacco use	2 1 0	32	X				Plant food properly cooked for hot holding		1 0.5	0					
_	X				No discharge from eyes, nose or mouth	1 0.5 0	33	×				Approved thawing methods used		1 0.5	0	П	П	П		
т	$\overline{}$	$\overline{}$	g Co	onta	mination by Hands .2652, .2653, .2655, .2656		١⊢	×	_			Thermometers provided & accurate		1 0.5	0	П	П	П		
+	$\rightarrow$	X			Hands clean & properly washed  No bare hand contact with RTE foods or pre-	<b>X</b> 20 <b>X</b> X				ntific	catio	·			٢					
7	X		Ш	Ш	approved alternate procedure properly followed	3 1.5 0			X			Food properly labeled: original container		2 1	×	X		П		
8																				
$\neg$	$\overline{}$	vec	So	urce			36	X				Insects & rodents not present; no unauthorize animals	d [	2 1	0					
9	X	Ш			Food obtained from approved source	210	37		×			Contamination prevented during food preparation, storage & display		2 1	×					
10				X	Food received at proper temperature	210 -	l	×	-			Personal cleanliness		1 0.5	$\vdash$		П	П		
11		X			Food in good condition, safe & unadulterated		l		×			Wiping cloths: properly used & stored		1 🔀	П	$\overline{}$		Ē		
12			X		Required records available: shellstock tags, parasite destruction	210	l		<u> </u>				-	1 0.5	$\vdash$			H		
$\overline{}$	$\overline{}$				Contamination .2653, .2654		_	X ron/	or He		f I Ita	Washing fruits & vegetables ensils .2653, .2654		1 0.5	Ш	Ш	Ш	브		
13	X				Food separated & protected	3 1.5 0	41	X)		Se u		In-use utensils: properly stored		1 0.5	П		П	П		
14		X			Food-contact surfaces: cleaned & sanitized	<b>X</b> 150 <b>X X</b>			×			Utensils, equipment & linens: properly stored,		0.5	$\Box$		×	E		
15	X				Proper disposition of returned, previously served, reconditioned, & unsafe food	210	-		-			dried & handled Single-use & single-service articles: properly			Н			Ë		
$\overline{}$	т	tiall	у На	azaro	dous Food Time/Temperature .2653		43		X			stored & used		0.5	×	Ш	Ш	Ľ		
16	X				Proper cooking time & temperatures	3 1.5 0		×				Gloves used properly		1 0.5	0					
17	X				Proper reheating procedures for hot holding	3 1.5 0	U	tens	sils a	and	Equi	ipment .2653, .2654, .2663 Equipment, food & non-food contact surfaces		—						
18	X				Proper cooling time & temperatures	3 1.5 0	45		×			approved, cleanable, properly designed, constructed, & used	2	1	0		X			
19	X				Proper hot holding temperatures	3 1.5 0	46	×				Warewashing facilities: installed, maintained,	& -	1 0.5	О	П	П	П		
20	X				Proper cold holding temperatures	31.50	47		$\boxtimes$			used; test strips  Non-food contact surfaces clean		1 🔀	0		П	F		
21	$\rightarrow$	X		П	Proper date marking & disposition		-	-		Faci	lities							Ë		
	=		<u> </u>		Time as a public health control: procedures &			X				Hot & cold water available; adequate pressure	e [	2 1	0					
C	nnsı	ıme		lviso	records orv .2653		49		×			Plumbing installed; proper backflow devices		2 1	X	П	П	X		
23		$\overline{}$	×	11130	Consumer advisory provided for raw or	1 0.5 0	╁	×				Sewage & waste water properly disposed		2 1	0	_	П	Ē		
	ghl			ptib	undercooked foods le Populations .2653		i 一		H	H		Toilet facilities: properly constructed, supplied	1					H		
$\neg$	X				Pasteurized foods used; prohibited foods not offered	3 1.5 0		X				& cleaned  Garbage & refuse properly disposed; facilities		1 0.5		븨	ᆜ	Ľ		
C	nem	ical			.2653, .2657		52		X			maintained		1 🗙	0		X			
25			X		Food additives: approved & properly used	1 0.5 0	53		X			Physical facilities installed, maintained & clea	.n	1 🔀	0					
26	×				Toxic substances properly identified stored, & used	210	54		×			Meets ventilation & lighting requirements; designated areas used		1 🔀	0					



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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: 15

Establishme	ent Name: MEMORY	CARE OF T	HE TRIAD	Establ	ishment IC	):_3034160003	•						
Location A	ddress: 413 N MAIN	ST		⊠Insp	ection	Re-Inspection	Date: 07/20/20	15					
City: KERN			S	tate: NC	•		n Attached?	Status Code: A					
County: 34			_ Zip:_ <sup>27284</sup>					Category #:					
Water Supply	•	ommunity 🗌	On-Site System		Email 1	Email 1: lauren@memorycareofthetriad.com  Email 2:							
Permittee:	BRADFORD VILLAC	SE EAST, LL	C		Email 2								
Telephone	: (336) 993-4696				Email 3	3:							
			Temp	erature	Observat	tions							
Item fruit	Location upright fridge	Temp 45	Item servsafe	Location Tunisia	n Matthews	Temp 00	Item	Location	Temp				
sweet	final cook	188											
barbecue	final cook	177											
potatoes	upright fridge	39											
hot water	three comp sink	135	-			_							
final plate	dishmachine	175	-										
quat sanitizer	three comp sink	300											
cauliflower	final cook	140	-										
,	/iolations cited in this re		Observation					of the feed and					
	Handwashing Signa ood employees to w							ks shall have sigr	is posted				
chocolate Provide la	Safe, Unadulterated pudding, and crean beled shelving for c floor.) CDI: Cans gir	n of potato : ans to be re	soup) were de eturned to ver	ented on se	eams. Dent	ted cans sh	all be segregated	from use in the	facility.				
Person in Cha	rge (Print & Sign):	F. Peter	irst	Markar	Last	t	et 7	Naka					
Regulatory Au	thority (Print & Sign)		irst	Bell	Last	Mi	Welly	BOLL REKE	<u>.</u>				
	REHS ID	2464 - E	sell, Michelle	!		Verific	ation Required Date	e: <u>Ø 7</u> / <u>3 Ø</u> / <u>2</u>	015				
REHS C	ontact Phone Number	( <u>3</u> 36)	703-31	41									

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Establishment Name: MEMORY CARE OF THE TRIAD Establishment ID: 3034160003

### Observations and Corrective Actions



- 4-601.11 (A) Equipment, Food-Contact Surfaces, Nonfood-Contact Surfaces, and Utensils P: REPEAT: Approximately 90% of plates, bowls, and utensils examined during inspection contained crumbs, debris and/or food residue. One plastic pitcher with sticker residue. Food-contact surfaces of equipment and utensils shall be clean to sight and touch. CDI: Employee volunteered to re-wash all soiled items.
- 3-501.17 Ready-To-Eat Potentially Hazardous Food (Time/Temperature Control for Safety Food), Date Marking PF: REPEAT: Container of cooked, boiled potatoes, opened bag of shredded cabbage, roast beef lunchmeat, and prepared scrambled eggs in refrigeration with no date. Ready to eat potentially hazardous food held in a food establishment for greater than 24 hours shall be labeled with either date of preparation or discard and held for no greater than 7 days with date of preparation/opening being counted as day 1. CDI: Bag of cabbage, scrambled eggs discarded. All other items dated (opened this weekend).
- 3-302.12 Food Storage Containers Identified with Common Name of Food C: 0 pts. One resealable bag full of unlabeled, powdered ingredient. Except for food that is easily recognizable, like pasta, food shall be labeled with common name when removed from original, bulk container. Food given to manager.
- 37 3-307.11 Miscellaneous Sources of Contamination C: 0 pts. Case of plates sitting on floor in dry storage room with case of salt on top of them. Equipment and utensils shall be stored to prevent contamination from the premises. Obtain shelving to store items when needed.
- 39 3-304.14 Wiping Cloths, Use Limitation C: Many wet wiping cloths being stored between wash/rinse vats at three compartment sink. One wet wiping cloth present on oven handle. Wiping cloths, once wet, shall be stored submerged in a sanitizer solution. Provide sanitizer bucket for storage of wet wiping cloths or segregate for laundry, once wet.
- 4-901.11 Equipment and Utensils, Air-Drying Required C: REPEAT: A couple of plates and two stacks of plastic cups stacked wet. / Employee wiping off plates coming out of dishmachine with paper towel. After washing, rinsing, and sanitizing equipment and utensils shall air-dry. Provide adequate drying space for utensils and equipment. Do not towel dry.
- 4-903.11 (A) and (C) Equipment, Utensils, Linens and Single-Service and Single-Use Articles-Storing C: 0 pts. Plastic knives on shelving in dry storage open. Single service articles shall be stored covered or inverted to protect them from contamination when not in-use. Keep covered.





Establishment Name: MEMORY CARE OF THE TRIAD Establishment ID: 3034160003

#### **Observations and Corrective Actions**



- 4-205.10 Food Equipment, Certification and Classification C: REPEAT: Domestic countertop, vanity, and two compartment sink existing in kitchen. Sink is used for draining noodles and minimal support to kitchen, as stated by PIC (person-in-charge). This set-up is unapproved for use in a food establishment. Remove from facility. //4-501.11 Good Repair and Proper Adjustment-Equipment C: Shelving in both upright refrigerators is rusting. Repair to maintain easily cleanable characteristics or replace. / Shelving under prep tables starting to wear. Repair with approved incidental food contact paint.
- 4-601.11 (B) and (C) Equipment, Food-Contact Surfaces, Nonfood-Contact Surfaces, and Utensils C: Can opener holder soiled. Microwave lightly soiled. Shelving for storage of clean utensils soiled. Drawer bottoms for holding clean utensils soiled. Shelving in dry storage soiled. Sprayer by dish machine soiled. Ice machine has a build-up of mold/mildew. Nonfood-contact surfaces of equipment and utensils shall be clean to sight and touch. Clean all items at a frequency necessary to preclude accumulation of dust/soil.
- 49 5. -203.14 Backflow Prevention Device, When Required P.: 0 pts. Canwash faucets have no backflow prevention device. Provide atmospheric vacuum breaker for canwash faucet. / Provide documentation from manufacturer of internally installed backflow prevention devices for coffee/tea maker or add inline device at the direction of plumbing inspections. Verification of installation for these items is required by 07-31-15. Contact Michelle Bell at 336-703-3141.
- 52 5-501.113 Covering Receptacles C: REPEAT: Lid to dumpster open. Waste receptacles shall be maintained closed to prevent attraction of pests. Keep doors closed.
- 6-201.11 Floors, Walls and Ceilings-Cleanability C: Grout is wearing between tiles in floor and causing troughs. Some tiles cracked. Some repair to tiles has been completed under wash vat of three compartment sink, but area has gaps and is not properly sealed. Area around drain sink under three compartment sink is not flush to floor or sealed. Wall/baseboard behind ice machine in poor repair with holes from pipe penetrations. Wall behind baseboard damaged and baseboard is coming off wall under handwash sink. Walls are soiled with dust and soil behind equipment. Floors are soiled under equipment and along edges in kitchen and in dry storage. Windowsills have accumulation of dust and require cleaning. Handsink is pulling off wall greater than 1/8th inch. Fix gap, then seal to wall. Floors, walls, and ceilings shall be maintained in good repair and kept clean. Surfaces shall be smooth and easily cleanable. Repair.
- 6-303.11 Intensity-Lighting C: Lighting low in the following areas (in ftcd): 20-41 at domestic sink/counter, 30-57 at prep table across from refrigerators, 32 at ice machine, and 13/17 at fixtures in employee restrooms. CDI: Bulb replaced in employee restroom during inspection. New lighting level was 33 ftcd.//6-202.12 Heating, Ventilation, Air Conditioning System Vents C: Vents covered with dust in kitchen and employee bathroom. Clean.





Establishment Name: MEMORY CARE OF THE TRIAD Establishment ID: 3034160003

### **Observations and Corrective Actions**





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### **Observations and Corrective Actions**



