

Food Establishment Inspection Report

Score: 97

Establishment Name: HOMESTEAD HILLS CLUBHOUSE

Establishment ID: 3034011850

Location Address: 3250 HOMESTEAD CLUB DRIVE

☒ Inspection ☐ Re-Inspection

City: WINSTON SALEM

State: NC

Date: 11 / 17 / 2015 **Status Code:** A

Zip: 27103

County: 34 Forsyth

Time In: 10 : 10 ^{am} _{pm} **Time Out:** 12 : 50 ^{am} _{pm}

Permittee: SENIOR LIVING COMMUNITIES,LLC

Total Time: 2 hrs 40 minutes

Telephone: (336) 659-0708

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: 2

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		
Employee Health .2652										
2	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Management, employees knowledge; responsibilities & reporting			3	15	0	
3	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper use of reporting, restriction & exclusion			3	15	0	
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	
5	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	No discharge from eyes, nose or mouth			1	05	0	
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	
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	15	0	
8	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Handwashing sinks supplied & accessible			2	1	0	
Approved Source .2653, .2655										
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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Required records available: shellstock tags, parasite destruction			2	1	0	
Protection from Contamination .2653, .2654										
13	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food separated & protected			3	15	0	
14	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Food-contact surfaces: cleaned & sanitized			3	15	<input checked="" type="checkbox"/>	<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	
Potentially Hazardous Food Time/Temperature .2653										
16	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper cooking time & temperatures			3	15	0	
17	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper reheating procedures for hot holding			3	15	0	
18	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper cooling time & temperatures			3	15	0	
19	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper hot holding temperatures			3	15	0	
20	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Proper cold holding temperatures			3	<input checked="" type="checkbox"/>	0	
21	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper date marking & disposition			3	15	0	
22	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Time as a public health control: procedures & records			2	1	0	
Consumer Advisory .2653										
23	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Consumer advisory provided for raw or undercooked foods			1	05	0	
Highly Susceptible Populations .2653										
24	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Pasteurized foods used; prohibited foods not offered			3	15	0	
Chemical .2653, .2657										
25	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food additives: approved & properly used			1	05	0	
26	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Toxic substances properly identified stored, & used			2	1	0	
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	

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	05	0	
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	05	0	
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	05	0	
32	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Plant food properly cooked for hot holding			1	05	0	
33	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Approved thawing methods used			1	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
34	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Thermometers provided & accurate			1	05	0	
Food Identification .2653										
35	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food properly labeled: original container			2	1	0	
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	
37	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Contamination prevented during food preparation, storage & display			2	1	0	
38	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Personal cleanliness			1	05	0	
39	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Wiping cloths: properly used & stored			1	05	0	
40	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Washing fruits & vegetables			1	05	0	
Proper Use of Utensils .2653, .2654										
41	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	In-use utensils: properly stored			1	05	0	
42	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Utensils, equipment & linens: properly stored, dried & handled			1	05	0	
43	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Single-use & single-service articles: properly stored & used			1	05	0	
44	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Gloves used properly			1	05	0	
Utensils and Equipment .2653, .2654, .2663										
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	05	0	
47	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Non-food contact surfaces clean			1	<input checked="" type="checkbox"/>	0	
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	
49	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Plumbing installed; proper backflow devices			2	1	<input checked="" type="checkbox"/>	
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	05	0	
52	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Garbage & refuse properly disposed; facilities maintained			1	05	0	
53	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Physical facilities installed, maintained & clean			1	<input checked="" type="checkbox"/>	0	
54	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Meets ventilation & lighting requirements; designated areas used			1	05	0	
Total Deductions: 3										



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: HOMESTEAD HILLS CLUBHOUSE

Establishment ID: 3034011850

Location Address: 3250 HOMESTEAD CLUB DRIVE

☒ Inspection ☐ Re-Inspection Date: 11/17/2015

City: WINSTON SALEM State: NC

Comment Addendum Attached? ☐ Status Code: A

County: 34 Forsyth Zip: 27103

Category #: IV

Wastewater System: ☒ Municipal/Community ☐ On-Site System

Water Supply: ☒ Municipal/Community ☐ On-Site System

Permittee: SENIOR LIVING COMMUNITIES,LLC

Email 1:

Email 2:

Telephone: (336) 659-0708

Email 3:

Temperature Observations

Item	Location	Temp	Item	Location	Temp	Item	Location	Temp
hot water	three compartment sink	120	diced egg	sandwich make unit	40			
quat sanitizer	three compartment sink	200	air temp	walk-in cooler	36			
chlorine	dish machine in ppm	50	ServSafe	Dan Reed 2019	0			
shedded	2 door refrigerator	40						
shredded	2 door refrigerator	37						
sliced roast	sandwich make unit	37						
sliced tomato	sandwich make unit	40						
deli ham	sandwich make unit	37						

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.

- 14 . 4-602.11 Equipment Food-Contact Surfaces and Utensils-Frequency - P (0 pts)
Small amount of mold growth is present on the inside of the ice machine. Clean the ice machine. A cleaning is scheduled for 11/18/2015.
- 20 3-501.16 (A)(2) and (B) Potentially Hazardous Food (Time/Temperature Control for Safety Food), Hot and Cold Holding - P
Chicken, beef, and all food items present in the small one door pull unit refrigerator were of temp. 62-63F was measured.
The unit was found to be unplugged.
CDI - All food items in the unit were immediately discarded.
- 33 3-501.13 Thawing - C
6-8 Full sized turkeys were improperly thawing by being placed into a food prep sink with the water turned on.
Proper thawing can be achieved by refrigeration, fully submerged in a container inside of a prep sink with the water agitates ice off, or microwave.

CDI - Still frozen turkeys were place back into the walk-in freezer and 2 of the turkeys were fully submerged inside of a container at the prep sink.

Person in Charge (Print & Sign): Dan *First* Reed *Last*

Regulatory Authority (Print & Sign): Craig *First* Bethel *Last*

REHS ID: 1766 - Bethel, Craig

Verification Required Date: / /

REHS Contact Phone Number: (336) 703 - 3143



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: HOMESTEAD HILLS CLUBHOUSE

Establishment ID: 3034011850

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.



- 47 4-601.11 (B) and (C) Equipment, Food-Contact Surfaces, Nonfood-Contact Surfaces, and Utensils - C
Dust buildup is present on the undersides of work areas, top shelving units, and insides of cabinets below prep surfaces. Clean these areas.
Noticed caulking around pieces of equipment that are attached to the wall is deteriorating.
- 49 5-205.15 System Maintained in Good Repair - P (0 pts) \
- Noticed that the turn off valves at the 3 compartment sink are not working properly. Water can only be turned of by the switching valve. Repair Faucet Valve.
- 53 6-201.11 Floors, Walls and Ceilings-Cleanability - C
Nicks and cracks from paint chipping and caulking dissipating around doorways and along baseboards.
Ceiling in the dishmachine area is under repair due to a leak.



Comment Addendum to Food Establishment Inspection Report

Establishment Name: HOMESTEAD HILLS CLUBHOUSE

Establishment ID: 3034011850

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: HOMESTEAD HILLS CLUBHOUSE

Establishment ID: 3034011850

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: HOMESTEAD HILLS CLUBHOUSE

Establishment ID: 3034011850

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

