Food Establishment Inspection Report Score: <u>95</u> Establishment Name: CLOVERDALE KITCHEN Establishment ID: 3034010081 Location Address: 2237 CLOVERDALE AVE City: WINSTON-SALEM Date: 05 / 18 / 2018 Status Code: A State: NC Time In: 09:000 000 Time Out: 12:470 am pm County: 34 Forsyth Zip: 27103 Total Time: 3 hrs 47 minutes CORTESIS, LTD. Permittee: Category #: IV Telephone: (336) 725-4401 FDA Establishment Type: Full-Service Restaurant Wastewater System:

✓ Municipal/Community

☐ On-Site System No. of Risk Factor/Intervention Violations: 4

water Supply: Killmunicipal/Community Light-Site Supply No. of Repeat Risk Factor/Intervention Vi									atic	วทร	3: _	<u> </u>	_						
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.						0	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						IN OUT N/A N/O Compliance Status							CE	DI R V	/R			
							Safe Food and Water .2653, .2655, .2658												
1	X				PIC Present; Demonstration-Certification by accredited program and perform duties	2			28]	X		Pasteurized eggs used where required	1	0.5	0 [
П	mpl	oyee	He	alth					29		וב			Water and ice from approved source	2	1	0 [
2	X	Ш			Management, employees knowledge; responsibilities & reporting	\Box		Щ	30			X		Variance obtained for specialized processing methods	1	0.5	0 [
3	X				Proper use of reporting, restriction & exclusion	3 1.5 (Fo	od Te	emp	oera	itur	e Control .2653, .2654					
G	$\overline{}$	Ну	jieni	ic P	ractices .2652, .2653				31					Proper cooling methods used; adequate equipment for temperature control	1	0.5	0		
4	X				Proper eating, tasting, drinking, or tobacco use	21			32	ПI		╗	×	Plant food properly cooked for hot holding	1	0.5	0	101	╗
5	X				No discharge from eyes, nose or mouth	1 0.5			$1 \mapsto$	=	_			Approved thawing methods used	1	H	=		Ⅎ
\neg		ntin	g Co	onta	mination by Hands .2652, .2653, .2655, .2656				ш	_	- -	7	_		\vdash				Ⅎ
6	X	Hands clean & properly washed 420 34 3 3 3 3 3 3 3 3				- 1! -	Thermometers provided & accurate												
7	X		No bare hand contact with RTE foods or pre- approved alternate procedure properly followed 3 13 0 0 0 Food Identification .2653										4						
8		X			Handwashing sinks supplied & accessible	sinks supplied & accessible 211 V V						2	Ш	0 _		4			
A	ppro	proved Source 2653 2655							lon	101	FOC	od Contamination .2652, .2653, .2654, .2656, .265 Insects & rodents not present; no unauthorized	$\overline{}$		TE	J			
\Box	X				Food obtained from approved source	21	0 🗆		$1 \mapsto$		4	4		animals	2		0 L		긔
10				X	Food received at proper temperature	21	0 🗆		\vdash		1			Contamination prevented during food preparation, storage & display	2	1	0		╝
\vdash	×				Food in good condition, safe & unadulterated	21	0 0		38	_	1			Personal cleanliness	1	0.5	0		_
12	П	П	×	П	Required records available: shellstock tags,	+++	0 0		39]			Wiping cloths: properly used & stored	1	0.5	미] 🗆 🗀	\Box
ш	rote	ctio		<u></u> m (parasite destruction Contamination .2653, .2654	الناليا	الال		40]	X		Washing fruits & vegetables	1	0.5	0 [1 -	ם
\neg	X	П		П	Food separated & protected	3 1.5		ПГ	Pr	oper	Use	e of	Ute	ensils .2653, .2654					
14		×			Food-contact surfaces: cleaned & sanitized	3 1.5	= =		41					In-use utensils: properly stored	1	0.5	0 [
Н	×				Proper disposition of returned, previously served,				42					Utensils, equipment & linens: properly stored, dried & handled	1	0.5	ᅙ		
15 P		tiall	v Ha	ızar	reconditioned, & unsafe food dous Food Time/Temperature .2653				43	X C]			Single-use & single-service articles: properly stored & used	1	0.5	0		J
16				×	<u> </u>	3 1.5	olni	ПГ	44		╅			Gloves used properly	1	0.5	0 -	101	╗
\vdash	×		\equiv		Proper reheating procedures for hot holding		==		-	Utensils and Equipment .2653, .2654, .2663				الحال	4				
Н] [<u> </u>		Equipment, food & non-food contact surfaces									╗				
\vdash	X	Ш		<u>Ц</u>	Proper cooling time & temperatures	+++			45		4			approved, cleanable, properly designed, constructed, & used	\Box	П	4	\perp	_
Н	×				Proper hot holding temperatures	+++			46		₫			Warewashing facilities: installed, maintained, & used; test strips	X	0.5	0 [┚
20		X			Proper cold holding temperatures	3 🔀		X	47		◂			Non-food contact surfaces clean	1	0.5	X		
21	X				Proper date marking & disposition	3 1.5				nysica		acili	ities	, ,				1-1-	
22			X		Time as a public health control: procedures & records	21			48	_	1	Ц		Hot & cold water available; adequate pressure	2	1			긜
C	ons	ume	r Ac	lvis					49]			Plumbing installed; proper backflow devices	2	1	0 [╝
ш	X				Consumer advisory provided for raw or undercooked foods	1 0.5			50					Sewage & waste water properly disposed	2	1	0 [\exists
П	ighl	_		ptib	le Populations .2653 Pasteurized foods used; prohibited foods not				51		ור			Toilet facilities: properly constructed, supplied & cleaned	1	0.5	0		J
24	hem		X		offered .2653, .2657	3 1.5			52	X C	1			Garbage & refuse properly disposed; facilities maintained	1	0.5	0 [J
25		$\overline{}$	×		Food additives: approved & properly used	1 0.5			53		<u>a</u>	+		Physical facilities installed, maintained & clean	1	×			╣
26		X			Toxic substances properly identified stored, & used	++			+	-	+	\dashv		Meets ventilation & lighting requirements;	1				╣
20									4	11-1	4								
Conformance with Approved Procedures .2653, .2654, .2658 Compliance with variance, specialized process, reduced oxygen packing criteria or HACCP plan 2 1 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0							Total Deductions: 5												
۱-٬۱	_	_	~~		reduced oxygen packing criteria or HACCP plan		-1-1		11						1				





Comment Addendum to Food Establishment Inspection Report Establishment Name: CLOVERDALE KITCHEN Establishment ID: 3034010081 Location Address: 2237 CLOVERDALE AVE Date: 05/18/2018 X Inspection ☐ Re-Inspection City:_WINSTON-SALEM State: NC Comment Addendum Attached? Status Code: A Zip: 27103 County: 34 Forsyth Water sample taken? Yes X No Category #: IV Email 1: cloverdalek80461@bellsouth.net Wastewater System:

■ Municipal/Community

On-Site System Water Supply: Municipal/Community □ On-Site System Permittee: CORTESIS, LTD. Email 2: Telephone: (336) 725-4401 Email 3: Temperature Observations 2019 Cold Holding will change to 41 degrees Effective January 1. Temp Item Location Item Location Location Temp Item Temp Gus Cortesis 4-22-23 00 Serv safe Rice cooling 30 mins later 95 Fettuccine upright 42 Hot water 3 comp sink 156 chicken soup reheat 174 Lasagna upright 3 comp sink 500 make unit 35 walk-in cooler 40 Quat (ppm) hot dog egg 200 Quat (ppm) bucket salmon make unit 34 noodles walk-in cooler 41 Hot water dish machine 162 34 collards 140 shrimp make unit hot holding 56 37 180 Lettuce cooling pork make unit grits hot holding Lettuce cooling 1 hour later 44 potato salad oven reach-in 49 41 sausage reach-in Rice cooling 119 cole slaw oven reach-in ham reach-in 41 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 6-301.14 Handwashing Signage - C- Handwashing signage is missing at handwashing sink in server area. All handwashing sinks used by food employees shall have a reminder to wash hands. CDI: Handwashing sign provided by REHSI. Opts 14 4-601.11 (A) Equipment, Food-Contact Surfaces, Nonfood-Contact Surfaces, and Utensils - P- A spatula, scoop, and tong observed soiled in clean utensil drawer. Food contact surfaces of equipment and utensils shall be cleaned to sight and touch. CDI: Utensils were taken to 2 compartment sink to be washed, rinsed, and sanitized. Opts 20 3-501.16 (A)(2) and (B) Potentially Hazardous Food (Time/Temperature Control for Safety Food), Hot and Cold Holding refrigeration or store container completely submerged in an ice bath. Potato salad and cole slaw stored in oven reach-in cooler

REPEAT- Packages of butter at server station stored in container with ice at only at the bottom measured 82F. Keep butter under overnight both measured 49F. Potentially hazardous food in cold holding at 45F or below (41 and below in 2019!). CDI: Butter was placed out of temperature at an unknown time. CDI: Butter voluntarily discarded. Verification Required by 5/26/18. Ambient air Lock temperature of reach-in cooler measured 51F. Discontinue storing potentially hazardous food in cooler until it's repaired. Contact Text Shaneria Sanders at sandersg@forysth.cc or at 336-703-3144 for verification of repaired unit. 1.5pts

First Last Gus Cortesis Person in Charge (Print & Sign): **First** Last Regulatory Authority (Print & Sign): Shaneria Sanders

> REHS ID: 2683 - Shaneria Sanders Verification Required Date: Ø 5 / 26 / 2018

REHS Contact Phone Number: (336)703-3144

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



Establishment Name: CLOVERDALE KITCHEN Establishment ID: 3034010081

Observations and Corrective Actions

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- 7-204.11 Sanitizers, Criteria-Chemicals P- Quat sanitizer in the 3 compartment sink dispenser measured above 400ppm. Dilute sanitizer to 150-400ppm until dispensers can be calibrated. Verification Required by 5/26/18. Contact Shaneria Sanders at sandersq@forsyth.cc or 336-703-3144 for verification of calibrated dispenser. CDI: Quat sanitizer diluted to 200ppm during inspection. 1pt
- 4-501.11 Good Repair and Proper Adjustment-Equipment C-REPEAT- Repair, recondition the following equipment: Paint finish wearing on legs of dish machine area, shelving in dry storage and chemical storage is loosing finish and rusting, drawers across from breakfast reach-in cooler and wooden drawers next to bread warmer have lost finish and no longer smooth and easily cleanable. Equipment shall be in good repair. 1pt
- 4-301.12 Manual Warewashing, Sink Compartment Requirements REPEAT- Two compartment sink is present and currently being used in kitchen without a variance. The facility has applied for a variance and is currently waiting for state approval. Email variance approval to Shaneria Sanders at sandersq@forsyth.cc. 1pt
- 4-602.13 Nonfood Contact Surfaces C- Additional cleaning is needed on oven where carbon buildup is seen and inside the oven reach-in cooler. Nonfood contact surfaces shall be maintained clean. Opts
- 6-201.11 Floors, Walls and Ceilings-Cleanability C-REPEAT- Floor in dry storage has been sealed but needs a stronger sealant. Floors still not smooth and easily cleanable. Physical facilities shall be smooth and easily cleanable. Opts





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