

Food Establishment Inspection Report

Score: 93.5Establishment Name: WENDY S 6236Establishment ID: 3034012319Location Address: 3031 WAUGHTOWN STREET☒ Inspection ☐ Re-InspectionCity: WINSTON SALEMState: NCDate: 08 / 11 / 2014 Status Code: UZip: 27107County: 34 ForsythTime In: 10 : 00 ☒ am ☐ pmTime Out: 01 : 45 ☐ am ☒ pmPermittee: NPC QUALITY BURGERS INC.Total Time: 3 hrs 45 minutesCategory #: II

Telephone: _____

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

FDA Establishment Type: _____

No. of Risk Factor/Intervention Violations: 5Water Supply: ☒ Municipal/Community ☐ On-Site Supply

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	15	0	<input type="checkbox"/>
3	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper use of reporting, restriction & exclusion			3	15	0	<input type="checkbox"/>
Good Hygienic Practices .2652, .2653										
4	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Proper eating, tasting, drinking, or tobacco use			2	1	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
5	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	No discharge from eyes, nose or mouth			1	05	0	<input type="checkbox"/>
Preventing Contamination by Hands .2652, .2653, .2655, .2656										
6	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Hands clean & properly washed			4	<input checked="" type="checkbox"/>	0	<input checked="" 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	15	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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food separated & protected			3	15	0	<input type="checkbox"/>
14	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food-contact surfaces: cleaned & sanitized			3	15	0	<input 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	15	0	<input type="checkbox"/>
17	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper reheating procedures for hot holding			3	15	0	<input type="checkbox"/>
18	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper cooling time & temperatures			3	15	0	<input type="checkbox"/>
19	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper hot holding temperatures			3	15	0	<input type="checkbox"/>
20	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper cold holding temperatures			3	15	0	<input type="checkbox"/>
21	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Proper date marking & disposition			3	15	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
22	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input 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	05	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	15	0	<input type="checkbox"/>
Chemical .2653, .2657										
25	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food additives: approved & properly used			1	05	0	<input type="checkbox"/>
26	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Toxic substances properly identified stored, & used			2	1	<input checked="" type="checkbox"/>	<input checked="" 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	05	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	05	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	05	0	<input type="checkbox"/>
32	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Plant food properly cooked for hot holding			1	05	0	<input type="checkbox"/>
33	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Approved thawing methods used			1	05	0	<input type="checkbox"/>
34	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Thermometers provided & accurate			1	05	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	05	<input checked="" type="checkbox"/>	<input type="checkbox"/>
39	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Wiping cloths: properly used & stored			1	05	0	<input type="checkbox"/>
40	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Washing fruits & vegetables			1	05	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	05	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 type="checkbox"/>
43	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Single-use & single-service articles: properly stored & used			<input checked="" type="checkbox"/>	05	0	<input checked="" type="checkbox"/>
44	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Gloves used properly			1	05	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	<input checked="" type="checkbox"/>	0	<input type="checkbox"/>
46	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Warewashing facilities: installed, maintained, & used; test strips			1	05	0	<input type="checkbox"/>
47	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Non-food contact surfaces clean			1	05	<input checked="" type="checkbox"/>	<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 type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Plumbing installed; proper backflow devices			2	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<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	05	0	<input type="checkbox"/>
52	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Garbage & refuse properly disposed; facilities maintained			1	<input checked="" type="checkbox"/>	0	<input checked="" type="checkbox"/>
53	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Physical facilities installed, maintained & clean			1	<input checked="" type="checkbox"/>	0	<input type="checkbox"/>
54	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Meets ventilation & lighting requirements; designated areas used			1	05	0	<input type="checkbox"/>
Total Deductions:							6.5			

North Carolina Department of Health & Human Services • Division of Public Health • Environmental Health Section • Food Protection Program
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Comment Addendum to Food Establishment Inspection Report

Establishment Name: WENDY S 6236

Location Address: 3031 WAUGHTOWN STREET

City: WINSTON SALEM State: NC

County: 34 Forsyth Zip: 27107

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

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

Permittee: NPC QUALITY BURGERS INC.

Telephone: _____

Establishment ID: 3034012319

☒ Inspection ☐ Re-Inspection Date: 08/11/2014

Comment Addendum Attached? ☐ Status Code: U

Category #: II

Email 1: _____

Email 2: _____

Email 3: _____

Temperature Observations

Item	Location	Temp	Item	Location	Temp	Item	Location	Temp
Serv Safe	Shera Gentry Exp 2019	00	Chicken	Final Cook	180	Lettuce	WIC	39
Sanitizer	3-comp	200	Chicken	Final Cook	190	Cheese	WIC	37
Sanitizer	Bucket	200	Cheese	Make Unit	42	Raw Beef	Meat Refrigerator	40
Hot Water	Prep Sink	160	Lettuce	Make Unit	45	Salad	Reach-in	45
Air Temp	Reach-in	36	Cut Tomatoes	Make Unit	43	Lettuce	Prep Table	60
Burger	Final Cook	175	Chili	Hot Holding	175	Tomatoes	Prep Cart	48
Burger	Final Cook	185	Wash Water	3-comp	110			
Chicken	Final Cook	175	Cut Tomatoes	WIC	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.

- 4 2-401.11 Eating, Drinking, or Using Tobacco - C General Comment-An employee drink was observed on a food prep surface. *Ensure that employee drinks are stored underneath & away from food for the establishment. CDI-Drink was discarded.
- 6 2-301.12 Cleaning Procedure - P. An employee was observed washing hands for less than 10 seconds and turning off the faucet with their bare hands. When washing hands follow these procedures: (1) Dispense a paper towel & rinse hands under running, warm, water (2) Apply soap (3) Rub vigorously for 15-20 seconds (4) Thoroughly rinse under running, warm, water (5) Dry hands with an already dispensed paper towel & turned off faucets with a paper towel. CDI-Employee rewashed hands properly.
- 8 6-301.12 Hand Drying Provision - PF. General Comment-Paper towels in two dispensers were not installed properly, preventing them from dispensing correctly. Individual, disposable, paper towels must be provided at each hand sink. CDI-Put paper towels into dispensers properly so that they dispense correctly.



Person in Charge (Print & Sign): David *First* Young *Last*

Regulatory Authority (Print & Sign): Jo Farmer, REHSI *First* Daniel Lemons, REHS *Last*

REHS ID: 1799 - Lemons, Daniel

[Signature]

[Signature]

Verification Required Date: ____ / ____ / ____

REHS Contact Phone Number: (3 3 6) 7 0 3 - 3 1 3 6



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- 21 3-501.17 Ready-To-Eat Potentially Hazardous Food (Time/Temperature Control for Safety Food), Date Marking - PF. General Comment-Ten of 50 salads in the reach-in refrigerator from the previous day were not date marked. The manager did not know when the salads were prepared. When potentially hazardous food is held for more than 24 hours it must be date marked. Date mark any salads that are left over at the end of the night or discard them. All other date marking in restaurant is being done correctly. CDI-Educated operator about date marking.
- 26 7-102.11 Common Name-Working Containers - PF. General Comment-One bottle of all purpose cleaner was in an unlabeled bottle. All chemical bottles must be labeled with their common name. CDI-Labeled chemical bottle.
- 38 2-303.11 Prohibition-Jewelry - C. General Comment-One employee observed wearing an bracelet. Employees are not allowed to wear any jewelry on their wrists or hands except for a simple ring, such as a wedding band. Prohibit employees from wearing jewelry on their wrists & hands.
- 42 4-901.11 Equipment and Utensils, Air-Drying Required - C. Approximately 1/3 of pans were stacked wet. After washing, rinsing, & sanitizing dishes they must be air-dried. CDI-Stacked pans to facilitate air-drying. Space limitations are exacerbating this issue.
- 43 4-903.11 (A) and (C) Equipment, Utensils, Linens and Single-Service and Single-Use Articles-Storing - C. Repeat Violation- At least 5 stacks of single service cups at the drive thru window were stacked above the rims/not protected in plastic sleeves. Single-service articles must be protected from contamination. Do not stack cups above the fill lines and if cups are not in a container store stacks inside plastic sleeves pulled all the way to the top of the stack.
- 45 4-501.11 Good Repair and Proper Adjustment-Equipment - C. Hand sink at front kitchen entrance pools water on the drainboard and needs to be properly recaulked to wall to allow water to drain into sink. The undersides of the hand sinks & 3-comp need to be reconditioned underneath the basins to remove rust. Door hinges on make unit refrigerators need to be reconditioned or replaced. The side shelf for the raw meat unit has rusty screw caps in the underside that need to be replaced. Condensate leaks in the walk-in freezer need to be repaired & a baseboard needs to be installed in the walk-in freezer. Utensils, pans & measuring cups are cracked and need to be replaced.
- 47 4-601.11 (B) and (C) Equipment, Food-Contact Surfaces, Nonfood-Contact Surfaces, and Utensils - C. General Comment-Gaskets of all refrigerators need to be cleaned to remove mold buildup. Clean underneath/behind all large equipment especially ice machine.



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- 49 5-203.14 Backflow Prevention Device, When Required - P. A hose with a pistol grip was attached to the can wash faucet. Ensure that hose does not stay hooked up or install a backflow preventer rated for continuous pressure at the can wash.
- 52 5-501.15 Outside Receptacles - C. Outside dumpster top & side doors were open. Outside receptacles must be kept closed. CDI-Closed all dumpster doors.
- 53 6-201.11 Floors, Walls and Ceilings-Cleanability - C. The orange baseboard does not form a proper cove where the base meets the floor. A proper coved transition needs to be in place where the walls meet the floor throughout the kitchen and in the restrooms. Cracked tiles have been replaced at the cook line & frosty machine.



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✓
Spell



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✓
Spell

