

# Food Establishment Inspection Report

Score: 96.5

Establishment Name: SHORTY'S

Establishment ID: 3034011008

Location Address: 1834 WAKE FOREST ROAD

City: WINSTON SALEM State: North Carolina

Zip: 27106 County: 34 Forsyth

Permittee: WAKE FOREST UNIVERSITY

Telephone: (336) 758-4869

☒ Inspection ☐ Re-Inspection ☐ Educational Visit

Wastewater System:

☒ Municipal/Community ☐ On-Site System

Water Supply:

☒ Municipal/Community ☐ On-Site Supply

Date: 04/23/2024

Status Code: A

Time In: 11:15 AM

Time Out: 1:45 PM

Category#: IV

FDA Establishment Type: Full-Service Restaurant

No. of Risk Factor/Intervention Violations: 7

No. of Repeat Risk Factor/Intervention Violations: 1

## 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

Compliance Status		OUT	CDI	R	VR
<b>Supervision .2652</b>					
1	<input checked="" type="checkbox"/> OUT/N/A	PIC Present, demonstrates knowledge, & performs duties	1	0	
2	<input checked="" type="checkbox"/> OUT/N/A	Certified Food Protection Manager	1	0	
<b>Employee Health .2652</b>					
3	<input checked="" type="checkbox"/> OUT	Management, food & conditional employee; knowledge, responsibilities & reporting	2	1	0
4	<input checked="" type="checkbox"/> OUT	Proper use of reporting, restriction & exclusion	3	1.5	0
5	<input checked="" type="checkbox"/> OUT	Procedures for responding to vomiting & diarrheal events	1	0.5	0
<b>Good Hygienic Practices .2652, .2653</b>					
6	<input checked="" type="checkbox"/> OUT	Proper eating, tasting, drinking or tobacco use	1	0.5	0
7	<input checked="" type="checkbox"/> OUT	No discharge from eyes, nose, and mouth	1	0.5	0
<b>Preventing Contamination by Hands .2652, .2653, .2655, .2656</b>					
8	<input checked="" type="checkbox"/> OUT	Hands clean & properly washed	4	2	0
9	<input checked="" type="checkbox"/> OUT/N/A/N/O	No bare hand contact with RTE foods or pre-approved alternate procedure properly followed	4	2	0
10	<input checked="" type="checkbox"/> OUT/N/A	Handwashing sinks supplied & accessible	2	1	0
<b>Approved Source .2653, .2655</b>					
11	<input checked="" type="checkbox"/> OUT	Food obtained from approved source	2	1	0
12	<input checked="" type="checkbox"/> IN OUT	Food received at proper temperature	2	1	0
13	<input checked="" type="checkbox"/> OUT	Food in good condition, safe & unadulterated	2	1	0
14	<input checked="" type="checkbox"/> IN OUT	Required records available: shellstock tags, parasite destruction	2	1	0
<b>Protection from Contamination .2653, .2654</b>					
15	<input checked="" type="checkbox"/> IN OUT/N/A/N/O	Food separated & protected	3	1.5	X
16	<input checked="" type="checkbox"/> IN OUT	Food-contact surfaces: cleaned & sanitized	3	0	X
17	<input checked="" type="checkbox"/> OUT	Proper disposition of returned, previously served, reconditioned & unsafe food	2	1	0
<b>Potentially Hazardous Food Time/Temperature .2653</b>					
18	<input checked="" type="checkbox"/> OUT/N/A/N/O	Proper cooking time & temperatures	3	1.5	0
19	<input checked="" type="checkbox"/> IN OUT/N/A/N/O	Proper reheating procedures for hot holding	3	0	X
20	<input checked="" type="checkbox"/> OUT/N/A/N/O	Proper cooling time & temperatures	3	1.5	0
21	<input checked="" type="checkbox"/> IN OUT/N/A/N/O	Proper hot holding temperatures	3	1.5	X
22	<input checked="" type="checkbox"/> IN OUT/N/A/N/O	Proper cold holding temperatures	3	1.5	X
23	<input checked="" type="checkbox"/> IN OUT/N/A/N/O	Proper date marking & disposition	3	1.5	X
24	<input checked="" type="checkbox"/> IN OUT/N/A/N/O	Time as a Public Health Control; procedures & records	3	1.5	0
<b>Consumer Advisory .2653</b>					
25	<input checked="" type="checkbox"/> IN OUT	Consumer advisory provided for raw/undercooked foods	1	0.5	0
<b>Highly Susceptible Populations .2653</b>					
26	<input checked="" type="checkbox"/> IN OUT	Pasteurized foods used; prohibited foods not offered	3	1.5	0
<b>Chemical .2653, .2657</b>					
27	<input checked="" type="checkbox"/> IN OUT	Food additives: approved & properly used	1	0.5	0
28	<input checked="" type="checkbox"/> IN OUT/N/A	Toxic substances properly identified stored & used	2	1	X
<b>Conformance with Approved Procedures .2653, .2654, .2658</b>					
29	<input checked="" type="checkbox"/> IN OUT	Compliance with variance, specialized process, reduced oxygen packaging 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.

Compliance Status		OUT	CDI	R	VR
<b>Safe Food and Water .2653, .2655, .2658</b>					
30	<input checked="" type="checkbox"/> IN OUT	Pasteurized eggs used where required	1	0.5	0
31	<input checked="" type="checkbox"/> OUT	Water and ice from approved source	2	1	0
32	<input checked="" type="checkbox"/> IN OUT	Variance obtained for specialized processing methods	2	1	0
<b>Food Temperature Control .2653, .2654</b>					
33	<input checked="" type="checkbox"/> OUT	Proper cooling methods used; adequate equipment for temperature control	1	0.5	0
34	<input checked="" type="checkbox"/> OUT N/A N/O	Plant food properly cooked for hot holding	1	0.5	0
35	<input checked="" type="checkbox"/> OUT N/A N/O	Approved thawing methods used	1	0.5	0
36	<input checked="" type="checkbox"/> OUT	Thermometers provided & accurate	1	0.5	0
<b>Food Identification .2653</b>					
37	<input checked="" type="checkbox"/> OUT	Food properly labeled: original container	2	1	0
<b>Prevention of Food Contamination .2652, .2653, .2654, .2656, .2657</b>					
38	<input checked="" type="checkbox"/> OUT	Insects & rodents not present; no unauthorized animals	2	1	0
39	<input checked="" type="checkbox"/> OUT	Contamination prevented during food preparation, storage & display	2	1	0
40	<input checked="" type="checkbox"/> OUT	Personal cleanliness	1	0.5	0
41	<input checked="" type="checkbox"/> OUT	Wiping cloths: properly used & stored	1	0.5	0
42	<input checked="" type="checkbox"/> OUT N/A	Washing fruits & vegetables	1	0.5	0
<b>Proper Use of Utensils .2653, .2654</b>					
43	<input checked="" type="checkbox"/> OUT	In-use utensils: properly stored	1	0.5	0
44	<input checked="" type="checkbox"/> IN OUT	Utensils, equipment & linens: properly stored, dried & handled	1	0.5	X
45	<input checked="" type="checkbox"/> OUT	Single-use & single-service articles: properly stored & used	1	0.5	0
46	<input checked="" type="checkbox"/> OUT	Gloves used properly	1	0.5	0
<b>Utensils and Equipment .2653, .2654, .2663</b>					
47	<input checked="" type="checkbox"/> OUT	Equipment, food & non-food contact surfaces approved, cleanable, properly designed, constructed & used	1	0.5	0
48	<input checked="" type="checkbox"/> IN OUT	Warewashing facilities: installed, maintained & used; test strips	1	0	X
49	<input checked="" type="checkbox"/> IN OUT	Non-food contact surfaces clean	1	0.5	X
<b>Physical Facilities .2654, .2655, .2656</b>					
50	<input checked="" type="checkbox"/> OUT N/A	Hot & cold water available; adequate pressure	1	0.5	0
51	<input checked="" type="checkbox"/> OUT	Plumbing installed; proper backflow devices	2	1	0
52	<input checked="" type="checkbox"/> OUT	Sewage & wastewater properly disposed	2	1	0
53	<input checked="" type="checkbox"/> OUT N/A	Toilet facilities: properly constructed, supplied & cleaned	1	0.5	0
54	<input checked="" type="checkbox"/> OUT	Garbage & refuse properly disposed; facilities maintained	1	0.5	0
55	<input checked="" type="checkbox"/> OUT	Physical facilities installed, maintained & clean	1	0.5	0
56	<input checked="" type="checkbox"/> OUT	Meets ventilation & lighting requirements; designated areas used	1	0.5	0
<b>TOTAL DEDUCTIONS:</b>					3.5



# Comment Addendum to Food Establishment Inspection Report

Establishment Name: SHORTY'S  
 Location Address: 1834 WAKE FOREST ROAD  
 City: WINSTON SALEM State: NC  
 County: 34 Forsyth Zip: 27106  
 Wastewater System: ☒ Municipal/Community ☐ On-Site System  
 Water Supply: ☒ Municipal/Community ☐ On-Site System  
 Permittee: WAKE FOREST UNIVERSITY  
 Telephone: (336) 758-4869

Establishment ID: 3034011008  
☒ Inspection ☐ Re-Inspection Date: 04/23/2024  
☐ Educational Visit Status Code: A  
 Comment Addendum Attached? ☒ Category #: IV  
 Email 1: watts-beth@harvesttableculinary.com  
 Email 2:  
 Email 3:

## Temperature Observations

Item/Location	Temp	Item/Location	Temp	Item/Location	Temp
Beans/Steam Table	140	Beans 4/22/Walk In Cooler	46		
Beans/Hot Box	75	Beans/Walk IN Cooler (bus tub)	40		
Rice/Steam Table	165	Corn/WIC	29		
Chicken/ST	170	Hot Water/3 comp sink	121		
Pork/ST	159	Sanitizer Quat/3 comp sink	300		
Rice/HB	142	Sanitizer Chlorine/Final Rinse	100		
Chicken/HB	144	Chicken/On Grill	189		
Lettuce/3 Door Reach In	40				
Pico/3DR	38				
Cheese/3DR	41				
Lettuce/Flip Top	39				
Lettuce/Reach In	41				
Chicken/Final Cook	180				
Burger/Steam Well	190				
Cheese Sauce/SW	177				
Chili/SW	168				
Hot DOg/Grill Drawer	39				
Blanched Fries /Cooling 12:05	121				
Blanched Fries/Cooling 12:35	100				
Pork/Walk IN Cooler	38				

Person in Charge (Print & Sign): *First* Beth *Last* Watts  
 Regulatory Authority (Print & Sign): *First* Glen *Last* Pugh

*[Signature]*  
*[Signature]*

REHS ID: 3016 - Pugh, Glen Verification Dates: Priority: Priority Foundation: Core:

REHS Contact Phone Number: (336) 703-3164

Authorize final report to be received via Email: \_\_\_\_\_



North Carolina Department of Health & Human Services

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 Division of Public Health • Environmental Health Section  
 DHHS is an equal opportunity employer.  
 Food Establishment Inspection Report, 12/2023

• Food Protection Program



## Comment Addendum to Inspection Report

**Establishment Name:** SHORTY'S

**Establishment ID:** 3034011008

**Date:** 04/23/2024 **Time In:** 11:15 AM **Time Out:** 1:45 PM

### Certifications

Name	Certificate #	Type	Issue Date	Expiration Date
Beth Watts		Food Service		01/31/2028

### 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.

- 15 3-302.11 Packaged and Unpackaged Food - Separation, Packaging, and Segregation (P) - (A) FOOD shall be protected from cross contamination by: (A) FOOD shall be protected from cross contamination by: (1) Except as specified in (1)(d) below, separating raw animal FOODS during storage, preparation, holding, and display from: (b) Cooked READY-TO-EAT FOOD.  
\*\*\*A box of raw shrimp stored above cheese sauce in walk in cooler. CDI food was rearranged to prevent cross contamination.
- 16 4-601.11 (A) Equipment, Food-Contact Surfaces, Nonfood Contact Surfaces, and Utensils (Pf) - Equipment food contact surfaces and utensils shall be clean to sight and touch.  
\*\*\*Several metal food pans stored clean still had food debris present. A milk shake blending cup (and wand) were left soiled from the previous night. CDI items sent back to be cleaned again and milk shake wand cleaned and sanitized.
- 19 3-403.11 Reheating for Hot Holding (P) - TIME/TEMPERATURE CONTROL FOR SAFETY FOOD that is cooked, cooled, and reheated for hot holding shall be reheated so that all parts of the FOOD reach a temperature of at least 74oC (165oF) for 15 seconds.  
\*\*\*A pan of beans in hot box that was at 75F was pulled to be reheated. EHS asked employees if it had finished and employees responded "yes in the hot box". EHS checked beans and they were at 90F. 2 hour time limit had since past so food was discarded.
- 21 3-501.16 (A) (1) Time / Temperature Control for Safety Food, Hot and Cold Holding (P) - TCS food shall be maintained at 135F or above.  
\*\*\*Beans in hot box at La Sabrosa were at 75F. CDI beans were heated less than 2 hours prior so were sent back to finish heating.
- 22 3-501.16 (A) (2) and (B) Time / Temperature Control for Safety Food, Hot and Cold Holding (P) - TCS food shall be maintained at 41F or below.  
\*\*\*A pan of beans in walk in cooler at 46F. CDI beans were discarded.
- 23 3-501.18 Ready-To-Eat Time / Temperature Control for Safety Food, Disposition (P) - (A) A FOOD specified in 3-501.17(A) or (B) shall be discarded if it: (1) Exceeds the temperature and time combination specified in 3-501.17(A), except time that the product is frozen.  
\*\*\*1 container of hummus labeled use by 4-1. 2 containers of hummus with MFG use by date of 3-25. CDI hummus was discarded.
- 28 7-202.12 Conditions of Use (P) - POISONOUS OR TOXIC MATERIALS shall be: (A) Used according to: (1) LAW and this Code, (2) Manufacturer's use directions included in labeling; (B) Applied so that: (1) A HAZARD to EMPLOYEES or other PERSONS is not constituted.  
\*\*\*The dish machine has Concentrated Quaternary Ammonia Sanitizer hooked up in place of a rinse aid in addition to the chlorine sanitizer. The quaternary ammonia bottle is not set up correctly to follow MFG use instructions. Additionally chlorine and ammonia can chemically react to create hazardous chemicals and should not be used together. CDI Sanitizer disconnected and PIC will follow up with Diversy technician
- 44 4-903.11 (A), (B), and (D) Equipment, Utensils, Linens and Single-Service and Single-Use Articles Storing (C) - Cleaned EQUIPMENT and UTENSILS, laundered LINENS, and SINGLE-SERVICE and SINGLE-USE ARTICLES shall be stored: (1) In a clean, dry location;  
\*\*\*The shelf above the 3 comp sink where clean dishes are stored is soiled.
- 48 4-501.14 Warewashing Equipment, Cleaning Frequency (C) - A WAREWASHING machine; the compartments of sinks, basins, or other receptacles used for washing and rinsing EQUIPMENT, UTENSILS, or raw FOODS, or laundering wiping cloths; and drainboards or other EQUIPMENT used to substitute for drainboards as specified under § 4-301.13 shall be cleaned: (B) Throughout the day at a frequency necessary to prevent recontamination of EQUIPMENT and UTENSILS and to ensure that the EQUIPMENT performs its intended function.  
\*\*\*The dish machine is heavily soiled inside (especially on the top).
- 49 4-601.11 (B) and (C) Equipment, Food-Contact Surfaces, Nonfood Contact Surfaces, and Utensils (C) - (C) NonFOOD-CONTACT SURFACES of EQUIPMENT shall be kept free of an accumulation of dust, dirt, FOOD residue, and other debris.  
\*\*\*The underside of the milkshake mixer wands need to be cleaned.

