Food Establishment Inspection	Re	epc	ort					S	core: <u>s</u>	94.	5
Establishment Name: ATRIUM COTTAGE						E	Est	ablishment ID: 3034160001			
Location Address: 100 HORIZON LANE								X Inspection Re-Inspection			
City: RURAL HALL State: NC						Date: Ø1/26/2016 Status Code: A					
Zip: 27045 County: 34 Forsyth					Ti	me	e In	: <u>Ø 9</u> : <u>5</u> Ø <sup>⊗</sup> am _ Time Out: <u>Ø 1</u> : _	<u>25</u> ⊗ a	im m	
Permittee: DAVID ADAMS					Тс	ota	I Ti	me: <u>3 hrs 35 minutes</u>			
Telephone: (336) 767-2411					Ca	ate	go	ry #: _IV		_	
Wastewater System: XMunicipal/Community [		Site		otom	F	DA	Es	tablishment Type: Nursing Home			
-				stern				Risk Factor/Intervention Violations:			
Water Supply: XMunicipal/Community On-	Site	Sup	biy		N	Э. (	of F	Repeat Risk Factor/Intervention Vio	lations:		
Foodborne Illness Risk Factors and Public Health Inter Risk factors: Contributing factors that increase the chance of developing foodb Public Health Interventions: Control measures to prevent foodborne illness or	orne illn		6	Goo	d Re	tail I	Prac	Good Retail Practices tices: Preventative measures to control the addition of patt and physical objects into foods.	nogens, che	emical	ls,
IN OUT N/A N/O Compliance Status	OUT	CDI	R VR	IN	OUT	N/A	N/O	Compliance Status	OUT	CDI	R VR
Supervision .2652				Safe			ľ.	,,			
□       □       □       accredited program and perform duties	2			28 🗆		X		Pasteurized eggs used where required	1 0.5 0		
Employee Health     .2652       2     X     Image: Comparison of the system	3 1.5			29 🛛				Water and ice from approved source	210	+	
2     A     responsibilities & reporting       3     X     Proper use of reporting, restriction & exclusion	215			30 🗆		X		Variance obtained for specialized processing methods	1 0.5 0		
Good Hygienic Practices .2652, .2653		뾔믜			Tem	per	atur	e Control .2653, .2654 Proper cooling methods used; adequate			
4 X Proper eating, tasting, drinking, or tobacco use	21			31 🛛				equipment for temperature control	1 0.5 0	+	
5 🕅 🗌 No discharge from eyes, nose or mouth	1 0.5	0					_	Plant food properly cooked for hot holding	1 0.5 0	+	
Preventing Contamination by Hands .2652, .2653, .2655, .2656				33 🗆			X	Approved thawing methods used	1 0.5 0		
6 🗆 🛛 Hands clean & properly washed	42	××		34 🛛				Thermometers provided & accurate	1 0.5 0		
7 🛛 🗆 🗆 🗠 No bare hand contact with RTE foods or pre- approved alternate procedure properly followed	3 1.5	0 🗆		Food	Ider	tific	catic				
8 I X Handwashing sinks supplied & accessible	21	××		- 35 🛛		n of	f Eor	Food properly labeled: original container ad Contamination .2652, .2653, .2654, .2656, .26	210		
Approved Source .2653, .2655				36 🛛				Insects & rodents not present; no unauthorized	210		
9         Image: Second contraction of the second contraction of	21			37 🗆				animals Contamination prevented during food	21×		
10 🗆 🖾 Food received at proper temperature	21	0 🗆						preparation, storage & display			_
11 🛛 🗌 Food in good condition, safe & unadulterated	21	0		38 🛛				Personal cleanliness	1 0.5 0		
12 D Required records available: shellstock tags, parasite destruction	21	0 🗆		39 🗆	X	_		Wiping cloths: properly used & stored	1 0.5 🗙		
Protection from Contamination .2653, .2654				40 🛛				Washing fruits & vegetables	1 0.5 0		
13 🛛 🗆 🗆 Food separated & protected	3 1.5	0		41 🛛		se o		ensils .2653, .2654 In-use utensils: properly stored	1 0.5 0		
14   Image: Second and Second an	3 🗙	0 🗆		42 🗆	X			Utensils, equipment & linens: properly stored,	1 0.5 🗙		
15 🛛 🗆 Proper disposition of returned, previously served, reconditioned, & unsafe food	21							dried & handled Single-use & single-service articles: properly			
Potentially Hazardous Food TIme/Temperature .2653				43 🗆	X			stored & used	1 0.5 🗙	+	
16 🛛 🗆 🗆 Proper cooking time & temperatures		이니		44 🛛			<b>_</b>	Gloves used properly	1 0.5 0		
17 🛛 🗆 🗠 Proper reheating procedures for hot holding	3 1.5 (	0				ina	Equ	ipment .2653, .2654, .2663 Equipment, food & non-food contact surfaces			
18       Image: Constraint of the second secon	3 1.5 (			45 🗌	×			approved, cleanable, properly designed, constructed, & used	2 🗙 0		
19       Image: Constraint of the second secon	3 1.5	0 🗆		46 🛛				Warewashing facilities: installed, maintained, & used; test strips	1 0.5 0		
20 🛛 🗆 🗆 Proper cold holding temperatures	3 1.5			47 🗆	X			Non-food contact surfaces clean	1 🗙 0		
21 🔲 🔲 🖾 Proper date marking & disposition	3 1.5			Physi	cal I	Faci	ilitie	s .2654, .2655, .2656		· · ·	
22 C X C Time as a public health control: procedures & records	21	XX		48 🛛				Hot & cold water available; adequate pressure	210		
Consumer Advisory .2653				49 🗆	×			Plumbing installed; proper backflow devices	<b>X</b> 10		
23 Consumer advisory provided for raw or undercooked foods	1 0.5			50 🛛				Sewage & waste water properly disposed	210		
Highly Susceptible Populations         .2653           24         Image: Constraint of the sector of th	315			51 🛛				Toilet facilities: properly constructed, supplied & cleaned	1 0.5 0		
24 🖾 🗀 🔄 offered		<u> </u>		52 🗆	×			Garbage & refuse properly disposed; facilities maintained	1 0.5 🗙		
25 🗌 🗌 🔀 Food additives: approved & properly used	1 0.5			53 🗆	×			Physical facilities installed, maintained & clean	1 🗙 0		
26 🗌 🔀 🗌 Toxic substances properly identified stored, & used	210	××		54 🗆	X			Meets ventilation & lighting requirements; designated areas used	1 0.5 🗙	+	
Conformance with Approved Procedures .2653, .2654, .2658		- <u></u>					L	~			
27 🗆 🗖 🔀 Compliance with variance, specialized process, reduced oxygen packing criteria or HACCP plan	21			1				Total Deductions	: 5.5		
North Carolina Department of Health & Human Servic				ublic Hea					CR Off	(CPH)	

			4	
anc	1	of		Food

## Comment Addendum to Food Establishment Inspection Report

Establishment Name: ATRIUM COTTAGE	Establishment ID: 3034160001					
Location Address:       100 HORIZON LANE         City:       RURAL HALL       State: NC         County:       34 Forsyth       Zip: 27045         Wastewater System:       Municipal/Community       On-Site System         Water Supply:       Municipal/Community       On-Site System         Permittee:       DAVID ADAMS         Telephone:       (336) 767-2411	<ul> <li>☑ Inspection □ Re-Inspection</li> <li>Comment Addendum Attached? □</li> <li>Email 1:</li> <li>Email 2:</li> <li>Email 3:</li> </ul>	Date: 01/26/2016 Status Code: <u>A</u> Category #: <u>IV</u>				
Temperature C	Temperature Observations					

ltem ServSafe	Location Peggy Steiner Exp.	Temp 0	Item	Location	Temp	Item	Location	Temp
pumpkin	steam table	131						
pumpkin	steam table	164						
green beans	stovetop	180						
hot water	3 comp. sink	148						
chicken salad	3 door refrigerator	38						
tomatos	walk-in cooler	39						
pumpkin	steam table	169						

**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.

6 2-301.14 When to Wash - P Employee touched face with gloved hands and handled bread without washing hands. Employees must wash hands after touching face or hair. Employee rewashed hands and bread discarded as corrective action. 2-301.12 Cleaning Procedure - P Employee washed hands but did not rinse hands thoroughly to remove soap. Employees must rinse hands thoroughly. Employee rinsed hands for additional time to remove soap as corrective action.

- 8 6-301.14 Handwashing Signage C Sign was not posted in the mens restroom. Handwashing signs must be posted to direct employees to wash hands at handwashing stations. Sign posted as corrective action.
- 14 4-601.11 (A) Equipment, Food-Contact Surfaces, Nonfood-Contact Surfaces, and Utensils P Two cups, bowl, six lids, bin, scoop, and pot required additonal cleaning. Utensils must be clean to sight and touch. Utensils sent to be rewashed as corrective action.

Person in Charge (Print & Sign):	Firs Peggy	Steiner	Last	PS
Regulatory Authority (Print & Sign)	Firs Anthony	Williams	Last	Astly Will.
REHS ID	: 1846 - Wil	iams, Tony		_ Verification Required Date: / /
REHS Contact Phone Number	: ( <u>336</u> ) <u>7</u>	<u>Ø3</u> - <u>3161</u>		
North Carolina Department		DHHS is an equal o 4	blic Health   Enviror pportunity employer. ent Inspection Report, 3	mental Health Section • Food Protection Program

## **Comment Addendum to Food Establishment Inspection Report**

Establishment Name: ATRIUM COTTAGE

Establishment ID: 3034160001

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.

3-501.19 Time as a Public Health Control - P,PF Pumpkin 131-164F on the steam table. Items using time as a public health control must be labeled with the time removed from temperature control if they are not maintained at 135F or above. Item reheated to 169F and time labeled as corrective action.

- 26 7-202.12 Conditions of Use P,PF Bleach and water used to clean food contact surfaces is not approved for use. Bleach must be used according to manufacturers specifications on the label. Contents emptied as corrective action.
- 37 3-307.11 Miscellaneous Sources of Contamination C Chicken for employees stored above food for residents. Store employee food below food for residents. Employee food relocated to bottom shelf as corrective action. / Drainboard for the 3 comp. sink stored next to prep table with coffee, napkins, and microwave. Install splashguard or relocate prep table min. 18 inches from this area.
- 39 3-304.14 Wiping Cloths, Use Limitation C Wiping cloth stored on counter out of sanitizer. Wet wiping cloths must be stored in sanitizer when not in use.
- 42 4-903.11 (A), (B) and (D) Equipment, Utensils, Linens and Single-Service and Single-Use Articles-Storing C Clean utensils stored on the drainboard used to store dirty utensils. Store clean utensils on clean surfaces. Clean containers used to store clean utensils.
- 43 4-904.11 Kitchenware and Tableware-Preventing Contamination C Bulk container of single service spoons are arranged in a manner that would not prevent contact with the mouthpart when handling. Arrange spoons in a manner to prevent contamination when handling.
- 45 4-205.10 Food Equipment, Certification and Classification C Outside walk-in cooler and freezer do not meet NSF or equivalent standards. Contact Nathan Ward at 703-3134 for details on obtaining compliance with these pieces of equipment. Electric can opener is not NSF or equivalent. Replace.

4-501.11 Good Repair and Proper Adjustment-Equipment - C Leg of the prep sink is sitting over the drain of the floor sink. Repair or replace. Shelving and cabinetry throughout the kitchen is loosing their finish or showing signs of rust. Refinish or replace. Replace chipped and cracked plastic lids and spoons.





Soell

## **Comment Addendum to Food Establishment Inspection Report**

Establishment Name: ATRIUM COTTAGE

Establishment ID: 3034160001

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 Clean inside packaged food containers and wooden cabinets.
- 49 5-205.15 System Maintained in Good Repair P Handwash sink is slow to drain and must be repaired within 10 days. Consult with the City of Winston Salem Plumbing Division to obtain all applicable permits as required before repairing. 5-203.14 Backflow Prevention Device, When Required - P Install ASSE 1022 backflow prevention devices on the tea and coffe urns. Install ASSE 1024 on ice machines.
- 52 5-501.114 Using Drain Plugs C Replace missing drainplug on dumpster.

- 53 6-501.12 Cleaning, Frequency and Restrictions C Clean floors in corners and behind equipment. Clean light fixture shield above ice machine.
- 6-303.11 Intensity-Lighting C Lighting 4-13Ft/c in the walk-in freezer. Provide 10 Ft/c in food storage areas. Lighting low at 45-46Ft/c at prep sink/coffee area. Provide 50Ft/c in this area. Replace burnt out bulbs.
   6-501.110 Using Dressing Rooms and Lockers C Coat stored above containers for packaged food. Store employee personal effects in designated area such as office.





Soell

Establishment Name: ATRIUM COTTAGE

Establishment ID: 3034160001

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

Establishment Name: ATRIUM COTTAGE

Establishment ID: 3034160001

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