

# Food Establishment Inspection Report

Score: 96Establishment Name: LJVM STAND 134Establishment ID: 3034020790Location Address: 2825 UNIVERSITY PKWY☒ Inspection ☐ Re-InspectionCity: WINSTON SALEMState: NCDate: 01 / 26 / 2016 Status Code: AZip: 27105County: 34 ForsythTime In: 06 : 50 <sup>am</sup><sub>pm</sub> Time Out: 7 : 30 <sup>am</sup><sub>pm</sub>Total Time: 40 minutesPermittee: WAKE FOREST UNIVERSITYCategory #: IITelephone: (336) 896-9809FDA Establishment Type: Fast Food RestaurantWastewater System: ☒ Municipal/Community ☐ On-Site SystemNo. of Risk Factor/Intervention Violations: 4Water Supply: ☒ Municipal/Community ☐ On-Site SupplyNo. 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 type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	PIC Present; Demonstration-Certification by accredited program and perform duties			<input checked="" type="checkbox"/>	<input type="checkbox"/>	<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			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper use of reporting, restriction & exclusion			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Good Hygienic Practices .2652, .2653										
4	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper eating, tasting, drinking, or tobacco use			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	No discharge from eyes, nose or mouth			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<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			<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input 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			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Handwashing sinks supplied & accessible			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Approved Source .2653, .2655										
9	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food obtained from approved source			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Food received at proper temperature			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food in good condition, safe & unadulterated			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Required records available: shellstock tags, parasite destruction			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Protection from Contamination .2653, .2654										
13	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food separated & protected			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Food-contact surfaces: cleaned & sanitized			<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
15	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper disposition of returned, previously served, reconditioned, & unsafe food			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Potentially Hazardous Food Time/Temperature .2653										
16	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Proper cooking time & temperatures			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
17	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Proper reheating procedures for hot holding			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
18	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Proper cooling time & temperatures			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
19	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Proper hot holding temperatures			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
20	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Proper cold holding temperatures			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
21	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Proper date marking & disposition			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
22	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Time as a public health control: procedures & records			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<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			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<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			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Chemical .2653, .2657										
25	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food additives: approved & properly used			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
26	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Toxic substances properly identified stored, & used			<input type="checkbox"/>	<input type="checkbox"/>	<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			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<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			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
29	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Water and ice from approved source			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
30	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Variance obtained for specialized processing methods			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<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			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
32	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Plant food properly cooked for hot holding			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
33	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Approved thawing methods used			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
34	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Thermometers provided & accurate			<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Food Identification .2653										
35	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food properly labeled: original container			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Prevention of Food Contamination .2652, .2653, .2654, .2656, .2657										
36	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Insects & rodents not present; no unauthorized animals			<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
37	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Contamination prevented during food preparation, storage & display			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
38	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Personal cleanliness			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
39	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Wiping cloths: properly used & stored			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
40	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Washing fruits & vegetables			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Proper Use of Utensils .2653, .2654										
41	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	In-use utensils: properly stored			<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
42	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Utensils, equipment & linens: properly stored, dried & handled			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
43	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Single-use & single-service articles: properly stored & used			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
44	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Gloves used properly			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
46	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Warewashing facilities: installed, maintained, & used; test strips			<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
47	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Non-food contact surfaces clean			<input type="checkbox"/>	<input type="checkbox"/>	<input 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			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
49	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Plumbing installed; proper backflow devices			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
50	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Sewage & waste water properly disposed			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
51	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Toilet facilities: properly constructed, supplied & cleaned			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
52	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Garbage & refuse properly disposed; facilities maintained			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
53	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Physical facilities installed, maintained & clean			<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
54	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Meets ventilation & lighting requirements; designated areas used			<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Total Deductions:							4			

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: LJVM STAND 134

Establishment ID: 3034020790

Location Address: 2825 UNIVERSITY PKWY

☒ Inspection ☐ Re-Inspection Date: 01/26/2016

City: WINSTON SALEM State: NC

Comment Addendum Attached? ☐ Status Code: A

County: 34 Forsyth Zip: 27105

Category #: II

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

Email 1: kamal.otunba@ovationsfs.com

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

Email 2:

Permittee: WAKE FOREST UNIVERSITY

Email 3:

Telephone: (336) 896-9809

## Temperature Observations

Item	Location	Temp	Item	Location	Temp	Item	Location	Temp
air temp.	refrigerator	30						
air temp.	refrigerator	43						

## 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.

- 1 2-102.12 Certified Food Protection Manager - C CFPM was not present during operation. CFPM must be present during hours of operation..
- 6 2-301.14 When to Wash - P Employee touched face with gloves but did not wash hands. Employee was not observed handling food after contamination occurred. Ensure employees are aware that hands must be washed after touching exposed body parts and before working with food.
- 14 4-501.114 Manual and Mechanical Warewashing Equipment, Chemical Sanitization-Temperature, pH, Concentration and Hardness - P Quaternary ammonium sanitizer from the dispenser in the 3 comp. sink measured weak at less than 200 ppm. Maintain quaternary ammonium sanitizer at 150-400ppm. Sanitizer in the 3 comp. sink manually mixed to 300-400 ppm during inspection. Contact service to repair dispenser to provide required concentration. Contact Tony Williams at 703-3161 within 10 days to verify repair.

Person in Charge (Print & Sign): Kamal *First* Otunba *Last*

Regulatory Authority (Print & Sign): Anthony *First* Williams *Last*

REHS ID: 1846 - Williams, Tony

Verification Required Date:     /     /    

REHS Contact Phone Number: ( 336 ) 703 - 3161



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: LJVM STAND 134

Establishment ID: 3034020790

## 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.



- 26 7-202.12 Conditions of Use - P,PF Quaternary ammonium in the sanitizer bottle was >400ppm. Use sanitizer according to the manufacturers instructions and intended use. Contents removed from bottle and added to sanitizer in 3 comp. sink.
- 34 4-302.12 Food Temperature Measuring Devices - PF FTMD was not provided in the stand. FTMD must be provided for checking potentially hazardous food items. However, no PHF items were served from the stand at the time of inspection. In the future, provide a FTMD if PHF items are sold.
- 36 6-501.112 Removing Dead or Trapped Birds, Insects, Rodents and other Pest - C Dead roach on the floor under the soda concentrate shelf. Remove dead pests from the facility.
- 41 3-304.12 In-Use Utensils, Between-Use Storage - C Ice bucket stored upright on the ice machine. Store ice bucket protected by inverting bucket when not in use.
- 46 4-302.14 Sanitizing Solutions, Testing Devices - PF Test strips were not available for checking sanitizer. Test strips must be provided for checking sanitizer strength.  
4-301.13 Drainboards - C Ice cream buckets stored in the vats of the 3 compartment sink and stacked in a manner preventing easy access and use. Drainboards, utensil racks, or tables large enough to accommodate all soiled and cleaned items that may accumulate during hours of operation shall be provided for necessary utensil holding before cleaning and after sanitizing.
- 53 6-501.12 Cleaning, Frequency and Restrictions - C Clean floors in the stand.
- 54 6-303.11 Intensity-Lighting - C Lighting low at 14Ft/c on the left side of the handwashing sinks in the men's restroom near stand. Provide 20Ft/c at all fixtures in the restrooms.



# Comment Addendum to Food Establishment Inspection Report

Establishment Name: LJVM STAND 134

Establishment ID: 3034020790

## 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: LJVM STAND 134

Establishment ID: 3034020790

## 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: LJVM STAND 134

Establishment ID: 3034020790

## 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

