

Food Establishment Inspection Report

Score: 98

Establishment Name: CANCER CENTER KITCHENEstablishment ID: 3034012429Location Address: 301 MEDICAL CENTER BLVDCity: WINSTON SALEM State: North CarolinaZip: 27157 County: 34 ForsythPermittee: WAKE FOREST BAPTIST HEALTHTelephone: (336) 713-3010☒ Inspection ☐ Re-Inspection ☐ Educational Visit**Wastewater System:**☒ Municipal/Community ☐ On-Site System**Water Supply:**☒ Municipal/Community ☐ On-Site SupplyDate: 04/10/2024 Status Code: ATime In: 11:00 AM Time Out: 1:30 PMCategory#: IVFDA Establishment Type: Full-Service RestaurantNo. of Risk Factor/Intervention Violations: 2No. of Repeat Risk Factor/Intervention Violations: 0**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
Supervision .2652					
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	
Employee Health .2652					
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
Good Hygienic Practices .2652, .2653					
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
Preventing Contamination by Hands .2652, .2653, .2655, .2656					
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
Approved Source .2653, .2655					
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
Protection from Contamination .2653, .2654					
15	<input checked="" type="checkbox"/> OUT/N/A/N/O	Food separated & protected	3	1.5	0
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
Potentially Hazardous Food Time/Temperature .2653					
18	<input checked="" type="checkbox"/> OUT/N/A/N/O	Proper cooking time & temperatures	3	1.5	0
19	<input checked="" type="checkbox"/> OUT/N/A/N/O	Proper reheating procedures for hot holding	3	1.5	0
20	<input checked="" type="checkbox"/> OUT/N/A/N/O	Proper cooling time & temperatures	3	1.5	0
21	<input checked="" type="checkbox"/> OUT/N/A/N/O	Proper hot holding temperatures	3	1.5	0
22	<input checked="" type="checkbox"/> IN OUT/N/A/N/O	Proper cold holding temperatures	3	1.5	X
23	<input checked="" type="checkbox"/> OUT/N/A/N/O	Proper date marking & disposition	3	1.5	0
24	<input checked="" type="checkbox"/> IN OUT	Time as a Public Health Control; procedures & records	3	1.5	0
Consumer Advisory .2653					
25	<input checked="" type="checkbox"/> IN OUT	Consumer advisory provided for raw/undercooked foods	1	0.5	0
Highly Susceptible Populations .2653					
26	<input checked="" type="checkbox"/> OUT/N/A	Pasteurized foods used; prohibited foods not offered	3	1.5	0
Chemical .2653, .2657					
27	<input checked="" type="checkbox"/> IN OUT	Food additives: approved & properly used	1	0.5	0
28	<input checked="" type="checkbox"/> OUT/N/A	Toxic substances properly identified stored & used	2	1	0
Conformance with Approved Procedures .2653, .2654, .2658					
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
Safe Food and Water .2653, .2655, .2658					
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
Food Temperature Control .2653, .2654					
33	<input checked="" type="checkbox"/> IN	Proper cooling methods used; adequate equipment for temperature control	1	0.5	X
34	<input checked="" type="checkbox"/> IN OUT	Plant food properly cooked for hot holding	1	0.5	0
35	<input checked="" type="checkbox"/> OUT	Approved thawing methods used	1	0.5	0
36	<input checked="" type="checkbox"/> OUT	Thermometers provided & accurate	1	0.5	0
Food Identification .2653					
37	<input checked="" type="checkbox"/> OUT	Food properly labeled: original container	2	1	0
Prevention of Food Contamination .2652, .2653, .2654, .2656, .2657					
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
Proper Use of Utensils .2653, .2654					
43	<input checked="" type="checkbox"/> IN	In-use utensils: properly stored	1	0	X
44	<input checked="" type="checkbox"/> OUT	Utensils, equipment & linens: properly stored, dried & handled	1	0.5	0
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
Utensils and Equipment .2653, .2654, .2663					
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"/> OUT	Warewashing facilities: installed, maintained & used; test strips	1	0.5	0
49	<input checked="" type="checkbox"/> IN	Non-food contact surfaces clean	1	0.5	X
Physical Facilities .2654, .2655, .2656					
50	<input checked="" type="checkbox"/> OUT	Hot & cold water available; adequate pressure	1	0.5	0
51	<input checked="" type="checkbox"/> IN	Plumbing installed; proper backflow devices	2	1	X
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
TOTAL DEDUCTIONS:					2



Comment Addendum to Food Establishment Inspection Report

Establishment Name: CANCER CENTER KITCHEN
 Location Address: 301 MEDICAL CENTER BLVD
 City: WINSTON SALEM State: NC
 County: 34 Forsyth Zip: 27157
 Wastewater System: ☒ Municipal/Community ☐ On-Site System
 Water Supply: ☒ Municipal/Community ☐ On-Site System
 Permittee: WAKE FOREST BAPTIST HEALTH
 Telephone: (336) 713-3010

Establishment ID: 3034012429
☒ Inspection ☐ Re-Inspection Date: 04/10/2024
☐ Educational Visit Status Code: A
 Comment Addendum Attached? ☒ Category #: IV
 Email 1: wcbailey@wakehealth.edu
 Email 2: amilot@wakehealth.edu
 Email 3:

Temperature Observations

Item/Location	Temp	Item/Location	Temp	Item/Location	Temp
stir fry vegetables (cut greens) @ 11:13/walk in cooler	47	pot roast veggies/make unit	38		
egg noodles @11:13/walk in cooler	44	fruit / melon cup/reach in	37		
stir fry vegetables @ 11:58/walk in cooler	39	prepared salads/reach in	39		
egg noodles @ 11:58/walk in cooler	40	salmon/walk in cooler	40		
cantelope/walk in cooler	37	hot water rinse/dish machine	163.7		
roast beef/walk in cooler	37	cheeseburger/final cook	188		
chx salad /walk in cooler	40	hot water /3-comp sink 145	145		
chicken/hot hold	171	sink/surface sani/wiping cloth bucket	700		
grits/hot hold	140				
pork/hot hold	172				
rice/steam table	180				
soup/steam table	173				
pork/reheat	165				
sh cheese/cold drawer	42				
ham/cold drawer	42				
utensil water/grill top	80				
pot roast/cold drawer	38				
noodles/cold drawer	41				
raw chx/cold drawer	39				
sliced tomato/sand unit	39				

First
 Person in Charge (Print & Sign): Wiley

Last
 Bailey

First
 Regulatory Authority (Print & Sign): Leslie

Last
 Easter

REHS ID: 1908 - Easter, Leslie

Verification Dates: Priority:

Priority Foundation:

Core:

REHS Contact Phone Number: (336) 703-3138

Authorize final report to
 be received via Email:



North Carolina Department of Health & Human Services

Page 2 of Division of Public Health • Environmental Health Section
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 Food Establishment Inspection Report, 12/2023

• Food Protection Program



Comment Addendum to Inspection Report

Establishment Name: CANCER CENTER KITCHEN

Establishment ID: 3034012429

Date: 04/10/2024 **Time In:** 11:00 AM **Time Out:** 1:30 PM

Certifications

Name	Certificate #	Type	Issue Date	Expiration Date
Wiley Bailey		Food Service		06/16/2026

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.

- 16 4-601.11 (A) Equipment, Food-Contact Surfaces, Nonfood Contact Surfaces, and Utensils (Pf). Soiled plastic black bowl, ceramic boats, metal pans stored with clean utensils; pizza slide has food build up on slide. Food contact surfaces shall be clean to sight and touch. CDI - items returned to warewashing for further cleaning and new pizza slide to be obtained.
- 22 3-501.16 (A) (2) and (B) Time / Temperature Control for Safety Food, Hot and Cold Holding (P). Cut cantaloupe and honeydew were overstacked in the salad unit and were above 41F on top. Cold TCS foods shall be maintained at 41F or below; do not overstack containers. CDI - melon above the fill line on pans was removed and placed in walk in cooler; observed temperature of 41F during inspection.
- 33 3-501.15 Cooling Methods (Pf). Stir fry vegetables and cooked noodles received today from main kitchen were above 41F (see temp log). Items were tightly covered in walk in cooler. Allow foods to cool quickly by loosely covering or venting containers, using shallow pans, thin portions, rapid cooling equipment, etc. CDI - containers were vented and cooled rapidly.
- 43 3-304.12 In-Use Utensils, Between-Use Storage (C). Utensils on grill in standing water of 80-90F. Store in-use utensils in a clean, dry place, in food with handles out, in 135F or greater water or in running water which quickly moves food particles to the drain. CDI - pans placed on active heat and water heated to 157F.
- 49 4-601.11 (B) and (C) Equipment, Food-Contact Surfaces, Nonfood Contact Surfaces, and Utensils (C). Upper shelf of shelving unit soiled with dust (under HVAC vent); hood vents over flat top soiled. Nonfood contact surfaces of equipment shall be cleaned at a frequency to prevent accumulation of debris.
- 51 5-205.15 (B) System maintained in good repair. Substantial leak in drain pipe of dump sink. CDI - leak was repaired.