

# Food Establishment Inspection Report

Score: 98.5

Establishment Name: CREEKSIDE MANOR

Establishment ID: 3034160013

Location Address: 6206 REIDSVILLE RD

Inspection  Re-Inspection

City: KERNERSVILLE

State: NC

Date: 03 / 15 / 2018 Status Code: A

Zip: 27284 County: 34 Forsyth

Time In: 09 : 30  am  pm Time Out: 11 : 30  am  pm

Permittee: CREEKSIDE OF FORSYTH, INC.

Total Time: 2 hrs 0 minutes

Telephone: (336) 766-6054

Category #: IV

Wastewater System:  Municipal/Community  On-Site System

FDA Establishment Type: Nursing Home

Water Supply:  Municipal/Community  On-Site Supply

No. of Risk Factor/Intervention Violations: 3

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	NO	Compliance Status	OUT	CDI
<b>Supervision</b> .2652						
1	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	PIC Present; Demonstration-Certification by accredited program and perform duties	2	0
<b>Employee Health</b> .2652						
2	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Management, employees knowledge; responsibilities & reporting	3	13
3	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper use of reporting, restriction & exclusion	3	13
<b>Good Hygienic Practices</b> .2652, .2653						
4	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper eating, tasting, drinking, or tobacco use	2	10
5	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	No discharge from eyes, nose or mouth	1	03
<b>Preventing Contamination by Hands</b> .2652, .2653, .2655, .2656						
6	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Hands clean & properly washed	4	20
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	13
8	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Handwashing sinks supplied & accessible	2	10
<b>Approved Source</b> .2653, .2655						
9	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food obtained from approved source	2	10
10	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Food received at proper temperature	2	10
11	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food in good condition, safe & unadulterated	2	10
12	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Required records available: shellstock tags, parasite destruction	2	10
<b>Protection from Contamination</b> .2653, .2654						
13	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Food separated & protected	3	13
14	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Food-contact surfaces: cleaned & sanitized	3	13
15	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper disposition of returned, previously served, reconditioned, & unsafe food	2	10
<b>Potentially Hazardous Food Time/Temperature</b> .2653						
16	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper cooking time & temperatures	3	13
17	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Proper reheating procedures for hot holding	3	13
18	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Proper cooling time & temperatures	3	13
19	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Proper hot holding temperatures	3	13
20	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper cold holding temperatures	3	13
21	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Proper date marking & disposition	3	13
22	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Time as a public health control: procedures & records	2	10
<b>Consumer Advisory</b> .2653						
23	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Consumer advisory provided for raw or undercooked foods	1	03
<b>Highly Susceptible Populations</b> .2653						
24	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Pasteurized foods used; prohibited foods not offered	3	13
<b>Chemical</b> .2653, .2657						
25	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food additives: approved & properly used	1	03
26	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Toxic substances properly identified stored, & used	2	10
<b>Conformance with Approved Procedures</b> .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	10

Good Retail Practices						
Good Retail Practices: Preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.						
IN	OUT	N/A	NO	Compliance Status	OUT	CDI
<b>Safe Food and Water</b> .2653, .2655, .2658						
28	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Pasteurized eggs used where required	1	03
29	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Water and ice from approved source	2	10
30	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Variance obtained for specialized processing methods	1	03
<b>Food Temperature Control</b> .2653, .2654						
31	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper cooling methods used; adequate equipment for temperature control	1	03
32	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Plant food properly cooked for hot holding	1	03
33	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Approved thawing methods used	1	03
34	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Thermometers provided & accurate	1	03
<b>Food Identification</b> .2653						
35	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food properly labeled: original container	2	10
<b>Prevention of Food Contamination</b> .2652, .2653, .2654, .2656, .2657						
36	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Insects & rodents not present; no unauthorized animals	2	10
37	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Contamination prevented during food preparation, storage & display	2	10
38	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Personal cleanliness	1	03
39	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Wiping cloths: properly used & stored	1	03
40	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Washing fruits & vegetables	1	03
<b>Proper Use of Utensils</b> .2653, .2654						
41	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	In-use utensils: properly stored	1	03
42	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Utensils, equipment & linens: properly stored, dried & handled	1	03
43	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Single-use & single-service articles: properly stored & used	1	03
44	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Gloves used properly	1	03
<b>Utensils and Equipment</b> .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	2	10
46	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Warewashing facilities: installed, maintained, & used; test strips	1	03
47	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Non-food contact surfaces clean	1	03
<b>Physical Facilities</b> .2654, .2655, .2656						
48	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Hot & cold water available; adequate pressure	2	10
49	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Plumbing installed; proper backflow devices	2	10
50	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Sewage & waste water properly disposed	2	10
51	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Toilet facilities: properly constructed, supplied & cleaned	1	03
52	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Garbage & refuse properly disposed; facilities maintained	1	03
53	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Physical facilities installed, maintained & clean	1	03
54	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Meets ventilation & lighting requirements; designated areas used	1	03
<b>Total Deductions:</b>					1.5	



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 Telephone: (336) 766-6054

Establishment ID: 3034160013  
 Inspection  Re-Inspection Date: 03/15/2018  
 Comment Addendum Attached?  Status Code: A  
 Category #: IV  
 Email 1: CREEKSIDEMANOR@AOL.COM  
 Email 2:  
 Email 3:

## Temperature Observations

**Effective January 1, 2019 Cold Holding will change to 41 degrees**

Item	Location	Temp	Item	Location	Temp	Item	Location	Temp
Servsafe	M.Veney6/21/21	0						
Tuna salad	reach in cooler	45						
Milk	reach in cooler	44						
Hot water	3 compartment sink	138						
Chlorine	sanitizer bucket	50						
Chlorine	warewashing machine	100						
Rice	final cook	178						
Yogurt	surrounded by ice bath	35						

## 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.

- 13 3-302.11 Packaged and Unpackaged Food-Separation, Packaging, and Segregation - P Cut cooked ham stored directly on top raw ground beef in the reach in cooler. Store food according to cooking temperatures. CDI: Person in charge discarded the ham. ✓ Spell
- 14 4-601.11 (A) Equipment, Food-Contact Surfaces, Nonfood-Contact Surfaces, and Utensils - P 0 points. One large metal pan was soiled. Food-contact surfaces of equipment and utensils shall be clean to sight and touch. CDI: Large pan was soaking in the 3 compartment sink.
- 21 3-501.18 Ready-To-Eat Potentially Hazardous Food (Time/Temperature Control for Safety Food), Disposition - P 0 points. Bags of cut cooked ham with dates 2/9, 2/20, and 2/28 inside the reach in cooler. Person in charge stated the ham was taken from the freezer yesterday. Food shall be discarded if it is in a container or package that does not bear a date or day or is appropriately marked with a date or day that exceeds 42 F to 45 F for 4 days OR 41 F or less for 7 days. Ready-to-eat, potentially hazardous food prepared and packaged by food processing plant shall be clearly marked at time the original package is opened in a food establishment if held for more than 24 hours, to indicate the date or day by which food shall be discarded based on 4 days if 42 F Text to 45 F OR 7 days if 41 F or less. CDI: Spoke with person in charge about date marking. Person in charge discarded the ham.

Person in Charge (Print & Sign): First Melia Last Veney

Regulatory Authority (Print & Sign): First Jill Last Sakamoto REHSI

*Melia Veney*

*Jill Sakamoto*

Verification Required Date: \_\_\_ / \_\_\_ / \_\_\_

REHS ID: 2685 - Jill Sakamoto

REHS Contact Phone Number: ( 336 ) 703 - 3137



North Carolina Department of Health & Human Services • Division of Public Health • Environmental Health Section • Food Protection Program  
 DHHS is an equal opportunity employer.



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- 52 5-501.114 Using Drain Plugs - C 0 points. No drain plug on the waste dumpster. Drains in receptacles and waste handling units shall have drain plugs in place.
- 54 6-202.11 Light Bulbs, Protective Shielding - C A shield missing on one light bulb by the stove in the kitchen. Light bulbs shall be shielded, coated, or otherwise shatter-resistant in areas where there is exposed food; clean equipment, utensils, and linens.  
//6-303.11 Intensity-Lighting - C Employee restroom lighting 5 to 8 foot candles at the handwashing sink and toilet. Lighting shall be at least 20 foot candles at handwashing sinks and toilet rooms. 0 points.



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