

Food Establishment Inspection Report

Score: 94.5

Establishment Name: DOWNTOWN DELI & CAFE

Establishment ID: 3034011980

Location Address: 1 WEST 4TH STREET

Inspection Re-Inspection

City: WINSTON SALEM

State: NC

Date: 06 / 21 / 2017 Status Code: A

Zip: 27101

County: 34 Forsyth

Time In: 09 : 10 am pm

Time Out: 11 : 40 am pm

Total Time: 2 hrs 30 minutes

Permittee: TRIHARD, INC.

Category #: IV

Telephone: (336) 721-1750

FDA Establishment Type: Full-Service Restaurant

Wastewater System: Municipal/Community On-Site System

No. of Risk Factor/Intervention Violations: 5

Water Supply: Municipal/Community On-Site Supply

No. of Repeat Risk Factor/Intervention Violations: 3

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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	PIC Present; Demonstration-Certification by accredited program and perform duties			2	0	<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			3	1.5	0	<input type="checkbox"/>
3	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper use of reporting, restriction & exclusion			3	1.5	0	<input type="checkbox"/>
Good Hygienic Practices .2652, .2653										
4	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Proper eating, tasting, drinking, or tobacco use			2	1	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
5	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	No discharge from eyes, nose or mouth			1	0.5	0	<input type="checkbox"/>
Preventing Contamination by Hands .2652, .2653, .2655, .2656										
6	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Hands clean & properly washed			4	2	0	<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			3	1.5	0	<input type="checkbox"/>
8	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Handwashing sinks supplied & accessible			2	<input checked="" type="checkbox"/>	0	<input checked="" type="checkbox"/>
Approved Source .2653, .2655										
9	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food obtained from approved source			2	1	0	<input type="checkbox"/>
10	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Food received at proper temperature			2	1	0	<input type="checkbox"/>
11	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food in good condition, safe & unadulterated			2	1	0	<input type="checkbox"/>
12	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Required records available: shellstock tags, parasite destruction			2	1	0	<input type="checkbox"/>
Protection from Contamination .2653, .2654										
13	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food separated & protected			3	1.5	0	<input type="checkbox"/>
14	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Food-contact surfaces: cleaned & sanitized			3	1.5	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
15	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper disposition of returned, previously served, reconditioned, & unsafe food			2	1	0	<input type="checkbox"/>
Potentially Hazardous Food Time/Temperature .2653										
16	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Proper cooking time & temperatures			3	1.5	0	<input type="checkbox"/>
17	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper reheating procedures for hot holding			3	1.5	0	<input type="checkbox"/>
18	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Proper cooling time & temperatures			3	1.5	0	<input type="checkbox"/>
19	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Proper hot holding temperatures			<input checked="" type="checkbox"/>	1.5	0	<input checked="" type="checkbox"/>
20	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Proper cold holding temperatures			3	1.5	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
21	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper date marking & disposition			3	1.5	0	<input type="checkbox"/>
22	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Time as a public health control: procedures & records			2	1	0	<input type="checkbox"/>
Consumer Advisory .2653										
23	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Consumer advisory provided for raw or undercooked foods			1	0.5	0	<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			3	1.5	0	<input type="checkbox"/>
Chemical .2653, .2657										
25	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Food additives: approved & properly used			1	0.5	0	<input type="checkbox"/>
26	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Toxic substances properly identified stored, & used			2	1	0	<input 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			2	1	0	<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			1	0.5	0	<input type="checkbox"/>
29	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Water and ice from approved source			2	1	0	<input type="checkbox"/>
30	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Variance obtained for specialized processing methods			1	0.5	0	<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			1	0.5	0	<input type="checkbox"/>
32	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Plant food properly cooked for hot holding			1	0.5	0	<input type="checkbox"/>
33	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Approved thawing methods used			1	0.5	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
34	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Thermometers provided & accurate			1	0.5	0	<input type="checkbox"/>
Food Identification .2653										
35	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Food properly labeled: original container			2	1	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Prevention of Food Contamination .2652, .2653, .2654, .2656, .2657										
36	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Insects & rodents not present; no unauthorized animals			2	1	0	<input type="checkbox"/>
37	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Contamination prevented during food preparation, storage & display			2	1	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
38	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Personal cleanliness			1	0.5	0	<input type="checkbox"/>
39	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Wiping cloths: properly used & stored			1	<input checked="" type="checkbox"/>	0	<input checked="" type="checkbox"/>
40	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Washing fruits & vegetables			1	0.5	0	<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			1	<input checked="" type="checkbox"/>	0	<input type="checkbox"/>
42	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Utensils, equipment & linens: properly stored, dried & handled			1	0.5	<input checked="" type="checkbox"/>	<input type="checkbox"/>
43	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Single-use & single-service articles: properly stored & used			1	0.5	0	<input type="checkbox"/>
44	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Gloves used properly			1	0.5	0	<input type="checkbox"/>
Utensils and Equipment .2653, .2654, .2663										
45	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Equipment, food & non-food contact surfaces approved, cleanable, properly designed, constructed, & used			2	1	<input checked="" type="checkbox"/>	<input type="checkbox"/>
46	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Warewashing facilities: installed, maintained, & used; test strips			1	0.5	0	<input type="checkbox"/>
47	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Non-food contact surfaces clean			1	0.5	0	<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			2	1	0	<input type="checkbox"/>
49	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Plumbing installed; proper backflow devices			2	1	0	<input type="checkbox"/>
50	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Sewage & waste water properly disposed			2	1	0	<input type="checkbox"/>
51	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Toilet facilities: properly constructed, supplied & cleaned			1	0.5	0	<input type="checkbox"/>
52	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Garbage & refuse properly disposed; facilities maintained			1	0.5	0	<input type="checkbox"/>
53	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Physical facilities installed, maintained & clean			1	0.5	<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			1	<input checked="" type="checkbox"/>	0	<input checked="" type="checkbox"/>
Total Deductions:							5.5			



Comment Addendum to Food Establishment Inspection Report

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 City: WINSTON SALEM State: NC
 County: 34 Forsyth Zip: 27101
 Wastewater System: Municipal/Community On-Site System
 Water Supply: Municipal/Community On-Site System
 Permittee: TRIHARD, INC.
 Telephone: (336) 721-1750

Establishment ID: 3034011980
 Inspection Re-Inspection Date: 06/21/2017
 Comment Addendum Attached? Status Code: A
 Category #: IV
 Email 1: leecharville@yahoo.com
 Email 2:
 Email 3:

Temperature Observations

Item	Location	Temp	Item	Location	Temp	Item	Location	Temp
servsafe	Lee Charleville 8-25-19	00	lettuce	reach in	45	hot water	three comp sink	139
chicken salad	upright cooler	39	potato salad	reach in	44	chili	reheat	179
tomato soup	hot hold	159	cantaloupe	reach in	42	grits	steamer unit	103
slaw	make unit	45	lettuce	reach in	45	turkey	steamer unit	98
potato salad	make unit	44	ambient	dessert cooler	45	gravy	steamer unit	109
hot dog	reach in cooler	39	cheese	walk in cooler	41	chili	steamer unit	76
ham	make unit	45	chlorine	three comp sink	100	pork sausage	steamer unit	101
ham	reach in	45	chlorine	wiping cloth bucket	50	grilled onions	steamer unit	69

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.

- 4 2-401.11 Eating, Drinking, or Using Tobacco - C: 0 pts. REPEAT: Employee drink sitting on prep surface. Employee drinks shall be stored to prevent contamination of food and clean equipment. CDI: Drink moved.
- 8 6-301.11 Handwashing Cleanser, Availability - PF: REPEAT: No soap present at only handsink in back kitchen area. Handwashing cleanser shall be available at all handsinks at all times. CDI: Soap dispenser replaced.
- 14 4-602.11 Equipment Food-Contact Surfaces and Utensils-Frequency - P: 0 pts. Four beverage nozzles soiled. Food contact surfaces of equipment and utensils shall be cleaned as frequently as necessary. CDI: Removed and sent to be washed.



Person in Charge (Print & Sign): Scott Nifong
 First Last

Regulatory Authority (Print & Sign): Michelle Bell REHS
 First Last

Scott Nifong
Michelle Bell REHS

REHS ID: 2464 - Bell, Michelle

Verification Required Date: / /

REHS Contact Phone Number: (336) 703 - 3141



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- 19 3-501.16 (A)(1) Potentially Hazardous Food (Time/Temperature Control for Safety Food), Hot and Cold Holding - P: REPEAT: Grits 103F, turkey sausage 98F, gravy 109F, chili 76F, pork sausage 101F, grilled mushrooms 80F, and grilled onions 69F. Potentially hazardous foods shall be maintained at 135F and above. CDI: All reheated above 165F.
- 20 3-501.16 (A)(2) and (B) Potentially Hazardous Food (Time/Temperature Control for Safety Food), Hot and Cold Holding - P: 0 pts. Sliced tomatoes overstacked in make unit 45-50F. Potentially hazardous foods shall be maintained at 45F and below. CDI: Tomatoes removed.
- 33 3-501.13 Thawing - C: 0 pts. REPEAT: Tuna steaks thawing in vacuum sealed packages with "remove from packaging prior to thawing" warning. Manufacturer's instructions shall be adhered to when thawing. CDI: Steaks removed from packages.
- 35 3-302.12 Food Storage Containers Identified with Common Name of Food - C: 0 pts. REPEAT: Sugar in dessert area not labeled. Ingredients that are not easily recognizable shall be labeled with common name of food. Label.
- 37 3-305.12 Food Storage, Prohibited Areas - C: 0 pts. REPEAT: Condensate lines in walk in cooler and freezer have been wrapped with flexible foam. Wrap condensate lines in pvc flexible jacketing to prevent contamination during leakage.
- 39 3-304.14 Wiping Cloths, Use Limitation - C: Chlorine sanitizer at 0 ppm and bucket sitting on prep surface. Wet wiping cloths shall be stored submerged in an effective sanitizer and bucket stored to prevent contamination of food and clean equipment and off the floor. CDI: Bucket re-made to 50 ppm. Change procedure to get towels wet in effective sanitizer first, then replace solution with fresh sanitizer to maintain effectiveness for longer periods of time.
- 41 3-304.12 In-Use Utensils, Between-Use Storage - C: Tongs stored on splashguard of handsink. Utensils shall be stored on a clean and sanitized surface when between uses. CDI: Tongs sent to be washed.



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Spell

- 42 4-901.11 Equipment and Utensils, Air-Drying Required - C: 0 pts. One stack of containers stacked wet. Equipment and utensils shall be completely air-dried after washing, rinsing, and sanitized prior to stacking.
4-903.11 (A), (B) and (D) Equipment, Utensils, Linens and Single-Service and Single-Use Articles-Storing - C: Oven rack on floor. Maintain utensils at least 6 inches above the floor.
- 45 4-501.11 Good Repair and Proper Adjustment-Equipment - C: 0 pts. The following equipment is in need of repair: laminate cabinet under beverage station, three torn gaskets to doors of front line make unit, and leak present from fan in walk in freezer. Equipment shall be maintained in good repair.
- 53 6-501.12 Cleaning, Frequency and Restrictions - C: 0 pts. Floor sink by fryer area, floor under ice machine, and ceiling above soup station soiled. Maintain floors and ceilings clean.
- 54 6-303.11 Intensity-Lighting - C: REPEAT: Lighting low in the following areas (in fctd): beverage station (customer self-service) 3-14, cookline 20-40, fryer line 33-63, men's toilet 10/urinal 13. Increase lighting to meet 20 fctd in customer self-service areas and at plumbing fixtures in restrooms and 50 fctd in areas of food prep.



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✓
Spell

