

Food Establishment Inspection Report

Score: 97

Establishment Name: WAKE FOREST COMMISSARY

Establishment ID: 3034020856

Location Address: 3730 UNIVERSITY PARKWAY

Inspection Re-Inspection

City: WINSTON SALEM

State: NC

Date: 09/17/2021

Status Code: A

Zip: 27106

County: 34 Forsyth

Time In: 10:45 AM

Time Out: 12:55 PM

Permittee: WAKE FOREST UNIVERSITY

Total Time: 2 hrs 10 min

Telephone: (336) 758-3340

Category #: IV

Wastewater System: Municipal/Community On-Site System

FDA Establishment Type: _____

Water Supply: Municipal/Community On-Site Supply

No. of Risk Factor/Intervention Violations: 2

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

| 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/C | 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 | 03 | 0 | | |
| 29 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Water and ice from approved source | 2 | 1 | 0 | | |
| 30 | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Variance obtained for specialized processing methods | 1 | 03 | 0 | | |
| Food Temperature Control .2653, .2654 | | | | | | | | | |
| 31 | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | Proper cooling methods used; adequate equipment for temperature control | 1 | 03 | 0 | | |
| 32 | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Plant food properly cooked for hot holding | 1 | 03 | 0 | | |
| 33 | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Approved thawing methods used | 1 | 03 | 0 | | |
| 34 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Thermometers provided & accurate | 1 | 03 | 0 | | |
| Food Identification .2653 | | | | | | | | | |
| 35 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Food properly labeled: original container | 2 | 1 | 0 | | |
| 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 | | |
| 37 | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | Contamination prevented during food preparation, storage & display | 2 | 1 | 0 | | |
| 38 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Personal cleanliness | 1 | 03 | 0 | | |
| 39 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Wiping cloths: properly used & stored | 1 | 03 | 0 | | |
| 40 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Washing fruits & vegetables | 1 | 03 | 0 | | |
| Proper Use of Utensils .2653, .2654 | | | | | | | | | |
| 41 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | In-use utensils: properly stored | 1 | 03 | 0 | | |
| 42 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Utensils, equipment & linens: properly stored, dried & handled | 1 | 03 | 0 | | |
| 43 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Single-use & single-service articles: properly stored & used | 1 | 03 | 0 | | |
| 44 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Gloves used properly | 1 | 03 | 0 | | |
| 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 | 2 | 1 | 0 | | |
| 46 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Warewashing facilities: installed, maintained, & used; test strips | 1 | 03 | 0 | | |
| 47 | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | Non-food contact surfaces clean | 1 | 03 | 0 | | |
| 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 | | |
| 49 | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | Plumbing installed; proper backflow devices | 2 | 1 | 0 | | |
| 50 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Sewage & waste water properly disposed | 2 | 1 | 0 | | |
| 51 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Toilet facilities: properly constructed, supplied & cleaned | 1 | 03 | 0 | | |
| 52 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Garbage & refuse properly disposed; facilities maintained | 1 | 03 | 0 | | |
| 53 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Physical facilities installed, maintained & clean | 1 | 03 | 0 | | |
| 54 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Meets ventilation & lighting requirements; designated areas used | 1 | 03 | 0 | | |
| Total Deductions: | | | | | 3 | | | | |



North Carolina Department of Health & Human Services

Division of Public Health • Environmental Health Section

Food Protection Program



Comment Addendum to Food Establishment Inspection Report

Establishment Name: WAKE FOREST COMMISSARY
Location Address: 3730 UNIVERSITY PARKWAY
City: WINSTON SALEM **State:** NC
County: 34 Forsyth **Zip:** 27106
Wastewater System: Municipal/Community On-Site System
Water Supply: Municipal/Community On-Site System
Permittee: WAKE FOREST UNIVERSITY
Telephone: (336) 758-3340

Establishment ID: 3034020856
 Inspection Re-Inspection **Date:** 09/17/2021
Comment Addendum Attached? **Status Code:** A
Water sample taken? Yes No **Category #:** IV
Email 1: day-robin@harvesttableculinary.com
Email 2:
Email 3:

Temperature Observations

Effective January 1, 2019 Cold Holding is now 41 degrees or less

| Item | Location | Temp | Item | Location | Temp | Item | Location | Temp |
|-----------------|---------------------------|-------|------|----------|------|------|----------|------|
| Sean Devine | 1-5-23 | 0.0 | | | | | | |
| tamarind sauce | right upright | 41.0 | | | | | | |
| cream cheese | left upright cooler | 41.0 | | | | | | |
| gouda | " | 52.0 | | | | | | |
| american cheese | " | 44.0 | | | | | | |
| sour cream | " | 48.0 | | | | | | |
| heavy cream | " | 52.0 | | | | | | |
| mozzarella | " | 52.0 | | | | | | |
| goat cheese | " | 52.0 | | | | | | |
| yogurt | " | 46.0 | | | | | | |
| quinoa salad | walk in | 41.0 | | | | | | |
| melon | campus kitchen cooler | 39.0 | | | | | | |
| chicken | at 11:05 | 76.0 | | | | | | |
| chicken | at 11:30 | 74.0 | | | | | | |
| rice | at 11:06 | 109.0 | | | | | | |
| rice | at 11:30 | 105.0 | | | | | | |
| turkey | inner walk in | 40.0 | | | | | | |
| refried beans | " | 39.0 | | | | | | |
| final rinse | dish machine | 180.5 | | | | | | |
| quat | dispenser-hose and 3 comp | 200.0 | | | | | | |

Person in Charge (Print & Sign): _____
First *Last*
Regulatory Authority (Print & Sign): Nora Sykes



REHS ID: 2664 - Sykes, Nora **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
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Comment Addendum to Food Establishment Inspection Report

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Establishment ID: 3034020856

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.

- 18 3-501.14 Cooling - P- Pan of chicken and pan of rice inside of walk in cooler not meeting cooling parameters. Quickly cool cooked foods within 2 hours from 135F to 70F; and within a total of 6 hours from 135F to 45F. CDI-Methods of cooling changed, and foods placed inside of walk in freezer to cool faster.
- 20 3-501.16 (A)(2) and (B) Potentially Hazardous Food (Time/Temperature Control for Safety Food), Hot and Cold Holding - P- Dairy upright cooler overstacked with product and foods measured within the range of 41-53F. Bottom of cooler was the warmest part, with the foods on top shelves at 41F or below. Maintain potentially hazardous foods at 41F or below in all parts of the foods. CDI-Assessment of risk performed on each food. Foods with low risk for illness moved to walk in cooler to cool. Food with high risk based on time out of temperature and inherent risk discarded such as goat cheese, fresh mozzarella, soft cheeses, milk cartons with delivery date of 9/9. Use milk delivered previous day on this day and discard unused product by end of day. Management will assess each food when opened for any signs of spoilage and discard if needed. Majority of foods were packaged and unopened. Cooler emptied, ambient at 32F when empty. Management may place foods back in cooler if foods are at or below 41F. Take temperatures in coolers daily.
- 31 3-501.15 Cooling Methods - PF- Pan of chicken and pan of rice in walk in cooler tightly wrapped and not meeting cooling parameters. Quickly cool foods. Use methods such as open/vented shallow pans, large ice baths and active stirring. Cold air must flow around product to remove the heat. CDI-Foods placed in shallow pans into freezer for faster cooling.
- 37 3-305.14 Food Preparation - C- Brownies being cut on clean side drain board of 3 comp sink. During preparation unpackaged food shall be protected from environmental sources of contamination. CDI-Employee relocated to prep table. Do not use warewashing sink for food prep.
- 47 4-601.11 (B) and (C) Equipment, Food-Contact Surfaces, Nonfood-Contact Surfaces, and Utensils - C- Clean top steamer and upright hot holding cabinet.
- 49 5-205.15 (B) System maintained in good repair - C- Lid cracked on sanitizing dispensing unit at 3 comp sink. Repair.//5-202.14 Backflow Prevention Device, Design Standard - P- Three threaded connections at can wash. One connected to chemical dispenser with built in backflow, one open, and one connected to hose with spray nozzle. A backflow or backsiphonage prevention device installed on a water supply system shall standards for construction, installation, maintenance, inspection, and testing for that specific application and type of device. CDI- Spray nozzle removed, additional plumbing attachment removed. All connections/potential connections are now protected by backflow prevention devices. If spray nozzle is to remain attached, install continuous pressure rated prevention device.