

Food Establishment Inspection Report

Score: 95.5

Establishment Name: FINNIGANS WAKE

Establishment ID: 3034014041

Location Address: 620 TRADE STREET

☒ Inspection ☐ Re-Inspection

City: WINSTON SALEM

State: NC

Date: 05 / 20 / 2019 Status Code: A

Zip: 27101 County: 34 Forsyth

Time In: 12 : 45 ☐ am ☒ pm Time Out: 03 : 30 ☐ am ☒ pm

Permittee: FINNIGANS WAKE INC

Total Time: 2 hrs 45 minutes

Telephone: (336) 723-0322

Category #: IV

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

FDA Establishment Type: Full-Service Restaurant

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

No. of Risk Factor/Intervention Violations: 4

No. of Repeat Risk Factor/Intervention Violations: 1

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			<u>2</u>	<u>0</u>	<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			<u>3</u>	<u>13</u>	<u>0</u>	<input type="checkbox"/>
3	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper use of reporting, restriction & exclusion			<u>3</u>	<u>13</u>	<u>0</u>	<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			<u>2</u>	<u>1</u>	<u>0</u>	<input type="checkbox"/>
5	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	No discharge from eyes, nose or mouth			<u>1</u>	<u>03</u>	<u>0</u>	<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			<u>4</u>	<u>2</u>	<u>0</u>	<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			<u>3</u>	<u>13</u>	<u>0</u>	<input type="checkbox"/>
8	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Handwashing sinks supplied & accessible			<u>2</u>	<u>1</u>	<u>0</u>	<input type="checkbox"/>
Approved Source .2653, .2655										
9	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food obtained from approved source			<u>2</u>	<u>1</u>	<u>0</u>	<input type="checkbox"/>
10	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Food received at proper temperature			<u>2</u>	<u>1</u>	<u>0</u>	<input type="checkbox"/>
11	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food in good condition, safe & unadulterated			<u>2</u>	<u>1</u>	<u>0</u>	<input type="checkbox"/>
12	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Required records available: shellstock tags, parasite destruction			<u>2</u>	<u>1</u>	<u>0</u>	<input type="checkbox"/>
Protection from Contamination .2653, .2654										
13	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food separated & protected			<u>3</u>	<u>13</u>	<u>0</u>	<input type="checkbox"/>
14	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food-contact surfaces: cleaned & sanitized			<u>3</u>	<u>13</u>	<u>0</u>	<input type="checkbox"/>
15	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Proper disposition of returned, previously served, reconditioned, & unsafe food			<u>2</u>	<u>X</u>	<u>0</u>	<input checked="" type="checkbox"/>
Potentially Hazardous Food Time/Temperature .2653										
16	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper cooking time & temperatures			<u>3</u>	<u>13</u>	<u>0</u>	<input type="checkbox"/>
17	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Proper reheating procedures for hot holding			<u>3</u>	<u>13</u>	<u>0</u>	<input type="checkbox"/>
18	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper cooling time & temperatures			<u>3</u>	<u>13</u>	<u>0</u>	<input type="checkbox"/>
19	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper hot holding temperatures			<u>3</u>	<u>13</u>	<u>0</u>	<input type="checkbox"/>
20	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Proper cold holding temperatures			<u>3</u>	<u>X</u>	<u>0</u>	<input checked="" type="checkbox"/>
21	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Proper date marking & disposition			<u>3</u>	<u>X</u>	<u>0</u>	<input checked="" type="checkbox"/>
22	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Time as a public health control: procedures & records			<u>2</u>	<u>1</u>	<u>0</u>	<input type="checkbox"/>
Consumer Advisory .2653										
23	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Consumer advisory provided for raw or undercooked foods			<u>1</u>	<u>X</u>	<u>0</u>	<input checked="" type="checkbox"/>
Highly Susceptible Populations .2653										
24	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Pasteurized foods used; prohibited foods not offered			<u>3</u>	<u>13</u>	<u>0</u>	<input type="checkbox"/>
Chemical .2653, .2657										
25	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Food additives: approved & properly used			<u>1</u>	<u>03</u>	<u>0</u>	<input type="checkbox"/>
26	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Toxic substances properly identified stored, & used			<u>2</u>	<u>1</u>	<u>0</u>	<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			<u>2</u>	<u>1</u>	<u>0</u>	<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			<u>1</u>	<u>03</u>	<u>0</u>	<input type="checkbox"/>
29	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Water and ice from approved source			<u>2</u>	<u>1</u>	<u>0</u>	<input type="checkbox"/>
30	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Variance obtained for specialized processing methods			<u>1</u>	<u>03</u>	<u>0</u>	<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			<u>1</u>	<u>03</u>	<u>0</u>	<input type="checkbox"/>
32	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Plant food properly cooked for hot holding			<u>1</u>	<u>03</u>	<u>0</u>	<input type="checkbox"/>
33	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Approved thawing methods used			<u>1</u>	<u>03</u>	<u>0</u>	<input type="checkbox"/>
34	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Thermometers provided & accurate			<u>1</u>	<u>03</u>	<u>0</u>	<input type="checkbox"/>
Food Identification .2653										
35	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food properly labeled: original container			<u>2</u>	<u>1</u>	<u>0</u>	<input 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			<u>2</u>	<u>1</u>	<u>0</u>	<input type="checkbox"/>
37	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Contamination prevented during food preparation, storage & display			<u>2</u>	<u>1</u>	<u>X</u>	<input checked="" type="checkbox"/>
38	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Personal cleanliness			<u>1</u>	<u>03</u>	<u>0</u>	<input type="checkbox"/>
39	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Wiping cloths: properly used & stored			<u>1</u>	<u>03</u>	<u>0</u>	<input type="checkbox"/>
40	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Washing fruits & vegetables			<u>1</u>	<u>03</u>	<u>0</u>	<input type="checkbox"/>
Proper Use of Utensils .2653, .2654										
41	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	In-use utensils: properly stored			<u>1</u>	<u>03</u>	<u>0</u>	<input type="checkbox"/>
42	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Utensils, equipment & linens: properly stored, dried & handled			<u>1</u>	<u>03</u>	<u>0</u>	<input type="checkbox"/>
43	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Single-use & single-service articles: properly stored & used			<u>1</u>	<u>03</u>	<u>0</u>	<input type="checkbox"/>
44	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Gloves used properly			<u>1</u>	<u>03</u>	<u>0</u>	<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			<u>2</u>	<u>1</u>	<u>0</u>	<input type="checkbox"/>
46	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Warewashing facilities: installed, maintained, & used; test strips			<u>1</u>	<u>03</u>	<u>0</u>	<input type="checkbox"/>
47	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Non-food contact surfaces clean			<u>1</u>	<u>03</u>	<u>0</u>	<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			<u>2</u>	<u>1</u>	<u>0</u>	<input type="checkbox"/>
49	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Plumbing installed; proper backflow devices			<u>2</u>	<u>1</u>	<u>0</u>	<input type="checkbox"/>
50	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Sewage & waste water properly disposed			<u>2</u>	<u>1</u>	<u>0</u>	<input type="checkbox"/>
51	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Toilet facilities: properly constructed, supplied & cleaned			<u>1</u>	<u>03</u>	<u>0</u>	<input type="checkbox"/>
52	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Garbage & refuse properly disposed; facilities maintained			<u>1</u>	<u>03</u>	<u>0</u>	<input type="checkbox"/>
53	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Physical facilities installed, maintained & clean			<u>1</u>	<u>03</u>	<u>X</u>	<input type="checkbox"/>
54	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Meets ventilation & lighting requirements; designated areas used			<u>1</u>	<u>03</u>	<u>X</u>	<input type="checkbox"/>
Total Deductions:										4.5



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: FINNIGANS WAKE

Location Address: 620 TRADE STREET

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: FINNIGANS WAKE INC

Telephone: (336) 723-0322

Establishment ID: 3034014041

☒ Inspection ☐ Re-Inspection Date: 05/20/2019

Comment Addendum Attached? ☐ Status Code: A

Water sample taken? ☐ Yes ☒ No Category #: IV

Email 1: imopie@gmail.com

Email 2: Gabe.fwpub@gmail.com

Email 3: _____

Temperature Observations

Cold Holding Temperature is now 41 Degrees or less

Item	Location	Temp	Item	Location	Temp	Item	Location	Temp
ServSafe	Karamy Kale 4-8-24	0	turkey	make-unit	38	chicken wing	cooling (1.5 hour)	68
chicken wing	final cook	190	tomato	make-unit	37			
hot plate temp	dish machine	176	cole slaw	make-unit	39			
quat (ppm)	3-compartment sink	300	egg salad	ice bath	40			
quat (ppm)	bottle	300	mac and	hot hold	155			
hot water	3-compartment sink	135	french onion	hot hold	160			
thaw water	prep sink	69	potato cake	cooling	60			
chicken wing	cooling (initial)	134	potato cake	walk-in cooler	45			

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.

- 15 3-701.11 Discarding or Reconditioning Unsafe, Adulterated, or Contaminated Food - P - Carton of strawberries in make-unit had visible mold on them. Adulterated or unsafe food must be discarded. CDI - Strawberries discarded.
- 20 3-501.16 (A)(2) and (B) Potentially Hazardous Food (Time/Temperature Control for Safety Food), Hot and Cold Holding - P - Repeat - Potatoes in container measured 45F from last night. Potentially hazardous foods shall be held at 41F or below when in cold holding. Ensure that cooling foods reach 41F within 6 hours. CDI - Potatoes voluntarily discarded.
- 21 3-501.17 Ready-To-Eat Potentially Hazardous Food (Time/Temperature Control for Safety Food), Date Marking - PF - American cheese slices in walk-in cooler were not dated. Also, feta cheese dressing was made 5-11 and had yet to be discarded. Potentially hazardous ready-to-eat foods shall be discarded 7 days from preparation with day 1 being the date of preparation. CDI - Both items discarded.

Lock
Text



Person in Charge (Print & Sign): Opie Kirby

Regulatory Authority (Print & Sign): Andrew Lee

Andrew Lee REHS

REHS ID: 2544 - Lee, Andrew

Verification Required Date: 05 / 30 / 2019

REHS Contact Phone Number: (336) 703 - 3128



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: FINNIGANS WAKE

Establishment ID: 3034014041

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.

- 23 3-603.11 Consumption of Animal Foods that are Raw, Undercooked, or Not Otherwise Processed to Eliminate Pathogens - PF - Disclosure statement is present on menus, but menu items that could be ordered undercooked have no symbol that ties those items back to the disclosure statement at the bottom of the menus. VR - Add symbols to all items that may be ordered undercooked to the menus by 5-30-2019 and contact Andrew Lee at (336) 703-3128 when completed.
- 37 3-305.11 Food Storage-Preventing Contamination from the Premises - C - Cut whole apple piece stored directly on shelf in make-unit bottom. Store foods in a container or other effective means (not directly on shelf). CDI - Apple piece discarded. 0 pts.
- 53 6-201.11 Floors, Walls and Ceilings-Cleanability - C - Wall mounted shelf beside dish machine is sitting unevenly. Adjust shelf to sit evenly on wall. Floors, walls and ceilings shall be easily cleanable and properly adjusted. 0 pts.
- 54 6-202.11 Light Bulbs, Protective Shielding - C - Light shield missing on light near dish machine. Lights shall be adequately shielded. Replace missing shield. // 6-303.11 Intensity-Lighting - C - Lighting low in 2nd stall restroom (5-16 foot candles). Lighting shall be at least 20 foot candles in restrooms. 0 pts.



Comment Addendum to Food Establishment Inspection Report

Establishment Name: FINNIGANS WAKE

Establishment ID: 3034014041

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: FINNIGANS WAKE

Establishment ID: 3034014041

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: FINNIGANS WAKE

Establishment ID: 3034014041

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

