

# Food Establishment Inspection Report

Score: 98

Establishment Name: FOOD LION DELI #1510

Establishment ID: 3034020512

Location Address: 3830 REYNOLDA RD

City: WINSTON SALEM State: North Carolina

Zip: 27106 County: 34 Forsyth

Permittee: FOOD LION LLC

Telephone: (336) 922-6261

Inspection  Re-Inspection  Educational Visit

**Wastewater System:**

Municipal/Community  On-Site System

**Water Supply:**

Municipal/Community  On-Site Supply

Date: 04/08/2024 Status Code: A

Time In: 9:45 AM Time Out: 11:30 AM

Category#: II

FDA Establishment Type: Deli Department

No. of Risk Factor/Intervention Violations: 0

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

Compliance Status		OUT	CDI	R	VR
<b>Supervision .2652</b>					
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		
<b>Employee Health .2652</b>					
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	
<b>Good Hygienic Practices .2652, .2653</b>					
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	
<b>Preventing Contamination by Hands .2652, .2653, .2655, .2656</b>					
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	
<b>Approved Source .2653, .2655</b>					
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	
<b>Protection from Contamination .2653, .2654</b>					
15	<input checked="" type="checkbox"/> OUT/N/A/N/O				
Food separated & protected		3	1.5	0	
16	<input checked="" type="checkbox"/> OUT				
Food-contact surfaces: cleaned & sanitized		3	1.5	0	
17	<input checked="" type="checkbox"/> OUT				
Proper disposition of returned, previously served, reconditioned & unsafe food		2	1	0	
<b>Potentially Hazardous Food Time/Temperature .2653</b>					
18	<input checked="" type="checkbox"/> OUT/N/A/N/O				
Proper cooking time & temperatures		3	1.5	0	
19	<input checked="" type="checkbox"/> IN OUT/N/A/N/O				
Proper reheating procedures for hot holding		3	1.5	0	
20	<input checked="" type="checkbox"/> IN 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"/> OUT/N/A/N/O				
Proper cold holding temperatures		3	1.5	0	
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	
<b>Consumer Advisory .2653</b>					
25	<input checked="" type="checkbox"/> IN OUT				
Consumer advisory provided for raw/undercooked foods		1	0.5	0	
<b>Highly Susceptible Populations .2653</b>					
26	<input checked="" type="checkbox"/> IN OUT				
Pasteurized foods used; prohibited foods not offered		3	1.5	0	
<b>Chemical .2653, .2657</b>					
27	<input checked="" type="checkbox"/> OUT/N/A				
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	
<b>Conformance with Approved Procedures .2653, .2654, .2658</b>					
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
<b>Safe Food and Water .2653, .2655, .2658</b>					
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	
<b>Food Temperature Control .2653, .2654</b>					
33	<input checked="" type="checkbox"/> OUT				
Proper cooling methods used; adequate equipment for temperature control		1	0.5	0	
34	<input checked="" type="checkbox"/> OUT/N/A/N/O				
Plant food properly cooked for hot holding		1	0.5	0	
35	<input checked="" type="checkbox"/> OUT/N/A/N/O				
Approved thawing methods used		1	0.5	0	
36	<input checked="" type="checkbox"/> OUT				
Thermometers provided & accurate		1	0.5	0	
<b>Food Identification .2653</b>					
37	<input checked="" type="checkbox"/> OUT				
Food properly labeled: original container		2	1	0	
<b>Prevention of Food Contamination .2652, .2653, .2654, .2656, .2657</b>					
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"/> IN OUT				
Washing fruits & vegetables		1	0.5	0	
<b>Proper Use of Utensils .2653, .2654</b>					
43	<input checked="" type="checkbox"/> OUT				
In-use utensils: properly stored		1	0.5	0	
44	<input checked="" type="checkbox"/> IN				
Utensils, equipment & linens: properly stored, dried & handled		1	0.5	0	
45	<input checked="" type="checkbox"/> IN				
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	
<b>Utensils and Equipment .2653, .2654, .2663</b>					
47	<input checked="" type="checkbox"/> IN				
Equipment, food & non-food contact surfaces approved, cleanable, properly designed, constructed & used		1	0.5	0	X
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	0	X
<b>Physical Facilities .2654, .2655, .2656</b>					
50	<input checked="" type="checkbox"/> OUT/N/A				
Hot & cold water available; adequate pressure		1	0.5	0	
51	<input checked="" type="checkbox"/> IN				
Plumbing installed; proper backflow devices		2	1	0	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"/> IN				
Physical facilities installed, maintained & clean		X	0.5	0	X
56	<input checked="" type="checkbox"/> OUT				
Meets ventilation & lighting requirements; designated areas used		1	0.5	0	
<b>TOTAL DEDUCTIONS:</b>					<b>2</b>



# Comment Addendum to Food Establishment Inspection Report

Establishment Name: FOOD LION DELI #1510  
 Location Address: 3830 REYNOLDA RD  
 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: FOOD LION LLC  
 Telephone: (336) 922-6261

Establishment ID: 3034020512  
 Inspection  Re-Inspection Date: 04/08/2024  
 Educational Visit Status Code: A  
 Comment Addendum Attached?  Category #: II  
 Email 1: s1510sm@delhaize.com  
 Email 2: s1510gm@delhaize.com  
 Email 3: \_\_\_\_\_

## Temperature Observations

Item/Location	Temp	Item/Location	Temp	Item/Location	Temp
Chicken Tenders/final cook	212.0				
Chicken Breast/final cook	218.0				
Leg Quarters/final cook	211.0				
Fried Chicken/final cook	207.0				
Potato Wedges/final cook	208.0				
Bologna/deli case	41.0				
Honey Ham/deli case	40.0				
Oven Turkey/deli case	40.0				
Rotisserie/walk-in cooler	39.0				
Rotisserie/deli display	41.0				
Nashville Hot Chicken Tenders/deli display	39.0				
Honey Wings/deli display	38.0				
Hot Water/3-compartment sink	119.0				
Quat Sani/3-compartment sink	300.0				

Person in Charge (Print & Sign): *Christopher* *Massey*  
 Regulatory Authority (Print & Sign): *Victoria* *Murphy*

  


REHS ID: 2795 - Murphy, Victoria Verification Dates: Priority: \_\_\_\_\_ Priority Foundation: \_\_\_\_\_ Core: \_\_\_\_\_  
 REHS Contact Phone Number: (336) 703-3814 Authorize final report to be received via Email: 

# Comment Addendum to Inspection Report

**Establishment Name:** FOOD LION DELI #1510

**Establishment ID:** 3034020512

**Date:** 04/08/2024 **Time In:** 9:45 AM **Time Out:** 11:30 AM

## Certifications

Name	Certificate #	Type	Issue Date	Expiration Date
Ian Lattimer		Food Service	05/11/2023	05/11/2028

## 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.

- 44 4-903.11 (A), (B), and (D) Equipment, Utensils, Linens and Single-Service and Single-Use Articles Storing-C: Clean pans were stored on a ledge soiled with food debris. A) Except as specified in (D) of this section, cleaned equipment and utensils, laundered linens, and single-service and single-use articles shall be stored: (1) In a clean, dry location; (2) Where they are not exposed to splash, dust, or other contamination
- 45 4-903.11 (A) and (C) Equipment, Utensils, Linens and Single-Service and Single-Use Articles - Storing-C: Cover single-service containers on storage table to prevent items being contaminated with the contents of the fly traps./single-service containers are being soiled with food debris in the bakery area/single-service containers are being stored on shelving soiled with food debris in the bakery area. . A) Except as specified in (D) of this section, cleaned equipment and utensils, laundered linens, and single-service and single-use articles shall be stored: (1) In a clean, dry location; (2) Where they are not exposed to splash, dust, or other contamination
- 47 4-501.11 Good Repair and Proper Adjustment - Equipment-REPEAT-C: Baker's Aid has accumulated rust inside. Equipment shall be maintained in good repair.
- 49 4-601.11 (B) and (C) Equipment, Food-Contact Surfaces, Nonfood Contact Surfaces, and Utensils-C: Cleaning needed inside of ledge holding clean dishes, lower shelving and deli case tracks. Nonfood-contact surfaces shall be free of dust, dirt, food residue, and debris.
- 51 5-205.15 System Maintained in Good Repair-REPEAT-C: A leak was observed at the vacuum breaker of the can wash. A plumbing system shall be maintained in good repair.
- 55 6-501.11 Repairing - Premises, Structures, Attachments, and Fixtures - Methods-C: Recaulk around 1st toilet in women's restroom/recaulk toilet in men's employee restroom and men's customer restroom./remove moldy caulk and recaulk around 3-compartment sink/floor damage observed by prep table.