Food Establishment Inspection Report

Score: 100

Establishment Name: CLEMMONS VILLAGE II ASSISTED LIVING **Establishment ID:** 3034160012

Location Address: 6441 HOLDER RD
City: CLEMMONS   State: North Carolina
Zip: 27012   County: 34 Forsyth
Permittee: CLEMMONS VILLAGE ASSISTED LIVING LLC
Telephone: (336) 778-8548

⊗ Inspection   ◯ Re-Inspection

Wastewater System:
⊗ Municipal/Community   ◯ On-Site System

Water Supply:
⊗ Municipal/Community   ◯ On-Site Supply

Date: 02/01/2023   Status Code: A
Time In: 8:55 AM   Time Out: 10:30 AM
Category#: IV
FDA Establishment Type: Nursing Home

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
	Supervision .2652					
1	IN/OUT/N/A	PIC Present, demonstrates knowledge, & performs duties	1	0		
2	IN/OUT/N/A	Certified Food Protection Manager	1	0		
	Employee Health .2652					
3	IN/OUT	Management, food & conditional employee; knowledge, responsibilities & reporting	2	1	0	
4	IN/OUT	Proper use of reporting, restriction & exclusion	3	1.5	0	
5	IN/OUT	Procedures for responding to vomiting & diarrheal events	1	0.5	0	
	Good Hygienic Practices .2652, .2653					
6	IN/OUT	Proper eating, tasting, drinking or tobacco use	1	0.5	0	
7	IN/OUT	No discharge from eyes, nose, and mouth	1	0.5	0	
	Preventing Contamination by Hands .2652, .2653, .2655, .2656					
8	IN/OUT	Hands clean & properly washed	4	2	0	
9	IN/OUT/N/A/N/O	No bare hand contact with RTE foods or pre-approved alternate procedure properly followed	4	2	0	
10	IN/OUT/N/A	Handwashing sinks supplied & accessible	2	1	0	
	Approved Source .2653, .2655					
11	IN/OUT	Food obtained from approved source	2	1	0	
12	IN/OUT/N/O	Food received at proper temperature	2	1	0	
13	IN/OUT	Food in good condition, safe & unadulterated	2	1	0	
14	IN/OUT/N/A/N/O	Required records available: shellstock tags, parasite destruction	2	1	0	
	Protection from Contamination .2653, .2654					
15	IN/OUT/N/A/N/O	Food separated & protected	3	1.5	0	
16	IN/OUT	Food-contact surfaces: cleaned & sanitized	3	1.5	0	
17	IN/OUT	Proper disposition of returned, previously served, reconditioned & unsafe food	2	1	0	
	Potentially Hazardous Food Time/Temperature .2653					
18	IN/OUT/N/A/N/O	Proper cooking time & temperatures	3	1.5	0	
19	IN/OUT/N/A/N/O	Proper reheating procedures for hot holding	3	1.5	0	
20	IN/OUT/N/A/N/O	Proper cooling time & temperatures	3	1.5	0	
21	IN/OUT/N/A/N/O	Proper hot holding temperatures	3	1.5	0	
22	IN/OUT/N/A/N/O	Proper cold holding temperatures	3	1.5	0	
23	IN/OUT/N/A/N/O	Proper date marking & disposition	3	1.5	0	
24	IN/OUT/N/A/N/O	Time as a Public Health Control; procedures & records	3	1.5	0	
	Consumer Advisory .2653					
25	IN/OUT/N/A	Consumer advisory provided for raw/ undercooked foods	1	0.5	0	
	Highly Susceptible Populations .2653					
26	IN/OUT/N/A	Pasteurized foods used; prohibited foods not offered	3	1.5	0	
	Chemical .2653, .2657					
27	IN/OUT/N/A	Food additives: approved & properly used	1	0.5	0	
28	IN/OUT/N/A	Toxic substances properly identified stored & used	2	1	0	
	Conformance with Approved Procedures .2653, .2654, .2658					
29	IN/OUT/N/A	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
	Safe Food and Water .2653, .2655, .2658					
30	IN/OUT/N/A	Pasteurized eggs used where required	1	0.5	0	
31	IN/OUT	Water and ice from approved source	2	1	0	
32	IN/OUT/N/A	Variance obtained for specialized processing methods	2	1	0	
	Food Temperature Control .2653, .2654					
33	IN/OUT	Proper cooling methods used; adequate equipment for temperature control	1	0.5	0	
34	IN/OUT/N/A/N/O	Plant food properly cooked for hot holding	1	0.5	0	
35	IN/OUT/N/A/N/O	Approved thawing methods used	1	0.5	0	
36	IN/OUT	Thermometers provided & accurate	1	0.5	0	
	Food Identification .2653					
37	IN/OUT	Food properly labeled: original container	2	1	0	
	Prevention of Food Contamination .2652, .2653, .2654, .2656, .2657					
38	IN/OUT	Insects & rodents not present; no unauthorized animals	2	1	0	
39	IN/OUT	Contamination prevented during food preparation, storage & display	2	1	0	
40	IN/OUT	Personal cleanliness	1	0.5	0	
41	IN/OUT	Wiping cloths: properly used & stored	1	0.5	0	
42	IN/OUT/N/A	Washing fruits & vegetables	1	0.5	0	
	Proper Use of Utensils .2653, .2654					
43	IN/OUT	In-use utensils: properly stored	1	0.5	0	
44	IN/OUT	Utensils, equipment & linens: properly stored, dried & handled	1	0.5	0	
45	IN/OUT	Single-use & single-service articles: properly stored & used	1	0.5	0	
46	IN/OUT	Gloves used properly	1	0.5	0	
	Utensils and Equipment .2653, .2654, .2663					
47	IN/OUT	Equipment, food & non-food contact surfaces approved, cleanable, properly designed, constructed & used	1	0.5	0	
48	IN/OUT	Warewashing facilities: installed, maintained & used; test strips	1	0.5	0	
49	IN/OUT	Non-food contact surfaces clean	1	0.5	0	
	Physical Facilities .2654, .2655, .2656					
50	IN/OUT/N/A	Hot & cold water available; adequate pressure	1	0.5	0	
51	IN/OUT	Plumbing installed; proper backflow devices	2	1	X	X
52	IN/OUT	Sewage & wastewater properly disposed	2	1	0	
53	IN/OUT/N/A	Toilet facilities: properly constructed, supplied & cleaned	1	0.5	0	
54	IN/OUT	Garbage & refuse properly disposed; facilities maintained	1	0.5	0	
55	IN/OUT	Physical facilities installed, maintained & clean	1	0.5	X	X
56	IN/OUT	Meets ventilation & lighting requirements; designated areas used	1	0.5	0	

TOTAL DEDUCTIONS: 0

Comment Addendum to Food Establishment Inspection Report

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Telephone: (336) 778-8548

Establishment ID: 3034160012

[X] Inspection   [ ] Re-Inspection   Date: 02/01/2023
Comment Addendum Attached? [X]   Status Code: A
Water sample taken? [ ] Yes [x] No   Category #: IV

Email 1: kthompson@clemmonsvillage.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
Servsafe - 12/13/2027	Kim Bridgeman	00						
hot water	3-comp sink	142						
dish detergent solution	3-comp sink (wash basin)	121						
lactic acid sanitizer (ppm) - 1875ppm	3-comp sink	00						
finla rinse	dishmachine	176						
sliced ham	walk-in cooler	38						
mushed potatoes	walk-in cooler	39						
minestrone	walk-in cooler	38						
egg salad	walk-in cooler	40						

	First	Last
Person in Charge (Print & Sign):	Kim	Bridgeman
Regulatory Authority (Print & Sign):	Travis	Addis

REHS ID: 3095 - Addis, Travis

Verification Required Date:

REHS Contact Phone Number:

Authorize final report to be received via Email:

Comment Addendum to Inspection Report

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Date: 02/01/2023 **Time In:** 8:55 AM **Time Out:** 10:30 AM

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.

51 5-205.15 (B) System Maintained in Good Repair (C) REPEAT with improvement, in another location. Dispenser located to right of dishmachine is leaking. A plumbing system shall be maintained in good repair. (0 pts)

55 6-501.11 Repairing - Premises, Structures, Attachments, and Fixtures - Methods (C) REPEAT in another location, with improvement. Repair minor wall damage - caused by bread push cart - located by walk-in cooler. Physical facilities shall be maintained in good repair. (0 pts)