

Food Establishment Inspection Report

Score: 97

Establishment Name: MRS. PUMPKIN'S

Establishment ID: 3034012696

Location Address: 3645 REYNOLDA RD.

City: WINSTON SALEM State: North Carolina

Zip: 27106 County: 34 Forsyth

Permittee: MRS. PUMPKIN'S, LLC

Telephone: (336) 924-9797

☒ 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: 1:00 PM Time Out: 3:00 PM

Category#: IV

FDA Establishment Type: Deli Department

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

| Compliance Status | | OUT | CDI | R | VR |
|---|--|--|-----|-----|----|
| Supervision .2652 | | | | | |
| 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 | |
| Employee Health .2652 | | | | | |
| 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 |
| Good Hygienic Practices .2652, .2653 | | | | | |
| 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 |
| Preventing Contamination by Hands .2652, .2653, .2655, .2656 | | | | | |
| 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 |
| Approved Source .2653, .2655 | | | | | |
| 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 |
| Protection from Contamination .2653, .2654 | | | | | |
| 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 |
| Potentially Hazardous Food Time/Temperature .2653 | | | | | |
| 18 | <input checked="" type="checkbox"/> IN 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"/> IN OUT/N/A/N/O | Proper hot holding temperatures | 3 | 1.5 | 0 |
| 22 | <input checked="" type="checkbox"/> IN OUT/N/A/N/O | Proper cold holding temperatures | 3 | 0 | X |
| 23 | <input checked="" type="checkbox"/> IN OUT/N/A/N/O | Proper date marking & disposition | 3 | 0 | X |
| 24 | <input checked="" type="checkbox"/> IN OUT/N/A/N/O | Time as a Public Health Control; procedures & records | 3 | 1.5 | 0 |
| Consumer Advisory .2653 | | | | | |
| 25 | <input checked="" type="checkbox"/> IN OUT/N/A | Consumer advisory provided for raw/undercooked foods | 1 | 0.5 | 0 |
| Highly Susceptible Populations .2653 | | | | | |
| 26 | <input checked="" type="checkbox"/> IN OUT/N/A | Pasteurized foods used; prohibited foods not offered | 3 | 1.5 | 0 |
| Chemical .2653, .2657 | | | | | |
| 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 |
| Conformance with Approved Procedures .2653, .2654, .2658 | | | | | |
| 29 | <input checked="" type="checkbox"/> 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 | <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 |
| Food Temperature Control .2653, .2654 | | | | | |
| 33 | <input checked="" type="checkbox"/> OUT | Proper cooling methods used; adequate equipment for temperature control | 1 | 0.5 | 0 |
| 34 | <input checked="" type="checkbox"/> IN OUT | 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 |
| Food Identification .2653 | | | | | |
| 37 | <input checked="" type="checkbox"/> OUT | Food properly labeled: original container | 2 | 1 | 0 |
| Prevention of Food Contamination .2652, .2653, .2654, .2656, .2657 | | | | | |
| 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"/> OUT/N/A | Washing fruits & vegetables | 1 | 0.5 | 0 |
| Proper Use of Utensils .2653, .2654 | | | | | |
| 43 | <input checked="" type="checkbox"/> OUT | In-use utensils: properly stored | 1 | 0.5 | 0 |
| 44 | <input checked="" type="checkbox"/> OUT | Utensils, equipment & linens: properly stored, dried & handled | 1 | 0.5 | 0 |
| 45 | <input checked="" type="checkbox"/> OUT | 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 |
| Utensils and Equipment .2653, .2654, .2663 | | | | | |
| 47 | <input checked="" type="checkbox"/> IN OUT | Equipment, food & non-food contact surfaces approved, cleanable, properly designed, constructed & used | 1 | 0.5 | X |
| 48 | <input checked="" type="checkbox"/> OUT | Warewashing facilities: installed, maintained & used; test strips | 1 | 0.5 | 0 |
| 49 | <input checked="" type="checkbox"/> OUT | Non-food contact surfaces clean | 1 | 0.5 | 0 |
| Physical Facilities .2654, .2655, .2656 | | | | | |
| 50 | <input checked="" type="checkbox"/> OUT/N/A | Hot & cold water available; adequate pressure | 1 | 0.5 | 0 |
| 51 | <input checked="" type="checkbox"/> IN OUT | Plumbing installed; proper backflow devices | 2 | 1 | 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 OUT | Physical facilities installed, maintained & clean | 1 | 0.5 | X |
| 56 | <input checked="" type="checkbox"/> OUT | Meets ventilation & lighting requirements; designated areas used | 1 | 0.5 | 0 |
| TOTAL DEDUCTIONS: | | | | | 3 |



Comment Addendum to Food Establishment Inspection Report

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 Location Address: 3645 REYNOLDA RD.
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 County: 34 Forsyth Zip: 27106
 Wastewater System: ☒ Municipal/Community ☐ On-Site System
 Water Supply: ☒ Municipal/Community ☐ On-Site System
 Permittee: MRS. PUMPKIN'S, LLC
 Telephone: (336) 924-9797

Establishment ID: 3034012696
☒ Inspection ☐ Re-Inspection Date: 02/01/2023
 Comment Addendum Attached? ☒ Status Code: A
 Water sample taken? ☐ Yes ☒ No Category #: IV
 Email 1: choyt58@gmail.com
 Email 2: info@mrspumpkins.com
 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 |
|---------------------|--------------------|-------|------|----------|------|------|----------|------|
| Potatoes | walk-in cooler | 38.0 | | | | | | |
| Vinegar Slaw | walk-in cooler | 32.0 | | | | | | |
| Lettuce | walk-in cooler | 41.0 | | | | | | |
| Broccoli Salad | walk-in cooler | 39.0 | | | | | | |
| Potato Salad | walk-in cooler | 38.0 | | | | | | |
| Grilled Chicken | upright cooler | 38.0 | | | | | | |
| Curry Chicken Salad | make-unit | 40.0 | | | | | | |
| Pasta Salad | make-unit | 44.0 | | | | | | |
| 3 Bean Salad | make-unit | 43.0 | | | | | | |
| Potato Salad | make-unit | 44.0 | | | | | | |
| Ham Mix | upright cooler | 40.0 | | | | | | |
| C. Sani | sprayer | 200.0 | | | | | | |
| Quat Sani | 3-compartment sink | 200.0 | | | | | | |
| Hot Water | 3-compartment sink | 140.0 | | | | | | |

First
 Person in Charge (Print & Sign): Cody

Last
Hoyt

First
 Regulatory Authority (Print & Sign): Victoria

Last
Murphy

REHS ID: 2795 - Murphy, Victoria

Verification Required Date:

REHS Contact Phone Number: (336) 703-3814

Authorize final report to
 be received via Email: _____



North Carolina Department of Health & Human Services

Page 1 of _____
 Division of Public Health • Environmental Health Section
 DHHS is an equal opportunity employer.
 Food Establishment Inspection Report, 10/2021

• Food Protection Program



Comment Addendum to Inspection Report

Establishment Name: MRS. PUMPKIN'S

Establishment ID: 3034012696

Date: 02/01/2023 **Time In:** 1:00 PM **Time Out:** 3:00 PM

Certifications

| Name | Certificate # | Type | Issue Date | Expiration Date |
|-----------|---------------|--------------|------------|-----------------|
| Cody Hoyt | | Food Service | 08/12/2020 | 08/12/2025 |

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.

- 22 3-501.16 (A) (2) and (B) Time / Temperature Control for Safety Food, Hot and Cold Holding-P: The following items measured at temperatures above 41 F: (make-unit) pasta salad (42 F-44 F), 3 bean salad (43 F), and potato salad (44 F). Potentially hazardous items shall be maintained at a temperature of 41 F or below. CDI: Items were discarded.
- 23 3-501.17 Ready-To-Eat Time / Temperature Control for Safety Food, Date Marking-PF: A container of chicken broth prepared Friday was without date-marking. Potentially hazardous food prepared and held in a food establishment for more than 24 hours shall be clearly marked to indicate the date or day by which the food shall be consumed on the premises, sold, or discarded when held at 41F for a maximum of 7 days, with the date of prep counting as Day 1. CDI: PIC discarded item.//3-501.18 Ready-To-Eat Time / Temperature Control for Safety Food, Disposition-P: A container of ham was dated for 1/23/23. (A) A food specified in 3-501.17(A) or (B) shall be discarded if it: (1) Exceeds the temperature and time combination specified in 3-501.17(A), except time that the product is frozen. CDI: The PIC discarded the item.
- 47 4-501.11 Good Repair and Proper Adjustment - Equipment-REPEAT-C: The chester freezers are damaged. Equipment shall be maintained in good repair.
- 51 5-205.15 System Maintained in Good Repair-C: A leak was observed at the faucet of the front bakery prep sink and the faucet of the back women's restroom. A plumbing system shall be maintained in good repair.
- 55 6-501.11 Repairing - Premises, Structures, Attachments, and Fixtures - Methods-C: Recaulk around toilets. Physical facilities shall be maintained in good repair.