

Food Establishment Inspection Report

Score: 95

Establishment Name: WINGSTOP # 1538

Establishment ID: 3034012819

Location Address: 340 SUMMIT SQUARE BLVD

City: WINSTON-SALEM State: North Carolina

Zip: 27105 County: 34 Forsyth

Permittee: GSRS WS NC, LLC

Telephone: (336) 738-0129

☒ Inspection ☐ Re-Inspection ☐ Educational Visit

Wastewater System:

☒ Municipal/Community ☐ On-Site System

Water Supply:

☒ Municipal/Community ☐ On-Site Supply

Date: 04/09/2024

Status Code: A

Time In: 1:05 PM

Time Out: 2:50 PM

Category#: II

FDA Establishment Type: Fast Food Restaurant

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"/> IN <input checked="" type="checkbox"/> OUT/N/A	Certified Food Protection Manager	<input checked="" type="checkbox"/>	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"/> IN <input checked="" type="checkbox"/> OUT/N/A	Handwashing sinks supplied & accessible	2	<input checked="" type="checkbox"/>	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 <input checked="" type="checkbox"/> 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 <input checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A/N/O	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"/> OUT/N/A/N/O	Proper cooking time & temperatures	3	1.5	0
19	<input checked="" type="checkbox"/> IN <input checked="" type="checkbox"/> OUT/N/A/N/O	Proper reheating procedures for hot holding	3	1.5	0
20	<input checked="" type="checkbox"/> 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"/> 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 <input checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A	Consumer advisory provided for raw/undercooked foods	1	0.5	0
Highly Susceptible Populations .2653					
26	<input checked="" type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A	Pasteurized foods used; prohibited foods not offered	3	1.5	0
Chemical .2653, .2657					
27	<input checked="" type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> 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 <input checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> 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 <input checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A	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 <input checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A	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 <input checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A	Plant food properly cooked for hot holding	1	0.5	0
35	<input checked="" type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A	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"/> IN <input checked="" type="checkbox"/> OUT	Insects & rodents not present; no unauthorized animals	2	<input checked="" type="checkbox"/>	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 <input checked="" type="checkbox"/> OUT	Equipment, food & non-food contact surfaces approved, cleanable, properly designed, constructed & used	1	0.5	<input checked="" type="checkbox"/>
48	<input checked="" type="checkbox"/> OUT	Warewashing facilities: installed, maintained & used; test strips	1	0.5	0
49	<input checked="" type="checkbox"/> IN <input checked="" type="checkbox"/> OUT	Non-food contact surfaces clean	1	<input checked="" type="checkbox"/>	0
Physical Facilities .2654, .2655, .2656					
50	<input checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A	Hot & cold water available; adequate pressure	1	0.5	0
51	<input checked="" type="checkbox"/> OUT	Plumbing installed; proper backflow devices	2	1	0
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"/> IN <input checked="" type="checkbox"/> OUT	Garbage & refuse properly disposed; facilities maintained	1	<input checked="" type="checkbox"/>	0
55	<input checked="" type="checkbox"/> IN <input checked="" type="checkbox"/> OUT	Physical facilities installed, maintained & clean	<input checked="" type="checkbox"/>	0.5	0
56	<input checked="" type="checkbox"/> IN <input checked="" type="checkbox"/> OUT	Meets ventilation & lighting requirements; designated areas used	1	0.5	<input checked="" type="checkbox"/>
TOTAL DEDUCTIONS:					5



Comment Addendum to Food Establishment Inspection Report

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☒ Inspection ☐ Re-Inspection Date: 04/09/2024

☐ Educational Visit Status Code: A

Comment Addendum Attached? ☒ Category #: II

Email 1: ws1538@gsrgroup.us

Email 2: _____

Email 3: _____

Temperature Observations

Item/Location	Temp	Item/Location	Temp	Item/Location	Temp
hot water/3 comp sink	130				
quat sanitizer/3 comp sink	200				
quat sanitizer/wiping cloth bucket	200				
wings/final cook temp	195				
tenders/final cook temp	220				
chicken filet/final cook temp	213				
corn/prep bowl	136				
fries/prep bowl	154				
corn/make unit	31				
ranch/reach in	41				
chicken/raw cooler	39				
blanched fries/cooling at 1:25	95				
blanched fries/cooling at 1:50	75				
blanched fries/walk in cooler	41				
corn/walk in cooler	36				
lighting/foot candles at hood	18				

Person in Charge (Print & Sign): *First* Cody *Last* Ranes

Regulatory Authority (Print & Sign): *First* Lauren *Last* Pleasants

REHS ID: 2809 - Pleasants, Lauren Verification Dates: Priority:

REHS Contact Phone Number: (336) 462-7783

[Signature]

[Signature]

Priority Foundation: 04/19/2024 Core: _____

Authorize final report to be received via Email: *[Signature]*



North Carolina Department of Health & Human Services

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• Division of Public Health • Environmental Health Section
DHHS is an equal opportunity employer.
Food Establishment Inspection Report, 12/2023

• Food Protection Program



Comment Addendum to Inspection Report

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Date: 04/09/2024 **Time In:** 1:05 PM **Time Out:** 2:50 PM

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.

- 2 2-102.12 (A) Certified Food Protection Manager (C) No food protection manager present during the inspection. The person in charge shall be a certified food protection manager who has shown proficiency of required information through passing a test that is part of an accredited program.
- 10 5-205.11 Using a Handwashing Sink - Operation and Maintenance (Pf) - The front handwashing sink has knee pedals and pressure drops to a trickle from the faucet after a few handwashing uses. (A) A handwashing sink shall be maintained so that it is accessible at all times for employee use. Repair handwashing sink plumbing to maintain pressure so it is accessible at all times. VERIFICATION required by 4/19/24 on handwashing sink pressure. Contact Lauren Pleasants at (336)462-7783 or pleasaml@forsyth.cc when repaired.
- 38 6-202.15 Outer Openings, Protected. (C)- REPEAT- The back door does not self-close. Outer openings of a food establishment shall be protected against the entry of insects and rodents by: Filling or closing holes and other gaps along floors, walls, and ceilings; Closed, tight-fitting windows; and solid, self-closing, tight-fitting doors. Repair door closure.

6-501.112 Removing Dead or Trapped Birds, Insects, Rodents and other Pests (C) Three dead flies observed in the bottom of the drink cooler. Dead or trapped birds, insects, rodents, and other pests shall be removed from control devices and the premises at a frequency that prevents their accumulation, decomposition, or the attraction of pests.
- 47 4-501.11 Good Repair and Proper Adjustment - Equipment (C) - The backsplash at the potato prep sink has damaged caulk. Recaulk the backsplash to be smooth and more easily cleanable. Maintain equipment in good repair.
- 49 4-601.11 (B) and (C) Equipment, Food-Contact Surfaces, Nonfood Contact Surfaces, and Utensils (C) - REPEAT with improvement- Cleaning needed on the potato prep sink backsplash and around the door frame of the raw chicken cooler. Cleaning needed on the doors and in the cabinet underneath the drink station in the dining room. Nonfood-contact surfaces shall be free of dust, dirt, food residue, and debris. Increase cleaning frequency of equipment.
- 54 5-501.113 Covering Receptacles (C) - REPEAT- Green dumpster with door open. Maintain waste receptacles closed with tight-fitting lids and doors.
- 55 6-501.12 Cleaning, Frequency and Restrictions (C) - REPEAT- The wall about the can wash basin is heavily soiled. Recommend replacing the panel of FRP above it if the buildup is not cleanable. Wall and floor cleaning needed behind the fryers. Maintain physical facilities clean.

6-501.114 Maintaining Premises, Unnecessary Items and Litter (C)- There is a Turbofan and speed rack in front of the walk in cooler that are not used and need to be removed. The premises shall be free of: (A) Items that are unnecessary to the operation or maintenance of the establishment such as equipment that is nonfunctional or no longer used
- 56 6-303.11 Intensity - Lighting (C) - Lightbulbs are missing in the hood and the lighting only measures 18 foot candles. Lighting intensity shall be (C) At least 540 lux (50 foot candles) at a surface where a food employee is working with food or working with utensils or equipment such as knives, slicers, grinders, or saws where employee safety is a factor. Replace lightbulbs to increase lighting.