

Food Establishment Inspection Report

Score: 97

Establishment Name: HENRY F SHAFFNER HOUSE

Establishment ID: 3034012264

Location Address: 150 SOUTH MARSHALL STREET

City: WINSTON SALEM State: North Carolina

Zip: 27101 County: 34 Forsyth

Permittee: HISTORIC INNS OF WINSTON SALEM LLC

Telephone: (336) 777-0052

☒ Inspection ☐ Re-Inspection ☐ Educational Visit**Wastewater System:**☒ Municipal/Community ☐ On-Site System**Water Supply:**☒ Municipal/Community ☐ On-Site Supply

Date: 04/12/2024 Status Code: A

Time In: 10:30 AM Time Out: 1:15 PM

Category#: II

FDA Establishment Type: Full-Service Restaurant

No. of Risk Factor/Intervention Violations: 3

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

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"/> IN <input checked="" type="checkbox"/> OUT/N/A	Handwashing sinks supplied & accessible	2	X	0 X
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 <input checked="" type="checkbox"/> N/A	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"/> IN <input checked="" type="checkbox"/> OUT	Food-contact surfaces: cleaned & sanitized	3	X	0 X X
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"/> IN <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"/> IN <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"/> OUT/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"/> IN <input checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A	Toxic substances properly identified stored & used	2	1	X X
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 <input checked="" type="checkbox"/> N/O	Plant food properly cooked for hot holding	1	0.5	0
35	<input checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A <input checked="" type="checkbox"/> 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"/> IN <input checked="" type="checkbox"/> OUT	Food properly labeled: original container	2	1	X
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 <input checked="" type="checkbox"/> 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"/> OUT	Equipment, food & non-food contact surfaces approved, cleanable, properly designed, constructed & used	1	0.5	0
48	<input checked="" type="checkbox"/> IN <input checked="" type="checkbox"/> OUT	Warewashing facilities: installed, maintained & used; test strips	1	0.5	X
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 <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 <input checked="" type="checkbox"/> 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 <input checked="" type="checkbox"/> OUT	Physical facilities installed, maintained & clean	1	X	0 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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Establishment ID: 3034012264
☒ Inspection ☐ Re-Inspection Date: 04/12/2024
☐ Educational Visit Status Code: A
Comment Addendum Attached? ☒ Category #: II
Email 1: bfalls@sgroupadmin.com
Email 2: Kellielliott@rocketmail.com
Email 3:

Temperature Observations

Item/Location	Temp	Item/Location	Temp	Item/Location	Temp
Grits/hot hold	160				
sausage/hot hold	139				
pork/reach in	41				
ham/reach in	41				
chicken/reach in	40				
salmon/reach in	40				
tomato/make unit	40				
hot water/three comp sink	118				
chicken fried/final cook	170				
chicken pan fried (GF)/final cook	188				
shrimp/final cook	160				
ambient/milk cooler	37				

First
Person in Charge (Print & Sign): Kelli

Last
Elliot



First
Regulatory Authority (Print & Sign): Joseph

Last
Chrobak



REHS ID: 2450 - Chrobak, Joseph

Verification Dates: Priority:

Priority Foundation:

Core:

REHS Contact Phone Number: (336) 703-2618

Authorize final report to
be received via Email: _____



North Carolina Department of Health & Human Services

Page 2 of _____
● 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

Establishment Name: HENRY F SHAFFNER HOUSE

Establishment ID: 3034012264

Date: 04/12/2024 **Time In:** 10:30 AM **Time Out:** 1:15 PM

Certifications

Name	Certificate #	Type	Issue Date	Expiration Date
Kelli Elliott	20856912	Food Service	07/28/2021	07/28/2026

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.

- 10 5-205.11 Using a Handwashing Sink - Operation and Maintenance (Pf) One hand washing sink in ware washing room was filled with cleaning supplies and raid spray. One employee observed washing a hard boiled egg in a hand washing sink. A hand washing sink shall be maintained so it is accessible at all times for employees use and may not be used for purposes other than handwashing. CDI: Hand washing sink emptied of supplies and staff instructed on use restrictions of hand washing sinks.
- 16 4-601.11 (A) Equipment, Food-Contact Surfaces, Nonfood Contact Surfaces, and Utensils (Pf) Repeat: two small metal containers found with sticker residue present on clean dish shelf. Equipment food contact surfaces and utensils shall be clean to sight and touch. CDI Staff removed stickers and cleaned containers. // 4-501.114 Manual and Mechanical Warewashing Equipment, Chemical Sanitization - Temperature, pH, Concentration and Hardness (P) Three compartment sink quat sanitizer and dish machine chlorine sanitizer both read at 0 ppm concentration on test strips for respective chemicals. Bottles for both quat sanitizer and chlorine sanitizer were empty. Chlorine solution shall have a concentration between 50 - 100 ppm, Quaternary ammonium compound solution shall have a concentration specified by manufacturers use (150 - 400ppm). CDI: New bottles of sanitizer were installed on dish machine and three compartment sink producing 50 ppm chlorine solution and 200ppm quat solution. Have staff members regularly test sanitizer strength with test strips to verify correct concentrations.
- 28 7-202.12 Conditions of Use (P) One spray can of Raid flying insect spray stored in hand washing sink in dish washing room and is labeled "For Residential Use Only". Poisonous or toxic materials shall be used according to law, code, and manufacturers use directions included in labeling, and, for a pesticide, manufacturers label instructions that state use is allowed in a food establishment. CDI: Can removed from establishment.
- 37 3-302.12 Food Storage Containers Identified with Common Name of Food (C) Two small plastic containers in dry storage with powder ingredients without labels. Except for containers holding food that can be readily and unmistakably recognized such as dry pasta, working containers holding food or food ingredients that are removed from their original packaging for use in the food establishment shall be identified with the common name of the food. Add labels to containers.
- 48 4-501.14 Warewashing Equipment, Cleaning Frequency (C) Door frame of dish machine has heavy dark soil build up. Warewashing equipment shall be cleaned before use, throughout the day as needed to prevent recontamination and that equipment performs its intended function, and when used, at least every 24 hours. Clean the door frame of the dish machine.
- 55 6-501.12 Cleaning, Frequency and Restrictions (C) Repeat: Cleaning needed under equipment such as prep sinks and coffee station to remove soil and debris. Physical facilities shall be cleaned as often as necessary to keep them clean. Clean the floors. // 6-501.11 Repairing - Premises, Structures, Attachments, and Fixtures - Methods (C) Repeat: Repair needed on top of door frame between coffee station and kitchen with paint peeling and chipping. Establishment continuing to work on repairs to walls in refrigerator room that were damaged from previous fire. Physical facilities shall be maintained in good repair.

Additional Comments

Establishment has a Cook Rite Flat top grill to be installed where charbroiler is currently installed.

One three door cooler is no currently being used due to issues with breaker - cooler currently empty and not in use.

Establishment planning an additional menu - Please send copy of menu to Joseph Chrobak at Chrobajb@forsyth.cc for review prior to printing.

Establishment PIC stated going forward the restaurant will be closed to the public Mondays - Thursdays. Only operating for the Bed & Breakfast Guests.