

Food Establishment Inspection Report

Score: 96

Establishment Name: CATERING DELITES

Establishment ID: 3034020523

Location Address: 242 NORTH CHERRY STREET

City: KERNERSVILLE State: North Carolina

Zip: 27284 County: 34 Forsyth

Permittee: KEITH & SHEILA LAWSON

Telephone: (336) 992-4300

Inspection Re-Inspection

Wastewater System:

Municipal/Community On-Site System

Water Supply:

Municipal/Community On-Site Supply

Date: 09/21/2022 Status Code: A

Time In: 12:05 PM Time Out: 1:50 PM

Category#: III

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	IN <input checked="" type="checkbox"/> N/A				
PIC Present, demonstrates knowledge, & performs duties		<input checked="" type="checkbox"/>	0		
2	IN <input checked="" type="checkbox"/> 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	IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A <input checked="" type="checkbox"/>				
No bare hand contact with RTE foods or pre-approved alternate procedure properly followed		4	2	0	
10	<input checked="" type="checkbox"/> OUT <input type="checkbox"/> 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	IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/>				
Food received at proper temperature		2	1	0	
13	<input checked="" type="checkbox"/> OUT				
Food in good condition, safe & unadulterated		2	1	0	
14	IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A <input type="checkbox"/>				
Required records available: shellstock tags, parasite destruction		2	1	0	
Protection from Contamination .2653, .2654					
15	<input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> 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	IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A <input checked="" type="checkbox"/>				
Proper cooking time & temperatures		3	1.5	0	
19	IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A <input checked="" type="checkbox"/>				
Proper reheating procedures for hot holding		3	1.5	0	
20	IN <input checked="" type="checkbox"/> N/A <input type="checkbox"/> N/O				
Proper cooling time & temperatures		3	<input checked="" type="checkbox"/>	0	X
21	IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A <input checked="" type="checkbox"/>				
Proper hot holding temperatures		3	1.5	0	
22	<input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> N/O				
Proper cold holding temperatures		3	1.5	0	
23	<input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> N/O				
Proper date marking & disposition		3	1.5	0	
24	IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A <input type="checkbox"/>				
Time as a Public Health Control; procedures & records		3	1.5	0	
Consumer Advisory .2653					
25	IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/>				
Consumer advisory provided for raw/undercooked foods		1	0.5	0	
Highly Susceptible Populations .2653					
26	IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/>				
Pasteurized foods used; prohibited foods not offered		3	1.5	0	
Chemical .2653, .2657					
27	IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/>				
Food additives: approved & properly used		1	0.5	0	
28	<input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/A				
Toxic substances properly identified stored & used		2	1	0	
Conformance with Approved Procedures .2653, .2654, .2658					
29	IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/>				
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 <input type="checkbox"/> OUT <input checked="" type="checkbox"/>				
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	IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/>				
Variance obtained for specialized processing methods		2	1	0	
Food Temperature Control .2653, .2654					
33	IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/>				
Proper cooling methods used; adequate equipment for temperature control		1	<input checked="" type="checkbox"/>	0	X
34	IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A <input checked="" type="checkbox"/>				
Plant food properly cooked for hot holding		1	0.5	0	
35	<input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/A <input 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"/> 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 <input 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"/> 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 <input 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 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	IN <input checked="" type="checkbox"/>				
Physical facilities installed, maintained & clean		1	0.5	<input checked="" type="checkbox"/>	X
56	<input checked="" type="checkbox"/> OUT				
Meets ventilation & lighting requirements; designated areas used		1	0.5	0	
TOTAL DEDUCTIONS:					4



Comment Addendum to Food Establishment Inspection Report

Establishment Name: CATERING DELITES
 Location Address: 242 NORTH CHERRY STREET
 City: KERNERSVILLE State: NC
 County: 34 Forsyth Zip: 27284
 Wastewater System: Municipal/Community On-Site System
 Water Supply: Municipal/Community On-Site System
 Permittee: KEITH & SHEILA LAWSON
 Telephone: (336) 992-4300

Establishment ID: 3034020523
 Inspection Re-Inspection Date: 09/21/2022
 Comment Addendum Attached? Status Code: A
 Water sample taken? Yes No Category #: III
 Email 1:
 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
Spaghetti Sauce	Reach In Cooler	38						
Green Beans @ 12:30 pm	Cooling since 10:45 am	69						
Pasta @ 12:30 pm	Cooling since 11:30 am	75						
Chicken @ 12:45 pm	Cooling since 11:00 am	45						
Pot Roast 9/20	Reach In	45						
Pot Roast 9/20	Reach In	46						
Ambient	Reach in	39						
Hot Water	3 Compartment Sink	148						
Sanitizer Chlorine	Spray Bottle	100						

First

Person in Charge (Print & Sign): Sheila

Last

Lawson

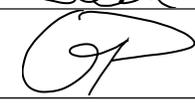


First

Regulatory Authority (Print & Sign): Glen

Last

Pugh



REHS ID: 3016 - Pugh, Glen

Verification Required Date: _____

REHS Contact Phone Number: _____

Authorize final report to be received via Email: _____



Comment Addendum to Inspection Report

Establishment Name: CATERING DELITES

Establishment ID: 3034020523

Date: 09/21/2022 **Time In:** 12:05 PM **Time Out:** 1:50 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.

- 1 2-102.11 (A), (B) (PF) - Based on the RISKS inherent to the FOOD operation, during inspections and upon request the PERSON IN CHARGE shall demonstrate to the REGULATORY AUTHORITY knowledge of foodborne disease prevention, application of the HAZARD Analysis and CRITICAL CONTROL POINT principles, and the requirements of this Code. The PERSON IN CHARGE shall demonstrate this knowledge by: (A) Complying with this Code by having no violations of PRIORITY ITEMS during the current inspection; (B) Being a certified FOOD protection manager who has shown proficiency of required information through passing a test that is part of an ACCREDITED PROGRAM.
***The PIC was not a CFPM and there were priority violations during the inspection.
 - 2 2-102.12 (A) Certified Food Protection Manager (C) - (A) 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.
***The PIC was not a CFPM.
 - 20 3-501.14 Cooling (P) - (A) Cooked TIME/TEMPERATURE CONTROL FOR SAFETY FOOD shall be cooled: (1) Within 2 hours from 135F to 70F; and (2) Within a total of 6 hours from 135F to 41F or less.
***Pot roast from 9/20 in reach in refrigerator was at 45-46F. CDI product was discarded.
 - 33 3-501.15 Cooling Methods (Pf) - (A) Cooling shall be accomplished in accordance with the time and temperature criteria specified under § 3-501.14 by using one or more of the following methods based on the type of FOOD being cooled: (1) Placing the FOOD in shallow pans; (2) Separating the FOOD into smaller or thinner portions; (3) Using rapid cooling EQUIPMENT; (4) Stirring the FOOD in a container placed in an ice water bath; (5) Using containers that facilitate heat transfer; (6) Adding ice as an ingredient; (7) Other effective methods.
***See violation # 20. Pot roast was in a large pan that was covered. The food was still warm when covered and placed into refrigeration evident by condensation that had accumulated on the foil cover. CDI foods were discarded and discussed proper cooling methods with the PIC.
 - 55 6-501.11 Repairing - Premises, Structures, Attachments, and Fixtures - Methods (C) - PHYSICAL FACILITIES shall be maintained in good repair.
***Repair / replace cracked or broken floor tiles throughout facility.
- 6-501.114 Maintaining Premises, Unnecessary Items and Litter (C) - 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.
***Remove or repair the ice machine that is not working.