

Food Establishment Inspection Report

Score: 92

Establishment Name: SKRIMP SHACK

Establishment ID: 3034012636

Location Address: 1103 SILAS CREEK PARKWAY

Inspection Re-Inspection

City: WINSTON SALEM

State: NC

Date: 02 / 10 / 2020 Status Code: A

Zip: 27107

County: 34 Forsyth

Time In: 01 : 45 am pm Time Out: 04 : 20 am pm

Permittee: DARYLL, LLC

Total Time: 2 hrs 35 minutes

Telephone: (336) 331-3026

Category #: III

Wastewater System: Municipal/Community On-Site System

FDA Establishment Type: _____

Water Supply: Municipal/Community On-Site Supply

No. of Risk Factor/Intervention Violations: 4

No. of Repeat Risk Factor/Intervention Violations: 3

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.								
IN	OUT	N/A	N/O	Compliance Status	OUT	CDI	R	VR
Supervision .2652								
1	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	PIC Present; Demonstration-Certification by accredited program and perform duties	2	0		
Employee Health .2652								
2	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Management, employees knowledge; responsibilities & reporting	3	13	0	
3	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper use of reporting, restriction & exclusion	3	13	0	
Good Hygienic Practices .2652, .2653								
4	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Proper eating, tasting, drinking, or tobacco use	2	X	0	X
5	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	No discharge from eyes, nose or mouth	1	03	0	
Preventing Contamination by Hands .2652, .2653, .2655, .2656								
6	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Hands clean & properly washed	4	2	0	
7	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	No bare hand contact with RTE foods or pre-approved alternate procedure properly followed	3	13	0	
8	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Handwashing sinks supplied & accessible	2	1	0	
Approved Source .2653, .2655								
9	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food obtained from approved source	2	1	0	
10	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Food received at proper temperature	2	1	0	
11	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food in good condition, safe & unadulterated	2	1	0	
12	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Required records available: shellstock tags, parasite destruction	2	1	0	
Protection from Contamination .2653, .2654								
13	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food separated & protected	3	13	0	
14	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Food-contact surfaces: cleaned & sanitized	X	13	0	X
15	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper disposition of returned, previously served, reconditioned, & unsafe food	2	1	0	
Potentially Hazardous Food Time/Temperature .2653								
16	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Proper cooking time & temperatures	3	13	0	
17	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper reheating procedures for hot holding	3	13	0	
18	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Proper cooling time & temperatures	3	13	0	
19	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Proper hot holding temperatures	3	13	X	X
20	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper cold holding temperatures	3	13	0	
21	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper date marking & disposition	3	13	0	
22	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Time as a public health control: procedures & records	2	1	0	
Consumer Advisory .2653								
23	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Consumer advisory provided for raw or undercooked foods	1	03	0	
Highly Susceptible Populations .2653								
24	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Pasteurized foods used; prohibited foods not offered	3	13	0	
Chemical .2653, .2657								
25	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Food additives: approved & properly used	1	03	0	
26	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Toxic substances properly identified stored, & used	X	1	0	X
Conformance with Approved Procedures .2653, .2654, .2658								
27	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Compliance with variance, specialized process, reduced oxygen packing 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.								
IN	OUT	N/A	N/O	Compliance Status	OUT	CDI	R	VR
Safe Food and Water .2653, .2655, .2658								
28	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Pasteurized eggs used where required	1	03	0	
29	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Water and ice from approved source	2	1	0	
30	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Variance obtained for specialized processing methods	1	03	0	
Food Temperature Control .2653, .2654								
31	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper cooling methods used; adequate equipment for temperature control	1	03	0	
32	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Plant food properly cooked for hot holding	1	03	0	
33	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Approved thawing methods used	1	03	0	
34	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Thermometers provided & accurate	1	03	0	
Food Identification .2653								
35	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food properly labeled: original container	2	1	0	
Prevention of Food Contamination .2652, .2653, .2654, .2656, .2657								
36	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Insects & rodents not present; no unauthorized animals	2	1	0	
37	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Contamination prevented during food preparation, storage & display	2	X	0	
38	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Personal cleanliness	1	03	X	
39	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Wiping cloths: properly used & stored	1	03	0	
40	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Washing fruits & vegetables	1	03	0	
Proper Use of Utensils .2653, .2654								
41	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	In-use utensils: properly stored	1	03	0	
42	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Utensils, equipment & linens: properly stored, dried & handled	1	03	X	
43	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Single-use & single-service articles: properly stored & used	1	03	0	
44	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Gloves used properly	1	03	0	
Utensils and Equipment .2653, .2654, .2663								
45	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Equipment, food & non-food contact surfaces approved, cleanable, properly designed, constructed, & used	2	1	X	
46	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Warewashing facilities: installed, maintained, & used; test strips	1	X	0	X
47	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Non-food contact surfaces clean	1	03	0	
Physical Facilities .2654, .2655, .2656								
48	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Hot & cold water available; adequate pressure	2	1	0	
49	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Plumbing installed; proper backflow devices	2	1	0	
50	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Sewage & waste water properly disposed	2	1	0	
51	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Toilet facilities: properly constructed, supplied & cleaned	1	03	0	
52	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Garbage & refuse properly disposed; facilities maintained	1	X	0	X
53	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Physical facilities installed, maintained & clean	1	03	X	
54	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Meets ventilation & lighting requirements; designated areas used	1	03	0	
Total Deductions:						8		



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 County: 34 Forsyth Zip: 27107
 Wastewater System: Municipal/Community On-Site System
 Water Supply: Municipal/Community On-Site System
 Permittee: DARYLL, LLC
 Telephone: (336) 331-3026

Establishment ID: 3034012636
 Inspection Re-Inspection Date: 02/10/2020
 Comment Addendum Attached? Status Code: A
 Water sample taken? Yes No Category #: III
 Email 1: BRYAN@THESKRIMPESHACK.COM
 Email 2:
 Email 3:

Temperature Observations

Cold Holding Temperature is now 41 Degrees or less

Item	Location	Temp	Item	Location	Temp	Item	Location	Temp
8-14-23	Tatyana Estes	0	fish	fish unit	40			
mac&chz	hot hold	118	fish	2 door	39			
crab soup	hot hold	107	quat-ppm	can wash	200			
corn soup	hot hold	137	water	3 comp	136			
mac&chz	reheat	171						
crab soup	reheat	166						
slaw	make unit	41						
crab	make unit	41						

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.

- 4 2-401.11 Eating, Drinking, or Using Tobacco - C-REPEAT-Drink on shelf above prep table. An employee shall drink, eat, and smoke in designated areas only so that contamination of clean linens, utensils, single service articles, and food may not occur.
- 14 4-601.11 (A) Equipment, Food-Contact Surfaces, Nonfood-Contact Surfaces, and Utensils - P-REPEAT-Majority of utensils and dishes soiled with grease/flour/food residue. Food contact surfaces shall be clean to sight and touch. CDI-PIC is going through remainder of dishes for cleanliness, all sent to be washed.
- 19 3-501.16 (A)(1) Potentially Hazardous Food (Time/Temperature Control for Safety Food), Hot and Cold Holding - P- Mac and cheese and crab soup in hot well measured below 135F, as noted in temperature log. Maintain hot foods at 135F or greater at all parts of the food. CDI-Reheated to above 165F.

Lock Text



Person in Charge (Print & Sign): Tatyana *First* Estes *Last*

Regulatory Authority (Print & Sign): Nora *First* Sykes *Last*

REHS ID: 2664 - Sykes, Nora

Verification Required Date: 02 / 12 / 2020

REHS Contact Phone Number: (336) 703 - 3161



North Carolina Department of Health & Human Services • Division of Public Health • Environmental Health Section • Food Protection Program
 DHHS is an equal opportunity employer.



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- 26 7-102.11 Common Name-Working Containers - PF- At least 3 spray bottles of chemicals not labeled with common name. Chemicals removed from original container shall be labeled with common name. CDI-Labeled. // 7-201.11 Separation-Storage - P- REPEAT-Fabuloso on bottom shelf with cleaned utensils, three chemical spray bottles on bottom shelf of prep table with food and single service items. Poisonous or toxic materials shall be stored so they can not contaminate food, equipment, utensils, linens, and single service items by locating the chemicals in such a way that contamination of aforementioned items may not occur. CDI-Moved to appropriate storage area.
- 37 3-305.11 Food Storage-Preventing Contamination from the Premises - C- Rack of bread stored in hallway outside of kitchen. This is not an approved storage area for food. Cases of food stored in walk in freezer with substantial ice build up on boxes from a dripping overhead fan. Food shall be protected from contamination by storing in a clean, dry location where it is not exposed to splash, dust, or other contamination. CDI-Moved into kitchen.
- 38 2-402.11 Effectiveness-Hair Restraints - C- Food employees not wearing hair restraints. Food employees shall wear hair restraints such as hats, hair coverings or nets, beard restraints, and clothing that covers body hair, that are designed and worn to effectively keep their hair from contacting exposed food; clean equipment, utensils and linens; and unwrapped single-service and single-use articles.
- 42 4-903.11 (A), (B) and (D) Equipment, Utensils, Linens and Single-Service and Single-Use Articles-Storing - C- A large amount of clean/new utensils (pans, etc) stored in back access hallway that is not approved for storage. Equipment, utensils, etc. shall be stored where they are not exposed to contamination. Remove these items from hallway.
- 45 4-501.11 Good Repair and Proper Adjustment-Equipment - C- Substantial ice buildup and leaking in walk in freezer. Maintain equipment in good repair.
- 46 4-302.14 Sanitizing Solutions, Testing Devices - PF- Establishment out of quat sanitizer that is being purchased from local retailer to refill dispenser, and using chlorine as a sanitizer without the ability to test concentration of solution. . Solution was made according to standard operating procedure of establishment, and was too weak to be used as a sanitizer. A test kit or other device that accurately measures the concentration in MG/L of SANITIZING solutions shall be provided. Obtain test strips to test chlorine concentration and send verification to Nora Sykes by February 12, 2020 at sykesna@forsyth.cc
- 52 5-501.113 Covering Receptacles - C//5-501.115 Maintaining Refuse Areas and Enclosures - C- REPEAT-One of three shared dumpsters open. Garbage accumulation in fenced area for receptacles, and trailing into parking lot. Maintain receptacles covered. A storage area and enclosure for REFUSE, recyclables, or returnables shall be maintained free of unnecessary items, as specified under § 6-501.114, and clean. Speak with property management company about tenants maintaining this area clean.



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- 53 6-501.11 Repairing-Premises, Structures, Attachments, and Fixtures-Methods - C//6-201.11 Floors, Walls and Ceilings-Cleanability - C- Fill holes in, and remove caulk from walls where equipment was removed at wall across from fryers. . Fill holes, or ideally reattach shelving above 3 compartment sink. Maintain facilities to be smooth and easily cleanable, and in good repair.



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