

Food Establishment Inspection Report

Score: 97.5

Establishment Name: STARBUCK'S #8517

Establishment ID: 3034012597

Location Address: 2283 CLOVERDALE AVE.

City: WINSTON SALEM State: North Carolina

Zip: 27103 County: 34 Forsyth

Permittee: STARBUCKS

Telephone: (336) 549-1024

Inspection Re-Inspection Educational Visit

Wastewater System:

Municipal/Community On-Site System

Water Supply:

Municipal/Community On-Site Supply

Date: 04/10/2024 Status Code: A

Time In: 1:45 PM Time Out: 3:20 PM

Category#: II

FDA Establishment Type: Fast Food Restaurant

No. of Risk Factor/Intervention Violations: 1

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 <input type="checkbox"/> N/A				
PIC Present, demonstrates knowledge, & performs duties		1	0		
2	<input checked="" type="checkbox"/> OUT <input type="checkbox"/> 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 <input type="checkbox"/> N/A <input type="checkbox"/> 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 <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	<input type="checkbox"/> IN <input 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 type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A <input type="checkbox"/> N/O				
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	<input type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A <input type="checkbox"/> N/O				
Proper cooking time & temperatures		3	1.5	0	
19	<input type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A <input type="checkbox"/> N/O				
Proper reheating procedures for hot holding		3	1.5	0	
20	<input type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A <input type="checkbox"/> N/O				
Proper cooling time & temperatures		3	1.5	0	
21	<input type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A <input type="checkbox"/> N/O				
Proper hot holding temperatures		3	1.5	0	
22	<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> N/O				
Proper cold holding temperatures		3	1.5	X	X
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	<input type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A <input type="checkbox"/> N/O				
Time as a Public Health Control; procedures & records		3	1.5	0	
Consumer Advisory .2653					
25	<input type="checkbox"/> IN <input 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 type="checkbox"/> IN <input 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 type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A				
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	<input type="checkbox"/> IN <input 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 type="checkbox"/> IN <input 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 type="checkbox"/> IN <input 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 type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A <input type="checkbox"/> N/O				
Plant food properly cooked for hot holding		1	0.5	0	
35	<input type="checkbox"/> IN <input type="checkbox"/> OUT <input 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"/> 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 type="checkbox"/> IN <input 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 type="checkbox"/> IN <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 type="checkbox"/> IN <input checked="" type="checkbox"/> OUT				
Equipment, food & non-food contact surfaces approved, cleanable, properly designed, constructed & used		1	0.5	0	X
48	<input checked="" type="checkbox"/> OUT				
Warewashing facilities: installed, maintained & used; test strips		1	0.5	0	
49	<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT				
Non-food contact surfaces clean		1	0.5	0	X
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	<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT				
Physical facilities installed, maintained & clean		X	0.5	0	X
56	<input checked="" type="checkbox"/> OUT				
Meets ventilation & lighting requirements; designated areas used		1	0.5	0	
TOTAL DEDUCTIONS:					2.5



Comment Addendum to Food Establishment Inspection Report

Establishment Name: STARBUCK'S #8517
 Location Address: 2283 CLOVERDALE AVE.
 City: WINSTON SALEM State: NC
 County: 34 Forsyth Zip: 27103
 Wastewater System: Municipal/Community On-Site System
 Water Supply: Municipal/Community On-Site System
 Permittee: STARBUCKS
 Telephone: (336) 549-1024

Establishment ID: 3034012597
 Inspection Re-Inspection Date: 04/10/2024
 Educational Visit Status Code: A
 Comment Addendum Attached? Category #: II
 Email 1: us08517@retail.starbucks.com
 Email 2:
 Email 3:

Temperature Observations

Item/Location	Temp	Item/Location	Temp	Item/Location	Temp
Whole Milk/Cold Bar 1	39.0				
Sweet Cream/Cold Bar 2	39.0				
Whole Milk/Hot Bar 1	37.0				
2% Milk/Hot Bar 1	37.0				
Sweet Cream/Hot Bar 2	47.0				
Heavy Whipping Cream/Hot Bar 2	38.0				
Hot Water/dish machine	165.0				
Hot Water/3-compartment sink	138.0				
Quat Sani/3-compartment sink	300.0				

First
 Person in Charge (Print & Sign): Zosaner

Last
 Hour

[Signature] *[Signature]*

First
 Regulatory Authority (Print & Sign): Victoria

Last
 Murphy

[Signature]

REHS ID: 2795 - Murphy, Victoria Verification Dates: Priority: _____ Priority Foundation: _____ Core: _____

REHS Contact Phone Number: (336) 703-3814 Authorize final report to be received via Email: _____

Comment Addendum to Inspection Report

Establishment Name: STARBUCK'S #8517

Establishment ID: 3034012597

Date: 04/10/2024 **Time In:** 1:45 PM **Time Out:** 3:20 PM

Certifications

Name	Certificate #	Type	Issue Date	Expiration Date
Zosaner Hourn		Food Service	12/15/2021	12/15/2026

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.

- 22 3-501.16 (A) (2) and (B) Time / Temperature Control for Safety Food, Hot and Cold Holding-P: A container of sweet cream prepared the day prior per the PIC measured at 47 F. TCS food shall be maintained at a temperature of 41 F or below. CDI: The cream was discarded. *left at zero points due to all other items being in compliance*
- 45 4-904.11 Kitchenware and Tableware - Preventing Contamination-C: Two cup holders were observed occupied with over stacked single-use cups. (A) single-service and single-use articles and cleaned and sanitized utensils shall be handled, displayed, and dispensed so that contamination of FOOD- and lip-contact surfaces is prevented.
- 47 4-501.11 Good Repair and Proper Adjustment - Equipment-REPEAT-C: Replace torn gasket in nitro cooler. Equipment shall be maintained in good repair.
- 49 4-602.13 Nonfood Contact Surfaces-REPEAT-C: Cleaning is needed to/on the following: inside cabinets on barista line, nitro cooler, reach-in coolers, back of the house coolers, drawer holding toppings, back of house freezer, and counters and equipment throughout the facility. Nonfood-contact surfaces shall be cleaned at a frequency necessary to preclude accumulation of soil residues.
- 55 6-501.12 Cleaning, Frequency and Restrictions-REPEAT-C: Thorough cleaning is needed on floors throughout the facility and under the equipment/cleaning needed on wall under 3-compartment sink. Physical facilities shall be cleaned as often as necessary to be maintained clean.