

Food Establishment Inspection Report

Score: 97

Establishment Name: PFAFFTOWN KITCHEN/RAINBOW CATERING

Establishment ID: 3034010979

Location Address: 4683 YADKINVILLE RD.

City: PFAFFTOWN State: North Carolina

Zip: 27040 County: 34 Forsyth

Permittee: RAINBOW CATERING, LLC

Telephone: (336) 922-6998

Inspection Re-Inspection

Wastewater System:

Municipal/Community On-Site System

Water Supply:

Municipal/Community On-Site Supply

Date: 12/01/2022 Status Code: A

Time In: 12:55 PM Time Out: 2:30 PM

Category#: IV

FDA Establishment Type: Full-Service Restaurant

No. of Risk Factor/Intervention Violations: 3

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"/> IN <input checked="" type="checkbox"/> OUT				
Management, food & conditional employee; knowledge, responsibilities & reporting		2	1	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
4	<input checked="" type="checkbox"/> OUT				
Proper use of reporting, restriction & exclusion		3	1.5	0	
5	<input checked="" type="checkbox"/> IN <input checked="" type="checkbox"/> OUT				
Procedures for responding to vomiting & diarrheal events		1	0.5	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
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"/> 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	<input checked="" type="checkbox"/> 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	<input checked="" 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"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> N/O				
Food separated & protected		3	<input checked="" type="checkbox"/>	0	<input checked="" type="checkbox"/>
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"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A <input checked="" type="checkbox"/>				
Proper cooking time & temperatures		3	1.5	0	
19	<input checked="" type="checkbox"/> 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	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A <input checked="" type="checkbox"/>				
Proper cooling time & temperatures		3	1.5	0	
21	<input checked="" type="checkbox"/> 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	<input checked="" 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 checked="" type="checkbox"/> 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	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/>				
Pasteurized foods used; prohibited foods not offered		3	1.5	0	
Chemical .2653, .2657					
27	<input checked="" type="checkbox"/> 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	<input checked="" type="checkbox"/> 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	<input checked="" type="checkbox"/> 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	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/>				
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 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"/> IN <input checked="" type="checkbox"/>				
Food properly labeled: original container		2	<input checked="" type="checkbox"/>	0	
Prevention of Food Contamination .2652, .2653, .2654, .2656, .2657					
38	<input checked="" type="checkbox"/> IN <input checked="" type="checkbox"/>				
Insects & rodents not present; no unauthorized animals		2	1	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
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"/> IN <input checked="" type="checkbox"/>				
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"/>				
Non-food contact surfaces clean		1	<input checked="" type="checkbox"/>	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	<input checked="" type="checkbox"/> IN <input checked="" type="checkbox"/>				
Physical facilities installed, maintained & clean		1	0.5	<input checked="" type="checkbox"/>	
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

Establishment Name: CATERING
 Location Address: 4683 YADKINVILLE RD.
 City: PFAFFTOWN State: NC
 County: 34 Forsyth Zip: 27040
 Wastewater System: Municipal/Community On-Site System
 Water Supply: Municipal/Community On-Site System
 Permittee: RAINBOW CATERING, LLC
 Telephone: (336) 922-6998

Establishment ID: 3034010979
 Inspection Re-Inspection Date: 12/01/2022
 Comment Addendum Attached? Status Code: A
 Water sample taken? Yes No Category #: IV
 Email 1: contact@RainbowCateringNC.com
 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
sanitizer (ppm)	bottle	200						
water	3-comp	122						
hot dogs	reach-in	40						
chicken	reach-in	39						
potato salad	reach-in	40						

Person in Charge (Print & Sign): *First* Jimmie
 Regulatory Authority (Print & Sign): *First* Ashley

Last Burton
Last Mize

Joan Burton

Ashley Mize

REHS ID: 2663 - Mize, Ashley
 REHS Contact Phone Number: (336) 830-0717

Verification Required Date:

Authorize final report to be received via Email:

[Signature]



Comment Addendum to Inspection Report

Establishment Name: PFAFFTOWN KITCHEN/RAINBOW CATERING

Establishment ID: 3034010979

Date: 12/01/2022 **Time In:** 12:55 PM **Time Out:** 2:30 PM

Certifications

Name	Certificate #	Type	Issue Date	Expiration Date
Jimmie Burton		Food Service		04/03/2023

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.

- 3 2-201.11 (A), (B), (C), and (E) Responsibility of Permit Holder, Person in Charge and Conditional Employees (P). No employee health provided at time of inspection. Ensure the new employee health policy is available at all times and employees are aware of updates. CDI-provided updated employee health policy.
- 5 2-501.11 Clean-up of Vomiting and Diarrheal Event (Pf). Vomiting and diarrheal procedures not provided or available at time of inspection. Ensure these procedures are available at all times and employees are aware of these procedures. CDI-provided procedures.
- 15 3-302.11 Packaged and Unpackaged Food - Separation, Packaging, and Segregation (P). Unwashed cabbage being stored on the top shelf of the reach-in above ready-to-eat foods. Ensure food is being stored according to their final cook temps and unwashed produce is being stored below ready-to-eat foods until properly washed. CDI-education with management, cabbage moved.
- 37 3-302.12 Food Storage Containers Identified with Common Name of Food (C). Multiple containers of dry goods are not properly labeled. Label all working containers of food (oils, spices, salts) except food that is easy to identify such as dry pasta.
- 38 6-202.15 Outer Openings, Protected (C). The back door needs new weather stripping and threshold as light from outside can be seen around the door and could be an entrance for pests. Protect outer openings of establishment from insect or rodent entry.
- 47 4-501.11 Good Repair and Proper Adjustment - Equipment (C). The gaskets on the low two door freezer are torn and need replaced. The door on the single door reach-in cooler is cracked and needs repaired or replaced. The following pieces of equipment shall be repaired or removed if not functioning properly: back two door reach-in cooler, low reach-in cooler, and prep unit. Equipment shall be kept in good repair.
- 49 4-602.13 Nonfood Contact Surfaces (C) Nonfood contact surfaces need detailed cleaning (gaskets, inside units, inside microwave, shelving, etc.). Non-food contact surfaces of equipment shall be cleaned at frequency to prevent accumulation of soil residue.
- 55 6-501.11 Repairing - Premises, Structures, Attachments, and Fixtures - Methods (C) Multiple corner boards throughout facility are in disrepair, the ceiling is in disrepair at the end of the hood, there is a hole in the ceiling above the handsink, etc. Also, the tile in the mop sink basin is cracked and broken in a few areas. Floors, walls, and ceilings including the attachments such as soap and towel dispensers; light fixtures; and heat/ac vents shall be maintained in good repair.
6-201.11 Floors, Walls and Ceilings - Cleanability (C). Dry storage is currently being stored in the dining room area, an unapproved/not permitted area for storage. Ensure dry storage is being stored in an approved location where floors, walls and ceilings are smooth, easily cleanable and nonabsorbent.