

Food Establishment Inspection Report

Score: 96

Establishment Name: WALMART #3626 DELI

Establishment ID: 3034020648

Location Address: 3475 PARKWAY VILLAGE CIRCLE

City: WINSTON SALEM State: North Carolina

Zip: 27127 County: 34 Forsyth

Permittee: WAL MART STORES INC

Telephone: (336) 771-1011

Inspection Re-Inspection

Wastewater System:

Municipal/Community On-Site System

Water Supply:

Municipal/Community On-Site Supply

Date: 03/14/2023 Status Code: A

Time In: 12:30 PM Time Out: 3:00 PM

Category#: III

FDA Establishment Type: Delicatessen Department

No. of Risk Factor/Intervention Violations: 1

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 <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 checked="" type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> N/O				
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 checked="" type="checkbox"/> OUT <input 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 type="checkbox"/> IN <input checked="" type="checkbox"/> OUT				
Food-contact surfaces: cleaned & sanitized		3	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 <input type="checkbox"/> N/A <input type="checkbox"/> N/O				
Proper cooking time & temperatures		3	1.5	0	
19	<input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> N/O				
Proper reheating procedures for hot holding		3	1.5	0	
20	<input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> N/O				
Proper cooling time & temperatures		3	1.5	0	
21	<input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> N/O				
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 type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input 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 checked="" type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> N/O				
Consumer advisory provided for raw/undercooked foods		1	0.5	0	
Highly Susceptible Populations .2653					
26	<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> N/O				
Pasteurized foods used; prohibited foods not offered		3	1.5	0	
Chemical .2653, .2657					
27	<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> N/O				
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 checked="" type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> N/O				
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 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 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"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> N/O				
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 type="checkbox"/> IN <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 type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A				
Equipment, food & non-food contact surfaces approved, cleanable, properly designed, constructed & used		1	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		X	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:					4



Comment Addendum to Food Establishment Inspection Report

Establishment Name: WALMART #3626 DELI
 Location Address: 3475 PARKWAY VILLAGE CIRCLE
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 County: 34 Forsyth Zip: 27127
 Wastewater System: Municipal/Community On-Site System
 Water Supply: Municipal/Community On-Site System
 Permittee: WAL MART STORES INC
 Telephone: (336) 771-1011

Establishment ID: 3034020648
 Inspection Re-Inspection Date: 03/14/2023
 Comment Addendum Attached? Status Code: A
 Water sample taken? Yes No Category #: III
 Email 1: J0n00vm.s03626.us@wal-mart.com
 Email 2: s0m03iu.s03626.us@wal-mart.com
 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
Ambient	Retail Cooler	33						
Chicken	Hot Bar	137						
Mac and Cheese	Hot Bar	146						
Beans	Hot Bar	136						
Hot Water	Prep sink	129						
Wedges	Reheat	184						
Fried Chicken	Retail Case	136						
Ambient	Walkin	36						
Popcorn Chicken	Retail Case	148						
Rotisserie	Retail Case	154						
Chicken	Final	195						
Ambient	Deli Case	33						
Turkey	Deli Case	34						
Ham	Deli Case	34						
Quat Sanitizer	Bucket	200						
Chicken	Cooling	111						
Chicken	Cooling	78						
Chicken Flautas	Reheat	165						

Person in Charge (Print & Sign): _____
 Regulatory Authority (Print & Sign): Ebonie




REHS ID: 3122 - Wilborn, Ebonie
 REHS Contact Phone Number: _____

Verification Required Date: 03/24/2023

Authorize final report to be received via Email: _____

Comment Addendum to Inspection Report

Establishment Name: WALMART #3626 DELI

Establishment ID: 3034020648

Date: 03/14/2023 **Time In:** 12:30 PM **Time Out:** 3:00 PM

Certifications

Name	Certificate #	Type	Issue Date	Expiration Date
Jessica Nguyen	21543749	Food Service	01/30/2019	01/30/2024

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.

- 16 4-703.11 Hot Water and Chemical - Methods (P) REPEAT Dish machine ran several times and measured 130F, 153F and 148F. Dish machine also ran with thermo strips and did not turn black. After being cleaned equipment food contact surfaces and utensils shall be sanitized in chemical or hot water (160F minimum) manual or mechanical. Inspector will return by March 24th the verify dish machine is able to reach minimum required temperature for sanitizing.
- 47 4-501.11 Good Repair and Proper Adjustment - Equipment (C) REPEAT with improvement- Heavy buildup of ice in the walk-in freezer. Person in charge stated a work order has been placed and cardboard is being used to prevent ice from contaminating food inside freezer. Equipment shall be maintained in a state of good repair. Equipment components such as doors, seals, hinges, fasteners, and kick plates shall be kept intact, tight, and adjusted.
- 49 4-602.13 Nonfood Contact Surfaces (C) REPEAT The fans and vents in the walk-in have a buildup of dust. Clean shelves in dish area. Nonfood Contact Surfaces of equipment shall be cleaned at a frequency necessary to preclude accumulation of soil residues.
- 55 6-501.12 Cleaning, Frequency and Restrictions (C) REPEAT Wall cleaning needed under the three-compartment sink. Physical facilities shall be cleaned as often as necessary to keep them clean.
6-501.11 Repairing - Premises, Structures, Attachments, and Fixtures - Methods (C) REPEAT Plug holes in wall by three-compartment sink and hand sink in dish area. Recalk hand sink and prep counter to wall. Physical facilities shall be maintained in good repair.