Food Establishment Inspection Report

Establishment Name: REAL Q

	L	oca	atio	on.	Address: 4885 COUNTRY CLUB RD						
		-			STON-SALEM State: North Ca	ro	lina	a			
	Ζ	ip:_	27	10	4 County: <u>34 Forsyth</u>						
	Ρ	err	nit	tte	e: PAJR, INC.						
	Т	ele	ph	or	ne: <u>(336)</u> 760-1150						
		\otimes) Ir	nsp	ection O Re-Inspection O I	Ec	luc	at	iona	l V	isit
	V	Vas	ste	wa	ater System:						
		\otimes	M	lun	nicipal/Community O On-Site System						
	V	Vat	er	Sι	ipply:						
		Ø	M	lur	icipal/Community On-Site Supply						
	Fc	bod	bo	rne	e Illness Risk Factors and Public Health Ir	nte	erv	er	ition	s	
	Ris	sk fa	cto	rs: (Contributing factors that increase the chance of developing foo	db	orne	illr	ness.		
	Pul	blic	Hea	lth	Interventions: Control measures to prevent foodborne illness	or	injur	y			
C	o	mp	lia	nc	e Status	1	OUT	r	CDI	R	VR
S	upe	ervis	ion		.2652						
1	X	оит	N/A		PIC Present, demonstrates knowledge, & performs duties	1		0			
2	М	оит	N/A		Certified Food Protection Manager	1		0			
-	<u> </u>	loye		ealt		1	<u> </u>	0			
3	Ľ	оит			Management, food & conditional employee;	2	1	0			
4	ľ.	OUT			knowledge, responsibilities & reporting Proper use of reporting, restriction & exclusion	3	1.5	0			
5	+	OUT			Procedures for responding to vomiting &	1	0.5	0			
_	<u> </u>				diarrheal events	1	0.5	0			
		ОUТ	giei	IIC	Practices .2652, .2653 Proper eating, tasting, drinking or tobacco use	1	0.5	0			
7	X	OUT			No discharge from eyes, nose, and mouth	1	0.5	0			
-	_		ng (Con	tamination by Hands .2652, .2653, .2655, .265	-					
8		OUT			Hands clean & properly washed No bare hand contact with RTE foods or pre-	4	2	0			
9		Ουτ			approved alternate procedure properly followed	4	2	0			
		OUT	-		Handwashing sinks supplied & accessible	2	1	0			
		OUT	d Se	oure	ce .2653, .2655 Food obtained from approved source	2	1	0			
		OUT		Ň		2	1	0			\vdash
13	X	OUT			Food in good condition, safe & unadulterated	2	1	0			
14	IN	оит	¢₩	N/O	Required records available: shellstock tags, parasite destruction	2	1	0			
	_			_	Contamination .2653, .2654			_			
		OUT OUT		N/O	Food separated & protected Food-contact surfaces: cleaned & sanitized	3	1.5 1.5				\vdash
	-	оит			Proper disposition of returned, previously served,	2	1	0			
					reconditioned & unsafe food	2	1	0			
		ntial OUT			ardous Food Time/Temperature .2653 Proper cooking time & temperatures	3	1.5	0			
19	Ņ	ουτ	N/A	N/O	Proper reheating procedures for hot holding	3	1.5	0			
		OUT OUT			Proper cooling time & temperatures Proper hot holding temperatures	3 3	1.5 1.5				
	1	OUT		_	Proper cold holding temperatures	3	1.5	-			\square
23	X	оит	N/A	N/O		3	1.5	0			
24	X	ουτ	N/A	N/O	Time as a Public Health Control; procedures & records	3	1.5	0			
	T		_	<u> </u>	sory .2653	-					
25	IN	оит	NXA		Consumer advisory provided for raw/ undercooked foods	1	0.5	0			
	Ē			Ľ.	ble Populations .2653						
26	IN	оит	NXA		Pasteurized foods used; prohibited foods not offered	3	1.5	0			
	_	nica	_		.2653, .2657	L.					
	-	OUT OX(T	· ·		Food additives: approved & properly used Toxic substances properly identified stored & used	1	0.5	0	х		$\left - \right $
	-				ith Approved Procedures	17		~	~		
		оит			Compliance with variance, specialized process,	2	1	0			
		<u> </u>			reduced oxygen packaging criteria or HACCP plan	[1				

Establishment ID:	3034010551
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Date: 04/09/2024	Status Code: A
Time In: 10:45 AM	_Time Out: _12:10 PM
Category#: III	
FDA Establishment Type	E Full-Service Restaurant
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	

No. of Risk Factor/Intervention Violations: 1 No. of Repeat Risk Factor/Intervention Violations: 0

					and physical objects into foods.	_					
С	or	npl	iar	ice	Status		OUT	Г	CDI	R	۷
Sa	fe	Food	d an	d Wa	ater .2653, .2655, .2658						
_		OUT	¢¥(A		Pasteurized eggs used where required	1	0.5	0			
31	X	OUT			Water and ice from approved source	2	1	0			
32	IN	оит	×		Variance obtained for specialized processing methods	2	1	0			
Fo	od	Ten	nper	atur	e Control .2653, .2654						
33	×	оит			Proper cooling methods used; adequate equipment for temperature control	1	0.5	0			
34	IN	оит	N/A	N)X0	Plant food properly cooked for hot holding	1	0.5	0			
35	X	OUT	N/A	N/O	Approved thawing methods used	1	0.5	0			
36	X	OUT			Thermometers provided & accurate	1	0.5	0			
Fo	ood	Ider	ntifie	catio	n .2653						
37	X	OUT			Food properly labeled: original container	2	1	0			
Pr	eve	entic	on o	fFoo	od Contamination .2652, .2653, .2654, .2656, .26	57					
38	M	оит			Insects & rodents not present; no unauthorized animals	2	1	0			
39	M	оит			Contamination prevented during food preparation, storage & display	2	1	0			
40	M	OUT			Personal cleanliness	1	0.5	0			
41	M	оит			Wiping cloths: properly used & stored	1	0.5	0			
42	M	OUT	N/A		Washing fruits & vegetables	1	0.5	0			
Pr	ор	er Us	se o	f Ute	ensils .2653, .2654						
43	M	OUT			In-use utensils: properly stored	1	0.5	0			
44	M	оит			Utensils, equipment & linens: properly stored, dried & handled	1	0.5	0			
45	~	оит			Single-use & single-service articles: properly stored & used	1	0.5	0			
46	M	OUT			Gloves used properly	1	0.5	0			
Ut	ens	sils a	and	Equi	ipment .2653, .2654, .2663			_			
47	IN	% ™			Equipment, food & non-food contact surfaces approved, cleanable, properly designed, constructed & used	1	ð%5	0			
		оит			Warewashing facilities: installed, maintained & used; test strips	1	0.5				
49	M	OUT			Non-food contact surfaces clean	1	0.5	0			
	-			ilitie							
_		OUT	N/A		Hot & cold water available; adequate pressure	1	0.5	0			
_	_	OUT			Plumbing installed; proper backflow devices	2	1	0			
52	M	OUT			Sewage & wastewater properly disposed	2	1	0			-
53		оит	N/A		Toilet facilities: properly constructed, supplied & cleaned Garbage & refuse properly disposed; facilities	1	0.5	0			
	M	OUT			maintained	1	0.5	0			
54										112	
54 55	IN	0)∢ ⊤			Physical facilities installed, maintained & clean Meets ventilation & lighting requirements;	1	0%5	0		Х	



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Comment Addendum to Food Establishment Inspection Report

Establishment Name: REAL Q	Establishment ID: 3034010551
Location Address: <u>4885 COUNTRY CLUB RD</u> City: <u>WINSTON-SALEM</u> State: <u>NC</u>	X Inspection Re-Inspection Date: 04/09/2024 Educational Visit Status Code: A
County: <u>34 Forsyth</u> Zip: <u>27104</u>	Comment Addendum Attached? X Category #: III
Wastewater System: 🕅 Municipal/Community 🔲 On-Site System Water Supply: 🕅 Municipal/Community 🗍 On-Site System	Email 1:eatrealq@gmail.com
Permittee: PAJR, INC.	Email 2:
Telephone: (336) 760-1150	Email 3:

Item/Location	Temp	Item/Location	Temp	Item/Location	Temp
hot water sanitizing/3 comp sink	185				
beans/reheat for hot holding	168				
potato salad/walk in cooler	38				
red slaw/walk in cooler	37				
cole slaw/walk in cooler	36				
beans/walk in cooler	39				
pork BBQ/Henny Penny	158				
sliced tomatoes/make unit	40				
red slaw/make unit	41				
cole slaw/make unit	41				
hot dogs/steam well	157				
chili/steam well	147				
chlorine sanitizer/spray bottle	50				
chlorine sanitizer/wiping cloth bucket	50				
banana pudding/front upright cooler	39				
ambient air/drink cooler	37				

First Person in Charge (Print & Sign): James	<i>Last</i> Hondros	Jan Hal	
First	Last	Pak	
Regulatory Authority (Print & Sign): Lauren	Pleasants	farfferst	
REHS ID:2809 - Pleasants, Lauren	Verification Dates: Priority:	Priority Foundation:	Core:
REHS Contact Phone Number: (336) 703-3144		ize final report to	
North Carolina Department of Health & Human S Page	ervices		n Program

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Date: 04/09/2024 Time In: 10:45 AM Time Out: 12:10 PM

on Date
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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.

- 28 7-102.11 Common Name Working Containers (Pf) -Observed one spray bottle of blue cleaning chemical that was not labeled. Spray bottle of sanitizer has a very faded label. Working containers used for storing poisonous or toxic materials such as cleaners and sanitizers taken from bulk supplies shall be clearly and individually identified with the common name of the material. - CDI- all working containers were labeled with the common name of the substance.
- 47 4-501.11 Good Repair and Proper Adjustment Equipment (C) Wrap the condensate line from the fan box in the walk in cooler with sleeving. Replace gasket on the make unit reach in cooler that is damaged. Maintain equipment in good repair. **Henny Penny with damaged plate has been replaced with a new unit.**

4-202.11 Food-Contact Surfaces - Cleanability (Pf)- Two large plastic scoops have cracks and need to be replaced. Multiuse food-contact surfaces shall be free of cracks, pits, inclusions, and imperfections that make them no longer smooth and easily cleanable. CDI- Scoops separated from dishes and will be replaced.

55 6-501.12 Cleaning, Frequency, and Restrictions. REPEAT- Ceiling cleaning needed above the 2 door freezer. Floor and baseboard cleaning needed in the bread room of crumbs and soil buildup. Floor, wall, and pipe cleaning needed underneath the 3 compartment sink. Floors, walls, and ceilings, shall be cleaned at a frequency necessary to maintain them clean.