

Food Establishment Inspection Report

Score: 94.5

Establishment Name: ICHIBAN

Establishment ID: 3034010913

Location Address: 270 S STRATFORD RD

City: WINSTON SALEM State: North Carolina

Zip: 27103 County: 34 Forsyth

Permittee: ICHIBAN, INC.

Telephone: (336) 725-3050

Inspection Re-Inspection

Wastewater System:

Municipal/Community On-Site System

Water Supply:

Municipal/Community On-Site Supply

Date: 06/22/2022 Status Code: A

Time In: 12:36 PM Time Out: 2:36 PM

Category#: IV

FDA Establishment Type: Full-Service 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/N/A | | | | |
| PIC Present, demonstrates knowledge, & performs duties | | 1 | 0 | | |
| 2 | <input checked="" type="checkbox"/> OUT/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/N/A/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/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 OUT | | | | |
| 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"/> OUT/N/A/N/O | | | | |
| Required records available: shellstock tags, parasite destruction | | 2 | 1 | 0 | |
| Protection from Contamination .2653, .2654 | | | | | |
| 15 | <input checked="" type="checkbox"/> IN <input checked="" type="checkbox"/> OUT/N/A/N/O | | | | |
| Food separated & protected | | 3 | <input checked="" type="checkbox"/> 0 | X | |
| 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"/> OUT/N/A/N/O | | | | |
| Proper cooking time & temperatures | | 3 | 1.5 | 0 | |
| 19 | <input checked="" type="checkbox"/> IN <input checked="" type="checkbox"/> OUT/N/A/N/O | | | | |
| Proper reheating procedures for hot holding | | 3 | 1.5 | 0 | |
| 20 | <input checked="" type="checkbox"/> OUT/N/A/N/O | | | | |
| Proper cooling time & temperatures | | 3 | 1.5 | 0 | |
| 21 | <input checked="" type="checkbox"/> OUT/N/A/N/O | | | | |
| Proper hot holding temperatures | | 3 | 1.5 | 0 | |
| 22 | <input checked="" type="checkbox"/> OUT/N/A/N/O | | | | |
| Proper cold holding temperatures | | 3 | 1.5 | 0 | |
| 23 | <input checked="" type="checkbox"/> OUT/N/A/N/O | | | | |
| Proper date marking & disposition | | 3 | 1.5 | 0 | |
| 24 | <input checked="" type="checkbox"/> OUT/N/A/N/O | | | | |
| Time as a Public Health Control; procedures & records | | 3 | 1.5 | 0 | |
| Consumer Advisory .2653 | | | | | |
| 25 | <input checked="" type="checkbox"/> OUT/N/A | | | | |
| Consumer advisory provided for raw/undercooked foods | | 1 | 0.5 | 0 | |
| Highly Susceptible Populations .2653 | | | | | |
| 26 | <input checked="" type="checkbox"/> IN <input checked="" type="checkbox"/> OUT | | | | |
| Pasteurized foods used; prohibited foods not offered | | 3 | 1.5 | 0 | |
| Chemical .2653, .2657 | | | | | |
| 27 | <input checked="" type="checkbox"/> IN <input checked="" type="checkbox"/> OUT | | | | |
| Food additives: approved & properly used | | 1 | 0.5 | 0 | |
| 28 | <input checked="" type="checkbox"/> OUT/N/A | | | | |
| Toxic substances properly identified stored & used | | 2 | 1 | 0 | |
| Conformance with Approved Procedures .2653, .2654, .2658 | | | | | |
| 29 | <input checked="" type="checkbox"/> OUT/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 checked="" 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 checked="" type="checkbox"/> OUT/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/N/A/N/O | | | | |
| Plant food properly cooked for hot holding | | 1 | 0.5 | 0 | |
| 35 | <input checked="" type="checkbox"/> OUT/N/A/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"/> OUT | | | | |
| Food properly labeled: proper original container | | 2 | 1 | <input checked="" type="checkbox"/> | |
| 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"/> IN <input checked="" type="checkbox"/> OUT | | | | |
| Contamination prevented during food preparation, storage & display | | 2 | X | 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/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"/> OUT | | | | |
| Equipment, food & non-food contact surfaces approved, cleanable, properly designed, constructed & used | | X | 0.5 | 0 | X |
| 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"/> OUT | | | | |
| Non-food contact surfaces clean | | X | 0.5 | 0 | X |
| Physical Facilities .2654, .2655, .2656 | | | | | |
| 50 | <input checked="" type="checkbox"/> OUT/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/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"/> OUT | | | | |
| Physical facilities installed, maintained & clean | | 1 | <input checked="" type="checkbox"/> 0 | X | |
| 56 | <input checked="" type="checkbox"/> IN <input checked="" type="checkbox"/> OUT | | | | |
| Meets ventilation & lighting requirements; designated areas used | | 1 | <input checked="" type="checkbox"/> 0 | X | |
| TOTAL DEDUCTIONS: 5.5 | | | | | |



Comment Addendum to Food Establishment Inspection Report

Establishment Name: ICHIBAN
 Location Address: 270 S STRATFORD RD
 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: ICHIBAN, INC.
 Telephone: (336) 725-3050

Establishment ID: 3034010913
 Inspection Re-Inspection Date: 06/22/2022
 Comment Addendum Attached? Status Code: A
 Water sample taken? Yes No Category #: IV
 Email 1:
 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 |
|---------------|------------------------|-------|-----------|------------------|-------|------|----------|------|
| Chicken | final cook | 197.0 | Serv Safe | Peter Do 6-27-23 | 000.0 | | | |
| Vegetables | cooked for hot holding | 181.0 | | | | | | |
| Chicken Soup | hot holding | 151.0 | | | | | | |
| Fried Rice | hot holding | 180.0 | | | | | | |
| Cabbage | make-unit | 41.0 | | | | | | |
| Lettuce | sandwich unit | 37.0 | | | | | | |
| Pork | sandwich unit | 35.0 | | | | | | |
| Squid Salad | sushi station | 38.0 | | | | | | |
| Tuna | sushi station | 37.0 | | | | | | |
| Salmon | sushi station | 40.0 | | | | | | |
| Octopus | sushi station | 39.0 | | | | | | |
| Yellow Tail | sushi station | 40.0 | | | | | | |
| Shrimp | sushi station | 39.0 | | | | | | |
| Escolar | sushi station | 38.0 | | | | | | |
| Chicken Broth | walk-in cooler | 40.0 | | | | | | |
| Noodles | walk-in cooler | 40.0 | | | | | | |
| Chicken | walk-in cooler | 41.0 | | | | | | |
| C. Sani | dish machine | 50.0 | | | | | | |
| Quat Sani | sani bottle | 400.0 | | | | | | |
| Hot Water | 3-compartment sink | 144.0 | | | | | | |

Person in Charge (Print & Sign): Peter *First* Do *Last*
 Regulatory Authority (Print & Sign): Victoria *First* Murphy *Last*

Peter Do
Victoria Murphy

REHS ID: 2795 - Murphy, Victoria

Verification Required Date: _____

REHS Contact Phone Number: (336) 703-3814



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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Comment Addendum to Inspection Report

Establishment Name: ICHIBAN

Establishment ID: 3034010913

Date: 06/22/2022 **Time In:** 12:36 PM **Time Out:** 2:36 PM

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.

- 15 3-302.11 Packaged and Unpackaged Food - Separation, Packaging, and Segregation-P: Unwashed produce was stored over washed produce/raw meat was stored over containers of chicken broth in the walk-in cooler. (A) Food shall be protected from cross contamination by:(1) Except as specified in (1)(d) below, separating raw animal foods during storage, preparation, holding, and display from:(b) Cooked ready-to-eat foods; (c) Fruits and vegetables before they are washed. CDI: The PIC rearranged the storage order of the items appropriately.
- 37 3-302.12 Food Storage Containers Identified with Common Name of Food-C: Several bottles of condiments were without labeling on the cook line. Except for containers holding food that can be readily and unmistakably recognized such as dry pasta, working containers holding food or food ingredients that are removed from their original packages for use in the food establishment, such as cooking oils, flour, herbs, potato flakes, salt, spices, and sugar shall be identified with the common name of the food.
- 39 3-305.11 Food Storage - Preventing Contamination from the Premises-C: Condensation leak observed on food in the walk-in freezer. (A) Except as specified in (B) and (C) of this section, food shall be protected from contamination by storing the food: (2) Where it is not exposed to splash, dust, or other contamination
- 47 4-501.11 Good Repair and Proper Adjustment - Equipment-REPEAT-C: Replaced rusting shelves in walk-in cooler. Shelves inside the walk-in cooler are rusting/leaking condenser in the walk-in freezer/replace damaged gasket on walk-in freezer door/readjust freezer door. Equipment shall be maintained in good repair.
- 49 4-602.13 Nonfood Contact Surfaces-REPEAT-C: Thorough cleaning is needed to/on the following: behind the grill, reach-in cooler, make-unit, shelves in walk-in cooler, floors in walk-in cooler, shelving on cook line. Nonfood-contact surfaces of equipment shall be at a frequency necessary to preclude accumulation of soil residues.
- 55 Cleaning, Frequency and Restrictions-REPEAT-C: Cleaning is needed on walls and ceilings throughout the facility. Physical facilities shall be cleaned as often as necessary to keep them clean.
- 56 6-303.11 Intensity - Lighting-REPEAT-C: Lighting measured in the following areas: walk-in cooler (5 ft candles), men and women's restrooms (2ft candles). The lighting intensity shall be at least 10 ft candles 30 inches above the floor in the walk-in refrigeration units and 20 ft candles 30 inches above the floor in the toilet rooms, and at least 50 ft candles at a surface where a food employee is working with food or working with utensils or equipment such as knives, slicers, or saws where employee safety is a factor.