

# Food Establishment Inspection Report

Score: 96

Establishment Name: WSSU ANDERSON CENTER CATERING

Establishment ID: 3034060021

Location Address: 601 S. MARTIN LUTHER KING JR. DR.

City: WINSTON SALEM State: North Carolina

Zip: 27110 County: 34 Forsyth

Permittee: WINSTON SALEM STATE

Telephone: (336) 750-2846

☒ Inspection ☐ Re-Inspection**Wastewater System:**☒ Municipal/Community ☐ On-Site System**Water Supply:**☒ Municipal/Community ☐ On-Site Supply

Date: 05/26/2023 Status Code: A

Time In: 11:30 AM Time Out: 1:10 PM

Category#: IV

FDA Establishment Type: Full-Service Restaurant

No. of Risk Factor/Intervention Violations: 2

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
<b>Supervision .2652</b>					
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	
<b>Employee Health .2652</b>					
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
<b>Good Hygienic Practices .2652, .2653</b>					
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
<b>Preventing Contamination by Hands .2652, .2653, .2655, .2656</b>					
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"/> IN <input checked="" type="checkbox"/> OUT/N/A	Handwashing sinks supplied & accessible	2	X	0 X X
<b>Approved Source .2653, .2655</b>					
11	<input checked="" type="checkbox"/> OUT	Food obtained from approved source	2	1	0
12	<input checked="" type="checkbox"/> IN <input checked="" 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 checked="" type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A/N/O	Required records available: shellstock tags, parasite destruction	2	1	0
<b>Protection from Contamination .2653, .2654</b>					
15	<input checked="" type="checkbox"/> OUT/N/A/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
<b>Potentially Hazardous Food Time/Temperature .2653</b>					
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"/> IN <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"/> IN <input checked="" type="checkbox"/> OUT/N/A/N/O	Proper date marking & disposition	3	X	0 X
24	<input checked="" type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A/N/O	Time as a Public Health Control; procedures & records	3	1.5	0
<b>Consumer Advisory .2653</b>					
25	<input checked="" type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A	Consumer advisory provided for raw/undercooked foods	1	0.5	0
<b>Highly Susceptible Populations .2653</b>					
26	<input checked="" type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A	Pasteurized foods used; prohibited foods not offered	3	1.5	0
<b>Chemical .2653, .2657</b>					
27	<input checked="" type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A	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
<b>Conformance with Approved Procedures .2653, .2654, .2658</b>					
29	<input checked="" type="checkbox"/> IN <input checked="" 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
<b>Safe Food and Water .2653, .2655, .2658</b>					
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"/> IN <input checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A	Variance obtained for specialized processing methods	2	1	0
<b>Food Temperature Control .2653, .2654</b>					
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 checked="" type="checkbox"/> N/A <input checked="" type="checkbox"/> N/O	Plant food properly cooked for hot holding	1	0.5	0
35	<input checked="" type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A <input checked="" type="checkbox"/> N/O	Approved thawing methods used	1	0.5	X X
36	<input checked="" type="checkbox"/> OUT	Thermometers provided & accurate	1	0.5	0
<b>Food Identification .2653</b>					
37	<input checked="" type="checkbox"/> OUT	Food properly labeled: original container	2	1	0
<b>Prevention of Food Contamination .2652, .2653, .2654, .2656, .2657</b>					
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 checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A	Washing fruits & vegetables	1	0.5	0
<b>Proper Use of Utensils .2653, .2654</b>					
43	<input checked="" type="checkbox"/> OUT	In-use utensils: properly stored	1	0.5	0
44	<input checked="" type="checkbox"/> IN <input checked="" type="checkbox"/> OUT	Utensils, equipment & linens: properly stored, dried & handled	1	0.5	X
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
<b>Utensils and Equipment .2653, .2654, .2663</b>					
47	<input checked="" type="checkbox"/> IN <input checked="" type="checkbox"/> OUT	Equipment, food & non-food contact surfaces approved, cleanable, properly designed, constructed & used	1	0.5	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	1	X	0 X
<b>Physical Facilities .2654, .2655, .2656</b>					
50	<input checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A	Hot & cold water available; adequate pressure	1	0.5	0
51	<input checked="" type="checkbox"/> IN <input checked="" type="checkbox"/> OUT	Plumbing installed; proper backflow devices	2	1	X
52	<input checked="" type="checkbox"/> OUT	Sewage & wastewater properly disposed	2	1	0
53	<input checked="" type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A	Toilet facilities: properly constructed, supplied & cleaned	1	0.5	X
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	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

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☒ Inspection ☐ Re-Inspection Date: 05/26/2023

City: WINSTON SALEM State: NC

Comment Addendum Attached? ☒ Status Code: A

County: 34 Forsyth Zip: 27110

Water sample taken? ☐ Yes ☒ No Category #: IV

Wastewater System: ☒ Municipal/Community ☐ On-Site System

Email 1: adipahnyira-elfreda@aramark.com

Water Supply: ☒ Municipal/Community ☐ On-Site System

Email 2:

Permittee: WINSTON SALEM STATE

Email 3:

Telephone: (336) 750-2846

## Temperature Observations

**Effective January 1, 2019 Cold Holding is now 41 degrees or less**

Item	Location	Temp	Item	Location	Temp	Item	Location	Temp
ServSafe	Elfreda Adipah-Nhyira 10/1/23	0						
hot water	3 comp sink	134						
quat sanitizer	3 comp sink	400						
melon	walk in cooler	38						
butter	upright cooler	41						
fried fish	hot holding	173						
fried okra	hot holding	178						
milk	outdoor walk in cooler	41						

*First*  
Person in Charge (Print & Sign): Elfreda

*Last*  
Adipah-Nhyira

*First*  
Regulatory Authority (Print & Sign): Lauren

*Last*  
Pleasants

REHS ID: 2809 - Pleasants, Lauren

Verification Required Date:

REHS Contact Phone Number: (336) 703-3144

Authorize final report to  
be received via Email:

*[Signature]*

*[Signature]*

*[Signature]*



North Carolina Department of Health & Human Services

Page 1 of \_\_\_\_\_  
● Division of Public Health ● Environmental Health Section  
DHHS is an equal opportunity employer.  
Food Establishment Inspection Report, 10/2021

● Food Protection Program



## Comment Addendum to Inspection Report

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**Date:** 05/26/2023 **Time In:** 11:30 AM **Time Out:** 1:10 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.

- 10 6-301.12 Hand Drying Provision (Pf) - Repeat with improvement- The handwashing sink in the men's restroom and the one by the 3 compartment sink were lacking paper towels. Each handwashing sink shall be provided with paper towels or an approved hand-drying device. CDI- Paper towels provided at sinks.
- 5-205.11 Using a Handwashing Sink - Operation and Maintenance (Pf) - Items stored in the handwashing sink next to the 3 compartment sink. Handwashing sinks shall be available at all times for employee use and may only be used for handwashing. CDI- Sink cleaned out during the inspection.
- 23 3-501.18 Ready-To-Eat Time / Temperature Control for Safety Food, Disposition (P) - One container of stewed tomatoes dated 5/4. One container of roasted peppers, one container of tomato sauce, 2 packs of turkey, 2 packs of roast beef, and 2 packs of ham without date marking. Refrigerated, ready-to-eat food prepared and packaged shall be clearly marked with dates if held for more than 24 hours, and may be held at 41F for a maximum of 7 days. The foods specified shall be discarded if it exceeds the time and temperature criteria except for time the product is frozen, is in a container or a package that does not bear a date or day, or is inappropriately marked with a date or day that exceeds 41F for 7 days. CDI- All foods voluntarily discarded.
- 35 3-501.13 Thawing (Pf) - Raw fish thawing in a prep sink under 73F running water. Thawing shall occur under running water that is 70F or less, as part of the cooking process, or under refrigeration. CDI- Fish measured 68F so was ready to be prepped.
- 44 4-903.11 (A), (B), and (D) Equipment, Utensils, Linens and Single-Service and Single-Use Articles Storing (C) - Bags of clean linens (from the closed dining hall) were on the floor in the outside storage room. Clean linens shall be stored in a clean, dry location, where they are not exposed to splash, dust, or other contamination, and at least 6 inches off the floor.
- 47 4-501.11 Good Repair and Proper Adjustment - Equipment (C) -Ice buildup present in both walk in freezers. The indoor walk in freezer is causing rust and standing water in the walk in cooler because of the ice buildup, and rust is present on the floor. Maintain equipment in good repair.
- 49 4-601.11 (B) and (C) Equipment, Food-Contact Surfaces, Nonfood Contact Surfaces, and Utensils (C) - Repeat- Cleaning needed on shelving and the base inside the warmer, on equipment underneath the hood, and on lids to utensil containers. Nonfood-contact surfaces shall be maintained free of dust, dirt, food residue, and debris.
- 51 5-205.15 (B) Maintain a plumbing system in good repair (C) - The faucet is leaking at the indoor can wash. One piece of equipment under the hood has a leak in its water line. There is a leak under the handwashing sink in the women's restroom. Maintain plumbing fixtures and systems in good repair.
- 53 6-501.18 Cleaning of Plumbing Fixtures (C) - The toilet in the men's restroom is soiled. All handwashing sinks need cleaning. Maintain plumbing fixtures clean.
- 55 6-501.11 Repairing - Premises, Structures, Attachments, and Fixtures - Methods (C) - Repeat- Repair ceiling damage in the outdoor storage room and the men's restroom. Seal holes in the wall in the outdoor storage room. Continue floor repairs in the dish area. Maintain physical facilities in good repair. SUBMIT PLANS AND EQUIPMENT SPEC SHEETS TO:  
FLIplanreview@forsyth.cc.
- 6-501.12 Cleaning, Frequency and Restrictions (C)- Repeat- Floor cleaning needed in the dish area, outdoor storage room, and underneath prep sinks and hood equipment. Floor cleaning needed in outdoor storage room. Physical facilities shall be maintained clean.

### Additional Comments

SUBMIT ALL RENOVATION/REMODEL/EQUIPMENT PLANS, SCHEDULES, AND SPECIFICATIONS TO THE HEALTH DEPARTMENT.

FLIplanreview@forsyth.cc