

Food Establishment Inspection Report

Score: 96

Establishment Name: CREEKSIDE TERRACE

Establishment ID: 3034012777

Location Address: 3895 OLD VINEYARD ROAD

City: WINSTON SALEM State: North Carolina

Zip: 27104 County: 34 Forsyth

Permittee: SABRA IL NORTH CAROLINA, LP

Telephone: (336) 768-5350

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

Date: 04/10/2024

Status Code: A

Time In: 10:30 AM

Time Out: 1:30 PM

Category#: IV

FDA Establishment Type: Full-Service Restaurant

No. of Risk Factor/Intervention Violations: 0

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"/> IN OUT	Required records available: shellstock tags, parasite destruction	2	1	0
Protection from Contamination .2653, .2654					
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
Potentially Hazardous Food Time/Temperature .2653					
18	<input checked="" type="checkbox"/> IN OUT/N/A/N/O	Proper cooking time & temperatures	3	1.5	0
19	<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"/> IN OUT	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 OUT	Pasteurized foods used; prohibited foods not offered	3	1.5	0
Chemical .2653, .2657					
27	<input checked="" type="checkbox"/> IN 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"/> IN OUT	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 OUT	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 OUT	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 OUT	Plant food properly cooked for hot holding	1	0.5	0
35	<input checked="" type="checkbox"/> OUT	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 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"/> IN	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	Equipment, food & non-food contact surfaces approved, cleanable, properly designed, constructed & used	1	0.5	0
48	<input checked="" type="checkbox"/> OUT	Warewashing facilities: installed, maintained & used; test strips	1	0.5	0
49	<input checked="" type="checkbox"/> IN	Non-food contact surfaces clean	1	0.5	0
Physical Facilities .2654, .2655, .2656					
50	<input checked="" type="checkbox"/> OUT	Hot & cold water available; adequate pressure	1	0.5	0
51	<input checked="" type="checkbox"/> IN	Plumbing installed; proper backflow devices	1	0.5	0
52	<input checked="" type="checkbox"/> OUT	Sewage & wastewater properly disposed	2	1	0
53	<input checked="" type="checkbox"/> OUT	Toilet facilities: properly constructed, supplied & cleaned	1	0.5	0
54	<input checked="" type="checkbox"/> IN	Garbage & refuse properly disposed; facilities maintained	1	0.5	0
55	<input checked="" type="checkbox"/> IN	Physical facilities installed, maintained & clean	1	0.5	0
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: 04/10/2024
☐ Educational Visit Status Code: A
Comment Addendum Attached? ☒ Category #: IV
Email 1: LICENSING@HOLIDAYSENIORLIVING.COM
Email 2: courtney.barber@atriaseniorliving.com
Email 3:

Temperature Observations

Item/Location	Temp	Item/Location	Temp	Item/Location	Temp
turkey/REHEAT in steamer	205				
pot roast /hot holding in steam table	198				
wedge salad/COOLING at 10:37	54				
wedge salad/COOLING at 11:24	48				
milk/glass front cooler	37				
lunch salads/walk-in cooler	41				
chicken breasts (cooked)/walk-in cooler	39				
ham/walk-in cooler	38				
cooked salmon/walk-in cooler	37				
grits/walk-in cooler	38				
potato salad/walk-in cooler	37				
turkey/walk-in cooler	38				
apple cobbler/small cooler in dining room	41				
hot water/3 comp sink	126				
final rinse/dish machine	170				
sink and surface cleaner/sanitizer/3 comp sink dispenser, spray bottle (lactic acid	700				

First
Person in Charge (Print & Sign): Laqueta

Last
Redd

First
Regulatory Authority (Print & Sign): Aubrie

Last
Welch

Redd

Aubrie Welch REHS

REHS ID: 2519 - Welch, Aubrie Verification Dates: Priority: 04/12/2024 Priority Foundation: 04/19/2024 Core:

REHS Contact Phone Number: (336) 703-3131

Authorize final report to
be received via Email: _____



North Carolina Department of Health & Human Services

Page 2 of _____
● Division of Public Health ● Environmental Health Section
DHHS is an equal opportunity employer.
Food Establishment Inspection Report, 12/2023

● Food Protection Program



Comment Addendum to Inspection Report

Establishment Name: CREEKSIDE TERRACE

Establishment ID: 3034012777

Date: 04/10/2024 **Time In:** 10:30 AM **Time Out:** 1:30 PM

Certifications

Name	Certificate #	Type	Issue Date	Expiration Date
Jalen Howard	21704611	Food Service	02/03/2022	02/03/2027

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.

- 44 4-903.11 (A), (B), and (D) Equipment, Utensils, Linens and Single-Service and Single-Use Articles Storing (C) Repeat - 3 plastic bins of misc. utensils with food debris inside the containers. Cleaned equipment and utensils shall be stored in a clean, dry location where they are not exposed to splash, dust, or other contamination. CDI - placed at sink to be cleaned.
- 47 4-501.11 Good Repair and Proper Adjustment - Equipment (C): REPEAT - 1 cabinet under coffee/tea area in kitchen missing door handle. Damaged plastic corner of doorframe on ice machine (right side). Cabinets under steam table with damaged finish. Equipment shall be maintained in good repair.
4-202.11 Food-Contact Surfaces - Cleanability (Pf) spatula with damaged edges, 2 ladles with peeling/damaged handles, metal measuring scoop cracked. Multiuse food contact surfaces shall be smooth; free of breaks, open seams, cracks, chips, inclusions, pits, and similar imperfections. Scoop and ladles discarded during inspection; VERIFICATION REQUIRED for replacement whisk by Friday, April 19.
4-205.10 Food Equipment, Certification and Classification (C) Small glass front cooler in dining room is not rated for restaurant use (NSF or equivalent). Food equipment shall be used in accordance with the manufacturer's intended use and certified or classified for sanitation by an ANSI accredited certification program.
- 49 4-602.13 Nonfood Contact Surfaces (C): REPEAT: Cleaning needed for shelving and speed rack by door in walk-in cooler, inside microwave, corners of meat prep sink, cabinets under coffee/tea station in kitchen. Nonfood contact surfaces of equipment shall be cleaned at a frequency necessary to preclude accumulation of soil residues.
- 51 5-203.14 Backflow Prevention Device, When Required (P): REPEAT - No backflow preventers present on water lines leading into water and coffee maker. A plumbing system shall be installed to preclude backflow of a solid, liquid, or gas contaminant into the water supply system at each point of use at the food establishment, including on a hose bibb if a hose is attached or on a hose bibb if a hose is not attached and backflow prevention is required by law, by: (B) Installing an approved backflow prevention device as specified under § 5-202.14. Install ASSE 1022 backflow preventers (one for each water line- each piece of equipment). VERIFICATION REQUIRED by Friday, April 12, 2024.
5-205.13 Scheduling Inspection and Service for a Water System Device (Pf) Water filter with installation date of 2021. A device such as a water treatment device or backflow preventer shall be scheduled for inspection and service, in accordance with manufacturer's instructions and as necessary to prevent device failure based on local water conditions, and records demonstrating inspection and service shall be maintained by the person in charge. VERIFICATION REQUIRED by Friday, April 12, 2024
- 54 5-501.113 Covering Receptacles (C) Both lids of trash dumpster open. Receptacles and waste handling units for refuse shall be kept covered with tight-fitting lids or doors if kept outside the food establishment.
5-501.115 Maintaining Refuse Areas and Enclosures (C) Remove pallets from dumpster area. A storage area and enclosure for refuse shall be maintained free of unnecessary items, and clean.
- 55 6-201.13 Floor and Wall Junctures, Coved, and Enclosed or Sealed (C): REPEAT - Coved base needed in resident restrooms used for dining customers. In FOOD ESTABLISHMENTS in which cleaning methods other than water flushing are used for cleaning floors, the floor and wall junctures shall be coved and closed to no larger than 1 mm (one thirty-second inch).

Additional Comments

VERIFICATION REQUIRED Friday, April 12 for backflow preventers and water filter.

VERIFICATION REQUIRED Friday, April 19 for spatula.

Educational visit due by June 30, 2024

Next inspection due July 1 - October 31