

# Food Establishment Inspection Report

Score: 95.5

Establishment Name: STOKED WOODFIRED PUB

Establishment ID: 3034012701

Location Address: 5312 ROBINHOOD VILLAGE DR.

City: WINSTON SALEM State: North Carolina

Zip: 27106 County: 34 Forsyth

Permittee: MAP HOSPITALITY GROUP, LLC

Telephone: (336) 815-8000

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

Date: 04/24/2024 Status Code: A

Time In: 1:15 PM Time Out: 4:25 PM

Category#: IV

FDA Establishment Type: Full-Service Restaurant

No. of Risk Factor/Intervention Violations: 3

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	1	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>
<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"/> IN <input checked="" type="checkbox"/> OUT	Food-contact surfaces: cleaned & sanitized	3	<input checked="" type="checkbox"/> 0	<input checked="" type="checkbox"/>
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"/> IN <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"/> IN <input checked="" type="checkbox"/> OUT/N/A/N/O	Proper cold holding temperatures	3	<input checked="" type="checkbox"/> 0	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>
23	<input checked="" type="checkbox"/> OUT/N/A/N/O	Proper date marking & disposition	3	1.5	0
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"/> IN <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	<input checked="" type="checkbox"/> 0.5	0	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>
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/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"/> 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
<b>Utensils and Equipment .2653, .2654, .2663</b>					
47	<input checked="" 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	<input checked="" type="checkbox"/> 0	<input checked="" type="checkbox"/>
48	<input checked="" type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A	Warewashing facilities: installed, maintained & used; test strips	1	0.5	<input checked="" type="checkbox"/>
49	<input checked="" type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A	Non-food contact surfaces clean	1	0.5	<input checked="" type="checkbox"/>
<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"/> 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 <input checked="" type="checkbox"/> N/A	Physical facilities installed, maintained & clean	1	0.5	<input checked="" type="checkbox"/>
56	<input checked="" type="checkbox"/> OUT	Meets ventilation & lighting requirements; designated areas used	1	0.5	0
TOTAL DEDUCTIONS:					4.5



# Comment Addendum to Food Establishment Inspection Report

Establishment Name: STOKED WOODFIRED PUB  
Location Address: 5312 ROBINHOOD VILLAGE DR.  
City: WINSTON SALEM State: NC  
County: 34 Forsyth Zip: 27106  
Wastewater System: ☒ Municipal/Community ☐ On-Site System  
Water Supply: ☒ Municipal/Community ☐ On-Site System  
Permittee: MAP HOSPITALITY GROUP, LLC  
Telephone: (336) 815-8000

Establishment ID: 3034012701  
☒ Inspection ☐ Re-Inspection Date: 04/24/2024  
☐ Educational Visit Status Code: A  
Comment Addendum Attached? ☒ Category #: IV  
Email 1: stokedpub@gmail.com  
Email 2:  
Email 3:

## Temperature Observations

Item/Location	Temp	Item/Location	Temp	Item/Location	Temp
mushrooms/walk in cooler	40	sausage/pizza cooler	41		
tomato/walk in cooler	41	cooked onion/pizza cooler	43		
cooked onion/walk in cooler	39	shredded cheese/pizza cooler	41		
mushroom/walk in cooler	38	meatball/pizza cooler	44		
wings/walk in cooler	37	shredded chicken/pizza cooler	41		
pepperoni/walk in cooler	39	philly meat/pizza cooler	41		
sausage/walk in cooler	40	quat sanitizer/3 compartment sink	0 ppm		
marinara/hot hold	145	quat sanitizer/3 compartment sink (adjusted)	200 ppm		
queso/hot hold	165	water temperature/dish machine	127		
meatball/hot hold	184	chlorine sanitizer/dish machine	25 ppm		
lettuce/hot line cooler	41				
tomato/hot line cooler	41				
wings/hot line cooler	41				
hot dog/hot line cooler	41				
shrimp/hot line cooler	41				
beef/hot line cooler	41				
buttermilk/low boy refrigerator	41				
lettuce/salad cooler	36				
shredded cheese/salad cooler	41				
mushrooms/pizza cooler	41				

First  
Person in Charge (Print & Sign): Jesus  
First  
Regulatory Authority (Print & Sign): Daygan

Last  
Luviano  
Last  
Shouse

Quadian  
Daygan

REHS ID: 3316 - Shouse, Daygan

Verification Dates: Priority:

Priority Foundation:

Core:

REHS Contact Phone Number:

Authorize final report to  
be received via Email: \_\_\_\_\_



North Carolina Department of Health & Human Services

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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:** STOKED WOODFIRED PUB

**Establishment ID:** 3034012701

**Date:** 04/24/2024 **Time In:** 1:15 PM **Time Out:** 4:25 PM

### Certifications

Name	Certificate #	Type	Issue Date	Expiration Date
Jesus Luviano		Food Service	08/10/2022	08/10/2027

### 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.

- 10 6-301.12 Hand Drying Provision (Pf) Paper towels were not available at the back handsink. Each handwashing sink or group of adjacent handwashing sinks shall be provided with individual, disposable towels. CDI: Paper towels supplied by food employee.
- 16 4-602.11 Equipment Food-Contact Surfaces and Utensils - Frequency (P) Ice machine with visible soil on shield. In equipment such as ice bins and beverage dispensing nozzles and enclosed components of equipment such as ice makers, cooking oil storage tanks and distribution lines, beverage and syrup dispensing lines or tubes, coffee bean grinders, and water vending equipment at a frequency necessary to preclude accumulation of soil or mold.  
  
4-501.114 Manual and Mechanical Warewashing Equipment, Chemical Sanitization - Temperature, pH, Concentration and Hardness (P) Quaternary sanitizer at 3 compartment sink was 0 ppm and sanitizer was not being pulled from container because it was empty. A quaternary ammonium compound shall have a minimum temperature of 75 F and a concentration between 150-400 ppm. CDI: PIC replaced empty container of quaternary sanitizer with full container and concentration read at 200 ppm. Chlorine sanitizer at the dish machine was 0 ppm. A chlorine solution shall have a minimum temperature of 120 F and a minimum concentration of 50 ppm. Verification required. Contact Daygan Shouse at shousedm@forsyth.cc or (336) 462-3669.
- 22 3-501.16 (A) (2) and (B) Time / Temperature Control for Safety Food, Hot and Cold Holding (P) Cooked onions at 43 F and meatballs at 44 in the pizza cooler. Time/ temperature control for safety food shall be maintained cold at 41 F or less. CDI: PIC voluntarily discarded cooked onions and meatballs. REPEAT.
- 35 3-501.13 Thawing (Pf) Raw salmon still in ROP package and completely thawed in bottom of hot line cooler. Reduced oxygen packaged fish that bears a label indicating that it is to be kept frozen until time of use shall be removed from the reduced oxygen environment prior to thawing under refrigeration. CDI: PIC slit open packages. REPEAT
- 47 4-501.11 Good Repair and Proper Adjustment - Equipment (C) Ice buildup on ceiling and floor of walk in freezer and rust on grate of drink machine. Equipment shall be maintained in a state of good repair and condition. REPEAT.
- 48 4-501.15 Warewashing Machines, Manufacturers' Operating Instructions (C) Chlorine sanitizer at the dish machine was 0 ppm. A warewashing machine and its auxiliary components shall be operated in accordance with the machine's data plate and other manufacturer's instructions.
- 49 4-602.13 Nonfood Contact Surfaces (C) Clean shelves from dust or food debris throughout establishment. 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) Cleaning is needed under cooking equipment on cook line. Physical facilities shall be cleaned as often as necessary to keep them clean.