

Food Establishment Inspection Report

Score: 84

Establishment Name: LAS ESTRELLAS

Establishment ID: 3034011305

Date: 06 / 17 / 2013 **Status Code:** A

Time In: 01 : 00 am pm **Time Out:** 05 : 30 am pm

Total Time: 4 hrs 30 minutes

Category #: IV

Establishment Type: _____

Instructions:

1. Fill in the information below for the Food Establishment:

Location Address: 845 SILAS CREEK PARKWAY

City: WINSTON SALEM

State: NC **Zip:** 27127

County: 34 Forsyth

Permittee: LAS ESTRELLAS INC

Telephone: _____

Inspection
 Re-Inspection

Wastewater System:
 Municipal/Community
 On-Site System

Water Supply:
 Municipal/Community
 On-Site System

2. Click/fill the appropriate circle For "IN, OUT, N/A, N/O".

IN= In Compliance, OUT= Not in compliance
 N/O=Not Observed, N/A= Not Applicable

3. Click/check the appropriate Boxes for CDI and/or R, VR.

CDI= Corrected During Inspection
 R= Repeat Violation
 VR= Verification Required

4. Continue to page 2 for "Good Retail Practices".

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 type="radio"/> IN	<input checked="" type="radio"/> OUT	<input type="radio"/> N/A	PIC Present: Demonstration-Certification by accredited program and perform duties	<input type="radio"/> 2	<input checked="" type="radio"/> 0	<input type="radio"/> 0	<input type="radio"/> 0
Employee Health .2652								
2	<input checked="" type="radio"/> IN	<input type="radio"/> OUT		Management, employees knowledge; responsibilities & reporting	<input type="radio"/> 3	<input type="radio"/> 1.5	<input type="radio"/> 0	<input type="radio"/> 0
3	<input checked="" type="radio"/> IN	<input type="radio"/> OUT		Proper use of reporting, restriction & exclusion	<input type="radio"/> 3	<input type="radio"/> 1.5	<input type="radio"/> 0	<input type="radio"/> 0
Good Hygienic Practices .2652, .2653								
4	<input checked="" type="radio"/> IN	<input type="radio"/> OUT		Proper eating, tasting, drinking, or tobacco use	<input type="radio"/> 2	<input type="radio"/> 1	<input type="radio"/> 0	<input type="radio"/> 0
5	<input checked="" type="radio"/> IN	<input type="radio"/> OUT		No discharge from eyes, nose, and mouth	<input type="radio"/> 1	<input type="radio"/> 0.5	<input type="radio"/> 0	<input type="radio"/> 0
Preventing Contamination by Hands .2652, .2653, .2655, .2656								
6	<input type="radio"/> IN	<input checked="" type="radio"/> OUT		Hands clean & properly washed	<input type="radio"/> 4	<input checked="" type="radio"/> 2	<input type="radio"/> 0	<input type="radio"/> 0
7	<input type="radio"/> IN	<input checked="" type="radio"/> OUT	<input type="radio"/> N/O	No bare hand contact with RTE foods or pre-approved alternate procedure properly allowed	<input type="radio"/> 3	<input checked="" type="radio"/> 1.5	<input type="radio"/> 0	<input type="radio"/> 0
8	<input checked="" type="radio"/> IN	<input type="radio"/> OUT		Handwashing sinks supplied & accessible	<input type="radio"/> 2	<input type="radio"/> 1	<input type="radio"/> 0	<input type="radio"/> 0
Approved Source .2653, .2655								
9	<input checked="" type="radio"/> IN	<input type="radio"/> OUT		Food obtained from approved source	<input type="radio"/> 2	<input type="radio"/> 1	<input type="radio"/> 0	<input type="radio"/> 0
10	<input type="radio"/> IN	<input type="radio"/> OUT	<input checked="" type="radio"/> N/O	Food received at proper temperature	<input type="radio"/> 2	<input type="radio"/> 1	<input type="radio"/> 0	<input type="radio"/> 0
11	<input checked="" type="radio"/> IN	<input type="radio"/> OUT		Food in good condition, safe & unadulterated	<input type="radio"/> 2	<input type="radio"/> 1	<input type="radio"/> 0	<input type="radio"/> 0
12	<input type="radio"/> IN	<input type="radio"/> OUT	<input checked="" type="radio"/> N/A	Required records available: shellstock tags, parasite destruction	<input type="radio"/> 2	<input type="radio"/> 1	<input type="radio"/> 0	<input type="radio"/> 0
Protection from Contamination .2653, .2654								
13	<input checked="" type="radio"/> IN	<input type="radio"/> OUT	<input type="radio"/> N/A	Food separated & protected	<input type="radio"/> 3	<input type="radio"/> 1.5	<input type="radio"/> 0	<input type="radio"/> 0
14	<input checked="" type="radio"/> IN	<input type="radio"/> OUT		Food-contact surfaces: cleaned & sanitized	<input type="radio"/> 3	<input type="radio"/> 1.5	<input type="radio"/> 0	<input type="radio"/> 0
15	<input checked="" type="radio"/> IN	<input type="radio"/> OUT		Proper disposition of returned, previously served, reconditioned, & unsafe food	<input type="radio"/> 2	<input type="radio"/> 1	<input type="radio"/> 0	<input type="radio"/> 0
Potentially Hazardous Food Time/Temperature .2653								
16	<input checked="" type="radio"/> IN	<input type="radio"/> OUT	<input type="radio"/> N/A	Proper cooking time & temperatures	<input type="radio"/> 3	<input type="radio"/> 1.5	<input type="radio"/> 0	<input type="radio"/> 0
17	<input checked="" type="radio"/> IN	<input type="radio"/> OUT	<input type="radio"/> N/A	Proper reheating procedures for hot holding	<input type="radio"/> 3	<input type="radio"/> 1.5	<input type="radio"/> 0	<input type="radio"/> 0
18	<input checked="" type="radio"/> IN	<input type="radio"/> OUT	<input type="radio"/> N/A	Proper cooling time & temperatures	<input type="radio"/> 3	<input type="radio"/> 1.5	<input type="radio"/> 0	<input type="radio"/> 0
19	<input type="radio"/> IN	<input checked="" type="radio"/> OUT	<input type="radio"/> N/A	Proper hot holding temperatures	<input type="radio"/> 3	<input checked="" type="radio"/> 1.5	<input type="radio"/> 0	<input type="radio"/> 0
20	<input type="radio"/> IN	<input checked="" type="radio"/> OUT	<input type="radio"/> N/A	Proper cold holding temperatures	<input type="radio"/> 3	<input checked="" type="radio"/> 1.5	<input type="radio"/> 0	<input type="radio"/> 0
21	<input type="radio"/> IN	<input checked="" type="radio"/> OUT	<input type="radio"/> N/A	Proper date marking & disposition	<input type="radio"/> 3	<input checked="" type="radio"/> 1.5	<input type="radio"/> 0	<input checked="" type="radio"/> 0
22	<input type="radio"/> IN	<input type="radio"/> OUT	<input checked="" type="radio"/> N/A	Time as a public health control: procedures & records	<input type="radio"/> 2	<input type="radio"/> 1	<input type="radio"/> 0	<input type="radio"/> 0
Consumer Advisory .2653								
23	<input checked="" type="radio"/> IN	<input type="radio"/> OUT	<input type="radio"/> N/A	Consumer advisory provided for raw or undercooked foods	<input type="radio"/> 1	<input type="radio"/> 0.5	<input type="radio"/> 0	<input type="radio"/> 0
Highly Susceptible Populations .2653								
24	<input type="radio"/> IN	<input type="radio"/> OUT	<input checked="" type="radio"/> N/A	Pasteurized foods used; prohibited foods not offered	<input type="radio"/> 3	<input type="radio"/> 1.5	<input type="radio"/> 0	<input type="radio"/> 0
Chemical .2653, .2657								
25	<input checked="" type="radio"/> IN	<input type="radio"/> OUT	<input type="radio"/> N/A	Food additives: approved & properly used	<input type="radio"/> 1	<input type="radio"/> 0.5	<input type="radio"/> 0	<input type="radio"/> 0
26	<input checked="" type="radio"/> IN	<input type="radio"/> OUT	<input type="radio"/> N/A	Toxic substances properly identified stored, & used	<input type="radio"/> 2	<input type="radio"/> 1	<input type="radio"/> 0	<input type="radio"/> 0
Conformance with Approved Procedures .2653, .2654, .2658								
27	<input type="radio"/> IN	<input type="radio"/> OUT	<input checked="" type="radio"/> N/A	Compliance with variance, specialized process, reduced oxygen packing criteria or HACCP plan	<input type="radio"/> 2	<input type="radio"/> 1	<input type="radio"/> 0	<input type="radio"/> 0



Food Establishment Inspection Report, continued

Establishment Name: LAS ESTRELLAS

Establishment ID: 3034011305

Instructions, continued:

5. Click the appropriate circle to fill-in for "IN, OUT, N/A, N/O".

IN= In Compliance, OUT= Not in compliance
N/O=Not Observed, N/A= Not Applicable

6. Click or check the appropriate boxes for CDI and/or R, VR

CDI= Corrected during Inspection
R= Repeat Violation
VR= Verification Required

Calculate the "Total Deductions" and record.

7. Sign and complete "Signature Block".

8. Fill in "No. Of Risk Factor Intervention Violations" and "No. of Repeat Risk Factor Intervention Violations".

9. Continue to page 3 for "Comment Addendum to Food Establishment Inspection Report".

Signature Block:

First Last
Celia BravoReyes

Person in Charge (Print)

Celia Bravo Reyes
Person in Charge (Signature)

First Last
M. Craig Faircloth

Regulatory Authority (Print)

M. Craig Faircloth
Regulatory Authority (Signature)

Contact Number: (336) 703 - 3166

Verification Required Date: ___ / ___ / ___

REHS ID: 1938 - Faircloth, Craig

No. of Risk Factor/
Intervention
Violations: 6

No. of Repeat Risk
Factor/Intervention
Violations: 1

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							
28	<input checked="" type="radio"/> IN	<input type="radio"/> OUT	Pasteurized eggs used where required	1	0.5	0	<input type="radio"/>
29	<input checked="" type="radio"/> IN	<input type="radio"/> OUT	Water and ice from approved source	2	1	0	<input type="radio"/>
30	<input type="radio"/> IN	<input type="radio"/> OUT	<input checked="" type="radio"/> N/A	1	0.5	0	<input type="radio"/>
Food Temperature Control .2653, .2654							
31	<input checked="" type="radio"/> IN	<input type="radio"/> OUT	Proper cooling methods used; adequate equipment for temperature control	1	0.5	0	<input type="radio"/>
32	<input checked="" type="radio"/> IN	<input type="radio"/> OUT	<input type="radio"/> N/A	1	0.5	0	<input type="radio"/>
33	<input checked="" type="radio"/> IN	<input type="radio"/> OUT	<input type="radio"/> N/A	1	0.5	0	<input type="radio"/>
34	<input checked="" type="radio"/> IN	<input type="radio"/> OUT	Thermometers provided & accurate	1	0.5	0	<input type="radio"/>
Food Identification .2653							
35	<input checked="" type="radio"/> IN	<input type="radio"/> OUT	Food properly labeled: original container	2	1	0	<input type="radio"/>
Prevention of Food Contamination .2652, .2653, .2654, .2656, .2657							
36	<input checked="" type="radio"/> IN	<input type="radio"/> OUT	Insects & rodents not present; no unauthorized animals	2	1	0	<input type="radio"/>
37	<input type="radio"/> IN	<input checked="" type="radio"/> OUT	Contamination prevented during food preparation, storage & display	2	1	0	<input checked="" type="radio"/>
38	<input type="radio"/> IN	<input checked="" type="radio"/> OUT	Personal cleanliness	1	0.5	0	<input checked="" type="radio"/>
39	<input checked="" type="radio"/> IN	<input type="radio"/> OUT	Wiping cloths: properly used & stored	1	0.5	0	<input type="radio"/>
40	<input checked="" type="radio"/> IN	<input type="radio"/> OUT	Washing fruits & vegetables	1	0.5	0	<input type="radio"/>
Proper Use of Utensils .2653, .2654							
41	<input checked="" type="radio"/> IN	<input type="radio"/> OUT	In-use utensils: properly stored	1	0.5	0	<input type="radio"/>
42	<input checked="" type="radio"/> IN	<input type="radio"/> OUT	Utensils, equipment & linens: properly stored, dried & handled	1	0.5	0	<input type="radio"/>
43	<input checked="" type="radio"/> IN	<input type="radio"/> OUT	Single-use & single-service articles: properly stored & used	1	0.5	0	<input type="radio"/>
44	<input checked="" type="radio"/> IN	<input type="radio"/> OUT	Gloves used properly	1	0.5	0	<input type="radio"/>
Utensils and Equipment .2653, .2654, .2663							
45	<input type="radio"/> IN	<input checked="" type="radio"/> OUT	Equipment, food & non-food contact surfaces approved, cleanable, properly designed, constructed, & used	2	1	0	<input checked="" type="radio"/>
46	<input checked="" type="radio"/> IN	<input type="radio"/> OUT	Warewashing facilities: installed, maintained, & used; test strips	1	0.5	0	<input type="radio"/>
47	<input checked="" type="radio"/> IN	<input type="radio"/> OUT	Non-food contact surfaces clean	1	0.5	0	<input type="radio"/>
Physical Facilities .2654, .2655, .2656							
48	<input type="radio"/> IN	<input checked="" type="radio"/> OUT	Hot & cold water available; adequate pressure	2	1	0	<input checked="" type="radio"/>
49	<input type="radio"/> IN	<input checked="" type="radio"/> OUT	Plumbing installed; proper backflow devices	2	1	0	<input checked="" type="radio"/>
50	<input checked="" type="radio"/> IN	<input type="radio"/> OUT	Sewage & waste water properly disposed	2	1	0	<input type="radio"/>
51	<input checked="" type="radio"/> IN	<input type="radio"/> OUT	Toilet facilities: properly constructed, supplied & cleaned	1	0.5	0	<input type="radio"/>
52	<input type="radio"/> IN	<input checked="" type="radio"/> OUT	Garbage & refuse properly disposed; facilities maintained	1	0.5	0	<input type="radio"/>
53	<input type="radio"/> IN	<input checked="" type="radio"/> OUT	Physical facilities installed, maintained & clean	1	0.5	0	<input type="radio"/>
54	<input type="radio"/> IN	<input checked="" type="radio"/> OUT	Meets ventilation & lighting requirements; designated areas used	1	0.5	0	<input type="radio"/>
Total Deductions:				16			

Comment Addendum to Food Establishment Inspection Report

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Location Address: 845 SILAS CREEK PARKWAY

City: WINSTON SALEM **State:** NC

County: 34 Forsyth **Zip:** 27127

Wastewater System: Municipal/Community On-Site System

Water Supply: Municipal/Community On-Site System

Permittee: LAS ESTRELLAS INC

Telephone: _____

Establishment ID: 3034011305

Date: 06/17/2013

Status Code: A

Category #: IV

Email 1: _____

Email 2: _____

Email 3: _____

Temperature Observations

Item	Location	Temp	Item	Location	Temp	Item	Location	Temp
beef	hot hold	160	shrimp	reach in cooler	45			
chicken	final cook	169	beef	reach in cooler	44			
rice	hot hold	167	fish	reach in cooler	44			
beans	hot hold	169	cut tomatoes	reach in cooler	44			
taco meat	hot hold	170	cooked	walk in cooler	40			
burrito	hot hold	140	cheese	walk in cooler	39			
rice	hot hold	157	raw chicken	walk in cooler	40			
beef	hot hold	139	beef	walk in cooler	39			

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.

- 1 The person in charge of this facility has not completed an approved food safety course. By January 1, 2014 the person in charge of this facility must complete an approved food safety training course.
- 6 An employee was observed moving between tasks placing raw chicken on the grill and handling cheese used a ready to eat ingredient on several food items (ex taco and refried bean topping). When moving between tasks all employees must properly wash their hands.
- 7 An employee was observed handling cheese used as a ready to eat ingredient for a tacos and several other items with his bare hands. No bare hand contact with ready to eat food items is allowed. It was recommended that the employee either use a gloved hand or tongs when handling cheese.
- 19 Cheese dip was found on the hot holding unit at 119 F. All food items being held hot must be held at or above 135 F. The cheese was reheated to 165 F+.



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Observations and Corrective Actions

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- 20 Cut tomatoes 53 F, cheese 51 F, and chorizo 52 F were found in the reach in cooler / make unit off temperature. All food items being held cold must be held at or below 45 F. The unit was adjusted by the manager and all issues were resolved.
- 21 A date marking procedure is not currently in place in this facility. A date marking procedure required so that items can be tracked and stock can be properly rotated. Food items must be either used or discarded within 4 days of initial prep. All food items must be clearly marked with the discard date.
- 37 An employee was observed handling raw chicken then handling cheese from the make unit with out properly washing his hands in between. Employees must wash their hands when moving between tasks to avoid cross contamination of food items.
- 38 One employee was observed preparing food with out a proper hair restraint. All employees involved in food prep must wear effective hair restraints.
- 45 Repair or replace the rusting and damaged wire shelving throughout the facility. The damaged areas of the prep and scrap sinks were not repaired properly and are now rusting. Properly repair the damaged areas of the prep and scrap sinks. Remove or repair the damaged buffet line. Repair the crack in the top lid of the reach in cooler / make unit.
- 48 The hot water temperature in the facility was 112 F at the time of this inspection. The required hot water temperature for this facility is 140 F. A plumber was called and all issues were resolved.
- 49 A back flow prevention device rated for continuous pressure is needed on the spigot below the dish cleaning area if the hose and spray nozzle are to remain attached at all times.



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Observations and Corrective Actions

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✓
Spell

- 52 The dumpster is missing both lids. Replace the dumpster.
- 53 Properly repair the hole above the storage shelf in the rear storage area. A covered base is needed on the wall out side the bar.
- 54 Lighting levels above the cook line and front prep area are too low ranging from 17 Ftc to 29 Ftc. The required lighting level for these areas is 50 Ftc.



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Spell

