

Food Establishment Inspection Report

Score: 98

Establishment Name: PEAK REHAB HOSPITAL

Establishment ID: 4092019611

Location Address: 1401 ZENO RD

City: APEX State: North Carolina

Zip: 27502 County: 92 Wake

Permittee: WAKE COUNTY REHABILITATION HOSPITAL, LLC

Telephone: _____

Inspection Re-Inspection Educational Visit

Wastewater System:

Municipal/Community On-Site System

Water Supply:

Municipal/Community On-Site Supply

Date: 08/20/2025 Status Code: A

Time In: 10:00 AM Time Out: 12:00 PM

Category#: IV

FDA Establishment Type: Nursing Home

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 type="checkbox"/> IN <input checked="" type="checkbox"/> 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"/> OUT/N/A/N/O				
Food separated & protected		3	1.5	0	
16	<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT				
Food-contact surfaces: cleaned & sanitized		3	0	0	X
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 type="checkbox"/> IN <input checked="" type="checkbox"/> OUT/N/A/N/O				
Proper reheating procedures for hot holding		3	1.5	0	
20	<input 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"/> OUT/N/A/N/O				
Proper date marking & disposition		3	1.5	0	
24	<input 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	
Consumer Advisory .2653					
25	<input 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	
Highly Susceptible Populations .2653					
26	<input checked="" type="checkbox"/> OUT/N/A				
Pasteurized foods used; prohibited foods not offered		3	1.5	0	
Chemical .2653, .2657					
27	<input 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	
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"/> OUT/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 type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> 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"/> 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"/> 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"/> OUT				
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 type="checkbox"/> IN <input checked="" type="checkbox"/> OUT				
Non-food contact surfaces clean		1	0.5	0	
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"/> OUT				
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:					2



Comment Addendum to Food Establishment Inspection Report

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 Water Supply: Municipal/Community On-Site System
 Permittee: WAKE COUNTY REHABILITATION HOSPITAL, LLC
 Telephone: _____

Establishment ID: 4092019611
 Inspection Re-Inspection Date: 08/20/2025
 Educational Visit Status Code: A
 Comment Addendum Attached? Category #: IV
 Email 1: madison.norville@peakrehabhospital.com
 Email 2: _____
 Email 3: rob.warfuel@peakrehabhospital.com

Temperature Observations

Item/Location	Temp	Item/Location	Temp	Item/Location	Temp
roasted potatoes/final cook	207				
ambient air/RIC	36				
egg salad/RIC	38				
boiled eggs/RIC	41				
liquid eggs/RIC	40				
ambient air/WIC	36				
turkey breast/WIC	38				
dressing/WIC	38				
beef stew/WIC	37				
pork chop/WIC	34				
baked apples/hot cabinet	152				
pot pie/hot cabinet	166				
potatoes/hot cabinet	173				
ambient air/hot cabinet	153				
salad/RIC	39				
sliced strawberries/RIC	38				
ambient air/RIC	39				

First
 Person in Charge (Print & Sign): Madison

First
 Regulatory Authority (Print & Sign): Carla

Last
Norville

Last
Pressley





REHS ID: 2800 - Pressley, Carla
 REHS Contact Phone Number: (984) 239-0850

Verification Dates: Priority:

Priority Foundation: Core:

Authorize final report to be received via Email: 



Comment Addendum to Inspection Report

Establishment Name: PEAK REHAB HOSPITAL

Establishment ID: 4092019611

Date: 08/20/2025 **Time In:** 10:00 AM **Time Out:** 12:00 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.

16 4-602.12 Cooking and Baking Equipment (C)

The interior surfaces on the microwave are soiled. The cavities and door seals of microwave ovens shall be cleaned at least every 24 hours by using the manufacturer's recommended cleaning procedure. The PIC cleaned the microwave.

CORRECTED DURING INSPECTION (CDI)

49 4-602.13 Nonfood Contact Surfaces (C)

Refrigeration gaskets and utensils drawers are soiled and shall be cleaned. Non food contact surfaces of equipment shall be cleaned frequently to preclude accumulation of soil residues. Increase cleaning frequency.