



# South Carolina Department of Agriculture

Hugh E. Weathers, Commissioner

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**Public Health**  
Prevent. Promote. Protect.

## Retail Food Establishment Inspection Report

**Insp Date:** 4/3/2025 **Business ID:** sc007975

**Business:** Turbeville Correctional Institution  
1578 Clarence Coker Highway

Turbeville, SC 29162

**Points:** 93

**Inspection:** G1000706

**Permit #:** 14-208-08013

**Phone:** 8436594800

**Inspector:** 1310 RANDALL LOWDER

**Reason:** 02. Follow Up

**Results:** A

### Establishment Information

Permit # 14-208-08013 Risk Level 2 - Cook and Serve Owner \_\_\_\_\_ Virtual ☐

### Foodborne Illness Risk Factors & Interventions

IN = In Compliance; OUT = Out of Compliance; NA = Not Applicable; NO = Not Observed; CV = Consecutive Violation

#### Supervision

1. PIC present, demonstration, certification, performance

IN OUT NA NO CV  
● ○ □

#### Employee Health

2. Management; employee knowledge; responsibilities and reporting

IN OUT NA NO CV  
● ○ □

3. Proper use of reporting, restriction, and exclusion

● ○ □

#### Employee Good Hygienic Practices

4. Proper eating, tasting, drinking, or tobacco use

IN OUT NA NO CV  
● ○ □

5. No discharge from eyes, nose, or mouth

● ○ □

#### Preventing Contamination by Hands

6. Hands clean and properly washed

IN OUT NA NO CV  
● ○ □

7. No bare-hand contact with RTE foods

● ○ ○ □

8. Handwashing sinks supplied and accessible

● ○ □

#### Approved Source

9. Food obtained from approved source

IN OUT NA NO CV  
● ○ □

10. Food received at proper temperature

○ ○ ● □

11. Food in good condition, safe, and unadulterated

● ○ □

12. Required records available: shell stock tags, parasite destruction

○ ○ ● ○ □

#### Protection from Contamination

13. Food separated and protected

IN OUT NA NO CV  
● ○ ○ ○ □

  
Inspector

*Signature on paper form. See photo provided*  
Acknowledged Receipt: Fancy Burgess

## Retail Food Establishment Inspection Report

### Protection from Contamination

- |   | IN                               | OUT                   | NA | NO | CV                       |
|---|----------------------------------|-----------------------|----|----|--------------------------|
| 14. Food-contact surfaces: cleaned and sanitized                                      | <input checked="" type="radio"/> | <input type="radio"/> |    |    | <input type="checkbox"/> |
| 15. Proper disposition of returned, previously served, reconditioned, and unsafe food | <input checked="" type="radio"/> | <input type="radio"/> |    |    | <input type="checkbox"/> |

### Time/Temperature Control for Safety (TCS Food)

- |   | IN                               | OUT                   | NA                               | NO                               | CV                       |
|---|----------------------------------|-----------------------|----------------------------------|----------------------------------|--------------------------|
| 16. Proper cooking time and temperature                     | <input type="radio"/>            | <input type="radio"/> | <input type="radio"/>            | <input checked="" type="radio"/> | <input type="checkbox"/> |
| 17. Proper reheating procedures for hot holding             | <input type="radio"/>            | <input type="radio"/> | <input type="radio"/>            | <input checked="" type="radio"/> | <input type="checkbox"/> |
| 18. Proper cooling time and temperatures                    | <input type="radio"/>            | <input type="radio"/> | <input type="radio"/>            | <input checked="" type="radio"/> | <input type="checkbox"/> |
| 19. Proper hot holding temperature                          | <input type="radio"/>            | <input type="radio"/> | <input type="radio"/>            | <input checked="" type="radio"/> | <input type="checkbox"/> |
| 20. Proper cold holding temperature                         | <input checked="" type="radio"/> | <input type="radio"/> | <input type="radio"/>            | <input type="radio"/>            | <input type="checkbox"/> |
| 21. Proper date marking and disposition                     | <input type="radio"/>            | <input type="radio"/> | <input type="radio"/>            | <input checked="" type="radio"/> | <input type="checkbox"/> |
| 22. Time as a Public Health Control: procedures and records | <input type="radio"/>            | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/>            | <input type="checkbox"/> |

### Consumer Advisory

- |   | IN                    | OUT                   | NA                               | NO | CV                       |
|---|-----------------------|-----------------------|----------------------------------|----|--------------------------|
| 23. Consumer advisory provided for raw or undercooked foods | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |    | <input type="checkbox"/> |

### Highly Susceptible Populations

- |  | IN                    | OUT                   | NA                               | NO | CV                       |
|--|-----------------------|-----------------------|----------------------------------|----|--------------------------|
| 24. Pasteurized foods used; prohibited foods not offered | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |    | <input type="checkbox"/> |

### Chemical

- |  | IN                               | OUT                   | NA                               | NO | CV                       |
|--|----------------------------------|-----------------------|----------------------------------|----|--------------------------|
| 25. Food additives: approved and properly used             | <input type="radio"/>            | <input type="radio"/> | <input checked="" type="radio"/> |    | <input type="checkbox"/> |
| 26. Toxic substances properly identified, stored, and used | <input checked="" type="radio"/> | <input type="radio"/> |                                  |    | <input type="checkbox"/> |

### Conformance with Approved Procedures

- |   | IN                    | OUT                   | NA                               | NO | CV                       |
|---|-----------------------|-----------------------|----------------------------------|----|--------------------------|
| 27. Compliance with variance, specialized process, reduced oxygen packaging criteria, or HACCP plan | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |    | <input type="checkbox"/> |

### Good Retail Practices

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### Safe Food & Water

- |  | IN                               | OUT                   | NA                               | NO | CV                       |
|--|----------------------------------|-----------------------|----------------------------------|----|--------------------------|
| 28. Pasteurized eggs used where required                 | <input type="radio"/>            | <input type="radio"/> | <input checked="" type="radio"/> |    | <input type="checkbox"/> |
| 29. Water and ice from approved source                   | <input checked="" type="radio"/> | <input type="radio"/> |                                  |    | <input type="checkbox"/> |
| 30. Variance obtained for specialized processing methods | <input type="radio"/>            | <input type="radio"/> | <input checked="" type="radio"/> |    | <input type="checkbox"/> |

### Food Temperature Control

- |   | IN                               | OUT                   | NA                    | NO                               | CV                       |
|---|----------------------------------|-----------------------|-----------------------|----------------------------------|--------------------------|
| 31. Proper cooling methods used, adequate equipment for temperature control | <input checked="" type="radio"/> | <input type="radio"/> |                       |                                  | <input type="checkbox"/> |
| 32. Plant food properly cooked for hot holding                              | <input type="radio"/>            | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="checkbox"/> |
| 33. Approved thawing methods used   | <input type="radio"/>            | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="checkbox"/> |
| 34. Thermometers provided and accurate                                      | <input checked="" type="radio"/> | <input type="radio"/> |                       |                                  | <input type="checkbox"/> |

### Food Identification

- |   | IN                               | OUT                   | NA | NO | CV                       |
|---|----------------------------------|-----------------------|----|----|--------------------------|
| 35. Food properly labeled: original container | <input checked="" type="radio"/> | <input type="radio"/> |    |    | <input type="checkbox"/> |

  
Inspector

*Signature on  
paper form.  
See photo provided*  
Acknowledged Receipt: Fancy Burgess

## Retail Food Establishment Inspection Report

### Prevention of Food Contamination

	IN	OUT	NA	NO	CV
36. Insects and rodents not present; no unauthorized animals	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>
37. Contamination prevented during food preparation, storage, and display	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>
38. Personal cleanliness	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>
39. Wiping cloths: properly used and stored	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>
40. Washing fruits and vegetables	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>

### Proper Use of Utensils

	IN	OUT	NA	NO	CV
41. In-use utensils: properly stored	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>
42. Utensils, equipment, and linens: properly stored, dried, and handled	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>
43. Single-use and single-service articles: properly stored and used	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>
44. Gloves used properly	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>

### Utensils & Equipment

	IN	OUT	NA	NO	CV
45. Equipment, food, and non-food contact surfaces approved, cleanable, properly designed, constructed, and used	<input type="radio"/>	<input checked="" type="radio"/>			<input type="checkbox"/>

*Fail Notes*     4-501.11     *Core; Good Repair and Proper Adjustment - Equipment*  
 [

*The Cutler ovens are not functioning.*

*The door gaskets to the line coolers and hot holding units at the service line are torn.*

*The Traulsen Hot Holding Unit at the service line is in poor repair.*

*The CresCor Hot Holding Unit is in poor repair; the top door is currently using Saran Wrap to keep the door closed.*

*The Alto Shaam oven is in poor repair; this unit is not functioning.*

]

46. Warewashing facilities: installed, maintained, and used; test strips	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>
47. Non-food contact surfaces clean	<input type="radio"/>	<input checked="" type="radio"/>			<input type="checkbox"/>

*Fail Notes*     4-601.11(B),(C)     *Core; Equipment, Food Contact Surfaces, Nonfood-Contact Surfaces - Clean, and Utensils*  
 [

*The interior of the mobile hot holding cabinets have an accumulation of debris and foul odor.*

]

### Physical Facilities

	IN	OUT	NA	NO	CV
48. Hot and cold water available; adequate pressure	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>
49. Plumbing installed; proper backflow devices	<input type="radio"/>	<input checked="" type="radio"/>			<input type="checkbox"/>

  
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# Retail Food Establishment Inspection Report

## Physical Facilities

IN OUT NA NO CV

*Fail Notes* 5-205.15(B) *Core; System Maintained in Good Repair - Leakage*  
 [ *The floor drain aside the ice machine is not draining; there is an accumulation of pooled water in this area because of this repair.*  
*The left preparation sink, near the 3 compartment sink area, has a leak underneath.*  
*The toilet in the staff restroom is loose; it is not secured and sealed to the floor.*  
*The ceiling in the kitchen area is in poor repair; the sheet rock is torn and falling apart in multiple areas throughout.*  
*The ceiling vent in the dish machine room is in poor repair; the vent itself is falling from the ceiling.*  
 ]

50. Sewage and wastewater properly disposed ☒ ☐ ☐
51. Toilet facilities: properly constructed, supplied, and cleaned ☒ ☐ ☐
52. Garbage and refuse properly disposed; facilities maintained ☒ ☐ ☐
53. Physical facilities installed, maintained, and clean ☐ ☒ ☐

*Fail Notes* 6-501.11 *Core; Repairing - Premises, Structures, Attachments, and Fixtures - Methods*  
 [ *The ceiling areas throughout the kitchen area and ware washing areas, as well as attached equipment, are in poor repair; sheet rock is torn and falling apart in multiple areas.*  
*The concrete floor in front of the kettle cookers is worn down and pitted and rough.*  
*The ceiling vent in the dish machine room is in poor repair; the ceiling vent is falling down from the ceiling.*  
 ]  
 6-501.12 *Core; Cleaning, Frequency and Restrictions*  
 [ *In the dish machine room, there is an accumulation of standing water throughout.*  
*In the dish machine room, the walls, ceilings and attached equipment has an over whelming about of black debris throughout.*  
 ]

54. Meets ventilation and lighting requirements; designated areas used ☐ ☒ ☐

  
 Inspector

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## Retail Food Establishment Inspection Report

### Physical Facilities

IN OUT NA NO CV

#### Fail Notes

6-303.11

Core; Intensity - Lighting

[  
"The light intensity shall be:

(A) At least ten (10) foot-candles (108 lux) at a distance of thirty (30) inches (75cm) above the floor, in walk-in refrigeration units and dry storage areas, and in other areas and rooms during periods of cleaning;

(B) At least twenty (20) foot-candles (215 lux):

(1) At a surface where food is provided for customer self-service such as buffets and salad bars or where fresh produce or packaged foods are sold or offered for consumption;

(2) Inside equipment such as reach-in and under-counter refrigerators; and

(3) At a distance of thirty (30) inches (75 cm) above the floor in areas used for handwashing, warewashing, and equipment and utensil storage, and in toilet rooms; and

(C) At least fifty (50) foot-candles (540 lux) at a surface where a food employee is working with food or working with utensils or equipment such as knives, slicers, grinders, and saws where employee safety is a factor."

Areas of interest observed are:

10 foot candles of light is not provided in all storage areas.

20 foot candles of light is not provided over all hand sinks and dish areas.

50 foot candles of light is not provided over all food preparation and cook line areas.

]

### Chapter 8 & 9 Violations

IN OUT NA NO CV

55. Chapter 8: Compliance and Enforcement

☒ ☐ ☐

56. Chapter 9: Standards for Additional Operations

☒ ☐ ☐

### Comments

Signatures are captured on a paper form due to failure to take all SCDA electronics on site (see photo).

***This item has Media/Attachments. See Footnote 1 at end of questionnaire.***

### Change of Ownership

Change of Ownership Permit Pending No \_\_\_\_\_

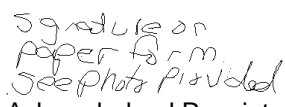
### Inspection Information

Is a Follow-Up Required? No Is a Routine required within 60 days? No

### Notification

Violations may be subject to enforcement action including but not limited to a monetary penalty of \$1,000.00 per violation for each day of non-compliance per S.C. Code Ann. Section 44-1-150 and S.C. Regulation 61-25. If the retail food establishment obscures, covers, defaces, relocates, or removes the posted grade decal, this is a violation of S.C. Regulation 61-25 and may result in enforcement action. Information collected on this form is open to public scrutiny or release in accordance with the Freedom of Information Act.

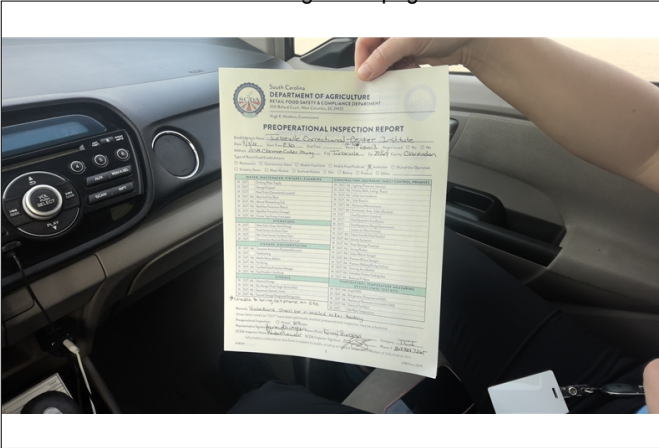
  
Inspector

  
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## Retail Food Establishment Inspection Report

### Footnote 1

signature page



  
Inspector

Signature on  
paper form.  
See photo provided  
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