

# Food Establishment Inspection Report

Score: 90

Establishment Name: AU BON PAIN

Establishment ID: 3034020668

Location Address: 1 MEDICAL CENTER BLVD

☒ Inspection ☐ Re-Inspection

City: WINSTON SALEM

State: NC

Date: 05 / 24 / 2017 Status Code: A

Zip: 27157 County: 34 Forsyth

Time In: 01 : 35 <sup>0</sup> am <sup>0</sup> pm Time Out: 04 : 30 <sup>0</sup> am <sup>0</sup> pm

Permittee: AU BON PAIN CORPORATION

Total Time: 2 hrs 55 minutes

Telephone: (336) 727-9440

Category #: IV

Wastewater System: ☒ Municipal/Community ☐ On-Site System

FDA Establishment Type: Full-Service Restaurant

Water Supply: ☒ Municipal/Community ☐ On-Site Supply

No. of Risk Factor/Intervention Violations: 3

No. of Repeat Risk Factor/Intervention Violations: 2

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.										
IN	OUT	N/A	N/O	Compliance Status			OUT	CDI	R	VR
<b>Supervision .2652</b>										
1	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	PIC Present; Demonstration-Certification by accredited program and perform duties			2	0	<input type="checkbox"/>	<input type="checkbox"/>
<b>Employee Health .2652</b>										
2	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Management, employees knowledge; responsibilities & reporting			3	13	0	<input type="checkbox"/>
3	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper use of reporting, restriction & exclusion			3	13	0	<input type="checkbox"/>
<b>Good Hygienic Practices .2652, .2653</b>										
4	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper eating, tasting, drinking, or tobacco use			2	1	0	<input type="checkbox"/>
5	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	No discharge from eyes, nose or mouth			1	03	0	<input type="checkbox"/>
<b>Preventing Contamination by Hands .2652, .2653, .2655, .2656</b>										
6	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Hands clean & properly washed			4	2	0	<input type="checkbox"/>
7	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	No bare hand contact with RTE foods or pre-approved alternate procedure properly followed			3	13	0	<input type="checkbox"/>
8	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Handwashing sinks supplied & accessible			2	1	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<b>Approved Source .2653, .2655</b>										
9	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food obtained from approved source			2	1	0	<input type="checkbox"/>
10	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Food received at proper temperature			2	1	0	<input type="checkbox"/>
11	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food in good condition, safe & unadulterated			2	1	0	<input type="checkbox"/>
12	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Required records available: shellstock tags, parasite destruction			2	1	0	<input type="checkbox"/>
<b>Protection from Contamination .2653, .2654</b>										
13	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food separated & protected			3	13	0	<input type="checkbox"/>
14	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Food-contact surfaces: cleaned & sanitized			3	<input checked="" type="checkbox"/>	0	<input checked="" type="checkbox"/>
15	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper disposition of returned, previously served, reconditioned, & unsafe food			2	1	0	<input type="checkbox"/>
<b>Potentially Hazardous Food Time/Temperature .2653</b>										
16	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Proper cooking time & temperatures			3	13	0	<input type="checkbox"/>
17	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Proper reheating procedures for hot holding			3	13	0	<input type="checkbox"/>
18	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Proper cooling time & temperatures			3	13	0	<input type="checkbox"/>
19	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper hot holding temperatures			3	13	0	<input type="checkbox"/>
20	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper cold holding temperatures			3	13	0	<input type="checkbox"/>
21	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Proper date marking & disposition			3	<input checked="" type="checkbox"/>	0	<input checked="" type="checkbox"/>
22	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Time as a public health control: procedures & records			2	1	0	<input type="checkbox"/>
<b>Consumer Advisory .2653</b>										
23	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Consumer advisory provided for raw or undercooked foods			1	03	0	<input type="checkbox"/>
<b>Highly Susceptible Populations .2653</b>										
24	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Pasteurized foods used; prohibited foods not offered			3	13	0	<input type="checkbox"/>
<b>Chemical .2653, .2657</b>										
25	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Food additives: approved & properly used			1	03	0	<input type="checkbox"/>
26	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Toxic substances properly identified stored, & used			2	1	0	<input type="checkbox"/>
<b>Conformance with Approved Procedures .2653, .2654, .2658</b>										
27	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Compliance with variance, specialized process, reduced oxygen packing criteria or HACCP plan			2	1	0	<input type="checkbox"/>

Good Retail Practices										
Good Retail Practices: Preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.										
IN	OUT	N/A	N/O	Compliance Status			OUT	CDI	R	VR
<b>Safe Food and Water .2653, .2655, .2658</b>										
28	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Pasteurized eggs used where required			1	03	0	<input type="checkbox"/>
29	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Water and ice from approved source			2	1	0	<input type="checkbox"/>
30	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Variance obtained for specialized processing methods			1	03	0	<input type="checkbox"/>
<b>Food Temperature Control .2653, .2654</b>										
31	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper cooling methods used; adequate equipment for temperature control			1	03	0	<input type="checkbox"/>
32	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Plant food properly cooked for hot holding			1	03	0	<input type="checkbox"/>
33	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Approved thawing methods used			1	03	0	<input type="checkbox"/>
34	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Thermometers provided & accurate			1	03	0	<input type="checkbox"/>
<b>Food Identification .2653</b>										
35	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food properly labeled: original container			2	1	0	<input type="checkbox"/>
<b>Prevention of Food Contamination .2652, .2653, .2654, .2656, .2657</b>										
36	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Insects & rodents not present; no unauthorized animals			2	1	0	<input type="checkbox"/>
37	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Contamination prevented during food preparation, storage & display			<input checked="" type="checkbox"/>	1	0	<input checked="" type="checkbox"/>
38	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Personal cleanliness			1	<input checked="" type="checkbox"/>	0	<input checked="" type="checkbox"/>
39	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Wiping cloths: properly used & stored			1	03	0	<input type="checkbox"/>
40	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Washing fruits & vegetables			1	03	0	<input type="checkbox"/>
<b>Proper Use of Utensils .2653, .2654</b>										
41	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	In-use utensils: properly stored			1	03	0	<input type="checkbox"/>
42	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Utensils, equipment & linens: properly stored, dried & handled			1	03	0	<input type="checkbox"/>
43	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Single-use & single-service articles: properly stored & used			1	<input checked="" type="checkbox"/>	0	<input checked="" type="checkbox"/>
44	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Gloves used properly			1	03	0	<input type="checkbox"/>
<b>Utensils and Equipment .2653, .2654, .2663</b>										
45	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Equipment, food & non-food contact surfaces approved, cleanable, properly designed, constructed, & used			<input checked="" type="checkbox"/>	1	0	<input checked="" type="checkbox"/>
46	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Warewashing facilities: installed, maintained, & used; test strips			1	03	0	<input type="checkbox"/>
47	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Non-food contact surfaces clean			<input checked="" type="checkbox"/>	03	0	<input checked="" type="checkbox"/>
<b>Physical Facilities .2654, .2655, .2656</b>										
48	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Hot & cold water available; adequate pressure			2	1	0	<input type="checkbox"/>
49	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Plumbing installed; proper backflow devices			2	1	0	<input type="checkbox"/>
50	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Sewage & waste water properly disposed			2	1	0	<input type="checkbox"/>
51	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Toilet facilities: properly constructed, supplied & cleaned			1	03	0	<input type="checkbox"/>
52	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Garbage & refuse properly disposed; facilities maintained			1	03	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
53	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Physical facilities installed, maintained & clean			<input checked="" type="checkbox"/>	03	0	<input type="checkbox"/>
54	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Meets ventilation & lighting requirements; designated areas used			1	03	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Total Deductions: 10										



North Carolina Department of Health & Human Services • Division of Public Health • Environmental Health Section • Food Protection Program  
DHHS is an equal opportunity employer.

CR  
OFF



# Comment Addendum to Food Establishment Inspection Report

Establishment Name: AU BON PAIN  
 Location Address: 1 MEDICAL CENTER BLVD  
 City: WINSTON SALEM State: NC  
 County: 34 Forsyth Zip: 27157  
 Wastewater System: ☒ Municipal/Community ☐ On-Site System  
 Water Supply: ☒ Municipal/Community ☐ On-Site System  
 Permittee: AU BON PAIN CORPORATION  
 Telephone: (336) 727-9440

Establishment ID: 3034020668  
☒ Inspection ☐ Re-Inspection Date: 05/24/2017  
 Comment Addendum Attached? ☐ Status Code: A  
 Category #: IV  
 Email 1: cafe272@cafe.aubonpain.com  
 Email 2:  
 Email 3:

## Temperature Observations

Item	Location	Temp	Item	Location	Temp	Item	Location	Temp
Shawn G.	Serv Safe 5/16/2022	00	Turkey Sald.	Sandwich Make unit	40			
Hot Water	3 comp	138	Roast Beef	Sandwich Make unit	40			
Wash Water	3 Comp	130	Chicken Sald.	Sandwich Reach-in	41			
Boiled Egg	Glass Display	39	Blk Bean Burg	Reach-in	40			
Chicken	Glass Display	41	Sausage	Reach-in	39			
SI Tomato	Make Unit	40	Broc. Ched	Buffet	162			
SI Turkey	Make Unit	39	Potato Soup	Buffet	142			
Milk	Milk Reach-in	39	Boiled egg	Grab n Go	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.

- 8 6-301.14 Handwashing Signage - C-0 points-Required handwashing reminder not available in staff restroom. Sign reminding employees to wash hands shall be available at all handsinks used by staff. CDI-Handwashing sign provided by REHSI. ✓ Spell
- 14 4-601.11 (A) Equipment, Food-Contact Surfaces, Nonfood-Contact Surfaces, and Utensils - P -Repeat-Back of slicer blade used to slice deli meats contained white film and food residue. Food contact surfaces of equipment and utensils shall be clean to sight and touch. CDI-Cleaned during inspection.
- 21 3-501.18 Ready-To-Eat Potentially Hazardous Food (Time/Temperature Control for Safety Food), Disposition - P - Repeat-Observed 2 pans of Waldorf turkey (5/21) and one pan of roast beef (5/22) in make unit that were dated for disposition prior to today. Products shall be discarded once they exceed manufacturers date or time/temperature specifications. CDI-Products discarded.// 3-501.17 Ready-To-Eat Potentially Hazardous Food (Time/Temperature Control for Safety Food), Date Marking - PF-Repeat-Observed black bean burger and sliced mozzarella cheese not date marked in make unit. Food items opened and held in food establishment for more than 24 hours shall be dated to indicate the day of opening or discard. CDI\_Dated by PIC.

Person in Charge (Print & Sign): SHAWN <sup>First</sup> GOOLSBY <sup>Last</sup>

Regulatory Authority (Print & Sign): JENNIFER <sup>First</sup> BROWN <sup>Last</sup>

REHS ID: 2536 - Brown, Jennifer

Verification Required Date: \_\_\_/\_\_\_/\_\_\_

REHS Contact Phone Number: ( 336 ) 703 - 3131



North Carolina Department of Health & Human Services • Division of Public Health • Environmental Health Section • Food Protection Program  
 DHHS is an equal opportunity employer.



# Comment Addendum to Food Establishment Inspection Report

Establishment Name: AU BON PAIN

Establishment ID: 3034020668

## 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.



- 37 3-305.11 Food Storage-Preventing Contamination from the Premises - C-Repeat-Bottom shelving unit in walk-in freezer is less than 6 inches above the floor. Install splash guard next to dump sink behind front line that is adjacent to banana storage and utensils. Observed box of food on the floor in the walk-in freezer, observed tea container on the floor in the walk-in cooler. Locate or replace covers to make units. Food shall be stored at least 6 inches above the floor and protected from splash, dust or other sources of contamination.
- 38 2-303.11 Prohibition-Jewelry - C - Repeat-Observed one employee on make line wearing bracelet. Except for plain wedding band, food employees may not wear jewelry on their arms or hands.
- 43 4-903.11 (A) and (C) Equipment, Utensils, Linens and Single-Service and Single-Use Articles-Storing -Repeat-Observed all single-service articles in consumer buffet area and behind make line (cups, bowls, and lids) unprotected by means of original plastic sleeve or other means. Single-service articles shall be kept in the original protective packaging or stored by using other means that afford protection from contamination.
- 45 -4-402.11 Fixed Equipment, Spacing or Sealing-Installation - C-Repeat-Observed not easily movable counter mounted toaster and 2 ovens behind make line that are not elevated or sealed to allow for easy cleaning. Area is soiled and is not being maintained clean. Area shall be cleaned and sealed to allow for adequate cleaning.//4-501.11 Good Repair and Proper Adjustment-Equipment - C-Proofers, cold-holding display behind make unit and make unit behind sandwich are not functioning. Laminate shelving and counters throughout facility are damaged with particle board exposed; repair.
- 47 4-601.11 (B) and (C) Equipment, Food-Contact Surfaces, Nonfood-Contact Surfaces, and Utensils -C-Repeat-Observed gaskets to reach-in units, cold-holding display behind salad station, inside of make units and lo boys, cabinets under buffet line, outside of soup thermalizer, under cutting board, vents to make unit, inside milk reach-in cooler, side of oven and equipment on front line, bakery buffet area, other areas as necessary. Cleaning needed throughout facility. Nonfood contact areas of food and equipment shall be maintained cleaning
- 52 5-501.115 Maintaining Refuse Areas and Enclosures - C-Repeat-0 points-Observed bags of trash, cardboard, food and other debris around outdoor shared trash compactor. A storage area for refuse, recyclables, or returnables shall be maintained free of unnecessary items and clean.
- 53 6-501.12 Cleaning, Frequency and Restrictions - C-Repeat-Observed residue, debris, and trash behind tea station, wall by thermalizer, proofer, walk-in cooler and freezer floor, under make units. Physical facilities shall be maintained clean.//6-201.11 Floors, Walls and Ceilings-Cleanability - C-Transition strip from walk-in cooler to dry storage shall be cleaned and sealed to allow for cleanability.



# Comment Addendum to Food Establishment Inspection Report

Establishment Name: AU BON PAIN

Establishment ID: 3034020668

## 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.

✓  
Spell

- 54 6-501.14 Cleaning Ventilation Systems, Nuisance and Discharge Prohibition - C-0 points-Vents in walk-in cooler, over equipment racks and ice machine, and above slicer prep table are soiled and shall be cleaned so that they are not a source of dust or contamination.



# Comment Addendum to Food Establishment Inspection Report

Establishment Name: AU BON PAIN

Establishment ID: 3034020668

## 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.

✓  
Spell



# Comment Addendum to Food Establishment Inspection Report

Establishment Name: AU BON PAIN

Establishment ID: 3034020668

## 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.

✓  
Spell

