Food Establishment Inspection Report Score: 98 Establishment Name: SUBWAY # 47464 Establishment ID: 3034012043 Location Address: 301 MEDICAL CENTER BLVD Date: 10 / 15 / 2019 Status Code: A City: WINSTON SALEM State: NC Time In: $11 : 10^{\otimes \text{ am}}_{\circ \text{ pm}}$ Time Out: <u>Ø 1</u> : <u>1 Ø ⊗ pm</u> County: 34 Forsyth Zip: 27157 Total Time: 2 hrs 0 minutes NEWSOME KITE INVESTMENTS INC Permittee: Category #: III Telephone: (336) 716-5214 FDA Establishment Type: Fast Food Restaurant Wastewater System:

✓ Municipal/Community

✓ On-Site System No. of Risk Factor/Intervention Violations: 1 No. of Repeat Risk Factor/Intervention Violations: Foodborne Illness Risk Factors and Public Health Interventions Good Retail Practices Risk factors: Contributing factors that increase the chance of developing foodborne illness. Good Retail Practices: Preventative measures to control the addition of pathogens, chemicals, and physical objects into foods. Public Health Interventions: Control measures to prevent foodborne illness or injury. IN OUT N/A N/O Compliance Status CDI R VR IN OUT N/A N/O Compliance Status CDI R VR Supervision .2652 Safe Food and Water .2653, .2655, .2658 PIC Present; Demonstration-Certification by accredited program and perform duties 1 🛛 🗀 28 1 0.5 0 Pasteurized eggs used where required **Employee Health** 29 🗵 🗆 Water and ice from approved source Management, employees knowledge; responsibilities & reporting 2 🛛 🗆 3 1.5 0 Variance obtained for specialized processing 30 □ □ □ ⊠ 1 0.5 0 \times Proper use of reporting, restriction & exclusion 3 1.5 0 **Food Temperature Control** .2653, .2654 Proper cooling methods used; adequate equipment for temperature control **Good Hygienic Practices** .2652, .2653 31 🗆 🗖 4 🛛 210 - -Proper eating, tasting, drinking, or tobacco use 32 □ 1 0.5 0 🗆 🗆 □ □ X Plant food properly cooked for hot holding 5 П 1 0.5 0 No discharge from eyes, nose or mouth 1 0.5 0 🗆 🗆 33 🛛 🔲 🖂 Approved thawing methods used Preventing Contamination by Hands .2652, .2653, .2655, .2656 34 🗵 🗆 1 0.5 0 - -Thermometers provided & accurate 420 ---6 | X | 🗆 Hands clean & properly washed Food Identification .2653 No bare hand contact with RTE foods or pre-X 3 1.5 0 approved alternate procedure properly followed 35 🗆 🗷 Food properly labeled: original container 8 🗵 210 - -Handwashing sinks supplied & accessible Prevention of Food Contamination .2652, .2653, .2654, .2656, .265 **Approved Source** .2653, .2655 Insects & rodents not present; no unauthorized 36 🗵 🗆 210000 9 🛛 🗆 Food obtained from approved source Contamination prevented during food 210 -37 🗵 🗆 preparation, storage & display 10 Food received at proper temperature 38 🗆 🗷 Personal cleanliness 11 🛛 🗀 Food in good condition, safe & unadulterated 39 🛛 🗀 Wiping cloths: properly used & stored 1 0.5 0 Required records available: shellstock tags, 12 🗆 21000 parasite destruction 1 0.5 0 40 🗷 🖂 Washing fruits & vegetables **Protection from Contamination** .2653, .2654 Proper Use of Utensils 13 ☐ ☐ ☐ Food separated & protected 3 1.5 0 41 🖾 🗀 1 0.5 0 In-use utensils: properly stored 14 🔀 3 1.5 0 Food-contact surfaces: cleaned & sanitized Utensils, equipment & linens: properly stored, dried & handled 1 0.5 0 42 🛛 🗆 Proper disposition of returned, previously served 15 🖾 🗀 210 - reconditioned, & unsafe food Single-use & single-service articles: properly stored & used 43 🛛 🗆 1 0.5 0 Potentially Hazardous Food Tlme/Temperature 16 ☐ ☐ ☐ ☐ ☐ Proper cooking time & temperatures 3 1.5 0 - - -44 🛛 🗆 1 0.5 0 ... Gloves used properly **Utensils and Equipment** .2653, .2654, .2663 |17| 🛛 | 🗆 | 🗆 3 1.5 0 Proper reheating procedures for hot holding Equipment, food & non-food contact surfaces approved, cleanable, properly designed, 45 🗆 🗷 \boxtimes 3 1.5 0 Proper cooling time & temperatures constructed, & used Warewashing facilities: installed, maintained, & used; test strips 19 🗆 3 1.5 **X** X 🗆 🗆 Proper hot holding temperatures 46 🛛 🗆 1 0.5 0 20 🖂 3 1.5 0 Proper cold holding temperatures 47 🗆 🗷 Non-food contact surfaces clean 21 🔀 ☐ Proper date marking & disposition 3 1.5 0 **Physical Facilities** .2654. .2655. .2656 48 🔀 🖂 🖂 Time as a public health control: procedures & Hot & cold water available; adequate pressure 2 1 0 49 21000 Plumbing installed: proper backflow devices Consumer Advisory .2653 Consumer advisory provided for raw or 23 🗆 🗆 🗷 1 0.5 0 ... 50 🗷 🗆 21000 Sewage & waste water properly disposed undercooked foods **Highly Susceptible Populations** .2653 Toilet facilities: properly constructed, supplied 1 0.5 0 51 🛛 🗀 Pasteurized foods used; prohibited foods not & cleaned |24| □ | □ | 🔀 Garbage & refuse properly disposed; facilities maintained 52 🔀 1 0.5 0 Chemical .2653, .2657



25 | | | | | |

|27| 🗆 | 🗆 | 🔀

26 🗵 🗆

Food additives: approved & properly used

Toxic substances properly identified stored, & used

Compliance with variance, specialized process, reduced oxygen packing criteria or HACCP plan

Conformance with Approved Procedures .2653, .2654, .2658



10.50

1 0.5 0

53 🔀

54

1 0.5 0

210 - -

Physical facilities installed, maintained & clean Meets ventilation & lighting requirements; designated areas used

Total Deductions:

	Comme	ent Adden	<u>dum to Foo</u>	<u>d Establish</u>	<u>iment Ins</u>	spection I	Report		
Establishment Name: SUBWAY # 47464				_ Establis	Establishment ID: 3034012043				
Location Address: 301 MEDICAL CENTER BLVD				XInsped	☑Inspection ☐Re-Inspection Date: 10/15/2019				
City: WINS			State: NO	•	Addendum Atta	•	Status Code:	Α	
County: 34	Forsyth	Z	ip: <u>27157</u>	Water sam	ple taken?	Yes X No	Category #:		
	System: 🗷 Municipal/C			Email 1:	anewsome2@	gmail.com			
Water Supply: ☑ Municipal/Community ☐ On-Site System Permittee: NEWSOME KITE INVESTMENTS INC				Email 2:					
	: (336) 716-5214	IVEOTIMENTO III	<u> </u>	_ Email 3:					
relephone	(000) 1 10 02 1 1		T						
			•	re Observatio					
Item	Location	Cold Holdi Temp Ite	ng Temperat	ture is now 4	11 Degree Temp Ite		ocation	Temp	
chicken	walk in `			e unit	41	III L	ocation	remp	
ham	walk in	41 rc	past beef make	e unit	41				
ham	make line	41 h	ot water three	e comp sink	127				
cold cut	make line	41 q	uat sani three	comp sink ppm	200				
turkey	make line	40 S	ervSafe Ange	ela W. 9/24/24	00				
mozz cheese	make line	41							
tomaotes	make line	41							
lettuce	make line	41							
		Ob	servations an	d Corrective	Actions				
mainta 31 3-501.7 temper	er of meatballs on ined at a temperatured at a temperatured to Cooling Methods atures ranging from stirring. Cold air muccooling parameters	re of 135 if held s - (PF)-Three c n 48-52 degrees ust flow around	d hot, or 41 if held ontainers of toma s. Cool food quick	l cold. ČDI- meat itoes just prepare ly. Use methods	balls were re ed were stack such as ope	heated to 167 ked high, with n/vented shall	degrees. a lid, in a make ow pans, large i	unit and had ce baths and	
sandwi	I2 Food Storage Co ches were not labe nmon name of the f	led. Containers							
_	-	First	10/0	Last		7 .	7. 1	1	
Person in Cha	rge (Print & Sign):	Angela	Wood		_,>				
Regulatory Au	thority (Print & Sign)	First Shannon :	Malor	Last ney	Mu	yrun //	lalaner		
	REHS ID	2826 - Malo	oney, Shannon		Verification	n Required Date	e: / / /	Λ	
	ontact Phone Number orth Carolina Department		Services • Division of DHHS is an equ	Fublic Health ● Enval opportunity employs	ironmental Health	·	$ \uparrow$		

Establishment Name: SUBWAY # 47464	Establishment ID: _3034012043

Ohaam	otiono.	امدم	Correct	i /	\ atian	_
Unserv	allons	ano	Coneci	IVE A	aciion	S

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.



- 2-303.11 Prohibition-Jewelry Multiple food employees wearing watches on wrist while preparing food. Food employees may not wear jewelry including medical information jewelry on their arms and hands.
- 45 4-501.11 Good Repair and Proper Adjustment-Equipment Repair/ replace racks near dry storage that are rusting. Repair/ replace hot water faucet handle on front handwashing sink. Equipment shall be maintained in a state of good repair.
- 47 4-601.11 (B) and (C) Equipment, Food-Contact Surfaces, Nonfood-Contact Surfaces, and Utensils REPEAT- Additional cleaning required on dry storage shelving and gaskets of all coolers in establishment. Equipment, nonfood contact surfaces shall be maintained clean.





Establishment Name: SUBWAY # 47464 Establishment ID: 3034012043

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.





Establishment Name: SUBWAY # 47464 Establishment ID: 3034012043

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.





Establishment Name: SUBWAY # 47464 Establishment ID: 3034012043

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.



