

Food Establishment Inspection Report

Score: 94.5

Establishment Name: SUBWAY #1642

Establishment ID: 3034011740

Location Address: 329 JONESTOWN RD.

City: WINSTON SALEM State: North Carolina

Zip: 27104 County: 34 Forsyth

Permittee: OM NEELKANTH INC

Telephone: (336) 765-0332

Inspection Re-Inspection

Wastewater System:

Municipal/Community On-Site System

Water Supply:

Municipal/Community On-Site Supply

Date: 05/24/2023 Status Code: A

Time In: 2:00 PM Time Out: 3:55 PM

Category#: II

FDA Establishment Type: Fast Food Restaurant

No. of Risk Factor/Intervention Violations: 3

No. of Repeat Risk Factor/Intervention Violations: 3

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 <input type="checkbox"/> N/A				
PIC Present, demonstrates knowledge, & performs duties		1	0		
2	<input checked="" type="checkbox"/> IN <input checked="" type="checkbox"/> N/A				
Certified Food Protection Manager		<input checked="" type="checkbox"/>	0		X
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 <input type="checkbox"/> N/A <input type="checkbox"/> 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 <input type="checkbox"/> 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 checked="" type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A				
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"/> IN <input checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A <input type="checkbox"/> N/O				
Required records available: shellstock tags, parasite destruction		2	1	0	
Protection from Contamination .2653, .2654					
15	<input checked="" type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A <input type="checkbox"/> N/O				
Food separated & protected		3	1.5	0	
16	<input checked="" type="checkbox"/> OUT				
Food-contact surfaces: cleaned & sanitized		3	1.5	0	
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"/> IN <input checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A <input type="checkbox"/> N/O				
Proper cooking time & temperatures		3	1.5	0	
19	<input checked="" type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A <input type="checkbox"/> N/O				
Proper reheating procedures for hot holding		3	1.5	0	
20	<input checked="" type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A <input type="checkbox"/> N/O				
Proper cooling time & temperatures		3	1.5	0	
21	<input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> N/O				
Proper hot holding temperatures		3	1.5	0	
22	<input checked="" type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> N/O				
Proper cold holding temperatures		<input checked="" type="checkbox"/>	1.5	0	X X
23	<input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> N/O				
Proper date marking & disposition		3	1.5	0	
24	<input checked="" type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A <input type="checkbox"/> N/O				
Time as a Public Health Control; procedures & records		3	1.5	0	
Consumer Advisory .2653					
25	<input checked="" 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"/> IN <input checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A				
Pasteurized foods used; prohibited foods not offered		3	1.5	0	
Chemical .2653, .2657					
27	<input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/A				
Food additives: approved & properly used		1	0.5	0	
28	<input checked="" type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/A				
Toxic substances properly identified stored & used		2	X	0	X X
Conformance with Approved Procedures .2653, .2654, .2658					
29	<input checked="" type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> 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"/> IN <input checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> 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 checked="" 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"/> IN <input checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A <input type="checkbox"/> N/O				
Plant food properly cooked for hot holding		1	0.5	0	
35	<input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> 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 <input type="checkbox"/> 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"/> IN <input checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A				
Equipment, food & non-food contact surfaces approved, cleanable, properly designed, constructed & used		1	0.5	X	X
48	<input checked="" type="checkbox"/> OUT				
Warewashing facilities: installed, maintained & used; test strips		1	0.5	0	
49	<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 <input type="checkbox"/> 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 <input type="checkbox"/> N/A				
Toilet facilities: properly constructed, supplied & cleaned		1	0.5	0	
54	<input checked="" type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A				
Garbage & refuse properly disposed; facilities maintained		1	X	0	X
55	<input checked="" type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A				
Physical facilities installed, maintained & clean		1	0.5	X	X
56	<input checked="" type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A				
Meets ventilation & lighting requirements; designated areas used		1	0.5	X	
TOTAL DEDUCTIONS:					5.5



Comment Addendum to Food Establishment Inspection Report

Establishment Name: SUBWAY #1642
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 Wastewater System: Municipal/Community On-Site System
 Water Supply: Municipal/Community On-Site System
 Permittee: OM NEELKANTH INC
 Telephone: (336) 765-0332

Establishment ID: 3034011740
 Inspection Re-Inspection Date: 05/24/2023
 Comment Addendum Attached? Status Code: A
 Water sample taken? Yes No Category #: II
 Email 1: bhavubhai.ptl@gmail.com
 Email 2:
 Email 3:

Temperature Observations

Effective January 1, 2019 Cold Holding is now 41 degrees or less

Item	Location	Temp	Item	Location	Temp	Item	Location	Temp
chicken	servicing line	50						
tuna	servicing line	42						
coldcut combo	servicing line	48						
shredded cheese	servicing line	52						
mozerella cheese	servicing line	50						
pepperjack	servicing line	41						
meatball	servicing line	136						
ham	servicing line	46						
steak	servicing line	49						
roast beef	servicing line	48						
lettuce	servicing line	40						
tomato	servicing line	41						
veggie patty	servicing line	40						
turkey	walk in	41						
cheese	walk in	40						
chicken	walk in	41						
roast beef	walk in	41						
tomato	walk in	40						

Person in Charge (Print & Sign): *Amr B. Patel*
First *Last*
 Regulatory Authority (Print & Sign): Cierra *Cierra Elledge*
First *Last*
Elledge
 REHS ID: 2760 - Elledge, Cierra Verification Required Date: _____
 REHS Contact Phone Number: _____ Authorize final report to be received via Email: _____

Comment Addendum to Inspection Report

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Date: 05/24/2023 **Time In:** 2:00 PM **Time Out:** 3:55 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.

- 2 2-102.12 (A) Certified Food Protection Manager (C) Repeat. Person-in-charge at time of inspection does not have a food protection manager certification. The person in charge shall be a certified food protection manager who has shown proficiency of required information through passing a test that is part of an accredited program.
- 22 3-501.16 (A) (2) and (B) Time / Temperature Control for Safety Food, Hot and Cold Holding (P) Repeat. Foods on serving line ranging 39-53F(see temp log). Time/temperature control for safety foods shall be held at 41F and below. CDI: All items were out of temp less than 2 hours and were placed in freezer to rapidly cool. REHS left TPHC template for facility to implement for serving line unit.
- 28 7-201.11 Separation - Storage (P) Bottle of hydrogen peroxide being stored above bottle beverages for consumers on dry storage shelving. Poisonous or toxic materials shall be stored so they can not contaminate food, equipment, utensils, linens, and single-service and single-use articles by: (A) Separating - by spacing or partitioning; and (B) Locating the chemicals in an area that is not above food, equipment, utensils, linens, and single-service or single-use articles. CDI: Bottles relocated.
- 47 4-501.11 Good Repair and Proper Adjustment - Equipment (C) Ambient air of reach-in cooler at front line measuring 45.4F via REHS registering thermometer. Equipment shall be maintained cleanable and in good repair.
- 54 5-501.113 Covering Receptacles (C) Repeat. Cardboard dumpster is missing lid. / Doors left open to both dumpsters. Maintain doors and lids closed and in place to prevent pest harborage. Contact waste management company to have lids replaced.
- 55 6-501.11 Repairing - Premises, Structures, Attachments, and Fixtures - Methods (C) Replace damaged ceiling tiles in dry storage area. Repair/replace floor tiles under prep sink. Replace caulking behind 3 comp sink. Repair cove molding at base of walk in cooler. Physical facilities shall be maintained cleanable and in good repair.
- 56 6-202.11 Light Bulbs, Protective Shielding (C) Multiple light shields in dry storage area cracked. Light bulbs shall be shielded, coated, or otherwise shatter-resistant in areas where there is exposed food; clean equipment, utensils, and linens; or unwrapped single-service and single-use articles.

Additional Comments

All foods from serving line placed in walk in freezer were below 41F in 25 minutes