

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 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 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 checked="" type="checkbox"/> IN 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 OUT <input checked="" type="checkbox"/> N/A N/O	Required records available: shellstock tags, parasite destruction	2	1	0
Protection from Contamination .2653, .2654					
15	<input checked="" type="checkbox"/> IN OUT <input checked="" type="checkbox"/> N/A	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 OUT <input checked="" type="checkbox"/> N/A	Proper cooking time & temperatures	3	1.5	0
19	<input checked="" type="checkbox"/> IN OUT <input checked="" type="checkbox"/> N/A	Proper reheating procedures for hot holding	3	1.5	0
20	<input checked="" type="checkbox"/> IN OUT <input checked="" type="checkbox"/> N/A	Proper cooling time & temperatures	3	1.5	0
21	<input checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A N/O	Proper hot holding temperatures	3	1.5	0
22	<input checked="" type="checkbox"/> IN <input checked="" type="checkbox"/> N/A N/O	Proper cold holding temperatures	<input checked="" type="checkbox"/>	1.5	0 X X
23	<input checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A N/O	Proper date marking & disposition	3	1.5	0
24	<input checked="" type="checkbox"/> IN OUT <input checked="" type="checkbox"/> N/A	Time as a Public Health Control; procedures & records	3	1.5	0
Consumer Advisory .2653					
25	<input checked="" type="checkbox"/> IN 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 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 N/A	Food additives: approved & properly used	1	0.5	0
28	<input checked="" type="checkbox"/> IN <input checked="" type="checkbox"/> N/A	Toxic substances properly identified stored & used	2	<input checked="" type="checkbox"/>	0 X X
Conformance with Approved Procedures .2653, .2654, .2658					
29	<input checked="" type="checkbox"/> IN 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 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 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 OUT <input checked="" type="checkbox"/> N/A	Plant food properly cooked for hot holding	1	0.5	0
35	<input checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> 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"/> IN <input checked="" type="checkbox"/> N/A	Equipment, food & non-food contact surfaces approved, cleanable, properly designed, constructed & used	1	0.5	<input checked="" type="checkbox"/> 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 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"/> IN <input checked="" type="checkbox"/> N/A	Garbage & refuse properly disposed; facilities maintained	1	<input checked="" type="checkbox"/>	0 X
55	<input checked="" type="checkbox"/> IN <input checked="" type="checkbox"/> N/A	Physical facilities installed, maintained & clean	1	0.5	<input checked="" type="checkbox"/> X
56	<input checked="" type="checkbox"/> IN <input checked="" type="checkbox"/> N/A	Meets ventilation & lighting requirements; designated areas used	1	0.5	<input checked="" type="checkbox"/> X
TOTAL DEDUCTIONS:					5.5



Comment Addendum to Food Establishment Inspection Report

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

First
 Person in Charge (Print & Sign):

Last

Amara B. Patel

First
 Regulatory Authority (Print & Sign): Cierra

Last
 Elledge

Cierra Elledge

REHS ID: 2760 - Elledge, Cierra

Verification Required Date:

REHS Contact Phone Number:

Authorize final report to
 be received via Email:

[Signature]



North Carolina Department of Health & Human Services

• Division of Public Health • Environmental Health Section
 DHHS is an equal opportunity employer.
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• Food Protection Program



Comment Addendum to Inspection Report

Establishment Name: SUBWAY #1642

Establishment ID: 3034011740

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