

Food Establishment Inspection Report

Score: 95

Establishment Name: PANERA BREAD 3740
 Location Address: 6281 TOWN CENTER DRIVE
 City: CLEMMONS State: NC
 Zip: 27012 County: 34 Forsyth
 Permittee: SHOW ME BREAD INC
 Telephone: (336) 794-2033

Establishment ID: 3034011726
☒ Inspection ☐ Re-Inspection
 Date: 04/15/2015 Status Code: A - Open For Business
 Time In: 9:45 AM Time Out: 12:25 PM
 Category#: IV
 FDA Establishment Type: Full-Service Restaurant
 No. of Risk Factor/Intervention Violations: 1
 No. of Repeat Risk Factor/Intervention Violations:

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

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
Supervision .2652									
1	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Type, size and sewage flow in accordance with permit?	2	0		
Employee Health .2652									
2	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	No evidence of leaks into or out from sewer lines/manholes?	3	1.5	0	
3	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper use of reporting, restriction and exclusion	3	1.5	0	
Good Hygienic Practices .2652, .2653									
4	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper eating, tasting, drinking, or tobacco use	2	1	0	
5	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Tanks and access manholes structurally sound,	1	.5	0	
Preventing Contamination by Hands .2652, .2653, .2655, .2656									
6	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Sanitary tee(s) in good working condition?	4	2	0	
7	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Tanks pumped, cleaned out as needed?	3	1.5	0	
8	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Effluent appears clear, free of excess solids?	2	1	0	
Approved Source .2653, .2655									
9	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food obtained from approved source	2	1	0	
10	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Food received at proper temperature	2	1	0	
11	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food in good condition, safe and unadulterated	2	1	0	
12	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Control panel enclosure/components in good condition?	2	1	0	
Protection from Contamination .2653, .2654									
13	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food separated and protected	3	1.5	0	
14	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	No evidence of effluent surfacing/reaching	3	X	0	
15	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper disposal of returned, previously served, reconditioned, and unsafe food	2	1	0	
Potentially Hazardous Food Time/Temperature .2653									
16	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Proper cooking time and temperatures	3	1.5	0	
17	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper reheating procedures for hot holding	3	1.5	0	
18	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper cooling time and temperatures	3	1.5	0	
19	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper hot holding temperatures	3	1.5	0	
20	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper cold holding temperatures	3	1.5	0	
21	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper date marking and disposition	3	1.5	0	
22	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Turnups/cleanouts/valves intact and accessible?	2	1	0	
Consumer Advisory .2653									
23	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Consumer advisory provided for raw or undercooked foods	1	.5	0	
Highly Susceptible Populations .2653									
24	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Laterals free of excess solids, cleaned out as needed?	3	1.5	0	
Chemical .2653, .2657									
25	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food additives: approved and properly used	1	0.5	0	
26	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Toxic substances properly identified, stored, and used	2	1	0	
Conformance with Approved Procedures .2653, .2654, .2658									
27	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Compliance with variance, specialized process, reduced oxygen packaging criteria or HACCP plan	2	1	0	

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
Safe Food and Water .2653, .2655, .2658									
28	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Pasteurized eggs used where required	1	0.5	0	
29	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Water and ice from approved source	2	1	0	
30	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Variance obtained for specialized processing methods	1	0.5	0	
Food Temperature Control .2653, .2654									
31	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper cooling methods used; adequate equipment for temperature control	1	0.5	0	
32	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Plant food properly cooked for hot holding	1	0.5	0	
33	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Approved thawing methods used	1	0.5	0	
34	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Thermometers provided and accurate	1	0.5	0	
Food Identification .2653									
35	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food properly labeled: original container	2	1	0	
Prevention of Food Contamination .2652, .2653, .2654, .2656, .2657									
36	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Insects and rodents not present; no unauthorized animals	2	1	0	
37	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Contamination prevented during food preparation, storage and display	2	1	0	
38	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Personal cleanliness	1	0.5	0	
39	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Wiping cloths: properly used and stored	1	0.5	0	
40	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Washing fruits and vegetables	1	0.5	0	
Proper Use of Utensils .2653, .2654									
41	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	In-use utensils: properly stored	1	0.5	0	
42	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Utensils, equipment and linens: properly stored, dried and handled	1	0.5	0	
43	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Single-use and single-service articles: properly stored and used	1	0.5	0	
44	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Gloves used properly	1	0.5	0	
Utensils and Equipment .2653, .2654, .2663									
45	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Equipment, food and non-food-contact surfaces approved; cleanable, properly designed, constructed and used	2	X	0	
46	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Warewashing facilities: installed, maintained and used; test strips	1	.5	0	
47	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Non-food-contact surfaces clean	1	X	0	
Physical Facilities .2654, .2655, .2656									
48	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Hot and cold water available; adequate pressure	2	1	0	
49	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Plumbing installed; proper backflow devices	2	1	0	
50	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Sewage and waste water properly disposed	2	1	0	
51	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Toilet facilities: properly constructed, supplied and cleaned	1	.5	0	
52	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Garbage and refuse properly disposed; facilities maintained	1	X	0	
53	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Physical facilities installed, maintained and clean	1	X	0	
54	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Meets ventilation and lighting requirements; designated areas used	X	.5	0	X
TOTAL DEDUCTIONS:						5.0			



Comment Addendum to Food Establishment Report

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Establishment ID: 3034011726
☒ Inspection ☐ Re-Inspection Date: 04/15/2015
 Comment Addendum Attached ? ☐ Status Code: A
 Category#: IV
 Email 1: cafe3715@npc.international.com
 Email 2: _____
 Email 3: _____

Temperature Observations

Item/Location	Temp	Item/Location	Temp	Item/Location	Temp
Lettuce/ make unit	41.0	ham/ walk in	39.0	ambient temp/ drink cooler reach in	41.0
tomato/ make unit	39.0	rice/ walk in	42.0	David B. Wit/ 05/30/2017	0.0
turkey/ make unit	40.0	vegetable so/ steam table	177.0		
ham/ make unit	39.0	sanitizer (q/ buckets (ppm)	200.0		
sausage/ steam table	144.0	sanitizer (q/ three comp sink (ppm)	200.0		
egg/ steam table	150.0	sanitizer (c/ dish machine (ppm)	100.0		
tuna salad/ make unit 2	41.0	hot water/ prep sink	146.0		
cut melons/ walk in	38.0	ambient temp/ reach in cooler	39.0		

Observations and Corrective Actions

Violatons cited in this report must be corrected within the time frames below , or as stated in sections 8-405.11 of the food code.

Item Number	Observations and Corrective Actions
14	4-601.11 (A) Equipment, Food-Contact Surfaces, Nonfood-Contact Surfaces, and Utensils - P Baking pans and screens on speed racks have accumulation of baked on debris and carbon build up. Equipment and utensil food contact surfaces shall be maintained clean to sight and touch. Increase frequency of having pans cleaned.
45	4-501.11 Good Repair and Proper Adjustment-Equipment - C Dry storage shelves above prep sinks and tables is rusted with a rough texture. Replace or recondition these shelves to be smooth and easily cleanable. / the splash guard to the bread station hand sink has pulled away and needs to be rewelded and sealed to the sink. / The plastic curtain going into the walk in freezer has torn and needs to be replaced./ Condensation leak is occurring in the walk in freezer. Have the freezer condenser repaired to stop leak. Equipment shall be maintained in good repair.
47	4-601.11 (B) and (C) Equipment, Food-Contact Surfaces, Nonfood-Contact Surfaces, and Utensils - C Detail cleaning needed on wire shelving above dish area, in the baking area and on the spring arm of the scrap sink sprayer where dust has accumulated./ Two plastic bins had sticker residue on their sides. Bins removed to be cleaned during the inspection./ Drain pipes of the coffee prep sink and the dish machine scrap sink have mold/mildew soiling and need to be cleaned. Non food contact surfaces shall be maintained clean.
52	5-501.111 Area, Enclosures and Receptacles, Good Repair - C Dumpster has a hole torn in the left side under the lift arm. Replace the damaged dumpster. // 5-501.115 Maintaining Refuse Areas and Enclosures - C Dumpster corral has heavy leaf and waste build up. Remove waste from the enclosure to prevent pest harborage. PIC has contacted landlord to address issue of shared dumpster.
53	6-501.16 Drying Mops - C Mops hung with heads upright. Only store mops so that the head is facing down to prevent contamination of the handles. // 6-501.11 Repairing-Premises, Structures, Attachments, and Fixtures-Methods - C Baseboard in the walk in freezer is peeling from the wall and must be repaired. Pipes entering the ceilings through the establishment need to be sealed to prevent pest entry and to maintain cleanability of the ceiling tiles. Seal all pipe entries./ 6-501.12 Cleaning, Frequency and Restrictions - C Cleaning needed under the soup maker along the wall to remove debris. Cleaning needed under the dish machine to remove splash stains. Floor of the walk in freezer needs to be cleaned where splash has occurred and froze to the floor.
54	6-303.11 Intensity-Lighting - C Repeat: lighting is low at fixtures in both restrooms. Lighting must be at least 20 ft/cl at the fixtures and now ranges from 10 - 18ft/cl. Three lights burned out in the hood above the bread oven. Replace the burned out bulbs.



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Observations and Corrective Actions



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Person in Charge (Print & Sign): David B. Witt

Regulatory Authority (Print & Sign): Joseph Chrobak

REHS ID: 2450 Chrobak, Joseph

REHS Contact Phone Number: (336)703-3164

Verification Required Date: _____

