

# Food Establishment Inspection Report

Score: 100

Establishment Name: SUBWAY 2230

Establishment ID: 3034011808

Location Address: 660 HANES MALL BLVD

☒ Inspection ☐ Re-Inspection

City: WINSTON SALEM

State: NC

Date: 05/05/2021

Status Code: A

Zip: 27103

County: 34 Forsyth

Time In: 1:50 PM

Time Out: 4:10 PM

Permittee: PARRISH SUBWAY'S, INC.

Total Time: 2 hrs 20 min

Telephone: (336) 765-7613

Category #: III

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

FDA Establishment Type: Fast Food Restaurant

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

No. of Risk Factor/Intervention Violations: 1

No. of Repeat Risk Factor/Intervention Violations: 0

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.										
IN	OUT	N/A	N/C	Compliance Status	OUT	CDI	R	VR		IN	OUT	N/A	N/C	Compliance Status	OUT	CDI	R	VR		
<b>Supervision</b> .2652										<b>Safe Food and Water</b> .2653, .2655, .2658										
1	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	PIC Present; Demonstration-Certification by accredited program and perform duties	2	0				28	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Pasteurized eggs used where required	1	0				
<b>Employee Health</b> .2652										<b>Food Temperature Control</b> .2653, .2654										
2	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Management, employees knowledge; responsibilities & reporting	3	1	0			29	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Water and ice from approved source	2	1	0			
3	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper use of reporting, restriction & exclusion	3	1	0			30	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Variance obtained for specialized processing methods	1	0				
<b>Good Hygienic Practices</b> .2652, .2653										<b>Food Identification</b> .2653										
4	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper eating, tasting, drinking, or tobacco use	2	1	0			31	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper cooling methods used; adequate equipment for temperature control	1	0				
5	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	No discharge from eyes, nose or mouth	1	0				32	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Plant food properly cooked for hot holding	1	0				
<b>Preventing Contamination by Hands</b> .2652, .2653, .2655, .2656										<b>Prevention of Food Contamination</b> .2652, .2653, .2654, .2656, .2657										
6	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Hands clean & properly washed	4	2	0			33	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Approved thawing methods used	1	0				
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	1	0			34	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Thermometers provided & accurate	1	0				
8	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Handwashing sinks supplied & accessible	2	1	0			<b>Proper Use of Utensils</b> .2653, .2654										
<b>Approved Source</b> .2653, .2655										<b>Utensils and Equipment</b> .2653, .2654, .2663										
9	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food obtained from approved source	2	1	0			41	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	In-use utensils: properly stored	1	0				
10	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Food received at proper temperature	2	1	0			42	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Utensils, equipment & linens: properly stored, dried & handled	1	0				
11	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food in good condition, safe & unadulterated	2	1	0			43	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Single-use & single-service articles: properly stored & used	1	0				
12	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Required records available: shellstock tags, parasite destruction	2	1	0			44	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Gloves used properly	1	0				
<b>Protection from Contamination</b> .2653, .2654										<b>Physical Facilities</b> .2654, .2655, .2656										
13	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food separated & protected	3	1	0			45	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Equipment, food & non-food contact surfaces approved, cleanable, properly designed, constructed, & used	2	1				
14	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Food-contact surfaces: cleaned & sanitized	3	1				46	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Warewashing facilities: installed, maintained, & used; test strips	1	0				
15	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper disposition of returned, previously served, reconditioned, & unsafe food	2	1	0			47	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Non-food contact surfaces clean	1	0				
<b>Potentially Hazardous Food Time/Temperature</b> .2653										<b>Total Deductions:</b> 0										
16	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Proper cooking time & temperatures	3	1	0													
17	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Proper reheating procedures for hot holding	3	1	0													
18	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Proper cooling time & temperatures	3	1	0													
19	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper hot holding temperatures	3	1	0													
20	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper cold holding temperatures	3	1	0													
21	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper date marking & disposition	3	1	0													
22	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Time as a public health control: procedures & records	2	1	0													
<b>Consumer Advisory</b> .2653																				
23	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Consumer advisory provided for raw or undercooked foods	1	0														
<b>Highly Susceptible Populations</b> .2653																				
24	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Pasteurized foods used; prohibited foods not offered	3	1	0													
<b>Chemical</b> .2653, .2657																				
25	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Food additives: approved & properly used	1	0														
26	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Toxic substances properly identified stored, & used	2	1	0													
<b>Conformance with Approved Procedures</b> .2653, .2654, .2658																				
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													



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Division of Public Health • Environmental Health Section

Food Protection Program

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# Comment Addendum to Food Establishment Inspection Report

Establishment Name: SUBWAY 2230  
 Location Address: 660 HANES MALL BLVD  
 City: WINSTON SALEM State: NC  
 County: 34 Forsyth Zip: 27103  
 Wastewater System: ☒ Municipal/Community ☐ On-Site System  
 Water Supply: ☒ Municipal/Community ☐ On-Site System  
 Permittee: PARRISH SUBWAY'S, INC.  
 Telephone: (336) 765-7613

Establishment ID: 3034011808  
☒ Inspection ☐ Re-Inspection Date: 05/05/2021  
 Comment Addendum Attached? ☒ Status Code: A  
 Water sample taken? ☐ Yes ☒ No Category #: III  
 Email 1: luis carrasco2010@yahoo.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
meatballs	hot food well	171	servsafe					
sliced tomato	make table	40						
lettuce	make table	40						
tuna	make table	40						
teriyaki chicken	make table	40						
grilled chicken	make table	40						
american cheese	make table	40						
sliced turkey	make table	40						
sliced ham	make table	40						
steak	make table	36						
salami	make table	40						
sliced tomato	Duke under-counter refrigerator	40						
meatballs	Duke under-counter refrigerator	41						
lettuce	walk-in cooler	40						
sliced turkey	walk-in cooler	41						
chicken	walk-in cooler	41						
steak	Beverage-Air 3 door refrigerator	40						
chicken	Beverage-Air 3 door refrigerator	40						
hot water	3 compartment sink	125						
quat sani	3 comp sink 150ppm	00						

Person in Charge (Print & Sign): Luis Carrasco  
 Regulatory Authority (Print & Sign): Damon Thomas

*[Signature]*  
*[Signature]* REHS #2877

REHS ID: 2877 - Thomas, Damon

Verification Required Date:

REHS Contact Phone Number: (336) 703-3135



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## 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.

- 14 4-602.11 Equipment Food-Contact Surfaces and Utensils-Frequency - C- Cleaning is needed for the nozzles and the ice chute of the soda dispensing machine in the dining area- The surfaces of utensils and equipment contacting food that is not potentially hazardous such as ice bins and beverage dispenser nozzles shall be cleaned at a frequency specified by the manufacturer or at a frequency necessary to preclude the accumulation of soil and mold- 0 pts.
  
- 41 3-304.12 In-Use Utensils, Between-Use Storage - C- Serving utensils were stored inside of the containers of steak and chicken with their handles in contact with the food- During pauses in food preparation or dispensing, utensils shall be stored in the food with their handles above the top of the food and the container- 0 pts.
  
- 45 4-501.11 Good Repair and Proper Adjustment-Equipment - C- Recondition the underside of the drainboard for the prep table next to the three door refrigerator to remove rusting and pitting, repair the leak at the fan-coil unit in the walk-in cooler and repair the door of the cabinet beneath the soda dispensing machine- Equipment shall be maintained in good repair- 0 pts.
  
- 47 4-601.11 (B) and (C) Equipment, Food-Contact Surfaces, Nonfood-Contact Surfaces, and Utensils - C- Cleaning is needed for the door gaskets of the walk-in cooler, the Beverage-Air 3 door refrigerator and both Lockwood bread cabinets- Nonfood contact surfaces of equipment shall be kept free of an accumulation of food residue, dust, dirt and other debris- 0 pts.
  
- 51 5-501.17 Toilet Room Receptacle, Covered - C- The women's toilet room does not have a covered trash receptacle available for use- A toilet room used by females shall be provided with a covered receptacle for sanitary napkins- 0 pts.
  
- 52 5-501.113 Covering Receptacles - C- The door to the dumpster was left open- Receptacles and waste handling units for refuse, recyclables and returnables shall be kept covered with tight-fitting lids or doors if kept outside of the food establishment- 0 pts.
  
- 53 6-501.11 Repairing-Premises, Structures, Attachments, and Fixtures-Methods - C- Remove the blue wall anchors and seal the holes in the FRP. Ensure that the surface is smooth and easy to clean- Physical facilities shall be maintained in good repair- 0 pts.