

Food Establishment Inspection Report

Score: 98.5

Establishment Name: PANERA BREAD #4991

Establishment ID: 3034012528

Location Address: 100 HANES SQUARE SHOP CIRCLE

City: WINSTON SALEM State: North Carolina

Zip: 27103 County: 34 Forsyth

Permittee: COVELLI ENTERPRISES, INC.

Telephone: (336) 794-2033

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

Date: 09/30/2022 Status Code: A

Time In: 10:00 AM Time Out: 12:45 PM

Category#: IV

FDA Establishment Type: _____

No. of Risk Factor/Intervention Violations: 1

No. of Repeat Risk Factor/Intervention Violations: 0

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"/> OUT/N/A | Certified Food Protection Manager | 1 | 0 | |
| 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 | 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 | Required records available: shellstock tags, parasite destruction | 2 | 1 | 0 |
| Protection from Contamination .2653, .2654 | | | | | |
| 15 | <input checked="" type="checkbox"/> OUT/N/A/N/O | Food separated & protected | 3 | 1.5 | 0 |
| 16 | <input checked="" type="checkbox"/> IN | Food-contact surfaces: cleaned & sanitized | 3 | 1.5 | X |
| 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/N/A/N/O | Proper cooking time & temperatures | 3 | 1.5 | 0 |
| 19 | <input checked="" type="checkbox"/> IN OUT/N/A/N/O | Proper reheating procedures for hot holding | 3 | 1.5 | 0 |
| 20 | <input checked="" type="checkbox"/> OUT/N/A/N/O | Proper cooling time & temperatures | 3 | 1.5 | 0 |
| 21 | <input checked="" type="checkbox"/> OUT/N/A/N/O | Proper hot holding temperatures | 3 | 1.5 | 0 |
| 22 | <input checked="" type="checkbox"/> OUT/N/A/N/O | Proper cold holding temperatures | 3 | 1.5 | 0 |
| 23 | <input checked="" type="checkbox"/> OUT/N/A/N/O | Proper date marking & disposition | 3 | 1.5 | 0 |
| 24 | <input checked="" type="checkbox"/> IN OUT | Time as a Public Health Control; procedures & records | 3 | 1.5 | 0 |
| Consumer Advisory .2653 | | | | | |
| 25 | <input checked="" type="checkbox"/> IN OUT | Consumer advisory provided for raw/undercooked foods | 1 | 0.5 | 0 |
| Highly Susceptible Populations .2653 | | | | | |
| 26 | <input checked="" type="checkbox"/> IN OUT | Pasteurized foods used; prohibited foods not offered | 3 | 1.5 | 0 |
| Chemical .2653, .2657 | | | | | |
| 27 | <input checked="" type="checkbox"/> IN OUT | Food additives: approved & properly used | 1 | 0.5 | 0 |
| 28 | <input checked="" type="checkbox"/> OUT/N/A | Toxic substances properly identified stored & used | 2 | 1 | 0 |
| Conformance with Approved Procedures .2653, .2654, .2658 | | | | | |
| 29 | <input checked="" type="checkbox"/> IN OUT | 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"/> OUT/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 | Variance obtained for specialized processing methods | 2 | 1 | 0 |
| Food Temperature Control .2653, .2654 | | | | | |
| 33 | <input checked="" type="checkbox"/> IN | Proper cooling methods used; adequate equipment for temperature control | 1 | 0.5 | X |
| 34 | <input checked="" type="checkbox"/> OUT/N/A/N/O | Plant food properly cooked for hot holding | 1 | 0.5 | 0 |
| 35 | <input checked="" type="checkbox"/> OUT/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 | Equipment, food & non-food contact surfaces approved, cleanable, properly designed, constructed & used | 1 | 0.5 | 0 |
| 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"/> OUT | Garbage & refuse properly disposed; facilities maintained | 1 | 0.5 | 0 |
| 55 | <input checked="" type="checkbox"/> IN | Physical facilities installed, maintained & clean | 1 | 0.5 | 0 |
| 56 | <input checked="" type="checkbox"/> OUT | Meets ventilation & lighting requirements; designated areas used | 1 | 0.5 | 0 |
| TOTAL DEDUCTIONS: | | | | | 1.5 |



Comment Addendum to Food Establishment Inspection Report

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 Wastewater System: ☒ Municipal/Community ☐ On-Site System
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 Permittee: COVELLI ENTERPRISES, INC.
 Telephone: (336) 794-2033

Establishment ID: 3034012528
☒ Inspection ☐ Re-Inspection Date: 09/30/2022
 Comment Addendum Attached? ☒ Status Code: A
 Water sample taken? ☐ Yes ☒ No Category #: IV
 Email 1: panera4991@covelli.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 |
|---------------|----------------------------|------|--------|----------|------|------|----------|------|
| lettuce | 2 door reach in | 38 | beans | walk in | 40 | | | |
| tomato | sandwich station (top) | 40 | cheese | walk in | 40 | | | |
| chicken salad | sandwich station (top) | 39 | | | | | | |
| cheese | sandwich station (top) | 39 | | | | | | |
| cheese | sandwich statio (bottom) | 38 | | | | | | |
| turkey | sandwich station (bottom) | 39 | | | | | | |
| tomato | salad station (top) | 39 | | | | | | |
| turkey | salad station (bottom) | 40 | | | | | | |
| egg | salad station (top) | 41 | | | | | | |
| tomato soup | steam table | 174 | | | | | | |
| chicken soup | steam table | 176 | | | | | | |
| water | dish machine | 166 | | | | | | |
| water | 3 comp sink | 120 | | | | | | |
| sanitizer | bucket | 700 | | | | | | |
| lettuce | breakfast station (bottom) | 41 | | | | | | |
| cheese | breakfast station (bottom) | 40 | | | | | | |
| chicken | hot cabinet | 140 | | | | | | |
| rice | cooling @11:15 | 49 | | | | | | |
| rice | cooling @ 11:45 | 45 | | | | | | |
| tomato | walk in | 40 | | | | | | |

Person in Charge (Print & Sign):
 First _____ Last _____
 Regulatory Authority (Print & Sign): Cierra
 First _____ Last _____
 Elledge

Bill Perina
Cierra Elledge

REHS ID: 2760 - Elledge, Cierra
 REHS Contact Phone Number: _____

Verification Required Date: _____

Authorize final report to
 be received via Email: _____



North Carolina Department of Health & Human Services

Page 1 of _____
 Division of Public Health • Environmental Health Section
 DHHS is an equal opportunity employer.
 Food Establishment Inspection Report, 10/2021

• Food Protection Program



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Establishment ID: 3034012528

Date: 09/30/2022 **Time In:** 10:00 AM **Time Out:** 12:45 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.

- 16 4-601.11 (A) Equipment, Food-Contact Surfaces, Nonfood Contact Surfaces, and Utensils (Pf) Observed food contact portion of apple slicer with soil buildup. Equipment food contact surfaces and utensils shall be clean to sight and touch. CDI- Slicer was returned to 3 comp sink to be washed, rinsed, and sanitized.
- 33 3-501.15 Cooling Methods (Pf)- Observed rice and quinoa mix cooling from ambient in tightly sealed containers. Quickly cool foods. Use methods such as open/vented shallow pans, large ice baths and active stirring. Cold air must flow around product to remove the heat. - CDI- containers were vented and met proper cooling parameters.
- 47 4-501.11 Good Repair and Proper Adjustment - Equipment (C) Observed gaskets on multiple coolers torn. Observed condensation leak in walk in freezer. Maintain equipment in a state of good repair.
- 55 6-501.11 Repairing - Premises, Structures, Attachments, and Fixtures - Methods (C) Observed hand sink by breakfast station, prep sink, and 3 comp sink needing new caulking. Floors, walls, and ceilings including the attachments such as soap and towel dispensers; light fixtures; and heat/ac vents shall be maintained in good repair.