

Food Establishment Inspection Report

Score: 97

Establishment Name: SPEEDWAY 6936

Establishment ID: 3034020741

Location Address: 2700 UNIVERSITY PARKWAY

City: WINSTON SALEM State: North Carolina

Zip: 27105 County: 34 Forsyth

Permittee: SPEEDWAY LLC

Telephone: (336) 748-0982

Inspection Re-Inspection

Wastewater System:

Municipal/Community On-Site System

Water Supply:

Municipal/Community On-Site Supply

Date: 03/17/2023 Status Code: A

Time In: 11:00 AM Time Out: 12:38 PM

Category#: II

FDA Establishment Type: Fast Food Restaurant

No. of Risk Factor/Intervention Violations: 2

No. of Repeat Risk Factor/Intervention Violations: 1

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"/> IN <input checked="" type="checkbox"/> OUT				
Procedures for responding to vomiting & diarrheal events		1	0	X	X
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 <input checked="" type="checkbox"/> 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 <input checked="" type="checkbox"/> 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"/> OUT/N/A/N/O				
Food separated & protected		3	1.5	0	
16	<input checked="" type="checkbox"/> IN <input checked="" type="checkbox"/> OUT				
Food-contact surfaces: cleaned & sanitized		3	0		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 <input checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A/N/O				
Proper cooking time & temperatures		3	1.5	0	
19	<input checked="" type="checkbox"/> OUT/N/A/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/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 <input checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A/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"/> IN <input checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A				
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 <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/N/O				
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"/> IN <input checked="" type="checkbox"/> OUT <input checked="" 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		X
48	<input checked="" type="checkbox"/> OUT				
Warewashing facilities: installed, maintained & used; test strips		1	0.5	0	
49	<input checked="" type="checkbox"/> IN <input checked="" type="checkbox"/> OUT				
Non-food contact surfaces clean		1	0		X
Physical Facilities .2654, .2655, .2656					
50	<input checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A				
Hot & cold water available; adequate pressure		1	0.5	0	
51	<input checked="" type="checkbox"/> IN <input checked="" type="checkbox"/> OUT				
Plumbing installed; proper backflow devices		2	1	X	
52	<input checked="" type="checkbox"/> OUT				
Sewage & wastewater properly disposed		2	1	0	
53	<input checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> 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"/> OUT				
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:					3



Comment Addendum to Food Establishment Inspection Report

Establishment Name: SPEEDWAY 6936
 Location Address: 2700 UNIVERSITY PARKWAY
 City: WINSTON SALEM State: NC
 County: 34 Forsyth Zip: 27105
 Wastewater System: Municipal/Community On-Site System
 Water Supply: Municipal/Community On-Site System
 Permittee: SPEEDWAY LLC
 Telephone: (336) 748-0982

Establishment ID: 3034020741
 Inspection Re-Inspection Date: 03/17/2023
 Comment Addendum Attached? Status Code: A
 Water sample taken? Yes No Category #: II
 Email 1: 0006936@stores.speedway.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 Wings	reheat for hot holding	198.0						
Cheese Pizza	cooked for hot holding	190.0						
Chicken Tenders	reheat for hot holding	176.0						
Hot Dogs	roller grill	157.0						
Chicken Taquitos	roller grill	157.0						
Mini Tacos	hot holding	147.0						
Cheese Pizza	hot holding	138.0						
Fish Sandwich	hot holding	140.0						
Bacon Cheese Burger	hot holding	147.0						
Hot Dogs	upright cooler	40.0						
Hot Water	3-compartment sink	131.0						
Quat Sani	3-compartment sink	400.0						

First
 Person in Charge (Print & Sign): Kimberly

Last
 Smith

Kimberly Smith

First
 Regulatory Authority (Print & Sign): Victoria

Last
 Murphy

V. Murphy

REHS ID: 2795 - Murphy, Victoria

Verification Required Date: 03/20/2023

REHS Contact Phone Number: (336) 703-3814

Authorize final report to be received via Email: _____

Comment Addendum to Inspection Report

Establishment Name: SPEEDWAY 6936

Establishment ID: 3034020741

Date: 03/17/2023 **Time In:** 11:00 AM **Time Out:** 12:38 PM

Certifications

Name	Certificate #	Type	Issue Date	Expiration Date
Kimberly Smith		Food Service	08/11/2022	08/11/2027

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.

- 5 2-501.11 Clean-up of Vomiting and Diarrheal Event-PF: There was no vomit or diarrhea clean-up plan establishment. A food establishment shall have written procedures for employees to follow when responding to vomiting or diarrhea events that involve discharge onto surfaces in the food establishment. The procedures shall address the specific actions employees must take to minimize the spread of contamination and the exposure of employees, consumers, food, and surfaces to vomitus or fecal matter. CDI: A clean-up plan was given to the establishment.
- 16 4-601.11 (A) Equipment, Food-Contact Surfaces, Nonfood Contact Surfaces, and Utensils-PF: Over 50% of the drink nozzles on the drink stations were soiled/4 pans were stored soiled on the clean dish shelf. Food contact surfaces shall be clean to sight and touch. The PIC stated that only maintenance could remove the nozzles. VR: A verification is required by 03/20/23. Contact Victoria Murphy at (336)703-3814 or murphyvl@forsyth.cc
- 47 4-501.11 Good Repair and Proper Adjustment - Equipment-REPEAT- C:Remove rust from dish shelving above 3 compartment sink. Remove rust from small chemical shelf next to 3 compartment sink, replace handles on make-unit lid and replace missing leg cap. Equipment shall be maintained in good repair
- 49 4-601.11 (B) and (C) Equipment, Food-Contact Surfaces, Nonfood Contact Surfaces, and Utensils-REPEAT-C: Cleaning is needed to/on the following: underneath hand and dump sinks at coffee station of mold buildup and cabinets under the drink station. Nonfood-contact surfaces shall be free of dust, dirt, food residue, and debris. *taken to half credit due to vast improvement from previous inspection*
- 51 5-205.15 System Maintained in Good Repair-C: Leaks were observed at the faucets of the 3-compartment sink. A plumbing system shall be maintained in good repair.