

# FOOD ESTABLISHMENT INSPECTION REPORT R-10

Subway at Walmart  
121 Worcester Rd.  
Framingham, MA 01701

|                          |           |             |         |                    |                     |                           |                 |                    |             |                  |          |
|--------------------------|-----------|-------------|---------|--------------------|---------------------|---------------------------|-----------------|--------------------|-------------|------------------|----------|
| <u>Inspection Number</u> | 86E3C     | <u>Date</u> | 9/19/24 | <u>Time In/Out</u> | 12:39 PM<br>1:41 PM | <u>Inspection Type</u>    | Routine         | <u>Client Type</u> | Restaurant  | <u>Inspector</u> | C.Rivera |
| <u>Permit Number</u>     | BOH150435 | <u>Risk</u> | 1       | <u>Variance</u>    |                     | <u>Violation Summary:</u> | <u>Priority</u> | <u>Pf</u>          | <u>Core</u> | <u>Repeat</u>    |          |
|                          |           |             |         |                    |                     |                           | 1               | 2                  | 6           |                  |          |

## Foodborne Illness Risk Factors and Public Health Interventions

IN = in compliance OUT= out of compliance N/O = not observed N/A = not applicable COS = corrected on-site during inspection Repeat Violations Highlighted in Yellow

| Supervision   | IN | OUT                                 | NA                       | NO                                  | COS                      | Protection from Contamination (Cont'd)  | IN                                  | OUT                                 | NA                       | NO                       | COS                      |
|---|----|-------------------------------------|--------------------------|-------------------------------------|--------------------------|---|-------------------------------------|-------------------------------------|--------------------------|--------------------------|--------------------------|
| 1. PIC present, demonstrates knowledge, and performs duties                                     | 1  | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> | 15. Food separated and protected  | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Certified Food Protection Manager  |    | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> | 16. Food-contact surfaces; cleaned & sanitized                                      | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Employee Health   | IN | OUT                                 | NA                       | NO                                  | COS                      | Time/Temperature Control for Safety   | IN                                  | OUT                                 | NA                       | NO                       | COS                      |
| 3. Management, food employee and conditional employee knowledge, responsibilities and reporting |    | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> | 17. Proper disposition of returned, previously served, reconditioned & unsafe foods | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Proper use of restriction and exclusion  |    | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> | 18. Proper cooking time & temperatures  | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. Procedures for responding to vomiting and diarrheal events                                   |    | <input type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> | 19. Proper reheating procedures for hot holding                                     | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Good Hygienic Practices   | IN | OUT                                 | NA                       | NO                                  | COS                      | Consumer Advisory   | IN                                  | OUT                                 | NA                       | NO                       | COS                      |
| 6. Proper eating, tasting, drinking, or tobacco use   |    | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> | 20. Proper cooling time and temperature   | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 7. No discharge from eyes, nose, and mouth  |    | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> | 21. Proper hot holding temperatures   | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Preventing Contamination by Hands   | IN | OUT                                 | NA                       | NO                                  | COS                      | Highly Susceptible Populations  | IN                                  | OUT                                 | NA                       | NO                       | COS                      |
| 8. Hands clean & properly washed  |    | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> | 22. Proper cold holding temperatures  | 1                                   | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 9. No bare hand contact with RTE food or a pre-approved alternative procedure properly allowed  |    | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> | 23. Proper date marking and disposition   |                                     | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Approved Source   | IN | OUT                                 | NA                       | NO                                  | COS                      | Food/Color Additives and Toxic Substances   | IN                                  | OUT                                 | NA                       | NO                       | COS                      |
| 10. Adequate handwashing sinks supplied and accessible  | 1  | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> | 24. Time as a Public Health Control; procedures & records                           | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 11. Food obtained from approved source  |    | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> | 25. Consumer advisory provided for raw/undercooked food                             | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 12. Food received at proper temperature   |    | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | 26. Pasteurized foods used; prohibited foods not offered                            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 13. Food in good condition, safe & unadulterated  |    | <input type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> | 27. Food additives: approved & properly used  | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 14. Required records available: shellstock tags, parasite destruction,                          |    | <input type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> | 28. Toxic substances properly identified, stored & used                             | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <b>Repeat Violations Highlighted in Yellow</b>  |    |                                     |                          |                                     |                          | 29. Compliance with variance/specialized process/HACCP                              | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

## Good Retail Practices

| Safe Food and Water  | IN | OUT                                 | NA                       | NO                       | COS                      | Proper Use of Utensils   | IN                       | OUT                                 | NA                       | NO                       | COS                      |
|--|----|-------------------------------------|--------------------------|--------------------------|--------------------------|--|--------------------------|-------------------------------------|--------------------------|--------------------------|--------------------------|
| 30. Pasteurized eggs used where required                           |    | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 43. In-use utensils: properly stored                                       | <input type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 31. Water & ice from approved source                               |    | <input type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 44. Utensils, equip. & linens: property stored, dried & handled            | <input type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 32. Variance obtained for specialized processing methods           |    | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 45. Single-use/single-service articles: properly stored & used             | <input type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Food Temperature Control   | IN | OUT                                 | NA                       | NO                       | COS                      | Utensils, Equipment and Vending  | IN                       | OUT                                 | NA                       | NO                       | COS                      |
| 33. Proper cooling methods used; adequate equip. for temp. control |    | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 46. Gloves used properly   | <input type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 34. Plant food properly cooked for hot holding                     |    | <input type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 47. All contact surfaces cleanable, properly designed, constructed, & used | <input type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 35. Approved thawing methods used                                  |    | <input type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 48. Warewashing facilities: installed, maintained & used; test strips      | <input type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 36. Thermometers provided & accurate                               |    | <input type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 49. Non-food contact surfaces clean  | 1                        | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Food Identification  | IN | OUT                                 | NA                       | NO                       | COS                      | Physical Facilities  | IN                       | OUT                                 | NA                       | NO                       | COS                      |
| 37. Food properly labeled; original container                      |    | <input type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 50. Hot & cold water available; adequate pressure                          | <input type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Prevention of Food Contamination                                   | IN | OUT                                 | NA                       | NO                       | COS                      | Physical Facilities  | IN                       | OUT                                 | NA                       | NO                       | COS                      |
| 38. Insects, rodents & animals not present                         | 1  | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 51. Plumbing installed; proper backflow devices                            | <input type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 39. Contamination prevented in prep, storage & display             |    | <input type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 52. Sewage & waste water properly disposed                                 | <input type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 40. Personal cleanliness   | 1  | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 53. Toilet facilities: properly constructed, supplied, & cleaned           | <input type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 41. Wiping cloths; properly used & stored                          |    | <input type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 54. Garbage & refuse properly disposed; facilities maintained              | <input type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 42. Washing fruits & vegetables                                    |    | <input type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 55. Physical facilities installed, maintained & clean                      | 1                        | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|  |    |                                     |                          |                          |                          | 56. Adequate ventilation & lighting; designated areas use                  | <input type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|  |    |                                     |                          |                          |                          | 60. 105 CMR 590 violations / local regulations                             | 2                        | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Official Order for Correction: Based on an inspection today, the items marked "OUT" indicated violations of 105 CMR 590.000 and applicable sections of the 2013 FDA Food Code. This report, when signed below by a Board of Health member or its agent constitutes an order of the Board of Health. Failure to correct violations cited in this report may result in suspension or revocation of the food establishment permit and cessation of food establishment operations. If you are subject to a notice of suspension, revocation, or non-renewal pursuant to 105 CMR 590.000 you may request a hearing before the board of health in accordance with 105 CMR 590.015(B).

  
\_\_\_\_\_  
C. Rivera

*Unable to attend*  
\_\_\_\_\_

Follow Up Required:  Y      Follow Up Date: \_\_\_\_\_

# FOOD SAFETY INSPECTION REPORT

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Subway at Walmart  
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Inspection Number  
86E3C

Date  
9/19/24

Time In/Out  
12:39 PM  
1:41 PM

Inspector  
C.Rivera

## Inspection Report (Continued)

Repeat Violations Highlighted in Yellow

### Supervision

#### PIC Present / Knowledgeable / Duties

#### 1 2-101.11 (A) Assignment of Responsibility - Establishment -

**Pf** PIC was not present during the time of inspection. *Code: The permit holder shall be the PIC or shall designate a PIC and shall ensure that a PIC is present at the food establishment during all hours of operation.*

### Preventing Contamination by Hands

#### Adequate handwashing sinks properly supplied and accessible

#### 10 6-301.20 Disposable Towels, Waste Receptacle - Back of House -

**C** No trash receptacle in the hand washing area was observed. *Code: A handwashing sink or group of adjacent handwashing sinks that is provided with disposable towels shall be provided with a waste receptacle.*



### Time / Temperature Control for Safety

#### Cold Holding Temperature

#### 22 3-501.16 (A)(2) (B) Proper Cold Holding Temps. - Establishment -

**Pr** Multiple items in the cold well were observed above 41 degrees including chicken, cheese, tomatoes and spinach. *Code: Except during preparation, cooking, or cooling, or when time is used as the public health control as specified under section 3-501.19, and except as specified under paragraph (B) and in paragraph (C) of this section, TCS food shall be maintained at 41°F or less. Eggs that have not been treated to destroy all viable Salmonellae shall be stored in refrigerated equipment that maintains an ambient air temperature of 45°F or less.*

### Prevention of Food Contamination

Framingham Public Health Department: 508-532-5470

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## Inspection Report (Continued)

Repeat Violations Highlighted in Yellow

### Insect, rodents & animals not present

#### 38 6-501.111 (C) Controlling Pests - Establishment -

**Pf** Observed multiple Drain flies throughout the FE *Code: The premises shall be maintained free of insects, rodents, and other pests. The presence of insects, rodents, and other pests shall be controlled to eliminate their presence on the premises by using methods, if pests are found, such as trapping devices or other means of pest control, such as pesticides, must be used according to law and manufacture's instructions.*

#### 40 2-303.11 Jewelry Prohibitions - Front of House -

**C** Observed food employee wearing wrist jewelry while handling food. *Code: Except for a plain ring such as a wedding band, while preparing food, food employees may not wear jewelry including medical information jewelry on their arms and hands.*

## Utensils, Equipment and Vending

### Nonfood contact surfaces clean

#### 49 4-602.13 Nonfood -Contact Surfaces - Establishment -

**C** Observed the popcorn machine with build up food debris. Ensure to clean as often as necessary to avoid build up. *Code: Nonfood contact surfaces of equipment shall be cleaned at a frequency necessary to preclude accumulation of soil residues.*



## Physical Facilities

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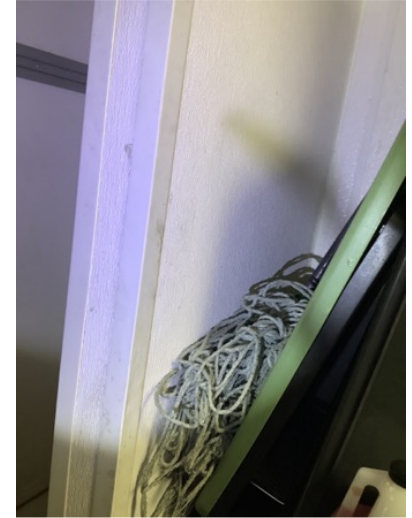
## Inspection Report (Continued)

Repeat Violations Highlighted in Yellow

### Physical Facilities installed, maintained & cleaned

#### 55 6-501.16 Drying Mops - Back of House -

- C Observed mop that was not in use and not being placed in mop sink to dry. Code: After use, mops shall be placed in a position that allows them to air dry without soiling walls, equipment, or supplies.



## Additional Requirement

### Violations Related to Good Retail Practices

#### 60 MA 590.011 (A) Anti-Choking Procedures - Front of House -

- C Unable to determine if any employee during the inspection is choke safe certified. Code: Restaurants with a seating capacity greater than 24 are required to have one or more employees trained in a manual choke-saving procedure in accordance with 105 CMR 605.000 Approved Choke-Saving Procedures. Each food service establishment shall: have on its premises, while food is being served, an employee trained in manual procedures approved by the Department to remove food lodged in a person's throat; and make adequate provision for insurance to cover employees trained in rendering such assistance.

#### 60 MA 590.011 (C)(3) Food Allergy Awareness Requirements - Training - Establishment -

- C Unable to determine if any employee during the inspection is allergy awareness certified. Code: Food establishments that cook, prepare, or serve food intended for immediate consumption either on or off the premises shall have on staff a certified food protection manager who has been issued a Massachusetts certificate of allergen awareness training by an allergen awareness training verification program recognized by the Department. The certificate will be valid for 5 years. (b) The certified food protection manager shall: 1. Demonstrate knowledge of major food allergens by posting the Massachusetts food allergen awareness training certificate; and 2. Ensure that employees are properly trained in food allergy awareness as it relates to their assigned duties.

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## Inspection Report (Continued)

Repeat Violations Highlighted in Yellow

## Temperatures

| Area           | Equipment       | Product         | Notes | Temps   |
|----------------|-----------------|-----------------|-------|---------|
| Front of House | Cold Food Well  | Steak           |       | 45 °F   |
| Front of House | Cold Food Well  | Peppers         |       | 55.4 °F |
| Front of House | Steam Table     | Meatballs       |       | 140 °F  |
| Front of House | Reach-In Cooler | Chicken         |       | 46 °F   |
| Front of House | Reach-In Cooler | Tuna            |       | 37 °F   |
| Establishment  | Reach-In Cooler | Pepperoni       |       | 39 °F   |
| Front of House | Cold Food Well  | Olives          |       | 51 °F   |
| Back of House  | Reach-In Cooler | Ham             |       | 42 °F   |
| Front of House | Reach-In Cooler | Tomatoes        |       | 53 °F   |
| Front of House | Cold Food Well  | Jalapeño        |       | 58 °F   |
| Front of House | Reach-In Cooler | Spinach         |       | 67 °F   |
| Front of House | Cold Food Well  | American cheese |       | 45 °F   |

Temperatures in **RED** identify items in the temperature danger zone. See the report notes for specific details.

## Notes

Routine Inspection was performed by Inspector Rivera.  
Inspection ended at 1:40 PM.

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