

**Department of Public Health and Social Services  
Division of Environmental Health  
Food Establishment Inspection Report**

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INSPECTION	RSN	TYPE	GRADE	INSPECTION DATE	ESTABLISHMENT NAME
Regular			<b>24</b>	03 / 06 / 2018	WENDY'S
Follow-up	✓	✓		TIME IN	TIME OUT
Complaint			RATING	10:10 AM	11:55 AM
Investigation			<b>D</b>	SANITARY PERMIT NO.	PERMIT HOLDER
Other:				170001692	QUICK SERVICE FOODS, INC.
ESTABLISHMENT TYPE			AREA	TELEPHONE	No. of Risk Factor/Intervention Violations
RESTAURANT			2	734-8828	4
					No. of Repeat Risk Factor/Intervention Violations
					3
					RISK CATEGORY
					3

**FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS**

Circle designated compliance (IN, OUT, N/O, N/A) for each numbered item. Mark "X" in appropriate box for COS and/or R.

IN = In compliance OUT = Not in compliance N/O = Not observed N/A = Not applicable COS = Corrected on-site during inspection R = Repeat violation PTS = Dement points

Compliance Status				COS	R	PTS
<b>Supervision</b>						
1	IN	OUT	Person in charge present, demonstrates knowledge, and performs duties			6
<b>Employee Health</b>						
2	(IN)	OUT	Management awareness; policy present			6
3	IN	OUT	Proper use of reporting, restriction & exclusion			6
<b>Good Hygienic Practices</b>						
4	IN	OUT	N/A	N/O	Proper eating, tasting, drinking, betelnut, or tobacco use	6
5	IN	OUT	N/A	N/O	No discharge from eyes, nose, and mouth	6
<b>Preventing Contamination by Hands</b>						
6	(IN)	OUT	N/A	N/O	Hands clean and properly washed	6
7	IN	OUT	N/A	N/O	No bare hand contact with ready-to-eat foods or approved alternate method properly followed	6
8	IN	OUT	Adequate handwashing facilities supplied & accessible			6
<b>Approved Source</b>						
9	IN	OUT	Food obtained from approved source			6
10	IN	OUT	N/A	N/O	Food received at proper temperature	6
11	IN	OUT	Food in good condition, safe, and unadulterated			6
12	IN	OUT	N/A	N/O	Required records available: shellstock tags, parasite destruction	6
<b>Protection from Contamination</b>						
13	IN	OUT	N/A		Food separated and protected	6
14	IN	(OUT)	N/A		Food contact surfaces, cleaned & sanitized	6
15	IN	OUT	Proper disposition of returned, previously served, reconditioned, and unsafe food			6

Compliance Status				COS	R	PTS
<b>Potentially Hazardous Food (TCS Food)</b>						
16	IN	OUT	N/A	N/O	Proper cooking time and temperatures	6
17	IN	OUT	N/A	N/O	Proper reheating procedures for hot holding	6
18	IN	OUT	N/A	N/O	Proper cooling time and temperatures	6
19	IN	(OUT)	N/A	N/O	Proper hot holding temperatures	6
20	IN	(OUT)	N/A		Proper cold holding temperatures	6
21	IN	(OUT)	N/A	N/O	Proper date marking and disposition	6
<b>Consumer Advisory</b>						
22	IN	OUT	N/A		Consumer Advisory provided for raw or undercooked foods	6
<b>Highly Susceptible Populations</b>						
23	IN	OUT	N/A		Pasteurized foods used; prohibited foods not offered	6
<b>Chemical</b>						
24	IN	OUT	N/A		Food additives: approved and properly used	6
25	IN	OUT	Toxic substances properly identified, stored, used			6
<b>Conformance with Approved Procedures</b>						
26	IN	OUT	N/A		Compliance with variance, specialized process, and HACCP plan	6

Risk factors are improper practices or procedures identified as the most prevalent contributing factors of foodborne illness or injury. Public Health interventions are control measures to prevent foodborne illness or injury.

**GOOD RETAIL PRACTICES**

Good Retail Practices are preventative measures to control the introduction of pathogens, chemicals, and physical objects into foods.

Mark "X" in box; if numbered item is not in compliance and/or if COS and/or R. COS = Corrected on-site during inspection R = Repeat violation PTS = Dement points

Compliance Status				COS	R	PTS
<b>Safe Food and Water</b>						
27			Pasteurized eggs used where required			1
28			Water and ice from approved source			2
29			Variance obtained for specialized processing methods			1
<b>Food Temperature Control</b>						
30			Proper cooling methods used; adequate equipment for temperature control			1
31			Plant food properly cooked for hot holding			1
32			Approved thawing methods used			1
33			Thermometer provided and accurate			1
<b>Food Identification</b>						
34			Food properly labeled; original container			1
<b>Prevention of Food Contamination</b>						
35			Insects, rodents, and animals not present			2
36			Contamination prevented during food preparation, storage & display			1
37			Personal cleanliness			1
38			Wiping cloths: properly used and stored			1
39			Washing fruits and vegetables			1

Compliance Status				COS	R	PTS
<b>Proper Use of Utensils</b>						
40			In-use utensils: properly stored			1
41			Utensils, equipment and linens: properly stored, dried, handled			1
42			Single-use/single-service articles: properly stored, used			1
43			Gloves used properly			1
<b>Utensils, Equipment and Vending</b>						
44			Food and nonfood-contact surfaces cleanable, properly designed, constructed, and used			1
45			Warewashing facilities: installed, maintained, used; test strips			1
46			Nonfood-contact surfaces clean			1
<b>Physical Facilities</b>						
47			Hot & cold water available, adequate pressure			2
48			Plumbing installed; proper backflow devices			2
49			Sewage and wastewater properly disposed			2
50			Toilet facilities: properly constructed, supplied, & cleaned			2
51			Garbage/refuse properly disposed; facilities maintained			2
52			Physical facilities installed, maintained, and clean			1
53			Adequate ventilation and lighting; designated areas use			1
<b>Documents and Placards</b>						
54			Sanitary Permit, Health Certificates valid and posted			2

I have read and understand the above violation(s), and I am aware of the corrective measures that shall be taken.

Person in Charge (Print and Sign)  
**Laurie Jean Ranches**

DEH Inspector (Print and Sign)  
**LEILANI NAVARRO**

Date: **3/6/18**

Follow-up (Circle one): **YES** NO Follow-up Date **TBO**

Department of Public Health and Social Services  
Division of Environmental Health  
**Food Establishment Inspection Report**

ESTABLISHMENT NAME <b>WENDY'S</b>		LOCATION (Address) <b>LOT 1020-REM-3, ROUTE 10, BARRIGADA</b>
INSPECTION DATE <b>03 / 06 / 2018</b>	SANITARY PERMIT NO. <b>170001092</b>	PERMIT HOLDER <b>QUICK SERVICE FOODS, INC.</b>

**TEMPERATURE OBSERVATIONS**

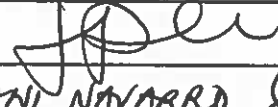
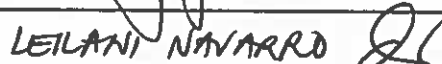
Item/Location	Temperature (° F)	Item/Location	Temperature (° F)
<b>CHILI / WARMER</b>	<b>150.0</b>		
<b>COUNTRY FRIED POTATOES / WARMER</b>	<b>129.0</b>		
<b>HASH BROWNS / WARMER</b>	<b>142.0</b>		
<b>CHICKEN NUGGETS / WARMER</b>	<b>188.5</b>		
<b>FRIED CHICKEN / GRILL TOP</b>	<b>194.5</b>		
<b>CUT TOMATOES / PREP TABLE CHILLER</b>	<b>47.5; 69.5</b>		
<b>CUT BROCCOLI / PREP TABLE CHILLER</b>	<b>45.0</b>		
<b>CUT LETTUCE / PREP TABLE CHILLER</b>	<b>61.0; 58.0; 72.0</b>		
<b>COOKED BACON / GRILL TOP</b>	<b>94.5; 96.0; 105.5</b>		
<b>CUT LETTUCE / WALK-IN CHILLER</b>	<b>41.5</b>		

ITEM NO.	OBSERVATIONS AND CORRECTIVE ACTIONS	CORRECT BY DATE
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Violations cited in this report must be corrected within the time frames indicated, or as stated in Sections 8-405.11 and 8-406.11 of the Guam Food Code.

	<p><b>A FOLLOW-UP INSPECTION WAS CONDUCTED TODAY FOR PREVIOUS INSPECTION DATED 02/20/18, WHICH RESULTED IN A GRADE/RATING OF 35/C. VIOLATIONS OF ITEMS NO. 2, 6, 33, 34, 37, 38, AND 52 WERE CORRECTED. HOWEVER, THE FOLLOWING REPEAT VIOLATIONS WERE OBSERVED TODAY:</b></p>	
<b>14</b>	<p><b>EMPLOYEE WAS FOUND CUTTING LETTUCE ON A CHOPPING BOARD WITH DARK STAINS AND DEEP CUT MARKS. EMPLOYEE SAID THEY HAD REPLACED THE CHOPPING BOARD FROM THE PREVIOUS INSPECTION WITH A NEW ONE.</b></p> <p><b>FOOD CONTACT SURFACES SHALL BE PROPERLY CLEANED AND SANITIZED TO PREVENT CONTAMINATION OF FOOD.</b></p>	
<b>19</b>	<p><b>POTENTIALLY HAZARDOUS FOOD (PHF) / TIME-TEMPERATURE CONTROL FOR SAFETY (TCS) FOOD IN THE WARMER AND GRILL TOP SUCH AS COOKED BACON AND COUNTRY FRIED POTATOES DID NOT MEET INTERNAL TEMPERATURE REQUIREMENT FOR HOT HOLDING. THREE TRAYS OF BACON, AND ONE TRAY OF FRIED POTATOES WERE DISCARDED.</b></p> <p><b>PHF/TCS FOOD SHALL BE KEPT AT INTERNAL TEMPERATURE OF 140°F OR ABOVE FOR HOT HOLDING TO LIMIT PATHOGEN GROWTH AND/OR TOXIN FORMATION.</b></p>	
<b>20</b>	<p><b>MOST OF THE PHF/TCS FOOD IN THE PREP TABLE CHILLER SUCH AS CUT</b></p>	

Based on the inspection today, the items listed above identify violations which shall be corrected by the date specified by the Department. Failure to comply may result in the immediate suspension of the Sanitary Permit or downgrade. If seeking to appeal the result of any notice or inspection findings, a written request for hearing must be submitted to the Director within the period of time established in the notice for corrections.

Person in Charge (Print and Sign)  <b>LEILANI NAVARRO</b>	Date: <b>3/6/18</b>  Date: <b>03/06/18</b>
DEH Inspector (Print and Sign)  <b>LEILANI NAVARRO</b>	

Food Establishment Inspection Report



ESTABLISHMENT NAME <b>WENNOY'S</b>		LOCATION (Address) <b>LOT 1020-REM-3, ROUTE 10, BARRIGADA</b>
INSPECTION DATE <b>03, 06, 2018</b>	SANITARY PERMIT NO. <b>170001692</b>	PERMIT HOLDER <b>QUICK SERVICE FOODS, INC.</b>

ITEM NO.	OBSERVATIONS AND CORRECTIVE ACTIONS	CORRECT BY DATE
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Violations cited in this report must be corrected within the time frames indicated, or as stated in Sections 8-405.11 and 8-406.11 of the Guam Food Code.

	TOMATOES, LETTUCE, AND BROCCOLI DID NOT MEET INTERNAL TEMPERATURE REQUIREMENT FOR COLD HOLDING. ALL PHE/TCS FOOD IN THE PREP TABLE CHILLER WERE DISCARDED.  PHE/TCS FOOD SHALL BE KEPT AT INTERNAL TEMPERATURE OF 41°F OR BELOW FOR COLD HOLDING TO LIMIT PATHOGEN GROWTH AND/OR TOXIN FORMATION.	
21	A BIG BUCKET OF CUT LETTUCE PREPARED YESTERDAY DID NOT HAVE DATE MARKING. HOLLANDAISE SAUCE MARKED FOR DISCARD YESTERDAY WAS FOUND IN THE WALK-IN CHILLER.  PHE/TCS FOOD KEPT IN REFRIGERATION FOR MORE THAN 24 HOURS SHALL BE PROPERLY DATE MARKED TO FACILITATE TIMELY DISPOSITION.  PICTURES OF VIOLATIONS WERE TAKEN.  RETRIEVED SANITARY PERMIT & "C" PLACARD NO. 00946.  SANITARY PERMIT IS HEREBY SUSPENDED DUE TO REPEAT VIOLATIONS OF ITEMS NO. 14, 19, AND 20.  SANITARY PERMIT SHALL BE RE-INSTATED AFTER ALL CITED VIOLATIONS HAVE BEEN CORRECTED AND A PAYMENT OF \$100.00 IS MADE TO THE DEPARTMENT OF PUBLIC HEALTH AND SOCIAL SERVICES.  ON FRONT WALL NEAR CASHIER POSTED "D" PLACARD NO. 00232 AND NOTICE OF CLOSURE PLACARD ON <del>FRONT</del> <sup>EXIT</sup> <del>CASHIER</del> BOTH ENTRANCE DOORS.  ISSUED NOTICE OF CLOSURE LETTER AND RE-INSPECTION REQUEST FORM.  DISCUSSED THIS REPORT WITH MANAGER, LAURIEJEAN RANCHES.	

Based on the inspection today, the items listed above identify violations which shall be corrected by the date specified by the Department. Failure to comply may result in the immediate suspension of the Sanitary Permit or downgrade. If seeking to appeal the result of any notice or inspection findings, a written request for hearing must be submitted to the Director within the period of time established in the notice for corrections.

Person in Charge (Print and Sign) 	Date: <b>3/6/18</b>
DEH Inspector (Print and Sign) <b>LEILANI NINARRO</b> 	Date: <b>03/06/18</b>



GOVERNMENT OF GUAM  
 DEPARTMENT OF PUBLIC HEALTH AND SOCIAL SERVICES  
 DIPATTAMENTON SALUT PUPBLEKO YAN SETBISION SUSIAT



EDDIE BAZA CALVO  
 GOVERNOR

JAMES W. GILLAN  
 DIRECTOR

RAY TENORIO  
 LIEUTENANT GOVERNOR

LEO G. CASIL  
 DEPUTY DIRECTOR

Date: 03/06/18

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
WENDY'S  
 Name of Establishment

As a result of this inspection your establishment received a:

LETTER OF WARNING

\_\_\_\_\_  
 (Demerit/Grade Points)

Once you have corrected all violations cited on your establishment's inspection report, you must provide us a written request for re-inspection to include a description of the corrective measures that you have implemented. If we do not receive a written re-inspection request from you, we will conduct a follow-up inspection after ten (10) calendar days from the official receipt of this notice to ensure that corrective measures have been taken.

Failure to correct violations may result in the closure of your establishment pursuant to section 21109(b) of 10GCA, Chapter 21.

NOTICE OF CLOSURE

24/0  
 (Demerit/Grade Points)

Once you have corrected all violations cited on your establishment's inspection report, you must provide us a written request for re-inspection to include a description of the corrective measures that you have implemented. Unlike an establishment who has received a letter of warning, an establishment shall remain closed unless a written request for re-inspection is made. Under 10 GCA Ch. 21 §21109(b), suspension without prior hearing may be imposed until the violation is corrected. You may also request a hearing to the Division of Environmental Health within five (5) calendar days of the date of this notice. When a hearing is requested following a suspension without prior hearing, it shall be discretionary with the Director as to whether the suspension shall be continued pending the hearing.

We look forward to working closely with you as partners in promoting health and sanitary practices on Guam. If you need further assistance, you can reach us at 735-7221 or (fax) 734-5556. Si Yu'us Ma'ase.

Sincerely,  
*Dylan Sawan*  
 for LEO G. CASIL  
 ACTING Director

Issued By: L. NINARRO  
 Name of EPHO

Received By: Laurie Jean Ranches 3/6/18  
 Establishment Representative