TENNESSEE DEPARTMENT OF HEALTH FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

E.				FOOD	SERVICE ESTA	BL	ISH	M	EN	T II	NSI	PEC	TIC	ON REPORT	SCO	DRE		
N.	1744	S. C.													1 (
Establishment Name West Elementary School Cafeteria						Tur	o of	Establi	ehmo	Farmer's Market Food Unit Ø Permanent O Mobile	10							
Addres	s			Hwy 70						1.33	AC UL	CSIGUI	511110	O Temporary O Seasonal				
City Mt Juliet Time in			09):5	3 A	١M	A	M/P	M Ti	ne o	ut 10:42: AM AM / PM							
Inspec	tion D	ate		03/23/2021 Esta	bishment # 60503015	5			Emba	argoe	d C)						
Purpos	e of I	nspec		KRoutine O Follow				- O Pr					Cor	nsultation/Other				
Risk Category O1 第2 O3						O 4						up Required O Yes 眞 No	Number of S	eats	20	1		
	Risk Factors are food preparation practices and employee as contributing factors in foodborne illness outbreak				beha s. P	vior	s mo : He	ist c aith	omn Inte	noni) rven	repo tions	are	to the Centers for Disease Contr control measures to prevent illne	ol and Prevent	tion			
					OODBORNE ILLNESS RI	SK F	ACTO	orts	AND	PU	BLIC	HEA	LTH	INTERVENTIONS				
IN=in	(C compi		nigna	OUT=not in compliance NA=no			ltema							ach item as applicable. Deduct points for c spection R=repeat (violation of the				
_	_	_		Compliance S	atus	cos	R		Ē	_				Compliance Status			R	WT
	out	NA	NO	Super Person in charge present, den				_		IN	OUT	NA	NO	Cooking and Reheating of Time/I Control For Safety (TCS) F				
1 8	0	NA.	NO	performs duties	e Health	0	0	5		12	00	0		Proper cooking time and temperatures Proper reheating procedures for hot hold	ng	0	8	5
23	0	-	1.10	Management and food employ	ee awareness; reporting	_	2	5	Ë	IN	ол		NO	Cooling and Holding, Date Marking	, and Time as			
3 🕅	0	NA.	NO	Proper use of restriction and e Good Hyglen		0	0	-	18	0	0	0		a Public Health Centre Proper cooling time and temperature	bl	0	0	
4 X	ি	-	0	Proper eating, tasting, drinking	, or tobacco use	0	8	5	19		°	0		Proper hot holding temperatures		0	ŝ	
IN	001		NO	No discharge from eyes, nose Preventing Centar	nination by Hands					1			0	Proper cold holding temperatures Proper date marking and disposition		8	ŏ	5
6 S	_	0	0	Hands clean and properly was No bare hand contact with rea		0	0	5	22	0	0	0	鼠	Time as a public health control: procedur	es and records	0	٥	
8 8		ľ		alternate procedures followed Handwashing sinks properly s	upplied and accessible		6	2	23	IN O	OUT	NA	NO	Consumer Advisory Consumer advisory provided for raw and	undercooked	0	0	
IN	00	NA	NO	Approved Food obtained from approved		0	0	_	-	IN	OUT		NO	food Highly Susceptible Popula	tions	-	9	•
10 C	0	0	8	Food received at proper temp Food in good condition, safe, a	erabure	0		5	24	_	0	88		Pasteurized foods used; prohibited foods		0	0	5
11 E	_	×	0	Required records available: sh		6	6	ľ	H	IN	OUT	NA	NO	Chemicals				
IN	001	NA	NO	Protection from					25	0	0	X		Food additives: approved and properly ut		0	0	5
13 🛒 14 📓			1	Food separated and protected Food-contact surfaces: cleane		8	8	4	26	<u>実</u> IN		NA	NO	Toxic substances properly identified, stor Conformance with Approved P		0	0	
15 🕅	_			Proper disposition of unsafe for served	od, returned food not re-	0	0	2	27	0	0	窝		Compliance with variance, specialized pr HACCP plan	ocess, and	0	0	5
	Good Retail Practices are preventive measures to control the introduction of pathogens, chemicals, and physical objects into foods.																	
			00	T+not in compliance	COS=com	icted o	n-site	during						R-repeat (violation of the sam	e code provision)	006		WT
	001	r]		Compliance St Safe Food and			R			0	UT			Compliance Status Utensils and Equipment		cos	ĸ	WT
28 29				ed eggs used where required lice from approved source		8	8	1 2	4	5				infood-contact surfaces cleanable, properl and used	ly designed,	0	0	1
30	0		ance	btained for specialized process Food Temperature		Ō	0	1	4	6	0 V	Varewa	ashin	g facilities, installed, maintained, used, te	st strips	0	0	1
31	0	Prop		oling methods used; adequate		0	0	2	4	_	_	Vonfoo	d-cor	ntact surfaces clean		0	0	1
32	0	cont Plan		properly cooked for hot holding	2	0	0	1	4		UT O	lot and	i cold	Physical Facilities water available; adequate pressure			0	2
33 34	_	<u> </u>		thawing methods used eters provided and accurate		0	0	1		_	_			stalled; proper backflow devices waste water properly disposed		0	0	2
- 34	001			Food Identifice	tion	Ľ		_		_	-			es: properly constructed, supplied, cleaned	8	ŏ	ŏ	1
35	0	Foo	d prop	erly labeled; original container;	required records available	0	0	1			-	-		use properly disposed; facilities maintaine	d	0	0	1
	001	_	ote es	Prevention of Feed Co				_	-	_	-			lities installed, maintained, and clean	and .	0	0	1
36	0	-		dents, and animals not present		0	0	2	F	-	-	vaequa	ne ve	ntilation and lighting; designated areas us	ed	0	0	1
37				ation prevented during food pre cleanliness	paration, storage & display	0	0	1	-		UT	Jumont	Dere	Administrative items nit posted		0	0	
39	Ó	Wip	ing ck	ths; properly used and stored		0	0							inspection posted		0	0	0
40	0		shing f	ruits and vegetables. Proper Use of U	ensils	0	0	1	H		_			Compliance Status Non-Smokers Protection /	let	YES	NO	WT
41	0	In-u		nsils; properly stored			8			7				with TN Non-Smoker Protection Act ducts offered for sale		X	읭	
43				0	0	1	5	* 9				oducts offered for sale oducts are sold, NSPA survey completed		0		ÿ		
44	-				- (40) days		0		a		dell're	and and a	مليورين	Dependent statistics of an interact state to an	man provide in some s	aler 1		-
service	establ	shme	nt per	nit. Items identified as constituting	imminent health hazards shall b	e corre	cted is	mmed	iately	or op	eratio	ns shall	ceas	Repeated violation of an identical risk factor e. You are required to post the food service e lling a written request with the Commissioner	stablishment permit	in a c	onspi	icuous
report.	T.C.A.	sectio	ins 68-	14-700 8-14-706, 68-14-708, 68-14-	709, 68-14-711, 68-14-715, 68-14-7	16, 4-5	320.				1	2	/	Lo	and to just a		- John D	
4	er	1. T.C.A. sections 68-14-70 P=14-708, 68-14-708, 68-14-709, 68-14-715, 68-14-716, 4-5-320. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2					021	L		l	¥	Ŧ _	ID	\mathcal{V}				

Signature of	Person	In Charge	

**** Additional food safety information can be found on our website, http://tn.gow/health/article/eh-foodservice ****

Free food safety training classes are available each month at the county health department. Please call () 6154445325 to sign-up for a class. PH-2267 (Rev. 6-15) RDA 629

TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



Establishment Information

Establishment Name: West Elementary School Cafeteria Establishment Number #: 605030155

ISPA Survey – To be completed if #57 is "No"	
ge-restricted venue does not affirmatively restrict access to its buildings or facilities at all times to persons who are wenty-one (21) years of age or older.	
ge-restricted venue does not require each person attempting to gain entry to submit acceptable form of identification.	
No Smoking' signs or the international "Non-Smoking' symbol are not conspicuously posted at every entrance.	
iarage type doors in non-enclosed areas are not completely open.	
ents or awnings with removable sides or vents in non-enclosed areas are not completely removed or open.	
moke from non-enclosed areas is infiltrating into areas where smoking is prohibited.	
moking observed where smoking is prohibited by the Act.	_

Warewashing Info			
Machine Name	Sanitizer Type	PPM	Temperature (Fahrenheit)
Bucket Dish machine	QA Heat	300	185

Equipment Temperature					
Description	Temperature (Fahrenheit)				
Wic	34				
Wif 1	3				
Wif 2	0				
Ric	38				

Food Temperature		
Decoription	State of Food	Temperature (Fahrenheit)
Mac and cheese line	Hot Holding	173
Mac and cheese warmer	Hot Holding	157
Hotdog	Cold Holding	41
Hotdog warmer	Hot Holding	157
Tater tots	Cooking	206

TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



Establishment Name: West Elementary School Cafeteria

Establishment Number : 605030155

Comments/Other Observations

- 1: (IN): ANSI Certified Manager present.
- 2: (IN): An employee health policy is available.
- 3: (IN) There are no food workers observed working with specific reportable symptoms or illnesses.
- 4: (IN) Employee isn't drinking, eating, or using tobacco in a food preparation area.
- 5: (IN) No employees exhibiting persistent coughing, sneezing, runny nose, or watery eyes.
- 6: Employees washing hands when changing gloves

7: (IN) Employees are observed using suitable utensils or gloves to prevent bare hand (or arm) contact with ready-to-eat foods.

8: (IN): All handsinks are properly equipped and conveniently located for food employee use.

9: See source info

- 10: (NO): No food received during inspection.
- 11: (IN) All food was in good, sound condition at time of inspection.
- 12: (NÁ) Shell stock not used and parasite destruction not required at this establishment.
- 13: (IN) All raw animal food is separated and protected as required.
- 14: (IN) All food contact surfaces of equipment and utensils cleaned and sanitized using approved methods.
- 15: (IN) No unsafe, returned or previously served food served.
- 16: See food temps
- 17: (NO) No TCS foods reheated during inspection.
- 18: (N.O.) No cooling of TCS foods during inspection.
- 19: See food temps
- 20: See food temps
- 21: (IN) Verified date marking system in place for all ready-to-eat TCS foods that are held longer than 24 hours.
- 22: (NO) Time as a public health control is not being used during the inspection.
- 23: (NA) Establishment does not serve animal food that is raw or undercooked.
- 24: (NA) A highly susceptible population is not served.
- 25: (NA) Establishment does not use any additives or sulfites on the premises.
- 26: (IN) All poisonous or toxic items are properly identified, stored, and used.
- 27: (NA) Establishment is not required to have a variance or HACCP plan, performs no special processes. 57:
- 58:

***See page at the end of this document for any violations that could not be displayed in this space.

Additional Comments See last page for additional comments.

**See page at the end of this document for any extra Additional Comments that could not be displayed in this space.



Establishment Information

Establishment Name: West Elementary School Cafeteria Establishment Number : 605030155

Comments/Other Observations (cont'd)

Additional Comments (cont'd) See last page for additional comments.

Establishment Information

Establishment Name: West Elementary School Cafeteria Establishment Number # 605030155

Food	Source:	IWC, Purity, TnT Produce
Water	Source:	City
	Source:	
	Source:	
	Source:	
		Water Source: Source: Source:

Additional Comments