



TENNESSEE DEPARTMENT OF HEALTH FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

SCORE

97

Establishment Name Cracker Barrel #2 Type of Establishment ☒ Permanent ☐ Mobile
 Address 635 S. Cumberland ☐ Temporary ☐ Seasonal
 City Lebanon Time in 01:48 PM AM / PM Time out 02:10 PM AM / PM
 Inspection Date 11/10/2022 Establishment # 605004249 Embargoed 0
 Purpose of Inspection ☐ Routine ☒ Follow-up ☐ Complaint ☐ Preliminary ☐ Consultation/Other
 Risk Category ☐ 1 ☒ 2 ☐ 3 ☐ 4 Follow-up Required ☐ Yes ☒ No Number of Seats 166

Risk Factors are food preparation practices and employee behaviors most commonly reported to the Centers for Disease Control and Prevention as contributing factors in foodborne illness outbreaks. Public Health interventions are control measures to prevent illness or injury.

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

(Mark designated compliance status (IN, OUT, NA, NO) for each numbered item. For items marked OUT, mark COS or R for each item as applicable. Deduct points for category or subcategory.)

IN=in compliance					OUT=not in compliance					NA=not applicable					NO=not observed					COS=corrected on-site during inspection					R=repeat (violation of the same code provision)				
Compliance Status										COS					R					WT									
	IN	OUT	NA	NO	Supervision																								
1	<input checked="" type="radio"/>	<input checked="" type="radio"/>			Person in charge present, demonstrates knowledge, and performs duties					<input checked="" type="radio"/>	<input checked="" type="radio"/>				5														
	IN	OUT	NA	NO	Employee Health																								
2	<input checked="" type="radio"/>	<input checked="" type="radio"/>			Management and food employee awareness, reporting					<input checked="" type="radio"/>	<input checked="" type="radio"/>				5														
3	<input checked="" type="radio"/>	<input checked="" type="radio"/>			Proper use of restriction and exclusion					<input checked="" type="radio"/>	<input checked="" type="radio"/>																		
	IN	OUT	NA	NO	Good Hygienic Practices																								
4	<input checked="" type="radio"/>	<input checked="" type="radio"/>		<input checked="" type="radio"/>	Proper eating, tasting, drinking, or tobacco use					<input checked="" type="radio"/>	<input checked="" type="radio"/>				5														
5	<input checked="" type="radio"/>	<input checked="" type="radio"/>		<input checked="" type="radio"/>	No discharge from eyes, nose, and mouth					<input checked="" type="radio"/>	<input checked="" type="radio"/>																		
	IN	OUT	NA	NO	Preventing Contamination by Hands																								
6	<input checked="" type="radio"/>	<input checked="" type="radio"/>		<input checked="" type="radio"/>	Hands clean and properly washed					<input checked="" type="radio"/>	<input checked="" type="radio"/>				5														
7	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	No bare hand contact with ready-to-eat foods or approved alternate procedures followed					<input checked="" type="radio"/>	<input checked="" type="radio"/>																		
8	<input checked="" type="radio"/>	<input checked="" type="radio"/>			Handwashing sinks properly supplied and accessible					<input checked="" type="radio"/>	<input checked="" type="radio"/>				2														
	IN	OUT	NA	NO	Approved Source																								
9	<input checked="" type="radio"/>	<input checked="" type="radio"/>			Food obtained from approved source					<input checked="" type="radio"/>	<input checked="" type="radio"/>				5														
10	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	Food received at proper temperature					<input checked="" type="radio"/>	<input checked="" type="radio"/>																		
11	<input checked="" type="radio"/>	<input checked="" type="radio"/>			Food in good condition, safe, and unadulterated					<input checked="" type="radio"/>	<input checked="" type="radio"/>																		
12	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	Required records available: shell stock tags, parasite destruction					<input checked="" type="radio"/>	<input checked="" type="radio"/>																		
	IN	OUT	NA	NO	Protection from Contamination																								
13	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>		Food separated and protected					<input checked="" type="radio"/>	<input checked="" type="radio"/>				4														
14	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>		Food-contact surfaces: cleaned and sanitized					<input checked="" type="radio"/>	<input checked="" type="radio"/>				5														
15	<input checked="" type="radio"/>	<input checked="" type="radio"/>			Proper disposition of unsafe food, returned food not re-served					<input checked="" type="radio"/>	<input checked="" type="radio"/>				2														

Compliance Status										COS					R					WT				
	IN	OUT	NA	NO	Cooking and Reheating of Time/Temperature Control For Safety (TCS) Foods																			
16	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	Proper cooking time and temperatures					<input checked="" type="radio"/>	<input checked="" type="radio"/>				5									
17	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	Proper reheating procedures for hot holding					<input checked="" type="radio"/>	<input checked="" type="radio"/>													
	IN	OUT	NA	NO	Cooling and Holding, Date Marking, and Time as a Public Health Control																			
18	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	Proper cooling time and temperature					<input checked="" type="radio"/>	<input checked="" type="radio"/>				5									
19	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	Proper hot holding temperatures					<input checked="" type="radio"/>	<input checked="" type="radio"/>													
20	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>		Proper cold holding temperatures					<input checked="" type="radio"/>	<input checked="" type="radio"/>													
21	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	Proper date marking and disposition					<input checked="" type="radio"/>	<input checked="" type="radio"/>													
22	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	Time as a public health control: procedures and records					<input checked="" type="radio"/>	<input checked="" type="radio"/>													
	IN	OUT	NA	NO	Consumer Advisory																			
23	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>		Consumer advisory provided for raw and undercooked food					<input checked="" type="radio"/>	<input checked="" type="radio"/>				4									
	IN	OUT	NA	NO	Highly Susceptible Populations																			
24	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>		Pasteurized foods used; prohibited foods not offered					<input checked="" type="radio"/>	<input checked="" type="radio"/>				5									
	IN	OUT	NA	NO	Chemicals																			
25	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>		Food additives: approved and properly used					<input checked="" type="radio"/>	<input checked="" type="radio"/>				5									
26	<input checked="" type="radio"/>	<input checked="" type="radio"/>			Toxic substances properly identified, stored, used					<input checked="" type="radio"/>	<input checked="" type="radio"/>													
	IN	OUT	NA	NO	Conformance with Approved Procedures																			
27	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>		Compliance with variance, specialized process, and HACCP plan					<input checked="" type="radio"/>	<input checked="" type="radio"/>				5									

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

GOOD RETAIL PRACTICES

OUT=not in compliance					COS=corrected on-site during inspection					R=repeat (violation of the same code provision)					
Compliance Status					COS	R	WT	Compliance Status					COS	R	WT
	OUT	Safe Food and Water							OUT	Utensils and Equipment					
28	<input type="radio"/>	Pasteurized eggs used where required			<input type="radio"/>	<input type="radio"/>	1	45	<input checked="" type="radio"/>	Food and nonfood-contact surfaces cleanable, properly designed, constructed, and used			<input type="radio"/>	<input type="radio"/>	1
29	<input type="radio"/>	Water and ice from approved source			<input type="radio"/>	<input type="radio"/>	2	46	<input type="radio"/>	Warewashing facilities, installed, maintained, used, test strips			<input type="radio"/>	<input type="radio"/>	1
30	<input type="radio"/>	Variance obtained for specialized processing methods			<input type="radio"/>	<input type="radio"/>	1	47	<input type="radio"/>	Nonfood-contact surfaces clean			<input type="radio"/>	<input type="radio"/>	1
	OUT	Food Temperature Control							OUT	Physical Facilities					
31	<input type="radio"/>	Proper cooling methods used; adequate equipment for temperature control			<input type="radio"/>	<input type="radio"/>	2	48	<input type="radio"/>	Hot and cold water available; adequate pressure			<input type="radio"/>	<input type="radio"/>	2
32	<input type="radio"/>	Plant food properly cooked for hot holding			<input type="radio"/>	<input type="radio"/>	1	49	<input type="radio"/>	Plumbing installed; proper backflow devices			<input type="radio"/>	<input type="radio"/>	2
33	<input type="radio"/>	Approved thawing methods used			<input type="radio"/>	<input type="radio"/>	1	50	<input type="radio"/>	Sewage and waste water properly disposed			<input type="radio"/>	<input type="radio"/>	2
34	<input checked="" type="radio"/>	Thermometers provided and accurate			<input type="radio"/>	<input type="radio"/>	1	51	<input type="radio"/>	Toilet facilities: properly constructed, supplied, cleaned			<input type="radio"/>	<input type="radio"/>	1
	OUT	Food Identification						52	<input type="radio"/>	Garbage/refuse properly disposed; facilities maintained			<input type="radio"/>	<input type="radio"/>	1
35	<input type="radio"/>	Food properly labeled; original container; required records available			<input type="radio"/>	<input type="radio"/>	1	53	<input type="radio"/>	Physical facilities installed, maintained, and clean			<input type="radio"/>	<input type="radio"/>	1
	OUT	Prevention of Food Contamination						54	<input type="radio"/>	Adequate ventilation and lighting; designated areas used			<input type="radio"/>	<input type="radio"/>	1
36	<input type="radio"/>	Insects, rodents, and animals not present			<input type="radio"/>	<input type="radio"/>	2		OUT	Administrative Items					
37	<input type="radio"/>	Contamination prevented during food preparation, storage & display			<input type="radio"/>	<input type="radio"/>	1	55	<input type="radio"/>	Current permit posted			<input type="radio"/>	<input type="radio"/>	0
38	<input type="radio"/>	Personal cleanliness			<input type="radio"/>	<input type="radio"/>	1	56	<input type="radio"/>	Most recent inspection posted			<input type="radio"/>	<input type="radio"/>	
39	<input type="radio"/>	Wiping cloths: properly used and stored			<input type="radio"/>	<input type="radio"/>	1	Compliance Status					YES	NO	WT
40	<input type="radio"/>	Washing fruits and vegetables			<input type="radio"/>	<input type="radio"/>	1	Non-Smokers Protection Act							
	OUT	Proper Use of Utensils						57		Compliance with TN Non-Smoker Protection Act			<input checked="" type="radio"/>	<input type="radio"/>	
41	<input type="radio"/>	In-use utensils; properly stored			<input type="radio"/>	<input type="radio"/>	1	58		Tobacco products offered for sale			<input type="radio"/>	<input type="radio"/>	0
42	<input checked="" type="radio"/>	Utensils, equipment and linens; properly stored, dried, handled			<input type="radio"/>	<input type="radio"/>	1	59		If tobacco products are sold, NSPA survey completed			<input type="radio"/>	<input type="radio"/>	
43	<input type="radio"/>	Single-use/single-service articles; properly stored, used			<input type="radio"/>	<input type="radio"/>	1								
44	<input type="radio"/>	Gloves used properly			<input type="radio"/>	<input type="radio"/>	1								

Failure to correct any violations of risk factor items within ten (10) days may result in suspension of your food service establishment permit. Repeated violation of an identical risk factor may result in revocation of your food service establishment permit. Items identified as constituting imminent health hazards shall be corrected immediately or operations shall cease. You are required to post the food service establishment permit in a conspicuous manner and post the most recent inspection report in a conspicuous manner. You have the right to request a hearing regarding this report by filing a written request with the Commissioner within ten (10) days of the date of this report. T.C.A. sections 68-14-703, 68-14-706, 68-14-708, 68-14-709, 68-14-711, 68-14-715, 68-14-716, 4-5-329.

Signature of Person In Charge [Signature] Date 11/10/2022 Signature of Environmental Health Specialist [Signature] Date 11/10/2022

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

Establishment Number #: 605004249

Smoking observed where smoking is prohibited by the Act.

Temperature (Fahrenheit)

Temperature (Fahrenheit)

Temperature (Fahrenheit)

42

40

41

40

42

40

38

41

Observed Violations**Total #** 3**Repeated #** 0

34:

42:

45:

TENNESSEE DEPARTMENT OF HEALTH
DIVISION OF ENVIRONMENTAL HEALTH
FOOD INSPECTION DATA



Establishment Information

Establishment Name: Cracker Barrel #2

Establishment Number : 605004249

Comments/Other Observations

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: Cracker Barrel #2

Establishment Number : 605004249

Comments/Other Observations (cont'd)**Additional Comments (cont'd)**

See last page for additional comments.

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Sources

Source Type: Source:

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Additional Comments

Priority violation corrected at time of follow up. Back grill RIC that holds raw meats is not repaired at this time but establishment is not using the grill RIC to store raw meats. Meats are stored in front grill RIC until repairs are complete.