

**TENNESSEE DEPARTMENT OF HEALTH**  
**FOOD SERVICE ESTABLISHMENT INSPECTION REPORT**

**SCORE**

84

Establishment Name	Don Arturo's Mexican Grill		Type of Establishment	<input checked="" type="radio"/> Permanent <input type="radio"/> Mobile
Address	4910 Main Street			<input type="radio"/> Temporary <input type="radio"/> Seasonal
City	Spring Hill	Time in	01:23 PM	AM / PM
		Time out	03:08 PM	AM / PM
Inspection Date	03/30/2023	Establishment #	605227911	Embargoed 6
Purpose of Inspection	<input checked="" type="radio"/> Routine <input type="radio"/> Follow-up <input type="radio"/> Complaint <input type="radio"/> Preliminary <input type="radio"/> Consultation/Other			
Risk Category	<input type="radio"/> 1 <input checked="" type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 Follow-up Required <input checked="" type="radio"/> Yes <input type="radio"/> No			
			Number of Seats	190

**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 COB 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="checkbox"/>	<input type="checkbox"/>			Person in charge present, demonstrates knowledge, and performs duties			<input type="checkbox"/>	<input type="checkbox"/>	5	
	IN	OUT	NA	NO	Employee Health						
2	<input checked="" type="checkbox"/>	<input type="checkbox"/>			Management and food employee awareness, reporting			<input type="checkbox"/>	<input type="checkbox"/>	5	
3	<input checked="" type="checkbox"/>	<input type="checkbox"/>			Proper use of restriction and exclusion			<input type="checkbox"/>	<input type="checkbox"/>		
	IN	OUT	NA	NO	Good Hygienic Practices						
4	<input checked="" type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	Proper eating, tasting, drinking, or tobacco use			<input type="checkbox"/>	<input type="checkbox"/>	5	
5	<input checked="" type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	No discharge from eyes, nose, and mouth			<input type="checkbox"/>	<input type="checkbox"/>		
	IN	OUT	NA	NO	Preventing Contamination by Hands						
6	<input checked="" type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	Hands clean and properly washed			<input type="checkbox"/>	<input type="checkbox"/>	5	
7	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	No bare hand contact with ready-to-eat foods or approved alternate procedures followed			<input type="checkbox"/>	<input type="checkbox"/>		
8	<input type="checkbox"/>	<input checked="" type="checkbox"/>			Handwashing sinks properly supplied and accessible			<input type="checkbox"/>	<input type="checkbox"/>	2	
	IN	OUT	NA	NO	Approved Source						
9	<input checked="" type="checkbox"/>	<input type="checkbox"/>			Food obtained from approved source			<input type="checkbox"/>	<input type="checkbox"/>	5	
10	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Food received at proper temperature			<input type="checkbox"/>	<input type="checkbox"/>		
11	<input type="checkbox"/>	<input checked="" type="checkbox"/>			Food in good condition, safe, and unadulterated			<input type="checkbox"/>	<input type="checkbox"/>		
12	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Required records available: shell stock tags, parasite destruction			<input type="checkbox"/>	<input type="checkbox"/>		
	IN	OUT	NA	NO	Protection from Contamination						
13	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		Food separated and protected			<input type="checkbox"/>	<input type="checkbox"/>	4	
14	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		Food-contact surfaces: cleaned and sanitized			<input type="checkbox"/>	<input type="checkbox"/>	5	
15	<input checked="" type="checkbox"/>	<input type="checkbox"/>			Proper disposition of unsafe food, returned food not re-served			<input type="checkbox"/>	<input type="checkbox"/>	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="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper cooking time and temperatures			<input type="checkbox"/>	<input type="checkbox"/>	5
17	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper reheating procedures for hot holding			<input type="checkbox"/>	<input type="checkbox"/>	
	IN	OUT	NA	NO	Cooling and Holding, Date Marking, and Time as a Public Health Control					
18	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper cooling time and temperature			<input type="checkbox"/>	<input type="checkbox"/>	5
19	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper hot holding temperatures			<input type="checkbox"/>	<input type="checkbox"/>	
20	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		Proper cold holding temperatures			<input type="checkbox"/>	<input type="checkbox"/>	
21	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper date marking and disposition			<input type="checkbox"/>	<input type="checkbox"/>	
22	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Time as a public health control: procedures and records			<input type="checkbox"/>	<input type="checkbox"/>	
	IN	OUT	NA	NO	Consumer Advisory					
23	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>		Consumer advisory provided for raw and undercooked food			<input type="checkbox"/>	<input type="checkbox"/>	4
	IN	OUT	NA	NO	Highly Susceptible Populations					
24	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		Pasteurized foods used; prohibited foods not offered			<input type="checkbox"/>	<input type="checkbox"/>	5
	IN	OUT	NA	NO	Chemicals					
25	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		Food additives: approved and properly used			<input type="checkbox"/>	<input type="checkbox"/>	5
26	<input checked="" type="checkbox"/>	<input type="checkbox"/>			Toxic substances properly identified, stored, used			<input type="checkbox"/>	<input type="checkbox"/>	
	IN	OUT	NA	NO	Conformance with Approved Procedures					
27	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		Compliance with variance, specialized process, and HACCP plan			<input type="checkbox"/>	<input type="checkbox"/>	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
	OUT	<b>Safe Food and Water</b>					
28	<input type="radio"/>	Pasteurized eggs used where required			<input type="radio"/>	<input type="radio"/>	1
29	<input type="radio"/>	Water and ice from approved source			<input type="radio"/>	<input type="radio"/>	2
30	<input type="radio"/>	Variance obtained for specialized processing methods			<input type="radio"/>	<input type="radio"/>	1
	OUT	<b>Food Temperature Control</b>					
31	<input type="radio"/>	Proper cooling methods used; adequate equipment for temperature control			<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
33	<input type="radio"/>	Approved thawing methods used			<input type="radio"/>	<input type="radio"/>	1
34	<input type="radio"/>	Thermometers provided and accurate			<input type="radio"/>	<input type="radio"/>	1
	OUT	<b>Food Identification</b>					
35	<input checked="" type="radio"/>	Food properly labeled; original container; required records available			<input type="radio"/>	<input type="radio"/>	1
	OUT	<b>Prevention of Food Contamination</b>					
36	<input type="radio"/>	Insects, rodents, and animals not present			<input type="radio"/>	<input type="radio"/>	2
37	<input checked="" type="radio"/>	Contamination prevented during food preparation, storage & display			<input type="radio"/>	<input type="radio"/>	1
38	<input type="radio"/>	Personal cleanliness			<input type="radio"/>	<input type="radio"/>	1
39	<input checked="" type="radio"/>	Wiping cloths: properly used and stored			<input type="radio"/>	<input type="radio"/>	1
40	<input type="radio"/>	Washing fruits and vegetables			<input type="radio"/>	<input type="radio"/>	1
	OUT	<b>Proper Use of Utensils</b>					
41	<input type="radio"/>	In-use utensils; properly stored			<input type="radio"/>	<input type="radio"/>	1
42	<input type="radio"/>	Utensils, equipment and linens; properly stored, dried, handled			<input type="radio"/>	<input type="radio"/>	1
43	<input checked="" 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

OUT		Compliance Status			COS	R	WT
	OUT	<b>Utensils and Equipment</b>					
45	<input checked="" type="radio"/>	Food and nonfood-contact surfaces cleanable, properly designed, constructed, and used			<input type="radio"/>	<input type="radio"/>	1
46	<input type="radio"/>	Warewashing facilities, installed, maintained, used, test strips			<input type="radio"/>	<input type="radio"/>	1
47	<input type="radio"/>	Nonfood-contact surfaces clean			<input type="radio"/>	<input type="radio"/>	1
	OUT	<b>Physical Facilities</b>					
48	<input type="radio"/>	Hot and cold water available; adequate pressure			<input type="radio"/>	<input type="radio"/>	2
49	<input type="radio"/>	Plumbing installed; proper backflow devices			<input type="radio"/>	<input type="radio"/>	2
50	<input type="radio"/>	Sewage and waste water properly disposed			<input type="radio"/>	<input type="radio"/>	2
51	<input type="radio"/>	Toilet facilities: properly constructed, supplied, cleaned			<input type="radio"/>	<input type="radio"/>	1
52	<input type="radio"/>	Garbage/refuse properly disposed; facilities maintained			<input type="radio"/>	<input type="radio"/>	1
53	<input type="radio"/>	Physical facilities installed, maintained, and clean			<input type="radio"/>	<input type="radio"/>	1
54	<input type="radio"/>	Adequate ventilation and lighting; designated areas used			<input type="radio"/>	<input type="radio"/>	1
	OUT	<b>Administrative Items</b>					
55	<input checked="" type="radio"/>	Current permit posted			<input type="radio"/>	<input type="radio"/>	0
56	<input checked="" type="radio"/>	Most recent inspection posted			<input type="radio"/>	<input type="radio"/>	0
		<b>Compliance Status</b>			YES	NO	WT
		<b>Non-Smokers Protection Act</b>					
57		Compliance with TN Non-Smoker Protection Act			<input checked="" type="radio"/>	<input type="radio"/>	0
58		Tobacco products offered for sale			<input type="radio"/>	<input type="radio"/>	0
59		If tobacco products are sold, NSPA survey completed			<input type="radio"/>	<input type="radio"/>	0

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, 4-5-320.

 _____ Signature of Person in Charge	03/30/2023 _____ Date	 _____ Signature of Environmental Health Specialist	03/30/2023 _____ Date
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\*\*\*\* Additional food safety information can be found on our website. <http://tn.gov/health/article/eh-foodservice> \*\*\*\*

**TENNESSEE DEPARTMENT OF HEALTH  
DIVISION OF ENVIRONMENTAL HEALTH  
FOOD INSPECTION DATA**



<b>Establishment Information</b>	
Establishment Name:	Don Arturo's Mexican Grill
Establishment Number #:	605227911

<b>NSPA Survey – To be completed if #57 is "No"</b>	
Age-restricted venue does not affirmatively restrict access to its buildings or facilities at all times to persons who are twenty-one (21) years of age or older.	
Age-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.	
Garage type doors in non-enclosed areas are not completely open.	
Tents or awnings with removable sides or vents in non-enclosed areas are not completely removed or open.	
Smoke from non-enclosed areas is infiltrating into areas where smoking is prohibited.	
Smoking observed where smoking is prohibited by the Act.	

<b>Warewashing Info</b>			
<b>Machine Name</b>	<b>Sanitizer Type</b>	<b>PPM</b>	<b>Temperature ( Fahrenheit)</b>
Dish washer	Chlorine	50	

<b>Equipment Temperature</b>	
<b>Description</b>	<b>Temperature ( Fahrenheit)</b>
Wic Back portion	38
Wic front portion	40
Rif	2

<b>Food Temperature</b>		
<b>Description</b>	<b>State of Food</b>	<b>Temperature ( Fahrenheit)</b>
Cut tomatoes make line	Cold Holding	40
Cut bell pepper make line	Cold Holding	41
Raw filet fis make line	Cold Holding	41
Sliced onions make line	Cold Holding	41
Rice make line	Hot Holding	135
Refried beans make line	Hot Holding	165
Diced tomatoes make line	Cold Holding	41
Diced onions make line	Cold Holding	41
Pico make line	Cold Holding	40
Guacomole make line	Cold Holding	40
Shaded chicken make line	Hot Holding	167
Ground beef make line	Hot Holding	170
Black bean make line	Hot Holding	152
Ground beef	Cooking	210
Refried beans	Reheating	175

### Observed Violations

Total # 10

Repeated # 0

- 8: Hand washing sink had hand gel container and paper and wash cloth
- 11: Dented can of whole green tomatos 6 lbs
- 23: Consumer advisory is at the bottom of each page of the menu with an astric; however, there is no specific food with an astric that is noted that can be ordered and consumed under cooked
- 35: 2 container under food prep table not labeled
- 37: Dog in the inclosed portion of the front of the facility
- 39: Wiping cloth on food prep area and wiping cloth under cutting board
- 43: A bowl was in the rice container being used as a scoop
- 45: Chest freezer lid in poor repair, did not see debris or insulation come in contact with food. Gasket on ric under make line was in the process of coming off needs repair to maintain temp of ric
- 55: Permit not posted
- 56: Inspection from January 2022 posted, old inspection report

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**Establishment Information**

Establishment Name: Don Arturo's Mexican Grill

Establishment Number : 605227911

**Comments/Other Observations**

- 1: (IN): PIC demonstrates knowledge by correctly answering questions regarding principles applicable to the food operation.
- 2: Management aware of illness policy and aware of symptoms
- 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 washed hands when needed
- 7: (IN) Employees are observed using suitable utensils or gloves to prevent bare hand (or arm) contact with ready-to-eat foods.
- 9: Food iwc, hasley
- 10: (NO): No food received during inspection.
- 12: (NA) 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: Proper cooking temps were observed cooking of ground beef at 210
- 17: (IN) All TCS foods are properly reheated for hot holding.
- 18: There was no cooling of food at the time of inspection. Cooling does occur at the facility. Informed pic of the proper cooling methods. Stated cooling starts at 135 and one has 2 hrs to cool the food down to 70. Then one has 4 hrs to cool the food down to 41. Stated it is better to cool food in smaller portions than in one big batch. Informed pic a good technique would be to use cooled metal pans/bowls and place the pans/bowls in ice bath or use ice bags or ice wands
- 19: Proper hot holding temps observed
- 20: Proper cold holding temps observed
- 21: (IN) Verified date marking system in place for all ready-to-eat TCS foods that are held longer than 24 hours.
- 22: (NA) No food held under time as a public health control.
- 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**

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Establishment Number : 605227911

**Comments/Other Observations (cont'd)****Additional Comments (cont'd)*****See last page for additional comments.***

**Establishment Information**

Establishment Name: Don Arturo's Mexican Grill

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**Sources**

Source Type:	Water	Source:	Spring hill
Source Type:	Food	Source:	Iwc, hasley
Source Type:		Source:	
Source Type:		Source:	
Source Type:		Source:	

**Additional Comments**

Brian murillo  
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