

TENNESSEE DEPARTMENT OF HEALTH
FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

SCORE

100

Establishment Name	<u>Jersey Mike's Subs</u>			Type of Establishment	☒ Farmer's Market Food Unit	☐ Permanent	☐ Mobile	
Address	<u>1202 S. James Campbell Blvd.</u>				☐ Temporary	☐ Seasonal	100	
City	<u>Columbia</u>	Time in	<u>10:47</u> : <u>AM</u>	AM / PM	Time out	<u>11:22</u> : <u>AM</u>		AM / PM
Inspection Date	<u>05/25/2022</u>	Establishment #	<u>605247262</u>	Embargoed	<u>0</u>			
Purpose of Inspection	☒ Routine	☐ Follow-up	☐ Complaint	☐ Preliminary	☐ Consultation/Other _____			
Risk Category	☐ 1	☒ 2	☐ 3	☐ 4	Follow-up Required	☐ Yes	☒ No	
							Number of Seats <u>42</u>	

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 (IK, 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	☒	☐			Person in charge present, demonstrates knowledge, and performs duties			☐	☐	5			
	IN	OUT	NA	NO	Employee Health								
2	☒	☐			Management and food employee awareness, reporting			☐	☐	5			
3	☒	☐			Proper use of restriction and exclusion			☐	☐				
	IN	OUT	NA	NO	Good Hygienic Practices								
4	☒	☐		☐	Proper eating, tasting, drinking, or tobacco use			☐	☐	5			
5	☒	☐		☐	No discharge from eyes, nose, and mouth			☐	☐				
	IN	OUT	NA	NO	Preventing Contamination by Hands								
6	☒	☐		☐	Hands clean and properly washed			☐	☐	5			
7	☒	☐	☐	☐	No bare hand contact with ready-to-eat foods or approved alternate procedures followed			☐	☐				
8	☒	☐			Handwashing sinks properly supplied and accessible			☐	☐	2			
	IN	OUT	NA	NO	Approved Source								
9	☒	☐			Food obtained from approved source			☐	☐	5			
10	☐	☐	☐	☒	Food received at proper temperature			☐	☐				
11	☒	☐			Food in good condition, safe, and unadulterated			☐	☐				
12	☐	☐	☒	☐	Required records available: shell stock tags, parasite destruction			☐	☐				
	IN	OUT	NA	NO	Protection from Contamination								
13	☒	☐	☐		Food separated and protected			☐	☐	4			
14	☒	☐	☐		Food-contact surfaces: cleaned and sanitized			☐	☐	5			
15	☒	☐			Proper disposition of unsafe food, returned food not re-served			☐	☐	2			

Compliance Status								COS	R	WT
	IN	OUT	NA	NO	Cooking and Reheating of Time/Temperature Control For Safety (TCS) Foods					
16	☐	☐	☐	☒	Proper cooking time and temperatures			☐	☐	5
17	☐	☐	☐	☒	Proper reheating procedures for hot holding			☐	☐	
	IN	OUT	NA	NO	Cooling and Holding, Date Marking, and Time as a Public Health Control					
18	☐	☐	☐	☒	Proper cooling time and temperature			☐	☐	5
19	☐	☐	☒	☐	Proper hot holding temperatures			☐	☐	
20	☒	☐	☐		Proper cold holding temperatures			☐	☐	
21	☒	☐	☐	☐	Proper date marking and disposition			☐	☐	
22	☐	☐	☒	☐	Time as a public health control: procedures and records			☐	☐	
	IN	OUT	NA	NO	Consumer Advisory					
23	☐	☐	☒		Consumer advisory provided for raw and undercooked food			☐	☐	4
	IN	OUT	NA	NO	Highly Susceptible Populations					
24	☐	☐	☒		Pasteurized foods used; prohibited foods not offered			☐	☐	5
	IN	OUT	NA	NO	Chemicals					
25	☐	☐	☒		Food additives: approved and properly used			☐	☐	5
26	☒	☐			Toxic substances properly identified, stored, used			☐	☐	
	IN	OUT	NA	NO	Conformance with Approved Procedures					
27	☐	☐	☒		Compliance with variance, specialized process, and HACCP plan			☐	☐	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	☐	Pasteurized eggs used where required				☐	☐	1		45	☐	Food and nonfood-contact surfaces cleanable, properly designed, constructed, and used				☐	☐	1		
29	☐	Water and ice from approved source				☐	☐	2		46	☐	Warewashing facilities, installed, maintained, used, test strips				☐	☐	1		
30	☐	Variance obtained for specialized processing methods				☐	☐	1		47	☐	Nonfood-contact surfaces clean				☐	☐	1		
	OUT	Food Temperature Control								OUT	Physical Facilities									
31	☐	Proper cooling methods used; adequate equipment for temperature control				☐	☐	2		48	☐	Hot and cold water available; adequate pressure				☐	☐	2		
32	☐	Plant food properly cooked for hot holding				☐	☐	1		49	☐	Plumbing installed; proper backflow devices				☐	☐	2		
33	☐	Approved thawing methods used				☐	☐	1		50	☐	Sewage and waste water properly disposed				☐	☐	2		
34	☐	Thermometers provided and accurate				☐	☐	1		51	☐	Toilet facilities: properly constructed, supplied, cleaned				☐	☐	1		
	OUT	Food Identification								OUT	Administrative Items									
35	☐	Food properly labeled; original container; required records available				☐	☐	1		55	☐	Current permit posted				☐	☐	0		
	OUT	Prevention of Food Contamination								56	☐	Most recent inspection posted				☐	☐			
36	☐	Insects, rodents, and animals not present				☐	☐	2		Compliance Status						YES	NO	WT		
37	☐	Contamination prevented during food preparation, storage & display				☐	☐	1		Non-Smokers Protection Act										
38	☐	Personal cleanliness				☐	☐	1		57	☐	Compliance with TN Non-Smoker Protection Act				☒	☐			
39	☐	Wiping cloths, properly used and stored				☐	☐	1		58	☐	Tobacco products offered for sale				☐	☐	0		
40	☐	Washing fruits and vegetables				☐	☐	1		59	☐	If tobacco products are sold, NSPA survey completed				☐	☐			
	OUT	Proper Use of Utensils																		
41	☐	In-use utensils; properly stored				☐	☐	1												
42	☐	Utensils, equipment and linens; properly stored, dried, handled				☐	☐	1												
43	☐	Single-use/single-service articles; properly stored, used				☐	☐	1												
44	☐	Gloves used properly				☐	☐	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. §§ 68-14-703, 68-14-706, 68-14-708, 68-14-709, 68-14-711, 68-14-715, 68-14-716, 4-5-320.

	05/25/2022		05/25/2022
Signature of Person In Charge	Date	Signature of Environmental Health Specialist	Date

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

Establishment Number #: 605247262

Smoking observed where smoking is prohibited by the Act.

Machine Name	Sanitizer Type	PPM	Temperature (Fahrenheit)
3 comp sink	Quat	400	

Description	Temperature (Fahrenheit)
Meat cooler	35
RIF	11
WIC	39

Description	State of Food	Temperature (Fahrenheit)
Shredded steak (grill prep)	Cold Holding	33
Ham (meat cooler)	Cold Holding	39
Diced tomatoes (prep line)	Cold Holding	40
Turkey (WIC)	Cold Holding	40

TENNESSEE DEPARTMENT OF HEALTH
DIVISION OF ENVIRONMENTAL HEALTH
FOOD INSPECTION DATA



Establishment Information

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Establishment Number : 605247262

Comments/Other Observations

- 1: (IN): PIC demonstrates knowledge by correctly answering questions regarding principles applicable to the food operation.
- 2:
- 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 as needed
- 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
- 10: (NO): No food received during inspection.
- 11: (IN) All food was in good, sound condition at time of 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: (NO) No raw animal foods cooked during inspection.
- 17: (NO) No TCS foods reheated during inspection.
- 18: (N.O.) No cooling of TCS foods during inspection.
- 19: (NA) Establishment does not hot hold TCS foods.
- 20: See temps
- 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.
- 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.

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

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Sources

Source Type:	Food	Source:	Sysco
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Source Type:	Water	Source:	City
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Source Type: _____ Source: _____

Source Type:	Source:
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Source Type:	Source:
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Additional Comments