# TENNESSEE DEPARTMENT OF HEALTH
# FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

**SCORE**

**85**

Establishment Name: Tasty and Delicious MT#676

Type of Establishment: O Farmer's Market Food Unit; ☒ Permanent; O Mobile; O Temporary; O Seasonal

Address: 3716 NOLENSVILLE PIKE STE D

City: Nashville  Time in: 11:10 AM  Time out: 11:40 AM

Inspection Date: 04/20/2023  Establishment #: 605305132  Embargoed: 2

Purpose of Inspection: ☒ Routine; O Follow-up; O Complaint; O Preliminary; O Consultation/Other

Risk Category: O 1; ☒ 2; O 3; O 4  Follow-up Required: ☒ Yes; O No  Number of Seats

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

| | Compliance Status | | | | | COS | R | WT |
|---|---|---|---|---|---|---|---|---|
| | IN | OUT | NA | NO | **Cooking and Reheating of Time/Temperature Control For Safety (TCS) Foods** | | | |
| 16 | ☒ | O | O | O | Proper cooking time and temperatures | O | O | 5 |
| 17 | O | O | ☒ | O | Proper reheating procedures for hot holding | O | O | |
| | IN | OUT | NA | NO | **Cooling and Holding, Date Marking, and Time as a Public Health Control** | | | |
| 18 | O | O | ☒ | O | Proper cooling time and temperature | O | O | 5 |
| 19 | O | O | ☒ | O | Proper hot holding temperatures | O | O | |
| 20 | O | ☒ | O | | Proper cold holding temperatures | O | O | |
| 21 | O | O | O | ☒ | Proper date marking and disposition | O | O | |
| 22 | O | O | ☒ | O | Time as a public health control: procedures and records | O | O | |
| | IN | OUT | NA | NO | **Consumer Advisory** | | | |
| 23 | O | O | ☒ | | Consumer advisory provided for raw and undercooked food | O | O | 4 |
| | IN | OUT | NA | NO | **Highly Susceptible Populations** | | | |
| 24 | O | O | ☒ | | Pasteurized foods used; prohibited foods not offered | O | O | 5 |
| | IN | OUT | NA | NO | **Chemicals** | | | |
| 25 | O | O | ☒ | | Food additives: approved and properly used | O | O | 5 |
| 26 | ☒ | O | | | Toxic substances properly identified, stored, used | O | O | |
| | IN | OUT | NA | NO | **Conformance with Approved Procedures** | | | |
| 27 | O | O | ☒ | | Compliance with variance, specialized process, and HACCP plan | O | O | 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 | **Safe Food and Water** | | | |
| 28 | O | Pasteurized eggs used where required | O | O | 1 |
| 29 | O | Water and ice from approved source | O | O | 2 |
| 30 | O | Variance obtained for specialized processing methods | O | O | 1 |
| | OUT | **Food Temperature Control** | | | |
| 31 | O | Proper cooling methods used; adequate equipment for temperature control | O | O | 2 |
| 32 | O | Plant food properly cooked for hot holding | O | O | 1 |
| 33 | O | Approved thawing methods used | O | O | 1 |
| 34 | ☒ | Thermometers provided and accurate | O | O | 1 |
| | OUT | **Food Identification** | | | |
| 35 | O | Food properly labeled; original container; required records available | O | O | 1 |
| | OUT | **Prevention of Food Contamination** | | | |
| 36 | O | Insects, rodents, and animals not present | O | O | 2 |
| 37 | ☒ | Contamination prevented during food preparation, storage & display | O | O | 1 |
| 38 | O | Personal cleanliness | O | O | 1 |
| 39 | O | Wiping cloths: properly used and stored | O | O | 1 |
| 40 | O | Washing fruits and vegetables | O | O | 1 |
| | OUT | **Proper Use of Utensils** | | | |
| 41 | O | In-use utensils; properly stored | O | O | 1 |
| 42 | O | Utensils, equipment and linens; properly stored, dried, handled | O | O | 1 |
| 43 | O | Single-use/single-service articles; properly stored, used | O | O | 1 |
| 44 | O | Gloves used properly | O | O | 1 |

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

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  Date: 04/20/2023

Signature of Environmental Health Specialist  Date: 04/20/2023

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

| PH-2267 (Rev. 6-15) | Free food safety training classes are available each month at the county health department. Please call ( ) 6153405620 to sign-up for a class. | RDA 629 |
|---|---|---|

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

| *Establishment Information* | |
|---|---|
| Establishment Name: | Tasty and Delicious MT#676 |
| Establishment Number #: | 605305132 |

| *NSPA Survey – To be completed if #57 is "No"* | |
|---|---|
| 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. | |

*Warewashing Info*

| Machine Name | Sanitizer Type | PPM | Temperature ( Fahrenheit) |
|---|---|---|---|
| Manual | Chlorine | | |

*Equipment Temperature*

| Description | Temperature ( Fahrenheit) |
|---|---|
| | |

*Food Temperature*

| Description | State of Food | Temperature ( Fahrenheit) |
|---|---|---|
| Cook hamburger off grill | Cooking | 175 |

| Observed Violations | |
|---|---|
| Total # | 12 |
| Repeated # | 0 |

6: Employee is preparing food while hand sink was block and no soap at hand sink. There was no way hands were wash. ( CA ) train them to wash hands
8: Items pile in hand sink ( CA) person in charge removed items
8: No soap at hand sink ( CA) Person and charge place them there
20: Cut tomatoes was cut at 7 AM. They are reading at 58 F. Must be 41 F or below ( CA) embargo 2 lbs . Make sure cut tomatoes reaches 41 F before leaving commissary
20: Prep cooler reading at 63 F. Person in charge stated he turn it in when he got to the location. Prep cooler must read 41 F. ( CA ) have prep cooler service asap
20: Raw hamburger meat in prep cooler reading at 53 F. Must be 41 F ( CA) moved to freezer
20: Mozzarella cheese in prep cooler 54 F. Must be 41 F or below ( CA) moved to freezer
34: No visible thermometer in chest freezer
37: Bottle water with seal broken and not full on shelf of prep cooler
45: Observed deep cuts in cutting board attach to prep cooler
55: Permit not posted in customer view
56: Last inspection not posted

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

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

| ***Establishment Information*** | |
|---|---|
| Establishment Name: | Tasty and Delicious MT#676 |
| Establishment Number : | 605305132 |

***Comments/Other Observations***

1: (IN): PIC demonstrates knowledge by correctly answering questions regarding principles applicable to the food operation.
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.
7: (IN) Employees are observed using suitable utensils or gloves to prevent bare hand (or arm) contact with ready-to-eat foods.
9: See food chart
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: See food chart
17: (NA) No TCS foods reheated for hot holding.
18: No cooling is done
19: (NA) Establishment does not hot hold TCS foods.
21: (NO) There are no foods requiring date marking in the facility at the time of the inspection.
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.

| Establishment Information | |
|---|---|
| Establishment Name: | Tasty and Delicious MT#676 |
| Establishment Number : | 605305132 |

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

**Additional Comments (cont'd)**

***See last page for additional comments.***

| Establishment Information | |
|---|---|
| Establishment Name: | Tasty and Delicious MT#676 |
| Establishment Number #: | 605305132 |

***Sources***

| | | | |
|---|---|---|---|
| Source Type: | Food | Source: | Rest Depot and Sam's |
| Source Type: | Water | Source: | City |
| Source Type: | | Source: | |
| Source Type: | | Source: | |
| Source Type: | | Source: | |

***Additional Comments***

Follow Up with in 10 days