

## CAMP INSPECTION REPORT TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH

ESTABLISHMENT		DATE	SCORE
Rau-Wood Retreat Center		09/06/22	SCORE
<b>LOCATION</b> 8687 Old Harding Pike	STAFF John Michael	EST. NO. 650240089	N/A /100
CITY, STATE, ZIP Nashville TN 37222	TYPE Resident Camp <100	PURPOSE Follow-Up	
PERMITTEE NASHVILLE LUTHERANS INC DBA	RAU-WOOD RE	FOLLOW- UP ( ) YE REQUIRED NO	
* 1. Source, adequate	5	SAFETY Fire extinguishers, smoke det	testore flex alarmer installed

* 1	WATER SUPPLY, ICE Source, adequate	5
2		1 2
	DRINKING FACILITIES	
3.	Approved, adequate, adjusted, repair, clean	2
- 2001	SEWAGE DISPOSAL / PLUMBING	
4.	Approved, functioning properly	5
5	Backflow	1 5
6.	Approved sanitary station, provided as required / Approved sewer connections	2
	SOLID WASTE	
7.	Containers approved, adequate	2
8.	Good repair, clean	12
9.	Storage area and premises clean	12
10.	Disposal frequency adequate	1
11.		1 2
	SPACES, STRUCTURES, BEDDING	
12.	Structures, beds, and individual units properly spaced	1
13.	Floor space adequate, proper ventilation	1 2
14.	Floors, walls, ceilings / clean, good repair	1 2
15.	Personal storage provided, clean, good repair	1
16.	Bedding clean, good repair	1 2
17.	Mattress cover provided	2
18.	Lighting / fixtures adequate	2
19.	Guest room doors, self-closing	1
20.		1 2
	in the state of th	-

		DILL DIL	
*	22.	Fire extinguishers, smoke detectors, fire alarms; installed, number maintained	5
•	23.	Exits marked, lighted, unobstructed, evacuation plans	5
	24.	Curtains, draperies, fire resistant	2
*	25.	Visible electrical hazards	5
	26.	Hazardous chemicals, including inflammable; marked and stored properly	5
	27.	Animals under control	2
	28.	Storage areas maintained, flammable equipment properly stored	4
		AND ADDRESS OF THE PROPERTY OF	

NATURAL SWIMMING AREA

7.5	provided	
* 30.	Underwater hazards, vegetative growth or pollution	5
	RESTROOMS / BATHING FACILITIES / FIXTURES	;
31.	Number, designed, installed	2
32.	Lighting adequate	2
33.	Floor, walls ceilings and attachments; clean, good repair	2
34.	Toilet tissue provide	1
35.	Waste receptacle clean, covered, fire resistant	2
1.7	DEALTH DISPACE DECICEDATION	

Depth, boundaries marked / lifesaving equipment

HEALTH, DISEASE, REGISTRATION

		ADMINISTRATION	
	37.	Occupant register maintained, preserved	1
*	36.	Telephone available, first aid kit available	- 5

	ADMINISTRATION	
 38.	Current permit posted	0

Identifies critical items

\*\* Identifies misdemeanor violations

Travel camp spaces identified

Failure to correct any violations of critical items within ten (10) days may result in suspension of your camp permit. Repeated violation of identical critical item category may result in revocation of your camp permit. Items identified as constituting imminent health hazards shall be corrected immediately or operations shall cease. You are required to post the camp permit in a conspicuous manner. You have the right to appeal any citation by filing a written request to the Director within ten (10) days of this report. You also 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 62-110-103, 68-110-106 and 4-5-320.

estae	
$\epsilon$	By
09/06/22	Time in/ou
	09/06/22 Solon

EHS

11:00 AM

11:20 PM

## CAMP INSPECTION REPORT TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH

Establishment Information



bserved Violations			
tal# 0			

## Additional Comments

The critical item # 23 mentioned in complete inspection report on 8/03/2022 has been corrected (camp was closed during the month of August)

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

stablishment Nu	me: Rau-Wood Retre mber: 650240089	rat Conton		
bserved Viola	tions (cont'd)			
dditional Con	ments (cont'd)			

Establishment Information