## TENNESSEE DEPARTMENT OF HEALTH FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

SCORE

Sec.	1000	14	A.S.																
Est	ablis	hmen	t Nar		Sweet Milk							Tur	o of f	Establi	ehme	O Farmer's Market Food Unit			
Ada	fress				329 Donels	on Pike						1.33	AC UI L	-54400	511110	O Temporary O Seasonal			
City	,				Nashville		Time in	10	):4	5 A	M	A	M / PI	и ті	ne o	ut 11:45:AM AM/PM			
Inspection Date 11/08/2023 Establishment # 605321127 Embargoed 5																			
Pur	pose	of In	spect		Routine	O Follow-up	O Complaint			O Pr			-		Cor	nsultation/Other			
Ris	k Ca	tegor			01	<b>3</b> 822	03			<b>O</b> 4						up Required 🛍 Yes O No Number of S		16	8
		R														I to the Centers for Disease Control and Preven control measures to prevent illness or injury.	tion		
						FOODBOR	NE ILLNESS RJ	SK F	ACT	ors	AND	PU	BLIC	HEA	LTH	INTERVENTIONS			
17	l⊨in o	(C) ompli		elgnet	ed compliance stat		NO=not observe		items							ach item as applicable. Deduct points for category or subcate spection R=repeat (violation of the same code provisi			
_	_		_	_		npliance Status	10 10 00011	cos	R		Ĩ	10040	0 01 0		-9 m	Compliance Status		R	WT
			NA	NO	Person in chaste	Supervision present, demonstrates k	nouladae and					IN	ουτ	NA	NO	Cooking and Reheating of Time/Temperature Control For Safety (TCS) Foods			
1	黨		NA	NO	performs duties	Employee Health	nomeuge, and	0	0	5		凉 0	00	0		Proper cooking time and temperatures Proper reheating procedures for hot holding	8	2	5
	X	0	144			food employee awarene	ss; reporting		0	5	H"	IN	олт		NO	Cooling and Holding, Date Marking, and Time as			
3	8	0	NA			triction and exclusion and Hygienic Practice		0	0	Ť	12		0	0		Public Health Control Proper cooling time and temperature	0		
4	X	0	-	0	Proper eating, tas	sting, drinking, or tobacco	use	0	0	5	19	X	0	0		Proper hot holding temperatures	0	0	
5		OUT	NA	NO	Prevent	m eyes, nose, and mouth ting Contamination b			0			0		8	0	Proper cold holding temperatures Proper date marking and disposition	8	8	5
6	直区	0	0		Hands clean and No bare hand cor	properly washed stact with ready-to-eat for	ods or approved	0	0 0	5	22	0	0	×	0	Time as a public health control: procedures and records	0	0	
		0	•	•	alternate procedu Handwashing sin/	res followed ks properly supplied and	accessible	6		2		IN	OUT	_	NO	Consumer Advisory Consumer advisory provided for raw and undercooked			
9	IN O	OUT	NA			Approved Source m approved source		0	0	_	23	O IN	义 OUT	O NA	NO	food Highly Susceptible Populations	0	0	4
10	0	0	0		Food received at	proper temperature	ante d	0		5	24	_	0	80		Pasteurized foods used; prohibited foods not offered	0	0	5
12	<u>米</u>	0	×	0	Required records	dition, safe, and unadulte available: shell stock tag		6	6	ľ		IN	OUT	NA	NO	Chemicals			
	IN	OUT	NA	NO		ction from Contamin	ation				25	0	0	X		Food additives: approved and properly used	0	0	5
		0			Food separated a Food-contact surf	ind protected aces: cleaned and saniti	zed	8	8		26	<u>宗</u> IN	O OUT	NA	NO	Toxic substances properly identified, stored, used Conformance with Approved Procedures	0	0	÷
	×		-		Proper disposition served	n of unsafe food, returned	d food not re-	0	0	2	27	0	0	×		Compliance with variance, specialized process, and HACCP plan	0	0	5
				-							-		-						
				GOO	d Ketali Practi	ces are preventive	measures to co						_		gens	, chemicals, and physical objects into foods.			
				00	not in compliance		COS=corre		n-site	during			IGB			R-repeat (violation of the same code provision)			
	_	OUT				pliance Status Food and Water		COS	R	WT		0	UT			Compliance Status Utensils and Equipment	cos	R	WT
	28				d eggs used when				2	1	4		n F			nfood-contact surfaces cleanable, properly designed,	0	0	1
_	29 30				ice from approved btained for specia	d source lized processing method	5	8			H		. 1			and used	0	0	1
		OUT	Dree			emperature Control d; adequate equipment f	or temperature				46 O Warewashing facilities, installed, maintained, used, test strips     47 O Nonfood-contact surfaces clean					0	0	1	
	И	0	contr	ol	-		or temperature	0	0	2		0	UT			Physical Facilities			
_	12 13				properly cooked for thawing methods (			8	8	1		48 O Hot and cold water available; adequate pressure     49 O Plumbing installed; proper backflow devices					8	윙	2
	14				ters provided and			ŏ	ŏ	1	5	_	_			waste water properly disposed		ŏ	2
		OUT			Fee	d identification					5	1 1	X T	oilet fa	cilitie	es: properly constructed, supplied, cleaned	0	0	1
3	35	0	Food	l prop	,	al container; required re-		0	0	1	5		-	-		use properly disposed; facilities maintained	0	0	1
	6	OUT 賞	Incor	40 00	Prevention dents, and animal	of Food Contamination	>n	0	0	2	5		-			lities installed, maintained, and clean intilation and lighting; designated areas used	0	0	1
	, o 17				-		en en 8 diseñou	0	$\vdash$	1	F	-	UT	ocque	ne ve	Administrative Items	-	_	
	38				leanliness	ring food preparation, sto	xage o unbray	0	0	1	5		_	ument	nern	nit posted	0	0	
-	39	Ó	Wipi	ng clo	ths; properly used			ŏ	0	1	_	_	_		-	inspection posted	0	0	0
_	10		_	hing fi	uits and vegetable			0	0	1		_				Compliance Status	YES	NO	WT
	11	OUT	_	e uter	Prope sils; properly stor	or Use of Utensils		0	0	1	5	7	-	omolis	2009	Non-Smokers Protection Act with TN Non-Smoker Protection Act	25	о	_
4	12	0	Uten	sils, e	quipment and line	ns; properly stored, dried	, handled	0	0	1	5	8	T	obacc	o pro	ducts offered for sale	0	0	0
	13 14				/single-service art ed properly	ticles; properly stored, us	ed	8	8		5	9	lf	tobac	co pr	oducts are sold, NSPA survey completed	0	0	
						in the second							1.0.0			Recented electrony of an interaction data for the	aller -		
																Repeated violation of an identical risk factor may result in revoc e. You are required to post the food service establishment permit			
mar repr	ner a xt. T	nd po				port in a conspicuous man -14-708, 68-14-709, 68-14-71				t a he	ring	egard	ing th	is repo	nt by f	lling a written request with the Commissioner within ten (10) days	of the	date	of this
7		_	>	- /	01					<b>`</b>			$\checkmark$		•		1 10	0/0	000
-	<u> </u>	X	_	- 7	ra	$\sim$ .	11/0	18/2			-	1		X	L		.1/0	8/2	023
зığ	natu	re of	rers	on in	Charge					Date						ental Health Specialist			Date
						Additional tood safet	v information car	I DE TO	und (	UTI OU	r wet	isite.	nttp	with g	own	ealth/article/eh-foodservice			

PH-2267 (Rev. 6-15)	Free food safety training cla	RDA 629		
PTH-2207 (Nev. 6-10)	Please call (	) 6153405620	to sign-up for a class.	104.025

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



#### Establishment Information

Establishment Name: Sweet Milk Establishment Number #: 605321127

Warewashing Info						
Machine Name	Sanitizer Type	PPM	Temperature (Fahrenheit)			
Low temp dishwasher Triple sink (not set up)	Chlorine QA	50				

Equipment Temperature	
Description	Temperature (Fahrenheit)
Warmer	169
Breading prep cooler	38
Vegetable prep cooler	36
Drawer cooler	33

Food Temperature		
Decoription	State of Food	Temperature (Fahrenheit)
Raw sausage in drawer cooler	Cold Holding	39
Scrambled egg	Cooking	158
Sliced tomatoes on vegetable prep cooler	Cold Holding	40
Raw shell egg in drawer cooler	Cold Holding	38
Raw chicken in breading cooler after prep	Cooling	
Breakfast casserole with egg on steam table	Hot Holding	192
Breakfast casserole in warmer 2	Hot Holding	148
Opened gallon of milk in walk cooler	Cooling	50
Cooked turkey in walk in cooler	Cold Holding	37
Mac and cheese mix in walk in cooler	Cold Holding	35

#### Observed Violations

Total # 9

Repeated # ()

20: Raw shell eggs at 62F and stored at room temperature during breakfast service. No time policy in place. CA: embargoed and discussed time as a public health control with PIC.

23: Menu does not have reminder or disclosure for undercooked foods. CA: discussed adding advisory to menu with PIC.

36: Flies in kitchen.

36: Garage-style doors open and kitchen is not pest proof.

37: Open pitchers of tea in drink area directly next to bathroom and accessible to customers.

37: Cut lemons stored in original box with uncut lemons.

43: Personal items stored on shelf with single use paper goods.

51: Self closures on bathroom doors are missing.

53: Vent fan cover over can storage shelf is missing.

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#### Comments/Other Observations

1: (IN): PIC demonstrates knowledge by correctly answering questions regarding principles applicable to the food operation.

2: PIC able to list symptoms and illnesses and discussed with employees.

- 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: Observed proper hand washing procedures.

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.

- 10: (NO): No food received during inspection.
- 11: (IN) All food was in good, sound condition at time of inspection.
- 12: (NÁ) 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 temps
- 17: (NO) No TCS foods reheated during inspection.
- 18: See temps
- 19: 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.
- 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.

## Establishment Information

Establishment Name: Sweet Milk

Establishment Number : 605321127

Comments/Other Observations (cont'd)

Additional Comments (cont'd) See last page for additional comments.

# Establishment Information Establishment Name: Sweet Milk Establishment Number #: 605321127

Sources				
Source Type:	Food	Source:	US Foods	
Source Type:	Food	Source:	Creation Gardens	
Source Type:	Water	Source:	City	
Source Type:		Source:		
Source Type:		Source:		

## Additional Comments