

City

# TENNESSEE DEPARTMENT OF HEALTH FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

SCORE

O Farmer's Market Food Unit Panera #1012 Remanent O Mobile Establishment Name Type of Establishment 401 S. Mt.Juliet Rd., STE 160 O Temporary O Seasonal Address **Mount Juliet** Time in 12:20 PM AM / PM Time out 01:36; PM AM / PM 08/22/2023 Establishment # 605194604 Embargoed 0 Inspection Date

O Follow-up **K**Routine O Complaint O Preliminary O Consultation/Other Purpose of Inspection

Number of Seats 200 Risk Category О3 04 Follow-up Required O Yes 疑 No

ase Control and Prevention

#### FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

10	<b>≱</b> in c	ompli	ance		OUT=not in compliance NA=not applicable NO=not observ			O
					Compliance Status	cos	R	WT
	IN	OUT	NA	NO	Supervisien			
1	氮	0			Person in charge present, demonstrates knowledge, and performs duties	0	0	5
	IN	OUT	NA	NO	Employee Health			
2	380	0			Management and food employee awareness; reporting	0	0	
3	×	0			Proper use of restriction and exclusion	0	0	5
Π	IN	OUT	NA	NO	Good Hygienic Practices			
4	X	0		0	Proper eating, tasting, drinking, or tobacco use	0	0	
5	*	0		0	No discharge from eyes, nose, and mouth	0	0	l °
	IN	OUT	NA	NO	Preventing Contamination by Hands			
6	X	0		0	Hands clean and properly washed	0	0	
7	氮	0	0	0	No bare hand contact with ready-to-eat foods or approved alternate procedures followed	0	0	5
8	×	0			Handwashing sinks properly supplied and accessible	0	0	2
	IN	OUT	NA	NO	Approved Source			
9	200	0			Food obtained from approved source	0	0	
10	0	0	0	×	Food received at proper temperature	0	0	1
11	×	0			Food in good condition, safe, and unadulterated	0	0	5
12	0	0	×	0	Required records available: shell stock tags, parasite destruction	0	0	
	IN OUT NA NO Protection from Contamination							
13	Ø	0	0		Food separated and protected	0	0	4
14	×	0	0		Food-contact surfaces: cleaned and sanitized	0	0	5
15	Ħ	0			Proper disposition of unsafe food, returned food not re- served	0	0	2

_					Compliance Status	COS	К	WI
	IN	OUT	NA	NO	Cooking and Reheating of Time/Temperature Control For Safety (TCS) Foods			
16		0	0	寒	Proper cooking time and temperatures	0	00	5
17	0	0	0	300	Proper reheating procedures for hot holding	0	0	٠
	IN	оит	NA	NO	Cooling and Holding, Date Marking, and Time as a Public Health Control			
18	0	0	0	×	Proper cooling time and temperature	0	0	
19	-	0	0	0	Proper hot holding temperatures	0	0	
20		0	0		Proper cold holding temperatures	0	0	5
21	*	0	0	0	Proper date marking and disposition	0	0	
22	×	0	0	0	Time as a public health control: procedures and records	0	0	
	IN	OUT	NA	NO	Consumer Advisory			
23	0	0	×		Consumer advisory provided for raw and undercooked food	0	0	4
	IN	OUT	NA	NO	Highly Susceptible Populations			
24	0	0	M		Pasteurized foods used; prohibited foods not offered	0	0	5
	IN	оит	NA	NO	Chemicals			
25	0	0	3%		Food additives: approved and properly used	0	0	5
26	8	0			Toxic substances properly identified, stored, used	0	0	3
	IN	OUT	NA	NO	Conformance with Approved Procedures			
27	0	0	×		Compliance with variance, specialized process, and HACCP plan	0	0	5

#### s to control the introduction of pathogens, chemicals, and physical objects into foods.

L PRACTICES

			GOO		
		OUT=not in compliance COS=corr			
		Compliance Status	cos	R	W
	OUT	Caro reconstruction			
28	_	Pasteurized eggs used where required	0	0	
29	0	Water and ice from approved source	0	0	
30	0	Variance obtained for specialized processing methods	0	0	
	OUT	Food Temperature Control			
31	0	Proper cooling methods used; adequate equipment for temperature control	0	0	
32	0	Plant food properly cooked for hot holding	0	0	г
33	0	Approved thawing methods used	0	0	г
34	0	Thermometers provided and accurate	0	0	г
	OUT	Food Identification		_	١
35	0	Food properly labeled; original container; required records available	0	0	Γ
	OUT	Prevention of Feed Contamination			
36	涎	Insects, rodents, and animals not present	0	0	
37	0	Contamination prevented during food preparation, storage & display	0	0	Г
38	0	Personal cleanliness	0	0	Г
39	0	Wiping cloths; properly used and stored	0	0	Г
40	0	Washing fruits and vegetables	0	0	Г
	OUT	Proper Use of Utensils			
41	0	In-use utensils; properly stored	0	0	Г
42	120	Utensils, equipment and linens; properly stored, dried, handled	0	0	Г
43	0		0	0	
44	0	Gloves used properly	0	0	г

		Compliance Status	COS	R	WT
	OUT	Utensils and Equipment			
45	涎	Food and norifood-contact surfaces cleanable, properly designed, constructed, and used	0	0	1
46	0	Warewashing facilities, installed, maintained, used, test strips	0	0	1
47	0	Nonfood-contact surfaces clean	0	0	1
	OUT	Physical Facilities			
48	0	Hot and cold water available; adequate pressure	0	0	2
49	0	Plumbing installed; proper backflow devices	0	0	2
50	0	Sewage and waste water properly disposed	0	0	2
51	0	Toilet facilities: properly constructed, supplied, cleaned	0	0	_ 1
52	0	Garbage/refuse properly disposed; facilities maintained	0	0	1
53	0	Physical facilities installed, maintained, and clean	0	0	1
54	0	Adequate ventilation and lighting; designated areas used	0	0	1
	OUT	Administrative Items	Т		
55	0	Current permit posted	0	0	-
56	0	Most recent inspection posted	0	0	,
		Compliance Status	YES	NO	W
		Non-Smokers Protection Act			
57		Compliance with TN Non-Smoker Protection Act	180	0	
58		Tobacco products offered for sale	0	0	0
59		If tobacco products are sold, NSPA survey completed	_ 0	0	

er and post the most recent inspection report in a conspicuous manner. You have the right to request a hi en (10) days of the date of the s 68-14-703, 68-14-706, 68-14-708, 68-14-709, 68-14-711, 68-14-715, 68-14-716, 4-5-320

> 08/22/2023 Signature of Environmental Health Specialist Date

08/22/2023

Date

Signature of Person In Charge

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

Free food safety training classes are available each month at the county health department. PH-2267 (Rev. 6-15) RDA 629 ) 6154445325 Please call ( to sign-up for a class.

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



#### Establishment Information

Establishment Name: Panera #1012
Establishment Number #: |605194604

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.	П
"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.	$\top$
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)				
Bucket	Ecolab Sink and	400					
Ecolab	CI	100					

Equipment Temperature						
Description	Temperature ( Fahrenheit)					
Salad cooler	36					
Sandwich cooler	36					
Sandwich cooler to go	40					
Wic baking	33					

Food Temperature		
Description	State of Food	Temperature ( Fahrenheit)
Quinoa	Cold Holding	41
Chicken salad	Cold Holding	39
Sliced ham	Cold Holding	38
Chicken noodle soup	Hot Holding	150
Chicken	Cold Holding	37
Tuna salad	Cold Holding	38
Milk	Cold Holding	40
Seared chicken	Cold Holding	40
Chicken salad wic	Cold Holding	39

Observed Violations
Total # 8
Repeated # ()
36: Several gnats flying around rear kitchen area and make line area
42: Metal pans stacked wet on shelf beside dish machine
45: Brown cutting boards on ric severely grooved

<sup>\*\*\*</sup>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: Panera #1012 Establishment Number: 605194604

### Comments/Other Observations

- 1: (IN): ANSI Certified Manager present.
- 2: Discussed policy with pic
- 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 are washing hands when changing gloves. Employee washed hands when changing jobs
- 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 info
- 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 food cooked during inspection
- 17: (NO) No TCS foods reheated during inspection.
- 18: No food cooling during inspection
- 19: See food temps
- 20: See food temps
- 21: (IN) Verified date marking system in place for all ready-to-eat TCS foods that are held longer than 24 hours.
- 22: Pre made sandwiches held in cooler under tilt policy. Timed out on sticker beside sandwiches
- 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:

# Additional Comments

See last page for additional comments.

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

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

stablishment Name: Panera #1012 stablishment Number: 605194604	Establishment Information	
comments/Other Observations (cont'd)  Comments (cont'd)	Establishment Name: Panera #1012	
additional Comments (cont'd)	Establishment Number: 605194604	
additional Comments (cont'd)		
additional Comments (cont'd)	Comments/Other Observations (cont'd)	
	Additional Comments (cont'd)	
see last page for additional comments.		
	See last page for additional comments.	

Establishment Information  Establishment Name: Panera #1012									
Establishment Name: P	Establishment Number #: 605194604								
Sources				- 11					
Source Type:	Water	Source:	City						
Source Type:	Food	Source:	GFS, Atlanta FDF						
	1 000		OI 3, Allanta I DI						
Source Type:		Source:							
Source Type:		Source:							
Source Type:		Source:							
Additional Comme	ents								