



# TENNESSEE DEPARTMENT OF HEALTH FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

SCORE

# 100

Establishment Name Rhythm And Rhymes Type of Establishment ☒ Farmer's Market Food Unit ☐ Permanent ☐ Mobile  
Address 114 Cottage Lane. ☐ Temporary ☐ Seasonal  
City Nashville Time in 11:05 AM AM / PM Time out 11:20 AM AM / PM  
Inspection Date 03/18/2022 Establishment # 605211651 Embargoed 0  
Purpose of Inspection ☒ Routine ☐ Follow-up ☐ Complaint ☐ Preliminary ☐ Consultation/Other  
Risk Category ☐ 1 ☒ 2 ☐ 3 ☐ 4 Follow-up Required ☐ Yes ☒ No Number of Seats 69

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	Compliance Status										COS	R	WT				
Supervision													Cooking and Reheating of Time/Temperature Control For Safety (TCS) Foods																
IN	OUT	NA	NO	Person in charge present, demonstrates knowledge, and performs duties						O	O	5	IN	OUT	NA	NO	Proper cooking time and temperatures						O	O	5				
IN	OUT	NA	NO	Employee Health									IN	OUT	NA	NO	Proper reheating procedures for hot holding						O	O					
1	<input checked="" type="radio"/>	<input type="radio"/>		Management and food employee awareness, reporting						O	O	5					Cooling and Holding, Date Marking, and Time as a Public Health Control												
2	<input checked="" type="radio"/>	<input type="radio"/>		Proper use of restriction and exclusion						O	O																		
3	<input checked="" type="radio"/>	<input type="radio"/>		Good Hygienic Practices <th colspan="1"></th> <th colspan="1"></th> <th colspan="1"></th> <td>IN</td> <td>OUT</td> <td>NA</td> <td>NO</td> <td colspan="6">Proper cooling time and temperature</td> <td>O</td> <td>O</td> <td rowspan="5">5</td>									IN	OUT	NA	NO	Proper cooling time and temperature						O	O	5				
4	<input checked="" type="radio"/>	<input type="radio"/>		O	Proper eating, tasting, drinking, or tobacco use						O	O					O	Proper hot holding temperatures						O		O			
5	<input checked="" type="radio"/>	<input type="radio"/>		O	No discharge from eyes, nose, and mouth						O	O					O	Proper cold holding temperatures						O		O			
IN	OUT	NA	NO	Preventing Contamination by Hands <th colspan="1"></th> <th colspan="1"></th> <th colspan="1"></th> <td>IN</td> <td>OUT</td> <td>NA</td> <td>NO</td> <td colspan="6">Proper date marking and disposition</td> <td>O</td> <td>O</td>									IN	OUT	NA	NO	Proper date marking and disposition						O	O					
6	<input checked="" type="radio"/>	<input type="radio"/>		O	Hands clean and properly washed						O	O	5					O	Time as a public health control: procedures and records							O	O		
7	<input checked="" type="radio"/>	<input type="radio"/>	O	O	No bare hand contact with ready-to-eat foods or approved alternate procedures followed						O	O																	
8	<input checked="" type="radio"/>	<input type="radio"/>			Handwashing sinks properly supplied and accessible						O	O	2	IN	OUT	NA	NO	Consumer Advisory <td>O</td> <td>O</td> <td>4</td>						O	O	4			
IN	OUT	NA	NO	Approved Source <th colspan="1"></th> <th colspan="1"></th> <th colspan="1"></th> <td>IN</td> <td>OUT</td> <td>NA</td> <td>NO</td> <td colspan="6">Highly Susceptible Populations<td></td><td></td><td></td></td>									IN	OUT	NA	NO	Highly Susceptible Populations <td></td> <td></td> <td></td>												
9	<input checked="" type="radio"/>	<input type="radio"/>			Food obtained from approved source						O	O	5					O	Pasteurized foods used; prohibited foods not offered						O	O	5		
10	<input type="radio"/>	<input type="radio"/>	O	<input checked="" type="radio"/>	Food received at proper temperature						O	O																	
11	<input checked="" type="radio"/>	<input type="radio"/>			Food in good condition, safe, and unadulterated						O	O																	
12	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	O	Required records available: shell stock tags, parasite destruction						O	O		IN	OUT	NA	NO	Chemicals <td></td> <td></td> <td></td>											
IN	OUT	NA	NO	Protection from Contamination <th colspan="1"></th> <th colspan="1"></th> <th colspan="1"></th> <td>IN</td> <td>OUT</td> <td>NA</td> <td>NO</td> <td colspan="6">Food additives: approved and properly used</td> <td>O</td> <td>O</td> <td rowspan="2">5</td>									IN	OUT	NA	NO	Food additives: approved and properly used						O	O	5				
13	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>		Food separated and protected						O	O	4	IN	OUT	NA	NO	Toxic substances properly identified, stored, used						O		O			
14	<input checked="" type="radio"/>	<input type="radio"/>	O		Food-contact surfaces: cleaned and sanitized						O	O	5	IN	OUT	NA	NO	Conformance with Approved Procedures <td></td> <td></td> <td></td>											
15	<input checked="" type="radio"/>	<input type="radio"/>			Proper disposition of unsafe food, returned food not re-served						O	O	2	IN	OUT	NA	NO	Compliance with variance, specialized process, and HACCP plan						O	O	5			

## Establishment Number #: 605211651

Smoking observed where smoking is prohibited by the Act.

Machine Name	Sanitizer Type	PPM	Temperature ( Fahrenheit)
Dishmachine Triple sink (not set up)	High temp Bleach		164

Description	Temperature ( Fahrenheit)
Deep freezer	-15
Reach in freezer	-1
Reach in cooler	38

Description	State of Food	Temperature ( Fahrenheit)
Milk in reach in cooler	Cold Holding	39

TENNESSEE DEPARTMENT OF HEALTH  
DIVISION OF ENVIRONMENTAL HEALTH  
FOOD INSPECTION DATA



**Establishment Information**

Establishment Name: Rhythm And Rhymes

Establishment Number : 605211651

**Comments/Other Observations**

- 1: (IN): PIC demonstrates knowledge by having no violations of priority violations during current inspection.
- 2: (IN): An employee health policy is available.
- 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:
- 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:
- 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:
- 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: (NO) TCS food is not being held hot during inspection.
- 20:
- 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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Source Type:	Source:
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### ***Additional Comments***