

Establishment Name

Address

# TENNESSEE DEPARTMENT OF HEALTH FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

SCORE

O Farmer's Market Food Unit St Paul Senior Living Community Remanent O Mobile Type of Establishment

5031 Hillsboro Rd. O Temporary O Seasonal

Nashville Time in 11:20; AM AM / PM Time out 12:30; PM AM / PM City

05/03/2023 Establishment # 605053724 Embargoed 10 Inspection Date

O Follow-up Purpose of Inspection **K**Routine O Complaint O Preliminary O Consultation/Other О3

Number of Seats 96 Risk Category Follow-up Required 级 Yes O No

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

10	¥=in c	ompli	ance		OUT=not in compliance NA=not applicable NO=not observ	ed		0	05=
					Compliance Status	cos	R	WT	] [
	IN	OUT	NA	NO	Supervision				П
1	氮	0			Person in charge present, demonstrates knowledge, and performs duties	0	0	5	1
	IN	OUT	NA	NO	Employee Health				] [
2	D)(	0			Management and food employee awareness; reporting	0	0		П
3	×	0			Proper use of restriction and exclusion	0	0	5	Н
	IN	OUT	NA	NO	Good Hygienic Practices				П
4	X	0		0	Proper eating, tasting, drinking, or tobacco use	0	0	5	11
5	*	0		0	No discharge from eyes, nose, and mouth	0	0	l °	H
	IN	OUT	NA	NO	Preventing Contamination by Hands				П
6	黨	0		0	Hands clean and properly washed	0	0		Н
7	鼷	0	0	0	No bare hand contact with ready-to-eat foods or approved alternate procedures followed	0	0	5	Н
8	×	0			Handwashing sinks properly supplied and accessible	0	0	2	П
	IN	OUT	NA	NO	Approved Source				П
9	黨	0			Food obtained from approved source	0	0		Н
10	0	0	0	3%	Food received at proper temperature	0	0	1	Н
11	×	0			Food in good condition, safe, and unadulterated	0	0	5	Н
12	0	0	×	0	Required records available: shell stock tags, parasite destruction	0	0		П
	IN	OUT	NA	NO	Protection from Contamination				1 1
13	Ä	0	0		Food separated and protected	0	0	4	11
14	×	0	0		Food-contact surfaces: cleaned and sanitized	0	0	5	П
15	Ħ	0			Proper disposition of unsafe food, returned food not re- served	0	0	2	

	Compliance Status						R	WT
	IN OUT NA NO Cooking and Reheating of Time/Temperature Control For Safety (TCS) Foods							
16	凝		0	0	Proper cooking time and temperatures	0	0	5
17	0	0	0	3%	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	X	0	0	0	Proper hot holding temperatures	0	0	
20	0	<b>X</b>	0		Proper cold holding temperatures	0	0	5
21	0	26	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	氮	0	0		Pasteurized foods used; prohibited foods not offered	0	0	5
	IN	оит	NA	NO	Chemicals			
25	0	0	X		Food additives: approved and properly used	0	0	5
26	菜	0			Toxic substances properly identified, stored, used	0	0	۰
	IN	OUT	NA	NO	Conformance with Approved Procedures			
27	0	0	×		Compliance with variance, specialized process, and HACCP plan	0	0	5

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

. PRACTICES

			G00	DR	a/.
		OUT=not in compliance COS=corr			
		Compliance Status	cos	R	WT
	OUT	Safe Food and Water			
28	0	Pasteurized eggs used where required	0	0	1
29	0	Water and ice from approved source	0	0	2
30	0	Variance obtained for specialized processing methods	0	0	1
	OUT	Food Temperature Control			
31	0	Proper cooling methods used; adequate equipment for temperature control	0	0	2
32	0	Plant food properly cooked for hot holding	0	0	1
33	0	Approved thawing methods used	0	0	1
34	×	Thermometers provided and accurate	0	0	1
	OUT	Food Identification			
35	0	Food properly labeled; original container; required records available	0	0	1
	OUT	Prevention of Food Contamination			
36	0	Insects, rodents, and animals not present	0	0	2
37	0	Contamination prevented during food preparation, storage & display	0	0	1
38	0	Personal cleanliness	0	0	1
39	0	Wiping cloths; properly used and stored	0	0	1
40	0	Washing fruits and vegetables	0	0	1
	OUT	Proper Use of Utensils	$\overline{}$		
41	0	In-use utensils; properly stored	0	0	1
42	0	Utensils, equipment and linens; properly stored, dried, handled	0	0	1
43	0	Single-use/single-service articles; properly stored, used	0	0	1
44		Gloves used properly	0	0	

pect	ion	R-repeat (violation of the same code provision			
		Compliance Status	cos	R	W
	OUT	Utensils and Equipment			
45	M	Food and norfood-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			
55	0	Current permit posted	0	0	0
56	0	Most recent inspection posted	0	0	۰
		Compliance Status	YES	NO	W
		Non-Smokers Protection Act			
57		Compliance with TN Non-Smoker Protection Act	- X	0	
58		Tobacco products offered for sale	0	0	0
59		If tobacco products are sold, NSPA survey completed	0	0	

a conspicuous manner. You have the right to request a hearing regarding this report by fill 68-14-709, 68-14-711, 68-14-715, 68-14-716, 4-5-329. n ten (10) days of the date of the

05/03/2023

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05/03/2023 Date

ignature of Person In Charge

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



#### Establishment Information

Establishment Name: St Paul Senior Living Community
Establishment Number #: |605053724

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.	Т
'No Smoking' signs or the international "Non-Smoking" symbol are not conspicuously posted at every entrance.	1
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 ( Fahrenhelt)			
Manual dish sink	QA	200				
High Temperature MChine	Temperature	171				
Manual dish sink		200				

Equipment Temperature					
Description	Temperature ( Fahrenheit)				
Walk in freezer	0				
Walk in cooler	25				
Refrigerator	37				
lce cream freezer	-5				

Food Temperature		
Description	State of Food	Temperature ( Fahrenheit)
Ham in top cooler	Cold Holding	38
Raw fish in Prep cooler	Cold Holding	38
Greens in the oven	Hot Holding	146
White bean soup in Hot holding cabinet	Hot Holding	146
Yogurt in the refrigerator (drinks station)	Cold Holding	44
Fish	Cooking	202

Observed Violations
Total # 4
Repeated # 0
20: Yogurt@ 44F in refrigerator @ 45F. CA: yogurts were moved to another refrigerator
21: Ham in top Prep cooler with date 1/15/23, liquid eggs 4/21/23, chicken 4/25/23 and today is 5/3/23. Past 7 days. CA: discarded.
34: No thermometer in Prep cooler.
45: Cutting board with too many and deep cuts.

<sup>&</sup>quot;"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: St Paul Senior Living Community

Establishment Number: 605053724

### Comments/Other Observations

- 1: (IN): ANSI Certified Manager present.
- 2: Employee health policy present.
- 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 wash hands during inspection.
- 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.
- 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: Fish cooked @ 202F.
- 17: (NO) No TCS foods reheated during inspection.
- 18: Chicken is cooling in the freezer.
- 19: Proper hot holding temperatures were observed.
- 22: Proper written TPHC plan and procedure observed.
- 23: (NA) Establishment does not serve animal food that is raw or undercooked.
- 24: Milk, juices and yogurt are pasteurized.
- 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: "No Smoking" signs or the international "No Smoking" symbol are conspicuously posted at every entrance.
- 58: No

## 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.

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Establishment Name: St Paul Senior Living Community				
Establishment Number: 605053724				
Comments/Other Observations (cont'd)				
Additional Comments (cont'd)				
See last page for additional comments.				

Establishment Information

Sources	Establishment Inforr Establishment Name: St Establishment Number #:	Paul Senior Living Com 605053724	nmunity				
Source Type: Water Source: City Source Type: Food Source: Sysco, US Foods, Holsey Source Type: Source: Source Type: Source: Source: Source Type: Source:							
Source Type: Food Source: Sysco, US Foods, Holsey Source Type: Source: Source Type: Source: Source Type: Source:	Source Type:	Water	Source:	City			
Source Type: Source Type: Source Type: Source Type: Source Type: Source Type:	Source Type:	Food	Source:	Sysco, US Foods, Holsey			
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Source Type: Source:							
<b>5.</b>							
Additional Comments		nto					
	Additional Comme	nts					