

TENNESSEE DEPARTMENT OF HEALTH
FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

SCORE

81

Establishment Name	Angie's Diner		Type of Establishment	<input checked="" type="radio"/> Farmer's Market Food Unit	81
Address	100 James Robertson Parkway			<input checked="" type="radio"/> Permanent <input type="radio"/> Mobile	
City	Nashville	Time in	10:35 AM	<input type="radio"/> Temporary <input type="radio"/> Seasonal	
Inspection Date	04/26/2023	Time out	11:50 AM		
	Establishment #	605315151	Embargoed	0	
Purpose of Inspection	<input checked="" type="radio"/> Routine <input type="radio"/> Follow-up <input type="radio"/> Complaint <input type="radio"/> Preliminary <input type="radio"/> Consultation/Other				
Risk Category	<input type="radio"/> 1 <input checked="" type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 Follow-up Required <input checked="" type="radio"/> Yes <input type="radio"/> No Number of Seats 35				

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 (IK, 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													
	IN	OUT	NA	NO	Supervision																								
1	<input checked="" type="checkbox"/>	<input type="checkbox"/>			Person in charge present, demonstrates knowledge, and performs duties					<input type="checkbox"/>	<input type="checkbox"/>		5																
	IN	OUT	NA	NO	Employee Health																								
2	<input checked="" type="checkbox"/>	<input type="checkbox"/>			Management and food employee awareness, reporting					<input type="checkbox"/>	<input type="checkbox"/>		5																
3	<input checked="" type="checkbox"/>	<input type="checkbox"/>			Proper use of restriction and exclusion					<input type="checkbox"/>	<input type="checkbox"/>		5																
	IN	OUT	NA	NO	Good Hygienic Practices																								
4	<input checked="" type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	Proper eating, tasting, drinking, or tobacco use					<input type="checkbox"/>	<input type="checkbox"/>		5																
5	<input checked="" type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	No discharge from eyes, nose, and mouth					<input type="checkbox"/>	<input type="checkbox"/>		5																
	IN	OUT	NA	NO	Preventing Contamination by Hands																								
6	<input checked="" type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	Hands clean and properly washed					<input type="checkbox"/>	<input type="checkbox"/>		5																
7	<input checked="" type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	No bare hand contact with ready-to-eat foods or approved alternate procedures followed					<input type="checkbox"/>	<input type="checkbox"/>		5																
8	<input checked="" type="checkbox"/>	<input type="checkbox"/>			Handwashing sinks properly supplied and accessible					<input type="checkbox"/>	<input type="checkbox"/>		2																
	IN	OUT	NA	NO	Approved Source																								
9	<input checked="" type="checkbox"/>	<input type="checkbox"/>			Food obtained from approved source					<input type="checkbox"/>	<input type="checkbox"/>		5																
10	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Food received at proper temperature					<input type="checkbox"/>	<input type="checkbox"/>		5																
11	<input checked="" type="checkbox"/>	<input type="checkbox"/>			Food in good condition, safe, and unadulterated					<input type="checkbox"/>	<input type="checkbox"/>		5																
12	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Required records available: shell stock tags, parasite destruction					<input type="checkbox"/>	<input type="checkbox"/>		5																
	IN	OUT	NA	NO	Protection from Contamination																								
13	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>		Food separated and protected					<input type="checkbox"/>	<input type="checkbox"/>		4																
14	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		Food-contact surfaces: cleaned and sanitized					<input type="checkbox"/>	<input type="checkbox"/>		5																
15	<input checked="" type="checkbox"/>	<input type="checkbox"/>			Proper disposition of unsafe food, returned food not re-served					<input type="checkbox"/>	<input type="checkbox"/>		2																


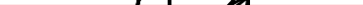
Compliance Status										COS			R			WT		
	IN	OUT	NA	NO	Cooking and Reheating of Time/Temperature Control For Safety (TCS) Foods													
16	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper cooking time and temperatures					<input type="checkbox"/>	<input type="checkbox"/>		5					
17	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Proper reheating procedures for hot holding					<input type="checkbox"/>	<input type="checkbox"/>		5					
	IN	OUT	NA	NO	Cooling and Holding, Date Marking, and Time as a Public Health Control													
18	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper cooling time and temperature					<input type="checkbox"/>	<input type="checkbox"/>		5					
19	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper hot holding temperatures					<input type="checkbox"/>	<input type="checkbox"/>		5					
20	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>		Proper cold holding temperatures					<input type="checkbox"/>	<input type="checkbox"/>		5					
21	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper date marking and disposition					<input type="checkbox"/>	<input type="checkbox"/>		5					
22	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Time as a public health control: procedures and records					<input type="checkbox"/>	<input type="checkbox"/>		5					
	IN	OUT	NA	NO	Consumer Advisory													
23	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		Consumer advisory provided for raw and undercooked food					<input type="checkbox"/>	<input type="checkbox"/>		4					
	IN	OUT	NA	NO	Highly Susceptible Populations													
24	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		Pasteurized foods used; prohibited foods not offered					<input type="checkbox"/>	<input type="checkbox"/>		5					
	IN	OUT	NA	NO	Chemicals													
25	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		Food additives: approved and properly used					<input type="checkbox"/>	<input type="checkbox"/>		5					
26	<input type="checkbox"/>	<input checked="" type="checkbox"/>			Toxic substances properly identified, stored, used					<input type="checkbox"/>	<input type="checkbox"/>		5					
	IN	OUT	NA	NO	Conformance with Approved Procedures													
27	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		Compliance with variance, specialized process, and HACCP plan					<input type="checkbox"/>	<input type="checkbox"/>		5					

Good Retail Practices are preventive measures to control the introduction of pathogens, chemicals, and physical objects into foods.

GOOD RETAIL PRACTICES

OUT=not in compliance				COS=corrected on-site during inspection				R-repeat (violation of the same code provision)							
Compliance Status				COS	R	WT	Compliance Status				COS	R	WT		
	OUT	Safe Food and Water							OUT	Utensils and Equipment					
28	<input type="radio"/>	Pasteurized eggs used where required			<input type="radio"/>	<input type="radio"/>	1	45	<input type="radio"/>	Food and nonfood-contact surfaces cleanable, properly designed, constructed, and used			<input type="radio"/>	<input type="radio"/>	1
29	<input type="radio"/>	Water and ice from approved source			<input type="radio"/>	<input type="radio"/>	2	46	<input type="radio"/>	Warewashing facilities, installed, maintained, used, test strips			<input type="radio"/>	<input type="radio"/>	1
30	<input type="radio"/>	Variance obtained for specialized processing methods			<input type="radio"/>	<input type="radio"/>	1	47	<input type="radio"/>	Nonfood-contact surfaces clean			<input type="radio"/>	<input type="radio"/>	1
	OUT	Food Temperature Control							OUT	Physical Facilities					
31	<input type="radio"/>	Proper cooling methods used; adequate equipment for temperature control			<input type="radio"/>	<input type="radio"/>	2	48	<input type="radio"/>	Hot and cold water available; adequate pressure			<input type="radio"/>	<input type="radio"/>	2
32	<input type="radio"/>	Plant food properly cooked for hot holding			<input type="radio"/>	<input type="radio"/>	1	49	<input checked="" type="radio"/>	Plumbing installed; proper backflow devices			<input type="radio"/>	<input type="radio"/>	2
33	<input type="radio"/>	Approved thawing methods used			<input type="radio"/>	<input type="radio"/>	1	50	<input type="radio"/>	Sewage and waste water properly disposed			<input type="radio"/>	<input type="radio"/>	2
34	<input type="radio"/>	Thermometers provided and accurate			<input type="radio"/>	<input type="radio"/>	1	51	<input type="radio"/>	Toilet facilities: properly constructed, supplied, cleaned			<input type="radio"/>	<input type="radio"/>	1
	OUT	Food Identification						52	<input type="radio"/>	Garbage/refuse properly disposed; facilities maintained			<input type="radio"/>	<input type="radio"/>	1
35	<input checked="" type="radio"/>	Food properly labeled; original container; required records available			<input type="radio"/>	<input type="radio"/>	1	53	<input type="radio"/>	Physical facilities installed, maintained, and clean			<input type="radio"/>	<input type="radio"/>	1
	OUT	Prevention of Food Contamination						54	<input type="radio"/>	Adequate ventilation and lighting; designated areas used			<input type="radio"/>	<input type="radio"/>	1
36	<input type="radio"/>	Insects, rodents, and animals not present			<input type="radio"/>	<input type="radio"/>	2		OUT	Administrative Items					
37	<input checked="" type="radio"/>	Contamination prevented during food preparation, storage & display			<input type="radio"/>	<input type="radio"/>	1	55	<input checked="" type="radio"/>	Current permit posted			<input type="radio"/>	<input type="radio"/>	0
38	<input type="radio"/>	Personal cleanliness			<input type="radio"/>	<input type="radio"/>	1	56	<input type="radio"/>	Most recent inspection posted			<input type="radio"/>	<input type="radio"/>	
39	<input type="radio"/>	Wiping cloths; properly used and stored			<input type="radio"/>	<input type="radio"/>	1	Compliance Status				YES	NO	WT	
40	<input type="radio"/>	Washing fruits and vegetables			<input type="radio"/>	<input type="radio"/>	1	Non-Smokers Protection Act							
	OUT	Proper Use of Utensils						57		Compliance with TN Non-Smoker Protection Act			<input checked="" type="radio"/>	<input type="radio"/>	
41	<input type="radio"/>	In-use utensils; properly stored			<input type="radio"/>	<input type="radio"/>	1	58		Tobacco products offered for sale			<input type="radio"/>	<input type="radio"/>	0
42	<input type="radio"/>	Utensils, equipment and linens; properly stored, dried, handled			<input type="radio"/>	<input type="radio"/>	1	59		If tobacco products are sold, NSPA survey completed			<input type="radio"/>	<input type="radio"/>	
43	<input checked="" type="radio"/>	Single-use/single-service articles; properly stored, used			<input type="radio"/>	<input type="radio"/>	1								
44	<input type="radio"/>	Gloves used properly			<input type="radio"/>	<input type="radio"/>	1								

Failure to correct any violations of risk factor items within ten (10) days may result in suspension of your food service establishment permit. Repeated violation of an identical risk factor may result in revocation of your food service establishment permit. Items identified as constituting imminent health hazards shall be corrected immediately or operations shall cease. You are required to post the food service establishment permit in a conspicuous manner and post the most recent inspection report in a conspicuous manner. You 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 68-14-703, 68-14-704, 68-14-708, 68-14-709, 68-14-711, 68-14-715, 68-14-716, 4-5-320.

	04/26/2023		04/26/2023
Signature of Person In Charge	Date	Signature of Environmental Health Specialist	Date

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

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



Establishment Information	
Establishment Name:	Angie's Diner
Establishment Number #:	605315151

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.	
"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.	
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)
3 compartment sink	QA	200	

Equipment Temperature	
Description	Temperature (Fahrenheit)
prep cooler 1	39
2 door imbera Reach in cooler	37
2 dooreverest reach in freezer	-2
2 door everest reach in cooler	38

Food Temperature		
Description	State of Food	Temperature (Fahrenheit)
Sliced ham on prep cooler	Cold Holding	39
Cooked pork chops on from fryer	Cooking	172
Cheesse on counter	Cold Holding	50
Pork chips onncounter for an hour	Cold Holding	55
Cooked burger on grill	Cold Holding	176
Raw chicken wings in 2 door everest reach in	Cold Holding	41
Lettuce cooling in display cooler used an hour ago	Cold Holding	40
Mac and cheese in hot box	Hot Holding	159
Chicken and pepper on steam table	Hot Holding	139

Observed Violations

Total # 13

Repeated # 0

13: Raw egg stored over sauces in prep cooler 1. Corrective Action: moved to proper storage area

13: Raw chicken stored over beef in 2 door everest reach in cooler As well as cooled black beans. Corrective Action: moved to proper storage area.

13: Raw food prepared on-same table as ready to eat foods. Corrective Action: moved ready to eat food. Discussed that food preparation must be separated and prep surfaces sanitized after raw foods.

19: Mash potatoes in warmer box at 119F due to extended preparation time. Corrective Action: reheated in oven .

20: Improper cold holding of salads prepared around an hour ago left on table for service as well as vanilla pudding. Corrective Action: discussed ensuring and storing food when no longer in food preparation or used for preparation. Cooling times and temperatures reviewed. Placed into cooler for cooling.

21: No date marking on sliced turkey or ham in prep cooler 1. Corrective Action: date marked by employee.

26: Lysol wipes stored over and next to drink pumps and flavorings in office room. Corrective Action: moved to proper storage area.

35: Some bulk powdered product in unoriginal container lacking date marking.

37: Personal drink stored over and next to Single service stirrs in office room

37: Some cans and jar of peanut butter on floor of dry stock room

43: Single service to go bags wrapped in plastic stored on ground

49: Back flow preventor leaking at mop sink

55: Permit posted expired

TENNESSEE DEPARTMENT OF HEALTH
DIVISION OF ENVIRONMENTAL HEALTH
FOOD INSPECTION DATA



Establishment Information

Establishment Name: Angie's Diner

Establishment Number : 605315151

Comments/Other Observations

- 1: (IN): PIC demonstrates knowledge by correctly answering questions regarding principles applicable to the food operation.
- 2: Policy posted on cooler and reviewed with person in charge
- 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
- 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 sources
- 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.
- 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: Observed proper cooking at time of inspection .
- 17: (NO) No TCS foods reheated during inspection.
- 18: Observed proper cooling of product used During prep
- 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.
- 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.

Establishment Information

Establishment Name: Angie's Diner

Establishment Number : 605315151

Comments/Other Observations (cont'd)**Additional Comments (cont'd)**

See last page for additional comments.

Establishment Information

Establishment Name: Angie's Diner

Establishment Number #: 605315151

Sources

Source Type:	Food	Source:	Gfs, performance food group,
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Source Type:	Water	Source:	Metro/municipal
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Source Type:		Source:	
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Source Type:		Source:	
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Source Type:		Source:	
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Additional Comments

Imbera reach in cooler thermometer reading 46 F. But food in temp. Discuss proper monitoring of cooler to ensure compliance