TENNESSEE DEPARTMENT OF HEALTH FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

| A TRUM | 100 | | | | | | | ULN1 | | | | | | | | | | | | | | |
|---|----------|----------|--------|--|---|---------------|-------------------------------|--------------|----------------------|-----------|--------|--------|--------|--------|-----------|-----------|--------|---|-----------------|-------|----|----|
| Truleigh Scrumptious | | | | Type of Establishment O Fermer's Merket Food Unit Permanent O Mobile | | | | | | | | | | | | | | | | | | |
| Add | ress | | | | 2232 N | Mt. Ju | iliet Rd | | | | | | | Typ | xe of I | Establi | shme | O Temporary O Seasonal | J | L | | |
| City | | | | | Mt. Julie | et | | | Time i | , 11 | .:0 | 0 A | M | AJ | M/P | M Tir | ne ou | ut 12:05: PM AM/PM | | | | |
| Insc | ectic | n Da | te | | 04/25/ | /2023 | 3 Establ | ishment # | 60531779 | | | | Emba | - | | | | | | | | |
| | | | spect | | Routine | | O Follow-u | | O Complain | | | - | elimin | | - | | Cor | nsuitation/Other | | | | |
| Risi | Cat | egor | , | | 01 | | 522 | | 03 | | | 04 | | | | Fo | ilow- | up Required O Yes 🕅 No | Number of S | ieats | 6 | |
| 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, KA, 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=nct in compliance NA=not applicable NO=not observed COS=corrected on-site during inspection R=repeat (violation of the same code provision) | | | | | | | | | | | | | | | | | | | | | | |
| | Pin çi | mpa | ance | | OUT-not in c | | ance Sta | | NU=not observ | ec COS | R | | | recter | a on-s | she duni | ng ins | Compliance Status | | | R | WT |
| | IN | OUT | NA | NO | | | Supervis | | | | | | | IN | ουτ | NA | NO | Cooking and Reheating of Time/ | | | | |
| 1 | 鬣 | 0 | | | Person in ch performs du | | sent, demo | instrates k | nowledge, and | 0 | 0 | 5 | | 0 | 0 | 0 | × | Control For Safety (TCS) I Proper cooking time and temperatures | 0003 | 0 | 0 | |
| 2 | IN XX | | NA | NO | Managemer | | imployee d employee | | ss: reporting | 0 | | | 17 | 0 | 0 | 0 | X | Proper reheating procedures for hot hold | | 0 | 0 | - |
| | Ŕ | ō | | | Management and food employee awareness: reporting O O Proper use of restriction and exclusion O O O S IIN OUT NA NO Cooling and Holding, Date Marking, and Time a Public Health Control | | | | | | | | | | | | | | | | | |
| | | | NA | | | | Hygienic | | | | | | | ĸ | 0 | | - | Proper cooling time and temperature | | 0 | 0 | |
| 4 | 邕 | 0 | | | Proper eatin No discharg | | | | | 8 | 0 | 5 | | 0 | 0 | | | Proper hot holding temperatures Proper cold holding temperatures | | 0 | 8 | |
| | IN | OUT | NA | NO | Pr | eventing | Contami | ination by | | | | | | 1 | ŏ | | | Proper date marking and disposition | | ŏ | ŏ | 5 |
| | | 0 | | | Hands clear | | | | ods or approved | _ | 0 | 5 | 22 | 0 | 0 | 災 | 0 | Time as a public health control: procedur | res and records | 0 | 0 | |
| 7 | 鬣 | 0 | 0 | 0 | alternate pro | ocedures t | followed | | | 0 | 0 | | | IN | OUT | NA | | | | | | |
| 8 | X | 읈 | NA | NO | Handwashir | | roperly sup | | accessible | 0 | 0 | 2 | 23 | 0 | 0 | 氮 | | Consumer advisory provided for raw and food | undercooked | 0 | 0 | 4 |
| 9 | 嵩 | 0 | | | Food obtain | ned from a | pproved so | ource | | | 0 | | | IN | OUT | NA | NO | Highly Susceptible Popula | tions | | | |
| | | | 0 | × | Food receiv | | | | rated | 8 | 0 | 5 | 24 | 0 | 0 | 88 | | Pasteurized foods used; prohibited foods | a not offered | 0 | 0 | 5 |
| | <u>米</u> | 0 | × | 0 | Food in goo Required re | | | | | 6 | 6 | Ť | H | IN | OUT | NA | NO | Chemicals | | | | |
| 12 | | | NA | - | destruction | | on from C | ontamin | ation | U . | - | _ | 25 | 0 | 0 | | | Food additives: approved and properly u | ead | 0 | তা | |
| 13 | | | 0 | no | Food separa | | | ontamin | ation | 0 | 0 | 4 | 26 | Ň | ŏ | 1 | | Toxic substances properly identified, sto | | ŏ | 히 | 5 |
| 14 | × | 0 | 0 | | Food-contax | | | | | 0 | 0 | 5 | | | OUT | NA | NO | Conformance with Approved P | rocedures | | _ | |
| 15 | 2 | 0 | | | Proper disp served | osition of i | unsafe food | d, returned | d food not re- | 0 | 0 | 2 | 27 | 0 | 0 | 黨 | | Compliance with variance, specialized p HACCP plan | ocess, and | 0 | 0 | 5 |
| Good Retail Practices are preventive measures to control the introduction of pathogens, chemicals, and physical objects into foods. | | | | | | | | | | | | | | | | | | | | | | |
| GOOD RETAIL PRACTICES | | | | | | | | | | | | | | | | | | | | | | |
| | | | | 00 | T=not in comp | | | | COS=corr | ected o | n-site | during | | | | | | R-repeat (violation of the sam | | 200 | | WT |
| | | OUT | | | | | ance Stat od and Wa | | | 1005 | R | wi | | 0 | UT | | | Compliance Status Utensils and Equipment | | cos | ĸ | WI |
| | 8 | | | | d eggs used | | | | | 0 | 0 | 1 | 4 | 5 (| | | | infood-contact surfaces cleanable, proper | ly designed, | 0 | 0 | 1 |
| _ | 9 0 | | | | lice from app obtained for s | | | ng method | 5 | 8 | 0 | 2 | | + | - | | | and used | | | - | - |
| | | OUT | | | | | erature C | | | | _ | | 40 | | _ | _ | | g facilities, installed, maintained, used, te | st strips | 0 | 0 | 1 |
| 3 | 1 | 0 | Prop | | oling method | ts used; ad | dequate eq | uipment fo | or temperature | 0 | 0 | 2 | 47 | _ | O N UT | Vonfoo | d-con | Physical Facilities | | 0 | 0 | 1 |
| 3 | 2 | 0 | | | properly cod | oked for ho | ot holding | | | 0 | 0 | 1 | 41 | _ | | lot and | l cold | d water available; adequate pressure | | 0 | 0 | 2 |
| | 3 | | | | thawing met | | | | | 0 | | 1 | 49 | _ | | | | stalled; proper backflow devices | | | 0 | 2 |
| 3 | 4 | OUT | Then | mom | eters provide | | ourate Iontificati | lon | | 0 | 0 | 1 | 50 | _ | _ | | | i waste water properly disposed es: properly constructed, supplied, cleane | a | 0 | 0 | 2 |
| 3 | 5 | | Food | prop | erly labeled: | | | | ords available | 0 | 0 | 1 | 5 | _ | | | | use properly disposed; facilities maintaine | | ō | ŏ | 1 |
| | | OUT | | | | - | Feed Cont | | | - | - | _ | 53 | | - | - | | ilities installed, maintained, and clean | | - | 0 | 1 |
| 3 | 6 | 0 | Insec | ts, ro | dents, and a | animals no | t present | | | 0 | 0 | 2 | 54 | 1 0 | 0 / | Adequa | de ve | entilation and lighting; designated areas us | sed | 0 | 0 | 1 |
| 3 | 7 | 鬣 | Cont | amina | ation prevent | ted during | food prepa | aration, sto | orage & display | 0 | 0 | 1 | | 0 | UT | | | Administrative Items | | | | |
| 3 | 8 | 0 | Pers | onal o | leanliness | | | | | 0 | 0 | 1 | 5 | 5 (| 0 | Durrient | perm | nit posted | | 0 | 0 | - |
| _ | 9 | Ó | Wipir | ng cic | ths; properly | | stored | | | 0 | 0 | 1 | 54 | _ | | | | inspection posted | | 0 | 0 | 0 |
| 4 | 0 | O OUT | _ | ning f | ruits and veg | - | se of Uter | maile | | 0 | 0 | 1 | | | | | | Compliance Status Non-Smokers Protection | Act | YES | NO | WT |
| 4 | 1 | 0 | In-us | | nsils; properi | ly stored | | | | | 0 | | 57 | | | | | with TN Non-Smoker Protection Act | | X | 0 | |
| | 2 3 | | | | quipment an s/single-servi | | | | | | 0 | 1 | 53 | | | | | oducts offered for sale roducts are sold, NSPA survey completed | | 0 | 8 | 0 |
| | 4 | | | | ed properly | Se antores | Proberik; | 200,000, 009 | | | ŏ | | | | | | oo pe | search are used, rear in adreet completed | | - | - | |
| | | | | | | | | | | | | | | | | | | Repeated violation of an identical risk factor | | | | |
| man | ner a | nd po | st the | most | recent inspect | tion report i | in a conspic | cuous mann | ver. You have the ri | ght to r | eques | | | egard | ing th | iis repor | n by f | ie. You are required to post the food service e filing a written request with the Commissioner | | | | |
| repo | rt. T. | GA. | ectio | ns 68- | 14-703, 68-14-7 | 706, 68-14-7 | 08, 68-14-70 | 9, 68-14-71 | 1, 68-14-715, 68-14- | 16, 4-5 | 320. | | | | | | | 61 | | | | |

Row C

NI Date Signature of E vironmental Health Specialist

04/25/2023

SCORE

| | Signature | of | Person | In | Charge | |
|--|-----------|----|--------|----|--------|--|
|--|-----------|----|--------|----|--------|--|

Date

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

| PH-2267 (Rev. 6-15) | Free food safety training class | sses are available each mor | nth at the county health department. | RDA 629 |
|---------------------|---------------------------------|-----------------------------|--------------------------------------|---------|
| rivezor (new. o-ro) | Please call (|) 6154445325 | to sign-up for a class. | HDR 025 |

TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



Establishment Information

Establishment Name: Truleigh Scrumptious Establishment Number # 605317790

| VSPA 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 wenty-one (21) years of age or older. | |
| se-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. | |
| Sarage type doors in non-enclosed areas are not completely open. | |
| ents or awnings with removable sides or vents in non-enclosed areas are not completely removed or open. | |
| moke from non-enclosed areas is infiltrating into areas where smoking is prohibited. | |
| moking observed where smoking is prohibited by the Act. | |

| Warewashing Info | | | |
|------------------|----------------|-----|---------------------------|
| Machine Name | Sanitizer Type | PPM | Temperature (Fahrenheit) |
| Bucket | QA | 200 | |
| СМА | CI | 100 | |
| | | | |

| Equipment Temperature | |
|-----------------------|--------------------------|
| Decoription | Temperature (Fahrenheit) |
| Eline ric : | 39 |
| Eline rif | -7 |
| Continental ric | 39 |
| | |

| Food Temperature | | |
|-------------------------|---------------|--------------------------|
| Description | State of Food | Temperature (Fahrenheit) |
| Homemade Pimento cheese | Cold Holding | 40 |
| Milk | Cold Holding | 40 |
| Hard boiled eggs | Cooling | 50 |
| Tuna salad | Cold Holding | 42 |
| Sliced ham | Cold Holding | 41 |
| Grilled chicken | Cold Holding | 41 |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |

Observed Violations

Total # 1

Repeated # ()

37: Employee drinks stored on shelf with cake decorating items and over mixing bowls and pans

TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



Establishment Information

Establishment Name: Truleigh Scrumptious

Establishment Number : 605317790

Comments/Other Observations

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

- 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: Employee washed hands before putting on gloves to prepare sandwich

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 cooking observed during inspection
- 17: (NO) No TCS foods reheated during inspection.
- 18: Hard boiled eggs after being peeled put back in ric see food temsp
- 19: (NO) TCS food is not being held hot during inspection.
- 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: (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.

| Establishment In | formation |
|--------------------|----------------------|
| Establishment Name | Truleigh Scrumptious |
| Establishment Numb | ber: 605317790 |

Comments/Other Observations (cont'd)

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

Establishment Information

Establishment Name: Truleigh Scrumptious

Establishment Number # 605317790

| Sources | | | |
|--------------|-------|---------|--------------|
| Source Type: | Food | Source: | PFG, Walmart |
| Source Type: | Water | Source: | City |
| Source Type: | | Source: | |
| Source Type: | | Source: | |
| Source Type: | | Source: | |
| | | | |

Additional Comments