

Purpose of Inspection

**K**Routine

City

# TENNESSEE DEPARTMENT OF HEALTH FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

SCORE

O Farmer's Market Food Unit Number 1 Bakery Abigail Permanent O Mobile Establishment Name Type of Establishment 2371 Murfreesboro Rd O Temporary O Seasonal Address Nashville Time in 12:55 PM AM/PM Time out 02:45; PM AM/PM 04/23/2024 Establishment # 605314975 Embargoed 0 Inspection Date O Follow-up

O Complaint

Number of Seats 5 Risk Category О3 04 Follow-up Required 级 Yes O No

O Preliminary

O Consultation/Other

# FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

10	in ¢	compli	ance		OUT=not in compliance NA=not applicable NO=not observe	ed		CC	S=cor	recte	d on-si	te duri	ng ins	pection
					Compliance Status	cos	R	WT						Co
	IN	OUT	NA	NO	Supervision					IN	оит	NA	NO	Cooking
1	0	異			Person in charge present, demonstrates knowledge, and performs duties	0	0	5	16	0	0	XX.	0	Proper cook
	IN	OUT	NA	NO	Employee Health				17	Ó	0	200	Ó	Proper rehe
2	TX.	0		_	Management and food employee awareness; reporting	0	0							Cooling a
3	×	0			Proper use of restriction and exclusion	0	0	5		IN	OUT	NA	NO	
	IN	ОUТ	NA	NO	Good Hygienic Practices				18	0	0	×	0	Proper cool
4	300	0		0	Proper eating, tasting, drinking, or tobacco use	0	0	5	19	0	0	文	0	Proper hot h
5	*	0		0	No discharge from eyes, nose, and mouth	0	0	l ° l	20	245	0	0		Proper cold
	IN	OUT	NA	NO	Preventing Contamination by Hands				21	0	0	246	0	Proper date
6	100	0		0	Hands clean and properly washed	0	0		22	0	0	×	0	Time as a p
7	800	0	0	0	No bare hand contact with ready-to-eat foods or approved	0	0	5		_			_	rane as a p
_			ŭ		alternate procedures followed	_	_	Щ		IN	OUT	NA	NO	
8	0	22			Handwashing sinks properly supplied and accessible	0	0	2	23	0	l٥l	M		Consumer a
		OUT	NA	NO	Approved Source	-	_	$\blacksquare$		_	_			food
9	200	0			Food obtained from approved source	0	0			IN	OUT	NA	NO	н
10	0	0	0	×	Food received at proper temperature	0	0	١. ١	24	0	0	333		Pasteurized
11	×	0			Food in good condition, safe, and unadulterated	0	0	5		_		000		r asteur geo
12	0	0	×	0	Required records available: shell stock tags, parasite destruction	0	0			IN	OUT	NA	NO	
	IN	OUT	NA	NO	Protection from Contamination				25	0	0	X		Food additiv
13	0	凝	0		Food separated and protected	0	0	4	26	黨	0			Toxic subst
14	0	寒	0		Food-contact surfaces: cleaned and sanitized	0	0	5		IN	OUT	NA	NO	Confe
15	×	0			Proper disposition of unsafe food, returned food not re- served	0	0	2	27	0	0	×		Compliance HACCP pla

					Compliance Status	cos	R	WT
	IN	оит	NA	NO	Cooking and Reheating of Time/Temperature Control For Safety (TCS) Foods			
16		0	寒	0	Proper cooking time and temperatures	0	0	5
17	0	0	300	0	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	X	0	Proper cooling time and temperature	0	0	
19	0	0	文	0	Proper hot holding temperatures	0	0	
20		0	0		Proper cold holding temperatures	0	0	5
21	0	0	380	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	×		Pasteurized foods used; prohibited foods not offered	0	0	5
	IN	OUT	NA	NO	Chemicals			
25		0	X		Food additives: approved and properly used	0	0	
26	菜	0			Toxic substances properly identified, stored, used	0	0	9
	IN	OUT	NA	NO	Conformance with Approved Procedures			
27	0	0	X		Compliance with variance, specialized process, and HACCP plan	0	0	5

		OUT=not in compliance COS=con	ected or	n-side	du
		Compliance Status	COS		_
	OUT	Safe Food and Water			_
28	0	Pasteurized eggs used where required	0	0	г
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	1
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			
35	×	Food properly labeled; original container; required records available	0	0	
	OUT	Prevention of Food Contamination			
36	涎	Insects, rodents, and animals not present	0	0	:
37	誕	Contamination prevented during food preparation, storage & display	0	0	
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	
42	0	Utensils, equipment and linens; properly stored, dried, handled	0	0	
43	0	Single-use/single-service articles; properly stored, used	0	0	
44	10	Gloves used properly	0	О	

pecti		R-repeat (violation of the same code provision)  Compliance Status	cos	R	W
	OUT	Utensils and Equipment			
45	0	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	黨	Nonfood-contact surfaces clean	0	0	1
	OUT	Physical Facilities			
48	0	Hot and cold water available; adequate pressure	0	0	- :
49	0	Plumbing installed; proper backflow devices	0	0	- :
50	0	Sewage and waste water properly disposed	0	0	- :
51	120	Toilet facilities: properly constructed, supplied, cleaned	0	0	
52	×	Garbage/refuse properly disposed; facilities maintained	0	0	
53	2%	Physical facilities installed, maintained, and clean	0	0	-
54	0	Adequate ventilation and lighting; designated areas used	0	0	
	OUT	Administrative Items	Т		Ī
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	100	0	
58		Tobacco products offered for sale	0	0	١ (
59		If tobacco products are sold, NSPA survey completed	0	0	

You have the right to request a l ten (10) days of the date of the

Signature of Person In Charge

04/23/2024

twus

04/23/2024

\*\*\*\* 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) ) 6153405620 Please call ( to sign-up for a class.

Date

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



Establishment Information	
Establishment Name: Number 1 Bakery Abigail	
Establishment Number #: [605314975	

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)				
	l		l				

Equipment Temperature						
Description	Temperature ( Fahrenheit)					
Reach in cooler	32					

Food Temperature Description	State of Food	Temperature ( Fahrenheit)
eta cheese reach in cooler	Cold Holding	42

## Observed Violations

Total # 30

1: Does not have control over store. Using unapproved plywood trays. Access to hand sinks were blocked. Many priority items marked on inspection.

8: No hand towels at hand sink by ovens

Ca replaced

8: Access to all 3 hand sinks are blocked. Several speed racks stored in front of hand sink by ovens and handsink in dough prep room. Many items stored in handsink by 3 comp sink.

Ca moved items to have access

8: No paper towels at hand sinks in restrooms

Ca replaced

8: No paper towels at handsink in dough prep room

Ca replaced

13: Raw eggs stored above cheese in reach in cooler

Ca moved raw eggs to bottom shelf

14: Using plywood trays for bread. They cannot be washed, rinsed, or sanitized so they are not allowed to be used in a food service establishment.

Ca will remove from store

14: Bowl has lots of food build up on it

Ca will clean

14: Dough roller has food build up on it

Ca will clean

35: No label on spray bottle of water

36: Small flies present in the kitchen

37: Table cloth on prep table is dirty

37: Personal food stored on shelf with store sugar, yeast,etc

37: Open containers of flour stored on shelf

37: Bread not wrapped sitting directly on a piece of plywood

37: Bread on shelf in store front that customers serve themselves is not covered

37: Bag of whole wheat flour stored on the floor

37. Bag of whole wheat flour stored on the floo 37: Cloth wrapped around speed rack is dirty

37: Open cans of drinks sitting on oven in kitchen

47: Shelves are dirty

47: Speed racks are dirty

47: Cart is dirty

51: No lids on trashcans in unisex restrooms

52: Lots of unused items in the store and storage room

52: Lots of trash on ground around dumpster

53: Ceiling vent covers are dirty

<sup>&</sup>quot;"See page at the end of this document for any violations that could not be displayed in this space.

Observed Violations
Total # 80 Repeated # 0
Repeated # ()
53: Carpet in kitchen
53: Exhaust hood filter is dirty
53: Floor is dirty
53: Walls are dirty

<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: Number 1 Bakery Abigail

Establishment Number: 605314975

#### Comments/Other Observations

- 2: Employee health policy is available. Symptoms and diseases are listed on the policy.
- 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: Did not observe handwashing during inspection
- 7: (IN) Employees are observed using suitable utensils or gloves to prevent bare hand (or arm) contact with ready-to-eat foods.
- 9: Pfg, restaurant depot, sams
- 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.
- 15: (IN) No unsafe, returned or previously served food served.
- 16: (NA) No raw animal foods served.
- 17: (NA) No TCS foods reheated for hot holding.
- 18: No cooling of time and temperature control for safety foods
- 19: (NA) Establishment does not hot hold TCS foods.
- 20: Cold food at 41F and below
- 21: (NA) No Ready-to-eat, TCS foods prepared on premise and held, or commercial containers of ready-to-eat food opened and held, over 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.

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

Establishment Name: Number 1 Bakery Abigail	
Establishment Number: 605314975	
Comments/Other Observations (cont'd)	
Additional Comments (cont'd)	
See last page for additional comments.	

Establishment Information

	akery Abigail		
Establishment Number #: 6053149			
r position			
Sources			
Source Type: Wa	ater	Source:	City
Source Type:		Source:	
Additional Comments			

Establishment Information