

Establishment Name

Inspection Date

Risk Category

Address

# TENNESSEE DEPARTMENT OF HEALTH

FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

O Farmer's Market Food Unit

Remanent O Mobile Type of Establishment

O Temporary O Seasonal

O Yes 疑 No

SCORE

Nashville City

**Broadway Cafe** 

110 9th AVE S

Follow-up Required

Time in 11:05; AM AM/PM Time out 11:20; AM AM/PM

12/22/2023 Establishment # 605304616 Embargoed 0

О3

₩ Follow-up Routine O Complaint Purpose of Inspection

O Preliminary O Consultation/Other

## FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

IN-in compliance OUT-not in compliance NA-not applicable NO-not observed						d		C
	Compliance Status							WT
	IN	OUT	NA	NO	Supervision			
1	氮	0			Person in charge present, demonstrates knowledge, and performs duties	0	0	5
	IN		NA	NO	Employee Health			
2	$\exists x$	0			Management and food employee awareness; reporting	0	0	
3	×	0			Proper use of restriction and exclusion	0	0	5
	IN	OUT	NA	NO	Good Hygienic Practices			
4	*	0		0	Proper eating, tasting, drinking, or tobacco use	0	0	-
5	滋	0		0	No discharge from eyes, nose, and mouth		0	5
	IN	OUT	NA	NO	Preventing Contamination by Hands			
6	100	0		0	Hands clean and properly washed		0	
7	鉱	0	0	0	No bare hand contact with ready-to-eat foods or approved alternate procedures followed		0	5
8	×	0	Handwashing sinks properly supplied and a		Handwashing sinks properly supplied and accessible	0	0	2
	IN	OUT	NA	NO	Approved Source			
9	窓	0			Food obtained from approved source	0	0	
10	0	0	0	×	Food received at proper temperature	0	0	
11	×	0			Food in good condition, safe, and unadulterated	0	0	5
12	0	0	×	0	Required records available: shell stock tags, parasite destruction	0	0	
	IN	OUT	NA	NO	Protection from Contamination			
13	Ä	0	0		Food separated and protected	0	0	4
14	×	0	0		Food-contact surfaces: cleaned and sanitized	0	0	5
15	×	0			Proper disposition of unsafe food, returned food not re- served	0	0	2

					Compliance Status	COS	R	WT
	IN	OUT	NA	NO	Cooking and Reheating of Time/Temperature Control For Safety (TCS) Foods			
16	凝	0	0	0	Proper cooking time and temperatures	0	0	5
17	0	0	0	3%	Proper reheating procedures for hot holding	0	0	۰
	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	×	0	0	0	Proper hot holding temperatures	0	0	
20	243	0	0		Proper cold holding temperatures	0	0	5
21	*	0	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	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	1	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 pathoge ns, chemicals, and physical objects into foods.

L PRACTICES

			GOO		
		OUT=not in compliance COS=con			
		Compliance Status	cos	R	W
	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	-
30	0	Variance obtained for specialized processing methods	0	0	١.
	OUT	Food Temperature Control			
31	0	Proper cooling methods used; adequate equipment for temperature control	0	0	:
32	0	Plant food properly cooked for hot holding	0	0	Г
33	0	Approved thawing methods used	0	0	Ε.
34	0	Thermometers provided and accurate	0	0	Т
	OUT	Food Identification		_	
35	0	Food properly labeled; original container; required records available	0	0	-
	OUT	Prevention of Feed Contamination			
36	0	Insects, rodents, and animals not present	0	0	
37	885	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	
40	0	Washing fruits and vegetables	0	0	Г
	OUT	Proper Use of Utensils			
41	0	In-use utensils; properly stored	0	0	Г
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	0	

pecti		R-repeat (violation of the same code provision Compliance Status	cos	R	WT
	OUT	Utensils and Equipment	1000	-11	
45	0	Food and nonfood-contact surfaces cleanable, properly designed, constructed, and used		0	1
46	题	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	Т		
55	麗	Current permit posted	0	0	0
56	0	Most recent inspection posted	0	0	·
		Compliance Status	YES	NO	WT
		Non-Smokers Protection Act			
57		Compliance with TN Non-Smoker Protection Act	- 100	0	
58		Tobacco products offered for sale	0	0	0
59		If tobacco products are sold, NSPA survey completed	0	0	

d post the most recent inspection report in a conspicuous manner. You have the right to request a l in (10) days of the date of the 68-14-703, 68-14-706, 68-14-708, 68-14-709, 68-14-711, 68-14-715, 68-14-716, 4-5-320,

12/22/2023

12/22/2023

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: Broadway Cafe				
Establishment Number #: 605304616				
NSPA Survey - To be completed if  Age-restricted venue does not affirmatively resi		e facilities at all times to	nament who are	
twenty-one (21) years of age or older.				
Age-restricted venue does not require each per	rson attempting to gain entr	y to submit acceptable for	orm of identification.	
"No Smoking" signs or the international "Non-S	moking" symbol are not con	spicuously posted at ev	ery entrance.	
Garage type doors in non-enclosed areas are n	not completely open.			
Tents or awnings with removable sides or vents	s in non-enclosed areas are	not completely remove	d or open.	
Smoke from non-enclosed areas is infiltrating in	nto areas where smoking is	prohibited.		
Smoking observed where smoking is prohibited	i by the Act.			
Warewashing Info				
Machine Name	Sanitizer Type	PPM	Temperature ( Fai	renhelt)
Equipment Temperature				
Description			Temperature ( Fah	renhelt)
Food Townsonton				
Food Temperature Description		State of Food	Temperature ( Fah	ranhalfi
Decomption		state of Pood	reinperature ( rain	remient/
I				

Observed Violations
Total # 4 Repeated # 0
Repeated # ()
37:
46:
55:
55:
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Establishment Information

Establishment Name: Broadway Cafe



Establishment Number: 605304616	
Comments/Other Observations	
Comments/Other Observations  CA: repairs made and line hand sink now supplied with hot water.  CA: repairs made and line hand sink now supplied with hot water.  CO:  CA: repairs made and line hand sink now supplied with hot water.  CO:  CA: repairs made and line hand sink now supplied with hot water.  CO:  CA: repairs made and line hand sink now supplied with hot water.  CO:  CA: repairs made and line hand sink now supplied with hot water.  CO:  CA: repairs made and line hand sink now supplied with hot water.  CO:  CA: repairs made and line hand sink now supplied with hot water.  CO:  CA: repairs made and line hand sink now supplied with hot water.  CO:  CA: repairs made and line hand sink now supplied with hot water.  CO:  CA: repairs made and line hand sink now supplied with hot water.  CO:  CA: repairs made and line hand sink now supplied with hot water.  CO:  CA: repairs made and line hand sink now supplied with hot water.  CO:  CO:  CO:  CO:  CO:  CO:  CO:  CO	
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See last page for additional comments.

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: Broadway Cafe Establishment Number: 605304616	Establishment Information	
Establishment Number:   605304616  Comments/Other Observations (cont'd)  Additional Comments (cont'd)	Establishment Name: Broadway Cafe	
Additional Comments (cont'd)	Establishment Number: 605304616	
Additional Comments (cont'd)		
Additional Comments (cont'd)	Comments/Other Observations (cont'd)	
	Additional Comments (contists	
See last page for additional comments.		
	See last page for additional comments.	

Establishment Information	
Establishment Name: Broadway Cafe	
Establishment Number #: 605304616	Ī
Sources	
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Source Type:	Source:
Additional Comments	
PIC opened kitchen for follow-up.	