

Establishment Name

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Address

City

TENNESSEE DEPARTMENT OF HEALTH FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

O Farmer's Market Food Unit

SCORE

Remanent O Mobile Type of Establishment

O Temporary O Seasonal Time in 10:45 AM AM/PM Time out 11:05:AM AM/PM

05/13/2024 Establishment # 605181683 Embargoed 0 Inspection Date

Noshville Deli II

Nashville

4014 Hillsboro Circle

₩ Follow-up Routine O Complaint O Preliminary O Consultation/Other Purpose of Inspection

Number of Seats 138 Risk Category О3 04 Follow-up Required O Yes 疑 No

RNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

| - 12 | ¥=in c | ompli | ance | | OUT=not in compliance NA=not applicable NO=not observed | | | C |
|------|--------|-------|------|----|---|-----|---|----|
| | | | | | Compliance Status | cos | R | WT |
| | IN | OUT | NA | NO | Supervision | | | |
| 1 | 氮 | 0 | | | Person in charge present, demonstrates knowledge, and performs duties | 0 | 0 | 5 |
| | IN | OUT | NA | NO | Employee Health | | | |
| 2 | ЭXС | 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 | X | 0 | | 0 | Proper eating, tasting, drinking, or tobacco use | 0 | 0 | - |
| 5 | * | 0 | | 0 | No discharge from eyes, nose, and mouth | 0 | 0 | |
| | IN | OUT | NA | NO | Preventing Contamination by Hands | | | |
| 6 | 凝 | 0 | | 0 | Hands clean and properly washed | 0 | 0 | |
| 7 | 氮 | 0 | 0 | 0 | No bare hand contact with ready-to-eat foods or approved alternate procedures followed | 0 | 0 | 5 |
| 8 | × | 0 | | | Handwashing sinks properly supplied and accessible | 0 | 0 | 2 |
| | IN | OUT | NA | NO | Approved Source | | | |
| 9 | 黨 | 0 | | | Food obtained from approved source | 0 | 0 | |
| 10 | 0 | 0 | 0 | 3% | 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 | 黛 | 0 | 0 | | Food separated and protected | 0 | 0 | 4 |
| 14 | × | 0 | 0 | | Food-contact surfaces: cleaned and sanitized | 0 | 0 | 5 |
| - | | _ | _ | | - | _ | - | - |

Proper disposition of unsafe food, returned food not re

| Compliance Status | | | | | | cos | R | WT |
|-------------------|---|-----|-----|-----|---|-----|---|----|
| | IN OUT NA NO Cooking and Reheating of Time/Temperature Control For Safety (TCS) Foods | | | | | | | |
| 16 | × | 0 | 0 | 0 | Proper cooking time and temperatures | 0 | 0 | 5 |
| 17 | 0 | 0 | 0 | 300 | 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 | × | 0 | 0 | 0 | Proper hot holding temperatures | 0 | 0 | |
| 20 | 24 | 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 | 333 | | Pasteurized foods used; prohibited foods not offered | 0 | 0 | 5 |
| | IN | оит | NA | NO | Chemicals | | | |
| 25 | 0 | 0 | 3% | | Food additives: approved and properly used | 0 | 0 | 5 |
| 26 | 黨 | 0 | | | oxic substances properly identified, stored, used | | 0 | , |
| | IN | OUT | NA | NO | Conformance with Approved Procedures | | | |
| 27 | 0 | 0 | × | | Compliance with variance, specialized process, and HACCP plan | 0 | 0 | 5 |

R=repeat (violation of the same code provi

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

0

0

| | | OUT=not in compliance COS=con | ected or | 1-site | 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 | Г |
| | 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 | 0 | 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 | 1 |
| 37 | 338 | Contamination prevented during food preparation, storage & display | 0 | 0 | |
| 38 | 0 | Personal cleanliness | 0 | 0 | г |
| 39 | 188 | 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 | 200 | 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 | |

| ecti | | R-repeat (violation of the same code provision) Compliance Status | cos | R | W |
|------|-----|--|-----|-----|-----|
| | OUT | Utensils and Equipment | 1 | | |
| 45 | 0 | Food and nonfood-contact surfaces cleanable, properly designed, constructed, and used | 0 | 0 | 1 |
| 46 | 題 | Warewashing facilities, installed, maintained, used, test strips | 0 | 0 | 1 |
| 47 | 凝 | 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 | 100 | Sewage and waste water properly disposed | 0 | 0 | - 2 |
| 51 | 0 | Toilet facilities: properly constructed, supplied, cleaned | 0 | 0 | - |
| 52 | 0 | Garbage/refuse properly disposed; facilities maintained | 0 | 0 | 1 |
| 53 | 2% | Physical facilities installed, maintained, and clean | 0 | 0 | 1 |
| 54 | 羅 | Adequate ventilation and lighting; designated areas used | 0 | 0 | 1 |
| | OUT | Administrative Items | | | 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 | 0 | 100 | |
| 58 | | Tobacco products offered for sale | 0 | 0 | |
| 59 | | If tobacco products are sold, NSPA survey completed | 0 | 0 | |

You have the right to request a hearing regarding this report by fill n ten (10) days of the date of the 8-14-709, 68-14-711, 68-14-715, 68-14-716, 4-5-320.

05/13/2024

Commares

05/13/2024

Signature of Person In Charge

Date

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

Date

Free food safety training classes are available each month at the county health department. PH-2267 (Rev. 6-15) RDA 629) 6153405620 Please call (to sign-up for a class.

TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



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Establishment Name: Noshville Deli II
Establishment Number #: | 605181683

| 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) | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |

| Equipment Temperature | | | | | | | |
|-------------------------------|----|--|--|--|--|--|--|
| Description Temperature (Fal | | | | | | | |
| Prep cooler | 35 | | | | | | |
| Tuna salad in top cooler | 39 | | | | | | |
| Eggsalad in top cooler | 37 | | | | | | |
| Chicken salad in top cooler | 39 | | | | | | |

| esoription | State of Food | Temperature (Fahrenheit |
|------------|---------------|-------------------------|
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| Observed Violations | |
|--------------------------|--|
| otal # 9 lepeated # 0 | |
| epeated # () | |
| 6: | |
| 7: | |
| 9: | |
| 2: | |
| 6: | |
| 7: | |
| 0: | |
| 3: | |
| 4: | |
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TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA

Establishment Information



| Establishment Name: Noshville Deli II | |
|---|--|
| Establishment Number: 605181683 | |
| | |
| Comments/Other Observations | |
| | |
| 2: | |
| 1: 2: 3: | |
| 4: (IN) Employee isn't drinking, eating, or using tobacco in a food preparation area. 5: 6: 7: 8: 9: | |
| 5: | |
| 6: | |
| 7: | |
| 8: 8: | |
| 9. 10: | |
| | |
| 11: (IN) All food was in good, sound condition at time of inspection. 12: | |
| 13: (IN) All raw animal food is separated and protected as required. | |
| 14: | |
| 15 : | |
| 16 : | |
| 17: 18: | |
| 18: 19: | |
| 20: Proper cold holding temperatures were observed. | |
| 21: | |
| 22: | |
| 21: 22: 23: | |
| 24: | |
| 25: | |
| 26: (IN) All poisonous or toxic items are properly identified, stored, and used. | |
| 27: | |
| 57: 58: | |
| 30. | |
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Additional Comments

See last page for additional comments.

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| Establishment Name: Noshville Deli II Establishment Number: 605181683 | Establishment Information | |
|---|--|--|
| Comments/Other Observations (cont'd) Additional Comments (cont'd) | Establishment Name: Noshville Deli II | |
| Additional Comments (cont'd) | Establishment Number: 605181683 | |
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| Establishment Information | |
|---------------------------------------|---------|
| Establishment Name: Noshville Deli II | |
| Establishment Number #: 605181683 | |
| | |
| Sources | |
| Source Type: | Source: |
| Additional Comments | |
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