

Establishment Name

City

Risk Category

TENNESSEE DEPARTMENT OF HEALTH FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

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MID STATE SPORTS CONCESSION

O Farmer's Market Food Unit Remanent O Mobile

860 OLD HICKORY BLVD Address Madison

Time in 10:00 AM AM/PM Time out 10:20; AM AM/PM

O Temporary O Seasonal

O Yes 疑 No

06/08/2023 Establishment # 605254439 Inspection Date

Follow-up Required

Type of Establishment

Embargoed 0

O Follow-up Purpose of Inspection **E**Routine O Complaint O Preliminary O Consultation/Other О3

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

status (IN, OUT, HA, HO) for ea

IN-in compliance OUT-not in			ance		OUT=not in compliance NA=not applicable NO=not observe	ed		C	05=	con	recte	d on-si	te d
匚					Compliance Status	cos	R	WT] [
	IN	OUT	NA	NO	Supervision				П		IN	оит	N/
1	Ħ	0			Person in charge present, demonstrates knowledge, and performs duties	0	0	5	H	16	0	0	0
	IN	OUT	NA	NO	Employee Health					17	0	0	o
2	300	0			Management and food employee awareness; reporting	0	0		ı	\neg			
3	×	0			Proper use of restriction and exclusion	0	0	5	П		IN	OUT	N
	IN	ОИТ	NA	NO	Good Hygienic Practices				11	18	0	0	31
4	X	0		0	Proper eating, tasting, drinking, or tobacco use	0	0	5	11	19	0	0	0
5	黨	0		0	No discharge from eyes, nose, and mouth	0	0	0	П	20	245	0	0
	IN	OUT	NA	NO	Preventing Contamination by Hands				1	21	*	0	0
6	0	0		300	Hands clean and properly washed	0	0		Ιſ	22	0	0	Ø
7	0	0	0	×	No bare hand contact with ready-to-eat foods or approved alternate procedures followed	0	0	5	H	-	IN	OUT	N
8	X	0			Handwashing sinks properly supplied and accessible	0	0	2	l ľ		$\overline{}$	_	94
	IN	OUT	NA	NO	Approved Source				H	23	0	0	M
9	黨	0			Food obtained from approved source	0	0		П	П	IN	OUT	N
10	0	0	0	3%	Food received at proper temperature	0	0	1	l ľ	24	$\overline{}$	$\overline{}$	32
11	×	0			Food in good condition, safe, and unadulterated	0	0	5	П	24	0	0	64
12	0	0	×	0	Required records available: shell stock tags, parasite destruction	0	0		П		IN	оит	N
	IN	OUT	NA	NO	Protection from Contamination					25	0	0	10
13	黛	0	0		Food separated and protected	0	0	4	П	26	家	0	П
14	×	0	0		Food-contact surfaces: cleaned and sanitized	0	0	5	ıſ		IN	OUT	N/
15	Ħ	0			Proper disposition of unsafe food, returned food not re- served	0	0	2		27	0	0	M

_	Compliance Status					cos	R	WT
	IN	OUT	NA	NO	Cooking and Reheating of Time/Temperature Control For Safety (TCS) Foods			
16	0	0	0	黨	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	X	0	Proper cooling time and temperature	0	0	
19		0	0	文	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	OUT	NA	NO	Chemicals			
25		0	3%		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	×		Compliance with variance, specialized process, and HACCP plan	0	0	5

			GOO		
		OUT=not in compliance COS=corr			
		Compliance Status	COS	R	W
	OUT				
28	_	Pasteurized eggs used where required	0	0	1
29	0	Water and ice from approved source	0	0	2
30	0	Variance obtained for specialized processing methods	0	0	1
	OUT	Food Temperature Control			
31	0	Proper cooling methods used; adequate equipment for temperature control	0	0	2
32	0	Plant food properly cooked for hot holding	0	0	1
33	0	Approved thawing methods used	0	0	1
34	0	Thermometers provided and accurate	0	0	1
	OUT	Food Identification			
35	0	Food properly labeled; original container; required records available	0	0	1
	OUT	Prevention of Food Contamination			
36	0	Insects, rodents, and animals not present	0	0	2
37	0	Contamination prevented during food preparation, storage & display	0	0	1
38	0	Personal cleanliness	0	0	1
39	0	Wiping cloths; properly used and stored	0	0	1
40	0	Washing fruits and vegetables	0	0	1
	OUT	Proper Use of Utensils	-		
41	0	In-use utensils; properly stored	0	0	1
42	0	Utensils, equipment and linens; properly stored, dried, handled	0	0	1
43	0	Single-use/single-service articles; properly stored, used	0	0	1
44		Gloves used properly	0	Ö	-

		Compliance Status	cos	R	WT
	OUT	Utensiis and Equipment			
45	0	Food and nonfood-contact surfaces cleanable, properly designed, constructed, and used	0	0	1
46	0	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	2%	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	0	Current permit posted	0	0	0
56	0	Most recent inspection posted	0	0	۰
		Compliance Status	YES	NO	W
		Non-Smokers Protection Act			
57		Compliance with TN Non-Smoker Protection Act	0	巡	-
58		Tobacco products offered for sale	0	0	0
59		If tobacco products are sold, NSPA survey completed	0	0	

cuous manner. You have the right to request a l in (10) days of the date of the

D. Casoly

06/08/2023 Date Signatu 06/08/2023 Date

**** 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) RDA 629) 6153405620 Please call (to sign-up for a class.

TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



Establishment Information				
	E SPORTS CONCESSIO	N		
Establishment Number #: 605254	4439			
NSPA Survey – To be comple				
Age-restricted venue does not affirmative twenty-one (21) years of age or older.				
Age-restricted venue does not require e	ach person attempting to gain entr	ry to submit acceptable	form of identification.	
"No Smoking" signs or the international	"Non-Smoking" symbol are not cor	nspicuously posted at e	very entrance.	
Garage type doors in non-enclosed area	as are not completely open.			
Tents or awnings with removable sides	or vents in non-enclosed areas are	e not completely remove	ed or open.	
Smoke from non-enclosed areas is infilt	trating into areas where smoking is	prohibited.		
Smoking observed where smoking is pr	ohibited by the Act.			
Warewashing Info				
Machine Name	Sanitizer Type	PPM	Temperature (Fal	hrenheit)
Manual	QA			
Maridar	QΛ			
Equipment Temperature				
Description			Temperature (Fai	renhelt)
Chest freezer			-10	
Food Temperature				
Description		State of Food	Temperature (Fai	renhelt)
1		I	1	

Observed Violations	
otal #	
tepeated # 0	
3: Water damage ceiling tiled	
"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: MID STATE SPORTS CONCESSION

Establishment Number: 605254439

Comments/Other Observations

- 1: (IN): PIC demonstrates knowledge by having no violations of priority violations during current inspection.
- 2: Have a policy posted
- 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: Nobody working in the stand
- 7: (NO) No food workers present during the inspection.
- 8: (IN): All handsinks are properly equipped and conveniently located for food employee use.
- 9: See food source
- 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 is being done during inspection
- 17: (NO) No TCS foods reheated during inspection.
- 18: No cooling is done
- 19: (NO) TCS food is not being held hot during inspection.
- 20: See temperature on equipment. All TCS food frozen
- 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: "No Smoking" signs or the international "No Smoking" symbol are conspicuously posted at every entrance. 58:

Additional Comments

See last page for additional comments.

^{***}See page at the end of this document for any violations that could not be displayed in this space.

^{***}See page at the end of this document for any extra Additional Comments that could not be displayed in this space.

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Establishment Number: 605254439	
Comments/Other Observations (cont'd)	
Additional Comments (cont'd)	
See last page for additional comments.	

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Establishment Name: M Establishment Number #:	IID STATE SPORTS CO	NCESSION		
Establishment (Vallister II)	605254439			
Sources				
Source Type:	Water	Source:	City	
Source Type:	Food	Source:	Hashley and Sam's	
Source Type:		Source:		
Source Type:		Source:		
Source Type:		Source:		
Additional Comme	ents			