

City

### TENNESSEE DEPARTMENT OF HEALTH FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

SCORE

O Farmer's Market Food Unit Dixie Queen Permanent O Mobile Establishment Name Type of Establishment 1472 E. Shelby Dr. O Temporary O Seasonal Address Memphis Time in 03:15 PM AM / PM Time out 04:00: PM AM / PM

02/27/2024 Establishment # 605197621 Embargoed 0 Inspection Date

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

Risk Category О3 04

Number of Seats 36 Follow-up Required 级 Yes O No

# FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

10	¥=in c	ompli	ance		OUT=not in compliance NA=not applicable NO=not observ	ed		C	05=cc	жте	ch
					Compliance Status	cos	R	WT			
	IN	OUT	NA	NO	Supervisien					1	N
1	×	0			Person in charge present, demonstrates knowledge, and performs duties	0	0	5	16	8 (	0
	IN	OUT	NA	NO	Employee Health				17	1	Ō
2	ЭX	0			Management and food employee awareness; reporting	0	0			т	Т
3	×	0			Proper use of restriction and exclusion	0	0	5	Ш	ľ	N
	IN	ОИТ	NA	NO	Good Hygienic Practices				18	Ŧ	×
4	X	0		0	Proper eating, tasting, drinking, or tobacco use	0	0	5	15	913	
5	*	0		0	No discharge from eyes, nose, and mouth	0	0	0	20		1
Π	IN	OUT	NA	NO	Preventing Contamination by Hands	Preventing Contamination by Hands			21	iT (	٥
6	黨	0		0	Hands clean and properly washed	0	0		22	ء ا	0
7	氮	0	0	0	No bare hand contact with ready-to-eat foods or approved alternate procedures followed	0	0	5		1	N
8	0	26			Handwashing sinks properly supplied and accessible	0	0	2	23	۰٦	0
	IN	OUT	NA	NO	Approved Source				L=	1	_
9	黨	0			Food obtained from approved source	0	0			P	N
10	0	0	0	×	Food received at proper temperature	0	0		24	ء اه	×
11	×	0			Food in good condition, safe, and unadulterated	0	0	5	["	1.°	20
12	0	0	×	0	Required records available: shell stock tags, parasite destruction	0	0			1.	N
	IN	OUT	NA	NO	Protection from Contamination				25		Ō
13	黛	0	0		Food separated and protected	0	0	4	26	1	K
14	0	X	0		Food-contact surfaces: cleaned and sanitized	0	0	5			N
15	×	0			Proper disposition of unsafe food, returned food not re- served	0	0	2	27	1	0

	Compliance Status						R	WT
	IN	OUT	NA	NO	Cooking and Reheating of Time/Temperature Control For Safety (TCS) Foods			
16	0	0	0	寒	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	25	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	氮	0	0		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	X	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

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

			GOO		
		OUT=not in compliance COS=corr			
		Compliance Status	cos	R	W
	OUT	Caro i con amo i i mori			_
28	0	Pasteurized eggs used where required	0	0	١.
29	0		0	0	
30	0	Variance obtained for specialized processing methods	0	0	Ŀ
	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	X	Thermometers provided and accurate	0	0	Г
	OUT	Food Identification			
35	×	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	
37	0	Contamination prevented during food preparation, storage & display	0	0	
38	243	Personal cleanliness	0	0	Г
39	188	Wiping cloths; properly used and stored	0	0	
40	0	Washing fruits and vegetables	0	0	Г
	OUT	Proper Use of Utensils			Т
41	0	In-use utensils; properly stored	0	0	Г
42	0	Utensils, equipment and linens; properly stored, dried, handled	0	0	Г
43	0		0	0	Т
44	_	Gloves used properly	0	0	_

pecti	on	R-repeat (violation of the same code provision)			
		Compliance Status	COS	R	W
	OUT	Utensiis and Equipment			
45	0	Food and norfood-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	28	Toilet facilities: properly constructed, supplied, cleaned	0	0	1
52	0	Garbage/refuse properly disposed; facilities maintained	0	0	1
53	3%	Physical facilities installed, maintained, and clean	0	0	- 1
54	0	Adequate ventilation and lighting; designated areas used	0	0	1
	OUT	Administrative Items			
55	嶷	Current permit posted	0	0	-
56	张	Most recent inspection posted	0	0	`
		Compliance Status	YES	NO	W
		Non-Smokers Protection Act			
57		Compliance with TN Non-Smoker Protection Act	0	0	
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 h ten (10) days of the date of th

02/27/2024

Signature of Person In Charge

Date Signature of Environmental Health Specialist

02/27/2024 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: Dixie Queen				
Establishment Number #: 605197621				
NSPA Survey - To be completed if				
Age-restricted venue does not affirmatively rest twenty-one (21) years of age or older.	rict access to its buildings o	r facilities at all times to	persons who are	
Age-restricted venue does not require each per	son attempting to gain entr	y to submit acceptable f	orm of identification.	
"No Smoking" signs or the international "Non-Si	moking" symbol are not con	spicuously posted at ev	ery entrance.	
Garage type doors in non-enclosed areas are n	ot completely open.			
Tents or awnings with removable sides or vents	in non-enclosed areas are	not completely remove	d or open.	
Smoke from non-enclosed areas is infiltrating in	ito areas where smoking is	prohibited.		
Smoking observed where smoking is prohibited	by the Act.			
Warewashing Info	- 4 -		1=	
Machine Name	Sanitizer Type	PPM	Temperature ( Fah	renneit)
Equipment Temperature				
Description			Temperature ( Fahi	enhelt)
			_	
Food Temperature				
Description				
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2 de la constantina della cons		State of Food	Temperature ( Fah	renhelt)
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		State of Food	Temperature ( Fahi	renheit)

Observed Violations							
Observed Violations							
Total # 11 Repeated # 0							
8: Violation not corrected							
No hand soap at hand sink							
14: Violation not corrected							
Cutting board on prep cooler excessively worn							
21: Violation not corrected							
Date marking on TCS foods in walk cooler							
34: No thermometer observed in walk in cooler							
35: No labels on food containers in walk in cooler							
38: Male employee not wearing beard guard while prepping food							
39: Wiping cloth's improperly stored in hand sink, on prep cooler							
51: Restroom not clean							
53: Floor, cooking equipment, and walls not clean							
55: Current permit not posted							
56: Current inspection not posted							
30. Current inspection not posted							

<sup>&</sup>quot;"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: Dixie Queen	
Establishment Number: 605197621	
Establishment Hamber: 003137021	

Comments/Other Observations	
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Additional	Comments

See last page for additional comments.

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

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

Establishment Information	
Establishment Name: Dixie Queen	
Establishment Number: 605197621	
Comments/Other Observations (cont'd)	
Additional Comments (cont'd)	
See last page for additional comments.	
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Establishment Information							
Establishment Name: Dixie Queen							
Establishment Number #: 605197621	Establishment Number #: 605197621						
Sources							
Source Type:	Source:						
Source Type:	Source:						
Source Type:	Source:						
Source Type:	Source:						
Source Type:	Source:						
Additional Comments							
Violations not corrected, Follow up within 5 days							
Jraffanti5@gmail.com							