

Address

City

TENNESSEE DEPARTMENT OF HEALTH FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

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O Farmer's Market Food Unit **SOUTHERN HANDS** Permanent O Mobile Establishment Name Type of Establishment 1811 KIRBY PARKWAY O Temporary O Seasonal Germantown

Time in 05:10 PM AM / PM Time out 05:20; PM

Embargoed 000 07/19/2022 Establishment # 605261400 Inspection Date

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

Number of Seats 42 Risk Category О3 04 Follow-up Required O Yes 疑 No

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

12	¥=in c	ompli	ance		OUT=not in compliance NA=not applicable NO=not observ	ed		0	05=	con	recte	d on-si	te
					Compliance Status	cos	R	WT	1 [
	IN	OUT	NA	NO	Supervision				П		IN	оит	1
1	Ħ	0			Person in charge present, demonstrates knowledge, and performs duties	0	0	5	H	16	0	0	H
	IN	OUT	NA	NO	Employee Health					17		O	Т
2	300	0			Management and food employee awareness; reporting	0	0	$\overline{}$	ır	\neg			Г
3	×	0			Proper use of restriction and exclusion	0	0	5	П		IN	OUT	1
	IN	OUT	NA	NO	Good Hygienic Practices				Ιŀ	18	0	0	Г
4	X	0		0	Proper eating, tasting, drinking, or tobacco use	0	0	5	ΙĒ	19	文	0	П
5	滋	0		0	No discharge from eyes, nose, and mouth	0	0	l °	l li	20	24	0	П
	IN	OUT	NA	NO	Preventing Contamination by Hands					21	*	0	Г
6	黨	0		0	Hands clean and properly washed	0	0		ΙŒ	22	0	0	9
7	938	0	0	0	No bare hand contact with ready-to-eat foods or approved	0	0	5	ΙĽ	"	_	_	1
Ľ	500		_	_	alternate procedures followed	_	_		JE		IN	OUT	١
8	- XX	0			Handwashing sinks properly supplied and accessible	0	0	2	I F	23	0	0	9
	_	OUT	NA	NO	Approved Source		_		ı Ľ		_	_	L°
9	黨	0			Food obtained from approved source	0	0		П		IN	OUT	N
10	0	0	0	×	Food received at proper temperature	0	0		ΙF	24	0	0	5
11	×	0			Food in good condition, safe, and unadulterated	0	0	5	ΙĽ	-	U	١ ٠	ľ
12	0	0	Ж	0	Required records available: shell stock tags, parasite destruction	0	0		П	П	IN	оит	,
	IN	OUT	NA	NO	Protection from Contamination					25	0	0	\Box
13	黛	0	0		Food separated and protected	0	0	4		26	2	0	
14	×	0	0		Food-contact surfaces: cleaned and sanitized	0	0	5	П		IN	OUT	١
15	涎	0			Proper disposition of unsafe food, returned food not re- served	0	0	2		27	0	0	8

					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	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	凝	0	0		Proper cold holding temperatures	0	0	5
21	*	0	0	0	Proper date marking and disposition	0	0	1
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	3%		Food additives: approved and properly used	0	0	5
26	黨	0			Toxic substances properly identified, stored, used	0	0	•
	IN	OUT	NA	NO	Conformance with Approved Procedures			
27	0	0	×		Compliance with variance, specialized process, and HACCP plan	0	0	5

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

		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	-
	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	
34	0	Thermometers provided and accurate	0	0	г
	OUT	Food Identification			
35	×	Food properly labeled; original container; required records available	0	氮	
	OUT	Prevention of Food Contamination			
36	涎	Insects, rodents, and animals not present	0	0	:
37	0	Contamination prevented during food preparation, storage & display	0	0	ŀ
38	245	Personal cleanliness	0	踩	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	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	г
44	10	Gloves used properly	0	0	

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	0	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	- 3
51	0	Toilet facilities: properly constructed, supplied, cleaned	0	0	
52	0	Garbage/refuse properly disposed; facilities maintained	0	0	٠
53	3%	Physical facilities installed, maintained, and clean	0	0	-
54	羅	Adequate ventilation and lighting; designated areas used	0	0	
	OUT	Administrative Items	П		
55	0	Current permit posted	0	0	П
56	张	Most recent inspection posted	0	0	
		Compliance Status	YES	NO	8
		Non-Smokers Protection Act			
57		Compliance with TN Non-Smoker Protection Act	0	0	
58		Tobacco products offered for sale	0	0	١ ١
59		If tobacco products are sold, NSPA survey completed	0	0	

You have the right to request a h n (10) days of the date of the

07/19/2022

Signature of Person In Charge

Date Signature of Environmental Health Specialist

07/19/2022 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) 9012229200 Please call (to sign-up for a class.

TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



Establishment Information						
Establishment Name: SOUTHERN HA						
Establishment Number #: [605261400						
NSPA Survey - To be completed if						
Age-restricted venue does not affirmatively rest 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 r	not completely removed o	or open.			
Smoke from non-enclosed areas is inflitrating in	nto areas where smoking is p	rohibited.				
Smoking observed where smoking is prohibited	by the Act.					
Warewashing Info						
Machine Name	Sanitizer Type	PPM	Temperature (Fah	renheit)		
Equipment Temperature						
Description			Temperature (Fahr	enhelf)		
5 17			1			
Food Temperature						
Description		-11				
		State of Food	Temperature (Fahr	enheit)		

Observed Violations
Total # 8
Repeated # ()
35: Food removed from original packaging is missing label with common name 36: Outer openings not protected to prevent entry of pests. The back door is not self-closing or tight-fitting.
38: Effective hair restraints not worn by all employees handling food 53: Hot water knob on front hand sink needs repair.
53: Floor by the back door and near drains of 3 compartment sink needs cleaning. Mop sink has build up of grime. 54: Light above fryer out
54: Employee phone stored on a cutting board next to hot holding line. Personal items must be stored in a designated area to prevent cross contamination. 56: Recent routinr inspection not posted

^{***}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



Comments/Other Observations E Foods are properly stored in the freezer. Raw chicken is properly stored. I cle machine violation has been corrected	
Ecomments/Other Observations Example 2: Exa	
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**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 con	nments.		
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^{***}See page at the end of this document for any extra Additional Comments that could not be displayed in this space.

Establishment Name: SOUTHERN HANDS	
Establishment Number: 605261400	
Comments/Other Observations (cont'd)	
Additional Comments (cont'd)	
See last page for additional comments.	

Establishment Information

Establishment Information					
Establishment Name: SOUTHERN HANDS					
Establishment Number # 605261400					
Sources					
Source Type:	Source:				
Source Type:	Source:				
Source Type:	Source:				
Source Type:	Source:				
Source Type:	Source:				
Additional Comments					