

Establishment Name

Inspection Date

Risk Category

Address

City

## TENNESSEE DEPARTMENT OF HEALTH FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

O Farmer's Market Food Unit

Permanent O Mobile

Type of Establishment

O Temporary O Seasonal

O Yes 疑 No

SCORE

Number of Seats 50

02/12/2024 Establishment # 605065220 Embargoed 0

Follow-up Required

Time in 09:30 AM AM / PM Time out 10:13; AM

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

ase Control and Prevention

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

#### ited compliance status (IN, OUT, NA, HO) for

OUT=not in compl IN-in compliance NA=not ap COS R WT Compliance Status IN OUT NA NO Supervision Person in charge present, demonstrates knowledge, and 製し 0 0 5 performs duties IN OUT NA NO **Employee Health** 2 X O Management and food employee awareness; reporting 0 0 3 🕱 O Proper use of restriction and exclusion 0 0 IN OUT NA NO **Good Hygienic Practices** 4 嵐 O 5 嵐 O Proper eating, tasting, drinking, or tobacco use 0 0 O No discharge from eyes, nose, and mouth IN OUT NA NO Preventing Contamination by Ha O Hands clean and properly washed 6 🕸 O 0 0 No bare hand contact with ready-to-eat foods or approved 0 0 製り 0 0 alternate procedures followed 8 🐹 O IN OUT NA NO Handwashing sinks properly supplied and accessible 0 0 2 Approved Source 9 🕱 O 0 0 Food obtained from approved source 10 O O O 0 0 Food received at proper temperature Food in good condition, safe, and unadulterated Required records available: shell stock tags, parasite 0 12 O O 🐹 0 0 destruction IN OUT NA NO **Protection from Contamination** 0 0 4 (2) (0) (2) Food separated and protected 14 寒 O O Food-contact surfaces: cleaned and sanitized 0 0 5 Proper disposition of unsafe food, returned food not re 15 夏 O 0 0 2

W A Wright Elementary Cafeteria

12635 Lebanon Rd.

Mt. Juliet

served

	Compliance Status		000	К	**1			
	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	
17	0	0	0	3%	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	0.00	0	0		Proper cold holding temperatures	0	0	5
21	*	0	0	0	Proper date marking and disposition	0	0	•
22	0	0	0	氮	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	- XX		Food additives: approved and properly used	0	0	5
26	0.0	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

#### od Retail Practices are preventive m trol the introduction of pathogens, chemicals, and physical objects into foods.

	G00	D R	a/.\		
		OUT=not in compliance COS=corr			
		Compliance Status	cos	R	WT
	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	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	級	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	10	Gloves used properly	0	0	1

spect	ion	R-repeat (violation of the same code provision)	)		
		Compliance Status	COS	R	WT
	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		O 2	
48	0	Hot and cold water available; adequate pressure	0	0	
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	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	0	Current permit posted	0	0	0
56	0	Most recent inspection posted	0	0	۰
		Compliance Status	YES	NO	WT
Non-Smokers Protection Act					
57		Compliance with TN Non-Smoker Protection Act	- X	0	
58		Tobacco products offered for sale	0	0	0
59		If tobacco products are sold, NSPA survey completed	0	0	

on report in a conspicuous manner. You have the right to request a h ten (10) days of the date of th 68-14-709, 68-14-711, 68-14-715, 68-14-716, 4-5-320

02/12/2024

ntal Health Specialist

02/12/2024

Signature of Person In Charge

\*\*\*\* 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 ) 6154445325 Please call ( to sign-up for a class.

Date

Date

#### TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



### Establishment Information

Establishment Name: W A Wright Elementary Cafeteria
Establishment Number # | 605065220

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.	$\top$
Smoke from non-enclosed areas is infiltrating into areas where smoking is prohibited.	$\vdash$
Smoking observed where smoking is prohibited by the Act.	$\vdash$

Warewashing Info							
Machine Name	Sanitizer Type	PPM	Temperature ( Fahrenheit)				
Hobart	Heat		170				
Bucket	QA	200					

Equipment Temperature				
Description	Temperature (Fahrenheit)			
Wic	37			
Wif	-4			
True ric	40			

Food Temperature						
Description	State of Food	Temperature ( Fahrenheit)				
Gravy	Hot Holding	139				
Chicken nuggets	Cooking	177				
Corn	Hot Holding	163				
Sliced turkey	Cold Holding	41				
Milk	Cold Holding	41				
Salsa	Cold Holding	39				

Observed Violations
Total # 2
Repeated # ()
37: Box of cheese stuffed bread sticks stored in floor in wif. Moved during
inspection
53: Black substance leaking from ceiling in a couple of spots in dry storage

\*\*\*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: W A Wright Elementary Cafeteria

Establishment Number: 605065220

## Comments/Other Observations

- 1: (IN): ANSI Certified Manager present.
- 2: Discussed policy with pic
- 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: Employees washed hands when returning from break
- 7: (IN) Employees are observed using suitable utensils or gloves to prevent bare hand (or arm) contact with ready-to-eat foods.
- 8: (IN): All handsinks are properly equipped and conveniently located for food employee use.
- 9: See source info
- 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: See food temps
- 17: (NO) No TCS foods reheated during inspection.
- 18: No food being cooled during inspection
- 19: See food temps
- 20: See food temps
- 21: (IN) Verified date marking system in place for all ready-to-eat TCS foods that are held longer than 24 hours.
- 22: (NO) Time as a public health control is not being used during the inspection.
- 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:

58:

## 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.

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Establishment Name: W A Wright Elementary Cafeteria					
Establishment Number: 605065220					
Comments/Other Observations (cont'd)					
Additional Comments (cont'd)					
See last page for additional comments.					
See last page for additional comments.					

Establishment Information

Establishment Information								
Establishment Name: W A Wright Elementary Cafeteria								
Establishment Number #:	605065220			il i				
Sources								
Source Type:	Food	Source:	IWC, Purity					
Source Type:	Water	Source:	City					
Source Type:		Source:						
Source Type:		Source:						
Source Type:		Source:						
Additional Comme	nts							