



TENNESSEE DEPARTMENT OF HEALTH FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

SCORE

100

Establishment Name Lebanon High School Cafeteria Type of Establishment ☒ Farmer's Market Food Unit
☒ Permanent ☐ Mobile
Address 500 Blue Devil Blvd.
☐ Temporary ☐ Seasonal
City Lebanon Time in 11:09 AM AM / PM Time out 12:07 PM AM / PM
Inspection Date 01/26/2024 Establishment # 605223105 Embargoed 0
Purpose of Inspection ☒ Routine ☐ Follow-up ☐ Complaint ☐ Preliminary ☐ Consultation/Other
Risk Category ☐ 1 ☒ 2 ☐ 3 ☐ 4 Follow-up Required ☐ Yes ☒ No Number of Seats _____

Risk Factors are food preparation practices and employee behaviors most commonly reported to the Centers for Disease Control and Prevention as contributing factors in foodborne illness outbreaks. Public Health interventions are control measures to prevent illness or injury.

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

(Mark designated compliance status (IN, OUT, NA, NO) for each numbered item. For items marked OUT, mark COS or R for each item as applicable. Deduct points for category or subcategory.)

IN=In compliance OUT=not in compliance NA=not applicable NO=not observed COS=corrected on-site during inspection R=repeat (violation of the same code provision)					Compliance Status			COS R WT		
Supervision					Compliance Status			COS R WT		
1	IN	OUT	NA	NO	Person in charge present, demonstrates knowledge, and performs duties					5
Employee Health					Cooking and Reheating of Time/Temperature Control For Safety (TCS) Foods			COS R WT		
2	IN	OUT	NA	NO	Management and food employee awareness, reporting					5
3	IN	OUT	NA	NO	Proper use of restriction and exclusion					5
Good Hygienic Practices					Cooling and Holding, Date Marking, and Time as a Public Health Control			COS R WT		
4	IN	OUT	NA	NO	Proper eating, tasting, drinking, or tobacco use					5
5	IN	OUT	NA	NO	No discharge from eyes, nose, and mouth					5
Preventing Contamination by Hands					Consumer Advisory			COS R WT		
6	IN	OUT	NA	NO	Hands clean and properly washed					5
7	IN	OUT	NA	NO	No bare hand contact with ready-to-eat foods or approved alternate procedures followed					5
8	IN	OUT	NA	NO	Handwashing sinks properly supplied and accessible					2
Approved Source					Highly Susceptible Populations			COS R WT		
9	IN	OUT	NA	NO	Food obtained from approved source					5
10	IN	OUT	NA	NO	Food received at proper temperature					5
11	IN	OUT	NA	NO	Food in good condition, safe, and unadulterated					5
12	IN	OUT	NA	NO	Required records available: shell stock tags, parasite destruction					5
Protection from Contamination					Chemicals			COS R WT		
13	IN	OUT	NA	NO	Food separated and protected					4
14	IN	OUT	NA	NO	Food-contact surfaces: cleaned and sanitized					5
15	IN	OUT	NA	NO	Proper disposition of unsafe food, returned food not re-served					2
16	IN	OUT	NA	NO	Proper cooking time and temperatures					5
17	IN	OUT	NA	NO	Proper reheating procedures for hot holding					5
18	IN	OUT	NA	NO	Proper cooling time and temperature					5
19	IN	OUT	NA	NO	Proper hot holding temperatures					5
20	IN	OUT	NA	NO	Proper cold holding temperatures					5
21	IN	OUT	NA	NO	Proper date marking and disposition					5
22	IN	OUT	NA	NO	Time as a public health control: procedures and records					5
23	IN	OUT	NA	NO	Consumer advisory provided for raw and undercooked food					4
24	IN	OUT	NA	NO	Pasteurized foods used; prohibited foods not offered					5
25	IN	OUT	NA	NO	Food additives: approved and properly used					5
26	IN	OUT	NA	NO	Toxic substances properly identified, stored, used					5
27	IN	OUT	NA	NO	Compliance with variance, specialized process, and HACCP plan					5

Good Retail Practices are preventive measures to control the introduction of pathogens, chemicals, and physical objects into foods.

OUT=not in compliance COS=corrected on-site during inspection R=repeat (violation of the same code provision)					Compliance Status			COS R WT		
Safe Food and Water					Compliance Status			COS R WT		
28	OUT				Pasteurized eggs used where required					1
29	OUT				Water and ice from approved source					2
30	OUT				Variance obtained for specialized processing methods					1
Food Temperature Control					Physical Facilities			COS R WT		
31	OUT				Proper cooling methods used; adequate equipment for temperature control					2
32	OUT				Plant food properly cooked for hot holding					1
33	OUT				Approved thawing methods used					1
34	OUT				Thermometers provided and accurate					1
Food Identification					Administrative Items			COS R WT		
35	OUT				Food properly labeled; original container; required records available					1
Prevention of Food Contamination					Compliance Status			YES NO WT		
36	OUT				Insects, rodents, and animals not present					2
37	OUT				Contamination prevented during food preparation, storage & display					1
38	OUT				Personal cleanliness					1
39	OUT				Wiping cloths: properly used and stored					1
40	OUT				Washing fruits and vegetables					1
Proper Use of Utensils					Non-Smokers Protection Act			COS R WT		
41	OUT				In-use utensils; properly stored					1
42	OUT				Utensils, equipment and linens; properly stored, dried, handled					1
43	OUT				Single-use/single-service articles; properly stored, used					1
44	OUT				Gloves used properly					1
45	OUT				Food and nonfood-contact surfaces cleanable, properly designed, constructed, and used					1
46	OUT				Warewashing facilities; installed, maintained, used, test strips					1
47	OUT				Nonfood-contact surfaces clean					1
48	OUT				Hot and cold water available; adequate pressure					2
49	OUT				Plumbing installed; proper backflow devices					2
50	OUT				Sewage and waste water properly disposed					2
51	OUT				Toilet facilities: properly constructed, supplied, cleaned					1
52	OUT				Garbage/refuse properly disposed; facilities maintained					1
53	OUT				Physical facilities installed, maintained, and clean					1
54	OUT				Adequate ventilation and lighting; designated areas used					1
55	OUT				Current permit posted					0
56	OUT				Most recent inspection posted					0
57	OUT				Compliance with TN Non-Smoker Protection Act					0
58	OUT				Tobacco products offered for sale					0
59	OUT				If tobacco products are sold, NSPA survey completed					0

Failure to correct any violations of risk factor items within ten (10) days may result in suspension of your food service establishment permit. Repeated violation of an identical risk factor may result in revocation of your food service establishment permit. Items identified as constituting imminent health hazards shall be corrected immediately or operations shall cease. You are required to post the food service establishment permit in a conspicuous manner and post the most recent inspection report in a conspicuous manner. You have the right to request a hearing regarding this report by filing a written request with the Commissioner within ten (10) days of the date of this report. T.C.A. sections 68-14-703, 68-14-706, 68-14-709, 68-14-711, 68-14-715, 68-14-716, 4-5-329.

Signature of Person In Charge [Signature] Date 01/26/2024 Signature of Environmental Health Specialist [Signature] Date 01/26/2024

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

Establishment Number #: 605223105

Smoking observed where smoking is prohibited by the Act.

Machine Name	Sanitizer Type	PPM	Temperature (Fahrenheit)
Sani Bucket Hobart	Quat	400	185

Description	Temperature (Fahrenheit)
Milk RIC	39
Delfield RIC	36
Delfield Warmer	189
Delfield RIC #2	35

Description	State of Food	Temperature (Fahrenheit)
Salad Mix	Cold Holding	43
Canned Pineapples	Cold Holding	54
Chocolate Milk	Cold Holding	43
Cheese Pizza	Hot Holding	140
Sloppy Joe Meat	Hot Holding	160

TENNESSEE DEPARTMENT OF HEALTH
DIVISION OF ENVIRONMENTAL HEALTH
FOOD INSPECTION DATA



Establishment Information

Establishment Name: Lebanon High School Cafeteria

Establishment Number : 605223105

Comments/Other Observations

- 1: (IN): ANSI Certified Manager present.
- 2: Establishment has employee illness policy
- 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:
- 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 sources
- 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 foods observed being cooked during inspection
- 17: (NO) No TCS foods reheated during inspection.
- 18: No foods observed being cooled during inspection
- 19: See temps
- 20: See 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:
- 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:

***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 comments.

***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: Lebanon High School Cafeteria

Establishment Number : 605223105

Comments/Other Observations (cont'd)**Additional Comments (cont'd)*****See last page for additional comments.***

Establishment Information

Establishment Name: Lebanon High School Cafeteria

Establishment Number #:	605223105
-------------------------	-----------

Sources

Source Type:	Water
--------------	-------

Source: City

Source Type:	Food
--------------	------

Source: IWC PURITY PEPSI

Source Type:

Source:

Source Type:

Source:

Source Type:

Source:

Additional Comments