

Purpose of Inspection

Risk Category

**E**Routine

## TENNESSEE DEPARTMENT OF HEALTH FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

SCORE

O Farmer's Market Food Unit **Donut Time** Remanent O Mobile Establishment Name Type of Establishment 102 C Hartman Dr O Temporary O Seasonal Address Lebanon Time in 09:12 AM AM / PM Time out 09:47: AM AM / PM City 02/16/2022 Establishment # 605259750 Embargoed 0 Inspection Date

O Complaint

О3

Number of Seats 16

O Preliminary

O Consultation/Other

Follow-up Required

# FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

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

| IN-in compliance OUT-not in compliance NA-not applicable NO-not observed |                   |     |    |    |   | X |   |        |
|--|-------------------|-----|----|----|---|---|---|--------|
|  | Compliance Status |     |    |    |   |   | R | WT     |
|  | IN                | OUT | NA | NO | Supervision   |   |   |        |
| 1  | 邕                 | 0   |    |    | Person in charge present, demonstrates knowledge, and<br>performs duties                  |   | 0 | 5      |
|  | IN                | OUT | NA | NO | Employee Health   |   |   |        |
| 2  | $\square X$       | 0   |    |    | Management and food employee awareness; reporting   | 0 | 0 |        |
| 3  | ×                 | 0   |    |    | Proper use of restriction and exclusion   |   | 0 | 5      |
|  | IN                | OUT | NA | NO | Good Hygienic Practices   |   |   |        |
| 4  | X                 | 0   |    | 0  | Proper eating, tasting, drinking, or tobacco use  | 0 | 0 | 5      |
| 5  | *                 | 0   |    | 0  | No discharge from eyes, nose, and mouth   | 0 | 0 | °      |
|  | IN                | OUT | NA | NO | Preventing Contamination by Hands   |   |   |        |
| 6  | 黨                 | 0   |    | 0  | Hands clean and properly washed   | 0 | 0 |        |
| 7  | 釵                 | 0   | 0  | 0  | No bare hand contact with ready-to-eat foods or approved<br>alternate procedures followed | 0 | 0 | 5      |
| 8  | *                 | 0   |    |    | Handwashing sinks properly supplied and accessible  | 0 | 0 | 2      |
|  | IN                | OUT | NA | NO | Approved Source   |   |   |        |
| 9  | 黨                 | 0   |    |    | Food obtained from approved source  | 0 | 0 | $\Box$ |
| 10   | 0                 | 0   | 0  | ×  | Food received at proper temperature   | 0 | 0 |        |
| 11   | ×                 | 0   |    |    | Food in good condition, safe, and unadulterated   | 0 | 0 | 5      |
| 12   | 0                 | 0   | ×  | 0  | Required records available: shell stock tags, parasite<br>destruction                     | 0 | 0 |        |
|  | IN                | OUT | NA | NO | Protection from Contamination   |   |   |        |
| 13   | 黛                 | 0   | 0  |    | Food separated and protected  | 0 | 0 | 4      |
| 14   | ×                 | 0   | 0  |    | Food-contact surfaces: cleaned and sanitized  | 0 | 0 | 5      |
| 15   | Ħ                 | 0   |    |    | Proper disposition of unsafe food, returned food not re-<br>served                        | 0 | 0 | 2      |

O Follow-up

|    | Compliance Status |     |     |     |   |   |   | WT |
|----|-------------------|-----|-----|-----|---|---|---|----|
|    | IN                | оит | NA  | NO  | Cooking and Reheating of Time/Temperature<br>Control For Safety (TCS) Foods |   |   |    |
| 16 |                   | 0   | 0   | 寒   | Proper cooking time and temperatures  | 0 | 0 | 5  |
| 17 | 0                 | 0   | 300 | 0   | Proper reheating procedures for hot holding                                 | 0 | 0 | ٠  |
|    | IN                | оит | NA  | NO  | Cooling and Holding, Date Marking, and Time as<br>a Public Health Control   |   |   |    |
| 18 | ×                 | 0   | 0   | 0   | Proper cooling time and temperature   | 0 | 0 |    |
| 19 |                   | 0   | 文   | 0   | Proper hot holding temperatures   | 0 | 0 |    |
| 20 |                   | 0   | 0   | L.  | Proper cold holding temperatures  | 0 | 0 | 5  |
| 21 | 0                 | 0   | 0   | 200 | 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<br>food                  | 0 | 0 | 4  |
|    | IN                | OUT | NA  | NO  | Highly Susceptible Populations  |   |   |    |
| 24 | 0                 | 0   | 335 |     | Pasteurized foods used; prohibited foods not offered                        | 0 | 0 | 5  |
|    | IN                | оит | NA  | NO  | Chemicals   |   |   |    |
| 25 |                   | 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<br>HACCP plan            | 0 | 0 | 5  |

O Yes 疑 No

### trol 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 mon   |     |   |     |  |
| 28 | 0   | Pasteurized eggs used where required                                       | 0   | 0 | 1   |  |
| 29 | 0   |  | 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<br>control | 0   | 0 | 1   |  |
| 32 | 0   | Plant food properly cooked for hot holding                                 | 0   | 0 | 1   |  |
| 33 | 0   | Approved thawing methods used  | 0   | 0 | ,   |  |
| 34 | 0   | Thermometers provided and accurate   | 0   | 0 | Ī   |  |
|    | OUT | Food Identification  |     |   |     |  |
| 35 | ×   | Food properly labeled; original container; required records available      | 0   | 0 | ,   |  |
|    | 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 | 1   |  |
| 38 | 0   | Personal cleanliness   | 0   | 0 | r   |  |
| 39 | 0   | Wiping cloths; properly used and stored                                    | 0   | 0 | Ŀ   |  |
| 40 | 0   | Washing fruits and vegetables  | 0   | 0 | ļ . |  |
|    | OUT | UT Proper Use of Utensils  |     |   |     |  |
| 41 | 0   | In-use utensils; properly stored   | 0   | 0 | Γ.  |  |
| 42 | 0   | Utensils, equipment and linens; properly stored, dried, handled            | 0   | 0 |     |  |
| 43 | 0   |  | 0   | 0 | r   |  |
| 44 |     | Gloves used properly   | 0   | 0 |     |  |

|    |     | Compliance Status  | COS | R  | W   |
|----|-----|--|-----|----|-----|
|    | OUT | Utensiis and Equipment   |     |    |     |
| 45 | 0   | Food and nonfood-contact surfaces cleanable, properly designed,<br>constructed, and used | 0   | 0  | 1   |
| 46 | 题   | 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  | 7   |
| 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   | Т   |    |     |
| 55 | 0   | Current permit posted  | 0   | 0  | Г   |
| 56 | 0   | Most recent inspection posted  | 0   | 0  | ,   |
|    |     | Compliance Status  | YES | NO | W   |
|    |     | Non-Smokers Protection Act   |     |    |     |
| 57 |     | Compliance with TN Non-Smoker Protection Act   | 180 | 0  |     |
| 58 |     | Tobacco products offered for sale  | 0   | 0  | ١   |
| 59 |     | If tobacco products are sold, NSPA survey completed                                      | 0   | 0  |     |

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

02/16/2022

02/16/2022

ure of Environmental Health Specialist

Date

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

Date

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



| Establishment Information          |  |
|------------------------------------|--|
| Establishment Name: Donut Time     |  |
| Establishment Number #: 1605259750 |  |

| 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.  |  |
| Smoke from non-enclosed areas is infiltrating into areas where smoking is prohibited.   |  |
| Smoking observed where smoking is prohibited by the Act.  |  |

| Warewashing Info |                |     |                           |  |  |
|------------------|----------------|-----|---------------------------|--|--|
| Machine Name     | Sanitizer Type | PPM | Temperature ( Fahrenheit) |  |  |
|                  |                |     |                           |  |  |
|                  |                |     |                           |  |  |
|                  |                |     |                           |  |  |
|                  |                |     |                           |  |  |

| Equipment Temperature |                           |  |  |  |
|-----------------------|---------------------------|--|--|--|
| Description           | Temperature ( Fahrenheit) |  |  |  |
| Ric                   | 39                        |  |  |  |
| Rif                   | -8                        |  |  |  |
|                       |                           |  |  |  |
|                       |                           |  |  |  |
|                       |                           |  |  |  |

| Food Temperature |               |                           |  |  |  |
|------------------|---------------|---------------------------|--|--|--|
| Description      | State of Food | Temperature ( Fahrenheit) |  |  |  |
| Sausage          | Cold Holding  | 40                        |  |  |  |
| Eggs ric 3 hrs   | Cooling       | 48                        |  |  |  |
|                  |               |                           |  |  |  |
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| Observed Violations                                |  |  |  |  |  |  |
|--|--|--|--|--|--|--|
| Total # B  |  |  |  |  |  |  |
| Repeated # ()                                      |  |  |  |  |  |  |
| 35: Containers of icings and sprinkles not labeled |  |  |  |  |  |  |
| 46: 3 comp sink missing drain boards               |  |  |  |  |  |  |
| 53: Hole in wall near oven                         |  |  |  |  |  |  |
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<sup>\*\*\*</sup>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: Donut Time Establishment Number: 605259750

### Comments/Other Observations

- 1: (IN): PIC demonstrates knowledge by correctly answering questions regarding principles applicable to the food operation.
- 2: (IN): An employee health policy is available.
- 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: Employee washed hands when changing gloves
- 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: (NO) No raw animal foods cooked during inspection.
- 17: (NA) No TCS foods reheated for hot holding.
- 18: See food temps
- 19: (NA) Establishment does not hot hold TCS foods.
- 20: See food temps
- 21: (NO) There are no foods requiring date marking in the facility at the time of the inspection.
- 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:

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.

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

| Establishment Name: Donut Time         |  |  |
|--|--|--|
| Establishment Number: 605259750        |  |  |
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| Comments/Other Observations (cont'd)   |  |  |
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| Additional Comments (cont'd)           |  |  |
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| See last page for additional comments. |  |  |
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Establishment Information

## Establishment Information Establishment Name: **Donut Time** Establishment Number # 605259750 Sources Source Type: Water Source: City Source Type: Food Source: Dawn, IWC, Walmart, Bakemark Source Type: Source: Source Type: Source: Source: Source Type: **Additional Comments**