

Address

Risk Category

City

TENNESSEE DEPARTMENT OF HEALTH FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

SCORE

Number of Seats 90

O Farmer's Market Food Unit Rafael's Remanent O Mobile Establishment Name Type of Establishment 9607 Dayton Pike O Temporary O Seasonal Soddy Daisy Time in 11:15; AM AM/PM Time out 12:00; PM AM/PM

11/29/2023 Establishment # 605096302 Embargoed 0 Inspection Date **K**Routine O Follow-up O Complaint O Preliminary O Consultation/Other Purpose of Inspection

О3

Follow-up Required

115	¥=in c	ompli	ance		OUT=not in compliance NA=not applicable NO=not observe	ed		0
					Compliance Status	cos	R	WT
	IN	оит	NA	NO	Supervision			
1	1 嵐 0			Person in charge present, demonstrates knowledge, and performs duties	0	0	5	
	IN	OUT	NA	NO	Employee Health			
2 0 0			Management and food employee awareness; reporting	0	0			
3	寒	0			Proper use of restriction and exclusion	0	0	۰
	IN	OUT	NA	NO	Good Hygienic Practices			
4	*	0		0	Proper eating, tasting, drinking, or tobacco use	0	0	
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	왮	0	0	0	No bare hand contact with ready-to-eat foods or approved alternate procedures followed	0	0	5
8	×				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	
10	0	0	0	×	Food received at proper temperature	0	0	1
11	×	0			Food in good condition, safe, and unadulterated	0	0	5
12	0	0	×	0	Required records available: shell stock tags, parasite destruction	0	0	
	IN	OUT	NA	NO	Protection from Contamination			
13	0	100	0		Food separated and protected		0	4
14	×	0	0		Food-contact surfaces: cleaned and sanitized		0	5
15	涎	0			Proper disposition of unsafe food, returned food not re-		0	2

					Compliance Status	COS	R	WT
	IN	OUT	NA	NO	Cooking and Reheating of Time/Temperature Control For Safety (TCS) Foods			
16		0	0	黨	Proper cooking time and temperatures	0	0	5
17	8	0	0	0	Proper reheating procedures for hot holding	0	0	,
	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	文	Proper hot holding temperatures	0	0	
20	24	0	0		Proper cold holding temperatures	0	0	5
21	*	0	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	0	0	×		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	2	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

级 Yes O No

trol the introduction of pathogens, chemicals, and physical objects into foods.

L PRACTICES

	OUT=not in compliance COS=correct						
		Compliance Status	cos	R	W		
	OUT						
28	0	Pasteurized eggs used where required	0	0	٠		
29		Water and ice from approved source	0	0			
30	0	Variance obtained for specialized processing methods	0	0	Ľ		
	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	7		
34	0	Thermometers provided and accurate	0	0	г		
	OUT	Food Identification					
35	0	Food properly labeled; original container; required records available	0	0	,		
	OUT	Prevention of Feed Contamination					
36	0	Insects, rodents, and animals not present	0	0	1		
37	885	Contamination prevented during food preparation, storage & display	0	0	1		
38	0	Personal cleanliness	0	0	г		
39	0	Wiping cloths; properly used and stored	0	0			
40	0	Washing fruits and vegetables	0	0			
	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	Г		
43	0	Single-use/single-service articles; properly stored, used	0	0	r		
44	0	Gloves used properly	0	0	_		

Signature of Person In Charge

pecti	2011	R-repeat (violation of the same code provision) Compliance Status	cos	R	W
	OUT	Utensils and Equipment	1		
45	M	Food and nonfood-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	-
	OUT	Physical Facilities	_		
48	0	Hot and cold water available; adequate pressure	ा	0	Γ:
49	0	Plumbing installed; proper backflow devices	0	0	-:
50	0	Sewage and waste water properly disposed	0	0	-
51	0	Toilet facilities: properly constructed, supplied, cleaned	0	0	_
52	0	Garbage/refuse properly disposed; facilities maintained	0	0	
53	0	Physical facilities installed, maintained, and clean	0	0	_
54	0	Adequate ventilation and lighting; designated areas used	0	0	,
	OUT	Administrative Items			
55	0	Current permit posted	ा	0	П
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	100	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 l ten (10) days of the date of the

11/29/2023

Date Signature of Environmental Health Specialist

11/29/2023

**** 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) 4232098110 Please call (to sign-up for a class.

Date

TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



Establishment Information

Establishment Name: Rafael's

Establishment Number #: |605096302

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)				
Sani bucket Three comp sink	Chlorine Chlorine	100 100					

Equipment Temperature					
Description	Temperature (Fahrenheit)				
Walk in	41				

Food Temperature		
Description	State of Food	Temperature (Fahrenheit)
Cooked pasta-3 dr reach in	Cold Holding	39
Hamburger-3 dr reach in	Cold Holding	39
Sausage-prep top	Cold Holding	35
Diced tomatoes-prep top	Cold Holding	37
Cooked Steak-prep top	Cold Holding	38
Lasagna-grill top	Reheating	175
Ground beef-walk in	Cooling	48
Steak-walk in	Cold Holding	41
Diced tomatoes-2 dr slider	Cold Holding	38
Chicken wings-2 dr slider	Cold Holding	34
Ranch dressing-1 dr merch	Cold Holding	41

Observed Violations
Total # 3
Repeated # 0
13: Container of raw chicken observed in walk in refrigerator sitting on top of box of ready to eat cheese. Store raw meats under or separate from ready to eat foods. This was corrected during inspection.
37: Maintain open bulk items (shortening) in closed air tight containers to prevent contamination.
45: Replace missing handles on both microwave units, and handle on prep unit.

[&]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: Rafael's

Establishment Number: 605096302

Comments/Other Observations

- 1: (IN): PIC demonstrates knowledge by correctly answering questions regarding principles applicable to the food operation.
- 2: (IN) Employees are aware of the symptoms on the 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: Did not observe requirement for handwashing during inspection.
- 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: (IN) Food obtained from approved source
- 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.
- 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 cooking of TCS foods observed during inspection.
- 17: (IN) All TCS foods are properly reheated for hot holding.
- 18: Ground beef in walk in at 48F. Cook stated it was prepared approx 1 1/2 hours ago (date marked with todays today).
- 19: (NO) TCS food is not being held hot during inspection.
- 20: (IN) Cold holding temperatures are held at 41F or below
- 21: (IN) Verified date marking system in place for all ready-to-eat TCS foods that are held longer than 24 hours.
- 22: (NA) No food held under time as a public health control.
- 23: Òn menu
- 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.

^{***}See page at the end of this document for any violations that could not be displayed in this space.

^{***}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: Rafael's	
Establishment Number: 605096302	
Comments/Other Observations (cont'd)	
Additional Comments (cont'd)	
See last page for additional comments.	

Establishment Information						
	afael's					
Establishment Number #:	605096302					
Sources						
Source Type:	Water	Source:	Water is from approved source			
Source Type:	Food	Source:	Atlantic			
Source Type:		Source:				
Source Type:		Source:				
Source Type:		Source:				
Additional Comme	nts					
Handwash sink obserequirements.	erved dry upon arrival.	Recommend additional trainin	g for employees on handwashing			