# TENNESSEE DEPARTMENT OF HEALTH FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

SCORE

No.	100		A. C.																
Establishment Manual					Beef 'O' Brady's							Type of Establishment     O Farmer's Market Food Unit     @ Permanent O Mobile							
Establishment Name			t Nar		5958 Snow Hill Rd., Ste 100														
Address					O Temporary O Seasonar														
City																			
	Inspection Date 10/03/2022 Establishment # 60520																		
Pur	pose	of In	spect	tion	<b>鼠</b> Routine	O Follow-up	O Complaint			O Pr	elimir	ary		C	Cor	nsultation/Other		10	
Ris	k Ca	tegor		and	O1	SE2	O3	hehr		04	at c	0.000	uon h			up Required X Yes O No Number of to the Centers for Disease Control and Prevention		12	.4
																control measures to prevent illness or injury.			
			rk de		ted compliance str		DBORNE ILLNESS RI									INTERVENTIONS ach Ham as applicable. Deduct points for category or subca	enory.		
18	≱in o	ompli				iance NA=not app										pection R=repeat (violation of the same code provid	sion)		
	-	010	NA	NO	Cor	mpliance Statu		COS	R	WT	F					Compliance Status Cooking and Reheating of Time/Temperature	COS	R	WT
		-	NA	NO	Person in charge	Supervision e present, demons	trates knowledge, and					IN	OUT	NA	NO	Control For Safety (TCS) Foods			
1	义 IN		NA	NO	performs duties	Employee H	÷ ·	0	0	5	16	0	00	8		Proper cooking time and temperatures Proper reheating procedures for hot holding	8	00	5
_	X	0				d food employee a	wareness; reporting	_	0	5	Ë	IN		NA		Cooling and Holding, Date Marking, and Time as	Ť		
3	8		NA	NO	,	striction and exclu lood Hygionic P		0	0	Ľ	4.	0	0	0		a Public Health Control	Ļ		
4	X	0	NA	_		isting, drinking, or		0	0	5	19	12	0	0		Proper cooling time and temperature Proper hot holding temperatures	00	0	
5		0	NA			m eyes, nose, and ting Contamina		0	0	Ľ		12	00		~	Proper cold holding temperatures. Proper date marking and disposition	8	00	5
6		20			Hands clean and	d properly washed		0	0		22		0	×		Time as a public health control: procedures and records	ō	0	
7	X	0	0	0	No bare hand co alternate proced		p-eat foods or approved	0	0	5		IN	OUT			Consumer Advisory	-		
8		X OUT	NA	NO	Handwashing sir	Approved So	ied and accessible	0		2	23	×	0	0		Consumer advisory provided for raw and undercooked food		0	4
	黨	0	_			om approved sour	rce		0			IN	OUT	NA	NO				
10	0	8	0	8	Food received at Food in good cor	t proper temperatu ndition, safe, and u	ite unadulterated	8	0	5	24	0	0	88		Pasteurized foods used; prohibited foods not offered		0	5
12	0	0	×	0	Required records destruction	s available: shell s	tock tags, parasite	0	0			IN	OUT	NA	NO	Chemicais	$\square$		
				NO	Prot	ection from Cor	stamination				25	0	0	X		Food additives: approved and properly used		8	5
13	夏	0	8		Food separated Food-contact sur	and protected rfaces: cleaned an	d sanitized		0		26	O IN		NA	NO	Toxic substances properly identified, stored, used Conformance with Approved Procedures		0	
_	_	0		,			returned food not re-	_	0		27	0	0	笑		Compliance with variance, specialized process, and HACCP plan	0	0	5
				Goo	d Retail Pract	ices are preve	ntive measures to c	ontro	l the	intr	oduc	tion	of p	atho	gens	, chemicals, and physical objects into foods.			
								GOO	DR	ET/A	L PR	ACT	ICE	8	_				
				00	T=not in compliance	e npliance Statu	COS=com	ected o		during						R-repeat (violation of the same code provision) Compliance Status	Loos		WT
		OUT			Safe	e Food and Wat				_		0	UT			Utensils and Equipment	000	~	wi
_	28 29				ed eggs used whe lice from approve			8	0	1	4	5 1				nfood-contact surfaces cleanable, properly designed, and used	0	0	1
_	0		Varia		obtained for specia	alized processing		ŏ	ŏ	î	4	6 (				g facilities, installed, maintained, used, test strips	0	0	1
		001	_	er co			pment for temperature	0	0		4	7 1	R N	lonfoo	d-con	tact surfaces clean	0	0	1
	1	-	contr			for hot hold a c		-		2		_	UT			Physical Facilities			
	33				properly cooked thawing methods			8	8	1	4	_				i water available; adequate pressure stalled; proper backflow devices	00	8	2
;	14	0	Ther		eters provided an	d accurate		0	0	1	5					waste water properly disposed		0	2
	e e	OUT				od identification						_	_			is: properly constructed, supplied, cleaned		0	
	35	O OUT	F000	3 prop		nal container, requ	uired records available	0	0	1						0	0	1	
	6	-	Insec	cts. ro	dents, and anima		mination	0	0	2	5	-+-	_			ntilation and lighting; designated areas used	ō	õ	1
	37	-			-		tion, storage & display	0	0	1	F	-	-	,		Administrative Items	F	-	
	8				leanliness	and toos brehere	non, aronage u unapray	0	0	-	5					0			
_	39	-	-		ths; properly used	d and stored		ŏ	ŏ			56 O Most recent inspection posted				0	0	0	
4	10	O OUT	Was	hing f	ruits and vegetab			0	0	1	Compliance Status YI Non-Smokers Protection Act					YES	NO	WT	
4	11		In-us	e ute	nsils; properly sto	er Use of Utens red	188	0	0	1	5		-0	Sompli	ance	with TN Non-Smoker Protection Act	120		
_	12 13	0	Uten	sils, e	quipment and line	ens; properly store rticles; properly sto	ed, dried, handled	0	0		5	8				ducts offered for sale oducts are sold, NSPA survey completed	0	8	0
	ŭ				ed properly	- See history as			ŏ		Ľ							-	
	allure 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																		
mar	mer a	nd po	st the	most	recent inspection re	eport in a conspicuo		ght to r	eques							e. You are required to post the food service establishment permission a written request with the Commissioner within ten (10) day			
, ope	- 1 - 1	-			1					~			0	٥٩	<u>۲</u>	0	4.0.10		
	(	$\sim$	<u> </u>	<u> </u>	fre	-	10/	)3/2	-		-		$\sum$	$\mathfrak{h}_{\mathcal{H}}$		<u> </u>	10/0	)3/2	
Sig	natu	re of	Pers	on In	Charge	*** Additional for	d safety information car	n be fo		Date on ou						ental Health Specialist ealth/article/eh-foodservice ****			Date

PH-2267 (Rev. 6-15)	Free food safety training clas	RDA		
(Nev. 0-15)	Please call (	) 4232098110	to sign-up for a class.	nur des

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



### Establishment Information

Establishment Name: Beef 'O' Brady's Establishment Number #: 605206896

NSPA Survey – To be completed if #57 is "No"	
Age-restricted venue does not ammatively 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)					
Dish machine 3 sink - sani bucket	Chlorine Quat	100 200						

Equipment l'emperature	
Description	Temperature (Fahrenheit)

ood Temperature					
Description	State of Food	Temperature (Fahrenheit)			
Cut toms	Cold Holding	41			
Beef	Cold Holding	39			
Raw burger	Cold Holding	40			
Shrimp	Cold Holding	38			
Raw shrimp	Cold Holding	39			
Queso	Hot Holding	181			
Chicken wings	Cooling	48			
-					

			-
Observed	1/2-		
Unserved	VIO.	anons	
00001100			

Total # 9

Repeated # 0

6: Observed employees not washing hands when changing tasks - did not wash when going from sweeping to food prep, did not wash hands between glove changes when going from raw protein handling to ready to eat food.

8: No paper towels at two hand sinks on line, one hand sink in prep area not working, hand sink turned off by dish machine. All hand sinks were either off or not fully supplied.

26: Chemical bottle with broken lid stored over food on shelf.

37: Drip from walkin fan unit. Potential for contamination.

45: Gaskets in poor repair.

47: Multiple food and non food contact surfaces dirty - fronts and sides of equipment, shelving.

49: Multiple sinks in poor repair - leaks, not operable, turned off

53: Floors and walls dirty

54: Build up in hood, unshielded light



#### Establishment Information

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#### 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.

7: (IN) Employees are observed using suitable utensils or gloves to prevent bare hand (or arm) contact with ready-to-eat foods.

9: Approved

- 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: (NO) No TCS foods reheated during inspection.
- 18: (N.O.) No cooling of TCS foods 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: (NA) No food held under time as a public health control.

23: On menu

- 24: (NA) A highly susceptible population is not served.
- 25: (NA) Establishment does not use any additives or sulfites on the premises.
- 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.

# Establishment Information

Establishment Name: Beef 'O' Brady's

Establishment Number : 605206896

Comments/Other Observations (cont'd)

Additional Comments (cont'd) See last page for additional comments.

# Establishment Information

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Sources				
Source Type:	Food	Source:	Sysco	
Source Type:	Water	Source:	Public	
Source Type:		Source:		
Source Type:		Source:		
Source Type:		Source:		

# Additional Comments