TENNESSEE DEPARTMENT OF HEALTH DOD SERVICE ESTABLISHMENT INSPECTION REPORT

623

| | | | FOOD SERVICE ESTABLISHMENT INSPECTION REPORT | | | | | | | | | | ON REPORT | SCORE | | | | | | |
|--------------------|----------------|----------------|--|---------------------------|--|--|--|-------------------|---------------|---------|-------------------|------------|-----------|----------|-------------|---|---------------------|--------|----------|---------|
| 2000 C | | | | | | | | | | | | | | | | | | | | |
| Establishment Name | | | me | Longhorn Steakhouse #5268 | | | | | | | | 9 | | K | | | | | | |
| | | | | 5583 Hwy | Type of Establishment O Temporary O Seasonal | | | | | | | | | | | | | | | |
| Photess | | | , 11 | L:0 | 0 A | ١M | A | M/P | м ті | ime o | ut 11:45:AM AM/PM | | | | | | | | | |
| Insp | ectio | on Da | ate | | 01/23/2 | 023 Establishment | | | | | | | | | | | | | | |
| Purp | xose | of In | spec | | Routine | O Follow-up | O Complaint | | | | relimi | | | |) Co | nsultation/Other | | | | |
| Risk | Cat | | | | O 1 | 3 22 | 03 | | | 04 | | | | | | up Required 🕱 Yes O No | Number of Se | | 19 | 2 |
| | | | isk | | | | | | | | | | | | | to the Centers for Disease Control control measures to prevent illness | | on | | |
| | | | | | | | | | | | | | | | | INTERVENTIONS ach item as applicable. Deduct points for cate | ears or subcates | | | |
| IN | ⊧in c | ompii | | 20910 | OUT=not in comp | iance NA=not applicable | | ed | | C | | | | | | spection R=repeat (violation of the sa | me code provision | 1) | | |
| F | IN | OUT | NA | NO | Co | mpliance Status Supervision | | cos | R | WT | IF | | | | | Compliance Status Cooking and Reheating of Time/Ten | | :05 | R | WT |
| \vdash | 黨 | 0 | | | | e present, demonstrates | knowledge, and | 0 | 0 | 5 | | IN | | r NA | | Control For Safety (TCS) Fee | da | ~ | | |
| | IN | OUT | NA | NO | performs duties | Employee Health | | | | | 10 | 5 O 7 O | | | | Proper cooking time and temperatures Proper reheating procedures for hot holding | | 8 | 응 | 5 |
| _ | 区区 | 0 | | | | d food employee aware striction and exclusion | ness; reporting | 0 | 0 | 5 | | IN | 001 | T NA | NO | Cooling and Holding, Date Marking, a a Public Health Control | nd Time as | | | |
| | _ | OUT | NA | | | lood Hygionic Practic | | | - | | | 8 0 | | | | Proper cooling time and temperature | | 0 | 0 | |
| 4 | 义 | 0 | | | | asting, drinking, or tobac om eyes, nose, and mou | | 8 | 0 | 5 | 20 | | 0 | | 0 | Proper hot holding temperatures Proper cold holding temperatures | | 8 | 0 | |
| | IN A | OUT | NA | NO | | nting Contamination d properly washed | by Hands | 0 | 0 | _ | | | - | | | Proper date marking and disposition | | 0 | _ | |
| -+ | × | 0 | 0 | ō | | ontact with ready-to-eat f | oods or approved | ō | ō | 5 | 22 | 2 0 | | 0.0 | O NO | Time as a public health control: procedures Consumer Advisory | and records | 이 | 이 | |
| 8 | × | 0 | NA | NO | Handwashing si | nks properly supplied an Approved Source | d accessible | 0 | 0 | 2 | 23 | _ | - | _ | 110 | Consumer advisory provided for raw and un food | dercooked | 0 | 0 | 4 |
| 9 | 黨 | 0 | <u> </u> | | Food obtained f | rom approved source | | | 0 | | ۱Ŀ | IN | - | T NA | NO | Highly Susceptible Populatio | ns | _ | | |
| 10 11 | 0 ※ | 00 | 0 | | | t proper temperature indition, safe, and unadu | Iterated | 8 | 0 | 5 | 24 | 0 | 0 | 83 | | Pasteurized foods used; prohibited foods no | t offered | 0 | 0 | 5 |
| \square | 0 | 0 | X | 0 | destruction | is available: shell stock t | | 0 | 0 | | | IN | | T NA | | Chemicals | | | | |
| 13 | ×. | 0 | 0 | NO | Food separated | and protected | nation | 0 | 0 | 4 | 25 | 5 O | 8 | X | J | Food additives: approved and properly used Toxic substances properly identified, stored, | | 8 | | 5 |
| 14 | 0 | × | 0 |] | | infaces: cleaned and san on of unsafe food, return | | 0 | 0 | | | IN | - | T NA | NO | Conformance with Approved Proc Compliance with variance, specialized proce | use and | _ | _ | |
| 15 | 2 | 0 | | | served | | | 0 | 0 | 2 | 27 | 0 | 0 | 8 | | HACCP plan | and and | 0 | ٥ | 5 |
| | | | | God | d Retail Prac | tices are preventive | measures to c | ontro | l the | e inti | rodu | ctio | n of j | patho | gen | , chemicals, and physical objects in | to foods. | | | |
| | | | | | · · · · | | 608 | | | | | | TICE | 8 | | | | | | |
| | | _ | | 00 | | mpliance Status | COS=com | | | WT | | | | | | R-repeat (violation of the same or Compliance Status | | :08 | R | WT |
| 2 | _ | OUT | | leuriz | Saf ed eggs used wh | ere required | | 0 | 0 | 1 | LE | | | Food a | nd no | Utensils and Equipment infood-contact surfaces cleanable, properly d | esigned, | 0 | | |
| 2 | _ | 0 | Wat | er and | d ice from approv | ed source ialized processing metho | ds | 8 | 0 | 2 | $ \vdash$ | + | - (| | | and used | | - | 0 | 1 |
| Ē | | OUT | | | Food | Temperature Control | | - | - | | | _ | _ | | | g facilities, installed, maintained, used, test s ntact surfaces clean | | - | 이 | 1 |
| 3 | 1 | 0 | cont | | oling methods us | ed; adequate equipment | for temperature | 0 | 0 | 2 | | | OUT | wormou | AHCO1 | Physical Facilities | | | <u> </u> | · |
| 3 | _ | | | | t properly cooked thawing methods | | | 8 | 8 | 1 | _ | 18 19 | - | | | f water available; adequate pressure stalled; proper backflow devices | | 응 | | 2 |
| 3 | _ | 0 | The | | eters provided an | nd accurate | | ō | Ō | 1 | 5 | i0 | 0 | Sewag | e and | waste water properly disposed | | 0 | 0 | 2 |
| 3 | 5 | OUT | _ | d prog | | od Identification inal container, required r | ecords available | 0 | 0 | 1 | . – | 11 12 | | | | es: properly constructed, supplied, cleaned use properly disposed; facilities maintained | | 0 | 0 | 1 |
| | | OUT | | | | n of Feed Contaminat | | | | | ᄂ | _ | - | | - | lities installed, maintained, and clean | | | 0 | 1 |
| 3 | 6 | 0 | Inse | cts, ro | odents, and anim | als not present | | 0 | 0 | 2 | 5 | i4 | 0 | Adequa | ate ve | entilation and lighting; designated areas used | | ٥ | ٥ | 1 |
| 3 | 7 | 0 | Cont | tamin | ation prevented o | during food preparation, s | torage & display | 0 | 0 | 1 | | | OUT | | | Administrative items | | | | |
| 3 | _ | - | | | cleanliness oths: properly use | d and stored | | 0 | 0 | 1 | | | | | - | nit posted inspection posted | | 8 | 응 | 0 |
| 4 | 0 | 0 | Was | <u> </u> | fruits and vegetal | bles | | | ŏ | | ΙĽ | | - 1 | | | Compliance Status | , | /ES | | WT |
| 4 | 1 | _ | in-u | | nsils; properly st | | | | 0 | | | 57 | | | | Non-Smokers Protection Act with TN Non-Smoker Protection Act | | X | 0 | |
| 4 | _ | | | | | ens; properly stored, dri rticles; properly stored, u | | 8 | 00 | | 5 | 3 9 | | | | ducts offered for sale oducts are sold, NSPA survey completed | | 0 | 8 | 0 |
| 4 | _ | | | | sed properly | | | | ŏ | | | | | | | | | | | |
| servi | ce e | stabli | shme | nt pen | mit. Items identified | as constituting imminent | health hazards shall b | e com | ected | immed | Sately | or og | peratio | ms shal | l ceas | Repeated violation of an identical risk factor ma e. You are required to post the food service estat | blishment permit i | n a ci | onspi | cuous |
| mare repo | nera nt. T. | nd po .C.A. | ist the sectio | most ns 68 | recent inspection r -14-703, 68-14-706, 0 | report in a conspicuous ma 88-14-708, 68-14-709, 68-14- | nner. You have the ri 711, 68-14-715, 68-14-7 | ght to 16, 4-5 | eque -320. | st a he | aring | regar | ding ti | his repo | et by I | filing a written request with the Commissioner with | sin ten (10) days o | of the | date | of this |
| | | / | | | / / | | | | | | | | | | | | | | | |

| U | 01/23/2023 | 126 | 01/23/2023 | | | | | |
|---|------------|--|------------|--|--|--|--|--|
| Signature of Person In Charge | Date | Signature of Environmental Health Specialist | Date | | | | | |
| **** Additional food safety information can be found on our website, http://tn.gov/health/article/eh-foodservice **** | | | | | | | | |

| | r | | | |
|---------------------|---|--|--|---------|
| PH-2267 (Rev. 6-15) | Free food safety training cl Please call (| asses are available each mor) 4232098110 | th at the county health department. to sign-up for a class. | RDA 629 |

TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



Establishment Information

Establishment Name: Longhorn Steakhouse #5268 Establishment Number #: 605201236

| 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 wenty-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. | |
| Sarage 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 (Fahrenhelt) | | | | | |
| Dish machine | Chlorine | 0 | | | | | | |
| Quat dispenser | QA | 200 | | | | | | |
| | | | | | | | | |

| Equipment Temperature | | | | | |
|-----------------------|--------------------------|--|--|--|--|
| Description | Temperature (Fahrenheit) | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

| Description | State of Food | Temperature (Fahrenheit) |
|---------------------------|---------------|--------------------------|
| Potato soup | Hot Holding | 150 |
| Raw chicken | Cold Holding | 40 |
| Cooked peppers and onions | Cold Holding | 40 |
| Diced tomatoes | Cold Holding | 40 |
| Cut leafy greens | Cold Holding | 40 |
| Mashed potatoes | Hot Holding | 150 |
| Raw salmon | Cold Holding | 40 |
| Raw steak | Cold Holding | 40 |
| Raw ground beef | Cold Holding | 40 |
| Rice | Cold Holding | 38 |
| | | |
| | | |
| | | |
| | | |

Observed Violations

Total # 3

Repeated # ()

14: Dish machine testing 0 ppm sanitizer. PIC contacted repair company onsite. Will use triple sink until dish machine is repaired.

47: Bottom surfaces of reach-in coolers dirty.

53: Walls dirty in various areas.

TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



Establishment Information

Establishment Name: Longhorn Steakhouse #5268

Establishment Number : 605201236

Comments/Other Observations

- 1: (IN): ANSI Certified Manager present.
- 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: Proper handwashing observed.

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: 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.
- 13: (IN) All raw animal food is separated and protected as required.
- 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: Proper hot holding temperatures observed.
- 20: Proper cold holding temperatures observed.
- 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: Consumer advisory located.
- 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:

***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: Longhorn Steakhouse #5268 Establishment Number : 605201236

Comments/Other Observations (cont'd)

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

Establishment Information

Establishment Name: Longhorn Steakhouse #5268 Establishment Number # 605201236

| Sources | | | | |
|--------------|-------|---------|--------|--|
| Source Type: | Water | Source: | Public | |
| Source Type: | | Source: | | |
| Source Type: | | Source: | | |
| Source Type: | | Source: | | |
| Source Type: | | Source: | | |

Additional Comments