



TENNESSEE DEPARTMENT OF HEALTH FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

SCORE

95

Establishment Name Mt. Juliet High School Cafeteria Type of Establishment Farmer's Market Food Unit
 Permanent Mobile
Address 1875 Golden Bear Pkwy Temporary Seasonal
City Mount Juliet Time in 10:40 AM AM / PM Time out 11:51 AM AM / PM
Inspection Date 02/08/2024 Establishment # 605204966 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 686

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	Compliance Status								
IN	OUT	NA	NO	IN	OUT	NA	NO	COS	R	WT	IN	OUT	NA	NO	COS	R	WT			
Supervision												Cooking and Reheating of Time/Temperature Control For Safety (TCS) Foods								
1	<input checked="checked" type="checkbox"/>	<input type="checkbox"/>						<input type="checkbox"/>	<input type="checkbox"/>	5	16	<input checked="checked" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			5		
Employee Health												Cooling and Holding, Date Marking, and Time as a Public Health Control								
2	<input checked="checked" type="checkbox"/>	<input type="checkbox"/>						<input type="checkbox"/>	<input type="checkbox"/>	5	17	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="checked" type="checkbox"/>					
3	<input checked="checked" type="checkbox"/>	<input type="checkbox"/>						<input type="checkbox"/>	<input type="checkbox"/>			18	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="checked" type="checkbox"/>				
Good Hygienic Practices												19	<input checked="checked" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
4	<input checked="checked" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>	5	20	<input checked="checked" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>					
5	<input checked="checked" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>		21	<input checked="checked" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			5		
Preventing Contamination by Hands												22	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="checked" type="checkbox"/>				
6	<input checked="checked" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>			IN	OUT	NA	NO					
7	<input checked="checked" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>	5	Consumer Advisory									
8	<input checked="checked" type="checkbox"/>	<input type="checkbox"/>						<input type="checkbox"/>	<input type="checkbox"/>	2	23	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="checked" type="checkbox"/>				4		
Approved Source												IN	OUT	NA	NO					
9	<input checked="checked" type="checkbox"/>	<input type="checkbox"/>						<input type="checkbox"/>	<input type="checkbox"/>		Highly Susceptible Populations									
10	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="checked" type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>		24	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="checked" type="checkbox"/>				5		
11	<input checked="checked" type="checkbox"/>	<input type="checkbox"/>						<input type="checkbox"/>	<input type="checkbox"/>	5	Chemicals									
12	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="checked" type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>		25	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="checked" type="checkbox"/>				5		
Protection from Contamination												26	<input checked="checked" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>					
13	<input checked="checked" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>	4	Conformance with Approved Procedures									
14	<input checked="checked" type="checkbox"/>	<input checked="checked" type="checkbox"/>	<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>	5	27	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="checked" type="checkbox"/>				5		
15	<input checked="checked" type="checkbox"/>	<input type="checkbox"/>						<input type="checkbox"/>	<input type="checkbox"/>	2										

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

GOOD RETAIL PRACTICES

(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.)

OUT=not in compliance		COS=corrected on-site during inspection			R=repeat (violation of the same code provision)		
Compliance Status							
OUT	IN	OUT	NA	NO	COS	R	WT
Safe Food and Water							
28	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	1
29	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	2
30	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	1
Food Temperature Control							
31	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	2
32	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	1
33	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	1
34	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	1
Food Identification							
35	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	1
Prevention of Food Contamination							
36	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	2
37	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	1
38	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	1
39	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	1
40	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	1
Proper Use of Utensils							
41	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	1
42	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	1
43	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	1
44	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	1
Compliance Status							
YES	NO				WT		
Utensils and Equipment							
45	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	1
46	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	1
47	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	1
Physical Facilities							
48	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	2
49	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	2
50	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	2
51	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	1
52	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	1
53	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	1
54	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	1
Administrative Items							
55	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	0
56	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	
Non-Smokers Protection Act							
57					<input checked="checked" type="checkbox"/>	<input type="checkbox"/>	
58					<input type="checkbox"/>	<input type="checkbox"/>	0
59					<input type="checkbox"/>	<input type="checkbox"/>	

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, 4-5-320.

Step Williams 02/08/2024 Signature of Person In Charge Date
[Signature] 02/08/2024 Signature of Environmental Health Specialist Date

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



<i>Establishment Information</i>	
Establishment Name:	Mt. Juliet High School Cafeteria
Establishment Number #:	605204966

<i>NSPA Survey – To be completed if #57 is “No”</i>	
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.	

<i>Warewashing Info</i>			
Machine Name	Sanitizer Type	PPM	Temperature (Fahrenheit)
Meiko	Heat		158

<i>Equipment Temperature</i>	
Description	Temperature (Fahrenheit)
Delfield ric	41
Delfield ric 2	40
Wic 1	37
Wic 2	38

<i>Food Temperature</i>		
Description	State of Food	Temperature (Fahrenheit)
Pulled pork	Hot Holding	156
Potato wedges	Hot Holding	140
Bosco sticks	Cooking	167
Bosco stick	Hot Holding	146

Observed ViolationsTotal # **1**Repeated # **0**

14: Dish machine did not get hot enough to sanitize. Switched to 3 comp sink.



Establishment Information

Establishment Name: Mt. Juliet High School Cafeteria

Establishment Number : 605204966

Comments/Other Observations

- 1: (IN): PIC demonstrates knowledge by correctly answering questions regarding principles applicable to the food operation.
- 2: Discussed policy with pic
- 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: Employees washed hands multiple times during inspection. Employee washed hands after handling dirty dishes
- 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.
- 15: (IN) No unsafe, returned or previously served food served.
- 16: See food temps
- 17: (NO) No TCS foods reheated during inspection.
- 18: No food being cooled 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: (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: (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.

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

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Establishment Name: Mt. Juliet High School Cafeteria

Establishment Number : 605204966

Comments/Other Observations (cont'd)

Additional Comments (cont'd)

See last page for additional comments.

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Establishment Number #: 605204966

Sources

Source Type: Food Source: IWC, Purity

Source Type: Water Source: City

Source Type: Source:

Source Type: Source:

Source Type: Source:

Additional Comments