

Purpose of Inspection

KRoutine

TENNESSEE DEPARTMENT OF HEALTH FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

SCORE

97

Cracker Barrel #2

Establishment Name

Address

City

Cracker Barrel #2

Type of Establishment

O Temporary

O Seasonal

AM / PM

AM / PM

Time out

O 2:46; PM

AM / PM

O Complaint

Inspection Date 11/29/2023 Establishment # 605004249 Embargoed 0

O Follow-up

Risk Category O1 🕱 O3 O4 Follow-up Required O Yes 🕱 No Number of Seats 166

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.

O Preliminary

O Consultation/Other

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

(Mark designated compliance status (IH, OUT, HA, HO) for each numbered Item. For Items marked OUT, mark COS or R for each Item as applicable. Deduct points for category or subcategory.

10	≬ ÷in c	ompli	ance		OUT=not in compliance NA=not applicable NO=not observe	ed		co	\$=co	rrecte	d on-si	te duri	ing ins	pection
					Compliance Status	cos	R	WT						Compl
	IN	оит	NA	NO	Supervision					IN	оит	NA	NO	Cooking and
1	盔	0			Person in charge present, demonstrates knowledge, and performs duties	0	0	5	16	200	0	0	0	Proper cooking t
	IN	OUT	NA	NO	Employee Health			-	17	õ	ŏ	ŏ	_	Proper reheating
2	100	0			Management and food employee awareness; reporting	0	0	\Box						Cooling and h
3	×	0			Proper use of restriction and exclusion	0	0	5	П	IN	OUT	NA	NO	
	IN	OUT	NA	NO	Good Hygienic Practices				18	0	0	0	X	Proper cooling to
4	X	0		0	Proper eating, tasting, drinking, or tobacco use	0	0	5	19		0	0	0	Proper hot holdi
5	*	0		0	No discharge from eyes, nose, and mouth	0	0	°	20	125	0	0		Proper cold hold
	IN	OUT	NA	NO	Preventing Contamination by Hands				21	*	0	0	0	Proper date man
6	黨	0		0	Hands clean and properly washed	0	0		22	×	0	0	0	Time as a public
7	왮	0	0	0	No bare hand contact with ready-to-eat foods or approved	0	0	5	L.		_	_	_	Tittle as a poolic
Ŀ	-				alternate procedures followed	_	_			IN	OUT	NA	NO	
8	×	0			Handwashing sinks properly supplied and accessible	0	0	2	23	×	l٥	0		Consumer advis
	_	OUT	NA	NO	Approved Source	-		$\overline{}$	-	_	_	_		food
9	黨	0			Food obtained from approved source	0	0			IN	OUT	NA	NO	High
10	0	0	0	200	Food received at proper temperature	0	0	l . I	24	800	0	0		Pasteurized food
11	×	0			Food in good condition, safe, and unadulterated	0	0	5	1		Ŭ	_		r abicarized room
12	0	0	×	0	Required records available: shell stock tags, parasite destruction	0	0			IN	ОUТ	NA	NO	
	IN	OUT	NA	NO	Protection from Contamination				25		0	3%		Food additives:
13	黛	0	0		Food separated and protected	0	0	4	26	窦	0			Toxic substance
14	×	0	0		Food-contact surfaces: cleaned and sanitized	0	0	5		IN	OUT	NA	NO	Conforma
15	Ħ	0			Proper disposition of unsafe food, returned food not re- served	0	0	2	27	0	0	×		Compliance with HACCP plan

					Compliance Status	COS	R	WT
	IN	оит	NA	NO	Cooking and Reheating of Time/Temperature Control For Safety (TCS) Foods			
16		0	0	0	Proper cooking time and temperatures	0	0	5
17	0	0	0	3%	Proper reheating procedures for hot holding	0	0	٠
	IN	оит	NA	NO	Cooling and Holding, Date Marking, and Time as a Public Health Control			
18	0	0	0	涎	Proper cooling time and temperature	0	0	
19	×	0	0	0	Proper hot holding temperatures	0	0	
20	243	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	氮	0	0		Pasteurized foods used; prohibited foods not offered	0	0	5
	IN	оит	NA	NO	Chemicals			
25	0	0	×		Food additives: approved and properly used	0	0	-
26	X	0			Toxic substances properly identified, stored, used	0	0	۰
	IN	OUT	NA	NO	Conformance with Approved Procedures			
27	0	0	×		Compliance with variance, specialized process, and HACCP plan	0	0	5

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

L PRACTICES

			GOO		
		OUT=not in compliance COS=corr			
		Compliance Status	cos	R	И
	OUT	Caro i con amo i i mon			
28	_	Pasteurized eggs used where required	0	0	
29	0	Water and ice from approved source	0	0	
30	0	Variance obtained for specialized processing methods	0	0	
	OUT	Food Temperature Control		_	_
31	0	Proper cooling methods used; adequate equipment for temperature control	0	0	
32	0	Plant food properly cooked for hot holding	0	0	г
33	0	Approved thawing methods used	0	0	Г
34	0	Thermometers provided and accurate	0	0	г
	OUT	Food Identification			
35	0	Food properly labeled; original container; required records available	0	0	Г
	OUT	Prevention of Feed Contamination			
36	0	Insects, rodents, and animals not present	0	0	
37	338	Contamination prevented during food preparation, storage & display	0	0	Г
38	0	Personal cleanliness	0	0	Г
39	188	Wiping cloths; properly used and stored	0	0	Г
40	0	Washing fruits and vegetables	0	0	Г
	OUT	Proper Use of Utensils			
41	0	In-use utensils; properly stored	0	0	Г
42	120	Utensils, equipment and linens; properly stored, dried, handled	0	0	Г
43	0		0	0	
44	0	Gloves used properly	0	0	г

rspect	ion	R-repeat (violation of the same code provision)				
		Compliance Status	COS	R	WT		
	OUT Utensils and Equipment						
45	0	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	1		
	OUT	Physical Facilities					
48	0	Hot and cold water available; adequate pressure	0	0	2		
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	0	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	0		
56	0	Most recent inspection posted	0	0			
\Box		Compliance Status	YES	NO	WT		
		Non-Smokers Protection Act					
57		Compliance with TN Non-Smoker Protection Act	- X	0			
58		Tobacco products offered for sale	0	0	0		
59		If tobacco products are sold, NSPA survey completed	0	0			

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 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, 68-14-708, 68-14-709, 68-14-716, 45-320.

TUD 11/29/2023

Date Signature of Environmental Health Specialist

11/29/2023

Signature of Person In Charge

ax

Date

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

TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



Establishment Information

Establishment Name: Cracker Barrel #2
Establishment Number #: 605004249

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.	Т
'No Smoking' signs or the international "Non-Smoking" symbol are not conspicuously posted at every entrance.	\top
Sarage type doors in non-enclosed areas are not completely open.	\top
Tents or awnings with removable sides or vents in non-enclosed areas are not completely removed or open.	\vdash
Smoke from non-enclosed areas is inflitrating into areas where smoking is prohibited.	\top
Smoking observed where smoking is prohibited by the Act.	+-

Warewashing Info								
Machine Name	Sanitizer Type	PPM	Temperature (Fahrenheit)					
Sani Bucket HOBART	DDBSA	272	188					

Equipment Temperature						
Description	Temperature (Fahrenheit)					
Delfield RIC	38					
Thawing Cabinet	35					
WIC	30					
WIF	-36					

Food Temperature		
Description	State of Food	Temperature (Fahrenheit)
Coleslaw	Cold Holding	41
Tomato Relish	Cold Holding	40
Roast Beef	Cold Holding	39
Broccoli Cheese Casserole	Cold Holding	38
Sliced Turkey	Cold Holding	37
Bone in Chicken Breast	Cold Holding	37
Boneless Chicken Breast	Cold Holding	36
Chicken Pot Pie	Hot Holding	140
Boiled Eggs	Cold Holding	40
Lettuce	Cold Holding	41
Fried Chicken TenderS	Hot Holding	139
Chicken Tenders	Cooking	179
Country Ham	Cold Holding	40
Catfish	Cooking	181
Steak Tips	Cold Holding	40

Observed Violations							
Total # 4							
Repeated # ()							
37: Plates stored haphazardly on top of warmers on both make lines							
37: Pans of blue berries stored haphazardly in Delfied RIF on make line							
39: Wet wiping cloth stored on hot holding line not storedin sanitizer							
42: Clear plastic containers stacked wet on shelving above HOBART							
dishmachine							

^{****}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: Cracker Barrel #2
Establishment Number: 605004249

Comments/Other Observations

- 1: (IN): ANSI Certified Manager present.
- 2: Establishment has employee 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.

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- 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 sources
- 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: See temps
- 17: (NO) No TCS foods reheated during inspection.
- 18: No foods observed in cooling during inspection
- 19: See temps
- 20: See temps
- 21: (IN) Verified date marking system in place for all ready-to-eat TCS foods that are held longer than 24 hours.
- 22: Food items in TILT are labeled and in time window for TILT procedure
- 23: Menu has consumer advisory

24:

- 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.

stablishment Name: Cracker Barrel #2	
stablishment Number: 605004249	
comments/Other Observations (cont'd)	
dditional Comments (cont'd)	
ee last page for additional comments.	
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Establishment Information

Establishment Information								
	acker Barrel #2							
Establishment Number #:	605004249							
Sources								
Source Type:	Water	Source:	City					
Source Type:	Food	Source:	PFG Creation Gardens Purity					
Source Type:		Source:						
Source Type:		Source:						
Source Type:		Source:						
Additional Commen	its							