### TENNESSEE DEPARTMENT OF HEALTH FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

SCORE

	2014	The state	9															
Establishment Name		SOUTHERN HANDS						C Farmer's Market Food Unit     Type of Establishment     @ Permanent O Mobile										
Address		1811 KIRBY PARKWAY     Type of Establishment     O Temporary     O Seasonal										L						
City				Germantown Time in 02:55 PM AM / PM Time out 03:45; PM AM / PM														
,	Inspection Date			02/21/2023 Establishment # 605261400 Embergoed 0														
Purpos			ection	<b></b> IRoutine	O Follow-up	O Complaint			- O Pr			~ -		Cor	nsultation/Other			
Risk C	ateg	ory		<b>O</b> 1	802	03			04				Fo	low-	up Required O Yes 窥 No Number of	Seats	42	
		Ris													I to the Centers for Disease Control and Prever control measures to prevent illness or injury.			
					FOODBORN	E ILLNESS RI	5K F/	ACT	ors	AND	D PU	BLIC	HEA	LTH	INTERVENTIONS			
IN=in	(link 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)																	
				Com	pliance Status	10-101000011	cos	R		Ē	1	I	NIC GO		Compliance Status		R	WT
IN ST	-	JT N	A NO		Supervision present, demonstrates kn	owledge, and	-				IN	001	NA	NO	Cooking and Roheating of Time/Temperature Control For Safety (TCS) Foods			
1 版 IN	_		A NO	performs duties	Employee Health		0	0	5		0	8	<b>0</b> 送		Proper cooking time and temperatures Proper reheating procedures for hot holding	0	8	5
2 12		2		Management and	food employee awarenes	ss; reporting	0		5	Ť	IN	001		NO	Cooling and Holding, Date Marking, and Time as	Ē		
3 📡	+	р ЛТ N	A NO		viction and exclusion od Hygionic Practices		0	0	-	18	0	0	XX	0	Public Health Control  Proper cooling time and temperature	0		
4 2	to	)	0	Proper eating, tast	ting, drinking, or tobacco		0		5	19	123	0	õ	0	Proper hot holding temperatures	0	0	
	100	JT N	A NO	Prevent	n eyes, nose, and mouth ing Contamination by	Hands	0		_	20 21	0	8			Proper cold holding temperatures Proper date marking and disposition	8	00	5
6 景 7 复	_	_	_	Hands clean and p No bare hand con	properly washed tact with ready-to-eat foo	ds or approved	0	0 0	5	22	2 0	0	×	0	Time as a public health control: procedures and records	0	0	
8 2	· · ·		10	alternate procedur Handwashing sink	res followed is properly supplied and a	accessible		0	2		IN	OUT	_	NO	Consumer Advisory Consumer advisory provided for raw and undercooked			
9 X	OL	ЛΝ	A NO		Approved Source m approved source		0		_	23	S O	0	NA NA	NO	food Highly Susceptible Populations	0	0	4
10 🔰	s c		o o	Food received at p	proper temperature		0	0		24	_	0	20	no	Pasteurized foods used; prohibited foods not offered	0	0	5
11 📓		-	8 o	Required records	dition, safe, and unadulter available: shell stock tage		0	0 0	5	F	IN	OUT		NO	Chemicals	-		
IN	OL	1.	A NO	destruction Prote	ction from Contamina	tion	Ŭ	Ŭ	_	25	0	0			Food additives: approved and properly used	0	ा	
13 5				Food separated an	nd protected aces: cleaned and sanitiz	o.d	0	0	4	26	5 IN	0			Toxic substances properly identified, stored, used Conformance with Approved Procedures	0	00	•
14 ) 15 (j)		_	_	Proper disposition	of unsafe food, returned		0	0	2	27	_	0	22		Compliance with variance, specialized process, and	0	0	5
				served				-			-	-	1~~		HACCP plan		-	
			Go	od Retail Practic	ses are preventive n	neasures to co								gens	s, chemicals, and physical objects into foods.			
			01	T=not in compliance		COS=corre		n-site	during				3		R-repeat (violation of the same code provision)			
	TOL	л			pliance Status Food and Water		COS	R	WT	F		TUK			Compliance Status Utensils and Equipment	COS	R	WT
28 29				ed eggs used where d ice from approved			8	8	1	4	15				nfood-contact surfaces cleanable, properly designed, and used	0	0	1
30	0	Va Va		obtained for special	lized processing methods	;	ŏ	ŏ	1	4	6				g facilities, installed, maintained, used, test strips	0	0	1
31	ou	Dr	oper co		mperature Control f; adequate equipment fo	r temperature	0	0	2	4	7	0	Vonfoo	d-cor	tact surfaces clean	0	0	1
32		00	ntrol ant food	d properly cooked fo	r hot holding			0			_	TUX S	-lot and	t cold	Physical Facilities	0		2
33	C	) Ap	proved	thawing methods u	ised		0	0	1	4	9	0 F	Numbi	ng ins	stalled; proper backflow devices	0	0	2
34	0		ermom	eters provided and Feet	accurate d identification		0	0	1			-			waste water properly disposed s: properly constructed, supplied, cleaned	8	0	2
35	8	<pre></pre>	od proj	perly labeled; origina	al container; required reco	ords available	0	0	1	5			Sarbag	e/refi	use properly disposed; facilities maintained	0	0	1
	OL	л		Prevention	of Food Contaminatio	n					-+-	×1	Physica	al faci	ities installed, maintained, and clean	0	0	1
36	4	) Ins	sects, n	odents, and animals	not present		0	0	2	5	4	<u>ہ</u>	Adequa	de ve	ntilation and lighting; designated areas used	0	0	1
37	-	_			ring food preparation, sto	rage & display	0	0	1			TUK			Administrative Items			
38	-	_		cleanliness oths; properly used	and stored		0	0	1		_			-	nit posted inspection posted	8	8	0
40	C	<b>)</b> W		fruits and vegetable	15			0			_	_			Compliance Status		NO	WT
41	OL X		use ute	ensils; properly store	r Use of Utensils ed		0	0	1		7				Non-Smokers Protection Act with TN Non-Smoker Protection Act	X	0	
42 43					ns; properly stored, dried, icles; properly stored, use		0	0	1	5	8				ducts offered for sale oducts are sold, NSPA survey completed	0	8	0
44				sed properly	and his bearing and the second			ŏ		Ľ				10			-	
															Repeated violation of an identical risk factor may result in revo e. You are required to post the food service establishment perm			
manner	and	post t	he most	recent inspection rep		r. You have the rig	ht to r	eques							fling a written request with the Commissioner within ten (10) day			
X	1	2	Je	10V		02/2	-		3		(	-		0	A.2	02/2	2/1	023
Signat	ure	of Pe	rson Ir	n Charge		0212		-	Date	Si	gnati	ure of	Envir	onme	ental Health Specialist			Date
					<ul> <li>Additional food safety</li> </ul>	information can	be fo	und	on ou						ealth/article/eh-foodservice ****			
PH-226	PH/2267 (Rev. 6-15). Free food safety training classes are available each month at the county health department.																	

267 (Rev. 6-15)	Free food safety training ck	asses are available each mont	h at the county health department.	RDA 60
201 (NEV. 0-10)	Please call (	) 9012229200	to sign-up for a class.	RDA G
				,

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



#### Establishment Information Establishment Name: SOUTHERN HANDS Establishment Number #: 605261400

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.	No
Age-restricted venue does not require each person attempting to gain entry to submit acceptable form of identification.	No
"No Smoking" signs or the international "Non-Smoking" symbol are not conspicuously posted at every entrance.	No
Garage type doors in non-enclosed areas are not completely open.	No
Tents or awnings with removable sides or vents in non-enclosed areas are not completely removed or open.	No
Smoke from non-enclosed areas is inflitrating into areas where smoking is prohibited.	No
Smoking observed where smoking is prohibited by the Act.	No

Warewashing Info										
Machine Name	Sanitizer Type	PPM	Temperature (Fahrenheit)							
3 comp sink	Bleach									

Equipment Temperature	
Description	Temperature (Fahrenheit)
Walk in cooler	40
Reach in freezer	26
Reach in coolers	40

Food Temperature	d Temperature				
Description	State of Food	Temperature (Fahrenheit)			
Chicken	Hot Holding	146			
Meatloaf	Hot Holding	145			
Mac and cheese	Hot Holding	149			
Green beans	Hot Holding	149			

## Observed Violations

Total # 10 Repeated # ()

34: Provide a food thermometer for food temps , etc

35: Label all plastic food containers in kitchen

37: Provide containers with lids for all opened food bags , etc

39: Keep the wet cloths stored in sanitizer water , etc

41: Keep the coffee / tea filters stored in protected covering , etc

42: Dishes must be air dried before putting on shelf , do not stack wet

46: Employees do not know set up of 3 compmsink , wash , rinse , bleach water . Provide test strips for bleach sanitizer , etc

48: Repair faucet on handsink in kitchen , provide hot water at that handsink

53: Keep the moos and brooms stored hanging up , clean ventahood filters , etc

56: Please post recent inspection report

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



#### Establishment Information

Establishment Name: SOUTHERN HANDS Establishment Number : 605261400

Comments/Other Observations		
-		
•		
0:		
1:		
2:		
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0: 1: 2: 3: 4: 5: 6: 7: 8: 9: 0: 1: 2: 3: 4: 5: 6: 7: 8: 9: 0: 1: 2: 3: 4: 5: 6: 7: 8: 9: 0: 1: 2: 3: 4: 5: 6: 7: 8: 9: 0: 1: 2: 3: 4: 5: 6: 7: 8: 9: 0: 1: 2: 3: 4: 5: 6: 7: 8: 9: 0: 1: 2: 3: 4: 5: 6: 7: 8: 9: 0: 1: 2: 3: 4: 5: 6: 7: 8: 9: 0: 1: 2: 3: 4: 5: 6: 7: 8: 9: 0: 1: 2: 3: 4: 5: 6: 7: 8: 9: 0: 1: 2: 3: 4: 5: 6: 7: 8: 8: 9: 0: 1: 7: 8: 8: 8: 9: 1: 7: 8: 8: 8: 8: 8: 8: 8: 8: 8: 8		

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.

# Establishment Information

Establishment Name: SOUTHERN HANDS

Establishment Number : 605261400

Comments/Other Observations (cont'd)

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

### Establishment Information

Establishment Name: SOUTHERN HANDS

Establishment Number # 605261400

Sources				
Source Type:	Food	Source:	PFG	
Source Type:		Source:		
Source Type:		Source:		
Source Type:		Source:		
Source Type:		Source:		
Additional Comme	ents			

Left safe food donation leaflet , etc