



# TENNESSEE DEPARTMENT OF HEALTH FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

SCORE

98

Establishment Name Joanies Type of Establishment ☒ Farmer's Market Food Unit ☐ Permanent ☐ Mobile  
Address 1733 K & L St. Andrews ☐ Temporary ☐ Seasonal  
City Murfreesboro Time in 01:41 PM AM / PM Time out 01:50 PM AM / PM  
Inspection Date 04/04/2024 Establishment # 605260908 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 53

**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
Supervision						Cooking and Reheating of Time/Temperature Control For Safety (TCS) Foods			COS	R	WT
1	IN	OUT	NA	NO		Person in charge present, demonstrates knowledge, and performs duties					5
Employee Health						Cooling and Holding, Date Marking, and Time as a Public Health Control					
2	IN	OUT	NA	NO		Management and food employee awareness, reporting					5
3	IN	OUT	NA	NO		Proper use of restriction and exclusion					
Good Hygienic Practices						Consumer Advisory					
4	IN	OUT	NA	NO		Proper eating, tasting, drinking, or tobacco use					5
5	IN	OUT	NA	NO		No discharge from eyes, nose, and mouth					
Preventing Contamination by Hands						Highly Susceptible Populations					
6	IN	OUT	NA	NO		Hands clean and properly washed					5
7	IN	OUT	NA	NO		No bare hand contact with ready-to-eat foods or approved alternate procedures followed					
8	IN	OUT	NA	NO		Handwashing sinks properly supplied and accessible					2
Approved Source						Chemicals					
9	IN	OUT	NA	NO		Food obtained from approved source					5
10	IN	OUT	NA	NO		Food received at proper temperature					
11	IN	OUT	NA	NO		Food in good condition, safe, and unadulterated					
12	IN	OUT	NA	NO		Required records available: shell stock tags, parasite destruction					5
Protection from Contamination						Conformance with Approved Procedures					
13	IN	OUT	NA	NO		Food separated and protected					4
14	IN	OUT	NA	NO		Food-contact surfaces: cleaned and sanitized					5
15	IN	OUT	NA	NO		Proper disposition of unsafe food, returned food not re-served					2
16	IN	OUT	NA	NO		Proper cooking time and temperatures					5
17	IN	OUT	NA	NO		Proper reheating procedures for hot holding					
18	IN	OUT	NA	NO		Proper cooling time and temperature					5
19	IN	OUT	NA	NO		Proper hot holding temperatures					
20	IN	OUT	NA	NO		Proper cold holding temperatures					
21	IN	OUT	NA	NO		Proper date marking and disposition					
22	IN	OUT	NA	NO		Time as a public health control: procedures and records					
23	IN	OUT	NA	NO		Consumer advisory provided for raw and undercooked food					4
24	IN	OUT	NA	NO		Pasteurized foods used; prohibited foods not offered					5
25	IN	OUT	NA	NO		Food additives: approved and properly used					5
26	IN	OUT	NA	NO		Toxic substances properly identified, stored, used					
27	IN	OUT	NA	NO		Compliance with variance, specialized process, and HACCP plan					5

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

OUT=not in compliance COS=corrected on-site during inspection R=repeat (violation of the same code provision)						Compliance Status			COS	R	WT
Safe Food and Water						Utensils and Equipment					
28	OUT					Pasteurized eggs used where required					1
29	OUT					Water and ice from approved source					2
30	OUT					Variance obtained for specialized processing methods					1
Food Temperature Control						Physical Facilities					
31	OUT					Proper cooling methods used; adequate equipment for temperature control					2
32	OUT					Plant food properly cooked for hot holding					1
33	OUT					Approved thawing methods used					1
34	OUT					Thermometers provided and accurate					1
Food Identification						Administrative Items					
35	OUT					Food properly labeled; original container; required records available					1
Prevention of Food Contamination						Compliance Status			YES	NO	WT
36	OUT					Insects, rodents, and animals not present					2
37	OUT					Contamination prevented during food preparation, storage & display					1
38	OUT					Personal cleanliness					1
39	OUT					Wiping cloths: properly used and stored					1
40	OUT					Washing fruits and vegetables					1
Proper Use of Utensils						Non-Smokers Protection Act					
41	OUT					In-use utensils; properly stored					1
42	OUT					Utensils, equipment and linens; properly stored, dried, handled					1
43	OUT					Single-use/single-service articles; properly stored, used					1
44	OUT					Gloves used properly					1
45	OUT					Food and nonfood-contact surfaces cleanable, properly designed, constructed, and used					1
46	OUT					Warewashing facilities; installed, maintained, used, test strips					1
47	OUT					Nonfood-contact surfaces clean					1
48	OUT					Hot and cold water available; adequate pressure					2
49	OUT					Plumbing installed; proper backflow devices					2
50	OUT					Sewage and waste water properly disposed					2
51	OUT					Toilet facilities: properly constructed, supplied, cleaned					1
52	OUT					Garbage/refuse properly disposed; facilities maintained					1
53	OUT					Physical facilities installed, maintained, and clean					1
54	OUT					Adequate ventilation and lighting; designated areas used					1
55	OUT					Current permit posted					0
56	OUT					Most recent inspection posted					0
57	OUT					Compliance with TN Non-Smoker Protection Act					0
58	OUT					Tobacco products offered for sale					0
59	OUT					If tobacco products are sold, NSPA survey completed					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. 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, 68-14-708, 68-14-709, 68-14-711, 68-14-715, 68-14-716, 4-5-329.

Signature of Person In Charge [Signature] Date 04/04/2024 Signature of Environmental Health Specialist [Signature] Date 04/04/2024

\*\*\*\* 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: Joanies  
Establishment Number #: 605260908

**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.	
"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)

**Equipment Temperature**

Description	Temperature ( Fahrenheit)

**Food Temperature**

Description	State of Food	Temperature ( Fahrenheit)

**Observed Violations**

Total # 2

Repeated # 0

37:

46:

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***Comments/Other Observations***

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\*\*\*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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**Comments/Other Observations (cont'd)****Additional Comments (cont'd)**

***See last page for additional comments.***

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**Sources**

Source Type:	Source:
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**Additional Comments**