

City

Inspection Date

Nashville

TENNESSEE DEPARTMENT OF HEALTH FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

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O Farmer's Market Food Unit **HCA Capitol View** Remanent O Mobile Establishment Name Type of Establishment 1100 Charlotte Avenue O Temporary O Seasonal Address

> Time in 02:25 PM AM / PM Time out 03:30; PM AM / PM 04/17/2024 Establishment # 605249225 Embargoed 0

O Follow-up **K**Routine O Complaint O Preliminary O Consultation/Other Purpose of Inspection

Number of Seats 900 Risk Category О3 04 Follow-up Required O Yes 疑 No ase Control and Prevention

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

m (IN, OUT, NA, NO) for a

12	e in c	ompli	ance		OUT=not in compliance NA=not applicable NO=not observe	ed		CC	S=cc	rrecte	d on-si	te duri	ing ins	spection R=repeat (violation of the same code provi
					Compliance Status	cos	R	WT						Compliance Status
	IN OUT NA NO Supervision						IN	оит	NA	NO	Cooking and Reheating of Time/Temperature Control For Safety (TCS) Foods			
1		0			Person in charge present, demonstrates knowledge, and performs duties	0	0	5	16	0	0	0	100	Proper cooking time and temperatures
Н	IN	OUT	NA	NO	Employee Health				17	-	ŏ	ŏ		Proper reheating procedures for hot holding
2	TX.	0			Management and food employee awareness; reporting	0	0							Cooling and Holding, Date Marking, and Time as
3	×	0			Proper use of restriction and exclusion	0	0	5		IN	N TOUTI NA I NO I		NO	a Public Health Control
	IN	OUT	NA	NO	Good Hygienic Practices				18		0	0	0	Proper cooling time and temperature
4	X	0			Proper eating, tasting, drinking, or tobacco use	0	0	5	15	_	0	0	寒	Proper hot holding temperatures
5	×	0			No discharge from eyes, nose, and mouth	0	0	Ů	20		0	0		Proper cold holding temperatures
	IN	OUT	NA	NO	Proventing Contamination by Hands				21	1 26	0	0	0	Proper date marking and disposition
6	X	0		0	Hands clean and properly washed	0	0		22	100	0	0	0	Time as a public health control: procedures and records
7	800	0	0	0	No bare hand contact with ready-to-eat foods or approved	0	0	5			_	_	_	
	-	_	_		alternate procedures followed	-	-	_	\vdash	IN	OUT	_	NO	Consumer Advisory
8	-	OUT	NA	NO	Handwashing sinks properly supplied and accessible Approved Source	0	0	2	23	0	0	×		Consumer advisory provided for raw and undercooked food
9	233	0	121		Food obtained from approved source	0	0		Н	IN	OUT	NA	NO	Highly Susceptible Populations
10		0	0	×	Food received at proper temperature	0	0	1 1	24	0	0	Ж		Dartourined feeds week ambibleed feeds not effected
11	×	0			Food in good condition, safe, and unadulterated	0	0	5	[2	10	•	300		Pasteurized foods used; prohibited foods not offered
12		0	×	0	Required records available: shell stock tags, parasite destruction	0	0			IN	OUT	NA	NO	Chemicals
	IN	OUT	NA	NO	Protection from Contamination				25		0	X		Food additives: approved and properly used
13	×	0	0		Food separated and protected	0	0	4	26	窦	0		-	Toxic substances properly identified, stored, used
14	×	0	0		Food-contact surfaces: cleaned and sanitized	0	0	5		IN	OUT	NA	NO	Conformance with Approved Procedures
15	×	0			Proper disposition of unsafe food, returned food not re- served	0	0	2	27	0	0	×		Compliance with variance, specialized process, and HACCP plan

			GOO	D R	ч.	UL I	PRA	TIC	ES			
		OUT=not in compliance COS=corre	ected o	n-site	duri	ng in	spection	m	R-repeat (violation of the same code provision)			
		Compliance Status	COS	R	WT] [Compliance Status	COS	R	WT
OUT Safe Food and Water				1 [OUT						
28	0	Pasteurized eggs used where required	0	ТО	1	11	45	0	Food and nonfood-contact surfaces cleanable, properly designed,	0	0	•
29	0	Water and ice from approved source	0		2	1 I	40	•	constructed, and used	_	u	'
30		Variance obtained for specialized processing methods	0	0	1	1 C	46	0	Warewashing facilities, installed, maintained, used, test strips	0	0	4
	OUT	Food Temperature Control				3 L	40	•	warewashing lacinoes, installed, maintained, dised, test sorps		_	
31	0	Proper cooling methods used; adequate equipment for temperature	0	0	2	11	47	0	Nonfood-contact surfaces clean	0	0	1
31	١٠	control	١٠	١٧	l z	11		OUT	Physical Facilities		_	
32	0	Plant food properly cooked for hot holding	0	0	1	11	48	0	Hot and cold water available; adequate pressure	0	ा	2
33	_	Approved thawing methods used	ō	ō	1	11	49		Plumbing installed; proper backflow devices	ō	ō	2
34		Thermometers provided and accurate	0	0	1	11	50		Sewage and waste water properly disposed	0	0	2
	OUT		Ť	_		t t	51		Toilet facilities: properly constructed, supplied, cleaned	ō	ō	1
35	0	Food properly labeled; original container; required records available	0	Го	1	11	52		Garbage/refuse properly disposed; facilities maintained	0	ō	1
-	OUT	Prevention of Feed Contamination	-	\perp	_	4 1	53	3	Physical facilities installed, maintained, and clean	0	0	1
_	-				_	4 6	-				$\overline{}$	
36	0	Insects, rodents, and animals not present	0	0	2	IJ	54	0	Adequate ventilation and lighting; designated areas used	0	0	1
37	0	Contamination prevented during food preparation, storage & display	0	0	1	Ш		OUT	Administrative Items			
38	0	Personal cleanliness	0	0	1	11	55	0	Current permit posted	0	ा	0
39	0	Wiping cloths; properly used and stored	0	0	1	11	56	0	Most recent inspection posted	0	0	v
40	0	Washing fruits and vegetables	0	0	1	11			Compliance Status	YES	NO	WT
	OUT	Proper Use of Utensils				1 [Non-Smokers Protection Act			
41		In-use utensils; properly stored	0	0	1	1 C	57 58		Compliance with TN Non-Smoker Protection Act	X	0	
42	0	Utensils, equipment and linens; properly stored, dried, handled	0	0	1][58		Tobacco products offered for sale	0	0	0
43		Single-use/single-service articles; properly stored, used	0	0	1][59		If tobacco products are sold, NSPA survey completed	0	0	
44	0	Gloves used properly	0	0	1	Ι,						

You have the right to request a h n ten (10) days of the date of the

04/17/2024

04/17/2024

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 ****

TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



Establishment Information

Establishment Name: HCA Capitol View Establishment Number ≠: |605249225

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.	П
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.	\vdash
Smoking observed where smoking is prohibited by the Act.	

Warewashing Info								
Machine Name	Sanitizer Type	PPM	Temperature (Fahrenhelt)					
3 compartment sink	Quaternary	200						
Hobart	High temp		178					
Hobart main			180					

Equipment Temperature					
Description	Temperature (Fahrenheit)				
Dukers reach in freezer	-4				
True refrigerator Salad	40				
everest salad bar cooler	38				
True cooler coffee	40				

Food Temperature		
Description	State of Food	Temperature (Fahrenheit
Sourcream in reach in cooler	Cold Holding	40
Half and half in reach in cooler	Cold Holding	41
Cooked chicken cooling for an hour in traulsen	Cold Holding	51
Raw beef patties in traulsen cooler	Cold Holding	40
Traulsen cooler	Cold Holding	41
Cooked mushrooms in traulsen	Cold Holding	40
Sliced tomatoes in traulsen cooler	Cold Holding	40
Honey dew in walk in cooler	Cold Holding	41
Bin of cut coleslaw in walk in cooler	Cold Holding	40
cooked chicken in walk in freezer cooling 30min	Cooling	77
Ham deli meats in walk in cooler	Cold Holding	40

Observed Violations
Total # B
Repeated # ()
53: Floor tiles beneath salvajor food waste system observed excessive black buildup. 53: Ceiling tiles above dish area observed dusty.
53: Observed excessive wall damage near hand washing sink on pizza line.
30. Observed excessive wan damage near nand washing sink on pizza line.

[&]quot;"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: HCA Capitol View Establishment Number: 605249225

Comments/Other Observations

- 1: (IN): ANSI Certified Manager present.
- 2: Posted on wall.
- 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: No 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: See 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.
- 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: Not observed.
- 17: (NO) No TCS foods reheated during inspection.
- 18: See temp.
- 19: Not observed.
- 20: See temp.
- 21: (IN) Verified date marking system in place for all ready-to-eat TCS foods that are held longer than 24 hours.
- 22: Time as Public Health Control policy available for pizza.
- 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:

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.

Establishment Name: HCA Capitol View	
Establishment Number: 605249225	
Comments/Other Observations (cont'd)	
Additional Comments (cont'd)	
See last page for additional comments.	
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Establishment Information

Establishment Information Establishment Name: **HCA Capitol View** Establishment Number #: 605249225 Sources Source Type: Food Source: Sysco Source Type: Food Creation gardens Source: Municipal Source Type: Water Source:

Source:

Source:

Additional Comments

Source Type:

Source Type:

Ecolab pest control Michael.ausley@sodexo.com