

Establishment Name

Address

# TENNESSEE DEPARTMENT OF HEALTH

FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

O Farmer's Market Food Unit

Remanent O Mobile Type of Establishment

O Temporary O Seasonal

Chattanooga City

Time in 11:45; AM AM / PM Time out 12:35; PM AM / PM

Inspection Date

Risk Category

**K**Routine Purpose of Inspection

O Follow-up

09/05/2023 Establishment # 605215335

Outback Steakhouse

544 Northgate Mall Drive

O Complaint

О3

O Preliminary

Embargoed 0

O Consultation/Other Follow-up Required

O Yes 疑 No

Number of Seats 242

SCORE

#### FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

IN-in compliance OUT-not in compliance NA-not applicable NO-not observed						ed		0
	Compliance Status							WT
	IN	оит	NA	NO	Supervision			
1	盔	0			Person in charge present, demonstrates knowledge, and performs duties	0	0	5
	IN	OUT	NA	NO	Employee Health			
2	ЭK	0			Management and food employee awareness; reporting	0	0	
3	×	0			Proper use of restriction and exclusion	0	0	5
	IN	OUT	NA	NO	Good Hygienic Practices			
4	*	0		0	Proper eating, tasting, drinking, or tobacco use	0	0	5
5	*	0		0	No discharge from eyes, nose, and mouth	0	0	°
	IN	OUT	NA	NO	Proventing Contamination by Hands			
6	黨	0		0	Hands clean and properly washed	0	0	
7	왮	0	0	0	No bare hand contact with ready-to-eat foods or approved alternate procedures followed	0	0	5
8	×	0			Handwashing sinks properly supplied and accessible	0	0	2
	IN	OUT	NA	NO	Approved Source			
9	黨	0			Food obtained from approved source	0	0	
10	0	0	0	×	Food received at proper temperature	0	0	
11	×	0			Food in good condition, safe, and unadulterated	0	0	5
12	0	0	×	0	Required records available: shell stock tags, parasite destruction	0	0	
	IN	OUT	NA	NO	Protection from Contamination			
13	-	0	0		Food separated and protected	0	0	4
14	×	0	0		Food-contact surfaces: cleaned and sanitized	0	0	5
15	Ħ	0			Proper disposition of unsafe food, returned food not re- served		0	2

Compliance Status							R	WT
	IN	OUT	NA	NO	Cooking and Reheating of Time/Temperature Control For Safety (TCS) Foods			
16		0	0	黨	Proper cooking time and temperatures	0	0	5
17	8	0	0	0	Proper reheating procedures for hot holding	0	0	۰
	IN	оит	NA	NO	Cooling and Holding, Date Marking, and Time as a Public Health Control			
18	0	0	0	×	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	氮	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	0	0	×		Pasteurized foods used; prohibited foods not offered	0	0	5
	IN	оит	NA	NO	Chemicals			
25	0	0	X		Food additives: approved and properly used	0	0	5
26	黨	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

#### s, chemicals, and physical objects into foods.

		OUT=not in compliance COS=corr			
		Compliance Status	cos	R	W
	OUT	Caro rocc and comes			_
28	0	Pasteurized eggs used where required	0	0	1
29	0		0	0	-2
30	0	Variance obtained for specialized processing methods	0	0	1
	OUT	Food Temperature Control			
31	0	Proper cooling methods used; adequate equipment for temperature control	0	0	1
32	0	Plant food properly cooked for hot holding	0	0	Т
33	0	Approved thawing methods used	0	0	7
34	0	Thermometers provided and accurate	0	0	7
	OUT	Food Identification			
35	0	Food properly labeled; original container; required records available	0	0	7
	OUT	Prevention of Food Contamination			
36	0	Insects, rodents, and animals not present	0	0	1
37	338	Contamination prevented during food preparation, storage & display	0	0	1
38	0	Personal cleanliness	0	0	г
39	0	Wiping cloths; properly used and stored	0	0	_
40	0	Washing fruits and vegetables	0	0	'
	OUT Proper Use of Utensils				
41	0	In-use utensils; properly stored	0	0	
42	0	Utensils, equipment and linens; properly stored, dried, handled	0	0	7
43	0		0	0	r
		Gloves used properly	0	0	_

pecti	on	R-repeat (violation of the same code provision)			
		Compliance Status	cos	R	W
	OUT	Utensiis and Equipment			
45	0	Food and norfood-contact surfaces cleanable, properly designed, constructed, and used	0	0	1
46	0	Warewashing facilities, installed, maintained, used, test strips	0	0	
47	0	Nonfood-contact surfaces clean	0	0	
	OUT	Physical Facilities			
48	0	Hot and cold water available; adequate pressure	0	0	
49	0	Plumbing installed; proper backflow devices	0	0	
50	0	Sewage and waste water properly disposed	0	0	
51	0	Toilet facilities: properly constructed, supplied, cleaned	0	0	
52	0	Garbage/refuse properly disposed; facilities maintained	0	0	
53	3%	Physical facilities installed, maintained, and clean	0	0	
54	0	Adequate ventilation and lighting; designated areas used	0	0	
	OUT	Administrative Items			Ī
55	0	Current permit posted	0	0	П
56	0	Most recent inspection posted	0	0	
		Compliance Status	YES	NO	٧
		Non-Smokers Protection Act			Т
57		Compliance with TN Non-Smoker Protection Act	- 3%	0	
58		Tobacco products offered for sale	0	0	١.
59		If tobacco products are sold, NSPA survey completed	0	0	

You have the right to request a hi ten (10) days of the date of the 68-14-711, 68-14-715, 68-14-716, 4-5-320.

Signature of Person In Charge

09/05/2023

09/05/2023

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

Date

Free food safety training classes are available each month at the county health department. PH-2267 (Rev. 6-15) ) 4232098110 Please call ( to sign-up for a class.

RDA 629

Date

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



#### Establishment Information

Establishment Name: Outback Steakhouse
Establishment Number #: |605215335

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.	
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.	
Smoking observed where smoking is prohibited by the Act.	+

Warewashing Info							
Machine Name	Sanitizer Type	PPM	Temperature ( Fahrenhelt)				
Dish machine Sani bucket	Heat Lactic acid	1875	167				

Equipment Temperature					
Description	Temperature ( Fahrenheit)				

Food Temperature		
Description	State of Food	Temperature ( Fahrenheit)
Cut leafy greens	Cold Holding	40
Cut toms	Cold Holding	40
Soup	Hot Holding	166
Cutlettuce	Cold Holding	41
Raw chx	Cold Holding	39
Potato	Hot Holding	167
Sweetpotato	Hot Holding	166
Pasta	Cold Holding	40
Rice	Cold Holding	39
Cuttoms	Cold Holding	40
Mushrooms	Hot Holding	156
Raw steak	Cold Holding	39
Raw shrimp	Cold Holding	38
Raw shrimp	Cold Holding	35
Raw steak	Cold Holding	39

Observed Violations						
Total # 2						
Repeated # ()						
37: Uncovered lettuce 9n top shelf of walkin						
53: Floor tiles in poor repair						
***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: Outback Steakhouse

Establishment Number: 605215335

### Comments/Other Observations

- 1: (IN): ANSI Certified Manager present.
- 2: Pic able to provide a copy
- 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: Hands washed at appropriate times
- 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: Approved
- 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: Discussed reheating prime rib. Proper reheating procedures are being followed.
- 18: No cooling observed
- 19: Adequate hot holding available
- 20: Adequate cold hold holding available
- 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: On menu
- 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.

<sup>\*\*\*</sup>See page at the end of this document for any violations that could not be displayed in this space.

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nts/Other Observations (cont'd)	
nal Comments (cont'd)	
st page for additional comments.	

Establishment Information

Establishment Information							
Establishment Name: Outback Steakhouse							
Establishment Number #: 6052	215335						
1.00							
Sources							
Source Type:	Water	Source:	Hud				
Source Type:	Food	Source:	Pfg				
Source Type:		Source:					
Source Type:		Source:					
Source Type:		Source:					
Additional Comments							