



TENNESSEE DEPARTMENT OF HEALTH FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

SCORE
74

Establishment Name Hilton Suites Main Kitchen Type of Establishment Farmer's Market Food Unit
 Permanent Mobile
Address 121 4th S. Ave. Temporary Seasonal
City Nashville Time in 01:40 PM AM / PM Time out 03:35 PM AM / PM
Inspection Date 07/14/2022 Establishment # 605143280 Embargoed 25
Purpose of Inspection Routine Follow-up Complaint Preliminary Consultation/Other
Risk Category 1 2 3 4 Follow-up Required Yes No Number of Seats 159

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.)

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

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

GOOD RETAIL PRACTICES

| Compliance Status | | | | | COS | R | WT | | |
|---|-------------------------------------|---|--------------------------|--------------------------|--------------------------|--------------------------|-----|----|----|
| OUT | | | | | | | | | |
| Safe Food and Water | | | | | | | | | |
| 28 | <input type="checkbox"/> | Pasteurized eggs used where required | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 1 | | |
| 29 | <input type="checkbox"/> | Water and ice from approved source | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 2 | | |
| 30 | <input type="checkbox"/> | Variance obtained for specialized processing methods | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 1 | | |
| Food Temperature Control | | | | | | | | | |
| 31 | <input type="checkbox"/> | Proper cooling methods used; adequate equipment for temperature control | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 2 | | |
| 32 | <input type="checkbox"/> | Plant food properly cooked for hot holding | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 1 | | |
| 33 | <input type="checkbox"/> | Approved thawing methods used | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 1 | | |
| 34 | <input type="checkbox"/> | Thermometers provided and accurate | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 1 | | |
| Food Identification | | | | | | | | | |
| 35 | <input checked="" type="checkbox"/> | Food properly labeled; original container; required records available | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 1 | | |
| Prevention of Food Contamination | | | | | | | | | |
| 36 | <input type="checkbox"/> | Insects, rodents, and animals not present | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 2 | | |
| 37 | <input checked="" type="checkbox"/> | Contamination prevented during food preparation, storage & display | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 1 | | |
| 38 | <input type="checkbox"/> | Personal cleanliness | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 1 | | |
| 39 | <input checked="" type="checkbox"/> | Wiping cloths: properly used and stored | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 1 | | |
| 40 | <input type="checkbox"/> | Washing fruits and vegetables | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 1 | | |
| Proper Use of Utensils | | | | | | | | | |
| 41 | <input type="checkbox"/> | In-use utensils; properly stored | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 1 | | |
| 42 | <input type="checkbox"/> | Utensils, equipment and linens; properly stored, dried, handled | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 1 | | |
| 43 | <input type="checkbox"/> | Single-use/single-service articles; properly stored, used | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 1 | | |
| 44 | <input type="checkbox"/> | Gloves used properly | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 1 | | |
| Utensils and Equipment | | | | | | | | | |
| 45 | <input type="checkbox"/> | Food and nonfood-contact surfaces cleanable, properly designed, constructed, and used | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 1 | | |
| 46 | <input type="checkbox"/> | Warewashing facilities, installed, maintained, used, test strips | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 1 | | |
| 47 | <input type="checkbox"/> | Nonfood-contact surfaces clean | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 1 | | |
| Physical Facilities | | | | | | | | | |
| 48 | <input type="checkbox"/> | Hot and cold water available; adequate pressure | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 2 | | |
| 49 | <input type="checkbox"/> | Plumbing installed; proper backflow devices | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 2 | | |
| 50 | <input checked="" type="checkbox"/> | Sewage and waste water properly disposed | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 2 | | |
| 51 | <input type="checkbox"/> | Toilet facilities: properly constructed, supplied, cleaned | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 1 | | |
| 52 | <input checked="" type="checkbox"/> | Garbage/refuse properly disposed; facilities maintained | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 1 | | |
| 53 | <input checked="" type="checkbox"/> | Physical facilities installed, maintained, and clean | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 1 | | |
| 54 | <input type="checkbox"/> | Adequate ventilation and lighting; designated areas used | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 1 | | |
| Administrative Items | | | | | | | | | |
| 55 | <input checked="" type="checkbox"/> | Current permit posted | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 0 | | |
| 56 | <input type="checkbox"/> | Most recent inspection posted | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 0 | | |
| Compliance Status | | | | | | | | | |
| | | | | | | | YES | NO | WT |
| Non-Smokers Protection Act | | | | | | | | | |
| 57 | <input checked="" type="checkbox"/> | Compliance with TN Non-Smoker Protection Act | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 0 | | |
| 58 | <input type="checkbox"/> | Tobacco products offered for sale | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 0 | | |
| 59 | <input type="checkbox"/> | If tobacco products are sold, NSPA survey completed | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 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, 4-5-320.

Signature of Person In Charge [Signature] Date 07/14/2022 Signature of Environmental Health Specialist [Signature] Date 07/14/2022

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



Establishment Information

Establishment Name: Hilton Suites Main Kitchen
 Establishment Number #: 605143280

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) |
|------------------------------|----------------|-----|---------------------------|
| Sanitizer bucket | QA | 100 | |
| Sanitizer bucket 2 | QA | 200 | |
| High-temperature dish washer | | | |

Equipment Temperature

| Description | Temperature (Fahrenheit) |
|-------------------|---------------------------|
| Hot box 1 | 161 |
| Reach in cooler 1 | 35 |
| Reach in cooler 2 | 35 |
| Reach in cooler 3 | 36 |

Food Temperature

| Description | State of Food | Temperature (Fahrenheit) |
|---|---------------|---------------------------|
| Oatmeal in hot box 1 | Hot Holding | 146 |
| Milk in Reach in cooler 1 | Cold Holding | 35 |
| Cooked wings in Reach in cooler 2 | Cold Holding | 40 |
| Milk in Reach in cooler 3 | Cold Holding | 54 |
| Milk in Reach in cooler 3 (sandwiched) | Cold Holding | 40 |
| Sliced tomatoes on Prep-cooler 1 prepared 20min | Cold Holding | 53 |
| Pizza sauce on Prep-cooler 2 | Cold Holding | 37 |
| Liquid egg in Prep-cooler 2 | Cold Holding | 43 |
| Cooked sausage patty in Prep-cooler 3 | Cold Holding | 54 |
| Cooked burger off of the grill | Cooking | 169 |
| Cooked brisket in drawer cooler 1 | Cold Holding | 38 |
| Liquid egg whites in Walk in cooler 1 | Cold Holding | 40 |
| Salad greens in Walk in cooler 2 | Cold Holding | 40 |
| Sausage gravy in Walk in cooler 3 | Cooking | 53 |

Observed Violations

Total # 16

Repeated # 0

- 11: Excessively damaged cans stored in dry storage. CA: embargoed.
- 20: Opened milk in Reach in cooler 3 reading 54 degrees. CA: embargoed.
- 21: Yogurt in Walk in cooler 1 dated 6/11 not discarded. CA: embargoed.
- 21: Dairy product in Reach in cooler opened of 24hrs prior not date marked. CA: milk labeled, and half and half embargoed.
- 23: Dinner menu does not have a consumer advisory with disclaimer asterisks. CA: PIC advised they will be added to the menu.
- 26: Hand lotion and moist towelettes stored on top of clean dishes at server area. CA: chemicals properly stored.
- 26: Chemical spray bottle stored next to a bin of single use tea pouches. CA: chemicals properly stored.
- 35: Unlabeled ingredient bin containing a brown powder stored in dry storage.
- 37: Employee drink with a screw top cap store on prep table in the back kitchen.
- 37: Coffee filters stored uncovered at server area.
- 37: Employee cell phone stored on prep table at the back kitchen.
- 39: Sanitizer bucket reading 100ppm of QA.
- 50: Slow drain under the 3-compartment sink causing waste water to spill onto the floor.
- 52: Excessive garbage around dumpsters.
- 53: Oil droplets forming on the oven hood.
- 55: Current permit not posted.



Establishment Information

Establishment Name: Hilton Suites Main Kitchen

Establishment Number : 605143280

Comments/Other Observations

- 1: (IN): PIC demonstrates knowledge by correctly answering questions regarding principles applicable to the food operation.
- 2: (IN): An employee health policy is available.
- 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: Employees washing hands.
- 8: (IN): All handsinks are properly equipped and conveniently located for food employee use.
- 9: Food sources listed.
- 10: (NO): No food received during 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.
- 16: (IN) All raw animal foods cooked to proper temperatures.
- 17: (NO) No TCS foods reheated during inspection.
- 18: Food temps listed.
- 19: Food temps listed.
- 24: (NA) A highly susceptible population is not served.
- 25: (NA) Establishment does not use any additives or sulfites on the premises.
- 27: (NA) Establishment is not required to have a variance or HACCP plan, performs no special processes.
- 57:
- 58:

***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.

Establishment Information

Establishment Name: Hilton Suites Main Kitchen

Establishment Number : 605143280

Comments/Other Observations (cont'd)

Additional Comments (cont'd)

See last page for additional comments.

