

Establishment Name

Inspection Date

Risk Category

Address

City

TENNESSEE DEPARTMENT OF HEALTH

FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

O Farmer's Market Food Unit

SCORE

Number of Seats 71

Permanent O Mobile Type of Establishment

O Temporary O Seasonal

Time in 02:10 PM AM / PM Time out 02:40; PM

O Yes 疑 No

Embargoed 000

Follow-up Required

09/05/2023 Establishment # 605248319 ₩ Follow-up Routine O Complaint O Preliminary O Consultation/Other

Purpose of Inspection О3

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¥≕ın c	:ompiii	moe		OUT=not in compliance NA=not applicable NO=not observe	ed		C	25=∞	rrecte	d on
				Compliance Status	cos	R	WT			_
IN	OUT	NA	NO	Supervision					IN	ου
902	0			Person in charge present, demonstrates knowledge, and	0	0	- 5			L
	_			performs duties		Ŭ				0
IN	-	NA	NO		_	_		17	0	0
-86	0			Management and food employee awareness; reporting	0	0				lou
0	0			Proper use of restriction and exclusion	0	0	۰		IN	00
IN	OUT	NA	NO	Good Hygienic Practices				18	0	0
0	0				0	0			_	0
_	_		_		0	0			0.00	0
	-	NA	200	Preventing Contamination by Hands				21	0	0
0	0		0		0	0		1 22	0	l٥
906	0	0	0		0	0	5			_
-		_	_		_	_			IN	ΟU
黑				Handwashing sinks properly supplied and accessible	0	0	2	23	0	Ιo
	-	NA	NO		.	_	_			_
					_				IN	ΟU
	_	0	0			0		24	0	Го
0	0				0	0		E		Ľ
0	0	0	0		0	0			IN	ου
IN	OUT	NA	NO	Protection from Contamination				25	0	6
0	0	0		Food separated and protected	0	0	4	26	窳	ि
0	0	0		Food-contact surfaces: cleaned and sanitized	0	0	5		IN	ΟU
0	0			Proper disposition of unsafe food, returned food not re- served	0	0	2	27	0	0
	▼ 瀬 ▼瀬 ○ ▼ ○ ○ ○ 瀬 瀬 ▼ ○ ○ ○ ○ ▼ ○ ○	IN OUT IN OUT O O O IN OUT O O O	O NA O O O O O O O O O	IN OUT NA NO IN OUT NA NO O O O IN OUT NA NO O O O O	IN OUT NA NO Proper eating, tasting, drinking, or tobacco use O O Proper eating, tasting, drinking, or tobacco use O O O Proper eating, tasting, drinking, or tobacco use O O O O Proper eating, tasting, drinking, or tobacco use O O O O O O O O O O O O O O O O O O O	IN OUT NA NO Proper eating, tasting, drinking, or tobacco use O O O O O O O O O O O O O O O O O O O	IN OUT NA NO Person in charge present, demonstrates knowledge, and performs duties Proper use of restriction and exclusion O O O O O O O O O O O O O O O O O O	Compliance Status	IN OUT NA NO Supervision Person in charge present, demonstrates knowledge, and performs duties Person in charge present, demonstrates knowledge, and performs duties Person in charge present, demonstrates knowledge, and performs duties Person in charge present, demonstrates knowledge, and performs duties Person in charge present, demonstrates knowledge, and O O S 16	IN OUT NA NO Supervision IN IN OUT NA NO Proper use of restriction and exclusion IN OUT NA NO Proper eating, tasting, drinking, or tobacco use O O O O O O O O O O O O O O O O O O

SHINING STAR DAYCARE - FD-SRV.

2988 PARK AVE

Memphis

					Compliance Status	cos	R	WT
	IN	OUT	NA	NO	Cooking and Reheating of Time/Temperature Control For Safety (TCS) Foods			
16		0	0	0	Proper cooking time and temperatures	0	0	5
17	0	0	0	0	Proper reheating procedures for hot holding	0	0	٠
	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		0	0		Proper cold holding temperatures	0	0	5
21	0	0	0	0	Proper date marking and disposition	0	0	*
22	0	0	0	0	Time as a public health control: procedures and records	0	0	
	IN	OUT	NA	NO	Consumer Advisory	Consumer Advisory		
23	0	0	0		Consumer advisory provided for raw and undercooked food	0	0	4
	IN	OUT	NA	NO	Highly Susceptible Populations			
24	0	0	0		Pasteurized foods used; prohibited foods not offered	0	0	5
	IN	оит	NA	NO	Chemicals			
25		0	0		Food additives: approved and properly used	0	0	5
26	0.0	0			Toxic substances properly identified, stored, used	0	0	,
	IN	OUT	NA	NO	Conformance with Approved Procedures			
27	0	0	0		Compliance with variance, specialized process, and HACCP plan	0	0	5

to control the introduction of pathoge ns, chemicals, and physical objects into foods.

L PRACTICES

			GOO		
		OUT=not in compliance COS=corr			
		Compliance Status	cos	R	W
	OUT	Caro i con amo i i mon	-		_
28	0	Pasteurized eggs used where required	0	0	1
29	0		0	0	-
30	0	Variance obtained for specialized processing methods	0	0	Ŀ
	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	1
33	0	Approved thawing methods used	0	0	,
34	0	Thermometers provided and accurate	0	0	Ī
	OUT	Food Identification			
35	0	Food properly labeled; original container; required records available	0	0	,
	OUT	Prevention of Food Contamination			
36	0	Insects, rodents, and animals not present	0	0	:
37	288	Contamination prevented during food preparation, storage & display	0	0	1
38	0	Personal cleanliness	0	0	r
39	0	Wiping cloths; properly used and stored	0	0	Ŀ
40	0	Washing fruits and vegetables	0	0	,
	OUT	Proper Use of Utensils			
41	0	In-use utensils; properly stored	0	0	
42	100	Utensils, equipment and linens; properly stored, dried, handled	0	0	,
43	0		0	0	r
44	10	Gloves used properly	0	0	

pecti		R-repeat (violation of the same code provision Compliance Status	cos	R	W
	OUT	Utensils and Equipment			
45	Ħ	Food and nonfood-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	黨	Plumbing installed; proper backflow devices	0	0	-:
50	0	Sewage and waste water properly disposed	0	0	- 2
51	782	Toilet facilities: properly constructed, supplied, cleaned	0	0	_
52	0	Garbage/refuse properly disposed; facilities maintained	0	0	١.
53	3%	Physical facilities installed, maintained, and clean	0	0	-
54	0	Adequate ventilation and lighting; designated areas used	0	0	
	OUT	Administrative Items	Т		
55	0	Current permit posted	0	0	П
56	0	Most recent inspection posted	0	0	'
		Compliance Status	YES	NO	V
		Non-Smokers Protection Act			
57		Compliance with TN Non-Smoker Protection Act	0	0	
58		Tobacco products offered for sale	0	×	١ ١
59		If tobacco products are sold, NSPA survey completed	0	О	

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

09/05/2023

Date Signature of Environmental Health Specialist

09/05/2023

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

Free food safety training classes are available each month at the county health department. PH-2267 (Rev. 6-15) RDA 629) 9012229200 Please call (to sign-up for a class.

Date

TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



Establishment Information							
Establishment Name:	SHINING STAR DAYCARE - FD-SRV.						
Establishment Number	= 605248319						

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 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.	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 infiltrating 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)					

Equipment Temperature							
Description		Temperature (Fahrenheit)					

esoription	State of Food	Temperature (Fahrenheit

Observed Violations								
Total # 6								
Repeated # ()								
37: Peanut butter, seasonings, condiments, sugar,etc. are not completely covered. Make sure all items are covered and protected (close lids and tops). 42: Store pots and pans upside down.								
45: Toaster and microwave ovens plus freezer shelf (black fridge)are not clean. Clean non-food								
49: Slow drain at handsink								
51: Trash can in the employee bathroom needs a lid.								
53: Floors need to be cleaned.								

[&]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: SHINING STAR DAYCARE - FD-SRV.

Establishment Number: 605248319

Comments/Other Observations

1: Person in charge did not demonstrate knowledge.

9/5/23: knowledge was demonstrated

9/5/23:

2: Employee illness policy not present

9/5/23: employee illness policy is in the office in handbook

7: PIC observed giving children peanut butter crackers with bare hands. Please wear gloves when serving ready to eat foods.

9/5/23: proper food handling

8: No sign posted at the handwashing sink

9/5/23: sign posted

20: Black refrigerator air gaskets not allowing for refrigerator to close completely and cold hold foods at proper temperature -45 degrees F

9/5/23: refrigerator not in use until gasket arrives per being already ordered

26: Windex is improperly stored near clean dishes. Store Windex with other chemicals.

9/5/23: chemicals are properly stored

1:

|4:

5:

|7-

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: SHINING STAR DAYCARE - FD-SRV.			
Establishment Number: 605248319			
Comments/Other Observations (cont'd)			
A delition of Comments (souther			
Additional Comments (cont'd)			
See last page for additional comments.			

Establishment Information

Establishment Name: SHINING STAR DAYCARE - FD-SRV.					
Establishment Number #: 605248319					
in the control of the					
Sources					
Source Type:	Source:				
Source Type:	Source:				
Source Type:	Source:				
Source Type:	Source:				
Source Type:	Source:				
Additional Comments					

Establishment Information