

Establishment Name

Address

Risk Category

City

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

10/16/2023 Establishment # 605316124 Embargoed 0 Inspection Date

Holiday Inn Express & Suites Food

565 S. Mt. Juliet Rd.

Mount Juliet

Time in 09:25 AM AM / PM Time out 10:00: AM AM / PM

O Follow-up Purpose of Inspection **K**Routine O Complaint O Preliminary O Consultation/Other О3

Number of Seats 40 Follow-up Required O Yes 疑 No

SCORE

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

10	ê ∙in c	ompli	ance		OUT=not in compliance NA=not applicable NO=not observ	ed		O
					Compliance Status	cos	R	WT
	IN	OUT	NA	NO	Supervisien			
1	氮	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	×	Proper use of restriction and exclusion		0	0	5		
	IN	OUT	NA	NO	Good Hygienic Practices			
4	30	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	Preventing Contamination by Hands			
6	100	0		0	Hands clean and properly washed	0	0	
7	鉱	0	0	0	No bare hand contact with ready-to-eat foods or approved alternate procedures followed	0	0	5
8	X	0			Handwashing sinks properly supplied and accessible	0	0	2
	IN	OUT	NA	NO	Approved Source	Т.		
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	×	0			Proper disposition of unsafe food, returned food not re- served	0	0	2

ш	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	0	0	0	X	Proper reheating procedures for hot holding	0	0	
	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	Proper date marking and disposition	0	0	*
22	0	0	×	0	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	M		Pasteurized foods used; prohibited foods not offered	0	0	5
	IN	OUT	NA	NO	Chemicals			
25		0	X		Food additives: approved and properly used	0	0	5
26	0.0	0			Toxic substances properly identified, stored, used	0	0	Ľ
	IN	OUT	NA	NO	Conformance with Approved Procedures			
27	0	0	×		Compliance with variance, specialized process, and HACCP plan	0	0	5

s to control the introduction of pathogens, chemicals, and physical objects into foods.

			GOO			
			ected or COS			
OUT Safe Feed and Water 28 O Pasteurized eggs used where required 29 O Water and ice from approved source 30 O Variance obtained for specialized processing methods OUT Feed Temperature Control 31 O Proper cooling methods used; adequate equipment for temperature control						
	OUT	Safe Food and Water				
	0	Pasteurized eggs used where required	0	0	1	
			0	0	-	
30	_		0	0	ľ	
	OUT	Food Temperature Control				
31	0		0	0	:	
32	0	Plant food properly cooked for hot holding	0	0	Т	
33	ō	Approved thawing methods used	Ō	Ō		
34	0	Thermometers provided and accurate	0	0	Т	
	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	0	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	Г	
42	0	Utensils, equipment and linens; properly stored, dried, handled	0	0		
43	100	Single-use/single-service articles; properly stored, used	0	0	Г	
44		Gloves used properly	0	0		

pect	on	R-repeat (violation of the same code provision)		-	147		
			cos	R	W		
	6 O Warewashing facilities, installed, maintained, used, test strips 7 O Nonfood-contact surfaces clean						
45	0		0	0	1		
46	0	Warewashing facilities, installed, maintained, used, test strips	0	0	1		
47	0	Nonfood-contact surfaces clean	0	0	1		
	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	- 2		
51	0	Toilet facilities: properly constructed, supplied, cleaned	0	0			
52	0	Garbage/refuse properly disposed; facilities maintained	0	0	٠		
53	3%	Physical facilities installed, maintained, and clean	0	0	,		
54	0	Adequate ventilation and lighting; designated areas used	0	0	1		
	OUT	Administrative Items	Т				
55	0	Current permit posted	0	0	П		
56	0	Most recent inspection posted	0	0	'		
		Compliance Status	YES	NO	W		
		Non-Smokers Protection Act					
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			

er and post the most recent inspection report in a conspicuous manner. You have the right to request a h t. 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. ten (10) days of the date of the

10/16/2023

10/16/2023

Signature of Person In Charge

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: Holiday Inn Express & Suites Food
Establishment Number #: [605316124

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.	\top
"No Smoking" signs or the international "Non-Smoking" symbol are not conspicuously posted at every entrance.	\top
Garage type doors in non-enclosed areas are not completely open.	\top
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)				
3 comp sink	Ecolab sink and	600					

Equipment Temperature					
Description	Temperature (Fahrenheit)				
Avantco ric	40				
Hoshizaki ric	33				
Hoshizaki rif	23				

Food Temperature		
Description	State of Food	Temperature (Fahrenheit)
Sausage	Hot Holding	136
Sausage gravy	Cooling	117
Omelette	Cold Holding	38
Milk	Cold Holding	41
Hard boiled eggs	Cold Holding	41

Observed Violations							
Total # 2							
Repeated # 0							
43: Spoons and forks stored turned up in containers on serving laines							
53: Corner of counter top broken and peeling off							
""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



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Establishment Number: 605316124

Comments/Other Observations

- 1: (IN): PIC demonstrates knowledge by correctly answering questions regarding principles applicable to the food operation.
- 2: Discussed policy with pic
- 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: Employee cleaning durng inspection.
- 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 info
- 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: No food cooked during inspection
- 17: (NO) No TCS foods reheated during inspection.
- 18: See food temps
- 19: See food temps
- 20: See food temps
- 21: (IN) Verified date marking system in place for all ready-to-eat TCS foods that are held longer than 24 hours.
- 22: (NA) No food held under time as a public health control.
- 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:

***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 Name: Holiday Inn Express & Suites Food	
Establishment Number: 605316124	
Comments/Other Observations (cont'd)	
Additional Comments (cont'd)	
See last page for additional comments.	

Establishment Information

Establishment Infor	A MINOR DE APARTIC			
Establishment Name: Hi Establishment Number #:	oliday Inn Express & S 605316124	uites Food		
	000010124			
Sources				
Source Type:	Water	Source:	City	
Source Type:	Food	Source:	Sysco	
Source Type:		Source:		
Source Type:		Source:		
Source Type:		Source:		
Additional Comme	nts			