

City

TENNESSEE DEPARTMENT OF HEALTH FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

SCORE

O Farmer's Market Food Unit Quality Suites - Breakfast Establishment Name Permanent O Mobile Type of Establishment 2615 Elm Hill Pike. O Temporary O Seasonal Address Nashville Time in 02:25 PM AM / PM Time out 02:30; PM

02/08/2022 Establishment # 605079453 Embargoed 0 Inspection Date

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

Number of Seats 48 Risk Category 04 Follow-up Required O Yes 疑 No ase Control and Prevention

IN-in compliance	OUT=not in compliance	NA=not applicable	NO=not observe	d CC)\$=c	corrected on-site during inspe	ction R=repeat (violation of the same code provision	on)		\neg
	Complia	nce Status		COS R WT			Compliance Status	COS	R	WT
IN OUT NA N	0	Supervision			П	IN OUT NA NO	Cooking and Reheating of Time/Temperature			

					Compliance Status	cos	R	WT
	IN	оит	NA	NO	Supervision			
1	氮	0			Person in charge present, demonstrates knowledge, and performs duties	0	0	5
	IN	OUT	NA	NO	Employee Health			
2	$\square X$	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		X	Proper eating, tasting, drinking, or tobacco use	0	0	
5	0	0		3%	No discharge from eyes, nose, and mouth	0	0	
	IN	OUT	NA	NO	Preventing Contamination by Hands			
6	0	0		300	Hands clean and properly washed	0	0	
7	0	0	0	×	No bare hand contact with ready-to-eat foods or approved alternate procedures followed	0	0	5
8	×				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	黨		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-	0	0	2

	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	300	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	X	0	Proper cooling time and temperature	0	0	
19	0	0	0	黨	Proper hot holding temperatures	0	0	
20	24	0	0		Proper cold holding temperatures	0	0	5
21	*	0	0	0	Proper date marking and disposition	0	0	- × I
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	×		Pasteurized foods used; prohibited foods not offered	0	0	5
	IN	OUT	NA	NO	Chemicals			
25	0	0	- XX		Food additives: approved and properly used	0	0	
26	2	0			Toxic substances properly identified, stored, used	0	0	٥
	IN	OUT	NA	NO	Conformance with Approved Procedures			
27	0	0	×		Compliance with variance, specialized process, and HACCP plan	0	0	5

	GOOD RETAIL PRACTICES											
	OUT=not in compliance COS=corrected on-site during inspection 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	Utensiis and Equipment			
28		Pasteurized eggs used where required	0	0	1] [45	0	Food and nonfood-contact surfaces cleanable, properly designed,	0	0	1
29		Water and ice from approved source	0		2	11	10		constructed, and used	_	_	<u> </u>
30		Variance obtained for specialized processing methods	_ 0	0	1	ч	46	0	Warewashing facilities, installed, maintained, used, test strips	0	lol	1
	OUT	Food Temperature Control	_	_	_	ч		_		-	_	-
31		Proper cooling methods used; adequate equipment for temperature	0	lo	2	П	47	_	Nonfood-contact surfaces clean	0	0	1
	_	control	_	-	_	Ш		OUT	Physical Facilities			
32	0	Plant food properly cooked for hot holding	0	0	1] [48	0	Hot and cold water available; adequate pressure		0	2
33	0	Approved thawing methods used	0	0	1	3 1	49	0	Plumbing installed; proper backflow devices	0	0	2
34	×	Thermometers provided and accurate	0	0	1	11	50	0	Sewage and waste water properly disposed	0	0	2
	OUT	Food Identification			11	51	0	Toilet facilities: properly constructed, supplied, cleaned	0	0	1	
35	0	Food properly labeled; original container; required records available	0	0	1	11	52	0	Garbage/refuse properly disposed; facilities maintained	0	0	1
	OUT Prevention of Food Contamination			11	53	0	Physical facilities installed, maintained, and clean	0	0	1		
36	0	Insects, rodents, and animals not present	0	0	2] [54	0	Adequate ventilation and lighting; designated areas used	0	0	1
37	0	Contamination prevented during food preparation, storage & display	0	0	1	11		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		Most recent inspection posted	0	0	٥
40	0	Washing fruits and vegetables	0	0	1	11	\Box		Compliance Status	YES	NO	WT
	OUT	Proper Use of Utensils		_		11			Non-Smokers Protection Act		_	
41	0	In-use utensils; properly stored	0		1	11	57		Compliance with TN Non-Smoker Protection Act	X	0	\Box
42		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] .						

er. You have the right to request a hi ten (10) days of the date of the

02/08/2022

02/08/2022

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 ****

Free food safety training classes are available each month at the county health department. PH-2267 (Rev. 6-15)) 6153405620 Please call (to sign-up for a class.

RDA 629

TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



Establishment Information								
Establishment Name: Quality Suites - Breakfast Establishment Number #: 605079453								
Establishment Number ≢: [605079453								
NCDA Survey. To be completed if	#57 in #Ma#							
NSPA Survey – To be completed if: Age-restricted venue does not affirmatively rest		facilities at all times to ne	rsons who are					
twenty-one (21) years of age or older.								
Age-restricted venue does not require each per	son attempting to gain entry	to submit acceptable form	of identification.					
"No Smoking" signs or the international "Non-Si	moking" symbol are not cons	picuously posted at every	entrance.					
Garage type doors in non-enclosed areas are not completely open.								
Tents or awnings with removable sides or vents	s in non-enclosed areas are r	not completely removed or	ropen.					
Smoke from non-enclosed areas is infiltrating in	nto areas where smoking is p	rohibited.						
Smoking observed where smoking is prohibited	by the Act.							
Warewashing Info			1 = 1	e efe				
Machine Name	Sanitizer Type	PPM	Temperature (Fah	renhelt)				
-								
Equipment Temperature								
Description			Temperature (Fahr	renheit)				
			•					
Food Temperature		1 -1 1	I					
Description		State of Food	Temperature (Fahr	renheit)				

Observed Violations	
Total # 1 Repeated # 0	
Repeated # 0	
34:	
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TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA

Establishment Name: Quality Suites - Breakfast

Establishment Information



Comments/Other Observations 1: 2: 3: 4: 5: 6: 7: 8: 9: 10: 11: 12: 13: 14: 15: 16: 17: 18: 19: 20: 21: 22: 23: 24: 25: 26: 27: 57: 58:	
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Additional Comments	

See last page for additional comments.

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Establishment Name: Quality Suites - Breakfast	
Establishment Number: 605079453	
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: Quality Suites - Breakfast					
Establishment Number #: 605079453					
Sources					
Source Type:	Source:				
Source Type:	Source:				
Source Type:	Source:				
Source Type:	Source:				
Source Type:	Source:				
Additional Comments					