



# TENNESSEE DEPARTMENT OF HEALTH FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

SCORE

85

Establishment Name Days Inn Food Service Type of Establishment ☒ Farmer's Market Food Unit ☐ Permanent ☐ Mobile  
Address 182 Chaffin Place ☐ Temporary ☐ Seasonal  
City Murfreesboro Time in 08:08 AM AM / PM Time out 09:02: AM AM / PM  
Inspection Date 01/09/2024 Establishment # 605319661 Embargoed 0  
Purpose of Inspection ☒ Routine ☐ Follow-up ☐ Complaint ☐ Preliminary ☐ Consultation/Other  
Risk Category ☒ 1 ☐ 2 ☐ 3 ☐ 4 Follow-up Required ☒ Yes ☐ No Number of Seats 24

**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.)

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

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

OUT=not in compliance COS=corrected on-site during inspection R=repeat (violation of the same code provision)					Compliance Status			COS R WT		
Safe Food and Water					Compliance Status			COS R WT		
28	OUT				Pasteurized eggs used where required					1
29	OUT				Water and ice from approved source					2
30	OUT				Variance obtained for specialized processing methods					1
Food Temperature Control					Utensils and Equipment					
31	OUT				Proper cooling methods used; adequate equipment for temperature control					2
32	OUT				Plant food properly cooked for hot holding					1
33	OUT				Approved thawing methods used					1
34	OUT				Thermometers provided and accurate					1
Food Identification					Physical Facilities					
35	OUT				Food properly labeled; original container; required records available					1
Prevention of Food Contamination					Hot and cold water available; adequate pressure					
36	OUT				Insects, rodents, and animals not present					2
37	OUT				Contamination prevented during food preparation, storage & display					1
38	OUT				Personal cleanliness					1
39	OUT				Wiping cloths: properly used and stored					1
40	OUT				Washing fruits and vegetables					1
Proper Use of Utensils					Plumbing installed; proper backflow devices					
41	OUT				In-use utensils; properly stored					1
42	OUT				Utensils, equipment and linens; properly stored, dried, handled					1
43	OUT				Single-use/single-service articles; properly stored, used					1
44	OUT				Gloves used properly					1
Administrative Items					Sewage and waste water properly disposed					
55	OUT				Current permit posted					0
56	OUT				Most recent inspection posted					0
Non-Smokers Protection Act					Toilet facilities: properly constructed, supplied, cleaned					
57	OUT				Compliance with TN Non-Smoker Protection Act					0
58	OUT				Tobacco products offered for sale					0
59	OUT				If tobacco products are sold, NSPA survey completed					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 68-6-703, 68-14-708, 68-14-709, 68-14-711, 68-14-715, 68-14-716, 4-5-329.

Signature of Person In Charge [Signature] Date 01/09/2024 Signature of Environmental Health Specialist [Signature] Date 01/09/2024

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

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***Establishment Information***

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***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)
3 comp sink not set up	Sanitizer not		

***Equipment Temperature***

Description	Temperature ( Fahrenheit)
Ric	32
Frig kitchen	36

***Food Temperature***

Description	State of Food	Temperature ( Fahrenheit)
Yogurt in back frig	Cold Holding	37
Yogurt ric breakfast bar	Cold Holding	34
Milk in carafe ric breakfast bar	Cold Holding	34

### Observed Violations

Total # 7

Repeated # 0

6: Unable to properly wash hands due to not having single use or disposable hand towels. A follow up inspection will be performed within 10 days to verify compliance of this priority item violation.

8: No disposable or single use hand towels at hand sink. A follow up inspection will be performed within 10 days to verify compliance of this priority item violation.

14: Unable to properly clean food contact surfaces due to not having any sanitizer. Pic found some bleach in the laundry room, and placed it in the kitchen to be used as sanitize for food contact surfaces. Discussed proper procedures.

37: Packages of waffle mix stored on the floor in kitchen.

43: A box of disposable cups stored on floor in kitchen.

46: QA test strips available were water damaged. Gave pic test strips to use for chlorine.

56: Current inspection report not posted. .

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**Comments/Other Observations**

- 1: (IN): PIC demonstrates knowledge by correctly answering questions regarding principles applicable to the food operation.
- 2: Policy posted
- 3: (IN) There are no food workers observed working with specific reportable symptoms or illnesses.
- 4: (N.O.) No food workers present.
- 5: (IN) No employees exhibiting persistent coughing, sneezing, runny nose, or watery eyes.
- 7: (NO) No food workers present during the inspection.
- 9: See food source
- 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: No raw animal food at establishment.
- 15: (IN) No unsafe, returned or previously served food served.
- 16: (NA) No raw animal foods served.
- 17: (NA) No TCS foods reheated for hot holding.
- 18: No cooling required at this establishment.
- 19: (NA) Establishment does not hot hold TCS foods.
- 20: See food temps.
- 21: Milk in carafe is emptied daily after breakfast is over.
- 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.



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**Comments/Other Observations (cont'd)****Additional Comments (cont'd)*****See last page for additional comments.***

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**Sources**

Source Type: Water

Source: City

Source Type: Food

Source: Palmers

Source Type:

Source:

Source Type:

Source:

Source Type:

Source:

**Additional Comments**

Provided applicable fact sheets to operator regarding observed priority item violations.  
A follow up inspection will be performed within 10 days to verify compliance of all priority item violations.  
Frontdesk@daysinnmboro.com