

Establishment Name

Address

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

SCORE

Time in 08:29 AM AM / PM Time out 09:03: AM AM / PM

Embargoed 0

04/04/2024 Establishment # 605300910 Inspection Date O Follow-up Purpose of Inspection **K**Routine O Complaint O Preliminary O Consultation/Other

Risk Category О3 Follow-up Required O Yes 疑 No

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

10	¥=in c	omplii	ance		OUT=not in compliance NA=not applicable NO=not observe	ed .		C
					Compliance Status	cos	R	WT
	IN	OUT	NA	NO	Supervision			
1	盔	٥			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
ī	IN	OUT	NA	NO	Good Hygienic Practices			
4	X	0		0	Proper eating, tasting, drinking, or tobacco use	0	0	-
5	黨	0		0	No discharge from eyes, nose, and mouth	0	0	5
	IN	OUT	NA	NO	Preventing Contamination by Hands			
6	凝	0		0	Hands clean and properly washed	0	0	
7	왮	0	0	0	No bare hand contact with ready-to-eat foods or approved alternate procedures followed	0	0	5
8	×	0			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		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

Staybridge Suites Food

1233 Fortress BLVD

Murfreesboro

	Compliance Status							WT
	IN	OUT	NA	NO	Cooking and Reheating of Time/Temperature Control For Safety (TCS) Foods			
16	0	0	0	黨	Proper cooking time and temperatures	0	0	5
17	0	0	0	3%	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	345	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	оит	NA	NO	Chemicals			
25	0	0	3%		Food additives: approved and properly used	0	0	5
26	黨	0			Toxic substances properly identified, stored, used	0	0	9
	IN							
27	0	0	×		Compliance with variance, specialized process, and HACCP plan	0	0	5

trol the introduction of pathogo s, chemicals, and physical objects into foods.

			GOO		
		OUT=not in compliance COS=con			
		Compliance Status	cos	R	W
	OUT	Safe Food and Water			
28	0	Pasteurized eggs used where required	0	0	1
29	0	Water and ice from approved source	0	0	_;
30	0	Variance obtained for specialized processing methods	0	0	١.
	OUT	Food Temperature Control			
31	0	Proper cooling methods used; adequate equipment for temperature control	0	0	:
32	0	Plant food properly cooked for hot holding	0	0	Г
33	0	Approved thawing methods used	0	0	Ι.
34	0	Thermometers provided and accurate	0	0	Т
	OUT Food Identification				
35	0	Food properly labeled; original container; required records available	0	0	1
	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	Ī
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	Г
	OUT	Proper Use of Utensils	\top		
41	0	In-use utensils; properly stored	0	0	Г
42	0	Utensils, equipment and linens; properly stored, dried, handled	0	0	
43	0	Single-use/single-service articles; properly stored, used	0	0	
44	10	Gloves used properly	0	0	

inspection R-repeat (violation of the same code provision) Compliance Status COS R WT						
	COS	R	WT			
	OUT Utensils and Equipment					
45	45 O Food and nonfood-contact surfaces cleanable, properly designed, constructed, and used				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	2	
49	0	Plumbing installed; proper backflow devices	0	0	2	
50	0	Sewage and waste water properly disposed	0	0	2	
51	0	Toilet facilities: properly constructed, supplied, cleaned	0	0	1	
52	0	Garbage/refuse properly disposed; facilities maintained	0	0	1	
53	0	Physical facilities installed, maintained, and clean	0	0	1	
54	0	Adequate ventilation and lighting; designated areas used	0	0	1	
	OUT	Administrative Items	Т			
55	0	Current permit posted	0	0	0	
56	0	Most recent inspection posted	0	0		
\Box		Compliance Status	YES	NO	WT	
Non-Smokers Protection Act						
57		Compliance with TN Non-Smoker Protection Act	- X	0		
58		Tobacco products offered for sale	0	0	0	
59		If tobacco products are sold, NSPA survey completed	0	0		

section report in a conspicuous manner. You have the right to request a h 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

04/04/2024

04/04/2024

Signature of Person In Charge

**** 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) 6158987889 Please call (to sign-up for a class.

Date

TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



Establishment Information

Establishment Name: Staybridge Suites Food
Establishment Number #: |605300910

ı	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.	
ı	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.	
I	Garage type doors in non-enclosed areas are not completely open.	
I	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.	
I	Smoking observed where smoking is prohibited by the Act.	

Warewashing Info						
Machine Name	Sanitizer Type	PPM	Temperature (Fahrenhelt)			
3 comp not set up Dish machine, does not use	Qa					

Equipment Temperature					
Description	Temperature (Fahrenheit)				
Reach in cooler(ric)	36				

Food Temperature					
State of Food	Temperature (Fahrenheit)				
Cold Holding	174				
Hot Holding	167				
Hot Holding	165				
Hot Holding	168				
Cooling	49				
Cold Holding	36				
Cold Holding	37				
Cold Holding	36				
Cooling	44				
	Cold Holding Hot Holding Hot Holding Hot Holding Cooling Cold Holding Cold Holding Cold Holding				

TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



Establishment Information

Establishment Name: Staybridge Suites Food

Establishment Number: 605300910

Comments/Other Observations

- 1: (IN): PIC demonstrates knowledge by having no violations of priority violations during current inspection.
- 2: Pic and employee can both discuss
- 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: Observed employees did not start any tasks during time of inspection, food preparation had already taken place
- 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: Sysco approved 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: (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: Did not observed any cooking from raw at time of inspections fse makes scrambled eggs from raw.
- 17: (NO) No TCS foods reheated during inspection.
- 18: Observed hard boiled eggs prepped and yogurt at 6am this morning, pic stated they remove both items from original packaging into glass containers and placed on the cold well which in ice covered by a ceramic top. Both items within proper time and temperature window suggested keeping both in the ice rather than on top the ceramic cover or on time policy if with cold well does not cool properly.
- 19: All tcs foods intended for hot holding within proper temperature range
- 20: All tcs intended for cold holding (and excluding tcs actively cooling) was observed within proper temperature range
- 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:

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: Staybridge Suites Food				
Establishment Number: 605300910				
Comments/Other Observations (cont'd)				
Additional Commante (contid)				
Additional Comments (cont'd)				
See last page for additional comments.				

Establishment Information

Establishment Information								
Establishment Name: Staybridge Suites Food								
Establishment Number #:	605300910							
WY C								
Sources								
Source Type:	Food	Source:	Sysco					
Source Type:	Water	Source:	Murf city					
Source Type:		Source:						
Source Type:		Source:						
Source Type:		Source:						
Additional Comme	nts							
			e or on a time policy, see not uestions or help creating a t					
Email: katie.putman	@asmgmt.com							