TENNESSEE DEPARTMENT OF HEALTH FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

SCORE

63.99

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2	1	744	C. C.																	
Fet	ahis	hmer	t Nar	me	Starbucks #	53266										Farmer's Market Food Unit St Permanent O Mobile				
Address			6053 Artesia	an Circle					_	Ту	pe of	Establ	ishme	O Temporary O Seasona						
City					Ooltewah		Time in	02	2:5	0 F	PM	A	M/P	мті	me o	ut 03:30; PM AM / PI				
		on Da	te		05/31/202	22 Establishment					Emb	_								
			spec		X Routine	O Follow-up	O Complaint			– O Pr		-	-		Co	nsultation/Other				
		tegor			201	02	03			04				Fo	ollow-	up Required X Yes O N	o Number of S	eats	65	
		R	isk													to the Centers for Disease control measures to preven	Control and Preven	tion	_	
					our meany mea					_						INTERVENTIONS	t niness of injury.			
				nigna		IN, OUT, NA, NO) for	each numbered iten	n. For		mad	ed 01	л, н	erk C	08 or P	t for e	ach liem as applicable. Deduct poin				
Ľ	€=in c	ompii	ance	_		ce NA=not applicable liance Status	NO=not observe	cos	R)\$=@	mecte	d on-	ste dur	ing int	spection R=repeat (violatio	n of the same code provision	on) COS	R	WT
			NA	NO	D	Supervision	lana da ana d					IN	001	NA	NO	Cooking and Roberting of 1 Control For Safety (1				
1	嵩	0			Person in charge p performs duties	resent, demonstrates	knowledge, and	0	0	5		0	0	8		Proper cooking time and temperati	ures	0	8	5
	X		NA	NO	Management and fe	Employee Health ood employee awaren	ess; reporting	0	0		17	0	0			Proper reheating procedures for he Cooling and Holding, Date Me		0	0	-
3	×	0			Proper use of restri			0	0	°		IN		NA	NO	a Public Health		-	-	
4	X	0	NA			d Hygienic Practic ng. drinking, or tobacc		0			19	0	8			Proper cooling time and temperatu Proper hot holding temperatures	re	0	0	
5	XX IN		NA	-		eyes, nose, and mout ng Contamination		0	0	-		8	8	8	12	Proper cold holding temperatures Proper date marking and disposition	n	00	e	5
6	×			_	Hands clean and pr No bare hand contr	roperly washed act with ready-to-eat for	oods or approved	0	-	5	22	_	0	0	鼠	Time as a public health control: pro	ocedures and records	0	0	
7	N N	0	0	0	alternate procedure			0	0	2		IN	out	_	NO	Consumer Adv Consumer advisory provided for ra				
	IN	OUT	NA	NO		Approved Source	adocessible				23	_	0	2	NO	food		0	0	4
10		0	0		Food obtained from Food received at pr	oper temperature		0	0		24	IN O	00	NA SK	NO	Highly Susceptible P Pasteurized foods used; prohibited		0	0	5
	<u>×</u>	0	20	0		tion, safe, and unadul vailable: shell stock ta		0	0 0	5	F	IN	001	_	NO	Chemical		-	_	-
12		-	0-0	NO	destruction Protec	tion from Contami	nation	-	-	_		0	0			Food additives: approved and prop		0	ত	
		0		-	Food separated and Ecod-contact surface	d protected ces: cleaned and sani	boti	8	0	4	26	0 IN	25	NA	·	Toxic substances properly identifie Conformance with Appro		0	0	
	2		Ť	1	Proper disposition of	of unsafe food, returne	18			2	27	-			140	Compliance with variance, special		0	0	5
					served							-	-	-		HACCP plan				
				God	d Retail Practic	es are preventive	measures to co						_		geni	s, chemicals, and physical of	bjects into foods.			
				00	T=not in compliance		COS=corre		n-site	during				5			he same code provision)			
	_	OUT				liance Status ood and Water		COS	R	WT			TUK			Compliance Status Utenslis and Equipment	rt	COS	R	WT
	28 29				ed eggs used where dice from approved			8	8	1	4	5	0 1			infood-contact surfaces cleanable, and used		0	0	1
	30	0			obtained for specializ	zed processing metho	ds	ŏ	ŏ	1		6	- 1			g facilities, installed, maintained, us	and test strips	0	0	1
		OUT	Proc	er co		adequate equipment	for temperature					-	-			ntact surfaces clean		0		1
	31	0	cont	rol	-		in an provide	0	0	2		0	TUK			Physical Facilities				
	32 33				properly cooked for thawing methods us			8	8	1						I water available; adequate pressur stalled; proper backflow devices	0	00	윙	2
;	34	0			eters provided and a	courate		0	0	1	5	0	0	Sewag	e and	waste water properly disposed		0	0	2
	35	OUT	Eee	4		Identification	and a stable		0			_				es: properly constructed, supplied, o		0	0	1
-	00	OUT	F-000	a prop		container, required re f Food Contaminat		0	-	1			-		-	use properly disposed; facilities ma ilities installed, maintained, and clea		0		1
- :	36	1000	Inse	cts, ro	dents, and animals			0	0	2			-			entilation and lighting; designated ar		o	ō	1
	37	0	Cont	tamin	ation prevented durin	ng food preparation, s	torage & display	0	0	1		4	TUK			Administrative items			_	
:	38				cleanliness			0	0	1						nit posted		0	0	0
_	39 10				oths; properly used a fruits and vegetables			8		1	5	6	0	Aost re	ecent	inspection posted Compliance Status		O YES		-
		OUT			Proper	Use of Utensils				_						Non-Smokers Protec	tion Act			
_	11				nsils; properly stored equipment and lineor	d s; properly stored, drie	d handled		8		5	7				with TN Non-Smoker Protection Ac ducts offered for sale	t	X	응	0
	13	0	Sing	le-use	e/single-service artic ed properly	les; properly stored, u	sed	0	8	1	5	9				oducts are sold, NSPA survey com	pleted	ŏ		
						me within ten (40) dawn	may result in suspen				servic		abiliate	ment n		Repeated violation of an identical risk	factor may result in response	ation	of une	-
ser	ńce e	stabli	shme	nt perr	nit. Items identified as	constituting imminent h	waith hazards shall b	e corre	cted i	mmed	iately	or op	eratio	ns shal	l ceas	e. You are required to post the food se filing a written request with the Commis	evice establishment permit	in a c	onspi	cuour
						4-708, 68-14-709, 68-14-7						÷.,				-1 /	and a second solution of the			
Jan M 05/31/2022 Rht Dil 05/31/							31/2	022												
Sig	natu	re of	Pers	son In	Charge				(Date	Si	gnati.	ure of	Envir	onme	ental Health Specialist				Date
_							,									ealth/article/eh-foodservice	•			
PH	2267	(Rev.	6-15)			y training classe se call (ilabk 2098			onth			inty health department. p for a class.			RD	A 629
_						11500		/ -	_02		·	<u> </u>			aa					

TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



Establishment Information

Establishment Name: Starbucks #53266 Establishment Number #: 605259308

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 wenty-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.	
Sarage 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)							
Triple sink	QA	500								

Equipment l'emperature						
Description	Temperature (Fahrenheit)					
Reach in cooler	36					
Reach in cooler prep area	36					

Food Temperature						
Decoription	State of Food	Temperature (Fahrenheit				
Dairy (reach in cooler prep)	Cold Holding	37				
Dairy (reach in cooler rear facility)	Cold Holding	36				
Sausage egg wrap (freezer)	Cold Holding	0				

Observed Violations										
Total #										
Repeated # 0										
26: Triple sink QA 500ppm. (200ppm CL)										

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Establishment Number: 605259308

Comments/Other Observations

1: (IN): PIC demonstrates knowledge by correctly answering questions regarding principles applicable to the food operation.

2: (IN): An employee health policy is available.

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: Good handwashing observed.

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: Food from approved sources.

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 products present at facility during time of inspection.

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: (NA) No raw animal foods served.

17: (NA) No TCS foods reheated for hot holding.

18: (N.A.) No cooked food is cooled, prepares no TCS food from ambient temperature ingredients that require cooling, does not receive raw eggs, shellstock, or milk.

19: (NO) TCS food is not being held hot during inspection.

20: See temperatures.

21: (NO) There are no foods requiring date marking in the facility at the time of the inspection.

22: (NO) Time as a public health control is not being used during the inspection.

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.

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.

Establishment Information

Establishment Name: Starbucks #53266

Establishment Number : 605259308

Comments/Other Observations (cont'd)

Additional Comments (cont'd) See last page for additional comments.

Establishment Information

Establishment Name: Starbucks #53266

Establishment Number # 605259308

Sources				
Source Type:	Water	Source:	Public	
Source Type:		Source:		
Source Type:		Source:		
Source Type:		Source:		
Source Type:		Source:		
Additional Comme	ents			

Triple sink QA 500ppm. (200ppm)