## Approved Source ## Optional and proper followed a Reproduction from Condition and Interest (1.5) Proper cooling methods used and profession of returned, previously served, recondition and and proper followed and 1.5 Proper disposition of returned, previously served, recondition and and profession (2.5) Proper cooling time and temperatures (2.5) Food separated and profession of returned, previously served, recondition and and temperatures (2.5) Food separated and profession of returned, previously served, recondition and automate food (2.5) Food properly labeled: or reproduction from the properly followed (2.5) Food separated and profession of returned, previously served, recondition and automate food the propers of the profession of returned, previously served, recondition and automate food the propers of the profession of returned, previously served, recondition and profession of returned, previously served, reconditioned, and unsafe food profession of returned to the profession of returned t		Food Establishmer	nt Inspectio	n Report	
License/Permit # Mailing Address   Mailing City/State/Zip   SOUTH JORDAN, UT 84095   Geriffied   Est. Type   Care Facilities: Hospitals, Nursing Homes, etc.   Permit Code   Permit Code	78/ Mu Ph	Purpose of Inspection: 01 - Routine keHealth.org		Time In: 9:39 AM Time Out: 10:33 AM	
Demonstration of Knowledge 1: Person in charge present, demonstrates knowledge, and performs duties Employee Health awareness policy present 2: Proper self of the present of the property of	License/Permit #	Mailing Address	Mailing City/State/Zip		(801) 676-8787
Charge (Signature) Signature	Demonstration of Knowledge  1: Person in charge prese and performs duties  Employee Health  2: Management awarenes 3: Proper use of reporting  Good Hygienic Practices  4: Proper eating, tasting, 6 5: No discharge from eyes 6: Hands clean and prope 7: No bare hand contact vapproved alternate metho 8: Adequate handwashing accessible  Approved Source  9: Food obtained from ap 10: Food received at prop 11: Food in good condition 12: Required records ava destruction  Protection from Contamination 13: Food separated and p 0ut 14: Food-contact surfaces 15: Proper disposition of reconditioned, and unsafe Potentially Hazardous Food 16: Proper cooking time and 17: Proper reheating procentially Hazardous Food 16: Proper cooling time and 19: Proper hot holding ter 0ut 20: Proper cold holding ter 0ut 20: Proper date marking a 22: Time as a public healt records  Consumer Advisory 23: Consumer advisory procentially Susceptible Population 24: Pasteurized foods use Chemical 25: Food additives: appro	re Facilities: Hospitals, Nurse ont, demonstrates knowledge, as policy present, restriction and exclusion drinking, or tobacco use on the second mouth of the second m	Conformand 27: Con and HA Safe Food a 28: Pas 29: Wat 30: Vari method Food Tempe 31: Proj for temp 32: Plar 33: App Out 34: The Food Identif Out 35: Foo Prevention of 36: Inse Out 37: Con 36: Inse 39: Wipp 40: Was Proper Use 41: In-u Out 42: Uten dried, h 43: Sing used 44: Gloq Out 45: Foo properly Out 46: War Out 47: Non Physical Fac Out 49: Plur 50: Sew 51: Toile cleaner 52: Gar maintain Out 53: Phy 54: Ade	rewith Approved Procupiliance with variance, so CCP plan and Water teurized eggs used where and ice from approved ance obtained for species are cooling methods used per cooling methods used per cooling methods used and to properly cooked roved thawing methods around the food properly labeled: original food Contamination of Food Contamination prevented during and display sonal cleanliness ing cloths: properly used shing fruits and vegetable of Utensils se utensils: properly stonally seed and nonfood-contact so wes used properly uipment and Vending dand nonfood-contact so designed, constructed, rewashing facilities; instance of cilities and cold water available and cold water available and cold water available and waste water pret facilities: properly con bage/refuse properly displayers.	edures specialized process, are required ad source alized processing ed: adequate equipment for hot holding used d accurate nal container ls not present uring food preparation, d and stored es red ens: properly stored, ticles: properly stored, and used alled, maintained, used lean e; adequate pressure ackflow devices roperly disposed structed, supplied, sposed; facilities maintained and clean
KING, HOLLY V /	Charge			KING, HOLLY	Kiy

Food Establishment Inspection Report								
Environmental Health Division		License/Permit #	Date: 02/11/2025					
?	788 E Woodoak Lane		35-018735	Time In: 9:39 AM				
	Murray, UT 84107			Time Out: 10:33 AM				
	Phone:(385) 468-3860 SaltLakeHe			1				
Establishment	Establishment Address	City/State/Zip	AN UT 0400E	Phone (904) 676 9797				
CARRINGTON CO		SOUTH JORD		(801) 676-8787				
	Based on an inspection this day, the items marked below identify violations in the operations,							
construction or closure of this facility. Violations must be corrected immediately unless otherwise specified. Each follow-up inspection will be assessed at \$155.00.								
•		<u>u ut y 1001001</u>						
	S AND CORRECTIVE ACTIONS							
Total # of Violations:	21 # Critical Violations: 4 # Repe	at Critical Violation	s: 0 Score: 38	3				
Violation 4.3.24	Food Storage Containers - Identifi	ed with Commo	on Name of Food	d.				
	POINTS=1, # of Occurrences=001							
	Food containers are not labeled with	the common na	me of the food.					
Violation 4.3.37	Food Storage.							
	POINTS=2, # of Occurrences=002	: <b></b>						
Violation 4.3.59*	Food is stored on a shelf in the walk Cold Holding*	ın ireezer that is	s not at least 6 inc	thes above the ground,				
<u>violation 4.3.33</u>	CRITICAL, POINTS=12, # of Occurre	ences=002						
	Cut tomatoes are being held out of te		rol at 64°F on a c	ounter.				
	Milk is being held at 47°F in a reach	•						
<b>Violation 4.3.61*</b>	_		•					
	Discard.*	•	•					
	CRITICAL, POINTS=6, # of Occurrent							
	Deli meat in the walk in cooler is beir	ng held more the	e 7 days past the	marked date of				
\" \	preparation.			A (! 1 O)				
Violation 4.4.105	Equipment, Utensils, Linens, and Single-Service and Single-Use Articles-Storage POINTS=2, # of Occurrences=002							
	Single service items are stored on th	e floor						
	Clean equipment in the memory care kitchen is not covered or inverted to prevent							
	contamination.							
Violation 4.4.13	<b>Equipment and Utensils - Design a</b>	and Construction	on					
	POINTS=1, # of Occurrences=001							
	Domestic style refrigerator in the me	mory care kitche	en is not durable f	or commercial use.				
Violation 4.4.37	<del>-</del> ·							
	POINTS=1, # of Occurrences=001	م ماده ماده م						
Violation 4 4 59**	Cold holding unit in the memory care Sanitizing Solutions-Testing Device		n ambient thermo	imeter.				
<u> </u>	CRITICAL, POINTS=3, # of Occurren							
	Sanitizer test strips are expired. (Qua							
Violation 4.4.63	Good Repair and Proper Adjustme	od Repair and Proper Adjustment						
	POINTS=1, # of Occurrences=001							
	A reach-in cooler in the memory care	kitchen is not n	naintained to hold	l potentially hazardous				
	food at or below 41°F.							
Violation 4.4.84	· · · · · · · · · · · · · · · · · · ·							
	POINTS=1, # of Occurrences=001	on.						
Violation 4.4.85	The interior of the microwave is uncle Nonfood-Contact Surfaces-Cleaning							
<u> </u>	Homod-Contact Ourlaces-Cleaning	ษ						

POINTS=1, # of Occurrences=001

A fan in the dish area is dirty.

**<u>Violation 4.5.30</u>** System Maintained in Good Repair Non-critical

POINTS=1, # of Occurrences=001

The faucet is leaking on the spray sink.

**<u>Violation 4.6.40</u>** Repairing-Physical Facilities

POINTS=2, # of Occurrences=002 Areas of the floor are missing grout.

Various walls are damaged in the memory care kitchen.

**Violation 4.6.41** Cleaning-Frequency and Restrictions

POINTS=3, # of Occurrences=003

Floor sinks are dirty.

The floor is dirty beneath cooking equipment.

The floor is dirty in various areas of the memory care kitchen.

<u>Violation 4.6.5</u> Floor and Wall Junctures-Coved and Enclosed or Sealed

POINTS=1, # of Occurrences=001

Various floor/wall junctures lack coving in the memory care kitchen.

OTHER CONTACTS

Contact 1 Title/Name/Phone: CONTACT GUY MENDENHALL (801) 748-2268

Contact 2 Title/Name/Phone: CONTACT/PARTNER WAYNE BRAUNBERGER (801) 562-3200

Owner Name/Email: ALTA RIDGE SOUTH JORDAN LLC

Premise Fax: (801) 562-5599
GENERAL COMMENTS