



TENNESSEE DEPARTMENT OF HEALTH FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

SCORE
67

Establishment Name Mikes Smokehouse Type of Establishment Farmer's Market Food Unit Permanent Mobile
 Address 3147 S. Broad St. Temporary Seasonal
 City Chattanooga Time in 01:30 PM AM / PM Time out 02:45 PM AM / PM
 Inspection Date 02/21/2022 Establishment # 605243856 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 64

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.)

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

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

GOOD RETAIL PRACTICES

Compliance Status					COS	R	WT		
OUT									
Safe Food and Water									
28	<input type="checkbox"/>			Pasteurized eggs used where required	<input type="checkbox"/>	<input type="checkbox"/>	1		
29	<input type="checkbox"/>			Water and ice from approved source	<input type="checkbox"/>	<input type="checkbox"/>	2		
30	<input type="checkbox"/>			Variance obtained for specialized processing methods	<input type="checkbox"/>	<input type="checkbox"/>	1		
Food Temperature Control									
31	<input type="checkbox"/>			Proper cooling methods used; adequate equipment for temperature control	<input type="checkbox"/>	<input type="checkbox"/>	2		
32	<input type="checkbox"/>			Plant food properly cooked for hot holding	<input type="checkbox"/>	<input type="checkbox"/>	1		
33	<input type="checkbox"/>			Approved thawing methods used	<input type="checkbox"/>	<input type="checkbox"/>	1		
34	<input type="checkbox"/>			Thermometers provided and accurate	<input type="checkbox"/>	<input type="checkbox"/>	1		
Food Identification									
35	<input type="checkbox"/>			Food properly labeled; original container; required records available	<input type="checkbox"/>	<input type="checkbox"/>	1		
Prevention of Food Contamination									
36	<input type="checkbox"/>			Insects, rodents, and animals not present	<input type="checkbox"/>	<input type="checkbox"/>	2		
37	<input checked="" type="checkbox"/>			Contamination prevented during food preparation, storage & display	<input type="checkbox"/>	<input type="checkbox"/>	1		
38	<input type="checkbox"/>			Personal cleanliness	<input type="checkbox"/>	<input type="checkbox"/>	1		
39	<input type="checkbox"/>			Wiping cloths: properly used and stored	<input type="checkbox"/>	<input type="checkbox"/>	1		
40	<input type="checkbox"/>			Washing fruits and vegetables	<input type="checkbox"/>	<input type="checkbox"/>	1		
Proper Use of Utensils									
41	<input type="checkbox"/>			In-use utensils; properly stored	<input type="checkbox"/>	<input type="checkbox"/>	1		
42	<input type="checkbox"/>			Utensils, equipment and linens; properly stored, dried, handled	<input type="checkbox"/>	<input type="checkbox"/>	1		
43	<input type="checkbox"/>			Single-use/single-service articles; properly stored, used	<input type="checkbox"/>	<input type="checkbox"/>	1		
44	<input type="checkbox"/>			Gloves used properly	<input type="checkbox"/>	<input type="checkbox"/>	1		
Utensils and Equipment									
45	<input checked="" type="checkbox"/>			Food and nonfood-contact surfaces cleanable, properly designed, constructed, and used	<input type="checkbox"/>	<input type="checkbox"/>	1		
46	<input type="checkbox"/>			Warewashing facilities, installed, maintained, used, test strips	<input type="checkbox"/>	<input type="checkbox"/>	1		
47	<input type="checkbox"/>			Nonfood-contact surfaces clean	<input type="checkbox"/>	<input type="checkbox"/>	1		
Physical Facilities									
48	<input type="checkbox"/>			Hot and cold water available; adequate pressure	<input type="checkbox"/>	<input type="checkbox"/>	2		
49	<input checked="" type="checkbox"/>			Plumbing installed; proper backflow devices	<input type="checkbox"/>	<input type="checkbox"/>	2		
50	<input type="checkbox"/>			Sewage and waste water properly disposed	<input type="checkbox"/>	<input type="checkbox"/>	2		
51	<input type="checkbox"/>			Toilet facilities: properly constructed, supplied, cleaned	<input type="checkbox"/>	<input type="checkbox"/>	1		
52	<input type="checkbox"/>			Garbage/refuse properly disposed; facilities maintained	<input type="checkbox"/>	<input type="checkbox"/>	1		
53	<input checked="" type="checkbox"/>			Physical facilities installed, maintained, and clean	<input type="checkbox"/>	<input type="checkbox"/>	1		
54	<input checked="" type="checkbox"/>			Adequate ventilation and lighting; designated areas used	<input type="checkbox"/>	<input type="checkbox"/>	1		
Administrative Items									
55	<input type="checkbox"/>			Current permit posted	<input type="checkbox"/>	<input type="checkbox"/>	0		
56	<input type="checkbox"/>			Most recent inspection posted	<input type="checkbox"/>	<input type="checkbox"/>	0		
Compliance Status									
							YES	NO	WT
Non-Smokers Protection Act									
57	<input checked="" type="checkbox"/>			Compliance with TN Non-Smoker Protection Act	<input checked="" type="checkbox"/>	<input type="checkbox"/>	0		
58	<input type="checkbox"/>			Tobacco products offered for sale	<input type="checkbox"/>	<input type="checkbox"/>	0		
59	<input type="checkbox"/>			If tobacco products are sold, NSPA survey completed	<input type="checkbox"/>	<input type="checkbox"/>	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. TCA, sections 26-1-201, 26-1-202, 26-1-203, 26-1-204, 26-1-205, 26-1-206, 26-1-207, 26-1-208, 26-1-209, 26-1-210, 26-1-211, 26-1-212, 26-1-213, 26-1-214, 26-1-215, 26-1-216, 4-5-320.

Signature of Person In Charge [Signature] Date 02/21/2022 Signature of Environmental Health Specialist [Signature] Date 02/21/2022

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

TENNESSEE DEPARTMENT OF HEALTH
 DIVISION OF ENVIRONMENTAL HEALTH
 FOOD INSPECTION DATA



Establishment Information

Establishment Name: Mikes Smokehouse
 Establishment Number #: 605243856

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)
*Dish Machine	Chlorine	0	

Equipment Temperature

Description	Temperature (Fahrenheit)
See Remarks	

Food Temperature

Description	State of Food	Temperature (Fahrenheit)
Ribs	Hot Holding	141
Brisket	Hot Holding	139
BBQ Beef	Hot Holding	156
Mac & Cheese	Hot Holding	150
Wings (walk in)	Cold Holding	39
Wings (low boy)	Cold Holding	39
*Potato Salad	Cold Holding	49
*Cole Slaw	Cold Holding	50

Observed Violations

Total # 11

Repeated # 0

1: Active managerial control over foodborne illness risk factors not provided at time of inspection. Recommend daily line, refrigeration, and dish machine checks as needed to help control and mitigate risk factors.

8: No paper towels provided at hand basin in prep area.

11: Excessively damaged #10 canned good noted on storage rack. Discard or RTV severely dented canned goods as needed when damaged along seams/rims of product.

14: Sanitizer at dish machine 0 ppm chlorine. Sanitizer had ran empty at time of inspection. Recommend daily log to properly maintain appropriate sanitizer concentrations at dish machine. PIC re-filled machine but neglected to re-prime machine to acceptable limits. After re-filling product, lines must be re-primed to properly dispense sanitizer. Dishes not being sanitized at dish machine.

Adequate cleaning and sanitizing frequency of food and non-food contact surfaces not provided. Numerous surfaces with build up of dried food debris. Recommend detailed cleaning regiment to maintain cleanliness and sanitization of kitchen and prep areas.

20: Potato salad holding in low boy unit at 49°F. Cole slaw holding at 50°F in same unit. Products must be at 41°F or below. Move products to working refrigeration until unit can be repaired.

26: Cleaning products stored too close to food products in prep/storage area.

37: Food products stored on floor in walk in cooler. Must be 6" off floor.

45: Shelving rusted/poor repair in walk in cooler unit.

49: T&S nozzle in poor repair at scraping sink. Excessive water discharging from nozzle when in use.

53: Walk in cooler flooring in poor repair. Unable to easily clean and remove debris from cooler flooring. Floors dirty in walk in freezer unit.

54: Personal items stored too close to food products and on prep surfaces. Store away in designated areas to prevent contamination of food products or food contact surfaces.



Establishment Information

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Establishment Number : 605243856

Comments/Other Observations

- 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: (NO) Did not observe situation that required handwashing at time of inspection.
- 7: (IN) Employees are observed using suitable utensils or gloves to prevent bare hand (or arm) contact with ready-to-eat foods.
- 9: (IN): Food products obtained from approved sources.
- 10: (NO): No food received during 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.
- 15: (IN) No unsafe, returned or previously served food served.
- 16: (NO) No raw animal foods cooked during inspection.
- 17: (NO) No TCS foods reheated during inspection.
- 18: (N.O.) No cooling of TCS foods during inspection.
- 19: (IN) TCS foods holding at 135°F or above. See food temperatures listed above.
- 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.
- 27: (NA) Establishment is not required to have a variance or HACCP plan, performs no special processes.
- 57: (IN) Establishment does not allow smoking inside facility.
- 58: (IN): Tobacco products not sold at establishment.

***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.

Establishment Information

Establishment Name: Mikes Smokehouse

Establishment Number : 605243856

Comments/Other Observations (cont'd)

Additional Comments (cont'd)

See last page for additional comments.

Establishment Information

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Establishment Number #: 605243856

Sources

Source Type: Food Source: Approved sources noted

Source Type: Water Source: Public

Source Type: Source:

Source Type: Source:

Source Type: Source:

Additional Comments