

**TENNESSEE DEPARTMENT OF HEALTH**  
**FOOD SERVICE ESTABLISHMENT INSPECTION REPORT**

**SCORE**

# 100

Establishment Name	Hennen's		Type of Establishment	<input checked="" type="radio"/> Permanent	<input type="radio"/> Mobile
Address	193 Chestnut St.			<input type="radio"/> Temporary	<input type="radio"/> Seasonal
City	Chattanooga	Time in	02:30 PM	AM / PM	Time out
					03:30 PM
Inspection Date	05/25/2023	Establishment #	605187319	Embargoed	0
Purpose of Inspection	<input checked="" type="radio"/> Routine <input type="radio"/> Follow-up <input type="radio"/> Complaint <input type="radio"/> Preliminary <input type="radio"/> Consultation/Other				
Risk Category	<input type="radio"/> 1 <input checked="" type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4         Follow-up Required <input type="radio"/> Yes <input checked="" type="radio"/> No				
					Number of Seats
					260

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

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

## GOOD RETAIL PRACTICES

OUT=not in compliance

COS=corrected on-site during inspection

Compliance Status				COS	R	WT
	OUT	Safe Food and Water				
28	<input type="radio"/>	Pasteurized eggs used where required		<input type="radio"/>	<input type="radio"/>	1
29	<input type="radio"/>	Water and ice from approved source		<input type="radio"/>	<input type="radio"/>	2
30	<input type="radio"/>	Variance obtained for specialized processing methods		<input type="radio"/>	<input type="radio"/>	1
	OUT	Food Temperature Control				
31	<input type="radio"/>	Proper cooling methods used; adequate equipment for temperature control		<input type="radio"/>	<input type="radio"/>	2
32	<input type="radio"/>	Plant food properly cooked for hot holding		<input type="radio"/>	<input type="radio"/>	1
33	<input type="radio"/>	Approved thawing methods used		<input type="radio"/>	<input type="radio"/>	1
34	<input type="radio"/>	Thermometers provided and accurate		<input type="radio"/>	<input type="radio"/>	1
	OUT	Food Identification				
35	<input type="radio"/>	Food properly labeled; original container; required records available		<input type="radio"/>	<input type="radio"/>	1
	OUT	Prevention of Food Contamination				
36	<input type="radio"/>	Insects, rodents, and animals not present		<input type="radio"/>	<input type="radio"/>	2
37	<input type="radio"/>	Contamination prevented during food preparation, storage & display		<input type="radio"/>	<input type="radio"/>	1
38	<input type="radio"/>	Personal cleanliness		<input type="radio"/>	<input type="radio"/>	1
39	<input type="radio"/>	Wiping cloths; properly used and stored		<input type="radio"/>	<input type="radio"/>	1
40	<input type="radio"/>	Washing fruits and vegetables		<input type="radio"/>	<input type="radio"/>	1
	OUT	Proper Use of Utensils				
41	<input type="radio"/>	In-use utensils; properly stored		<input type="radio"/>	<input type="radio"/>	1
42	<input type="radio"/>	Utensils, equipment and linens; properly stored, dried, handled		<input type="radio"/>	<input type="radio"/>	1
43	<input type="radio"/>	Single-use/single-service articles; properly stored, used		<input type="radio"/>	<input type="radio"/>	1
44	<input type="radio"/>	Gloves used properly		<input type="radio"/>	<input type="radio"/>	1

R-repeat (violation of the same code provision)

Compliance Status				COS	R	WT
	OUT	Utensils and Equipment				
45	<input type="radio"/>	Food and nonfood-contact surfaces cleanable, properly designed, constructed, and used		<input type="radio"/>	<input type="radio"/>	1
46	<input type="radio"/>	Warewashing facilities, installed, maintained, used, test strips		<input type="radio"/>	<input type="radio"/>	1
47	<input type="radio"/>	Nonfood-contact surfaces clean		<input type="radio"/>	<input type="radio"/>	1
	OUT	Physical Facilities				
48	<input type="radio"/>	Hot and cold water available; adequate pressure		<input type="radio"/>	<input type="radio"/>	2
49	<input type="radio"/>	Plumbing installed; proper backflow devices		<input type="radio"/>	<input type="radio"/>	2
50	<input type="radio"/>	Sewage and waste water properly disposed		<input type="radio"/>	<input type="radio"/>	2
51	<input type="radio"/>	Toilet facilities; properly constructed, supplied, cleaned		<input type="radio"/>	<input type="radio"/>	1
52	<input type="radio"/>	Garbage/refuse properly disposed; facilities maintained		<input type="radio"/>	<input type="radio"/>	1
53	<input type="radio"/>	Physical facilities installed, maintained, and clean		<input type="radio"/>	<input type="radio"/>	1
54	<input type="radio"/>	Adequate ventilation and lighting; designated areas used		<input type="radio"/>	<input type="radio"/>	1
	OUT	Administrative Items				
55	<input type="radio"/>	Current permit posted		<input type="radio"/>	<input type="radio"/>	0
56	<input type="radio"/>	Most recent inspection posted		<input type="radio"/>	<input type="radio"/>	
		Compliance Status		YES	NO	WT
		Non-Smokers Protection Act				
57		Compliance with TN Non-Smoker Protection Act		<input checked="" type="radio"/>	<input type="radio"/>	
58		Tobacco products offered for sale		<input type="radio"/>	<input type="radio"/>	0
59		If tobacco products are sold, NSPA survey completed		<input type="radio"/>	<input type="radio"/>	

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 68-14-703, 68-14-706, 68-14-708, 68-14-709, 68-14-711, 68-14-715, 68-14-716, 4-5-320.

	05/25/2023		05/25/2023
Signature of Person In Charge	Date	Signature of Environmental Health Specialist	Date

\*\*\*\* 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: Hennen's  
Establishment Number #: 605187319

***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	Cl	100	
Triple sink	Qa	200	
Sani bucket		200	

***Equipment Temperature***

Description	Temperature ( Fahrenheit)

***Food Temperature***

Description	State of Food	Temperature ( Fahrenheit)
Steak CB	Cold Holding	40
Whole steak	Cold Holding	39
Raw hamburger	Cold Holding	37
Diced tomatoes	Cold Holding	39
Slaw	Cold Holding	40
Corn salsa	Cold Holding	39
Rice	Hot Holding	154
Mashed potatoes	Hot Holding	135
Mashed potatoes HB	Hot Holding	135
raw tuna Wl	Cold Holding	37
Raw steak	Cold Holding	37

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Establishment Name: Hennen's

Establishment Number : 605187319

**Comments/Other Observations**

- 1: (IN): ANSI Certified Manager present.
- 2: Illness policy posted.
- 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: Hands properly washed.
- 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 is from an approved source.
- 10: (NO): No food received during inspection.
- 11: (IN) All food was in good, sound condition at time of inspection.
- 12: (IN) Parasite destruction paperwork available
- 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: No food cooking during inspection.
- 17: (NO) No TCS foods reheated during inspection.
- 18: No cooling observed during inspection.
- 19: Please see temperatures.
- 20: Please see temperatures.
- 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: On the menu.
- 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.

**Establishment Information**

Establishment Name: Hennen's

Establishment Number : 605187319

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

**Establishment Information**

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**Sources**

Source Type:	Source:
Source Type:	Source:
Source Type:	Source:
Source Type:	Source:
Source Type:	Source:

**Additional Comments**