



# TENNESSEE DEPARTMENT OF HEALTH FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

SCORE

95

Establishment Name River Street Deli Type of Establishment ☒ Farmer's Market Food Unit ☐ Permanent ☐ Mobile  
Address 151 River St. ☐ Temporary ☐ Seasonal  
City Chattanooga Time in 10:50 AM AM / PM Time out 11:30 AM AM / PM  
Inspection Date 03/21/2024 Establishment # 605120701 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 49

**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.)

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)										
Compliance Status										COS			R		WT		Compliance Status										COS			R		WT			
	IN	OUT	NA	NO	Supervision													IN	OUT	NA	NO	Cooking and Reheating of Time/Temperature Control For Safety (TCS) Foods													
1	<input checked="" type="radio"/>	<input type="radio"/>			Person in charge present, demonstrates knowledge, and performs duties					<input type="radio"/>	<input type="radio"/>							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"/>						
	IN	OUT	NA	NO	Employee Health													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"/>						
2	<input checked="" type="radio"/>	<input type="radio"/>			Management and food employee awareness, reporting					<input type="radio"/>	<input type="radio"/>												Cooling and Holding, Date Marking, and Time as a Public Health Control												
3	<input checked="" type="radio"/>	<input type="radio"/>			Proper use of restriction and exclusion					<input type="radio"/>	<input type="radio"/>								IN	OUT	NA	NO													
	IN	OUT	NA	NO	Good Hygienic Practices													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"/>						
4	<input checked="" type="radio"/>	<input type="radio"/>			<input type="radio"/>	Proper eating, tasting, drinking, or tobacco use				<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"/>						
5	<input checked="" type="radio"/>	<input type="radio"/>			<input type="radio"/>	No discharge from eyes, nose, and mouth				<input type="radio"/>	<input type="radio"/>							20	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>		Proper cold holding temperatures					<input type="radio"/>	<input type="radio"/>						
	IN	OUT	NA	NO	Preventing Contamination by Hands													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"/>						
6	<input checked="" type="radio"/>	<input type="radio"/>			<input type="radio"/>	Hands clean and properly washed				<input type="radio"/>	<input type="radio"/>							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"/>						
7	<input checked="" type="radio"/>	<input 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"/>									IN	OUT	NA	NO	Consumer Advisory												
8	<input checked="" type="radio"/>	<input type="radio"/>			Handwashing sinks properly supplied and accessible				<input type="radio"/>	<input type="radio"/>									23	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>		Consumer advisory provided for raw and undercooked food					<input type="radio"/>	<input type="radio"/>					
	IN	OUT	NA	NO	Approved Source														IN	OUT	NA	NO	Highly Susceptible Populations												
9	<input checked="" type="radio"/>	<input type="radio"/>			Food obtained from approved source				<input type="radio"/>	<input type="radio"/>									24	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>		Pasteurized foods used; prohibited foods not offered					<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"/>										IN	OUT	NA	NO	Chemicals											
11	<input checked="" type="radio"/>	<input type="radio"/>			Food in good condition, safe, and unadulterated				<input type="radio"/>	<input type="radio"/>									25	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>		Food additives: approved and properly used					<input type="radio"/>	<input type="radio"/>					
12	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	Required records available: shell stock tags, parasite destruction				<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"/>					
	IN	OUT	NA	NO	Protection from Contamination														IN	OUT	NA	NO	Conformance with Approved Procedures												
13	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		Food separated and protected				<input type="radio"/>	<input type="radio"/>									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"/>					
14	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		Food-contact surfaces: cleaned and sanitized				<input type="radio"/>	<input type="radio"/>																									
15	<input checked="" type="radio"/>	<input type="radio"/>			Proper disposition of unsafe food, returned food not re-served				<input type="radio"/>	<input type="radio"/>																									

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

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 6-14-703, 6-14-706, 6-14-709, 6-14-711, 6-14-715, 6-14-716, 4-5-329.

Signature of Person In Charge [Signature] Date 03/21/2024 Signature of Environmental Health Specialist [Signature] Date 03/21/2024

\*\*\*\* 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: River Street Deli

Establishment Number #: 605120701

***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)
Triple sink	Qa	200	
Dish machine	Cl	50	

***Equipment Temperature***

Description	Temperature ( Fahrenheit)

***Food Temperature***

Description	State of Food	Temperature ( Fahrenheit)
Hot dogs WI	Cold Holding	40
Sweet potatoes	Cold Holding	39
Tomato soup	Cold Holding	39
Cole slaw RI	Cold Holding	37
Greek salad	Cold Holding	36
Roast beef	Cold Holding	41
Turkey	Cold Holding	41
Tuna salad	Cold Holding	45
Pimento cheese	Cold Holding	45
Potato salad	Cold Holding	45
Celery soup	Hot Holding	176
Brisket	Hot Holding	187
Salsa	Cold Holding	41

### Observed Violations

Total # 1

Repeated # 0

20: Pimento cheese, potato salad, tuna salad in the merchandise cooler at 45°F. All TCS foods cold held must be at 41°F or below. PIC is reaching out to maintenance to have the cooler repaired.

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**Establishment Information**

Establishment Name: River Street Deli

Establishment Number : 605120701

**Comments/Other Observations**

- 1: (IN): PIC demonstrates knowledge by correctly answering questions regarding principles applicable to the food operation.
- 2: Illness policy posted over the sink.
- 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: (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: No cooking during inspection.
- 17: (NO) No TCS foods reheated during inspection.
- 18: No cooling during inspection.
- 19: 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: (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:

\*\*\*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: River Street Deli

Establishment Number : 605120701

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

<b>Establishment Information</b>	
Establishment Name:	River Street Deli
Establishment Number #:	605120701

**Sources**

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

**Additional Comments**