

STATE OF FLORIDA
DEPARTMENT OF HEALTH
COUNTY HEALTH DEPARTMENT
FOOD SERVICE
INSPECTION REPORT



Facility Information

RESULT: Satisfactory

Permit Number: 06-48-02862
Name of Facility: Discovery Elementary School
Address: 8800 NW 54 Court
City, Zip: Sunrise 33351

Type: School (9 months or less)
Owner: Broward County School Board - Food & Nutrition Services
Person In Charge: Carlos Diaz Phone: 754-322-9110
PIC Email: diana.fitzgerald@browardschools.com

Inspection Information

Purpose: Routine
Inspection Date: 4/29/2024
Correct By: Next Inspection
Re-Inspection Date: None

Number of Risk Factors (Items 1-29): 2
Number of Repeat Violations (1-57 R): 0
Facility Grade: N/A
Stop Sale: No

Begin Time: 09:42 AM
End Time: 10:38 AM

Marking Key: IN=the act or item was observed to be in compliance; OUT=the act or item was observed to be out of compliance; NO=the act or item was not observed to be occurring at the time of inspection; NA=the act or item is not performed by the facility; COS=violation corrected on site; R=repeat violation from previous inspection

FoodBorne Illness Risk Factors And Public Health Interventions

SUPERVISION

- IN** 1. Demonstration of Knowledge/Training
- IN** 2. Certified Manager/Person in charge present

EMPLOYEE HEALTH

- IN** 3. Knowledge, responsibilities and reporting
- IN** 4. Proper use of restriction and exclusion
- IN** 5. Responding to vomiting & diarrheal events

GOOD HYGIENIC PRACTICES

- IN** 6. Proper eating, tasting, drinking, or tobacco use
- IN** 7. No discharge from eyes, nose, and mouth

PREVENTING CONTAMINATION BY HANDS

- IN** 8. Hands clean & properly washed
- IN** 9. No bare hand contact with RTE food
- IN** 10. Handwashing sinks, accessible & supplies

APPROVED SOURCE

- IN** 11. Food obtained from approved source
- NO** 12. Food received at proper temperature
- OUT** 13. Food in good condition, safe, & unadulterated (**COS**)
- NA** 14. Shellstock tags & parasite destruction

PROTECTION FROM CONTAMINATION

- IN** 15. Food separated & protected; Single-use gloves

- IN** 16. Food-contact surfaces; cleaned & sanitized
- IN** 17. Proper disposal of unsafe food

TIME/TEMPERATURE CONTROL FOR SAFETY

- IN** 18. Cooking time & temperatures
- NO** 19. Reheating procedures for hot holding
- NO** 20. Cooling time and temperature
- IN** 21. Hot holding temperatures
- IN** 22. Cold holding temperatures
- IN** 23. Date marking and disposition
- NA** 24. Time as PHC; procedures & records

CONSUMER ADVISORY

- NA** 25. Advisory for raw/undercooked food

HIGHLY SUSCEPTIBLE POPULATIONS

- IN** 26. Pasteurized foods used; No prohibited foods

ADDITIVES AND TOXIC SUBSTANCES

- IN** 27. Food additives: approved & properly used
- OUT** 28. Toxic substances identified, stored, & used (**COS**)

APPROVED PROCEDURES

- NA** 29. Variance/specialized process/HACCP

Inspector Signature:

Client Signature:

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Good Retail Practices

| | |
|---|--|
| SAFE FOOD AND WATER | |
| <u>NO</u> 30. Pasteurized eggs used where required | <u>NA</u> 46. Slash resistant/cloth gloves used properly |
| <u>IN</u> 31. Water & ice from approved source | UTENSILS, EQUIPMENT AND VENDING |
| <u>NA</u> 32. Variance obtained for special processing | <u>OUT</u> 47. Food & non-food contact surfaces |
| FOOD TEMPERATURE CONTROL | <u>IN</u> 48. Ware washing: installed, maintained, & used; test strips |
| <u>IN</u> 33. Proper cooling methods; adequate equipment | <u>IN</u> 49. Non-food contact surfaces clean |
| <u>IN</u> 34. Plant food properly cooked for hot holding | PHYSICAL FACILITIES |
| <u>IN</u> 35. Approved thawing methods | <u>IN</u> 50. Hot & cold water available; adequate pressure |
| <u>IN</u> 36. Thermometers provided & accurate | <u>OUT</u> 51. Plumbing installed; proper backflow devices |
| FOOD IDENTIFICATION | <u>IN</u> 52. Sewage & waste water properly disposed |
| <u>IN</u> 37. Food properly labeled; original container | <u>IN</u> 53. Toilet facilities: supplied, & cleaned |
| PREVENTION OF FOOD CONTAMINATION | <u>IN</u> 54. Garbage & refuse disposal |
| <u>IN</u> 38. Insects, rodents, & animals not present | <u>IN</u> 55. Facilities installed, maintained, & clean |
| <u>IN</u> 39. No Contamination (preparation, storage, display) | <u>IN</u> 56. Ventilation & lighting |
| <u>IN</u> 40. Personal cleanliness | <u>IN</u> 57. Permit; Fees; Application; Plans |
| <u>OUT</u> 41. Wiping cloths: properly used & stored | |
| <u>NO</u> 42. Washing fruits & vegetables | |
| PROPER USE OF UTENSILS | |
| <u>IN</u> 43. In-use utensils: properly stored | |
| <u>IN</u> 44. Equipment & linens: stored, dried, & handled | |
| <u>IN</u> 45. Single-use/single-service articles: stored & used | |

This form serves as a "Notice of Non-Compliance" pursuant to section 120.695, Florida Statutes. Items marked as "out" violate one or more of the requirements of Chapter 64E-11, the Florida Administrative Code or Chapter 381.0072, Florida Statutes. Violations must be corrected within the time period indicated above. Continued operation of this facility without making these corrections is a violation. Failure to correct violations in the time frame specified may result in enforcement action being initiated by the Department of Health.

Violations Comments

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|---|
| <p>Violation #13. Food in good condition, safe, & unadulterated OBSERVED CANNED FOOD(MIXED FRUIT) WITH DENTS ON HERMETIC SEAL, FOOD ADULTERATED. REMOVE DENTED CAN/PROVIDE INTACT CANNED FOOD WITHOUT DENTS ON HERMETIC SEAL. CANNED FOOD WAS DISCARDED AT TIME OF INSPECTION.</p> <p>CODE REFERENCE: 64E-11.003(1). The food packaging shall not be compromised nor the true appearance, color, or quality of a food be intentionally altered.</p> |
| <p>Violation #28. Toxic substances identified, stored, & used OBSERVED CLEANING/SANITIZING PRODUCT CONTAINER MISSING LABEL IDENTIFYING CONTENT. LABEL CLEANING/SANITIZING PRODUCT CONTAINER. - CORRECTED ON SITE</p> <p>CODE REFERENCE: 64E-11.003(6). Toxic substances properly identified, stored and used</p> |
| <p>Violation #41. Wiping cloths: properly used & stored OBSERVED WIPING CLOTH SANITIZING SOLUTION TESTED >400 PPM FOR QAC. REQUIRED SANITIZING SOLUTION LEVEL IS 200-400PPM. PROVIDE REQUIRED SANITIZING SOLUTION LEVEL FOR AMMONIUM CHLORIDE; LATER MEASURED AT 200 PPM. - CORRECTED ON SITE</p> <p>CODE REFERENCE: 64E-11.003(2). In-use wiping cloths shall be stored in an effective and approved sanitizing solution between uses.</p> |
| <p>Violation #47. Food & non-food contact surfaces OBSERVED ICE BUILDUP IN ICE CREAM CHEST. REPAIR ICE CREAM CHEST TO STOP ICE BUILDUP.</p> <p>CODE REFERENCE: 64E-11.003(4). Equipment and utensils must be properly designed, constructed, and in good repair.</p> |
| <p>Violation #51. Plumbing installed; proper backflow devices OBSERVED FAUCET/PIPES LEAKING (HAND SINK NEAR MANAGER'S OFFICE). REPAIR FAUCET/PIPES TO STOP LEAKING.</p> <p>CODE REFERENCE: 64E-11.003(5)(c). Plumbing will be installed and maintained to comply with plumbing requirements, including backflow prevention devices. A mop sink will be provided.</p> |

Inspector Signature:

Client Signature:

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General Comments

SATISFACTORY INSPECTION.

HOT WATER:

- HAND SINKS: 131F, 100F
- 4 COMP SINK: 119F
- PREP SINK: 131F
- RESTROOM: 101F
- MOP SINK: 128F

EQUIPMENT:

- REACH-IN REFRIGERATORS: 34F-36F
- REACH-IN FREEZERS: 0F, -2F
- WALK-IN REFRIGERATOR: 36F
- WALK-IN FREEZER: -4F
- MILK COOLER: 30F

FOOD:

- STRING CHEESE: 41F
- CORN: 176F
- RICE: 145F
- BLACK BEANS: 143F
- CHEESE PIZZA: 143F
- CHEESE SANDWICH: 159F
- STRING CHEESE: 41F
- YOGURT: 40F

SANITIZER:

- 4 COMP (QAC): 300 PPM
- WIPING CLOTH (QAC): >400 PPM THEN 200 PPM
- *QAC TEST KIT OBSERVED

NOTE: EMPLOYEE FOOD SAFETY TRAINING/EMPLOYEE HEALTH POLICY TRAINING COMPLETED ON 8/17/2023

PROBE FOOD THERMOMETER

THERMOMETER CALIBRATED AT 32.3F, 32F

PEST CONTROL

FACILITY MUST IMPLEMENT AN INTEGRATED PEST MANAGEMENT PLAN.
PEST CONTROL SERVICE PROVIDED BY BEACH ENVIRONMENTAL.

NON-SERVICE ANIMALS

NO DOGS OR NON-SERVICE ANIMALS ALLOWED INSIDE ESTABLISHMENT.

Email Address(es): diana.fitzgerald@browardschools.com

Inspector Signature:

Client Signature:

Form Number: DH 4023 03/18

06-48-02862 Discovery Elementary School

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Inspection Conducted By: Amythest Rawls (54900)
Inspector Contact Number: Work: (954) 412-7319 ex.
Print Client Name:
Date: 4/29/2024

Inspector Signature:

A circular stamp containing a stylized signature or initials.

Client Signature:

A handwritten signature in black ink.