

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



**Facility Information**

**RESULT: Satisfactory**

Permit Number: 06-48-00836  
 Name of Facility: Watkins Elementary School  
 Address: 3520 SW 52 Avenue  
 City, Zip: Hollywood 33023

Type: School (more than 9 months)  
 Owner: Broward County School Board - Food & Nutrition Services  
 Person In Charge: Trenicia Morrow Phone: 754-323-7810  
 PIC Email: monique.mcshan@browardschools.com

**Inspection Information**

|                             |   |                      |
|-----------------------------|---|----------------------|
| Purpose: Routine            | Number of Risk Factors (Items 1-29): 3  | Begin Time: 12:52 PM |
| Inspection Date: 5/17/2024  | Number of Repeat Violations (1-57 R): 2 | End Time: 01:36 PM   |
| Correct By: Next Inspection | Facility Grade: N/A                     |                      |
| Re-inspection Date: None    | Stop Sale: No                           |                      |

*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**

|   |  |
|---|--|
| <b>SUPERVISION</b>  |  |
| IN 1. Demonstration of Knowledge/Training                   | OUT 16. Food-contact surfaces; cleaned & sanitized (R) |
| IN 2. Certified Manager/Person in charge present            | NO 17. Proper disposal of unsafe food                  |
| <b>EMPLOYEE HEALTH</b>                                      |  |
| IN 3. Knowledge, responsibilities and reporting             | TIME/TEMPERATURE CONTROL FOR SAFETY                    |
| IN 4. Proper use of restriction and exclusion               | NO 18. Cooking time & temperatures                     |
| IN 5. Responding to vomiting & diarrheal events             | NO 19. Reheating procedures for hot holding            |
| <b>GOOD HYGIENIC PRACTICES</b>                              |  |
| IN 6. Proper eating, tasting, drinking, or tobacco use      | NO 20. Cooling time and temperature                    |
| IN 7. No discharge from eyes, nose, and mouth               | NO 21. Hot holding temperatures                        |
| <b>PREVENTING CONTAMINATION BY HANDS</b>                    |  |
| IN 8. Hands clean & properly washed                         | IN 22. Cold holding temperatures                       |
| IN 9. No bare hand contact with RTE food                    | IN 23. Date marking and disposition                    |
| IN 10. Handwashing sinks, accessible & supplies             | NA 24. Time as PHC; procedures & records               |
| <b>APPROVED SOURCE</b>                                      |  |
| IN 11. Food obtained from approved source                   | CONSUMER ADVISORY                                      |
| NO 12. Food received at proper temperature                  | NA 25. Advisory for raw/undercooked food               |
| OUT 13. Food in good condition, safe, & unadulterated (COS) | HIGHLY SUSCEPTIBLE POPULATIONS                         |
| NA 14. Shellstock tags & parasite destruction               | IN 26. Pasteurized foods used; No prohibited foods     |
| <b>PROTECTION FROM CONTAMINATION</b>                        |  |
| IN 15. Food separated & protected; Single-use gloves        | ADDITIVES AND TOXIC SUBSTANCES                         |
|   | IN 27. Food additives: approved & properly used        |
|   | OUT 28. Toxic substances identified, stored, & used    |
|   | APPROVED PROCEDURES                                    |
|   | NA 29. Variance/specialized process/HACCP              |

Inspector Signature:

Client Signature:

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Good Retail Practices

**SAFE FOOD AND WATER**

- NO 30. Pasteurized eggs used where required
- IN 31. Water & ice from approved source
- NA 32. Variance obtained for special processing

**FOOD TEMPERATURE CONTROL**

- NO 33. Proper cooling methods; adequate equipment
- NO 34. Plant food properly cooked for hot holding
- NO 35. Approved thawing methods
- IN 36. Thermometers provided & accurate

**FOOD IDENTIFICATION**

- IN 37. Food properly labeled; original container

**PREVENTION OF FOOD CONTAMINATION**

- IN 38. Insects, rodents, & animals not present
  - OUT 39. No Contamination (preparation, storage, display) (R)
  - IN 40. Personal cleanliness
  - IN 41. Wiping cloths: properly used & stored
  - NO 42. Washing fruits & vegetables
- PROPER USE OF UTENSILS**
- IN 43. In-use utensils: properly stored
  - IN 44. Equipment & linens: stored, dried, & handled
  - IN 45. Single-use/single-service articles: stored & used

- NA 46. Slash resistant/cloth gloves used properly
- UTENSILS, EQUIPMENT AND VENDING**

- IN 47. Food & non-food contact surfaces
- IN 48. Ware washing: installed, maintained, & used; test strips
- IN 49. Non-food contact surfaces clean

**PHYSICAL FACILITIES**

- IN 50. Hot & cold water available; adequate pressure
- IN 51. Plumbing installed; proper backflow devices
- IN 52. Sewage & waste water properly disposed
- IN 53. Toilet facilities: supplied, & cleaned
- IN 54. Garbage & refuse disposal
- IN 55. Facilities installed, maintained, & clean
- IN 56. Ventilation & lighting
- IN 57. Permit; Fees; Application; Plans

*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

Violation #13. Food in good condition, safe, & unadulterated  
OBSERVED 1 CANNED FOOD (BAKED BEANS) WITH DENTS ON HERMETIC SEAL, FOOD ADULTERATED. REMOVE DENTED CAN/PROVIDE INTACT CANNED FOOD WITHOUT DENTS ON HERMETIC SEAL. CANNED FOOD WAS REMOVED TO BE DISCARDED. - CORRECTED ON SITE

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.

Violation #16. Food-contact surfaces; cleaned & sanitized  
OBSERVED ORANGE SUBSTANCE ON ICE DEFLECTOR INSIDE ICE MACHINE. CLEAN AND SANITIZE INSIDE ICE MACHINE. - REPEATED VIOLATION

CODE REFERENCE: 64E-11.003(2). Food shall only contact surfaces that are clean and sanitized.

Violation #28. Toxic substances identified, stored, & used  
OBSERVED CLEANING/SANITIZING PRODUCT CONTAINER MISSING LABEL IDENTIFYING CONTENT IN WOMEN'S RESTROOM. LABEL CLEANING/SANITIZING PRODUCT CONTAINER.

CODE REFERENCE: 64E-11.003(6). Toxic substances properly identified, stored and used

Violation #39. No Contamination (preparation, storage, display)  
OBSERVED CONDENSATION DRIPPING FROM CEILING INSIDE REACH-IN REFRIGERATOR. REPAIR/REPLACE REFRIGERATOR. - REPEATED VIOLATION

CODE REFERENCE: 64E-11.003(2). Food shall be protected from sources of contamination and stored in a clean, dry location at least 6 inches above the floor.

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Client Signature:

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General Comments

SATISFACTORY INSPECTION.

FOOD TEMPS

MILK: 39F  
STRING CHEESE: 38F

REFRIGERATOR TEMPS

REACH-IN REFRIGERATOR: 36F  
REACH-IN FREEZER: -5F  
WALK-IN REFRIGERATOR: 27F  
WALK-IN FREEZER: -4F  
MILK COOLER: 41F

HOT WATER TEMPS

KITCHEN HANDSINK: 109F  
4 COMP. SINK: 104F  
FOOD PREP SINK: 107F  
EMPLOYEE BATHROOM HANDSINKS: 103F, 104F  
MOPSINK: 112F

CERTIFIED FOOD MANAGER/EMPLOYEE TRAINING

EMPLOYEE FOOD SAFETY TRAINING/EMPLOYEE HEALTH POLICY TRAINING COMPLETED ON 3/21/2024

PROBE FOOD THERMOMETER

THERMOMETER CALIBRATED AT 32F

WAREWASHING PROCEDURE/SANITIZER USED

3 COMP. SINK WAS NOT SET UP AT TIME OF INSPECTION  
\*QAC SANITIZER TEST KIT PROVIDED.

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): monique.mcshan@browardschools.com

Inspection Conducted By: Amythest Rawls (54900)  
Inspector Contact Number: Work: (954) 412-7319 ex.  
Print Client Name: Shartonya Williams  
Date: 5/17/2024

Inspector Signature:

Client Signature: