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



RESULT: Satisfactory **Facility Information** Permit Number: 06-48-00837 Name of Facility: Welleby Elementary School Address: 3230 Nob Hill Road City, Zip: Sunrise 33351 Type: School (more than 9 months) Owner: Broward County School Board - Food & Nutrition Services Person In Charge: Randi Russell Phone: 754-322-8850 PIC Email: randi.russell@browardschools.com Inspection Information Purpose: Routine Number of Risk #actors (Items 1-29): 0 Begin Time: 10:23 AM Inspection Date: 8/13/2024 Number of Repeat Violations (1-57 R): 0 End Time: 11:28 AM Correct By: Next Inspection FacilityGrade: N/A Re-Inspection Date: None StopSale: 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 SUPERVISION IN 16. Food-contact surfaces; cleaned & sanitized IN 1. Demonstration of Knowledge/Training 17. Proper disposal of unsafe food IN 2. Certified Manager/Person in charge present TIME/TEMPERATURE CONTROL FOR SAFETY EMPLOYEE HEALTH NO 18. Cooking time & temperatures IN 3. Knowledge, responsibilities and reporting NO 19. Reheating procedures for hot holding IN 20. Cooling time and temperature IN 4. Proper use of restriction and exclusion IN 21. Hot holding temperatures IN 5. Responding to vomiting & diarrheal events GOOD HYGIENIC PRACTICES IN 22. Cold holding temperatures in 6. Proper eating, tasting, drinking, or tobacco use IN 23. Date marking and disposition IN 7. No discharge from eyes, nose, and mouth NA 24. Time as PHC; procedures & records PREVENTING CONTAMINATION BY HANDS CONSUMER ADVISORY IN 8. Hands clean & properly washed 25. Advisory for raw/undercooked food IN 9. No bare hand contact with RTE food HIGHLY SÚSCEPTIBLE POPULATIONS IN 10. Handwashing sinks, accessible & supplies IN 26. Pasteurized foods used; No prohibited foods APPROVED SOURCE ADDITIVES AND TOXIC SUBSTANCES IN 27. Food additives: approved & properly used
 IN 28. Toxic substances identified, stored, & used IN 11. Food obtained from approved source NO 12. Food received at proper temperature APPROVED PROCEDURES IN 13. Food in good condition, safe, & unadulterated NA 14. Shellstock tags & parasite destruction NA 29. Variance/specialized process/HACCP PROTECTION FROM CONTAMINATION IN 15. Food separated & protected; Single-use gloves

Inspector Signature:

(MP)

Client Signature:

promod)

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Good Retail Practices

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

Violation #56. Ventilation & lighting
OBSERVED LIGHT BULBS OUT IN COOKING & PREP AREA. REPLACE LIGHT BULBS.

CODE REFERENCE: 64E-11.003(6)(a). Adequate exhaust ventilation hood systems in food prep and warewashing areas shall be provided and designed. 50 foot candles shall be at surfaces where employees work with food and 20 foot candles shall be at surfaces where food is provided to consumers.

Inspector Signature:

Client Signature:

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General Comments		
SATISFACTORY INSPECTION.		
HOT WATER: -HAND SINK: 110F -4 COMP: 103F -PREP SINK: 122F -MOP SINK: 107F -RESTROOM: 109F		
EQUIPMENT: -REACH-IN REFRIGERATOR: 32F -WALK-IN REFRIGERATOR: 26F -WALK-IN FREEZER: 0F -MILK COOLER: 27F		
FOOD: -YOGURT: 39F -PASTA: 151F -BROCCOLI: 155F -MEAT SAUCE: 144F -BEEF: 151F -MILK: 39F		
SANITIZER: -4 COMP (QAC): 400 PPM -WIPING CLOTH (QAC): 300 PPM *QAC TEST KIT OBSERVED		
NOTE: EMPLOYEE FOOD SAFETY TRAINING/EMPLOYEE HEALTH I	POLICY TRAINING COM	PLETED ON 8/16/2023.
PROBE FOOD THERMOMETER THERMOMETER CALIBRATED AT 32.1F		
PEST CONTROL FACILITY MUST IMPLEMENT AN INTEGRATED PEST MANAGEMEN PEST CONTROL SERVICE PROVIDED BY BEACH ENVIRONMENTAL		
NON-SERVICE ANIMALS NO DOGS OR NON-SERVICE ANIMALS ALLOWED INSIDE ESTABLIS	SHMENT.	
Email Address(es): randi.russell@browardschools.com		
Inspection Conducted By: Amythest Rawls (54900) Inspector Contact Number: Work: (954) 412-7319 ex. Print Client Name: Date: 8/13/2024		
Inspector Signature:	Client Sign	ature:
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