

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



**Facility Information**

**RESULT: Satisfactory**

Permit Number: 06-48-00131  
Name of Facility: Castle Hill Elementary  
Address: 2640 NW 46 Avenue  
City, Zip: Lauderhill 33313

Type: School (more than 9 months)  
Owner: Broward County School Board - Food & Nutrition Services  
Person In Charge: Andrea Green Neil Phone: 754-322-5600  
PIC Email: Andrea.GreenNeil@browardschools.com

**Inspection Information**

Purpose: Routine  
Inspection Date: 1/12/2021  
Correct By: Next Inspection  
**Re-Inspection Date: None**

Number of Risk Factors (Items 1-29): 1  
Number of Repeat Violations (1-57 R): 4  
Facility Grade: N/A  
Stop Sale: No

Begin Time: 10:14 AM  
End Time: 10:58 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
- IN** 13. Food in good condition, safe, & unadulterated
- NA** 14. Shellstock tags & parasite destruction

**PROTECTION FROM CONTAMINATION**

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

**OUT** 16. Food-contact surfaces; cleaned & sanitized (**R, COS**)

- IN** 17. Proper disposal of unsafe food

**TIME/TEMPERATURE CONTROL FOR SAFETY**

- NO** 18. Cooking time & temperatures
- NO** 19. Reheating procedures for hot holding
- NO** 20. Cooling time and temperature
- NO** 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
- IN** 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**

- IN** 33. Proper cooling methods; adequate equipment
- IN** 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
- IN** 39. No Contamination (preparation, storage, display)
- IN** 40. Personal cleanliness
- IN** 41. Wiping cloths: properly used & stored
- NO** 42. Washing fruits & vegetables

**PROPER USE OF UTENSILS**

- OUT** 43. In-use utensils: properly stored (**COS**)
- OUT** 44. Equipment & linens: stored, dried, & handled (**COS**)
- IN** 45. Single-use/single-service articles: stored & used

- NO** 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
- OUT** 54. Garbage & refuse disposal (**R**)
- OUT** 55. Facilities installed, maintained, & clean (**R**)
- OUT** 56. Ventilation & lighting (**R**)
- 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.*

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**Violations Comments**

<p>Violation #16. Food-contact surfaces; cleaned &amp; sanitized OBSERVED (CLOTHS) STORED/HELD IN FOOD PREP SINK. -CORRECTED ON SITE</p> <p>OBSERVED SMALL AMOUNT OF BLACK SUBSTANCE INSIDE ICE MACHINE. -CORRECTED ON SITE</p> <p>CODE REFERENCE: 64E-11.003(2). Food shall only contact surfaces that are clean and sanitized.</p>
<p>Violation #43. In-use utensils: properly stored OBSERVED IN-USE FOOD PREPARATION/DISPENSING UTENSILS NOT PROPERLY STORED. HANDLES SHOULD BE STORED IN ONE DIRECTION AND NOT TOUCH FOOD CONTACT SURFACES OF OTHER UTENSILS. -CORRECTED ON SITE</p> <p>CODE REFERENCE: 64E-11.003(4). The establishment shall use an approved method for the storage of in-use utensils during pauses in food preparation or dispensing.</p>
<p>Violation #44. Equipment &amp; linens: stored, dried, &amp; handled OBSERVED WET NESTING OF CLEAN, SANITIZED EQUIPMENT/UTENSIL (SERVING PANS), NOT AIR DRIED PRIOR TO STORAGE. -CORRECTED ON SITE</p> <p>CODE REFERENCE: 64E-11.003(4). Utensils and equipment must be cleaned, sanitized and air dried prior to storage. Utensils, equipment, and linens must be properly cleaned and stored.</p>
<p>Violation #54. Garbage &amp; refuse disposal OBSERVED 2 DUMPSTER DRAIN PLUGS BROKEN, IN DISREPAIR.</p> <p>CODE REFERENCE: 64E-11.003(5). Garbage shall be disposed of to prevent vector harborage. Trash cans will be durable, cleanable, leak proof, insect and rodent resistant, and non-absorbent. Outside storage area shall be of a smooth, non-absorbent material and sloped to a drain.</p>
<p>Violation #55. Facilities installed, maintained, &amp; clean OBSERVED CEILING TILE NOT SECURED NEAR COOKING AREA. AS PER CAFETERIA MANAGER, CEILING TILES ARE MISPLACED/MOVED DUE TO CONSTRUCTION.</p> <p>CODE REFERENCE: 64E-11.003(5). Floors, walls, and ceilings shall be smooth, durable, easily cleanable, and non-absorbent. Exterior areas shall be kept cleaned.</p>
<p>Violation #56. Ventilation &amp; lighting OBSERVED 14 LIGHT BULBS OUT NEAR 3 COMP SINK, UNDER VENTILATION HOOD, NEAR PREP SINK, ABOVE PREP AREA AND SERVICE LINE.</p> <p>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.</p>

Inspector Signature:

Handwritten signature of the inspector.

Client Signature:

Handwritten signature of the client.

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**General Comments**

**HOT WATER:**

- HAND SINK: 111F, 128F
- 4 COMP SINK: 107F
- PREP SINK: 106F
- RESTROOM: 122F
- MOP SINK: 107F

**EQUIPMENT:**

- REACH-IN REFRIGERATOR: 36F
- REACH-IN FREEZER: -2F
- WALK-IN REFRIGERATOR: 36F
- WALK-IN FREEZER: -6F
- ICE CREAM CHEST: 12F

**FOOD:**

- MILK: 39F
- TACO MEAT: 139F

**SANITIZER:**

- QAC: 300 PPM

Email Address(es): Andrea.GreenNeil@browardschools.com

Inspection Conducted By: Amythest Rawls (6435)  
Inspector Contact Number: Work: (954) 412-7319 ex.  
Print Client Name:  
Date: 1/12/2021

Inspector Signature:

Handwritten signature of the inspector, Amythest Rawls.

Client Signature:

Handwritten signature of the client.