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



### **Facility Information**

#### **RESULT: Satisfactory**

Permit Number: 06-48-00094 Name of Facility: Boyd Anderson High School Address: 3050 NW 41 Street City, Zip: Lauderdale Lakes 33309

Type: School (more than 9 months) Owner: Broward County School Board - Food & Nutrition Services Person In Charge: Donna Schneider Plone: (754) 322-0210 PIC Email: donna.schneider@browardschools.com

#### **Inspection Information**

Purpose: Reinspection Inspection Date: 1/31/2025 Correct By: None **Re-Inspection Date: None**  Number of Risk Factors (Items 1-29): 0 Number of Repeat Violations (1-57 R): 0 FacilityGrade: N/A StopSale: No Begin Time: 09:33 AM End Time: 10:06 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
- NA 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
- NO 6. Proper eating, tasting, drinking, or tobacco use
- NO 7. No discharge from eyes, nose, and mouth PREVENTING CONTAMINATION BY HANDS
- NO 8. Hands clean & properly washed
- NA 9. No bare hand contact with RTE food
- IN 10. Handwashing sinks, accessible & supplies APPROVED SOURCE
- IN 11. Food obtained from approved source
- NA 12. Food received at proper temperature
- IN 13. Food in good condition, safe, & unadulterated
- NA 14. Shellstock tags & parasite destruction

## PROTECTION FROM CONTAMINATION

NA 15. Food separated & protected; Single-use gloves

- IN 16. Food-contact surfaces; cleaned & sanitized
- NO 17. Proper disposal of unsafe food TIME/TEMPERATURE CONTROL FOR SAFETY
- NA 18. Cooking time & temperatures
- NA 19. Reheating procedures for hot holding
- NA 20. Cooling time and temperature
- NA 21. Hot holding temperatures NA 22. Cold holding temperatures
- NA 23. Date marking and disposition
- NA 24. Time as PHC; procedures & records CONSUMER ADVISORY
- NA 25. Advisory for raw/undercooked food HIGHLY SUSCEPTIBLE POPULATIONS
- NA 26. Pasteurized foods used; No prohibited foods ADDITIVES AND TOXIC SUBSTANCES
- NA 27. Food additives: approved & properly used
- NA 28. Toxic substances identified, stored, & used APPROVED PROCEDURES
- NA 29. Variance/specialized process/HACCP

nspector	Signature:
----------	------------

**Client Signature:** 

Done So

Form Number: DH 4023 03/18

06-48-00094 Boyd Anderson High School

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



# **Good Retail Practices**

#### SAFE FOOD AND WATER

- NA 30. Pasteurized eggs used where required
- NA 31. Water & ice from approved source
- NA 32. Variance obtained for special processing
- FOOD TEMPERATURE CONTROL
- NA 33. Proper cooling methods; adequate equipment
- NA 34. Plant food properly cooked for hot holding
- NA 35. Approved thawing methods
- NA 36. Thermometers provided & accurate FOOD IDENTIFICATION
- NA 37. Food properly labeled; original container **PREVENTION OF FOOD CONTAMINATION**
- NA 38. Insects, rodents, & animals not present
- NA 39. No Contamination (preparation, storage, display)
- NA 40. Personal cleanliness
- NA 41. Wiping cloths: properly used & stored
- NA 42. Washing fruits & vegetables
- PROPER USE OF UTENSILS
- NA 43. In-use utensils: properly stored
- NA 44. Equipment & linens: stored, dried, & handled
- NA 45. Single-use/single-service articles: stored & used

- NA 46. Slash resistant/cloth gloves used properly UTENSILS, EQUIPMENT AND VENDING
- NA 47. Food & non-food contact surfaces
- NA 48. Ware washing: installed, maintained, & used; test strips
- NA 49. Non-food contact surfaces clean
- PHYSICAL FACILITIES
- NA 50. Hot & cold water available; adequate pressure
- NA 51. Plumbing installed; proper backflow devices
- NA 52. Sewage & waste water properly disposed
- NA 53. Toilet facilities: supplied, & cleaned
- IN 54. Garbage & refuse disposal
- IN 55. Facilities installed, maintained, & clean
- NA 56. Ventilation & lighting
- NA 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**

No Violation Comments Available

### **General Comments**

**Reinspection Result Satisfactory** 

ENOV abated.

Observed violatuons #10, #54, and #55 have been corrected. Employee bathroom handsinks: 124F-135F

Email Address(es): donna.schneider@browardschools.com

Inspection Conducted By: Colin Dickinson (27050) Inspector Contact Number: Work: (954) 412-7302 ex. Print Client Name: Date: 1/31/2025

**Inspector Signature:** 

Client Signature:

CLDI

Form Number: DH 4023 03/18

06-48-00094 Boyd Anderson High School