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



Facility Information RESULT: Satisfactory

Permit Number: 06-48-00219

Name of Facility: Deerfield Park Elementary School

Address: 650 SW 3 Avenue City, Zip: Deerfield Beach 33441

Type: School (more than 9 months)

Owner: Broward County School Board - Food & Nutrition Services

Person In Charge: Deerfield Park Elementary School Phone: 754 322 6150

PIC Email: angela.wondsor@browardschools.com

Inspection Information

Purpose: Routine Number of Risk Factors (Items 1-29): 1 Begin Time: 10:37 AM Inspection Date: 8/21/2023 Number of Repeat Violations (1-57 R): 0 End Time: 11:24 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 1. Demonstration of Knowledge/Training
- NA 2. Certified Manager/Person in charge present EMPLOYEE HEALTH
- IN 3. Knowledge, responsibilities and reporting
- N 4. Proper use of restriction and exclusion
- S. Responding to vomiting & diarrheal events GOOD HYGIENIC PRACTICES
- IN 6. Proper eating, tasting, drinking, or tobacco use
- N 7. No discharge from eyes, nose, and mouth PREVENTING CONTAMINATION BY HANDS
- IN 8. Hands clean & properly washed
- No bare hand contact with RTE food
- 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
 - 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
- N 21. Hot holding temperatures
- N 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
- N 27. Food additives: approved & properly used
- N 28. Toxic substances identified, stored, & used
 - APPROVED PROCEDURES

Client Signature:

NA 29. Variance/specialized process/HACCP

Inspector Signature:

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Good Retail Practices

SAFE FOOD AND WATER

IN 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

NO 34. Plant food properly cooked for hot holding

IN 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

IN 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

N 53. Toilet facilities: supplied, & cleaned

N 54. Garbage & refuse disposal

OUT 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 #16. Food-contact surfaces; cleaned & sanitized

Mold/mildew inside ice machine.

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

Violation #55. Facilities installed, maintained, & clean

Observed ceiling tile missing in employee area, room prior bathrooms.

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.

Inspector Signature:

Jan

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Client Signature:

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General Comments

Inspection result: Satisfactory

Employee Food Safety Training / Employee health policy conducted on 8/16/2023.

Food:

Milk: 34 F, use-by 9/5/23 Corn: 190 F

Corn: 190 F Beans: 172 F Rice: 167 F

Mexican Pizza: 138 F

Cheese: 40 F

Equipment:

Reach in refrigerator: 38 F Display refrigerator: 40 F Reach in freezer: -4 F Milk chest cooler: 36 F Walk in refrigerator: 40 F Walk in freezer: 10 F

Hot Water:

Handwashing sink: 102 F

Prep sink: 104 F

4 Compartment sink: 109 F

Mop sink: 106 F

Bathrooms: 102 to 105 F

Sanitizing:

3 compartment sink and wet wiping bucket: 200 ppm QAC

Email Address(es): angela.windsor@browardschools.com

Inspection Conducted By: Stella Aquino Figueroa (6599) Inspector Contact Number: Work: (954) 412-7320 ex.

Print Client Name: Date: 8/21/2023

Inspector Signature:

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Client Signature:

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