

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



**Facility Information**

**RESULT: Satisfactory**

Permit Number: 06-48-00447  
Name of Facility: Lauderhill Paul Turner Elem  
Address: 1500 NW 49 Avenue  
City, Zip: Lauderhill 33313

Type: School (more than 9 months)  
Owner: Broward County School Board - Food & Nutrition Services  
Person In Charge: Porchia Dukes Phone: 754-321-0215  
PIC Email: andrea.greenneil@browardschools.com

**Inspection Information**

Purpose: Routine  
Inspection Date: 8/20/2024  
Correct By: Next Inspection  
**Re-Inspection Date: None**

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

Begin Time: 11:39 AM  
End Time: 12:22 PM

*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

- NO** 17. Proper disposal of unsafe food

**TIME/TEMPERATURE CONTROL FOR SAFETY**

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

Form Number: DH 4023 03/18

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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  
**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  
**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  
**IN** 55. Facilities installed, maintained, & clean  
**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**

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

OBSERVED RED SUBSTANCE ON ICE DEFLECTOR INSIDE ICE MACHINE. CLEAN AND SANITIZE INSIDE ICE MACHINE.

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

Violation #43. In-use utensils: properly stored

OBSERVED IN-USE UTENSIL HANDLE (SCOOPS) TOUCHING FOOD (RICE & BEANS). STORE IN-USE UTENSIL WITH HANDLES OUT FOOD. - CORRECTED ON SITE

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.

Violation #44. Equipment & linens: stored, dried, & handled

OBSERVED WET NESTING OF CLEAN, SANITIZED EQUIPMENT (FLAT PANS), NOT AIR DRIED PRIOR TO STORAGE. WASH RINSE AND SANITIZE. AIR DRY UTENSILS BEFORE STACKING/STORAGE. - CORRECTED ON SITE

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.

Violation #54. Garbage & refuse disposal

OBSERVED SMALL RUSTY HOLES ALONG FRONT SIDE OF DUMPSTER. REPAIR/REPLACE DUMPSTER CONTAINER.

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.

Violation #56. Ventilation & lighting

OBSERVED LIGHT BULBS OUT ABOVE 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.

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General Comments

SATISFACTORY INSPECTION.

HOT WATER:

- HAND SINK: 106F
- 4 COMP SINK: 112F
- PREP SINK: 110F
- RESTROOM: 102F
- MOP SINK: 102F

EQUIPMENT:

- REACH-IN REFRIGERATORS: 28F-33F
- WALK-IN REFRIGERATOR: 40F
- WALK-IN FREEZER: 6F
- MILK COOLERS: 32F, 40F

FOOD:

- MILK: 39F
- MIXED VEGETABLES: 192F
- BLACK BEANS: 176F
- TERIYAKI CHICKEN: 167F
- RICE: 188F
- TACO MEAT: 195F
- SWEET POTATO FRIES: 140F

CERTIFIED FOOD MANAGER/EMPLOYEE TRAINING

EMPLOYEE FOOD SAFETY TRAINING/EMPLOYEE HEALTH POLICY TRAINING COMPLETED ON 8/8/2024

PROBE FOOD THERMOMETER

THERMOMETER CALIBRATED AT 32F.

WAREWASHING PROCEDURE/SANITIZER USED

3 COMP. SINK CHEMICAL SANITIZER: 200 PPM  
WIPING CLOTH (QAC): 200 PPM  
SANITIZER TEST KIT PROVIDED.

PEST CONTROL

FACILITY MUST IMPLEMENT AN INTEGRATED PEST MANAGEMENT PLAN.  
PEST CONTROL SERVICE PROVIDED BY TOWER PEST CONTROL.

NON-SERVICE ANIMALS

NO DOGS OR NON-SERVICE ANIMALS ALLOWED INSIDE ESTABLISHMENT

Email Address(es): andrea.greenneil@browardschools.com

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Inspection Conducted By: Amythest Rawls (54900)  
Inspector Contact Number: Work: (954) 412-7319 ex.  
Print Client Name:  
Date: 8/20/2024

Inspector Signature:

A handwritten signature in black ink, appearing to be "AR" or similar initials.

Client Signature:

A handwritten signature in black ink, appearing to be "Pauline Okers".