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



Facility Information

Permit Number: 06-48-00618

Name of Facility: Pine Ridge Education Center

Address: 1251 SW 42 Avenue City, Zip: Fort Lauderdale 33317

Type: School (9 months or less)

Owner: Broward County School Board - Food & Nutrition Services Person In Charge: Pearl Porter Phone: (754) 321-0235

PIC Email: vero.portello@browardschools.com

Inspection Information

Purpose: Routine

Inspection Date: 8/23/2022

Correct By: Next Inspection

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: 09:24 AM End Time: 09:56 AM

**RESULT: Satisfactory** 

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
- IN 5. Responding to vomiting & diarrheal events GOOD HYGIENIC PRACTICES
- 1N 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

- 10. Food-contact surfaces; cleaned & sanitized
- NO 17. Proper disposal of unsafe food

# TIME/TEMPERATURE CONTROL FOR SAFETY

- NO 18. Cooking time & temperatures
- IN 19. Reheating procedures for hot holding
- NO 20. Cooling time and temperature
- N 21. Hot holding temperatures
- IN 22. Cold holding temperatures
- 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
- NA 27. Food additives: approved & properly used
- IN 28. Toxic substances identified, stored, & used APPROVED PROCEDURES
- NA 29. Variance/specialized process/HACCP

Inspector Signature:

Form Number: DH 4023 03/18

Client Signature:

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#### 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
- IN 31. Water & ice from approved source
- NA 32. Variance obtained for special processing

#### FOOD TEMPERATURE CONTROL

- NO 33. Proper cooling methods; adequate equipment
- NO 34. Plant food properly cooked for hot holding
- 35. Approved thawing methods
- OUT 36. Thermometers provided & accurate

### FOOD IDENTIFICATION

- IN 37. Food properly labeled; original container PREVENTION OF FOOD CONTAMINATION
  - 38. Insects, rodents, & animals not present
- N 39. No Contamination (preparation, storage, display)
- IN 40. Personal cleanliness
- N 41. Wiping cloths: properly used & stored
- NO 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
- 1N 48. Ware washing: installed, maintained, & used; test strips
- N 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
- IN 54. Garbage & refuse disposal
- IN 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 #36. Thermometers provided & accurate

Food thermometer not calibrated as per manufacturer's instructions. Thermometer calibrated to 36-38F prior, per calibration log. CODE REFERENCE: 64E-11.003(4). Thermometers must be calibrated to ensure accuracy in accordance with Rule requirements. Food thermometers scaled in Celsius (C) shall be accurate to plus or minus 1°C or in Fahrenheit (F), accurate to plus or minus 2°F. Food thermometers should be accessible for use by employees and have a probe size appropriate to the food item.

Inspector Signature:

Client Signature:

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### **General Comments**

Result: Satisfactory

Sanitizer:

QAC (3 comp sink ):200 PPM

QAC(bucket):200ppm

Temperatures: Handsink: 109F Prepsink:105F Restroom: 104F

Reach-in fridge x 2: 36-45F(in use) Dressing(reach-in fridge 1): 39F

French toast(hot holding/serving line): 135F Milk (serving line): 41F

Mopsink:110F

Task Lighting: 46 FC

1 Thermometer calibrated at: 32F

Email Address(es): vero.portello@browardschools.com

Inspection Conducted By: Christian Sapovits (6608) Inspector Contact Number: Work: (954) 412-7328 ex.

Print Client Name: Date: 8/23/2022

Inspector Signature:

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