

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



Facility Information

RESULT: Satisfactory

Permit Number: 06-48-00555
Name of Facility: Northeast High School
Address: 700 NE 56 Street
City, Zip: Oakland Park 33334

Type: School (more than 9 months)
Owner: Broward County School Board - Food & Nutrition Services
Person In Charge: Krystle Connell Phone: 754-321-0235
PIC Email: Krystle.connell@bowardschools.com

Inspection Information

Purpose: Routine
Inspection Date: 11/15/2019
Correct By: Next Inspection
Re-Inspection Date: None

Number of Risk Factors (Items 1-29): 1
Number of Repeat Violations (1-57 R): 0
Facility Grade: N/A
Stop Sale: No

Begin Time: 12:01 PM
End Time: 01:30 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
- 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

- 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

- IN** 16. Food-contact surfaces; cleaned & sanitized

- IN** 17. Proper disposal of unsafe food

TIME/TEMPERATURE CONTROL FOR SAFETY

- IN** 18. Cooking time & temperatures
- IN** 19. Reheating procedures for hot holding
- IN** 20. Cooling time and temperature

- OUT** 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

- NA** 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:

Client Signature:

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Good Retail Practices

SAFE FOOD AND WATER	
<u>NA</u> 30. Pasteurized eggs used where required	<u>NA</u> 46. Slash resistant/cloth gloves used properly
<u>IN</u> 31. Water & ice from approved source	UTENSILS, EQUIPMENT AND VENDING
<u>NA</u> 32. Variance obtained for special processing	<u>OUT</u> 47. Food & non-food contact surfaces
FOOD TEMPERATURE CONTROL	<u>IN</u> 48. Ware washing: installed, maintained, & used; test strips
<u>IN</u> 33. Proper cooling methods; adequate equipment	<u>IN</u> 49. Non-food contact surfaces clean
<u>IN</u> 34. Plant food properly cooked for hot holding	PHYSICAL FACILITIES
<u>IN</u> 35. Approved thawing methods	<u>IN</u> 50. Hot & cold water available; adequate pressure
<u>IN</u> 36. Thermometers provided & accurate	<u>IN</u> 51. Plumbing installed; proper backflow devices
FOOD IDENTIFICATION	<u>IN</u> 52. Sewage & waste water properly disposed
<u>IN</u> 37. Food properly labeled; original container	<u>IN</u> 53. Toilet facilities: supplied, & cleaned
PREVENTION OF FOOD CONTAMINATION	<u>IN</u> 54. Garbage & refuse disposal
<u>IN</u> 38. Insects, rodents, & animals not present	<u>IN</u> 55. Facilities installed, maintained, & clean
<u>IN</u> 39. No Contamination (preparation, storage, display)	<u>IN</u> 56. Ventilation & lighting
<u>IN</u> 40. Personal cleanliness	<u>IN</u> 57. Permit; Fees; Application; Plans
<u>IN</u> 41. Wiping cloths: properly used & stored	
<u>IN</u> 42. Washing fruits & vegetables	
PROPER USE OF UTENSILS	
<u>IN</u> 43. In-use utensils: properly stored	
<u>IN</u> 44. Equipment & linens: stored, dried, & handled	
<u>IN</u> 45. Single-use/single-service articles: stored & used	

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

<p>Violation #21. Hot holding temperatures HOT TCS FOOD - TURKEY IN GRAVY TESTED 132F AND SWEET POTATOE FRIES TESTED 93F, NOT HELD AT 135F OR ABOVE. BOTH FOOD ITEMS WERE PLACED BACK IN WARMER. CODE REFERENCE: 64E-11.003(2). PHF/TCS foods, which are held hot and not subject to an approved HACCP plan, must be maintained at 135°F.</p>
<p>Violation #47. Food & non-food contact surfaces OBSERVED ICE MACHINE DIRTY. CODE REFERENCE: 64E-11.003(4). Equipment and utensils must be properly designed, constructed, and in good repair.</p>

General Comments

<p>HOT WATER: HAND SINK 100F TO 107F; RESTROOM 105F TO 107F; MOP SINK 107 F</p> <p>REFRIGERATOR: 30F WALK-IN REFRIGERATOR: 31 F WALK-IN FREEZER: 0 F</p> <p>HOT FOOD: BLACK BEANS 150, CHICKEN WINGS 136, GRATIN POPATOES 181, PIZZA 148, GROUND BEEF 168F</p> <p>COLD FOOD: CHEESE 38 F, EGGS 37, STRAWBERRY MILK 38 QAC 3 COMPARTMENT SINK 400 PPM</p> <p>Email Address(es): Krystle.connell@borwardschools.com</p>

Inspector Signature:

Client Signature:

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Inspection Conducted By: Ann Elliott (5734)
Inspector Contact Number: Work: (954) 412-7309 ex.
Print Client Name: Krystle
Date: 11/15/2019

Inspector Signature:

Handwritten signature of Ann Elliott.

Client Signature:

Handwritten signature of Krystle.