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



Facility Information

RESULT: Satisfactory

Permit Number: 13-48-16381 Name of Facility: Saunders, Laura C. Elementary/ Loc.# 2941 Address: 505 SW 8 Street City, Zip: Homestead 33030

Type: School (more than 9 months) Owner: MDCPS Person In Charge: MDCPS Phone: (786) 275-0400 PIC Email: gadorno@dadeschools.net

Inspection Information

Purpose: Routine Inspection Date: 12/18/2024 Correct By: Next Inspection **Re-Inspection Date: None**

Number of Risk Factors (Items 1-29): 0 Number of Repeat Violations (1-57 R): 1 FacilityGrade: N/A StopSale: No

Begin Time: 11:00 AM End Time: 12:00 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
- N 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 T. 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
- 14. Shellstock tags & parasite destruction NA

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
- 18. Cooking time & temperatures
- NO 19. Reheating procedures for hot holding
- IN 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
- 25. Advisory for raw/undercooked food IN HIGHLY SUSCEPTIBLE POPULATIONS
- IN 26. Pasteurized foods used; No prohibited foods ADDITIVES AND TOXIC SUBSTANCES
- IN 27. Food additives: approved & properly used
- 28. Toxic substances identified, stored, & used NA APPROVED PROCEDURES
- NA 29. Variance/specialized process/HACCP

| Inspector Signature: | | | Client Signature: |
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| /bod/ | | | N Am |
| Form Number: DH 4023 | 03/18 | 13-48-16381 | Saunders, Laura C. Elementary/ Loc.# 2941 |

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



Good Retail Practices

SAFE FOOD AND WATER

- IN 30. Pasteurized eggs used where required
- IN 31. Water & ice from approved source
- IN 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
 - N 43. In-use utensils: properly stored
- IN 44. Equipment & linens: stored, dried, & handled
- N 45. Single-use/single-service articles: stored & used

- NA 46. Slash resistant/cloth gloves used properly UTENSILS, EQUIPMENT AND VENDING
- OUT 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 (R)
 - 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 #47. Food & non-food contact surfaces

Observed walk-in freezer with burnt out lights. Replace burnt out light bulbs. Work order 448737.

CODE REFERENCE: 64E-11.003(4). Equipment and utensils must be properly designed, constructed, and in good repair.

Violation #54. Garbage & refuse disposal

Observed dumpsters missing drain plug. Provide drain plug for the dumpsters. Repeat 06/04/2024, 07/11/2024

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.

| nspector | Signature: | |
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Client Signature:

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Form Number: DH 4023 03/18

13-48-16381 5

381 Saunders, Laura C. Elementary/ Loc.# 2941

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



General Comments

Satisfactory

Temperatures recorded with a Thermapen thermometer:

Reach in fridge 1 41F; milk 41F Reach in fridge 2 37F Reach in fridge 3 40F Walk in fridge 41F Freezer 1 9F Freezer 2 5F Walk in freezer 6F

Warmer: Cheesesticks 152F Beef 154F

Handwashing sink 108F Mop sink 111F 3-compartment sink 122F Bathroom sink 114F

Email Address(es): gadorno@dadeschools.net; Kamila_lillie@dadeschools.net

Inspection Conducted By: Raad Farhang (913251) Inspector Contact Number: Work: (305) 623-3575 ex. Print Client Name: gretza adorno Date: 12/18/2024

Inspector Signature:

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Client Signature:

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Form Number: DH 4023 03/18

13-48-16381 Saunders, Laura C. Elementary/ Loc.# 2941