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



RESULT: Satisfactory **Facility Information**

Permit Number: 52-48-00221

Name of Facility: North Shore Elementary

Address: 3500 Oak Street NE City, Zip: St Petersburg 33704

Type: School (more than 9 months)

Owner: Pinellas County Schools-Food Service Area IV

Person In Charge: Lakeesha Garrett Phone: (727) 893-2181

PIC Email: GarrettLa@pcsb.org

Inspection Information

Begin Time: 12:45 PM Purpose: Routine Number of Risk Factors (Items 1-29): 1 Inspection Date: 12/9/2019 End Time: 01:30 PM Number of Repeat Violations (1-57 R): 0

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
- N 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**
- 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
- **OUT** 10. Handwashing sinks, accessible & supplies APPROVED SOURCE
 - IN 11. Food obtained from approved source
 - N 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

- 18. Cooking time & temperatures
- IN 19. Reheating procedures for hot holding
- NO 20. Cooling time and temperature
- **IN** 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 SÚSCEPTIBLE 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
 - APPROVED PROCEDURES
- NA 29. Variance/specialized process/HACCP

Inspector Signature: Dath Mil

Client Signature: hrenets

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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

IN 34. Plant food properly cooked for hot holding

IN 35. Approved thawing methods

IN 36. Thermometers provided & accurate

FOOD IDENTIFICATION

N 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

N 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

OUT 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

51. Plumbing installed; proper backflow devices

IN 52. Sewage & waste water properly disposed

IN 53. Toilet facilities: supplied, & cleanedIN 54. Garbage & refuse disposal

IN 55. Facilities installed, maintained, & clean

N 55. Facilities installed, maintained, & cl

N 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 #10. Handwashing sinks, accessible & supplies

Water at handwash sink unable to reach 100F. Observed 90F at both handwash sinks in kitchen, 85F in employee restroom. Water temperature at prep sink and 3-compartment sinks are only reaching 90F. Maintenance states water heater set at 90F, will correct to 100F.

Violation #48. Ware washing: installed, maintained, & used; test strips

Inline thermometer in warewashing machine for final hot water sanitizer not operating. Manager states work order alreaady placed. Machine observed to properly sanitizing, achieving 164F on plate surface.

General Comments

Notes:Zn 04, HWS-90F/90F, Food Temps-HH hamburger165F, chicken nugget 155F; RIC milk 41F, RIC2 cheese 39F; WIC milk 39F, WIF food frozen, Equip-3CS 300ppm Quat, HTDM 160F wash/ rinse gauge broken, 164F plate temp using DOH & PCSB tester, Quat test strips ok, Fire Extinguisher tagged-09/19, Hood/Ansul tagged-11/19

CPFM-school employee- Lakeesha Garrett ServSafe 17450108 x02/2014, Employee Training documentation-ok, Employee Health-signs posted.

Email Address(es): GarrettLa@pcsb.org; pohlmanp@pcsb.org

Inspector Signature:

Client Signature:

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Inspection Conducted By: AnaMaria Martin (54209) Inspector Contact Number: Work: (727) 275-6509 ex.

Print Client Name: Date: 12/9/2019

Inspector Signature:

DoM. M.L.

Client Signature:

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