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



**RESULT: Satisfactory Facility Information** 

Permit Number: 52-48-03472

Name of Facility: Cornerstone Christian School

Address: 317 Milwaukee Avenue

City, Zip: Dunedin 34698

Type: School (more than 9 months)

Owner: Cornerstone Christian Center of Clearwater Inc

Person In Charge: Wyns, Maureen Phone: (727) 733-1438

PIC Email: wyns.cornerstone@gmail.com

## **Inspection Information**

Number of Risk Factors (Items 1-29): 1 Begin Time: 01:15 PM Purpose: Routine Inspection Date: 8/12/2025 End Time: 02:00 PM Number of Repeat Violations (1-57 R): 0

Correct By: None 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
- 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
- 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
- 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

# PROTECTION FROM CONTAMINATION

IN 15. Food separated & protected; Single-use gloves

- **OUT** 16. Food-contact surfaces; cleaned & sanitized (COS)
- NO 17. Proper disposal of unsafe food

# TIME/TEMPERATURE CONTROL FOR SAFETY

- 18. Cooking time & temperatures
- NA 19. Reheating procedures for hot holding
- NA 20. Cooling time and temperature
- NA 21. Hot holding temperatures
- N 22. Cold holding temperatures
- IN 23. Date marking and disposition
- NA 24. Time as PHC; procedures & records
- CONSUMER ADVISORY

**Client Signature:** 

- 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
- 28. Toxic substances identified, stored, & used
  - APPROVED PROCEDURES

NA 29. Variance/specialized process/HACCP

**Inspector Signature:** 

Form Number: DH 4023 03/18

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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

N 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

N 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

IN 43. In-use utensils: properly stored

IN 44. Equipment & linens: stored, dried, & handled

IN 45. Single-use/single-service articles: stored & used

IN 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

N 51. Plumbing installed; proper backflow devices

IN 52. Sewage & waste water properly disposed

N 53. Toilet facilities: supplied, & cleaned N 54. Garbage & refuse disposal

IN 55. Facilities installed, maintained, & clean

N 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 #16. Food-contact surfaces: cleaned & sanitized

Dirty microwave used to cook/reheat food. Observed a dirty microwave at time of inspection. (Corrected on site) This was washed as inspection took place.

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

### **General Comments**

Notes: HWS 100F, 2DRIC (Atosa) juice 39F, freezer chest frozen, 92FC, 3CS not set up CL, FE 06/2025.

Food is catered by Curtis Fundamental Elementary School. No food preparation occurs at this facility.

Email Address(es): wyns.cornerstone@gmail.com;

PERRONEC@pcsb.org; walkerdu@pcsb.org;

Inspection Conducted By: Javier Torres Navarro (29180) Inspector Contact Number: Work: (727) 275-6475 ex.

Print Client Name: Maureen Wyns

Date: 8/12/2025

**Inspector Signature:** 

Form Number: DH 4023 03/18

Marrenhyna

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