Facility Information

Permit Number: 52-48-02270
Name of Facility: Campbell Park Elementary
Address: 1051 7th Avenue S
City, Zip: St Petersburg 33705

Type: School (more than 9 months)
Owner: Pinellas County Schools-Food Service Area V
Person In Charge: Young-Parker, Kathleen          Phone: (727) 893-2650
PIC Email: young-parkerk@pcsb.org

RESULT: Satisfactory

Inspection Information

Purpose: Routine
Inspection Date: 5/12/2023
Correct By: None
Re-Inspection Date: None

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

Begin Time: 10:15 AM
End Time: 11:00 AM

Food Borne Illness Risk Factors And Public Health Interventions

SUPERVISION
IN 1. Demonstration of Knowledge/Training
IN 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
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
NA 25. Advisory for raw/undercooked food

HIGHLY SUSCEPTIBLE POPULATIONS
NA 26. Pasteurized foods used; No prohibited foods

ADDITIVES AND TOXIC SUBSTANCES
IN 27. Food additives: approved & properly used
IN 28. Toxic substances identified, stored, & used

APPROVED PROCEDURES
NA 29. Variance/specialized process/HACCP

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

Inspector Signature:  
Client Signature:  

Form Number: DH 4023   03/18   52-48-02270   Campbell Park Elementary  

1 of 2
### Good Retail Practices

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

No Violation Comments Available

### General Comments

No violations at time of inspection


Email Address(es): baudern@pcsb.org; mahoneybria@pcsb.org; young-parkerk@pcsb.org

### Inspection Conducted

Inspection Conducted By: Ryan MacQueen  (54983)
Inspector Contact Number: Work: (727) 275-6506 ex.
Print Client Name: Nancy Bauder
Date: 5/12/2023

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Inspector Signature: [Signature]
Client Signature: [Signature]

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