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



Facility Information RESULT: Satisfactory

Permit Number: 27-48-00030

Name of Facility: Westside Elementary School

Address: 5400 Applegate Drive City, Zip: Spring Hill 34606

Type: School (more than 9 months) Owner: Hernando County School Board

Person In Charge: Vairo, Julie [Manager - Home - (352) 797-7040] Phone: (352) 797-7040

PIC Email: lawson_m@hcsb.k12.fl.us

Inspection Information

Purpose: Routine Number of Risk Factors (Items 1-29): 1 Begin Time: 09:15 AM Inspection Date: 10/23/2019 Number of Repeat Violations (1-57 R): 0 End Time: 10:15 AM

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
- 2. Certified Manager/Person in charge present EMPLOYEE HEALTH
- IN 3. Knowledge, responsibilities and reporting
- **IN** 4. Proper use of restriction and exclusion
- S. Responding to vomiting & diarrheal events GOOD HYGIENIC PRACTICES
- N 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
- 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
- N 21. Hot holding temperatures
- OUT 22. Cold holding temperatures (COS)
 - N 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
- N 28. Toxic substances identified, stored, & used
 - APPROVED PROCEDURES
- NA 29. Variance/specialized process/HACCP

Inspector Signature:

Sh Inti

Client Signature:

X Tansle Morney

Form Number: DH 4023 03/18 27-48-00030 Westside Elementary School

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

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

N 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

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

NA 46. Slash resistant/cloth gloves used properly

UTENSILS, EQUIPMENT AND VENDING

IN 47. Food & non-food contact surfaces

N 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, & cleanedIN 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 #22. Cold holding temperatures

Observed chicken bite salad at 48 degrees on Line and 46 degrees in refrigerator. Manager disposed of salad and created work order to inspect refrigerator. (CORRECTED)

CODE REFERENCE: 64E-11.003(2). PHF/TCS foods, which are held cold, and not subject to an approved HACCP plan, must be maintained at 41°F.

Inspector Signature:

St St.

Form Number: DH 4023 03/18

Client Signature:

X Tarsle Morrogo

27-48-00030 Westside Elementary School

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



General Comments

Breakfast service ended and Lunch prep beginning

Line

chocolate milk 38

chicken bite salad 48. Placed on line 10 minutes ago

Pass thru cooler hard boiled egg 42 apple slices 40 milk 40

tater tots 44. Placed in cooler 10 minutes ago

Pass thru warmer backed chicken 156 cornbread 141 waffle fries 141

Refrigerator

peanut butter and jelly 43 chicken bites 46. Manager disposed of food.

Walk-in cooler milk 34 sliced cheese 31 pizza 31 taquitos 40

Email Address(es): lawson_m@hcsb.k12.fl.us;

vairo_j@hcsb.k12.fl.us

Inspection Conducted By: Shawn Sombutmai (49765) Inspector Contact Number: Work: (352) 540-6800 ex.

Print Client Name: Julie Date: 10/23/2019

Inspector Signature:

She Show

Client Signature:

X Tansle Mohrops