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



RESULT: Satisfactory **Facility Information**

Permit Number: 06-48-00628

Name of Facility: Plantation High School

Address: 6901 NW 16 Street City, Zip: Plantation 33313

Type: School (more than 9 months)

Owner: Broward County School Board - Food & Nutrition Services Person In Charge: Dahlia Smth Phone: (754) 322-1860

PIC Email: dahlia.smith@browardschools.com

Inspection Information

Purpose: Routine Number of Risk Factors (Items 1-29): 0 Begin Time: 12:46 PM Inspection Date: 7/10/2024 End Time: 01:19 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
- 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

- 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
- NO 20. Cooling time and temperature
- NO 21. Hot holding temperatures
- NO 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:

Client Signature: Odhunk

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Good Retail Practices

SAFE FOOD AND WATER

NO 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

NO 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

NO 41. Wiping cloths: properly used & stored

NO 42. Washing fruits & vegetables

PROPER USE OF UTENSILS

IN 43. In-use utensils: properly stored

NO 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 NO 47. Food & non-food contact surfaces

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

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

| S4. Garbage & refuse disposal | S5. Facilities installed, maintained, & clean

OUT 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 #56. Ventilation & lighting

OBSERVED LIGHT COVER BROKEN, HOLE SEEN IN MEN'S LOCKER ROOM. REPLACE/REPAIR LIGHT COVER. WORK ORDER # 950347 WAS PLACED AT TIME OF INSPECTION.

CODE REFERENCE: 64E-11.003(6)(a). Adequate exhaust ventilation hood systems in food prep and warewashing areas shall be provided and designed. 50 foot candles shall be at surfaces where employees work with food and 20 foot candles shall be at surfaces where food is provided to consumers.

Inspector Signature:

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Oddure:

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General Comments

SATISFACTORY INSPECTION.

HOT WATER:
-HAND SINK: 104F
-3 COMP SINK: 121F
-PREP SINK: 119F
-RESTROOMS: 105F, 103F
-MOP SINK: 112F

EQUIPMENT:

-REACH-IN REFRIGERATORS: 32F -REACH-IN FREEZER: -4F -WALK-IN REFRIGERATOR: 37F -MILK COOLER: 30F, 32F -WALK-IN FREEZER: -4F

SANITIZER:

-3 COMP SINK WAS NOT SET UP AT TIME OF INSPECTION. *QAC TEST KIT OBSERVED.

CERTIFIED FOOD MANAGER/EMPLOYEE TRAINING EMPLOYEE FOOD SAFETY TRAINING/EMPLOYEE HEALTH POLICY TRAINING COMPLETED ON 3/21/2024

PROBE FOOD THERMOMETER
THERMOMETER CALIBRATED AT 32.1F

THERMOMETER CALIBRATED AT 32.11

PEST CONTROL FACILITY MUST IMPLEMENT AN INTEGRATED PEST MANAGEMENT PLAN. PEST CONTROL SERVICE PROVIDED BY BEACH ENVIRONMENTAL.

NON-SERVICE ANIMALS NO DOGS OR NON-SERVICE ANIMALS ALLOWED INSIDE ESTABLISHMENT.

 $\label{lem:email} Email\ Address(es): dahlia.smith@browardschools.com$

Inspection Conducted By: Amythest Rawls (54900) Inspector Contact Number: Work: (954) 412-7319 ex.

Print Client Name: Date: 7/10/2024

Inspector Signature:

Client Signature:

XPP

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