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



## **Facility Information**

#### **RESULT: Satisfactory**

Permit Number: 27-48-00037 Name of Facility: Brooksville Elementary School Address: 885 N Broad Street City, Zip: Brooksville 34601

Type: School (more than 9 months) Owner: Hernando County School Board Person In Charge: Ward, William Phone: (352) 797-7028 PIC Email: sapp\_m@hcsb.k12.fl.us

#### **Inspection Information**

Purpose: Routine Inspection Date: 4/5/2023 Correct By: None **Re-Inspection Date: None**  Number of Risk Factors (Items 1-29): 0 Number of Repeat Violations (1-57 R): 0 FacilityGrade: N/A StopSale: No Begin Time: 09:01 AM End Time: 09:15 AM

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
- N 5. Responding to vomiting & diarrheal events GOOD HYGIENIC PRACTICES
- 6. Proper eating, tasting, drinking, or tobacco use
- No discharge from eyes, nose, and mouth PREVENTING CONTAMINATION BY HANDS
- N 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
- IN 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
- NO 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
- N 23. Date marking and disposition
- 20. Date marking and disposition
  21. Time as PHC; procedures & records
  CONSUMER ADVISORY
- N 25. Advisory for raw/undercooked food HIGHLY SUSCEPTIBLE POPULATIONS
- No prohibited 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:				Client Signature:	
KR.				marlon	Sept
Form Number: DH 4023	03/18	27-48-00037	Brooksville 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
- N 36. Thermometers provided & accurate FOOD IDENTIFICATION
- 37. Food properly labeled; original container IN 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**
- N 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
- IN 51. Plumbing installed; proper backflow devices
- IN 52. Sewage & waste water properly disposed
- N 53. Toilet facilities: supplied, & cleaned
- IN 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**

No Violation Comments Available

#### **General Comments**

Observed fridge at 39F. Observed freezer at -2. No food prep at time of inspection.

Email Address(es): sapp\_m@hcsb.k12.fl.us; ward\_w@hcsb.k12.fl.us

Inspection Conducted By: Kiana Ramos (082870) Inspector Contact Number: Work: (352) 540-6800 ex. Print Client Name: Marlan Date: 4/5/2023

Inspector Signature:			Client Signature:
KR			mailon Sope
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