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



**Facility Information** 

Permit Number: 27-48-00036

Name of Facility: Deltona Elementary School

Address: 2055 Deltona Boulevard City, Zip: Spring Hill 34606

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

Person In Charge: Vairo, Julie Phone: (352) 797-7028

PIC Email: vairo\_j@hcsb.k12.fl.us

**Inspection Information** 

Begin Time: 09:15 AM Purpose: Routine Number of Risk Factors (Items 1-29): 0 Inspection Date: 10/6/2023 End Time: 09:46 AM 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
- 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
- N 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

**RESULT:** Satisfactory

- 18. Cooking time & temperatures
- NO 19. Reheating procedures for hot holding
- NO 20. Cooling time and temperature
- NO 21. Hot holding temperatures
- N 22. Cold holding temperatures
- IN 23. Date marking and disposition
- NA 24. Time as PHC; procedures & records

# **CONSUMER ADVISORY**

- IN 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:** 

Form Number: DH 4023 03/18 27-48-00036 Deltona Elementary School

**Client Signature:** wolvers

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# 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

NA 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

**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

NA 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

51. Plumbing installed; proper backflow devices

IN 52. Sewage & waste water properly disposed

IN 53. Toilet facilities: supplied, & cleanedIN 54. Garbage & refuse disposal

N 55. Facilities installed, maintained, & clean

N 56. Ventilation & lighting

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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 walk in cooler at 34F and freezer at 8F. Observed cold holding at 34F. Observed sanitizer at 200ppm. No violations at time of inspection. Updated inspection.

Email Address(es): vairo\_j@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: emailed

Date: 10/6/2023

**Inspector Signature:** 

Client Signature:

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