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



Facility Information RESULT: Satisfactory

Permit Number: 51-48-00191 Name of Facility: Gulf High School Address: 5355 School Road City, Zip: New Port Richey 34652

Type: School (9 months or less)
Owner: Pasco County School Board

Person In Charge: Herzek, Margaret Phone: (727) 842-8485 PIC Email: mherzek@pasco.k12.fl.us

Inspection Information

Purpose: Routine Number of Risk Factors (Items 1-29): 0 Begin Time: 09:30 AM Inspection Date: 5/28/2019 Number of Repeat Violations (1-57 R): 0 End Time: 10:10 AM

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
- 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
- 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

- NO 18. Cooking time & temperatures
- IN 19. Reheating procedures for hot holding
- NO 20. Cooling time and temperature
- N 21. Hot holding temperatures
- N 22. Cold holding temperatures
- N 23. Date marking and disposition
- NA 24. Time as PHC; procedures & records
- CONSUMER ADVISORY
- NA 25. Advisory for raw/undercooked food
 - HIGHLY SUSCEPTIBLE POPULATIONS
- N 26. Pasteurized foods used; No prohibited foods
 - ADDITIVES AND TOXIC SUBSTANCES
- NA 27. Food additives: approved & properly used
- N 28. Toxic substances identified, stored, & used
 - APPROVED PROCEDURES
- NA 29. Variance/specialized process/HACCP

Inspector Signature:

Form Number: DH 4023 03/18

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51-48-00191 Gulf High School

Client Signature:

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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

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

IN 37. Food properly labeled; original container

PREVENTION OF FOOD CONTAMINATION

N 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

NO 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

N 51. Plumbing installed; proper backflow devices

No. 52. Sewage & waste water properly disposed

IN 53. Toilet facilities: supplied, & cleaned

IN 54. Garbage & refuse disposal OUT 55. Facilities installed, maintained, & clean

IN 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 #55. Facilities installed, maintained, & clean

Observed tiles in dry storage area with holes and some were misplaced in ceiling. Please replace tiles that have holes and make sure tiles fit into ceiling properly

Observed paint throughout dry storage peeling. Please repaint walls so that they are smooth and easily cleanable.

CODE REFERENCE: 64E-11.003(5). Floors, walls, and ceilings shall be smooth, durable, easily cleanable, and non-absorbent. Exterior areas shall be kept cleaned.

General Comments

Satisfactory at time of inspection.
No food service. Food prep/holding only.
Sanitizer 200 ppm- 3 CS, 300 ppm- buckets.
All RIC/RIF and WIC/WIF at proper temps.

Observed temps: Corn dog/warmer: 160F Hamburger/warmer: 155F Deli sandwich/RIC: 41F

Email Address(es): bburgess@pasco.k12.fl.us;

mherzek@pasco.k12.fl.us; spawelek@pasco.k12.fl.us

Inspector Signature:

Recent -

Client Signature:

Form Number: DH 4023 03/18 51-48-00191 Gulf High School

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



Inspection Conducted By: Alicia Steiert (85862) Inspector Contact Number: Work: (352) 521-1450 ex. 6164

Print Client Name: Date: 5/28/2019

Inspector Signature:

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Form Number: DH 4023 03/18

Client Signature: asput

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