#### STATE OF FLORIDA DEPARTMENT OF HEALTH COUNTY HEALTH DEPARTMENT PUBLIC SCHOOL INSPECTION REPORT



1 of 2

# **Facility Information**

Permit Number: 51-51-01915 Name of Facility: Paul R Smith Middle School Address: 1410 Sweetbriar Drive City, Zip: Holiday 34691

Type: Public Schools Owner: Pasco County School Board Person In Charge: Mike Quintal PIC Email: mguintal@pasco.k12.fl.us

#### **Inspection Information**

Purpose: Routine Inspection Date: 5/10/2019

# **Additional Information**

FEMALES ..... 500 MALES ..... 500

This form serves as a "Notice of Non-Compliance" pursuant to section 120.695, Florida Statutes. Items marked below violate one or more of the requirements of Rule 6A-2.0010, of the Florida Administrative Code, Chapter 5, section 5 of the State Requirements for Educational Facilities 2014 (SREF); and sections 453 and 468 of the Florida Building Code 6th Edition (2017). 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.

### **Violation Markings**

SCHOOL SANITATION	IN 11. Group Toilet Rooms	N 21. Pest Control
IN 1. School Site	IN 12. Toilet Facilities	SAFETY
N 2. Playground, Equip & Athletic Fields*	IN 13. Handwashing Facilities	N 22. First Aid Kit
IN 3. Athletic & Playground Equipment	IN 14. Soap Dispensers	DIAPER CHANGING STATION
BUILDING CONST/MAINT.	NA 15. Shower Facilities	NA 23. Sanitizers
N 4. Construction	NA 16. Showers Water Temperatures	NA 24. Changing Station & Mats
IN 5. Maintenance & Repair	WATER SUPPLY	NA 25. Hand Sink
IN 6. Lighting Standards	IN 17. Approved Source	NA 26. Garbage Can
IN 7. Heating, Ventilation, A/C Standards	IN 18. Drinking Fountains	ANIMAL HEALTH & SAFETY
IN 8. Natural Ventilation	LIQUID WASTE & WASTE WATER	NA 27. Animal Maintenance/Aggressive
IN 9. Mechanical Ventilation	IN 19. Sewage Disposal	DORM/RESIDENTIAL FACILITIES
SANITARY FACILITIES	IN 20. Solid Waste	NA 28. Maintenance/Complaint
IN 10. Provided/Accessible/Separation	PEST CONTROL	NA 29. Other

Marking Key: IN = the act or item was observed to meet standards; OUT = the act or item was observed not to meet standards; NO = the act or item was not observed to be occuring at the time of inspection; NA = the act or item is not performed by the facility or not part of the operation

Violation Key: \* = 2. Playground, Equipment & Athletic Fields

**Inspector Signature:** 

**Client Signature:** 

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Form Number: DH 4030 12/16A

51-51-01915 Paul R Smith Middle School

**RESULT:** Satisfactory

Correct By: None Re-Inspection Date: None

Begin Time: 09:50 AM End Time: 10:15 AM

CENSUS ..... 1000

#### **STATE OF FLORIDA DEPARTMENT OF HEALTH COUNTY HEALTH DEPARTMENT PUBLIC SCHOOL INSPECTION REPORT**



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# **General Comments**

Satisfactory at time of inspection. No violations observed. Escorted throughout the facility.

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

# **Violations Comments**

No Violation Comments Available

Inspection Conducted By: Alicia Steiert (85862) Inspector Contact Number: Work: (352) 521-1450 ex. 6164 Print Client Name: Date: 5/10/2019

**Inspector Signature:** 

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**Client Signature:** 

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Form Number: DH 4030 12/16A 51-51-01915 Paul R Smith Middle School