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



**RESULT:** Satisfactory **Facility Information** 

Permit Number: 51-48-1372208

Name of Facility: Pasco Middle School Indoor Concession (Level 2)

Address: 13925 14th Street City, Zip: Dade City 33525

Type: School (9 months or less)

Owner: District School Board of Pasco County

Person In Charge: Michael Korst Phone: (813) 794-2000

PIC Email: mkorst@pasco.k12.fl.us

**Inspection Information** 

Number of Risk Factors (Items 1-29): 0 Purpose: Routine Begin Time: 10:15 AM Inspection Date: 5/11/2021 Number of Repeat Violations (1-57 R): 0 End Time: 10:30 AM

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

NA 2. Certified Manager/Person in charge present **EMPLOYEE HEALTH** 

IN 3. Knowledge, responsibilities and reporting

IN 4. Proper use of restriction and exclusion

IN 5. Responding to vomiting & diarrheal events **GOOD HYGIENIC PRACTICES** 

NO 6. Proper eating, tasting, drinking, or tobacco use

NO 7. No discharge from eyes, nose, and mouth PREVENTING CONTAMINATION BY HANDS

NO 8. Hands clean & properly washed

NO 9. 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

NO 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

NO 23. Date marking and disposition

NA 24. Time as PHČ; 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** 

NA 27. Food additives: approved & properly used

28. Toxic substances identified, stored, & used

APPROVED PROCEDURES

NA 29. Variance/specialized process/HACCP

**Inspector Signature:** Al Deret

**Client Signature:** 

(pres of Harrin

Form Number: DH 4023 03/18 51-48-1372208 Pasco Middle School Indoor Concession (Level 2)

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



## **Good Retail Practices**

#### SAFE FOOD AND WATER

NA 30. Pasteurized eggs used where required

N 31. Water & ice from approved source

NA 32. Variance obtained for special processing

#### FOOD TEMPERATURE CONTROL

NA 33. Proper cooling methods; adequate equipment

NA 34. Plant food properly cooked for hot holding

NA 35. Approved thawing methods

N 36. Thermometers provided & accurate

#### FOOD IDENTIFICATION

NO 37. Food properly labeled; original container

#### PREVENTION OF FOOD CONTAMINATION

IN 38. Insects, rodents, & animals not present

**IN** 39. No Contamination (preparation, storage, display)

NO 40. Personal cleanliness

NO 41. Wiping cloths: properly used & stored

NA 42. Washing fruits & vegetables

#### PROPER USE OF UTENSILS

NO 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

51. Plumbing installed; proper backflow devices

No. 52. Sewage & waste water properly disposed

N 53. Toilet facilities: supplied, & cleaned

N 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**

Satisfactory at time of inspection. Concession not open at time of inspection. RiC/RiF at propert temp. Paper towels and soap provided at handsink.

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

fnshelp@pasco.k12.fl.us; mwicks@pasco.k12.fl.us

Inspection Conducted By: Alicia Steiert (85862)

Inspector Contact Number: Work: (352) 521-1450 ex. 6164

Print Client Name: Date: 5/11/2021

Inspector Signature:

Al Deret

**Client Signature:** 

Jun of Havin

Form Number: DH 4023 03/18 51-48-1372208 Pasco Middle School Indoor Concession (Level 2)