

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



Facility Information

RESULT: Satisfactory

Permit Number: 51-48-2138056
 Name of Facility: Dayspring Academy Elementary - Jazz Campus
 Address: 7137 Jasmine Boulevard
 City, Zip: Port Richey 34668

Type: School (9 months or less)
 Owner: Creation Foundation Inc DBA Dayspring Academy
 Person In Charge: Creation Foundation Inc DBA Dayspring Academy Phone: (727) 238-5018
 PIC Email: c.gray@slamgmt.com

Inspection Information

Purpose: Routine	Number of Risk Factors (Items 1-29): 1	Begin Time: 12:35 PM
Inspection Date: 8/24/2021	Number of Repeat Violations (1-57 R): 0	End Time: 01:20 PM
Correct By: Next Inspection	Facility Grade: N/A	
Re-Inspection Date: None	Stop Sale: 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
- IN** 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

- IN** 6. Proper eating, tasting, drinking, or tobacco use
- IN** 7. No discharge from eyes, nose, and mouth

PREVENTING CONTAMINATION BY HANDS

- IN** 8. Hands clean & properly washed
- IN** 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
- NA** 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
- IN** 19. Reheating procedures for hot holding
- IN** 20. Cooling time and temperature
- IN** 21. Hot holding temperatures
- IN** 22. Cold holding temperatures
- IN** 23. Date marking and disposition
- NA** 24. Time as PHC; procedures & records

CONSUMER ADVISORY

- NA** 25. Advisory for raw/undercooked food

HIGHLY SUSCEPTIBLE POPULATIONS

- IN** 26. Pasteurized foods used; No prohibited foods

ADDITIVES AND TOXIC SUBSTANCES

- NA** 27. Food additives: approved & properly used
- OUT** 28. Toxic substances identified, stored, & used (**COS**)

APPROVED PROCEDURES

- NA** 29. Variance/specialized process/HACCP

Inspector Signature:

Alissa Antonucci

Client Signature:

CGHans

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Good Retail Practices

SAFE FOOD AND WATER	
NA 30. Pasteurized eggs used where required	NA 46. Slash resistant/cloth gloves used properly
IN 31. Water & ice from approved source	UTENSILS, EQUIPMENT AND VENDING
NA 32. Variance obtained for special processing	IN 47. Food & non-food contact surfaces
FOOD TEMPERATURE CONTROL	OUT 48. Ware washing: installed, maintained, & used; test strips (COS)
IN 33. Proper cooling methods; adequate equipment	IN 49. Non-food contact surfaces clean
NO 34. Plant food properly cooked for hot holding	PHYSICAL FACILITIES
IN 35. Approved thawing methods	IN 50. Hot & cold water available; adequate pressure
IN 36. Thermometers provided & accurate	IN 51. Plumbing installed; proper backflow devices
FOOD IDENTIFICATION	IN 52. Sewage & waste water properly disposed
IN 37. Food properly labeled; original container	IN 53. Toilet facilities: supplied, & cleaned
PREVENTION OF FOOD CONTAMINATION	IN 54. Garbage & refuse disposal
IN 38. Insects, rodents, & animals not present	IN 55. Facilities installed, maintained, & clean
IN 39. No Contamination (preparation, storage, display)	IN 56. Ventilation & lighting
OUT 40. Personal cleanliness	IN 57. Permit; Fees; Application; Plans
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	

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

<p>Violation #28. Toxic substances identified, stored, & used Store chemicals separate from and below food, equipment, utensils, linens, and single-service and single-use articles. Observed chemical spray bottle stored next to single service trays. Corrected on site.</p>
<p>Violation #40. Personal cleanliness Provide effective hair restraints as hats, hair coverings or nets and beard restraints to keep hair from contacting food, equipment, utensils, linens and unwrapped single-service items. Observed employee not wearing beard restraint.</p>
<p>Violation #48. Ware washing: installed, maintained, & used; test strips Set up 3-compartment sink to properly wash, rinse, and sanitize multi-use utensils. Observed middle compartment not filled with water to rinse multi-use utensils.</p>

General Comments

<p>Notes- HWS, X2 2D RIF: Frozen, X2 2D RIC: Sauce 40F & Cheese 40F, Milk Cooler: 40F, 3CS: Quat 300ppm, Quat Test Strips: OK, X2 HH Unit: Not in-use, Bathroom: OK.</p> <p>Email Address(es): l Watkins@dayspringacademy.org; spawelek@pasco.k12.fl.us; fnshelp@pasco.k12.fl.us; kkimble@pasco.k12.fl.us; tyoung@pasco.k12.fl.us; c.gray@slamgmt.com;</p>
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Inspector Signature:

Alessia Antonucci

Client Signature:

[Handwritten Signature]

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Inspection Conducted By: Alissa Antonucci (61970)
Inspector Contact Number: Work: (727) 841-4425 ex.
Print Client Name: Christina Gray
Date: 8/24/2021

Inspector Signature:

Alissa Antonucci

Client Signature:

Christina Gray

Form Number: DH 4023 03/18

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