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



RESULT: Satisfactory **Facility Information**

Permit Number: 51-48-00207

Name of Facility: Land O Lakes High School

Address: 20325 Gator Lane City, Zip: Land O Lakes 34639

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

Person In Charge: Zappe, Josh Phone: (813) 794-9478

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

Inspection Information

Purpose: Routine Number of Risk Factors (Items 1-29): 1 Begin Time: 07:45 AM Inspection Date: 10/8/2021 End Time: 08:45 AM Number of Repeat Violations (1-57 R): 0

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
- 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 **OUT** 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

- 18. Cooking time & temperatures
- IN 19. Reheating procedures for hot holding
- IN 20. Cooling time and temperature
- IN 21. Hot holding temperatures
- N 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 SÚSCEPTIBLE POPULATIONS
- NA 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:

artonucci

Client Signature:

Form Number: DH 4023 03/18 51-48-00207 Land O Lakes High School

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Good Retail Practices

SAFE FOOD AND WATER

NA 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

N 37. Food properly labeled; original container

PREVENTION OF FOOD CONTAMINATION

IN 38. Insects, rodents, & animals not present

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

N 40. Personal cleanliness

IN 41. Wiping cloths: properly used & stored

OUT 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

NA 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

IN 51. Plumbing installed; proper backflow devices

IN 52. Sewage & waste water properly disposed

IN 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

Violation #10. Handwashing sinks, accessible & supplies

Ensure all handwash sinks reach a minimum temperature of 100F. Observed two handwash sinks unable to reach 100F. Use other hand wash sinks until repaired.

Violation #42. Washing fruits & vegetables

Remove stickers from fruits. Observed stickers on apples that were ready for service.

General Comments

Notes- HWS: 84F-110F, X3 2D RIC: Cheese 38F, Sliced Melon 41F & Yogurt 40F, X4 Showcase Coolers: Drinks 38-40F, WIC: Cheese 36F, WIF: Frozen, X2 Milk Cooler: 38-40F, 2D Hot Holding Unit: Ambient 150F, X5 Hot Holding Units: Ambient 150-180F & Egg 135F, Ice Machine: OK, Quat Test Strips: OK, High Temp Test Disc: Plate Surface 167F, 3CS: Quat 300ppm, HTDM: Rinse 186F, Dry Storage: OK, Bathroom: OK, Laundry Room: OK. FMC: ServSafe Josh Zappe Cert # 18072981 Expires: 06/2024, FE: 01/2021.

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

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

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

jzappe@pasco.k12.fl.us

Inspector Signature:

Client Signature:

arise antonucci

Form Number: DH 4023 03/18 51-48-00207 Land O Lakes High School

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Inspection Conducted By: Alissa Antonucci (61970) Inspector Contact Number: Work: (727) 841-4425 ex.

Print Client Name: Josh Zappe

Date: 10/8/2021

Inspector Signature:

arise antonucci

Client Signature:

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