

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



Facility Information

RESULT: Satisfactory

Permit Number: 51-48-01566
 Name of Facility: Dr John Long Middle School
 Address: 2025 Mansfield Boulevard
 City, Zip: Wesley Chapel 33543

 Type: School (9 months or less)
 Owner: Pasco County School Board
 Person In Charge: Malone, Sherry Phone: (813) 346-6200
 PIC Email: smalone@pasco.k12.fl.us

Inspection Information

| | | |
|---------------------------------|---|----------------------|
| Purpose: Routine | Number of Risk Factors (Items 1-29): 0 | Begin Time: 11:15 AM |
| Inspection Date: 2/28/2022 | Number of Repeat Violations (1-57 R): 0 | End Time: 12:20 PM |
| Correct By: None | 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

- IN** 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
- IN** 28. Toxic substances identified, stored, & used

APPROVED PROCEDURES

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

Inspector Signature:

Client Signature:

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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
- NO 34. Plant food properly cooked for hot holding
- NO 35. Approved thawing methods
- NO 36. Thermometers provided & accurate

FOOD IDENTIFICATION

- IN 37. Food properly labeled; original container

PREVENTION OF FOOD CONTAMINATION

- IN 38. Insects, rodents, & animals not present
- IN 39. No Contamination (preparation, storage, display)
- IN 40. Personal cleanliness
- IN 41. Wiping cloths: properly used & stored
- IN 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

- IN 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
- IN 54. Garbage & refuse disposal
- IN 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

No Violation Comments Available

General Comments

Recommendation: code states that air conditioning systems shall be designed and installed so that make up air intake and exhaust vents do not cause contamination of food, food contact surfaces, equipment, or utensils. It is important to have adequate temperature in the kitchen to ensure proper ventilation if fans are not enough to keep proper ventilation of the kitchen.

Notes: HWS:100-109F, cold holding well veggy 41F, 2x show hot holding: Pizza 138-140F, 2x cold holding: salad 41F, orange 39F, 2x 2D hot holding unit: pizza 150F, pizza 137F, potatoes 140F, well hot holding: chicken 142F, cold holding: salad 41F, orange 40F, mop: ok, waffle 168F, sanitizing buckets: 200-300ppm x4, 3CS 300ppm, 2D RIC: 41F milk, milk cooler: 41F, 2x 2D hot holding: chicken 143F, pizza 170F, 2D RIC juice 37, WIC: milk 41F, WIF: frozen, dumpster: ok, servsafe manager present and certified, bathrooms: ok.

Email Address(es): kkimble@pasco.k12.fl.us;
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spawelek@pasco.k12.fl.us;
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Inspector Signature:

Client Signature:

Form Number: DH 4023 03/18

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Inspection Conducted By: David Becerrano (61970)
Inspector Contact Number: Work: (352) 521-1450 ex.
Print Client Name:
Date: 2/28/2022

Inspector Signature:

A handwritten signature in black ink, appearing to be "David Becerrano".

Client Signature:

A handwritten signature in black ink, appearing to be "Smalone".

Form Number: DH 4023 03/18

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