

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



**Facility Information**

**RESULT: Satisfactory**

Permit Number: 51-48-00210  
 Name of Facility: Sanders Memorial Elementary School  
 Address: 5126 School Road  
 City, Zip: Land O Lakes 34639  
  
 Type: School (9 months or less)  
 Owner: Pasco County School Board  
 Person In Charge: Ahearn, Adele Phone: (813) 794-1500  
 PIC Email: aahearn@pasco.k12.fl.us

**Inspection Information**

Purpose: Routine	Number of Risk Factors (Items 1-29): 0	Begin Time: 11:00 AM
Inspection Date: 5/4/2022	Number of Repeat Violations (1-57 R): 0	End Time: 12:00 PM
Correct By: Next Inspection	Facility Grade: N/A	
<b>Re-Inspection Date: None</b>	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

- IN** 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**

- IN** 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**

<p><b>SAFE FOOD AND WATER</b></p> <p><u>IN</u> 30. Pasteurized eggs used where required</p> <p><u>IN</u> 31. Water &amp; ice from approved source</p> <p><u>NA</u> 32. Variance obtained for special processing</p> <p><b>FOOD TEMPERATURE CONTROL</b></p> <p><u>IN</u> 33. Proper cooling methods; adequate equipment</p> <p><u>NO</u> 34. Plant food properly cooked for hot holding</p> <p><u>IN</u> 35. Approved thawing methods</p> <p><u>IN</u> 36. Thermometers provided &amp; accurate</p> <p><b>FOOD IDENTIFICATION</b></p> <p><u>IN</u> 37. Food properly labeled; original container</p> <p><b>PREVENTION OF FOOD CONTAMINATION</b></p> <p><u>IN</u> 38. Insects, rodents, &amp; animals not present</p> <p><u>IN</u> 39. No Contamination (preparation, storage, display)</p> <p><u>IN</u> 40. Personal cleanliness</p> <p><u>IN</u> 41. Wiping cloths: properly used &amp; stored</p> <p><u>NO</u> 42. Washing fruits &amp; vegetables</p> <p><b>PROPER USE OF UTENSILS</b></p> <p><u>IN</u> 43. In-use utensils: properly stored</p> <p><u>IN</u> 44. Equipment &amp; linens: stored, dried, &amp; handled</p> <p><u>IN</u> 45. Single-use/single-service articles: stored &amp; used</p>	<p><u>NA</u> 46. Slash resistant/cloth gloves used properly</p> <p><b>UTENSILS, EQUIPMENT AND VENDING</b></p> <p><u>OUT</u> 47. Food &amp; non-food contact surfaces</p> <p><u>IN</u> 48. Ware washing: installed, maintained, &amp; used; test strips</p> <p><u>IN</u> 49. Non-food contact surfaces clean</p> <p><b>PHYSICAL FACILITIES</b></p> <p><u>OUT</u> 50. Hot &amp; cold water available; adequate pressure (<b>COS</b>)</p> <p><u>IN</u> 51. Plumbing installed; proper backflow devices</p> <p><u>IN</u> 52. Sewage &amp; waste water properly disposed</p> <p><u>IN</u> 53. Toilet facilities: supplied, &amp; cleaned</p> <p><u>IN</u> 54. Garbage &amp; refuse disposal</p> <p><u>IN</u> 55. Facilities installed, maintained, &amp; clean</p> <p><u>IN</u> 56. Ventilation &amp; lighting</p> <p><u>IN</u> 57. Permit; Fees; Application; Plans</p>
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*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 #47. Food &amp; non-food contact surfaces Walk in cooler needs new gasket at door, torn. Replace.</p>
<p>CODE REFERENCE: 64E-11.003(4). Equipment and utensils must be properly designed, constructed, and in good repair.</p>
<p>Violation #50. Hot &amp; cold water available; adequate pressure Handsink by office that is most convenient for employees to wash hands is not working properly, hard to get running water &amp; flow is inadequate. Repair.</p>
<p>CODE REFERENCE: 64E-11.003(5)(a). The water source shall be of sufficient capacity to meet the peak hot and cold water demands of the establishment and provide water under pressure.</p>

Inspector Signature:

Client Signature:

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**General Comments**

Questions contact Angela.Midkiff@flhealth.gov

Notes: milk cooler milk 41F; Warmer unit chicken nuggets 145F; WIC & WIF OK.

Email Address(es): aahearn@pasco.k12.fl.us;  
fnshelp@pasco.k12.fl.us;  
kkimble@pasco.k12.fl.us;  
spawelek@pasco.k12.fl.us;  
psdavis@pasco.k12.fl.us

Inspection Conducted By: Angela Midkiff (45662)  
Inspector Contact Number: Work: (727) 484-3785 ex.  
Print Client Name:  
Date: 5/4/2022

Inspector Signature:

Handwritten signature of Angela Midkiff.

Client Signature:

Handwritten signature of the client.