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



RESULT: Satisfactory **Facility Information**

Permit Number: 51-48-1793173

Name of Facility: Classical Preparatory School Borealis Building

Address: 12836 Shady Hills Road

City, Zip: Spring Hill 34610

Type: School (9 months or less) Owner: Classical Prepatory Inc.

Person In Charge: Classical Prepatory Inc. Phone: (813) 803-7903

PIC Email: mferrante@classicalprep.org

Inspection Information

Purpose: Routine Number of Risk Factors (Items 1-29): 1 Begin Time: 09:10 AM Inspection Date: 12/18/2023 End Time: 09:55 AM Number of Repeat Violations (1-57 R): 1

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
- IN 10. Handwashing sinks, accessible & supplies APPROVED SOURCE
- IN 11. Food obtained from approved source
- N 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
- **OUT** 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
- IN 28. Toxic substances identified, stored, & used APPROVED PROCEDURES
- NA 29. Variance/specialized process/HACCP

Inspector Signature:

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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

IN 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

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)

OUT 40. Personal cleanliness (COS)

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

NA 46. Slash resistant/cloth gloves used properly

UTENSILS, EQUIPMENT AND VENDING
OUT 47. Food & non-food contact surfaces (R)

IN 48. Ware washing: installed, maintained, & used; test strips

OUT 49. Non-food contact surfaces clean

PHYSICAL FACILITIES

IN 50. Hot & cold water available; adequate pressure

N 51. Plumbing installed; proper backflow devices

IN 52. Sewage & waste water properly disposed

N 53. Toilet facilities: supplied, & cleaned

| 54. Garbage & refuse disposal | N 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 #23. Date marking and disposition

Discard TCS foods by manufacturer's use-by date. Observed hard boiled eggs use by date 10/16/2023. Discarded. Corrected on site.

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 a hair restraint. Corrected on site.

Violation #47. Food & non-food contact surfaces

Repair freezer. Observed ice build-up / condenstation leaking. Repeat violation.

Violation #49. Non-food contact surfaces clean

Clean hot holding wells. Observed debris build-up in hot holding wells.

Inspector Signature:

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Client Signature:

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General Comments

Notes- HWS: 106F, 2D RIC: Sliced Melon 42F, 2D RIC: Hard Boiled Egg 40F, X2 2D RIF: Frozen, Hot Holding Unit: Pulled Pork 135-137F, Hot Holding Well: Pulled Pork 135-140F and Baked Beans 150F, 1CS, 3CS: Quat 400ppm, Sanitizer Spray: Quat 300ppm.

Email Address(es): cbanks@pasco.k12.fl.us; psdavis@pasco.k12.fl.us; mferrante@classicalprep.org; fnshelp@pasco.k12.fl.us; kkimble@pasco.k12.fl.us; m.cook@slamgmt.com

Inspection Conducted By: Alissa Antonucci (00904) Inspector Contact Number: Work: (813) 455-9958 ex.

Print Client Name: Megan Cook

Date: 12/18/2023

Inspector Signature:

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Client Signature:

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