

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



Facility Information

RESULT: Satisfactory

Permit Number: 09-48-00041
Name of Facility: Floral City Elementary
Address: 8457 E Marvin Street
City, Zip: Floral City 34436

Type: School (more than 9 months)
Owner: Citrus County School Board
Person In Charge: Jacole Din Phone: (352) 726-6249
PIC Email:

Inspection Information

Purpose: Routine
Inspection Date: 9/13/2023
Correct By: Next Inspection
Re-Inspection Date: None

Number of Risk Factors (Items 1-29): 1
Number of Repeat Violations (1-57 R): 0
Facility Grade: N/A
Stop Sale: No

Begin Time: 11:00 AM
End Time: 12:30 PM

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
- NO** 19. Reheating procedures for hot holding
- NO** 20. Cooling time and temperature
- IN** 21. Hot holding temperatures
- OUT** 22. Cold holding temperatures (**COS**)
- IN** 23. Date marking and disposition
- IN** 24. Time as PHC; procedures & records

CONSUMER ADVISORY

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

HIGHLY SUSCEPTIBLE POPULATIONS

- NA** 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:

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



Good Retail Practices

SAFE FOOD AND WATER	
<u>NA</u> 30. Pasteurized eggs used where required	<u>NA</u> 46. Slash resistant/cloth gloves used properly
<u>IN</u> 31. Water & ice from approved source	UTENSILS, EQUIPMENT AND VENDING
<u>NA</u> 32. Variance obtained for special processing	<u>IN</u> 47. Food & non-food contact surfaces
FOOD TEMPERATURE CONTROL	<u>IN</u> 48. Ware washing: installed, maintained, & used; test strips
<u>IN</u> 33. Proper cooling methods; adequate equipment	<u>IN</u> 49. Non-food contact surfaces clean
<u>IN</u> 34. Plant food properly cooked for hot holding	PHYSICAL FACILITIES
<u>IN</u> 35. Approved thawing methods	<u>IN</u> 50. Hot & cold water available; adequate pressure
<u>IN</u> 36. Thermometers provided & accurate	<u>IN</u> 51. Plumbing installed; proper backflow devices
FOOD IDENTIFICATION	<u>IN</u> 52. Sewage & waste water properly disposed
<u>IN</u> 37. Food properly labeled; original container	<u>IN</u> 53. Toilet facilities: supplied, & cleaned
PREVENTION OF FOOD CONTAMINATION	<u>IN</u> 54. Garbage & refuse disposal
<u>IN</u> 38. Insects, rodents, & animals not present	<u>OUT</u> 55. Facilities installed, maintained, & clean
<u>OUT</u> 39. No Contamination (preparation, storage, display)	<u>IN</u> 56. Ventilation & lighting
<u>IN</u> 40. Personal cleanliness	<u>IN</u> 57. Permit; Fees; Application; Plans
<u>IN</u> 41. Wiping cloths: properly used & stored	
<u>NO</u> 42. Washing fruits & vegetables	
PROPER USE OF UTENSILS	
<u>IN</u> 43. In-use utensils: properly stored	
<u>IN</u> 44. Equipment & linens: stored, dried, & handled	
<u>IN</u> 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 #22. Cold holding temperatures Observed parfait, sliced cucumbers and milk in reach in upright cooler at 43F, 45F and 47F as well as milk in share cooler at 45F. Items held for cold holding must be kept at 41F or below. Items moved to freezer for quick cool and items in share cooler discarded. Corrective action taken. Cucumbers at 36F when temped again to be put out for service from freezer.</p> <p>CODE REFERENCE: 64E-11.003(2). PHF/TCS foods, which are held cold, and not subject to an approved HACCP plan, must be maintained at 41°F.</p>
<p>Violation #39. No Contamination (preparation, storage, display) Observed apples set out for self service on line that were not protected from contamination from student hands when grabbing for. Wrap apples to prevent contamination of the outside of apple (outside of apples are eaten, unlike orange or banana where peel removed-protective covering).</p> <p>Observed ice blankets and packs/panels stored on floor of freezer. Move ice blankets and packs/panels from floor to prevent contamination of food and surfaces that come in contact when ice blankets and packs/panels are used. Store at least 6 inches above floor in protected area.</p> <p>CODE REFERENCE: 64E-11.003(2). Food shall be protected from sources of contamination and stored in a clean, dry location at least 6 inches above the floor.</p>
<p>Violation #55. Facilities installed, maintained, & clean Observed floor of freezer underneath racks along wall of freezer that had a buildup of ice as well as icecicle underneath condenser unit. Remove ice from floor underneath racks and condenser. Ensure that food is not stored underneath icecicle to prevent possible contamination.</p> <p>CODE REFERENCE: 64E-11.003(5). Floors, walls, and ceilings shall be smooth, durable, easily cleanable, and non-absorbent. Exterior areas shall be kept cleaned.</p>

Inspector Signature:

Client Signature:

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



General Comments

Satisfactory at time of inspection. Correct violations by next routine inspection.

Chicken chunks (from oven) 177F
Baken beans (on line, in well) 163F
Parfait (on countertop near line, in container of ice) bottom portion 37F, top portion 41F
Chicken chunks (on line, in well) 142F
Chicken chunks (upright reach in warmer) 152F
Milk (milk cooler) 38F
Sliced cucumbers (upright reach in cooler) 45F, moved to freezer-down to 36F-back on line
Milk (upright reach in cooler) 47F, moved to freezer
Parfait (upright reach in cooler) 43F, moved to freezer
Milk (share cooler) 41F, discarded
Milk (share cooler) 45F, discarded
Gravy (walk in cooler) 36F
Boiled eggs (walk in cooler) 40F

Sanitizer bucket (200ppm-quat), 3 compartment sink (300ppm-quat)

NOTE: AC appears to not be functioning. Hot and humid in kitchen area.

Email Address(es): dinj@citruschools.org;
terranoj@citruschools.org;
freiERG@citruschools.org;
jervisa2@citruschools.org;
watkinst@citruschools.org

Inspection Conducted By: Nichole Zarkowski (85193)
Inspector Contact Number: Work: (352) 513-6104 ex.
Print Client Name:
Date: 9/13/2023

Inspector Signature:

Handwritten signature of Nichole Zarkowski.

Client Signature:

Handwritten signature of the client.