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



Facility Information

RESULT: Satisfactory

Permit Number: 13-48-12758 Name of Facility: Snapper Creek Elementary/ Loc.# 5121 Address: 10151 SW 64 Street City, Zip: Miami 33173

Type: School (more than 9 months) Owner: MDCPS Person In Charge: Bibiana de Renzis Phone: 305 271-0333 PIC Email: bderenzis@dadeschools.net

Inspection Information

Purpose: Routine Inspection Date: 7/9/2024 Correct By: Next Inspection **Re-Inspection Date: None** Number of Risk Factors (Items 1-29): 0 Number of Repeat Violations (1-57 R): 0 FacilityGrade: N/A StopSale: No

Begin Time: 10:30 AM End Time: 11:15 AM

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
- 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
- T. 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
- IN 12. Food received at proper temperature
- IN 13. Food in good condition, safe, & unadulterated
- 14. Shellstock tags & parasite destruction NA

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
- 18. Cooking time & temperatures
- NO 19. Reheating procedures for hot holding
- NO 20. Cooling time and temperature
- IN 21. Hot holding temperatures
- IN 22. Cold holding temperatures
- IN 23. Date marking and disposition N 24. Time as PHČ; 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
- 28. Toxic substances identified, stored, & used IN APPROVED PROCEDURES
- NA 29. Variance/specialized process/HACCP

| Inspector Signature: | | | Client Signature: |
|----------------------|-------|-------------|--------------------------------------|
| Ma | | | B. |
| Form Number: DH 4023 | 03/18 | 13-48-12758 | Snapper Creek Elementary/ Loc.# 5121 |
| | | | |

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



Good Retail Practices

SAFE FOOD AND WATER

- IN 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
- IN 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)
- 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
- N 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
- N 48. Ware washing: installed, maintained, & used; test strips
- Non-food contact surfaces clean
- PHYSICAL FACILITIES
- IN 50. Hot & cold water available; adequate pressure
- N 51. Plumbing installed; proper backflow devices
- N 52. Sewage & waste water properly disposed
- N 53. Toilet facilities: supplied, & cleaned
- IN 54. Garbage & refuse disposal
- OUT 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

Violation #55. Facilities installed, maintained, & clean

At time of the inspection, was observed that some spots in kitchen are uneven and some tiles under refrigerator #3 are broken. Repair damaged floor in kitchen

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.

n a at a n Ciana at una

Client Signature:

Ð

Form Number: DH 4023 03/18

13-48-12758 Snapper Creek Elementary/ Loc.# 5121

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



General Comments

Note: Asian Chicken: 176.2 Warmer Rice: 189.4 oF- steam table Milk: 40 oF- milk box refrigerator Hot water: 117.5 oF- all sinks. Sanitizer: 300 ppm

Cooper digital thermometer used to measure food and water temperatures at time of inspection No violations observed.

Email Address(es): bderenzis@dadeschools.net

Inspection Conducted By: Maria Adrover (047452) Inspector Contact Number: Work: (305) 623-3500 ex. Print Client Name: Bibiana de Renzis Date: 7/9/2024

| nspector | Signature: |
|----------|------------|
|----------|------------|

Client Signature:

Ð

Ma

Form Number: DH 4023 03/18

13-48-12758 Snapper Creek Elementary/ Loc.# 5121