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



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Facility Information

Permit Number: 13-48-09263 Name of Facility: Miami Gardens Elem Address: 4444 NW 195 Street City, Zip: Carol City 33055

Type: School (more than 9 months) Owner: M-DCSB Food and Nutrition

Person In Charge: MDCSB-Food & Nutrition

RESULT: Satisfactory

Correct By: Next Inspec

Correct By: Next Inspection Re-Inspection Date: None

Inspection Information

Purpose: Routine Begin Time: 12:45 PM Inspection Date: 5/18/2018 End Time: 01:15 PM

Phone: (305) 625-5321

Additional Information

No Additional Information Available

Items marked below violate the requirements of Chapter 64E-11 of the Florida Administrative Code and must be corrected. Continued operation of this facility without making these corrections is a violation of Chapter 64E-11, Florida Administrative Code and Chapters 381 and 386, Florida Statutes. Violations must be corrected by the date and time indicated in the Results section above or an administrative fine or other legal action will be initiated.

Violation Markings

FOOD SUPPLIES

1. Sources, etc. FOOD PROTECTION

2. Stored temperature

3. No further cooking/Rapid cooling

4. Thawing

5. Raw fruits

6. Pork cooking

7. Poultry cooking

8. Other animal cooking

9. Least contact/Reheating

X 10. Food container

11. Buffet requirements

12. Self-service condiments

13. Reservice of food

14. Sneeze guards

15. Transportation of food

16. Poisonous/Toxic materials

PERSONNEL

17. Exclusion of personnel

18. Cleanliness

19. Tobacco use

20. Handwashing

21. Handling of dishware

EQUIPMENT/UTENSILS

22. Refrigeration facilities/Thermometers

23. Sinks

24. Ice storage/Counter-protector

25. Ventilation/Storage/Sufficient equipment

26. Dishwashing facilities

27. Design and fabrication

28. Installation and location

29. Cleanliness of equipment

30. Methods of washing

SANITARY FACILITIES AND CONTROLS

31. Water supply

32. Ice

33. Sewage

34. Plumbing

X 35. Toilet facilities

36. Handwashing facilities

37. Garbage disposal

38. Vermin control

OTHER FACILITIES AND OPERATIONS

X 39. Other facilities and operations

TEMPORARY FOOD SERVICE EVENTS

40. Temporary food service events

VENDING MACHINES

41. Vending machines

MANAGER CERTIFICATION

42. Manager certification

CERTIFICATES AND FEES

43. Certificates and fees

INSPECTION/ENFORCEMENT

44. Inspection/Enforcement

Inspector Signature:

Form Number: DH 4023 01/05

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Client Signature:

13-48-09263 Miami Gardens Elem

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General Comments

SATISFACTORY

Refrigertor temperature range 34F to 41F Hot water tempaerature at hand wash sink 120F

Email Address(es): martinezn@dadeschools.net;

nemoss@dadeschools.net

Violations Comments

Violation #10. Food container

Date mark leftover foods in refrigerator. Corrected during inspection.

CODE REFERENCE: Storage Containers. 64E-11.004(13)(14). Food storage containers shall be clean, covered, and marked with their contents. Refrigerated, ready-to-eat, potentially hazardous food prepared in the facility, must be marked with date of preparation, if held greater than 24 hours. Food must be stored six inches above the floor.

Violation #35. Toilet facilities

Provide cover for light fixture in toilet room.

CODE REFERENCE: Toilets. 64E-11.007(4). Toilet rooms will comply with the plumbing authority having jurisdiction. Toilet rooms will be vented, provided with toilet paper, well lighted, and have self-closing doors.

Violation #39. Other facilities and operations

Clean exhaust ventilation vents from accumulated dust in kitchen area and dining area.

Clean white deposits on floor next to ice maker.

Clean interior of light fixtures from dead insects.

CODE REFERENCE: Other Facilities. 64E-11.008. Floors, walls, and ceilings shall be smooth and washable. 20 foot candles of light shall be provided. Adequate ventilation shall be provided. A mop sink or garbage can wash down will be provided. No living quarter shall open to the facility. No live animals. Exterior area shall be kept clean.

Inspection Conducted By: Isaac Ofori (31113) Inspector Contact Number: Work: (305) 623-3500 ex. Print Client Name: Miami Gardens Elementary

Date: 5/18/2018

Inspector Signature:

Client Signature:

Form Number: DH 4023 01/05 13-48-09263 Miami Gardens Elem