

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



Facility Information

RESULT: Satisfactory

Permit Number: 64-48-00297
Name of Facility: Starke Elementary School
Address: 730 S Parsons Street
City, Zip: Deland 32720

Type: School (more than 9 months)
Owner: Volusia County School Board
Person In Charge: Ferraro, Veronica Phone: (386) 943-7950
PIC Email: vsferraro@volusia.k12.fl.us

Inspection Information

Purpose: Routine	Number of Risk Factors (Items 1-29): 1	Begin Time: 09:25 AM
Inspection Date: 4/23/2019	Number of Repeat Violations (1-57 R): 0	End Time: 10:15 AM
Correct By: Next Inspection	Facility Grade: N/A	
Re-Inspection Date: None	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

- OUT** 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
- IN** 22. Cold holding temperatures
- IN** 23. Date marking and disposition
- NA** 24. Time as PHC; procedures & records

CONSUMER ADVISORY

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

HIGHLY SUSCEPTIBLE 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:

Client Signature:

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Good Retail Practices

<p>SAFE FOOD AND WATER</p> <p><u>IN</u> 30. Pasteurized eggs used where required</p> <p><u>IN</u> 31. Water & ice from approved source</p> <p><u>IN</u> 32. Variance obtained for special processing</p> <p>FOOD TEMPERATURE CONTROL</p> <p><u>IN</u> 33. Proper cooling methods; adequate equipment</p> <p><u>IN</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 & accurate</p> <p>FOOD IDENTIFICATION</p> <p><u>IN</u> 37. Food properly labeled; original container</p> <p>PREVENTION OF FOOD CONTAMINATION</p> <p><u>IN</u> 38. Insects, rodents, & 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 & stored</p> <p><u>NO</u> 42. Washing fruits & vegetables</p> <p>PROPER USE OF UTENSILS</p> <p><u>IN</u> 43. In-use utensils: properly stored</p> <p><u>IN</u> 44. Equipment & linens: stored, dried, & handled</p> <p><u>IN</u> 45. Single-use/single-service articles: stored & used</p>	<p><u>NO</u> 46. Slash resistant/cloth gloves used properly</p> <p>UTENSILS, EQUIPMENT AND VENDING</p> <p><u>OUT</u> 47. Food & non-food contact surfaces</p> <p><u>IN</u> 48. Ware washing: installed, maintained, & used; test strips</p> <p><u>IN</u> 49. Non-food contact surfaces clean</p> <p>PHYSICAL FACILITIES</p> <p><u>IN</u> 50. Hot & cold water available; adequate pressure</p> <p><u>IN</u> 51. Plumbing installed; proper backflow devices</p> <p><u>IN</u> 52. Sewage & waste water properly disposed</p> <p><u>IN</u> 53. Toilet facilities: supplied, & cleaned</p> <p><u>IN</u> 54. Garbage & refuse disposal</p> <p><u>IN</u> 55. Facilities installed, maintained, & clean</p> <p><u>IN</u> 56. Ventilation & 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 #16. Food-contact surfaces; cleaned & sanitized Observed black residue on condensation plate for ice machine, clean and sanitize. CODE REFERENCE: 64E-11.003(2). Food shall only contact surfaces that are clean and sanitized.</p>
<p>Violation #47. Food & non-food contact surfaces Observed ice building up on door and door jamb of walk in freezer door, door strip preventing door from fully closing causing ice buildup. Repair or replace. CODE REFERENCE: 64E-11.003(4). Equipment and utensils must be properly designed, constructed, and in good repair.</p>

General Comments

<p>Note 1: Meatballs hot holding 180 degrees f. juice refrigeration 38 degrees f. carrots refrigeration 39 degrees f. milk milk unit 39 degrees f. milk walk in unit 37 degrees f.</p> <p>Refrigeration temperatures below 39 degrees f. , Freezer temperature -1 degrees f.</p> <p>Note 2: Sanitizer 3 c/s 200 ppm.</p> <p>Email Address(es): vsferrar@volusia.k12.fl.us</p>

Inspector Signature:

Client Signature:

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Inspection Conducted By: Denise Diaz (29647)
Inspector Contact Number: Work: (386) 736-5080 ex.
Print Client Name:
Date: 4/23/2019

Inspector Signature:

Handwritten signature of Denise Diaz in black ink.

Client Signature:

Handwritten signature of the client in black ink.