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



RESULT: Satisfactory **Facility Information**

Permit Number: 13-48-03099

Name of Facility: Coral Reef Elementary/ Loc.#1041

Address: 7955 SW 152 Street

City, Zip: Miami 33157

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

Person In Charge: Christina Guerra Phone: 305-235-9421

PIC Email: clmguerra@dadeschools.net

Inspection Information

Begin Time: 09:40 AM Purpose: Routine Number of Risk Factors (Items 1-29): 0 Inspection Date: 1/5/2021 Number of Repeat Violations (1-57 R): 0 End Time: 10:45 AM

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
- IN 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
- IN 23. Date marking and disposition
- NA 24. Time as PHC; 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
- N 27. Food additives: approved & properly used
- 28. Toxic substances identified, stored, & used
 - APPROVED PROCEDURES
- NA 29. Variance/specialized process/HACCP

Inspector Signature:

Form Number: DH 4023 03/18 13-48-03099 Coral Reef Elementary/ Loc.#1041

Client Signature:

Enail de Christina Guerra /1-5-241

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

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)

IN 40. Personal cleanliness

N 41. Wiping cloths: properly used & stored

IN 42. Washing fruits & vegetables

PROPER USE OF UTENSILS

IN 43. In-use utensils: properly stored

N 44. Equipment & linens: stored, dried, & handled

IN 45. Single-use/single-service articles: stored & used

IN 46. Slash resistant/cloth gloves used properly

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

IN 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

IN 52. Sewage & waste water properly disposed

N 53. Toilet facilities: supplied, & cleaned

| S4. Garbage & refuse disposal | S5. 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 #47. Food & non-food contact surfaces

-Replace broken door gaskets with black stains on reach-in refrigerator and freezer located in the laundry room. Notification number 10192245 was submitted.

CODE REFERENCE: 64E-11.003(4). Equipment and utensils must be properly designed, constructed, and in good repair.

Inspector Signature:

Form Number: DH 4023 03/18

Client Signature:

Enail d' Christina Guerra /1-5-221

13-48-03099 Coral Reef Elementary/ Loc.#1041

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



General Comments

Satisfactory

Temperature taken:

Hot water/Handwashing sink: 102°F

Refrigerator: 38-40°F

Freezer: 0°F

Hot holding

Cheese stick: 139°F Chicken pasta: 143°F Sweet potato fries: 141°F Chicken patty: 136°F

Cold holding Milk: 38°F

Inspection was conducted during the COVID-19 pandemic.

Email to: Christina Guerra/1-5-2021

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

clmguerra@dadeschools.net; jaybolton@dadeschools.net; jware@dadeschools.net; ipalacios@dadeschools.net

Inspection Conducted By: Lucia Gonzalez Melendez (913031)

Inspector Contact Number: Work: (305) 623-3500 ex.

Print Client Name: Coral Reef Elem

Date: 1/5/2021

Inspector Signature:

Form Number: DH 4023 03/18

Client Signature:

Enoil de Christina Guerra /1-5-241