

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



RESULT: Satisfactory

Facility Information

Permit Number: 53-48-02107
 Name of Facility: McKeel Elementary Academy
 Address: 411 N Florida Avenue
 City, Zip: Lakeland 33801

Type: School (more than 9 months)
 Owner: McKeel Elementary Academy
 Person In Charge: Juanita Salazar Phone: 863-680-2512
 PIC Email: MacCafeteria@mckeelschools.com

Inspection Information

Purpose: Routine	Number of Risk Factors (Items 1-29): 1	Begin Time: 12:43 PM
Inspection Date: 2/6/2020	Number of Repeat Violations (1-57 R): 0	End Time: 01:25 PM
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

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| <p>SUPERVISION</p> <p><u>IN</u> 1. Demonstration of Knowledge/Training</p> <p><u>IN</u> 2. Certified Manager/Person in charge present</p> <p>EMPLOYEE HEALTH</p> <p><u>IN</u> 3. Knowledge, responsibilities and reporting</p> <p><u>IN</u> 4. Proper use of restriction and exclusion</p> <p><u>IN</u> 5. Responding to vomiting & diarrheal events</p> <p>GOOD HYGIENIC PRACTICES</p> <p><u>IN</u> 6. Proper eating, tasting, drinking, or tobacco use</p> <p><u>IN</u> 7. No discharge from eyes, nose, and mouth</p> <p>PREVENTING CONTAMINATION BY HANDS</p> <p><u>IN</u> 8. Hands clean & properly washed</p> <p><u>IN</u> 9. No bare hand contact with RTE food</p> <p><u>IN</u> 10. Handwashing sinks, accessible & supplies</p> <p>APPROVED SOURCE</p> <p><u>IN</u> 11. Food obtained from approved source</p> <p><u>NO</u> 12. Food received at proper temperature</p> <p><u>IN</u> 13. Food in good condition, safe, & unadulterated</p> <p><u>NA</u> 14. Shellstock tags & parasite destruction</p> <p>PROTECTION FROM CONTAMINATION</p> <p><u>IN</u> 15. Food separated & protected; Single-use gloves</p> | <p><u>IN</u> 16. Food-contact surfaces; cleaned & sanitized</p> <p><u>NO</u> 17. Proper disposal of unsafe food</p> <p>TIME/TEMPERATURE CONTROL FOR SAFETY</p> <p><u>NO</u> 18. Cooking time & temperatures</p> <p><u>NO</u> 19. Reheating procedures for hot holding</p> <p><u>NO</u> 20. Cooling time and temperature</p> <p><u>NO</u> 21. Hot holding temperatures</p> <p><u>OUT</u> 22. Cold holding temperatures</p> <p><u>IN</u> 23. Date marking and disposition</p> <p><u>NA</u> 24. Time as PHC; procedures & records</p> <p>CONSUMER ADVISORY</p> <p><u>NA</u> 25. Advisory for raw/undercooked food</p> <p>HIGHLY SUSCEPTIBLE POPULATIONS</p> <p><u>IN</u> 26. Pasteurized foods used; No prohibited foods</p> <p>ADDITIVES AND TOXIC SUBSTANCES</p> <p><u>IN</u> 27. Food additives: approved & properly used</p> <p><u>IN</u> 28. Toxic substances identified, stored, & used</p> <p>APPROVED PROCEDURES</p> <p><u>NA</u> 29. Variance/specialized process/HACCP</p> |
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Inspector Signature:

Client Signature:

Form Number: DH 4023 03/18

53-48-02107 McKeel Elementary Academy

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Good Retail Practices

<p>SAFE FOOD AND WATER <u>NO</u> 30. Pasteurized eggs used where required <u>IN</u> 31. Water & ice from approved source <u>NA</u> 32. Variance obtained for special processing</p> <p>FOOD TEMPERATURE CONTROL <u>NO</u> 33. Proper cooling methods; adequate equipment <u>NO</u> 34. Plant food properly cooked for hot holding <u>IN</u> 35. Approved thawing methods <u>IN</u> 36. Thermometers provided & accurate</p> <p>FOOD IDENTIFICATION <u>IN</u> 37. Food properly labeled; original container</p> <p>PREVENTION OF FOOD CONTAMINATION <u>IN</u> 38. Insects, rodents, & animals not present <u>IN</u> 39. No Contamination (preparation, storage, display) <u>IN</u> 40. Personal cleanliness <u>NO</u> 41. Wiping cloths: properly used & stored <u>NO</u> 42. Washing fruits & vegetables</p> <p>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</p>	<p><u>NO</u> 46. Slash resistant/cloth gloves used properly</p> <p>UTENSILS, EQUIPMENT AND VENDING <u>IN</u> 47. Food & non-food contact surfaces <u>IN</u> 48. Ware washing: installed, maintained, & used; test strips <u>IN</u> 49. Non-food contact surfaces clean</p> <p>PHYSICAL FACILITIES <u>IN</u> 50. Hot & cold water available; adequate pressure <u>IN</u> 51. Plumbing installed; proper backflow devices <u>IN</u> 52. Sewage & waste water properly disposed <u>IN</u> 53. Toilet facilities: supplied, & cleaned <u>IN</u> 54. Garbage & refuse disposal <u>IN</u> 55. Facilities installed, maintained, & clean <u>IN</u> 56. Ventilation & lighting <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

Violation #22. Cold holding temperatures
Milk in open serving refrigerator was found to be 46F. All time/temperature control foods must be held in cold holding at or below 41F at all times unless time is used as a control. These milks were disposed during the milk.
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.

General Comments

No other violations observed.

Email Address(es): maccafeteria@mckeelschools.com

Inspection Conducted By: Steven Meadows (29341)
Inspector Contact Number: Work: (863) 578-2027 ex.
Print Client Name: Juanita Salazar
Date: 2/6/2020

Inspector Signature:

Client Signature: