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



Facility Information

Permit Number: 53-48-00104

Name of Facility: Babson Park Elementary

Address: 815 N Scenic Highway City, Zip: Babson Park 33827

Type: School (more than 9 months) Owner: Lake Wales Charter Schools, Inc.

Person In Charge: Ashley Burt Phone: (863) 678-4668

PIC Email: A.burt@slamgmt.com

Inspection Information

Purpose: Routine Inspection Date: 12/15/2022

Correct By: Next Inspection FacilityGrade: N/A Re-Inspection Date: None StopSale: No

Number of Risk Factors (Items 1-29): 0 Begin Time: 10:50 AM Number of Repeat Violations (1-57 R): 0 End Time: 11:45 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

FoodBorne Illness Risk Factors And Public Health Interventions

SUPERVISION

previous inspection

- IN 1. Demonstration of Knowledge/Training
- IN 2. Certified Manager/Person in charge present **EMPLOYEE HEALTH**
- 1 3. Knowledge, responsibilities and reporting
- IN 4. Proper use of restriction and exclusion
- IN 5. Responding to vomiting & diarrheal events **GOOD HYGIENIC PRACTICES**
- N 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
- No bare hand contact with RTE food
- 10. Handwashing sinks, accessible & supplies

APPROVED SOURCE

- 11. Food obtained from approved source
- IN 12. Food received at proper temperature
- 13. Food in good condition, safe, & unadulterated
- NA 14. Shellstock tags & parasite destruction PROTECTION FROM CONTAMINATION
- 15. Food separated & protected; Single-use gloves

- 10. Food-contact surfaces; cleaned & sanitized
- 17. Proper disposal of unsafe food

TIME/TEMPERATURE CONTROL FOR SAFETY

RESULT: Satisfactory

- NO 18. Cooking time & temperatures
- NO 19. Reheating procedures for hot holding
- NO 20. Cooling time and temperature
- NO 21. Hot holding temperatures
- N 22. Cold holding temperatures
- N 23. Date marking and disposition
- NA 24. Time as PHC; procedures & records

CONSUMER ADVISORY

- NA 25. Advisory for raw/undercooked food HIGHLY SUSCEPTIBLE POPULATIONS
- N 26. Pasteurized foods used; No prohibited foods **ADDITIVES AND TOXIC SUBSTANCES**
- NA 27. Food additives: approved & properly used
- N 28. Toxic substances identified, stored, & used
- APPROVED PROCEDURES
- NA 29. Variance/specialized process/HACCP

Inspector Signature:

amora

Client Signature: and But

Form Number: DH 4023 03/18

53-48-00104 Babson Park Elementary

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
- 33. Proper cooling methods; adequate equipment
- 34. Plant food properly cooked for hot holding
- IN 35. Approved thawing methods
- N 36. Thermometers provided & accurate

FOOD IDENTIFICATION

- IN 37. Food properly labeled; original container PREVENTION OF FOOD CONTAMINATION
- 38. Insects, rodents, & animals not present
- IN 39. No Contamination (preparation, storage, display)
- N 40. Personal cleanliness
- IN 41. Wiping cloths: properly used & stored
- N 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
- IN 48. Ware washing: installed, maintained, & used; test strips
- IN 49. Non-food contact surfaces clean

PHYSICAL FACILITIES

- IN 50. Hot & cold water available; adequate pressure
- IN 51. Plumbing installed; proper backflow devices
- IN 52. Sewage & waste water properly disposed
- IN 53. Toilet facilities: supplied, & cleaned
- OUT 54. Garbage & refuse disposal
- IN 55. Facilities installed, maintained, & clean
- **OUT** 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 #54. Garbage & refuse disposal

Holes were observed in sides of outdoor waste container. This must be fixed so that it is leak proof.

CODE REFERENCE: 64E-11.003(5). Garbage shall be disposed of to prevent vector harborage. Trash cans will be durable, cleanable, leak proof, insect and rodent resistant, and non-absorbent. Outside storage area shall be of a smooth, non-absorbent material and sloped to a drain.

Violation #56. Ventilation & lighting

Exhaust ventilation hood system over food prep area was observed to be due for a professional cleaning. This must be fixed.

CODE REFERENCE: 64E-11.003(6)(a). Adequate exhaust ventilation hood systems in food prep and warewashing areas shall be provided and designed. 50 foot candles shall be at surfaces where employees work with food and 20 foot candles shall be at surfaces where food is provided to consumers.

General Comments

No cooking was occurring at time of inspection.

No other violations observed.

Email Address(es): A.burt@slamgmt.com

Inspection Conducted By: Raymond Moran (35264) Inspector Contact Number: Work: (863) 578-2039 ex.

Print Client Name: Ashley Burt

Date: 12/15/2022

Client Signature: and But

Form Number: DH 4023 03/18 53-48-00104 Babson Park Elementary

2 of 2

avara

Inspector Signature: