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



Facility Information

RESULT: Satisfactory

Permit Number: 53-48-00875 Name of Facility: Janie Howard Wilson Elementary Address: 306 Florida Avenue City, Zip: Lake Wales 33853

Type: School (more than 9 months) Owner: Lake Wales Charter Schools, Inc. Person In Charge: Sara Monday Phone: 8632412313 PIC Email: chris.reams@lwcharterschools.com

Inspection Information

Purpose: Routine Inspection Date: 4/18/2022 Correct By: Next Inspection **Re-Inspection Date: None** Number of Risk Factors (Items 1-29): 1 Number of Repeat Violations (1-57 R): 0 FacilityGrade: N/A StopSale: No

Begin Time: 11:00 AM End Time: 12:25 PM

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
- IN 4. Proper use of restriction and exclusion
- IN 5. Responding to vomiting & diarrheal events GOOD HYGIENIC PRACTICES
- NO 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
- 14. Shellstock tags & parasite destruction NO

PROTECTION FROM CONTAMINATION

IN 15. Food separated & protected; Single-use gloves

- IN 16. Food-contact surfaces; cleaned & sanitized
- NO 17. Proper disposal of unsafe food TIME/TEMPERATURE CONTROL FOR SAFETY
- 18. Cooking time & temperatures
- NO 19. Reheating procedures for hot holding
- NO 20. Cooling time and temperature
- IN 21. Hot holding temperatures

Client Signature: monter

- IN 22. Cold holding temperatures
- OUT 23. Date marking and disposition (COS) NO 24. Time as PHC; procedures & records CONSUMER ADVISORY
- NA 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
- 28. Toxic substances identified, stored, & used IN APPROVED PROCEDURES
- NA 29. Variance/specialized process/HACCP

Ins	pector	Sign	ature:

allow

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Good Retail Practices

SAFE FOOD AND WATER

- NO 30. Pasteurized eggs used where required
- IN 31. Water & ice from approved source
- NO 32. Variance obtained for special processing
- FOOD TEMPERATURE CONTROL
- **IN** 33. Proper cooling methods; adequate equipment
- NO 34. Plant food properly cooked for hot holding
- IN 35. Approved thawing methods
- N 36. Thermometers provided & accurate FOOD IDENTIFICATION
- 37. Food properly labeled; original container IN PREVENTION OF FOOD CONTAMINATION
- IN 38. Insects, rodents, & animals not present
- **IN** 39. No Contamination (preparation, storage, display)
- IN 40. Personal cleanliness
- IN 41. Wiping cloths: properly used & stored
- NO 42. Washing fruits & vegetables
 - PROPER USE OF UTENSILS
 - 43. In-use utensils: properly stored
- 44. Equipment & linens: stored, dried, & handled IN
- IN 45. Single-use/single-service articles: stored & used

- NO 46. Slash resistant/cloth gloves used properly UTENSILS, EQUIPMENT AND VENDING
- 47. Food & non-food contact surfaces IN
- 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
- N 53. Toilet facilities: supplied, & cleaned
- OUT 54. Garbage & refuse disposal (COS)
- OUT 55. Facilities installed, maintained, & clean
- IN 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 #23. Date marking and disposition

Bag of hot dogs was observed to not be date marked from date of defrosting. Food must be properly date marked for disposal seven days after defrosting. CODE REFERENCE: 64E-11.003(2). PHF/TCS foods, which are RTE and held refrigerated for more than 24 hours, shall be properly date marked unless otherwise exempted.

Violation #54. Garbage & refuse disposal

Lids of dumpsters were observed to have been left open. These must be kept closed when not in use.

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 #55. Facilities installed, maintained, & clean

Ceiling in dry goods and dishwasher room was observed to have mold-like substance present. These surfaces must be kept clean. CODE REFERENCE: 64E-11.003(5). Floors, walls, and ceilings shall be smooth, durable, easily cleanable, and non-absorbent. Exterior areas shall be kept cleaned.

General Comments

Air conditioner currently under construction in kitchen office. No other violations observed.

Email Address(es): ; chris.reams@lwcharterschools.com; s.monday@slamgmt.com

Inspector Signature:

NLLOW

Client Signature:

monter

Form Number: DH 4023 03/18

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



Inspection Conducted By: Raymond Moran (35264) Inspector Contact Number: Work: (863) 578-2039 ex. Print Client Name: Sara Monday Date: 4/18/2022

Inspector Signature:

allow

Client Signature:

monter

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