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



Facility Information

RESULT: Satisfactory

Permit Number: 13-48-17380 Name of Facility: Robert Morgan Senior HS/ Loc.# 8803 Address: 18180 SW 122 Avenue City, Zip: Miami 33177

Type: School (more than 9 months) Owner: M-DCSB Food and Nutrition Person In Charge: Ricardo Blanco Phone: 305 253-9920 PIC Email

Inspection Information

Purpose: Routine Inspection Date: 10/14/2022 Correct By: Next Inspection **Re-Inspection Date: None**

Number of Risk Factors (Items 1-29): 1 Number of Repeat Violations (1-57 R): 1 FacilityGrade: N/A StopSale: No

Begin Time: 10:00 AM End Time: 11:00 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 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
- IN 6. Proper eating, tasting, drinking, or tobacco use T. 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
- OUT 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 NA

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

Inspector Signature:		Client Signature:
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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
- IN 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
- IN 41. Wiping cloths: properly used & stored
- NO 42. Washing fruits & vegetables
 - PROPER USE OF UTENSILS
 - N 43. In-use utensils: properly stored
- IN 44. Equipment & linens: stored, dried, & handled
- N 45. Single-use/single-service articles: stored & used

- N 46. Slash resistant/cloth gloves used properly UTENSILS, EQUIPMENT AND VENDING
- OUT 47. Food & non-food contact surfaces (R)
- 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
- N 54. Garbage & refuse disposal
- IN 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 #10. Handwashing sinks, accessible & supplies Repair damaged handwashing sink in the station #1. More sinks are availables for handwashing purpose in kitchen area. CODE REFERENCE: 64E-11.003(5)(d). Handwashing sinks are properly equipped with hand soap, individual disposable towels or hand drying device, and signage; and conveniently located. Violation #47. Food & non-food contact surfaces Repair out of service hot unit PC# 1005964

Repair out of service hot unit PC# 1005964 Secure loose panel at the back to the walk in cooler door. Repeated violation Replace damaged edge piece on door for oven PC# 1005968. Repeated violation. Provide air gap to the connection from the steamer to the drain.

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

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Client Signature:



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General Comments

Note Pizza: 136 oF- warmer #1 Chicken teriyaki: 160 oF- steam table #1 Fish stick: 138 oF- warmer #3 Ham: 38 oF-walk in cooler

Hot water: 120 oF (3 compartment sink); 104 oF- Handwashing sinks

Cooper digital thermometer used to measure food and water temperatures at time of inspection.

Email Address(es): vasallo@dadeschools.net

Inspection Conducted By: Maria Adrover (047452) Inspector Contact Number: Work: (305) 623-3500 ex. Print Client Name: Date: 10/14/2022

Inspector Signature:

mr

Client Signature:



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