

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



Facility Information

RESULT: Satisfactory

Permit Number: 13-48-00611
 Name of Facility: American Senior H. S
 Address: 18350 NW 67 Avenue
 City, Zip: Miami Lakes 33015

Type: School (more than 9 months)
 Owner: M-DCSB Food and Nutrition
 Person In Charge: M-DCSB Food and Nutrition Phone: (786) 275-0400
 PIC Email:

Inspection Information

Purpose: Routine	Number of Risk Factors (Items 1-29): 0	Begin Time: 11:20 AM
Inspection Date: 6/28/2022	Number of Repeat Violations (1-57 R): 1	End Time: 12:20 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>IN 1. Demonstration of Knowledge/Training</p> <p>IN 2. Certified Manager/Person in charge present</p> <p>EMPLOYEE HEALTH</p> <p>IN 3. Knowledge, responsibilities and reporting</p> <p>IN 4. Proper use of restriction and exclusion</p> <p>IN 5. Responding to vomiting & diarrheal events</p> <p>GOOD HYGIENIC PRACTICES</p> <p>IN 6. Proper eating, tasting, drinking, or tobacco use</p> <p>IN 7. No discharge from eyes, nose, and mouth</p> <p>PREVENTING CONTAMINATION BY HANDS</p> <p>IN 8. Hands clean & properly washed</p> <p>IN 9. No bare hand contact with RTE food</p> <p>IN 10. Handwashing sinks, accessible & supplies</p> <p>APPROVED SOURCE</p> <p>IN 11. Food obtained from approved source</p> <p>IN 12. Food received at proper temperature</p> <p>IN 13. Food in good condition, safe, & unadulterated</p> <p>NA 14. Shellstock tags & parasite destruction</p> <p>PROTECTION FROM CONTAMINATION</p> <p>IN 15. Food separated & protected; Single-use gloves</p> | <p>IN 16. Food-contact surfaces; cleaned & sanitized</p> <p>IN 17. Proper disposal of unsafe food</p> <p>TIME/TEMPERATURE CONTROL FOR SAFETY</p> <p>IN 18. Cooking time & temperatures</p> <p>IN 19. Reheating procedures for hot holding</p> <p>IN 20. Cooling time and temperature</p> <p>IN 21. Hot holding temperatures</p> <p>IN 22. Cold holding temperatures</p> <p>IN 23. Date marking and disposition</p> <p>NA 24. Time as PHC; procedures & records</p> <p>CONSUMER ADVISORY</p> <p>NA 25. Advisory for raw/undercooked food</p> <p>HIGHLY SUSCEPTIBLE POPULATIONS</p> <p>IN 26. Pasteurized foods used; No prohibited foods</p> <p>ADDITIVES AND TOXIC SUBSTANCES</p> <p>IN 27. Food additives: approved & properly used</p> <p>IN 28. Toxic substances identified, stored, & used</p> <p>APPROVED PROCEDURES</p> <p>NA 29. Variance/specialized process/HACCP</p> |
|---|---|

Inspector Signature:

Client Signature:

Violations Comments

Violation #55. Facilities installed, maintained, & clean
2 in-line warmers observed out of service. Repair or replace damaged warmers.
Work Order #1: 4222430
Work Order #2: 4222432

2 Steamer was observed out of service. Repair or replace damaged steamer. Remove
Work Order #: 4156174

1 Industrial Mixer was observed out of service. Repair or replace mixer from the kitchen.
Work Order #: 4158973

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.

Inspection Conducted By: Andres Rodriguezgaravito (27326)
Inspector Contact Number: Work: (305) 623-3500 ex.
Print Client Name:
Date: