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



\*\*\*\* willesf 9/7/2023 8:45:58 AM \*\*\*\*

**Facility Information** 

Permit Number: 64-48-02603

Name of Facility: Ormond Beach Middle School

Address: 151 Domicilio Avenue City, Zip: Ormond Beach 32174

Type: School (9 months or less)

Owner: Vesey, TL - The School Board of Volusia County Person In Charge: Pat Curtin Phone: (386) 676-1250

PIC Email: pcurtain@volusia.k12.fl.us

#### **Inspection Information**

Purpose: Routine Number of Risk Factors (Items 1-29): 0 Begin Time: 01:00 PM Inspection Date: 9/5/2023 End Time: 01:48 PM Number of Repeat Violations (1-57 R): 0

Correct By: None FacilityGrade: N/A Re-Inspection Date: None StopSale: 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

#### SUPERVISION

- IN 1. Demonstration of Knowledge/Training
- NA 2. Certified Manager/Person in charge present **EMPLOYEE HEALTH**
- IN 3. Knowledge, responsibilities and reporting
- IN 4. Proper use of restriction and exclusion
- N 5. Responding to vomiting & diarrheal events
- GOOD HYGIENIC PRACTICES
- IN 6. Proper eating, tasting, drinking, or tobacco use
- No discharge from eyes, nose, and mouth PREVENTING CONTAMINATION BY HANDS
- N 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
- N 12. Food received at proper temperature
- IN 13. Food in good condition, safe, & unadulterated
- 14. Shellstock tags & parasite destruction 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

**RESULT: Satisfactory** 

- **IN** 18. Cooking time & temperatures
- NO 19. Reheating procedures for hot holding
- IN 20. Cooling time and temperature
- IN 21. Hot holding temperatures
- N 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
- NA 26. Pasteurized foods used; No prohibited foods
- ADDITIVES AND TOXIC SUBSTANCES
- NA 27. Food additives: approved & properly used
- IN 28. Toxic substances identified, stored, & used
- APPROVED PROCEDURES NA 29. Variance/specialized process/HACCP

**Inspector Signature:** 

Metaran

**Client Signature:** 

Form Number: DH 4023 03/18 64-48-02603 Ormond Beach Middle School

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#### **Good Retail Practices**

#### SAFE FOOD AND WATER

- NA 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
- N 34. Plant food properly cooked for hot holding
- N 35. Approved thawing methods
- N 36. Thermometers provided & accurate

#### FOOD IDENTIFICATION

IN 37. Food properly labeled; original container

#### PREVENTION OF FOOD CONTAMINATION

- IN 38. Insects, rodents, & animals not presentIN 39. No Contamination (preparation, storage, display)
- N 40. Personal cleanliness
- N 41. Wiping cloths: properly used & stored
- IN 42. Washing fruits & vegetables

#### PROPER USE OF UTENSILS

- IN 43. In-use utensils: properly stored
- N 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
- Non-food contact surfaces clean

## PHYSICAL FACILITIES

- N 50. Hot & cold water available; adequate pressure
- N 51. Plumbing installed; proper backflow devices
- 52. Sewage & waste water properly disposed53. Toilet facilities: supplied, & cleaned
- IN 54. Garbage & refuse disposal
- N 55. Facilities installed, maintained, & clean
- IN 56. Ventilation & lighting
- N 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**

No Violation Comments Available

#### **General Comments**

Serving: Nacho beef 148F, 146F. Nacho cheese 146F, 139F. Carrots 41F, 41F. Watermelon 39F, 39F. Strawberry milk 41F, 40F. Victory RI #1 37F, Milk box 40F. Victory RI #2 35F Carrots 41F. Victory hot box #1 Cheese pizza 135F. Victory Hot box #2 Cheese pizza 160F. WIC 34F Milk box 39F. WIF 15F.

No violations observed at time of inspection.

Email Address(es): No Email Addresses Available

Inspection Conducted By: Jessica DeHaven (86404) Inspector Contact Number: Work: (386) 274-0702 ex.

Print Client Name: Date: 9/5/2023

**Inspector Signature:** 

Metaran

**Client Signature:** 

Br Cn +2

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