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



RESULT: Satisfactory **Facility Information**

Permit Number: 13-48-15857

Name of Facility: Porter Elementary, Dr. Gilbert- PLC/ Loc.# 4511A

Address: 15751 SW 112 Street

City, Zip: Miami 33196

Type: School (more than 9 months) Owner: M-DCSB Food and Nutrition

Person In Charge: Debbie Vieira Phone: 305 385-8227

PIC Fmail:

Inspection Information

Begin Time: 09:50 AM Purpose: Routine Number of Risk Factors (Items 1-29): 0 Inspection Date: 8/23/2023 Number of Repeat Violations (1-57 R): 0 End Time: 10:15 AM

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
- N 2. Certified Manager/Person in charge present **EMPLOYEE HEALTH**
- IN 3. Knowledge, responsibilities and reporting
- N 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
- N 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
- 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 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

- NO 18. Cooking time & temperatures
- NO 19. Reheating procedures for hot holding
- NO 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

IN 25. Advisory for raw/undercooked food

HIGHLY SÚSCEPTIBLE POPULATIONS

- IN 26. Pasteurized foods used; No prohibited foods
 - ADDITIVES AND TOXIC SUBSTANCES
- N 27. Food additives: approved & properly used
- 28. Toxic substances identified, stored, & used
 - APPROVED PROCEDURES
- NA 29. Variance/specialized process/HACCP

Inspector Signature:

mTW

Form Number: DH 4023 03/18

Client Signature:

13-48-15857 Porter Elementary, Dr. Gilbert- PLC/ Loc.# 4511A

1 of 3

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

- NO 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

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
- 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

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

No Violation Comments Available

Inspector Signature:

mJW

Form Number: DH 4023 03/18

Client Signature:

13-48-15857 Porter Elementary, Dr. Gilbert- PLC/ Loc.# 4511A

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



General Comments

Note:

| Beefaroni: 205 oF- steam table |
|---|
| Ailk: 38 oF- milk box refrigerator |
| Hot water- handwashing sink- 103 oF |
| No violations observed |
| Cooper digital thermometer used to measure food and water temperatures at time of inspection. |
| |
| |
| |
| |
| |
| |
| |
| |
| |
| |
| |
| mail Address (sa); imbarrandar @dadasahasla nati |
| Email Address(es): jmhernandez@dadeschools.net; Ivieira@dadeschools.net; |
| nholland@dadeschools.net |

Inspection Conducted By: Maria Adrover (047452) Inspector Contact Number: Work: (305) 623-3500 ex.

Print Client Name: Date: 8/23/2023

Inspector Signature:

mJW

Client Signature:

Form Number: DH 4023 03/18 13-48-15857 Porter Elementary, Dr. Gilbert- PLC/ Loc.# 4511A