

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



Facility Information

RESULT: Satisfactory

Permit Number: 13-48-06196
 Name of Facility: Homestead Middle/ Loc.# 6251
 Address: 650 NW 2 Avenue
 City, Zip: Homestead 33030

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

Inspection Information

Purpose: Routine	Number of Risk Factors (Items 1-29): 1	Begin Time: 11:00 AM
Inspection Date: 7/16/2024	Number of Repeat Violations (1-57 R): 1	End Time: 12:15 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

SUPERVISION

- IN** 1. Demonstration of Knowledge/Training
- IN** 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
- 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
- NA** 14. Shellstock tags & parasite destruction

PROTECTION FROM CONTAMINATION

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

OUT 16. Food-contact surfaces; cleaned & sanitized (**COS**)

- IN** 17. Proper disposal of unsafe food

TIME/TEMPERATURE CONTROL FOR SAFETY

- IN** 18. Cooking time & temperatures
- IN** 19. Reheating procedures for hot holding
- IN** 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

- IN** 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
- IN** 28. Toxic substances identified, stored, & used

APPROVED PROCEDURES

- NA** 29. Variance/specialized process/HACCP

Inspector Signature:

Client Signature:

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Good Retail Practices

SAFE FOOD AND WATER	
<u>IN</u> 30. Pasteurized eggs used where required	<u>NA</u> 46. Slash resistant/cloth gloves used properly
<u>IN</u> 31. Water & ice from approved source	UTENSILS, EQUIPMENT AND VENDING
<u>NA</u> 32. Variance obtained for special processing	<u>IN</u> 47. Food & non-food contact surfaces
FOOD TEMPERATURE CONTROL	<u>IN</u> 48. Ware washing: installed, maintained, & used; test strips
<u>IN</u> 33. Proper cooling methods; adequate equipment	<u>IN</u> 49. Non-food contact surfaces clean
<u>NO</u> 34. Plant food properly cooked for hot holding	PHYSICAL FACILITIES
<u>IN</u> 35. Approved thawing methods	<u>IN</u> 50. Hot & cold water available; adequate pressure
<u>IN</u> 36. Thermometers provided & accurate	<u>OUT</u> 51. Plumbing installed; proper backflow devices (R)
FOOD IDENTIFICATION	<u>IN</u> 52. Sewage & waste water properly disposed
<u>IN</u> 37. Food properly labeled; original container	<u>IN</u> 53. Toilet facilities: supplied, & cleaned
PREVENTION OF FOOD CONTAMINATION	<u>OUT</u> 54. Garbage & refuse disposal
<u>IN</u> 38. Insects, rodents, & animals not present	<u>IN</u> 55. Facilities installed, maintained, & clean
<u>IN</u> 39. No Contamination (preparation, storage, display)	<u>IN</u> 56. Ventilation & lighting
<u>IN</u> 40. Personal cleanliness	<u>IN</u> 57. Permit; Fees; Application; Plans
<u>IN</u> 41. Wiping cloths: properly used & stored	
<u>NO</u> 42. Washing fruits & vegetables	
PROPER USE OF UTENSILS	
<u>IN</u> 43. In-use utensils: properly stored	
<u>IN</u> 44. Equipment & linens: stored, dried, & handled	
<u>IN</u> 45. Single-use/single-service articles: stored & used	

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

<p>Violation #16. Food-contact surfaces; cleaned & sanitized Observed the ice scoop directly touching the ice. Keep the ice scoop from making direct contact with the ice. PIC placed ice scoop in closed lid container on top of ice machine (corrected on site). CODE REFERENCE: 64E-11.003(2). Food shall only contact surfaces that are clean and sanitized.</p>
<p>Violation #51. Plumbing installed; proper backflow devices Observed overflowing drain under prep sink 1. Realign the pipe with the drain cover. Repeat 03/15/2024 CODE REFERENCE: 64E-11.003(5)(c). Plumbing will be installed and maintained to comply with plumbing requirements, including backflow prevention devices. A mop sink will be provided.</p>
<p>Violation #54. Garbage & refuse disposal Observed green dumpster to be rusted/damaged. Repair or replace rusted/damaged dumpster. 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.</p>

Inspector Signature:

Client Signature:

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General Comments

Satisfactory

Temperatures recorded with thermopen thermometer:

Handwashing sink 1 110F
Handwashing sink 2 108F
3-compartment 112F
staff bathroom 105F
mop sink 104F

hot line:
Rice 150F
Eggroll 148F

milk box 1:
milk 41F

milk box 2:
milk 41F

reach in fridge 1 40F

reach in fridge 2 41F

freezer 1 5F

walk in fridge
milk 40F

walk in freezer 7F

Email Address(es): mcgomez@dadeschools.net;
pr6251@dadeschools.net

Inspection Conducted By: Raad Farhang (913251)
Inspector Contact Number: Work: (305) 623-3575 ex.
Print Client Name: MARIA GOMEZ
Date: 7/16/2024

Inspector Signature:

Handwritten signature of Raad Farhang.

Client Signature:

Handwritten signature of Maria Gomez.

Form Number: DH 4023 03/18

13-48-06196 Homestead Middle/ Loc.# 6251