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



Facility Information

RESULT: Satisfactory

Permit Number: 36-48-00793 Name of Facility: Oasis High School Address: 3519 Oasis Boulevard City, Zip: Cape Coral 33914

Type: School (more than 9 months) Owner: City of Cape Coral Charter School Authority* Person In Charge: Donnelly, Mary Phone: (239) 945-1999 PIC Email: mary.donnelly@capecharterschools.org

Inspection Information

Purpose: Routine Inspection Date: 9/1/2023 Correct By: None **Re-Inspection Date: None** Number of Risk Factors (Items 1-29): 0 Number of Repeat Violations (1-57 R): 0 FacilityGrade: N/A StopSale: No

Begin Time: 11:00 AM End Time: 12:00 PM

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
- IN 10. Handwashing sinks, accessible & supplies APPROVED SOURCE
- IN 11. Food obtained from approved source
- IN 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
- NO 17. Proper disposal of unsafe food TIME/TEMPERATURE CONTROL FOR SAFETY
- NO 18. Cooking time & temperatures
- NO 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
- 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 Signatu	ure:
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Client Signature:

Form Number: DH 4023 03/18

36-48-00793 Oasis High School

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
- IN 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
- **IN** 43. In-use utensils: properly stored
- IN 44. Equipment & linens: stored, dried, & handled
- N 45. Single-use/single-service articles: stored & used

- NO 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
- 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
- IN 53. Toilet facilities: supplied, & cleaned

IN 57. Permit; Fees; Application; Plans

IN 54. Garbage & refuse disposal IN 55. Facilities installed, maintained, & clean

IN 56. Ventilation & lighting

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

-Hot water at least 100F available, three compartment sink 200ppm (parts per million) quaternary ammonium, True 36/36F, milk coolers 39/40F, Metro C5 warmers 163/183F, pizza 135F

Note: Lunch -pizza from Little Ceasars

Email Address(es): mary.donnelly@capecharterschools.org; caroline.sterling@capecharterschools.org; jany.gomez@capecharterschools.org

Inspection Conducted By: Lisa Summers (31162) Inspector Contact Number: Work: (941) 624-7200 ex. 7377 Print Client Name: Jason Fernandez Date: 9/1/2023

Inspector Signature:

Client Signature:

Form Number: DH 4023 03/18

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