# 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 Charter 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: City of Cape Coral Charter School Authority\* Phone: (239) 424-6100

PIC Email: caroline.sterling@capecharterschools.org

**Inspection Information** 

Purpose: Routine Number of Risk Factors (Items 1-29): 0 Begin Time: 01:05 PM Inspection Date: 9/17/2019 Number of Repeat Violations (1-57 R): 0 End Time: 02:10 PM

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
- 2. Certified Manager/Person in charge present EMPLOYEE HEALTH
- IN 3. Knowledge, responsibilities and reporting
- IN 4. Proper use of restriction and exclusion
- S. 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
- 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
- NA 14. Shellstock tags & parasite destruction 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

- IN 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
- N 23. Date marking and disposition
- NA 24. Time as PHČ; procedures & records

# CONSUMER ADVISORY

NA 25. Advisory for raw/undercooked food

# HIGHLY SUSCEPTIBLE POPULATIONS

- N 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:** 

Klynsen

**Client Signature:** 

X C sterling

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

#### FOOD IDENTIFICATION

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 IN 45. Single-use/single-service articles: stored & used

- 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
- N 51. Plumbing installed; proper backflow devices
- IN 52. Sewage & waste water properly disposed

IN 46. Slash resistant/cloth gloves used properly

UTENSILS, EQUIPMENT AND VENDING

- N 53. Toilet facilities: supplied, & cleaned
- IN 54. Garbage & refuse disposal
- IN 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

# **General Comments**

-quat on line 250ppm, green beans 157F, baked beans 206F, chicken nuggets 204F, water throughout above 100F, milk 39F, milk cooler 40F

Email Address(es): caroline.sterling@capecharterschools.org;

danielle.jensen@capecharterschools.org; maintenanceteam@capecharterschools.org

Inspection Conducted By: Kylar Johnson (371) Inspector Contact Number: Work: (239) 690-2140 ex.

Print Client Name: signed

Form Number: DH 4023 03/18

Date: 9/17/2019

**Inspector Signature:** 

**Client Signature:** X C sterling

Kbhnsen

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