# 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: Caroline Sterling Phone: (239) 945-1999

PIC Email: caroline.sterling@capecharterschools.org

# **Inspection Information**

Purpose: Routine Number of Risk Factors (Items 1-29): 0 Begin Time: 10:00 AM Inspection Date: 4/6/2021 Number of Repeat Violations (1-57 R): 0 End Time: 10:40 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
- 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
- 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

- 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
- IN 20. Cooling time and temperature
- N 21. Hot holding temperatures
- N 22. Cold holding temperatures
- N 23. Date marking and disposition
- NA 24. Time as PHC; procedures & records
- CONSUMER ADVISORY
- NA 25. Advisory for raw/undercooked food
  - HIGHLY SÚSCEPTIBLE POPULATIONS
- No prohibited 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:** 

1145 Simmes

Client Signature:

Form Number: DH 4023 03/18 36-48-00793 Oasis High School

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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

NO 34. Plant food properly cooked for hot holding

IN 35. Approved thawing methods

**IN** 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

N 51. Plumbing installed; proper backflow devices

IN 52. Sewage & waste water properly disposed

IN 53. Toilet facilities: supplied, & cleanedIN 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**

-Hot water greater than 100F available throughout, three compartment sink 200ppm(parts per million) quaternary ammonium, True(milk cooler) 40F, True 39F, True(3dr) 35/41F, True(salad) 35F,

Naked cooler 35F. C5 warmer 161F, hash browns 153F, sausage patties 192F, omelette 165F, chicken sandwich 171F, milk 40F, ranch dressing 40F

Note: No signature obtained due to COVID-19 concerns. Report emailed to Caroline Sterling on 4/6/21.

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

brent.richardson@capecharterschools.org

Inspection Conducted By: Lisa Summers (4763) Inspector Contact Number: Work: (239) 690-2100 ex.

Print Client Name: Caroline Sterling

Date: 4/6/2021

**Inspector Signature:** 

1145 Simmers

Client Signature:

Form Number: DH 4023 03/18 36-48-00793 Oasis High School

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