

Facility Information RESULT: Satisfactory

Permit Number: 55-48-00190

Name of Facility: FRUIT COVE MIDDLE SCHOOL

Address: 3180 RACE TRACK Road City, Zip: Jacksonville 32259

Type: School (9 months or less)

Owner: FRUIT COVE MIDDLE SCHOOL

Person In Charge: FRUIT COVE MIDDLE SCHOOL Phone: (904) 547-3963

PIC Email:

**Inspection Information** 

Purpose: Routine Number of Risk Factors (Items 1-29): 0 Begin Time: 11:00 AM Inspection Date: 1/6/2020 Number of Repeat Violations (1-57 R): 0 End Time: 11:24 AM

Correct By: Next Inspection 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
- N 4. Proper use of restriction and exclusion
- IN 5. Responding to vomiting & diarrheal events GOOD HYGIENIC PRACTICES
- N 6. Proper eating, tasting, drinking, or tobacco use
- NO 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
- NO 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
- IN 20. Cooling time and temperature
- NO 21. Hot holding temperatures
- N 22. Cold holding temperatures
- IN 23. Date marking and disposition
- N 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
- N 27. Food additives: approved & properly used
- N 28. Toxic substances identified, stored, & used
  - APPROVED PROCEDURES
- IN 29. Variance/specialized process/HACCP

**Inspector Signature:** 

Client Signature:

Form Number: DH 4023 03/18 55-48-00190 FRUIT COVE MIDDLE SCHOOL



#### **Good Retail Practices**

#### SAFE FOOD AND WATER

NA 30. Pasteurized eggs used where required

IN 31. Water & ice from approved source

IN 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

IN 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

NA 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

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

OUT 55. Facilities installed, maintained, & clean

IN 56. Ventilation & lighting

IN 57. Permit; Fees; Application; Plans

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## **Violations Comments**

Violation #55. Facilities installed, maintained, & clean

Hand wash sink faucets are dirty. Clean the handles on the hand wash faucets.

CODE REFERENCE: 64E-11.003(5). Floors, walls, and ceilings shall be smooth, durable, easily cleanable, and non-absorbent. Exterior areas shall be kept cleaned.

# **General Comments**

No General Comments Available

Email Address(es): Yasmin.Taylor@stjohns.k12.fl.us

Inspection Conducted By: Darren Guffey (54792) Inspector Contact Number: Work: (904) 209-3250 ex.

Print Client Name: Date: 1/6/2020

**Inspector Signature:** 

Form Number: DH 4023 03/18

**Client Signature:** 

55-48-00190 FRUIT COVE MIDDLE SCHOOL



**RESULT:** Satisfactory **Facility Information** 

Permit Number: 55-48-1904260

Name of Facility: Freedom Crossing Academy

Address: 1365 Shetland Drive City, Zip: Saint Johns 32259

Type: School (9 months or less) Owner: St. Johns County School District

Person In Charge: St. Johns County School District Phone: (904) 547-8932

PIC Fmail:

**Inspection Information** 

Number of Risk Factors (Items 1-29): 0 Purpose: Routine Begin Time: 10:16 AM Inspection Date: 1/6/2020 Number of Repeat Violations (1-57 R): 0 End Time: 10:47 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
- IN 12. Food received at proper temperature
- IN 13. Food in good condition, safe, & unadulterated (COS)
- 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

- 18. Cooking time & temperatures
- IN 19. Reheating procedures for hot holding
- IN 20. Cooling time and temperature
- **IN** 21. Hot holding temperatures
- N 22. Cold holding temperatures
- IN 23. Date marking and disposition
- N 24. Time as PHC; procedures & records
  - CONSUMER ADVISORY
- 25. Advisory for raw/undercooked food
- HIGHLY SÚSCEPTIBLE POPULATIONS
- NA 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

IN 29. Variance/specialized process/HACCP

**Inspector Signature:** 

**Client Signature:** 

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Form Number: DH 4023 03/18 55-48-1904260 Freedom Crossing Academy



#### **Good Retail Practices**

#### SAFE FOOD AND WATER

- IN 30. Pasteurized eggs used where required
- IN 31. Water & ice from approved source
- N 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

N 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
- IN 42. Washing fruits & vegetables

#### PROPER USE OF UTENSILS

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

NA 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

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## **Violations Comments**

No Violation Comments Available

### **General Comments**

No violations observed during inspection.

Email Address(es): Kathleen.Damiano@stjohns.k12.fl.us

Inspection Conducted By: Darren Guffey (54792) Inspector Contact Number: Work: (904) 209-3250 ex.

Print Client Name: Date: 1/6/2020

Inspector Signature:

**Client Signature:** 

D Kottelen Daniano

Form Number: DH 4023 03/18 55-48-1904260 Freedom Crossing Academy



Facility Information RESULT: Satisfactory

Permit Number: 55-48-00077

Name of Facility: FIRST COAST TECHNICAL COLLEGE

Address: 2980 COLLINS Avenue City, Zip: Saint Augustine 32084

Type: School (9 months or less)

Owner: ST. JOHNS COUNTY SCHOOL BOARD

Person In Charge: ST. JOHNS COUNTY SCHOOL BOARD Phone: (904) 829-1089

PIC Email:

**Inspection Information** 

Purpose: Routine Number of Risk Factors (Items 1-29): 0 Begin Time: 11:22 AM Inspection Date: 1/16/2020 Number of Repeat Violations (1-57 R): 0 End Time: 11:55 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
- N 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
- IN 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
- 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
- N 22. Cold holding temperatures (COS)
- IN 23. Date marking and disposition
- NA 24. Time as PHČ; procedures & records

#### **CONSUMER ADVISORY**

NA 25. Advisory for raw/undercooked food

#### HIGHLY SUSCEPTIBLE POPULATIONS

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

IN 29. Variance/specialized process/HACCP

**Inspector Signature:** 

**Client Signature:** 

Ruth Jickes

Form Number: DH 4023 03/18 55-48-00077 FIRST COAST TECHNICAL COLLEGE



#### **Good Retail Practices**

#### SAFE FOOD AND WATER

- NA 30. Pasteurized eggs used where required
- IN 31. Water & ice from approved source
- N 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

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
- N 41. Wiping cloths: properly used & stored
- IN 42. Washing fruits & vegetables

#### PROPER USE OF UTENSILS

- IN 43. In-use utensils: properly stored
- N 44. Equipment & linens: stored, dried, & handled
- IN 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
- IN 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
- IN 56. Ventilation & lighting
- IN 57. Permit; Fees; Application; Plans

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## **Violations Comments**

No Violation Comments Available

### **General Comments**

No violations observed during inspection.

Email Address(es): ruth.fickes@stjohns.k12.fl.us

Inspection Conducted By: Darren Guffey (54792) Inspector Contact Number: Work: (904) 209-3250 ex.

Print Client Name: Date: 1/16/2020

Inspector Signature:

**Client Signature:** 

Ruth Jickes

Form Number: DH 4023 03/18 55-48-00077 FIRST COAST TECHNICAL COLLEGE



**RESULT:** Satisfactory **Facility Information** 

Permit Number: 55-48-00016

Name of Facility: MURRAY MIDDLE SCHOOL

Address: 150 N HOLMES Boulevard City, Zip: Saint Augustine 32084

Type: School (9 months or less) Owner: MURRAY MIDDLE SCHOOL

Person In Charge: MURRAY MIDDLE SCHOOL Phone: (904) 547-3963

PIC Fmail:

**Inspection Information** 

Number of Risk Factors (Items 1-29): 0 Begin Time: 10:36 AM Purpose: Routine End Time: 11:05 AM Inspection Date: 1/22/2020 Number of Repeat Violations (1-57 R): 0

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
- IN 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

- 18. Cooking time & temperatures
- IN 19. Reheating procedures for hot holding
- IN 20. Cooling time and temperature
- **IN** 21. Hot holding temperatures
- N 22. Cold holding temperatures
- IN 23. Date marking and disposition
- N 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
- IN 29. Variance/specialized process/HACCP

**Inspector Signature:** 

**Client Signature:** 

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Form Number: DH 4023 03/18 55-48-00016 MURRAY MIDDLE SCHOOL



### **Good Retail Practices**

#### SAFE FOOD AND WATER

- IN 30. Pasteurized eggs used where required
- IN 31. Water & ice from approved source
- IN 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
- 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
- IN 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 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
- IN 51. Plumbing installed; proper backflow devices
- IN 52. Sewage & waste water properly disposed
- N 53. Toilet facilities: supplied, & cleaned
- N 54. Garbage & refuse disposal
- IN 55. Facilities installed, maintained, & clean
- N 56. Ventilation & lighting
- IN 57. Permit; Fees; Application; Plans

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# **Violations Comments**

No Violation Comments Available

### **General Comments**

No violations observed during inspection.

Email Address(es): becky.williams@stjohns.k12.fl.us

Inspection Conducted By: Darren Guffey (54792) Inspector Contact Number: Work: (904) 209-3250 ex.

Print Client Name: Date: 1/22/2020

Inspector Signature:

**Client Signature:** 

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Form Number: DH 4023 03/18 55-48-00016 MURRAY MIDDLE SCHOOL