

FOOD SERVICE

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

Approval: _____



PURPOSE:

- ROUTINE REINSPECTION
- CONSTRUCT. CHANGE OF OWNER
- COMPLAINT CONSULTATION
- QA SURVEY EPIDEMIOLOGY
- OTHER

TYPE:

- HOSPITAL CIVIC CHILD
- NURSING MOVIE LIMITED
- DETENTION SCHOOL OTHER
- LOUNGE RESIDENTIAL

RESULTS:

- Satisfactory
- Incomplete
- Citation Issued
- Stop Use Order
- Unsatisfactory
- OUT OF BUSINESS
- Correct Violations by
- Next Inspection
- 8:00 AM on

NAME McFatter Technical Ctr

ADDRESS 6500 Nova Dr **CITY** Davie

PHONE 370-8324 **ZIP** 33317

PERSON IN CHARGE _____

EMAIL v.citrullo@browardschools.com

| BEGIN TIME | END TIME | DATE ASSESSED | POSITION # | EXISTING FACILITIES - PERMIT NUMBER |
|------------|----------|---------------|------------|-------------------------------------|
| 09:16 | 10:30 | 10/29/2009 | 27116 | 06-48-00489 |

| RE-INSPECTION DATE |
|--------------------|
| |

Items marked below violate the requirements of Chapter 64E-11 of the Florida Administrative Code and must be corrected. Continued operation of this facility without making these corrections is a violation of Chapter 64E-11, Florida Administrative Code and Chapters 381 and 386, Florida Statutes. Violations must be corrected by the date and time indicated in the Results section above or an administrative fine or other legal action will be initiated.

| | | | |
|--|--|--|--|
| <p>FOOD SUPPLIES</p> <ul style="list-style-type: none"> <input type="checkbox"/> 1. Sources etc. <p>FOOD PROTECTION</p> <ul style="list-style-type: none"> <input type="checkbox"/> 2. Stored temperature <input type="checkbox"/> 3. No further cooking/rapid cooling <input type="checkbox"/> 4. Thawing <input type="checkbox"/> 5. Raw fruits <input type="checkbox"/> 6. Pork cooking <input type="checkbox"/> 7. Poultry cooking <input type="checkbox"/> 8. Other animal cooking <input type="checkbox"/> 9. Least contact/reheating <input checked="" type="checkbox"/> 10. Food container <input type="checkbox"/> 11. Buffet requirements <input type="checkbox"/> 12. Self-service condiments <input type="checkbox"/> 13. Reserve of food | <ul style="list-style-type: none"> <input type="checkbox"/> 14. Sneeze guards <input type="checkbox"/> 15. Transportation of food <input type="checkbox"/> 16. Poisonous/toxic materials <p>PERSONNEL</p> <ul style="list-style-type: none"> <input type="checkbox"/> 17. Exclusion of personnel <input type="checkbox"/> 18. Cleanliness <input type="checkbox"/> 19. Tobacco use <input checked="" type="checkbox"/> 20. Handwashing <input type="checkbox"/> 21. Handling of dishware <p>EQUIPMENT/UTENSILS</p> <ul style="list-style-type: none"> <input type="checkbox"/> 22. Refrigeration facilities/Therm. <input type="checkbox"/> 23. Sinks <input type="checkbox"/> 24. Ice storage/counter-protector <input type="checkbox"/> 25. Ventilation/Storage/Sufficient equip. <input type="checkbox"/> 26. Dishwashing facilities | <ul style="list-style-type: none"> <input type="checkbox"/> 27. Design and fabrication <input type="checkbox"/> 28. Installation and location <input type="checkbox"/> 29. Cleanliness of equipment <input type="checkbox"/> 30. Methods of washing <p>SANITARY FACILITIES AND CONTROLS</p> <ul style="list-style-type: none"> <input type="checkbox"/> 31. Water supply <input type="checkbox"/> 32. Ice <input type="checkbox"/> 33. Sewage <input type="checkbox"/> 34. Plumbing <input type="checkbox"/> 35. Toilet facilities <input checked="" type="checkbox"/> 36. Handwashing facilities <input type="checkbox"/> 37. Garbage disposal <input type="checkbox"/> 38. Vermin control | <p>OTHER FACILITIES AND OPERATIONS</p> <ul style="list-style-type: none"> <input checked="" type="checkbox"/> 39. Other facilities and operations <p>TEMPORARY FOOD SERVICE EVENTS</p> <ul style="list-style-type: none"> <input type="checkbox"/> 40. Temporary food service events <p>VENDING MACHINES</p> <ul style="list-style-type: none"> <input type="checkbox"/> 41. Vending machines <p>MANAGER CERTIFICATION</p> <ul style="list-style-type: none"> <input type="checkbox"/> 42. Manager certification <p>CERTIFICATES AND FEES</p> <ul style="list-style-type: none"> <input type="checkbox"/> 43. Certificates and fees <p>INSPECTION/ENFORCEMENT</p> <ul style="list-style-type: none"> <input type="checkbox"/> 44. Inspection/Enforcement |
|--|--|--|--|

COMMENTS AND INSTRUCTIONS

QAC Sanitizer 300 ppm. Commercial dishwasher rinse temp 190 F.
Soup 150 F, Hamburger 143 F.
Refrig 40 F, Walk-refrig 40 F and Freezer 10 F.

Violation Observed: Frozen items must be labeled and dated. **[FAC]: 10. Storage Containers. 64E-11.004(10).** Food storage containers shall be clean, covered, and marked with their contents.

Violation Observed: Employees bathroom is missing hot water. **[FAC]: 20. Washing Hands. 64E-11.025(2).** Employees will wash their hands after: using the toilet, handling soiled equipment, coughing or using tobacco, eating, etc.

Violation Observed: Hand sink needed at the concessions located in the patio. **[FAC]: 36. Handwash Sinks. 64E-11.027(6).** Handwash facilities will be located in employee restrooms, food prep areas, and in mechanical dishwash areas.

Violation Observed: Storage room floor dirty, please clean up. **[FAC]: 39. Other Facilities. 64E-11.028.** Floors, walls, and ceilings shall be smooth and washable. 20 foot candles of light shall be provided. Adequate ventilation shall be provided. A mop sink or garbage can wash down will be

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INSPECTION CONDUCTED BY: Luisa Oramas

PHONE: 954-831-0407

INSPECTION COND SIGNATURE: *Luisa Oramas*

PHONE: _____

COPY OF REPORT RECEIVED BY: V. Paul Citrullo

DATE: 10/29/2009

STATE OF FLORIDA
DEPARTMENT OF HEALTH
COUNTY PUBLIC HEALTH UNIT
Food Establishment



Name: McFatter Technical Ctr

Date: 10/29/2009

Identification No: 06-48-00489

Comments and Instructions (Continued from Page 1):

provided. No living quarters shall open to the facility. No live animals. Exterior area shall be kept clean.

Copy of Report
Received By:

Inspector Luisa Oramas

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