

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



Facility Information

RESULT: Satisfactory

Permit Number: 06-48-00967
 Name of Facility: Pembroke Pines Charter West
 Address: 1680 SW 184 Avenue
 City, Zip: Pembroke Pines 33027

Type: School (9 months or less)
 Owner: City Of Pembroke Pines
 Person In Charge: City Of Pembroke Pines [Owner - Fax - (954) 538-3714] Phone: (954) 538-3714
 PIC Email: wechartwells@pinescharter.net

Inspection Information

Purpose: Routine	Number of Risk Factors (Items 1-29): 0	Begin Time: 09:17 AM
Inspection Date: 4/20/2021	Number of Repeat Violations (1-57 R): 0	End Time: 09:59 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
- IN** 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

- NO** 6. Proper eating, tasting, drinking, or tobacco use
- IN** 7. 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
- 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

- NO** 18. Cooking time & temperatures
- NO** 19. Reheating procedures for hot holding
- NO** 20. Cooling time and temperature
- NO** 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

- NA** 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:

Client Signature:

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Good Retail Practices

SAFE FOOD AND WATER	
NA 30. Pasteurized eggs used where required	NA 46. Slash resistant/cloth gloves used properly
IN 31. Water & ice from approved source	UTENSILS, EQUIPMENT AND VENDING
NA 32. Variance obtained for special processing	OUT 47. Food & non-food contact surfaces
FOOD TEMPERATURE CONTROL	IN 48. Ware washing: installed, maintained, & used; test strips
IN 33. Proper cooling methods; adequate equipment	IN 49. Non-food contact surfaces clean
NO 34. Plant food properly cooked for hot holding	PHYSICAL FACILITIES
IN 35. Approved thawing methods	IN 50. Hot & cold water available; adequate pressure
IN 36. Thermometers provided & accurate	IN 51. Plumbing installed; proper backflow devices
FOOD IDENTIFICATION	IN 52. Sewage & waste water properly disposed
IN 37. Food properly labeled; original container	IN 53. Toilet facilities: supplied, & cleaned
PREVENTION OF FOOD CONTAMINATION	IN 54. Garbage & refuse disposal
IN 38. Insects, rodents, & animals not present	IN 55. Facilities installed, maintained, & clean
IN 39. No Contamination (preparation, storage, display)	IN 56. Ventilation & lighting
IN 40. Personal cleanliness	IN 57. Permit; Fees; Application; Plans
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	

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

Violation #47. Food & non-food contact surfaces
Observed extensive ice build up in the chest freezer located across from the 4-compartment sink.

CODE REFERENCE: 64E-11.003(4). Equipment and utensils must be properly designed, constructed, and in good repair.

General Comments

Equipment:
Reach in refrigerator: 41F
Chest freezer: 5F / 5F / 0F

Hot Water:
Handwashing sink: 134F
3 Compartment sink: 134F
Mop sink: 128F
Bathrooms: 124F

Food:
Milk: 41F

Managers Certification observed for Patricia Gill expires 11/11/2024
Employee Food Safety Training/Employee Health policy training observed.

Email Address(es): wechartwells@pinescharter.net

Inspector Signature:

Umar Fajana

Client Signature:

John P. ...

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Inspection Conducted By: Veronica Fitzsimmons (6935)
Inspector Contact Number: Work: (954) 412-7302 ex.
Print Client Name:
Date: 4/20/2021

Inspector Signature:

Veronica Fitzsimmons

Client Signature:

[Handwritten Signature]