

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



**** mcfeeka 9/29/2023 12:27:48 PM ****

Facility Information

RESULT: Satisfactory

Permit Number: 05-48-00803
Name of Facility: Rockledge High School Cafeteria
Address: 220 Raider Road
City, Zip: Rockledge 32955

Type: School (9 months or less)
Owner: Brevard County School Board
Person In Charge: Keri Draper Phone: (321) 636-2989
PIC Email: draper.keri@brevardschools.org

Inspection Information

Purpose: Routine
Inspection Date: 9/27/2023
Correct By: None
Re-Inspection Date: None

Number of Risk Factors (Items 1-29): 2
Number of Repeat Violations (1-57 R): 0
Facility Grade: N/A
Stop Sale: No

Begin Time: 11:15 AM
End Time: 12:15 PM

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

- IN** 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

- 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
- OUT** 21. Hot holding temperatures (**COS**)
- IN** 22. Cold holding temperatures
- OUT** 23. Date marking and disposition (**COS**)
- IN** 24. Time as PHC; procedures & records

CONSUMER ADVISORY

- IN** 25. Advisory for raw/undercooked food

HIGHLY SUSCEPTIBLE POPULATIONS

- IN** 26. Pasteurized foods used; No prohibited foods

ADDITIVES AND TOXIC SUBSTANCES

- IN** 27. Food additives: approved & properly used
- IN** 28. Toxic substances identified, stored, & used

APPROVED PROCEDURES

- IN** 29. Variance/specialized process/HACCP

Inspector Signature:

Client Signature:

Form Number: DH 4023 03/18

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Good Retail Practices

SAFE FOOD AND WATER

- 30. Pasteurized eggs used where required
- 31. Water & ice from approved source
- 32. Variance obtained for special processing

FOOD TEMPERATURE CONTROL

- 33. Proper cooling methods; adequate equipment
- 34. Plant food properly cooked for hot holding
- 35. Approved thawing methods
- 36. Thermometers provided & accurate

FOOD IDENTIFICATION

- 37. Food properly labeled; original container

PREVENTION OF FOOD CONTAMINATION

- 38. Insects, rodents, & animals not present
- 39. No Contamination (preparation, storage, display)
- 40. Personal cleanliness
- 41. Wiping cloths: properly used & stored
- 42. Washing fruits & vegetables

PROPER USE OF UTENSILS

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

- 46. Slash resistant/cloth gloves used properly

UTENSILS, EQUIPMENT AND VENDING

- 47. Food & non-food contact surfaces
- 48. Ware washing: installed, maintained, & used; test strips
- 49. Non-food contact surfaces clean

PHYSICAL FACILITIES

- 50. Hot & cold water available; adequate pressure
- 51. Plumbing installed; proper backflow devices
- 52. Sewage & waste water properly disposed
- 53. Toilet facilities: supplied, & cleaned
- 54. Garbage & refuse disposal
- 55. Facilities installed, maintained, & clean
- 56. Ventilation & lighting
- 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

Violation #21. Hot holding temperatures
Observed CKN Wings holding at 105F - Removed - Replaced - COS

CODE REFERENCE: 64E-11.003(2). PHF/TCS foods, which are held hot and not subject to an approved HACCP plan, must be maintained at 135°F.

Violation #23. Date marking and disposition
Observed frozen foods on serving trays (Covered) without date markings - COS
CODE REFERENCE: 64E-11.003(2). PHF/TCS foods, which are RTE and held refrigerated for more than 24 hours, shall be properly date marked unless otherwise exempted.

Inspector Signature:

Client Signature:

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General Comments

Routine Inspection
~1500 students
4 Serving Lines
Hot Boxes/Grab & Go/Fresh Express/ Entrées

Hot Holding:
CKN Drummies (pulled from oven) 167F
Wings 137F/159F (multiple stations)
Pizza 138F
CKN Sand 154F
Meatballs 161F
Taco Meat 171F

Cold Holding:

Reach In Freezer -2F
All items stored correctly
Observed no date-markings - COS

Walk-In Freezer -2F
Stored Correctly
Compliant

Walk-In Cooler 32F
Corn 39F
Apple Juice 27F

Milk Cooler (kitchen area) 39F
Choc Milk 33F

Email Address(es): draper.keri@brevardschools.org;

Inspection Conducted By: CJ Gerndt (905137)
Inspector Contact Number: Work: (321) 615-9401 ex.
Print Client Name: K. Draper
Date: 9/27/2023

Inspector Signature:

Handwritten signature of CJ Gerndt.

Client Signature:

Handwritten signature of K. Draper.

Form Number: DH 4023 03/18

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