

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



\*\*\*\* McFeeKA 10/6/2023 6:04:16 PM \*\*\*\*

**Facility Information**

**RESULT: Satisfactory**

Permit Number: 05-48-01133  
Name of Facility: Atlantis Elem School Cafeteria  
Address: 7300 Briggs Avenue  
City, Zip: Cocoa 32927

Type: School (9 months or less)  
Owner: Brevard County School Board  
Person In Charge: Cooper, Christine Phone: (321) 633-6840  
PIC Email: cooper.christine@brevardschools.org

**Inspection Information**

Purpose: Routine  
Inspection Date: 10/5/2023  
Correct By: Next Inspection  
**Re-Inspection Date: None**

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

Begin Time: 11:20 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
- IN** 21. Hot holding temperatures
- 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**

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

Inspector Signature:

Client Signature:

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**Good Retail Practices**

<p><b>SAFE FOOD AND WATER</b></p> <p><u>IN</u> 30. Pasteurized eggs used where required</p> <p><u>IN</u> 31. Water &amp; ice from approved source</p> <p><u>NA</u> 32. Variance obtained for special processing</p> <p><b>FOOD TEMPERATURE CONTROL</b></p> <p><u>IN</u> 33. Proper cooling methods; adequate equipment</p> <p><u>IN</u> 34. Plant food properly cooked for hot holding</p> <p><u>IN</u> 35. Approved thawing methods</p> <p><u>IN</u> 36. Thermometers provided &amp; accurate</p> <p><b>FOOD IDENTIFICATION</b></p> <p><u>IN</u> 37. Food properly labeled; original container</p> <p><b>PREVENTION OF FOOD CONTAMINATION</b></p> <p><u>IN</u> 38. Insects, rodents, &amp; animals not present</p> <p><u>IN</u> 39. No Contamination (preparation, storage, display)</p> <p><u>IN</u> 40. Personal cleanliness</p> <p><u>IN</u> 41. Wiping cloths: properly used &amp; stored</p> <p><u>NO</u> 42. Washing fruits &amp; vegetables</p> <p><b>PROPER USE OF UTENSILS</b></p> <p><u>IN</u> 43. In-use utensils: properly stored</p> <p><u>IN</u> 44. Equipment &amp; linens: stored, dried, &amp; handled</p> <p><u>IN</u> 45. Single-use/single-service articles: stored &amp; used</p>	<p><u>NA</u> 46. Slash resistant/cloth gloves used properly</p> <p><b>UTENSILS, EQUIPMENT AND VENDING</b></p> <p><u>IN</u> 47. Food &amp; non-food contact surfaces</p> <p><u>IN</u> 48. Ware washing: installed, maintained, &amp; used; test strips</p> <p><u>IN</u> 49. Non-food contact surfaces clean</p> <p><b>PHYSICAL FACILITIES</b></p> <p><u>IN</u> 50. Hot &amp; cold water available; adequate pressure</p> <p><u>IN</u> 51. Plumbing installed; proper backflow devices</p> <p><u>IN</u> 52. Sewage &amp; waste water properly disposed</p> <p><u>IN</u> 53. Toilet facilities: supplied, &amp; cleaned</p> <p><u>IN</u> 54. Garbage &amp; refuse disposal</p> <p><u>OUT</u> 55. Facilities installed, maintained, &amp; clean</p> <p><u>IN</u> 56. Ventilation &amp; lighting</p> <p><u>IN</u> 57. Permit; Fees; Application; Plans</p>
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*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**

<p>Violation #23. Date marking and disposition</p> <p>Observed 2 Italian and 12 ranch pre-packaged dressings expired July-August of 2023. Do not serve expired foods, go thru fifo periodically and discard expired food. Manager discarded voluntarily, COS.</p> <p>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.</p>
<p>Violation #55. Facilities installed, maintained, &amp; clean</p> <p>Observed thick dust accumulation on the vent in the bathroom and above 3-comp sinks. Clean the vents and have a routine clean up to avoid such build up. Observed wall damage above the 3-comp sinks, it apperas damp but no water leak observed at the time. Repair it. Observed light cover is coming off in food dry storage room; secure it. Observed an opening to the ceiling by metal pipes located in utility room next to staff bathroom; seal it.</p> <p>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.</p>

**Inspector Signature:**

**Client Signature:**

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**General Comments**

Notes: All violation to be corrected by next routine. City water and sewer. Full food service. Staff training 8/2023. Hot and cold water to the sinks. 3-comp sinks w Quat, strips onstie, tested at 200ppm. All coolers below 41 df, freezers below 0 df. Food temps: Cheese pizza, lasagnea, corn, mixed veggies, chicken sandwiches, ham n cheese sandwiches temped at 145-179 df, hot box set at 162 df, kale salad, vegie diper cups, fruit cups, regular salad, cheese stick, milk temped at 34-39 df. Time temp contorl log onsite. Bathroom sanitary w supplies.

- Hepatitis A Virus Alert for Food Workers: <[http://ww11.doh.state.fl.us/comm/\\_partners/hepatitis\\_a/Hep\\_A\\_Facts/hepA\\_foodworkers\\_17x11\\_4-11.pdf](http://ww11.doh.state.fl.us/comm/_partners/hepatitis_a/Hep_A_Facts/hepA_foodworkers_17x11_4-11.pdf)>
- Hepatitis A Disinfection Guide for Public Restrooms:  
<[http://ww11.doh.state.fl.us/comm/\\_partners/hepatitis\\_a/Hep\\_A\\_Facts/hepA\\_disinfection\\_17x11\\_public.pdf](http://ww11.doh.state.fl.us/comm/_partners/hepatitis_a/Hep_A_Facts/hepA_disinfection_17x11_public.pdf)>
- Please view the following webpage for educational material on proper handwashing: <<https://www.cdc.gov/handwashing/show-me-the-science.html>>

Email Address(es): cooper.christine@brevardschools.org;  
cooper.christine@brevardschools.org

Inspection Conducted By: Tasneem Wolfe (084201)  
Inspector Contact Number: Work: (321) 615-9377 ex.  
Print Client Name: Cooper, Christine  
Date: 10/5/2023

Inspector Signature:

Handwritten signature of Tasneem Wolfe.

Client Signature:

Handwritten signature of Christine Cooper.

Form Number: DH 4023 03/18

05-48-01133 Atlantis Elem School Cafeteria