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



#### **Facility Information**

#### **RESULT:** Satisfactory

Permit Number: 17-48-00184 Name of Facility: Bellview Elementary School Address: 4425 Bellview Avenue City, Zip: Pensacola 32526

Type: School (more than 9 months) **Owner: Escambia County School District** Person In Charge: Lakysha Tolbert Phone: 850-941-6067 PIC Email: mgr0051@ecsdfl.us

#### **Inspection Information**

Purpose: Routine Inspection Date: 2/19/2025 Correct By: None **Re-Inspection Date: None**  Number of Risk Factors (Items 1-29): 0 Number of Repeat Violations (1-57 R): 0 FacilityGrade: N/A StopSale: No

Begin Time: 11:14 AM End Time: 11:38 AM

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
- 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
- T. 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
- NO 12. Food received at proper temperature
- IN 13. Food in good condition, safe, & unadulterated
- 14. Shellstock tags & parasite destruction NA

## 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
- NO 20. Cooling time and temperature
- IN 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 IN 26. Pasteurized foods used; No prohibited foods
- ADDITIVES AND TOXIC SUBSTANCES
- NA 27. Food additives: approved & properly used 28. Toxic substances identified, stored, & used IN
- APPROVED PROCEDURES
- NA 29. Variance/specialized process/HACCP

**Inspector Signature:** 

Reel fritz

Form Number: DH 4023 03/18

Loyla Toh

**Client Signature:** 

17-48-00184 Bellview Elementary School

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



# **Good Retail Practices**

## SAFE FOOD AND WATER

- IN 30. Pasteurized eggs used where required
- IN 31. Water & ice from approved source
- NA 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
- N 43. In-use utensils: properly stored
- N 44. Equipment & linens: stored, dried, & handled
- N 45. Single-use/single-service articles: stored & used

- NO 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
- IN 51. Plumbing installed; proper backflow devices
- IN 52. Sewage & waste water properly disposed
- IN 53. Toilet facilities: supplied, & cleaned

IN 57. Permit; Fees; Application; Plans

IN 54. Garbage & refuse disposal IN 55. Facilities installed, maintained, & clean

IN 56. Ventilation & lighting

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**

No Violation Comments Available

Inspector Signature:

Reel fortz

**Client Signature:** 

Laylar Tom

Form Number: DH 4023 03/18

17-48-00184 Bellview Elementary School

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



# **General Comments**

Notes:

Temperature reported in degrees Fahrenheit (F), not all inclusive: Milk cooler: Milk 41F WIC: 35F Ambient/ Milk White 35F, yogurt cup 35F WIF: -8F Sanitizer at 3-comp sink: 200 PPM Serving line: Baked chicken 160F/Steamed Broccoli 133F

Email Address(es): mgr0051@ecsdfl.us; ggenung@ecsdfl.us; EJones2@ecsdfl.us; bbrantley@ecsdfl.us; jhiggins@ecsdfl.us; jdavis11@ecsdfl.us; custodialgeneral@ecsdfl.us

Inspection Conducted By: LeeAnn Lutz (003359) Inspector Contact Number: Work: (850) 595-6700 ex. 2051 Print Client Name: Jeremy King Date: 2/19/2025

**Inspector Signature:** 

Reel fritz

**Client Signature:** 

Loylar Tom

Form Number: DH 4023 03/18

17-48-00184 Bellview Elementary School