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



Facility Information

RESULT: Satisfactory

Permit Number: 13-48-1368301 Name of Facility: MAST Medical Academy for Science and Technology/ Loc.# 7171 Address: 1220 NW 1 Avenue City, Zip: Homestead 33030

Type: School (more than 9 months) Owner: Miami-Dade County School Board Person In Charge: Miami-Dade County School Board - Sandra Granda PIC Email: sandragranda@dadeschools.net Phone: (786) 275-0400

Inspection Information

Purpose: Routine Inspection Date: 5/10/2024 Correct By: Next Inspection **Re-Inspection Date: None** Number of Risk Factors (Items 1-29): 1 Number of Repeat Violations (1-57 R): 0 FacilityGrade: N/A StopSale: No Begin Time: 01:00 PM End Time: 02:00 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
- N 2. Certified Manager/Person in charge present EMPLOYEE HEALTH
- IN 3. Knowledge, responsibilities and reporting
- IN 4. Proper use of restriction and exclusion
- N 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 N. 8. Hands clean & properly washed
- N 9. No bare hand contact with RTE food
- 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 NO 18. Cooking time & temperatures
- NO 19. Reheating procedures for hot holding
- IN 20. Cooling time and temperature
- OUT 21. Hot holding temperatures (COS)
 - IN 22. Cold holding temperatures
 - IN 23. Date marking and disposition
- NA 24. Time as PHC; procedures & records CONSUMER ADVISORY
- N 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
- N 28. Toxic substances identified, stored, & used APPROVED PROCEDURES
- NA 29. Variance/specialized process/HACCP

Inspector Signature:
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Client Signature:

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Form Number: DH 4023 03/18

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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
- NO 34. Plant food properly cooked for hot holding
- NO 35. Approved thawing methods
- IN 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
- NO 42. Washing fruits & vegetables
 - PROPER USE OF UTENSILS
- IN 43. In-use utensils: properly stored
- IN 44. Equipment & linens: stored, dried, & handled
- N 45. Single-use/single-service articles: stored & used

- NA 46. Slash resistant/cloth gloves used properly UTENSILS, EQUIPMENT AND VENDING
- OUT 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
- 51. Plumbing installed; proper backflow devices
- IN 52. Sewage & waste water properly disposed
- N 53. Toilet facilities: supplied, & cleaned

IN 57. Permit; Fees; Application; Plans

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

N 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

Violation #21. Hot holding temperatures

Observed pizza temperature at 119F. TCS food needs to be at a minimum of 135F or higher. Reheat pizza to 165F and maintain minimum required hot holding of 135F or higher. PIC reheated pizza to 166F (corrected on site).

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 #47. Food & non-food contact surfaces

Observed damaged warmer door hinge and gasket. Repair or replace warmer door hinge and gasket.

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

Inspector Signature:

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General Comments

Satisfactory

Temperatures Recorded with thermapen thermometer:

Handwashing sink 126F 3-compartment sink 124F Bathroom sink 105F Mop sink 121F

Reach in fridge 1 40F Walk in fridge 37F; cheese 39F Walk in freezer -7F

Hot line: Fish sandwhich 135F Pizza 166F

Warmer: pizza 164F

Email Address(es): sandragranda@dadeschools.net; rbaril@dadeschools.net; dcadaval@dadeschools.net

Inspection Conducted By: Raad Farhang (913251) Inspector Contact Number: Work: (305) 623-3575 ex. Print Client Name: Sandra Granda Date: 5/10/2024

Inspector Signature:

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Client Signature:

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