

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



Facility Information

RESULT: Satisfactory

Permit Number: 13-48-1367846
Name of Facility: Eugenia B. Thomas, MLC/ Loc.#0071A
Address: 5950 NW 114 Avenue
City, Zip: Miami 33178

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

Inspection Information

Purpose: Routine	Number of Risk Factors (Items 1-29): 0	Begin Time: 10:00 AM
Inspection Date: 12/11/2023	Number of Repeat Violations (1-57 R): 0	End Time: 11:20 AM
Correct By: Next Inspection	Facility Grade: N/A	
Re-Inspection Date: None	Stop Sale: 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

- 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

- NO** 18. Cooking time & temperatures
- NO** 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
- IN** 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

- 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:

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

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

FOOD IDENTIFICATION

- IN 37. Food properly labeled; original container

PREVENTION OF FOOD CONTAMINATION

- OUT 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

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

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

Inspector Signature:

Client Signature:

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



Violations Comments

Violation #33. Proper cooling methods; adequate equipment

Observations:

Walk-in-Freezer Not Working at All. Notification # 10464965. Work Order # Pending.
Repair Walk-in-Freezer.

CODE REFERENCE: 64E-11.003(2). Proper methods shall be used for cooling in accordance with Rule requirements. There should be enough equipment to meet the demand of the food operation.

Violation #38. Insects, rodents, & animals not present

Observations:

Air Curtains Not Working:

1. KITCHEN EXIT DOOR (air curtains not working). Notification # 10464966. Work Orde # Pending.
Repair and/or provide air curtains on Kitchen EXIT door.

CODE REFERENCE: 64E-11.003(5)(f). Effective measures shall be taken to control the presence of pests in the food establishment. Unless otherwise approved, live animals shall not be allowed.

Violation #47. Food & non-food contact surfaces

Observations:

1. Serving Line # 3 not heating properly. Notification Number: 10465052.
Repair and/or replace Serving Line # 3.

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

Violation #56. Ventilation & lighting

Observations:

Hood System in food prep area Not Working Properly (complaints about Gas needed).
Notification # 10465052. Work Order # Pending.
Repair Hood System in food prep area.

CODE REFERENCE: 64E-11.003(6)(a). Adequate exhaust ventilation hood systems in food prep and warewashing areas shall be provided and designed. 50 foot candles shall be at surfaces where employees work with food and 20 foot candles shall be at surfaces where food is provided to consumers.

General Comments

Food Inspection.

MLC Cafeteria.

Catered Facility (from Main Kitchen in K-8/PLC).

Julio Fong (Principal).

Morris Salty (Assistant principal) and Heidi Muneton (Staff), assisted with inspection.

Kenya Brant (Cafeteria Manager).

Handwash Sink: Water temperature 116.7°F.

Three sink (3)-compartments: Water temperature 119.6°F.

Walk-in-Cooler temperature 38°F.

Refrigerator temperature 35°F.

Cold-holding: Chocolate milk (Mac Arthur from milk-box) temperature 40.2°F.

Cold-holding: Side salad temperature 40.1°F.

Hot-holding: Oriental rice temperature 143.9°F.

Hot-holding: Mashed potatoes temperature 174.4°F.

Hot-holding: Pizza crunch temperature 157.8°F.

Hot-holding: Chicken wings temperature 142.8°F.

Inspector Signature:

Client Signature:

Form Number: DH 4023 03/18

13-48-1367846 Eugenia B. Thomas, MLC/ Loc.#0071A

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



Email Address(es): jfong@dadeschools.net;
ipalacio@dadeschools.net;
mwertz@dadeschools.net;
wcabrera@dadeschools.net;
kbrant@dadeschools.net;
moesalthy@dadeschools.net;
lsmith3@dadeschools.net;

Inspection Conducted By: Alberto Reyes (032763)
Inspector Contact Number: Work: (305) 623-3500 ex.
Print Client Name:
Date: 12/11/2023

Inspector Signature:

Handwritten signature of the inspector, appearing to be "AR".

Client Signature:

Handwritten signature of the client, appearing to be "KMS".