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



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## **Facility Information**

Permit Number: 36-48-00660

Name of Facility: Oasis Charter Middle School

Address: 3507 Oasis Boulevard City, Zip: Cape Coral 33914

Type: School (more than 9 months)

Owner: City of Cape Coral Charter School Authority\*

Phone: (239) 283-4511 Person In Charge: Ossichak, Mary

Inspection Information

Purpose: Routine

Inspection Date: 9/25/2017 End Time: 12:00 PM

**Additional Information** 

No Additional Information Available

Items marked below violate the requirements of Chapter 64E-11 of the Florida Administrative Code and must be corrected. Continued operation of this facility without making these corrections is a violation of Chapter 64E-11, Florida Administrative Code and Chapters 381 and 386, Florida Statutes. Violations must be corrected by the date and time indicated in the Results section above or an administrative fine or other legal action will be initiated.

### **Violation Markings**

FOOD SUPPLIES

1. Sources, etc. FOOD PROTECTION

2. Stored temperature

3. No further cooking/Rapid cooling

4. Thawing

5. Raw fruits

6. Pork cooking

7. Poultry cooking

8. Other animal cooking

9. Least contact/Reheating

10. Food container

11. Buffet requirements

12. Self-service condiments

13. Reservice of food

14. Sneeze guards

15. Transportation of food

16. Poisonous/Toxic materials

**PERSONNEL** 

17. Exclusion of personnel

18. Cleanliness

19. Tobacco use

20. Handwashing

21. Handling of dishware

**EQUIPMENT/UTENSILS** 

X 22. Refrigeration facilities/Thermometers

23. Sinks

24. Ice storage/Counter-protector

25. Ventilation/Storage/Sufficient equipment

26. Dishwashing facilities

27. Design and fabrication

28. Installation and location 29. Cleanliness of equipment

30. Methods of washing

SANITARY FACILITIES AND CONTROLS

31. Water supply

32. Ice

33. Sewage

34. Plumbing

35. Toilet facilities

Begin Time: 11:30 AM

X 36. Handwashing facilities

37. Garbage disposal

38. Vermin control

OTHER FACILITIES AND OPERATIONS

39. Other facilities and operations

**RESULT: Satisfactory** 

Correct By: Next Inspection

Re-Inspection Date: None

TEMPORARY FOOD SERVICE EVENTS

40. Temporary food service events

VENDING MACHINES 41. Vending machines

MANAGER CERTIFICATION

42. Manager certification

CERTIFICATES AND FEES 43. Certificates and fees

INSPECTION/ENFORCEMENT

44. Inspection/Enforcement

**Inspector Signature:** 

Many Form Number: DH 4023 01/05 Client Signature:

Daniele Jessen

36-48-00660 Oasis Charter Middle School

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## **General Comments**

NOTE: Fritata 40F; sausage 178F; True 39F; Delfield 35F; milk 40F; sandwich cooler 32F; milk cooler 35F; True 41F; quaternary ammonium 200ppm; hot water greater than 100F throughout.

NOTE: Outdoor walk-in freezer shared with elementary school.

NOTE: Returned at 1:35PM to recheck hot water.

Email Address(es): mary.ossichak@capecharterschools.org; danielle.jensen@capecharterschools.org; maintenanceteam@capecharterschools.org

## **Violations Comments**

Violation #22. Refrigeration facilities/Thermometers

- Thermometer missing in 1 of 3 warming cabinets. - CORRECTED

CODE REFERENCE: Refrigerators. 64E-11.006(1), (1)(a). There will be sufficient, working, refrigerators. Each refrigerator will have a working thermometer.

Violation #36. Handwashing facilities

- No hot water at hand sinks. - NOTE: Fuses blown after generator. Facility has fixed the issue. Hot water tank is 130 gallons and it is taking time for the water to reach 100F. - CORRECTED

CODE REFERENCE: Handwashing Sinks. 64E-11.007(5). Handwashing facilities will be located in employees' restrooms, food prep areas, and in mechanical dishwashing areas.

Inspection Conducted By: Louise Chang (86346) Inspector Contact Number: Work: (239) 690-2100 ex.

Print Client Name: Date: 9/25/2017

Inspector Signature:

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Client Signature:

Daniell Jesson

Form Number: DH 4023 01/05 36-48-00660 Oasis Charter Middle School