Facility Information

<table>
<thead>
<tr>
<th>Permit Number:</th>
<th>16-48-00773</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name of Facility:</td>
<td>Crown Point Elem 245</td>
</tr>
<tr>
<td>Address:</td>
<td>3800 Crown Point Road</td>
</tr>
<tr>
<td>City, Zip:</td>
<td>Jacksonville 32257</td>
</tr>
<tr>
<td>Type:</td>
<td>School (9 months or less)</td>
</tr>
<tr>
<td>Owner:</td>
<td>Duval County School Board</td>
</tr>
<tr>
<td>Person In Charge:</td>
<td>Yomaira Santiago FM</td>
</tr>
<tr>
<td>Phone:</td>
<td>904-260-5812</td>
</tr>
<tr>
<td>PIC Email:</td>
<td><a href="mailto:Yomaira.Santiago@compass-usa.com">Yomaira.Santiago@compass-usa.com</a></td>
</tr>
</tbody>
</table>

Inspection Information

| Purpose: | Routine |
| Inspection Date: | 12/17/2019 |
| Correct By: | Next Inspection |
| 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: | 08:00 AM |
| End Time: | 09:30 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
  - 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
  - NO 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
  - NA 24. Time as PHC; procedures & records

- **CONSUMER ADVISORY**
  - NA 25. Advisory for raw/undercooked food
  - NA 26. Pasteurized foods used; No prohibited foods

- **HIGHLY SUSCEPTIBLE POPULATIONS**
  - IN 27. Food additives: approved & properly used
  - IN 28. Toxic substances identified, stored, & used

- **ADDITIVES AND TOXIC SUBSTANCES**
  - NA 29. Variance/specialized process/HACCP

Inspector Signature: [Signature]

Client Signature: [Signature]

Form Number: DH 4023  03/18  16-48-00773  Crown Point Elem 245
Good Retail Practices

**SAFE FOOD AND WATER**
- In 30. Pasteurized eggs used where required
- NA 32. Variance obtained for special processing

**FOOD TEMPERATURE CONTROL**
- Out 33. Proper cooling methods; adequate equipment
- In 34. Plant food properly cooked for hot holding
- In 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
- 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**
- 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 54. Garbage & refuse disposal
- Out 55. Facilities installed, maintained, & clean
- In 56. Ventilation & lighting
- In 57. Permit; Fees; Application; Plans

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**Violations Comments**

Violation #33. Proper cooling methods; adequate equipment
One of the milk boxes is out of service- Manager says using ice to serve product
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 #56. Ventilation & lighting
The light is out in the rear restroom
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.

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General Comments

Permits and log observations:
Permit on display
Observed required policies and procedures posted on walls (could not locate the one that deals with specific foodborne illnesses)

Kitchen/Staff observations:
All hand sinks supplied with soap and towels
All items dated
Observed test strips and proper sink set-up (400 ppm)
No pests observed
Dumpster area clean
Observed proper calibration of thermometer and glove usage (including slash resistant gloves)
Walk in cooler 44F (door has been open)-- Milk inside 38 F
Walk in Freezer 9F
One milk box down, the other at 38 F
Reach in coolers 41 F, 40 F
Reach in freezer -3FHOT box 182F, 190 F
Discussed knowledge of foodborne illnesses

Email Address(es): Yomaira.Santiago@compass-usa.com

Inspection Conducted By: Henry Klesh  (49187)
Inspector Contact Number: Work: (904) 253-2431 ex.
Print Client Name: Yomaira Santiago
Date: 12/17/2019