**Facility Information**

- **Permit Number:** 16-48-00482
- **Name of Facility:** S. P. Livingston Elementary #149
- **Address:** 1128 Barber Street
- **City, Zip:** Jacksonville 32209
- **Type:** School (9 months or less)
- **Owner:** Duval County School Board
- **Person In Charge:** Montoya Riley
- **Phone:** 904-630-6581
- **PIC Email:** montoya.riley@compass-usa.com

**Inspection Information**

- **Purpose:** Routine
- **Inspection Date:** 7/10/2019
- **Correct By:** None
- **Re-Inspection Date:** None
- **Number of Risk Factors (Items 1-29):** 0
- **Number of Repeat Violations (1-57 R):** 0
- **Facility Grade:** N/A
- **Stop Sale:** No
- **Begin Time:** 01:01 PM
- **End Time:** 01:30 PM

**Foodborne Illness Risk Factors And Public Health Interventions**

<table>
<thead>
<tr>
<th>SUPERVISION</th>
<th>1. Demonstration of Knowledge/Training</th>
</tr>
</thead>
<tbody>
<tr>
<td>EMPLOYEE HEALTH</td>
<td>2. Certified Manager/Person in charge present</td>
</tr>
<tr>
<td>GOOD HYGIENIC PRACTICES</td>
<td>3. Knowledge, responsibilities and reporting</td>
</tr>
<tr>
<td>PREVENTING CONTAMINATION BY HANDS</td>
<td>4. Proper use of restriction and exclusion</td>
</tr>
<tr>
<td>PROTECTION FROM CONTAMINATION</td>
<td>5. Responding to vomiting &amp; diarrheal events</td>
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<tr>
<td></td>
<td>IN 6. Proper eating, tasting, drinking, or tobacco use</td>
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<td></td>
<td>IN 7. No discharge from eyes, nose, and mouth</td>
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<tr>
<td>APPROVED SOURCE</td>
<td>IN 8. Hands clean &amp; properly washed</td>
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<tr>
<td></td>
<td>IN 9. No bare hand contact with RTE food</td>
</tr>
<tr>
<td></td>
<td>IN 10. Handwashing sinks, accessible &amp; supplies</td>
</tr>
<tr>
<td></td>
<td>NA 11. Food obtained from approved source</td>
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<tr>
<td></td>
<td>IN 12. Food received at proper temperature</td>
</tr>
<tr>
<td>HIGHLY SUSCEPTIBLE POPULATIONS</td>
<td>IN 13. Food in good condition, safe, &amp; unadulterated</td>
</tr>
<tr>
<td>ADDITIVES AND TOXIC SUBSTANCES</td>
<td>IN 14. Shellstock tags &amp; parasite destruction</td>
</tr>
<tr>
<td>APPROVED PROCEDURES</td>
<td>IN 15. Food separated &amp; protected; Single-use gloves</td>
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<tr>
<td></td>
<td>IN 16. Food-contact surfaces; cleaned &amp; sanitized</td>
</tr>
<tr>
<td></td>
<td>NO 17. Proper disposal of unsafe food</td>
</tr>
<tr>
<td>TIME/TEMPERATURE CONTROL FOR SAFETY</td>
<td>NO 18. Cooking time &amp; temperatures</td>
</tr>
<tr>
<td></td>
<td>NO 19. Reheating procedures for hot holding</td>
</tr>
<tr>
<td></td>
<td>IN 20. Cooling time and temperature</td>
</tr>
<tr>
<td></td>
<td>NO 21. Hot holding temperatures</td>
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<tr>
<td></td>
<td>IN 22. Cold holding temperatures</td>
</tr>
<tr>
<td></td>
<td>IN 23. Date marking and disposition</td>
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<tr>
<td></td>
<td>NA 24. Time as PHC; procedures &amp; records</td>
</tr>
<tr>
<td>CONSUMER ADVISORY</td>
<td>NA 25. Advisory for raw/undercooked food</td>
</tr>
<tr>
<td>HIGHLY SUSCEPTIBLE POPULATIONS</td>
<td>NA 26. Pasteurized foods used; No prohibited foods</td>
</tr>
<tr>
<td>ADDITIVES AND TOXIC SUBSTANCES</td>
<td>NA 27. Food additives: approved &amp; properly used</td>
</tr>
<tr>
<td>APPROVED PROCEDURES</td>
<td>NA 28. Toxic substances identified, stored, &amp; used</td>
</tr>
<tr>
<td></td>
<td>NA 29. Variance/specialized process/HACCP</td>
</tr>
</tbody>
</table>

**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
Good Retail Practices

SAFE FOOD AND WATER
30. Pasteurized eggs used where required
31. Water & ice from approved source
32. Variance obtained for special processing

FOOD TEMPERATURE CONTROL
33. Proper cooling methods; adequate equipment
34. Plant food properly cooked for hot holding

FOOD IDENTIFICATION
35. Approved thawing methods
36. Thermometers provided & accurate

PREVENTION OF FOOD CONTAMINATION
37. Food properly labeled; original container
38. Insects, rodents, & animals not present
39. No Contamination (preparation, storage, display)
40. Personal cleanliness
41. Wiping cloths: properly used & stored
42. Washing fruits & vegetables

PROPER USE OF UTENSILS
43. In-use utensils: properly stored
44. Equipment & linens: stored, dried, & handled
45. Single-use/single-service articles: stored & used
46. Slash resistant/cloth gloves used properly

UTENSILS, EQUIPMENT AND VENDING
47. Food & non-food contact surfaces clean
48. Ware washing: installed, maintained, & used; test strips
49. Non-food contact surfaces clean

PHYSICAL FACILITIES
50. Hot & cold water available; adequate pressure
51. Plumbing installed; proper backflow devices
52. Sewage & waste water properly disposed
53. Toilet facilities: supplied, & cleaned
54. Garbage & refuse disposal
55. Facilities installed, maintained, & clean
56. Ventilation & lighting
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.

Violations Comments
No Violation Comments Available

General Comments
Test strips 200 ppm on site sink not set up, staff training log. New policies on clean-up vomit and diarrheal and permit are posted. Handwashing signs are posted and soap and paper towels, hot and cold running water. Condition satisfactory

Email Address(es): montoya.riley@compass-usa.com;
kathleen.thomas@compass-usa.com;
william.ratley@compass-usa.com

Inspection Conducted By: Fredrick Polite (4212)
Inspector Contact Number: Work: (904) 253-1280 ex. 2570
Print Client Name: Montoya Riley
Date: 7/10/2019

Inspector Signature: Fredrick Polite
Client Signature: Montoya Riley

Form Number: DH 4023 03/18
16-48-00482 S. P. Livingston Elementary #149