

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



**Facility Information**

RESULT: Satisfactory

Permit Number: 13-48-14822  
Name of Facility: William Lehman Elementary School  
Address: 10990 SW 113th Place  
City, Zip: Miami 33176  
  
Type: School (more than 9 months)  
Owner: M-DCSB Food and Nutrition  
Person In Charge: Ada Montero Phone: 305 273-2140  
PIC Email: tmargoa@dadeschools.net

**Inspection Information**

Purpose: Routine	Number of Risk Factors (Items 1-29): 1	Begin Time: 11:30 AM
Inspection Date: 4/30/2019	Number of Repeat Violations (1-57 R): 0	End Time: 12:45 PM
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**

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

Client Signature:

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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
- 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

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 #23. Date marking and disposition

Provide labels for salad bag located in refrigerator.

CODE REFERENCE: 64E-11.003(2). PHF/TCS foods, which are RTE and held refrigerated for more than 24 hours, shall be properly date marked unless otherwise exempted.

Violation #55. Facilities installed, maintained, & clean

Replace/provide tiles inside the walk in refrigerator

CODE REFERENCE: 64E-11.003(5). Floors, walls, and ceilings shall be smooth, durable, easily cleanable, and non-absorbent. Exterior areas shall be kept cleaned.

General Comments

Note:

Hot vegetables: 140 oF- steam table

Stuffed mozzarella sandwich: 140 oF- warmer

Ham: 38 oF-walk in refrigerator

Email Address(es): tamargo@dadeschools.net;  
losuna@dadeschools.net

Inspector Signature:

Client Signature:

Form Number: DH 4023 03/18

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Inspection Conducted By: Maria Adrover (47452)  
Inspector Contact Number: Work: (305) 623-3500 ex.  
Print Client Name:  
Date: 4/30/2019

Inspector Signature:

*Maria Adrover*

Client Signature:

*William Lehman*

Form Number: DH 4023 03/18

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