

Food Establishment Inspection Report

Suffolk County Department of Health Services
 360 Yaphank Avenue Suite 2A
 Yaphank, NY 11980
 631-852-5999
 www.suffolkcountyny.gov/health



Date: 02/18/2022

Establishment Name SIGNAL HILL ELEMENTARY SC	Establishment Address 670 CALEDONIA RD	City/State HUNTINGTON STATION, NY	Zip Code 11746	Telephone
Facility ID # FA0001765	Permit Holder HALF HOLLOW HILLS CSD	Purpose of Inspection Premise/Facility Inspection	Result of Inspection Follow-up Action Required	
Owner HALF HOLLOW HILLS CSD	Owner Address 525 HALF HOLLOW RD, HUNTINGTON STATION NY 11746	Permit Restrictions S	Capacity 288 seats	

IN = In Compliance OUT = Out of Compliance N/A = Not Applicable N/O = Not Observed COS = Corrected On Site R = Repeat Violation NOC = Number of Occurrences

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

SUPERVISION		COMPLY BY DATE
1	01 - PERSON IN CHARGE PRESENT, EMPLOYEES TRAINED, DEMONSTRATES KNOWLEDGE	
	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> COS <input type="checkbox"/> R <input type="checkbox"/> NOC	
EMPLOYEE HEALTH		COMPLY BY DATE
2	02 - MANAGEMENT, RESPONSIBILITY, REPORTING	
	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> COS <input type="checkbox"/> R <input type="checkbox"/> NOC	
3	03 - PROPER USE OF EXCLUSION AND RESTRICTION OF ILL FOOD WORKERS	
	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> COS <input type="checkbox"/> R <input type="checkbox"/> NOC	
GOOD HYGIENIC PRACTICES		COMPLY BY DATE
4	04 - PROPER EATING, DRINKING, TASTING, TOBACCO USE	
	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/O <input type="checkbox"/> COS <input type="checkbox"/> R <input type="checkbox"/> NOC	
PREVENTING CONTAMINATION BY HANDS		COMPLY BY DATE
5	05 - NO BARE HAND CONTACT WITH READY-TO-EAT FOODS	
	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> N/O <input type="checkbox"/> COS <input type="checkbox"/> R <input type="checkbox"/> NOC	
6	06 - PROPER HANDWASHING	
	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/O <input type="checkbox"/> COS <input type="checkbox"/> R <input type="checkbox"/> NOC	
APPROVED SOURCE		COMPLY BY DATE
7	07 - FOOD OBTAINED FROM APPROVED SOURCE	
	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> N/O <input type="checkbox"/> COS <input type="checkbox"/> R <input type="checkbox"/> NOC	
8	08 - FOOD RECEIVED AT PROPER TEMPERATURES	
	<input type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A <input checked="" type="checkbox"/> N/O <input type="checkbox"/> COS <input type="checkbox"/> R <input type="checkbox"/> NOC	
9	09 - FOOD IN GOOD CONDITION, SAFE, UNADULTERATED	
	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> COS <input type="checkbox"/> R <input type="checkbox"/> NOC	
10	10 - REQUIRED RECORDS AVAILABLE - SHELLFISH TAGS, PARASITE DESTRUCTION	
	<input type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A <input type="checkbox"/> N/O <input type="checkbox"/> COS <input type="checkbox"/> R <input type="checkbox"/> NOC	
PROTECTION FROM CONTAMINATION		COMPLY BY DATE
11	11 - FOOD SEPARATED AND PROTECTED	
	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> N/O <input type="checkbox"/> COS <input type="checkbox"/> R <input type="checkbox"/> NOC	
12	12 - FOOD CONTACT SURFACES - CLEANED AND SANITIZED	
	<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> COS <input type="checkbox"/> R <input checked="" type="checkbox"/> NOC 1	02/18/2022
Violation Comments:		
760-1346.6 - Non-food contact surfaces of equipment shall be cleaned at such intervals as to be free of accumulations of dust, dirt, food particles, and other debris.		
THE GASKETS OF THE FOGEL F2 FREEZER HAD ACCUMULATED GRIME.		
CORRECTIVE ACTION: CLEAN IMMEDIATELY.		
13	13 - PROPER DISPOSITION OF RETURNED, PREVIOUSLY SERVED AND UNSAFE FOOD	
	<input type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/O <input type="checkbox"/> COS <input type="checkbox"/> R <input type="checkbox"/> NOC	
TCS FOOD TEMPERATURE/TIME		COMPLY BY DATE
14	14 - PROPER COOKING TIME AND TEMPERATURES, STEM THERMOMETER AVAILABLE AND USED	
	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> N/O <input type="checkbox"/> COS <input type="checkbox"/> R <input type="checkbox"/> NOC	

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FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

TCS FOOD TEMPERATURE/TIME		COMPLY BY DATE
15	15 - PROPER REHEATING PROCEDURES FOR HOT HOLDING <input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> N/O <input type="checkbox"/> COS <input type="checkbox"/> R <input type="checkbox"/> NOC	
16	16 - PROPER COOLING TIME AND TEMPERATURES <input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> N/O <input type="checkbox"/> COS <input type="checkbox"/> R <input type="checkbox"/> NOC	
17	17 - PROPER HOT AND COLD HOLDING TEMPERATURES <input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> N/O <input type="checkbox"/> COS <input type="checkbox"/> R <input type="checkbox"/> NOC	
18	18 - PROPER DATE MARKING PROCEDURES USED <input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> N/O <input type="checkbox"/> COS <input type="checkbox"/> R <input type="checkbox"/> NOC	
19	19 - TIME AS A PUBLIC HEALTH CONTROL - PROCEDURES AND RECORDS <input type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A <input type="checkbox"/> N/O <input type="checkbox"/> COS <input type="checkbox"/> R <input type="checkbox"/> NOC	
CONSUMER ADVISORY		COMPLY BY DATE
20	20 - CONSUMER ADVISORY PROVIDED FOR RAW AND UNDERCOOKED FOODS <input type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A <input type="checkbox"/> COS <input type="checkbox"/> R <input type="checkbox"/> NOC	
HIGHLY SUSCEPTIBLE POPULATIONS		COMPLY BY DATE
21	21 - PASTEURIZED FOODS USED, PROHIBITED FOODS NOT OFFERED <input type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A <input type="checkbox"/> COS <input type="checkbox"/> R <input type="checkbox"/> NOC	
CHEMICAL		COMPLY BY DATE
22	22 - FOOD ADDITIVES - APPROVED AND PROPERLY USED <input type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A <input type="checkbox"/> COS <input type="checkbox"/> R <input type="checkbox"/> NOC	
23	23 - CHEMICALS AND TOXIC MATERIALS STORED AND USED PROPERLY <input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> COS <input type="checkbox"/> R <input checked="" type="checkbox"/> NOC 1	02/18/2022
Violation Comments:		
760-1337.4 - When not in use, poisonous and toxic materials shall be stored in cabinets which are used for no other purpose, or in a place which is outside the food storage, preparation, display, and cleaned equipment and utensils storage areas. Bactericides and cleaning compounds shall not be stored in the same cabinet or area of the room with insecticides, rodenticides, or other poisonous materials.		
BOTTLES OF BLEACH WAS/WERE STORED IN THE STORAGE ROOM DIRTY ADJACENT TO CASES OF APPLE SAUCE, POTENTIALLY SUBJECTING THEM TO CONTAMINATION.		
CORRECTIVE ACTION: MOVED.		
24	24 - PERSONAL MEDICATIONS PROPERLY STORED <input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> N/O <input type="checkbox"/> COS <input type="checkbox"/> R <input type="checkbox"/> NOC	
CONFORMANCE WITH APPROVED PROCEDURES		COMPLY BY DATE
25	25 - COMPLIANCE WITH VARIANCE PROCEDURES <input type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A <input type="checkbox"/> COS <input type="checkbox"/> R <input type="checkbox"/> NOC	
ADDITIONAL IMMINENT HEALTH HAZARDS THAT MAY CONTRIBUTE TO FOODBORNE ILLNESS		COMPLY BY DATE
26	26 - RUNNING WATER PROVIDED WHERE REQUIRED <input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> COS <input type="checkbox"/> R <input type="checkbox"/> NOC	
27	27 - SEWAGE AND WASTEWATER PROPERLY DISPOSED <input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> COS <input type="checkbox"/> R <input type="checkbox"/> NOC	
SAFE FOOD, WATER AND ICE		COMPLY BY DATE

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FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

SAFE FOOD, WATER AND ICE

COMPLY BY DATE

28	28 - WATER AND ICE FROM APPROVED SOURCES	
	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/O <input type="checkbox"/> COS <input type="checkbox"/> R <input type="checkbox"/> NOC	

GOOD RETAIL PRACTICES

FOOD TEMPERATURE CONTROL

COMPLY BY DATE

33	33 - THERMOMETERS PROVIDED, ACCURATE, PROPERLY LOCATED	
	<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> N/O <input type="checkbox"/> COS <input type="checkbox"/> R <input checked="" type="checkbox"/> NOC 1	03/04/2022

Violation Comments:

760-1332.2 - Hot and cold food storage facilities shall be provided with an accurate indicating thermometer, maintained in good repair with an increment scale accurate to plus or minus 2°F (1°C). For hot food storage the thermometer shall register the temperature in the coldest part of the facility, and for cold storage the thermometer shall register the temperature of the warmest part of the facility in which temperature-controlled for safety (TCS) food is stored. The thermometer shall be of such type and so situated that it may be readily observed for temperature determination. Zone type thermometers without increment scales shall not be acceptable. Metal stem-type, numerically scaled, indicating thermometers, thermocouples, or thermistors, maintained in good repair and accurate to plus or minus 2°F (1°C) shall be provided and used by employees to monitor food temperatures for compliance with the requirements of this article.

THE FOGEL R1 REFRIGERATOR AND THE TRAUlsen REF2 WAS/WERE NOT EQUIPPED WITH AN ADEQUATE THERMOMETER.

UTENSILS, EQUIPMENT, WAREWASHING

COMPLY BY DATE

43	43 - NON-FOOD CONTACT SURFACES CLEAN, MAINTAINED, IN GOOD REPAIR	
	<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> N/O <input type="checkbox"/> COS <input type="checkbox"/> R <input checked="" type="checkbox"/> NOC 1	03/04/2022

Violation Comments:

760-1345.1 - Equipment and utensils shall be so designed and of such material and workmanship as to be smooth, easily cleanable, and durable, and shall be in good repair or shall be discarded; and the food contact surfaces of such equipment and utensils shall, in addition, be easily accessible for cleaning, nontoxic, corrosion resistant, relatively nonabsorbent and shall conform to approved design and construction standards.

THE GASKETS OF THE TRAUlsen REF 2 WAS/WERE FOUND TO BE IN POOR CONDITION IN THAT THEY WERE TORN.

PHYSICAL FACILITIES

COMPLY BY DATE

46	46 - PLUMBING MAINTAINED, PROPER BACKFLOW DEVICES	
	<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> N/O <input type="checkbox"/> COS <input type="checkbox"/> R <input checked="" type="checkbox"/> NOC 1	03/04/2022

Violation Comments:

760-1352.1.b - Plumbing shall be so sized, installed, and maintained as to carry adequate quantities of water to required locations throughout the establishment; as to prevent contamination of the water supply; as to properly convey sewage and liquid wastes from the establishment to the sewer, or sewage disposal system; and so that it does not constitute an actual or potential source of contamination of food, equipment or utensils or create an insanitary condition or nuisance. Liquid waste drain lines may not pass through food storage equipment, including ice machines or ice storage bins. (1) Plumbing fixtures such as hand washing sinks, toilets and urinals shall be cleaned as often as necessary to keep them clean. (2) A water filter, screen, and other water conditioning device installed on water lines shall be designed and located to facilitate disassembly for periodic service and cleaning. A water filter element shall be of the replaceable type. (3) A device such as a water treatment device or backflow preventer shall be located so that it may be readily serviced and maintained, and scheduled for inspection and service, in accordance with manufacturer's instructions and as necessary to prevent device failure based on local water conditions, and records demonstrating inspection and service shall be maintained by the person in charge.

THE WATER SUPPLY PIPE WAS NOTED LEAKING AT THE JUNCTION POINT OF THE MOP SINK.

Overall Inspection Comments:

THERMOMETER/THERMOCOUPLE ID #134
 JEANNE CAPANELLI, SAN ID # 134

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HELMY BADR, SAN ID# 840
 Suffolk County Department of Health Services
 Food Control Unit
 360 Yaphank Avenue, Suite 2A
 Yaphank, NY 11980
 Phone: (631) 852-5848
 Fax: (631) 852-5871

FOOD ESTABLISHMENTS ARE OBLIGATED TO OPERATE THEIR FACILITIES IN COMPLIANCE WITH ALL COVID-19 BUSINESS RE-OPENING ACTIVITY AND OPERATIONS GUIDANCE ISSUED BY THE STATE OF NEW YORK AND SUFFOLK COUNTY.

Inspection results are available online at <https://eco.suffolkcountyny.gov/#/pa1/search>

Risk Factors cited in consecutive inspections may result in enforcement action, including a possible hearing and fine.

THE FOOD MANAGER'S COURSE IS AVAILABLE ONLINE IN ENGLISH, SPANISH AND CHINESE!

To register for the Food Manager's course, please visit <https://apps2.suffolkcountyny.gov/Health/FdOnline/default.aspx>. Suffolk County FMC App and SIRF self-inspection app for mobile devices are available for download from Google Play and the Apple Store.

All food service establishment operators are required to post the following advisory on all menus (including website menus) and menu boards located inside or outside of the establishment: "Before placing your order, please inform your server if a person in your party has a food allergy". College, public and private school food operations are exempt.

Effective Jan. 1, 2020 all drinking straws and stirrers must be provided in food establishments by consumer request only, and must be made of biodegradable (non-plastic) material. Plastic drinking straws and stirrers may continue to be provided by request to consumers with a disability or medical condition. Additionally, Polystyrene (Styrofoam) may no longer be used. Effective July 1, 2021 the use of latex products is prohibited in all food establishments. Further information at <https://suffolkcountyny.gov/Departments/Health-Services/Public-Health-Protection/Plastics-and-Latex-Laws>

Suffolk County Local Law 29-2009 amended Chapter 437 (now Chapter 754) of the Suffolk County Code to prohibit "heating or ignition of an e-cigarette which creates a vapor" in all public places. The use of "E-CIGARETTES" IN ALL ESTABLISHMENTS WITH A SUFFOLK COUNTY FOOD PERMIT IS PROHIBITED, SUBJECT TO ALL PROVISIONS OF THE NY STATE CLEAN INDOOR AIR ACT AND SUFFOLK COUNTY LOCAL LAW.

EMPLOYEE SICK POLICY WAS DISCUSSED DURING THE INSPECTION:

Person in charge was reminded that all sick employees MUST be excluded from food service. No sick employee is permitted to return to work until they have been symptom-free for at least 24 hours; certain illnesses require that employees are tested prior to returning to work, even if symptom-free, or require further Department approval. Contact the Bureau of Public Health Protection for details. A log must be kept on-site documenting the exclusion of ill employees.

Schools:

TODAYS INSPECTION WAS LIMITED TO THE KITCHEN, SERVING LINES, STORAGE AREAS, WAREWASHING AREA, AND CAFETERIA. FOOD SERVICE BEYOND THESE AREAS WERE NOT INSPECTED AND ARE NOT "COVERED" UNDER THE FOOD SERVICE PERMIT ISSUED BY THIS AGENCY. FOOD SERVICE SUCH AS BUT NOT LIMITED TO OUTDOOR BBQS, SPORT FIELD CONCESSIONS, CLUBS LIKE DECA OR SWIM CLUBS, SCHOOL STORES AND FUND RAISING EVENTS THAT INVOLVE FOOD SERVICE MAY REQUIRE A SEPARATE PERMIT OR TEMPORARY EVENT PERMIT. CONTACT THIS DEPARTMENT OR VISIT THE COUNTY WEBSITE FOR APPLICATIONS/QUESTIONS. OPERATING WITHOUT A PERMIT IS SUBJECT TO LEGAL ACTION.

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Signatures

 Helmy Badr

Helmy.Badr@suffolkcountyny.gov

"The items noted above are violations of applicable laws, rules and regulations found during an inspection of the operation of the facilities in this establishment which must be corrected as indicated. Failure to comply may result in the initiation of legal action against this establishment as provided for in Articles 2 and 13 of the Suffolk County Sanitary Code including a hearing, possible suspension of your food operation, and/or the publication of the violation and fines."



STEVEN BELLONE
 SUFFOLK COUNTY EXECUTIVE

GREGSON H. PIGOTT, MD, MPH
 COMMISSIONER

SUFFOLK COUNTY
 DEPARTMENT OF HEALTH SERVICES