

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



\*\*\*\* HigginbothamWT 2/14/2024 2:03:03 PM \*\*\*\*

**Facility Information**

**RESULT: Satisfactory**

Permit Number: 14-48-00011  
 Name of Facility: Desoto Memorial Elementary School  
 Address: 851 E Hickory Street  
 City, Zip: Arcadia 34266

Type: School (more than 9 months)  
 Owner: Price, Jessica - DeSoto County School Board  
 Person In Charge: DeSoto County School Board      Phone: (863) 494-4222  
 PIC Email:

**Inspection Information**

Purpose: Routine	Number of Risk Factors (Items 1-29): 0	Begin Time: 11:15 AM
Inspection Date: 2/12/2024	Number of Repeat Violations (1-57 R): 0	End Time: 11:50 AM
Correct By: None	Facility Grade: N/A	
<b>Re-Inspection Date: None</b>	StopSale: 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**

**SUPERVISION**

- 1. Demonstration of Knowledge/Training
- 2. Certified Manager/Person in charge present

**EMPLOYEE HEALTH**

- 3. Knowledge, responsibilities and reporting
- 4. Proper use of restriction and exclusion
- 5. Responding to vomiting & diarrheal events

**GOOD HYGIENIC PRACTICES**

- 6. Proper eating, tasting, drinking, or tobacco use
- 7. No discharge from eyes, nose, and mouth

**PREVENTING CONTAMINATION BY HANDS**

- 8. Hands clean & properly washed
- 9. No bare hand contact with RTE food
- 10. Handwashing sinks, accessible & supplies

**APPROVED SOURCE**

- 11. Food obtained from approved source
- 12. Food received at proper temperature
- 13. Food in good condition, safe, & unadulterated
- 14. Shellstock tags & parasite destruction

**PROTECTION FROM CONTAMINATION**

- 15. Food separated & protected; Single-use gloves

- 16. Food-contact surfaces; cleaned & sanitized

- 17. Proper disposal of unsafe food

**TIME/TEMPERATURE CONTROL FOR SAFETY**

- 18. Cooking time & temperatures
- 19. Reheating procedures for hot holding
- 20. Cooling time and temperature
- 21. Hot holding temperatures
- 22. Cold holding temperatures
- 23. Date marking and disposition
- 24. Time as PHC; procedures & records

**CONSUMER ADVISORY**

- 25. Advisory for raw/undercooked food

**HIGHLY SUSCEPTIBLE POPULATIONS**

- 26. Pasteurized foods used; No prohibited foods

**ADDITIVES AND TOXIC SUBSTANCES**

- 27. Food additives: approved & properly used
- 28. Toxic substances identified, stored, & used

**APPROVED PROCEDURES**

- 29. Variance/specialized process/HACCP

Inspector Signature:

*David Morris*

Client Signature:

*[Signature]*

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### 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
- 35. Approved thawing methods
- 36. Thermometers provided & accurate

#### FOOD IDENTIFICATION

- 37. Food properly labeled; original container

#### PREVENTION OF FOOD CONTAMINATION

- 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
- 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

Satisfactory

Email Address(es): No Email Addresses Available

Inspection Conducted By: Daniel Morris (027075)  
Inspector Contact Number: Work: (863) 993-4601 ex. 120  
Print Client Name:  
Date: 2/12/2024

Inspector Signature:

Daniel Morris

Client Signature:

[Handwritten Signature]