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



Facility Information

RESULT: Satisfactory

Permit Number: 13-48-1872081 Name of Facility: Highly Inquisitive & Versatile Education (HIVE) Preparatory Schoo Address: 5855 NW 171 Street City, Zip: Hialeah 33015

Type: School (more than 9 months) Owner: Gonzalez, Carlos - Highly Inquisitive & Versatile Education (HIV Person In Charge: Saydel Mas Phone: (305) 231-4888 PIC Email: smas@hiveprep.com

Inspection Information

Purpose: Routine Inspection Date: 2/28/2024 Correct By: None **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: 12:20 PM End Time: 01:00 PM

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
- N 2. Certified Manager/Person in charge present EMPLOYEE HEALTH
- IN 3. Knowledge, responsibilities and reporting
- IN 4. Proper use of restriction and exclusion
- N 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
- 10. Handwashing sinks, accessible & supplies
 APPROVED SOURCE
- IN 11. Food obtained from approved source
- IN 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
- IN 17. Proper disposal of unsafe food TIME/TEMPERATURE CONTROL FOR SAFETY
- NA 18. Cooking time & temperatures
- NA 19. Reheating procedures for hot holding
- **IN** 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 PHČ; procedures & records CONSUMER ADVISORY
- NA 25. Advisory for raw/undercooked food HIGHLY SUSCEPTIBLE POPULATIONS
- IN 26. Pasteurized foods used; No prohibited foods ADDITIVES AND TOXIC SUBSTANCES
- **IN** 27. Food additives: approved & properly used
- N 28. Toxic substances identified, stored, & used APPROVED PROCEDURES
- NA 29. Variance/specialized process/HACCP

Inspector Signature:		Client Signature:
A		alor
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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
- N 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
- NO 42. Washing fruits & vegetables
 - PROPER USE OF UTENSILS
- IN 43. In-use utensils: properly stored
- IN 44. Equipment & linens: stored, dried, & handled
- N 45. Single-use/single-service articles: stored & used

- NA 46. Slash resistant/cloth gloves used properly UTENSILS, EQUIPMENT AND VENDING
- IN 47. Food & non-food contact surfaces
- N 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
- IN 55. Facilities installed, maintained, & clean
- OUT 56. Ventilation & lighting (COS)
- 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 #56. Ventilation & lighting

At the time of this inspection, the mechanical ventilation at the employe's restroom was observed with dust accumulated. Clean and sanitize. Person in charge clean the mechanical ventilation. Corrected Onsite.

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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Client Signature:

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General Comments

At the time of this inspection, temperatures were taken with Thermapen Thermometer.

Handwashing sink 109F. Employee s restroom 106F. Mop sink 120F. 3 Compartment sink 117F.

Hot Line

Taco Meat 155F. Black Beans 149F. Sweet Corn 150F.

Warmer

Taco Meat 155. Black Beans 160F. Sweet Corn 158F.

Walk in Cooler 39F.

Chocolate Milk 38F.

Reach in cooler 41F.

Milk 38F.

Sanitizer was not ready at the time of this report.

Satisfactory.

Email Address(es): cvgonzalez@hiveprep.com; jlzequeira@hiveprep.com; jcconde@hiveprep.com; smas@hiveprep.com

Inspection Conducted By: Pedro Hernandez Bastidas (60752) Inspector Contact Number: Work: (305) 623-3500 ex. Print Client Name: Saydel Mas Date: 2/28/2024

Inspector	Signature:	

Client Signature:

alor

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