

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



Facility Information

RESULT: Satisfactory

Permit Number: 06-48-00216
 Name of Facility: Deerfield Beach High School
 Address: 910 SW 15 Street
 City, Zip: Deerfield Beach 33441

Type: School (more than 9 months)
 Owner: Broward County School Board - Food & Nutrition Services
 Person In Charge: Deerfield Beach High School Phone: 754 322 0660
 PIC Email: sharie.dees@browardschools.com

Inspection Information

Purpose: Reinspection	Number of Risk Factors (Items 1-29): 0	Begin Time: 09:35 AM
Inspection Date: 2/17/2026	Number of Repeat Violations (1-57 R): 0	End Time: 10:25 AM
Correct By: Next Inspection	Facility Grade: N/A	
Re-Inspection Date: None	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

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

EMPLOYEE HEALTH

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

GOOD HYGIENIC PRACTICES

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

PREVENTING CONTAMINATION BY HANDS

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

APPROVED SOURCE

- IN** 11. Food obtained from approved source
- NO** 12. Food received at proper temperature
- IN** 13. Food in good condition, safe, & unadulterated
- NA** 14. Shellstock tags & parasite destruction

PROTECTION FROM CONTAMINATION

- NO** 15. Food separated & protected; Single-use gloves

- IN** 16. Food-contact surfaces; cleaned & sanitized

- NO** 17. Proper disposal of unsafe food

TIME/TEMPERATURE CONTROL FOR SAFETY

- NO** 18. Cooking time & temperatures
- NO** 19. Reheating procedures for hot holding
- NO** 20. Cooling time and temperature
- IN** 21. Hot holding temperatures

- NO** 22. Cold holding temperatures

- NO** 23. Date marking and disposition

- NA** 24. Time as PHC; procedures & records

CONSUMER ADVISORY

- NA** 25. Advisory for raw/undercooked food

HIGHLY SUSCEPTIBLE POPULATIONS

- NA** 26. Pasteurized foods used; No prohibited foods

ADDITIVES AND TOXIC SUBSTANCES

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

APPROVED PROCEDURES

- NA** 29. Variance/specialized process/HACCP

Inspector Signature:

Client Signature:

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Good Retail Practices

SAFE FOOD AND WATER	
NA 30. Pasteurized eggs used where required	NA 46. Slash resistant/cloth gloves used properly
NO 31. Water & ice from approved source	UTENSILS, EQUIPMENT AND VENDING
NA 32. Variance obtained for special processing	NO 47. Food & non-food contact surfaces
FOOD TEMPERATURE CONTROL	NO 48. Ware washing: installed, maintained, & used; test strips
NO 33. Proper cooling methods; adequate equipment	NO 49. Non-food contact surfaces clean
NO 34. Plant food properly cooked for hot holding	PHYSICAL FACILITIES
NO 35. Approved thawing methods	NO 50. Hot & cold water available; adequate pressure
NO 36. Thermometers provided & accurate	NO 51. Plumbing installed; proper backflow devices
FOOD IDENTIFICATION	NO 52. Sewage & waste water properly disposed
NO 37. Food properly labeled; original container	NO 53. Toilet facilities: supplied, & cleaned
PREVENTION OF FOOD CONTAMINATION	IN 54. Garbage & refuse disposal
OUT 38. Insects, rodents, & animals not present	NO 55. Facilities installed, maintained, & clean
NO 39. No Contamination (preparation, storage, display)	NO 56. Ventilation & lighting
NO 40. Personal cleanliness	NO 57. Permit; Fees; Application; Plans
NO 41. Wiping cloths: properly used & stored	
NO 42. Washing fruits & vegetables	
PROPER USE OF UTENSILS	
NO 43. In-use utensils: properly stored	
NO 44. Equipment & linens: stored, dried, & handled	
NO 45. Single-use/single-service articles: stored & used	

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 #38. Insects, rodents, & animals not present
 Observed opening between door base and floor, weather strip present but missing the width to prevent opening between the bottom of the door and the floor. Provide weather stripping.
 CODE REFERENCE: 64E-11.003(5)(f). Effective measures shall be taken to control the presence of pests in the food establishment. Unless otherwise approved, live animals shall not be allowed.

General Comments

Re-inspection Satisfactory
 E-NOV abated

There is a \$50 fee for the first re-inspection.

PEST CONTROL
 Pest Control service provided by Tower Pest Control, last service 2/2/2026.
 Observed pest control log service for flies provided on the last service.

Note: Pest control treated facility for flies on 2/2/2026. The garbage compactor was removed from property to be repaired. As per conversation with head custodian, the compactor had a hole and was repaired. No garbage leachate observed dripping from the compactor. Area observed clean, free of foul odor and no flies observed.

Email Address(es): sharie.dees@browardschools.com

Inspector Signature:

Sharie Dees

Client Signature:

[Handwritten Signature]

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Inspection Conducted By: Stella Aquino Figueroa (6599)
Inspector Contact Number: Work: (954) 412-7320 ex.
Print Client Name: Candace Leroy
Date: 2/17/2026

Inspector Signature:

Handwritten signature of Stella Aquino Figueroa.

Client Signature:

Handwritten signature of Candace Leroy.