

**STATE OF FLORIDA  
DEPARTMENT OF HEALTH  
COUNTY HEALTH DEPARTMENT  
PUBLIC/ PRIVATE SCHOOL  
INSPECTION REPORT**



**PURPOSE:**

- ROUTINE       REINSPECTION  
 CONSTRUCT.     CHANGE OF OWNER  
 COMPLAINT       CONSULTATION  
 QA SURVEY       EPIDEMIOLOGY  
 PREOPENING     OTHER \_\_\_\_\_

**TYPE:**

- 12 Private School  
 18 Public School  
 22 Charter School  
 23 Vocational School  
 24 College/University  
 Other \_\_\_\_\_

NAME OF SCHOOL Phillis Wheatley Elem.  
 ADDRESS 1801 NW 1 PL CITY Miami  
 OWNER MDCPS ZIP 33136  
 PERSON IN CHARGE Catalina Flor PHONE (305) 573-6550

**CENSUS**

200

1000

2000

3000

1000 10: 1

2000 20: 2

3000 30: 3

4000 40: 4

5000 50: 5

6000 60: 6

7000 70: 7

8000 80: 8

9000 90: 9

**RESULTS**

Satisfactory  
 Incomplete  
 Unsatisfactory

Correct Violations by

Next Inspection  
 8:00 AM on:

BEGIN	END
1:30 P	2:30 P
1:00	1:00
2:05 AM	2:05 AM
3:10 PM	3:10 PM
4:15	4:15
5:20	5:20
6:25	6:25
7:30	7:30
8:35	8:35
9:40	9:40
10:45	10:45
11:50	11:50
12:55	12:55

DATE
10 06 11
0 0 0 0 0 05
1 1 1 1 1 06
2 2 2 2 2 07
3 3 3 3 3 08
4 4 4 4 4 09
5 5 5 5 5 10
6 6 6 6 6 11
7 7 7 7 7 12
8 8 8 8 8 13
9 9 9 9 9 14

POSITION #
32763
0 0 0 0 0 0
1 1 1 1 1 1
2 2 2 2 2 2
3 3 3 3 3 3
4 4 4 4 4 4
5 5 5 5 5 5
6 6 6 6 6 6
7 7 7 7 7 7
8 8 8 8 8 8
9 9 9 9 9 9

PERMIT NUMBER
13-51-08247
0 0 0 0 0 0
1 1 1 1 1 1
2 2 2 2 2 2
3 3 3 3 3 3
4 4 4 4 4 4
5 5 5 5 5 5
6 6 6 6 6 6
7 7 7 7 7 7
8 8 8 8 8 8
9 9 9 9 9 9

**FEMALES**

100

**MALES**

100

DATE
10 11 11
0 0 0 0 0 05
1 1 1 1 1 06
2 2 2 2 2 07
3 3 3 3 3 08
4 4 4 4 4 09
5 5 5 5 5 10
6 6 6 6 6 11
7 7 7 7 7 12
8 8 8 8 8 13
9 9 9 9 9 14

OUT OF BUSINESS

*As per section 120.695 of the Florida Statutes (FS), this form will serve as a "Notice of Non-Compliance" for any violations noted. Items marked below violate the requirements of Chapters 64E-13 and 64E-11 of the Florida Administrative Code (FAC) and must be corrected within the time period indicated in the "Results" section above. Continued operation of this facility without making these corrections is a violation of Chapter 64E-13 and 64E-11, FAC, and Chapter 381, FS. Failure to correct violations may result in an administrative fine or other legal action being initiated or continued.*

<b>SCHOOL SANITATION</b> <input type="checkbox"/> 1. School Site <input type="checkbox"/> 2. Playground Equipment <input type="checkbox"/> 3. Athletic Equipment <b>BUILDINGS</b> <input type="checkbox"/> 4. Construction <input checked="" type="checkbox"/> 5. Maintenance & Repair <input type="checkbox"/> 6. Lighting/Foot-Candles <input type="checkbox"/> 7. Heating, Ventilation, A/C	<input type="checkbox"/> 8. Natural Ventilation <input type="checkbox"/> 9. Mechanical Ventilation <b>SANITARY FACILITIES</b> <input type="checkbox"/> 10. Provided/Accessible <input checked="" type="checkbox"/> 11. Cleanliness & Repair <input type="checkbox"/> 12. Toilet Facilities <input type="checkbox"/> 13. Separation of Sexes <input type="checkbox"/> 14. Fixture Ratio	<input type="checkbox"/> 15. Handwash Facilities <input type="checkbox"/> 16. Showers/Fixtures <input type="checkbox"/> 17. Shower Water Temp. <b>WATER SUPPLY</b> <input checked="" type="checkbox"/> 18. Installed/Operated/Maintained <input type="checkbox"/> 19. Drinking Fountains <input type="checkbox"/> 20. Approved Source	<input type="checkbox"/> 21. Sewage Disposal <input type="checkbox"/> 22. Solid Waste <b>VECTOR/VERMIN CONTROL</b> <input checked="" type="checkbox"/> 23. Infestation/Control <input type="checkbox"/> 24. Brush/Trash <input type="checkbox"/> 25. Water Collection/Drainage	<b>SAFETY</b> <input type="checkbox"/> 26. First Aid Kit <b>FOOD</b> <input type="checkbox"/> 27. Food Insp. Rpt. <b>OTHER</b> <input type="checkbox"/> 28. _____ <input type="checkbox"/> 29. _____
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ITEM NUMBERS	COMMENTS AND INSTRUCTIONS (continue on attached sheet)
Bld. 1:	
5	Replace missing ceiling tiles throughout hallways in 1 <sup>st</sup> and 2 <sup>nd</sup> floors
5	Repair peeling paint from walls throughout hallways in 1 <sup>st</sup> and 2 <sup>nd</sup> floors.
11, 23	(Provide integrated pest control management to eliminate roaches in Rm. 006 (live roach and fresh droppings found) and in Rm. 007 (fresh roach droppings). Roaches found under sinks. Clean/sanitize under sinks
18	Rm. 006: Adjust water fountain pressure.
5	Rm. 008: Repair peeling paint from North wall.
5	Rm. 012: Cover ceiling hole <sup>CBC</sup> tile hole to Southwest side of room
5	Rm. 016: Cover ceiling tile hole by exit door.

HEALTH DEPARTMENT INSPECTOR: By Cynthia B. Campos PHONE: (305) 623-3500  
 COPY OF REPORT RECEIVED BY: [Signature] DATE: 10/06/2011