

# County of Santa Clara

## Department of Environmental Health

### Consumer Protection Division

1555 Berger Drive, Suite 300, San Jose, CA 95112-2716

Phone (408) 918-3400 www.ehinfo.org



## OFFICIAL INSPECTION REPORT

|                                                                     |  |                                                                 |                                  |                                      |                                         |                                                                                                                                                                                                  |  |                   |
|---------------------------------------------------------------------|--|-----------------------------------------------------------------|----------------------------------|--------------------------------------|-----------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|-------------------|
| <b>Facility</b><br>FA0265614 - KEYS SCHOOL-EL CAMINO CAMPUS         |  | <b>Site Address</b><br>3981 EL CAMINO REAL, PALO ALTO, CA 94306 |                                  | <b>Inspection Date</b><br>03/03/2025 |                                         | <b>Placard Color &amp; Score</b><br><div style="font-size: 2em; font-weight: bold; text-align: center;">GREEN</div> <div style="font-size: 3em; font-weight: bold; text-align: center;">97</div> |  |                   |
| <b>Program</b><br>PR0392245 - SCHOOL FOOD SERVICE RISK CAT 1 - FP21 |  |                                                                 | <b>Owner Name</b><br>KEYS SCHOOL |                                      | <b>Inspection Time</b><br>11:35 - 12:15 |                                                                                                                                                                                                  |  |                   |
| <b>Inspected By</b><br>ALELI CRUTCHFIELD                            |  | <b>Inspection Type</b><br>ROUTINE INSPECTION                    |                                  | <b>Consent By</b><br>SUSANNA         |                                         |                                                                                                                                                                                                  |  | <b>FSC Exempt</b> |

  

| RISK FACTORS AND INTERVENTIONS |                                                                             | IN | OUT   |       | COS/SA | N/O | N/A | PBI |
|--------------------------------|-----------------------------------------------------------------------------|----|-------|-------|--------|-----|-----|-----|
|                                |                                                                             |    | Major | Minor |        |     |     |     |
| K01                            | Demonstration of knowledge; food safety certification                       |    |       | X     |        |     |     | S   |
| K02                            | Communicable disease; reporting/restriction/exclusion                       | X  |       |       |        |     |     |     |
| K03                            | No discharge from eyes, nose, mouth                                         | X  |       |       |        |     |     | S   |
| K04                            | Proper eating, tasting, drinking, tobacco use                               | X  |       |       |        |     |     |     |
| K05                            | Hands clean, properly washed; gloves used properly                          | X  |       |       |        |     |     |     |
| K06                            | Adequate handwash facilities supplied, accessible                           | X  |       |       |        |     |     | S   |
| K07                            | Proper hot and cold holding temperatures                                    | X  |       |       |        |     |     |     |
| K08                            | Time as a public health control; procedures & records                       |    |       |       |        | X   |     |     |
| K09                            | Proper cooling methods                                                      |    |       |       |        |     | X   |     |
| K10                            | Proper cooking time & temperatures                                          |    |       |       |        |     | X   |     |
| K11                            | Proper reheating procedures for hot holding                                 |    |       |       |        |     | X   |     |
| K12                            | Returned and reservice of food                                              | X  |       |       |        |     |     |     |
| K13                            | Food in good condition, safe, unadulterated                                 | X  |       |       |        |     |     |     |
| K14                            | Food contact surfaces clean, sanitized                                      |    |       |       |        |     | X   |     |
| K15                            | Food obtained from approved source                                          | X  |       |       |        |     |     |     |
| K16                            | Compliance with shell stock tags, condition, display                        |    |       |       |        |     | X   |     |
| K17                            | Compliance with Gulf Oyster Regulations                                     |    |       |       |        |     | X   |     |
| K18                            | Compliance with variance/ROP/HACCP Plan                                     |    |       |       |        |     | X   |     |
| K19                            | Consumer advisory for raw or undercooked foods                              |    |       |       |        |     | X   |     |
| K20                            | Licensed health care facilities/schools: prohibited foods not being offered | X  |       |       |        |     |     |     |
| K21                            | Hot and cold water available                                                | X  |       |       |        |     |     |     |
| K22                            | Sewage and wastewater properly disposed                                     | X  |       |       |        |     |     |     |
| K23                            | No rodents, insects, birds, or animals                                      | X  |       |       |        |     |     |     |

  

| GOOD RETAIL PRACTICES |                                                                                     | OUT | COS |
|-----------------------|-------------------------------------------------------------------------------------|-----|-----|
| K24                   | Person in charge present and performing duties                                      |     |     |
| K25                   | Proper personal cleanliness and hair restraints                                     |     |     |
| K26                   | Approved thawing methods used; frozen food                                          |     |     |
| K27                   | Food separated and protected                                                        |     |     |
| K28                   | Fruits and vegetables washed                                                        |     |     |
| K29                   | Toxic substances properly identified, stored, used                                  |     |     |
| K30                   | Food storage: food storage containers identified                                    |     |     |
| K31                   | Consumer self service does prevent contamination                                    |     |     |
| K32                   | Food properly labeled and honestly presented                                        |     |     |
| K33                   | Nonfood contact surfaces clean                                                      |     |     |
| K34                   | Warewash facilities: installed/maintained; test strips                              |     |     |
| K35                   | Equipment, utensils: Approved, in good repair, adequate capacity                    |     |     |
| K36                   | Equipment, utensils, linens: Proper storage and use                                 |     |     |
| K37                   | Vending machines                                                                    |     |     |
| K38                   | Adequate ventilation/lighting; designated areas, use                                |     |     |
| K39                   | Thermometers provided, accurate                                                     |     |     |
| K40                   | Wiping cloths: properly used, stored                                                |     |     |
| K41                   | Plumbing approved, installed, in good repair; proper backflow devices               |     |     |
| K42                   | Garbage & refuse properly disposed; facilities maintained                           |     |     |
| K43                   | Toilet facilities: properly constructed, supplied, cleaned                          |     |     |
| K44                   | Premises clean, in good repair; Personal/chemical storage; Adequate vermin-proofing |     |     |
| K45                   | Floor, walls, ceilings: built, maintained, clean                                    |     |     |
| K46                   | No unapproved private home/living/sleeping quarters                                 |     |     |
| K47                   | Signs posted; last inspection report available                                      |     |     |

# OFFICIAL INSPECTION REPORT

|                                                              |                                                          |                                  |
|--------------------------------------------------------------|----------------------------------------------------------|----------------------------------|
| Facility<br>FA0265614 - KEYS SCHOOL-EL CAMINO CAMPUS         | Site Address<br>3981 EL CAMINO REAL, PALO ALTO, CA 94306 | Inspection Date<br>03/03/2025    |
| Program<br>PR0392245 - SCHOOL FOOD SERVICE RISK CAT 1 - FP21 | Owner Name<br>KEYS SCHOOL                                | Inspection Time<br>11:35 - 12:15 |
| K48 Plan review                                              |                                                          |                                  |
| K49 Permits available                                        |                                                          |                                  |
| K58 Placard properly displayed/posted                        |                                                          |                                  |

## Comments and Observations

### Major Violations

No major violations were observed during this inspection.

### Minor Violations

K01 - 3 Points - Inadequate demonstration of knowledge; food manager certification

**Inspector Observations: Food safety managers certificate unavailable. [CA] At least one person must be food safety certified. A food safety managers certificate is required when unpackaged food is served/handled (i.e. pizza).**

### Performance-Based Inspection Questions

All responses to PBI questions were satisfactory.

### Measured Observations

| Item            | Location                  | Measurement       | Comments |
|-----------------|---------------------------|-------------------|----------|
| water           | hand sink- staff use only | 100.00 Fahrenheit |          |
| chow mein       | warmer                    | 142.00 Fahrenheit |          |
| chicken tenders | warmer                    | 141.00 Fahrenheit |          |
| buttered pasta  | warmer                    | 142.00 Fahrenheit |          |
| yogurt          | cold case                 | 41.00 Fahrenheit  |          |
| water           | hand sink (outdoors)      | 60.00 Fahrenheit  |          |

### Overall Comments:

**Food delivered daily by Choice lunch ( between 1030a-11a). Per menu/temperature log for hot/cold lunches, Choice lunch delivery staff are to record the food temperatures daily (delivery temperature), however only 2 menu items were recorded today and indicated delivery time of 11:00a and discard time of 3:00p. Food is distributed outdoors to students.**

**Pizza delivered in pizza boxes are served at school and school staff distribute to students outdoors during lunch service. Unpackaged food shall be served indoors to prevent droplet contamination. If food is prepackaged, it may be served outdoors.**

**This is a private school and does not participate in the National School Lunch Act by the California Dept. of Education.**

**[sbonetti@keysschool.org](mailto:sbonetti@keysschool.org)**

When required to determine compliance, a single reinspection will be conducted without additional charge. If subsequent reinspections are required, an hourly fee (minimum one hour) at the current rate approved by the Board of Supervisors will be assessed for each and every reinspection until the necessary changes or corrections are made. Unless otherwise noted by the inspector, all violations are to be corrected no later than **3/17/2025**. Any major change in menu or any change in ownership must have prior approval by this Department. This may require structural and/or equipment changes or remodeling to accommodate new operations.

### Legend:

|        |                                 |
|--------|---------------------------------|
| [CA]   | Corrective Action               |
| [COS]  | Corrected on Site               |
| [N]    | Needs Improvement               |
| [NA]   | Not Applicable                  |
| [NO]   | Not Observed                    |
| [PBI]  | Performance-based Inspection    |
| [PHF]  | Potentially Hazardous Food      |
| [PIC]  | Person in Charge                |
| [PPM]  | Part per Million                |
| [S]    | Satisfactory                    |
| [SA]   | Suitable Alternative            |
| [TPHC] | Time as a Public Health Control |



**Received By:** Susanna Bonetti  
Office Administrator

**Signed On:** March 03, 2025