

Food Establishment Inspection Report

Jackson County Health Department PO Box 307 – 415 Health Department Rd Murphysboro IL 62966		(618) 684-3143 ext. 128		No. of Risk Factor/Intervention Violations	1	Date	6/28/21	
Establishment		License/Permit #		No. of Repeat Risk Factor/Intervention Violations	0	Time In	12:00	
Street Address		City/State		Permit Holder	Erma Tomas			
100 W Jackson St		Carbondale		Purpose of Inspection	Routine			
ZIP Code		62901		Risk Category				I

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

Circle designated compliance status (IN, OUT, N/O, N/A) for each numbered item
IN=in compliance **OUT**=not in compliance **N/O**=not observed **N/A**=not applicable
 Mark "X" in appropriate box for COS and/or R
COS=corrected on-site during inspection **R**=repeat violation

Risk factors are important practices or procedures identified as the most prevalent contributing factors of foodborne illness or injury. Public health interventions are control measures to prevent foodborne illness or injury.

Compliance Status		COS	R	Compliance Status		COS	R
Supervision				Protection from Contamination			
1	In, Out			15	In, Out, N/A, N/O		
Person in charge present, demonstrates knowledge, and performs duties				Food separated and protected			
2	In, Out, N/A			16	In, Out, N/A		
Certified Food Protection Manager (CFPM)				Food-contact surfaces; cleaned and sanitized			
Employee Health				Time/Temperature Control for Safety			
3	In, Out			17	In, Out		
Management, food employee and conditional employee; knowledge, responsibilities and reporting				Proper disposition of returned, previously served, reconditioned and unsafe food			
4	In, Out			18	In, Out, N/A, N/O		
Proper use of restriction and exclusion				Proper cooking time and temperatures			
5	In, Out			19	In, Out, N/A, N/O		
Procedures for responding to vomiting and diarrheal events				Proper reheating procedures for hot holding			
Good Hygienic Practices				20	In, Out, N/A, N/O		
6	In, Out, N/O			Proper cooling time and temperature			
Proper eating, tasting, drinking, or tobacco use				21	In, Out, N/A, N/O		
7	In, Out, N/O			Proper hot holding temperatures			
No discharge from eyes, nose, and mouth				22	In, Out, N/A, N/O		
Preventing Contamination by Hands				Proper cold holding temperatures			
8	In, Out, N/O			23	In, Out, N/A, N/O		
Hands clean and properly washed				Proper date marking and disposition			
9	In, Out, N/A, N/O			24	In, Out, N/A, N/O		
No bare hand contact with RTE food or a pre-approved alternative procedure properly allowed				Time as a Public Health Control; procedures & records			
10	In, Out			Consumer Advisory			
Adequate handwashing sinks properly supplied and accessible				25	In, Out, N/A		
Approved Source				Consumer advisory provided for raw/undercooked food			
11	In, Out			Highly Susceptible Populations			
Food obtained from approved source				26	In, Out, N/A		
12	In, Out, N/A, N/O			Pasteurized foods used; prohibited foods not offered			
Food received at proper temperature				Food/Color Additives and Toxic Substances			
13	In, Out			27	In, Out, N/A		
Food in good condition, safe, and unadulterated				Food additives: approved and properly used			
14	In, Out, N/A, N/O			28	In, Out, N/A		
Required records available: shellstock tags, parasite destruction				Toxic substances properly identified, stored, and used			
GOOD RETAIL PRACTICES				Conformance with Approved Procedures			
Good Retail Practices are preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.				29	In, Out, N/A		
Mark "X" in box if numbered item is not in compliance		Mark "X" in appropriate box for COS and/or R		Compliance with variance/specialized process/HACCP			
				Proper Use of Utensils			
Safe Food and Water				43	In-use utensils: properly stored		
30	Pasteurized eggs used where required			44	Utensils, equipment & linens: properly stored, dried, & handled		
31	Water and ice from approved source			45	Single-use/single-service articles: properly stored and used		
32	Variance obtained for specialized processing methods			46	Gloves used properly		
Food Temperature Control				Utensils, Equipment and Vending			
33	Proper cooling methods used; adequate equipment for temperature control			47	Food and non-food contact surfaces cleanable, properly designed, constructed, and used		
34	Plant food properly cooked for hot holding			48	Warewashing facilities: installed, maintained, & used; test strips		
35	Approved thawing methods used			49	Non-food contact surfaces clean		
36	Thermometers provided & accurate			Physical Facilities			
Food Identification				50	Hot and cold water available; adequate pressure		
37	Food properly labeled; original container			51	Plumbing installed; proper backflow devices		
Prevention of Food Contamination				52	Sewage and waste water properly disposed		
38	Insects, rodents, and animals not present			53	Toilet facilities: properly constructed, supplied, & cleaned		
39	Contamination prevented during food preparation, storage and display			54	Garbage & refuse properly disposed; facilities maintained		
40	Personal cleanliness			55	Physical facilities installed, maintained, and clean		
41	Wiping cloths: properly used and stored			56	Adequate ventilation and lighting; designated areas used		
42	Washing fruits and vegetables			Employee Training			
Employee Training				57	All food employees have food handler training		
Employee Training				58	Allergen training as required		

Food Establishment Inspection Report

Establishment: Dona Camilla Establishment #: 1026

Water Supply: Public Private Waste Water System: Public Private

Sanitizer Type: Bleach PPM: N/A Heat: N/A

TEMPERATURE OBSERVATIONS

Item/Location	Temp	Item/Location	Temp	Item/Location	Temp

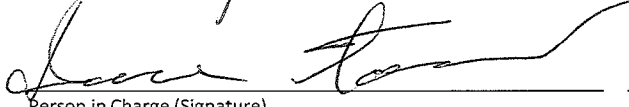
OBSERVATIONS AND CORRECTIVE ACTIONS

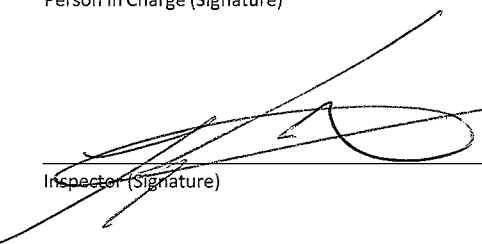
Item Number	Violations cited in this report must be corrected within the time frames below.	Correct By
16/38	Provide adequate pest control to eliminate the presence of insects/rodents in entire facility. Upon arrival several live roaches present by handsink. You can not safely operate the kitchen in the presence of live roaches.	Prior to Reopening ↓
* Note:		
◦ Remained of routine suspended due to the presence of live roaches. Permit immediatly suspended & kitchen staff immediatly told to cease kitchen operations.		

CFPM Verification (name, expiration date, ID#):

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HACCP Topic: 16/38


 Person in Charge (Signature) Date: 6/28/21


 Inspector (Signature)

Follow-up: Yes No (Check one) Follow-up Date: Prior to Reopening

Food Establishment Inspection Report

Establishment: Dona Camilla

Establishment #: 1026

OBSERVATIONS AND CORRECTIVE ACTIONS

Item Number	Violations cited in this report must be corrected within the time frames below.
	<p>Due to the presence of live roaches the food service permit for Dona Camilla has been suspended until further notice. You are to cease all operations immediately.</p>
	<p>Failure to cease operation of this facility, may subject you to enforcement provisions outlined in the Jackson County Food Service Sanitation Ordinance. Failure to comply with these provisions may result in fines of up to \$500 per day.</p>
	<p>You must contact a licensed pest control expert to treat for the elimination of roaches. This includes an immediate treatment + a treatment weekly for a minimum of 4 weeks.</p>
	<p>No signs of insects in grocery, only kitchen portion. Kitchen can not operate until entire facility is treated + verified of proper treatments.</p>

[Signature]
Person in Charge (Signature)

6/28/21
Date

[Signature]
Inspector (Signature)

Follow-up: Yes No (Check one)

Follow-up Date: Prior to Reopening