

Dec 16

RETAIL FOOD ESTABLISHMENT INSPECTION REPORT

Clinton County Health Dept. 1234 Rossville Ave. Frankfort, IN 46041

10 days Release Date

Date 12/5/2025 Time In 12:25 Time Out 1:20pm

No. of Risk Factor/Intervention Violations 4

No. of Repeat Risk Factor/Intervention Violations 0

Establishment LA ALTEMA Address 352 W. WASHINGTON ST FRANKFORT IN Zip Code 46041 Telephone 765 654-6088 License/Permit # Permit Holder ADRIANA ADIAGA Purpose of Inspection ROUTINE Est. Type GROCERY Risk Category 3

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

Table with 2 columns: Item #, Description, Compliance Status. Includes sections for Supervision, Employee Health, Good Hygienic Practices, Preventing Contamination by Hands, Approved Source, and Protection from Contamination.

Table with 2 columns: Item #, Description, Compliance Status. Includes sections for Time/Temperature Control for Safety, Consumer Advisory, Highly Susceptible Populations, Food/Color Additives and Toxic Substances, and Conformance with Approved Procedures.

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.

GOOD RETAIL PRACTICES

Good Retail Practices are preventative measures to control the addition of pathogens, chemicals, and physical objects into foods. Mark "X" in box if numbered item is not in compliance Mark "X" in appropriate box for COS and/or R COS=corrected on-site during inspection R=repeat violation

Table with 2 columns: Item #, Description, Compliance Status. Includes sections for Safe Food and Water, Food Temperature Control, Food Identification, and Prevention of Food Contamination.

Table with 2 columns: Item #, Description, Compliance Status. Includes sections for Proper Use of Utensils, Utensils, Equipment and Vending, and Physical Facilities.

Person In Charge (Signature) [Signature] Date: Inspector (Signature) Rodney P. Wain, EPHS Follow-up: YES NO (Circle one) Follow-up Date:

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1234 Rossville Ave.
Frankfort, IN 46041

License/Permit #

Date

12/5/2025

Establishment

LA ALTEÑA

Address

City/State

Zip Code

Telephone

OBSERVATIONS AND CORRECTIVE ACTIONS

Item Number

Based on an inspection this day, the item(s) noted below identify violations of 410 IAC 7-26, Indiana Retail Food Establishment Sanitation Requirements. Violations cited in this report must be corrected within the time frames below or as stated in Section 475 and 476 of the Indiana Retail Food Establishment Food Code.

Complete by Date:

Published Comment

Provided IDOH handouts outlining regulatory changes (eff April 2025) Including Employee Health AND Hygiene & clean up procedures for diarrhea AND vomit requirements (in Spanish)

Person In Charge Name

Person In Charge (Signature)

Date

Inspector Name

Inspector (Signature)

Date

RODNEY P. WANN

Rodney P. Wann, E.H.S

12/5/2025