

Food Establishment Inspection Report

Score: 93

Establishment Name: THE LOOP

Establishment ID: 3034012378

Location Address: 320 SOUTH STRATFORD RD

☒ Inspection ☐ Re-Inspection

City: WINSTON SALEM

State: NC

Date: 02/23/2021

Status Code: A

Zip: 27103

County: 34 Forsyth

Time In: 10:27 AM

Time Out: 1:30 PM

Permittee: KVILLE LOOP LLC

Total Time: 3 hrs 3 min

Telephone: (336) 703-9882

Category #: IV

Wastewater System: ☒ Municipal/Community ☐ On-Site System

FDA Establishment Type: Full-Service Restaurant

Water Supply: ☒ Municipal/Community ☐ On-Site Supply

No. of Risk Factor/Intervention Violations: 4

No. of Repeat Risk Factor/Intervention Violations: 0

Foodborne Illness Risk Factors and Public Health Interventions									
Risk factors: Contributing factors that increase the chance of developing foodborne illness.									
Public Health Interventions: Control measures to prevent foodborne illness or injury.									
IN	OUT	N/A	NC	Compliance Status	OUT	CDI	R	VR	
Supervision .2652									
1	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	PIC Present; Demonstration-Certification by accredited program and perform duties	2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Employee Health .2652									
2	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Management, employees knowledge; responsibilities & reporting	3	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper use of reporting, restriction & exclusion	3	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Good Hygienic Practices .2652, .2653									
4	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper eating, tasting, drinking, or tobacco use	2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	No discharge from eyes, nose or mouth	1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Preventing Contamination by Hands .2652, .2653, .2655, .2656									
6	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Hands clean & properly washed	4	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	No bare hand contact with RTE foods or pre-approved alternate procedure properly followed	3	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Handwashing sinks supplied & accessible	2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Approved Source .2653, .2655									
9	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food obtained from approved source	2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
10	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Food received at proper temperature	2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
11	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food in good condition, safe & unadulterated	2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
12	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Required records available: shellstock tags, parasite destruction	2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Protection from Contamination .2653, .2654									
13	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Food separated & protected	3	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
14	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Food-contact surfaces: cleaned & sanitized	3	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
15	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper disposition of returned, previously served, reconditioned, & unsafe food	2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Potentially Hazardous Food Time/Temperature .2653									
16	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper cooking time & temperatures	3	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
17	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Proper reheating procedures for hot holding	3	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
18	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper cooling time & temperatures	3	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
19	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper hot holding temperatures	3	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
20	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper cold holding temperatures	3	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
21	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper date marking & disposition	3	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
22	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Time as a public health control: procedures & records	2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Consumer Advisory .2653									
23	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Consumer advisory provided for raw or undercooked foods	1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Highly Susceptible Populations .2653									
24	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Pasteurized foods used; prohibited foods not offered	3	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Chemical .2653, .2657									
25	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Food additives: approved & properly used	1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
26	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Toxic substances properly identified stored, & used	2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Conformance with Approved Procedures .2653, .2654, .2658									
27	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Compliance with variance, specialized process, reduced oxygen packing criteria or HACCP plan	2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Good Retail Practices									
Good Retail Practices: Preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.									
IN	OUT	N/A	NC	Compliance Status	OUT	CDI	R	VR	
Safe Food and Water .2653, .2655, .2658									
28	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Pasteurized eggs used where required	1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
29	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Water and ice from approved source	2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
30	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Variance obtained for specialized processing methods	1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Food Temperature Control .2653, .2654									
31	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper cooling methods used; adequate equipment for temperature control	1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
32	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Plant food properly cooked for hot holding	1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
33	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Approved thawing methods used	1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
34	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Thermometers provided & accurate	1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Food Identification .2653									
35	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food properly labeled: original container	2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Prevention of Food Contamination .2652, .2653, .2654, .2656, .2657									
36	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Insects & rodents not present; no unauthorized animals	2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
37	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Contamination prevented during food preparation, storage & display	2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
38	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Personal cleanliness	1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
39	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Wiping cloths: properly used & stored	1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
40	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Washing fruits & vegetables	1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Proper Use of Utensils .2653, .2654									
41	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	In-use utensils: properly stored	1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
42	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Utensils, equipment & linens: properly stored, dried & handled	1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
43	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Single-use & single-service articles: properly stored & used	1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
44	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Gloves used properly	1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Utensils and Equipment .2653, .2654, .2663									
45	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Equipment, food & non-food contact surfaces approved, cleanable, properly designed, constructed, & used	2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
46	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Warewashing facilities: installed, maintained, & used; test strips	1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
47	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Non-food contact surfaces clean	1	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Physical Facilities .2654, .2655, .2656									
48	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Hot & cold water available; adequate pressure	2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
49	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Plumbing installed; proper backflow devices	2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
50	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Sewage & waste water properly disposed	2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
51	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Toilet facilities: properly constructed, supplied & cleaned	1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
52	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Garbage & refuse properly disposed; facilities maintained	1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
53	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Physical facilities installed, maintained & clean	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
54	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Meets ventilation & lighting requirements; designated areas used	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Total Deductions: 7									



North Carolina Department of Health & Human Services

Division of Public Health • Environmental Health Section

Food Protection Program

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Comment Addendum to Food Establishment Inspection Report

Establishment Name: THE LOOP
 Location Address: 320 SOUTH STRATFORD RD
 City: WINSTON SALEM State: NC
 County: 34 Forsyth Zip: 27103
 Wastewater System: ☒ Municipal/Community ☐ On-Site System
 Water Supply: ☒ Municipal/Community ☐ On-Site System
 Permittee: KVILLE LOOP LLC
 Telephone: (336) 703-9882

Establishment ID: 3034012378
☒ Inspection ☐ Re-Inspection Date: 02/23/2021
 Comment Addendum Attached? ☒ Status Code: A
 Water sample taken? ☐ Yes ☒ No Category #: IV
 Email 1: mdtargett@yahoo.com
 Email 2:
 Email 3:

Temperature Observations

Effective January 1, 2019 Cold Holding is now 41 degrees or less

Item	Location	Temp	Item	Location	Temp	Item	Location	Temp
Burger	final cook	178	C. Sani	Charley Smith 3-7-23	000.0			
Chicken	final cook	181	Serv Safe	Charley Smith 3-7-23	000.0			
Lettuces	salad station	41						
Chicken	salad station	40						
Spring Mix	salad station	39						
Shrimp and Corn Chowder	hot holding	154						
Tomato Bisque Soup	hot holding	185						
Chicken Pizza	cooked to	200						
Lettuce	sandwich station	39						
Tomatoes	sandwich station	38						
Portabella	grill drawer	36						
Black Bean Burger	grill drawer	29						
Roasted Garlic	pizza drawer	36						
Squash	pizza drawer	34						
Pizza Sauce	pizza drawer	39						
Mushrooms	pizza drawer	34						
Mozzarella	walk-in cooler	40						
Spring Mix	walk-in cooler	40						
Hot Water	3-compartment sink	132						
C. Sani	3-compartment sink	50						

Person in Charge (Print & Sign): Charley Smith
 Regulatory Authority (Print & Sign): Victoria Murphy

REHS ID: 2795 - Murphy, Victoria

Charley Smith
Victoria Murphy

Verification Required Date:

REHS Contact Phone Number: (336) 703-3814



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Comment Addendum to Food Establishment Inspection Report

Establishment Name: THE LOOP

Establishment ID: 3034012378

Observations and Corrective Actions

Violations cited in this report must be corrected within the time frames below, or as stated in sections 8-405.11 of the food code.

- 6 2-301.12 Cleaning Procedure - P: An employee was observed washing his hands improperly. The employee washed hands for less than 20 seconds and turned the faucet off with bare hands. Food employees shall clean their hands and exposed portion of their arms, including surrogate prosthetic devices for hands or arms for at least 20 seconds./To avoid recontaminating their hands or surrogate prosthetic devices, food employees may use disposable paper towels when touching surfaces such as manually operated faucet handles on a handwashing sink or handle of restroom door. CDI: PIC was giving a thorough demonstration on handwashing and handwashing was corrected.
- 7 3-301.11 Preventing Contamination from Hands - PF: An employee was observed placing a burger on the bun with a spatula and slid the burger on the bun fully with his bare hands. Food employees may not contact exposed ready-to-eat food with their bare hands and shall use suitable utensils such as deli tissue, spatulas, tongs, single-use gloves, or dispensing equipment. CDI: Employee discarded item
- 13 3-302.11 Packaged and Unpackaged Food-Separation, Packaging, and Segregation - P: A container of raw burger patties were stored on top of a container of tomatoes. Food shall be protected from cross contamination by separating raw animal foods during storage, preparation, holding, and display from raw ready-to-eat food such as fruits and vegetables. CDI: PIC removed items.
- 14 4-601.11 (A) Equipment, Food-Contact Surfaces, Nonfood-Contact Surfaces, and Utensils - P: The following items were soiled in the clean dish area: 1 pot, 1 whisk, and 2 bowls. Food-contact surfaces shall be clean to sight and touch. CDI: PIC moved items to warewashing area to be cleaned.
- 47 4-602.13 Nonfood Contact Surfaces -REPEAT- C: Cleaning is needed to/on the following: salad reach-in and light shield in the walk-in cooler. Nonfood-contact surfaces of equipment shall be cleaned at a frequency necessary to preclude accumulation of soil residues.
- 53 6-501.11 Repairing-Premises, Structures, Attachments, and Fixtures-Methods-REPEAT - C: Recaulk around toilets in men and women's restroom./floors under fryers, along grill line, and in warewashing areas are badly worn exposing concrete. Physical facilities shall be maintained in good repair./6-501.12 Cleaning, Frequency and Restrictions-REPEAT- C: Cleaning needed on walls in warewashing area on cook line. Physical facilities shall be cleaned as often as necessary to keep them clean.
- 54 6-303.11 Intensity-Lighting -REPEAT- C: Lighting measured low in the following areas: (men's restroom) urinal (11 ft candles), stall (12 ft candles), hand sink (9 ft candles), (women's restroom) stall 1 (13 ft candles), stall 2 (16 ft candles), stall 3 (19 ft candles). The light intensity shall be 20 ft candles above the floor in areas used for handwashing areas and in toilets rooms.