

Food Establishment Inspection Report

Score: 91.5

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

Establishment ID: 3034012378
 Inspection Re-Inspection
 Date: 09/10/2021 Status Code: A
 Time In: 1:30 PM Time Out: 4:45 PM
 Total Time: 3 hrs 15 min
 Category #: IV
 FDA Establishment Type: Full-Service Restaurant
 No. of Risk Factor/Intervention Violations: 3
 No. of Repeat Risk Factor/Intervention Violations: 2

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	N/C	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	0			
Employee Health .2652									
2	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Management, employees knowledge; responsibilities & reporting	3	13	0		
3	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper use of reporting, restriction & exclusion	3	13	0		
Good Hygienic Practices .2652, .2653									
4	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper eating, tasting, drinking, or tobacco use	2	1	0		
5	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	No discharge from eyes, nose or mouth	1	03	0		
Preventing Contamination by Hands .2652, .2653, .2655, .2656									
6	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Hands clean & properly washed	4	2	0		
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	<input checked="" type="checkbox"/>	13	0	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
8	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Handwashing sinks supplied & accessible	2	1	0		
Approved Source .2653, .2655									
9	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food obtained from approved source	2	1	0		
10	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Food received at proper temperature	2	1	0		
11	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food in good condition, safe & unadulterated	2	1	0		
12	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Required records available: shellstock tags, parasite destruction	2	1	0		
Protection from Contamination .2653, .2654									
13	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food separated & protected	3	13	0		
14	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Food-contact surfaces: cleaned & sanitized	3	13	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
15	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper disposition of returned, previously Served, reconditioned, & unsafe food	2	1	0		
Potentially Hazardous Food Time/Temperature .2653									
16	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper cooking time & temperatures	3	13	0		
17	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Proper reheating procedures for hot holding	3	13	0		
18	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper cooling time & temperatures	3	13	0		
19	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Proper hot holding temperatures	3	<input checked="" type="checkbox"/>	0	<input checked="" type="checkbox"/>	
20	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper cold holding temperatures	3	13	0		
21	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper date marking & disposition	3	13	0		
22	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Time as a public health control: procedures & records	2	1	0		
Consumer Advisory .2653									
23	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Consumer advisory provided for raw or undercooked foods	1	03	0		
Highly Susceptible Populations .2653									
24	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Pasteurized foods used; prohibited foods not offered	3	13	0		
Chemical .2653, .2657									
25	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Food additives: approved & properly used	1	03	0		
26	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Toxic substances properly identified stored, & used	2	1	0		
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	1	0		

Good Retail Practices									
Good Retail Practices: Preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.									
IN	OUT	N/A	N/C	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	03	0		
29	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Water and ice from approved source	2	1	0		
30	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Variance obtained for specialized processing methods	1	03	0		
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	03	0		
32	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Plant food properly cooked for hot holding	1	03	0		
33	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Approved thawing methods used	1	03	<input checked="" type="checkbox"/>		
34	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Thermometers provided & accurate	1	03	0		
Food Identification .2653									
35	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food properly labeled: original container	2	1	0		
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	1	0		
37	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Contamination prevented during food preparation, storage & display	2	1	0		
38	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Personal cleanliness	1	03	0		
39	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Wiping cloths: properly used & stored	1	<input checked="" type="checkbox"/>	0		
40	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Washing fruits & vegetables	1	03	0		
Proper Use of Utensils .2653, .2654									
41	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	In-use utensils: properly stored	1	03	0		
42	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Utensils, equipment & linens: properly stored, dried & handled	1	03	0		
43	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Single-use & single-service articles: properly stored & used	1	03	0		
44	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Gloves used properly	1	03	0		
Utensils and Equipment .2653, .2654, .2663									
45	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Equipment, food & non-food contact surfaces approved, cleanable, properly designed, constructed, & used	2	1	<input checked="" type="checkbox"/>		
46	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Warewashing facilities: installed, maintained, & used; test strips	1	03	0		
47	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Non-food contact surfaces clean	1	<input checked="" type="checkbox"/>	0	<input checked="" 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	1	0		
49	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Plumbing installed; proper backflow devices	2	<input checked="" type="checkbox"/>	0		
50	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Sewage & waste water properly disposed	2	1	0		
51	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Toilet facilities: properly constructed, supplied & cleaned	1	03	0		
52	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Garbage & refuse properly disposed; facilities maintained	1	03	0		
53	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Physical facilities installed, maintained & clean	<input checked="" type="checkbox"/>	03	0	<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"/>	03	0	<input checked="" type="checkbox"/>	
Total Deductions:					8.5				



Comment Addendum to Food Establishment Inspection Report

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 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: 09/10/2021
 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
Chicken	final cook	188.0	Roasted Mushrooms	walk-in cooler	41.0			
Onions	cooked	181.0	Caramelized Onions	walk-in cooler	41.0			
Romaine	salad station	41.0	C. Sani	dish machine	50.0			
Blue Cheese	salad station	40.0	C. Sani	3-compartment sink	50.0			
Feta Cheese	salad station	41.0	Hot Water	3-compartment sink	142.0			
Spring Mix	salad station	41.0	Serv Safe	Charley Smith 3-7-23	0.0			
Chicken	salad station	41.0						
Clam Chowder	hot holding	164.0						
Tomato Bisque Soup	hot holding	165.0						
Mushrooms	hot holding (stove top)	123.0						
Tomato Cream Sauce	hot holding (stove top)	128.0						
Lettuce	sandwich station	39.0						
Tomatoes	sandwich station	36.0						
Blue Cheese	sandwich station	39.0						
Cole Slaw	sandwich station	40.0						
Portabella Mushrooms	grill cooler drawer	32.0						
Black Bean	grill cooler drawer	39.0						
Caramelized Onions	pizza station	40.0						
Roasted Garlic	pizza station	32.0						
Beef	pizza station	35.0						

Person in Charge (Print & Sign): Mike First Last
Targett
 Regulatory Authority (Print & Sign): Victoria First Last
Murphy




REHS ID: 2795 - Murphy, Victoria Verification Required Date: _____

REHS Contact Phone Number: (336) 703-3814



North Carolina Department of Health & Human Services

Division of Public Health
 Environmental Health Section
 Food Protection Program
 DHHS is an equal opportunity employer.



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.

- 7 3-301.11 Preventing Contamination from Hands -REPEAT- PF: An employee was observed cutting onion for salads with 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: After education, PIC stated that onions would be cooked because the same onions are used for caramelized onions. Onions were cooked to 181 F
- 14 4-601.11 (A) Equipment, Food-Contact Surfaces, Nonfood-Contact Surfaces, and Utensils -REPEAT- P: The following items were soiled in the clean dish area: 1 pot, 1 strainer, and 3 plastic pans. Food-contact surfaces shall be clean to sight and touch. CDI: PIC moved items to warewashing area to be cleaned.
- 19 3-501.16 (A)(1) Potentially Hazardous Food (Time/Temperature Control for Safety Food), Hot and Cold Holding - P: The following items measured at temperatures below 135 F: (stove top hot holding) mushrooms (123 F) and tomato cream sauce (128 F). CDI: Potentially hazardous food shall be maintained at a temperature of 135 and above. CDI: PIC stated items were in hot holding for longer than 2 hours. Items were discarded.
- 33 3-501.13 Thawing - C- Packaged tuna observed thawing in a vacuumed sealed bag that stated item should be removed from packaging before thawing under refrigeration. Potentially hazardous food shall be thawed based on manufacturer's specifications.
- 39 3-304.14 Wiping Cloths, Use Limitation -C: Two buckets of sanitizer holding wiping cloths measured at 0ppm/A wet wiping cloth was stored outside of the sanitizer bucket. Cloths in use for wiping counters and other equipment surfaces shall be held in a chemical sanitizer solution at a concentration specified by the manufacturer..
- 45 4-501.11 Good Repair and Proper Adjustment-Equipment - C: Paint coming off of dish shelves./replace handle on pizza make-unit. Equipment shall be maintained in good repair.//
4-501.12 Cutting Surfaces - C: Replace cutting boards throughout establishment. Surfaces such as cutting boards that are subject to scratching and scoring shall be resurfaced if they can no longer be effectively cleaned and sanitized, or discarded if they are not capable of being resurfaced.
- 47 4-602.13 Nonfood Contact Surfaces -REPEAT- C: Cleaning is needed to/on the following: shelves in the walk-in cooler 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.
- 49 5-205.15 (B) System maintained in good repair- C: The back hand sink is slow to drain and leaking and the faucet handles need to be tightened on the front and back hand washing sinks./prep sink leaking. Plumbing fixtures shall be maintained in good repair.
- 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/recalk around handwashing sinks. 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 (8 ft candles), stall (10 ft candles), hand sink (2 ft candles), (women's restroom) stall 1 (13 ft candles), stall 2 (15 ft candles), stall 3 (18 ft candles). The light intensity shall be 20 ft candles above the floor in areas used for handwashing areas and in toilets rooms.