

Dining Services Education & Training

*A collection of 43 complete lesson plans
to inservice staff in long-term care communities*

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PREFACE

This book is a compilation of some of my lifetime work in long-term care communities as a consultant dietitian and in community colleges as an educator. I believe that knowledge is power, and the happiest staff is well trained staff. Both a minor in education and a lifetime teaching credential with the California Community Colleges qualify me to teach basic culinary, foodservice and nutrition classes and conduct credentialing classes for dietary managers.

As a full-time consultant contracting independently I often had to write a professional looking, legible lesson plan to inservice staff. Sometimes it was difficult to juggle my time and fit everything in during the contracted hours that I had to provide direct consulting services and completing required clinical documentation. There never seemed to be enough time for program development. How often I wished I had ready to use professional looking lesson plans complete with outline, syllabus and lesson plans. An inservice tool box ready to use. I'm sure that many of you have felt the same way about your time; it's busy and limited.

Like most consultants, I organized my work in 3-ring binders, and they kept getting bigger and heavier. Soon it struck me that sharing it with other practitioners was the best way to extend their usefulness. It's taken a few years to put it all together, and now it's finally here, an *inservice training tool box*.

This book includes 43 lesson plans complete with outline, syllabus and competencies – more than enough for 3 years of monthly inservices. Each lesson plan is divided into the course objectives, course content and participant competencies. The syllabus is written in simple language and is detailed enough for even the most inexperienced to use, so the dietitian can provide an approved lesson plan to the CDM, DTR or even an intern.

If you find this book useful in your practice please look for my other books.

<http://www.nutritionmanagementsystems.org>

<http://www.flavorfulfortifiedfood.com>

PAGE **TABLE OF CONTENTS**

i Title Page

ii Credits and Copyright

iii Preface

iv How to Use this Book

v Table of Contents

8 Assistive Eating Devices

10 Can Opener & Base Sanitation

11 Canned Foods Safety

18 Census and Production Sheets

21 Cleaning Ice Makers

23 Cleaning Schedule & Sanitation

32 Cooling Food Safely

35 Dairy & Condiments Storage Guidelines

39 Dining Programs

43 Disaster & Emergency Management

PAGE**TABLE OF CONTENTS**

46	Dish machines – Cold & Hot Temperatures
48	Dishroom Maintenance & Sanitation
50	Dishwashing – Manual Method
52	Eggs – Preventing Foodborne Illness
62	Floor Cleaning
64	Food First Fortified Food Program
72	Food Temperature Safety
79	Garbage & Trash Disposal
80	Garnishes
82	Gloves – Proper use in Dietary
85	Hazard Analysis Critical Control Point (HACCP)
93	Handwashing
99	Hydration Maintenance
101	Infection Control in Dining Services
110	Ingredients Bins
111	Janitorial Supplies Storage
113	Meals Quality – Preparation & Evaluation
122	Menus & How to Use Them

PAGE**TABLE OF CONTENTS**

<i>130</i>	Nutritional Needs
<i>133</i>	Personal Hygiene
<i>142</i>	Protein Portion
<i>143</i>	Puréed Food Preparation and Service
<i>147</i>	Refrigerated & Frozen Foods Storage Guide
<i>149</i>	Safety & Accident Prevention
<i>152</i>	Sanitizing Buckets & Cloths (<i>Red & Green Buckets</i>)
<i>155</i>	Satisfaction with Meals
<i>159</i>	Slushy Puréed Food Preparation (<i>Thin Puréed Food Preparation</i>)
<i>161</i>	Standardized Recipes
<i>165</i>	Steamers & Steam Kettles
<i>167</i>	Thermometer Calibration
<i>171</i>	Resources and References
<i>173</i>	About the Author

DINING SERVICES DEPARTMENT EDUCATION & TRAINING

ASSISTIVE EATING DEVICES

OBJECTIVES

At the conclusion of the presentation, the participants will be able to:

1. State 2 reasons why assistive eating devices are prescribed
2. Name 3 types of assistive eating devices available in their kitchen
3. Describe how the meal is served when there is an adaptive feeding tool required
4. Describe how to wash and sanitize assistive eating devices

COURSE CONTENT

Imagine the frustration of being hungry, having delicious food right in front of you, and watch it get cold because you can't eat it. Some individuals have problems with their hands, whether it's lack of dexterity, strength or coordination, a deformity, tremors, pain or diminished cognition. These individuals are at a high risk for weight loss due to a low meal intake. The use of assistive eating devices will in most cases restore their ability to eat by themselves and improve their total meal intake.

Assistive eating devices are utensils people use when they have difficulty with eating or drinking independently. The term *adaptive eating equipment* is also used. These devices are typically used for people with disabilities or people that have low dexterity. Since assistive eating equipment is intended for therapeutic and restorative use an evaluation and order from a licensed therapist skilled in its use. This way the device is used correctly and under supervision with adequate training and therapy for improvements.

Assistive eating devices are considered dietary department equipment just like any other tableware and has to be washed and sanitized after each use. The device is placed on each tray or table setting and is available for the resident to use when eating.

Procedure for compliance

1. Therapist or MD order assistive eating devices
2. Dining services stores and maintains devices
3. Prescribed devices are placed on each meal tray and provided during snack times as needed
4. Equipment returns to the kitchen along with all dishes after each meal for washing and sanitizing

Assistive eating devices are used to

1. Increase the individual's independence when eating
2. Maintain their dignity, independence and comfort
3. Improve the resident's intake

DINING SERVICES DEPARTMENT INSERVICE TRAINING

Cleaning Schedule and Sanitation Checklist

DINING SERVICES DEPARTMENT SANITATION CHECKLIST

<i>ITEM TO CHECK</i>	<i>Yes</i>	<i>No</i>	<i>COMMENTS/ACTION</i>
1. Is the kitchen floor swept and mopped after each meal?			
2. Check 3 pans that are stored; are they correctly stored, clean and dry?			
3. Are overhead light fixtures covers intact and free of dead insects and dirt?			
4. Are the vent grates clean and free of dust? If free standing fans are used, are they clean and free of dust and not blowing directly into the food?			
5. Is the food storage area free of vermin, insects and other pests?			
6. After washing, are dishes put away dry and correctly stored?			
7. Are all sections of the steamtable currently working; are they clean and free of scale or rust?			
8. Are there internal thermometers in all freezers and refrigerators, and do they work?			
9. Are all days recorded on the temperature logs?			
10. On the dishwashing temperature log, are all entries for low temperature maintained above 145°F for wash cycle and 160°F for rinse cycle?			
11. Ask dishwasher: what do you do if the rinse temperature fell to 95°F?			
12. Do you see all dishwashing staff washing and/or sanitizing their hands between dirty and clean dish loads?			

This is a quick list all staff can complete during a quick walkthrough. Managers should complete this list daily during their rounds.

DINING SERVICES DEPARTMENT EDUCATION & TRAINING

Cooling Food Safely

OBJECTIVES

At the conclusion of the presentation, the participants will be able to:

1. Verbalize and demonstrate methods of proper food cooling techniques.
2. Verbalize and demonstrate how to properly use the Food Cooling Temperature Record.

COURSE CONTENT

Review methods used for cooling of food

The goal of this process is to cool foods safely by doing it rapidly and reducing the time is kept in the temperature *danger zone*. That is a temperature range in which food-borne bacteria can grow is known as the *danger zone*. Food safety agencies, such as the *United States Food Safety and Inspection Service* (FSIS), define the danger zone as roughly 39°F to 140 °F.

1. Cut in smaller pieces – either in half or quarters
2. Remove liquids and if using later cool separately
3. Place in shallow pans
4. If appropriate to the food being cooled, adding ice as an ingredient
5. Place food to be cooled in the back and higher refrigerator or freezers shelves if possible
6. Use one of the 3 approved methods by placing in:
 - a. ice bath
 - b. freezer (uncovered until temperature reaches)
 - c. refrigerator (uncovered until temperature reaches)

Review the use of the Food Cooling Temperature Record

1. After food is cooked place in freezer with thermometer and when it reaches 135°F record time on sheet.
2. After two hours of the time recorded earlier take temperature and document. If 70°F then monitor for another 2 hours.
3. If not 70°F or below then reheat to 165°F for 15 seconds and start the process again with documentation.

Sample Cooling Log

To complete the cooling log use this form or the one provided by your manager. Start documenting temperature when food reaches 135°F, the beginning of the *danger zone*.

DINING SERVICES DEPARTMENT EDUCATION & TRAINING

Cooling Food Safely

Cooling Log

Date	Food item	Final cooking	Cooling	Hour 1	Hour 2	Hour 3	Hour 4
		<i>Time/Temp</i>	<i>Time/Temp</i>	Temperature – start @ 135°F			
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Remember Danger Zone is between 41^oF - 140^oF

Hour 2: If temperature is above 70 °F Move to freezer & contact supervisor

Hour 4: If temperature is above 41 °F call supervisor for corrective actions and/or meal substitution

*Write all interventions under comments, use cooling tips

DINING SERVICES DEPARTMENT EDUCATION & TRAINING**Cooling Food Safely****COMPETENCIES**

1. What methods do you use for proper cooling of food?
A: Cut in small pieces, remove liquids, shallow pan, ice bath (with slotted pan), do not cover, place in refrigerator and/or freezer.

2. At what temperature do you document the time cooling is to start?
A: 140° F. Place thermometer in food and wait till down to 140°F.

3. In 2 hours after start of cooling process what does temperature need to be below?
Four/six hours?
A: 70 F; 41°F

4. What do you do if the food is not reaching 70 or below in 2 hours?
A: Call supervisor. Discard or reheat food to 165°F for 15 seconds and start cooling process again.

DINING SERVICES DEPARTMENT EDUCATION & TRAINING

Dairy & Condiment Storage Guidelines

OBJECTIVES

At the conclusion of the presentation, the participants will be able to:

1. Explain and demonstrate how to properly cover, label, and date opened refrigerated dairy and condiments\ foods for storage.
2. Learn what packaging dates mean on dairy and condiment food items.
3. Describe safe food handling and discard date guidelines of opened refrigerated dairy and condiment foods.

CONTENT

There are often doubts about how to properly store dairy products and shelf-stable condiments once opened. Following these guidelines will ensure safe storage of these items.

Review procedure for dairy and refrigerated condiments food storage

1. Cover
 - a. If the container has its own cover, use it, making sure the inside of the lid and container edges are clean
 - b. If the container is a resealable carton, it can be closed tightly again. Otherwise the contents have to be transferred to a clean sealable container such as a plastic or glass container
 - c. Bagged items can be stored in the original bags either in a larger plastic storage bin with tight fitting lid, or a plastic bag with a sealable side (usually called Ziploc bags)
2. Label
 - a. Label all items with the date opened
 - b. If the “use by” date is included in the label make sure it is visible and/or rewrite it on the new label
 - c. If repackaging an opened item it’s best to try using the same label on the new package; otherwise write the name exactly as the original on the new label
3. Date
 - a. There are 3 types of dates important for all foods whether received or prepared
 - i. Date received
 - ii. Date opened
 - iii. Date to be used by whether reused, rotated or discarded

DINING SERVICES DEPARTMENT EDUCATION & TRAINING

Dairy & Condiment Storage Guidelines

Review dating on dairy and condiment foods

Types of Dates

1. A "**Sell-By**" date tells the store how long to display the product for sale. You should buy the product before the date expires.
2. A "**Best if Used By (or Before)**" date is recommended for best flavor or quality. It is not a purchase or safety date.
3. A "**Use-By**" date is the last date recommended for the use of the product while at peak quality. The date has been determined by the manufacturer of the product.
4. "**Closed or coded dates**" are packing numbers for use by the manufacturer.

**Review storage time guidelines chart for opened dairy
and condiments on the next page**

DINING SERVICES DEPARTMENT EDUCATION & TRAINING

Dining Programs

- Lighting and background music are not distracting
- Clients receive assistance needed and desired from staff
- Meal time is relaxing, somewhat fun, and never institutional

Dining Room Assessment Check List

When developing a dining room assessment checklist it needs to include

- Physical plant appearance and function
- Tables, chairs, equipment
- Clients placement, seating choices, comfort, positioning
- Staffing of dining areas
- Philosophy of dining and client expectations

General standards for dining programs include

- Attractive settings with table cloths or place mats
- Area cleanliness and décor
- Atmosphere, music, lighting, noise level
- Seating arrangements
- Clients arrival, meal timing, service
- Pre-meal service, hydration, socialization
- Meal service and monitoring
- Meal completion
- Assistance
- Meal replacement

For CNAs

- ▶ Orientation to the dining room setting
- ▶ How to properly dress and groom residents for the dining experience
- ▶ How to bring residents to their assigned seats.
- ▶ Transferring residents to chairs from wheelchairs as much as possible
- ▶ How to properly position residents at the table
- ▶ How to properly place the plates, glasses, flatware on the table in front of the resident
- ▶ Orientation to the dining care plan
- ▶ How to record the percentage of intake

Training for Activities

- ▶ Taking residents out of the dining rooms when there for activities for resting and grooming prior to the meal
- ▶ How to properly set the tables prior to the residents arrival
- ▶ How to create the right ambiance (mood) in the dining room with music, tablecloths or placemats, centerpieces

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DINING SERVICES DEPARTMENT EDUCATION & TRAINING

Dairy & Condiment Storage Guidelines

Storage Time and Temperature Guidelines

Dairy	Refrigerator 35°F – 40°F	Freezer 0°F
Non-dairy Liquid Creamer	3 weeks	See package
Cream or Half & half unopened	3 weeks	Not recommended
Cream or Half & half opened	1 week	Not recommended
Cream, heavy, whipping	1 week	Not recommended
Margarine	3 months	1 year
Evaporated milk opened	1 week	Not Recommended
Whole milk	1 week or see expiration date	1 month
Non-fat dry reconstituted	1 week	1 month
Eggs	Refrigerator 35°F – 40°F	Freezer 0°F
Eggs fresh in shell	2 to 5 weeks	Not recommended
Eggs fresh out of shell whipped	1 day	1 month
Home prepared puddings	1 week	1 week – may thaw lumpy
Fruits	Refrigerator 35°F – 40°F	Freezer 0°F
Canned fruits in syrup or juice	1 week	2 months (thaws mushy)
Juices canned or bottled	2 weeks	In glass or plastic up to 1 year
Meats, Poultry, Fish	Refrigerator 35°F – 40°F	Freezer 0°F
Beef	5 to 7 days	6 to 12 months
Veal and Pork	5 to 7 days	4 to 8 months
Lamb	5 to 7 days	6 to 9 months
Chicken and Turkey	2 days	9 to 12 months
Sausages	2 to 4 days	2 to 4 months
Cooked meats & meat dishes	5 to 7 days	3 to 4 months
Meat gravies and broths	5 to 7 days	3 to 4 months
Bacon	7 days	1 to 2 months
Ham	7 days	1 to 2 months
Canned tuna in water, opened	5 days	1 month
Fish fresh or frozen (thawed)	3 to 5 days	4 to 6 months
Fish cooked	5 to 7 days	Not recommended
Miscellaneous	Refrigerator 35°F – 40°F	Freezer 0°F
Vegetables, fresh	5 to 7 days	8 to 9 months
Potatoes, fresh	30 days	Not recommended
Rice, cooked	5 to 7 days	1 month (thaws mushy)
Soups and Stews	2 to 3 days	5 to 6 months
Sandwiches	2 to 3 days	1 month
Casseroles	2 to 3 days	1 month

DINING SERVICES DEPARTMENT EDUCATION & TRAINING

Dining Programs

COMPETENCIES

Describe how to set a table correctly:

1. Live plants are the best choice for table centerpieces:

True False

2. When a resident refuses a meal, what meal replacement will you offer?
 - a. Peanut Butter & Jelly Sandwich
 - b. Chocolate Chip cookies
 - c. Chicken broth
 - d. A second cup of coffee

3. If a resident refuses a meal, will you...? *(check all the correct options)*
 - a. Report it to the charge nurse
 - b. Offer a meal replacement similar to the refused portion of the meal
 - c. Wheel him/her back to the room and hope they'll be hungry for the next meal
 - d. Offer a glass of milk and let it go at that
 - e. Offer a supplement beverage and get it from the licensed nurse

4. Check all the types of music you think is an appropriate types play in the dining rooms during meals. There are no wrong answer

<ol style="list-style-type: none"> a. Chopin waltzes b. New Age c. Waves and bird sounds d. A Mozart symphony e. Classic Jazz f. Acid rock g. Rock 'n Roll instrumentals h. "Elevator" music i. Drum & Base j. The Beatles k. Robert Bubl� 	<ol style="list-style-type: none"> l. Opera m. R & B n. Blues o. Country music p. Latin Jazz q. Santana r. Reguet�n & Reggae s. Rap t. Mambo, salsa, bolero u. Soft instrumentals v. Loud popular music stations
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This was a fun bonus question but a very serious one. The choice of music always depends on the residents and their preferences. Ask them and their families if possible, and if no one gives you the answer, choosing the most conservative and soft music is always a good choice. Never choose loud and avoid excessive DJ chatter.

DINING SERVICES DEPARTMENT EDUCATION & TRAINING

Disaster and Emergency Plan

3. Have a written contract with another facility to store perishable foods in the event of a sudden loss of freezer or cooler space, if possible
4. Keep a current hard copy of your tray cards, or maintain a current list of patients and their diets
5. Maintain backups for your other computer files (flash drive, CD, DVD, external hard drive, or system network)
6. Store flashlights with working batteries in your kitchen and/or dietary offices, and know where they are located; test batteries at least annually
7. Know your backup power source, and how to implement the backup power plan
8. Understand which pieces of kitchen equipment you can operate, when running under emergency power, without exceeding available power

Supplies need to assure uninterrupted food-service operation to residents, staff and visitors

1. Maintain an emergency menu
2. Assure that a 7-day supply of nonperishable foods are available in-house
3. Keep a 7-day supply of paper/plastic/foam dishes and utensils in-house

Emergency procedures review

1. Review your facility and department Disaster and Emergency Procedures, menus and inventory
2. All staff should know where the emergency keys are kept and how to use emergency equipment such as fire extinguishers and their location
3. All staff should know how to access the emergency food and water supply, the emergency residents tray cards and diet list, and the emergency phone numbers.
4. All staff should know how to respond to and what to do during an emergency
5. Instruction should review all emergency procedures in the facility's emergency manual and if necessary tour the emergency supplies room and demonstrate the use of alarms and fire extinguishers

DINING SERVICES DEPARTMENT EDUCATION & TRAINING

Dishroom Maintenance & Sanitation

COMPETENCIES

1. List 3 rules to keep the dishroom sanitary are
2. Cracked dishes can still be used because cracks don't matter
3. Why shouldn't you scrub plastic ware?
4. The best way to sanitize plastic ware is to bleach them.

DINING SERVICES DEPARTMENT EDUCATION & TRAINING

Dishwashing – Manual method

Two-Compartment Method

Drain board	Compartment		
	1	2	2
Stacked Pre-rinsed	Wash	Rinse	Refill with clean water & sanitizer Sanitize

COMPETENCIES

1. How do you set-up the 2 compartment sink?
A: The side closest to the dirty dish side is wash and the side with clean storage of side is sanitize.
2. How much sanitizer do you put in the sink?
A: Manually is 6 ounces and by pump is two pumps.
3. What is the acceptable sanitizer PPM?
A: 200 PPM
4. What do you do when the sink is not properly working?
A: Stop washing dishes and/or do not start and notify DSS and maintenance. If no response turn off machine and proceed to using the manual dishwashing method.

DINING SERVICES DEPARTMENT EDUCATION & TRAINING

Food First! Fortified Recipes

OBJECTIVES

At the conclusion of the presentation, the participants will be able to:

1. Verbalize and understand what and why a fortified diet is served.
2. Understand the facility's Fortified Diet Protocol.
3. Read and understand the production spreadsheet to find out what the daily fortified food item is.

COURSE CONTENT

1. Purpose
 - a) To have staff able to prepare and serve a fortified diet as stated as 's protocol
 - b) To fully understand the reasons and consequences of serving a fortified diet.

2. Process
 - a. A fortified diet is prepared for a resident that requires more protein and calories than what is served on our regular menu. The reasons that a resident is placed on a fortified diet varies. A fortified diet will provide an average of 30-40 g more protein and 800-1,000 more calories per day.
 - b. Protocol requires that:
 - Every Resident on a fortified diet will receive a fortified 8 oz glass of milk and 1 food item that is fortified as denoted on the food production spreadsheet.
 - c. 8 oz Fortified milk will be made from the fortified recipe. The recipe for fortified milk is as follows:
 - 1 Gallon Whole Milk
 - 5 Cups Non-Fat Dry Milk Powder
 - Stir with a wire whisk until blended
 - d. If a resident requests or requires only 1 fortified food item will provide either the fortified milk or the fortified food item.

Fortified Food Program

Menu	Calories	Gm Protein	Cc Fluid	Gm Fat
Fortified Food Menu	2800-3000	100-112 gm	2200 cc	4-6 gm
Regular Menu	1900-2100	72-80 gm	1800 cc	3-4 gm

Fortified Milk



Start to Finish:

6 hr 5 min

Active Time:

5 min

Ingredients

Milk, whole
Non-fat dry milk

1 Serving

1 cup
¼ cup

10 Servings

2 ½ quart
2 ½ cups

Method of Preparation

1. Blend ingredients, refrigerate for 6 hours

Nutrition Facts per 1 cup serving

Calories	Protein	Carbohydrates	Fat
257 kcal	19 g	27 g	8 g



Helpful Hints

- * Fortified milk can also be made with any kind of milk - buttermilk, lactaid milk, chocolate milk
- * Add a flavored syrup or powder for variety, such as chocolate or strawberry

DINING SERVICES DEPARTMENT INSERVICE TRAINING

Food Temperature Safety

LEARNING OBJECTIVES

After working through this course, you will be able to do the following:

- Explain the purpose of the Dietary Services department
- State safe temperatures for hot foods
- State safe temperatures for cold foods
- Explain safe food tips for hot foods
- Explain safe food tips for cold foods
- List ways to help rapid-cool hot foods

OVERVIEW

The incidence of foodborne illness outbreaks has increased in the past decade. Unsafe food temperatures contribute to a significant number of foodborne illnesses. Specific examples of unsafe practices resulting in outbreaks include the following:

- Holding foods that require Time/Temperature Control for Safety (TCS) at room temperature
- Unsafe refrigeration temperatures
- Unsafe holding temperatures
- Improper thawing of frozen food
- Unsafe reheating of leftovers

The incidence of food-temperature-related deficiencies on state and federal surveys continues to be high throughout the nation. Food handlers are the single, most-common source of food contamination leading to foodborne illnesses in nursing facilities. By knowing which foods are potentially hazardous and practicing safe food-handling techniques, you can help drastically reduce the incidence of foodborne illnesses in the facility.

It is the responsibility of every dietary staff member to follow food-handling guidelines, to help prevent the spread of infection and illness within the facility and to ensure compliance with Quality Assessment and Process Improvement (QAPI) standards.

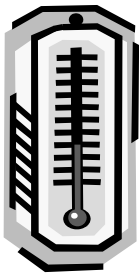
Temperature Guidelines

HANDOUT



Cook foods to proper temperature

Foods are safely cooked when they are heated at a high enough temperature for a long enough time to kill disease causing organisms. The target temperature is different for different foods. Make sure that each food is cooked to the recommended temperature which ranges from 145° Fahrenheit (63° Celsius) to 165° Fahrenheit (74° Celsius).



Cool foods promptly at proper temperature

Once food is prepared it should be eaten right away. Since cold temperatures slow the growth of bacteria, if you're saving it for later, cool rapidly in the refrigerator to 41° Fahrenheit (5° Celsius).

Proper thawing and reheating temperature

Thaw all frozen foods in the refrigerator and not at room temperature to avoid spoilage. When reheating be sure that the inside of the food reaches 165° Fahrenheit (74° Celsius) to be safe.



DINING SERVICES DEPARTMENT INSERVICE TRAINING

Garnishes

LEARNING OBJECTIVES

After working through this Training for Dietary Services Department Garnishes course, you will be able to do the following:

- Define garnishes
- List 3 reasons for garnishing foods
- List 7 criteria for selecting appropriate garnishes
- List 5 criteria for attractive and appropriate plate presentation

DEFINITION

A garnish is an *edible ornament which is added to a dish to improve food appearance and taste.*

REASONS FOR GARNISHING

1. To present foods with optimal eye appeal and taste.
 - a. "We eat with our eyes"
 - b. Contrast in color and texture
2. First impressions are important. The appeal of the meal depends upon the presentation.

GUIDELINES FOR GARNISH SELECTION

1. Simple garnishes instead of elaborate garnishes
2. Add color contrast to enhance color combination
3. Provide contrast in shape and texture
4. Appropriate size for plate size, portion size and food being garnished
5. Complement flavor of the food being garnished
6. Should be edible and compatible with the food served with
7. Should be fresh in flavor and appearance
8. **Select garnishes appropriate to the dietary restrictions and the texture modifications**

GUIDELINES FOR ATTRACTIVE PLATE PRESENTATION

1. Arrange food well on the plate and select appropriate food combinations
2. Cut sandwiches in varied shapes to add interest
3. Use appropriate glassware and plates; correct size, clean, free of chips, marks and stains
4. Serve high water content foods in separate bowls or ramekins and place in plate or on the side to avoid foods running together with other foods
5. Use bread & butter plates or bread bags; do not place bread on same plate as the meal if there are runny foods or thin sauces on the plate
6. Place adaptive equipment on the side to allow residents to view an attractive place setting first

DINING SERVICES DEPARTMENT INSERVICE TRAINING

Hazard Analysis Critical Control Point (HACCP)

PLAN DEVELOPMENT

A HACCP plan is a document describing the procedures used in a specific facility to prepare Time/Temperature Control for Safety Foods (TCS) based on a general plan that provides basic guidelines. The following must be considered when developing a facility specific HACCP plan:

- Menu
- Equipment
- Process
- Flow
- Staffing

There are seven basic principles that must be considered when developing a HACCP program.

- Principles *one, two* and *three* assist in developing the system
- Principles *four* and *five* enable implementation of the system
- Principles *six* and *seven* help maintain the system and ensure its effectiveness

Hazard analysis is the process of identifying and evaluating potential hazards associated with foods during preparation. *Control points* are then developed to prevent or control contamination or increased hazard. Each recipe is analyzed for times during which bacterial growth may occur due to adverse conditions. These periods of time are called *critical control points* (CCP).

The reasons to develop and implement a HACCP system are many:

- Avoid high costs of an outbreak
- Benefit from efficiencies of a system
- Reduce food waste and spoilage
- Improve quality of food
- Increase employee involvement and awareness

IMPLEMENTATION

The seven-step process of implementing a HACCP system is as follows:

1. Identify Time/Temperature Control for Safety Foods in recipes and describe preventive measures.
 - Determine where and when to prevent problems by looking at the flow of food in your kitchen and identifying potential areas and times during which contamination may occur.
 - Hazards to consider are:
 - ◇ Chemical
 - ◇ Biological

DINING SERVICES DEPARTMENT EDUCATION & TRAINING**Handwashing****COMPETENCIES**

1. What is the definition of handwashing?
2. What five things can be prevented from spreading by proper handwashing?
3. What are at least ten conditions that require handwashing?
4. What are the steps to proper handwashing?
5. What should you do to cleanse your hands when a sink and water are not available?
6. What are the steps to drying your hands?
7. What are the three reasons why gloves are worn in medical facilities?
8. Why does the use of gloves not replace handwashing?
9. What are two components of proper nail care?
10. What are two benefits of using hand lotion?
11. What are two aspects to consider when choosing a hand lotion?

DINING SERVICES DEPARTMENT EDUCATION & TRAINING

Hydration Maintenance

- Sugar-free beverage
- Clear broth
- Identify beverages that can be given for residents on thickened liquids:
 - Thickened water, juice, sugar-free beverage
 - Thickened broth
- Identify foods and beverages that cannot be given to residents on thickened liquids or on fluid restrictions:
 - Ice cream
 - Gelatin
 - Soups (unless thickened for thickened liquids and/or measured within the fluid restriction)
- Identify residents on fluid restriction that must not be encouraged to have additional fluids

COMPETENCIES

1. List 4 primary reasons for dehydration.
A: Diarrhea, vomiting, poor intake, exposure to sun or hot temperatures, fever, excessive sweating, diabetes, burns.
2. List 4 negative outcomes associated with dehydration:
A: Fall, weight loss, confusion/change in mental status, body cramps, death.
3. What beverages does the kitchen provide for the residents?
A: Water pitchers at bedside, water and other beverages on meal trays, nourishments/supplements, medicine cart pitchers, beverages given with activities and beverages available at nursing stations and/or public areas.
4. What are examples of liquids provided for a hydration program?
A: Popsicles, gelatin, water, SF beverage, clear broth
5. What are examples of beverages that are acceptable to give to residents on thickened liquids?
A: Thickened water, juice, sugar-free beverage, thickened broth
6. What residents must not be offered additional fluids?
A: Residents with fluid restriction ordered by the physician.

DINING SERVICES DEPARTMENT EDUCATION & TRAINING

Janitorial Supplies Storage

COMPETENCIES

1. Inspect and organize the janitorial supplies storage area and report results to the manager or trainer
2. What are 3 reasons for the storage of cleaning supplies and tools have to be kept clean and organized?

DINING SERVICES DEPARTMENT INSERVICE TRAINING**Meals Quality – Preparation & Evaluation****ALTERNATES AND SUBSTITUTES**

Not everyone likes the same food and all resident's likes and dislikes (preferences) have to be honored. To allow for this, the menu has pre-planned alternates and substitutes.

An *alternate* is a meal you prepare daily for those residents who do not like the planned meal for a day. The Alternate must be prepared for the number of residents listed on the production sheet that do not like the regular menu item.

Example***Regular menu***

- Roast pork
- Rice pilaff
- Spinach

Alternate menu

- Baked chicken
- Mashed potatoes
- Carrots

Plan to prepare enough *alternate* portions for residents who do not want the regular menu, and for a few additional who may change their minds at the last minute.

A substitute is a food you prepare in a small quantity (based on the food preference sheet prepared by your supervisor) to service those residents who at the last minute change their minds, and/or who do not like their day's menu selection. You should always have a substitute, or back-up food, ready and available for those who may not want a particular food or meal. Your manager will plan and post a list of substitutes.

DINING SERVICES DEPARTMENT INSERVICE TRAINING

Menus & How to Use Them

MEAL REPLACEMENTS:

A *meal replacement* is food and/or beverage offered by nursing staff to residents who have not eaten enough of a meal (75% or more of the total food served on their tray). The DSS is responsible for developing and posting a daily list of acceptable meal alternates. These are not included on the menu, as they are a facility choice item based on your own resident's preference. The *meal replacement* may be the same as the *substitute*, or a different choice.

FOOD PREFERENCES AND PRODUCTION SHEETS

A current census will be maintained for staff to use when preparing meals. The *diet census* sheet is an important tool to ensure all food items required for accurate food service are prepared to maintain and improve resident meal satisfaction, reduce waste and avoid distribution delays. It should always include food preferences so that staff knows how much of everything to prepare.

PRODUCTION SHEET - BREAKFAST

WEEKLY UPDATE DATES: _____, _____, _____	
<p><u>JUICE</u></p> <p>Tomato Juice _____</p> <p>Cranberry Juice _____</p> <p>Prune Juice _____</p> <p>Other Juice, Specify _____</p> <p>_____</p> <p>Thickened Juice _____</p>	<p><u>EGGS</u></p> <p>No Eggs _____</p> <p>Special Eggs _____</p> <p>_____</p> <p>_____</p> <p>_____</p>
<p><u>MILK</u></p> <p>8 oz. _____</p> <p>4 oz. _____</p> <p>Nonfat Milk _____</p> <p>8 oz. Thickened Milk _____</p> <p>4 oz. Thickened Milk _____</p> <p>Cocoa _____</p>	<p><u>"NO" LIST (Dislikes & Allergies)</u></p> <p>No Pancakes _____</p> <p>No French Toast _____</p> <p>No Coffee Cake _____</p> <p>Other _____</p> <p>Bacon _____</p> <p>No Bacon/Sausage _____</p>
<p><u>FRUIT</u></p> <p>_____</p> <p>_____</p>	<p><u>CEREAL</u></p> <p>Hot Cereal _____</p> <p>Oatmeal _____</p> <p>Dry Cereal _____</p>

DINING SERVICES DEPARTMENT EDUCATION & TRAINING

Nutritional Needs

- Nutritional needs change throughout life as a result of several influences:
 - a. Aging
 - b. Disabilities
 - c. Illness

- Interventions are often necessary to accomplish the following:
 - a. Improve meal acceptance by meeting food preferences
 - b. Increase nutrient density of foods using fortified recipes
 - c. Increase total intake by offering smaller more frequent meals
 - d. Replace uneaten food with a preferred food similar in nutrientsSupplement when necessary using house prepared supplements such as high calorie high protein puddings, shakes and smoothies

COMPETENCIES

1. List the 3 macronutrients

2. On the menu point one food that is a major source to the of at least one macronutrient

3. On the menu find one source of the following vitamins and minerals:
 - a. Vitamin A
 - b. Vitamin D
 - c. Vitamin E
 - d. Vitamins D
 - e. Folic Acid
 - f. Iron
 - g. Calcium

4. List 2 possible reasons for loss of appetite

5. List one intervention you would recommend for a resident that is either not eating or eating less

DINING SERVICES DEPARTMENT EDUCATION & TRAINING

Safety & Accident Prevention

COMPETENCIES

1. State 3 ways to ensure employee safety in kitchens
2. What are 3 rules to follow to ensure safe storage in dry storage areas
3. Briefly describe the safe knife handling and storage method
4. Name 2 important fire prevention guidelines

DINING SERVICES DEPARTMENT EDUCATION & TRAINING**Sanitizing Buckets & Cloths****COMPETENCIES**

1. What is the acceptable PPM for a prepared sanitizing bucket?
A: 200 PPM
2. What cloth do you use for the sanitizing bucket?
A: Clean reusable or disposable wiping cloth
3. How often do you change the water for the sanitizing bucket?
A: Every 4 hours, or when it appears to be dirty
4. How do you use the sanitizing cloth?
A: When surfaces need cleaning using a food-safe spray or soap and water; rinse cloth thoroughly, squeeze excess water and place back in bucket until next use

FILL IN THE BLANK

1. The test strip results should read _____ ppm for quaternary.
2. The number of cloths that can be placed inside the sanitizing bucket is _____ to _____
3. Sanitizing solution should be changes every _____ hours or when _____
4. The color of the results from the sanitizing strip color when correctly tested is _____

TRUE OR FALSE

5. A central sanitizing bucket for all staff to use is the best solution as it encourages sharing and builds teamwork.
6. It is acceptable for a sanitizing bucket to be stored on the counter during food preparation as a reminder to staff to clean as they go.
7. Sanitizing solution can be stored in any bucket, pot or pan as long as the ppm results are met.

DINING SERVICES DEPARTMENT EDUCATION & TRAINING

Satisfaction with Meals

COMPETENCIES

1. Demonstrate and use the quality monitor & Meal Satisfaction survey
2. Demonstrate and use the resident Meal Satisfaction questionnaire
3. Open discussion session with instructor asking participants in turn to state 1 or 2 appropriate substitutes for each of the food types listed in the chart above.

DINING SERVICES DEPARTMENT EDUCATION & TRAINING

Slushy Puréed Food Preparation

OBJECTIVES

At the conclusion of the presentation, the participants will be able to:

1. Define the meaning of a slushy purée consistency
2. State equipment needed to prepare slushy puréed food
3. State foods to use and foods to avoid in slushy puréed food preparation
4. State liquids to use slushy puréed in slushy puréed food
5. State 3 methods to enhance calories and flavor in slushy puréed food

CONTENT

Definition

A Slushy Puréed diet is for persons who need a liquefied, thin or drinkable Blenderized diet. This diet is well a well-balanced and meets nutrient needs to maintain weight and skin integrity. The *Liquefied diet* is identified by several names all meaning the same; Liquefied, Drinkable, Thin or Slushy. The viscosity of the final product depends on preparation methods, resident's ability and diet order.

Preparation

All foods are in a liquid form, thin enough drink in a mug or tumbler or sip with a spoon without the need for chewing. It is blended and if needed strained to remove chunks of foods, seeds or fibers that may cause choking or require chewing.

Instructions

Equipment needed:

- Blender, food processor or food mill
- Fine wire strainer
- Wire whisk or fork
- Avoid fibrous fresh fruits and vegetables and high fat or gristly meats, as they are difficult to puree.
- Avoid nuts, seeds, whole grain or bran cereals, starches, and foods with tough skins or hulls.
 - To liquefy in a blender:
 - Put small pieces of solid food in blender
 - Add a small amount ($\frac{1}{4}$ cup) of fluid.
 - Blend until puréed.
 - Strain through jelly strainer to remove particles.
- Liquids to use:
 - Broth

DINING SERVICES DEPARTMENT EDUCATION & TRAINING

Slushy Puréed Food Preparation

- Clear soups
- Cream
- Cream soups, strained
- Fruit juice
- Half & Half
- Milk
- Other foods to use:
 - Smooth yogurt, without chunks of fruit or nuts, thinned with appropriate liquid
 - Sour cream thinned with half & half or milk
 - Ice cream, without chunks of nuts, fruit or candy – will melt in the mouth or may melt before drinking
 - Gelatin desserts without fruits or vegetables – will melt in the mouth or may melt before drinking
 - Tomato or vegetable juice. Fruit juices.
 - Solid fats and cheese blend more easily if they are first melted. Oil, salad dressings, yogurt or cream can be added directly to the puree to thin further.
- Provide balanced meals that are adequate in calories, protein, vitamins, minerals and fluid and offer 6 to 8 cups of water a day

COMPETENCIES

1. What does “slushy puréed” food mean?
2. What equipment is used to prepare slushy puréed food?
3. What are 2 types of food to avoid when preparing slushy puréed food?
4. State liquids to use slushy puréed in slushy puréed food
5. State 3 methods to enhance calories and flavor in slushy puréed food
6. *An observation of actual slushy food preparation & service, taste food. & evaluate the flavor, texture, aroma & appearance of at least one item*

DINING SERVICES DEPARTMENT INSERVICE TRAINING

Standardized Recipes

LEARNING OBJECTIVES

After working through this course you will be able to do the following:

- Explain *this facility's* house diet policy
- Explain the purpose and procedure for standardized recipes
- Explain the diet types
- Describe the Dining department's performance assessment

OVERVIEW

The Dining Services department is part of the total resident care. The primary purpose of the department is to provide wholesome, safe and appetizing food that meets the nutritional, psychosocial, and psychological needs of the resident according to the physician's diet order, as well as complying with local, state, and federal requirements and quality standards and service.

HOUSE DIET POLICY

The House Diet Policy consists of the following components:

- Policy for diets served in the facility.
- Purpose for the policy.
- Description of House Diets.

POLICY:

In addition to the regular diet, standardized therapeutic diets and texture modified diets will be offered.

PURPOSE:

To aid in the treatment of certain disease states.

PROCEDURE:

1. *Diet orders will conform to the House Diets when medically possible. See description of House Diets.*
2. *Menus are written for the House Diets.*
3. *Diet orders that are not on the Description of House Diets require notification of the Registered Dietitian Nutritionist for guidance.*

Refer your own policies and procedures manual for your facility house diets policy

DINING SERVICES DEPARTMENT INSERVICE TRAINING

Recipe Name & Number
5-A-46

Important to note timing when planning production time for meal to be ready on time and properly cooked.

Temperature control – the temperature to cook, cool and store

Check portion size – should match the menu or you must adjust amount prepared.

NAME: YANKEE POT ROAST
NUMBER: 5-A-46

TIMING:
Pre-Prep: 20 Min.
Prep/Assembly: 15 Min.
Cook/Chill: 4-5 Hr.

TEMPERATURE:
Cook Temp: 300°F Internal Temp: 165°F
Chill Temp: 41°F
PAN SIZE: 12"x20" x4"

PORTION SIZE:
2 oz. gravy
UTENSIL: Tongs or Fork

PORTIONS	10	25	50	75	100	200	300
INGREDIENTS	MEASURE	MEASURE	MEASURE	MEASURE	MEASURE	MEASURE	MEASURE
BEEF, BONELESS	2 LBS 8 oz	6 LBS 8 oz	10 LBS 8 oz	18 LBS 8 oz	25 LBS	50 LBS	75 LBS
SALT	3/4 tsp	2 tsp	1 T + 1 tsp	2 T	3 T + 1 tsp	1/3 C	1/2 C
PEPPER	DASH	1/4 tsp	1/2 tsp	3/4 tsp	1 tsp	2 tsp	3 tsp
WATER	6 oz	2 C	1 QT	1 QT + 2 C	2 QTS	1 GAL	1 GAL + 2 QTS
TOMATO PUREE	1 1/4 C	3 C	1 QT + 2 C	2 QTS + 1 C	3 QTS	1 GAL + 2 QTS	2 GALS + 1 QT
BAY LEAF	1/2	1	1	2	3	6	9
FLOUR	6 T	1 C	2 C	3 C	1 QT	2 QTS	3 QTS
WATER, COLD	1/3 C	3/4 C	1 1/2 C	2 1/4 C	3 C	1 QT + 2 C	2 QTS + 1 C

Preparation instructions

- METHOD:**
- Season meat with salt and pepper.
 - Place in roasting pan and add water, tomato puree and bay leaf.
 - Cook slowly at 300°F until internal meat temperature reaches 165°F.
 - Thicken pan drippings with flour that has been mixed with cold water. Remove excess fat if necessary. Make gravy (follow gravy recipe). Adjust seasonings and pour over meat in pan. Reheat to 145°F.

Measurements to be followed for quantities prepared

MODIFICATION INSTRUCTIONS:

- Exchanges:**
1 portion = 3 meats
- Sodium Restricted:**
Omit salt. Use low sodium tomato puree.
- Low Fat, Diabetic, Controlled Carbohydrate:**
As written.
- Puree:**
Puree to smooth consistency, adding small amount of hot liquid if needed.

Therapeutic Diets & Modified Textures

HACCP Guidelines

- TEMPERATURE CONTROL:**
- To use immediately:
- Remove from juices.
 - Let stand at least 1/2 hour before slicing. Slice.
 - Arrange slices in 1 oz. portions overlapping in steamtable pan and reheat in oven to 145°F. Serve hot at 145°F.

Safe Storage & CCP

- To store and slice the next day:**
- If not using immediately, cut into quarters, cover, label and chill to 70°F in 2 hours, and 40°F in 4 hours, until needed.
 - When ready to use, slice cold meat in 1 oz. portions.
 - Pour hot juices or gravy over meat, cover with lid and reheat in oven to 165°F for 15 seconds. Serve hot at 145°F.

Important to note timing when planning production time for meal to be ready on time and properly cooked & for chilled.

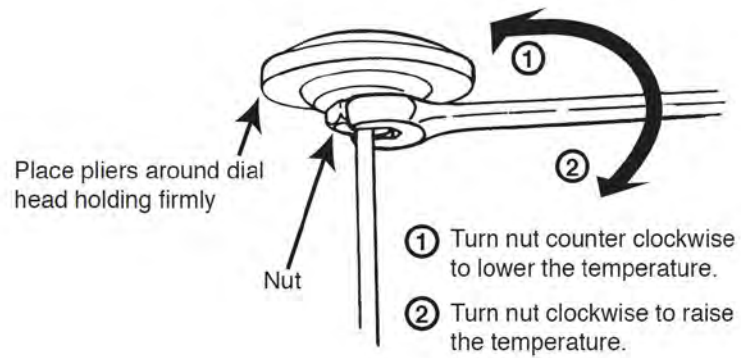
Modified Textures are prepared from Regular or appropriate diet order Use

Temperature control is most important. This is part of the entire preparation process. Keep temperature cooling logs.

Recipe Number

GRAMS PROTEIN: 24 GM

Check portion size – should match the menu or you must adjust amount prepared.

DINING SERVICES DEPARTMENT INSERVICE TRAINING**Thermometer Calibration****COMPETENCIES**

A practical test that includes return demonstration of thermometer calibration process.