For many years, much of the food offered at senior living communities has been described—unfairly or not—as “institutional.” Because we serve an at-risk population, two of our top priorities must be good nutrition and food safety. These important concerns combined with tight budgets have encouraged us to develop a laser focus on rules, regulations, costs, sanitation, nutritional analysis, and various systems and procedures that do an admirable job of providing safe, nutritious food to our residents. So far, so good. But as our communities, formerly filled by The Greatest Generation, are now welcoming Baby Boomers in larger numbers, safe and nutritious food is considered a given, and by no means enough.

Most people’s feelings about “institutional” food is that it’s something you can eat to live, but probably not live to eat. It provides adequate nutrition and won’t make you sick, but it won’t make your day. Contrast that with our feelings about our favorite home-cooked meals or restaurants. That food certainly offers plenty of good nutrition and is safe but, Wow! You look forward to having it, enjoy sharing it with your friends, and have great memories afterwards. That’s what I call more of a culinary/hospitality model of food service. Let’s take a look at how we can strive for this in our kitchens.

First, let’s start with the idea that mealtimes should be one of the main events that our residents look forward to. The
food we serve should look, smell, and taste great; give them something positive to talk about with their friends; and bring back pleasant memories of the kinds of things they’ve eaten and enjoyed all their lives. Of course, nutrition and sanitation are as important as ever, but we should never settle for just that. More and more, our residents certainly won’t.

Everything in a kitchen originates from the menu. The equipment, staffing, inventory, systems, and procedures all exist as a means to produce a given menu for a specific number of guests. Our menus are also the first step in determining whether our guests love the food they’re served, hate it, or are somewhere in between. With this in mind, we can’t put too much effort into developing our menus.

Our residents have spent a lifetime enjoying a wide variety of great foods. America is a melting pot, reflected in the diversity of the foods available to our residents for years. When writing menus, we should appreciate this variety as the opportunity it is. With some thought and planning, we can give our guests the impression that every meal is like eating in a different restaurant than the one before. Italian food one night, German food the next, and French the night after that. The same can be done with different regions of the United States. Gumbo, shrimp and grits, enchiladas, bar-b-que, fish chowder, and other regional favorites can all create interest and give residents something to look forward to.

“Themed meals” are a staple on cruise ships. Most restaurants, too, plan their menus around one theme or another. I’m not suggesting you go crazy with decorations or costumes. Just use consistent, thoughtful planning through the course of each meal. Watercress soup, seared fish with lemon-butter sauce, baby string beans, roasted potatoes, and an apple tart would absolutely count as a French meal!

Make things interesting, not challenging. Always play to your audience.

One thing that no audience will ever have a problem with is too much made-from-scratch food and not enough processed items. Of course, we have to strike a balance between what we’d do in a perfect world, and what we’re actually capable of doing in terms of staff, space, equipment, expertise, and budgets. Pick your battles. For many operations, high-quality frozen pies and cakes make perfect sense. Most kitchens don’t have someone who could pass for a pastry chef, so it’s easier to defrost a cake than to bake and decorate one, and many frozen products are crowd-pleasers. But be on the lookout for things your staff could do. A Black Forest cake might be a challenge, but you could probably make a great cherry cobbler with frozen fruit and biscuit mix that would look and taste great, and be more like what your residents made themselves.

Soups are another example of something you might consider making from scratch. With the right recipes and a little effort, you’ll be offering your guests the kind of soups they’ve enjoyed their whole lives at home and in their favorite restaurants. The more items you make from scratch, the closer you’ll be coming to a culinary/hospitality concept, and the further from an institutional model.

To accomplish this, a number of areas in your operation may require

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change – some more difficult than others. One category is your physical plant. Simply repairing existing equipment can be a huge step in the right direction. If you can’t get the funding to do so, you probably have bigger obstacles than a broken oven. Acquiring some new equipment, big and small, might also allow you to do a lot more. On the more extreme end might be a “tilt skillet.” These are heavy, fixed pieces of equipment that allow you to make large quantities of stock, soups and stews, as well as functioning as very large frying pans. They “tilt” to facilitate cleaning, and require a floor drain as well as an exhaust hood. They should be included in any kitchen plan with aspirations of producing great food in quantity. On the more modest end of the spectrum, new sheet pans, tongs and storage containers can be a huge boost to productivity and morale in many kitchens.

A nice side benefit of cooking from scratch and reducing the use of processed products is that your food will be inherently healthier. Lower sodium content, more fiber, more easily absorbed nutrients, and meals that just “sit better” will be built into your plan. And, in my experience, dietitians have a relatively easy job approving menus containing a wide variety of well-balanced, made-from-scratch items.

Another area that might need attention is your recipes. To stack the deck in your staff’s favor, give them clear, easy-to-follow recipes scaled to the number of portions they need to produce, and that will result in great food when carefully followed. Realize that the quality of food any recipe will yield is only as good as the caliber of your cooks. A recipe is a lot like a piece of piano sheet music. When played by a great piano player, it will sound great. An average player, average. Give it to someone who has never played the piano before, and it will be unrecognizable.

Which brings us to the next point. You may need to bring in some higher-quality talent than you currently employ. While we have some of the longest-serving, hardest-working people out there working for us, in most cases they’ve never had a job where they’ve produced better quality food than they are now. If the goal is for that food to be better, you’ll need at least one leader who’s already done it and can teach the current staff how. The fact that the person’s experience is in good restaurants or hotels,
not in senior living, shouldn’t be a negative. It should actually be just what you’re looking for. Their knowledge and expertise about menus, cooking techniques, ingredients, systems, and procedures might be what your operation needs. Coupled with experienced CDMs and registered dietitians to help with the kind of sanitation and nutritional standards to which we must adhere, you’ll have a dream team that can take you to the head of the pack, and as far away from “institutional food” as your guests want you to go.

Reading *Transitioning from Institutional Food Service to a Culinary/Hospitality Model* and successfully completing these questions online has been approved for 1 hour of continuing education for CDM, CFPPs. CE credit is available ONLINE ONLY. To earn 1 CE hour, access the online CE quiz in the ANFP Marketplace. Visit [www.ANFPonline.org/market](http://www.ANFPonline.org/market), select “Publication,” then select “CE article” at left, then search the title “Transitioning from Institutional Food Service to a Culinary/Hospitality Model,” purchase the article, and complete the CE quiz.

1. “Institutional food”
   A. Is nutritious and safe to eat
   B. Is a popular Food Channel program
   C. Helps make hospitals favorite places to eat

2. Food in the culinary/hospitality model
   A. Can only be found in popular restaurants
   B. Can be safe, nutritious, and fun to eat
   C. Is too difficult to produce in senior living communities

3. Mealtimes should
   A. Be one of the main things our residents look forward to
   B. Be scheduled for maximum efficiency
   C. Not interfere with kitchen prep work

4. Everything in a kitchen originates from
   A. The food distributor’s deliveries
   B. The cleaning schedules
   C. The menu

5. Our residents have spent a lifetime
   A. Hiking the Appalachian Trail
   B. Enjoying a wide variety of great foods
   C. Looking forward to “institutional” food service

6. Incorporating more made-from-scratch items may require
   A. Different hairnets, longer breaks, and more sanitizer
   B. Colder walk-ins, new china, and more servers
   C. Different equipment, recipes, and expertise

7. The combination of an experienced chef along with a CDM and an RD
   A. Means more friction between staff members
   B. Could be the dream team you’re seeking
   C. Will make for more entertaining holiday parties

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