

## So you Have Decided to Implement a Buffet... Now What?

- 1. Decide what you want to include on your buffet.** Most buffets consist of a salad bar, hot food table, dessert, and beverage station. For each of these areas you will need to decide how many choices you want to include. Tables can be pre-set with placemats and silverware. If you are just starting out and budget and/or preparation are issues, consider starting small with the number of choices offered. You can always add items as staff members become more skilled at running the buffet. It is harder to downsize than to add. Residents quickly become accustomed to the number of choices offered and can become unhappy if choices are taken away.
- 2. Review current menu for adequacy and satisfaction of resident population.** Use existing menu if it is meeting resident needs and within the production capabilities of the department. The main item on the current menu will be choice 1 on the buffet. Use a planned alternate menu and review it against the main items on the menu. The second choice should be a different item and lighter in production. The third choice can be optional, a very popular option is to make this item "cook's choice". This adds the element of the unexpected and keeps the menu rotation from becoming tiring to the residents. The third choice is a place to consider using up excess inventory or accommodating those requests for items that are not popular with the majority. So often we feel compelled to take these items off the menu and those that are in the minority and like the more unusual items such as liver, fish, ethnic foods, spicy items etc. never have the opportunity to enjoy them.

A minimum of 2 choices for meat, starch, and vegetable should be offered. The third choice can be added for all the items or for just meat and vegetable. Some facilities find they need to have mashed potatoes as a starch every day. Then they add 2 more choices for starch and these 2 choices may include a potato item such as scalloped potatoes, party potatoes etc.

A salad bar rotation works well. In order to ease production, use the salad of the day from the main menu as the central item, and then add any unused prepared salads from the prior 2 days (after 72 hours discard any unused product and make sure it has been held properly before reusing it), round out the selections with having salad bowl of lettuce and toppings. Popular rotation choices are 3 cut vegetables (use seasonal and dice for ease of chewing), 1 fresh and 1 canned fruit, croutons, bacon bits, and sesame seeds. Other popular choices (depending on raw food budget) are a choice of a protein item such as cottage cheese or meat salad (these can be made from leftover meats when these items are on the menu such as turkey, chicken, and ham), consider using ground meat in the salads to allow the mechanical soft diets to have these items. The extent of offerings on the salad bar will depend on the budget allowance of the facility. Increasing the number of items offered can increase the food budget. Pre-prepared salads, meat salads, cheese, bacon bits, seeds and nuts are the more costly items and should be limited if raw food budget is limited. The salad bar can be used most effectively when items used reflect available inventory and rotate the items based on the inventory. It is important to use up inventory, by incorporating the small amounts of fruits and vegetables that are left into salads such as pasta salads, marinated salads, etc. For fresh fruits, watch ripeness and use up promptly.

Dessert offerings also work well as a rotation. Again the dessert of the day can be used as the primary selection. The other choices come from unused desserts from the prior 2 days. Some facilities use the dessert of the day as the main choice and then add an easy to produce item as the second or third choice. For example cheesecake is on as the main item, a cookie selection is used for the second choice and ice cream as the third choice. As the cooks become accustomed to the new system, they can work with the registered dietitian to expand the number and complexity of the offerings.

Beverage variety should be offered at each meal. Milk should be offered at least 2 cups per day. 4 to 6 ounces of vitamin C juice should be offered each day. Other juice mixes, tea, coffee can be served to the

residents at the table or available at a beverage station at the end of the buffet line. The beverage service is a great place to include ancillary staff to assist in the meal service. Front office staff, activity personnel, housekeeping, volunteers, etc., can roam in the dining room offering additional beverages.

### **3. Evaluate location of the buffet lines and equipment needed to set up the line.**

The shape, size and arrangement of the buffet line will depend on each facility and the available space. An "L" or "U" shape often works well. You might want to start with a nice display for the silverware and trays. A container that holds flatware inverted, would not require wrapping, although most facilities prefer to wrap the silverware. The short leg of the "L" is often the salad bar. Along the long part of the "L" are the steam table and then beverage and dessert stations.

Equipment will be needed to display the salad bar items. Consider the size of the salad bar unit carefully based on the amount of space you have in the dining room and the number of items to be displayed on the unit. Consideration should be given to the size of the crocks selected. A variety of sizes work best. Shallow crocks allow less product to be out at a time and this will require more frequent refilling of the selections. This also decreases waste. There are insulated crocks that work well and help hold the temperature of the product as less than 40 degrees without needing ice. These special crocks are frozen before use and filled with cold salads. Always remember to empty crocks, and wash properly before refilling.

There are several sizes and types of salad bars. Cambro is one company that makes an insulated salad bar that does not require electricity; however, you do need to add ice to maintain the temperature. There are also electric salad bars that chill without needing ice, but these units are more costly and require a 220V that is close by or that can be added to where the unit is to be located. In considering what size salad bar is desired, select a location and insure there is adequate space. Some facilities also use the salad bar to display the dessert selection and if this is desired this will need to be considered in selecting the size salad bar desired. Beverages for meals can be poured into glasses and put into the salad bar for display. Again consider this before selecting the size salad bar desired.

In most cases the existing steam tables can be used. For the smaller steam table use more 1/3 and 1/4 pans and restock more often. This helps preserve a better quality as well. Steam tables out in the dining room can be skirted to improve the visual appearance.

For the dessert table, a cart, nicely decorated table or a salad bar can be used to display the offerings. Consideration should be given to desserts that must stay cold due to potentially hazardous ingredients. It is recommended to wait to purchase equipment to display desserts until the arrangement of the line has been tried and a permanent location is selected.

Beverage stations can be located on a table or a counter can be built to allow installation of coffee pot, ice tea machine and juice machines. These decisions should be made after the arrangement of the line has been tried and permanent location is selected. Hot pots for coffee, hot chocolate and hot water work well and pitchers of juice; drinks like lemonade or fruit punch can be available on ice. Milk must be dispensed from the original container; individual cartons often provide ease of service and limit waste. Beverage areas do have a significant amount of spillage so clean up needs to be considered. Also give consideration to availability of tea bags, hot cocoa mix, sugar and sugar sub creamer, etc., and where these items can be located. Resident safety should also be considered by planning for staff to be in the dining room when residents have access to hot equipment.

For each serving area, hand-washing sinks must be accessible. Staff needs to be able to wash their hands in between tasks or anytime they leave the serving area and return to serving food. If hand-washing is not easily accessible consider the portable hand-washing stations (available from Cambro).

Tray cards are still useful. Any special needs, allergies or restrictions should be listed on the tray card to assist the staff in offering appropriate items. Of course the resident still has the right to refuse what is offered and select another item (with the exception of allergies and texture restrictions). The outcomes for the resident should be monitored for any negative effect. The tray card should be left at the table for identification of the resident and for the recording of dietary intakes. Having a tray card for each resident also provides a way to monitor that each resident has come to the dining room for a meal. It is usually easiest to keep them in alphabetical order.

- 4. Decide where in your dining room to locate the components of your buffet.** Consider traffic flow in your decision. Remember that encouraging residents to go through the line (with assistance) is the goal, so there will be cross traffic. Some find that putting the buffet at the far end of the dining room works well, others like it at the entrance. Encourage open meal times (a span of time that the dining room is open for a meal, for example lunch from 11:30 to 1:30 and the resident chooses when to come and eat) to ease traffic flow and avoid lines. You will also need an area to put bus tubs/carts. These items do not look appealing in a dining room, so consider a location that is not highly visible to residents who are eating.
- 5. Review staffing and job duties for new method of service.** Usually the current level of staffing can be re-assigned to complete the needs of the new method of service.

Past experiences have demonstrated that it is best to assign the cooks to the kitchen during meal service. In this station the cooks batch cook for the buffet line and work on the next meal's preparation or pre-prep for the next day.

The dietary aides are assigned in the dining room to work and serve the line. There will be less need to pre-dip items like salads, desserts, and beverages so this can help free up some of their time for new tasks in the dining room. Some facilities assign a "hostess" to help direct residents and make sure tables get bused and reset. This position may be from another area or perhaps one of the dishwashers. A hostess position can also assist residents through the line and carry the tray for residents who can come to the dining room and eat independently. All staff in the dining room should work together and be alert to provide resident needs such as opening items, cutting up foods, pouring additional beverages, etc.

- 6. Residents should be able to decide what time they want to eat and at which table they want to sit.** More than likely you will need a reserved table for feeders and they may not be able to select the time at which they eat. Consider observations of what time they eat best or when they are least fatigued. Many facilities find it easiest to feed them toward the middle of the serving time. This allows staff to be able to assist the ambulatory or "first eaters" before having to sit down at a feeder table. Assigning one staff to be a feeder and feeding a few residents at one time can also work. Any room trays are usually made right from the buffet line, covered and then taken to the resident's room by a staff member when the resident is ready to eat.

#### **Summary of Implementation Suggestions**

- Inform all staff of the intent of the new service; conduct informational in-services that stress the philosophy of person centered planning in meal services.
- Have a dining committee from each department and resident participation; allow input into the new process.
- Review the menu and make any alterations as necessary to accommodate the buffet style service.
- Review equipment needs; use existing equipment as much as possible to "try things out" before major purchases are made.
- Review staffing schedules and put together a preliminary new schedule.
- After planning meetings are well under way, have dining committee pick a start date. It is very tempting to delay the start, attempt to be firm with the start date by picking a realistic date. Some staff will resist the change and it is typical to find pressure to put off the change because it's "not a good time".

- Liberalize diets as much as possible. There is ample scientific literature to support this concept. The goal of this type of meal service is to increase choice, satisfaction and intake of meals; restrictive menus limit choices for the residents. Most diabetics will do well on the buffet style on a regular diet. For those diabetics who need tighter control of carbohydrates to control their blood sugar, the tray card should indicate the number of carb choices for each meal and a dietary staff should assist these residents at meals to select the correct number of carb choices with the appropriate portion.
- Consider serving staff before and after the meal times for the resident buffet, not all choices need to be available and ready, and consider if the salad bar is to be made available. If the salad bar is prepared and garnished for residents, give consideration to the appearance or refreshing after staff are served.
- Evaluate dining rooms. Consider a committee to work on decorating the dining room that is heavily represented by residents and resident families. A home like environment is pleasing in creation of a relaxed dining room. Family or residents may donate furnishings like a buffet display case or dishes that can be displayed to promote this home like environment.
- Evaluate what other staff can come to the dining room to help residents through the buffet line. Ancillary and other staff can come for a segment of time each day or assigned to help on a day or more per week. Give consideration to who is available on weekends and limit their assignments during the week. When the neighborhood concept is implemented in staffing for all departments, these teams generally decide who comes down to help in the dining room amongst themselves.
- Write policies for liberalized diets, monitoring procedures, temperature control and monitoring, utilization of unused items and discard policy, intake policy, tray card usage, batch cooking to name a few.