Day Kitchen Aide

Buddy Orientation Checklist

|  |  |  |  |
| --- | --- | --- | --- |
| Job Duties | Date | Trainer Initials | Buddy Initials |
| **General:** |  |  |  |
| Review of Care Model |  |  |  |
| **Review Policy and Procedure manuals [list all that apply for your organization below are some examples]** |  |  |  |
| Show how to prepare sanitizing solution pail   * Chemical used * PPE |  |  |  |
| Show resident meal sign out sheet |  |  |  |
| Show and explain resident seating plan |  |  |  |
| Breakfast service- SWPP for using cart, repetitive tasks.   * Explain procedure and serving rotation |  |  |  |
| SWPP for washing dishes, including discussing proper PPE.   * Sorting and soaking dishes procedure (cleaner) * Filling dish trays * Using the dishwasher |  |  |  |
| Recording dishwasher temperature procedure |  |  |  |
| SWPP for dishwasher |  |  |  |
| SWPP for use of the steam table |  |  |  |
| SWPP for washing steam table and inserts  Cleaner  PPE (cleaner fast tags) |  |  |  |
| Meal preparation   * Rotation schedule * Service time |  |  |  |
| SWPP for the use of the steamer |  |  |  |
| Lunch prep **(insert site specific times and duties)**   * **Fill fruit/dessert dishes** * **Diabetic desserts** * **Bread containers** |  |  |  |
| Lunch service   * Serving schedule |  |  |  |
| Afternoon snack prep procedure |  |  |  |
| Supper **prep (insert site specific times and duties)**   * **Salad** * **Fruit** * **Dessert** * **Diabetic dessert** |  |  |  |
| **Occupational Health and Safety Procedures (list all that apply for your organization below are some examples)** |  |  |  |
| Go over Weekly Cleaning Schedule |  |  |  |
| Go over Monthly Cleaning Schedule |  |  |  |
| Go over MSDS sheets with chemicals used, point out PPE requirement component. |  |  |  |
| First Aid Procedures |  |  |  |
| Go over Job Hazard Assessment |  |  |  |
| Go over SWPP for kitchen and dining room |  |  |  |
| Hazard Reporting process |  |  |  |
| Incident Reporting process |  |  |  |
| Go over Fire Warden responsibilities and schedule |  |  |  |
| Responding to Resident Emergency call procedure |  |  |  |
| **Communication: [list all that apply for your organization below are some examples]** |  |  |  |
| Residents |  |  |  |
| Families |  |  |  |
| Co-Workers |  |  |  |