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 insertsCleaner 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 |  |  |  |