

October 2020



SASKATCHEWAN SOCIETY OF NUTRITION MANAGEMENT

Nutrition Management Today

SSNM Conference Update

Due to the unknowns of COVID-19, we as your SSMM board are wanting to keep you our members, students, speakers, corporate sponsors and the venue staff as safe as possible.

With this in mind the SSNM Board has decided to postpone our 2020 conference until **May 13, 2021!** More details to come closer to the date!!

We hope to see you there!!

Stay safe everyone!

Natasha Brandt, NM



SSNM Annual General Meeting

This year's SSNM AGM will be held via Zoom on October 28th, 2020.

All members received a proxy form in last week's SSNM email. If you are an Active member and you know that you are unable to take part in the Zoom meeting, please contact a board member and provide them with your proxy.

Gwen will provide us with the Zoom link closer to the date of the AGM.

Welcome our new members: Alyson Rus, Oluwafemi Odunayo, Sanoj Vijayan!



Inside this issue:

Large Scale Food Production	2
Shop Local	3
211 (Saskatchewan)	3
IDDSI Implementation Resources	4
Are you culturally humble?	5-6
SSNM Board Positions	6
Recipe Corner	7

Special points of interest:

- 2021 Conference Date
- 2020 AGM Information
- New members!
- SSNM board vacancies 2020-2022
- 211 Resources
- "Butternut Squash Soup with Crispy Bacon"

Large Scale Food Production

I would like to talk about a unique operation I have the pleasure working at, there is always the smell of something delicious baking in the department. The Food Production Center (FPC) is located at Saskatoon City Hospital and began operation in May 2003. FPC is the only facility of its kind province-wide; its uniqueness stems from its ability to produce large quantities of in-house food items using a cook-chill, cook-freeze production system. This large scale kitchen system can produce 5000 meals per day. FPC provides the majority of items to more than 800 patients meals daily residing at the three acute care facilities in Saskatoon and supplies specialty items upon request to one of the city's long term care facilities.

FPC consists of five main areas, receiving and storage, Ingredient Control Center (ICC), Hot Production, Bakeshop, and Cold Production. The receiving and storage area has two-full time stores people, everything comes through this area first. Items are delivered by vendors and then distributed into the correct areas. The receivers also have the responsibility to organize and stock all the products that FPC produces and fills orders for the sites on a daily basis.

Before FPC can produce items the Ingredient Control Area (ICC) is where all the items are weighed out for recipes. In order to ensure accuracy in our recipes, items are weighed to two decimal places. Each item is individually weighed and portioned, then placed on a cart with the recipe. In an average week ICC area can weigh out 40 kilograms of flour and 29 kilograms of bananas.

There are two full-time cooks that alternate from kettles and entrées. The entrée cook prepare items such as quiches, lasagna, shepherd's pie and specialty items such as low sodium, gluten free, vegetarian, and texture modified options. The kettle cook on a daily bases produces 1200 liters "pumped items" such as soup, gravy, and stews in two 240 Liter steam kettles. These items then get pumped into either a 3 liter or 6 liter bag, cooled in a tumble chill tank to rapidly cool the temperature of the product down and stored in a large fridge to be sent out to the sites.

FPC has one full-time baker that produces many patient and retail baked goods such as muffins, cakes, cereal squares, scones, and cookies. The baker produces 1085 muffins daily plus other items that are on for that production day such as cakes or loaves. The baker uses a large rotating deck oven to bake all of the items. This oven can produce approximately 500 muffins within a half an hour. These items are then packaged and frozen ready to be sent to the sites.

The Cold Production area supplies and prepares all the fresh produce to the three sites. Products such as salads, lettuce, tomatoes, onions, freshly cut fruits and vegetables which are shipped to site for next day use. In an average week this area will sliced 68 kilograms of tomatoes and 41 kilograms of cucumbers. Cold production also prepares the salad sandwich fillings for the acute care sites averaging 475 portions each day. A full-time meat slicer works specifically for slicing entrée, sandwich, and texture modified meats.

FPC staff are very passionate about the food they produce. FPC continuously tests and develops recipes on an on-going basis to meet the needs of patients, staff and customers.

Cassandra Makulowich

President-Elect



Shop Local

Shop Local is a mantra we have been hearing for sometime and never as much as in the past 6 months since Covid has arrived. Shopping local includes eating local, we are encouraged to think about going to local restaurants when we dine out, and purchase locally grown food when we do our grocery shopping.

While we were all in lock down, I had lots of time to read, watch TV and browse social media, as I was doing this, I came across information on a book that was released this spring all about eating local in Saskatchewan. The book is call Flat Out Delicious, by Jenn Sharp and is described as your definitive guide to Saskatchewan's Food Artisans.

The book is divided into 7 regions of the province with Regina and Saskatoon each being one of the 7 regions, as she writes about each region, she talks about not only the local restaurants but the local producers of food in each area. As you read through this book you will be amazed (or at least I was) by all of the products that are being produced in our province. Some of the items are unique to the area such as the wild rice from La Ronge, but there is so much more. Local bakeries, honey, camelina oil, roast green peas and lentils (protein snack items), coffee roasters, pastas, ice creams, beef and the list go on and on.

Of course, she also features all of the small local restaurants in both the cities and the small towns. Far more than I would have ever thought existed. Some of these towns have populations of under 500 people and have small very successful restaurants with very interesting and diverse menus. Some of Saskatchewan's best chefs are featured in the book as well, including SHA's new Director of Retail, Production and Procurement Moe Mathieu.

My goal is to use this book as a guide as I travel through our province (since probably not going anywhere else for awhile) to find some of these hidden gems and support them.

If you are looking for a way to support our local economy now and into the future this book is a perfect resource as you may be planning a trip through our province.

Submitted by:

Gwen Koob-Roach NM

211 in Saskatchewan

The image shows the 211 Saskatchewan website interface. At the top, there is a navigation bar with the 211 logo, the text "Saskatchewan", and icons for "Call 2-1-1", "Text 211", "Web Chat", and "Need Help? Contact Us". There is also a "Select Language" dropdown menu and a note "Powered by Google Translate".

Below the navigation bar is a large red-bordered box with the heading "Looking for:". Inside this box is a grid of 21 icons, each representing a different service category:

- Crisis Hotlines (Red square with a white plus sign)
- Mental Health & Addictions (Green square with a white person icon and a plus sign)
- Violence/ Abuse (Light green square with a white eye icon)
- Health Care (Light green square with a white heart rate line icon)
- Learning/ Education (Orange square with a white graduation cap icon)
- Community Programs (Orange square with a white group of people icon)
- Seasonal (Light blue square with a white sun icon)
- Homelessness (Blue square with a white bed icon)
- Employment/ Training (Blue square with a white briefcase icon)
- Housing (Blue square with a white house icon)
- Food Security (Blue square with a white fork and knife icon)
- Legal/Courts (Blue square with a white scales of justice icon)
- Income Support (Blue square with a white dollar sign icon)
- Indigenous Peoples (Yellow square with a white feather icon)
- Refugees/ Immigrants (Yellow square with a white maple leaf icon)
- Older Adults (Yellow square with a white "55+" icon and a person icon)
- Youth (Yellow square with a white group of children icon)
- Children/ Families (Yellow square with a white family icon)
- People with Disabilities (Yellow square with a white wheelchair icon)
- Veterans/ Military (Yellow square with a white flower icon)

IDDSI Implementation Resources

The International Dysphagia Diet Standardization Initiative is a global initiative aimed to improve the lives of people living with Dysphagia. Over 500 million people worldwide are currently living with Dysphagia in varying degrees.

The IDDSI framework was published in 2015. The framework was developed and is maintained by volunteers from around the world from diverse professions including Nursing, Nutrition, Occupational & Speech Therapy, Technology and Medicine.

The website iddsi.org is full of resources and references to assist and guide your organization through the IDDSI implementation. The IDDSI framework consists of eight levels. Drinks are measured levels 0-4 and foods are measured 3-7. The levels for drinks are Extremely Thick, Moderately Thick, Mildly Thick and Thin. The levels for food are Regular (Easy to Chew), Soft & Bite Sized, Minced & Moist, Pureed and Liquidised.

Before the appropriate level is determined for patients or residents a comprehensive clinical assessment must be performed.

IDDSI is voluntary to implement but the goal is for it to be eventually considered the standard of dysphagia care.

IDDSI has created implantation guides with 12-month calendars to guide with progress with patients and residents. Along with these implementation guides some of the other resources available on the website include; color coded posters describing the different levels for food and drinks, definitions, testing method posters and frequently asked questions. There are also webinars including achieves of webinars available on the website.

To receive the latest IDDSI news you can subscribe for an e-bite at <https://iddsi.org/contact-us/>.

The Canadian Society of Nutrition Management supports the IDDSI initiative fully and has an IDDSI section on its website as well.

Stacey Ginter CNM

SSNM Past President

CSNM Saskatchewan Representative



www.csnm.ca



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Are you culturally humble?

Most of us in the health system have received some type of training about culture – in our degree(s), in the workplace, at a conference, or maybe even all of these. Typically, these learning activities are based on a “cultural competency” model. This approach was developed in the early 1980s, and soon became the model most commonly used in health, education, human services, and beyond.

Cultural Competency: An other-oriented approach to culture

Cultural competency is the idea that we can learn about other cultures and become competent in cultural knowledge, skills, and abilities as part of the services and care we provide. While not inherently problematic, the competency model can be limited in that it can lead us to believe that it is possible to “learn” all we need to know about a culture that’s not ours – or, at least we can learn enough to get by in our daily practice. Another, perhaps more significant, limitation of cultural competency is it leaves the power of knowledge – whether we have it or not, when and how we choose to apply it, and which cultures we learn about – in the hands of the professional. So, in a direct care setting, this leaves the service provider in charge of the cultural aspects of a relationship or interaction. This can be viewed similarly when applying a cultural competency approach in leading others. By virtue of their role, the manager already holds more power in a relationship with a staff member they supervise; cultural competency models compound this by putting cultural power in their hands as well.

Cultural Humility: We can never really know

The concept of cultural humility first introduced in the late 90s by Drs. Melanie Tervalon and Jann Murray-Garcia in the context of medical education, and has recently experienced a surge in interest, particularly in health care. They defined cultural humility as “... a lifelong commitment to self-evaluation and critique, to redressing power imbalances... and to developing mutually beneficial and non-paternalistic relationships” (1998, p. 123).

In essence, then, cultural humility is about recognizing that there are things we don’t know, can’t know, and likely will never be able to know or understand about a culture that is not ours. Stated differently, we can view cultural humility as a model that reminds us that the only culture we can truly “know” is our own. Speck and Charlesworth (2018) explain it this way: “Cultural safety [and humility] is not a checklist of standards for practice, but a way of questioning how we are positioned in relation to the people we serve and in relation to the system of care in which we practice” (p. 14).

This orientation to culture in our work (and beyond) is centred around the idea that we must be humble, open to learning, and aware of how our own cultural identity/identities shape how we work – including how we communicate, interpret information, problem solve, navigate conflict, and approach relationships. For those of us who are members of a dominant culture – for example, I am white, Canadian-born and am most comfortable communicating in English, so I am part of the dominant cultural group here in Saskatchewan – it can feel unfamiliar and uncomfortable to articulate our cultural identities. We often feel like we have no clear cultural identity, or that we’re “Canadian”. If we understand culture beyond the its more visible characteristics (language, food, celebrations or rituals, dress, and the like), we can begin to realize that we actually *do* have a culture – it’s just so mainstream we don’t have to think about it, name it, or see how it influences our approach to work.

So... what now?

Cultural humility is a life-long journey of learning and unlearning. General principles of cultural humility can be distilled into three ideas: ask about identity, and validate cultural identities as a part of each of our lives – including our work lives; listen more than you speak; and reflect on our own identities and how they shape our work. If you would like to learn more about becoming more culturally humble, here some resources to get you started:

Are you culturally humble? continued

[Why Use the Term ‘Cultural Humility’?](#)

[Prompts for Self-Reflection – Culturally Connected](#)

[Meeting and Exceeding Cultural Safety in the Workplace Toolkit](#)

[The Danger of a Single Story](#)

[Cultural Safety and Humility – BC Patient Safety & Quality Council](#)

Curious about cultural safety and how it relates to cultural humility? Watch for part two of this article in our next newsletter!

Submitted by;

Erin Beckwell

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References

Speck, W. & J. Charlesworth. (2018) *Towards Culturally Safe Workplaces: Calling In to Action*. Accessed September 28, 2020 from fcssbc.ca/sf-docs/conference/feb_2018_charlesworth.pdf

Tervalon, M. & J. Murray-Garcia. (1998). Cultural Humility versus Cultural Competence: A Critical Distinction in Defining Physician Training Outcomes in Multicultural Education. *Journal of Health Care for the Poor and Underserved*, 9(2).

SSNM Board Vacancies

The following SSNM board positions will be vacant this spring. If you are interested in being on the SSNM board or have any questions please contact the SSNM President, Charlotte Coote at president@ssnm.ca or SSNM Past-President, Stacey Ginter at past.president@ssnm.ca. *Elections will be held at the AGM this Oct. 28th via Zoom.*

President Elect—Year 1 of a 3 year term; President year 2, and Past President year 3. Focus is on becoming acquainted with the duties of the President and the general activities of the society.

Secretary Membership- 2 year term. The secretaries duties include; processing new memberships, recorder at board meetings, preparing minutes for board members, maintaining membership lists, and setting up teleconferences.

Treasurer—2 year term. The treasurer’s duties include; writing cheques for expenses and reimbursements, receiving, processing, and depositing money received, recording any transactions, reviewing and reconciling monthly bank statements, and processing new membership payments.

Communications/Social Media— 2 year term. Communications/Social Media duties include; maintaining and updating the SSNM website, administrating the SSNM Facebook page, promoting SSNM events to membership, sending out communication to SSNM members, administrating the SSNM database, and developing newsletters for the membership.

SaskPolytech Liaison — 2 year term. The SaskPolytech Liaison’s duties include; maintaining regular correspondence with the Food and Nutrition Management program head, attending FNM student functions, presenting to FNM students of what SSNM and CSNM entail, and member of the FNM Advisory Board at SaskPolytechnic.

Conference — 2 year term. Conference duties include; planning annual SSNM conference, contacting potential speakers, contacting sponsors, booking a conference venue, creating a conference theme, and communicating to SSNM members about the conference.



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Instagram

[@sk_society_nutrition_mgmt](https://www.instagram.com/sk_society_nutrition_mgmt)

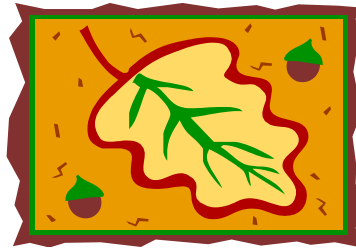
Facebook

<https://www.facebook.com/SaskatchewanSocietyofNutritionManagement/>

Website <https://www.ssnm.ca/>

The Saskatchewan Foodservice Supervisor's Association was formed in November of 1972 at a meeting held in conjunction with the Saskatchewan Hospital Association in Regina. The primary objective of the new association was to aid in the professional development of its members.

The Association became incorporated in 1973 and in September of 1996, changed its name to the Saskatchewan Society of Nutrition Management to better reflect the changing roles of the foodservice supervisor as well as to align the name with the Canadian Society of Nutrition Management.



Recipe Corner

Butternut Squash Soup with Crispy Bacon



- 4 slices bacon, cut into 1/2-inch pieces
- 1 onion, chopped
- 2 cloves garlic, minced
- 4 cups 25%-less-sodium chicken broth
- 3 cups cut-up peeled butternut squash (1/2-inch pieces)
- 1/4 tsp. ground sage
- 1/3 cup *Philadelphia* Herb & Garlic Cream Cheese Product

Cook and stir bacon in large saucepan on medium heat until crisp. Remove from pan with slotted spoon; drain on paper towels. Add onions and garlic to drippings in pan; cook and stir 5 min. or until tender.

Add broth, squash and sage; stir. Bring to boil; simmer on medium-low heat 20 min. or until squash is tender, stirring occasionally. Blend, in batches, in blender until smooth, returning each puréed batch to saucepan.

Add cream cheese product; cook 3 to 5 min. or until completely melted, stirring constantly with whisk. Serve topped with bacon.

6 servings, 1 cup (250 mL) each

<https://www.kraftwhatscooking.ca/recipe/butternut-squash-soup-crispy-bacon-175283>