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# Ahead of the Curve: CCRCs

BY WAYNE TOCZEK

Making senior dining outstanding starts with changes big and small.

Beyond bricks and mortar, customer service and food will be the competitive edge needed to set CCRCs apart from their competitors in the future. While regulations and cost will remain a concern, one owner-operator I work with said it best recently: "Keep it simple and make it satisfying to the customer and the rest will take care of itself." At the same time, achieving that customer satisfaction is more demanding today than ever before. Consider these issues:



Toczek's books address aspects of dining and customer service that are often overlooked.

- Many CCRCs compete with restaurants, raising the bar even higher. In many facilities, residents have the option of going out to eat or staying in. You've got to provide a higher perceived value to compete.

- Too often, the dining department of a CCRC is seen as a liability and not a profit center. You have to demonstrate that investing in the department can make it both a marketing advantage for the organization and a profit center.
- A CCRC's customer base is being targeted by offsite alternatives all the time. Your marketing efforts need the same impact and creativity. Just reprinting last year's flyers will not cut it anymore.
- The “Meatloaf Monday” stereotype about bland, repetitive CCRC food is still a problem, but the tide is turning. We are seeing more food cooked-to-order. And we are seeing innovations: 24-hour kitchens, family-style dining, brunch or continental breakfast options, and intriguing midday hydration carts. As senior dining continues to evolve, we'll start to see staff dressed more like chefs and less like surgeons from the 1960s.

## Making Changes, Seeing Solutions

Translating such strategic objectives into day-to-day CCRC foodservice management is never easy. A philosophy I have always tried to use is: “It's not what you can't do, it's what you can do that matters.” Let's see how that insight might work in practice.

For example, if a diabetic resident can't have a full piece of pie, why not give her a twelfth of the pie instead of the standard eighth? It might be more satisfying than an artificial option. Extra effort and investigation is needed to find the best-tasting sugar substitutes.

Sometimes restrictive diets are just plain bland. When green beans are cooked without bacon, they not only get healthier; they also lose that familiar, home-spun flavor. Again, extra effort on the part of managers and chefs can find ways to make food both healthy and delicious.

Little things in senior dining can make a big difference. Would you rather have a salt and pepper shaker like you used to have at home, or tiny packets that are near-impossible to open? How about real china instead of plastic?

Of course, bigger things make a difference, too. Being able to decide what to eat just before eating is huge for seniors, giving them back some control.

Other changes include 24-hour kitchens, family-style dining, brunch or continental breakfast options.

Finding new ways to make hundreds of small changes like these can be a

challenge, but can be the deciding factor in providing the outstanding care that will differentiate CCRCs in this highly competitive market. Taking the easy road will never be enough to make the difference. Remember: "It's not what you can't do, it's what you can do that matters."

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