



THE ULTIMATE TEACHING KITCHEN TOOLKIT



ACKNOWLEDGMENTS

LEAD AUTHOR

Melanya Kushla, MS, RD, LDN, CHES

CONTENT EDITORS

Christina Badaracco, MPH, RD, LDN
Allison Righter, MSPH, RD

DESIGNER

Jason Wright, MS

SPECIAL THANKS TO:

The David R. Clare and Margaret C. Clare Foundation for their generosity in providing an educational grant to the Teaching Kitchen Collaborative that supported the development of this publication.

The Teaching Kitchen Collaborative's Nutrition Committee for its unwavering advocacy of the registered dietitian's role in teaching kitchen programs and the following individuals for their collective effort of compiling, organizing, and reviewing best practices in culinary nutrition education to inform the composition of this comprehensive guide:

- ☛ Julia MacLaren, RD (Co-Chair)
- ☛ Robin LaCroix, RDN (Co-Chair)
- ☛ Melanya Kushla, MS, RD, CHES (Co-Chair)
- ☛ Aliza Mason, RDN
- ☛ Christina Badaracco, MPH, RD, LDN
- ☛ Deanne Brandstetter, MBA, RDN, CDN, FAND
- ☛ Emily Stone, MS, RD, CD, IFNCP
- ☛ Katy McManus, PhD, RDN, LD
- ☛ Olivia Thomas, MS, RD, LDN
- ☛ Stephanie Harris, PhD, RDN, LD
- ☛ Theresa Dvorak, MS, RD

Annie Burns, MS, RD, and Lydia McGrath, MS, RD, LDN for their time and effort in organizing, summarizing, formatting, and synthesizing content throughout the development of this document

Christina Vollbrecht, chef educator and dietetic intern, for her contributions to sections about sustainable culinary and food sourcing practices

The Teaching Kitchen Collaborative's Culinary Committee, co-led by **Benjamin Ramsdell** and **Leah Pryor**, for developing a list of necessary start-up equipment for a teaching kitchen and consulting on the development of this resource

The following Teaching Kitchen Collaborative Organization Members for developing, testing, and sharing their best practices, training resources, and invaluable teaching kitchen experience to inform the content creation and development of this guide:

- ☛ Alberta Health Services, University of Calgary
- ☛ Boston Medical Center
- ☛ Compass Group, North America
- ☛ Free Library of Philadelphia
- ☛ UTHHealth School of Public Health, Nourish Program
- ☛ Veterans Health Administration

LEGAL DISCLAIMER:

This guide is intended to provide information to readers. The authors and contributors are not offering it as legal, business or other professional services advice, and make no representations that the contents are complete or accurate. Neither the authors nor contributors shall be held liable or responsible to any person or entity with respect to any loss or incidental or consequential damages alleged to have been caused, directly or indirectly, by the information provided herein.

SUGGESTED CITATION:

Kushla, Melanya. The Ultimate Teaching Kitchen Toolkit. The Teaching Kitchen Collaborative, 2025. Available at: www.teachingkitchens.org/toolkits

© 2025 The Teaching Kitchen Collaborative. All rights reserved. For all inquiries, please contact info@teachingkitchens.org.

PREFACE

The Ultimate Teaching Kitchen Toolkit is a comprehensive guide for initiating, managing, facilitating, and growing your own teaching kitchen (TK) program. Created by members of the [Teaching Kitchen Collaborative \(TKC\)](#)—a network of thought leaders using TKs to drive personal and public health across medical, community, school, and corporate settings—this toolkit offers practical resources designed to support your success.

Over the past two years, the TKC's Nutrition Committee (with input from chefs, physicians, and other professionals within the TKC) has gathered, evaluated and compiled best practices into this actionable resource. This toolkit includes the collective insights from six leading TK programs, covering everything from conceptual overviews and foundational principles to detailed instructions and diagrams for planning, design, and facilitation. **Part One** covers program planning and set-up considerations, while **Part Two** focuses on the skills and characteristics needed to facilitate a TK program. Although the topics covered in the toolkit's sections flow from program inception to facilitation, they can be read in any order based on your needs.

This toolkit is specifically designed to enhance the expertise of registered dietitians (RDs) as food and nutrition professionals, filling gaps not typically covered in nutrition courses or dietetic internships. As noted by Thomas et al., 2023, RDs are uniquely positioned to lead TK program development and support an interprofessional approach, positioning TKs at the intersection of health and education. Applicable across various sectors of dietetic practice—including clinical, community/public health (e.g., K–12 schools, universities, community centers), and food service—the toolkit assumes users have the clinical expertise and judgment to adapt its content to their specific populations.

Although this toolkit was written by RDs for RDs, its content is applicable to other disciplines and to all professionals working in the TK space. Every TK program is unique, with needs that can vary depending on available resources, setting, and program stage. Regardless of your area(s) of expertise, you can use this resource to inform program design, enhance logistics and program quality, overcome challenges, and educate your interdisciplinary team members.

We hope this toolkit will empower you to help establish TKs as the educational cornerstone of value-based healthcare and other interventions to improve personal and planetary health. **It is time to ignite your TK journey—let the learning and cooking begin!**



In 2016, the U.S. Academy of Nutrition and Dietetics' Food & Culinary Professionals (FCP) Dietetic Practice Group established the **Core Food & Culinary Competencies for RDs**, specific to culinary nutrition practice in the field of dietetics. These FCP competencies are dispersed throughout this resource and notated by a call-out box when content aligns with a specific FCP competency. These were included to ensure the educational content contained herein aligns with established competencies and supports the development of essential knowledge, skills, and abilities.

INTRODUCTION

PART 1: PROGRAM SET-UP



PROGRAM MANAGEMENT



TEACHING SPACE & FACILITIES



SAFETY & SANITATION



TEACHING KITCHEN TEAM



PROGRAM / CURRICULUM



MARKETING & COMMUNICATIONS



PROGRAM EVALUATION

Acknowledgments	2
Preface	3
Introduction to Teaching Kitchens	6
Program Set-Up	7
I. Scope of Implementation	8
II. Goals & Objectives	8
III. Approvals for Implementation	10
IV. Logistics	11
V. Budgets	15
VI. Funding Sources	16
VII. Registration	17
VIII. Liability Waivers & Forms	18
IX. Documentation	18
X. Choose a Delivery Structure	19
XI. Leverage Partnerships	19
I. Type of TK	21
II. Facility Requirements for Safety & Sanitation	22
III. Stations	22
IV. Technology Needs	22
V. Recommended Equipment	24
VI. Storage	25
VII. Classroom Amenities	25
VIII. Reserving the Space	26
IX. Food Waste	26
I. Emergency Preparedness	29
II. Laws & Regulations	29
III. Food Safety	29
IV. Attire	33
I. Building Your Team	35
II. Determining Time Requirements	37
III. Dissemination	39
I. Knowing Your Audience	41
II. Learning Objectives	43
III. Lesson Plans	44
IV. Education Materials	44
V. Recipe Selection & Development	44
VI. Ingredients	48
VII. Environmental Sustainability	49
VIII. Structure of Classes	50
IV. Virtual Delivery Considerations	51
I. Pre-Class Communication	53
II. Promotion & Advertising	53
III. Marketing Tactics	53
I. Demographics	55
II. Program Outcomes	56
III. Evaluation Distribution & Facilitation	58

PART 2: PROGRAM DELIVERY



COMMUNICATION SKILLS



CULINARY SKILLS



CULTURAL HUMILITY & INCLUSIVE NUTRITION



HEALTH & NUTRITION



APPENDICES



RELATED LITERATURE & REFERENCES

Program Delivery	60
I. Communication Strategies	61
II. Person-Centered Care	61
III. Culinary Terminology	62
IV. Demonstrating Techniques	63
V. Descriptive Taste & Flavor Terminology	64
VI. Public Speaking	64
VII. Creating an Experience	65
VIII. Writing for Consumers and Professionals	66
I. How to Measure	68
II. Knife Skills	69
III. Ingredient Modification	70
IV. Building Flavor	70
V. Condiments	72
VI. Dry Heat Cooking	73
VII. Moist Heat Cooking	75
I. Cultural Considerations	78
II. Food Insecurity	78
III. Food-First Language	79
IV. Weight Stigma	80
I. Preferences & Food Trends	83
II. Mindful Eating	83
III. Nutrient Alterations in Cooking	85
IV. Nutrition Education	85
V. Safe Food Practices at Home	85
VI. Whole-Person Health	87
Appendices A-M	88
Related Literature & References	106



INTRODUCTION TO TEACHING KITCHENS

Teaching kitchens (TKs) have the potential to transform all dimensions of health and shift the way in which public health and clinical interventions are delivered. TKs are dynamic, hands-on learning environments where participants can learn not just what to eat, but how, through the lens of whole person health. Diet and lifestyle related chronic diseases have profoundly negative impacts on population health, individual quality of life, healthcare systems, the economy, and the planet. Enter TKs: settings where people learn to eat, cook, move, and think more healthfully—for a lifetime of better health.

TKs offer engaging, practical experiences that empower participants with healthy cooking techniques and nutrition along with self-care practices like mindfulness, physical activity, and behavioral health coaching. In both physical and virtual spaces, people of all backgrounds come together to practice life-enhancing and health-promoting skills. While the kitchen is essential, it is merely the setting; the TK curriculum and its delivery drive and sustain the positive change.

While TKs reflect the diversity of the communities they serve, they are united by a shared belief: building practical skills and fostering behavior change are key

to improving both human and planetary health, and to ensuring the success of Food Is Medicine interventions. TKs go beyond cooking—they equip people with the tools needed for better self-care and healthier communities, all while supporting sustainability and the broader Food Is Medicine movement.

For example, TKs could be located within:

- A hospital, as a space for patients to learn how to manage a chronic disease
- A community center, as a space for food distribution programs to hold classes on how to create healthier meals for children
- An office cafeteria, to show employees how delicious a healthier version of lunch can be
- A university, to serve as a learning laboratory for students and future healthcare professionals
- A farm that supplies local communities with fresh produce and shares how to prepare it

Food is a universal connection that all humans share. TKs can serve to honor heritage, revitalize diverse foodways, and uphold health-promoting food traditions from across the world. TKs are the intersection of the medical and culinary communities, coming together to address societal health challenges, improve quality of life, and catalyze action—toward both individual behavior change and wide-scale systems change.



PART 1: PROGRAM SET-UP



PROGRAM MANAGEMENT

I. SCOPE OF IMPLEMENTATION

TK programs promote feasible behavior change in a variety of settings, including acute and ambulatory healthcare, rehabilitation, community, educational, retail, and corporate institutions. Developing and implementing a TK is grounded in the establishment of a vision statement, which defines the scope of implementation, including the purpose, audience, and population needs that it aims to address.

First, identify the primary **purpose** of your program. The purpose is a simple statement describing the overarching objective, or the “what” of your offering. This could include health improvement, evidence generation, community engagement, education, or a combination of these.

Purpose (“what”):

VISION STATEMENT

The complete vision statement should clarify the “who” and “why” of your program. Whom do you aim to serve? What are the needs of your intended audience? What do you want to achieve with them? Why are you implementing this program? Is there a deficit or care gap that it will address?

“Who”:

“Why”:

Articulating this purpose—the “what,” the “who,” and the “why”—in a single vision statement creates a reference point from which to address the “how” questions that arise from decision-makers, colleagues, and others throughout the stages of your program (e.g., program design, implementation, and evaluation).

Vision Statement: _____

Align this vision with your organizational mandate, borrowing from existing organization mission/vision/values, as applicable. This will be important to gain organizational buy-in and clearly articulate the timeliness, relevance, and value of your program. At this point, you can develop overarching goals and specific objectives for your program.

II. GOALS & OBJECTIVES

Program goals serve as broad statements that describe the intended outcomes of a program or intervention. Each goal should have one or more corresponding objectives, which are specific, measurable, and time-bound criteria that can be evaluated throughout a program to gauge progress toward the goal and assess program effectiveness and/or efficiency. Examples of common measurable goals and outcomes for TKs, as identified by editor Christina Badaracco include:

- Increased confidence for healthy home cooking
- Increased self-efficacy for sustained health behavior change
- Improved quality of life
- Increased home cooking
- Improved dietary quality
- Increased food literacy and confidence
- Improved biomarkers and management of chronic disease
- Reduced food budget
- Increase physician awareness of nutrition and food security
- Improved interdisciplinary clinician collaboration
- Reduced healthcare use/costs (still to be determined!)

Consider two possible goals for your envisioned program and write them below:

Goal #1:

Goal #2:

Once the goals are identified, objectives can then be developed following the SMART (specific, measurable, attainable, realistic, time-bound) framework. It is recommended to set 2–3 objectives that relate to each set goal for the program. Additional information on developing objectives to measure program outcomes and efficacy can be found in the *Evaluation* section of this toolkit.

 PROGRAM MANAGEMENT

Goal #1 → Objective #1:

Goal #1 → Objective #2:

Goal #1 → Objective #3:

Goal #2 → Objective #1:

Goal #2 → Objective #2:

Goal #2 → Objective #3:



BEFORE ALL ELSE, WE MUST DEFINE THE GOALS OF THE TEACHING KITCHEN

WHO? Who is the target audience?
What are the issues facing this group?

WHAT? What exactly do you want to help this group change?
What is the overall intended impact for your organization?

HOW? How can you best accomplish the intended impact?
➔ What budget do you have to work with?
➔ What is the optimal facility to accomplish goals?
➔ What program and people best suit your objectives?

FINALLY, WHAT OTHER ELEMENTS SPECIFIC TO YOUR ORGANIZATION MATTER MOST?



PROGRAM MANAGEMENT

III. APPROVALS FOR IMPLEMENTATION

When acting as a member or representative of an organization, approvals for the implementation of a TK must be obtained by appropriate leadership and/or stakeholders. The exact required approvals will be site-specific, but following the steps below can help you garner necessary support. Bear in mind that you may need to move forward through Part 1 of this toolkit to more clearly define the program formatting, delivery, and logistics in order to inform a proposal to leadership. This toolkit can be used in non-sequential order, allowing you to jump around to whichever sections best meet your needs.

STEPS FOR OBTAINING APPROVALS:

- ☛ Identify the individuals or departments in your organization who must give approval for a new facility and/or program. These could include facility leadership, departmental leadership, health and safety teams, the engineering department, and the legal department, among others.
- ☛ Write a proposal outlining what you plan to offer, what resources are required and already available to you, the potential benefit it will yield to the intended audience and to your organization, and how you will evaluate the program. Key components include:
 - Vision statement (intended audience and purpose)
 - Material resources needed (e.g., equipment, technology)
 - Space (e.g., physical space, storage, virtual)
 - Time commitment (for you and for other staff)
 - Resources already secured
 - Additional material and/or financial resources needed
 - Potential funding sources
 - Evaluation plan
 - Marketing and promotion
 - How the TK supports existing programs and initiatives within the organization or community

- ☛ As your program grows, increase visibility within your institution with strong marketing and promotion. Take pictures and videos (with consent) and post them to your internal or external media channels to increase awareness of your program. Seek means for exposure through newsletters, local newspapers, and other avenues that will highlight your organization (after receiving necessary internal approvals).

BE REALISTIC

Remember to start small and lean on existing resources. Focus on what you already have available rather than what you do not yet have. First, create a viable program, then focus on growing that program. None of the industry leaders with significant, sustainable, and extensive TK programs started with all the bells and whistles. Rather, each started small and built upon successes and momentum over time.

STRATEGIES TO ENGAGE LEADERSHIP

- ☛ Be flexible. Your TK program may evolve and differ from what you initially proposed, due to factors such as reduced funding, colleagues with new ideas/skills, or changes in community engagement. Accept leadership support as it comes, and continue advocating to advance the program's vision among supporters. Find allies within administrators, foundations or board chairs, community partners, or adjacent program coordinators.
- ☛ Be a squeaky wheel. While most people may support the idea of a TK once they truly understand how it works, it may take multiple conversations, forms of media (e.g., photos, articles), or even an immersive experience before they reach this understanding and appreciation for the scope, depth, and impact of a TK program.
- ☛ Share the experience. Take pictures and videos of your classes (with participants' permission) to show the excitement of and value to your participants. Collect testimonials (in written or video form) and key (anonymous) quotes from surveys to highlight experiences from the participants and demonstrate the transformations and impact. Invite influential stakeholders to participate and experience it themselves.
- ☛ Reference existing literature. To demonstrate external validity and strengthen your justification, share examples of similar TKs and published literature that support the efficacy of TK programs in your setting. (See the reference list at the end of this toolkit for examples.)



PROGRAM MANAGEMENT

IV. LOGISTICS

Day-to-day operations of the program will require you to make decisions about many factors, such as the number of participants, dates, times, and locations. Determining these logistical details will help set expectations for the class and maximize the utilization of available resources. See **Figure 1** for a checklist of logistical considerations to consider, each of which will be explored in further detail below.



LOGISTICS TO CONSIDER WHEN DEVELOPING A TEACHING KITCHEN PROGRAM

- Format:** virtual or in-person? Demonstration or hands-on?
- Space:** size of room, space to move, built-in equipment, needs of the audience (e.g., wheelchair or child-height prep counters)
- Recipe requirements:** appliances, structure for ordering ingredients, etc.
- Sequence, duration, and frequency:** how many classes will you offer? How long will each be? Will they be offered weekly, monthly, etc.?
- Scheduling:** setting dates and times that are accessible to your audience and feasible for class facilitator(s)
- Capacity:** how many participants can you serve?
- Safety:** building safety, fire exits, food safety considerations such as refrigeration, handwashing sinks, etc.
- Class preparation:** time and logistics for shopping, food and equipment storage, set-up, and clean-up
- Budget allocation:** fixed costs vs. variable costs; potential revenue, reimbursements and associated requirements
- Legal liability:** signed waivers for participants, food safety and sanitation certification or training, group therapy agreement, consent for photography and recording, licensure and credentials of health professionals
- Pre-event communication with participants:** brochures, recruitment and registration system, pre-course emails
- Day of class:** participant and instructor transportation, buffer time, follow-up communication

Figure 1. Logistics to Consider When Developing a Teaching Kitchen Program