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Health Education about Food Safety based on Hazard Analysis and Critical Control Points (HACCP) at Selera Kita Restaurant in Kuwait

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ABSTRACT

The prospect of food business in the form of restaurants in Kuwait is quite promising. This is because many native Kuwaitis and immigrants often use restaurant services. Restaurant performance must meet consumer expectations so that they feel satisfied as users of the restaurant's products. To maintain and increase satisfaction, restaurants must pay attention to food management activities in restaurants so that they run in accordance with applicable regulations. A series of activities starting from menu planning, food distribution to consumers to achieve optimal health status through providing appropriate food including recording, reporting and evaluation is a series of food management. Based on the results of initial observations and interviews with managers, employees and consumers at the Selera Kita restaurant in Kuwait, this community service aims to find strategic ways by providing education related to management, employees and consumers' understanding of food safety based on Hazard Analysis and Critical Control Points (HACCP), knowing several variables which are strengths, weaknesses, opportunities and threats, knowing strategies that can be taken by management to improve service to consumers. Respondents were selected using a simple random sample. The results of this research are in the form of health education about food safety based on Hazard Analysis and Critical Control Points (HACCP) with assessments using Fishbone diagrams, SWOT analysis and descriptive analysis showing that 70% of the 30 respondents have sufficient knowledge of food safety to improve services to consumers has been implemented well, but needs to be improved so that it can run more optimally.

Keywords: Hazard Analysis and Clinical Control Points (HACCP), Health education, SWOT

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INTRODUCTION

One of the basic human needs needed to maintain life is food. The demand for food is increasing as the population increases. This is an opportunity for food producers to develop businesses in the food service sector such as restaurants, eateries and cafes. Consumers realize the importance of choosing food and drinks that are healthy in terms of nutrition, freshness and raw materials used to meet balanced nutritional needs. The diet high in fat, high in calories and low in fiber, which used to be popular, is now starting to be abandoned (Permanasari and Aditianti, 2017).

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This is because many native Kuwaitis and immigrants often use restaurant services. Restaurant performance must meet consumer expectations so that they feel satisfied as users of the restaurant's products (AlKandari, 2019). To maintain and increase satisfaction, restaurants must pay attention to food service activities in restaurants so that they run as they should in accordance with applicable regulations. A series of activities starting from menu planning followed by food distribution to consumers in order to achieve optimal health status through providing appropriate food including recording, reporting and evaluation is a series of food management. (Aryani and Rosinta, 2018).

Based on Indonesian Government Regulation no. 86 of 2019 concerning Food Safety are the conditions and efforts needed to prevent food from possible biological, chemical and other contamination that can disturb, harm and endanger human health and does not conflict with the religion, beliefs and culture of the community so that it is safe for consumption. Food safety is implemented through supervision, handling extraordinary events, quick handling of food safety emergencies and community participation.

Based on the results of initial observations and interviews with managers, employees and consumers at the Selera Kita restaurant in Kuwait, in this community service we will look for strategic ways by providing education related to the understanding of management, restaurant employees and consumers about food safety based on Hazard Analysis and Critical Control Points. (HACCP), knowing several variables which are strengths, weaknesses, opportunities and threats as well as knowing the strategies that can be taken by the management of Selera Kita Restaurant in Kuwait to improve service to consumers.

The aim of this research is to provide information on the importance of Health Education about Food Safety based on Hazard Analysis and Clinical Control Points (HACCP) at Selera Kita Kuwait Restaurant. Apart from that, being able to explain to the public about organizational structures, especially organizations in the fields of health, education and health promotion as well as health service management policies, especially at the Selera Kita restaurant in Kuwait, being able to identify, evaluate (monitor) the condition of the work environment and carry out risk management which consists of identification hazards, hazard assessment and determining alternative hazard controls that could occur at the Selera Kita restaurant in Kuwait, and being able to analyze the implementation of Hazard Analysis and Clinical Control Points (HACCP) using the Fishbone diagram method and SWOT analysis at the Selera Kita restaurant in Kuwait.

METHODS

This research uses case study analysis in the form of community service carried out on June 9 2023 at the Selera Kita restaurant in Kuwait. The population in this study were all employees at the Selera Kita restaurant. Using a simple random sampling technique, 30 respondents were obtained. The research method uses descriptive analysis. Providing health education using lectures, questions and answers and discussions through power point presentations with the target being managers, employees and consumers.

The independent variable in this research is knowledge, while the dependent variable in this research is food safety.

This community service activity is carried out in several stages, namely:

- 1. Preparation of activities through coordination with managers, employees and consumers who are present during the implementation of community service.
- 2. The implementation of the activity begins with an introduction in the form of a greeting and self-introduction, informing about the material that will be presented and explaining the objectives achieved at the end of the activity followed by the presentation of the

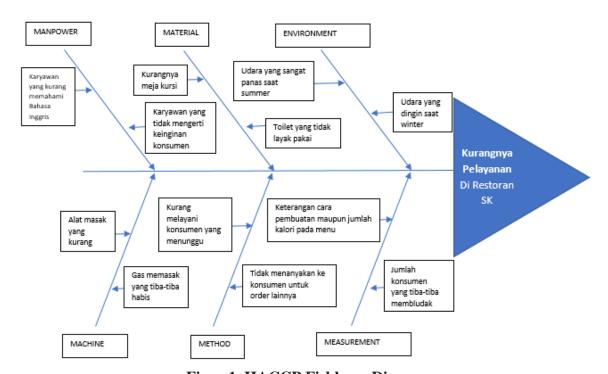
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3. Evaluation of activities in the form of questions and answers and discussions.

RESULT

The results of community service activities regarding health education on food safety based on Hazard Analysis and Critical Control Points (HACCP) at the Selera Kita Restaurant in Kuwait use the Fishbone diagram with 5M+1E, namely Manpower, Material, Machine, Method and Measurement and Environment with the following description:



Figur 1. HACCP Fishbone Diagram

1. Manpower

- a. Employees who do not understand English.
- b. Employees who don't understand consumer desires.

2. Materials

- a. Lack of tables and chairs.
- b. Toilets that are not suitable for use.

3. Machine

- a. Lack of cooking utensils.
- b. Cooking gas suddenly runs out.

4. Method

- a. Employees who are less sensitive in handling waiting customers.
- b. Employees do not offer consumers to order the next menu.

5. Measurement

- a. The number of calories is not stated on the menu.
- b. The number of consumers suddenly exploded.

6. Environment

- a. The air is very hot in summer.
- b. Cold air in winter.

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Furthermore a SWOT analysis is carried out by identifying influencing factors to formulate a strategy. This analysis is based on strengths and opportunities as well as weaknesses and threats. This strategic decision making is related to the development of the restaurant's vision, mission, motto and policies, together with SK restaurant management analyzing strategic factors in current conditions.

1. Strength (Strength)

- a. There are three SK restaurant employees who can speak Arabic.
- b. All employees are experts in cooking, so they only need training on Customer Service.

2. Weakness

- a. Documentation is not yet optimal.
- b. Ignorance about the abundance of consumers at certain times.
- c. All employees cannot speak English fluently.

3. Opportunities

- a. Active role of employees in improving service to consumers.
- b. Increasing information through social media and leaflets in an effort to improve service at SK restaurants.

4. Threats

- a. There are many unofficial stalls serving Indonesian food, so better service from them must really be improved.
- b. There are Indian and Bangladeshi stalls around the SK restaurant where the prices are cheaper.

The characteristics of the respondents in this study are as follows:

Table 1. Characteristics of Respondents

No	Respondent Characteristics	${f F}$	%	
1	Respondent's Age			
	20 Years	4	13.3%	
	20-30 Years	12	40%	
	30 - 40 Years	11	36.7%	
	>40 years old	3	10%	
2	Gender			
	Man	65	40.4 %	
	Woman	95	59.6 %	
3	Respondent's Education			
	junior high school	6	20%	
	high school	14	46.6 %	
	Higher Education	10	33.4 %	

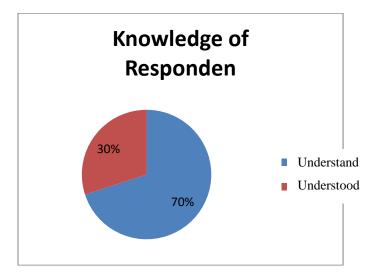
Based on the table above, it shows that the majority of respondents in this study were aged 30-40 years. Meanwhile, education level is dominated by high school at 46.6%. Meanwhile, the gender of the respondents was 65 respondents (40.4%) men and 95 respondents (59.6%) women.

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Knowledge Variable



From the results of collecting answers through a questionnaire, it was found that 21 respondents or 70% of all respondents could understand and know about food safety, while 3 respondents quite understood and knew about food safety. This is very in line with our activities, namely health education about food safety based on Hazard Analysis and Critical Control Points (HACCP) at Selera Kita restaurant Kuwait.

DISCUSSION

Selera Kita Restaurant (SKR) is not open 24 hours. Before the restaurant opens, employees make preparations starting with prayer and briefing, then clean the restaurant, prepare hygienic food and drink serving equipment, clean their bodies and neatly keep their employees' uniforms. When consumers come and order the desired menu, employees carry out with dexterity, foresight and sensitivity through service stages that can satisfy consumer desires from entering the door until leaving the restaurant.

When there are foreign nationals who cannot speak Indonesian or Arabic, employees usually ask other consumers to translate what the foreign consumer asks. The lack of ability of employees to speak English makes foreign consumers feel that their desires are not being served, such as offering other menu items or even just offering water whilewaiting for the order to be served.

SK Restaurant accepts customers without a prior reservation system, those who come do not need to wear formal clothes. The food and drink serving system used is ordering according to the menu or during the day a buffet or buffet menu is always served. Entertainment in the form of a television screen which usually broadcasts live TV stations in Indonesia. The arrangement of tables and benches is adjusted, usually able to accommodate 20 customers, but if there is a certain event, it can be arranged up to 30 customers at once. The sudden increase in the number of consumers and the lack of tables and chairs often makes consumers reluctant to wait too long and move elsewhere.

The menu list is on the counter and at each dining table to speed up the service process. The menu list consists of the name, price and a brief explanation of the cooking method and ingredients, but no calorie value is written.

SK Restaurant has a back room or kitchen which functions as a place for storage, preparation, processing of food and beverage products as well as a place for work activities for employees which is a prohibited area for consumers to enter. There is adequate lighting, food storage areas are separated according to type, the floor is not slippery and there is a smooth water

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drainage channel, a suction device and kitchen smoke exhaust pipe are installed as well as a smooth and sufficient supply of clean water.

In the kitchen there are two stoves equipped with smoke traps, chimneys and fat collecting filters. However, there is no clear documentation regarding the use of gas for cooking. The door connecting to the consumer's premises is made double, the inner door is equipped with a self-closing insect prevention device and the outer door opens outwards.

There is a compounding table, refrigerator, both freezer and regular refrigerator, cooking equipment racks and a washing tub that is well maintained and functioning. Not related to toilets, bathrooms or residences. Apart from food and drink and service, good toilets are actually a necessity and even an attraction for customers. However, unfortunately at the SK restaurant the toilet, apart from being located far outside the restaurant, about 15 meters, is also not worthy of being called clean or usable.

CONCLUSION

Health education about food safety based on Hazard Analysis and Critical Control Points (HACCP) at Selera Kita Restaurant in Kuwait with assessments carried out using Fishbone diagrams and SWOT analysis to prioritize strategies for improving service to consumers can be implemented well, but needs to be improved so that it can run more optimal. It is hoped that the implementation of discussion activities, questions and answers, lectures and providing information regarding understanding related to health education regarding HACCP-based food safety can be carried out optimally at the Selera Kita Restaurant in Kuwait and can be carried out continuously and evaluation of its activities will be carried out periodically so that it can be carried out optimally. Through the management or owner of Selera Kita Restaurant in Kuwait, English language and customer service training is carried out for its employees to improve service to consumers and repair and improve the cleanliness of toilets. The average respondent's knowledge is quite understanding regarding food safety. It is hoped that this can maintain the hygienic level of the food served.

REFERENCE

- Al-Kandari D, Al-Abdeen J, Sidhu J. (2019). Food safety knowledge, attitudes and practices of food handlers in restaurants in Kuwait. Food Control 103-110. DOI: 10.1016/j.foodcont.2019.03.040.
- Aryani, Dwi dan Febrina Rosinta. (2018). Pengaruh Kualitas Layanan terhadap Kepuasan Pelanggan dalam Membentuk Loyalitas Pelanggan, Bisnis & Birokrasi. Jurnal Ilmu Administrasi dan Organisasi. Vol 1 No 1. h. 114-126.
- BSN. Badan Standardisasi Nasional. (2021). SNI ISO 7251:2021 tentang metode horizontal untuk deteksi dan enumerasi E. coli terduga dengan teknik angka paling mungkin (APM). Badan Standardisasi Nasional, Jakarta.
- Leuw, G., & Widiawan, K. (2017). Perancangan Sistem HACCP dan OPRP di PT. X. 5(2), 225-232.
- Mujiburrahman. (2019). Technopreneurship Millenial. Banda Aceh: KITA Publisher.
- Permanasari, Y., & Aditianti. (2017). Konsumsi makanan tinggi kalori dan lemak tetapi rendah serat dan aktivitas fisik kaitannya dengan kegemukan pada anak usia 5-18 tahun di Indonesia. Penelitian Gizi dan Makanan. 40 (2). 95- 104.
- Pratidina G.E, H. Santoso, and H. Prastawa, (2019). Perancangan Sistem HAZARD ANALYSIS CRITICAL CONTROL POINT (HACCP) dan Sistem Jaminan Halal di UD Kerupuk Ikan Tenggiri Jepara," *Industrial Engineering Online Journal*, vol. 7, no. 4, Jan. 2019.