## GRUB





Photo: DeSean McClinton-Holland

Courtney Kennedy remembers the relief she felt when she lost her job. She was working in the kitchen at <u>Flora Bar</u>, the high-end, and highly acclaimed, restaurant located inside an iconic brutalist museum on the Upper East Side. Standouts on the restaurant's dinner menu included flat omelets topped with multiple quenelles of caviar and plump dumplings filled with lobster meat, floating in yuzu-scented broth. Kennedy had only worked there for a few months, but she had already grown frustrated with her role as a cook — which meant shucking a lot of oysters — and was dreading the conversation she'd have to have when she resigned. "I hate putting in my notice. I thought, *This is going to be so awkward and so weird*," she recalls. This was in March 2020, just as the pandemic arrived in New York City. "Then they were like, *Oh*, *everyone's fired*. I was like, *Great!*"

She tells me this story while sipping on a glass of cold-brewed coffee, sitting in the mocha-hued outdoor dining shed at Nolita's <u>Thai Diner</u>. A recent heat wave has just broken, and it's the kind of breezy day that makes you want to drop everything and head for the park, or at least grab brunch on Kenmare Street. We order ribs that have been crusted in shrimp paste and a green-papaya salad with more dried shrimp, and I push for a salad of chicken and banana blossoms. "I love big chunks of herbs," Kennedy says.

Even though Kennedy has spent the better part of the last decade working in some of New York City's most acclaimed professional kitchens, this meal is one of the only times she's been to a restaurant since leaving Flora Bar. That's because instead of looking for another restaurant job — at the height of the pandemic in the city, a time when many New Yorkers had either fled the city or were quarantined inside their apartments — Kennedy started cooking for patients at the <u>Memorial Sloan Kettering Cancer Center</u> on York Avenue.

"It's still serving people food," Kennedy says. "It's just way more gloves than I've ever worn." Before COVID, the Culinary Institute of America graduate spent six years working in New York restaurants. Her first job was at Torrisi Italian Specialties, the tiny-but-luxurious Italian-American dining room room named after Rich Torrisi, one of the chef-partners of the Major Food Group, which had just 20 seats and served made-to-order balls of fresh mozzarella to begin its multicourse tasting menus. When that restaurant closed eight months after Kennedy began, she went to Dirty French, MFG's glitzy hotel restaurant on Ludlow Street, followed by a front-of-house stint at the Lobster Club, a sister restaurant to the company's revamped Four Seasons space. Between that restaurant and Flora Bar, Kennedy also spent an "intense" year at Momofuku Ssäm Bar in the East Village. "Working at Ssäm Bar, I used to work my butt off until 2 a.m., and I'm like, for what?" she says. "I think I did a good job," she continues, before saying that she's reconsidered the sense of pride she took in the work. "Like, Look at me, I am the meat cook – did anyone know?"

At the hospital, she works as a cook in a kitchen staffed by about 50 people at any given time, with 30 of those involved in preparing the food. They're responsible for providing room service, three times a day, to the hospital's 498 patients, who can choose from any of the menu's 60 dishes in addition to daily specials. In the kitchen, there are employees whose only job is to work the tray line, ensuring the food matches the right ticket. Cooks, meanwhile, are assigned to different stations — not unlike a restaurant line — such as eggs, grilling, and saucing. "The first shift I worked was 6:30 a.m. to 2:30 p.m., and I was just like, *Oh wow, I have never seen this many eggs in my life,*" Kennedy laughs.

There are plenty of other differences. To start, she's now making \$25 an hour, compared to the \$15 to \$17 she made toward the end of her time in restaurants. She has health insurance (something that many in the hospitality industry can't afford), and she's felt less anxious since starting the new job. She is also adjusting to the idea of a set schedule — she usually works a 12:30 p.m. to 8:30 p.m. shift — and paid time off. "People take lots of vacation," she says. "I don't because I literally don't know how."

Early on, Kennedy was also surprised to find she wasn't constantly being asked to stay late or come in early. "I was like, *Are they going to come in and say, 'Can you stay until 3?*" she says. "Once in a while we'll have to stay later, but they'll pay us, and it's not like they'll sneak it up on us or something." For Kennedy, it's a big change. "In restaurants, they'd say you should come in at one o'clock, but if you came in at one o'clock, you're going to be so far behind." Instead, cooks jump right into service when they arrive at the hospital, and anyone who works the 9 a.m. to 5 p.m. shift helps prep for other cooks.

All of this stability is one reason that staff tends to stay with the hospital — something Kennedy realized when she began to meet her new coworkers. "I'm like, *Wow, you've worked here for 14 years*," she says. "I've never met anyone who has worked somewhere for 14 years. If it's a restaurant, it's like, *Oh, you worked here for a year* — *that's a long time*."



A typical meal at the hospital. Photo: DeSean McClinton-Holland

The new job also required more abstract adjustments, and Kennedy had to shift her thinking in terms of whom she was cooking for and why. "When you work in a restaurant, it's always *you*" — the cook — "versus *them*" — the customers, Kennedy explains. The mentality is, "They're out to get you." What Kennedy has come to realize is that this is not the case at *all* restaurants, but it

was absolutely the case at the restaurants where she worked, where the chefs' names and distinct styles were ostensibly the draw for customers. (Momofuku became famous in the company's early days for its restaurants' strict no-substitutions menu policies.) "We were very *our way or the highway,*" Kennedy says. "The chef is right — that's it."

Now, Kennedy's day-to-day concerns go far beyond proper char on a steak, for example, like assembling a proper low-microbial diet for recipients of bonemarrow transplants, or making something for esophageal-cancer patients who cannot swallow. "Getting people nutrition is the hard part," Kennedy explains. (Loss of appetite is also an issue, and a patient suffering from malnutrition can't fight cancer as well.) "I'm not a dietitian, but to get someone something worth eating when they can only eat purée — we need to get fat in there — or if they want just a little bit of food, it's hard."

This isn't to say comfort or pleasure aren't factored into the food. The kitchen is always looking for ways to add slivers of enjoyment to patients' days, and they do indulge the occasional plating flourish, like shingles of strawberries crowning a cup of cottage cheese. Kennedy says this has become especially crucial as COVID limited visitation guidelines<sup>1</sup> meaning those same patients can't depend as much on company. Kennedy knows the potential that food has to make someone feel less alone, which was impressed upon by her father's own enthusiasm for the food after undergoing quadruple bypass surgery. Even now, he sends her photos of the food he ate during his stay. "This is two years ago, and we're still talking about it," she says. "It really did change his day because he got something and thought it was amazing."



Assembling the food is more straightforward at the hospital, but does allow for creative flourishes. Photo: DeSean McClinton-Holland

Mostly, she just wants to make patients happy, which is different than impressing hard-to-please customers inside rarefied Manhattan dining rooms. "We have a million things in the hospital," Kennedy says. "If someone asks for something — you want to have it, to say, 'We'll go get it, sure, not a problem."" There is no ego, in other words, only a desire to make patients feel cared for. "We're not doing it for finesse," she says, before explaining that it's a different approach to VIP treatment than what you'd find at even the most exclusive New York restaurants. "It's soigné," Kennedy says, "but it's a different kind of soigné — it's hospital soigné." When dessert arrives at Thai Diner, Kennedy pulls out her phone to take some pictures for Instagram. She loves a banana-rum pudding's decorative sesame tuile and the desserts' flowery "grandma" plates. "I started an Instagram that's just the ice cream that I get," she says. "We're ice cream snobs, I guess you could say."

I ask her if she ever misses working in restaurants. "No," she says, before using her spoon to break off a bit of the tuile.

<sup>&</sup>lt;sup>1</sup> The pandemic has also brought to greater attention <u>how much food insecurity contributes to risk of diseases</u>, and experts have discussed the importance of diet and nutrition in <u>fighting</u> and <u>preventing</u> cancer. Memorial Sloan Kettering makes a point to acknowledge the issue of food insecurity and nutrition among patients; the hospital runs a program, <u>Food to Overcome Outcome Disparities</u>, that since 2011 has distributed over 300,000 meals to patients of its cancer clinics and their families.