LEA ID #: _____

LEA Name: _____

Unit (Central LEA Foodservice/School Cafeteria Manager/
School Administration/Other): _____

School (if applicable): _____

Respondent Name: _____

Respondent Title: _____

Respondent Phone Number: _____

Respondent E-mail:_____

Community Eligibility Option Evaluation

Administrative Cost Interview—Field Questionnaire

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB number. The valid OMB control number for this information collection is 0584-XXXX. The time required to complete this information collection is estimated to average up to 45 minutes, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Food and Nutrition Service, Office of Research and Analysis, 3101 Park Center Drive, Alexandria, Virginia 22302.

Prepared for:
U.S. Department of Agriculture
Food and Nutrition Service
Office of Research and Analysis

Prepared by:
Abt Associates Inc.

Administrative Cost Interview—Field Questionnaire

Note to interviewers: The purpose of this interview is to find out what kinds of employees are involved and how much time they spend on each activity and task using the Staffing and Time Grids. Refer to Administrative Activity Summary Grid on the Administrative Cost Interview - Self-Administered Questionnaire to determine which types of respondents need to be interviewed and which activities are conducted by each respondent's unit. The LEA Foodservice Director will always be interviewed; interviews with School Cafeteria Managers and/or School Administrators in the sampled schools may also be needed. An interview must be conducted for each identified respondent. If more than one respondent is identified for a given activity, an interview for each respondent must be conducted. To prepare for each interview, identify the activities done by each unit and, on the Staffing and Time Grid for each such activity, circle the tasks that the unit performs, as indicated in the Administrative Activity Summary Grid. Once the Staffing and Time Grids are completed, you will be asked to go over the Staff Rosters (instructions on page 9). There is a special section for the LEA Foodservice Director ONLY at the end of this guide.

Introduction script
To all respondents: Before we start I would like to thank you for agreeing to participate in the study. Today, I would like to ask you some questions about Administrative Costs in your unit.

Information provided in this survey will be kept private, to the extent provided by law. No data will be attributed to specific survey respondents. De-identified data from this study will be provided to the Food and Nutrition Service of the U.S Department of Agriculture, and aggregate measures of subgroups of Local Education Agencies (LEAs) may also be provided. Responses to the study will in no way affect your agency's receipt of funds from USDA's school meals program. As you may know, the Healthy-Free Kids Act of 2010 (PL 111-296, Section 305) requires cooperation with program research and evaluation by agencies and contractors participating in programs authorized under the Act and the Child Nutrition Act of 1966.

Do have any questions before we begin?

[*If respondent has privacy questions you cannot answer:*] If you have any questions or concerns about your rights as a study participant, call Teresa Doksum. She is the Institutional Review Board Administrator at Abt Associates. Her phone number is 877-520-6835 (toll-free).

Script for Staffing and Time Grids
To LEA foodservice director: You have identified administrative activities for the school meals programs that your unit performs in the Administrative Cost Interview -Self-Administered Questionnaire. I want to find out how much time the staff in your department spends each year on these administrative activities. I am going to name the administrative tasks associated with each activity that your staff might do. Here is a handout with the questions that I will ask you for each task. For each task, tell me what types of employees do the task, and how many, if more than one. Then, tell me how much time each employee spends on the given task. If a task is done one time per year or infrequently, you can just tell me the time spent per year by each type of employee. If there is more than one type of employee that does a task, tell me the number of employees and the time spent on the task for each type of employee. What we need to know is how much each type of employee spends on each activity, including all of the tasks. So if you can't separate time spent on different tasks that make up an activity, that's all right. I can just record the time spent on a group of tasks. Also, if the task is performed for different amounts of time at various points during the year, tell me how much

time you spend on the task separately for each time period. For example, if you spend 80 percent of your time processing applications for the first month of school, and then one hour a week for the rest of the year, you can tell me that instead of trying to provide an average over the entire school year. (IF NEEDED: If it is easier, you can think about the time to do a task once and then tell me how many times per year the task is done).

To all other respondents: The LEA foodservice director identified administrative activities for the school meals programs that your unit performs. I want to find out how much time the staff in your department spends each year for each of these administrative activities. First, I want to review the administrative activities that you perform as indicated by the foodservice director and then identify any other tasks that may have been missed. Next, I want to find out how much time the staff in your department spends each year on these administrative activities. I am going to name the administrative tasks associated with each activity that your staff might do. Here is a handout with the questions that I will ask you for each task. For each task, tell me what types of employees do the task, and how many, if more than one. Then, tell me how much time each employee spends on the given task. If a task is done one time per year or infrequently, you can just tell me the time spent per year by each type of employee. If there is more than one type of employee that does a task, tell me the number of employees and the time spent on the task for each type of employee. What we need to know is how much each type of employee spends on each activity, including all of the tasks. So if you can't separate time spent on different tasks that make up an activity, that's all right. I can just record the time spent on a group of tasks. Also, if the task is performed for different amounts of time at various points during the year, tell me how much time you spend on the task separately for each time period. For example, if you spend 80 percent of your time processing applications for the first month of school, and then one hour a week for the rest of the year, you can tell me that instead of trying to provide an average over the entire school year. (IF NEEDED: If it is easier, you can think about the time to do a task once and then tell me how many times per year the task is done).

<u>**Instructions script for all respondents (including LEA foodservice director)**</u>
Let's start with *(read first circled task on Staffing and Time Grid).* The first task is *(read task 1 description on grid for this activity. Complete columns b-d for each task that staff perform.)* Have I left out a task for this activity? *(If yes)* Please tell me what it is, and what type of staff does it. *(Write in column b, and complete columns c and d, using the questions in the column headings.)*

(Complete the Staffing and Time Grid for each activity identified on the Activity Summary Grid from the Administrative Cost Interview - Self-Administered Questionnaire. If the unit does not do the task identified by the LEA foodservice director, write "Not Applicable" in column b. Obtain time estimates for each task identified on the Activity Summary Grid. When the respondent can only provide time estimates for a set of combined tasks, write the task numbers that are being combined in the shaded boxes at the end of each grid, and then fill out the appropriate time estimate in columns c and d. Use the Workspace area at the end of each grid to work out time estimates with the respondent if the respondent can only provide time per episode rather than per time. When all Staffing and Time Grids are complete, ask) Are there any other administrative activities that you do that we have missed? Are there any that we counted more than once?"

Community Eligibility Option Evaluation
Administrative Cost Interview Guide Handout

1. **What types of employees do this task (i.e., title, position, etc.)?**
   - Please use same type as written on the Staff Rosters

2. **How many employees of this type do this task?**

3. **How long does each person of this type spend on this task?**
   - If the task is done one time per year or infrequently, you can tell me the time each employee of this type spends per year.
   - If the task is performed for different amounts of time at various points during the year, tell me how much time each person spends on the task separately for each time period

4. **Is this per day, per week, per month, or per year?**
   - Provide the time period that goes with the time spent on the task. For example, a task might be done 2 hours per day for 2 months.
   - If the period that the task is done is more than one day, week, or month, tell me how many days, weeks or months.

5. **If more than one type of employee does this task, how long does each person of the other type(s) spend on this task?**
   - We need to know the time spent on each task for each type of employee that works on the task.

6. **What we need to know is how much each type of employee spends on each activity.**

Staffing and Time Grid A: Distributing and processing applications for free or reduced-price meals

(a) Circle applicable tasks	(b) What types of employees do this task (i.e., title, position, etc.)? *(refer to Staff Rosters for titles)*	(c) How many employees of this type do this task?	(d) How long does each person of this type spend on this task? *(circle answer)*		Period
1. Distributing applications (i.e. printing, mailing, handing out at meetings)			_____hrs per	D W M Y Other:_____	For:_____ D W M Y
			_____hrs per	D W M Y Other:_____	For:_____ D W M Y
			_____hrs per	D W M Y Other:_____	For:_____ D W M Y
			_____hrs per	D W M Y Other:_____	For:_____ D W M Y
2. Communications about applications for free/reduced price meals (newsletters, public service announcements, web site postings, speaking to parent groups or community organizations, contacting individual parents etc.)			_____hrs per	D W M Y Other:_____	For:_____ D W M Y
			_____hrs per	D W M Y Other:_____	For:_____ D W M Y
			_____hrs per	D W M Y Other:_____	For:_____ D W M Y
			_____hrs per	D W M Y Other:_____	For:_____ D W M Y
3. Maintaining online applications			_____hrs per	D W M Y Other:_____	For:_____ D W M Y
			_____hrs per	D W M Y Other:_____	For:_____ D W M Y
			_____hrs per	D W M Y Other:_____	For:_____ D W M Y
			_____hrs per	D W M Y Other:_____	For:_____ D W M Y

D=Day, W=Week, M=Month, Y=Year.

Staffing and Time Grid A: Distributing and processing applications for free or reduced-price meals

(a) Circle applicable tasks	(b) What types of employees do this task (i.e., title, position, etc.)? *(refer to Staff Rosters for titles)*	(c) How many employees of this type do this task?	(d) How long does each person of this type spend on this task? *(circle answer)*	Period
4. Collecting and checking applications, resolving problems, and adding school information			_____hrs per	D W M Y For:_____ Other:_____ D W M Y
			_____hrs per	D W M Y For:_____ Other:_____ D W M Y
			_____hrs per	D W M Y For:_____ Other:_____ D W M Y
			_____hrs per	D W M Y For:_____ Other:_____ D W M Y
5. Approving/rejecting applications and notifying parents			_____hrs per	D W M Y For:_____ Other:_____ D W M Y
			_____hrs per	D W M Y For:_____ Other:_____ D W M Y
			_____hrs per	D W M Y For:_____ Other:_____ D W M Y
			_____hrs per	D W M Y For:_____ Other:_____ D W M Y
6. Compiling lists of eligible students			_____hrs per	D W M Y For:_____ Other:_____ D W M Y
			_____hrs per	D W M Y For:_____ Other:_____ D W M Y
			_____hrs per	D W M Y For:_____ Other:_____ D W M Y
			_____hrs per	D W M Y For:_____ Other:_____ D W M Y

D=Day, W=Week, M=Month, Y=Year.

Staffing and Time Grid A: Distributing and processing applications for free or reduced-price meals

(a) Circle applicable tasks	(b) What types of employees do this task (i.e., title, position, etc.)? *(refer to Staff Rosters for titles)*	(c) How many employees of this type do this task?	(d) How long does each person of this type spend on this task? *(circle answer)*		Period
7. Updating lists to include transfers and other changes			_____hrs per	D W M Y Other:_____	For:_____ D W M Y
			_____hrs per	D W M Y Other:_____	For:_____ D W M Y
			_____hrs per	D W M Y Other:_____	For:_____ D W M Y
			_____hrs per	D W M Y Other:_____	For:_____ D W M Y
8. Other (specify):_____			_____hrs per	D W M Y Other:_____	For:_____ D W M Y
			_____hrs per	D W M Y Other:_____	For:_____ D W M Y
			_____hrs per	D W M Y Other:_____	For:_____ D W M Y
			_____hrs per	D W M Y Other:_____	For:_____ D W M Y
COMBINED TASK NUMBERS: _____			_____hrs per	D W M Y Other:_____	For:_____ D W M Y
			_____hrs per	D W M Y Other:_____	For:_____ D W M Y
			_____hrs per	D W M Y Other:_____	For:_____ D W M Y
			_____hrs per	D W M Y Other:_____	For:_____ D W M Y

D=Day, W=Week, M=Month, Y=Year.

Staffing and Time Grid A: Distributing and processing applications for free or reduced-price meals				
(a) **Circle applicable tasks**	**(b)** **What types of employees do this task (i.e., title, position, etc.)?** *(refer to Staff Rosters for titles)*	**(c)** **How many employees of this type do this task?**	**(d)** **How long does each person of this type spend on this task?** *(circle answer)*	**Period**
COMBINED TASK NUMBERS: _____			_____hrs per	D W M Y For:_____ Other:_____ D W M Y
			_____hrs per	D W M Y For:_____ Other:_____ D W M Y
			_____hrs per	D W M Y For:_____ Other:_____ D W M Y
			_____hrs per	D W M Y For:_____ Other:_____ D W M Y
COMBINED TASK NUMBERS: _____			_____hrs per	D W M Y For:_____ Other:_____ D W M Y
			_____hrs per	D W M Y For:_____ Other:_____ D W M Y
			_____hrs per	D W M Y For:_____ Other:_____ D W M Y
			_____hrs per	D W M Y For:_____ Other:_____ D W M Y

Workspace:

D=Day, W=Week, M=Month, Y=Year.

Staffing and Time Grid B: Direct Certifications

(a) Circle applicable tasks	(b) What types of employees do this task (i.e., title, position, etc.)? *(refer to Staff Rosters for titles)*	(c) How many employees of this type do this task?	(d) How long does each person of this type spend on this task? *(circle answer)*		Period
1. Direct certification with SNAP, TANF, Medicaid, or FDPIR—processing batches of students			_____hrs per	D W M Y Other:_____	For:_____ D W M Y
			_____hrs per	D W M Y Other:_____	For:_____ D W SM Y
			_____hrs per	D W M Y Other:_____	For:_____ D W M Y
			_____hrs per	D W M Y Other:_____	For:_____ D W M Y
2. Direct certification with SNAP, TANF, Medicaid, or FDPIR—lookups for individual students			_____hrs per	D W M Y Other:_____	For:_____ D W M Y
			_____hrs per	D W M Y Other:_____	For:_____ D W SM Y
			_____hrs per	D W M Y Other:_____	For:_____ D W M Y
			_____hrs per	D W M Y Other:_____	For:_____ D W M Y
3. Certification from homeless list			_____hrs per	D W M Y Other:_____	For:_____ D W M Y
			_____hrs per	D W M Y Other:_____	For:_____ D W M Y
			_____hrs per	D W M Y Other:_____	For:_____ D W M Y
			_____hrs per	D W M Y Other:_____	For:_____ D W M Y

D=Day, W=Week, M=Month, Y=Year.

Staffing and Time Grid B: Direct Certifications

(a) Circle applicable tasks	(b) What types of employees do this task (i.e., title, position, etc.)? *(refer to Staff Rosters for titles)*	(c) How many employees of this type do this task?	(d) How long does each person of this type spend on this task? *(circle answer)*		Period
4. Certification from Head Start list			_____hrs per	D W M Y Other:_____	For:_____ D W M Y
			_____hrs per	D W M Y Other:_____	For:_____ D W M Y
			_____hrs per	D W M Y Other:_____	For:_____ D W M Y
			_____hrs per	D W M Y Other:_____	For:_____ D W M Y
5. Certification from foster care list			_____hrs per	D W M Y Other:_____	For:_____ D W M Y
			_____hrs per	D W M Y Other:_____	For:_____ D W M Y
			_____hrs per	D W M Y Other:_____	For:_____ D W M Y
			_____hrs per	D W M Y Other:_____	For:_____ D W M Y
6. Certification from other lists (runaways, migrants)			_____hrs per	D W M Y Other:_____	For:_____ D W M Y
			_____hrs per	D W M Y Other:_____	For:_____ D W M Y
			_____hrs per	D W M Y Other:_____	For:_____ D W M Y
			_____hrs per	D W M Y Other:_____	For:_____ D W M Y

D=Day, W=Week, M=Month, Y=Year.

Staffing and Time Grid B: Direct Certifications

(a) Circle applicable tasks	(b) What types of employees do this task (i.e., title, position, etc.)? *(refer to Staff Rosters for titles)*	(c) How many employees of this type do this task?	(d) How long does each person of this type spend on this task? *(circle answer)*		Period
7. Calculating the identified student percentage (ISP) for schools/LEA			_____hrs per	D W M Y Other:_____	For:_____ D W M Y
			_____hrs per	D W M Y Other:_____	For:_____ D W M Y
			_____hrs per	D W M Y Other:_____	For:_____ D W M Y
			_____hrs per	D W M Y Other:_____	For:_____ D W M Y
8. Other (specify):_____			_____hrs per	D W M Y Other:_____	For:_____ D W M Y
			_____hrs per	D W M Y Other:_____	For:_____ D W M Y
			_____hrs per	D W M Y Other:_____	For:_____ D W M Y
			_____hrs per	D W M Y Other:_____	For:_____ D W M Y
COMBINED TASK NUMBERS: _____			_____hrs per	D W M Y Other:_____	For:_____ D W M Y
			_____hrs per	D W M Y Other:_____	For:_____ D W M Y
			_____hrs per	D W M Y Other:_____	For:_____ D W M Y
			_____hrs per	D W M Y Other:_____	For:_____ D W M Y

D=Day, W=Week, M=Month, Y=Year.

Staffing and Time Grid B: Direct Certifications

(a) Circle applicable tasks	(b) What types of employees do this task (i.e., title, position, etc.)? *(refer to Staff Rosters for titles)*	(c) How many employees of this type do this task?	(d) How long does each person of this type spend on this task? *(circle answer)*	Period
COMBINED TASK NUMBERS: _____			_____hrs per	D W M Y For:_____ Other:_____ D W M Y
			_____hrs per	D W M Y For:_____ Other:_____ D W M Y
			_____hrs per	D W M Y For:_____ Other:_____ D W M Y
			_____hrs per	D W M Y For:_____ Other:_____ D W M Y
COMBINED TASK NUMBERS: _____			_____hrs per	D W M Y For:_____ Other:_____ D W M Y
			_____hrs per	D W M Y For:_____ Other:_____ D W M Y
			_____hrs per	D W M Y For:_____ Other:_____ D W M Y
			_____hrs per	D W M Y For:_____ Other:_____ D W M Y

Workspace:

D=Day, W=Week, M=Month, Y=Year.

Staffing and Time Grid C: Verifying income of free/reduced price students

(a) Circle applicable tasks	(b) What types of employees do this task (i.e., title, position, etc.)? *(refer to Staff Rosters for titles)*	(c) How many employees of this type do this task?	(d) How long does each person of this type spend on this task? *(circle answer)*		Period
1. Selecting applications for verification			_____hrs per	D W M Y Other:_____	For:_____ D W M Y
			_____hrs per	D W M Y Other:_____	For:_____ D W M Y
			_____hrs per	D W M Y Other:_____	For:_____ D W M Y
			_____hrs per	D W M Y Other:_____	For:_____ D W M Y
2. Sending out requests for proof of eligibility, answering questions			_____hrs per	D W M Y Other:_____	For:_____ D W M Y
			_____hrs per	D W M Y Other:_____	For:_____ D W M Y
			_____hrs per	D W M Y Other:_____	For:_____ D W M Y
			_____hrs per	D W M Y Other:_____	For:_____ D W M Y
3. Verifying applications with SNAP/Food Stamp, TANF, Medicaid or FDPIR information from another agency (direct verification)			_____hrs per	D W M Y Other:_____	For:_____ D W M Y
			_____hrs per	D W M Y Other:_____	For:_____ D W M Y
			_____hrs per	D W M Y Other:_____	For:_____ D W M Y
			_____hrs per	D W M Y Other:_____	For:_____ D W M Y

D=Day, W=Week, M=Month, Y=Year.

Staffing and Time Grid C: Verifying income of free/reduced price students

(a) Circle applicable tasks	(b) What types of employees do this task (i.e., title, position, etc.)? *(refer to Staff Rosters for titles)*	(c) How many employees of this type do this task?	(d) How long does each person of this type spend on this task? *(circle answer)*		Period
4. Reviewing information provided by parents, verifying eligibility, and following up on missing information			_____hrs per	D W M Y Other:_____	For:_____ D W M Y
			_____hrs per	D W M Y Other:_____	For:_____ D W M Y
			_____hrs per	D W M Y Other:_____	For:_____ D W M Y
			_____hrs per	D W M Y Other:_____	For:_____ D W M Y
5. Notifying parents of changes in eligibility			_____hrs per	D W M Y Other:_____	For:_____ D W M Y
			_____hrs per	D W M Y Other:_____	For:_____ D W M Y
			_____hrs per	D W M Y Other:_____	For:_____ D W M Y
			_____hrs per	D W M Y Other:_____	For:_____ D W M Y
6. Writing reports for verification			_____hrs per	D W M Y Other:_____	For:_____ D W M Y
			_____hrs per	D W M Y Other:_____	For:_____ D W M Y
			_____hrs per	D W M Y Other:_____	For:_____ D W M Y
			_____hrs per	D W M Y Other:_____	For:_____ D W M Y

D=Day, W=Week, M=Month, Y=Year.

Staffing and Time Grid C: Verifying income of free/reduced price students

(a) Circle applicable tasks	(b) What types of employees do this task (i.e., title, position, etc.)? *(refer to Staff Rosters for titles)*	(c) How many employees of this type do this task?	(d) How long does each person of this type spend on this task? *(circle answer)*		Period
7. Other (specify):_____			_____hrs per	D W M Y Other:_____	For:_____ D W M Y
			_____hrs per	D W M Y Other:_____	For:_____ D W M Y
			_____hrs per	D W M Y Other:_____	For:_____ D W M Y
			_____hrs per	D W M Y Other:_____	For:_____ D W M Y
COMBINED TASK NUMBERS: _____			_____hrs per	D W M Y Other:_____	For:_____ D W M Y
			_____hrs per	D W M Y Other:_____	For:_____ D W M Y
			_____hrs per	D W M Y Other:_____	For:_____ D W M Y
			_____hrs per	D W M Y Other:_____	For:_____ D W M Y
COMBINED TASK NUMBERS: _____			_____hrs per	D W M Y Other:_____	For:_____ D W M Y
			_____hrs per	D W M Y Other:_____	For:_____ D W M Y
			_____hrs per	D W M Y Other:_____	For:_____ D W M Y
			_____hrs per	D W M Y Other:_____	For:_____ D W M Y

D=Day, W=Week, M=Month, Y=Year.

Staffing and Time Grid C: Verifying income of free/reduced price students

(a) Circle applicable tasks	(b) What types of employees do this task (i.e., title, position, etc.)? *(refer to Staff Rosters for titles)*	(c) How many employees of this type do this task?	(d) How long does each person of this type spend on this task? *(circle answer)*		Period
COMBINED TASK NUMBERS: _____Y_____			_____hrs per	D W M Y Other:_____	For:_____ D W M Y
			_____hrs per	D W M Y Other:_____	For:_____ D W M Y
			_____hrs per	D W M Y Other:_____	For:_____ D W M Y
			_____hrs per	D W M Y Other:_____	For:_____ D W M Y

Workspace:

D=Day, W=Week, M=Month, Y=Year.

Staffing and Time Grid D: Meal payment collections and accounting

(a) Circle applicable tasks	(b) What types of employees do this task (i.e., title, position, etc.)? *(refer to Staff Rosters for titles)*	(c) How many employees of this type do this task?	(d) How long does each person of this type spend on this task? *(circle answer)*	Period
1. Collecting money at meals			_____hrs per	D W M Y For:_____
				Other:_____ D W M Y
			_____hrs per	D W M Y For:_____
				Other:_____ D W M Y
			_____hrs per	D W M Y For:_____
				Other:_____ D W M Y
			_____hrs per	D W M Y For:_____
				Other:_____ D W M Y
2. Collecting money owed for meals			_____hrs per	D W M Y For:_____
				Other:_____ D W M Y
			_____hrs per	D W M Y For:_____
				Other:_____ D W M Y
			_____hrs per	D W M Y For:_____
				Other:_____ D W M Y
			_____hrs per	D W M Y For:_____
				Other:_____ D W M Y
3. Collecting money from cafeterias			_____hrs per	D W M Y For:_____
				Other:_____ D W M Y
			_____hrs per	D W M Y For:_____
				Other:_____ D W M Y
			_____hrs per	D W M Y For:_____
				Other:_____ D W M Y
			_____hrs per	D W M Y For:_____
				Other:_____ D W M Y

D=Day, W=Week, M=Month, Y=Year.

Staffing and Time Grid D: Meal payment collections and accounting

(a) Circle applicable tasks	(b) What types of employees do this task (i.e., title, position, etc.)? *(refer to Staff Rosters for titles)*	(c) How many employees of this type do this task?	(d) How long does each person of this type spend on this task? *(circle answer)*	Period
4. Receiving money for student meal payment accounts or selling meal tickets			_____hrs per	D W M Y Other:_____
				For:_____ D W M Y
			_____hrs per	D W M Y Other:_____
				For:_____ D W M Y
			_____hrs per	D W M Y Other:_____
				For:_____ D W M Y
			_____hrs per	D W M Y Other:_____
				For:_____ D W M Y
5. Depositing money for meals or meal tickets			_____hrs per	D W M Y Other:_____
				For:_____ D W M Y
			_____hrs per	D W M Y Other:_____
				For:_____ D W M Y
			_____hrs per	D W M Y Other:_____
				For:_____ D W M Y
			_____hrs per	D W M Y Other:_____
				For:_____ D W M Y
6. Issuing meal payment cards or ID/PIN numbers			_____hrs per	D W M Y Other:_____
				For:_____ D W M Y
			_____hrs per	D W M Y Other:_____
				For:_____ D W M Y
			_____hrs per	D W M Y Other:_____
				For:_____ D W M Y
			_____hrs per	D W M Y Other:_____
				For:_____ D W M Y

D=Day, W=Week, M=Month, Y=Year.

Staffing and Time Grid D: Meal payment collections and accounting

(a) Circle applicable tasks	(b) What types of employees do this task (i.e., title, position, etc.)? *(refer to Staff Rosters for titles)*	(c) How many employees of this type do this task?	(d) How long does each person of this type spend on this task? *(circle answer)*	Period
7. Maintaining student meal payment accounts			_____hrs per	D W M Y / For:_____ Other:_____ / D W M Y
			_____hrs per	D W M Y / For:_____ Other:_____ / D W M Y
			_____hrs per	D W M Y / For:_____ Other:_____ / D W M Y
			_____hrs per	D W M Y / For:_____ Other:_____ / D W M Y
8. Reconciling deposits to bank statements			_____hrs per	D W M Y / For:_____ Other:_____ / D W M Y
			_____hrs per	D W M Y / For:_____ Other:_____ / D W M Y
			_____hrs per	D W M Y / For:_____ Other:_____ / D W M Y
			_____hrs per	D W M Y / For:_____ Other:_____ / D W M Y
9. Other (specify):_____			_____hrs per	D W M Y / For:_____ Other:_____ / D W M Y
			_____hrs per	D W M Y / For:_____ Other:_____ / D W M Y
			_____hrs per	D W M Y / For:_____ Other:_____ / D W M Y
			_____hrs per	D W M Y / For:_____ Other:_____ / D W M Y

D=Day, W=Week, M=Month, Y=Year.

Staffing and Time Grid D: Meal payment collections and accounting

(a) Circle applicable tasks	(b) What types of employees do this task (i.e., title, position, etc.)? *(refer to Staff Rosters for titles)*	(c) How many employees of this type do this task?	(d) How long does each person of this type spend on this task? *(circle answer)*		Period
COMBINED TASK NUMBERS: _____			_____hrs per	D W M Y Other:_____	For:_____ D W M Y
			_____hrs per	D W M Y Other:_____	For:_____ D W M Y
			_____hrs per	D W M Y Other:_____	For:_____ D W M Y
			_____hrs per	D W M Y Other:_____	For:_____ D W M Y
COMBINED TASK NUMBERS: _____			_____hrs per	D W M Y Other:_____	For:_____ D W M Y
			_____hrs per	D W M Y Other:_____	For:_____ D W M Y
			_____hrs per	D W M Y Other:_____	For:_____ D W M Y
			_____hrs per	D W M Y Other:_____	For:_____ D W M Y
COMBINED TASK NUMBERS: _____			_____hrs per	D W M Y Other:_____	For:_____ D W M Y
			_____hrs per	D W M Y Other:_____	For:_____ D W M Y
			_____hrs per	D W M Y Other:_____	For:_____ D W M Y
			_____hrs per	D W M Y Other:_____	For:_____ D W M Y

D=Day, W=Week, M=Month, Y=Year.

Workspace:

Staffing and Time Grid E: Counting and claiming reimbursable meals

(a) Circle applicable tasks	(b) What types of employees do this task (i.e., title, position, etc.)? *(refer to Staff Rosters for titles)*	(c) How many employees of this type do this task?	(d) How long does each person of this type spend on this task? *(circle answer)*	Period
1. Compiling meal counts for breakfast			_____hrs per Other:_____	D W M Y For:_____ D W M Y
			_____hrs per Other:_____	D W M Y For:_____ D W M Y
			_____hrs per Other:_____	D W M Y For:_____ D W M Y
			_____hrs per Other:_____	D W M Y For:_____ D W M Y
2. Compiling meal counts for lunch			_____hrs per Other:_____	D W M Y For:_____ D W M Y
			_____hrs per Other:_____	D W M Y For:_____ D W M Y
			_____hrs per Other:_____	D W M Y For:_____ D W M Y
			_____hrs per Other:_____	D W M Y For:_____ D W M Y
3. Compiling meal counts for after-school snacks			_____hrs per Other:_____	D W M Y For:_____ D W M Y
			_____hrs per Other:_____	D W M Y For:_____ D W M Y
			_____hrs per Other:_____	D W M Y For:_____ D W M Y
			_____hrs per Other:_____	D W M Y For:_____ D W M Y

D=Day, W=Week, M=Month, Y=Year.

Staffing and Time Grid E: Counting and claiming reimbursable meals

(a) Circle applicable tasks	(b) What types of employees do this task (i.e., title, position, etc.)? *(refer to Staff Rosters for titles)*	(c) **How many employees of this type do this task?**	(d) How long does each person of this type spend on this task? *(circle answer)*		Period
4. Reporting on meal counts			_____hrs per	D W M Y Other:_____	For:_____ D W M Y
			_____hrs per	D W M Y Other:_____	For:_____ D W M Y
			_____hrs per	D W M Y Other:_____	For:_____ D W M Y
			_____hrs per	D W M Y Other:_____	For:_____ D W M Y
5. Submitting meal claims to State			_____hrs per	D W M Y Other:_____	For:_____ D W M Y
			_____hrs per	D W M Y Other:_____	For:_____ D W M Y
			_____hrs per	D W M Y Other:_____	For:_____ D W M Y
			_____hrs per	D W M Y Other:_____	For:_____ D W M Y
6. Other (specify):_____			_____hrs per	D W M Y Other:_____	For:_____ D W M Y
			_____hrs per	D W M Y Other:_____	For:_____ D W M Y
			_____hrs per	D W M Y Other:_____	For:_____ D W M Y
			_____hrs per	D W M Y Other:_____	For:_____ D W M Y

D=Day, W=Week, M=Month, Y=Year.

Staffing and Time Grid E: Counting and claiming reimbursable meals

(a) Circle applicable tasks	(b) What types of employees do this task (i.e., title, position, etc.)? *(refer to Staff Rosters for titles)*	(c) How many employees of this type do this task?	(d) How long does each person of this type spend on this task? *(circle answer)*		Period
COMBINED TASK NUMBERS: _____			_____hrs per Other:_____	D W M Y	For:_____ D W M Y
			_____hrs per Other:_____	D W M Y	For:_____ D W M Y
			_____hrs per Other:_____	D W M Y	For:_____ D W M Y
			_____hrs per Other:_____	D W M Y	For:_____ D W M Y
COMBINED TASK NUMBERS: _____			_____hrs per Other:_____	D W M Y	For:_____ D W M Y
			_____hrs per Other:_____	D W M Y	For:_____ D W M Y
			_____hrs per Other:_____	D W M Y	For:_____ D W M Y
			_____hrs per Other:_____	D W M Y	For:_____ D W M Y
COMBINED TASK NUMBERS: _____			_____hrs per Other:_____	D W M Y	For:_____ D W M Y
			_____hrs per Other:_____	D W M Y	For:_____ D W M Y
			_____hrs per Other:_____	D W M Y	For:_____ D W M Y
			_____hrs per Other:_____	D W M Y	For:_____ D W M Y

Workspace:

D=Day, W=Week, M=Month, Y=Year.

D=Day, W=Week, M=Month, Y=Year.

Script to identify missing tasks

Are there other administrative tasks related to school meals eligibility or meal reimbursements that I have not listed in which you or your staff are involved?
      (IF YES, ask) What tasks have we left out?
      (IF NO, proceed to page 34)

(Instructions to interviewer: Write the identified missing the tasks below. Then, fill in the applicable time in Staffing and Time Grid F on the next page, making sure that the task has not already been previously listed and give an appropriate Activity for the task.)

    a. _____ a.

        _____

        _____

    b. _____ b.

        _____

        _____

    c. _____ c.

        _____

        _____

    d. _____ d.

        _____

        _____

Staffing and Time Grid F: Missing Tasks

(a) Tasks	(b) What types of employees do this task (i.e., title, position, etc.)?	(c) How many employees of this type do this task?	(d) How long does each person of this type spend on this task? *(circle answer)*		Period (if necessary)
			_____hrs per	D W M Y Other:_____	For:_____ D W M Y
			_____hrs per	D W M Y Other:_____	For:_____ D W M Y
			_____hrs per	D W M Y Other:_____	For:_____ D W M Y
			_____hrs per	D W M Y Other:_____	For:_____ D W M Y
			_____hrs per	D W M Y Other:_____	For:_____ D W M Y
			_____hrs per	D W M Y Other:_____	For:_____ D W M Y
			_____hrs per	D W M Y Other:_____	For:_____ D W M Y
			_____hrs per	D W M Y Other:_____	For:_____ D W M Y
			_____hrs per	D W M Y Other:_____	For:_____ D W M Y
			_____hrs per	D W M Y Other:_____	For:_____ D W M Y
			_____hrs per	D W M Y Other:_____	For:_____ D W M Y
			_____hrs per	D W M Y Other:_____	For:_____ D W M Y

D=Day, W=Week, M=Month, Y=Year.

Staffing and Time Grid F: Missing Tasks

(a) Tasks	(b) What types of employees do this task (i.e., title, position, etc.)?	(c) How many employees of this type do this task?	(d) How long does each person of this type spend on this task? *(circle answer)*	Period (if necessary)
			_____hrs per Other:_____	D W M Y For:_____ D W M Y
			_____hrs per Other:_____	D W M Y For:_____ D W M Y
			_____hrs per Other:_____	D W M Y For:_____ D W M Y
			_____hrs per Other:_____	D W M Y For:_____ D W M Y
			_____hrs per Other:_____	D W M Y For:_____ D W M Y
			_____hrs per Other:_____	D W M Y For:_____ D W M Y
			_____hrs per Other:_____	D W M Y For:_____ D W M Y
			_____hrs per Other:_____	D W M Y For:_____ D W M Y
			_____hrs per Other:_____	D W M Y For:_____ D W M Y
			_____hrs per Other:_____	D W M Y For:_____ D W M Y
			_____hrs per Other:_____	D W M Y For:_____ D W M Y
			_____hrs per Other:_____	D W M Y For:_____ D W M Y

D=Day, W=Week, M=Month, Y=Year.

Note to interviewers: When you have completed all Staffing and Time Grids, refer to the Staff Roster for the unit in the Administrative Cost Interview Self-Administered Questionniare. Go over the roster for the unit. Make sure that all types of staff mentioned in Staffing and Time Grids are included in the Staff Roster for the unit with information for them. Add people to the Staff Roster that are in the Staffing and Time Grids. For any gaps in information about staff pay, ask the LEA Foodservice Director.

To LEA foodservice director in CE Schools ONLY: Now we will be asking you questions about changes in menu planning and other savings/changes resulting from the implementation of the Community Eligibility Option. (PROCEED TO QUESTION 1 BELOW).

To all other respondents: Thank you for your time and participating in this study!

1. Have you made any changes to the variety of foods you offer as a result of implementation of the Community Eligibility Option? If so, how did the variety change?

    a. Increased variety (describe below)
    b. Decreased variety (describe below)
    c. No change
    d. Don't know
    e. Description of changes:

2. Have you made any changes to the amount of fresh fruits and vegetables you offer as a result of implementation of the Community Eligibility Option? If so, how did the amount change?

    a. Increased amount (describe below)
    b. Decreased amount (describe below)
    c. No change
    d. Don't know
    e. Description of changes:

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3. Have you made any changes to the *types* of foods you serve as a result of implementation of the Community Eligibility Option?

    a. Yes (If yes, please explain)
    b. No
    c. Don't know
    d. Description of changes:

    ☐   More pre-portioned items

    ☐   More "grab and go" items

4. Have you made any changes to the serving process as a result of implementation of the Community Eligibility Option?

    a. Yes (If yes, please explain)
    b. No
    c. Don't know
    d. Description of changes:

> ☐ More serving lines

5. Have you made any changes to food service *administrative* staffing as a result of implementation of the Community Eligibility Option?

    a. Yes—reduced staff
    b. Yes—reassigned staff (describe below)
    c. Yes—increased staff
    d. No changes
    e. Don't know
    f. Description of how staff were reassigned:

6. Have you made any changes to food *production* staffing (that is, the number of person hours) as a result of implementation of the Community Eligibility Option?

    a. Yes – reduced staff hours
    b. Yes – increased staff hours
    c. No changes
    d. Don't know

7. Has data processing, such as your system for counting meals, been changed as a result of implementation of the Community Eligibility Option?

    a. Yes (describe below)
    b. No
    c. Don't know
    d. Description of changes:

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8. Has the Community Eligibility Option affected whether your LEA foodservice is able to break even, that is, whether revenues from all sources are at least equal to costs?

    a. Yes—the Option makes it easier to break even (Please explain)
    b. Yes—the Option makes it harder to break even (Please explain)
    c. No changes
    d. Don't know
    e. Explanation of why the Option affects the ability to break even:

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Thank you for your assistance with this important study.