

**Survey SY 2012-13**

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 0584-0562. The time required to complete this information collection is estimated to average 3 hours per response, including the time for reviewing instructions, searching existing data sources, gather and maintaining the data needed, and completing and reviewing the collection of information.

This survey is being conducted for the Food and Nutrition Service, U.S. Department of Agriculture as part of a study of the National School Lunch Program (NSLP) and School Breakfast Program (SBP) as well as other USDA food programs throughout the country*.* **All responses will be treated in strict confidence; no names will be used in our reports, and only aggregated results will be reported.**

Section 305 of the Healthy, Hunger-Free Kids Act of 2010 states that “States, State educational agencies, local educational agencies, schools, institutions, facilities, and contractors participating in programs authorized under this Act and the Child Nutrition Act of 1966 (42 U.S.C 1771 et seq.) shall cooperate with officials and contractors acting on behalf of the Secretary, in the conduct of evaluations and studies under those Acts.”

Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to: U.S. Department of Agriculture, Food and Nutrition Service, Office of Research and Analysis, Room 1014, Alexandria, VA 22302. Attn: Mr. John Endahl.

**We thank you for your cooperation and participation in this very important study.**

|  |
| --- |
| **INSTRUCTIONS**   * Please answer all questions. * Unless you see the words CHECK ALL THAT APPLY after a question, please check only one answer for each question. * If you have any questions about the study or about completing this survey, please contact the Westat survey helpline at 1-888-202-1565 or by email: [SNPOS@westat.com](mailto:SNPOS@westat.com) |

|  |
| --- |
| Date  / / |
| School District Name(s) |

|  |  |
| --- | --- |
| **Contact information for the SFA Director** | **Name and address of person filling out this survey if other than the SFA Director** |

|  |  |  |
| --- | --- | --- |
| Name |  | Name |
| Address |  | Address |
| City |  | City |
| Zip Code  State |  | Zip Code  State |
| Extension  Telephone  ( ) |  | Extension  Telephone  ( ) |
| Email |  | Email |

**Section 1 School Participation**

**The next few questions are about the number of schools in your SFA participating in the school breakfast and lunch programs during the 2012–2013 school year.**

**1.1** For this question, please record your responses separately for Elementary (i.e., schools composed of any span of grades from Kindergarten through 6th grade); Middle or Junior High (i.e., schools that have no grade lower than 6 and no grade higher than 9); or High School (i.e., schools that have no grade lower than 9 and continue through 12th grade). If any school does not meet the Elementary, Middle or Junior High, or High School definition, please include it in the “Other school” column and describe them briefly under item f.

**Please answer the following questions for the 2012–2013 school year:**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | 1 | 2 | 3 | 4 | 5 |
| Number of schools | **Elementary school** | **Middle or Junior High** | **High School** | **Other school** | **Total** |
| 1. Number of schools participating in both the School Breakfast Program (SBP) and the National School Lunch Program (NSLP) |  |  |  |  |  |
| b. Number of schools participating in SBP only |  |  |  |  |  |
| c. Number of schools participating in NSLP only |  |  |  |  |  |
| d. Number of schools NOT participating in either SBP or NSLP |  |  |  |  |  |
| e. Total Number of schools in the school districts |  |  |  |  |  |

f. Please list the grades included in schools listed under “other school.”

|  |
| --- |
|  |
|  |
|  |

**1.2** For the 2012–2013 school year:

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | 1 | 2 | 3 | 4 | 5 |
| Number of schools | **Elementary school** | **Middle or Junior High** | **High School** | **Other school** | **Total** |
| 1. Number of schools participating in the Afterschool Snack Program |  |  |  |  |  |
| b. Number of schools participating in the At-Risk Supper Program |  |  |  |  |  |

**1.3** For the 2012–2013 school year, how many schools participate in the School Breakfast Program as severe need (if 40% or more of the lunches served by the school are served free or at a reduced price in the second preceding year) schools?

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | 1 | 2 | 3 | 4 | 5 |
|  | **Elementary school** | **Middle or Junior High** | **High School** | **Other school** | **Total** |
|  |  |  |  |  |  |

**1.4** For the 2012–2013 school year, how many schools participate in the National School Lunch Program as high need (additional 2 cent meal reimbursement) schools?

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | 1 | 2 | 3 | 4 | 5 |
|  | **Elementary school** | **Middle or Junior High** | **High School** | **Other school** | **Total** |
|  |  |  |  |  |  |

**Section 2 Student Participation**

**The next few questions are about the number of children enrolled in the school(s) you serve and their participation in the school breakfast and lunch programs during the 2012–2013 school year.**

**2.1** For this question, please record your responses separately for Elementary (i.e., schools composed of any span of grades from Kindergarten through 6th grade); Middle or Junior High (i.e., schools that have no grade lower than 6 and no grade higher than 9); or High School (i.e., schools that have no grade lower than 9 and continue through 12th grade). If any school does not meet the Elementary, Middle or Junior High, or High School definition, please include them in the “Other school” column.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | 1 | 2 | 3 | 4 | 5 |
| Number of students | **Elementary school** | **Middle or Junior High** | **High School** | **Other school** | **Total** |
| 1. Total number of students enrolled in the 2012–2013 school year as of October 1st\* |  |  |  |  |  |

\* The total school enrollment should include kindergarten students who attend school half day and do not have access to meals. A school that does not have the NSLP or the SBP should also be included in this count.

**Please answer the following questions for the 2012–2013 school year:**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | 1 | 2 | 3 | 4 | 5 |
| Number of students | **Elementary school** | **Middle or Junior High** | **High School** | **Other school** | **Total** |
| 1. Number of students approved to receive free meals |  |  |  |  |  |
| c. Number of students approved to received reduced price meals |  |  |  |  |  |
| d. Number of students included in the “Total Student Enrollment” without access to the SBP\* |  |  |  |  |  |
| e. Number of students included in the “Total Student Enrollment” without access to NSLP\* |  |  |  |  |  |

\* The total school enrollment should include kindergarten students who attend school half day and do not have access to meals. A school that does not have the NSLP or the SBP should also be included in this count.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | 1 | 2 | 3 | 4 | 5 |
| Number of students | **Elementary school** | **Middle or Junior High** | **High School** | **Other school** | **Total** |
| 1. What was the average daily attendance for the month of October 2012\*\* |  |  |  |  |  |

\*\* Calculate the average daily attendance for students in each type of school and place in the appropriate column. For the Total column, calculate the average daily attendance for all students, across all schools, in the district.

**2.2** Record the number of breakfast serving days for each school type for the past 3 school years.

If there are differences among schools within your school district for number of serving days, provide the average number of serving days for the district. Do not include serving days for summer food service or other special programs that occur when the district is not in session.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | 1 | 2 | 3 | 4 | 5 |
| Breakfast serving days | **Elementary school** | **Middle or Junior High** | **High School** | **Other school** | **Total** |
| 1. SY 2011–2012 |  |  |  |  |  |
| b. SY 2010–2011 |  |  |  |  |  |
| 1. SY 2009–2010 |  |  |  |  |  |

**2.3** Record the number of student breakfasts claimed in each price category (full price, reduced price, and free) and school type **for the past three school years**. If your district has any schools that qualify for the severe need SBP reimbursement rate, indicate the number of meals claimed for them in the designated row.

SY 2011–2012: School Breakfast Program Reimbursable Meals Claimed

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | 1 | 2 | 3 | 4 | 5 |
| Number of Reimbursable Breakfasts Claimed | **Elementary school** | **Middle or Junior High** | **High School** | **Other school** | **Total** |
| 1. Number of Non-Severe Need Free Breakfasts |  |  |  |  |  |
| 1. Number of Severe Need Free Breakfasts |  |  |  |  |  |
| 1. Number of Non-Severe Need Reduced Price Breakfasts |  |  |  |  |  |
| 1. Number of Severe Need Reduced Price Breakfasts |  |  |  |  |  |
| 1. Number of Full Price Breakfasts |  |  |  |  |  |

**2.4** SY 2010–2011: School Breakfast Program Reimbursable Meals Claimed

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | 1 | 2 | 3 | 4 | 5 |
| Number of Reimbursable Breakfasts Claimed | **Elementary school** | **Middle or Junior High** | **High School** | **Other school** | **Total** |
| 1. Number of Non-Severe Need Free Breakfasts |  |  |  |  |  |
| 1. Number of Severe Need Free Breakfasts |  |  |  |  |  |
| 1. Number of Non-Severe Need Reduced Price Breakfasts |  |  |  |  |  |
| 1. Number of Severe Need Reduced Price Breakfasts |  |  |  |  |  |
| 1. Number of Full Price Breakfasts |  |  |  |  |  |

**2.5** SY 2009–2010: School Breakfast Program Reimbursable Meals Claimed

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | 1 | 2 | 3 | 4 | 5 |
| Number of Reimbursable Breakfasts Claimed | **Elementary school** | **Middle or Junior High** | **High School** | **Other school** | **Total** |
| 1. Number of Non-Severe Need Free Breakfasts |  |  |  |  |  |
| 1. Number of Severe Need Free Breakfasts |  |  |  |  |  |
| 1. Number of Non-Severe Need Reduced Price Breakfasts |  |  |  |  |  |
| 1. Number of Severe Need Reduced Price Breakfasts |  |  |  |  |  |
| 1. Number of Full Price Breakfasts |  |  |  |  |  |

**2.6** Record the number of lunch serving days for each school type **for the past three school years**.

If there are differences among schools within your school district for number of serving days, provide the average number of serving days for the district. Do not include serving days for summer food service or other special programs that occur when the district is not in session.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | 1 | 2 | 3 | 4 | 5 |
| Lunch serving days | **Elementary school** | **Middle or Junior High** | **High School** | **Other school** | **Total** |
| 1. SY 2011–2012 |  |  |  |  |  |
| b. SY 2010–2011 |  |  |  |  |  |
| 1. SY 2009–2010 |  |  |  |  |  |

**2.7** Record the number of student lunches claimed in each price category (full price, reduced price, and free) and school type **for the past three school years**. If your district has any schools that qualify for the high need (+2 cents) NSLP reimbursement rate, indicate the number of meals claimed for them in the designated row.

SY 2011–2012: National School Lunch Program Reimbursable Meals Claimed

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | 1 | 2 | 3 | 4 | 5 |
| Number of Reimbursable Lunches Claimed | **Elementary school** | **Middle or Junior High** | **High School** | **Other school** | **Total** |
| 1. Number of Regular Free Lunches |  |  |  |  |  |
| 1. Number of High Need Free Lunches (+2 cents) |  |  |  |  |  |
| 1. Number of Regular Reduced Price Lunches |  |  |  |  |  |
| 1. Number of High Need Reduced Price Lunches (+2 cents) |  |  |  |  |  |
| 1. Number of Regular Full Price Lunches |  |  |  |  |  |
| 1. Number of High Need Full Price Lunches (+2 cents) |  |  |  |  |  |

**2.8** SY 2010–2011: National School Lunch Program Reimbursable Meals Claimed

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | 1 | 2 | 3 | 4 | 5 |
| Number of Reimbursable Lunches Claimed | **Elementary school** | **Middle or Junior High** | **High School** | **Other school** | **Total** |
| 1. Number of Regular Free Lunches |  |  |  |  |  |
| 1. Number of High Need Free Lunches (+2 cents) |  |  |  |  |  |
| 1. Number of Regular Reduced Price Lunches |  |  |  |  |  |
| 1. Number of High Need Reduced Price Lunches (+2 cents) |  |  |  |  |  |
| 1. Number of Regular Full Price Lunches |  |  |  |  |  |
| 1. Number of High Need Full Price Lunches (+2 cents) |  |  |  |  |  |

**2.9** SY 2009–2010: National School Lunch Program Reimbursable Meals Claimed

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | 1 | 2 | 3 | 4 | 5 |
| Number of Reimbursable Lunches Claimed | **Elementary school** | **Middle or Junior High** | **High School** | **Other school** | **Total** |
| 1. Number of Regular Free Lunches |  |  |  |  |  |
| 1. Number of High Need Free Lunches (+2 cents) |  |  |  |  |  |
| 1. Number of Regular Reduced Price Lunches |  |  |  |  |  |
| 1. Number of High Need Reduced Price Lunches (+2 cents) |  |  |  |  |  |
| 1. Number of Regular Full Price Lunches |  |  |  |  |  |
| 1. Number of High Need Full Price Lunches (+2 cents) |  |  |  |  |  |

**Section 3 Food Service Operations**

**The following questions are about how and where competitive foods are sold for the 2012-2013 school year.**

**3.1** Are competitive foods sold in any of the schools in your district during lunchtime?

|  |
| --- |
| 1Yes |
| 2 No |

**3.2** Where are competitive foods sold?

|  |  |  |
| --- | --- | --- |
|  | **Yes** | **No** |
| 1. Same room as NSLP but separate cashier lines | 1 | 2 |
| 1. Same room as NSLP and separate cashier lines | 1 | 2 |
| 1. Different room from NSLP meals | 1 | 2 |
| 1. In vending machines inside the cafeteria | 1 | 2 |
| 1. In vending machines outside the cafeteria | 1 | 2 |
| 1. School stores | 1 | 2 |
| 1. School snack bars | 1 | 2 |
| 1. Other (SPECIFY) | 1 | 2 |

**3.3** How do students pay for NSLP lunches?

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | **1** | | **2** | |
|  | **Reduced Price Students** | | **Paid Students** | |
|  | **Yes** | **No** | **Yes** | **No** |
| 1. Electronic payment | 1 | 2 | 1 | 2 |
| 1. Cash | 1 | 2 | 1 | 2 |
| 1. Meal tickets | 1 | 2 | 1 | 2 |
| 1. Other (SPECIFY) | 1 | 2 | 1 | 2 |

**3.4** What is typically sold for competitive foods at lunch time?

|  |  |  |
| --- | --- | --- |
|  | **Yes** | **No** |
| 1. Alternative entrees to the NSLP meal | 1 | 2 |
| 1. Snack foods | 1 | 2 |
| 1. Fruit | 1 | 2 |
| 1. Desserts | 1 | 2 |
| 1. Water | 1 | 2 |
| 1. Drinks other than water | 1 | 2 |
| 1. Second helping of the NSLP offering for the day | 1 | 2 |

**3.5** How do students pay for competitive foods?

|  |  |  |  |
| --- | --- | --- | --- |
|  | **All students** | **Some** | **None** |
| 1. Electronic payment | 1 | 2 | 3 |
| 1. Cash | 1 | 2 | 3 |
| 1. Other (SPECIFY) | 1 | 2 | 3 |

**3.6** In your district what percentage of students paying for reduced price or full price breakfast or lunch pay electronically?

|  |
| --- |
| 10% |
| 2 1–25% |
| 3 26–50% |
| 4 51–75% |
| 5 76–100% |

**3.7** Is free drinking water available to students where school meals are served?

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | **1** | **2** | **3** | **4** |
|  | **Elementary school** | **Middle or junior high** | **High school** | **Other school** |
| 1. Yes | 1 | 1 | 1 | 1 |
| 1. No | 2 | 2 | 2 | 2 |
| 1. Don’t know | 8 | 8 | 8 | 8 |

|  |
| --- |
| **IF YES TO ANY OF QUESTION 3.7, GO TO QUESTION 3.8.**  **IF NO TO ALL OF QUESTION 3.7, GO TO QUESTION 3.11.**  **IF DON’T KNOW TO ALL OF QUESTION 3.7, GO TO QUESTION 3.11.** |

**3.8** In your district, which sources of FREE drinking water does your school make available to students during meals within the food service areas (i.e., where food is eaten or served, such as multipurpose room or cafeteria)?

|  |  |  |
| --- | --- | --- |
|  | **Yes** | **No** |
| 1. No free water | 1 | 2 |
| 1. Traditional water fountain(s) | 1 | 2 |
| 1. Commercial cooled water coolers (e.g., Culligan, Alhamgra) | 1 | 2 |
| 1. Insulated containers with cooled tap water (e.g., Igloo, Cambro) | 1 | 2 |
| 1. Pitchers / jugs of room temperature tap water | 1 | 2 |
| 1. Electronic water hydration station(s) | 1 | 2 |
| 1. Bottled water | 1 | 2 |
| 1. Other (SPECIFY) | 1 | 2 |

**3.9** What is the source of tap water available at your school(s)?

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Yes** | **No** | **Don’t Know** |
| 1. Public or municipal source (e.g., community/regional water) | 1 | 2 | 8 |
| 1. Well or spring water | 1 | 2 | 8 |
| 1. Tap water is not available for drinking | 1 | 2 | 8 |

**3.10** How often is the tap water in your district tested for any common contaminants (e.g., arsenic, lead, bacteria, nitrates)? CHECK ONLY ONE

|  |
| --- |
| 1Never |
| 2 Less than once a year |
| 3 Once a year |
| 4 Twice a year |
| 5 More than twice a year |
| 6 Our district does not rely on the school district’s water supply for drinking (e.g., all water consumed is bottled commercial water or is filtered) |
| 8 Don’t know |

**3.11** Does your SFA have any schools operating under Special Assistance Alternatives (Provisions 1, 2, 3 & Community Eligibility Option)?

|  |
| --- |
| 1Yes |
| 2 No (GO TO QUESTION 3.14) |

**3.12** Please record the number of schools operating under the following Special Assistance Alternatives for NSLP and SBP.

|  |  |  |  |
| --- | --- | --- | --- |
| **Special Assistance Alternative** | **NSLP only** | **SBP only** | **Both NSLP and SBP** |
| 1. Provision 1 |  |  |  |
| 1. Provision 2 |  |  |  |
| 1. Provision 3 |  |  |  |
| 1. Community Eligibility Option |  |  |  |

**3.13** How likely is it that schools operating under Provision 1, 2, and 3 would elect the Community Eligibility Option (CEO) when the option becomes available nationwide in School Year 2014-2015?

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | **For few schools** | **For some schools** | **For about half the schools** | **For most schools** | **For all schools** |
| 1. Very Likely | 1 | 2 | 3 | 4 | 5 |
| 1. Likely | 1 | 2 | 3 | 4 | 5 |
| 1. Unlikely | 1 | 2 | 3 | 4 | 5 |
| 1. Very Unlikely | 1 | 2 | 3 | 4 | 5 |
| 1. Don’t know | 8 | 8 | 8 | 8 | 8 |

**3.14** Do any of the schools in your SFA operate a universal free breakfast program?

|  |
| --- |
| 1Yes |
| 2 No (GO TO QUESTION 3.16) |

**3.15** How many schools are operating a universal free breakfast program?

|  |
| --- |
|  |

**3.16** Is there a formalized process in place for a foster care agency to communicate with the Department of Health and Human Services (HHS) and Child Nutrition (CN)?

|  |
| --- |
| 1Yes |
| 2 No |

**3.17** Are you getting the documentation from courts/responsible agencies showing the status of children as foster children?

|  |
| --- |
| 1Yes |
| 2 No |

**3.18** Does your SFA use school food service management companies (FSMCs)?

|  |
| --- |
| 1Yes |
| 2 No |

**Section 4 Local School Wellness Policy**

**The next section asks about your local wellness policy and what actions you have taken to implement the new requirements established in the Healthy, Hunger-Free Kids Act of 2010.**

**4.1** Has the LEA established a local wellness policy for all schools?

|  |
| --- |
| 1Yes |
| 2 No (GO TO QUESTION 4.16) |
| 8 Don’t know (GO TO QUESTION 4.16) |

**4.2** Who is involved in the development of your local wellness policy?

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Yes** | **No** | **Don’t know** |
| 1. Parents | 1 | 2 | 8 |
| 1. Students | 1 | 2 | 8 |
| 1. School Food Authority staff | 1 | 2 | 8 |
| 1. School Board members | 1 | 2 | 8 |
| 1. School administrators | 1 | 2 | 8 |
| 1. Physical education teachers | 1 | 2 | 8 |
| 1. School health professionals | 1 | 2 | 8 |
| 1. Public/local community | 1 | 2 | 8 |
| 1. Other (SPECIFY) | 1 | 2 | 8 |

**4.3** Who is involved in the implementation of your local wellness policy?

|  | **Yes** | **No** | **Don’t know** |
| --- | --- | --- | --- |
| 1. Parents | 1 | 2 | 8 |
| 1. Students | 1 | 2 | 8 |
| 1. School Food Authority staff | 1 | 2 | 8 |
| 1. School Board members | 1 | 2 | 8 |
| 1. School administrators | 1 | 2 | 8 |
| 1. Physical education teachers | 1 | 2 | 8 |
| 1. School health professionals | 1 | 2 | 8 |
| 1. Public/local community | 1 | 2 | 8 |
| 1. Other (SPECIFY) | 1 | 2 | 8 |

**4.4** Who is involved in periodic review and updating of your local wellness policy?

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Yes** | **No** | **Don’t know** |
| 1. Parents | 1 | 2 | 8 |
| 1. Students | 1 | 2 | 8 |
| 1. School Food Authority staff | 1 | 2 | 8 |
| 1. School Board members | 1 | 2 | 8 |
| 1. School administrators | 1 | 2 | 8 |
| 1. Physical education teachers | 1 | 2 | 8 |
| 1. School health professionals | 1 | 2 | 8 |
| 1. Public/local community | 1 | 2 | 8 |
| 1. Other (SPECIFY) | 1 | 2 | 8 |

**4.5** Has your local wellness policy been revised within the last year?

|  |
| --- |
| 1Yes |
| 2 No |
| 8 Don’t know |

**4.6** Which of the following elements does your local wellness policy include?

|  |  |  |
| --- | --- | --- |
|  | **Yes** | **No** |
| 1. Nutrition guidelines for all foods available on school campus | 1 | 2 |
| 1. Goals for nutrition promotion | 1 | 2 |
| 1. Goals for nutrition education | 1 | 2 |
| 1. Goals for physical activity | 1 | 2 |
| 1. Goals for other school-based activities to promote school wellness | 1 | 2 |

**4.7** Does your local wellness policy address which USDA foods can be ordered?

|  |
| --- |
| 1Yes |
| 2 No (GO TO QUESTION 4.8) |

**4.7.1** If yes, which USDA Foods can be requested?

|  |
| --- |
|  |
|  |
|  |
|  |

**4.8** Have you conducted an assessment of your local wellness policy within the last year?

|  |
| --- |
| 1Yes |
| 2 No (GO TO QUESTION 4.10) |
| 8 Don’t know (GO TO QUESTION 4.10) |

**4.9** Did this assessment include any of the following:

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Yes** | **No** | **Don’t know** |
| 1. The extent to which schools are in compliance | 1 | 2 | 8 |
| 1. The progress made in attaining the goals of the local wellness policy? | 1 | 2 | 8 |
| 1. Other (SPECIFY) | 1 | 2 | 8 |

**4.10** Who is designated in your district to ensure that each school complies with the local wellness policy?

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Yes** | **No** | **Don’t know** |
| 1. School Food Authority staff | 1 | 2 | 8 |
| 1. School Board members | 1 | 2 | 8 |
| 1. School administrators | 1 | 2 | 8 |
| 1. Physical education teachers | 1 | 2 | 8 |
| 1. School health professionals | 1 | 2 | 8 |
| 1. Other (SPECIFY) | 1 | 2 | 8 |

**4.11** Does the LEA inform the public about the content and implementation of the local wellness policy?

|  |
| --- |
| 1Yes |
| 2 No (GO TO QUESTION 4.13) |
| 8 Don’t know (GO TO QUESTION 4.13) |

**4.12** How is this information about content and implementation provided to the public?

|  |  |  |
| --- | --- | --- |
|  | **Yes** | **No** |
| 1. Included in the information package provided at the beginning of school | 1 | 2 |
| 1. Available on the LEA website | 1 | 2 |
| 1. Local paper article/local media | 1 | 2 |
| 1. Periodic newsletters | 1 | 2 |
| 1. Other (SPECIFY) | 1 | 2 |

**4.13** Does the LEA inform the public whether each school is complying with the local wellness policy?

|  |
| --- |
| 1Yes |
| 2 No (GO TO QUESTION 4.15) |
| 8 Don’t know (GO TO QUESTION 4.15) |

**4.14** How is this information about compliance provided to the public?

|  |  |  |
| --- | --- | --- |
|  | **Yes** | **No** |
| 1. Included in the information package provided at the beginning of school | 1 | 2 |
| 1. Available on the LEA website | 1 | 2 |
| 1. Local paper article/local media | 1 | 2 |
| 1. Periodic newsletters | 1 | 2 |
| 1. Other (SPECIFY) | 1 | 2 |

**4.15** Have any individual schools implemented stricter local school wellness policies than Federal, state, or district-level rules or regulations?

|  |
| --- |
| 1Yes |
| 2 No |
| 8 Don’t know |

**4.16** Have you used any materials in the USDA Foods Toolkit to promote nutritious school meals to parents and administrators?

|  |
| --- |
| 1Yes |
| 2 No (GO TO SECTION 5) |
| 8 Don’t know (GO TO SECTION 5) |

**4.17** How do schools make information about food safety inspections available to the public?

|  |  |  |
| --- | --- | --- |
|  | **Yes** | **No** |
| 1. Included in an information package to each student | 1 | 2 |
| 1. Available on the LEA website | 1 | 2 |
| 1. Local paper article/local media | 1 | 2 |
| 1. Periodic newsletters | 1 | 2 |
| 1. Other (SPECIFY) | 1 | 2 |

**Section 5 New Meal Pattern Requirements**

**This section asks about steps that your school district is taking to meet the new meal patterns.**

**GENERAL IMPLEMENTATION**

**5.1** How challenging was each of the following when you initially implemented the meal patterns?

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | **Not a Challenge** | **Minor Challenge** | **Moderately Challenging** | **Very Challenging** | **Extremely Challenging** | **Don’t Know** |
| 1. Availability of products that meet standards | 1 | 2 | 3 | 4 | 5 | 8 |
| 1. Staff training | 1 | 2 | 3 | 4 | 5 | 8 |
| 1. New storage and equipment needs | 1 | 2 | 3 | 4 | 5 | 8 |
| 1. Increased food costs | 1 | 2 | 3 | 4 | 5 | 8 |
| 1. Student acceptance | 1 | 2 | 3 | 4 | 5 | 8 |
| 1. Parent/Community acceptance | 1 | 2 | 3 | 4 | 5 | 8 |

**5.2** As you continued to implement the meal patterns, how challenging is each of the following situations?

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  | **Not a Challenge** | **Minor Challenge** | **Moderately Challenging** | **Very Challenging** | **Extremely Challenging** | **Not Applicable** | **Don’t Know** |
| 1. Availability of products that meet standards | 1 | 2 | 3 | 4 | 5 | 6 | 8 |
| 1. Maintaining student participation | 1 | 2 | 3 | 4 | 5 | 6 | 8 |
| 1. Separating portions for age-grade groups | 1 | 2 | 3 | 4 | 5 | 6 | 8 |
| 1. Increased food costs | 1 | 2 | 3 | 4 | 5 | 6 | 8 |
| 1. Student acceptance | 1 | 2 | 3 | 4 | 5 | 6 | 8 |
| 1. Parent/ Community acceptance | 1 | 2 | 3 | 4 | 5 | 6 | 8 |

**5.3** In comparison to how students were before the implementation of the new meal pattern requirements, have you noticed any changes in the amount of food students throw away (do not eat) at lunchtime?

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | **Students Waste More** | **Students Waste less** | **No Change** | **Don’t Know** |
| 1. Fluid Milk | 1 | 2 | 3 | 8 |
| 1. Main Dish/Entree | 1 | 2 | 3 | 8 |
| 1. Bread/Bread Alternate | 1 | 2 | 3 | 8 |
| 1. Salad/Raw Vegetables | 1 | 2 | 3 | 8 |
| 1. Cooked Vegetables | 1 | 2 | 3 | 8 |
| 1. Fruit | 1 | 2 | 3 | 8 |
| 1. Desserts | 1 | 2 | 3 | 8 |
| 1. Other (SPECIFY) | 1 | 2 | 3 | 8 |

**5.4** If you have observed a change in plate waste, is this due to:

|  |  |  |
| --- | --- | --- |
|  | **Yes** | **No** |
| 1. The amount of time available to eat | 1 | 2 |
| 1. The type of food served | 1 | 2 |
| 1. The amount of food served | 1 | 2 |
| 1. Other (SPECIFY) | 1 | 2 |

**5.5** Prior to the new meal patterns did your SFA do scratch cooking?

|  |
| --- |
| 1Yes |
| 2 No (GO TO QUESTION 5.7) |

**5.6** Have you increased your scratch cooking due to the new meal patterns?

|  |
| --- |
| 1Yes (GO TO QUESTION 5.8) |
| 2 No (GO TO QUESTION 5.8) |

**5.7** Have you started to use scratch cooking due to the new meal patterns?

|  |
| --- |
| 1Yes |
| 2 No |

**BREAKFAST**

**5.8** Have you implemented the new breakfast requirements?

|  |
| --- |
| 1Yes |
| 2 No (GO TO QUESTION 5.10) |

**5.9** For each of the following breakfast nutrition standards, please indicate if you were able to meet the requirements easily (i.e., not a challenge), if you experienced difficulties in meeting the minimum requirements, or if you experienced difficulties not exceeding the maximum requirements.

|  |  |  |  |
| --- | --- | --- | --- |
| **Nutritional Standards for:** | **Not a Challenge** | **Difficulty meeting the minimum requirements** | **Difficulty not exceeding the maximum requirements** |
| 1. Fruits | 1 | 2 | 3 |
| 1. Grains and whole grains | 1 | 2 | 3 |
| 1. Fluid milk | 1 | 2 | 3 |
| 1. Daily calories | 1 | 2 | 3 |
| 1. Daily sodium | 1 | 2 | 3 |
| 1. Daily trans-fat amount | 1 | 2 | 3 |
| 1. Daily saturated fat amount | 1 | 2 | 3 |

|  |
| --- |
| **GO TO QUESTION 5.11** |

**5.10** For each of the following breakfast nutrition standards, **what challenges do you foresee** in implementing the breakfast requirements? Would you be able to meet the requirements easily (i.e., not a challenge), or would you experience difficulties in meeting the minimum requirements, or experience difficulties not exceeding the maximum requirements.

|  |  |  |  |
| --- | --- | --- | --- |
| **Nutritional Standards for:** | **Not a Challenge** | **Difficulty meeting the minimum requirements** | **Difficulty not exceeding the maximum requirements** |
| 1. Fruits | 1 | 2 | 3 |
| 1. Grains and whole grains | 1 | 2 | 3 |
| 1. Fluid milk | 1 | 2 | 3 |
| 1. Daily calories | 1 | 2 | 3 |
| 1. Daily sodium | 1 | 2 | 3 |
| 1. Daily trans-fat amount | 1 | 2 | 3 |
| 1. Daily saturated fat amount | 1 | 2 | 3 |

**The next few questions ask about fruit, vegetables, grains and whole grains, and meats/meat alternates.**

**FRUIT**

**5.11** Have you used either USDA Foods or DoD Fresh for any additional fruit purchases?

|  |
| --- |
| 1Yes |
| 2 No (GO TO QUESTION 5.13) |

**5.12** Which program did you use to purchase additional fruit?

|  |
| --- |
| 1 USDA Foods only |
| 2 DoD Fresh only |
| 3 Both USDA Foods and DoD Fresh |

**5.13** Since implementing the new meal patterns, how has the frequency in which you used each type of fruit product changed in order to meet the additional fruit requirements?

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Less often** | **Same** | **More often** |
| 1. Fresh whole | 1 | 2 | 3 |
| 1. Fresh pre cut | 1 | 2 | 3 |
| 1. Frozen whole | 1 | 2 | 3 |
| 1. Frozen pre cut | 1 | 2 | 3 |
| 1. Canned with water | 1 | 2 | 3 |
| 1. Canned with juice | 1 | 2 | 3 |
| 1. Canned with light syrup | 1 | 2 | 3 |

**VEGETABLES**

**5.14** Have you used either USDA Foods or DoD Fresh for any additional vegetable purchases?

|  |
| --- |
| 1Yes |
| 2 No (GO TO QUESTION 5.16) |

**5.15** Which program did you use to purchase additional vegetables?

|  |
| --- |
| 1 USDA Foods only |
| 2 DoD Fresh only |
| 3 Both USDA Foods and DoD Fresh |

**5.16** Since implementing the new meal patterns, how has the frequency in which you used each type of vegetable product changed in order to meet the additional vegetable requirements?

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Less often** | **Same** | **More often** |
| 1. Fresh whole | 1 | 2 | 3 |
| 1. Fresh pre cut | 1 | 2 | 3 |
| 1. Frozen whole | 1 | 2 | 3 |
| 1. Frozen pre cut | 1 | 2 | 3 |
| 1. Canned reduced sodium | 1 | 2 | 3 |
| 1. Canned regular sodium | 1 | 2 | 3 |

**5.17** Which of the following vegetable subgroups has been easy or difficult to work into menus?

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Easy** | **Difficult** | **Don’t Know** |
| 1. Dark Green | 1 | 2 | 8 |
| 1. Red/Orange | 1 | 2 | 8 |
| 1. Beans/Peas | 1 | 2 | 8 |
| 1. Starchy | 1 | 2 | 8 |
| 1. Other (SPECIFY) | 1 | 2 | 8 |

**GRAINS**

**5.18** Since implementing the new meal patterns, for each grade-level, how often did you serve the following grain quantities?

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Grain Quantities** | **Daily** | **3-4 times per week** | **1-2 times per week** | **Never** | **N/A – Do not serve this grade-level group** |
| 1. Grades K-5: Serve items greater than 1 oz. eq. min. daily | 1 | 2 | 3 | 4 | 5 |
| 1. Grades 6-8: Serve items greater than 1 oz. eq. min. daily | 1 | 2 | 3 | 4 | 5 |
| 1. Grades 9-12: Serve items greater than 2 oz. eq. min. daily | 1 | 2 | 3 | 4 | 5 |

**5.19** Since implementing the new meal patterns, please indicate if you were able to meet the grain requirements easily (i.e., not a challenge), or if you experienced difficulties in meeting the minimum requirements, or if you experienced difficulties not exceeding the maximum requirements for each grade-level group.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Grade Level** | **Not a challenge** | **Difficulty meeting the minimum requirements** | **Difficulty not exceeding the maximum requirements** | **N/A – Do not serve this grade-level group** |
| 1. Grades K-5 | 1 | 2 | 3 | 4 |
| 1. Grades 6-8 | 1 | 2 | 3 | 4 |
| 1. Grades 9-12 | 1 | 2 | 3 | 4 |

**WHOLE GRAINS**

**5.20** Since implementing the new meal patterns, for each grade-level, how often did you serve the following whole grain quantities?

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Grain Quantities** | **Daily** | **3-4 times per week** | **1-2 times per week** | **Never** | **N/A – Do not serve this grade-level group** |
| 1. Grades K-5: Serve items greater than 1 oz. eq. min. daily | 1 | 2 | 3 | 4 | 5 |
| 1. Grades 6-8: Serve items greater than 1 oz. eq. min. daily | 1 | 2 | 3 | 4 | 5 |
| 1. Grades 9-12: Serve items greater than 2 oz. eq. min. daily | 1 | 2 | 3 | 4 | 5 |

**5.21** Since implementing the new meal patterns, please indicate if you were able to meet the 50 percent whole grain requirements easily (i.e., not a challenge), or if you experienced difficulties in meeting the requirements, for each grade-level group.

|  |  |  |  |
| --- | --- | --- | --- |
| **Grade Level** | **Not a challenge** | **Difficulty meeting the 50% requirements** | **N/A – Do not serve this grade-level group** |
| 1. Grades K-5 | 1 | 2 | 3 |
| 1. Grades 6-8 | 1 | 2 | 3 |
| 1. Grades 9-12 | 1 | 2 | 3 |

**MEATS/MEAT ALTERNATES**

**5.22** Since implementing the new meal patterns, was it difficult to find smaller sized portions (fewer ounces) of meats/meat alternates?

|  |
| --- |
| 1Yes |
| 2 No |

**5.23** Since implementing the new meal patterns, please indicate if you were able to meet the meat/meat alternates requirements easily (i.e., not a challenge), or if you experienced difficulties in meeting the minimum requirements, or if you experienced difficulties not exceeding the maximum requirements for each grade-level group.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Grade Level** | **Not a challenge** | **Difficulty meeting the minimum requirements** | **Difficulty not exceeding the maximum requirements** | **N/A – Do not serve this grade-level group** |
| 1. Grades K-5 | 1 | 2 | 3 | 4 |
| 1. Grades 6-8 | 1 | 2 | 3 | 4 |
| 1. Grades 9-12 | 1 | 2 | 3 | 4 |

**5.24** What did you use **most often** on your lower meat days?

|  |
| --- |
| 1 Nut butter |
| 2 Cheese |
| 3 Yogurt |
| 4 Mixed meat dish |
| 5 Other  (SPECIFY) |

**The next few questions ask about nutrient requirements, purchasing changes, implementation assistance and promotion, the certification process, and student perception of meal patterns.**

**NUTRIENT REQUIREMENTS**

**5.25** What is the biggest challenge for each grade-level group in meeting the calorie requirements?

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Grade Level** | **Not a challenge** | **Meeting the minimum requirements** | **Not exceeding the maximum requirements** | **N/A – Do not serve this grade-level group** |
| 1. Grades K-5 | 1 | 2 | 3 | 4 |
| 1. Grades 6-8 | 1 | 2 | 3 | 4 |
| 1. Grades 9-12 | 1 | 2 | 3 | 4 |

**5.26** Do you review labels for trans-fat?

|  |
| --- |
| 1Yes |
| 2 No |

**5.27** Have you changed the way you review labels on products you buy to meet the meal pattern requirements?

|  |
| --- |
| 1Yes |
| 2 No |

**5.28** How have you changed the way you review labels on products you buy to meet the meal pattern requirements?

|  |
| --- |
|  |
|  |
|  |
|  |

**5.29** Which of the following items needed to be changed to meet the trans-fat requirements?

|  |  |  |
| --- | --- | --- |
| **Food items** | **Yes** | **No** |
| 1. Cookies, pastries, crackers, cakes, muffins, pie crusts, pizza dough, breads (e.g., hamburger buns) | 1 | 2 |
| 1. Hard margarine (e.g., stick margarine) and vegetable shortening | 1 | 2 |
| 1. Pre-mixed products (e.g., cake mix, pancake mix, and chocolate drink mix) | 1 | 2 |
| 1. Fried foods (e.g., doughnuts, French fries, fried chicken including chicken nuggets, and hard taco shells) | 1 | 2 |
| 1. Snack foods (e.g., potato, corn, and tortilla chips; candy; packaged or microwave popcorn) | 1 | 2 |

**5.30** How challenging has it been in meeting the saturated fat requirements

|  |
| --- |
| 1 Extremely challenging |
| 2 Very challenging |
| 3 Moderately challenging |
| 4 Minor challenge |
| 5 Not a challenge |
| 8 Don’t know |

**5.31** Do you currently know the sodium levels of your meals?

|  |
| --- |
| 1Yes |
| 2 No (GO TO QUESTION 5.33) |

**5.32** What is your current average daily sodium content for breakfast and lunch for the 2012-2013 school year?

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | **Sodium Content Amounts** | | | |
| **Grade Level** | **Breakfast** | | **Lunch** | |
| 1. Grades K-5 | **mg** | **N/A** | **mg**  **mg**  **mg** | **N/A** |
| 1. Grades 6-8 | **mg** | **N/A** |  | **N/A** |
| 1. Grades 9-12 | **mg** | **N/A** |  | **N/A** |

**5.33** What practices do you anticipate implementing in order to reduce your sodium levels?

|  |
| --- |
| 1 Limit condiment use |
| 2 Alter recipes |
| 3 Purchase lower sodium products |
| 4 Other (SPECIFY) |
| 8 Don’t know |

**5.34** Do you have schools where grades 6-8 and 9-12 are served in the same cafeteria **at the same time**?

|  |
| --- |
| 1Yes |
| 2 No (GO TO QUESTION 5.37) |

**5.35** Which of the following strategies do you use to ensure that the correct meals and portion sizes are served to each grade-level group?

|  |  |  |
| --- | --- | --- |
| **Strategies** | **Yes** | **No** |
| 1. Use separate trays or a label to designate student’s grade-level | 1 | 2 |
| 1. Separate the lines for the different grade-levels | 1 | 2 |
| 1. Change the line schedule for each grade-level | 1 | 2 |
| 1. Other (SPECIFY) | 1 | 2 |

**5.36** Have servers been trained on portion control by grade-level?

|  |
| --- |
| 1Yes |
| 2 No |

**5.37** What type of adjustments, if any, have you made for groups of students to meet their needs/wants for additional foods? Check the box for each grade level that made the adjustment.

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Grade Level** | **Increased fruits and vegetables** | **Offered second milk** | **Offered second meal** | **Increased a la carte offerings** | **Other Federal Nutrition programs** | **Other** |
| 1. Grades K-5 | 1 | 2 | 3 | 4 | 5 | 6 |
| 1. Grades 6-8 | 1 | 2 | 3 | 4 | 5 | 6 |
| 1. Grades 9-12 | 1 | 2 | 3 | 4 | 5 | 6 |

|  |
| --- |
| **GO TO QUESTION 5.39 IF OTHER FEDERAL NUTRITION PROGRAMS IS NOT CHECKED IN QUESTION 5.37** |

**5.38** Describe other Federal Nutrition programs and/or other adjustments made to meet the needs/wants of students for additional food:

|  |
| --- |
|  |
|  |
|  |
|  |

**5.39** What types of funding sources do you use to meet the needs/wants of students for additional foods?

|  |
| --- |
|  |
|  |
|  |
|  |

**PURCHASING CHANGES**

**5.40** Are material changes in purchasing from food distributors required due to the new meal patterns?

Material changes are changes that are substantial enough that had other bidders been aware of the change during the bidding process they might have bid differently. If the amendment creates a material change, the SFA must either conduct a separate procurement to obtain the deliverable or conduct a new solicitation for a FSMC that includes the deliverable.

|  |
| --- |
| 1Yes |
| 2 No (GO TO QUESTION 5.42) |

**5.41** To what extent were material changes in purchasing required? (CHECK ONLY ONE)

|  |
| --- |
| 1 All of our purchases required a material change |
| 2 More than half of our purchases required a material change |
| 3 About half of our purchases required a material change |
| 4 Less than half of our purchases required a material change |

**5.42** Which of the following **meal pattern required products** have you had difficulty purchasing?

|  |  |  |
| --- | --- | --- |
|  | **Yes** | **No** |
| 1. Fruits | 1 | 2 |
| 1. Vegetables |  |  |
| 1. Dark Green | 1 | 2 |
| 1. Red/Orange | 1 | 2 |
| 1. Beans/Peas | 1 | 2 |
| 1. Starchy | 1 | 2 |
| 1. Other | 1 | 2 |
| 1. Grains |  |  |
| 1. Grains | 1 | 2 |
| 1. Whole Grains | 1 | 2 |
| 1. Meats/Meat Alternates | 1 | 2 |
| 1. Fluid Milk | 1 | 2 |

**5.43** Have the types and amounts of USDA Foods you are ordering changed to meet updated nutrition standards and meal patterns?

|  |
| --- |
| 1Yes |
| 2 No |

**IMPLEMENTATION ASSISTANCE AND PROMOTION**

**5.44** Has your District used the USDA sharing website to assist with menu changes?

|  |
| --- |
| 1Yes |
| 2 No |
| 8 Don’t Know |

* 1. What methods do you use to promote the new school meals to students and their families?

|  |  |  |
| --- | --- | --- |
| **Promotion Method** | **Yes** | **No** |
| 1. Distribute materials from the School Nutrition Association (SNA) | 1 | 2 |
| 1. Offer nutrition education initiatives (classroom and/or cafeteria based) | 1 | 2 |
| 1. Offer taste testings/samples of new items | 1 | 2 |
| 1. Partners with chefs | 1 | 2 |
| 1. Offer Farm to School programs | 1 | 2 |
| 1. Have school gardens | 1 | 2 |
| 1. Have recipe contests | 1 | 2 |
| 1. Air public service announcements | 1 | 2 |
| 1. Use local school media | 1 | 2 |
| 1. Use other promotion method (SPECIFY) | 1 | 2 |

* 1. Have you used the following technical assistance resources to assist you in meeting the new meal patterns?

|  |  |  |
| --- | --- | --- |
| **Technical Assistance Resources** | **Yes** | **No** |
| 1. State agency training | 1 | 2 |
| 1. Nutrient analysis software | 1 | 2 |
| 1. Simplified nutrient assessment | 1 | 2 |
| 1. Web information | 1 | 2 |
| 1. Other (SPECIFY) | 1 | 2 |

**CERTIFICATION PROCESS**

* 1. Have you submitted certification materials for the additional 6 cents per lunch reimbursement?

|  |
| --- |
| 1Yes |
| 2 No (GO TO QUESTION 5.51) |

* 1. Have you been certified to receive the additional reimbursement of 6 cents per lunch?

|  |
| --- |
| 1Yes |
| 2 No (GO TO QUESTION 5.51) |

* 1. Are you currently receiving the additional 6 cents per lunch reimbursement?

|  |
| --- |
| 1Yes |
| 2 No (GO TO QUESTION 5.51) |

**5.50** Under which option did you submit your certification documentation?

|  |
| --- |
| 1 Option 1 Detailed menu worksheet and nutrient analysis |
| 2 Option 2 Detailed menu worksheet and simplified nutrient assessment |
| 3 Option 3 On-site State agency certification |

**STUDENT PERCEPTION OF MEAL PATTERNS**

* 1. In your opinion, are students eating more fruits and vegetables this year compared to last year?

|  |
| --- |
| 1Yes |
| 2 No |

* 1. In general, how accepting are students of the new meal patterns?

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Grade Level** | **Very Accepting** | **Somewhat Accepting** | **Not Accepting** | **N/A – Do not serve this grade-level group** |
| 1. Grades K-5 | 1 | 2 | 3 | 4 |
| 1. Grades 6-8 | 1 | 2 | 3 | 4 |
| 1. Grades 9-12 | 1 | 2 | 3 | 4 |

* 1. In general, how accepting are parents and the community of the new meal patterns?

|  |  |  |  |
| --- | --- | --- | --- |
| **Other Groups** | **Very Accepting** | **Somewhat Accepting** | **Not Accepting** |
| 1. Parents | 1 | 2 | 3 |
| 1. The Community | 1 | 2 | 3 |

**5.54** In your opinion, which vegetable subgroup is **least liked** by students? (CHECK ONLY ONE)

|  |
| --- |
| 1 Dark Green |
| 2 Red/Orange |
| 3 Beans/Peas (legumes) |
| 4 Starchy |
| 5 Other  (SPECIFY) |

* 1. Do you have an off campus lunch policy for high schools?

|  |
| --- |
| 1Yes |
| 2 No (GO TO SECTION 6) |

**5.56** Since implementing the new meal patterns, what changes have you seen in students going off campus for lunch? (CHECK ONLY ONE)

|  |
| --- |
| 1 More students have stayed on campus for lunch |
| 2 More students have gone off campus for lunch |
| 3 There was no change in the number of students going off campus for lunch |

**Section 6 Meal Prices**

**The next question is about the meal prices for the current School Year (2012-2013). For this section, please record your responses separately for Elementary (i.e., schools composed of any span of grades from Kindergarten through 6th grade); Middle or Junior High (i.e., schools that have no grade lower than 6 and no grade higher than 9); or High School (i.e., schools that have no grade lower than 9 and continue through 12th grade). If any school does not meet the Elementary, Middle or Junior High, or High School definition, please include them in the “Other school” column.**

**6.1** What prices did you charge for reimbursable full price, reduced price, and adult breakfasts in your school district by school level at the beginning of the 2012-2013 school year?

|  |
| --- |
| * **DO NOT HAVE A BREAKFAST PROGRAM (GO TO QUESTION 6.6)** |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Breakfast Prices** | **1. Elementary school** | **2. Middle or Junior High** | **3. High school** | **4. Other school** |
| 1. Full price breakfast | **$**  **$**  **$** | **$**  **$**  **$** | **$**  **$**  **$** | **$**  **$**  **$** |
| 1. Reduced price breakfast |  |  |  |  |
| 1. Adult breakfast |  |  |  |  |
| 1. Not applicable, do not have this type of school | 1 | 2 | 3 | 4 |
| 1. Do not serve breakfast at this type of school | 1 | 2 | 3 | 4 |

|  |
| --- |
| **IF SFA IS NEW TO THE STUDY, GO TO QUESTION 6.2. IF SFA PARTICIPATED IN THE STUDY DURING SY 2011-2012, GO TO QUESTION 6.5** |

|  |
| --- |
| **QUESTIONS 6.2, 6.3 AND 6.4 ARE ONLY FOR THE SFAs THAT HAVE BEEN ADDED AS PART OF THE NEW SAMPLE. SFAs THAT PARTICIPATED IN THE STUDY DURING SY 2011-2012 SHOULD GO TO QUESTION 6.5** |

**The next few questions are about the meal prices for the past three school years (2011-2012, 2010-2011, and 2009-2010) and how the prices have changed during the past three years. For this section, please record your responses separately for Elementary (i.e., schools composed of any span of grades from Kindergarten through 6th grade); Middle or Junior High (i.e., schools that have no grade lower than 6 and no grade higher than 9); or High School (i.e., schools that have no grade lower than 9 and continue through 12th grade). If any school does not meet the Elementary, Middle or Junior High, or High School definition, please include them in the “Other school” column.**

**6.2** What prices did you charge for reimbursable full price, reduced price, and adult **breakfasts** in your school district by school level at the beginning of the **2011-2012** school year?

|  |
| --- |
| **IF BREAKFAST PRICES FOR SY 2011-2012 ARE THE SAME AS 2012-2013 SCHOOL YEAR, CHECK HERE**  **AND GO TO QUESTION 6.3**  **IF YOU DID NOT HAVE A BREAKFAST PROGRAM IN 2011-2012 CHECK HERE**  **AND GO TO QUESTION 6.3** |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Breakfast Prices** | **1. Elementary school** | **2. Middle or Junior High** | **3. High school** | **4. Other school** |
| 1. Full price breakfast | **$**  **$**  **$** | **$**  **$**  **$** | **$**  **$**  **$** | **$**  **$**  **$** |
| 1. Reduced price breakfast |  |  |  |  |
| 1. Adult breakfast |  |  |  |  |
| 1. Not applicable, do not have this type of school | 1 | 2 | 3 | 4 |
| 1. Do not serve breakfast at this type of school | 1 | 2 | 3 | 4 |

**6.3** What prices did you charge for reimbursable full price, reduced price, and adult **breakfasts** at the beginning of the **2010-2011** school year?

|  |
| --- |
| **IF BREAKFAST PRICES FOR SY 2010-2011 ARE THE SAME AS 2011-2012 SCHOOL YEAR, CHECK HERE**  **AND GO TO QUESTION 6.4**  **IF YOU DID NOT HAVE A BREAKFAST PROGRAM IN 2010-2011 CHECK HERE**  **AND GO TO QUESTION 6.4** |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Breakfast Prices** | **1. Elementary school** | **2. Middle or Junior High** | **3. High school** | **4. Other school** |
| 1. Full price breakfast | **$**  **$**  **$** | **$**  **$**  **$** | **$**  **$**  **$** | **$**  **$**  **$** |
| 1. Reduced price breakfast |  |  |  |  |
| 1. Adult breakfast |  |  |  |  |
| 1. Not applicable, do not have this type of school | 1 | 2 | 3 | 4 |
| 1. Do not serve breakfast at this type of school | 1 | 2 | 3 | 4 |

**6.4** What prices did you charge for reimbursable full price, reduced price, and adult **breakfasts** at the beginning of the **2009-2010** school year?

|  |
| --- |
| **IF BREAKFAST PRICES FOR SY 2009-2010 ARE THE SAME AS 2010-2011 SCHOOL YEAR, CHECK HERE**  **AND GO TO QUESTION 6.5**  **IF YOU DID NOT HAVE A BREAKFAST PROGRAM IN 2009-2010 CHECK HERE**  **AND GO TO QUESTION 6.5** |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Breakfast Prices** | **1. Elementary school** | **2. Middle or Junior High** | **3. High school** | **4. Other school** |
| 1. Full price breakfast | **$**  **$**  **$** | **$**  **$**  **$** | **$**  **$**  **$** | **$**  **$**  **$** |
| 1. Reduced price breakfast |  |  |  |  |
| 1. Adult breakfast |  |  |  |  |
| 1. Not applicable, do not have this type of school | 1 | 2 | 3 | 4 |
| 1. Do not serve breakfast at this type of school | 1 | 2 | 3 | 4 |

**6.5** Over the past 3 years, in general, did any of the following factors influence the school breakfast prices?

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Yes** | **No** | **Don’t Know** |
| 1. Food costs | 1 | 2 | 8 |
| 1. Labor costs | 1 | 2 | 8 |
| 1. Student participation rates | 1 | 2 | 8 |
| 1. State revenues (increases for decreases) | 1 | 2 | 8 |
| 1. Federal subsidies (increases or decreases) | 1 | 2 | 8 |
| 1. Local subsidies (increases or decreases) | 1 | 2 | 8 |
| 1. Profits from a la carte items | 1 | 2 | 8 |
| 1. Unpaid school meals | 1 | 2 | 8 |
| 1. SFA budget deficit | 1 | 2 | 8 |
| 1. Administrative indirect costs | 1 | 2 | 8 |
| 1. Other reason (SPECIFY) | 1 | 2 | 8 |

**The next question is about the meal prices for the current School Year (2012-2013). For this section, please record your responses separately for Elementary (i.e., schools composed of any span of grades from Kindergarten through 6th grade); Middle or Junior High (i.e., schools that have no grade lower than 6 and no grade higher than 9); or High School (i.e., schools that have no grade lower than 9 and continue through 12th grade). If any school does not meet the Elementary, Middle or Junior High, or High School definition, please include them in the “Other school” column.**

**6.6** What prices did you charge for reimbursable full price, reduced price, and adult **lunches** in your school district by school level at the beginning of the **2012-2013** school year?

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Lunch Prices** | **1. Elementary school** | **2. Middle or Junior High** | **3. High school** | **4. Other school** |
| 1. Full price lunch | **$**  **$**  **$** | **$**  **$**  **$** | **$**  **$**  **$** | **$**  **$**  **$** |
| 1. Reduced price lunch |  |  |  |  |
| 1. Adult lunch |  |  |  |  |
| 1. Not applicable, do not have this type of school | 1 | 2 | 3 | 4 |

|  |
| --- |
| **IF SFA IS NEW TO THE STUDY, GO TO QUESTION 6.7. IF SFA PARTICIPATED IN THE STUDY DURING SY 2011-2012, GO TO QUESTION 6.10** |

|  |
| --- |
| **QUESTIONS 6.7, 6.8 AND 6.9 ARE ONLY FOR THE SFAs THAT HAVE BEEN ADDED AS PART OF THE NEW SAMPLE.** |

**6.7** What prices did you charge for reimbursable full price, reduced price, and adult **lunches** in your school district by school level at the beginning of the **2011-2012** school year?

|  |
| --- |
| **IF LUNCH PRICES FOR SY 2011-2012 ARE THE SAME AS 2012-2013 SCHOOL YEAR, CHECK HERE**  **AND GO TO QUESTION 6.8** |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Lunch Prices** | **1. Elementary school** | **2. Middle or Junior High** | **3. High school** | **4. Other school** |
| 1. Full price lunch | **$**  **$**  **$** | **$**  **$**  **$** | **$**  **$**  **$** | **$**  **$**  **$** |
| 1. Reduced price lunch |  |  |  |  |
| 1. Adult lunch |  |  |  |  |
| 1. Not applicable, do not have this type of school | 1 | 2 | 3 | 4 |

**6.8** What prices did you charge for reimbursable full price, reduced price, and adult **lunches** at the beginning of the **2010-2011** school year?

|  |
| --- |
| **IF LUNCH PRICES FOR SY 2010-2011 ARE THE SAME AS 2011-2012 SCHOOL YEAR, CHECK HERE**  **AND GO TO QUESTION 6.9** |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Lunch Prices** | **1. Elementary school** | **2. Middle or Junior High** | **3. High school** | **4. Other school** |
| 1. Full price lunch | **$**  **$**  **$** | **$**  **$**  **$** | **$**  **$**  **$** | **$**  **$**  **$** |
| 1. Reduced price lunch |  |  |  |  |
| 1. Adult lunch |  |  |  |  |
| 1. Not applicable, do not have this type of school | 1 | 2 | 3 | 4 |

**6.9** What prices did you charge for reimbursable full price, reduced price, and adult **lunches** at the beginning of the **2009-2010** school year?

|  |
| --- |
| **IF LUNCHES PRICES FOR SY 2009-2010 ARE THE SAME AS 2010-2011 SCHOOL YEAR, CHECK HERE**  **AND GO TO QUESTION 6.10** |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Lunch Prices** | **1. Elementary school** | **2. Middle or Junior High** | **3. High school** | **4. Other school** |
| 1. Full price lunch | **$**  **$**  **$** | **$**  **$**  **$** | **$**  **$**  **$** | **$**  **$**  **$** |
| 1. Reduced price lunch |  |  |  |  |
| 1. Adult lunch |  |  |  |  |
| 1. Not applicable, do not have this type of school | 1 | 2 | 3 | 4 |

**6.10** Over the past 3 years, in general, did any of the following factors influence the National School Lunch Prices?

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Yes** | **No** | **Don’t Know** |
| 1. Food costs | 1 | 2 | 8 |
| 1. Labor costs | 1 | 2 | 8 |
| 1. Student participation rates | 1 | 2 | 8 |
| 1. State revenues (increases or decreases) | 1 | 2 | 8 |
| 1. Federal subsidies (increases or decreases) | 1 | 2 | 8 |
| 1. Local subsidies (increases or decreases) | 1 | 2 | 8 |
| 1. Profits from a la carte items | 1 | 2 | 8 |
| 1. Unpaid school meals | 1 | 2 | 8 |
| 1. SFA budget deficit | 1 | 2 | 8 |
| 1. Administrative indirect costs | 1 | 2 | 8 |
| 1. Paid lunch equity requirement | 1 | 2 | 8 |
| 1. Other reason (SPECIFY) | 1 | 2 | 8 |

**6.11** What did you do in response to the paid lunch equity provision in the Healthy, Hunger-Free Kids Act of 2010? (CHECK ONLY ONE)

|  |
| --- |
| 1 Increased paid lunch prices in all schools |
| 2 Increased paid lunch prices in some schools |
| 3 Paid lunch pricing already complied with new provision (GO TO QUESTION 6.15) |
| 5 Other (SPECIFY) |

**6.12** Did you use non-Federal funds to offset the potential price increases in paid lunches?

|  |
| --- |
| 1Yes |
| 2 No (GO TO QUESTION 6.14) |

**6.13** What non-Federal revenue sources were used to mitigate potential price increases in paid lunches?

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Yes** | **No** | **N/A** |
| 1. Per-lunch reimbursements for paid lunches provided by the State | 1 | 2 | 3 |
| 1. Per-lunch reimbursements for paid lunches provided by local sources | 1 | 2 | 3 |
| 1. Funds provided by organizations, such as school-related or community groups to support paid lunches | 1 | 2 | 3 |
| 1. Portion of state revenue matching funds that exceeds the minimum requirement provided for paid lunches | 1 | 2 | 3 |
| 1. Direct payments from school district funds to support lunch services (e.g., pro rata share of general funds used to support lunch service) | 1 | 2 | 3 |
| 1. Other reason (SPECIFY) | 1 | 2 | 3 |

**6.14** Would you have increased paid lunch prices in SY 2011-2012 or SY 2012-2013 regardless of the provision for meal price equity?

|  |
| --- |
| 1 Yes, an increase in only SY 2011-2012 |
| 2 Yes, an increase in only SY 2012-2013 |
| 3 Yes, an increase in both SY 2011-2012 and SY 2012-2013 |
| 4 No, would not have increased in either school years |

**6.15** Have you increased a la carte prices between the SY 2011-2012 and SY 2012-2013?

|  |
| --- |
| 1Yes |
| 2 No (GO TO QUESTION 6.17) |

**6.16** What types of a la carte foods had increase prices and how much were prices increased?

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Yes** | **If Yes, price increase** | **No** |
| 1. Beverages (water, juice, sports drinks, etc.) | 1 | **$**  **$**  **$** | 2 |
| 1. Milk | 1 |  | 2 |
| 1. Frozen Desserts (ice cream, popsicles, etc.) | 1 |  | 2 |
| 1. Baked Goods – Dessert (cookies, cakes, pastries, etc.) | 1 | **$**  **$**  **$** | 2 |
| 1. Bread/Grain Products (bagels, pretzels, crackers, etc.) | 1 |  | 2 |
| 1. Snacks (chips, energy bars, jerky, etc.) | 1 |  | 2 |
| 1. Candy | 1 | **$**  **$**  **$** | 2 |
| 1. Prepared Entrees (pizza, hamburgers, burritos, etc.) | 1 |  | 2 |
| 1. Prepared Non-Entrée Food (french fries, onion rings, etc.) | 1 |  | 2 |

**6.17** What kind of record keeping systems are you using to track al la carte revenue?

|  |
| --- |
|  |
|  |

**6.18** What kind of record keeping systems are you using to track non-program food costs?

|  |
| --- |
|  |
|  |

**6.19** How would you characterize the financial standing of your non-profit school food service account before the implementation of the paid lunch equity requirement?

|  |  |  |
| --- | --- | --- |
|  | **Yes** | **No** |
| a. Our account generally broke even | 1 | 2 |
| b. Our account generally had a one-month or two-month operating balance | 1 | 2 |
| c. Our account was nearing the 3-month operating balance limit | 1 | 2 |
| d. Our account balance was over the 3-month operating balance limit | 1 | 2 |
| e. Our account had a negative balance | 1 | 2 |

**6.20** How would you characterize the financial standing of your non-profit school food service account since the implementation of the paid lunch equity requirement?

|  |  |  |
| --- | --- | --- |
|  | **Yes** | **No** |
| a. Our account generally broke even | 1 | 2 |
| b. Our account generally had a one-month or two-month operating balance | 1 | 2 |
| c. Our account was nearing the 3-month operating balance limit | 1 | 2 |
| d. Our account balance was over the 3-month operating balance limit | 1 | 2 |
| e. Our account had a negative balance | 1 | 2 |

**6.21** If your non-profit school food service was previously operating with a negative balance, has the paid lunch equity requirement helped to bring the account into the black?

|  |  |  |
| --- | --- | --- |
|  | **Yes** | **No** |
| a. Yes, we no longer operate with a negative balance | 1 | 2 |
| b. No, we still have a negative account balance | 1 | 2 |
| c. We were not previously operating with a negative balance | 1 | 2 |

**6.22** Are you concerned that the revenue gained from the paid lunch equity requirement will take you over the 3-month operating balance limit?

|  |
| --- |
| 1Yes |
| 2 No |

**Section 7 Revenues**

**This section asks about Revenues.**

**7.1** For the last school year, that is, the **2011-2012** school year, please record all **income** that was received by your school district’s food service program. If no income, please enter zero. If a category includes revenues from another category, list the other categories in the last column (e.g., a, b, c etc.). For example, if income from federal meal reimbursements for free, reduced price and full price meals cannot be separated from federal income from other child nutrition programs, record the total for rows a and b, and write “b” in the last column. If the response for lines a and b are combined in line a, do not write a response on line b.

|  |  |  |
| --- | --- | --- |
| **7.1.1 Total income** | **$** |  |

|  |  |  |
| --- | --- | --- |
| **Income from Federal sources** | **Income** | **List other categories included** |
| 1. Federal meal reimbursements for free meals, reduced price meals and full price meals | **$**  **$**  **$**  **$** |  |
| 1. Federal income from other child nutrition programs (e.g., Fresh Fruit & Vegetable Program (FFVP), School Milk Program (SMP)) |  |  |
| 1. Adjustment for an underclaim from a federal or state audit |  |  |
| 1. Other federal income |  |  |
|  |  |  |
| **Income from state sources** | **Income** | **List other categories included** |
| 1. State meal reimbursements for free meals, and reduced price meals | **$**  **$** |  |
| 1. Other income from the state |  |  |
|  |  |  |
| **Income from local sources (student/adult payments and other food sales)** | **Income** | **List other categories included** |
| 1. Student payments for reimbursable meals (reduced price & full price meals) | **$**  **$**  **$**  **$** |  |
| 1. Adult meals |  |  |
| 1. A la carte sales |  |  |
| 1. Subsidy from the school district |  |  |
| 1. Community donations | **$** |  |
| 1. Catering | **$** |  |
| **Income from local sources (student/adult payments and other food sales)** | **Income** | **List other categories included** |
| 1. Other local income | **$** |  |

|  |  |
| --- | --- |
| **Other sources of income** | **Amounts of other income** |
|  | **$** |
|  | **$** |
|  | **$** |

**7.2** The next set of questions ask about whether your SFA received a subsidy from your district or state for breakfasts or lunches and how that subsidy was provided during the last school year, that is, the 2011-2012 school year.

|  |  |  |
| --- | --- | --- |
| **Did your SFA receive a subsidy from the school district?** | | **IF Yes, how was the subsidy provided?** |
| 1. Breakfast | 1 Yes  2 No  3 N/A | 1 Per-meal  2 Annual lump sum  3 Supplement to cover specific costs  4 Based on a percentage of low-income students  Other (SPECIFY)  5 |
| 1. Lunch | 1 Yes  2 No  3 N/A | 1 Per-meal  2 Annual lump sum  3 Supplement to cover specific costs  4 Based on a percentage of low-income students  Other (SPECIFY)  5 |

|  |  |  |
| --- | --- | --- |
| **Did your SFA receive a subsidy from the state?** | | **IF Yes, how was the subsidy provided?** |
| 1. Breakfast | 1 Yes  2 No  3 N/A | 1 Per-meal  2 Annual lump sum  3 Supplement to cover specific costs  4 Based on a percentage of low-income students  Other (SPECIFY)  5 |
| 1. Lunch | 1 Yes  2 No  3 N/A | 1 Per-meal  2 Annual lump sum  3 Supplement to cover specific costs  4 Based on a percentage of low-income students  Other (SPECIFY)  5 |

**Section 8 Expenditures**

**This section asks about Expenditures.**

**8.1** For the last school year, that is, the **2011-2012** school year, please record all **expenditures** made by your school district’s food service program. If you did not have an expense for any category, please record a 0 for that category. If a category includes expenses from another category, list the other categories included by item code in the last column (e.g., a, b, c, etc.) For example, if expenditure for salaries and fringe benefits cannot be separated, record the total expenditure for salaries and fringe benefits in row a, and write “b” in the last column. If the response for lines a and b are combined in line a, do not write a response on line b.

|  |  |  |
| --- | --- | --- |
| **8.1.1 Total expenditures** | **$** |  |

| **Categories** | **Expenditures** | **List other categories included** |
| --- | --- | --- |
| 1. Salaries | **$**  **$**  **$**  **$** |  |
| 1. Fringe benefits |  |  |
| 1. Total purchased foods |  |  |
| 1. Purchased foods for reimbursable meals |  |  |
| 2. Purchased foods for non-reimbursable meals (e.g., a la carte, adult meals, etc.) | **$** |  |
| 1. Capital expenditures (equipment) | **$**  **$**  **$** |  |
| 1. Supplies |  |  |
| 1. Storage and transportation |  |  |
| 1. Maintenance and repairs | **$**  **$**  **$**  **$** |  |
| 1. Contracted services |  |  |
| 1. Payment for an overclaim as a result of a state or Federal audit |  |  |
| 1. Overhead/Indirect costs |  |  |

|  |  |
| --- | --- |
| **Other sources of expenditures** | **Amounts of other expenditures** |
|  | **$**  **$**  **$** |
|  |  |
|  |  |

**Section 9 Foodservice Equipment**

**The following questions deal with foodservice equipment purchased with American Recovery and Reinvestment Act (ARRA) of 2009 funding or FY 2010-2011 NSLP Equipment Assistance Grant Funding.**

**9.1** Did any of your schools receive equipment assistance grants during FY 2009-FY 2011?

|  |
| --- |
| 1Yes |
| 2 No (GO TO SECTION 10) |

**9.2** What focus area(s) was the equipment assistance grant intended to address?

|  |  |  |
| --- | --- | --- |
| **Focus Area** | **Yes** | **No** |
| 1. Improving the quality of school foodservice meals that meet the dietary guidelines | 1 | 2 |
| 1. Improving safety of food served in the school meal programs | 1 | 2 |
| 1. Improving the overall energy efficiency of the school foodservice operations | 1 | 2 |
| 1. Expanding participation in the school meal programs | 1 | 2 |
| 1. Other (SPECIFY) | 1 | 2 |

**9.3** What types of equipment were purchased?

|  |  |  |
| --- | --- | --- |
| **Types of Equipment** | **Yes** | **No** |
| 1. Convection ovens | 1 | 2 |
| 1. Freezers | 1 | 2 |
| 1. Refrigerators | 1 | 2 |
| 1. Dishwashers | 1 | 2 |
| 1. Steamers | 1 | 2 |
| 1. Serving counters/carts | 1 | 2 |
| 1. Cooking Utensils | 1 | 2 |
| 1. Other (SPECIFY) | 1 | 2 |

**9.4** Based on the school’s equipment grant application, did the grant funding meet the specific needs of the school to improve its foodservice operation?

|  |
| --- |
| 1Yes (GO TO SECTION 10) |
| 2 No |

**9.5** If No, why not?

|  |
| --- |
|  |
|  |
|  |
|  |

**Section 10 Farm to School Activities**

**Farm to School activities generally center around procurement of local or regional foods and food, agriculture or nutrition-based educational activities such as but not limited to:**

* **Serving local food products in school meals and snacks**
* **Serving local food products in classrooms (snacks, taste tests, educational tools)**
* **Conducting educational activities related to local foods such as farmers in the classroom and culinary education focused on local foods, field trips to farms, farmers’ markets or food processing facilities, and educational sessions for parents and community members**
* **Creating and tending school gardens (growing edible fruits and vegetables)**

**10.1** Based on the definition above, did your district or any schools in your district participate in Farm to School activities during the **2011-2012** school year?

|  |
| --- |
| 1 Yes |
| 2 No, but started activities in 2012-2013 school year (GO TO SECTION 11) |
| 3 No, but plan to start activities in the future (GO TO SECTION 11) |
| 4 No activities currently and no plans (GO TO SECTION 11) |
| 8 Don’t Know (GO TO SECTION 11) |

**10.2** How are Farm to School activities organized in your district?

|  |
| --- |
| 1 District plans common activities for all schools |
| 2 Individual schools plan their own activities |
| 3 Combination of district and individual schools plan activities |
| 8 Don’t Know |

**10.3** Approximately what year did farm to school activities start in your district or any schools in your district?

|  |  |
| --- | --- |
| **Year** | 8 Don’t Know |

**10.4** Do any district level policies, such as wellness policies, support Farm to School activities?

|  |
| --- |
| 1 Yes |
| 2 No |
| 8 Don’t Know |

**10.5** What steps did your district take to ensure food safety for local food purchased during the 2011-2012 school year?

|  |  |  |
| --- | --- | --- |
|  | **Yes** | **No** |
| 1. Conducted farm visits | 1 | 2 |
| 1. Distributor ensured local food product safety | 1 | 2 |
| 1. Inspected local food product upon arrival | 1 | 2 |
| 1. Required farmers to maintain product liability insurance at a certain amount | 1 | 2 |
| 1. Required farmers to maintain a third party Good Agriculture Practice (GAP) audit | 1 | 2 |
| 1. Required farmers to submit a self/assessment food safety checklist | 1 | 2 |
| 1. Talked with farmer/supplier about agricultural practices | 1 | 2 |
| 1. Other (SPECIFY) | 1 | 2 |

**10.6** Have Farm to School activities been evaluated in your district or in any schools in your district?

|  |
| --- |
| 1 Yes |
| 2 No (GO TO QUESTION 10.8) |
| 8 Don’t Know (GO TO QUESTION 10.8) |

**10.7** What was the focus of the evaluation efforts?

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Yes** | **No** | **Don’t Know** |
| 1. Student knowledge and attitudes | 1 | 2 | 8 |
| 1. Student eating behaviors | 1 | 2 | 8 |
| 1. Student academic achievement | 1 | 2 | 8 |
| 1. Teacher attitudes and behaviors | 1 | 2 | 8 |
| 1. Food service staff attitudes and morale | 1 | 2 | 8 |
| 1. Food service purchasing | 1 | 2 | 8 |
| 1. Food service finances | 1 | 2 | 8 |
| 1. Impact on parents | 1 | 2 | 8 |
| 1. Impact on farmers | 1 | 2 | 8 |
| 1. Impact on local/regional economy | 1 | 2 | 8 |
| 1. Impact on community development | 1 | 2 | 8 |
| 1. Impact on policies | 1 | 2 | 8 |
| 1. Implementation of activities | 1 | 2 | 8 |
| 1. Other (SPECIFY) | 1 | 2 | 8 |

**10.8** Has the district or any schools in your district ever received external grant funding specifically for Farm to School related efforts?

|  |
| --- |
| 1Yes |
| 2 No (GO TO SECTION 11) |
| 8 Don’t Know (GO TO SECTION 11) |

**10.9** How were external funds you received used for Farm to School activities?

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Yes** | **No** | **Don’t Know** |
| 1. Education and curriculum development | 1 | 2 | 8 |
| 1. Out of classroom experiential learning activities | 1 | 2 | 8 |
| 1. Events and meetings | 1 | 2 | 8 |
| 1. Promotional materials | 1 | 2 | 8 |
| 1. Equipment purchases related to Farm to School (e.g., processing equipment, salad bars, etc.) | 1 | 2 | 8 |
| 1. Local food purchases | 1 | 2 | 8 |
| 1. Distribution costs | 1 | 2 | 8 |
| 1. School gardens | 1 | 2 | 8 |
| 1. Staff positions | 1 | 2 | 8 |
| 1. Staff training | 1 | 2 | 8 |
| 1. Evaluation efforts | 1 | 2 | 8 |
| 1. Other (SPECIFY) | 1 | 2 | 8 |

**10.10** During the 2011-2012 school year approximately how much of the external grant funding was used?

|  |
| --- |
| 1$0 |
| 2 $1-$999 |
| 3 $1,000-$4,999 |
| 4 $5,000-$9,999 |
| 5 $10,000-$24,999 |
| 6 $25,000-$49,999 |
| 7 $50,000-$99,999 |
| 8 $100,000 and over |
| 9 Don’t Know |

**Section 11 Training and Technical Assistance**

**The next set of questions deal with training and technical assistance on various aspects of food service during this school year (SY 2012-2013).**

**11.1** In what topic areas did your SFA staff receive training and technical assistance? If staff received training and technical assistance, please indicate how useful was the training and technical assistance, and who provided the training and technical assistance for each of the topic areas.

|  |  |  |  |
| --- | --- | --- | --- |
| **Topic Area** | **Did staff receive training or technical assistance?** | **If YES, how useful was the training?** | **Who provided the training or technical assistance? (CHECK ALL THAT APPLY)** |
| 1. New meal pattern requirements | 1 Yes  2 No | 1 Very useful  2 Somewhat useful  3 Not at all useful | 1 SFA Staff  2 State Child Nutrition Agency  3 Local/regional state agency  4 USDA FNIC\*  5 NET program\*\*  6 National Food Service Management Institute (NFSMI)  7 Cooperative extension  8 Computer software vendor  9 College/university  10 Private consultant  11 Private food industry  12 Other |

\* USDAFNIC = USDA Food and Nutrition Information Center.

\*\* NET = Nutrition Education Program.

|  |  |  |  |
| --- | --- | --- | --- |
| **Topic Area** | **Did staff receive training or technical assistance?** | **If YES, how useful was the training?** | **Who provided the training or technical assistance? (CHECK ALL THAT APPLY)** |
| 1. Defining reimbursable meals | 1 Yes  2 No | 1 Very useful  2 Somewhat useful  3 Not at all useful | 1 SFA Staff  2 State Child Nutrition Agency  3 Local/regional state agency  4 USDA FNIC\*  5 NET program\*\*  6 National Food Service Management Institute (NFSMI)  7 Cooperative extension  8 Computer software vendor  9 College/university  10 Private consultant  11 Private food industry  12 Other |
| 1. Using computer/ software (not certification tool training) | 1 Yes  2 No | 1 Very useful  2 Somewhat useful  3 Not at all useful | 1 SFA Staff  2 State Child Nutrition Agency  3 Local/regional state agency  4 USDA FNIC\*  5 NET program\*\*  6 National Food Service Management Institute (NFSMI)  7 Cooperative extension  8 Computer software vendor  9 College/university  10 Private consultant  11 Private food industry  12 Other |

|  |  |  |  |
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| **Topic Area** | **Did staff receive training or technical assistance?** | **If YES, how useful was the training?** | **Who provided the training or technical assistance? (CHECK ALL THAT APPLY)** |
| 1. Developing menu cycles | 1 Yes  2 No | 1 Very useful  2 Somewhat useful  3 Not at all useful | 1 SFA Staff  2 State Child Nutrition Agency  3 Local/regional state agency  4 USDA FNIC\*  5 NET program\*\*  6 National Food Service Management Institute (NFSMI)  7 Cooperative extension  8 Computer software vendor  9 College/university  10 Private consultant  11 Private food industry  12 Other |
| 1. Using standardized recipes | 1 Yes  2 No | 1 Very useful  2 Somewhat useful  3 Not at all useful | 1 SFA Staff  2 State Child Nutrition Agency  3 Local/regional state agency  4 USDA FNIC\*  5 NET program\*\*  6 National Food Service Management Institute (NFSMI)  7 Cooperative extension  8 Computer software vendor  9 College/university  10 Private consultant  11 Private food industry  12 Other |

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| **Topic Area** | **Did staff receive training or technical assistance?** | **If YES, how useful was the training?** | **Who provided the training or technical assistance? (CHECK ALL THAT APPLY)** |
| 1. Implementing offer vs. serve | 1 Yes  2 No | 1 Very useful  2 Somewhat useful  3 Not at all useful | 1 SFA Staff  2 State Child Nutrition Agency  3 Local/regional state agency  4 USDA FNIC\*  5 NET program\*\*  6 National Food Service Management Institute (NFSMI)  7 Cooperative extension  8 Computer software vendor  9 College/university  10 Private consultant  11 Private food industry  12 Other |
| 1. Controlling portion sizes | 1 Yes  2 No | 1 Very useful  2 Somewhat useful  3 Not at all useful | 1 SFA Staff  2 State Child Nutrition Agency  3 Local/regional state agency  4 USDA FNIC\*  5 NET program\*\*  6 National Food Service Management Institute (NFSMI)  7 Cooperative extension  8 Computer software vendor  9 College/university  10 Private consultant  11 Private food industry  12 Other |

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| **Topic Area** | **Did staff receive training or technical assistance?** | **If YES, how useful was the training?** | **Who provided the training or technical assistance? (CHECK ALL THAT APPLY)** |
| 1. Documenting use of substitute foods | 1 Yes  2 No | 1 Very useful  2 Somewhat useful  3 Not at all useful | 1 SFA Staff  2 State Child Nutrition Agency  3 Local/regional state agency  4 USDA FNIC\*  5 NET program\*\*  6 National Food Service Management Institute (NFSMI)  7 Cooperative extension  8 Computer software vendor  9 College/university  10 Private consultant  11 Private food industry  12 Other |
| 1. Documenting use of leftovers | 1 Yes  2 No | 1 Very useful  2 Somewhat useful  3 Not at all useful | 1 SFA Staff  2 State Child Nutrition Agency  3 Local/regional state agency  4 USDA FNIC\*  5 NET program\*\*  6 National Food Service Management Institute (NFSMI)  7 Cooperative extension  8 Computer software vendor  9 College/university  10 Private consultant  11 Private food industry  12 Other |

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| **Topic Area** | **Did staff receive training or technical assistance?** | **If YES, how useful was the training?** | **Who provided the training or technical assistance? (CHECK ALL THAT APPLY)** |
| 1. Marketing your food program | 1 Yes  2 No | 1 Very useful  2 Somewhat useful  3 Not at all useful | 1 SFA Staff  2 State Child Nutrition Agency  3 Local/regional state agency  4 USDA FNIC\*  5 NET program\*\*  6 National Food Service Management Institute (NFSMI)  7 Cooperative extension  8 Computer software vendor  9 College/university  10 Private consultant  11 Private food industry  12 Other |
| 1. Food purchasing | 1 Yes  2 No | 1 Very useful  2 Somewhat useful  3 Not at all useful | 1 SFA Staff  2 State Child Nutrition Agency  3 Local/regional state agency  4 USDA FNIC\*  5 NET program\*\*  6 National Food Service Management Institute (NFSMI)  7 Cooperative extension  8 Computer software vendor  9 College/university  10 Private consultant  11 Private food industry  12 Other |

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| **Topic Area** | **Did staff receive training or technical assistance?** | **If YES, how useful was the training?** | **Who provided the training or technical assistance? (CHECK ALL THAT APPLY)** |
| 1. USDA Foods | 1 Yes  2 No | 1 Very useful  2 Somewhat useful  3 Not at all useful | 1 SFA Staff  2 State Child Nutrition Agency  3 Local/regional state agency  4 USDA FNIC\*  5 NET program\*\*  6 National Food Service Management Institute (NFSMI)  7 Cooperative extension  8 Computer software vendor  9 College/university  10 Private consultant  11 Private food industry  12 Other |
| 1. Food sanitation/ safety | 1 Yes  2 No | 1 Very useful  2 Somewhat useful  3 Not at all useful | 1 SFA Staff  2 State Child Nutrition Agency  3 Local/regional state agency  4 USDA FNIC\*  5 NET program\*\*  6 National Food Service Management Institute (NFSMI)  7 Cooperative extension  8 Computer software vendor  9 College/university  10 Private consultant  11 Private food industry  12 Other |

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| --- | --- | --- | --- |
| **Topic Area** | **Did staff receive training or technical assistance?** | **If YES, how useful was the training?** | **Who provided the training or technical assistance? (CHECK ALL THAT APPLY)** |
| 1. Contracting | 1 Yes  2 No | 1 Very useful  2 Somewhat useful  3 Not at all useful | 1 SFA Staff  2 State Child Nutrition Agency  3 Local/regional state agency  4 USDA FNIC\*  5 NET program\*\*  6 National Food Service Management Institute (NFSMI)  7 Cooperative extension  8 Computer software vendor  9 College/university  10 Private consultant  11 Private food industry  12 Other |
| 1. Program regulations and procedures | 1 Yes  2 No | 1 Very useful  2 Somewhat useful  3 Not at all useful | 1 SFA Staff  2 State Child Nutrition Agency  3 Local/regional state agency  4 USDA FNIC\*  5 NET program\*\*  6 National Food Service Management Institute (NFSMI)  7 Cooperative extension  8 Computer software vendor  9 College/university  10 Private consultant  11 Private food industry  12 Other |

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| **Topic Area** | **Did staff receive training or technical assistance?** | **If YES, how useful was the training?** | **Who provided the training or technical assistance? (CHECK ALL THAT APPLY)** |
| 1. Record keeping and Reporting | 1 Yes  2 No | 1 Very useful  2 Somewhat useful  3 Not at all useful | 1 SFA Staff  2 State Child Nutrition Agency  3 Local/regional state agency  4 USDA FNIC\*  5 NET program\*\*  6 National Food Service Management Institute (NFSMI)  7 Cooperative extension  8 Computer software vendor  9 College/university  10 Private consultant  11 Private food industry  12 Other |
| 1. Preparing Certification Materials for the Additional Reimburse-ment (including certification tool training) | 1 Yes  2 No | 1 Very useful  2 Somewhat useful  3 Not at all useful | 1 SFA Staff  2 State Child Nutrition Agency  3 Local/regional state agency  4 USDA FNIC\*  5 NET program\*\*  6 National Food Service Management Institute (NFSMI)  7 Cooperative extension  8 Computer software vendor  9 College/university  10 Private consultant  11 Private food industry  12 Other |

|  |  |  |  |
| --- | --- | --- | --- |
| **Topic Area** | **Did staff receive training or technical assistance?** | **If YES, how useful was the training?** | **Who provided the training or technical assistance? (CHECK ALL THAT APPLY)** |
| 1. Local School Wellness Policy Development and Imple-mentation | 1 Yes  2 No | 1 Very useful  2 Somewhat useful  3 Not at all useful | 1 SFA Staff  2 State Child Nutrition Agency  3 Local/regional state agency  4 USDA FNIC\*  5 NET program\*\*  6 National Food Service Management Institute (NFSMI)  7 Cooperative extension  8 Computer software vendor  9 College/university  10 Private consultant  11 Private food industry  12 Other |
| 1. Local School Wellness Program Monitoring, Assessment, and Evaluation | 1 Yes  2 No | 1 Very useful  2 Somewhat useful  3 Not at all useful | 1 SFA Staff  2 State Child Nutrition Agency  3 Local/regional state agency  4 USDA FNIC\*  5 NET program\*\*  6 National Food Service Management Institute (NFSMI)  7 Cooperative extension  8 Computer software vendor  9 College/university  10 Private consultant  11 Private food industry  12 Other |

|  |  |  |  |
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| **Topic Area** | **Did staff receive training or technical assistance?** | **If YES, how useful was the training?** | **Who provided the training or technical assistance? (CHECK ALL THAT APPLY)** |
| 1. Other (SPECIFY) | 1 Yes  2 No | 1 Very useful  2 Somewhat useful  3 Not at all useful | 1 SFA Staff  2 State Child Nutrition Agency  3 Local/regional state agency  4 USDA FNIC\*  5 NET program\*\*  6 National Food Service Management Institute (NFSMI)  7 Cooperative extension  8 Computer software vendor  9 College/university  10 Private consultant  11 Private food industry  12 Other |

**11.2** During the 2012-2013 school year, who received training or technical assistance?

|  |  |  |
| --- | --- | --- |
|  | **Yes** | **No** |
| 1. Cafeteria Manager | 1 | 2 |
| 1. Other Cafeteria workers | 1 | 2 |
| 1. School Administrators | 1 | 2 |
| 1. SFA Director | 1 | 2 |
| 1. Procurement staff | 1 | 2 |
| 1. Other  (SPECIFY) | 1 | 2 |

**11.3** What additional training or technical assistance do you think is needed?

|  |
| --- |
|  |
|  |
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**Section 12 SFA Foodservice Staff Background**

**12.1** What is the minimum level of education required for a School Foodservice Manager (cafeteria manager) in your district?

|  |
| --- |
| 1Less than high school |
| 2 High school/GED |
| 3 Some college, no degree |
| 4 Associates degree |
| 5 Bachelor’s degree |
| 6 Graduate degree |

**12.2** In your district, is a School Foodservice Manager (cafeteria manager) required to be a:

|  |  |  |
| --- | --- | --- |
|  | **Yes** | **No** |
| 1. Licensed dietitian | 1 | 2 |
| 1. School Nutrition Specialist | 1 | 2 |
| 1. Certified Professional Food Manager | 1 | 2 |
| 1. Certified Professional in Food Safety | 1 | 2 |
| 1. Certified Professional Food Handler | 1 | 2 |
| 1. Certified ServSafe Food Safety Professional | 1 | 2 |

**12.3** Are your current School Foodservice Managers (cafeteria managers) in your district:

|  |  |  |
| --- | --- | --- |
|  | **Yes** | **No** |
| 1. Licensed dietitians | 1 | 2 |
| 1. School Nutrition Specialists | 1 | 2 |
| 1. Certified Professional Food Managers | 1 | 2 |
| 1. Certified Professionals in Food Safety | 1 | 2 |
| 1. Certified Professional Food Handlers | 1 | 2 |
| 1. Certified ServSafe Food Safety Professionals | 1 | 2 |

**12.4** What is the minimum level of education required for a non-supervisory School Foodservice Staff Member in your district?

|  |
| --- |
| 1Less than high school |
| 2 High school/GED |
| 3 Some college, no degree |
| 4 Associates degree |
| 5 Bachelor’s degree |
| 6 Graduate degree |

**12.5** In your district, is a non-supervisory School Foodservice Staff Member required to be a:

|  |  |  |
| --- | --- | --- |
|  | **Yes** | **No** |
| 1. Licensed dietitian | 1 | 2 |
| 1. School Nutrition Specialist | 1 | 2 |
| 1. Certified Professional Food Manager | 1 | 2 |
| 1. Certified Professional in Food Safety | 1 | 2 |
| 1. Certified Professional Food Handler | 1 | 2 |
| 1. Certified ServSafe Food Safety Professional | 1 | 2 |

**12.6** Are your current non-supervisory School Foodservice Staff Members:

|  |  |  |
| --- | --- | --- |
|  | **Yes** | **No** |
| 1. Licensed dietitians | 1 | 2 |
| 1. School Nutrition Specialists | 1 | 2 |
| 1. Certified Professional Food Managers | 1 | 2 |
| 1. Certified Professionals in Food Safety | 1 | 2 |
| 1. Certified Professional Food Handlers | 1 | 2 |
| 1. Certified ServSafe Food Safety Professionals | 1 | 2 |

**12.7** What percentage of your school food service staff are limited English proficient?

|  |
| --- |
| 1None |
| 2 1-10 percent |
| 3 11-20 percent |
| 4 21-30 percent |
| 5 31-40 percent |
| 6 41-50 percent |
| 7 51-60 percent |
| 8 61-70 percent |
| 9 71-80 percent |
| 10 81-90 percent |
| 11 91-100 percent |

**Thank you for your participation in this important study.**