

P1. CAFETERIA OBSERVATION GUIDE (INTERVIEWER-COMPLETED)

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School Nutrition and Meal Cost Study Cafeteria Observation Guide

SFA ID: _____ School ID: _____

School Name: _____

Observer Name: _____

Date: _____

I Breakfast Observations

If more than one cafeteria serves reimbursable breakfasts at the selected time, observe the one that serves the most students.

**CHECK HERE IF REIMBURSABLE BREAKFASTS ARE ONLY SERVED IN OTHER LOCATIONS
(I.E., CLASSROOMS) BESIDES THE CAFETERIA:**

→ GO TO BREAKFAST Q3b AND FILL OUT 'BREAKFAST IN CLASSROOM' COLUMN (FAR RIGHT).
THEN SKIP TO LUNCH OBSERVATION.

1a. Time of Observation: _____ to _____ 1b. Breakfast Service: _____ to _____

2. Is today's reimbursable breakfast menu prominently displayed so students can see it prior to going through the serving line, either outside (within 20 feet) the cafeteria or at the beginning of the serving line(s)?

1 Yes

0 No

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 control 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 20 minutes per response, including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection.

3a. Name each line or station serving reimbursable breakfasts or components of reimbursable breakfasts and indicate whether that line/station is universally available to all students. Do not include any lines or food stations identified as serving a la carte items only.

LINES AND STATIONS SHOULD BE CONFIRMED AS REIMBURSABLE AND WHETHER AVAILABLE TO ALL STUDENTS WITH THE SCHOOL NUTRITION MANAGER AHEAD OF MEAL SERVICE.

Line OR Station:	Line OR Station:	Line OR Station:	Line OR Station:	Line OR Station:	Line OR Station:	Line OR Station:	Line OR Station:	Breakfast in Classroom:
<small>(Name/Description)</small>	<small>(Name/Description)</small>	<small>(Name/Description)</small>	<small>(Name/Description)</small>	<small>(Name/Description)</small>	<small>(Name/Description)</small>	<small>(Name/Description)</small>	<small>(Name/Description)</small>	<small>(Name/Description)</small>
CHECK BOX BELOW FOR EACH LINE OR STATION THAT IS AVAILABLE TO ALL STUDENTS, REGARDLESS OF WHICH OTHER LINE OR STATION THEY USE								
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

3b. Check box below for each meal component that is available in each line/station serving reimbursable breakfasts or components of reimbursable breakfasts.

Fruits or Vegetables	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Grains	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Meat/Meat Alternate	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Milk:								
White—Skim/Nonfat	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
White—1% Low Fat	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
White—2% or Whole	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
White—Lactaid Fat Free or Low Fat	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Flavored—Skim/Nonfat	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Flavored—1% or 2%	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Soy/Non-Dairy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Meat items include all red meat, poultry, and fish.

Meat alternate items include cheese, yogurt, dry beans and peas, tofu, whole eggs, peanut butter or other nut or seed butters, and nuts and seeds.

4. What style(s) of service are used to serve reimbursable breakfast food items to the students? (Do not include beverage service.)

MARK ALL THAT APPLY

- 1 Traditional serving line (served by staff)
 - 2 Traditional serving line (self-serve from pre-portioned items)
 - 3 Traditional serving line (self-serve from bulk quantity)
 - 4 Station(s)/food bar(s) (served by staff)
 - 5 Station(s)/food bar(s) (self-serve from pre-portioned items)
 - 6 Station(s)/food bar(s) (self-serve from bulk quantity)
 - 7 Grab and go (pre-portioned items for consumption outside cafeteria)
 - 8 Direct delivery to the classroom
 - 9 Other (*Specify*)
-

5. If school has a self-serve fruit, cereal, or other food bar for breakfast, is it located before the cash register or check-out line?

- 1 Yes
- 0 No
- n Not applicable

6. Where is fruit displayed (or offered) during breakfast service?

- 1 In only one location, near a cash register/checkout line
- 2 In only one location, but not near a cash register/checkout line
- 3 In multiple locations, with at least one near a cash register/checkout line
- 4 In multiple locations, but none near a cash register/checkout line
- 0 No fruit displayed (or offered)

7. Are attractive displays/signage used to draw attention to fruits being offered on the breakfast serving line/station?

- 1 Yes
- 0 No

8. Indicate whether potable water (such as drinking fountains or bottled water, but not sinks or hand washing stations) is available to students in or near (within 20 feet of) the cafeteria at breakfast.

MARK ALL THAT APPLY

- | | | |
|---|---|--|
| Drinking fountain: | 1 <input type="checkbox"/> in the cafeteria | 1 <input type="checkbox"/> within 20 feet of cafeteria |
| Bottled water, at no charge: | 2 <input type="checkbox"/> in the cafeteria | 2 <input type="checkbox"/> within 20 feet of cafeteria |
| Bottle refilling stations: | 3 <input type="checkbox"/> in the cafeteria | 3 <input type="checkbox"/> within 20 feet of cafeteria |
| Water dispensers/coolers: | 4 <input type="checkbox"/> in the cafeteria | 4 <input type="checkbox"/> within 20 feet of cafeteria |
| Pitchers of water: | 5 <input type="checkbox"/> in the cafeteria | 5 <input type="checkbox"/> within 20 feet of cafeteria |
| Other sources of water: | 6 <input type="checkbox"/> in the cafeteria | 6 <input type="checkbox"/> within 20 feet of cafeteria |
| 0 <input type="checkbox"/> No potable water available | | |

9. Is there sufficient formal seating and tables for all of the students eating breakfast?

- 1 Insufficient (*not enough appropriate seating for all students, or have to sit very close together to fit*)
- 2 Crowded (*but all can sit comfortably if they want to*)
- 3 Ample (*room to easily accommodate all students*)

10. During the breakfast period, were waste disposal containers ever filled to overflowing while students were attempting to dispose of their waste?

- 1 Yes
- 0 No

11. What other uses did the eating area have during the breakfast period?

MARK ALL THAT APPLY

- 1 Gymnasium
- 2 Entry or hallway
- 3 Student groups/meetings/classes
- 4 Fundraiser with food
- 5 Fundraiser without food
- 6 School staff meetings
- 7 Parent meetings
- 8 Other (*Specify*)

-
- 0 None

II. Lunch Observations

If more than one cafeteria serves reimbursable lunches at the selected time, observe the one that serves the most students.

1a. Time of Observation: _____ to _____ 1b. Lunch Period: _____ to _____

2. Is today's reimbursable lunch menu prominently displayed so students can see it prior to going through the serving line, either outside (within 20 feet) the cafeteria or at the beginning of the serving line(s)?

₁ Yes

₀ No

3a. Name each line or station serving reimbursable lunches or components of reimbursable lunches and indicate whether that line/station is universally available to all students. Do not include any lines or food stations identified as serving a la carte items only.

LINES AND STATIONS SHOULD BE CONFIRMED AS REIMBURSABLE AND WHETHER AVAILABLE TO ALL STUDENTS WITH THE SCHOOL NUTRITION MANAGER AHEAD OF MEAL SERVICE.

Line OR Station:	Line OR Station:	Line OR Station:	Line OR Station:	Line OR Station:	Line OR Station:	Line OR Station:	Line OR Station:
<small>(Name/Description)</small>	<small>(Name/Description)</small>	<small>(Name/Description)</small>	<small>(Name/Description)</small>	<small>(Name/Description)</small>	<small>(Name/Description)</small>	<small>(Name/Description)</small>	<small>(Name/Description)</small>
CHECK BOX BELOW FOR EACH LINE OR STATION THAT IS AVAILABLE TO ALL STUDENTS, REGARDLESS OF WHICH OTHER LINE OR STATION THEY USE							
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

3b. Check box below for each meal component that is available in each line/station serving reimbursable lunches or components of reimbursable lunches (for mixed dishes or combination foods, check each component included.)

Fruits	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Vegetables	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Grains	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Meat/Meat Alternate	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Milk:								
White—Skim/Nonfat	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
White—1% Low Fat	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
White—2% or Whole	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
White—Lactaid Fat Free or Low Fat	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Flavored—Skim/Nonfat	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Flavored—1% or 2%	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Soy/Non-Dairy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Meat items include all red meat, poultry, and fish.

Meat alternate items include cheese, yogurt, dry beans and peas, tofu, whole eggs, peanut butter or other nut or

seed butters, and nuts and seeds.

4. What style(s) of service are used to serve reimbursable lunch food items to the students? (Do not include beverage service.)

MARK ALL THAT APPLY

- 1 Traditional serving line (served by staff)
- 2 Traditional serving line (self-serve from pre-portioned items)
- 3 Traditional serving line (self-serve from bulk quantity)
- 4 Station(s)/food bar(s) (served by staff)
- 5 Station(s)/food bar(s) (self-serve from pre-portioned items)
- 6 Station(s)/food bar(s) (self-serve from bulk quantity)
- 7 Grab and go (pre-portioned items for consumption outside cafeteria)
- 8 Other (*Specify*)

5. If school has a self-serve bar for lunch that offers fruits or vegetables (i.e., salad, soup, or fruit bar), is it located before the cash register or check-out line?

- 1 Yes
- 0 No
- n Not applicable

6. Are creative/descriptive names for vegetable offerings displayed on the lunch line(s) or on a poster or a menu board outside the cafeteria?

MARK ALL THAT APPLY

	Yes	No	No Veg. Offerings
a. Displayed on posted menu outside cafeteria.....	1 <input type="checkbox"/>	0 <input type="checkbox"/>	n <input type="checkbox"/>
b. Displayed with the vegetable offerings on the serving line(s).....	1 <input type="checkbox"/>	0 <input type="checkbox"/>	n <input type="checkbox"/>
c. Displayed with the vegetable offerings at food station(s).....	1 <input type="checkbox"/>	0 <input type="checkbox"/>	n <input type="checkbox"/>

7. If offered today, are dark-green (broccoli, spinach, etc.), red or orange vegetables (carrots, sweet potatoes, etc.) and/or dry beans or peas (legumes – black beans, chickpeas, lentils, etc.) displayed first OR most prominently among the other vegetable items on the serving line/station? [REFER TO VEGETABLE LIST FOR MORE EXAMPLES OF THESE TYPES]

- 1 Yes
- 0 No
- n Not applicable

8. If offered today, are entrees that include beans or peas (bean burrito, beans and rice, etc.) displayed first OR most prominently among the other entree items on the serving line/station?

- 1 Yes
- 0 No
- n Not Applicable

9. If offered today, are entrees that include dry beans or peas (bean burrito, beans and rice, etc.) given creative/descriptive names (on the serving line/station or on the posted menu)?

- Yes
- No
- Not applicable

10. Where is fruit displayed (or offered) during lunch service?

- In only one location, near a cash register/checkout line
- In only one location, but not near a cash register/checkout line
- In multiple locations, with at least one near a cash register/checkout line
- In multiple locations, but none near a cash register/checkout line
- No fruit displayed (or offered)

11. Are attractive displays/signage used to draw attention to fruits being offered on the lunch service line/station?

- Yes
- No

12. Indicate whether potable water (such as drinking fountains or bottled water, but not sinks or hand washing stations) is available to students in or near (within 20 feet of) the cafeteria at lunch.

MARK ALL THAT APPLY

- | | | |
|---|---|--|
| Drinking fountain: | <input type="checkbox"/> in the cafeteria | <input type="checkbox"/> within 20 feet of cafeteria |
| Bottled water, at no charge: | <input type="checkbox"/> in the cafeteria | <input type="checkbox"/> within 20 feet of cafeteria |
| Bottle refilling stations: | <input type="checkbox"/> in the cafeteria | <input type="checkbox"/> within 20 feet of cafeteria |
| Water dispensers/coolers: | <input type="checkbox"/> in the cafeteria | <input type="checkbox"/> within 20 feet of cafeteria |
| Pitchers of water: | <input type="checkbox"/> in the cafeteria | <input type="checkbox"/> within 20 feet of cafeteria |
| Other sources of water: | <input type="checkbox"/> in the cafeteria | <input type="checkbox"/> within 20 feet of cafeteria |
| <input type="checkbox"/> No potable water available | | |

13. Is there sufficient formal seating and tables for all of the students eating lunch?

- Insufficient (*not enough appropriate seating for all students, or have to sit very close together to fit*)
- Crowded (*but all can sit comfortably if they want to*)
- Ample (*room to easily accommodate all students*)

14. During the lunch period, were waste disposal containers ever filled to overflowing while students were attempting to dispose of their waste?

- Yes
- No

15. What other uses did the eating area have during the lunch period?

MARK ALL THAT APPLY

- 1 Gymnasium
- 2 Entry or hallway
- 3 Student groups/meetings/classes
- 4 Fundraiser with food
- 5 Fundraiser without food
- 6 School staff meetings
- 7 Parent meetings
- 8 Other (*Specify*)

0 None

This section of the observation does not need to be completed during meal service, but any tables, chairs, or furniture need to be set up as they are for meals in order to observe their condition.

III. Cafeteria Characteristics (Cafeteria includes both the eating and serving areas and both should be observed unless otherwise specified.)

IF MORE THAN ONE CAFETERIA SERVES REIMBURSABLE LUNCHESES, ANSWER THIS SECTION ABOUT THE ONE THAT SERVES THE MOST STUDENTS.

1. What is the condition of the cafeteria itself?

- Walls
- | Eating Area | Serving Area | |
|----------------------------|--------------------------|---|
| 1 <input type="checkbox"/> | <input type="checkbox"/> | Clean or newly painted, no holes, cracks, chips, or marks |
| 2 <input type="checkbox"/> | <input type="checkbox"/> | Some marks or discolorations, or minor cracks or chips |
| 3 <input type="checkbox"/> | <input type="checkbox"/> | Holes in wall, cracks wider than ¼ inch, or major discoloration – areas at least as large as this page (8 ½x 11") |
- Floor
- | | | |
|----------------------------|--------------------------|--|
| 4 <input type="checkbox"/> | <input type="checkbox"/> | Smooth with no stains |
| 5 <input type="checkbox"/> | <input type="checkbox"/> | Few or light colored stains or some unevenness |
| 6 <input type="checkbox"/> | <input type="checkbox"/> | Discolored, or holes or cracks, or very uneven |
- Ceiling
- | | | |
|----------------------------|--------------------------|---|
| 7 <input type="checkbox"/> | <input type="checkbox"/> | Clean of stains or no holes or sagging |
| 8 <input type="checkbox"/> | <input type="checkbox"/> | Minor discoloration, or small holes, or chips, or sagging |
| 9 <input type="checkbox"/> | <input type="checkbox"/> | Major discoloration, or large or many holes, or very uneven |
- Tables/Chairs/Furniture
- | | | |
|-----------------------------|--------------------------|---|
| 10 <input type="checkbox"/> | <input type="checkbox"/> | Matching items in good quality shape, with no graffiti, stains or other marks, or damaged/missing parts |
| 11 <input type="checkbox"/> | <input type="checkbox"/> | Some mismatched items, or occasional stains or marks, or damaged/missing parts |
| 12 <input type="checkbox"/> | <input type="checkbox"/> | Furniture is consistently stained or marked, or has damaged/missing parts throughout cafeteria |

2. Are there any themes in the cafeteria? (i.e., Old West, 50s diner, Underwater)

- 1 Yes
0 No

3. What are the wall or ceiling decorations in the cafeteria?

MARK ALL THAT APPLY

- 1 Murals
2 Student Art
3 Professional Art
4 Banners
5 Posters
6 Other (Specify)

0 None → IF NO DECORATIONS, OBSERVATION IS DONE

4. Do any of the wall or ceiling decorations...

MARK ALL THAT APPLY

- 1 Provide nutrition information?
2 Promote healthy eating habits?
3 Promote physical activity?
4 Promote food safety (e.g., wash hands)?