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APPENDIX C-1. Site Supervisor Survey

The Food and Nutrition Service, U.S. Department of Agriculture is conducting a study on the Summer Meals Programs. This survey includes:

- Characteristics of your site and those who attend;
- Information about other services available at your site;
- Meal service characteristics; and
- Food storage and safety procedures.

The main objectives of the study are to describe the characteristics of programs and participants, to examine program operations, and to identify factors affecting participation in the program by sponsors, sites and children. Your responses will be kept private, will be combined with those from other sites, and will not be reported separately. Your participation in this survey is very important and will be used to help improve understanding of Summer Meal Programs.

You have been selected because your site, <SITE NAME>, provides meals through a Summer Meals Program.

Taking part is voluntary but please know that the information you provide will be kept private and will be included with those of other survey participants. The law prohibits us from giving anyone any information that may identify you or your organization. Your answers to the survey questions, or your decision not to respond to the survey, will not affect any benefits or services your site receives.

Your opinion matters to us. Thank you for completing this survey.

Public reporting burden for this collection of information is estimated to average 20 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. 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 Services, Office of Policy Support, 3101 Park Center Drive, Room 1014, Alexandria, VA 22302 ATTN: PRA (0584-xxxx*). Do not return the completed form to this address.

SECTION A. ABOUT THE SITE

A1. For how many summers, including this summer, has a Summer Meals Program operated at <SITE NAME>? An estimate is fine.

Number of summers

Don't know

A2. For how many weeks is <SITE NAME> scheduled to operate the Summer Meals Program this summer?

Number of weeks

A3. On which day(s) of the week does <SITE NAME> typically operate the Summer Meals Program this summer? (CHECK ALL THAT APPLY.)

Monday

Tuesday

Wednesday

Thursday

Friday

Saturday

Sunday

A4. What is the normal daily starting time (when children first begin arriving) at <SITE NAME>? Please provide the earliest start time for any activity provided, not just for meals.

: AM/PM

A5. What is the normal daily closing time at <SITE NAME>? Please provide the closing time for all activities, not just for meals.

: AM/PM

A6. What is the average daily attendance at <SITE NAME>? This includes both children who receive a summer meal or snack and those who do not. An estimate is fine.

Average daily attendance #

A7. Does <SITE NAME> provide meals or snacks to children at times other than summer? (CHECK ALL THAT APPLY.)

- Yes, the site provides lunches and/or breakfasts through National School Lunch and Breakfast Programs during the school year
- Yes, the site provides afterschool meals or snacks through the National School Lunch Program during the school year
- Yes, the site provides afterschool meals or snacks through the Child and Adult Care Food Program during the school year
- Yes, the site provides meals or snacks through the Child and Adult Care Food Program as a child care center
- Yes, the site provides meals or snacks with funding from another source during the school year
- No, the site does not provide meals other than summer meals

SECTION B: SITE SERVICES

B1. Which of the following best describes the primary purpose of <SITE NAME>? (CHECK ONLY ONE.)

- It only operates to serve free meals to children. No other activities or services are offered → **GO TO B4.**
- It operates *primarily* to serve free meals to children. Activities or other services are also offered.
- It operates *primarily* to provide activities or other services for children . Free meals are also served.
- It operates *primarily* to provide educational services for children (for example, summer school). Free meals are also served
- Other (PLEASE SPECIFY): _____

B2. How often are activities offered at <SITE NAME> this summer? (CHECK ONLY ONE.)

- Every day the site is open
- Most days the site is open
- A few times over the summer
- Other (PLEASE SPECIFY): _____

B3. Which of the following activities are offered at <SITE NAME> this summer? (CHECK ALL THAT APPLY.)

- Arts and crafts
- Performing arts
- Educational/instructional activities
- Organized games or sports park
- Supervised free play
- Supervised child care
- Swimming
- Off-site field trips
- Religious activities
- Cooking
- Counseling, therapy, social skills development
- Multicultural activities
- Other (PLEASE SPECIFY): _____

B4. Is transportation available for children to get to and from <SITE NAME>?

- Yes, transportation is provided for fee
- Yes, transportation is included in the program fee
- Yes, free transportation is provided
- No, transportation is not provided → GO TO SECTION C.

B5. Is transportation available for ...? (CHECK ONLY ONE.)

- All children who attend the site
- Children who live some distance away from the site
- Those who request it
- Other (PLEASE SPECIFY): _____

B6. What type of transportation is provided? (CHECK ALL THAT APPLY.)

- Volunteers drive children in their own vehicles
- Shuttle buses or vans transport children
- Program is accessible through public transportation (e.g., on a bus route)
- Other (PLEASE SPECIFY): _____

B7. On a typical day, how many children use transportation provided by <SITE NAME>, not including field trips? (CHECK ONLY ONE.)

- All or almost all children
- Most children
- Some children
- Few or very few children
- No children

SECTION C: SUMMER MEALS

C1. On which date did <SITE NAME> first begin meal service for the Summer Meals Program this summer?

|_|_| / |_|_| MONTH/DAY

Don't know/Not sure

C2. On which date did <SITE NAME> stop meal service for the Summer Meals Program this summer? If meal service is still ongoing, on which date do you expect to stop meal service this summer?

|_|_| / |_|_| MONTH/DAY

Don't know/Not sure

C3. What is the setting for <SITE NAME> during the summer? (CHECK ALL THAT APPLY.)

- School
- Church or other religious organization
- Library
- Playground/park
- Recreation center or community center
- Housing project
- Mobile feeding site
- Homeless shelter
- Camp
- Migrant Site
- Museum
- WIC Clinic
- Hospital
- Food bank
- Government building
- Indian Tribal Organization/building
- College/University
- Other (PLEASE SPECIFY): _____

C4. Please put a check mark in the box to indicate the meals served by <SITE NAME> and days of the weeks they are typically served.

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Breakfast	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Morning Snack	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Lunch	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Afternoon Snack	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Supper	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Evening Snack	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

C5. On a typical day, what time does <SITE NAME> serve <Breakfast/Morning Snack/Lunch/Afternoon Snack/Supper/Evening Snack>? Please enter the start time and end time.

Start Time: | | : | | AM/PM

End Time: | | : | | AM/PM

C6. During the summer, does <SITE NAME> follow the same meal service schedule every week?

- Yes
 No

[C7 matrix will pre-populate based on responses to C4.]

C7. On a typical day, approximately how many meals/snacks are served to children and how long are children given to eat meals and snacks? An estimate is fine.

	Number of meals/snacks served each day		Length of time (minutes) given to eat meal/snack
	Children 12 or younger	Children 13 to 18 years of age	
Breakfast	_____	_____	_____
Morning Snack	_____	_____	_____
Lunch	_____	_____	_____
Afternoon Snack	_____	_____	_____
Supper	_____	_____	_____

SECTION D: CHILDREN SERVED

D1. On a typical day, about what percent of the children served meals/snacks are . . . (ESTIMATES ARE FINE.)

- | | | |
|--|---------|--|
| ... Preschoolers? | _____ % | <input type="checkbox"/> Do not serve this age group |
| ... Elementary age (grades K-5)? | _____ % | <input type="checkbox"/> Do not serve this age group |
| ... Middle school or junior high age (grades 6-8)? | _____ % | <input type="checkbox"/> Do not serve this age group |
| ... High school age (grades 9-12)? | _____ % | <input type="checkbox"/> Do not serve this age group |

[TOTAL _____ % - will automatically fill in web survey based on responses entered above, and not exceed 100]

D2. On a typical day, about what percent of children served meals/snacks at <SITE NAME> site are . . . (ESTIMATES ARE FINE.)

- ... Female? _____ %
... Male? _____ %

D3. On a typical day, about what percent of children served meals/snacks at <SITE NAME> are Hispanic or Latino/Latina? (AN ESTIMATE IS FINE.)

_____ %

D4. On a typical day, about what percent of children served meals/snacks at <SITE NAME> are ... (ESTIMATES ARE FINE.)

- | | |
|--|---------|
| ... American Indian or Alaska Native? | _____ % |
| ... Asian? | _____ % |
| ... Black or African American? | _____ % |
| ... Native Hawaiian or other Pacific Islander? | _____ % |
| ... White? | _____ % |
| ... Some other race? | _____ % |

SECTION E: MEAL SERVICE

E1. 4.6a, SNOOPS Year 1, 4.1. What type of meal service system does <SITE NAME> use? (CHECK ONLY ONE.)

- Cafeteria-style meal service (site workers plate the food for children or children serve themselves such as a salad bar)
- Pre-plated meal service (meals are already assembled, either in whole or in part)
- Family-style meal service (children serve themselves from common platters of food)
- Other (PLEASE SPECIFY): _____

E2. Does <SITE NAME> use “offer versus serve” for any of the following meals? “Offer versus serve” allows children to decline some of the food offered in a reimbursable breakfast, lunch, or supper (excluding snacks). (CHECK ALL THAT APPLY.)

- Breakfast
- Lunch
- Supper
- We do not use “offer versus serve” for any meals

E3. Where are meals and/or snacks typically served? (CHECK ONLY ONE.)

- Indoors
- Outdoors (except in bad weather)
- Both indoors and outdoors

E4. Are hot meals ever served? A meal is considered a “hot meal” if at least one component (such as the entrée) is served heated.

- Yes
- No

[Ask E5 only of sites that do not have primary responsibility for menu planning, as indicated during study recruitment]

E5. What role do the staff at <SITE NAME> have in menu planning? (CHECK ALL THAT APPLY.)

- Site staff provide feedback to the sponsor and/or meal vendor on suggested menus
- Site staff provide feedback to the sponsor and/or meal vendor on children’s likes and dislikes
- Site staff do not have a role in menu planning
- Other (PLEASE SPECIFY): _____

E6. Which of the following food safety procedures do staff at <SITE NAME> follow? (CHECK ALL THAT APPLY.)

Staff...

- Wash hands before handling food
- Wear gloves while handling food
- Transport cold food in a refrigerated vehicle
- Transport cold food in a cooler in a non-refrigerated vehicle
- Serve perishable foods within 2 hours if they are kept out
- Keep meals in a cooler or other cold storage until serving
- Always use thermometers to monitor cooking temperatures
- Always use thermometers to monitor food holding temperatures
- Dispose of meals or foods that fail a quality check
- Other (PLEASE SPECIFY): _____

E7. Does <SITE NAME> have a written Food Safety Plan?

- Yes
- No
- Don't know/Not sure

E8. Does <SITE NAME> have procedures to accommodate children with food allergies or other special dietary needs?

- Yes
- No → **GO TO SECTION F.**
- Don't know → **GO TO SECTION F.**

E9. What procedures do you use to protect children with food allergies or other special dietary needs? (CHECK ALL THAT APPLY.)

- Separate tables
- Special sanitation procedures in the kitchen and/or dining area
- Special training for staff
- Signed statement from child's physician or other healthcare professional
- Staff inspect trays of children
- Menus are adapted for children with allergies or special dietary needs
- A team of parents, site/sponsor staff, health professionals and/or registered dietitians determines how best to address a child's dietary needs
- Accommodations are made on a case-by-case basis
- Other (PLEASE SPECIFY): _____

SECTION F: OTHER FOODS OFFERED

F1. Are extra foods provided at no cost to children to supplement the summer meal? "Extra foods" are not part of the reimbursable meal but they are served at the same time as the meal to provide larger portions.

- Yes
 No

F2. May adults receive summer meals at <SITE NAME>?

- Yes, and there is a charge for them
 Yes, and the adult meals are free
 No adult meals are served at the site

F3. Are a la carte foods sold to children at <SITE NAME>? A la carte foods are foods or beverages sold separately from the summer meal or snack, such as in a vending machine or a snack bar.

- Yes
 No → GO TO SECTION G.

F4. Where are a la carte foods sold at <SITE NAME>? (CHECK ALL THAT APPLY.)

- In the meal service area
 Away from the meal service area
 In vending machines
 In snack bars
 Other (PLEASE SPECIFY): _____

F5. What types of a la carte foods are available? (CHECK ALL THAT APPLY.)

- Prepared entrees (e.g., pizza, hamburgers, burritos)
- Prepared non-entrée food (e.g., French fries, onion rings)
- Fruits
- Vegetables
- Breads/grain products (e.g., bagels, pretzels, crackers)
- Meats/meat alternates (e.g., nuts, nut butters, cheese, yogurt)
- Baked goods/desserts (e.g., cookies, cakes, pastries)
- Frozen desserts (e.g., ice cream, popsicles)
- Snacks (e.g., chips, energy bars, jerky)
- Candy
- Milk
- 100% juice
- Water
- Beverages other than milk, 100% juice or water (e.g., sports drinks, juice drinks)
- Other (PLEASE SPECIFY): _____

SECTION G: SITE EQUIPMENT AND STORAGE FACILITIES

G1. Which of the following cooking equipment is available at <SITE NAME>? This equipment may or may not be used in preparing summer meals. (CHECK ALL THAT APPLY.)

- Domestic Range with oven
- Commercial Range with oven
- Domestic microwave oven
- Commercial microwave oven
- Convection oven
- Grill(s)
- Other (PLEASE SPECIFY): _____
- This site does not have cooking equipment

G2. What type of freezer food storage capacity is available at <SITE NAME>? This equipment may or may not be used in preparing summer meals. (CHECK ALL THAT APPLY.)

- Non-commercial freezer
- Small (single section) commercial reach-in freezer
- Medium (double section) commercial reach-in freezer
- Large (triple section) commercial reach-in freezer
- Walk-in commercial freezer
- Other (PLEASE SPECIFY): _____
- This site does not have freezer food storage capacity

H3. How long have you worked at <SITE NAME>?

_____ Number years or _____ Number months

H4. What is the highest level of school you have completed? (CHECK ONLY ONE.)

- Less than high school
- High school graduate – high school diploma or the equivalent (for example, GED)
- Some college but not degree
- Associate degree
- Bachelor's degree (for example, BA, BS)
- Advanced or post-graduate degree (for example, Master's degree, MD, DDS, JD, PhD, EdD)

PROGRAMMER: Module below to be stored separately from the survey data above but with linking on ID possible.

SECTION I: FUTURE FOLLOWUP

I1. Would you be available for a follow-up telephone interview in the next month or so? The interview will take about an hour.

- No
- Yes. Please let us know your contact information.

HOME NUMBER: _____

CELL PHONE NUMBER: _____

EMAIL ADDRESS: _____

I2. Because phone numbers and email addresses change over time, please tell us the name and contact information of two people who will know how to find you.

Contact Person # 1: _____

Phone Number for Contact Person # 1: _____

Contact Person # 2: _____

Phone Number for Contact Person # 2: _____

Thank you for participating in the Summer Meals Study