

**EVALUATION OF THE CANNED, FROZEN, OR DRIED FRUITS AND
VEGETABLES PILOT PROJECT IN THE FRESH FRUIT AND
VEGETABLE PROGRAM (FFVP-CFD)**

STATE CHILD NUTRITION (CN) DIRECTOR SURVEY

FOR PILOT AND NON-PILOT STATES

Contact Information:

Your Name: _____

State: _____

Telephone number: _____

FFVP-CFD PILOT STATES ONLY: This survey, part of the **Evaluation of the Canned, Frozen, or Dried Fruits and Vegetables Pilot Project in the Fresh Fruit and Vegetable Program** (FFVP-CFD), is being conducted for the USDA Food and Nutrition Service. Your responses, along with those from other States, districts and schools in the pilot project, will be used to address study objectives, including satisfaction with FFVP- the pilot and the Fresh Fruit and Vegetable Program. Your State has been selected as part of the evaluation.

NON-PILOT STATES ONLY: This survey is being conducted for the USDA Food and Nutrition Service. Your responses, along with those from other States will be used to address study objectives, including satisfaction with the Fresh Fruit and Vegetable Program.

ALL STATES: Your answers will be kept strictly confidential to the extent of the law and your name will not be identified with any answers you give. The data files that result from this study will not contain any personal identifiers or any characteristics that would make it possible for specific schools to be identified. Your State has been selected as part of the evaluation.

We are interested in learning more about your State's, districts' and schools' participation in the FFVP during the 2014-2015 school year. **Please consult with other personnel in your State if needed to complete this questionnaire.**

According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not 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 15 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.

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

A. CHARACTERISTICS OF FFVP SCHOOLS

The following questions are about the application and selection of SFAs and schools to participate in the Fresh Fruit and Vegetable Program (FFVP) in the 2014-2015 school year (SY).

A1. How many SFAs submitted applications to participate in the FFVP for the 2014-2015 SY?

|_|_|_| SFAs

Don't know

A2. Please provide your best estimates for characteristics of SFAs with elementary schools that applied for the FFVP in SY 2014-2015. Among those SFAs.....

RECORD ONE ANSWER IN EACH COLUMN

	Largest SFA	Smallest SFA
a) How many schools are in the largest and smallest SFAs?	_ _ _ <input type="checkbox"/> Don't know	_ _ _ <input type="checkbox"/> Don't know
b) How many schools applied for the FFVP in the largest and smallest SFAs?	_ _ _ <input type="checkbox"/> Don't know	_ _ _ <input type="checkbox"/> Don't know
c) How many students were in the largest school that was included in the application of the largest and smallest SFAs?	_ , _ _ _ <input type="checkbox"/> Don't know	_ , _ _ _ <input type="checkbox"/> Don't know
d) How many students were in the smallest school that was included in the application of the largest and smallest SFAs?	_ , _ _ _ <input type="checkbox"/> Don't know	_ , _ _ _ <input type="checkbox"/> Don't know
e) How many years did the largest and smallest SFAs participate in the FFVP, prior to SY 2014-2015?	_ _ <input type="checkbox"/> Don't know	_ _ <input type="checkbox"/> Don't know

A3. Did your State have a target for the average dollar amount allocated per student within the range of \$50- \$75 for SY 2014-2015, based on the total FFVP funds available for distribution to schools?

1 Yes
 0 No → **GO TO A4**

A3a. What was your State's final target for the average dollar amount allocated per student for SY 2014-2015 for FFVP only?

\$ |_|_|. |_|_| AVERAGE PER STUDENT

A4. The Food and Nutrition Service requested applications to the pilot project for canned, frozen, or dried fruits and vegetables in the Fresh Fruit and Vegetable Program (FFVP-CFD). Did your State apply to participate in the pilot project?

1 Yes
 0 No → **GO TO A6, MIDDLE OF PAGE 3**

→

A5. What steps, if any, did you take to determine whether School Food Authorities (SFAs) in the State were likely to be eligible for the FFVP-CFD pilot project?

CHECK ALL THAT APPLY

- 1 Reviewed SFA data, such as percentage of students approved for free/reduced-price meals
- 2 Reviewed FFVP claims from previous year(s)
- 3 Reviewed other State level data, such as geographic location of schools
- 4 Discussion with SFA directors about schools with challenges accessing fresh fruits and vegetables
- 5 Discussion with other State partners about schools or geographic areas with challenges accessing fresh fruits and vegetables
- 6 Other (*specify*): _____
- 0 None

NOW GO TO B1, ON PAGE 4

A6. Please indicate whether each of the following was a major factor, a minor factor, or not a factor contributing to your State’s decision **not** to apply for the FFVP-CFD pilot for SY 2014-2015.

	MARK ONE BOX IN EACH ROW		
	Major Factor	Minor Factor	Not a Factor
a) The State did not have enough information about the application process	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3
b) The State did not have cooperation from SFAs, principals, or other officials	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3
c) No SFAs in the State applied for the FFVP-CFD	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3
d) SFAs did not prepare adequate implementation plans for the FFVP-CFD	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3
e) The State did not receive complete and accurate applications	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3
f) The timeline to submit applications was too short	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3
g) Schools have adequate access to fresh fruits and vegetables through distribution/delivery and do not need the pilot project	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3
h) Schools have adequate facilities to store fresh fruits and vegetables and do not need the pilot project	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3
i) Schools can afford to obtain fresh fruits and vegetables and do not need the pilot project	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3
j) Foodservice staff have the skills to prepare fresh fruits and vegetables for use in the FFVP and do not need the pilot project	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3
k) Requirements of participation in the pilot project were not appealing	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3
l) List any major factor not specified above	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3

**IF YOUR STATE DID NOT APPLY FOR THE FFVP-CFD PILOT FOR SY 2014-2015, YOU
 HAVE FINISHED COMPLETING THE SURVEY THANK YOU !!**

B. SELECTION OF FFVP-CFD SCHOOLS

NOTE: *The following questions refer to the time period covered by the most recent FFVP applications for SY 2014-2015.*

B1. Did your State identify School Food Authorities (SFAs) as high priority for the FFVP-CFD or identify SFAs with schools that were likely to be eligible for the FFVP-CFD?

CHECK ALL THAT APPLY

- 1 Yes, we identified high priority SFAs
- 2 Yes, we identified SFAs with schools that were likely to be eligible for the FFVP-CFD
- 0 No → **GO TO B3**

B2. How did you identify these SFAs as high priority or likely to be eligible for the FFVP-CFD?

CHECK ALL THAT APPLY

- 1 Reviewed SFA data, such as percentage of students approved for free/reduced-price meals
- 2 Reviewed FFVP claims from previous year(s)
- 3 Reviewed other State level data, such as geographic location of schools
- 4 Discussion with SFA directors about schools with challenges accessing fresh fruits and vegetables
- 5 Discussion with other State partners about schools or geographic areas with challenges accessing fresh fruits and vegetables
- 6 Other (*specify*)

B3. How did your State assess interest in the FFVP-CFD? Please indicate whether your State engaged in or did not engage in each activity or if your State did not engage in the activity.

	MARK ONE BOX IN EACH ROW	
	Engaged in activity	Did not engage in activity
a) Held teleconference(s) during which SFAs could learn about the FFVP-CFD	<input type="checkbox"/> 1	<input type="checkbox"/> 0
b) Emailed or mailed information about the FFVP-CFD to SFAs	<input type="checkbox"/> 1	<input type="checkbox"/> 04
c) Held in person meeting(s) where SFAs could learn about the FFVP-CFD	<input type="checkbox"/> 1	<input type="checkbox"/> 0
d) State personnel visited SFAs to discuss the FFVP-CFD	<input type="checkbox"/> 1	<input type="checkbox"/> 0
e) Other (<i>specify</i>): _____	<input type="checkbox"/> 1	<input type="checkbox"/> 0

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B4. Please indicate whether each of the following was a major factor, a minor factor, or not a factor contributing to your State's decision to apply to the FFVP-CFD for SY 2014-2015.

MARK ONE BOX IN EACH ROW

	Major Factor	Minor Factor	Not a Factor
a) Schools do not have adequate access to fresh fruits and vegetables through distribution/delivery	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3
b) Schools are geographically isolated	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3
c) Schools do not have adequate facilities to store fresh fruits and vegetables	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3
d) Schools cannot afford to obtain fresh fruits and vegetables	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3
e) Foodservice staff do not have the skills to prepare fresh fruits and vegetables for use in the FFVP	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3
f) Difficulty identifying vendors or suppliers that can reliably supply fresh fruits and vegetables to use in the FFVP	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3
g) Schools cannot afford staff to prepare fresh fruits and vegetables for use in the FFVP	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3
h) List any major factor not specified above _____			

B5. Who contributed to the decision to apply for the FFVP-CFD pilot?

CHECK ALL THAT APPLY

- 1 State Child Nutrition agency
- 2 SFA director or other SFA-level staff
- 3 School superintendent or other school district administrator
- 4 Food service managers
- 5 Principals
- 6 Teachers
- 7 Parents or parent groups
- 8 Outside partner(s), such as a local public health director

B6. In addition to the Federal requirements, what other criteria did your State consider when selecting schools to apply for the FFVP-CFD?

CHECK ALL THAT APPLY

- 1 Number of schools applying from the same SFA
- 2 School size (enrollment)
- 3 Operates under Provision 1, 2, 3 or Community Eligibility Provision
- 4 Grades served by school
- 5 Lack of on-site kitchen
- 6 Lack of on-site refrigerator suitable for FFVP use
- 7 Percentage of students approved for free/reduced-price meals
- 8 Satisfactory performance in operating FFVP in the previous school year
- 9 Number of days per week/month for FFVP-CFD to be offered
- 10 Geographic isolation
- 11 The State did not consider any other criteria in addition to Federal requirements
- 12 Other (*specify*)

B7. Did your State have **SFAs** that applied but were not included in the federal application?

- 1 Yes
- 0 No → **GO TO B7b**

B7a. Please provide your best estimates for characteristics of SFAs with elementary schools that applied for the FFVP in SY 2014-2015 but were not included in the federal application. Among those SFAs that were not included.....

NOTE: If only one SFA was not included, please record responses in the column for the largest SFA and mark smallest SFA as not applicable.

RECORD ONE ANSWER IN EACH COLUMN

	Largest SFA	Smallest SFA
1) How many schools are in the largest and smallest SFAs?	 <input type="checkbox"/> a Don't know	 <input type="checkbox"/> a Don't know/Not applicable
2) How many schools applied for the FFVP in the largest and smallest SFAs?	 <input type="checkbox"/> a Don't know	 <input type="checkbox"/> a Don't know/Not applicable
3) How many students were in the largest school that was included in the application of the largest and smallest SFAs?	 <input type="checkbox"/> a Don't know	 <input type="checkbox"/> a Don't know/Not applicable
4) How many students were in the smallest school that was included in the application of the largest and smallest SFAs?	 <input type="checkbox"/> a Don't know	 <input type="checkbox"/> a Don't know/Not applicable
5) How many years did the largest and		

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smallest SFAs participate in the FFVP, prior to SY 2014-2015?	<input type="checkbox"/> d Don't know	<input type="checkbox"/> d Don't know/Not applicable
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B7b. Did your State have **schools** that applied but were not included in the federal application?

1 Yes
 0 No → **GO TO B8**

B7c. Please provide your best estimates for characteristics of elementary schools that applied for the FFVP in SY 2014-2015 but were not included in the federal application. Among those schools that were not included.....

1) How many schools applied but were not included in the federal application?	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="checkbox"/> d Don't know
2) How many students were in the largest school that was not included in the federal application?	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="checkbox"/> d Don't know
3) How many students were in the smallest school that was not included in the federal application?	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="checkbox"/> d Don't know

B8. What was your State's final target for the average dollar amount allocated per student for SY 2014-2015 for schools participating in the FFVP-CFD pilot?

\$ AVERAGE PER STUDENT
 d Don't know → **GO TO B9**

B8a. Did your State change the target for the average FFVP-CFD dollar amount allocated per student after it received applications from schools for the pilot?

1 Yes
 0 No → **GO TO B9**

B8b. How did the target for the average FFVP-CFD dollar amount per school change?

1 Increased
 2 Reduced

B9. Was the number of schools applying for the FFVP-CFD less than, the same as, or more than your State expected?

1 Less than expected
 2 Same as expected
 3 More than expected
 4 Did not have an expectation

C. STATE FFVP-CFD GUIDANCE AND OVERSIGHT

C1. In which of the following areas, did your State modify or plan to modify any FFVP *State-specific* guidance or recommended practices for the CFD pilot project?

CHECK ALL THAT APPLY

- 1 Implementation plans
- 2 Partnerships
- 3 Farm-to-cafeteria or farm-to-school projects
- 4 Purchasing cooperatives
- 5 Promoting the FFVP-CFD to students and parents
- 6 Selecting and purchasing canned, frozen, or dried fruits and vegetables
- 7 Serving fruits and vegetables (distribution methods, time of day, portion sizes)
- 8 Role of teachers in FFVP-CFD
- 9 Food safety
- 10 Nutrition education and promotion in connection with the FFVP-CFD
- 11 Performance and expenditure reporting
- 0 None of the above—only use FNS policies and recommended practices

C2. Did your State modify or plan to modify nutrition education curricula or materials for use in conjunction with the FFVP-CFD pilot?

- 1 Yes
 0 No → **GO TO C3**

C2a. Which of the following topics were included in these nutrition education curricula or materials?

CHECK ALL THAT APPLY

- 1 Role of canned, frozen, or dried fruits and vegetables in a complete diet
- 2 Eat lower fat foods more often
- 3 Healthy weight and overweight
- 4 Other (*specify*)

C3. Please indicate which monitoring and technical assistance activities for the FFVP-CFD your State has provided since the school year began, and which activities your State *plans* to provide or repeat before the end of SY 2014-2015.

MARK ALL THAT APPLY IN EACH ROW

	Activities State Has Provided	Activities State <i>Plans</i> to Provide or Repeat
a) In-person training or conference	<input type="checkbox"/> 1	<input type="checkbox"/> 2
b) Web/conference-call training	<input type="checkbox"/> 1	<input type="checkbox"/> 2
c) Periodic web meetings/conference calls	<input type="checkbox"/> 1	<input type="checkbox"/> 2
d) Help line/assistance on-call from State	<input type="checkbox"/> 1	<input type="checkbox"/> 2

e) Help line/assistance on-call from partners	<input type="checkbox"/> 1	<input type="checkbox"/> 2
f) Review of financial records supporting claims	<input type="checkbox"/> 1	<input type="checkbox"/> 2

D. NON-FEDERAL PARTNERSHIPS

D1. Does your State have any State-level partnerships with non-federal entities for the CFD pilot project? Do not include partners that you work with only for the standard FFVP.

- 1 Yes
 0 No → **GO TO D2**

D1a. Please check all types of partners that work with your State to carry out the FFVP-CFD.

CHECK ALL THAT APPLY

- 1 Cooperative Extension Service
- 2 State or Tribal government agency (e.g. health department, agriculture department)
- 3 Universities, colleges, or other higher education institutions
- 4 Food wholesalers or other food distributors
- 5 Supermarkets, grocery stores, or other retail stores
- 6 City, county or other local government agency (e.g. health department, agriculture department)
- 7 Nutrition trade associations (e.g. Academy of Nutrition and Dietetics, American School Nutrition Association)
- 8 Produce associations/commodity groups (e.g. United Fresh Produce Association)
- 9 Healthcare providers, including hospitals and clinics; doctors, nurses, nutritionists, dietitians/dietetic interns, or other clinicians
- 10 Produce for Better Health
- 11 Farmers' markets
- 12 Community action agency, food bank, or other community/faith-based organization
- 13 Vocational clubs, (e.g. Future Farmers of America, 4H)
- 14 Health associations (e.g. State or National affiliates of the American Cancer, Diabetes, or Heart Associations)
- 15 Other (specify) _____

E. FFVP-CFD ADMINISTRATIVE COSTS

E1. In the first column, please indicate how often your State plans to collect the following information, if at all, from CFD pilot schools following January 1, 2015. If your State plans to collect the information, please indicate in the second column whether it will be collected more often, less often, or with the same frequency as for the FFVP.

Information Item	MARK ONE BOX IN EACH ROW					MARK ONE BOX IN EACH ROW		
	Column 1 How often does State plan to collect?					Column 2 More or less often than FFVP?		
	Not collected	Once	Twice	Three or Four times	More than four times	More often than FFVP	Same as FFVP	Less often than FFVP
a) Operating cost such as food, foodservice staff labor, and supplies	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3
b) Breakdown of food cost by broad category (such as canned, frozen, or dried fruits or vegetables)	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3
c) Food purchase cost detail by item (such as total spent on canned peaches, frozen peas, etc.)	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3
d) Administrative cost such as administrative labor and equipment	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3

E2. Are the funds your State plans to spend on State administration for the FFVP-CFD higher, lower, or about the same as what you would have spent if schools were only taking part in the FFVP?

- 1 Higher
- 2 About the same
- 3 Lower
- d Don't know

THANK YOU FOR COMPLETING THIS SURVEY!