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**Evaluation of the Canned, Frozen, or Dried FruitS and VegetableS PILOT Project in the Fresh Fruit and Vegetable Program (FFVP-CFD)**

**FOOD SERVICE MANAGER (FSM) SURVEY**

Contact Information:

Food Service Manager Name:

Telephone number:

District Name:

School Name(s):

Your responses, along with those from other food service managers in the pilot project, will be used to address study objectives, including satisfaction with the pilot and the Fresh Fruit and Vegetable Program. 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.

This survey is a part of the **Evaluation of the Canned, Frozen, or Dried Fruits and Vegetables Pilot Project in the Fresh Fruit and Vegetable Program** (FFVP-CFD) being conducted for the USDA Food and Nutrition Service. Your school has been selected as part of the evaluation. We are interested in learning more about your school’s participation in the FFVP during the 2014-2015 school year. **Please consult with other personnel in your school 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 10 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.*

Your elementary school provides **fruits and vegetables** to students as snacks—separate from the school meals (breakfast or lunch). Below are statements or questions about the **Fresh Fruit and Vegetable Program (FFVP).** Thinking about the **FFVP [FALL INSERT this school year] / [SPRING INSERT since January 1, 2015],** please mark (**) only one response to each statement or question, unless instructed otherwise.

A1. This section asks your opinion about different aspects of offering fruit and vegetable snacks in your school’s Fresh Fruit and Vegetable Program (FFVP). For each statement please indicate whether you strongly agree, somewhat agree, somewhat disagree, or strongly disagree.

|  |  |
| --- | --- |
|  | **MARK ONE BOX IN EACH ROW** |
|  | **Strongly Agree** | **Somewhat Agree** | **Somewhat Disagree** | **Strongly Disagree** | **Don’t Know or NotApplicable** |
| a) Students like the free **fruit** snacks. | [ ] 1 | [ ] 2 | [ ] 3 | [ ] 4 | [ ] 5 |
| b) Students like the free **vegetable** snacks. | [ ] 1 | [ ] 2 | [ ] 3 | [ ] 4 | [ ] 5 |
| c) I wish **more students** took the free **fruit snacks**. | [ ] 1 | [ ] 2 | [ ] 3 | [ ] 4 | [ ] 5 |
| d) I wish **more students** took the free **vegetable** snacks. | [ ] 1 | [ ] 2 | [ ] 3 | [ ] 4 | [ ] 5 |
| e) Students eat **more fruits and vegetables at school** on FFVP days.  | [ ] 1 | [ ] 2 | [ ] 3 | [ ] 4 | [ ] 5 |
| f) I am satisfied with how we **distribute** fruit and vegetable snacks to students. | [ ] 1 | [ ] 2 | [ ] 3 | [ ] 4 | [ ] 5 |
| g) I think the FFVP is **not worth the effort it takes.** | [ ] 1 | [ ] 2 | [ ] 3 | [ ] 4 | [ ] 5 |
| h) I would like the FFVP to **continue** in my school. | [ ] 1 | [ ] 2 | [ ] 3 | [ ] 4 | [ ] 5 |
| [**Spring only**] |  |  |  |  |  |
| i) I wish the FFVP offered **fresh fruits and vegetables** only. | [ ] 1 | [ ] 2 | [ ] 3 | [ ] 4 | [ ] 5 |
| j) Students generally like **fresh fruit and vegetable snacks** rather than those that are canned, frozen, or dried. | [ ] 1 | [ ] 2 | [ ] 3 | [ ] 4 | [ ] 5 |
| k) Students generally like **canned fruit and vegetable snacks** rather than those that are fresh, frozen, or dried. | [ ] 1 | [ ] 2 | [ ] 3 | [ ] 4 | [ ] 5 |
| l) Students generally like a **mix of fresh, canned, frozen, or dried fruit and vegetable snacks**. | [ ] 1 | [ ] 2 | [ ] 3 | [ ] 4 | [ ] 5 |
| m) I would like the changes made this Spring in the FFVP to **continue** in my school. | [ ] 1 | [ ] 2 | [ ] 3 | [ ] 4 | [ ] 5 |

A2. Now, please think about just the the FFVP snacks served in the cafeteria (excluding school meals). If your school does not serve fruit and vegetables snacks in the cafeteria (or other food service area), please check “Don’t know or not applicable”.

|  |  |
| --- | --- |
|  | **MARK ONE BOX IN EACH ROW** |
|  | **All ormost(>75%)** | **Much(50-75%)** | **Some(25-49%)** | **Little ornone(<25%)** | **Don’t knowor NotApplicable**  |
| a). How much of the **fruits** provided in the FFVP do students usually eat? | [ ] 1 | [ ] 2 | [ ] 3 | [ ] 4 | [ ] 5 |
| b). How much of the **vegetables** provided in the FFVP do student usually eat? | [ ] 1 | [ ] 2 | [ ] 3 | [ ] 4 | [ ] 5 |

A3. During [FALL INSERT this school year]/ [SPRING INSERT Since January 1, 2015] we would like to know how **food service staff** may have **promoted** the FFVP.

 For each item listed, please indicate in Column A if you engage in this promotional activity, then if yes, in Column B record how many days per week or days per month you engage in this activity.

|  |  |  |
| --- | --- | --- |
|  | Column ADo you engage in this activity?  | Column BIf yes, please indicate how many days per week or days per month is spent on each. |
|  | **NO** | **YES** |  |
| a) Fliers sent home | [ ] 0  | [ ] 1 🡺 | |\_\_\_|\_\_\_| DAYS PER WEEK **OR** |\_\_\_|\_\_\_| DAYS PER MONTH |
| b) Taste tests for students | [ ] 0  | [ ] 1 🡺 | |\_\_\_|\_\_\_| DAYS PER WEEK **OR** |\_\_\_|\_\_\_| DAYS PER MONTH |
| d) Nutrition education classes/ instruction to students | [ ] 0  | [ ] 1 🡺 | |\_\_\_|\_\_\_| DAYS PER WEEK **OR** |\_\_\_|\_\_\_| DAYS PER MONTH |
| e) Verbal encouragement to students to eat the fruit and vegetable snacks | [ ] 0  | [ ] 1 🡺 | |\_\_\_|\_\_\_| DAYS PER WEEK **OR** |\_\_\_|\_\_\_| DAYS PER MONTH |
| f) Loudspeaker announcements | [ ] 0  | [ ] 1 🡺 | |\_\_\_|\_\_\_| DAYS PER WEEK **OR** |\_\_\_|\_\_\_| DAYS PER MONTH |
| g) Information to teachers on fruits and vegetables | [ ] 0  | [ ] 1 🡺 | |\_\_\_|\_\_\_| DAYS PER WEEK **OR** |\_\_\_|\_\_\_| DAYS PER MONTH |

A3a. How often do you change posters or displays in the cafeteria or other food service area to promote fruits and vegetables?

 1□ Weekly

 2□ Monthly

 3□ Don’t use posters or displays

A4. Which of the following factors is a **challenge** to providing fruit and vegetable snacks in the FFVP? Please indicate if it is a major challenge, a minor challenge or not a challenge at all.

|  | **MARK ONE BOX IN EACH ROW** |
| --- | --- |
|  | **Major Challenge** | **Minor Challenge** | **Not a Challenge** | **Don’t Know** |
| a) **Students don’t like** fruits and vegetables | [ ] 1 | [ ] 2 | [ ] 3 | [ ] 4 |
| b) **Students** **waste** too much | [ ] 1 | [ ] 2 | [ ] 3 | [ ] 4 |
| c) Students **don’t like to try new** fruits and vegetables | [ ] 1 | [ ] 2 | [ ] 3 | [ ] 4 |
| d) **Class time interrupted or taken away** from student learning | [ ] 1 | [ ] 2 | [ ] 3 | [ ] 4 |
| e) **Messy** to distribute and clean up fruit and vegetable snacks | [ ] 1 | [ ] 2 | [ ] 3 | [ ] 4 |
| f) Inadequate **food service staff training or information** | [ ] 1 | [ ] 2 | [ ] 3 | [ ] 4 |
| g) Inadequate **food service staff time** | [ ] 1 | [ ] 2 | [ ] 3 | [ ] 4 |
| h) Inadequate **kitchen facilities/storage space** | [ ] 1 | [ ] 2 | [ ] 3 | [ ] 4 |
| i) Inadequate **quality** of produce | [ ] 1 | [ ] 2 | [ ] 3 | [ ] 4 |
| j) Inadequate **variety** of fruits and vegetables offered  | [ ] 1 | [ ] 2 | [ ] 3 | [ ] 4 |
| k) Inadequate **amounts** of fruit and vegetable snacks (for example, running out of servings for students, offering smaller portions or tastes instead of a larger portion size)  | [ ] 1 | [ ] 2 | [ ] 3 | [ ] 4 |
| l) **Perishability** of fresh produce | [ ] 1 | [ ] 2 | [ ] 3 | [ ] 4 |
| m) Program **requirements/regulations** | [ ] 1 | [ ] 2 | [ ] 3 | [ ] 4 |

A5. Which of the following factors is a **benefit** to providing fruit and vegetable snacks in the FFVP? Please indicate if it is a major benefit, a minor benefit or not a benefit at all.

|  | **MARK ONE BOX IN EACH ROW** |
| --- | --- |
|  | **Major Benefits** | **Minor Benefits** | **Not aBenefit** | **Don’t Know** |
| a) Students eat **more** fruits and vegetables | [ ] 1 | [ ] 2 | [ ] 3 | [ ] 4 |
| b) Students are **more willing to try new foods** | [ ] 1 | [ ] 2 | [ ] 3 | [ ] 4 |
| c) Students **learn about healthy foods** | [ ] 1 | [ ] 2 | [ ] 3 | [ ] 4 |
| d) Students eat **fewer unhealthy foods** | [ ] 1 | [ ] 2 | [ ] 3 | [ ] 4 |
| e) Improved **student behavior** | [ ] 1 | [ ] 2 | [ ] 3 | [ ] 4 |

[FALL ONLY]

A6. Did you contribute to the decision to apply for the *Canned, Frozen, or Dried Fruits and Vegetables Pilot Project in the FFVP* for your school?

[ ] 1 Yes

[ ] 0 No

[SPRING ONLY]

A7. Do you think offering canned, frozen, and dried fruits and vegetables in the FFVP helped …

|  |  |
| --- | --- |
|  | **MARK ONE BOX IN EACH ROW** |
|  | **Yes** | **No** | **Not Sure/Don’t Know** |
| a) Manage your school’s **cost of offering the FFVP**? | [ ] 1 | [ ] 0 | [ ] 3 |
| b) Improve the **quality** of fruit and vegetable snacks? | [ ] 1 | [ ] 0 | [ ] 3 |
| c) Increase **how often** your school offers fruit and vegetable snacks? | [ ] 1 | [ ] 0 | [ ] 3 |
| d) Improve the **quantity** of fruit and vegetable snacks? | [ ] 1 | [ ] 0 | [ ] 3 |
| e) Improve the **variety** of fruits and vegetables you are able to offer? | [ ] 1 | [ ] 0 | [ ] 3 |
| f) Improve **students’ acceptance of and satisfaction** with the program? | [ ] 1 | [ ] 0 | [ ] 3 |
| g) Improve the **overall FFVP program**? | [ ] 1 | [ ] 0 | [ ] 3 |

[SPRING ONLY]

A8. Have there been **any changes in FFVP operations** (number of days per week or number of times per day) in your school since CFD implementation beginning **January 1, 2015 as compared to FFVP operations in Fall 2014**?

[ ] 1 Yes

[ ] 0 No 🡺 **GO TO A.9**

A8.1. Since CFD implementation on January 1, 2015, has the **time of day** FFVP is offered changed?

 [ ] 1 Earlier time of day

 [ ] 2 Later time of day

[ ] 3 No change🡺 **GO TO A8.3**

A8.2Why do you use this timing for CFD?

 [ ] 1 Convenience

 [ ] 2 Delivery schedule

 [ ] 3 Food service staff availability

 [ ] 4 Limited availability of fresh produce

A8.3 Has the number of **days per week** FFVP is offered changed?

 [ ] 1 More days

 [ ] 2 Fewer days

[ ] 3 No change 🡺 **GO TO A8.5**

A8.4 Why did you make this change?

 [ ] 1 Convenience

 [ ] 2 Delivery schedule

 [ ] 3 Food service staff availability

 [ ] 4 Limited availability of fresh produce

A8.5Has the **number of times per day** FFVP is offered changed?

 [ ] 1 More times per day

 [ ] 2 Fewer times per day

[ ] 3 No change 🡺**GO TO A9**

A8.6 Why do you use this timing for CFD**?**

 [ ] 1 Convenience

 [ ] 2 Delivery schedule

 [ ] 3 Food service staff availability

 [ ] 4 Limited availability of fresh produce

[SPRING ONLY]

A9.Which one statement best reflects your opinion of what you would like to happen in the FFVP for the next school year?

[ ] 1 I think that the FFVP should offer **only fresh** fruit and vegetable snacks.

[ ] 2 I think that the FFVP should offer **only canned, frozen, or dried** fruits and vegetables as free snacks to students.

[ ] 3 I think schools should have the option to **serve a mix** of fresh, frozen, and dried fruits and vegetables as free snacks to students.

[ ] 4 I do not have an opinion on the types of fruits and vegetables offered, but **want to see the program continue**.

[ ] 5 I have **no opinion** on the FFVP.

A9.Is there anything you would like to share about the FFVP or the pilot?

**THANK YOU COMPLETING THIS SURVEY!**