# Child Nutrition Program Operations Study II (CNOPS II)

**2M Research Services, LLC**
**500 East Border Street, Suite 680**
**Arlington, TX 76010**

**Contract # AG-3198-C-15-0008**
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**January 23, 2021**

**Deliverable 1.2 Revised Data Collection Instruments:**

**SFA Survey**

# Child Nutrition Program Operations Study II

## CNOPS

### School Food Authority (SFA) Director
### Survey 2015-2016

### FOR PLANNING PURPOSES ONLY

### http://www.2mresearch.com/cnops2sfa

U.S. Department of Agriculture
Food and Nutrition Service

## INSTRUCTIONS FOR COMPLETING THE SURVEY

- Click the **"Save & Continue"** button to progress in the survey. You must click this button to save your responses. **If you cannot complete the survey in one sitting, simply close out of your browser.** Your answers will be saved, but you must remember to click the "Save & Continue" button to save the response to the current question before closing your browser.

- Click the **"Back"** button to go to the previous question. Please note that clicking the "Back" button will not save your response to the current question. You must first click the "Save & Continue" button to save your response.

- Use the **"Table of Contents"** on the left hand side of your page to navigate to different sections in the survey. To hide and unhide the "Table of Contents" click the icon with the three lines. Please note that **if you use the "Table of Contents" to navigate to a partially completed section you will be brought to the first incomplete question.** You can use the "back" button to navigate to previous questions.

- Depending on the staffing structure of your SFA, you may need input from other colleagues to respond to some questions in the survey. **If you need a colleague to complete a section of the survey, you should provide them with the same login credentials**. They do not need separate login credentials.

- **Avoid having multiple people logged into the survey at once**. Responses may not be recorded correctly if multiple users are logged in the survey at the same time.

- If you or a colleague are returning to finish your saved survey, the user will return to the point where you left off. You can use the "Table of Contents" menu to return to previous questions.

- **Use the buttons and links within the survey**. For example, using "Enter" on your keyboard or your browser's "Back" function may cause errors.

- **Questions will not always be numbered sequentially**, and some may be skipped because they do not apply to you.

- If you have any questions about the study or about completing this survey, please email support@2mresearch.com or call **1-866-465-7738 (toll-free)**.

Back (Button)

Begin your Survey (Button)

## CONTACT INFORMATION

**Before starting the survey please fill in the requested contact information below. If the information below is prefilled please review and update the information as necessary.**

Date: |__|__| / |__|__| / |__|__|__|__|
        Month    Day      Year

School District Name(s): _____

**Please fill in the contact information for the <u>SFA Director</u> below:**

Name:_____

Address:_____

City, State, Zip Code:_____

Phone Number:  (|__|__|__|) - |__|__|__| - |__|__|__|__|       (|__|__|__|__|__|)
               Area Code        Number             Extension

Email Address:_____

**If you are <u>not the SFA Director</u> please provide your name and contact information below:**

Name:_____

Address:_____

City, State, Zip Code:_____

Phone Number:  |__|__|__| - |__|__|__| - |__|__|__|__| |__|__|__|
               Area Code       Number      Extension

Email Address:_____

# 1. SCHOOL PARTICIPATION

This section includes questions about schools in your school food authority (SFA) participating in the National School Lunch Program (NSLP), School Breakfast Program (SBP), Child and Adult Care Food Program (CACFP) Afterschool At-risk Supper Program, and the Summer Food Service Program (SFSP).

For the next two questions, please record your responses separately for:

- **Elementary schools** (schools composed of any span of grades from kindergarten through 6th grade),
- **Middle or junior high schools** (schools that have no grade lower than 6 and no grade higher than 9), and
- **High schools** (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, include it in the "other schools" column and describe it briefly on the next page under question 1.1f.

1.1 Please answer the following questions for the <u>2015-2016</u> school year.

**IF NONE, PLEASE ENTER 0.**

|  | ELEMENTARY SCHOOLS | MIDDLE OR JUNIOR HIGHS | HIGH SCHOOLS | OTHER SCHOOLS | TOTAL |
|---|---|---|---|---|---|
| a. What is the total number of **schools** in your SFA?............... | \|__\|__\|__\| | \|__\|__\|__\| | \|__\|__\|__\| | \|__\|__\|__\| | FILLS WITH SUM |
| b. How many **schools** in your SFA are participating in both the School Breakfast Program (SBP) and the National School Lunch Program (NSLP)?........... | \|__\|__\|__\| | \|__\|__\|__\| | \|__\|__\|__\| | \|__\|__\|__\| | FILLS WITH SUM |
| c. How many **schools** in your SFA are participating in **SBP only**?......................................... | \|__\|__\|__\| | \|__\|__\|__\| | \|__\|__\|__\| | \|__\|__\|__\| | FILLS WITH SUM |
| d. How many **schools** in your SFA are participating in **NSLP only**?......................................... | \|__\|__\|__\| | \|__\|__\|__\| | \|__\|__\|__\| | \|__\|__\|__\| | FILLS WITH SUM |
| e. How many **schools** in your SFA are NOT participating in either SBP or NSLP?................. | \|__\|__\|__\| | \|__\|__\|__\| | \|__\|__\|__\| | \|__\|__\|__\| | FILLS WITH SUM |

1.1f. **Please identify the grade spans (lowest and highest grades) for each "other school" included in the previous question.**

_____

_____

**1.2** **Please answer the following questions for the <u>2014-2015</u> school year.**

**Record your responses separately for:**

- **Elementary schools** (schools composed of any span of grades from kindergarten through 6th grade),

- **Middle or junior high schools** (schools that have no grade lower than 6 and no grade higher than 9), and

- **High schools** (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, include it in the "other schools" column and describe it briefly on the next page under question 1.2f.**

> **1.2.1.** **If the number of schools participating (overall and in each program) for the 2014-2015 school year are the same as the 2015-2016 school year, click the box below and go to question 1.3.**
>
> ☐ Participating schools are the same in both school years

**IF NONE, PLEASE ENTER 0.**

| | ELEMENTARY SCHOOLS | MIDDLE OR JUNIOR HIGHS | HIGH SCHOOLS | OTHER SCHOOLS | TOTAL |
|---|---|---|---|---|---|
| a. What was the total number of **schools** in your SFA?.............. | \|__\|__\|__\| | \|__\|__\|__\| | \|__\|__\|__\| | \|__\|__\|__\| | FILLS WITH SUM |
| b. How many **schools** in your SFA participated in both the School Breakfast Program (SBP) and the National School Lunch Program (NSLP)?........... | \|__\|__\|__\| | \|__\|__\|__\| | \|__\|__\|__\| | \|__\|__\|__\| | FILLS WITH SUM |
| c. How many **schools** in your SFA participated in **SBP only**?........................................ | \|__\|__\|__\| | \|__\|__\|__\| | \|__\|__\|__\| | \|__\|__\|__\| | FILLS WITH SUM |
| d. How many **schools** in your SFA participated in **NSLP only**?........................................ | \|__\|__\|__\| | \|__\|__\|__\| | \|__\|__\|__\| | \|__\|__\|__\| | FILLS WITH SUM |
| e. How many **schools** in your SFA did NOT participate in either SBP or NSLP?................. | \|__\|__\|__\| | \|__\|__\|__\| | \|__\|__\|__\| | \|__\|__\|__\| | FILLS WITH SUM |

**1.2f.** **Please identify the grade spans (lowest and highest grades) for each "other school" included in the previous question.**

_____

_____

**The following questions deal with participation in the CACFP Afterschool At-Risk Supper Program during the <u>2015-2016</u> school year.**

**1.3     Do any schools in your SFA participate in the CACFP Afterschool At-Risk Supper Program?**

      ₁ ☐   Yes

      ₂ ☐   No        SKIP TO 1.5

**1.4     How many schools in your SFA <u>currently</u> participate as sponsors or sites in the CACFP Afterschool At-Risk Supper Program?**

NEW

*Please do not count schools that are expected to participate as sponsors or sites in the future.*

*A <u>sponsor</u> is an organization that has entered into an agreement with their administering State agencies to assume administrative and financial responsibilities for CACFP operations. Examples of sponsors include public or private nonprofit schools, private nonprofit organizations, public or private nonprofit camps, and units of local, municipal, county, tribal, or State government, including a School Food Authority.*

*A <u>site</u> is a physical location, approved by the State agency, where CACFP meals are served during a supervised time period. Examples of sites include child care centers, afterschool care programs, and schools.*

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**1.4.1    If your SFA is the only CACFP sponsor, please click the box below and enter 0 for the number of schools that participate as sponsors.**

      ☐   **SFA is the only CACFP sponsor**

---

| **IF NONE, PLEASE ENTER 0.** | NUMBER OF SPONSORS | NUMBER OF SITES |
|---|---|---|
| a. Of the [WEB PREFILL # FROM 1.1a] elementary schools, how many participate as sponsors or sites?............................................ | \|__\|__\|__\| | \|__\|__\|__\| |
| b. Of the [WEB PREFILL # FROM 1.1a] middle or junior high schools, how many participate as sponsors or sites?...................... | \|__\|__\|__\| | \|__\|__\|__\| |
| c. Of the [WEB PREFILL # FROM 1.1a] high schools, how many participate as sponsors or sites?............................................... | \|__\|__\|__\| | \|__\|__\|__\| |
| d. Of the [WEB PREFILL # FROM 1.1a] other schools, how many participate as sponsors or sites?............................................... | \|__\|__\|__\| | \|__\|__\|__\| |

| NEW | **Do any schools in your SFA <u>not</u> currently participating in the CACFP Afterschool At-Risk Supper Program intend to participate next year (school year 2016-2017)?** |

<sub>1</sub> ☐ Yes

<sub>2</sub> ☐ No         SKIP TO 1.7

<sub>d</sub> ☐ Don't know     SKIP TO 1.7

**1.6**     **Approximately how many additional schools plan to participate next year?**

NEW

|___|___|___| SCHOOLS

**1.7**     **Is your SFA or are any individual schools in your SFA using strategies to build awareness of the availability of the CACFP Afterschool At-Risk Supper Program among eligible student nonparticipants?**

NEW

<sub>1</sub> ☐ Yes

<sub>2</sub> ☐ No         SKIP TO 1.10

<sub>d</sub> ☐ Don't know     SKIP TO 1.10

**1.8**     **What strategies are being used to build awareness of the CACFP Afterschool At-Risk Supper Program specifically among eligible student nonparticipants in your schools?**

NEW

    **MARK ALL THAT APPLY**

<sub>1</sub> ☐ Mass Mailings

<sub>2</sub> ☐ Newsletters

<sub>3</sub> ☐ Social Media (i.e. Facebook, Twitter, YouTube)

<sub>4</sub> ☐ Public Service Announcements

<sub>5</sub> ☐ Texting Campaign

<sub>6</sub> ☐ USDA Materials (Flyers, Bookmarks, and Postcards)

<sub>7</sub> ☐ FNS Mapping Tools

<sub>8</sub> ☐ National Hunger Hotline

<sub>9</sub> ☐ Advertising at Family-Friendly Events

<sub>10</sub> ☐ Presentations to Faith-based Organizations

<sub>11</sub> ☐ Community Meetings

<sub>12</sub> ☐ Partnering with Local Agencies

<sub>13</sub> ☐ Other *(Specify)* _____

<sub>14</sub> ☐ None

**1.9** **Please select the strategies used in your SFA to promote the CACFP Afterschool At-Risk Supper Program to the <u>local community at large</u>.**

NEW

**MARK ALL THAT APPLY**

1 ☐ USDA Materials (Flyers, Bookmarks, and Postcards)

2 ☐ Advertising at Family-Friendly Events

3 ☐ Social Media

4 ☐ Public Service Announcements

5 ☐ Partnering with Local Agencies

6 ☐ Presentations to Faith-based Organizations

7 ☐ Other *(Specify)* _____

8 ☐ None

**The following questions deal with participation in the Summer Food Service Program during the <u>summer of 2015</u>.**

**1.10** **Did any schools in your SFA participate in the 2015 Summer Food Service Program?**

NEW

1 ☐ Yes

2 ☐ No      SKIP TO 1.12

**1.11** | **How many schools in your SFA participated as sponsors or sites in the Summer Food Service Program (SFSP) during the summer of 2015?**

[NEW]

> *A sponsor is an organization that has entered into an agreement with their administering State agencies to assume administrative and financial responsibilities for SFSP operations. Examples of sponsors include public or private nonprofit schools, private nonprofit organizations, public or private nonprofit camps, and units of local, municipal, county, tribal, or State government, including a School Food Authority.*
>
> *A site is a physical location, approved by the State agency, where SFSP meals are served during a supervised time period. Examples of sites include child care centers, afterschool care programs, and schools.*

> **1.11.1. If your SFA is the only SFSP sponsor, please click the button below and enter 0 for the number of schools that participate as SFSP sponsors.**
>
> ☐ **SFA is the only SFSP sponsor**

| **IF NONE, PLEASE ENTER 0.** | NUMBER OF SPONSORS | NUMBER OF SITES |
|---|---|---|
| a. Of the [WEB PREFILL # FROM 1.1a] elementary schools, how many participated as sponsors or sites?........................................ | \|__\|__\|__\| | \|__\|__\|__\| |
| b. Of the [WEB PREFILL # FROM 1.1a] middle or junior high schools, how many participated as sponsors or sites?.................. | \|__\|__\|__\| | \|__\|__\|__\| |
| c. Of the [WEB PREFILL # FROM 1.1a] high schools, how many participated as sponsors or sites?................................................ | \|__\|__\|__\| | \|__\|__\|__\| |
| d. Of the [WEB PREFILL # FROM 1.1a] other schools, how many participated as sponsors or sites?................................................ | \|__\|__\|__\| | \|__\|__\|__\| |

**1.12** | **Do any schools in your SFA that did not participate in the Summer Food Service Program in the summer of 2015 intend to participate in the program this summer (in 2016)?**

[NEW]

   ₁ ☐ Yes

   ₂ ☐ No           SKIP TO 1.14

   d ☐ Don't know     SKIP TO 1.14

**1.13** | **Approximately how many additional schools plan to participate this summer?**

[NEW]

\|__\|__\|__\| SCHOOLS

**1.14** | **Is your SFA or are any individual schools in your SFA using strategies to build awareness of the availability of Summer Food Service Program among eligible student nonparticipants?**

[NEW]

   ₁ ☐ Yes

   ₂ ☐ No           SKIP TO 1.16

   d ☐ Don't know     SKIP TO 1.16

**1.15** **What strategies are being used to build awareness of the Summer Food Service Program specifically among eligible student nonparticipants in your schools?**

[NEW]

**MARK ALL THAT APPLY**

1 ☐ Mass Mailings

2 ☐ Newsletters

3 ☐ Social Media (i.e. Facebook, Twitter, YouTube)

4 ☐ Public Service Announcements

5 ☐ Texting Campaign

6 ☐ USDA Materials (Flyers, Bookmarks, and Postcards)

7 ☐ FNS Mapping Tools

8 ☐ National Hunger Hotline

9 ☐ Advertising at Family-Friendly Events

10 ☐ Presentations to Faith-based Organizations

11 ☐ Community Meetings

12 ☐ Partnering with Local Agencies

13 ☐ FNS Summer Meal Site Finder

14 ☐ Other *(Specify)* _____

15 ☐ None

**1.16** **Please select the strategies used in your SFA to promote the Summer Food Service Program to the <u>local community at large</u>.**

[NEW]

**MARK ALL THAT APPLY**

1 ☐ USDA Materials (Flyers, Bookmarks, and Postcards)

2 ☐ Advertising at Family-Friendly Events

3 ☐ Social Media

4 ☐ Public Service Announcements

5 ☐ Partnering with Local Agencies

6 ☐ Presentations to Faith-based Organizations

7 ☐ Other *(Specify)* _____

8 ☐ None

# 2. STUDENT PARTICIPATION

This section includes questions about student enrollment and National School Lunch Program (NSLP) and School Breakfast Program (SBP) participation at the schools in your school food authority (SFA) during the **2015-2016** and **2014-2015** school years.

**Please record your responses separately for:**

- **Elementary schools:** (schools composed of any span of grades from kindergarten through 6th grade),
- **Middle or junior high schools**: (schools that have no grade lower than 6 and no grade higher than 9), and
- **High schools** (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 schools" column.**

**2.1.    Please answer below for the 2015-2016 school year.**

| IF NONE, PLEASE ENTER 0. | ELEMENTARY SCHOOLS | MIDDLE OR JUNIOR HIGHS | HIGH SCHOOLS | OTHER SCHOOLS |
|---|---|---|---|---|
| a. As of October 31, what was the total number of **students** enrolled in your SFA? *................................................................ | \|__\|__\|__\| | \|__\|__\|__\| | \|__\|__\|__\| | \|__\|__\|__\| |
| b. How many of the total enrolled **students** do not have access to SBP?*...................... | \|__\|__\|__\| | \|__\|__\|__\| | \|__\|__\|__\| | \|__\|__\|__\| |
| c. How many of the total enrolled **students** do not have access to NSLP?*.................... | \|__\|__\|__\| | \|__\|__\|__\| | \|__\|__\|__\| | \|__\|__\|__\| |
| d. How many of the total enrolled **students** were approved to receive free meals?........ | \|__\|__\|__\| | \|__\|__\|__\| | \|__\|__\|__\| | \|__\|__\|__\| |
| e. How many of the total enrolled **students** were approved to receive reduced price meals?........................................................ | \|__\|__\|__\| | \|__\|__\|__\| | \|__\|__\|__\| | \|__\|__\|__\| |
| f. What was the total number of **students** in attendance in October 2015?...................... | \|__\|__\|__\| | \|__\|__\|__\| | \|__\|__\|__\| | \|__\|__\|__\| |
| g. What was the total number of days that meals were served in October 2015?**....... | \|__\|__\|__\| | \|__\|__\|__\| | \|__\|__\|__\| | \|__\|__\|__\| |

\*    The total student enrollment should include prekindergarten and kindergarten students who attend school half day and may not have access to meals. Children attending a school that does not participate in the NSLP or the SBP should also be included in this count.

\*\*   If there were differences in the number of serving days among schools of the same type, provide the average number of serving days for each school type.

**2.2.** **Please answer below for the <u>2014-2015</u> school year.**

**Record your responses separately for:**

- **Elementary schools** (schools composed of any span of grades from kindergarten through 6th grade),
- **Middle or junior high schools** (schools that have no grade lower than 6 and no grade higher than 9), and
- **High schools** (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 schools" column.**

| **IF NONE, PLEASE ENTER 0.** | ELEMENTARY SCHOOLS | MIDDLE OR JUNIOR HIGHS | HIGH SCHOOLS | OTHER SCHOOLS |
|---|---|---|---|---|
| a. As of October 31, what was the total number of **students** enrolled in your SFA?*.................................................. | \|__\|__\|__\| | \|__\|__\|__\| | \|__\|__\|__\| | \|__\|__\|__\| |
| b. How many of the total enrolled **students** do not have access to SBP?*...................... | \|__\|__\|__\| | \|__\|__\|__\| | \|__\|__\|__\| | \|__\|__\|__\| |
| c. How many of the total enrolled **students** do not have access to NSLP?*.................... | \|__\|__\|__\| | \|__\|__\|__\| | \|__\|__\|__\| | \|__\|__\|__\| |
| d. How many of the total enrolled **students** were approved to receive free meals?........ | \|__\|__\|__\| | \|__\|__\|__\| | \|__\|__\|__\| | \|__\|__\|__\| |
| e. How many of the total enrolled **students** were approved to receive reduced price meals?........................................................... | \|__\|__\|__\| | \|__\|__\|__\| | \|__\|__\|__\| | \|__\|__\|__\| |
| f. What was the total number of **students** in attendance in October 2014?...................... | \|__\|__\|__\| | \|__\|__\|__\| | \|__\|__\|__\| | \|__\|__\|__\| |
| g. What was the total number of days that meals were served in October 2014?**....... | \|__\|__\|__\| | \|__\|__\|__\| | \|__\|__\|__\| | \|__\|__\|__\| |

\* The total student enrollment should include prekindergarten and kindergarten students who attend school half day and may not have access to meals. Children attending a school that does not participate in the NSLP or the SBP should also be included in this count.

\*\* If there were differences in the number of serving days among schools of the same type, provide the average number of serving days for each school type.

The following questions are about the number of schools meals claimed as full price, reduced price, or free during <u>2014-2015</u> and <u>2015-2016</u> school years under Provisions 1,2, 3, and the Community Eligibility Provision (CEP). The definitions for the mentioned provisions are provided below:

- **Provision 1—Reducing certification to once every two years**

- **Provision 2—Reducing certification to once every four years, with claiming based on derived percentages**

- **Provision 3—Reducing certification to once every four years, with claiming based on prior funding levels**

- **Community Eligibility Provision (CEP)—Eliminating household applications in high poverty local educational agencies (LEAs) and schools, with claiming based on direct certification percentages**

**Please record the number of student lunches and student breakfasts served, indicating whether they were full price, reduced price, or free. If your SFA operates under Provisions 1, 2, or 3 of the NSLP regulations or CEP, then you may indicate the number of meals claimed in each category. Provide this information for <u>2015-2016</u> and <u>2014-15</u> school year using October as the reference month.**

**2.3.** **Enter the number of student <u>breakfasts</u> that were claimed as full price, reduced price, and free breakfasts by school type for the <u>2015-2016</u> school year, using October 2015 as the reference month:**

**IF NONE, PLEASE ENTER 0.**

| STUDENT BREAKFASTS | ELEMENTARY SCHOOLS | MIDDLE OR JUNIOR HIGHS | HIGH SCHOOLS | OTHER SCHOOLS |
|---|---|---|---|---|
| a. What was the total number of full price breakfasts served/claimed? | \|__\|__\|__\| | \|__\|__\|__\| | \|__\|__\|__\| | \|__\|__\|__\| |
| b. What was the total number of reduced price breakfasts served/claimed?................ | \|__\|__\|__\| | \|__\|__\|__\| | \|__\|__\|__\| | \|__\|__\|__\| |
| c. What was the total number of free breakfasts served/claimed?......................... | \|__\|__\|__\| | \|__\|__\|__\| | \|__\|__\|__\| | \|__\|__\|__\| |

**2.4.** **Enter the number of student <u>lunches</u> that were claimed as full price, reduced price, and free lunches by school type for the <u>2015-2016</u> school year, using October 2015 as the reference month:**

**IF NONE, PLEASE ENTER 0.**

| STUDENT LUNCHES | ELEMENTARY SCHOOLS | MIDDLE OR JUNIOR HIGHS | HIGH SCHOOLS | OTHER SCHOOLS |
|---|---|---|---|---|
| a. What was the total number of full price lunches served/claimed? | \|__\|__\|__\| | \|__\|__\|__\| | \|__\|__\|__\| | \|__\|__\|__\| |
| b. What was the total number of reduced price lunches served/claimed?.................... | \|__\|__\|__\| | \|__\|__\|__\| | \|__\|__\|__\| | \|__\|__\|__\| |
| c. What was the total number of free lunches served/claimed?....................................... | \|__\|__\|__\| | \|__\|__\|__\| | \|__\|__\|__\| | \|__\|__\|__\| |

**2.5.** **Enter the number of student <u>breakfasts</u> that were claimed as full price, reduced price, and free breakfasts by school type for the <u>2014-2015</u> school year, using October 2014 as the reference month:**

**IF NONE, PLEASE ENTER 0.**

| STUDENT BREAKFASTS | ELEMENTARY SCHOOLS | MIDDLE OR JUNIOR HIGHS | HIGH SCHOOLS | OTHER SCHOOLS |
|---|---|---|---|---|
| a. What was the total number of full price breakfasts served/claimed? | \|__\|__\|__\| | \|__\|__\|__\| | \|__\|__\|__\| | \|__\|__\|__\| |
| b. What was the total number of reduced price breakfasts served/claimed?................ | \|__\|__\|__\| | \|__\|__\|__\| | \|__\|__\|__\| | \|__\|__\|__\| |
| c. What was the total number of free breakfasts served/claimed?........................ | \|__\|__\|__\| | \|__\|__\|__\| | \|__\|__\|__\| | \|__\|__\|__\| |

**2.6.** **Enter the number of student <u>lunches</u> that were claimed as full price, reduced price, and free lunches by school type for the <u>2014-2015</u> school year, using October 2014 as the reference month:**

**IF NONE, PLEASE ENTER 0.**

| STUDENT LUNCHES | ELEMENTARY SCHOOLS | MIDDLE OR JUNIOR HIGHS | HIGH SCHOOLS | OTHER SCHOOLS |
|---|---|---|---|---|
| a. What was the total number of full price lunches served/claimed? | \|__\|__\|__\| | \|__\|__\|__\| | \|__\|__\|__\| | \|__\|__\|__\| |
| b. What was the total number of reduced price lunches served/claimed?.................... | \|__\|__\|__\| | \|__\|__\|__\| | \|__\|__\|__\| | \|__\|__\|__\| |
| c. What was the total number of free lunches served/claimed?......................................... | \|__\|__\|__\| | \|__\|__\|__\| | \|__\|__\|__\| | \|__\|__\|__\| |

## 3. MEAL PRICES

**The next questions are about the meal prices for the <u>2015-2016</u> and <u>2014-2015</u> school years. When prompted, please record your responses separately for:**

- **Elementary schools** (schools composed of any span of grades from kindergarten through 6th grade),

- **Middle or junior high schools** (schools that have no grade lower than 6 and no grade higher than 9), and

- **High schools** (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 schools" column.**

**3.1.** **What prices did you charge for full price, reduced price, and adult <u>breakfasts</u> in your SFA at the beginning of the <u>2015-2016</u> school year?**

**If students are not charged for breakfast (for example, schools are operating under Provision 2, Provision 3, or Community Eligibility Provision (CEP), or another funding source covers the meal costs), breakfast is not served at the school type, or your SFA does not have the type of school, please check the appropriate box. If applicable, please still report the prices charged for adult breakfasts.**

| BREAKFAST PRICES | ELEMENTARY SCHOOLS | MIDDLE OR JUNIOR HIGHS | HIGH SCHOOLS | OTHER SCHOOLS |
|---|---|---|---|---|
| a. Full price breakfast............. | $ \|___\|.\|___\|___\| | $ \|___\|.\|___\|___\| | $ \|___\|.\|___\|___\| | $ \|___\|.\|___\|___\| |
| b. Reduced price breakfast..... | $ \|___\|.\|___\|___\| | $ \|___\|.\|___\|___\| | $ \|___\|.\|___\|___\| | $ \|___\|.\|___\|___\| |
| c. Breakfast is served at no cost to students at this type of school............................. | $_0$ ☐ | $_0$ ☐ | $_0$ ☐ | $_0$ ☐ |
| d. Adult breakfast................... | $ \|___\|.\|___\|___\| | $ \|___\|.\|___\|___\| | $ \|___\|.\|___\|___\| | $ \|___\|.\|___\|___\| |
| e. Do not serve breakfast at this type of school............... | $_1$ ☐ | $_2$ ☐ | $_3$ ☐ | $_4$ ☐ |
| f. Do not have this type of school................................. | $_1$ ☐ | $_2$ ☐ | $_3$ ☐ | $_4$ ☐ |

**3.2.** **What prices did you charge for full price, reduced price, and adult <u>breakfasts</u> in your SFA at the beginning of the <u>2014-2015</u> school year?**

**Record your responses separately for:**

- **Elementary schools** (schools composed of any span of grades from kindergarten through 6th grade),

- **Middle or junior high schools** (schools that have no grade lower than 6 and no grade higher than 9), and

- **High schools** (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 schools" column.**

---

**3.2.1.** **If all breakfast prices for the 2014-2015 school year are the same as the 2015-2016 school year, click the box below and go to question 3.3.**

☐ Breakfast prices are the same in both school years

---

| BREAKFAST PRICES | ELEMENTARY SCHOOLS | MIDDLE OR JUNIOR HIGHS | HIGH SCHOOLS | OTHER SCHOOLS |
|---|---|---|---|---|
| a. Full price breakfast............. | $ \|___\|.\|___\|___\| | $ \|___\|.\|___\|___\| | $ \|___\|.\|___\|___\| | $ \|___\|.\|___\|___\| |
| b. Reduced price breakfast..... | $ \|___\|.\|___\|___\| | $ \|___\|.\|___\|___\| | $ \|___\|.\|___\|___\| | $ \|___\|.\|___\|___\| |
| c. Breakfast was served at no cost to students at this type of school............... | $_0$ ☐ | $_0$ ☐ | $_0$ ☐ | $_0$ ☐ |
| d. Adult breakfast................... | $ \|___\|.\|___\|___\| | $ \|___\|.\|___\|___\| | $ \|___\|.\|___\|___\| | $ \|___\|.\|___\|___\| |
| e. Do not serve breakfast at this type of school.............. | $_1$ ☐ | $_2$ ☐ | $_3$ ☐ | $_4$ ☐ |
| f. Did not have this type of school................................. | $_1$ ☐ | $_2$ ☐ | $_3$ ☐ | $_4$ ☐ |

# 4. FOOD SERVICE OPERATIONS

**The following questions are about school meal provisions for the <u>2015-2016</u> school year. These include:**

- **Provision 2—Reducing certification to once every four years, with claiming based on derived percentages**
- **Provision 3—Reducing certification to once every four years, with claiming based on prior funding levels**
- **Community Eligibility Provision (CEP)—Eliminating household applications in high poverty local educational agencies (LEAs) and schools, with claiming based on direct certification percentages**

**4.1. Is your SFA implementing CEP district-wide in all schools?**

₁ ☐ Yes     SKIP TO 4.3

₀ ☐ No

**4.2. How many schools are operating under the following provisions for NSLP and SBP?**

**IF NONE, PLEASE ENTER 0.**

| SPECIAL PROVISION OPTION | NSLP ONLY | SBP ONLY | BOTH NSLP AND SBP |
|---|---|---|---|
| a. Provision 2....................................... | \|__\|__\|__\| | \|__\|__\|__\| | \|__\|__\|__\| |
| b. Provision 3....................................... | \|__\|__\|__\| | \|__\|__\|__\| | \|__\|__\|__\| |
| c. CEP................................................... | | | \|__\|__\|__\| |

IF ANSWER TO 4.1c = 0, THEN DO NOT ASK 4.2c.

**4.3.** [NEW] **We would like to know how long schools have been using each provision. Enter the number of schools that have operated continuously under each provision for the specified length of time. Please count schools in one column only.**

**IF NONE, PLEASE ENTER 0.**

| SPECIAL PROVISION OPTION | 1-5 YEARS | 6-10 YEARS | 11-15 YEARS | 16-20 YEARS | 20+ YEARS |
|---|---|---|---|---|---|
| a. Provision 2...................... | \|__\|__\|__\| | \|__\|__\|__\| | \|__\|__\|__\| | \|__\|__\|__\| | \|__\|__\|__\| |
| b. Provision 3...................... | \|__\|__\|__\| | \|__\|__\|__\| | \|__\|__\|__\| | \|__\|__\|__\| | \|__\|__\|__\| |

| SPECIAL PROVISION OPTION | LESS THAN 1 YEAR | 1 YEAR | 2 OR MORE YEARS |
|---|---|---|---|
| c. CEP............................... | \|__\|__\|__\| | \|__\|__\|__\| | \|__\|__\|__\| |

IF 4.1c>1 THEN R SHOULD RECEIVE 4.3 AND 4.4. IF 4.0= YES OR 4.1c = 0 or 1 THEN RESPONDENT SHOULD SKIP 4.3. and 4.4.

**4.4.   Did any schools in your SFA group together to participate in CEP?**

NEW

   ₁ ☐ Yes

   ₂ ☐ No    SKIP TO 4.5

**4.5.   How did schools in your SFA group together to participate in CEP?**

NEW

   ₁ ☐ All schools in SFA grouped together

   ₂ ☐ Some, but not all schools grouped together

SKIP 4.5 AND 4.6 IF 4.0=YES

**4.6.   Does your SFA have any schools eligible for CEP that are not currently participating in this provision during the 2015-2016 school year?**

NEW

   ₁ ☐ Yes

   ₂ ☐ No    SKIP TO 5.1

**4.7.   Did CEP-eligible schools elect to not participate in CEP because participation would not be financially worthwhile, or it would impose financial risk?**

NEW

   ₁ ☐ Yes (please briefly describe why)

   _____

   ₂ ☐ No

# 5. ELIGIBILITY DETERMINATION AND VERIFICATION

**This section is about certification for free or reduced-price school meals, verification, verification for cause, and direct verification practices in your SFA during the 2015-2016 school year.**

**5.1.** | NEW | **How many students enrolled in your SFA were directly certified as of October 31, 2015?**

**IF NONE, PLEASE ENTER 0.**

|___|___|___| **,** |___|___|___| STUDENTS

**5.2.** | NEW | **How many additional students were directly certified after October 31, 2015 up until this point in time?**

**IF NONE, PLEASE ENTER 0.**

|___|___|___| **,** |___|___|___| STUDENTS

**5.3.** | NEW | **Is your State or your SFA responsible for matching lists of enrolled students to lists of household participants in SNAP, TANF, or FDPIR to directly certify students?**

- **SNAP is the Supplemental Nutrition Assistance Program (formerly known as Food Stamps).**
- **TANF is Temporary Assistance for Needy Families.**
- **FDPIR is the Food Distribution Program on Indian Reservations.**

*Note: States may be considered responsible for matching even when SFAs verify information provided by the State, or when an SFA provides student enrollment information to the State. Conversely, SFAs may be considered responsible for matching even when the State provides the SFA with SNAP, TANF, or FDPIR program participation data.*

1 ☐ State                              SKIP TO 5.5

2 ☐ SFA

3 ☐ SFA does not directly certify students     SKIP TO 5.5

**5.4.** | NEW | **What challenges does your SFA face in matching enrolled students to household participation in SNAP, TANF, or FDPIR?**

**MARK ALL THAT APPLY**

1 ☐ Lack of staff time and resources to perform data matching

2 ☐ High level of burden (e.g. due to outdated or not user friendly computer systems)

3 ☐ Difficulty reconciling state-generated direct certification lists with local point-of-sale systems

4 ☐ Difficulty investigating or reconciling partially matched or unmatched children

5 ☐ Need to use a manual matching process

6 ☐ Data insecurity/concerns about personally identifiable information

7 ☐ Lack familiarity with system functions designed for district use

8 ☐ No challenges

9 ☐ Other *(Specify)* _____

**5.5** **Which of the following formats of parent-completed applications for free or reduced-price school meals for their children is used most often for the 2015-2016 school year?**

     1 ☐   Web-based or computer-based application

     2 ☐   Computer-read or scannable paper application        SKIP TO 5.7

     3 ☐   Manually-entered paper application                SKIP TO 5.7

     4 ☐   No parents in the SFA submit applications for school meals        SKIP TO 6.1

**5.6** **Is the web-based or computer-based application integrated with any of the following data systems?**

MARK ONE RESPONSE PER ROW

| | YES | NO |
|---|---|---|
| a. Meal claiming system | 1 ☐ | 2 ☐ |
| b. Point-of-sale system | 1 ☐ | 2 ☐ |
| c. Student records | 1 ☐ | 2 ☐ |
| d. Direct certification | 1 ☐ | 2 ☐ |
| e. Other (*Specify*) | 1 ☐ | 2 ☐ |

_____

**5.7** **For each basis for eligibility listed below, how is the determination of eligibility made when processing applications—manually by the determining official, or automatically (for example, by a computer algorithm, software program, or calculations performed with formulas in a spreadsheet)?**

MARK ONE RESPONSE PER ROW

| | MANUAL DETERMINATION | AUTOMATED DETERMINATION |
|---|---|---|
| a. Household income | 1 ☐ | 2 ☐ |
| b. Assistance program case number (for example, SNAP, FDPIR, or TANF)* | 1 ☐ | 2 ☐ |
| c. Child enrolled in Head Start or Even Start | 1 ☐ | 2 ☐ |
| d. Foster child | 1 ☐ | 2 ☐ |
| e. Homeless, migrant, or runaway child | 1 ☐ | 2 ☐ |

\*   SNAP is the Supplemental Nutrition Assistance Program (formerly known as Food Stamps). FDPIR is the Food Distribution Program on Indian Reservations. TANF is Temporary Assistance for Needy Families.

**5.8.** **How did you verify applications for the 2015-2016 school year?**

NEW    1 ☐   In a single batch at the beginning of the school year

     2 ☐   On a rolling basis as they were approved

     3 ☐   In multiple batches

     4 ☐   Other *(Specify)* _____

**5.9.** **Did your SFA accept emailed submissions of verification documentation from parents?**

NEW

   ₁ ☐ Yes

   ₂ ☐ No

**5.10.** **Did your SFA follow up with households that did not respond to initial requests for verification documentation?**

NEW

   ₁ ☐ Yes

   ₂ ☐ No

**5.11.** **Did your SFA perform verification for cause (that is, verify questionable applications in addition to verifying the sample selected at random)?**

NEW

   ₁ ☐ Yes

   ₂ ☐ No    SKIP TO Q 5.15

**5.12.** **How many questionable household applications were verified for cause?**

NEW

|__|__|__| **,** |__|__|__| APPLICATIONS

**5.13.1.** **The next two questions are about the number of household applications selected for verification or verification for cause and any resulting changes in eligibility status. In responding, exclude counts of applications that were directly verified (certification verified without contacting parents). Please provide results by original benefit type and method of approval, as applicable.**

NEW

**Of the questionable household applications were selected for verification or verified for cause, how many resulted in:**

| | NUMBER OF QUESTIONABLE HOUSEHOLD APPLICATIONS |
|---|---|
| | **IF NONE, PLEASE ENTER 0.** |
| a. **No change** to eligibility?........................................................ | |__|__|__| |
| b. A change from free **(categorically eligible)** to reduced price eligibility?*........................................................................ | |__|__|__| |
| c. A change from free **(income-eligible)** to reduced price eligibility?*................................................................................ | |__|__|__| |

   \* Categorical eligibility is based on SNAP, TANF, or FDPIR documentation (a case number). Income eligibility is based on household size and income information.

**5.13.2. How many questionable household applications selected for verification or verification for cause resulted in changes to paid status? Then, for changes to paid status, indicate how many were a result of NOT responding to requests for verification documentation.**

*Note: In responding, exclude counts of applications that were directly verified (certification verified without contacting parents). Please provide results by original benefit type and method of approval, as applicable.*

| | NUMBER OF QUESTIONABLE HOUSEHOLD APPLICATIONS CHANGED TO PAID STATUS | NUMBER CHANGED FOR NOT RESPONDING TO REQUESTS FOR DOCUMENTATION |
|---|---|---|
| | **IF NONE, PLEASE ENTER 0.** | |
| a. A change from free **(categorically eligible)** to paid status?................................................................ | \|__\|__\|__\| | \|__\|__\|__\| |
| b. A change from free **(income-eligible)** to paid status?............ | \|__\|__\|__\| | \|__\|__\|__\| |
| c. A change from **reduced-price to paid** status?...................... | \|__\|__\|__\| | \|__\|__\|__\| |

**5.14.** **What criteria did your SFA use to identify questionable applications for verification for cause?**

NEW

|  | MARK ONE PER ROW | |
| --- | :---: | :---: |
|  | YES | NO |
| a. Non responders from previous school year(s)........................................................ | 1 ☐ | 2 ☐ |
| b. Applications with zero income listed in current and previous year(s)............................. | 1 ☐ | 2 ☐ |
| c. Error prone (close to income guidelines) applications................................................... | 1 ☐ | 2 ☐ |
| d. School district employee application.............................................................................. | 1 ☐ | 2 ☐ |
| e. Multiple application submissions with different information in order to qualify for increased benefits............................................................................................................. | 1 ☐ | 2 ☐ |
| f. Other (*Specify*).............................................................................................................. | 1 ☐ | 2 ☐ |

_____

**5.15.** **Did your SFA perform <u>direct verification</u> (verified application without contacting parents) on approved household applications?**

NEW     1 ☐  Yes

2 ☐  No

## 6. FINANCIAL MANAGEMENT

**This section is about non-program food revenue and your nonprofit food service account. Questions pertain to the <u>2015-2016</u> school year unless specified otherwise.**

**6.1.** **As you may know, schools are required to accrue all revenue from the sale of non-program foods in a nonprofit school food service account and track this revenue separately from school meal program revenue.**

NEW

**Non-program foods are foods other than reimbursable meal items that are sold in a school at any time or location on the school campus and are purchased using funds from the non-profit school food service account. Examples include a la carte items, adult meals, items purchased for fundraisers, vending machines, school stores, and items purchased for catering and vended meals.**

**To what extent do schools in your SFA track the accrual of revenue from the sale of non-program food sales?**

1 ☐ All or most schools track all non-program food sales

2 ☐ All or most schools track some non-program food sales, such as those sold under the food service department

3 ☐ All or most schools do not track non-program food sales

4 ☐ Only my SFA (not schools) tracks non-program food sales

**6.2.** **Does your SFA monitor costs paid out of nonprofit school foodservice accounts (or if SFA manages school finances centrally, a nonprofit SFA foodservice account)?**

NEW

1 ☐ Yes

2 ☐ No      SKIP TO 6.6

**6.3.** **What challenges, if any, does your SFA experience in monitoring costs paid out of nonprofit foodservice accounts?**

NEW

**MARK ALL THAT APPLY**

1 ☐ Some/all schools do not have nonprofit food service accounts

2 ☐ I/my staff lack training or guidance in these types of accounting policies or procedures

3 ☐ Other financial management needs take priority

4 ☐ It takes too much time

5 ☐ No process in place to monitor or collect school documentation

6 ☐ Other *(Specify)* _____

7 ☐ No challenges

8 ☐ I am not responsible for oversight or monitoring of nonprofit foodservice accounts

**6.** NEW **You may have heard about USDA's Non-program Foods Revenue Tool. What best describes your SFA's knowledge and use of this tool to determine non-program food revenue amounts?**

    ₁ ☐ I don't know what the tool is

    ₂ ☐ I know the tool is available, but our SFA doesn't use it

    ₃ ☐ Some schools in our SFA use the tool

    ₄ ☐ All schools in our SFA use the tool

**6.5.** NEW **Who is the primary decision maker about how your SFA's nonprofit school food service account is managed, particularly with respect to the costs that are charged to the account?**

    ₁ ☐ School superintendent

    ₂ ☐ District business manager

    ₃ ☐ SFA director

    ₄ ☐ Other *(Specify)* _____

**The following questions are about alternative meals provided and recouping credits.**

**6.6** **What is normally done if a child who is not receiving a free meal cannot pay for a meal?**

    ₁ ☐ Serve the child the reimbursable meal

    ₂ ☐ Serve the child an alternate meal

    ₃ ☐ Do not serve the child a meal

    ₄ ☐ Other *(Specify)* _____

**6.7** **Does your SFA keep track of the amount of money owed as a result of unpaid school meals?**

    ₁ ☐ Yes

    ₂ ☐ No    SKIP TO 6.10

**6.8** **For the 2014-2015 school year, what was the total amount of money owed to your SFA as a result of unpaid school meals?**

|__|__|__| **,** |__|__|__| DOLLARS

**6.9** **How much of this money has been recovered?**

|__|__|__| **,** |__|__|__| DOLLARS

**6.10** **What steps does your SFA take to recover money for unpaid student meals?**

MARK ONE RESPONSE PER ROW

| | YES | NO |
|---|---|---|
| a. Send bill to parents.............................................................................. | 1 ☐ | 2 ☐ |
| b. Provide the student with alternate meals until the debt is paid......... | 1 ☐ | 2 ☐ |
| c. Use a debt collection agency.............................................................. | 1 ☐ | 2 ☐ |
| d. Try to retroactively approve the student for free or reduced price meals..................................................................................... | 1 ☐ | 2 ☐ |
| e. Administrative actions (e.g., withhold grades).................................. | 1 ☐ | 2 ☐ |
| f. No effort made................................................................................. | 1 ☐ | 2 ☐ |
| g. Other (*Specify*).................................................................................. | 1 ☐ | 2 ☐ |

_____

# 7. TRAINING AND PROFESSIONAL STANDARDS

**The next few questions ask about your SFA's training and technical assistance <u>during the 2015-2016 school year.</u>**

**7.1.1    In what topic areas did any of your school nutrition staff receive training or technical assistance?**

|  | **Topic Area** | **Did staff receive training or technical assistance?** MARK ONE PER ROW | |
|---|---|---|---|
|  |  | YES | NO |
| a. | Menu planning.............................................................................................. | 1 ☐ | 2 ☐ |
| b. | Nutrition education....................................................................................... | 1 ☐ | 2 ☐ |
| c. | General nutrition........................................................................................... | 1 ☐ | 2 ☐ |
| d. | Food production............................................................................................ | 1 ☐ | 2 ☐ |
| e. | Serving food | 1 ☐ | 2 ☐ |
| f. | Cashiering/point-of-service........................................................................ | 1 ☐ | 2 ☐ |
| g. | Food purchasing/ procurement.................................................................. | 1 ☐ | 2 ☐ |
| h. | Receiving and storage................................................................................. | 1 ☐ | 2 ☐ |
| i. | Food safety and HACCP (Hazard Analysis and Critical Control Points).................. | 1 ☐ | 2 ☐ |
| j. | Free and reduced price meal benefits......................................................... | 1 ☐ | 2 ☐ |
| k. | Program management.................................................................................. | 1 ☐ | 2 ☐ |
| l. | Financial management................................................................................. | 1 ☐ | 2 ☐ |
| m. | Human resources and staff training............................................................ | 1 ☐ | 2 ☐ |
| n. | Facilities and equipment planning.............................................................. | 1 ☐ | 2 ☐ |
| o. | Communications, marketing, and/or public relations................................. | 1 ☐ | 2 ☐ |
| p. | Use of new Grains section of Food Buying Guide...................................... | 1 ☐ | 2 ☐ |
| q. | Use of Online Food Buying Guide Calculator............................................. | 1 ☐ | 2 ☐ |
| r. | Use of Product Formulation Statements..................................................... | 1 ☐ | 2 ☐ |
| s. | Determining meal pattern contributions for crediting purposes................ | 1 ☐ | 2 ☐ |
| t. | Online menu planning tool........................................................................... | 1 ☐ | 2 ☐ |
| u. | Use of the training tracker tool................................................................... | 1 ☐ | 2 ☐ |
| v. | Smarter Lunchroom strategies.................................................................... | 1 ☐ | 2 ☐ |
| w. | Other *(Specify)*.......................................................................................... | 1 ☐ | 2 ☐ |

**7.1.2  How useful was the training or technical assistance?**

*Please rate your answer on a scale of 1 to 5, where 1 = Not at all useful and 5 = Very useful.*

***PROGRAMMER LOGIC: IF 7.1.1a-x = YES, THEN FILL IN THE GRID ITEM BELOW***

| | If YES, how useful was the training or technical assistance? | | | | |
|---|---|---|---|---|---|
| **Topic Area** | NOT AT ALL USEFUL<br>1 | 2 | 3 | 4 | VERY USEFUL<br>5 |
| a. Menu planning................................................................ | 1 ☐ | 2 ☐ | 3 ☐ | 4 ☐ | 5 ☐ |
| b. Nutrition education........................................................... | 1 ☐ | 2 ☐ | 3 ☐ | 4 ☐ | 5 ☐ |
| c. General nutrition............................................................... | 1 ☐ | 2 ☐ | 3 ☐ | 4 ☐ | 5 ☐ |
| d. Food production............................................................... | 1 ☐ | 2 ☐ | 3 ☐ | 4 ☐ | 5 ☐ |
| e. Serving food | 1 ☐ | 2 ☐ | 3 ☐ | 4 ☐ | 5 ☐ |
| f. Cashiering/point-of-service............................................. | 1 ☐ | 2 ☐ | 3 ☐ | 4 ☐ | 5 ☐ |
| g. Food purchasing/ procurement....................................... | 1 ☐ | 2 ☐ | 3 ☐ | 4 ☐ | 5 ☐ |
| h. Receiving and storage..................................................... | 1 ☐ | 2 ☐ | 3 ☐ | 4 ☐ | 5 ☐ |
| i. Food safety and HACCP (Hazard Analysis and Critical Control Points)................................................................... | 1 ☐ | 2 ☐ | 3 ☐ | 4 ☐ | 5 ☐ |
| j. Free and reduced price meal benefits............................. | 1 ☐ | 2 ☐ | 3 ☐ | 4 ☐ | 5 ☐ |
| k. Program management...................................................... | 1 ☐ | 2 ☐ | 3 ☐ | 4 ☐ | 5 ☐ |
| l. Financial management..................................................... | 1 ☐ | 2 ☐ | 3 ☐ | 4 ☐ | 5 ☐ |
| m. Human resources and staff training................................ | 1 ☐ | 2 ☐ | 3 ☐ | 4 ☐ | 5 ☐ |
| n. Facilities and equipment planning................................... | 1 ☐ | 2 ☐ | 3 ☐ | 4 ☐ | 5 ☐ |
| o. Communications, marketing, and/or public relations...... | 1 ☐ | 2 ☐ | 3 ☐ | 4 ☐ | 5 ☐ |
| p. Use of new Grains section of Food Buying Guide.......... | 1 ☐ | 2 ☐ | 3 ☐ | 4 ☐ | 5 ☐ |
| q. Use of Online Food Buying Guide Calculator................. | 1 ☐ | 2 ☐ | 3 ☐ | 4 ☐ | 5 ☐ |
| r. Use of Product Formulation Statements......................... | 1 ☐ | 2 ☐ | 3 ☐ | 4 ☐ | 5 ☐ |
| s. Determining meal pattern contributions for crediting purposes.......................................................................... | 1 ☐ | 2 ☐ | 3 ☐ | 4 ☐ | 5 ☐ |
| t. Online menu planning tool.............................................. | 1 ☐ | 2 ☐ | 3 ☐ | 4 ☐ | 5 ☐ |
| u. Use of the training tracker tool....................................... | 1 ☐ | 2 ☐ | 3 ☐ | 4 ☐ | 5 ☐ |
| v. Smarter Lunchroom strategies........................................ | 1 ☐ | 2 ☐ | 3 ☐ | 4 ☐ | 5 ☐ |
| w. Other *(Specify)*.............................................................. | 1 ☐ | 2 ☐ | 3 ☐ | 4 ☐ | 5 ☐ |

_____

**7.1.3.** **Who provided the training or technical assistance for [FILL WITH TOPIC AREA A-X]?**

PROGRAMMER LOGIC: IF 7.1.1a-x = YES, THEN FILL IN THE GRID ITEM BELOW

| Topic Area | Who provided the training or technical assistance?<br>**CHECK ALL THAT APPLY** |
|---|---|
| a. Menu planning........................ | 1 ☐ FNS<br>2 ☐ Institute for Child Nutrition (ICN) *(Formerly National Food Service Management Institute)*<br>3 ☐ Professional associations or organizations<br>4 ☐ SFA staff (in-house)<br>5 ☐ State Child Nutrition Agency<br>6 ☐ Commercial vendors<br>7 ☐ Local agencies and partners<br>8 ☐ Other *(Specify)*<br><br>_____ |
| b. Nutrition education................. | 1 ☐ FNS<br>2 ☐ Institute for Child Nutrition (ICN) *(Formerly National Food Service Management Institute)*<br>3 ☐ Professional associations or organizations<br>4 ☐ SFA staff (in-house)<br>5 ☐ State Child Nutrition Agency<br>6 ☐ Commercial vendors<br>7 ☐ Local agencies and partners<br>8 ☐ Other *(Specify)*<br><br>_____ |
| c. General nutrition................................. | 1 ☐ FNS<br>2 ☐ Institute for Child Nutrition (ICN) *(Formerly National Food Service Management Institute)*<br>3 ☐ Professional associations or organizations<br>4 ☐ SFA staff (in-house)<br>5 ☐ State Child Nutrition Agency<br>6 ☐ Commercial vendors<br>7 ☐ Local agencies and partners<br>8 ☐ Other *(Specify)*<br><br>_____ |

| Topic Area | Who provided the training or technical assistance? CHECK ALL THAT APPLY |
|---|---|
| d. Food production..................... | 1 ☐ FNS<br>2 ☐ Institute for Child Nutrition (ICN) *(Formerly National Food Service Management Institute)*<br>3 ☐ Professional associations or organizations<br>4 ☐ SFA staff (in-house)<br>5 ☐ State Child Nutrition Agency<br>6 ☐ Commercial vendors<br>7 ☐ Local agencies and partners<br>8 ☐ Other *(Specify)*<br><br>_____ |
| e. Serving food........................... | 1 ☐ FNS<br>2 ☐ Institute for Child Nutrition (ICN) *(Formerly National Food Service Management Institute)*<br>3 ☐ Professional associations or organizations<br>4 ☐ SFA staff (in-house)<br>5 ☐ State Child Nutrition Agency<br>6 ☐ Commercial vendors<br>7 ☐ Local agencies and partners<br>8 ☐ Other *(Specify)*<br><br>_____ |
| f. Cashiering/point-of-service..... | 1 ☐ FNS<br>2 ☐ Institute for Child Nutrition (ICN) *(Formerly National Food Service Management Institute)*<br>3 ☐ Professional associations or organizations<br>4 ☐ SFA staff (in-house)<br>5 ☐ State Child Nutrition Agency<br>6 ☐ Commercial vendors<br>7 ☐ Local agencies and partners<br>8 ☐ Other *(Specify)*<br><br>_____ |
| g. Food purchasing/ procurement........................... | 1 ☐ FNS<br>2 ☐ Institute for Child Nutrition (ICN) *(Formerly National Food Service Management Institute)*<br>3 ☐ Professional associations or organizations<br>4 ☐ SFA staff (in-house)<br>5 ☐ State Child Nutrition Agency<br>6 ☐ Commercial vendors<br>7 ☐ Local agencies and partners<br>8 ☐ Other *(Specify)*<br><br>_____ |

| Topic Area | Who provided the training or technical assistance?<br>CHECK ALL THAT APPLY |
|---|---|
| h.   Receiving and storage............ | 1 ☐ FNS<br>2 ☐ Institute for Child Nutrition (ICN) *(Formerly National Food Service Management Institute)*<br>3 ☐ Professional associations or organizations<br>4 ☐ SFA staff (in-house)<br>5 ☐ State Child Nutrition Agency<br>6 ☐ Commercial vendors<br>7 ☐ Local agencies and partners<br>8 ☐ Other *(Specify)*<br><br>_____ |
| i.   Food safety and HACCP (Hazard Analysis and Critical Control Points)...................... | 1 ☐ FNS<br>2 ☐ Institute for Child Nutrition (ICN) *(Formerly National Food Service Management Institute)*<br>3 ☐ Professional associations or organizations<br>4 ☐ SFA staff (in-house)<br>5 ☐ State Child Nutrition Agency<br>6 ☐ Commercial vendors<br>7 ☐ Local agencies and partners<br>8 ☐ Other *(Specify)*<br><br>_____ |
| j.   Free and reduced price meal benefits................................ | 1 ☐ FNS<br>2 ☐ Institute for Child Nutrition (ICN) *(Formerly National Food Service Management Institute)*<br>3 ☐ Professional associations or organizations<br>4 ☐ SFA staff (in-house)<br>5 ☐ State Child Nutrition Agency<br>6 ☐ Commercial vendors<br>7 ☐ Local agencies and partners<br>8 ☐ Other *(Specify)*<br><br>_____ |
| k.   Program management.......... | 1 ☐ FNS<br>2 ☐ Institute for Child Nutrition (ICN) *(Formerly National Food Service Management Institute)*<br>3 ☐ Professional associations or organizations<br>4 ☐ SFA staff (in-house)<br>5 ☐ State Child Nutrition Agency<br>6 ☐ Commercial vendors<br>7 ☐ Local agencies and partners<br>8 ☐ Other *(Specify)*<br><br>_____ |

| Topic Area | Who provided the training or technical assistance? CHECK ALL THAT APPLY |
|---|---|
| l. Financial management.......... | 1 ☐ FNS<br>2 ☐ Institute for Child Nutrition (ICN) *(Formerly National Food Service Management Institute)*<br>3 ☐ Professional associations or organizations<br>4 ☐ SFA staff (in-house)<br>5 ☐ State Child Nutrition Agency<br>6 ☐ Commercial vendors<br>7 ☐ Local agencies and partners<br>8 ☐ Other *(Specify)*<br><br>_____ |
| m. Human resources and staff training................................ | 1 ☐ FNS<br>2 ☐ Institute for Child Nutrition (ICN) *(Formerly National Food Service Management Institute)*<br>3 ☐ Professional associations or organizations<br>4 ☐ SFA staff (in-house)<br>5 ☐ State Child Nutrition Agency<br>6 ☐ Commercial vendors<br>7 ☐ Local agencies and partners<br>8 ☐ Other *(Specify)*<br><br>_____ |
| n. Facilities and equipment planning................................ | 1 ☐ FNS<br>2 ☐ Institute for Child Nutrition (ICN) *(Formerly National Food Service Management Institute)*<br>3 ☐ Professional associations or organizations<br>4 ☐ SFA staff (in-house)<br>5 ☐ State Child Nutrition Agency<br>6 ☐ Commercial vendors<br>7 ☐ Local agencies and partners<br>8 ☐ Other *(Specify)*<br><br>_____ |
| o. Communications, marketing, and/or public relations........... | 1 ☐ FNS<br>2 ☐ Institute for Child Nutrition (ICN) *(Formerly National Food Service Management Institute)*<br>3 ☐ Professional associations or organizations<br>4 ☐ SFA staff (in-house)<br>5 ☐ State Child Nutrition Agency<br>6 ☐ Commercial vendors<br>7 ☐ Local agencies and partners<br>8 ☐ Other *(Specify)*<br><br>_____ |

| Topic Area | Who provided the training or technical assistance?<br>CHECK ALL THAT APPLY |
|---|---|
| p. Use of new Grains section of Food Buying Guide............... | 1 ☐ FNS<br>2 ☐ Institute for Child Nutrition (ICN) *(Formerly National Food Service Management Institute)*<br>3 ☐ Professional associations or organizations<br>4 ☐ SFA staff (in-house)<br>5 ☐ State Child Nutrition Agency<br>6 ☐ Commercial vendors<br>7 ☐ Local agencies and partners<br>8 ☐ Other *(Specify)*<br>_____ |
| q. Use of Online Food Buying Guide Calculator.............................. | 1 ☐ FNS<br>2 ☐ Institute for Child Nutrition (ICN) *(Formerly National Food Service Management Institute)* 3 ☐ Professional associations or organizations<br>4 ☐ SFA staff (in-house)<br>5 ☐ State Child Nutrition Agency<br>6 ☐ Commercial vendors<br>7 ☐ Local agencies and partners<br>8 ☐ Other *(Specify)*<br>_____ |
| r. Use of Product Formulation Statements............................ | 1 ☐ FNS<br>2 ☐ Institute for Child Nutrition (ICN) *(Formerly National Food Service Management Institute)* 3 ☐ Professional associations or organizations<br>4 ☐ SFA staff (in-house)<br>5 ☐ State Child Nutrition Agency<br>6 ☐ Commercial vendors<br>7 ☐ Local agencies and partners<br>8 ☐ Other *(Specify)*<br>_____ |
| s. Determining meal pattern contributions for crediting purposes................................ | 1 ☐ FNS<br>2 ☐ Institute for Child Nutrition (ICN) *(Formerly National Food Service Management Institute)* 3 ☐ Professional associations or organizations<br>4 ☐ SFA staff (in-house)<br>5 ☐ State Child Nutrition Agency<br>6 ☐ Commercial vendors<br>7 ☐ Local agencies and partners<br>8 ☐ Other *(Specify)*<br>_____ |

| Topic Area | Who provided the training or technical assistance? CHECK ALL THAT APPLY |
|---|---|
| t. Online menu planning tool…. | 1 ☐ FNS<br>2 ☐ Institute for Child Nutrition (ICN) *(Formerly National Food Service Management Institute)* 3 ☐ Professional associations or organizations<br>4 ☐ SFA staff (in-house)<br>5 ☐ State Child Nutrition Agency<br>6 ☐ Commercial vendors<br>7 ☐ Local agencies and partners<br>8 ☐ Other *(Specify)*<br>_____ |
| u. Use of the training tracker tool........................................ | 1 ☐ FNS<br>2 ☐ Institute for Child Nutrition (ICN) *(Formerly National Food Service Management Institute)*<br>3 ☐ Professional associations or organizations<br>4 ☐ SFA staff (in-house)<br>5 ☐ State Child Nutrition Agency<br>6 ☐ Commercial vendors<br>7 ☐ Local agencies and partners<br>8 ☐ Other *(Specify)*<br>_____ |
| v. Smarter Lunchroom strategies.............................. | 1 ☐ FNS<br>2 ☐ Institute for Child Nutrition (ICN) *(Formerly National Food Service Management Institute)*organizations<br>4 ☐ SFA staff (in-house)<br>5 ☐ State Child Nutrition Agency<br>6 ☐ Commercial vendors<br>7 ☐ Local agencies and partners<br>8 ☐ Other *(Specify)*<br>_____ |
| w. Other *(Specify)*.......................<br>_____ | 1 ☐ FNS<br>2 ☐ Institute for Child Nutrition (ICN) *(Formerly National Food Service Management Institute)* 3 ☐ Professional associations or organizations<br>4 ☐ SFA staff (in-house)<br>5 ☐ State Child Nutrition Agency<br>6 ☐ Commercial vendors<br>7 ☐ Local agencies and partners |

**7.2** | NEW | **Did your SFA participate in the Institute of Child Nutrition's Team Up For School Nutrition Success training in 2015?**

    1 ☐ Yes

    2 ☐ No    SKIP TO 7.5

**7.3**    **On average, how frequently does your SFA communicate with your Team Up mentor?**

NEW

1 ☐ Once a week or more

2 ☐ Once every two weeks

3 ☐ Once a month

4 ☐ Less than once a month

5 ☐ Only as needed

d ☐ Don't know

**7.4** **How strongly do you agree or disagree with the following statements about your SFA's Team Up mentor?**

NEW

**Please rate your answer on a scale of 1 to 5, where 1 = strongly disagree and 5 = strongly agree.**

MARK ONE RESPONSE PER ROW

| | STRONGLY DISAGREE | | | | STRONGLY AGREE |
|---|---|---|---|---|---|
| | 1 | 2 | 3 | 4 | 5 |
| a. We feel supported by our mentor...... | 1 ☐ | 2 ☐ | 3 ☐ | 4 ☐ | 5 ☐ |
| b. Our mentor acts as a sounding board and reacts to ideas for our SFA.................................................... | 1 ☐ | 2 ☐ | 3 ☐ | 4 ☐ | 5 ☐ |
| c. Our mentor helps our SFA brainstorm ideas................................ | 1 ☐ | 2 ☐ | 3 ☐ | 4 ☐ | 5 ☐ |
| d. Our mentor shares knowledge and experience with our SFA................... | 1 ☐ | 2 ☐ | 3 ☐ | 4 ☐ | 5 ☐ |

**The rest of this section is about the Professional Standards for State and Local School Nutrition Programs Personnel that went into effect on July 1, 2015. Questions pertain to <u>the 2015-2016 school year</u> unless specified otherwise.**

**7.5.** **Since the beginning of the 2015-2016 school year, has your SFA kept track of the types of continuing education and training activities that school nutrition staff have completed?**

NEW

    ₁ ☐   Yes    SKIP TO 7.6

    ₂ ☐   No

**7.5.1.** **Do you plan on conducting a review before the end of the 2015-2016 school year to document the continuing education and training activities your school nutrition staff have completed?**

NEW

    ₁ ☐   Yes

    ₂ ☐   No    SKIP TO 8.1

**7.6.** **For each of the following methods of documenting the continuing education and training activities your school nutrition staff completed, please indicate your current or expected use of the method by the end of the 2015-2016 school year.**

NEW

<div align="center">MARK ONE RESPONSE PER ROW</div>

| | CURRENTLY USING | NOT CURRENTLY USING BUT EXPECT TO USE BY THE END OF THE SCHOOL YEAR | NOT CURRENTLY USING AND DO NOT EXPECT TO USE BY THE END OF THE SCHOOL YEAR |
|---|---|---|---|
| a. The FNS Professional Standards Training Tracking Tool........................................................ | ₁ ☐ | ₂ ☐ | ₃ ☐ |
| b. Another computer-based tracking tool (besides the FNS Professional Standards Training Tracking Tool)........................................................ | ₁ ☐ | ₂ ☐ | ₃ ☐ |
| c. College transcripts or diplomas............................. | ₁ ☐ | ₂ ☐ | ₃ ☐ |
| d. Food safety certifications or other training certificates............................................................... | ₁ ☐ | ₂ ☐ | ₃ ☐ |
| e. Training attendance sign-in sheets........................ | ₁ ☐ | ₂ ☐ | ₃ ☐ |
| f. Training agendas................................................... | ₁ ☐ | ₂ ☐ | ₃ ☐ |
| g. Other method: (*Specify*)........................................ _____ | ₁ ☐ | ₂ ☐ | ₃ ☐ |

**7.7.** **The next questions ask you about the challenges your SFA may have experienced with documenting staff completion of continuing education and training activities. Do you agree or disagree with each of the following statements?**

NEW

MARK ONE RESPONSE PER ROW

| | AGREE | DISAGREE |
|---|---|---|
| a. My SFA doesn't have enough manpower to <u>monitor</u> the activities................................................................................ | 1 ☐ | 2 ☐ |
| b. My SFA doesn't have a procedure or mechanism in place to document completion of training activities............................................ | 1 ☐ | 2 ☐ |
| c. SFA staff don't understand what to document.................................... | 1 ☐ | 2 ☐ |
| d. Documenting poses a financial burden on my SFA.............................. | 1 ☐ | 2 ☐ |
| e. SFA staff have other more pressing work priorities............................. | 1 ☐ | 2 ☐ |
| f. Other *(Specify)*...................................................................................... | 1 ☐ | 2 ☐ |

_____

IF YOU ANSWERED 7.6a = 1 THEN GO TO 7.8, OTHERWISE GO TO 7.9

**7.8.** **The next questions are about the FNS Professional Standards Training Tracking Tool.**

NEW

**Do you agree or disagree with each of the following statements?**

MARK ONE RESPONSE PER ROW

| | AGREE | DISAGREE |
|---|---|---|
| a. The tool is user-friendly......................................................................... | 1 ☐ | 2 ☐ |
| b. The tool makes tracking staff training easy......................................... | 1 ☐ | 2 ☐ |
| c. I had enough training, technical assistance, or other resources to use the tool effectively...................................................................... | 1 ☐ | 2 ☐ |
| d. The tool's reports help our SFA meet reporting requirements for administrative review.......................................................................... | 1 ☐ | 2 ☐ |

**7.9.**

**For each type of school nutrition staff, indicate the number currently employed at your SFA, the number that have already met the training requirements this school year, and the number expected to meet the training requirements by the end of the 2015-2016 school year. The yearly minimum training/continuing education requirement for the 2015-2016 school year is 6 hours for SFA managers and 4 hours for other school nutrition program staff. Please include all staff hired since the beginning of the school year.**

| IF NONE, PLEASE ENTER 0. | NUMBER OF STAFF EMPLOYED | NUMBER OF STAFF ALREADY MEETING THE TRAINING REQUIREMENT | NUMBER OF STAFF EXPECTED TO MEET THE TRAINING REQUIREMENT BY THE END OF THE SCHOOL YEAR |
|---|---|---|---|
| a. **SFA managers** (staff who are directly responsible for the management of the day-to-day operations of school nutrition programs)........ | \|__\|__\|__\| | \|__\|__\|__\| | \|__\|__\|__\| |
| b. **School nutrition program staff** (staff who are involved in routine non-managerial operations of school nutrition programs and work 20+ hours a week)................................................................. | \|__\|__\|__\| | \|__\|__\|__\| | \|__\|__\|__\| |
| c. **Part-time school nutrition program staff** (individuals who work less than 20 hours a week and are involved in routine non-managerial operations of school nutrition programs)............... | \|__\|__\|__\| | \|__\|__\|__\| | \|__\|__\|__\| |

**7.10** `NEW` **Please specify the number of staff (SFA managers, school nutrition staff, and part-time school nutrition staff) that received any training on the following topics for the 2015-2016 school year training requirement. Then indicate whether the SFA director received training on each topic by checking the box.**

IF YOU ANSWERED "0" FOR THE NUMBER OF STAFF EMPLOYED IN 7.9A, B, OR C THEN SKIP TO THE NEXT STAFF **TYPE** COLUMN.

| | # OF SFA MANAGERS | # OF SCHOOL NUTRITION STAFF (20 OR MORE HOURS A WEEK) | # OF PART-TIME SCHOOL NUTRITION STAFF (LESS THAN 20 HOURS PER WEEK) | SFA DIRECTOR |
|---|---|---|---|---|
| a. Nutrition (Menu planning, nutrition education, general nutrition)........................................ | \|__\|__\|__\| | \|__\|__\|__\| | \|__\|__\|__\| | 1 ☐ |
| b. Operations (food production, serving food, cashiering/point-of-service, food purchasing/procurement, receiving and storage, food safety and HACCP)........................... | \|__\|__\|__\| | \|__\|__\|__\| | \|__\|__\|__\| | 1 ☐ |
| c. Administration (free and reduced price meal benefits, program management, financial management, human resources and staff training, facilities and equipment planning).............. | \|__\|__\|__\| | \|__\|__\|__\| | \|__\|__\|__\| | 1 ☐ |
| d. Communications, marketing, and/or public relations................................................... | \|__\|__\|__\| | \|__\|__\|__\| | \|__\|__\|__\| | 1 ☐ |
| e. Other (*Specify*)........................................ _____ | \|__\|__\|__\| | \|__\|__\|__\| | \|__\|__\|__\| | 1 ☐ |

## 8. FOOD AND BEVERAGE MARKETING

This section is about food and beverage marketing in your SFA during the 2015-2016 school year. Food and beverage marketing commonly includes logos, brand names, spokes-characters (i.e. cartoon), or product names featured to promote the sale of a food or beverage product.

Examples of food and beverage marketing in schools include property displaying brand names (e.g. signs, scoreboards, lunch trays, sports equipment), school discount or fundraising nights at restaurants, food label redemption programs, incentive programs that provide food as rewards, coupons for food or beverages, corporate-sponsored educational materials or school events, and branded food or beverages sold for school fundraisers.

**8.1.** **Who primarily sets food and beverage marketing policies in schools in your SFA?**

NEW

1 ☐ My SFA

2 ☐ Other departments in my LEA

3 ☐ Individual schools

4 ☐ Other (*Specify*) _____

5 ☐ No policies in place      SKIP TO 8.4

**8.2.** **Is the marketing of all food and beverages prohibited in all schools in your SFA?**

NEW

1 ☐ Yes      SKIP TO 9.1

2 ☐ No

**8.3** **Does your State or SFA restrict food and beverage marketing to only foods/beverages permitted to be sold on the school campus (per Smart Snacks or more stringent standards)?**

NEW

1 ☐ Yes      SKIP TO 8.5

2 ☐ No

**8.4.** **Which of the following foods, beverages, and brands are marketed in your SFA?**

**Please indicate each type of marketing separately for the following school levels:**
- **Elementary schools** (schools composed of any span of grades from kindergarten through 6th grade),
- **Middle or junior high schools** (schools that have no grade lower than 6 and no grade higher than 9),
- **High schools** (schools that have no grade lower than 9 and continue through 12th grade), and
- **Otherschools** (schools that don't meet the elementary, middle or junior high, or high school definition).

| | MARK ALL THAT APPLY | | | |
|---|---|---|---|---|
| | ELEMENTARY SCHOOLS | MIDDLE OR JUNIOR HIGHS | HIGH SCHOOLS | OTHER SCHOOLS |
| a. Frozen desserts................................................ | 1 ☐ | 2 ☐ | 3 ☐ | 4 ☐ |
| b. Bread/grain products........................................... | 1 ☐ | 2 ☐ | 3 ☐ | 4 ☐ |
| c. Snacks (chips, energy bars, etc.)....................... | 1 ☐ | 2 ☐ | 3 ☐ | 4 ☐ |
| d. Candy................................................................ | 1 ☐ | 2 ☐ | 3 ☐ | 4 ☐ |
| e. Soft drinks......................................................... | 1 ☐ | 2 ☐ | 3 ☐ | 4 ☐ |
| f. Sports drinks...................................................... | 1 ☐ | 2 ☐ | 3 ☐ | 4 ☐ |
| g. Water................................................................. | 1 ☐ | 2 ☐ | 3 ☐ | 4 ☐ |
| h. Milk-based beverages........................................ | 1 ☐ | 2 ☐ | 3 ☐ | 4 ☐ |
| i. Beverages other than soft drinks, sports drinks, water, or milk-based.............................. | 1 ☐ | 2 ☐ | 3 ☐ | 4 ☐ |
| j. "Umbrella" brands that produce a variety of products (e.g. General Mills, Nestle, Dannon)............................................................. | 1 ☐ | 2 ☐ | 3 ☐ | 4 ☐ |
| k. Fast food/other restaurant brands..................... | 1 ☐ | 2 ☐ | 3 ☐ | 4 ☐ |
| l. Other (*Specify*)................................................ | 1 ☐ | 2 ☐ | 3 ☐ | 4 ☐ |

_____

**8.5.** **Do you anticipate that your SFA will profit financially from food and beverage marketing during the 2015-2016 school year?**

NEW

1 ☐ Yes

2 ☐ No

d ☐ Don't know

# 9. FOOD SERVICE EQUIPMENT

**9.1**     **This question is about school food service equipment that needs replacement based on school food service operations this school year, 2015-2016. In responding, do not consider equipment that will be replaced or purchased before October 2016.**

NEW

       **Do any schools in your SFA have food service equipment that needs replacement?**

     1 ☐   Yes

     2 ☐   No      SKIP TO 9.3

**9.2**     **What school food service equipment needs replacement?  For each marked equipment type (for example, serving equipment) specify up to five types of equipment needed (e.g. cold food tables, milk coolers).**

NEW

| | MARK IF EQUIPMENT NEEDS REPLACEMENT | EQUIPMENT NEEDED PLEASE SPECIFY UP TO FIVE |
|---|---|---|
| a.  Food Preparation Equipment.................................................. | 1 ☐ | _____ |
| b.  Ovens, Skillets, Broilers.............................................. | 1 ☐ | _____ |
| c.  Steam Equipment.................................................... | 1 ☐ | _____ |
| d.  Refrigerators or Freezers......................................... | 1 ☐ | _____ |
| e.  Dishwashers......................................................... | 1 ☐ | _____ |
| f.  Serving Counters or Carts........................................ | 1 ☐ | _____ |
| g.  Smallware (i.e. Utensils, Trays, or Tableware)........................ | 1 ☐ | _____ |
| h.  Serving Equipment (i.e. Cold or Hot Food Tables, Warming Cabinets, Display Cases, etc.)................................ | 1 ☐ | _____ |
| i.  Cleaning Equipment (i.e. Pot, Pan, and Utensil Washers; Food Waste Disposers and Pulpers; Trash Compacters and Recycling)......................................................... | 1 ☐ | _____ |
| j.  Other (*Specify*)............................................................ | 1 ☐ | _____ |

_____

**The following questions ask about foodservice equipment purchased with NSLP Equipment Assistance Grant funding available from the Fiscal Year (FY) 2014 Agriculture Appropriations Act. The grant period begins in October 2014, and SFAs must complete procurement and expenditure activities by September 30, 2016.**

**9.3    Did your SFA receive an equipment assistance grant in 2014-2015 school year under the FY 2014 Agriculture Appropriations Act?**

$_1$ ☐  Yes

$_2$ ☐  No        SKIP TO 9.5

**9.4    What types of equipment were (or will be) purchased under this grant?**

|  | MARK ONE RESPONSE PER ROW | |
|---|---|---|
|  | YES | NO |
| a. Food Preparation Equipment............................................................................. | $_1$ ☐ | $_2$ ☐ |
| b. Ovens, Skillets, Broilers.................................................................................. | $_1$ ☐ | $_2$ ☐ |
| c. Steam Equipment........................................................................................... | $_1$ ☐ | $_2$ ☐ |
| d. Refrigerators or Freezers............................................................................... | $_1$ ☐ | $_2$ ☐ |
| e. Dishwashers................................................................................................. | $_1$ ☐ | $_2$ ☐ |
| f. Serving Counters or Carts.............................................................................. | $_1$ ☐ | $_2$ ☐ |
| g. Smallware (i.e. Utensils, Trays, or Tableware)............................................... | $_1$ ☐ | $_2$ ☐ |
| h. Serving Equipment (i.e. Cold or Hot Food Tables, Warming Cabinets, Display Cases, etc.)..................................................................................... | $_1$ ☐ | $_2$ ☐ |
| i. Cleaning Equipment (i.e. Pot, Pan, and Utensil Washers; Food Waste Disposers and Pulpers; Trash Compacters and Recycling).......................... | $_1$ ☐ | $_2$ ☐ |
| j. Other (*Specify*)............................................................................................. | $_1$ ☐ | $_2$ ☐ |

_____

**The next questions are about the per unit capitalization thresholds for "foodservice equipment." It is federally required that "foodservice equipment" have a per unit capitalization threshold of $5,000 or more and a useful life of 1 year or more. Some State and local per unit capitalization thresholds may be lower than the federal requirement.**

**9.5** **Does your SFA have a per unit capitalization threshold that is lower than the federal requirement in**
NEW **2015-2016 school year?**

    ₁ ☐   Yes

    ₂ ☐   No           SKIP TO 10.1

    d ☐   Don't know     SKIP TO 10.1

**9.6** **What is the dollar amount of the current per unit capitalization threshold for foodservice equipment**
NEW **purchases at your SFA?**

    $ |__| **,** |__|__|__|   DOLLAR AMOUNT

## 10. MEAL COUNTING

**The following questions ask about meal counting activities in the 2015-2016 school year.**

**10.1.** **How do schools in your SFA keep track of the number of free, reduced price, and paid meals served to students in the cafeteria and non-cafeteria points of service?**

FOR EACH ROW,
MARK ONE PER POINT OF SERVICE TYPE

| | CAFETERIA | | NON-CAFETERIA | |
|---|---|---|---|---|
| | YES | NO | YES | NO |
| a. Coded tickets or tokens..................................... | 1 ☐ | 2 ☐ | 1 ☐ | 2 ☐ |
| b. Coded ID cards................................................. | 1 ☐ | 2 ☐ | 1 ☐ | 2 ☐ |
| c. Personal Identification Numbers (PINs)............. | 1 ☐ | 2 ☐ | 1 ☐ | 2 ☐ |
| d. Biometric technology (for example, fingerprint scanners)............................................................. | 1 ☐ | 2 ☐ | 1 ☐ | 2 ☐ |
| e. Rosters or cashier lists...................................... | 1 ☐ | 2 ☐ | 1 ☐ | 2 ☐ |
| f. Other *(Specify)*................................................. | 1 ☐ | 2 ☐ | 1 ☐ | 2 ☐ |

_____

**10.2. Which of the following types of training is provided to cashiers?**

| | TRAINING PROVIDED? | |
|---|---|---|
| | YES | NO |
| a. Method of counting meals.................................................................. | 1 ☐ | 2 ☐ |
| b. Monitoring student meal selections for reimbursable meals......... | 1 ☐ | 2 ☐ |
| c. Managing cash for a la carte and adult meals............................. | 1 ☐ | 2 ☐ |
| d. Acceptable types of payments....................................................... | 1 ☐ | 2 ☐ |
| e. Meal and food pricing..................................................................... | 1 ☐ | 2 ☐ |
| f. Offer versus serve.......................................................................... | 1 ☐ | 2 ☐ |
| g. Applications for free or reduced price meals................................. | 1 ☐ | 2 ☐ |
| h. Operating a Point of Service (POS) system.................................. | 1 ☐ | 2 ☐ |
| i. Other *(Specify)*.............................................................................. _____ | 1 ☐ | 2 ☐ |

**10.2.1** **How often are the following types of training provided to cashiers? Please specify if it is when the cashier is hired, once each school year or more than once each school year.**

PROGRAMMER LOGIC: IF 10.2a-i= YES THEN THE GRID SHOULD BE FILLED

| | HOW OFTEN PROVIDED? | | |
|---|---|---|---|
| | WHEN CASHIER IS HIRED | ONCE EACH SCHOOL YEAR | MORE THAN ONCE EACH SCHOOL YEAR |
| a. Method of counting meals..................................... | 1 ☐ | 2 ☐ | 3 ☐ |
| b. Monitoring student meal selections for reimbursable meals................................................ | 1 ☐ | 2 ☐ | 3 ☐ |
| c. Managing cash for a la carte and adult meals…… | 1 ☐ | 2 ☐ | 3 ☐ |
| d. Acceptable types of payments.............................. | 1 ☐ | 2 ☐ | 3 ☐ |
| e. Meal and food pricing........................................... | 1 ☐ | 2 ☐ | 3 ☐ |
| f. Offer versus serve................................................. | 1 ☐ | 2 ☐ | 3 ☐ |
| g. Applications for free or reduced price meals......... | 1 ☐ | 2 ☐ | 3 ☐ |
| h. Operating a Point of Service (POS) system.......... | 1 ☐ | 2 ☐ | 3 ☐ |
| i. Other *(Specify)*.......................................................  _____ | 1 ☐ | 2 ☐ | 3 ☐ |

**10.2.2.** **In Question 10.2 you said that you do not provide the following types of training to cashiers. Would these types of training be *useful* to school cashiers given their responsibilities?**

PROGRAMMER LOGIC: IF 10.2a-i= NO THEN THE GRID SHOULD BE FILLED

| | WOULD THIS TYPE OF TRAINING BE USEFUL TO SCHOOL CASHIERS, GIVEN THEIR RESPONSIBILITIES? | |
|---|---|---|
| | YES | NO |
| a. Method of counting meals.............................................. | 1 ☐ | 2 ☐ |
| b. Monitoring student meal selections for reimbursable meals…… | 1 ☐ | 2 ☐ |
| c. Managing cash for a la carte and adult meals............................ | 1 ☐ | 2 ☐ |
| d. Acceptable types of payments................................................... | 1 ☐ | 2 ☐ |
| e. Meal and food pricing................................................................. | 1 ☐ | 2 ☐ |
| f. Offer versus serve...................................................................... | 1 ☐ | 2 ☐ |
| g. Applications for free or reduced price meals............................. | 1 ☐ | 2 ☐ |
| h. Operating a Point of Service (POS) system............................... | 1 ☐ | 2 ☐ |
| i. Other *(Specify)*........................................................................... | 1 ☐ | 2 ☐ |

| | WOULD THIS TYPE OF TRAINING BE USEFUL TO SCHOOL CASHIERS, GIVEN THEIR RESPONSIBILITIES? | |
|---|---|---|
| | YES | NO |
| _____ | | |

**10.3.** **Does your SFA conduct on-site monitoring of cashiers?**

1 ☐ Yes

2 ☐ No    SKIP TO 10.5

**10.4.** **How often is on-site monitoring conducted?**

1 ☐ Less than once a year

2 ☐ Once a year

3 ☐ Twice a year

4 ☐ Three or more times a year

**10.5.** **Do any schools in your SFA use the following point of service methods for school breakfast or lunch?**

NEW

FOR EACH ROW, MARK ONE PER MEAL

| | BREAKFAST | | LUNCH | |
|---|---|---|---|---|
| | YES | NO | YES | NO |
| a. Pre-packaged meal (for example, Grab 'n go, bagged meals)..................................... | 1 ☐ | 2 ☐ | 1 ☐ | 2 ☐ |
| b. Vending machine dispensed meal..................... | 1 ☐ | 2 ☐ | 1 ☐ | 2 ☐ |
| c. Meal delivery to the classroom.......................... | 1 ☐ | 2 ☐ | 1 ☐ | 2 ☐ |
| d. Kiosk or cart........................................................ | 1 ☐ | 2 ☐ | 1 ☐ | 2 ☐ |
| e. Other *(Specify)*................................................ _____ | 1 ☐ | 2 ☐ | 1 ☐ | 2 ☐ |

## 11. SMARTER LUNCHROOMS

**11.1.** **Smarter Lunchrooms use simple, low-cost and no-cost changes to the lunchroom environment to get students to take and eat more healthful foods. Examples of Smarter Lunchrooms strategies include relocating fruit to a more eye-catching location, renaming vegetables with appealing names, and prompting students to select and enjoy healthy foods.**

**Are you aware of the Smarter Lunchrooms Movement?**

~1~ ☐ Yes

~2~ ☐ No     SKIP TO 12.1

**11.2.** **This next question focuses on Smarter Lunchroom strategies designed to increase <u>fruit consumption</u>.**

**Approximately what percentage of your** (PREFILL # FROM 1.1a TOTAL) **schools is implementing at least one of the "Focusing on Fruit" strategies?** *(see below for examples of strategies)*

|___|___|___|  PERCENT OF SCHOOLS

**"Focusing on Fruit" strategies:**

- At least two types of fruit are available daily
- Sliced or cut fruit is available daily
- Fruit options are not browning, bruised or otherwise damaged
- Daily fruit options are given creative, age-appropriate names
- Fruit is available at all points of sale (deli-line, snack windows, a la carte lines etc.)
- Daily fruit options are available in at least two different locations on each service line
- At least one daily fruit option is available near all registers
- Whole fruit options are displayed in attractive bowls or baskets (instead of chaffing/hotel pans)
- A mixed variety of whole fruits are displayed together
- Daily fruit options are easily seen by students of average height for your school
- Daily fruit options are bundled into all grab and go meals available to students
- Daily fruit options are written legibly on menu boards in all service and dining areas

**11.3.** **This next question focuses on Smarter Lunchroom strategies designed to increase <u>vegetable consumption</u>.**

**Approximately what percentage of your** (PREFILL # FROM 1.1a TOTAL) **schools is implementing at least one of the "Promoting Vegetables & Salad" strategies?** *(see below for examples of strategies)*

|__|__|__| PERCENT OF SCHOOLS

**"Promoting Vegetables & Salad " strategies:**

- At least two types of vegetables are available daily

- Vegetables are not wilted, browning, or otherwise damaged

- At least one vegetable option is available in all foodservice areas

- Individual salads or a salad bar is available to all students

- The salad bar is highly visible and located in a high traffic area

- Self-serve salad bar utensils are at the appropriate portion size or larger for all fruits and vegetable offered

- Self-serve salad bar utensils are smaller for croutons, dressing and other non-produce items

- Daily vegetable options are available in at least two different locations on each service line

- Daily vegetable options are easily seen by students of average height for your school

- A daily vegetable option is bundled into grab and go meals available to students

- A default vegetable choice is established by pre-plating a vegetable on some of the trays

- Available vegetable options have been given creative or descriptive names

- All vegetable names are printed/written on name-cards or product IDs and displayed next to each vegetable option daily

- All vegetable names are written and legible on menu boards

- All vegetable names are included on the published monthly school lunch menu

**11.4.** This next question focuses on Smarter Lunchroom strategies to increase consumption of white milk.

Approximately what percentage of your (PREFILL # FROM 1.1a TOTAL) **schools is implementing at least one of "Moving More White Milk" strategies?** *(see below for examples of strategies)*

|___|___|___| PERCENT OF SCHOOLS

**"Moving More White Milk" strategies:**

- All beverage coolers have white milk available

- White milk is placed in front of other beverages in all coolers

- White milk crates are placed so that they are the first beverage option seen in all designated milk coolers

- White milk is available at all points of sale (deli-line, snack windows, a la carte lines etc.)

- White milk represents at least 1/3 of all visible milk in the lunchroom

- White milk is easily seen by students of average height for your school

- White milk is bundled into all grab and go meals available to students as the default beverage

- White milk is promoted on menu boards legibly

- White milk is replenished so all displays appear "full" continually throughout meal service and after each lunch period

**11.5.** This next question focuses on Smarter Lunchroom strategies to increase consumption of the entrée of the day.

Approximately what percentage of your (PREFILL # FROM 1.1a TOTAL) **schools is implementing at least one of the "Entrée of the Day" strategies?** *(see below for examples of strategies)*

|___|___|___| PERCENT OF SCHOOLS

**"Entrée of the Day" strategies:**

- A daily entrée option has been identified to promote as a "targeted entrée" in each service area and for each designated line (deli-line, snack windows, a la carte lines etc.)

- Daily targeted entrée options are highlighted on posters or signs

- Daily targeted entrée is easily seen by students of average height for your school

- Daily targeted entrées have been provided creative or descriptive names

- All targeted entrée names are printed/written on name-cards or product IDs and displayed next to each respective entrée daily

- All targeted entrée names are written and legible on menu boards

- All targeted entrée names are included on the published monthly school lunch menu

- All targeted entrees are replenished so as to appear "full" throughout meal service

**11.6.** **This next question focuses on Smarter Lunchroom strategies to increase the <u>sales of reimbursable meals</u>.**

**Approximately what percentage of your** (PREFILL # FROM 1.1a TOTAL) **schools is implementing at least one of the "Increasing Sales of Reimbursable Meals" strategies?** *(see below for examples of strategies)*

|___|___|___| PERCENT OF SCHOOLS

**"Increasing Sales of Reimbursable Meals" strategies:**

- A reimbursable meal can be created in any service area available to students (salad bars, snack windows, speed lines, speed windows, dedicated service lines etc.)"
- Reimbursable "Combo Meal" pairings are available and promoted daily
- A reimbursable meal has been bundled into a grab and go meal available to students
- Grab and go reimbursable meals are available at a convenience line/speed window
- The convenience line offers only reimbursable grab and go meals with low-fat non-flavored milk fruit and/or vegetable
- Grab and go reimbursable meals are easily seen by students of average height for your school
- The school offers universal free lunch
- A reimbursable combo meal pairing is available daily using alternative entrees (salad bar, fruit & yogurt parfait etc.)
- Reimbursable "Combo Meal" pairings have been provided creative or descriptive, age-appropriate names (i.e., The Hungry Kid Meal, The Athlete's Meal, Bobcat Meal, etc.)
- Reimbursable "Combo Meal" pairing names are written/printed on name-cards, labels, or product IDs and displayed next to each respective meal daily
- All reimbursable "Combo Meal" names are written and legible on menu boards
- All reimbursable "Combo Meal" names are included on the published monthly school lunch menu
- Reimbursable "Combo Meal" pairings are promoted on signs or posters
- The named reimbursable "Combo Meal" is promoted during the school's morning announcements
- Students have the option to pre-order their lunch in the morning or earlier
- The cafeteria accepts cash as a form of payment

**11.7.** **This next question focuses on Smarter Lunchroom strategies to improve the <u>lunchroom environment</u>.**

**Approximately what percentage of your** (PREFILL # FROM 1.1a TOTAL) **schools is implementing at least one of the "Creating School Synergies" strategies?** *(see below for examples of strategies)*

|___|___|___| PERCENT OF SCHOOLS

**"Creating School Synergies" strategies:**

**SIGNING, PRIMING, AND COMMUNICATION**

- Posters displaying healthful foods are visible and readable within all service and dining areas
- Signage/posters/floor decals are available to direct students toward all service areas
- Signs promoting the lunchroom and featured menu items are placed in other areas of the school such as the main office, library or gymnasium
- Menu boards featuring today's meal components are visible and readable within all service and dining areas
- A dedicated space/menu board is visible and readable from 5 feet away within the service or dining area where students can see tomorrow's menu items
- Dining space is branded to reflect student body or school (i.e., school lunchroom is named for school mascot or local hero/celebrity)
- All promotional signs and posters are rotated, updated or changed at least quarterly
- All creative and descriptive names are rotated, updated or changed at least quarterly
- A monthly menu is available and provided to all student families, teachers and administrators
- A monthly menu is visible and readable within the school building
- A weekly "Nutritional Report Card" is provided to parents detailing what their student has purchased during the previous week

**LUNCHROOM ATMOSPHERE**

- Trash on floors, in, or near garbage cans is removed between each lunch period
- Cleaning supplies and utensils are returned to a cleaning closet or are not visible during service and dining
- Compost/recycling/tray return and garbage cans are tidied between lunch periods
- Compost/recycling/tray return and garbage cans are at least 5 feet away from dining students
- Dining and service areas are clear of any non-functional equipment or tables during service
- Sneeze guards in all service areas are clean
- Obstacles and barriers to enter service and dining areas have been removed (i.e. garbage cans, mop buckets, cones, lost & found, etc.)
- Clutter is removed from service and dining areas promptly (i.e., empty boxes, supply shipments, empty crates, pans, lost & found, etc.)
- Students artwork is displayed in the service and/or dining areas
- All lights in the dining and service areas are currently functional and on

- Trays and cutlery are within arm's reach to the students of average height for your school

- Lunchroom equipment is decorated with decals/magnets/signage, etc. wherever possible

- Teachers and administrators dine in the lunchroom with students

- Cafeteria monitors have good rapport with students and lunchroom staff

- The dining space is used for other learning activities beyond meal service (i.e., home economics, culinary nutrition education activities, school activities etc.)

- Staff is encouraged to model healthful eating behaviors to students (i.e., dining in the lunchroom with students, encouraging students to try new foods etc.)

- Staff smiles and greets students upon entering the service line continually throughout meal service

- Students who do not have a full reimbursable meal are politely prompted to select and consume a fruit or vegetable option by staff

**STUDENT INVOLVEMENT**

- Student groups are involved in the development of creative and descriptive names for menu items

- Student groups are involved in creation of artwork promoting menu items

- Student groups are involved in modeling healthful eating behaviors to others (i.e., mentors, high school students eating in the middle school lunchroom occasionally, etc.)

- Student surveys are used to inform menu development, dining space décor and promotional ideas

- Students, teachers and/or administrators announce daily meal deals or targeted items in daily announcements

**RECOGNITION & SUPPORT OF SCHOOL FOOD**

- The school participates in other food program promotions such as: Farm to School, Chefs Move to Schools, Fuel Up to Play 60, Share our Strength, etc.)

- The school has applied or been selected for the Healthier US School Challenge

- A local celebrity (mayor, sports hero, media personality) is invited to share lunch with students 3 to 4 times a year

**A LA CARTE**

- Students must ask to purchase a la carte items from staff members

- Students must use cash to purchase a la carte items which are not reimbursable

- Half portions are available for at least two dessert options

**11.8.** **Is there anything you would like FNS to know about how Smarter Lunchroom strategy implementation is going in your schools?** *(Please describe)*

_____

_____

_____ 57 _____

_____

# 12. REVENUES AND EXPENDITURES

This section asks about revenues and expenditures at your SFA in school years <u>2014-2015</u> and <u>2013-2014</u>.

12.1.   Please record all <u>income</u> that was received by your SFA's food service program.  If you did not have income from a category, please enter a 0 (zero) for that category. If a category includes revenues from another category, list the other categories included by item code in the last column. For example, if income from full price and reduced price meals served to students cannot be separated, record the total student  meal payments in row a, write "b" in the last column, and check NA for row b. If a category is not applicable, please check the NA box.

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**Enter responses for the <u>2014-2015</u> school year here.**

**12.1.1**  $ |__|__|__|,|__|__|__|.|__|__| TOTAL INCOME

---

|  | INCOME | N/A | LIST OTHER CATEGORIES INCLUDED |
|---|---|---|---|
| **INCOME FROM LOCAL SOURCES** | | | |
| a.  Full price meals served to students............. | $ |__|__|__|,|__|__|__|.|__|__| | na ☐ | _____ |
| b.  Reduced price meals served to students…. | $ |__|__|__|,|__|__|__|.|__|__| | na ☐ | _____ |
| c.  Adult meals.................................................. | $ |__|__|__|,|__|__|__|.|__|__| | na ☐ | _____ |
| d.  A la carte sales............................................ | $ |__|__|__|,|__|__|__|.|__|__| | na ☐ | _____ |
| e.  Subsidy from the school district................... | $ |__|__|__|,|__|__|__|.|__|__| | na ☐ | _____ |
| f.  Subsidies from local nonprofits or local government | $ |__|__|__|,|__|__|__|.|__|__| | na ☐ | _____ |
| **INCOME FROM STATE SOURCES** | | | |
| g.  State meal reimbursements for free meals............................................................ | $ |__|__|__|,|__|__|__|.|__|__| | na ☐ | _____ |
| h.  State meal reimbursements for reduced-price meals.................................................. | $ |__|__|__|,|__|__|__|.|__|__| | na ☐ | _____ |
| **INCOME FROM FEDERAL SOURCES** | | | |
| i.  Federal meal reimbursements for free meals............................................................ | $ |__|__|__|,|__|__|__|.|__|__| | na ☐ | _____ |
| j.  Federal meal reimbursements for reduced price meals................................................. | $ |__|__|__|,|__|__|__|.|__|__| | | _____ |
| k.  Federal meal reimbursements for full price meals............................................................ | $ |__|__|__|,|__|__|__|.|__|__| | | _____ |
| l.  Federal income from other child nutrition programs (e.g., FFVP, SMP)...................... | $ |__|__|__|,|__|__|__|.|__|__| | | _____ |
| m.  Other federal income.................................. | $ |__|__|__|,|__|__|__|.|__|__| | | _____ |
| **OTHER SOURCES OF INCOME** | | | |
| n.  _____ | $ |__|__|__|,|__|__|__|.|__|__| | | |
| o.  _____ | $ |__|__|__|,|__|__|__|.|__|__| | | |
| p.  _____ | $ |__|__|__|,|__|__|__|.|__|__| | | |

**12.2.** **Please record all _income_ that was received by your SFA's food service program. If you did not have income from a category, please enter a 0 (zero) for that category. If a category includes revenues from another category, list the other categories included by item code in the last column. For example, if income from full price and reduced price meals served to students cannot be separated, record the total student meal payments in row a, write "b" in the last column, and check NA for row b. If a category is not applicable, please check the NA box.**

---

**Enter responses for the <u>2013-2014</u> school year here.**

**12.2.1** $ |___|___|___|,|___|___|___|.|___|___| TOTAL INCOME

---

|  | INCOME | N/A | LIST OTHER CATEGORIES INCLUDED |
|---|---|---|---|
| **INCOME FROM LOCAL SOURCES** | | | |
| a. Full price meals served to students............. | $ |__|__|__|,|__|__|__|.|__|__| | na ☐ | _____ |
| b. Reduced price meals served to students…. | $ |__|__|__|,|__|__|__|.|__|__| | na ☐ | _____ |
| c. Adult meals.................................................. | $ |__|__|__|,|__|__|__|.|__|__| | na ☐ | _____ |
| d. A la carte sales........................................... | $ |__|__|__|,|__|__|__|.|__|__| | na ☐ | _____ |
| e. Subsidy from the school district................... | $ |__|__|__|,|__|__|__|.|__|__| | na ☐ | _____ |
| f. Subsidies from local nonprofits or local government | $ |__|__|__|,|__|__|__|.|__|__| | na ☐ | _____ |
| **INCOME FROM STATE SOURCES** | | | |
| g. State meal reimbursements for free meals............................................................ | $ |__|__|__|,|__|__|__|.|__|__| | na ☐ | _____ |
| h. State meal reimbursements for reduced-price meals................................................... | $ |__|__|__|,|__|__|__|.|__|__| | na ☐ | _____ |
| **INCOME FROM FEDERAL SOURCES** | | | |
| i. Federal meal reimbursements for free meals............................................................ | $ |__|__|__|,|__|__|__|.|__|__| | na ☐ | _____ |
| j. Federal meal reimbursements for reduced price meals..................................... | $ |__|__|__|,|__|__|__|.|__|__| | | _____ |
| k. Federal meal reimbursements for full price meals................................................. | $ |__|__|__|,|__|__|__|.|__|__| | | _____ |
| l. Federal income from other child nutrition programs (e.g., FFVP, SMP)....................... | $ |__|__|__|,|__|__|__|.|__|__| | | _____ |
| m. Other federal income.................................. | $ |__|__|__|,|__|__|__|.|__|__| | | _____ |
| **OTHER SOURCES OF INCOME** | | | |
| n. _____ | $ |__|__|__|,|__|__|__|.|__|__| | | |
| o. _____ | $ |__|__|__|,|__|__|__|.|__|__| | | |
| p. _____ | $ |__|__|__|,|__|__|__|.|__|__| | | |

**12.3.** **The next set of questions ask about whether your SFA or state provided a <u>subsidy</u> for breakfasts or lunches and how that subsidy was provided. Do not count NSLP or SBP reimbursements.**

**Enter responses for the <u>2014-2015</u> school year here.**

| | Did you receive a subsidy? | | |
| --- | --- | --- | --- |
| | YES | NO | NOT APPLICABLE |
| **SFA** | | | |
| a. Breakfast.................................................................... | 1 ☐ | 2 ☐ | 3 ☐ |
| b. Lunch.......................................................................... | 1 ☐ | 2 ☐ | 3 ☐ |
| **STATE** | | | |
| c. Breakfast.................................................................... | 1 ☐ | 2 ☐ | 3 ☐ |
| d. Lunch.......................................................................... | 1 ☐ | 2 ☐ | 3 ☐ |

**12.3.1a-d. How was the subsidy for [FILL WITH SFA/STATE BREAKFAST/LUNCH] provided?**

PROGRAMMER LOGIC: If 12.3 = YES THEN ASKS 12.3a-d

| | How was the subsidy provided? MARK ONE ONLY |
| --- | --- |
| **SFA** | |
| a. Breakfast........................................................ | 1 ☐ Per-meal<br>2 ☐ Annual lump sum<br>3 ☐ Supplemental to cover specific costs<br>4 ☐ Based on a percentage of low-income students<br>5 ☐ Other *(Specify)* _____ |
| b. Lunch.............................................................. | 1 ☐ Per-meal<br>2 ☐ Annual lump sum<br>3 ☐ Supplemental to cover specific costs<br>4 ☐ Based on a percentage of low-income students<br>5 ☐ Other *(Specify)* _____ |
| **STATE** | |
| c. Breakfast........................................................ | 1 ☐ Per-meal<br>2 ☐ Annual lump sum<br>3 ☐ Supplemental to cover specific costs<br>4 ☐ Based on a percentage of low-income students<br>5 ☐ Other *(Specify)* _____ |
| d. Lunch.............................................................. | 1 ☐ Per-meal<br>2 ☐ Annual lump sum<br>3 ☐ Supplemental to cover specific costs<br>4 ☐ Based on a percentage of low-income students<br>5 ☐ Other *(Specify)* _____ |

**12.4** **The next set of questions ask about whether your SFA or state provided a <u>subsidy</u> for breakfasts or lunches and how that subsidy was provided. Do not count NSLP or SBP reimbursements.**

**Enter responses for the <u>2013-2014</u> school year here.**

| | Did you receive a subsidy? | | |
|---|---|---|---|
| | YES | NO | NOT APPLICABLE |
| **SFA** | | | |
| a. Breakfast......................................................... | 1 ☐ | 2 ☐ | 3 ☐ |
| b. Lunch.............................................................. | 1 ☐ | 2 ☐ | 3 ☐ |
| **STATE** | | | |
| c. Breakfast......................................................... | 1 ☐ | 2 ☐ | 3 ☐ |
| d. Lunch.............................................................. | 1 ☐ | 2 ☐ | 3 ☐ |

**12.4.1a-d. How was the subsidy for [FILL WITH SFA/STATE BREAKFAST/LUNCH] provided?**
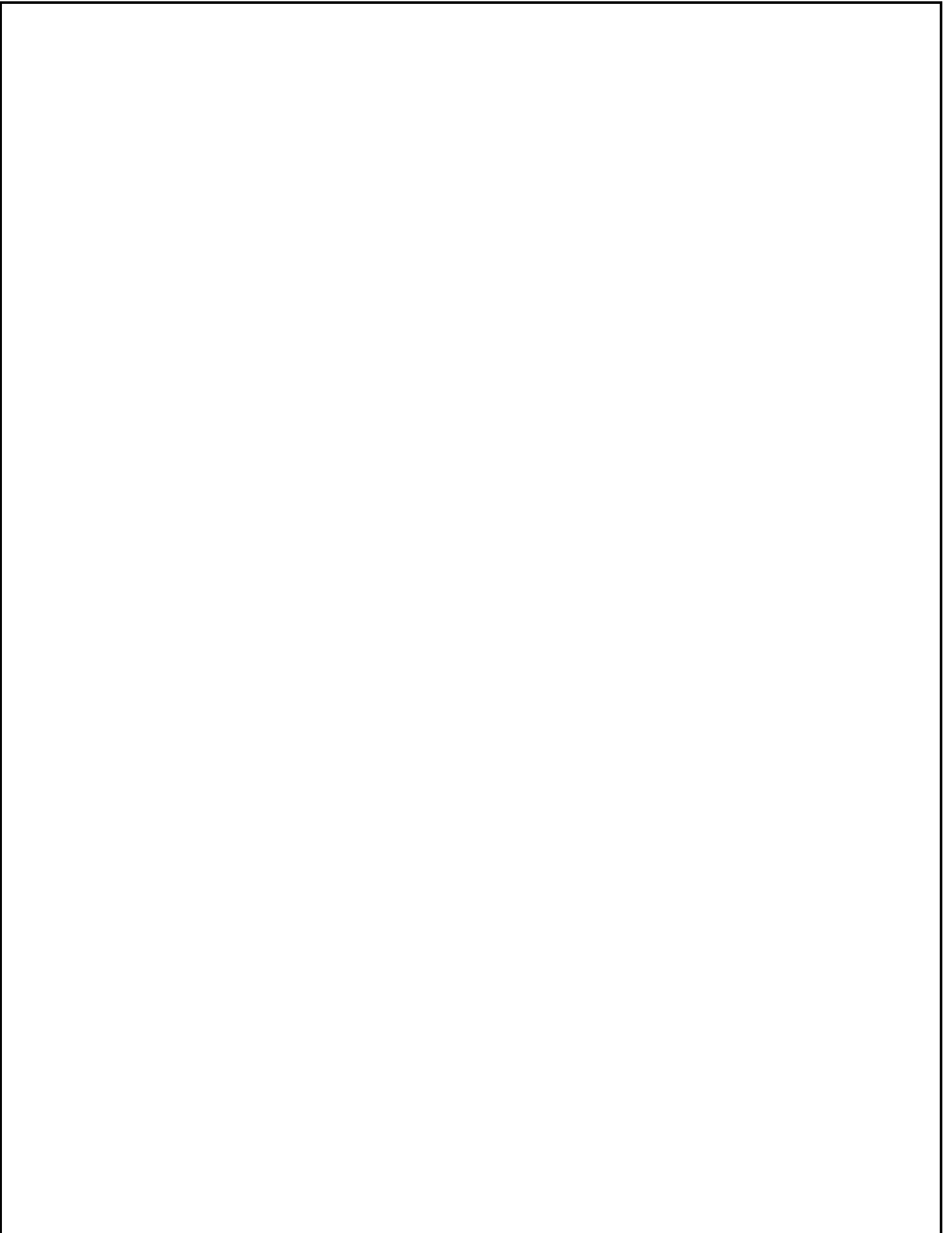
PROGRAMMER LOGIC: If 12.4 = YES THEN ASKS 12.4a-d

| | How was the subsidy provided? MARK ONE ONLY |
|---|---|
| **SFA** | |
| a. Breakfast......................................................... | 1 ☐ Per-meal<br>2 ☐ Annual lump sum<br>3 ☐ Supplemental to cover specific costs<br>4 ☐ Based on a percentage of low-income students<br>5 ☐ Other *(Specify)* _____ |
| b. Lunch.............................................................. | 1 ☐ Per-meal<br>2 ☐ Annual lump sum<br>3 ☐ Supplemental to cover specific costs<br>4 ☐ Based on a percentage of low-income students<br>5 ☐ Other *(Specify)* _____ |
| **STATE** | |
| c. Breakfast......................................................... | 1 ☐ Per-meal<br>2 ☐ Annual lump sum<br>3 ☐ Supplemental to cover specific costs<br>4 ☐ Based on a percentage of low-income students<br>5 ☐ Other *(Specify)* _____ |
| d. Lunch.............................................................. | 1 ☐ Per-meal<br>2 ☐ Annual lump sum<br>3 ☐ Supplemental to cover specific costs<br>4 ☐ Based on a percentage of low-income students<br>5 ☐ Other *(Specify)* _____ |

**12.5.** **Please enter all <u>expenditures</u> for your SFA's food service program. If you did not have an expense for a category, please enter a 0 (zero) for that category. If a category includes expenses from another category, list the other categories included by item code in the last column. If a category is not applicable, please check the NA box.**

> **Enter responses for the <u>2014-2015</u> here.**
>
> **12.5.1** $ |\_\_|\_\_|\_\_|,|\_\_|\_\_|\_\_|.|\_\_|\_\_| TOTAL EXPENDITURES

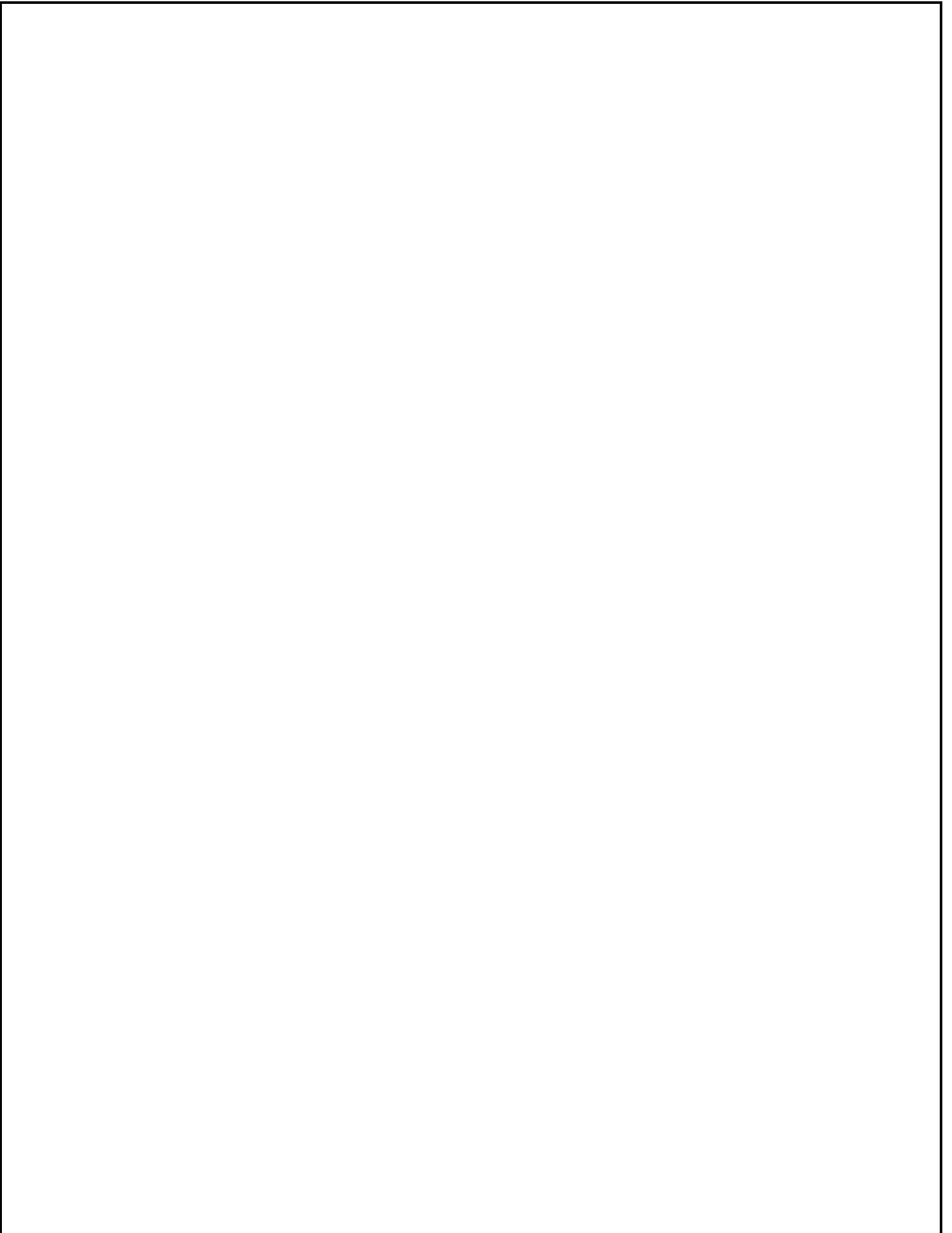| EXPENDITURE CATEGORIES | EXPENDITURES ($) | N/A | LIST OTHER CATEGORIES INCLUDED |
|---|---|---|---|
| a. Salaries.............................................. | $ \|\_\_\|\_\_\|\_\_\|,\|\_\_\|\_\_\|\_\_\|.\|\_\_\| | na ☐ | _____ |
| b. Fringe benefits................................... | $ \|\_\_\|\_\_\|\_\_\|,\|\_\_\|\_\_\|\_\_\|.\|\_\_\| | na ☐ | _____ |
| c. Purchased foods............................... | $ \|\_\_\|\_\_\|\_\_\|,\|\_\_\|\_\_\|\_\_\|.\|\_\_\| | na ☐ | _____ |
|    c.1. Purchased foods for reimbursable meals.................. | $ \|\_\_\|\_\_\|\_\_\|,\|\_\_\|\_\_\|\_\_\|.\|\_\_\| | na ☐ | _____ |
|    c.2. Purchased foods for non-reimbursable meals (e.g., a la carte, adult meals, etc.)......... | $ \|\_\_\|\_\_\|\_\_\|,\|\_\_\|\_\_\|\_\_\|.\|\_\_\| | na ☐ | _____ |
| d. Capital expenditures.......................... | $ \|\_\_\|\_\_\|\_\_\|,\|\_\_\|\_\_\|\_\_\|.\|\_\_\| | na ☐ | _____ |
| e. Supplies............................................ | $ \|\_\_\|\_\_\|\_\_\|,\|\_\_\|\_\_\|\_\_\|.\|\_\_\| | na ☐ | _____ |
| f. Storage and transportation................ | $ \|\_\_\|\_\_\|\_\_\|,\|\_\_\|\_\_\|\_\_\|.\|\_\_\| | na ☐ | _____ |
| g. Contracted services........................... | $ \|\_\_\|\_\_\|\_\_\|,\|\_\_\|\_\_\|\_\_\|.\|\_\_\| | na ☐ | _____ |
| h. Payment for an overclaim as a result of a state or federal audit......... | $ \|\_\_\|\_\_\|\_\_\|,\|\_\_\|\_\_\|\_\_\|.\|\_\_\| | na ☐ | _____ |
| i. Overhead/indirect costs..................... | $ \|\_\_\|\_\_\|\_\_\|,\|\_\_\|\_\_\|\_\_\|.\|\_\_\| | na ☐ | _____ |
| j. Other *(Specify)*................................. | $ \|\_\_\|\_\_\|\_\_\|,\|\_\_\|\_\_\|\_\_\|.\|\_\_\| | na ☐ | _____ |
| k. Other *(Specify)*................................. | $ \|\_\_\|\_\_\|\_\_\|,\|\_\_\|\_\_\|\_\_\|.\|\_\_\| | na ☐ | _____ |
| l. Other *(Specify)*................................. | $ \|\_\_\|\_\_\|\_\_\|,\|\_\_\|\_\_\|\_\_\|.\|\_\_\| | na ☐ | _____ |
| m. Other *(Specify)*................................ | $ \|\_\_\|\_\_\|\_\_\|,\|\_\_\|\_\_\|\_\_\|.\|\_\_\| | na ☐ | _____ |

**12.6.** **Please enter all <u>expenditures</u> for your SFA's food service program. If you did not have an expense for a category, please enter a 0 (zero) for that category. If a category includes expenses from another category, list the other categories included by item code in the last column. If a category is not applicable, please check the NA box.**

---

**Enter responses for the <u>2013-2014</u> here.**

**12.6.1** $ |__|__|__|,|__|__|__|.|__|__| TOTAL EXPENDITURES

---

| EXPENDITURE CATEGORIES | EXPENDITURES ($) | N/A | LIST OTHER CATEGORIES INCLUDED |
|---|---|---|---|
| a. Salaries........................................... | $ |__|__|__|,|__|__|__|.|__|__| | na ☐ | _____ |
| b. Fringe benefits................................. | $ |__|__|__|,|__|__|__|.|__|__| | na ☐ | _____ |
| c. Purchased foods............................. | $ |__|__|__|,|__|__|__|.|__|__| | na ☐ | _____ |
|    c.1. Purchased foods for reimbursable meals................ | $ |__|__|__|,|__|__|__|.|__|__| | na ☐ | _____ |
|    c.2. Purchased foods for non-reimbursable meals (e.g., a la carte, adult meals, etc.)....... | $ |__|__|__|,|__|__|__|.|__|__| | na ☐ | _____ |
| d. Capital expenditures........................ | $ |__|__|__|,|__|__|__|.|__|__| | na ☐ | _____ |
| e. Supplies.......................................... | $ |__|__|__|,|__|__|__|.|__|__| | na ☐ | _____ |
| f. Storage and transportation.............. | $ |__|__|__|,|__|__|__|.|__|__| | na ☐ | _____ |
| g. Contracted services........................ | $ |__|__|__|,|__|__|__|.|__|__| | na ☐ | _____ |
| h. Payment for an overclaim as a result of a state or federal audit....... | $ |__|__|__|,|__|__|__|.|__|__| | na ☐ | _____ |
| i. Overhead/indirect costs.................. | $ |__|__|__|,|__|__|__|.|__|__| | na ☐ | _____ |
| j. Other *(Specify)*............................... | $ |__|__|__|,|__|__|__|.|__|__| | na ☐ | _____ |
| k. Other *(Specify)*.............................. | $ |__|__|__|,|__|__|__|.|__|__| | na ☐ | _____ |
| l. Other *(Specify)*............................... | $ |__|__|__|,|__|__|__|.|__|__| | na ☐ | _____ |
| m. Other *(Specify)*.............................. | $ |__|__|__|,|__|__|__|.|__|__| | na ☐ | _____ |

## 13. SFA DIRECTOR BACKGROUND

These next questions ask about the background of the current SFA director.  If you are responding on behalf of the SFA director, please obtain the information from the SFA director and enter it here.

**13.1.** **When were you hired into your current position as SFA director?**

NEW  *Please enter the month and year of your start date below.*

|___|___| MONTH          |___|___|___|___| YEAR

**13. 2.** **What is the highest grade or year of schooling you completed?**

NEW
- 1 ☐  Less than high school        SKIP TO 13.5
- 2 ☐  High school (or GED)         SKIP TO 13.5
- 3 ☐  Some college, no degree    SKIP TO 13.4
- 4 ☐  Associate's degree
- 5 ☐  Bachelor's degree
- 6 ☐  Master's degree
- 7 ☐  Graduate credits beyond a Master's degree
- 8 ☐  Doctorate

**13. 3.** **Is your degree in foods and nutrition, family and consumer sciences, nutrition education, food service management, dietetics, culinary arts,  business or a related field?**

NEW
- 1 ☐  Yes
- 2 ☐  No

**13.4.** **Prior to being hired in your current position as SFA director did you complete at least 3 credit hours at the university level in the following subjects?**

NEW

| | MARK ONE RESPONSE PER ROW | |
|---|---|---|
| | YES | NO |
| a.  Food service management............................................................ | 1 ☐ | 2 ☐ |
| b.  Nutritional sciences..................................................................... | 1 ☐ | 2 ☐ |

**13.5** **If hired on or after July 1, 2015, did you complete 8 hours or more of food safety training in the 5 years leading up to your SFA director position start date, or within 30 days of your start date?**

NEW
- 1 ☐  Yes
- 2 ☐  No

**13.6.** **How many years of relevant experience in school nutrition programs (this includes previous work in the NSLP and SBP, as well as, experience in other school-based child nutrition programs), did you have before you started your current position?**

|___|___| YEAR(S)

## SURVEY SECTION VERIFICATION SCREEN

Are you ready to complete?

Please review the list below. A check next to the survey section indicates that you have viewed all of the questions in the section.

Before you click "Submit" please make sure you have completed all sections of the survey. You can click the section links below to navigate back into the survey. Once you click the "Submit" button you will not be able to edit your survey.

Submit (Button)

## THANK YOU SCREEN

**Thank you for completing this survey! If you have any questions about this survey, please email [support@2mresearch.com](mailto:support@2mresearch.com) or call toll-free at 866.465.7738.**