|  |
| --- |
| OMB Number: 0584-0530Expiration Date: XX/XX/XXXX |

 

**Third Access, Participation, Eligibility and Certification Study Series (APEC III)**

MEAL TRANSACTION OBSERVATION FORM

SUMMARY:

Meal observation data will be used to determine meal claiming errors by identifying meals incorrectly claimed as reimbursable based on meal components and/or meal recipient.

Field data collectors will conduct meal observations to record meal components viewed on the student’s tray and whether the cashier recorded the meal as reimbursable.

Data collectors will observe breakfast and lunch meal service. They will use a sampling algorithm to randomly select meal period, serving line, and meal trays for observation. Data collectors will record meal observations in hard copy booklet, later enter the data electronically, and finally transmit the data to the home office. The hardcopy booklets will be shipped back to the home office.

According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0584-0530. The time required for the School Cafeteria Manager to provide access to meal transactions for observation is estimated to average 30 minutes per response during each data collection round, including the time to review instructions, search existing data resources, gather and maintain the data needed, and complete and review the collection of information.

**SECTION A:** MEAL OBSERVATION TRANSACTION DETAILS (completed for each meal observation)

|  |  |
| --- | --- |
| SFA Name and Sample ID: | | | | | School Name and ID: | | | | | | |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Date: | | | | / | | | / | | | | | |  | Time Observation Began: | | | / | | | | am |
|  | MONTH |  DAY | YEAR |  |  | hour |  minute | pm |

|  |  |  |
| --- | --- | --- |
| Data Collector Name & ID: | | | | Time Observation Ended: | | | / | | | | am |
|  |  | hour |  minute | pm |

|  |  |  |
| --- | --- | --- |
| Meal Type: □ Breakfast □ Lunch | Meal Period: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Register Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
|
| Offer Versus Serve □ YES □ NO | Cafeteria Layout Appropriate for OVS: □ YES □ NO | Comments (notes about layout, atypical circumstances, etc.):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Substitute Cashier□ YES □ NO | Any atypical circumstances during meal observation:□ YES □ NO |

**SECTION B:** SAMPLING INFORMATION AND RESULTS

**NOTE:** Sampling Information and Sampling Results only need to be recorded ONCE (in one booklet) per school.

**Sampling Information**

|  |  |  |
| --- | --- | --- |
| **BREAKFAST** |  | **LUNCH** |
| **Register/Serving Line#** | **# of Periods** | **Approximate # of transactions** | **Register/Serving Line#** | **# of Periods** | **Approximate # of transactions** |
| 1 |  |  | 1 |  |  |
| 2 |  |  | 2 |  |  |
| 3 |  |  | 3 |  |  |
| 4 |  |  | 4 |  |  |
| 5 |  |  | 5 |  |  |
| 6 |  |  | 6 |  |  |
| 7 |  |  | 7 |  |  |
| 8 |  |  | 8 |  |  |
| 9 |  |  | 9 |  |  |

**Sampling Results**

|  |  |  |
| --- | --- | --- |
| **BREAKFAST** |  | **LUNCH** |
| **Period** | **Register/Serving Line#** | **# of Trays to Observe** | **Start with** | **Interval** | **Period** | **Register/Serving Line#** | **# of Trays to Observe** | **Start with** | **Interval** |
| 1 |  |  |  |  | 1 |  |  |  |  |
| 2 |  |  |  |  | 2 |  |  |  |  |
| 3 |  |  |  |  | 3 |  |  |  |  |
| 4 |  |  |  |  | 4 |  |  |  |  |
| 5 |  |  |  |  | 5 |  |  |  |  |
| 6 |  |  |  |  | 6 |  |  |  |  |
| 7 |  |  |  |  | 7 |  |  |  |  |
| 8 |  |  |  |  | 8 |  |  |  |  |
| 9 |  |  |  |  | 9 |  |  |  |  |

**Breakfast** **Lunch** **(circle one)**

|  | **Tray #: \_\_\_\_\_\_****Type of Participant:** □ **Student** □ **Non-Student** □ **Adult** |
| --- | --- |
| **Food Items** | **Check if Food Item Taken** | **Number of Units Taken** | **NOTES:** |
| 1. | 1. |  |  |
| 2. | 2. |  |  |
| 3. | 3. |  |  |
| 4. | 4. |  |  |
| 5. | 5. |  |  |
| 6. | 6. |  |  |
| 7. | 7. |  |  |
| 8. | 8. |  |  |
| 9. | 9. |  |  |
| 10. | 10. |  |  |
| **IF OVS, were all required components available?**□ **Yes** □ **No (missing component(s):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_)****(3 required for Breakfast, 5 required for Lunch)** **Recorded as Reimbursable?** □ **Yes** □ **No** |
|  | **Tray #: \_\_\_\_\_\_****Type of Participant:** □ **Student** □ **Non-Student** □ **Adult** |
| **Food Items** | **Check if Food Item Taken** | **Number of Units Taken** | **NOTES:** |
| 1. | 1. |  |  |
| 2. | 2. |  |  |
| 3. | 3. |  |  |
| 4. | 4. |  |  |
| 5. | 5. |  |  |
| 6. | 6. |  |  |
| 7. | 7. |  |  |
| 8. | 8. |  |  |
| 9. | 9. |  |  |
| 10. | 10. |  |  |
| **IF OVS, were all required components available?**□ **Yes** □ **No (missing component(s):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_)****(3 required for Breakfast, 5 required for Lunch)** **Recorded as Reimbursable?** □ **Yes** □ **No** |