

C12. SFA DIRECTOR PLANNING INTERVIEW (GROUPS 2, 3, AND FULL AND LIMITED  
OUTLYING AREAS)

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ID#: |\_|\_|\_|\_|\_|\_|\_|\_|\_|\_|

SFA: \_\_\_\_\_

City and State: \_\_\_\_\_

Date: |\_|\_|\_| / |\_|\_|\_| / |\_|\_|\_|\_|\_|\_|

Month Day Year

OMB Control Number: 0584-XXXX  
Expiration Date: XX/XX/XXXX



# School Nutrition and Meal Cost Study-II

## *SFA Director Planning Interview*

According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0584-xxxx. The time required to complete this information collection is estimated to average 20 minutes per response for mainland SFA directors, 54 minutes per response for full approach outlying areas SFA directors, and 10 minutes per response for limited approach outlying areas SFA directors, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. All information will be kept private under the Privacy Act to the extent allowed by law. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to: U.S. Department of Agriculture, Food and Nutrition Service, Office of Policy Support, 3101 Park Center Drive, Room 1014, Alexandria, VA 22302, ATTN: PRA (0584-xxxx). Do not return the completed form to this address.

**SFA PLANNING**

SFA: \_\_\_\_\_ SCHOOL 1: \_\_\_\_\_

SFA DIRECTOR NAME: \_\_\_\_\_ SCHOOL 2: \_\_\_\_\_

GROUP: \_\_\_\_\_ SCHOOL 3: \_\_\_\_\_

EMAIL: \_\_\_\_\_ SCHOOL 4: \_\_\_\_\_

PHONE: |\_|\_|\_|\_|-|\_|\_|\_|\_|-|\_|\_|\_|\_|

**CONFIRM DATES IF MISSING FROM RECRUITMENT:**

SY 2019-2020 start and end dates: |\_|\_|\_|/|\_|\_|\_|/|2|0|1|9| to |\_|\_|\_|/|\_|\_|\_|/|2|0|2|0|

Testing weeks: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Winter and Spring breaks: \_\_\_\_\_

Other possible Target Week restrictions: \_\_\_\_\_

NOTES: \_\_\_\_\_  
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DATE COMPLETED: |\_\_|\_\_| / |\_\_|\_\_| / |2|0|\_\_|\_\_|

## INTRODUCTION

Hello, my name is \_\_\_\_\_. I'm calling on behalf of the U.S. Department of Agriculture, Food and Nutrition Service, or FNS, about the School Nutrition and Meal Cost Study-II. [Thank you for your help securing district approval to participate.] I'm calling to collect some information about the schools that were selected for the study. Is now a good time to talk?

**IF NEEDED:**

*Data collection activities will be limited to only those necessary for success of the study.*

*G2: Your SFA's participation will focus on providing information to assess the effects of the new meal pattern and nutrition requirements and other changes in regulations on food service operations; the nutrient content of school meals offered and served, meal costs and revenues, and student participation and dietary intake.*

*G3: Your SFA's participation will focus on the school food environment, food services operations, and food service costs and revenues. Your SFA has not been selected to participate in the parts of this study which require interviews with students and parents.*

*FULL AND LIMITED OA: Your SFA's participation will focus on food service costs and revenues.*

<b>DATA COLLECTION ACTIVITIES SUMMARY</b>	
<b>G2, G3, Full and Limited OA</b>	<b>Complete a Menu Survey.</b> This survey will collect detailed information on the foods offered and served in reimbursable lunches [G2, G3:, breakfasts, and afterschool snacks (if offered); Full and Limited OA: and breakfasts] during a target week. [G2, G3, and Full OA: School nutrition managers typically complete this survey.]
<b>G2 and G3</b>	<b>SFA Director, School Nutrition Manager, and Principal Surveys.</b> SFA directors, school nutrition managers, and principals will be asked to respond to questions needed to characterize district policies, the school environment, and food service operations.
<b>G2 and G3</b>	<b>School Food Observations.</b> Data collectors will observe one lunch and one breakfast period in selected schools to document characteristics of food service operations. Data collectors will also observe locations where competitive foods are sold, such as in vending machines or school stores.
<b>G2 only</b>	<b>Student and Parent Interviews.</b> Data collectors will interview a small sample of students in school. Parent will complete the interview outside of school, by web or phone.
<b>G3, Full, and Limited OA</b>	<b>SFA Director Cost Interview.</b> SFA directors will be interviewed to gather information about food service costs, [G3: including indirect and administrative costs,] and revenues.
<b>G3 and Full OA</b>	<b>School Nutrition Manager and Principal Cost Interviews.</b> School nutrition managers and principals will also be interviewed to gather information about food service labor costs.
<b>G3 only</b>	<b>[IF APPLICABLE] Plate Waste Observations.</b> Data collectors will observe the amounts of foods taken and the amounts wasted on students' breakfast and lunch trays. Data collectors will not interview children.

[IF LIMITED OA, SKIP TO SECTION C.]

**A. NEW SCHOOLS**

**A1. The first question I have is about new schools. Does your district have any schools that began operating since the 2017-2018 school year? Please include any new schools for 2019-2020 as well, even if they're not officially opened yet.**

IF YES, GO TO QUESTION A2

IF NO, SKIP TO B1

	New School 1	New School 2	New School 3	New School 4
A2. What is the name of the new school?  Probe: If it is easier, you can email me a list at xxx@mathematica-mpr.com.	SCHOOL NAME: _____  _____	SCHOOL NAME: _____  _____	SCHOOL NAME: _____  _____	SCHOOL NAME: _____  _____
A3. What is the zip code of the new school?	ZIPCODE: _____  _____	ZIPCODE: _____  _____	ZIPCODE: _____  _____	ZIPCODE: _____  _____
A4. Does [SCHOOL] participate in the National School Lunch Program? IF NO, TELL RESPONDENT SCHOOL IS NOT ELIGIBLE. SKIP TO NEXT SCHOOL.	1 <input type="checkbox"/> Yes 0 <input type="checkbox"/> No	1 <input type="checkbox"/> Yes 0 <input type="checkbox"/> No	1 <input type="checkbox"/> Yes 0 <input type="checkbox"/> No	1 <input type="checkbox"/> Yes 0 <input type="checkbox"/> No
A5. Is [SCHOOL] a private or charter school? IF PRIVATE OR CHARTER, TELL RESPONDENT SCHOOL IS NOT ELIGIBLE. SKIP TO NEXT SCHOOL.	1 <input type="checkbox"/> Private 2 <input type="checkbox"/> Charter 0 <input type="checkbox"/> No	1 <input type="checkbox"/> Private 2 <input type="checkbox"/> Charter 0 <input type="checkbox"/> No	1 <input type="checkbox"/> Private 2 <input type="checkbox"/> Charter 0 <input type="checkbox"/> No	1 <input type="checkbox"/> Private 2 <input type="checkbox"/> Charter 0 <input type="checkbox"/> No
A6. What grades does [SCHOOL] serve? IF PRE-K OR K ONLY, SCHOOL IS NOT ELIGIBLE. SKIP TO NEXT SCHOOL.	Lowest grade: _____  to Highest grade: _____  _____	Lowest grade: _____  to Highest grade: _____  _____	Lowest grade: _____  to Highest grade: _____  _____	Lowest grade: _____  to Highest grade: _____  _____

**Because you have [number] new school(s) in your SFA, there is a slight chance we may need to change the schools that have been selected to participate in the study. I will check into this after we complete this call.**

**RECRUITER FOLLOWUP – CONFIRM IF ANY NEW SCHOOLS WILL BE ADDED TO THE MAIN SAMPLE. IF SO, ALERT THE SFA ABOUT WHICH SCHOOL(S) HAS BEEN ADDED, AND COMPLETE ALL QUESTIONS BELOW FOR THE NEW MAIN SCHOOL.**

**B. MAIN SAMPLED SCHOOLS (ONE PAGE PER SCHOOL)**

**We have made a preliminary selection of schools for the study. I'd like to ask you about some of these schools' characteristics to make sure they are eligible to be included in the study. We plan to include the [NUMBER OF SAMPLED SCHOOLS IN DISTRICT] from your district. Let's start with [NAME OF FIRST SCHOOL].**

RECRUITER: ASK QUESTIONS IN SECTION B FOR ALL SELECTED SCHOOLS.

<b>SAMPLED SCHOOL NAME:</b>	
B1. Is this school still operating? RECRUITER: NOTE ANY SPECIAL CIRCUMSTANCES MENTIONED.	1 <input type="checkbox"/> Yes 0 <input type="checkbox"/> No
B2. Is [SCHOOL] a private or charter school? IF PRIVATE OR CHARTER, TELL RESPONDENT SCHOOL IS NOT ELIGIBLE. DO NOT ASK REMAINING QUESTIONS ABOUT THIS SCHOOL. SELECT BACK UP SCHOOL FROM RECRUITMENT DATABASE.	1 <input type="checkbox"/> Private 2 <input type="checkbox"/> Charter 0 <input type="checkbox"/> No
B3. Does [SCHOOL] participate in the National School Lunch Program? IF NO, SCHOOL IS NOT ELIGIBLE. DO NOT ASK REMAINING QUESTIONS ABOUT THIS SCHOOL.	1 <input type="checkbox"/> Yes 0 <input type="checkbox"/> No
B4. Does [SCHOOL] participate in the School Breakfast Program?	1 <input type="checkbox"/> Yes 0 <input type="checkbox"/> No
B5. Does [SCHOOL] offer reimbursable afterschool snacks through the National School Lunch Program or afterschool snacks or suppers through the Child and Adult Care Food Program?	1 <input type="checkbox"/> Yes 0 <input type="checkbox"/> No
B6. What is the total current enrollment at [SCHOOL]?	# of Students: _____
B7. What grades does [SCHOOL] serve? IF PRE-K OR K ONLY, SCHOOL IS NOT ELIGIBLE. SKIP TO NEXT SCHOOL.	Lowest grade: _____ to Highest grade: _____
Next we'd like to identify the correct staff to work with to collect data [G2/G3:on-site]. B8. What is the name, phone number, and email address of the principal at [SCHOOL]? What is the best way to reach him/her? MARK BEST: PHONE OR EMAIL	NAME _____ 1 <input type="checkbox"/> PHONE # _____ 2 <input type="checkbox"/> EMAIL _____
B9. What is the best time of day to reach him/her?	_____ 1 <input type="checkbox"/> AM 2 _____ <input type="checkbox"/> PM TIME 0 <input type="checkbox"/> DON'T KNOW
B10. What is the name of the school nutrition manager or other person who will complete the Menu Survey for [SCHOOL]? The goal of the Menu Survey is to obtain a complete and accurate description of the foods offered and served in the school, including foods offered in reimbursable meals [G3:, sold a la carte, and in reimbursable afterschool snacks or supper]. The school nutrition manager usually completes the Menu Survey. What is his/her job title, phone number, and email address? What is the best way to reach him/her? MARK BEST: PHONE OR EMAIL	NAME _____ TITLE _____ 1 <input type="checkbox"/> PHONE # _____ 2 <input type="checkbox"/> EMAIL _____
B11. What is the best time of day to reach him/her?	_____ 1 <input type="checkbox"/> AM 2 _____ <input type="checkbox"/> PM TIME 0 <input type="checkbox"/> DON'T KNOW



<b>SAMPLED SCHOOL NAME:</b>	
B13. Do any of your selected schools share a cafeteria with another school?	1 <input type="checkbox"/> Yes -> GO TO B14 0 <input type="checkbox"/> No -> G2: GO TO C1 G3: GO TO B17
B14. What school(s) does [SCHOOL] share its cafeteria with?	_____
ASK IF SHARED CAFETERIA SCHOOL IN B14 IS NOT IN MAIN SAMPLE. B15. What is the total current enrollment in [SHARED CAFETERIA SCHOOL]?	# of Students: _____
B16. What grades does [SHARED CAFETERIA SCHOOL] serve?	Lowest grade: _____ to Highest grade: _____

**ASK FOR GROUP 3 ONLY**

ASK FOR GROUP 3 AND PW=UNKNOWN ELIGIBILITY. B17. Does [SCHOOL] serve at least 172 reimbursable lunches on a typical school day? [IF SCHOOL INCLUDES PRE-K: Please exclude pre-k from your counts.] <b>IF NO, SCHOOL IS INELIGIBLE FOR PLATE WASTE.</b>	1 <input type="checkbox"/> Yes 0 <input type="checkbox"/> No D <input type="checkbox"/> Don't Know
ASK FOR GROUP 3 AND PW=UNKNOWN ELIGIBILITY. B18a. Are all lunches served and eaten in the cafeteria? <b>IF NO, SCHOOL IS INELIGIBLE FOR PLATE WASTE.</b>	1 <input type="checkbox"/> Yes 0 <input type="checkbox"/> No D <input type="checkbox"/> Don't Know
ASK FOR GROUP 3 AND PW=UNKNOWN ELIGIBILITY. B18b. Are all breakfasts served and eaten in the cafeteria? <b>IF NO, SCHOOL IS INELIGIBLE FOR PLATE WASTE.</b>	1 <input type="checkbox"/> Yes 0 <input type="checkbox"/> No D <input type="checkbox"/> Don't Know
The next questions are about where meals are prepared in your SFA. Some schools receive foods that are prepared off-site from a production or central kitchen. A production kitchen is a school that sends meals out to other schools. Central kitchens are non-school facilities where meals are prepared only for serving at receiving or satellite schools. B19. Does [SCHOOL] <b>receive</b> foods that are prepared off-site, such as from a production or central kitchen?	1 <input type="checkbox"/> Yes -> B20 0 <input type="checkbox"/> No -> C1 D <input type="checkbox"/> Don't Know -> C1
B20. Does [SCHOOL] receive food from a production kitchen or central kitchen? PROBE: A production kitchen is a school that sends meals out to other schools. A central kitchen is a kitchen not housed in a school, but it ships meals out to schools.	1 <input type="checkbox"/> Production kitchen 2 <input type="checkbox"/> Central kitchen
B21. What is the name of the [school with the production kitchen/central kitchen facility] that [SCHOOL] receives its meals from?	SCHOOL/FACILITY NAME: _____

IF B21 IS NOT IN MAIN SAMPLE

B22. What is the name, job title, phone number, email address, and mailing address of the supervisor of the [production/central] kitchen?

What is the best way to reach him/her?

MARK BEST: PHONE OR EMAIL

NAME \_\_\_\_\_

TITLE \_\_\_\_\_

1  PHONE # \_\_\_\_\_

2  EMAIL \_\_\_\_\_

MAILING ADDRESS \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**C. SFA-LEVEL CONTACT INFORMATION**

**ASK C1 FOR GROUP 2 AND 3 ONLY**

**C1. What is the name and job title of the person who plans the menus for [LIST STUDY SCHOOLS]? What is his/her phone number and email address?**

**The Menu Survey collects information on meal patterns. We would like the person who plans the menu for study schools to provide meal pattern contributions for the Menu Survey after the data collection target week.**

RECRUITER: IF MENU PLANNER VARIES BY SCHOOL, COLLECT INFO FOR EACH SCHOOL.

Name \_\_\_\_\_

Title \_\_\_\_\_

Phone Number |\_|\_|\_|\_|-|\_|\_|\_|\_|-|\_|\_|\_|\_|

Email \_\_\_\_\_ ]

**ASK C2 FOR GROUP 3 AND FULL AND LIMITED OA ONLY**

**C2. Prior to the Cost Interviews we will be requesting that you send us a final expense statement for SY 2018-2019 for the SFA. This is part of what is usually called the “statement of income and expense” or the “profit and loss statement.” [Full and Limited OA: We will also need documentation from all vendors for commercially purchased food items and USDA Foods acquisitions that can be used to calculate the unit prices of purchased foods and the value of USDA Foods used by the SFA during the past 3 months.] We will send you instructions for how to upload these documents. Do you have any questions about this request?**

RECRUITER: ANSWER ANY QUESTIONS THE SFA DIRECTOR HAS ABOUT THIS REQUEST.

**ASK C3A FOR GROUP 3 AND FULL OA ONLY**

**C3a. Some of the Cost Interviews ask for information on specific fringe rates, staff salary information, food service expenses, and indirect costs. Will you be able to answer these questions on your own, or will you need help from someone else who works for the SFA or district?**

**PROBE: Sometimes a Business Manager or a Purchasing Manager will complete a portion of the cost interview with the SFA Director.**

- 1  Will be able to answer the questions alone
- 2  Will need other staff to participate

**ASK C3B AND C3C FOR GROUP 3 AND FULL OA ONLY AND IF ABOVE ANSWER = 2**

**C3b.** I'd like to send a letter to the person who will help to answer some of these questions. The letter will explaining this study and their role in it. May I please have this person's name, job title, phone number, email address, and mailing address?

Name \_\_\_\_\_

Title \_\_\_\_\_

Phone Number |\_\_|\_\_|\_\_|\_|-|\_\_|\_\_|\_\_|\_|-|\_\_|\_\_|\_\_|\_|

Email \_\_\_\_\_

Mailing address \_\_\_\_\_

\_\_\_\_\_

**C3c. What is the best way to reach him/her—by phone or email?**

1  Phone Number

2  Email

**ASK C4A FOR GROUP 3 AND FULL AND LIMITED OA ONLY**

Now I would like to ask you some questions about your SFA's unaudited and audited expense and revenue statements.

**C4a.** When will the unaudited SFA income and revenue statements for the current school year (2019-2020) be available? Please provide the day, month and year.

|\_\_|\_\_| / |\_\_|\_\_| / |\_\_|\_\_|\_\_|\_\_|

Month Day Year

d  Don't know GO TO C4b

IF THE RESPONDENT CAN'T GIVE THE DAY THEN PROBE: **Your best estimate is fine. Can you provide the month and year?**

**SKIP C4B IF ANSWER IS PROVIDED IN C4A**

**C4b.** We will not need these statements until the 2020-2021 school year. Will the unaudited income and revenue statement be ready by the beginning of the next school year?

1  Yes

0  No

**ASK C5A FOR GROUP 3 AND FULL AND LIMITED OA ONLY**

**C5a. When will the audited SFA income and revenue statements for the current school year (2019-2020) be available? Please provide the day, month and year.**

|\_|\_| / |\_|\_| / |\_|\_|\_|\_|  
Month Day Year

Don't know GO TO C5b

**IF THE RESPONDENT CAN'T GIVE THE DAY THEN PROBE: Your best estimate is fine. Can you provide the month and year?**

**SKIP IF ANSWER IS PROVIDED IN C5a**

**C5b. We will not need these statements until the 2020-2021 school year. Will the audited income and revenue statement be ready by the beginning of the next school year?**

Yes

No

RECRUITER: IF THE SFA DIRECTOR CANNOT PROVIDE DATE RANGES THEN PROBE FOR CONTACT INFORMATION FOR A PERSON IN THE DISTRICT WHO MAY KNOW THE ANSWER AND ENTER INFORMATION INTO THE RECRUITMENT DATABASE

**ASK C6 FOR FULL AND LIMITED OA ONLY**

**C6. For the Cost Interview, we will be using an online meeting tool which will give the interviewer the ability to share their screen. This tool requires that you have reliable internet connection. Do you have access to reliable internet connection?**

Yes

No

RECRUITER: RECORD IN THE DATABASE INFORMATION REGARDING WHETHER OR NOT THE SFA DIRECTOR ANTICIPATES HAVING A RELIABLE INTERNET CONNECTION FOR THE INTERVIEW. IF THERE IS ANY ADDITIONAL INFORMATION ABOUT THE SFA DIRECTOR'S SITUATION THEN RECORD THIS IN THE DATABASE.

## D. TARGET WEEK

**[G2/G3: We would like to schedule a specific week for schools in your SFA to complete the menu survey and collect on-site data. For logistical reasons, all of the schools should complete the survey the same week. Could we schedule your target week for [SUGGESTED DATE]?**

RECRUITER: REFER TO DATABASE FOR THE SUGGESTED AND BACK-UP TARGET WEEKS. WHEN A DATE HAS BEEN CHOSEN SELECT IT IN THE DATABASE.]

**[FULL OA: We would also like to schedule [AK: a specific week; GU/HI/PR/USVI: a range of weeks] for when schools in your SFA can complete their cost and menu surveys.**

**GU/HI/PR/USVI: Do the weeks of [FILL WITH SUGGESTED RANGE OF WEEKS] work for your SFA?**

RECRUITER: REFER TO DATABASE FOR THE SUGGESTED AND BACK-UP RANGE OF WEEKS. WHEN A DATE HAS BEEN CHOSEN SELECT IT IN THE DATABASE.

**AK: Does the week of [FILL WITH SUGGESTED WEEK] work for your SFA and the schools?**

RECRUITER: REFER TO DATABASE FOR THE SUGGESTED AND BACK-UP TARGET WEEKS. WHEN A DATE HAS BEEN CHOSEN SELECT IT IN THE DATABASE.]

**[G3, FULL AND LIMITED OA: We would like to schedule a day and time for completing your cost interview. The cost interview will take approximately [G3, FULL OA: 3 hours and should take place towards the end of your data collection week; LIMITED OA: 1 and a half hours]. (IF C3a=2: You and [FILL NAME(S) PROVIDED in C3b] will also need to be available at this time.)**

RECRUITER: SELECT THE DAY AND TIME IN THE DATABASE.]

**Those are all the questions I have at this time. [G2, G3, FULL OA: I will be sending some suggested dates and times for the school-level activities – we will work with each school to confirm the schedule.]**

**I will follow up with an email [later today/tomorrow] that summarizes the next steps and confirms the dates we just discussed. [CONFIRM E-MAIL ADDRESS.]**

**Thank you for your time. If you have any questions, please call me directly at xxx-xxx-xxxx or email me at [EMAIL].**