

F3. SFA DIRECTOR SURVEY (GROUPS 1, 2, & 3)

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School Nutrition and Meal Cost Study-II

School Food Authority Director Survey

Sponsored by:

U.S. Department of Agriculture
Food and Nutrition Service

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PROGRAMMER: LOAD GROUPID (1, 2, 3); SFA CEP STATUS; SFA PROVISION 1 STATUS FOR NSLP; SFA PROVISION 1 STATUS FOR SBP; SFA PROVISION 2 STATUS FOR NSLP; SFA PROVISION 2 STATUS FOR SBP; SFA PROVISION 3 STATUS FOR NSLP; SFA PROVISION 3 STATUS FOR SBP; SAMPLED SCHOOL NAMES

A. VERIFICATION

ALL

NOT REQUIRED

A1. This survey asks about [FILL SFA]. [IF GROUPID=2 or 3, FILL:] This includes the following schools: [FILL ALL SCHOOL NAMES].

ALL

NOT REQUIRED

A2. Please enter your name, phone number, and email address so we can contact you if we have any questions about the survey.

First Name

(STRING 20)

Last Name

(STRING 20)

Phone Number

(Phone number format: (XXX) XXX-XXXX)

Email Address

(STRING 40)

SOFT CHECK: IF A2=NO RESPONSE: Your response to this question is important. Please provide a response and continue.

ALL

NOT REQUIRED

First we are going to ask you a few general questions about all of the schools in your SFA before asking about specific schools.

A3. Do all, some, or none of the schools in your SFA participate in any of the following?

Schools participating in the Child and Adult Care Food Program provide free snacks and/or suppers to children during afterschool programs.

Schools participating in the Summer Food Service Program provide free meals to children when school is not in session.

PROGRAMMER: CODE ONE PER ROW

Select one per row

	ALL	SOME	NONE
a. School Breakfast Program (SBP)	2 <input type="radio"/>	1 <input type="radio"/>	0 <input type="radio"/>
b. National School Lunch Program (NSLP) afterschool snacks	2 <input type="radio"/>	1 <input type="radio"/>	0 <input type="radio"/>
c. Child and Adult Care Food Program (CACFP) snacks	2 <input type="radio"/>	1 <input type="radio"/>	0 <input type="radio"/>
d. CACFP suppers	2 <input type="radio"/>	1 <input type="radio"/>	0 <input type="radio"/>
e. Summer Food Service Program (SFSP)	2 <input type="radio"/>	1 <input type="radio"/>	0 <input type="radio"/>
f. Farm-to-School Programs	2 <input type="radio"/>	1 <input type="radio"/>	0 <input type="radio"/>
g. Seamless Summer Program Option (SSO)	2 <input type="radio"/>	1 <input type="radio"/>	0 <input type="radio"/>

SOFT CHECK: IF ANY QUESTION A3a-A3f =NO RESPONSE; Your response to this question is important. Please provide a response and continue.

SHOW A4A,C,E IF A3A = 2, 1 AND

SAMPLE LOAD IS MISSING ANY OF THE FOLLOWING:

- SFA CEP STATUS OR
- SFA PROVISION 1 STATUS
- SFA PROVISION 2 STATUS FOR SBP OR
- SFA PROVISION 3 STATUS FOR SBP;

SHOW A4A, B, D IF A3B = 2, 1 AND SAMPLE LOAD IS MISSING ANY OF THE FOLLOWING:

- SFA CEP STATUS OR
- SFA PROVISION 1 STATUS
- SFA PROVISION 2 STATUS FOR NSLP OR
- SFA PROVISION 3 STATUS FOR NSLP OR

ELSE GO TO A5

NOT REQUIRED

A4. Do all, some, or none of the schools in your SFA participate in the following provisions?

Community Eligibility Provision schools serve meals at no charge to all children based on large proportions of children certified for free school meals through means other than a household application.

Provision 1 schools serve meals at no charge to children who are certified every two years.

Provision 2 schools serve meals at no charge to all children as determined by application once every four years.

Provision 3 schools serve meals at no charge to all children regardless of eligibility status.

Select one per row

	ALL	SOME	NONE
a. [IF SFA CEP STATUS MISSING FROM SAMPLE LOAD AND A3A = 2,1 OR A3B = 2,1] Community Eligibility Provision	2 <input type="radio"/>	1 <input type="radio"/>	0 <input type="radio"/>
b. [IF SFA PROVISION 1 STATUS FOR NSLP MISSING FROM SAMPLE LOAD AND A3B = 2,1] Provision 1 for the National School Lunch Program (NSLP)	2 <input type="radio"/>	1 <input type="radio"/>	0 <input type="radio"/>
c. [IF SFA PROVISION 1 STATUS FOR NBP MISSING FROM SAMPLE LOAD AND A3A = 2,1] Provision 1 for the School Breakfast Program (SBP)	2 <input type="radio"/>	1 <input type="radio"/>	0 <input type="radio"/>
d. [IF SFA PROVISION 2 STATUS FOR NSLP MISSING FROM SAMPLE LOAD AND A3B = 2,1] Provision 2 for NSLP	2 <input type="radio"/>	1 <input type="radio"/>	0 <input type="radio"/>
e. [IF SFA PROVISION 2 STATUS FOR SBP MISSING FROM SAMPLE LOAD AND A3A = 2,1] Provision 2 for SBP	2 <input type="radio"/>	1 <input type="radio"/>	0 <input type="radio"/>
f. [IF SFA PROVISION 3 STATUS FOR NSLP MISSING FROM SAMPLE LOAD AND A3B = 2,1] Provision 3 for the NSLP	2 <input type="radio"/>	1 <input type="radio"/>	0 <input type="radio"/>
g. [IF SFA PROVISION 3 STATUS FOR SBP MISSING FROM SAMPLE LOAD AND A3A = 2,1] Provision 3 for the SBP	2 <input type="radio"/>	1 <input type="radio"/>	0 <input type="radio"/>

SOFT CHECK: IF ANY QUESTION IN A4a-A4g =NO RESPONSE; Your response to this question is important. Please provide a response and continue.

PROGRAMMER

1. CREATE VARIABLE "CEP" = ALL/SOME/NONE FROM SAMPLE LOAD OR A4A RESPONSE.
2. CREATE VARIABLE "P2_NSLP" = ALL/SOME/NONE FROM SAMPLE LOAD OR A4D RESPONSE.
3. CREATE VARIABLE "P2_SBP" = ALL/SOME/NONE FROM SAMPLE LOAD OR A4E RESPONSE.
4. CREATE VARIABLE "P3_NSLP" = ALL/SOME/NONE FROM SAMPLE LOAD OR A4F RESPONSE.
5. CREATE VARIABLE "P3_SBP" = ALL/SOME/NONE FROM SAMPLE LOAD OR A4G RESPONSE.

ALL

NOT REQUIRED

A5. Which of the following school types does your SFA include?

Select all that apply

- Elementary schools..... 1
- Middle schools..... 2
- High schools..... 3

SOFT CHECK: IF A5=NO RESPONSE; Your response to this question is important. Please provide a response and continue.

B. INDIVIDUAL SCHOOLS IN SFA

PROGRAMMER
IF GROUPID=1 GO TO SECTION C
ELSE IF GROUPID=2 OR 3 CONTINUE TO B1. WHEN FINISHED WITH SCHOOL 1, REPEAT B1-B8 FOR ALL REMAINING SCHOOLS.

GROUPID=2 OR 3
NOT REQUIRED

Next we are going to ask you some questions about specific schools in your SFA.

PROGRAMMER: DISPLAY B1, B2, AND B3 ON ONE SCREEN

GROUPID=2 OR 3
NOT REQUIRED

B1. How many students are enrolled at [NAME OF SCHOOL] in the 2019-2020 school year?

TOTAL STUDENT ENROLLMENT
(RANGE 1-6,000)
NO RESPONSE..... M

SOFT CHECK: IF B1>1,000; You entered that the total student enrollment for the current school year is [FILL]. Please confirm or correct your response and continue.

GROUPID=2 OR 3
NOT REQUIRED

B2. You specified that your total enrollment is [FILL B1 VALUE]. How many students in [NAME OF SCHOOL] are approved for free meals in the 2019-2020 school year?

STUDENTS APPROVED FOR FREE MEALS
(RANGE 0-6,000)
NO RESPONSE..... M

SOFT CHECK: IF B2>B1; You entered that there are more students approved for free meals in the 2019-2020 school year than students enrolled. Please confirm or correct your response and continue.

GROUPID=2 OR 3
NOT REQUIRED

B3. Of [FILL B1 VALUE] enrolled students at [NAME OF SCHOOL], how many are approved for reduced-price meals in the 2019-2020 school year?

	STUDENTS APPROVED FOR REDUCED PRICE MEALS
(RANGE 0-6,000)	
NO RESPONSE.....	M

SOFT CHECK: IF B3>B1; **You entered that there are more students approved for reduced-price meals in the 2019-2020 school year than students enrolled. Please confirm or correct your response and continue.**
 IF B1 (ENROLLMENT)< (SUM B2 [FREE MEALS] + B3 [RP MEALS]): **You entered that the total student enrollment for the current school year is less than the number of students receiving free and reduced price meals. Please confirm or correct your response and continue.**

GROUPID=2 OR 3
NOT REQUIRED

B4. What grade groups are used to plan NSLP lunch menus for [NAME OF SCHOOL] for the 2019-2020 school year?

Select all that apply

- Grades K-5..... 1
- Grades 6-8..... 2
- Grades 9-12..... 3
- NO RESPONSE..... M

(GROUPID=2 OR 3) AND
 [A3a=2 ("SOME" SCHOOLS PARTICIPATE IN THE SBP)] AND
 [CEP NE ALL OR P2_SBP NE ALL OR P3_SBP NE ALL (SOME/NONE SCHOOLS ARE CEP, P2 SBP, P3 SBP)] OR A3A=MISSING

NOT REQUIRED

B5. Does [NAME OF SCHOOL] participate in the School Breakfast Program (SBP)?

- Yes..... 1
- No..... 0 GO TO B8
- NO RESPONSE..... M GO TO B8

SOFT CHECK: IF B5=NO RESPONSE; **Your response to this question is important. Please provide a response and continue.**

(GROUPID=2 OR 3) AND
(B5=1 OR [CEP=ALL OR P2_SBP= ALL OR P3_SBP=ALL])

NOT REQUIRED

B6. What grade groups are used to plan SBP breakfast menus for [NAME OF SCHOOL] for the 2019-2020 school year?

Select all that apply

- Grades K-5..... 1
- Grades 6-8..... 2
- Grades 9-12..... 3
- NO RESPONSE..... M

GROUPID=2 OR 3 AND
B5=1

NOT REQUIRED

B7. Does [NAME OF SCHOOL] offer universal-free breakfast?

- Yes..... 1
- No..... 0
- NO RESPONSE..... M

(GROUPID=2 OR 3)

SHOW B8A IF B5 = 1, M AND CEP = SOME, M (SCHOOL PARTICIPATES IN SBP & SOME SCHOOLS PARTICIPATE IN CEP OR UNKNOWN)

SHOW B8B IF A4_B = SOME, M; (SOME SCHOOLS PARTICIPATE IN PROVISION 1 FOR NSLP OR UNKNOWN)

SHOW B8C IF B5 = 1, M AND A4_C = SOME, M; (SCHOOL PARTICIPATES IN SBP & SOME SCHOOLS PARTICIPATE IN PROVISION 1 FOR SBP OR UNKNOWN)

SHOW B8D IF P2_NSLP = SOME, M; (SOME SCHOOLS PARTICIPATE IN PROVISION 2 FOR NSLP OR UNKNOWN)

SHOW B8E IF B5 = 1, M AND P2_SBP = SOME, M; (SCHOOL PARTICIPATES IN SBP & SOME SCHOOLS PARTICIPATE IN PROVISION 2 FOR SBP OR UNKNOWN)

SHOW B8F IF P3_NSLP = SOME, M; (SOME SCHOOLS PARTICIPATE IN PROVISION 3 FOR NSLP OR UNKNOWN)

SHOW B8G IF B5 = 1, M AND P3_SBP = SOME, M; (SCHOOL PARTICIPATES IN SBP & SOME SCHOOLS PARTICIPATE IN PROVISION 3 FOR SBP OR UNKNOWN)

NOT REQUIRED

B8. Does [NAME OF SCHOOL] operate under any of the following provisions?

Community Eligibility Provision schools serve meals at no charge to all children based on large proportions of children certified for free school meals through means other than a household application.

Provision 1 schools serve meals at no charge to children who are certified every two years.

Provision 2 schools serve meals at no charge to all children as determined by application once every four years.

Provision 3 schools serve meals at no charge to all children regardless of eligibility status.

Select one per row

	YES	NO
a. [IF CEP=SOME, M and B5=1, M] Community Eligibility Provision	1 <input type="radio"/>	0 <input type="radio"/>
b. [IF A4_B=SOME, M] Provision 1 for NSLP	1 <input type="radio"/>	0 <input type="radio"/>
c. [IF A4_C=SOME, M AND B5=1, M] Provision 1 for SBP	1 <input type="radio"/>	0 <input type="radio"/>
d. [IF P2_NSLP=SOME, M] Provision 2 for NSLP	1 <input type="radio"/>	0 <input type="radio"/>
e. [IF P2_SBP=SOME, M AND B5=1, M] Provision 2 for SBP	1 <input type="radio"/>	0 <input type="radio"/>
f. [IF P3_NSLP=SOME, M] Provision 3 for NSLP	1 <input type="radio"/>	0 <input type="radio"/>
g. [IF P3_SBP=SOME, M AND B5=1, M] Provision 3 for SBP	1 <input type="radio"/>	0 <input type="radio"/>

SOFT CHECK: IF ANY QUESTION IN B8A-B8E=NO RESPONSE; Your response to this question is important. Please provide a response and continue.

PROGRAMMER BOX:
 REPEAT QUESTIONS B1-B8 FOR EVERY SCHOOL
 IN THE SAMPLE AT THAT SFA.

C. SFA OVERVIEW

PROGRAMMER:
DISPLAY C1 AND C2 ON THE SAME PAGE

ALL
NOT REQUIRED

The following questions ask about your SFA and all of the schools in it.

C1. How many school districts are in your SFA?

DISTRICTS

(RANGE 1-20)

NO RESPONSE..... M

ALL
NOT REQUIRED

C2. How many schools are in your SFA?

SCHOOLS

(RANGE 1-6,000)

NO RESPONSE..... M

SOFT CHECK: IF C2 =NO RESPONSE; Your response to this question is important. Please provide a response and continue.

ALL
NOT REQUIRED

C3. Are any schools in your SFA charter schools?

Yes..... 1

No..... 0

NO RESPONSE..... M

ALL
NOT REQUIRED

C4. Do any of the schools in your SFA operate a school garden? *School gardens include those that are used for nutrition education and/or food service purposes.*

- Yes..... 1
- No..... 0
- NO RESPONSE..... M

A5 = 1 (ELEMENTARY SCHOOLS IN SFA)
NOT REQUIRED

C5. Do any of the elementary schools in your SFA participate in the Fresh Fruit and Vegetable Program (FFVP)? *Elementary schools participating in the Fresh Fruit and Vegetable Program provide free fresh fruits and vegetables to students during the school day.*

- Yes..... 1
- No..... 0
- NO RESPONSE..... M

IF A3a=1 OR 2 (SOME OR ALL SCHOOLS PARTICIPATE IN SBP) ELSE GO TO SECTION D
NOT REQUIRED

C6. Some states or school districts have a policy that requires schools to participate in the School Breakfast Program (SBP). Does your state or district require that schools in your SFA participate in the SBP?

- Yes, there is a state policy..... 1
- Yes, there is a district policy..... 2
- Yes, there are both a state and district policy..... 3
- No, there are no state or district policies that require schools to participate in SBP..... 0 GO TO SECTION D
- NO RESPONSE..... M GO TO SECTION D

SOFT CHECK: IF C6 =NO RESPONSE; Your response to this question is important. Please provide a response and continue.

IF C6=1 OR 2 OR 3 (STATE/DISTRICT REQUIRES PARTICIPATION IN SBP)

NOT REQUIRED

C7. Does the requirement that schools participate in the SBP apply to all schools or some schools in your SFA?

- All schools..... 2
- Some schools..... 1
- NO RESPONSE..... M

SOFT CHECK: IF C7 =NO RESPONSE; **Your response to this question is important. Please provide a response and continue.**

C7=1 (SOME SCHOOLS REQUIRED TO PARTICIPATE IN SBP)

NOT REQUIRED

C8. Which types of schools are required to participate in the SBP?

Select all that apply

- Schools that meet a minimum percentage of enrolled students certified for free or reduced-price meals..... 1
 -
 -
 - Title 1 schools..... 2
 - Severe-need schools..... 3
 - Schools that serve specific grades..... 4
 - Schools that receive non-federal funding to participate in the SBP..... 5
 - Schools that have a high level of demand for SBP from parents of enrolled students..... 6
 - Other reason (SPECIFY)..... 7
- Specify (STRING 255)
- NO RESPONSE..... M

D. STUDENT CERTIFICATION & REIMBURSABLE MEAL COMPONENTS

IF ALL CEP, P2_NSLP, P2_SBP, P3_NSLP, OR P3_SBP = SOME/NONE
 NOT REQUIRED

D1a. Does your SFA offer a web-based application to households to certify students to receive free or reduced-price meals?

- Yes..... 1
 No..... 0

IF ALL CEP, P2_NSLP, P2_SBP, P3_NSLP, OR P3_SBP = SOME/NONE
 NOT REQUIRED

D1b. What sources of categorical eligibility or other means-tested programs did your SFA or State use to directly certify children? If your SFA does not have any students in one or more of the State-approved statuses or programs listed below, mark "not applicable."

SELECT ONE RESPONSE PER ROW

	YES	NO	NOT APPLICABLE	DON'T KNOW
a. SNAP	1 <input type="checkbox"/>	0 <input type="checkbox"/>	n <input type="checkbox"/>	d <input type="checkbox"/>
b. FDPIR	1 <input type="checkbox"/>	0 <input type="checkbox"/>	n <input type="checkbox"/>	d <input type="checkbox"/>
c. TANF	1 <input type="checkbox"/>	0 <input type="checkbox"/>	n <input type="checkbox"/>	d <input type="checkbox"/>
d. Medicaid	1 <input type="checkbox"/>	0 <input type="checkbox"/>	n <input type="checkbox"/>	d <input type="checkbox"/>
e. Head Start	1 <input type="checkbox"/>	0 <input type="checkbox"/>	n <input type="checkbox"/>	d <input type="checkbox"/>
f. Homeless, migrant, or runaway child	1 <input type="checkbox"/>	0 <input type="checkbox"/>	n <input type="checkbox"/>	d <input type="checkbox"/>
g. Foster child	1 <input type="checkbox"/>	0 <input type="checkbox"/>	n <input type="checkbox"/>	d <input type="checkbox"/>
h. Other (SPECIFY)	1 <input type="checkbox"/>	0 <input type="checkbox"/>	n <input type="checkbox"/>	d <input type="checkbox"/>
<div style="border: 1px solid black; width: 100%; height: 100%;"></div>				

IF CEP, P2_NSLP, P2_SBP, P3_NSLP, OR P3_SBP = ALL OR SOME

NOT REQUIRED

D1c. What sources of categorical eligibility, income eligibility, or other means-tested programs did your SFA use to establish claiming percentages for students certified to receive free meals? If your SFA does not have any students in one or more of the State-approved statuses or programs listed below, mark “not applicable.”

SELECT ONE RESPONSE PER ROW

	YES	NO	NOT APPLICABLE	DON'T KNOW
a. SNAP	1 <input type="checkbox"/>	0 <input type="checkbox"/>	n <input type="checkbox"/>	d <input type="checkbox"/>
b. FDIPIR	1 <input type="checkbox"/>	0 <input type="checkbox"/>	n <input type="checkbox"/>	d <input type="checkbox"/>
c. TANF	1 <input type="checkbox"/>	0 <input type="checkbox"/>	n <input type="checkbox"/>	d <input type="checkbox"/>
d. Medicaid	1 <input type="checkbox"/>	0 <input type="checkbox"/>	n <input type="checkbox"/>	d <input type="checkbox"/>
e. Head Start	1 <input type="checkbox"/>	0 <input type="checkbox"/>	n <input type="checkbox"/>	d <input type="checkbox"/>
f. Homeless, migrant, or runaway child	1 <input type="checkbox"/>	0 <input type="checkbox"/>	n <input type="checkbox"/>	d <input type="checkbox"/>
g. Foster child	1 <input type="checkbox"/>	0 <input type="checkbox"/>	n <input type="checkbox"/>	d <input type="checkbox"/>
h. [IF P2_NSLP, P2_SBP, P3_NSLP, OR P3_SBP = ALL OR SOME] Applications for free and reduced price school meals	1 <input type="checkbox"/>	0 <input type="checkbox"/>	n <input type="checkbox"/>	d <input type="checkbox"/>
i. Other (SPECIFY)	1 <input type="checkbox"/>	0 <input type="checkbox"/>	n <input type="checkbox"/>	d <input type="checkbox"/>

IF ALL CEP, P2_NSLP, P2_SBP, P3_NSLP, OR P3_SBP = SOME/NONE

NOT REQUIRED

D2. What percentage of students in your SFA are directly certified to receive free meals?

If no students are directly certified, enter 0%.

Please provide the percentage that was last reported, even if it's from a previous school year.

%

(RANGE 0-100)

SOFT CHECK: IF D2=NO RESPONSE; Your response to this question is important. Please provide a response and continue. If no students are directly certified to receive free meals, enter 0%

IF ALL CEP, P2_NSLP, P2_SBP, P3_NSLP, OR P3_SBP = SOME/NONE

NOT REQUIRED

D3. You indicated that [FILL FROM D2]% of students in your SFA are directly certified to receive free meals. What school year is this data from?

- SY 2019-2020..... 1
- SY 2018-2019..... 2
- SY 2017-2018..... 3
- SY 2016-2017..... 4
- NO RESPONSE..... M

E. IMPLEMENTING FEDERAL NUTRITION STANDARDS FOR SCHOOL MEALS

IF A5 = 1, 2, OR 3

NOT REQUIRED

E1. Competitive foods are all foods and beverages other than reimbursable meals available for sale to students on the school campus during the school day. The Smart Snacks in Schools standards define nutrition standards for all foods and beverages sold on school campuses during the school day.

Do elementary, middle, or high schools in your SFA have nutrition standards for competitive foods that exceed the Smart Snacks in Schools requirements?

PROGRAMMER: CODE ONE PER ROW

Select one per row

	YES	NO	NO COMPETITIVE FOODS
a. Elementary schools	1 <input type="radio"/>	0 <input type="radio"/>	3 <input type="radio"/>
b. Middle schools	1 <input type="radio"/>	0 <input type="radio"/>	3 <input type="radio"/>
c. High schools	1 <input type="radio"/>	0 <input type="radio"/>	3 <input type="radio"/>

SOFT CHECK: IF MISSING RESPONSE IN ANY ROW E1a-c; Your response to this question is important. Please provide one response per row and continue.

F. MENU PLANNING

ALL
NOT REQUIRED

- F1. Do any schools in your district plan their own menus?**
- Yes..... 1
 - No..... 0
 - NO RESPONSE..... M

SOFT CHECK: IF F1=NO RESPONSE; Your response to this question is important. Please provide a response and continue.

ALL
NOT REQUIRED

- F2. Do any schools in your district use cycle menus?** *A cycle menu is a series of menus planned for a specific period of time, for example, 3 weeks. The menu is different for each day during the cycle. At the end of the cycle (i.e., 3 weeks), the menus are repeated in the same order.*
- Yes..... 1
 - No..... 0 GO TO F5
 - NO RESPONSE..... M GO TO F5

SOFT CHECK: IF F3=NO RESPONSE; Your response to this question is important. Please provide a response and continue.

F2 = 1
NOT REQUIRED

- F3. Which types of schools use cycle menus?**
- Select all that apply*
- Elementary schools..... 1
 - Middle schools..... 2
 - High schools..... 3
 - NO RESPONSE..... M

SOFT CHECK: IF F3=NO RESPONSE; Your response to this question is important. Please provide a response and continue.

F3=1 OR 2 OR 3
NOT REQUIRED

F4. What is the length of a single menu cycle (in weeks) at each school type?

a. [IF F3=1, DISPLAY] Length of menu cycle at elementary schools:

 Weeks

(Range=1-20)

b. [IF F3=2, DISPLAY] Length of menu cycle at middle schools:

 Weeks

(Range=1-20)

c. [IF F3=3, DISPLAY] Length of menu cycle at high schools:

 Weeks

(Range=1-20)

NO RESPONSE..... M

SOFT CHECK: IF F4 a, b, or c=NO RESPONSE; Your response to this question is important. Please provide a response and continue.

SOFT CHECK: IF F4 a, b, or c>8; You said that your cycle menu is greater than 8 weeks. If that is not correct, please correct your response and continue.

ALL

NOT REQUIRED

F5. Which of the following tools and practices does your SFA use to plan menus to meet the meal pattern and nutrient requirements for reimbursable lunches and breakfasts?

Select one per row

	YES	NO
a. Evaluate menus using a simplified nutrient assessment	1 <input type="radio"/>	0 <input type="radio"/>
b. Evaluate menus using approved nutrient analysis software	1 <input type="radio"/>	0 <input type="radio"/>
c. Plan menus using USDA certification worksheets	1 <input type="radio"/>	0 <input type="radio"/>
d. Plan menus using commercially available alternatives to USDA certification worksheets, such as eTrition, Health-e Meal Planner, or Meals Plus	1 <input type="radio"/>	0 <input type="radio"/>
e. Use USDA interactive Food Buying Guide	1 <input type="radio"/>	0 <input type="radio"/>
f. Use menu planning resources from Team Nutrition or Institute of Child Nutrition	1 <input type="radio"/>	0 <input type="radio"/>
g. Create or modify standardized recipes to meet updated meal patterns	1 <input type="radio"/>	0 <input type="radio"/>
h. Refine product specifications to purchase foods to meet updated meal patterns	1 <input type="radio"/>	0 <input type="radio"/>
i. Learn about new products developed to comply with requirements, for example by attending food shows or USDA Foods workshops sponsored by your State agency	1 <input type="radio"/>	0 <input type="radio"/>
j. Review food product CN labels and product formulation statements	1 <input type="radio"/>	0 <input type="radio"/>
k. Other (SPECIFY)	1 <input type="radio"/>	0 <input type="radio"/>
<input type="text"/> (STRING 255)		
l. None of the above [EXCLUSIVE]	1 <input type="radio"/>	0 <input type="radio"/>
NO RESPONSE.....		M

ALL
NOT REQUIRED

F6. Does your SFA include any schools that include grades outside of the standard grade groups defined in the nutrition standards (that is, outside of K-5, 6-8, 9-12)?

Schools that include grades outside of the standard grade groups are:

- 1) *Schools serving a combination of grades from K-5 that also includes grades 6-12. For example, a school serving pre-K - 12, or a school serving grades 5-9.*
- 2) *Schools serving a combination of grades from 6-8 and grades 9-12. For example, a school serving grades 6-12, or grades 8-12.*

- Yes..... 1
- No..... 0 GO TO SECTION G
- NO RESPONSE..... M GO TO SECTION G

IF F6 NE 0, M
NOT REQUIRED

F7. What practices does your SFA use to plan reimbursable lunch menus for schools with grades outside the standard grade groups?

Select all that apply

- Plan the base lunch menu to meet the lower grade range minimums then add foods (for example, fruits and vegetables) to meet the upper grade requirements..... 1
 - Plan the lunch menu for all groups to meet the 1 cup fruit and vegetable requirements for grades 9-12 with the goal of staying within the weekly calorie range for all grade groups..... 2
 - Offer different lunch menus, foods, and/or portions sizes to students in each of the grade groups..... 3
 - Other (SPECIFY)..... 4
- Specify (STRING 255)
- None, we offer the same lunch menus, foods, and portion sizes to all students..... 5
 - NO RESPONSE..... M

PROGRAMMER: F7 = 5 CANNOT BE SELECTED WITH ANOTHER RESPONSE

G. FOOD SAFETY AND MEAL ACCOMMODATION

ALL
NOT REQUIRED

G1. How many of the [FILL FROM C1.1] schools in your SFA have at least one food service supervisor or manager with a food safety certification?

(Range=0-6,000)

MISSING..... M

SOFT CHECK: IF G1>C1.1 (MORE SCHOOLS THAN SCHOOLS IN SFA): Please record a number less than the [FILL FROM C1.1] schools in your SFA.

ALL
NOT REQUIRED

G2. Does your SFA have a formal written policy describing how to accommodate students with food allergies or disabilities?

Select one per row

	YES	NO
a. Policy for food allergies	1 <input type="radio"/>	0 <input type="radio"/>
b. Policy for disabilities	1 <input type="radio"/>	0 <input type="radio"/>

G2a = 1
NOT REQUIRED

G3. What are the components of your SFA’s policy to accommodate students with food allergies?

	<i>Select one per row</i>	
	YES	NO
a. Staff who have frequent contact with children with food allergies receive in-depth training	1 <input type="radio"/>	0 <input type="radio"/>
b. School staff who do not have frequent contact with children with food allergies receive general training	1 <input type="radio"/>	0 <input type="radio"/>
c. School staff receive annual training on procedures for preventive and crisis management of food allergies	1 <input type="radio"/>	0 <input type="radio"/>
d. Students with food allergies have an emergency care plan	1 <input type="radio"/>	0 <input type="radio"/>
e. School staff assess student ability to manage their food allergy	1 <input type="radio"/>	0 <input type="radio"/>
f. Students are taught about food allergies	1 <input type="radio"/>	0 <input type="radio"/>
g. Parents are taught about food allergies	1 <input type="radio"/>	0 <input type="radio"/>
h. Foodservice staff are trained on food-handling to prevent contamination with allergenic foods	1 <input type="radio"/>	0 <input type="radio"/>
i. Outside groups who use the school facility are informed of food allergy policies	1 <input type="radio"/>	0 <input type="radio"/>
j. Staff identify student food allergies during annual registration	1 <input type="radio"/>	0 <input type="radio"/>
k. Other (SPECIFY)	1 <input type="radio"/>	0 <input type="radio"/>
<input type="text"/> (STRING 255)		

G2b = 1
NOT REQUIRED

G4. What are the components of your SFA’s policy to accommodate students with disabilities?

	<i>Select one per row</i>	
	YES	NO
a. School staff write a statement of the required nutrition services (e.g. in an Individualized Education Plan or Health Care Plan)	1 <input type="radio"/>	0 <input type="radio"/>
b. Physician provides statement of the special diet	1 <input type="radio"/>	0 <input type="radio"/>
c. School staff identify special dietary needs during annual registration	1 <input type="radio"/>	0 <input type="radio"/>
d. School nurse works with nutrition manager to ensure special dietary modifications are implemented	1 <input type="radio"/>	0 <input type="radio"/>
e. School staff implement a process to engage the parents/guardians in the plan to meet the student’s special dietary needs	1 <input type="radio"/>	0 <input type="radio"/>

f. Other (SPECIFY)

1

0

(STRING 255)

H. FOOD PURCHASING

ALL

NOT REQUIRED

H1. Who in your district has primary responsibility for determining which foods are purchased commercially (excludes USDA Foods)?

Select one only

- SFA or district food service director or manager..... 1
 - Procurement specialist or other member of SFA staff..... 2
 - Business manager/purchasing agent or other district staff..... 3
 - Kitchen/cafeteria manager or lead/head cook..... 4
 - Other (SPECIFY)..... 5
- Specify (STRING 255)
- NO RESPONSE..... M

ALL

NOT REQUIRED

H2. Do any of the schools in your SFA offer foods from national or regional brand-name or chain restaurants, such as McDonald's, Burger King, Taco Bell, Pizza Hut, Domino's, or Subway?

- Yes..... 1
 - No..... 0 GO TO H5
- NO RESPONSE..... M GO TO H5

SOFT CHECK: IF H2=NO RESPONSE; Your response to this question is important. Please provide a response and continue.

H2=1

NOT REQUIRED

H3. When are the brand-name restaurant food items offered?

Select all that apply

- Reimbursable breakfast..... 1
 - Reimbursable lunch..... 2
 - A la carte..... 3
 - Adult meals..... 4
- NO RESPONSE..... M

H2=1
NOT REQUIRED

H4. Which types of schools offer these items?

Select all that apply

- Elementary schools..... 1
- Middle schools..... 2
- High schools..... 3
- NO RESPONSE..... M

ALL
NOT REQUIRED

H5. Does your district use food purchasing specifications that include specific requirements for any of the following? Please do not include information requests to vendors or purchasing cooperatives as specific requirements in the specifications.

PROGRAMMER: CODE ONE PER ROW.

Select one per row

	YES	NO
a. Calories	1 <input type="radio"/>	0 <input type="radio"/>
b. Total fat	1 <input type="radio"/>	0 <input type="radio"/>
c. Saturated fat	1 <input type="radio"/>	0 <input type="radio"/>
d. <i>Trans</i> fat	1 <input type="radio"/>	0 <input type="radio"/>
e. Sodium	1 <input type="radio"/>	0 <input type="radio"/>
f. Total or added sugar	1 <input type="radio"/>	0 <input type="radio"/>
g. Fiber	1 <input type="radio"/>	0 <input type="radio"/>
h. Whole grains	1 <input type="radio"/>	0 <input type="radio"/>
i. Other (SPECIFY)	1 <input type="radio"/>	0 <input type="radio"/>
<input type="text" value=""/> (STRING 255)		
j. Other (SPECIFY)	1 <input type="radio"/>	0 <input type="radio"/>
<input type="text" value=""/> (STRING 255)		

SOFT CHECK: IF ANY H5a-h=NO RESPONSE; Your response to this question is important. Please provide one response per row and continue.

ALL
NOT REQUIRED

H6. Is your school district or are any schools in your district engaged in a “pouring rights” contract, that is, a long-term contract with a beverage company that establishes the company as a sole source vendor for beverages in the district or in the school? *Count beverages sold by school food service as well as those sold in vending machines or other venues not controlled by school food service.*

Select one only

- Yes, district-wide..... 1
- Yes, some schools..... 2
- No..... 0
- NO RESPONSE..... M

ALL
NOT REQUIRED

H7. Does your SFA apply a geographic preference to make local food purchases?

SFAs may apply a local preference in procuring unprocessed or minimally processed agricultural products that are locally grown or raised. Geographic preference means specifying a preferred area for sourcing a food, such as a number of miles from an institution or SFA, a State or other border, or other such preferred area.

- Yes..... 1
- No..... 0
- NO RESPONSE..... M

ALL
NOT REQUIRED

H8. Does your SFA purchase any locally-grown or produced foods from the following food component groups?

SFAs may define local food purchasing as they choose. “Local” may be defined as the same city/county, within a mileage radius, within a day’s drive, within the State, or within the region. These local foods may come from local farmers, ranchers, dairies, fishermen, food processors, and distributors.

Select one per row

	Yes	No
a. Fruits	1 <input type="radio"/>	0 <input type="radio"/>
b. Vegetables & vegetable subgroups (legumes, leafy greens, etc.)	1 <input type="radio"/>	0 <input type="radio"/>
c. Grains/grain products	1 <input type="radio"/>	0 <input type="radio"/>
d. Meats/meat alternatives and seafood	1 <input type="radio"/>	0 <input type="radio"/>
e. Dairy/fluid milk	1 <input type="radio"/>	0 <input type="radio"/>
NO RESPONSE.....	M	

H9. *No item H9 in this version.*

ALL
NOT REQUIRED

H10. Does your SFA participate with other SFAs in a food purchasing cooperative?

- Yes..... 1
- No..... 0
- NO RESPONSE..... M

ALL
NOT REQUIRED

H11. Does your SFA purchase fruits and vegetables through the USDA Department of Defense (DoD) Fresh Fruit and Vegetable program?

- Yes..... 1
- No..... 0
- NO RESPONSE..... M

ALL
NOT REQUIRED

H12. Does your SFA use online tools (such as the USDA Foods Toolkit for Child Nutrition Programs, the Food Buying Guide for School Meal Programs, or others) to compare product specifications and select healthier foods?

- Yes..... 1
- No..... 0
- NO RESPONSE..... M

I. KITCHEN EQUIPMENT FUNDING AND PURCHASES

ALL
NOT REQUIRED

I1. Since the start of SY 2017-2018, has your SFA purchased any new equipment to prepare and serve healthier school meals?

- Yes..... 1
- No..... 0
- Don't know..... d
- NO RESPONSE..... M

SOFT CHECK: IF I2=NO RESPONSE; Your response to this question is important. Please provide a response and continue.
PROGRAMMER: I2 = d CANNOT BE SELECTED WITH ANOTHER RESPONSE

ALL
NOT REQUIRED

I2. Across the following service functions, has equipment been purchased for any kitchens in your SFA since SY 2017-2018 to implement the updated meal patterns and nutrient requirements?

PROGRAMMER: CODE ONE PER ROW

	Select one per row	
	YES	NO
a. Receiving and storage (for example, platforms and hand trucks, scales, or walk-in refrigerators/freezers)	1 <input type="radio"/>	0 <input type="radio"/>
b. Food production (for example, slicers, food processors, utility carts, stainless steel work tables, or combi ovens)	1 <input type="radio"/>	0 <input type="radio"/>
c. Holding and transportation (for example, refrigerated or non-refrigerated trucks, hot and/or cold transport carts, or walk-in coolers [separate from receiving/storage refrigerators])	1 <input type="radio"/>	0 <input type="radio"/>
d. Providing salad or fruit/vegetable bars	1 <input type="radio"/>	0 <input type="radio"/>
e. Serving meals (for example, mobile milk coolers, steam table pans, or serving portion utensils)	1 <input type="radio"/>	0 <input type="radio"/>
f. Administration (for example, computers or software)	1 <input type="radio"/>	0 <input type="radio"/>

SOFT CHECK: IF NO RESPONSE TO FOR ANY ROW I2a-I2f; Your response to this question is important. Please provide one response per row and continue.
--

J. FOOD SERVICE MANAGEMENT COMPANIES

ALL

NOT REQUIRED

J1. Does your school district currently use a food service management company (FSMC) to perform any food service functions?

- Yes..... 1
- No..... 0 GO TO SECTION K
- NO RESPONSE..... M GO TO SECTION K

SOFT CHECK: IF J1=NO RESPONSE; **Your response to this question is important. Please provide a response and continue.**

J1=1

NOT REQUIRED

J2. Which entity, the SFA, the FSMC, or both, is responsible for the following food service functions?

PROGRAMMER: CODE ONE PER ROW

Select one per row

	SFA	FSMC	BOTH
a. Preparing reimbursable meals	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>
b. Serving reimbursable meals	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>
c. Menu planning	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>
d. Certification and verification of eligibility for free or reduced-price meals	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>

SOFT CHECK: IF NO RESPONSE TO ANY ROW J2a-J2d; **Your response to this question is important. Please provide one response per row and continue.**

K. PRICING

ALL

NOT REQUIRED

K1. Are the following practices used in setting prices of a la carte and competitive foods in your SFA?
 PROGRAMMER: CODE ONE PER ROW

Select one per row

	YES	NO
a. Competitive and/or a la carte foods are sold at cost	1 <input type="radio"/>	0 <input type="radio"/>
b. Competitive and/or a la carte foods are sold at a discount below their actual cost	1 <input type="radio"/>	0 <input type="radio"/>
c. Competitive and/or a la carte foods are sold at a mark-up above their actual cost	1 <input type="radio"/>	0 <input type="radio"/>

SOFT CHECK: IF ANY QUESTION IN K1A-K1C=NO RESPONSE; Your response to this question is important. Please provide a response and continue.

SOFT CHECK: IF ALL RESPONSES K1A-K1C=NO; You reported you do not use any of the following practices in setting prices of a la carte and competitive foods in your SFA. Please respond "Yes" even if you use a mix of these practices.

L. RECOVERING LOST REVENUES

PROGRAMMER: CONTINUE IF SFA DOES NOT OFFER FREE BREAKFAST AND LUNCH FOR ALL SCHOOLS.

ELSE, GO TO SECTION M IF CEP = ALL; OR
 (P2_NSLP = ALL AND P2_SBP = ALL); OR
 (P3_NSLP = ALL AND P3_SBP = ALL)

NOT REQUIRED

L1. Does your SFA have a policy for unpaid meal charges?

- Yes..... 1 GO TO L1A
- No..... 0 GO TO L4

L1 = 1

NOT REQUIRED

L1a. Is your SFA's policy for unpaid meal charges the same for elementary, middle, and high schools?

- Yes..... 1
- No..... 0

IF L1A = 1, SHOW COLUMN FOR ALL SCHOOLS AND NOT APPLICABLE COLUMN

IF L1A = 0, SHOW COLUMNS FOR SCHOOL TYPES (E/M/H) BASED ON A.5 AND NOT APPLICABLE COLUMN

NOT REQUIRED

L2. The next questions are about meal charge policies for schools in your SFA.

In your SFA, what meals are offered to students who are unable to pay for a reimbursable meal?

Select all that apply

	[IF L1A = 0 AND A5=1] Elementary Schools	[IF L1A = 0 AND A5=2] Middle Schools	[IF L1A = 0 AND A5=3] High Schools	[IF L1A = 1] All Schools	NOT APPLICABLE
a. Students unable to pay are allowed to charge regular, reimbursable meals without limits (breakfast, lunch, and/or afterschool snacks)	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	n <input type="checkbox"/>
b. Students unable to pay have a limit on the number of unpaid reimbursable meals they can charge	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	n <input type="checkbox"/>
c. Students unable to pay receive an alternate, non-reimbursable meal (for example, a cheese sandwich)	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	n <input type="checkbox"/>
d. Students unable to pay are denied a meal	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	n <input type="checkbox"/>
e. Other (SPECIFY) STRING 255 <input style="width: 150px; height: 15px;" type="text"/>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	n <input type="checkbox"/>

PROGRAMMER: L2a-e = n CANNOT BE SELECTED WITH ANOTHER RESPONSE IN THE SAME ROW

IF L1A = 1, SHOW COLUMN FOR ALL SCHOOLS AND NOT APPLICABLE COLUMN
 ELSE, SHOW COLUMNS FOR SCHOOL TYPES (E/M/H) BASED ON A.5 AND NOT APPLICABLE COLUMN

NOT REQUIRED

L3. What steps does your SFA take to recover money for unpaid meal charges?

Select all that apply

	[IF L1 A= 0 AND A5=1] Elementary Schools	[IF L1A =0 AND A5=2] Middle Schools	[IF L1A = 0 AND A5=3] High Schools	[IF L1A = 1] All Schools	NOT APPLICABLE
a. Provide assistance to households with unpaid meal charges to apply for free or reduced-price meals	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	n <input type="checkbox"/>
b. Notify households of negative balances	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	n <input type="checkbox"/>
c. Send bill to parents	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	n <input type="checkbox"/>
d. Provide parents with a repayment plan	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	n <input type="checkbox"/>
e. Use a debt collection agency	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	n <input type="checkbox"/>
f. Use administrative actions (for example, student is not allowed to participate in programs and events, such as field trips or prom)	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	n <input type="checkbox"/>
g. Use outside funding sources to offset debt from unpaid meal charges	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	n <input type="checkbox"/>
h. Other (SPECIFY) STRING 255 <input type="text"/>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	n <input type="checkbox"/>

PROGRAMMER: IF L3A-H=N CANNOT BE SELECTED WITH ANOTHER RESPONSE OPTION

SFA DOES NOT OFFER FREE BREAKFAST AND LUNCH FOR ALL SCHOOLS

SKIP L4 IF:

[IF CEP = ALL; OR

(P2_NSLP = ALL AND P2_SBP = ALL); OR

(P3_NSLP = ALL AND P3_SBP = ALL)] OR

L3G = N

NOT REQUIRED

L4. Which of the following alternate funding sources has your SFA used to offset costs incurred from unpaid meal charges?

Select all that apply

- District general fund..... 1
- State revenue matching funds in excess of the State revenue matching fund requirement..... 2
- State or local funds provided to cover the price of student meals..... 3
- Local contributions or charitable funding from the community..... 4
- School fundraising..... 5
- Revenue from meals or services not funded through the nonprofit school food service account (e.g., revenue from adult meals, competitive foods, and/or catering or contracting services that operate from a separate account)..... 6
- Not applicable (SFA does not offset costs incurred from unpaid meal charges or does not incur unpaid meal charges) n
- Other (SPECIFY)..... 99

Specify (STRING (NUM))

PROGRAMMER: IF L5=N CANNOT BE SELECTED WITH ANOTHER RESPONSE OPTION

M. OTHER SCHOOL MEAL PROGRAMS

IF (A3c=2 OR 1) OR (A4d=2 OR 1) (CACFP AFTERSCHOOL SNACKS/SUPPERS SERVED IN ALL/SOME SCHOOLS),
ELSE GO TO M3

NOT REQUIRED

M1. Which of the following entities operate the Child and Adult Care Food Program (CACFP) afterschool snack or supper program in your SFA?

Select all that apply

- SFA..... 1
 - Individual schools..... 2
 - Local, municipal, county, tribal or state government (e.g. community parks and recreation department)..... 3
 - Tax exempt nonprofit organizations..... 4
 - Eligible for profit child care centers..... 5
 - Other (SPECIFY)..... 6
- Specify (STRING 255)
- Don't know..... d
 - NO RESPONSE..... M

PROGRAMMER: M1 = d CANNOT BE SELECTED WITH ANOTHER RESPONSE

IF (A3c=2 OR 1) OR (A3d=2 OR 1) [CACFP AFTERSCHOOL SNACKS/SUPPERS SERVED IN ALL/SOME SCHOOLS]

AND IF M1 NE d or M

NOT REQUIRED

M2. What role does the SFA have in supporting the operation of the CACFP afterschool snack or supper program in your SFA?

Select all that apply

- Purchase food..... 1
 - Prepare food..... 2
 - Hire, train or supervise staff..... 3
 - Deliver or serve food..... 4
 - Monitor program sites..... 5
 - None..... 6
 - Other (SPECIFY)..... 7
- Specify (STRING 255)
- Don't know..... d
 - NO RESPONSE..... M

PROGRAMMER: M2 = d CANNOT BE SELECTED WITH ANOTHER RESPONSE

ALL
NOT REQUIRED

M3. Does your SFA offer an after-school snack program that is not funded by NSLP or CACFP?

- Yes..... 1
- No..... 0
- NO RESPONSE..... M

IF A3e=2 OR 1 (SFSP SERVED IN ALL/SOME SCHOOLS)
NOT REQUIRED

M4. Which of the following entities operate the Summer Food Service Program in your SFA?

Select all that apply

- School district/SFA..... 1
- Local, municipal, county, tribal or state government (e.g. community parks and recreation department)..... 2
- Private nonprofit organizations..... 3
- Public or private nonprofit camps (e.g. YMCA/YWCA) 4
- Public or private nonprofit university or college..... 5
- Other (SPECIFY)..... 6

Specify (STRING 255)

- Don't know..... d
- NO RESPONSE..... M

PROGRAMMER: IF M4 = d CANNOT BE SELECTED WITH ANOTHER RESPONSE
--

IF A3e=2 OR 1 (SFSP SERVED IN ALL/SOME SCHOOLS) AND
IF M4 NE d or M

NOT REQUIRED

M5. What role does the SFA have in supporting the operation of the Summer Food Service Program in your SFA?

Select all that apply

- Purchase food..... 1
 - Prepare food..... 2
 - Hire, train or supervise staff..... 3
 - Deliver or serve food..... 4
 - Monitor program sites..... 5
 - None..... 6
 - Other (SPECIFY)..... 7
- Specify (STRING 255)
- Don't know..... d
 - NO RESPONSE..... M

PROGRAMMER: IF M5 = d CANNOT BE SELECTED WITH ANOTHER RESPONSE

N. NUTRITION PROMOTION/WELLNESS

ALL

NOT REQUIRED

N1. Does your district have a local wellness policy?

- Yes..... 1
- No..... 0 GO TO N8
- MISSING/NO RESPONSE..... M
- GO TO N8

N1=1

NOT REQUIRED

N2. Which of the following stakeholders are consulted when developing and updating the local wellness policy?

Select all that apply

- SFA director..... 1
 - District wellness coordinator..... 2
 - Superintendent or other district staff..... 3
 - School board members..... 4
 - School principals or other administrative staff..... 5
 - School foodservice staff..... 6
 - Student nutrition advisory council..... 7
 - Community nutrition advisory council..... 8
 - School nurse or other school health professionals..... 9
 - Dietitian or nutritionist..... 10
 - Physical education or health teachers..... 11
 - Other teachers..... 12
 - Parents..... 13
 - Students..... 14
 - Other community members..... 15
 - Other (SPECIFY)..... 16
- Specify (STRING 255)
- Stakeholders were not consulted when developing the local wellness policy..... 17
 - Don't know..... d
 - NO RESPONSE..... M

PROGRAMMER: N2 = d OR N2 = 17 CANNOT BE SELECTED WITH ANOTHER RESPONSE OPTION

N2 = 2
NOT REQUIRED

N3. If the district’s designated wellness coordinator has another job in the district, what is his or her other job title?

Select all that apply

- District administrator.....1
 - School administrator.....2
 - School nurse.....3
 - Foodservice staff.....4
 - Other nutrition professional.....5
 - Health, physical education, or nutrition teacher.....6
 - Coach or athletic director.....7
 - Other teacher.....8
 - Other (SPECIFY).....9
- Specify (STRING 255)
- District’s designated wellness coordinator does not have another job in the district..... 10
 - NO RESPONSE..... M

PROGRAMMER: IF N3 = 10 CANNOT BE SELECTED WITH ANOTHER RESPONSE

N1=1

NOT REQUIRED

N4. Following is a list of potential and required wellness policy components. For each, please indicate whether the component is addressed in your district wellness policy.

PROGRAMMER: CODE ONE PER ROW

Select one response per row

	YES	NO	STILL BEING PLANNED
a. Nutrition education	1 <input type="radio"/>	0 <input type="radio"/>	n <input type="radio"/>
b. Nutrition promotion	1 <input type="radio"/>	0 <input type="radio"/>	n <input type="radio"/>
c. Physical education (PE)	1 <input type="radio"/>	0 <input type="radio"/>	n <input type="radio"/>
d. Daily physical activity (outside of PE)	1 <input type="radio"/>	0 <input type="radio"/>	n <input type="radio"/>
e. Restrictions on the use of food or food coupons as student rewards	1 <input type="radio"/>	0 <input type="radio"/>	n <input type="radio"/>
f. Access to competitive foods during school hours	1 <input type="radio"/>	0 <input type="radio"/>	n <input type="radio"/>
g. Minimum amount of time for students to eat lunch	1 <input type="radio"/>	0 <input type="radio"/>	n <input type="radio"/>
h. Staff wellness program	1 <input type="radio"/>	0 <input type="radio"/>	n <input type="radio"/>
i. Plan for measuring implementation of the policy, including the extent in compliance with the policy	1 <input type="radio"/>	0 <input type="radio"/>	n <input type="radio"/>
j. Plan for describing the progress made towards attaining the goals of the policy	1 <input type="radio"/>	0 <input type="radio"/>	n <input type="radio"/>
k. Plan for informing the public about the wellness policy content and implementation	1 <input type="radio"/>	0 <input type="radio"/>	n <input type="radio"/>
l. Criteria for foods and beverages that may be sold in fundraisers	1 <input type="radio"/>	0 <input type="radio"/>	n <input type="radio"/>
m. Requirement for schools to make fruits or vegetables available to students wherever other food is offered or sold	1 <input type="radio"/>	0 <input type="radio"/>	n <input type="radio"/>

SOFT CHECK: IF NO RESPONSE TO ANY ROW N4a-m; Your response to this question is important. Please provide one response per row and continue.

IF ANY ROW N4A-M = 1
NOT REQUIRED

N4a. Please indicate the extent to which each wellness policy component has been implemented in your district.

PROGRAMMER: SHOW ONLY ROWS WHERE N4A-M = 1

Select one response per row

	FULLY IMPLEMENTED	PARTIALLY IMPLEMENTED	NOT IMPLEMENTED
a. Nutrition education	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>
b. Nutrition promotion	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>
c. Physical education (PE)	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>
d. Daily physical activity (outside of PE)	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>
e. Restrictions on the use of food or food coupons as student rewards	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>
f. Access to competitive foods during school hours	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>
g. Minimum amount of time for students to eat lunch	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>
h. Staff wellness program	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>
i. Plan for measuring implementation of the policy, including the extent in compliance with the policy	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>
j. Plan for describing the progress made towards attaining the goals of the policy	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>
k. Plan for informing the public about the wellness policy content and implementation	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>
l. Criteria for foods and beverages that may be sold in fundraisers	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>
m. Requirement for schools to make fruits or vegetables available to students whether other foods are offered or sold	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>

SOFT CHECK: IF NO RESPONSE TO ANY ROW N4A_a-m; Your response to this question is important. Please provide one response per row and continue.

N1=1
NOT REQUIRED

N4b. Has your SFA received from your State agency an exemption for foods and beverages sold in fundraisers during the school day?

- Yes..... 1
- No..... 0
- NO RESPONSE..... M

N1=1

NOT REQUIRED

N5. How often does your district evaluate the local wellness policy?

Evaluation includes assessments of the extent to which schools are in compliance with the district policy, the extent to which the local wellness policy compares to model local school wellness policies, and the progress made in attaining the goals of the local wellness policy.

- Never..... 1
- Annually..... 2
- Every 2 years..... 3
- Every 3 years..... 4
- Every 4 years..... 5
- Every 5 years or more..... 6
- NO RESPONSE..... M

SOFT CHECK: IF N5=NO RESPONSE; Your response to this question is important. Please provide a response and continue.

N1=1

NOT REQUIRED

N6. How often is the local wellness policy updated?

- Local wellness policy has not been updated..... 1
- Annually..... 2
- Every 2 years..... 3
- Every 3 years..... 4
- Every 4 years..... 5
- Every 5 years or more..... 6
- NO RESPONSE..... M

SOFT CHECK: IF N6=NO RESPONSE; Your response to this question is important. Please provide a response and continue.

N7. *No item N7 in this version.*

ALL
NOT REQUIRED

N8. Which of the following communication channels does your SFA use to promote USDA-reimbursable meals?

Select all that apply

- Send home menus/flyers/newsletters.....1
 - Email information to parents.....2
 - Post information in schools (for example, on bulletin boards or on cafeteria lines).....3
.....
 - Post information online (for example, on district/school website).....4
 - Post information on social media (for example, Facebook or Twitter).....5
 - Broadcast information on TV.....6
 - Broadcast information on the radio.....7
 - Post information in local newspapers.....8
 - Other (SPECIFY).....9
- Specify (STRING 255)
- NO RESPONSE.....M

ALL
NOT REQUIRED

N9. Have you or anyone on your staff engaged in any of the following activities this school year?

Select all that apply

- Conducted a taste test activity with students.....1
- Involved students in planning school meal menus.....2
- Involved students in naming food and beverage items offered.....3
- Attended a Parent/Teacher Association/Organization or other parent group meeting to discuss the school meal program.....4
- Conducted a nutrition education activity in the classroom.....5
- Conducted a nutrition education activity in the food service area.....6
- Set up a booth at a school event to promote/inform about school meals (for example, a family night or parent-teacher conference night)..... 7
- Met with teachers to explain school meal program or discuss how program can work with classroom teachers.....8
- Discussed student food allergies with school nurse or classroom teachers..... 9
- Participated in a school or district meeting about the local wellness policy..... 10
- Shared information about the school meal program with a nutrition advisory council..... 11
- Met with an advisory group to plan or assess nutrition education or promotion activities..... 12
- Invited students' family members to consume a school meal..... 13
- Invited community members to plan or promote school meals (for example, local chefs, farmers, dietitians/nutritionists, Cooperative Extension agents, local sports figures, police officers, firefighters, or other local heroes)..... 14
- Presented information about school meals to a local civic or community service group (for example, a chamber of commerce, Lions Club, Rotary International, or a similar organization)..... 15
- Other (SPECIFY)..... 16

Specify (STRING 255)

NO RESPONSE.....M

O. SFA DIRECTOR BACKGROUND AND EXPERIENCE

ALL

NOT REQUIRED

O1. How long have you been a school food service director?

Please enter years OR months.

- Years (RANGE 0-50).....1
- Months (RANGE 0-24).....2
- NO RESPONSE.....M

SOFT CHECK; IF O1 NE NO RESPONSE AND O1 YEARS OR MONTHS ARE BOTH UNMARKED; Please mark “years” or “months” to indicate how long you have been a school food service director and continue.

ALL

NOT REQUIRED

O2. When were you hired or promoted into your current position as an SFA director?

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

- START DATE
- MONTH YEAR
- NO RESPONSE.....M

ALL
NOT REQUIRED

O3. What is the highest grade or year of schooling you completed?

Select one only

- Less than high school.....1 GO TO O5
- High school.....2 GO TO O5
- Some college, no degree.....3 GO TO O5
- Associate's degree.....4
- Bachelor's degree.....5
- Master's degree.....6
- Graduate credits beyond a Master's degree.....7
- Doctorate.....8
- NO RESPONSE.....M GO TO O5

SOFT CHECK: IF O3=NO RESPONSE; Your response to this question is important. Please provide a response and continue.

O3=4 OR 5 OR 6 OR 7 OR 8
NOT REQUIRED

O4. Is your degree in food and nutrition, food service management, dietetics, family and consumer sciences, nutrition education, culinary arts, business, or a related field?

- Yes.....1
- No.....0
- NO RESPONSE.....M

ALL
NOT REQUIRED

O5. Do you hold a state-recognized certificate for school nutrition program directors?

- Yes.....1
- No.....0
- NO RESPONSE.....M

ALL

NOT REQUIRED

06. Do you hold a food safety certification, such as ServSafe, National Registry of Food Safety Professionals, Prometric Certified Professional Food Manager, or Learn2Serve?

Yes..... 1

No..... 0

NO RESPONSE..... M

ALL

NOT REQUIRED

07. Please share any additional comments you have about the school meals programs.

(STRING 1000)