

G5. PRINCIPAL COST INTERVIEW (GROUP 3 AND FULL OUTLYING AREAS)

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**USDA/Food and Nutrition Service
School Nutrition and Meal Cost Study-II
Principal Cost Interview**



SFA ID #:	SCHOOL NAME:
_____	_____
SFA NAME:	PRINCIPAL NAME:
_____	_____
SCHOOL ID #:	PRINCIPAL PHONE:
_____	_____
	PRINCIPAL EMAIL:

Note: The burden associated with Appendix G10, and collecting the salary information request referenced in Appendices C19 and C27, is included in the burden disclosure statement for this appendix, and it is included in the same row as this appendix in the burden table.

INTRODUCTION

FNS has contracted with Mathematica Policy Research, Insight Policy Research, Decision Information Resources, and Agralytica to conduct the School Nutrition and Meal Cost Study-II (SNMCS-II) for school year 2019–2020.

Your participation is vital to informing future policies for school meals to ensure the meals contribute to a healthy future for all children.

[GROUP 3: This important study will (1) describe the food and nutritional quality of school meals and afterschool snacks, (2) update information on the school food environment and food service policies and practices, (3) estimate the cost to produce school meals and snacks, and (4) collect information about student participation, satisfaction, and dietary intake. Having updated information about the school meals programs will help States, SFAs, and schools better serve students.]

[OACS: This important study will estimate the cost to produce school meals in your [State/Territory].]

All information gathered for this study is for research purposes only and will not affect meal reimbursements to participating schools or school meal program benefits of participating households. All information will be kept private under the Privacy Act to the extent allowed by law.

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 45 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. 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.

Intro. Today I will be asking you about non-food service staff who do food service-related activities. First I want to know about the food service activities that school staff perform, and then I need to collect more detailed information about their wages. Do you have any questions before we start?

PART 1: FOOD SERVICES ACTIVITIES INVOLVING NON-FOOD SERVICE STAFF

1. [REFER RESPONDENT TO HANDOUT 1 IN INTERVIEW REFERENCE GUIDE] **Please refer to the list of food service activities that may involve non-food service staff. This list identifies food service-related activities that may be done entirely or in part by school staff who are not paid out of the food service account. Please tell me if each of these activities involve you or other staff or volunteers at this school, excluding employees of the food service department or others whose salaries or wages are paid entirely or partially by the food service department.**

Do you, other school staff, or volunteers, excluding employees of the food service department, [INSERT A-O]?

IF NECESSARY, SAY: We'll go into the details of what you do later. For now, just tell me whether non-food service staff at the school perform any activities that fall under the main categories on the list.

	ACTIVITY	YES	NO	REFUSED	DON'T KNOW
A	Distribute and process applications for free or reduced-price meals?	1	0	r	d
B	Conduct direct certification or other certification from lists?	1	0	r	d
C	Verify household income of free or reduced-price students?	1	0	r	d
D	Clean food service areas and provide other custodial services?	1	0	r	d
E	Manage cafeteria personnel?	1	0	r	d
F	Supervise students during meals?	1	0	r	d
G	Conduct menu planning and other policy decisions?	1	0	r	d
H	Order, store, or transport food?	1	0	r	d
I	Collect meal payments?	1	0	r	d
J	Count and claim reimbursable meals?	1	0	r	d
K	Conduct nutrition education and promotion?	1	0	r	d
L	Do any other food service activities that I have not listed? [SPECIFY FIRST OTHER ACTIVITY]	1	0	r	d
M	Do any other food service activities that I have not listed? [SPECIFY SECOND OTHER ACTIVITY]	1	0	r	d
N	Do any other food service activities that I have not listed? [SPECIFY THIRD OTHER ACTIVITY]	1	0	r	d
O	Do any other food service activities that I have not listed? [SPECIFY FOURTH OTHER ACTIVITY]	1	0	r	d

PART 2: SCHOOL NON-FOOD SERVICE STAFF TIME ALLOCATION GRID

INTRO. Next we'll cover how much time the non-food service staff in your school spend on the food service activities you identified. The reference period is this school year, July 2019 to June 2020, so you will need to base your responses on your experience from July 2019 through the present, and your best estimate for the period from now through June 2020.

What we need to know is how much time each type of employee spends on each activity including all of the tasks that they do. Think about all of the tasks listed on Handout 1 for that activity when providing time estimates.

I can group staff with the same position together if the following three conditions are met: they work the same number of hours per week, they work the same number of weeks per year, and they work the same amount of time on the food service activities throughout the day. If these are not all true for the staff group, I will collect their time and salary information separately. As we go through each type of staff, please let me know if they can be grouped together.

INTERVIEWER NOTE: REFER RESPONDENT TO HANDOUT 2

Please refer to the Principal Cost Interview Guide. This handout has the questions that I will ask you for each activity. We will start with questions 1-2B.

INTERVIEWER NOTE: THE INSTRUMENT WILL RUN THROUGH ALL ACTIVITIES SELECTED IN Q1 AND POPULATE THE TIME ALLOCATION GRID.

SCHOOL NON-FOOD SERVICE STAFF TIME ALLOCATION GRID:

(1) Food service activity performed by school staff	(2) What types of employees do this activity (i.e., title, position, etc.)?	(3) How many employees of this type do this activity?	(4) How many hours per week does each person of this type spend on this task during the July 2019 – June 2020 program year? (If hours per week are not available, fill in hours and number of periods, and circle type of period) PERIOD IN SECOND AND THIRD COLUMNS in (4) MUST MATCH: D-D, W-W, M-M.		
			Hours per Period		Number of Periods
A. [FILL FROM Q1]			____ hrs per	D W M Y Other: _____	For: _____ D W M
			____ hrs per	D W M Y Other: _____	For: _____ D W M
			____ hrs per	D W M Y Other: _____	For: _____ D W M
			____ hrs per	D W M Y Other: _____	For: _____ D W M
B. [FILL FROM Q1]			____ hrs per	D W M Y Other: _____	For: _____ D W M
			____ hrs per	D W M Y Other: _____	For: _____ D W M
			____ hrs per	D W M Y Other: _____	For: _____ D W M
			____ hrs per	D W M Y Other: _____	For: _____ D W M

PROGRAMMER BOX

ASK ITEMS CORRESPONDING TO COLUMNS 2-4 FOR FIRST ACTIVITY WHERE Q1A-Q1O=1, THEN ASK ABOUT THE NEXT ACTIVITY SELECTED AT Q1. CONTINUE LOOP TO ASK ABOUT ALL ACTIVITIES WHERE Q1A-Q1O=1.

PROGRAMMER BOX

ALLOW FOR ENTRY OF DECIMALS IN COLUMN 4 (NUMBER OF HOURS AND NUMBER OF PERIODS).

5. WHEN SCHOOL NON-FOOD SERVICE STAFF TIME ALLOCATION GRID IS COMPLETE: **Are there any other activities related to the school meals programs that school staff do that we have not talked about yet?**

IF YES: **What activity have we left out?**

YES..... 1

NO..... 0

PROGRAMMER BOX

IF Q5 = 1, RECORD VERBATIM RESPONSE IN COLUMN 1 OF THE TIME ALLOCATION GRID, THEN ASK ITEMS CORRESPONDING TO COLUMNS 2-4. LOOP BACK TO Q5 TO ASK ABOUT ANY OTHER MISSED ACTIVITIES UNTIL RESPONSE = NO, THEN PROCEED TO SCHOOL NON-FOOD SERVICE STAFF SALARY GRID.

PROGRAMMER BOX

ONCE THE SCHOOL NON-FOOD SERVICE STAFF TIME ALLOCATION GRID HAS BEEN COMPLETED (Q5=0), POPULATE ALL THE TITLE/POSITIONS LISTED INTO THE SCHOOL NON-FOOD SERVICE STAFF SALARY GRID. EACH TITLE/POSITION SHOULD BE COPIED ONTO THE ROSTER ONLY ONCE.

PART 3: SCHOOL NON-FOOD SERVICE STAFF SALARY GRID

INTRO1. I will now collect enough salary information to calculate what one hour of staff time costs for each person, title, or position. I will start by asking questions 3 and 4 on the Principal Cost Interview Guide for each person, title, or position you identified. REFER RESPONDENT TO HANDOUT 3. The Example School Non-Food Service Staff Salary Grid shows the type of information we are collecting.

INTERVIEWER NOTE: THE INSTRUMENT WILL RUN THROUGH ALL TYPES OF STAFF LISTED ON THE TIME ALLOCATION GRID AND POPULATE THE STAFF SALARY GRID.

SAMPLE SCHOOL NON-FOOD SERVICE SALARY GRID FOR REFERENCE:

(1)	(2)	(3)	(4)
Title/Position	Number of staff	Total paid hours/ week	Total paid time/ year
E.g. Secretary	3	40 hrs/wk	44 <input type="checkbox"/> Days <input checked="" type="checkbox"/> Weeks } Per year <input type="checkbox"/> Months
A. [FILL]	_ _	_ _ hrs/wk	_ _ _ <input type="checkbox"/> Days <input type="checkbox"/> Weeks } Per year <input type="checkbox"/> Months

PROGRAMMER BOX

ASK ITEMS CORRESPONDING TO COLUMNS 2-4 FOR FIRST TITLE/POSITION IDENTIFIED ON STAFF TIME ALLOCATION GRID, THEN ASK ABOUT THE NEXT TITLE/POSITION. CONTINUE LOOP TO ASK ABOUT ALL TITLES/POSITIONS, THEN GO TO INTRO2.

INTRO2. I will now ask questions 5 and 6 on the Principal Cost Interview Guide for each person, title, or position.

(1) Title/Position	(2) Number of staff	(5a) [if Col2>1: Low] Salary/Wage	(5b) [Only display if Col2>1] High Salary/Wage	(6a) [if Col2>1: Low] Fringe benefits/year	(6b) [Only display if Col2>1] High fringe benefits/year
E.g. Secretary	3	\$ <u>40,000</u> per <input type="checkbox"/> Hour <input type="checkbox"/> Week <input type="checkbox"/> Every two weeks <input type="checkbox"/> Two times a month <input type="checkbox"/> Month <input checked="" type="checkbox"/> Year <input type="checkbox"/> Other: _____	\$ <u>48,000</u> per <input type="checkbox"/> Hour <input type="checkbox"/> Week <input type="checkbox"/> Every two weeks <input type="checkbox"/> Two times a month <input type="checkbox"/> Month <input checked="" type="checkbox"/> Year <input type="checkbox"/> Other: _____	\$ <u>3,000</u> per year	\$ <u>25,000</u> per year
A. [FILL]	[FILL]	\$ _____ per <input type="checkbox"/> Hour <input type="checkbox"/> Week <input type="checkbox"/> Every two weeks <input type="checkbox"/> Two times a month <input type="checkbox"/> Month <input type="checkbox"/> Year <input type="checkbox"/> Other: _____	\$ _____ per <input type="checkbox"/> Hour <input type="checkbox"/> Week <input type="checkbox"/> Every two weeks <input type="checkbox"/> Two times a month <input type="checkbox"/> Month <input type="checkbox"/> Year <input type="checkbox"/> Other: _____	\$ _____ per year	\$ _____ per year

PROGRAMMER BOX
 ASK ITEMS CORRESPONDING TO COLUMNS 5-6 FOR FIRST TITLE/POSITION,
 THEN ASK ABOUT ALL OTHER TITLES/POSITIONS ON A LOOP.

PROGRAMMER BOX __
ALLOW UP TO X NUMBER OF ROWS IN TABLE

PROGRAMMER BOX __
ASK COL2 FOR ALL POSITIONS PROVIDED IN COL1.

PROGRAMMER BOX __
PROGRAMMER: IF COL2=1, SKIP COLUMN 5B.
I.E., IF THERE IS ONLY ONE STAFF MEMBER IN POSITION, ONLY
DISPLAY ONE SALARY COLUMN.

PROGRAMMER BOX __
PROGRAMMER: IF COL2=1, SKIP COLUMN 6B.
I.E., IF THERE IS ONLY ONE STAFF MEMBER IN POSITION, ONLY
DISPLAY ONE FRINGE BENEFIT COLUMN.