H2. Cafeteria Observation Guide (Groups 2 & 3)

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Expiration Date: XX/XX/XXXX

**Cafeteria Observation Guide**

**School Nutrition and Meal Cost Study-II**

PROGRAMMER: INCLUDE SFA ID, SCHOOL ID AND NAME, UNIVERSAL FREE BREAKFAST, PARTICIPATION IN PROVISION 2/3, CEP STATUS IN SAMPLE LOAD

|  |
| --- |
| ALL |

1. SFA ID: [8-DIGITS]

|  |
| --- |
| ALL |

2. School ID and Name: [SELECT FROM LIST]

|  |
| --- |
| ALL |

3. Select module from the menu below:

INTERVIEWER: LINES OR STATIONS MUST BE ENTERED AND CONFIRMED AS REIMBURSABLE WITH THE SCHOOL NUTRITION MANAGER AHEAD OF MEAL SERVICE.

PROGRAMMER: “ENTER LINES/STATIONS” (MODULE 1) MUST BE COMPLETED BEFORE MODULES 3-4 CAN BE OPENED.

PROGRAMMER: DISPLAY STATUS FOR EACH MODULE AS UNTOUCHED/STARTED/COMPLETED.

SCHOOL NUTRITION MANAGER QUESTIONS 1 [STATUS]

 GO TO S\_INFO

BREAKFAST 2 [STATUS]

 GO TO B\_INFO

LUNCH 3 [STATUS]

 GO TO L\_info

CAFETERIA CHARACTERISTICS 4 [STATUS]

 GO TO C\_INFO

ALL MODULES COMPLETED 5 [STATUS]

 GO TO CONFIRM1

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|  |
| --- |
| Q3=1 |

S\_info. INTERVIEWER: THE NEXT QUESTIONS SHOULD ALL BE ASKED OF THE SCHOOL NUTRITION MANAGER.

|  |
| --- |
| PROGRAMMER BOX:IF THE QUESTION IS MARKED WITH AN ASTERISK, THEN FORMAT TEXT TO BE READ ALOUD. FORMAT QUESTIONS THAT ARE NOT MARKED WITH AN ASTERISK AS INTERVIEWER INSTRUCTIONS. |

|  |
| --- |
| Q3=1 AND (CEP = 0 OR NO PROVISION 2/3 FOR SBP) AND A1=1 |

S1. \*What is the price of a USDA-reimbursable breakfast for students who are classified as reduced-price?

 $ | |.| | | AMOUNT

Not applicable, all students receive free breakfast n GO TO S3

PROGRAMMER: IF S1=N, NO AMOUNT CAN BE ENTERED

|  |
| --- |
| Q3=1 AND (CEP = 0 OR NO PROVISION 2/3 FOR SBP) AND A1=1 |

S2. \*What is the price of a USDA-reimbursable breakfast for students who pay the full price?

 INTERVIEWER: RECORD MORE THAN ONE ANSWER IF THE SCHOOL OFFERS BREAKFAST AT DIFFERENT PRICES (FOR EXAMPLE, A HIGHER PRICE FOR LARGER PORTIONS OR A DISCOUNT FOR A WEEKLY MEAL TICKET).

 $ | |.| | | STANDARD FULL PRICE

 $ | |.| | | OTHER FULL PRICE (*specify*)

 $ | |.| | | OTHER FULL PRICE (*specify*)

|  |
| --- |
| PROGRAMMER BOX:SKIP S3 and S4 if school offers free lunch to all students (CEP = 1 or Provision 2/3 for NSLP) |

|  |
| --- |
| Q3=1 AND (CEP = 0 OR NO PROVISION 2/3 FOR NSLP) |

S3. \*What is the price of a USDA-reimbursable lunch for students who pay the reduced-price?

 $ | |.| | | AMOUNT

Not applicable, all students receive free lunch n GO TO S5

PROGRAMMER: IF S3=N, NO AMOUNT CAN BE ENTERED

|  |
| --- |
| Q3=1 AND (CEP = 0 OR NO PROVISION 2/3 FOR NSLP) |

S4. \*What is the price of a USDA-reimbursable lunch for students who pay the full price? Record more than one answer if your school offers lunch at different prices (for example, a higher price for larger portions or a discount for a weekly meal ticket).

 $ | |.| | | STANDARD FULL PRICE

 $ | |.| | | OTHER FULL PRICE (*specify*)

 $ | |.| | | OTHER FULL PRICE (*specify*)

|  |
| --- |
| PROGRAMMER BOX:RETURN TO Q3 (MAIN MENU) |

|  |
| --- |
| Q3=2 |

B\_info. Breakfast observation. If more than one cafeteria serves reimbursable breakfasts at the selected time, observe the one that serves the most students.

 If the question is formatted to be read aloud, ask the school nutrition manager or another member of the school food service staff, otherwise just observe.

|  |
| --- |
| PROGRAMMER BOX:SHOW “BREAKFAST” AT THE TOP OF ALL SCREENS IN SECTION B. |

|  |
| --- |
| Q3=2 |

B1. \*Does this school offer reimbursable breakfasts?

YES 1

NO 0 GO TO Q3

|  |
| --- |
| B1 = 1 |

B1a. \*Are reimbursable breakfasts served in the cafeteria only, in other locations such as classrooms only, or in both the cafeteria and other locations?

CAFETERIA ONLY 1 GO TO B2

classroom or OTHER LOCATIONS ONLY 2 GO TO B1a1

CAFETERIA AND OTHER LOCATIONS 3 GO TO B2

|  |
| --- |
| B1a = 2 |

B1a1. Are you able to view the food preparation or assembly?

YES 1 go to B3\_START

NO 0 GO TO Q3

|  |
| --- |
| B1a=1 OR 3  |

B2. \*What are the names of each serving line or food station serving reimbursable breakfasts or components of reimbursable breakfasts? Please do not include any lines or stations that serve a la carte items only.

PROGRAMMER: ALLOW FOR ENTRY OF UP TO 7 RESPONSES.

|  |
| --- |
| **Breakfast line or station** |
| [RESPONSE 1] |
| [RESPONSE 2] |
| [RESPONSE 3] |
| [RESPONSE 4] |
| [RESPONSE 5] |
| [RESPONSE 6] |
| [RESPONSE 7] |

|  |
| --- |
| Q3=3 AND (B1a=1 OR 3) |

B3\_start. Time breakfast service began: [SELECT FROM CLOCK]

|  |
| --- |
| PROGRAMMER BOX B1: SET BREAKFAST OBSERVATION START TIME STAMP NOW IF B1A = 1, 3 OR B1A1 = 1.IF BA1A1 = 1, SKIP TO BMENU. |

|  |
| --- |
| B1a=1 OR 3 |

B4. Is today’s reimbursable breakfast menu prominently displayed so students can see it prior to going through the serving line, either outside (within 20 feet) the cafeteria or at the beginning of the serving line(s)?

YES 1

NO 0

|  |
| --- |
| B1a=1 OR 3 |

B4a. Does the cafeteria display signage that tells students what foods or components must be selected for a reimbursable meal?

YES 1

NO 0

|  |
| --- |
| B1a=1 OR 3 OR B1a1=1 |

Bmenu. Select the line or station to begin the observation.

PROGRAMMER: CREATE BMENU WITH A LIST OF ALL RESPONSES ENTERED AT B2 for interviewer to select from. INCLUDE A STATUS OF “FOODS RECORDED/NOT RECORDED” INDICATING WHETHER B5 WAS COMPLETED FOR EACH LINE/STATION. include an option to “edit lines/stations” to edit the list.

PROGRAMMER: IF B1a1=1, CREATE BMENU WITH ONLY OPTION “BREAKFAST IN CLASSROOM.” ALLOW RESPONDENT TO SELECT A LINE OR STATION FROM THE LIST.

|  |
| --- |
| PROGRAMMER: SHOW BUTTON FOR “DONE ENTERING MEAL COMPONENTS” TO GO TO PROGRAMMER BOX B2 unless B1a1=1.if B1a1=1, ask B5, then go to PROGRAMMER BOX B2. |

|  |
| --- |
| (B1=1 AND B1a=1 OR 3) OR B1a1=1 |

B5. Select each meal component that is available in this line/station serving reimbursable breakfasts or components of reimbursable breakfasts (for mixed dishes or combination foods, check each component included).

PROGRAMMER: DISPLAY NAME OF LINE OR STATION GIVEN AT B2

INTERVIEWER:

**Meat** items include all red meat, poultry, and fish.

**Meat alternate (excluding legumes)** items include cheese, yogurt, tofu, eggs, peanut butter or other nut or seed butters, and nuts and seeds.

**Legumes**include dry beans and peas.

Code **Lactaid milk** based on the fat content and flavor.

|  |  |
| --- | --- |
| Fruits (including 100% fruit juice) | Check box |
| Vegetables (including 100% vegetable juice) | Check box |
| Grains | Check box |
| Meats/Meat Alternate (excluding legumes) | Check box |
| Legumes | Check box |
| Milk: |
|  Skim/nonfat/fat-free white milk | Check box |
|  Low-fat (0.5% or 1%) white milk  | Check box |
|  Whole or reduced fat (2%) white milk | Check box |
|  Skim/nonfat/fat-free flavored milk (such as chocolate) | Check box |
|  Low-fat (0.5% or 1%) flavored milk (such as chocolate) | Check box |
|  Reduced fat (2%) flavored milk (such as chocolate) | Check box |
|  Soy or other non-dairy milk | Check box |

|  |
| --- |
| PROGRAMMER BOX B5:IF LINE/STATION IS MILK-ONLY THEN BCOMP = 1. ELSE IF LINE/STATION OFFERS ALL COMPONENTS OF A REIMBURSABLE BREAKFAST THEN BCOMP = 1. ELSE IF LINE/STATION DOES NOT OFFER ALL COMPONENTS OF A REIMBURSABLE BREAKFAST THEN BCOMP = 0.IF BCOMP = 1 RETURN TO BMENU UNTIL ALL LINES/STATIONS ARE OBSERVED. ELSE GO TO B5A. |

|  |
| --- |
| BCOMP = 0 |
| FILL Name of line/STATION GIVEN AT B2 |

B5a. Does the cafeteria or [NAME OF LINE/STATION] display signage that directs students who visit this line/station to visit other lines/stations to obtain other components of a reimbursable breakfast?

 CODE ALL THAT APPLY

CAFETERIA 1

[NAME OF LINE/STATION] 2

NEITHER 3

|  |
| --- |
| PROGRAMMER BOX B5A:RETURN TO BMENU UNTIL ALL LINES/STATIONS ARE OBSERVED. IF BCOMP = 0 FOR ANY LINES/STATIONS GO TO B5B. ELSE GO TO B6. |

|  |
| --- |
| BCOMP = 0  |
| FILL Name of line/STATION GIVEN AT B2 IN QUESTION STEM.fill response options as lines/STATIONS named at B2. Do not include the incomplete line.  |

B5b. \*If a student selects foods from [NAME OF LINE/STATION], can the student also visit any of the following lines/stations?

|  |  |  |
| --- | --- | --- |
|  | YES | NO |
| a. [NAME OF LINE/STATION]  | 1 | 0 |
| b. [NAME OF LINE/STATION]  | 1 | 0 |
| c. [NAME OF LINE/STATION]  | 1 | 0 |
| d. [NAME OF LINE/STATION]  | 1 | 0 |
| e. [NAME OF LINE/STATION]  | 1 | 0 |
| f. [NAME OF LINE/STATION]  | 1 | 0 |
| g. STUDENTS CAN VISIT ALL LINES/STATIONS IN THE CAFETERIA (VOLUNTEERED)  | 1 | 0 |

|  |
| --- |
| PROGRAMMER BOX B5B:IF “STUDENTS CAN VISIT ALL” IS SELECTED, GO TO B5. ELSE REPEAT B3B FOR ALL BCOMP = 0 LINES/STATIONS. DO NOT DISPLAY LINES/STATIONS AFTER THE COMBINATION Has ALREADY BEEN ASKED, THEN GO TO B6. |

|  |
| --- |
| B1a=1 OR 3 |

B6. Is there enough formal seating and tables for all of the students eating breakfast?

 CODE ONE ONLY

NOT ENOUGH (not enough appropriate seating for all students, or have to sit very close together to fit) 1

THE RIGHT AMOUNT (CROWDED, but all can sit comfortably if they want to) 2

MORE THAN ENOUGH (room to easily accommodate all students) 3

Not applicable n

|  |
| --- |
| B1a=1 OR 3 |

B7. During the breakfast period, were waste disposal containers ever filled to overflowing while students were attempting to dispose of their waste?

YES 1

NO 0

|  |
| --- |
| B1a=1 OR 3 |

B8. Was the eating area used for other purposes during the breakfast period?

YES 1

NO 0 go to box b2

|  |
| --- |
| B8=1 |

B8a. What other uses did the eating area have during the breakfast period?

 CODE ALL THAT APPLY

Gymnasium 1

Entry or hallway 2

Student groups/meetings/classes 3

Fundraiser with food 4

Fundraiser without food 5

School staff meetings 6

Parent meetings 7

Holding area/Gathering space/Staging area before bells ring 8

Other (Specify) 99

 (STRING NUM)

|  |
| --- |
| PROGRAMMER BOX B2:SET BREAKFAST OBSERVATION END TIME STAMP NOW IF B1A = 1, 3 OR B1A1 = 1. |

|  |
| --- |
| (B1a = 1 or 3) or B1a1 = 1 |

B1\_end. Time breakfast service ended: [SELECT FROM CLOCK]

|  |
| --- |
| PROGRAMMER BOX:RETURN TO Q3 (MAIN MENU) |

|  |
| --- |
| Q3=3 |

L\_info. If more than one cafeteria serves reimbursable lunches at the selected time, observe the one that serves the most students.

 If the question is formatted to be read aloud, ask the school nutrition manager or another member of the school food service staff, otherwise just observe.

|  |
| --- |
| Q3=3 |

L1. \*What are the names of each serving line or food station serving reimbursable lunches or components of reimbursable lunches? Please do not include any lines or stations that serve a la carte items only.

PROGRAMMER: ALLOW FOR ENTRY OF UP TO 24 RESPONSES (UP TO 8 RESPONSES ARE DISPLAYING IN THE TABLE BELOW AS AN EXAMPLE).

|  |
| --- |
| **Lunch line or station** |
| [RESPONSE 1] |
| [RESPONSE 2] |
| [RESPONSE 3] |
| [RESPONSE 4] |
| [RESPONSE 5] |
| [RESPONSE 6] |
| [RESPONSE 7] |
| [RESPONSE 8] |

PROGRAMMER: SHOW BUTTONS FOR “EDIT BREAKFAST LINES/STATIONS” TO GO TO A2, AND “RETURN TO MAIN MENU” TO GO TO Q3.

|  |
| --- |
| Q3=3 |

L1\_start. Time lunch period began: [SELECT FROM CLOCK]

|  |
| --- |
| PROGRAMMER BOX L1: SET LUNCH OBSERVATION START TIME STAMP NOW. SHOW “LUNCH” AT THE TOP OF ALL SCREENS IN SECTION L. |

|  |
| --- |
| Q3=3 |

L2. Is today’s reimbursable lunch menu prominently displayed so students can see it prior to going through the serving line, either outside (within 20 feet) the cafeteria or at the beginning of the serving line(s)?

YES 1

NO 0

|  |
| --- |
| Q3=3 |

L2a. Does the cafeteria display signage that tells students what foods or components must be selected for a reimbursable lunch?

YES 1

NO 0

|  |
| --- |
| Q3=3 |

Lmenu. Select the line or station to begin the observation.

PROGRAMMER: CREATE LMENU WITH A LIST OF ALL RESPONSES ENTERED AT L1 for interviewer to select from. INCLUDE A STATUS OF “FOODS RECORDED/NOT RECORDED” INDICATING WHETHER L3 WAS COMPLETED FOR EACH LINE/STATION. include an option to “edit lines/stations” to edit the list.

PROGRAMMER: SHOW BUTTON FOR “DONE ENTERING MEAL COMPONENTS” TO GO TO PROGRAMMER BOX L2.

|  |
| --- |
| Q3=3 |

L3. Select each meal component that is available in this line/station serving reimbursable lunches or components of reimbursable lunches (for mixed dishes or combination foods, check each component included).

PROGRAMMER: DISPLAY NAME OF LINE OR STATION GIVEN AT A3

INTERVIEWER:

**Meat** items include all red meat, poultry, and fish.

**Meat alternate (excluding legumes)** items include cheese, yogurt, tofu, eggs, peanut butter or other nut or seed butters, and nuts and seeds.

**Legumes**include dry beans and peas.

Code **Lactaid milk** based on the fat content and flavor.

|  |  |
| --- | --- |
| Fruits (including 100% fruit juice) | Check box |
| Vegetables (including 100% vegetable juice) | Check box |
| Grains | Check box |
| Meats/Meat Alternate (excluding legumes) | Check box |
| Legumes | Check box |
| Milk: |
|  Skim/nonfat/fat-free white milk | Check box |
|  Low-fat (0.5% or 1%) white milk  | Check box |
|  Whole or reduced fat (2%) white milk | Check box |
|  Skim/nonfat/fat-free flavored milk (such as chocolate) | Check box |
|  Low-fat (0.5% or 1%) flavored milk (such as chocolate) | Check box |
|  Reduced fat (2%) flavored milk (such as chocolate) | Check box |
|  Soy or other non-dairy milk | Check box |

|  |
| --- |
| PROGRAMMER BOX L3:IF LINE/STATION IS MILK-ONLY THEN LCOMP = 1. ELSE IF LINE/STATIONOFFERS ALL COMPONENTS OF A REIMBURSABLE Lunch THEN LCOMP = 1. ELSE IF LINE/STATION DOES NOT OFFER ALL COMPONENTS OF A REIMBURSABLE LUNCH THEN LCOMP = 0.IF LCOMP = 1 RETURN TO LMENU UNTIL ALL LINES/STATIONS ARE OBSERVED. ELSE GO TO L3A. |

|  |
| --- |
| LCOMP = 0 |
| FILL Name of line/STATION GIVEN AT A3 |

L3a. Does the cafeteria or [NAME OF LINE/STATION] display signage that directs students who visit this line/station to visit other lines/stations to obtain other components of a reimbursable lunch?

 CODE ALL THAT APPLY

CAFETERIA 1

[NAME OF LINE/STATION] 2

NEITHER 3

|  |
| --- |
| PROGRAMMER BOX L3A:RETURN TO LMENU UNTIL ALL LINES/STATIONS ARE OBSERVED. IF LCOMP = 0 FOR ANY LINES/STATIONS GO TO L3B. ELSE GO TO L5. |

|  |
| --- |
| LCOMP = 0  |
| FILL Name of line/STATION GIVEN AT L1 IN QUESTION STEM.fill response options as lines/STATIONS named at L1. Do not include the incomplete line.  |

L3b. \*If a student selects foods from [NAME OF INCOMPLETE LINE/STATION], can the student also visit any of the following lines/stations?

|  |  |  |
| --- | --- | --- |
|  | YES | NO |
| a. [NAME OF LINE/STATION]  | 1 | 0 |
| b. [NAME OF LINE/STATION]  | 1 | 0 |
| c. [NAME OF LINE/STATION]  | 1 | 0 |
| d. [NAME OF LINE/STATION]  | 1 | 0 |
| e. [NAME OF LINE/STATION]  | 1 | 0 |
| f. [NAME OF LINE/STATION]  | 1 | 0 |
| g. STUDENTS CAN VISIT ALL LINES/STATIONS IN THE CAFETERIA (VOLUNTEERED)  | 1 | 0 |

|  |
| --- |
| PROGRAMMER BOX L3B:IF “STUDENTS CAN VISIT ALL” IS SELECTED, GO TO L4. ELSE REPEAT L3B FOR ALL LCOMP = 0 LINES/STATIONS. DO NOT DISPLAY LINES/STATIONS AFTER THE COMBINATION Has ALREADY BEEN ASKED, THEN GO TO L4. |

|  |
| --- |
| Q3=3 |

L4. Is there enough formal seating and tables for all of the students eating lunch?

 CODE ONE ONLY

NOT ENOUGH (not enough appropriate seating for all students, or have to sit very close together to fit) 1

THE RIGHT AMOUNT (CROWDED, but all can sit comfortably if they want to) 2

MORE THAN ENOUGH (room to easily accommodate all students) 3

Not applicable n

|  |
| --- |
| Q3=3 |

L5. During the lunch period, were waste disposal containers ever filled to overflowing while students were attempting to dispose of their waste?

YES 1

NO 0

|  |
| --- |
| Q3=3 |

L6. Was the eating area used for other purposes during the lunch period?

YES 1

NO 0 GO TO BOX L2

|  |
| --- |
| L6=1 |

L6a. What other uses did the eating area have during the lunch period?

 CODE ALL THAT APPLY

Gymnasium 1

Entry or hallway 2

Student groups/meetings/classes 3

Fundraiser with food 4

Fundraiser without food 5

School staff meetings 6

Parent meetings 7

Holding area/Gathering space/Staging area before bells ring 8

Other (Specify) 99

 (STRING NUM)

|  |
| --- |
| PROGRAMMER BOX L2: SET LUNCH OBSERVATION END TIME STAMP NOW |

|  |
| --- |
| Q3=3 |

L1\_end. Time lunch service ended: [SELECT FROM CLOCK]

|  |
| --- |
| PROGRAMMER BOX:RETURN TO Q3 (MAIN MENU) |

|  |
| --- |
| Q3=4 |

C\_info. Cafeteria Characteristics.

This section of the observation does not need to be completed during meal service, but any tables, chairs, or furniture need to be set up as they are for meals in order to observe their condition.

Cafeteria includes both the eating and serving areas and both should be observed unless otherwise specified.

If more than one cafeteria serves reimbursable lunches, answer this section about the one that serves the most students.

|  |
| --- |
| Q3=4 |

C1. Can the eating area (walls, floors, and ceiling) of the cafeteria be observed?

 CODE ONE ONLY

Yes 1

No 0

|  |
| --- |
| Q3=4 |

C2. Can the serving area (walls, floors, and ceiling) of the cafeteria be observed?

 CODE ONE ONLY

Yes 1

No 0

|  |
| --- |
| PROGRAMMER BOX:IF C1=0 AND C2=0, RETURN TO Q3 (MAIN MENU)else, Show C3a-c3d on one screen |

|  |
| --- |
| C1=1 OR c2=1 |

C3a. What is the condition of the cafeteria itself?

 Are the walls…

INTERVIEWER: SELECT ONE RESPONSE FOR THE EATING AREA AND ONE FOR THE SERVING AREA

|  |  |  |
| --- | --- | --- |
|  | Eating Area | Serving Area |
| Clean or newly painted, no holes, cracks, chips, or marks | Check box | Check box |
| Some marks or discolorations, or minor cracks or chips | Check box | Check box |
| Holes in wall, cracks wider than ¼ inch, or major discoloration – areas at least as large as a sheet of paper (8 ½ x 11”) | Check box | Check box |

PROGRAMMER: HIDE “EATING AREA” COLUMN IF C1=0; HIDE “SERVING AREA” COLUMN IF C2=0.

ONLY ONE RESPONSE CAN BE SELECTED FOR EACH COLUMN

|  |
| --- |
| C1=1 OR c2=1 |

C3b. What is the condition of the cafeteria itself?

 Is the floor…

INTERVIEWER: SELECT ONE RESPONSE FOR THE EATING AREA AND ONE FOR THE SERVING AREA

|  |  |  |
| --- | --- | --- |
|  | Eating Area | Serving Area |
| Even with no stains | Check box | Check box |
| Few or light colored stains or some unevenness | Check box | Check box |
| Discolored, or holes or cracks, or very uneven | Check box | Check box |

PROGRAMMER: HIDE “EATING AREA” COLUMN IF C1=0; HIDE “SERVING AREA” COLUMN IF C2=0.

ONLY ONE RESPONSE CAN BE SELECTED FOR EACH COLUMN

|  |
| --- |
|  C1=1 OR c2=1 |

C3c. What is the condition of the cafeteria itself?

 Is the ceiling…

INTERVIEWER: SELECT ONE RESPONSE FOR THE EATING AREA AND ONE FOR THE SERVING AREA

|  |  |  |
| --- | --- | --- |
|  | Eating Area | Serving Area |
| Clean of stains or no holes or sagging | Check box | Check box |
| Minor discoloration, or small holes, or chips, or sagging | Check box | Check box |
| Major discoloration, or large or many holes, or very uneven | Check box | Check box |

PROGRAMMER: HIDE “EATING AREA” COLUMN IF C1=0; HIDE “SERVING AREA” COLUMN IF C2=0.

ONLY ONE RESPONSE CAN BE SELECTED FOR EACH COLUMN

|  |
| --- |
| C1=1 |

C3d. What is the condition of the cafeteria itself?

 Are the tables/chairs/furniture…

|  |  |
| --- | --- |
|  | Eating Area |
| Matching items in good quality shape, with no graffiti, stains or other marks, or damaged/missing parts | Check box |
| Some mismatched items, or occasional stains or marks, or damaged/missing parts | Check box |
| Furniture is consistently stained or marked, or has damaged/missing parts throughout cafeteria | Check box |

|  |
| --- |
| PROGRAMMER BOX:RETURN TO Q3 (MAIN MENU) |

|  |
| --- |
| ALL |

Confirm 1. The following modules were not completed:

PROGRAMMER:

 SHOW ALL MODULES FROM Q3 WITH A STATUS OF “UNTOUCHED” AND

If ((CEP = 0 AND NO PROVISION 2/3 FOR NSLP) AND S4 not complete) OR If ((CEP = 0 AND NO PROVISION 2/3 FOR SBP) AND S2 not complete), show “School Nutrition Manager Questions.”

 If (B1a = 1 or 3 or B1a1 = 1) and B1\_end not complete, show “Breakfast.”

 If L1\_end not complete, show “Lunch.”

 If (C1=1 and C3d not complete) or (C2=1 and C3c not complete), show “Cafeteria Characteristics.”

 Else, show “None.”

Do you have additional data to enter in any of the modules?

YES 1 go to q3

NO 0

|  |
| --- |
| IF “sCHOOL NUTRITION MANAGER QUESTIONS SHOWN IN CONFIRM 1 |

NoSNM. Explain why the school nutrition manager question module was not completed:

(Specify) 99

 (STRING NUM)

|  |
| --- |
| IF “BREAKFAST” SHOWN IN CONFIRM 1  |

NoBk. Explain why the breakfast module was not completed:

(Specify) 99

 (STRING NUM)

|  |
| --- |
| IF “LUNCH” SHOWN IN CONFIRM 1  |

NoLunch. Explain why the lunch module was not completed:

(Specify) 99

 (STRING NUM)

|  |
| --- |
| IF “CAFETERIA CHARACTERISTICS” SHOWN IN CONFIRM 1  |

NoCafChar. Explain why the cafeteria characteristics module was not completed:

(Specify) 99

 (STRING NUM)

|  |
| --- |
| ALL |

Thank you. You have completed the cafeteria observation form.

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