APPENDIX F05.12. PRINCIPAL COST INTERVIEW WITH REFERENCE GUIDE (group 3 & full Outlying areas)

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OMB Number: 0584-xxxx

Expiration Date: xx/xx/20xx

**USDA/Food and Nutrition Service**

**2024–2025 National School Foods Study**

**Principal Cost Interview**

This information is being collected to assist the Food and Nutrition Service in understanding school food purchasing practices, the nutritional quality of school meals and snacks, the cost to produce school meals, and student participation and dietary intakes. This is a mandatory collection and FNS will use the information to monitor program operations. This collection does not request any personally identifiable information under the Privacy Act of 1974. 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 0.75 hours 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, 1320 Braddock Place, 5th Floor, Alexandria, VA 22314 ATTN: PRA (0584-xxxx). Do not return the completed form to this address.

**Pre-load SAMPLE VARIABLES:**

* **Used in instrument**
	+ **PrincipalFirstName** – first name of Principal identified as respondent. Will be updated if necessary in the interview.
	+ **PrincipalLastName – last name of Principal**
	+ **Principal\_Phone** – phone number of Principal. Will be updated if necessary in the interview.
	+ **Principal\_Email** – email address of SNM. Will be updated if necessary in the interview.
	+ **Group** – data collection group
	+ **School\_State** – state in which the school is located
* **Needed on data file**
	+ **SchoolName**
	+ **SchoolID**
	+ **SFAName**
	+ **SFAID**

**Release instrument if:**

1. **Recruitmentstatus = recruited**
2. **Group=3 or FOA**

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| --- |
| SKIP MISSING DATA REVIEWPAGE IF SURVEY IS BLANK OR IF HAVEN’T REACHED C1 YET.  |

**CONFIRMING RESPONDENT INFORMATION**

|  |
| --- |
| ALL |
| PREFILL ANSWERS TO THESE QUESTIONS FROM PRINCIPALFIRSTNAME, PRINCIPALLASTNAME, PRINCIPAL\_PHONE, and PRINCIPAL\_EMAIL AND ALLOW INTERVIEWER TO EDIT |
| DISPLAY ALL THREE QUESTIONS ON SAME PAGE |

SC1. *{RName\_FName; RName\_LName}***Please confirm your name and contact information.**

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (STRING (20))

FIRST NAME

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (STRING (30))

LAST NAME

SC2.*{RPhone\_PhoneNum; RPhone\_response}* **What is your phone number?**

|\_\_\_|\_\_\_|\_\_\_| - |\_\_\_|\_\_\_|\_\_\_| - |\_\_\_|\_\_\_|\_\_\_|\_\_\_|

(0-999) (0-999) (0-9999)

HOME 1

WORK 2

CELL PHONE 3

SC3.*{REmail\_Email; REmail\_Email\_response}* **What is your email address?**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_@\_\_\_\_\_\_\_\_\_\_\_\_\_\_

DO NOT HAVE EMAIL ADDRESS………………………………………….N

REFUSED R

|  |
| --- |
| HARD CHECK: VERIFY EMAIL PATTERN AS \*@\*.\*. IF EMAIL DOES NOT MATCH PATTERN, DISPLAY: “PLEASE ENTER A VALID EMAIL ADDRESS.” |

|  |
| --- |
| ALL |
| IF SCHOOL\_STATE = AK OR HI, FILL **State;** ELSE, FILL **Territory** |

**INTRODUCTION**

FNS contracted with Mathematica and Decision Information Resources to conduct the 2024-2025 National School Foods Study.

Your participation vitally informs future policies for school meals and ensures the meals contribute to a healthier future for children.

[IF GROUP=3: **This important study will provide comprehensive information about school meals and afterschool snacks, (including their nutritional quality and cost to produce them. Having updated information about the school meals programs will help States, School Food Authorities, and schools better serve students.**]

[IF GROUP = FOA: **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.

I’m going to read a privacy statement to you before we begin:

Authority: This information is being collected under the authority of provisions of Section 28 of the Richard B. Russell National School Lunch Act (42 U.S.C. 1769i) as amended.

Purpose: The Food and Nutrition Service (FNS) is collecting this information to evaluate the nutritional quality of school meals, the cost to produce them, and student participation and dietary intakes.

Routine Use: The records in this system may be disclosed to private firms that have contracted with FNS to collect, aggregate, analyze, or otherwise refine records for the purpose of research and reporting to Congress and appropriate oversight agencies, and/or departmental and FNS officials.

Disclosure: Disclosing the information is voluntary, and there are no consequences to you for not providing the information.

The System of Records Notice for this information collection is USDA/FNS-8, FNS Studies and Reports, which can be located at [https://www.govinfo.gov/content/pkg/FR-1991-04-25/pdf/FR-1991-04-25.pdf](https://nam12.safelinks.protection.outlook.com/?url=https%3A%2F%2Fwww.govinfo.gov%2Fcontent%2Fpkg%2FFR-1991-04-25%2Fpdf%2FFR-1991-04-25.pdf&data=04%7C01%7CJDeSantis%40mathematica-mpr.com%7Cbc42269dd0ed414e1ae208d95da00c8e%7C13af8d650b4b4c0fa446a427419abfd6%7C0%7C0%7C637643764281804530%7CUnknown%7CTWFpbGZsb3d8eyJWIjoiMC4wLjAwMDAiLCJQIjoiV2luMzIiLCJBTiI6Ik1haWwiLCJXVCI6Mn0%3D%7C1000&sdata=X7qNfn3kR6HVlVUUaf92YucER2FdDMupzpdpSUb007o%3D&reserved=0) (p. 19078).

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

|  |
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| ALL |

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?

A1. 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]?

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

 INTERVIEWER NOTE: REFER RESPONDENT TO HANDOUT 1 IN INTERVIEW REFERENCE GUIDE

 PROGRAMMER NOTE: ONLY SHOW THE SENTENCE “Do you, other school staff, or volunteers, excluding employees of the food service department, [INSERT ActA-Apps- ActO\_Other]?” ON SUBSEQUENT QUESTIONS. LOOP THROUGH EACH ACTIVITY BELOW.

YES 1

NO 0

REFUSED

DON’T KNOW

|  |  |
| --- | --- |
|  | **ACTIVITY** |
| A | *{ActA-Apps}* Distribute and process applications for free or reduced-price meals |
| B | *{ActB-Cert}* Conduct direct certification or other certification from lists |
| C | *{ActC-Verify}* Verify household income of free or reduced-price students |
| D | *{ActD-Custodial}* Clean food service areas and provide other custodial services |
| E | *{ActE-Manage}* Manage cafeteria personnel |
| F | *{ActF-Supervise}* Supervise students during meals |
| G | *{ActG-Policy}* Conduct menu planning and other policy decisions |
| H | *{ActH-Food}* Order, store, or transport food |
| I | *{ActI-Collect}* Collect meal payments |
| J | *{ActJ-Reimburse}* Count and claim reimbursable meals |
| K | *{ActK-Nutrition}* Conduct nutrition education and promotion |
| L | *{ActL\_Other}* Do any other food service activities that I have not listed  |
| M | *{ActM\_Other}* Do any other food service activities that I have not listed |
| N | *{ActN\_Other}* Do any other food service activities that I have not listed |
| O | *{ActO\_Other}* Do any other food service activities that I have not listed  |

|  |
| --- |
| PROGRAMMER BOX ASK ActL-Other AND ActL\_OtherSpec THEN MOVE TO ActM-Other AND ActM\_OtherSpec, ETC. IF ActL-M\_Other = 0 THEN GO TO B1.  |

|  |
| --- |
| If *{Act[l-o]\_oTHER}* = 1, ASK a2. (I.E. IF ANSWERED “OTHER” ABOVE) |

A2. *{Act[L-O]\_OtherSpec}* What is the other activity that you, other school staff, or volunteers do, excluding employees of the food service department?

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (STRING (100))

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

|  |
| --- |
| ALL |

B1. 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 2024 to June 2025, so you will need to base your responses on your experience from July 2024 through the present, and your best estimate for the period from now through June 2025.

 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 they work the same amount of time on the same set of food service activities throughout the year. If a group of staff do only *some* of the same activities, or they do the same activities but for different amounts of time, I will collect their time and salary information separately. As we go through each activity, please let me know if staff can be grouped together.

 Please refer to Handout 2. This handout has the questions that I will ask you for each activity. We will start with questions 1 and 2.

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

PROGRAMMER: IN COLUMN 4 IF ACTHRSPERIODTYPE = Y THEN NUMBER OF PERIODS COLUMN SHOULD LOCK.

PROGRAMMER: IF THE SAME TITLE IS USED ACROSS MULTIPLE ACTIVITIES, THEN AUTO-FILL THE SAME ACTIVITYSTAFFCOUNT.

SCHOOL NON-FOOD SERVICE STAFF TIME ALLOCATION GRID:

Food service activity performed by school staff: [FILL ActA-Apps-ActO-Other]

| **(1)** | **(2)** | **(3)** |
| --- | --- | --- |
| **What types of employees do this activity (i.e., title, position, etc.)?** {*EmployeeType\_[A-S]\_[1-10}* | **How many employees of this type do this activity?** *{ActivityStaffCount\_[A-S]\_[1-10]}* | **How many hours per week does each person of this type spend on this task during the July 2024 – June 2025 program year?**  |
| **Hours** *{ActHrsPer\_[A-S]\_[1-10]}* **per Period** *{ActHrsPeriodType\_[A-S]\_[1-10]}* | **Number of Periods** *{ActPeriodCount\_[A-S]\_[1-10]}, {ActPeriodType\_[A-S]\_[1-10]}* |
| [1] |  | \_\_\_\_\_hrs per | D W M YOther:\_\_\_\_\_\_\_\_\_\_\_ | For:\_\_\_\_\_\_\_\_\_\_D W M  |
| [2] |  | \_\_\_\_\_hrs per | D W M YOther:\_\_\_\_\_\_\_\_\_\_\_ | For:\_\_\_\_\_\_\_\_\_\_D W M  |
| [3] |  | \_\_\_\_\_hrs per | D W M YOther:\_\_\_\_\_\_\_\_\_\_\_ | For:\_\_\_\_\_\_\_\_\_\_D W M  |
| [4] |  | \_\_\_\_\_hrs per | D W M YOther:\_\_\_\_\_\_\_\_\_\_\_ | For:\_\_\_\_\_\_\_\_\_\_D W M  |

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| PROGRAMMER BOX ASK ITEMS CORRESPONDING TO COLUMNS 1-3 FOR FIRST ACTIVITY WHERE QA1\_A-QA1\_O=1, THEN ASK ABOUT THE NEXT ACTIVITY SELECTED AT QA1. CONTINUE LOOP TO ASK ABOUT ALL ACTIVITIES WHERE QA1\_A-QA1\_O=1.ALLOW FOR ENTRY OF DECIMALS IN COLUMN 3 (NUMBER OF HOURS AND NUMBER OF PERIODS). |

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| FOR ALL SOFT CHECKS BELOW, REPEAT DISPLAY EACH TIME GRID IS ENCOUNTERED (RATHER THAN ONLY SHOWING AFTER FIRST ITERATION). |
| SOFT CHECK: IF THERE ARE DUPLICATE TITLES ACROSS ACTIVITIES: You entered the same title of [*EmployeeType*] more than once. Does this represent the same staff member(s)? If not, use a different title or position. |
| SOFT CHECK: IF THE ACTIVITY GRID IS BLANK: Please fill in the grid for non-food service staff who do this activity. |
| SOFT CHECK: IF ACTPERIODTYPE NOT SAME AS ACTHRSPERIODTYPE: Please confirm that this activity is done every [ACTHRSPERIODTYPE] for [ActPeriodCount] [ActPeriodType]s. If not, please answer in number of [ACTHRSPERIODTYPE]s. [For example: “Please confirm this activity is done every day for 16 weeks. If not, please answer in number of days.”] |
| SOFT CHECK: IF ANY VALUES (ASIDE FROM TITLE AND COUNT) ARE MISSING: At least one value is missing. Enter the missing value to continue. |
| HARD CHECK: IF EMPLOYEETYPE IS SELECTED MORE THAN ONCE AND ACTIVITYSTAFFCOUNT IS NOT THE SAME EACH TIME THE EMPLOYEE TYPE IS SELECTED: You entered the title of [*EmployeeType*] previously and indicated that *[ActivityStaffCount]* employees do this activity*.* If this represents the same staff member(s), update the number of employees to *[ActivityStaffCount]* to continue.Otherwise, enter a different title. |
| HARD CHECK: IF SAME EMPLOYEETYPE IS ENTERED MORE THAN ONCE ON THE SAME SCREEN: You entered the same title of [*EmployeeType*] more than once for [ActA*-Apps*-*ActO-Other]*. Enter a unique title for different (groups of) people. |
| HARD CHECK: IF ActHrsPeriodType = M and ActPeriodType = D or W: **You entered hours per month for [EmployeeType]. The number of periods must be months (cannot be days or weeks).** |
| HARD CHECK: IF ActHrsPeriodType = W and ActPeriodType = D; **You entered hours per week for [EmployeeType]. The number of periods must be weeks or months (cannot be days).** |
| HARD CHECK: IF ActPeriodCount > 365 days; **Total time per year must be between 1 and 365 days per year.** |
| HARD CHECK: IF ActPeriodCount > 52 weeks; **Total time per year must be between 1 and 52 weeks per year.** |
| HARD CHECK: IF ActPeriodCount > 12 months; **Total time per year must be between 1 and 12 months per year.** |
| SOFT CHECK: IF ActHrsPer> 8 hours per day, 40 hours per week, 184 hours per month, or 2088 hours per year: **Please confirm that [EmployeeType] regularly works overtime (hours per period exceeds normal working hours) on this activity.** |
| SOFT CHECK: IF hours unit ActHrsPeriodType = days and the number of periods ActPeriodType = weeks: **Do they work 5 days per week? [IF NOT, ENTER IN HOURS PER WEEK.]** |

PROGRAMMER: If ActHrsperiodtype = y, lock/gray out actperiodcount and actperiodtype.

|  |
| --- |
| WHEN SCHOOL NON-FOOD SERVICE STAFF TIME ALLOCATION GRID IS COMPLETE |

B2. *{ActP-S\_Other}* Are there any other activities related to the school meals programs that school staff do that we have not talked about yet?

YES 1

NO 0

PROGRAMMER: show table of activities [FILL ActA*-Apps*-*ActO-Other*] SELECTED FROM A1 AS A REFERENCE FOR INTERVIEWER.

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| --- |
| IF ACTP-S\_Other = 1, THEN ASK ActP-S\_OtherSpec |

B3. *{ActP-S\_OtherSpec}* What is the other activity that you, other school staff, or volunteers do, excluding employees of the food service department?

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (STRING (100))

|  |
| --- |
| PROGRAMMER BOXIF *ActP-S\_Other* = 1, RECORD VERBATIM RESPONSE IN COLUMN 1 OF THE TIME ALLOCATION GRID, THEN ASK ITEMS CORRESPONDING TO COLUMNS 2-4. LOOP BACK TO ActP-S\_Other TO ASK ABOUT ANY OTHER MISSED ACTIVITIES UNTIL RESPONSE = NO OR UP TO 4 LOOPS, THEN PROCEED TO SCHOOL NON-FOOD SERVICE STAFF SALARY GRID. |

|  |
| --- |
| PROGRAMMER BOXONCE THE SCHOOL NON-FOOD SERVICE STAFF TIME ALLOCATION GRID HAS BEEN COMPLETED (*ActP-S\_Other* =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 C: SCHOOL NON-FOOD SERVICE STAFF SALARY GRID

C1. 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 2, 3 and 4 on Handout 2 for each person, title, or position you identified. I can group staff with the same position together if they work the same number of hours per week and they work the same number of weeks per year. If these are not all true for the staff group, I will collect their salary information separately. As we go through each type of staff, please let me know if they can be grouped together.

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.

PROGRAMMER: SHOW GRID ON ONE SCREEN. POPULATE DROPDOWN WITH JOB TITLEs FROM EMPloyeetype\_[A-S]\_[1-10] and put ACTivitystaffcount so the title/position reads, e.g., “TEACHER-rb - 1 employee(s)”. ALLOW UP TO 45 ROWS IN GRID. BECAUSE THE ABOVE GRID CAN HAVE MULTIPLE INSTANCES OF THE SAME EMPLOYEE TYPE ACROSS ACTIVITIES, YOU SHOULD JUST TAKE THE FIRST INSTANCE OF THE EMPLOYEE TYPE AND USE IT IN THE COUNT THAT’S DISPLAYED IN the LABEL. FOR EXAMPLE, THERE MIGHT BE A TEACHER WHO WORKS ON THREE ACTIVITIES – THIS LABEL SHOULD BE TEACHER RS (1) EVEN THOUGH TEACHER RS is LISTED ACROSS 3 ACTIVITIES.

PROGRAMMER: NOTES IN COLUMN 7 SHOULD BE CARRIED THROUGH TO THE NEXT GRID. NOTES SHOULD REMAIN EDITABLE ON THE FOLLOWING GRID.

PROGRAMMER: ALLOW FOR ENTRY OF DECIMALS IN COLUMN 3 (NUMBER OF HOURS).

SCHOOL NON-FOOD SERVICE SALARY GRID:

| **(1)** | **(2)** | **(3)** | **(4)** | **(7)** |
| --- | --- | --- | --- | --- |
| **Title/Position** *{SalTitle}* | **Number of staff** *{SalStaffCount}* | **Total paid hours/ week** *{HoursPerWeek}* | **Total paid time/ year***{TimePerYear};{UnitPerYear}* | **NOTES** |
| E.g. Teacher | 3 | 40hrs/wk | 44o Daysx-mark Weeks Per yearo Months |  |
| A. [FILL DROPDOWN of EMPLOYEETYPE] | | | |RANGE 1-99 | | | |hrs/wkRANGE 0-84 | | | | |RANGE 0-365o Days o Weeks Per yearo Months  | \_\_\_\_\_\_\_\_\_\_\_\_ |

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| FOR ALL SOFT CHECKS BELOW, REPEAT DISPLAY EACH TIME GRID IS ENCOUNTERED (RATHER THAN ONLY SHOWING AFTER FIRST ITERATION).  |
| SOFT CHECK: IF ANY VALUES ARE MISSING: At least one value is missing. Enter the missing value to continue. |
| HARD CHECK: **If > 365 days: Total paid time per year must be between 0 and 365 days per year.** |
| HARD CHECK: **If > 52 weeks: Total paid time per year must be between 0 and 52 weeks per year.** |
| HARD CHECK: **If > 12 months: Total paid time per year must be between 0 and 12 months per year.** |
| HARD CHECK : IF SUM OF SALSTAFFCOUNT BY POSITION DOES NOT EQUAL ACTIVITYSTAFFCOUNT BY POSITION; For [title/position], the number of staff in table does not equal the number of staff in time allocation section. |

C2. I will now ask questions 5 and 6 on Handout 2 for each person, title, or position.

PROGRAMMER: SHOW GRID ON ONE SCREEN. POPULATE ROW WITH JOB TITLES COLLECTED AT SALTITLE.FOR ALL ROWS, POPULATE COLUMN 2 WITH NUMBER OF STAFF FROM SALSTAFFCOUNT. ALLOW UP TO 45 ROWS IN GRID.

PROGRAMMER: IF SALSTAFFCOUNT = 1, DEACTIVATE COLUMNS 5B AND 6B FOR ROW
(I.E., IF THERE IS ONLY ONE STAFF MEMBER IN POSITION, ONLY ALLOW ENTRY INTO LOW SALARY/BENEFITS COLUMN.)

PROGRAMMER: ALLOW FOR ENTRY OF DECIMALS IN COLUMNs 5 and 6 (salary and benefits).

| **(1)** | **(2)** | **(5a)** | **(5b)** | **(6a)** | **(6b)** | **(7)** |
| --- | --- | --- | --- | --- | --- | --- |
| **Title/ Position** | **Number of staff** | **(Low) Salary/Wage***{LowSalary}; UnitLowSalary}* | **[ONLY ALLOW ENTRY if COL2>1]****High Salary/Wage***{HighSalary; UnitHighSalary}* | **(Low) Fringe benefits/ year***{LowFringe}* | **[ONLY ALLOW ENTRY if COL2>1]High fringe benefits/ year***{HighFringe}* | **NOTES** |
| E.g. Teacher | 3 | $\_\_\_40,000\_\_\_\_\_ pero Houro Weeko Every two weekso Two times a montho Month x-mark Year | $\_\_48,000\_\_\_\_\_\_ pero Houro Weeko Every two weekso Two times a montho Month x-mark Year | $3,000 per year | $25,000 per year |  |
| A. [FILL *SalTitle*] | [FILL *SalStaffCount*] | $ \_\_\_\_\_\_\_\_\_\_\_\_\_ pero Houro Weeko Every two weekso Two times a montho Month o Year | $ \_\_\_\_\_\_\_\_\_\_\_\_\_ pero Houro Weeko Every two weekso Two times a montho Month o Year | $\_\_\_\_\_\_ per year | $\_\_\_\_\_\_ per year | [PREFILL WITH NOTE FROM LAST GRID] |

|  |
| --- |
| FOR ALL SOFT CHECKS BELOW, REPEAT DISPLAY EACH TIME GRID IS ENCOUNTERED (RATHER THAN ONLY SHOWING AFTER FIRST ITERATION).  |
| SOFT CHECK: IF ANY VALUES EXCEPT NOTES FIELD ARE MISSING: **For row [x], at least one value is missing. Enter the missing value.** |
| SOFT CHECK: IF ANY VALUES IN LOWSALARY/HIGHSALARY GREATER THAN 100,000; **For row [x], please confirm the salary/wage is correct.**  |
| HARD CHECK: IF HIGHSALARY<LOWSALARY; **For row [x], high salary/wage cannot be less than low salary/wage.**  |
| HARD CHECK: IF HIGHFRINCE<LOWFRINGE; **For row [x], high fringe benefits cannot be less than low fringe benefits.**  |

**MISSING DATA REVIEW:**

|  |
| --- |
| ALLOW FOR NAVIGATION TO MISSING DATA REVIEW AT ANY POINT IN INSTRUMENT. FOR EACH JOB TITLE AND STAFF COUNT, LIST WHETHER DATA IS COMPLETE OR INCOMPLETE. IF INCOMPLETE, LIST WHAT IS INCOMPLETE. |

JOB TITLE IS COMPLETE IF:

1. SUM OF SALSTAFFCOUNT BY TITLE = ACTIVITYSTAFFCOUNT BY TITLE
2. FOLLOWING VARIABLES NOT MISSING
	1. HOURSPERWEEK
	2. TIMEPERYEAR
	3. UNITPERYEAR
	4. LOWSALARYUNITLOWSALARY
	5. HIGHSALARY (IF APPLICABLE)
	6. UNITHIGHSALARY (IF APPLICABLE)
	7. LOWFRINGE
	8. HIGHFRINGE (IF APPLICABLE)

IF CRITERION 1 IS NOT MET, DISPLAY: “Total staff count for position is [STAFFCOUNT] but Salary Grid contains [SALSTAFFCOUNT] people in position.”

IF CRITERION 2 IS NOT MET, DISPLAY: “The following information is missing in the Salary Grid: [LIST COLUMN AND VARIABLE NAMES]”

|  |  |
| --- | --- |
| **Section A** | **Status** |
| **Distribute and process applications for free or reduced-price meals** | **[Complete or incomplete].**  | **Response: [Yes or no]** |
| **Conduct direct certification or other certification from lists** | **[Complete or incomplete].**  | **Response: [Yes or no]** |
| **Verify household income of free or reduced-price students** | **[Complete or incomplete].**  | **Response: [Yes or no]** |
| **Clean food service areas and provide other custodial services** | **[Complete or incomplete].**  | **Response: [Yes or no]** |
| **Manage cafeteria personnel** | **[Complete or incomplete].**  | **Response: [Yes or no]** |
| **Supervise students during meals** | **[Complete or incomplete].**  | **Response: [Yes or no]** |
| **Conduct menu planning and other policy decisions** | **[Complete or incomplete].**  | **Response: [Yes or no]** |
| **Order, store, or transport food** | **[Complete or incomplete].**  | **Response: [Yes or no]** |
| **Collect meal payments** | **[Complete or incomplete].**  | **Response: [Yes or no]** |
| **Count and claim reimbursable meals** | **[Complete or incomplete].**  | **Response: [Yes or no]** |
| **Conduct nutrition education and promotion** | **[Complete or incomplete].**  | **Response: [Yes or no]** |
| **Other**  | **[Complete or incomplete].** | **Response: [Yes or no]** |
| **Overall** | ***[Complete or incomplete]*** |

**Add more tasks**

|  |  |  |
| --- | --- | --- |
| **Section B** | **Status** | **Notes** |
| **Missing information in [row \_ fill activity]** | **[Complete or incomplete]** |  |
| **Overall** | ***[Complete or incomplete]*** |

**Add more tasks**

|  |  |  |
| --- | --- | --- |
| **Section C – Grid 1** | **Status** | **Notes** |
| **Count of [fill titles]** | **[Complete or incomplete]** |  |
| **Missing information in [row \_ fill activity]** | **[Complete or incomplete]** |  |
| **Overall** | ***[Complete or incomplete]*** |

**Add more tasks**

|  |  |  |
| --- | --- | --- |
| **Section C – Grid 2** | **Status** | **Notes** |
| **Missing information in [row \_ fill activity]** | **[Complete or incomplete]** |  |
| **Overall** | ***[Complete or incomplete]*** |

**Add more tasks**

|  |
| --- |
| ALL |

**C3.** *{InterviewComplete}* **IS INTERVIEW COMPLETE?**

YES 1

NO 0

|  |
| --- |
| IF INTERVIEW COMPLETE=1, MARK INTERVIEW COMPLETE AND SET COMPLETE STATUS AND DO NOT ALLOW REENTRY INTO INSTRUMENT. IF INTERVIEW COMPLETE=0, MARK AS A PARTIAL AND ALLOW REENTRY INTO INSTRUMENT. |

**END OF SURVEY.**

**Those are all of my questions for you today. Thank you for taking the time to complete this interview with me. Your participation is vital to the success of the National School Foods Study.**

PRINCIPAL COST INTERVIEW Reference GUIDE

HANDOUT 1: Food Service Function List for School Staff

OMB Number: 0584-xxxx

Expiration Date: XX/XX/20XX

We will ask you to identify the below 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. These types of activities may involve you or other staff or volunteers at this school. This excludes employees in the food service department or others whose salaries or wages are paid entirely or partially by the food service department.

**Food Service Activities That Non-Food Service Staff May Do**

**Activity A:** Distributing and processing applications for free or reduced-price meals

1. Distributing applications, such as printing, mailing, or handing applications out at meetings
2. Communicating about applications for free/reduced price meals (for example, publishing in newsletters, making public service announcements, creating web site postings, speaking to parent groups or community organizations, or contacting individual parents)
3. Maintaining and providing support for online applications
4. Collecting and checking applications, resolving problems, and adding school information
5. Approving/rejecting applications and notifying parents
6. Compiling lists of eligible students
7. Updating lists to include transfer students and other changes

**Activity B:** Direct certification and other certification from lists

1. Direct certification of students for free meals using program data (for example, SNAP/Food Stamps, TANF/welfare, Medicaid, or other data)
	1. Processing batches of students
	2. Using lookups for individual students
2. Other certification of students for free meals from lists (for example, foster children, homeless children, Head Start, or migrants)
	1. Certification from foster care list
	2. Certification from Homeless List
	3. Certification from Head Start List
	4. Certification from other lists (runaways, migrants)
3. Reporting on direct certification or calculating the identified student percentage (ISP) for school

**Activity C:** Verifying household income of students certified for free or reduced-price meals

1. Selecting applications for verification
2. Sending out requests for proof of eligibility and answering questions
3. Verifying applications using SNAP/Food Stamp, TANF/welfare, or Medicaid information (direct verification)
4. Reviewing information provided by parents, verifying eligibility, and following up on missing information
5. Notifying parents of changes in eligibility
6. Reporting on verification

**Food Service Activities That Non-Food Service Staff May Do (continued)**

**Activity D:** Cleaning food service areas and other custodial services

1. Clean-up in kitchen area (for example, dishes, trays, or garbage)
2. Maintenance and repairs of facilities and equipment

**Activity E:** Management of cafeteria personnel

1. Hiring new staff
2. Conducting performance reviews or evaluations
3. Resolving personnel problems

**Activity F:** Supervising students during meals

1. Supervising students during breakfast
2. Supervising students during lunch
3. Supervising students during afterschool snacks or suppers (including FFVP, CACFP snacks or suppers, or NSLP afterschool snacks)

**Activity G:** Menu planning and other policy decisions

1. Menu planning, including for both routine and special occasions (for example, catering, fundraisers, or events for staff or parents)
2. Setting meal schedules
3. Other policy decisions regarding school food service (for example, availability of a la carte items)

**Activity H:** Ordering, storing, and transporting food or other supplies purchased with food service funds

1. Receiving deliveries of food or supplies, or other “heavy lifting”
2. Picking up food or supplies from storage sites
3. Stocking vending machines or school stores with food

**Activity I:** Collecting meal payments

1. Collecting money at meals
2. Collecting money owed for meals
3. Collecting money from cafeterias
4. Receiving money for student meal payment accounts or selling meal tickets
5. Depositing money for meals or meal tickets
6. Issuing meal payment cards or ID/PIN numbers (other than non-food service student ID/PIN)
7. Maintaining student meal payment accounts
8. Reconciling deposits to bank statements

**Food Service Activities That Non-Food Service Staff May Do (continued)**

**Activity J:** Counting and claiming reimbursable meals

1. Compiling meal counts for breakfast
2. Compiling meal counts for lunch
3. Compiling meal counts for CACFP snacks and suppers, and NSLP afterschool snacks
4. Reporting on meal and snack counts and FFVP produce costs
5. Submitting meal and snack claims to State

**Activity K**: Nutrition education and promotion (includes messages about healthy eating and participating in school meals)

1. Placing displays, banners, or other visual messages in school facilities
2. Conducting demonstrations or events to promote healthy eating
3. Distributing materials to students or parents (for example, newsletters or recipes)
4. Training school personnel for nutrition education/promotion
5. Holding meetings of teams or advisory groups to plan and assess nutrition education/promotion activities at school or elsewhere
6. Planting, maintaining, and harvesting school gardens
7. Involving students in planning the menu, naming menu items, or taste-testing new items
8. Incorporating nutrition education/promotion activities in classroom curricula
9. Conducting other activities related to Team Nutrition, Farm to School, or other Federal/State nutrition education/promotion programs
10. Developing and monitoring the local wellness policy

HANDOUT 2: Principal Cost Interview Guide

**We will ask you the following questions about staff at your school who work on food service-related activities but are not paid from the food service account. See Handout 1 for a list of food service activities involving non-food service staff.**

**Please refer to the Grid A in Handout 3 for questions 1-3b.**

1. **What types of employees (other than food service workers) do this activity (i.e., title, position, etc.)?**
* Do not include staff who are paid out of the food service account.
1. **What types of employees (other than food service workers) do this activity (i.e., title, position, etc.)?**
* Do not include staff who are paid entirely or in part out of the food service account.
1. **How many employees of this type do this activity for the same amount of time throughout the year?**

**4. How many hours per week does each person of this type spend on this activity during the July 2024 – June 2025 program year?**

* If hours per week are hard to estimate, we can also record hours per day, month, or year. Your best estimate is fine.

**5. For how many weeks (or days or months) during the 2024-2025 program year is this activity done?**

**From the activities identified above, additional questions will be asked for each position/title mentioned. Please refer to Grid B part 1 and 2 in Handout 3 for questions 1-6.**

1. **First position/title from Grid A, Question 2.**
2. **What is the total number of employees in this position? (May be identified in Grid A, Question 3.)**
3. **How many paid hours per week does each staff member in this position work?**
	* Total hours per week can only exceed 40 if *paid overtime* for a position is incurred on a *regular* basis. Intermittent or unpaid overtime should not be included, even if unpaid overtime is worked on a regular basis.
4. **What is the total paid time per year for each staff member in this position?**
	* Paid time includes paid holidays, sick time, and vacation.
	* This can be reported in days, weeks, or month per year.
5. **What is the salary or wage for this position?**
* If multiple staff members are reported together, report the lowest and then the highest salaries for this position.
* The salary can be reported per hour, week, every two weeks (biweekly), two times a month, per month, or per year.
1. **What is the dollar value of annual fringe benefits received by staff in this position?**
* If multiple staff members are reported together, report the lowest and then the highest fringe benefit amounts for this position.

HANDOUT 3: School Non-Food Service Staff Time Allocation Grid (A) and Staff Salary Grid (B)

##### GRID A: SCHOOL NON-FOOD SERVICE STAFF TIME ALLOCATION GRID

|  | **(1)** | **(2)** | **(3)** |
| --- | --- | --- | --- |
| **Food service activity performed by school staff** | **What types of employees do this activity (i.e., title, position, etc.)?** | **How many employees of this type do this activity?** | **How many hours per week does each person of this type spend on this task during the July 2024 – June 2025 program year?**  |
| **Record in hours per day/week/month/year for number of days/weeks/months** |
| E.g., Distributing and processing applications for free or reduced-price meals | Teacher | 2 | 4 hours per month for 2 months |
| Guidance Counselor  | 1 | 1 hour per week for 2 months |
| A. |  | | | | | \_\_\_ hrs per (day/week/month/year) for \_\_\_\_ (days/weeks/months) |
|  | | | | | \_\_\_ hrs per (day/week/month/year) for \_\_\_\_ (days/weeks/months) |

##### GRID B: SCHOOL NON-FOOD SERVICE STAFF SALARY GRID

| **(1)** | **(2)** | **(3)** | **(4)** | **(5)** | **(6)** |
| --- | --- | --- | --- | --- | --- |
| **Title/Position** | **Number of staff** | **Total paid hours/ week** | **Total paid time/ year** | **Salary/Wage** | **Fringe benefits/ year** |
| E.g., Teacher | 2 | 40hrs/wk | 44o Daysx-mark Weeks Per yearo Months | $40,000 per | $3,000 per year |
| o Houro Weeko Every two weekso Two times a month | o Month x-mark Year  |
| A. | | | |  | | | | hrs/wk | | | | |o Dayso Weeks Per yearo Months | $\_\_\_\_\_\_\_\_\_\_ per | $\_\_\_\_\_\_\_\_\_\_ per year |
| o Houro Weeko Every two weekso Two times a month | o Month o Year  |