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SCHOOL FOOD PROGRAM INVENTORY

What is the School Food Program Inventory?

The School Food Program Inventory is a tool designed by the Nutrition, Health and Development Group of the Centre of Excellence for Children and Adolescents with Special Needs and the Kids Eat Smart Foundation of Newfoundland and Labrador to help School Food Programs to quickly and efficiently document important information about the operation of their programs.

Why use the School Food Program Inventory?

The inventory provides a readily accessible record of the information needed to internally evaluate your program and to plan and prepare for the next year's program development in areas such as fundraising, budgeting and volunteer recruitment. Also, once documented, your program information is readily accessible for presentation to your Board of Directors, Funding Agencies, Supporters and other interested persons and groups.

INFORMANT INFORMATION

Name: _____

Position with the Program: _____

Mailing Address: _____

Telephone Number: _____ Fax Number: _____

Date Completing Inventory: _____

SCHOOL INFORMATION

School: _____

Mailing Address: _____

Telephone Number: _____ Fax Number: _____

School Principal: _____ School District: _____

Communities Served: _____

Grade Levels Offered: _____ School Enrolment: _____

PROGRAM COORDINATOR INFORMATION

A Program Coordinator is the individual who oversees the operation of the school food program (SFP).

1. How long has the Program Coordinator been in this position? _____
2. How long has the Program Coordinator been involved, in any role, with this SFP? _____
3. Is there a Management Committee / Coordinating Committee that helps manage the program?
 Yes No
4. How many hours weekly, if any, does the Program Coordinator volunteer with the SFP?
5. How many hours per week, if any, does the Program Coordinator work for pay with the SFP? _____
6. What does the Program Coordinator consider to be the biggest challenge in offering the program this year? _____

PROGRAM INFORMATION

1. How many years has the SFP been in operation? _____
 2. Which of the following best describes your program (select all that apply)?
 Breakfast Lunch Snack
 3. Which of the following best describes the location of the SFP?
 Cafeteria Classroom Gym Lunch Room
- Other (please specify) _____

4. How many days per week has the program been offered during this school year? _____
5. How many weeks has the program been offered during this school year? _____
6. On average, during the last month of this school year, how many students were served at the SFP each day? _____
7. On average, during the first month of this school year, how many students were served at the SFP each day? _____
8. If there has been a change in the number of children attending the program over this school year, please explain why you think this is so? _____
9. Is the SFP open to all students attending the school?
- Yes No
10. If the SFP is not open to all students, to whom is the SFP open? _____
- In the space below please describe a typical menu (or attach a copy if available). _____
-
11. Are you satisfied with the menu selection?
- Yes No Not Sure
- If no, why not? _____
-
12. Does the SFP charge students a fee?
- Yes No
- If yes, how much is the fee and how is it collected? _____
13. Why was it decided to implement a fee? _____
-

14. At the start of the school year, how were children introduced to the SFP? _____

15. Are children encouraged to attend the program?

Yes No

Please explain _____

16. Is there any stigmatization (i.e. embarrassment or shame felt by participants, or taunting and belittling of participants by other children) associated with the children who participate in the SFP?

Yes No

Please explain _____

17. Do you feel that the children most in need are attending the SFP?

Yes No

If no, please explain _____

COMMUNITY SUPPORT

1. Is your community aware of the program?

Yes No Not Sure

2. What is being done to enhance community awareness? _____

3. Please describe any positive reactions to your program within the community? _____

4. Please describe any negative reactions to your program within the community? _____

VOLUNTEERS

1. How many volunteers do you need to help run your program each day? _____

2. How many volunteers do you usually have each day? _____

3. During the current school year, how many individuals have volunteered at least once with the SFP? _____

4. Do your volunteers include (select all that apply):

- | | |
|--|--------------------------|
| Students | <input type="checkbox"/> |
| Parents of children participating in the program | <input type="checkbox"/> |
| Parents of children not participating in the program | <input type="checkbox"/> |
| Teachers | <input type="checkbox"/> |
| Community members (who are none of the above) | <input type="checkbox"/> |

5. Has **getting** volunteers been a challenge for your program?

Yes No

If yes, please explain why you think this is so _____

6. Has **keeping** volunteers been a challenge for your program?

Yes No

If yes, please explain why you think this is so _____

What are some of the ways that you have tried to **recruit** volunteers? _____

Which of these methods have been successful? _____

7. What are some of the ways that you have tried to **keep** your volunteers? _____
 Which of these methods have been successful? _____

FINANCIAL INFORMATION

1. Has getting community contributions been difficult for your program?
 Yes No Not Sure
 Please explain _____

The community can make donations to school food programs in one of two ways; donations can be monetary or “in-kind” (food, utensils, or supplies).

2. Please list the sources and amounts of **monetary** support received from the community:

SOURCE (e.g., local business, parents, school, charitable organization, etc.)	AMOUNT
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

attach a separate sheet if needed.

3. How would you rate this level of **monetary** donation from your community?

- Excellent Very Good Good Fair Poor

4. Please list the sources, items and amounts of **in-kind** support received from the community.

SOURCE	Item and Amount
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

attach a separate sheet if needed.

5. How would you rate this level of **in-kind** donation from your community?

- Excellent Very Good Good Fair Poor

6. In what ways do **parents** contribute to the program?

- Monetary donations
 In-kind donations
 Volunteer time
 Other (please specify) _____
 Parents do not contribute

7. Please explain how parents are encouraged to contribute to the program? _____

8. Please describe the fund raising activities that were organized over the past year to support the SFP _____

9. Can your SFP be sustained from community resources?

- Yes No Not Sure

Complete the following to help assess your supply and need for next school year.

Name of Program: _____

Date: _____

VOLUNTEER LIST - End of School Year
--

Name	Returning	Not Returning	Unsure

Number of volunteers committed for next year: _____

Total number of volunteers needed for next year: _____

Number of volunteers to recruit: _____

DONATIONS

In the table below, please provide a list of community organizations that have indicated a commitment to donate, either financially or in-kind, (contributions of food, utensils, or supplies) to your program.

Community Organization	Contribution

Who will be the Program Coordinator of your program next year?

Name: _____

Address: _____

Telephone Number: _____