



Food Retail Site-level Assessment Questionnaire

N. Store Manager/Owner Interview (can be completed separately)

- Interviews can occur on a different day from observations and can take place over several conversations, if that is what's best for the store owner/manager
- You do not need to ask anything you already know through prior interactions or observations
- Questions labeled as "*(optional)*" indicate questions we are not planning to use in state-level analysis
 - o They are included for potential usefulness for program-planning but you can choose to skip these if they will not be useful for your healthy retail program.
- Feel free to combine with or add your own locally-developed program planning questions

Here is a "script" that you can use and adapt for introducing the interview section:

Thank you so much for letting us look around your store and see what kinds of products and signs you already have. We also have a few questions for you that are about things you do for the store and for your customers to help them make healthy choices. We will use all of this information to plan with you about what kinds of healthy changes to make in your store. Just like with the observations, your answers, your name and your store's name will never be shared publicly without your permission.

1. a) Has this store made efforts towards offering healthy foods or beverages? Yes No

(b and c are optional)

b) If no, why not? *(Probe for whether they've tried it before and let them share failed attempts)*

c) *If yes, how? When? Who did you work with?*

2. Does the store encourage customers to purchase **healthy¹** foods and beverages through any of these on-going activities?
(Healthy retail team can answer these without asking if they already know)

a) Store tours: Yes (1) No (0)

b) Taste tests: Yes (1) No (0)

c) Food/recipe/other live demos: Yes (1) No (0)

d) Participation in health/wellness fairs: Yes (1) No (0)

e) Audio-only announcements through a PA system: Yes (1) No (0)

f) Audio/visual displays: Yes (1) No (0)

g) Other types of promotion (not signs or posters): Yes No, describe: _____

3. Is the store participating in ["Fresh Credits" / _____] or another program that gives cash-back bonuses for using CalFresh/SNAP to buy fruits and vegetables¹⁶? *(feel free to name a dollar-matching program used in your community)* Yes (4) No (0)

4. Does the store make the prices of **healthy**¹ foods/beverages lower (or price **unhealthy**² foods/beverages higher) to encourage more **healthy**¹ purchases? Yes (4) No (0)
If yes, which food/beverages? _____

5. Does the store have regular sales, discounts, coupons, deals, or other price reductions for...
a) Fruits and vegetables: Yes (1) No (0)
b) Other **healthy**¹ foods: Yes (1) No (0)
c) **Healthy**¹ beverages (e.g. water, 100% juice, and other unsweetened drinks): Yes (1) No (0)
d) **Unhealthy**² foods (e.g., chips, candy, cookies, etc.): Yes (0) No (1)
e) Sugary drinks (e.g., soda, energy drinks, etc.): Yes (0) No (1)
f) Alcohol: Yes (0) No (1)
g) Other: _____

6. (optional) Do students or kids often come in to buy foods/beverages here? Yes No

7. (optional, except for SPAN sites) Is there a space for breastfeeding and/or pumping breast milk that is not a restroom?
 Yes, for employees only (1) Yes, for customers only (1) Yes, for both employees and customers (2) No (0)

8. [Community engagement¹⁷] How do you build relationships with your customers and the community: (1 point each)
a) Are there any community bulletin boards or space to post flyers for community events/gatherings? Yes No
b) Do you allow customers to pay for items later (i.e., an informal credit system, customer "tab", etc.)? Yes No
c) Do you or other cashiers/store staff know customers by name? Yes No
d) Do you or other staff recommend products to customers, or encourage them to try certain products (not as part of taste tests or other marketing activity): Yes No
e) Do you or other store staff ask customers for recommendations or let them make suggestions on what products to carry in the store? Yes No
f) Are there store-sponsored community events or fundraisers? Yes No
g) Other ways/examples of how the store engages the community? Yes No, describe _____

9. (optional, ask about the ones most relevant for your healthy retail program)

Have you or other store staff received training or would be interested in learning more about ...

- How to display and where to place **healthy**¹ foods and beverages
- How to promote **healthy**¹ foods and beverages using signs and labels
- How to promote **healthy**¹ foods/beverages using price-related strategies
- Stocking **healthy**¹ items
- Food handling and safety
- Produce handling
- Customer relations
- Other: _____

10. (optional) [Trade promotion practices¹⁸].

How do vendors and suppliers influence where their products are placed and how they are promoted?

Do certain companies stock your shelves on a regular basis?

11. (optional) [Food waste and recovery¹⁹]

We have a few questions about what happens to the excess food you are unable to sell. This information will also help us plan with you what kinds of changes to the store we can make in this next year.

a) What do you do with extra food or beverages that you are unable to sell? (check all that apply)

- throw it in the trash
- compost it
- donate it to a charitable agency or community organization
- give it to customers that I know struggle to have enough food
- leave it on the street for someone to eat
- other: _____

b) What types of food do you find are most likely to go to waste?

- | | |
|---|--|
| <input type="checkbox"/> fresh fruits | <input type="checkbox"/> frozen desserts |
| <input type="checkbox"/> fresh vegetables | <input type="checkbox"/> chips |
| <input type="checkbox"/> meats | <input type="checkbox"/> candy |
| <input type="checkbox"/> dairy (milk, cheese) | <input type="checkbox"/> prepared foods |
| <input type="checkbox"/> breads, cereals, tortillas | <input type="checkbox"/> other: _____ |

c) If you had to guess, about how much money do you think you lose in food that goes to waste?

\$_____ each day/ week/ month (choose and circle one) don't know didn't want to answer

COVID-19 Impacts & General Comments:

1) What kinds of changes has the store made due to the COVID-19 pandemic?

No significant change due to Covid (the store has been able to maintain activities or has made changes unrelated to Covid)

The following has changed:

The store has had to stop or discontinue certain activities -- please describe:

The store is now working on new activities that they wouldn't have previously – please describe:

Other? Describe:

2) Any other comments about the store, clarifications, additional detail, etc.?