

HOW TO COMPLETE STATISTICS SURVEY

FOODSHARE

In this Presentation:

THREE PARTS to the Monthly Statistics Survey

- Contact Information
- Survey Data
- Hours and Days of Distribution

CONTACT INFO

FOODSHARE Monthly Agency Statistics

General Information and Demographics

CONTACT INFORMATION

FIVE DIGIT Agency Reference Number

* 1. Contact Information

Organization Name

Your Name

Your Title

City or Town

ZIP/Postal Code

Your Email Address

Phone Number

* 2. Agency Reference Number

FOODSHARE Monthly Agency Statistics

Changes to Organizational Staff?

It is important that we have accurate staff contact information for your organization. Please advise us if any of the following have changed:

(The titles at your organization may be slightly different.)

Executive Director
Program Managers
Pantry Managers
Kitchen Managers
Food Safety Contact
Accounts Payable Contact
Online Ordering Contacts
Warehouse "Shoppers"

If you have ANY changes among the staff that have a relationship with Foodshare, we need to know about it.

* 3. Has there been any personnel changes to the roles listed above, at your organization since you last reported?

- No
 Yes

FOODSHARE Monthly Agency Statistics

Staff changes at my Organization

Enter NAMES of new staff. There is a place at bottom for "other".

Titles may not match exactly.

4. If there has been a personnel change(s) to the roles listed below, please tell us the name of the new person(s). (The titles listed below may not exactly match the titles you use in your organization.)

Executive Director

Program Manager

Pantry Manager

Kitchen Manager

Food Safety Contact

Accounts Payable
Contact

Online Ordering
Contact

Warehouse
"Shoppers"

Other (not listed)

5. Please list the ***email addresses*** of these personnel changes.

Executive Director

Program Manager

Pantry Manager

Kitchen Manager

Food Safety Contact

Accounts Payable
Contact

Online Ordering
Contact

Warehouse
"Shoppers"

Other (not listed)

Enter EMAIL
ADDRESSES
of new staff.
There is a
place at
bottom for
"other".

Titles may not
match
exactly.

MONTHLY STATISTICS

FOODSHARE Monthly Agency Statistics

Unduplicated Individuals Served

Definitions

- REPORT MONTH
- UNDUPLICATED
- TOOLS (Optional)

Definitions:

Report Month: The month for which you are reporting.

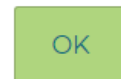
Unduplicated: An actual count of individuals who are receiving or have received services. Each individual is counted one time in the month, regardless of how many times they receive services.

Pantries: If you are using Foodshare's **Statistics Log Tool**, the answer to these questions can be found on the tab labeled "**YTD People Totals**".

Meal Programs: It is recommended that you use the **Soup Kitchen Sign In Form** to collect this information at each meal.

All fields must contain a numerical entry. You may enter "0" where applicable.

Select the Month
for which you are
reporting.



* 4. Report Month

Total number of
UNDUPLICATED Individuals
Served

Enter **WHOLE** numbers only.

Total number of **MEALS**
DISTRIBUTED (from all
sources of food).

Use whole numbers only.

5. Individuals served this month (Unduplicated):

Number of
Unduplicated **Adults**

Number of
Unduplicated
Children

Number of
Unduplicated
Seniors

* 6. Total Number of Meals you Distributed this month:

Do you distribute CT-NAP products?



"We distribute CT-NAP Product"



CT- NAP statistics section



"We do NOT distribute CT-NAP Product"



final section- Hours and Days of Distribution.

* 7. CT NAP Statistics

- We distribute CT-NAP Product
- We do NOT distribute CT-NAP Product

CT- NAP MONTHLY STATISTICS

When doing the actual survey, you will only see this section if you answered YES to the last question.

If you do not distribute CT-NAP, you can skip to slide 17 of this training.

FOODSHARE Monthly Agency Statistics

CTNAP Statistics

From information received NEW this month on NEW **CT-NAP Eligibility forms**, please enter the following information.

Only participant information that is **NEW** in the Calendar Month for which you are reporting is entered.

Question 11 is asking you to break down the number of NEW CT-NAP Participants by **Age**.

Question 12 is asking you to break down the number of NEW CT-NAP Participants by **Gender**.

Question 13 is asking you to break down the number of NEW CT-NAP Participants by **Ethnicity**.

Pantries: If you are using Foodshare's **Statistics Log Tool** as a sign in sheet, this information has been pre-calculated for you on the tab labeled "**YTD CTNAP Totals**".

Meal Programs: It is recommended that you use the **Soup Kitchen Sign In Form** to collect this information at each meal.

All fields must contain a numerical entry. You may enter "0" where applicable.

* 8. Age Group Count of NEW CT-NAP Participants in this Report Month

Number of New
Participants that
are **Adults** (Age 18-
59)

Number of New
Participants that
are **Children** (Age 0-
17)

Number of New
Participants that
are **Seniors** (Age
60+)

**Number of NEW
APPLICANTS that month
in each AGE GROUP**

PREV

NEXT

* 9. Gender Count of NEW CT-NAP Participants in this Report Month.

Number of New
Participants that are
Males

Number of New
Participants that are
Females

**Number of NEW
APPLICANTS that month in
by GENDER**

PREV

NEXT

**Number of
NEW
APPLICANTS
that month
by
ETHNICITY**

* 10. Race/Ethnicity Count of NEW CT NAP Participants in this Report Month.

Number of New Participants that identify as **Black**

Number of new Participants that identify as **White**

Number of New Participants that identify as **Hispanic**

Number of New Participants that identify as **Asian Pacific Islander**

Total number of New Participants that identify as **Other.**

**HOURS and
DAYS of
DISTRIBUTION**

**Has there been any
change to your
Hours of Operation?**



**YES:
Advance to
next
screen to
update
hours.**

**NO:
Advance to
final
screen.**

* 11. Has there been any change in your hours of operation?

- NO, there has been no change in our hours of operation.
- YES, our hours of operation have changed since we reported last month.

FOODSHARE Monthly Agency Statistics

Changes to Hours of Operation

Pantry Hours of Operation: The days and hours in which people can receive groceries from your pantry. *Do not include other operational hours such as volunteer times, prep times, etc.*

Meal Program Hours of Operation: The days and hours in which people can receive a meal from your kitchen. *Do not include other operational hours such as volunteer times, prep times, etc.*

Please indicate if your Hours of Operation are not on a weekly basis. *(Example: If you are only open for dinner from 5-7 pm on the first Tuesday of each month you would write: "5-7 pm dinner on the first Tuesday of each month".)*



Definitions:

Foodshare wants to know the hours that you are open for grocery distribution or a meal.

* 12. Please enter your current hours of operation for each day of the week.

Monday

Tuesday

Wednesday

Thursday

Friday

Saturday

Sunday

If there have been changes, please update by entering here.

Example:

Monday
Friday

Second and Fourth Mondays 1-3 pm.
Every Friday 7-9 pm

Thank you! This completes the survey. You may leave a comment below if desired.

OK

13. Comments or explanations

**Please use the comments section to explain anything unusual or outside of the norm for a regular month.
(Example: "We were closed for the second week of January due to leaking roof.")**

Contact information

Paula Siebers

*Food Strategy and Network
Capacity Manager*

psiebers@foodshare.org

860-856-4323

Sarah Hill

Network Capacity Coordinator

sehill@foodshare.org

860-856-4347