Provision 2 (P2) Feasibility Worksheet

To use the chart, write the numbers (amounts and percentages) that apply to your CE in the open spaces under the descriptions. For more detailed instructions, use the directions sheet that follows the worksheet.

Contracting Entity (CE):	Meal Type:							
CE ID #:	Date:							
Section 1								
A. Program Participation Info	rmation (Use int	formation from most	recent October.)					
1—Meal Program Participant T	otal Enrollmen	t						
	umber Reduce Price Enrollme	1	Number Paid Enrollment	=	Number Total Enrollment			
2—Percentage of Enrollment P	articipation							
Free Number Free Enrollment	÷	Number Total Enrollment	=	Percentage ¹	Free Enrollment			
Reduced-Price								
Number Reduced-Price Enrollment	÷	Number Total Enrollment	=		Reduced-Price			
Paid								
Number Paid Enrollment	÷	Number Total Enrollment	=	Percentage ¹	Paid Enrollment			
3—Number of Reimbursable Meals Served by Category and Total Enrollment								
Number Free Reimbursable Meals + R Served	Number eimbursable N Reduced-Prie		Number imbursable Mea Paid		Total Number mbursable Meals Served			
Total Claimed Days of Service for the Month								
Number of Free Reimbursable Meals Served								

¹ For all percentages, carry out the decimal place to 6 digits (i.e., 1.000000). This will ensure the greatest accuracy in determining the feasibility of moving to Provision 2 Status. For this process, leaving the percentage is decimal form will be the most useful.

4—Percentage ¹ of Reimbursable Meals Served by Category and Total Enrollment								
Number Free Reim Meals Serve		Total	Number Reimburs Meals Served	sable	+ Percent	age ¹ Meals Served Free		
Number Reimbursa Reduced-Pri	•	Total	Number Reimburs Meals Served	sable		age ¹ Meals Served educed-Price		
Number Reimbursa Paid	ble Meals ÷	Total	Number Reimburg Meals Served	sable	+ Percent	age ¹ Meals Served Paid		
5—Average Daily Par	ticipation (from A	ccuclai	m Daily Record)					
Number Free Reimbursable ÷ Meals Served	Total Number of Claimed Days of Service	=	Average Daily Participation Free	* *	Total Student Enrollment	 % Participation Free 		
Number of Reimbursable Meals Reduced-Price	Total Number of Claimed Days of Service	=	Average Daily Participation Reduced-Price	<u>.</u>	Total Student Enrollment	 % Participation Reduced-Price 		
Number Reimbursable ÷ Meals Paid	Total Number of Claimed Days of Service	=	Average Daily Participation Paid	÷.	Total Student Enrollment	 % Participation Paid 		
Total Number Reimbursable ÷ Meals Served	Total Number Claimed Days of Service	=	Average Daily Participation	÷	Total Student Enrollment	= % Participation		

B. Annual Income from Reimbursable Meals (Use information from most recent October.)								
Current Reimbursement								
	Monthly Amount Federal Reimbursement for Lunch			Cash Received from Paid Program Participants			y Income Service	
Monthly I	ncome		Number	Months		Estima	ted Total	
Monthly Income Reimbursable Meals			Number Months Program Operates			 Yearly Income 		
Cash Receive Program Pa		х		Months Operates	=	Estimated Yearly Paid Income		
Projected Reimbursen	nent							
Estimated Total Yearly Income – Estimated Yearly Paid Income = Income from Paid Program Participants							Paid Program	
Section 2								
Possible Percentage of Increase Chart Circle the current participation percentage/s that reflects the school's current nutrition program participation for the meal type data reported on this form [School Breakfast Program (SBP) or National School Lunch Program (NSLP)].								
SBP	V (Drok E)		Aiddle Sebeel/I	unior High (C. Q)	-	Lligh Coh	al (0, 12)	
Elementary (PreK–5) Current % Projected %			Middle School/Junior High (6–8) Current % Projected %			High Scho Current %	Projected %	
Participation	Increase		articipation	Increase		Participation	Increase	
10%–20%	26%	_	20%–30%	10%		15%-25%	12%	
20%–30%	20%	-	30%–40%	8%	_	25%–35%	8	
30%–40%	15%	_	40%–50%	7%		35%–40%	5%	
40%–50%	10%	_	50%–60%			—	—	
50%-60%	5%	-	60%–70% 4%			—	—	
60%-70%	2%		70%–80%	2%		—	—	
NSLP Elementary (PreK-5) Middle School/Junior High (6–8) High School (9–12)								
Current % Projected % Participation Increase			Current %Projected %ParticipationIncrease			Current % Participation	Projected % Increase	
60%–70%	3%		45%–55%	22%		30%–40%	33%	
70%–80%	4%	4	55%–65%	15%		40%–50%	25%	
80%–90%	2%		65%–75%	13%		50%–60%	15%	
90%–95%	1%		75%–85%	8%		60%–70%	10%	
_	_		85%–95%	3%		70%-80%	5%	

	Section 3							
-	Questions to Guide Determination of P2 Feasibility Based on the information revealed by completing Section 1 of this form, consider the following questions:							
1.	How would the loss of paid participant income impact the CEs monthly and yearly budgets?							
	Would the possible increased cost for Provision 2 be offset by reduced staff time needed to submit for traditional program claim reimbursement through TX-UNPS?							
	Are there other funds available to help offset any increased cost? Support from other service organizations or agencies?							
2.	What is the percentage of students who are likely to be eligible for free or reduced-price meals who have not submitted applications?							
	If these children were added to the current number of free and reduced-priced participants, would the increase in reimbursement help to offset the cost of providing free meals to all children?							
3.	Are there other possible benefits that the school will see as a result of adopting Provision 2?							
	(NOTE : Some reports find that schools have found that Provision 2 can result in healthier children, increased academic achievement, and stronger school-family- community connections.)							

Directions Provision 2 (P2) Feasibility Worksheet

Purpose

This worksheet can be used as a quick assessment to help a contracting entity (CE) determine the financial feasibility of adopting Provision 2 (P2) for counting and claiming. This form can be used at any time during the school year; however, school districts need to remember that the application for P2 status is due May 15.

Use This Form				
Frequency	Optional, prior to applying for P2 status; P2 applications are due by May 15			
Required Form Format	None			
Record Retention	Apply local rules			

To Prepare

Before starting to complete this form, collect all of the

counting and claiming data from the most current October. A separate form should be used for breakfast and lunch.

Directions for Completing This Form

General Information

- **Contracting Entity (CE):** Record the name of the school district in the designated space.
- **CE ID#:** Record the CE's ID number in the designated space.
- **Date:** Record the date the form is completed in the designated space.
- Meal Type: Record the meal type in the designated space.

(**NOTE:** Complete a separate form for lunch and breakfast.)

Section I

Program Participation Information

1–Meal Program Participant Total Enrollment

Number Free Enrollment:

• Record the number students who qualify for free meals.

Number Reduced-Price Enrollment:

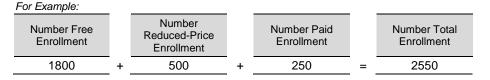
• Record the number of students who qualify for reduced-price meals.

Number Paid Enrollment:

• Record the number of students who do not quality for either free or reduced-priced meals.

Number Total Enrollment:

• Record the sum of the enrollment numbers entered on this line to get the total number of students who were served a reimbursable meal during the most recent October.



2–Percentage of Enrollment Participation

Use the amounts in the previous step make the following calculations—carry the decimal to the 6^{th} place.

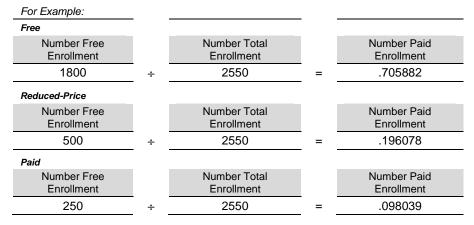
Free:

• Divide the Number Free Enrollment by the Number Total Enrollment.

Reduced-Price:

• Divide the Number Reduced-Price Enrollment by the Number Total Enrollment. **Paid**:

• Divide the Number Paid Enrollment by the Number Total Enrollment.



3–Number of <u>Reimbursable</u> Meals Served by Category and Total Enrollment

• Use the amounts in the previous step to make the following calculations—carry the decimal to the 6th place.

Number of Free Reimbursable Meals Served:

 Record the number of free reimbursable meals claimed during the most recent October.

Number of Reduced-Price Reimbursable Meals Served:

 Record the number of reduced-price reimbursable meals claimed during the most recent October.

Number of Paid Reimbursable Meals Served:

 Record the number of paid reimbursable meals claimed during the most recent October.

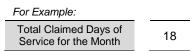
Total Number of Reimbursable Meals Served:

 Total the amounts of free, reduced-price, and paid meals served to determine the total number of reimbursable meals served during the most recent October.



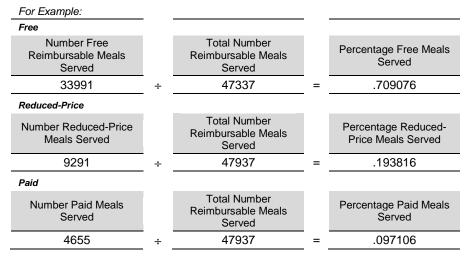
Total Claimed Days Service for the Month:

- Record the number of days of service for the most recent October in the box.



4–Percentage Reimbursable Meals Served by Category and Total Enrollment

• Use the numbers/amounts in the previous steps to make the following calculations carry the decimal to the 6th place.



5-Average Daily Participation (from Accuclaim Daily Record for most recent October)

 Use the numbers/amounts in the previous steps to make the following calculations carry the decimal to the 6th place.

-		•						
For Example:								
Paid							_	
Number Free Reimbursable Meals Served		Total Number Claimed Days Service		Average Daily Participation Free		Total Student Enrollment		% Free Participation
[33991	÷	19	=	1789]	÷	[2550]	=	.701568
Reduced-Price	-		-				-	
Number Reduced- Price Meals Served		Total Number Claimed Days Service		Average Daily Participation Free		Total Student Enrollment		% Reduced- Price Participation
[9291	÷	19	=	489]	÷	[2550]	=	.191765
Paid								
Number Paid Meals Served		Total Number Claimed Days Service		Average Daily Participation Free		Total Student Enrollment		% Paid Participation
[4655	÷	19	=	245]	÷	[2550]	=	.096078
Total All Categories	•		-				-	
Total Number Reimbursable Meals Served		Total Number Claimed Days Service		Average Daily Participation Free		Total Student Enrollment		% Total All Category Participation
[47937	÷	19	=	2523]	÷	[2550]	=	.989411
			•					

A. Annual Income for Reimbursable Meals (Use information from the most recent October)

Monthly Amount of Federal Reimbursement:

• Record the amount of Federal Reimbursement for meal service.

Cash Received from Paid Program Participants:

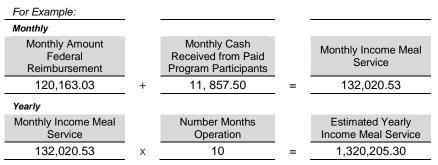
• Record the amount received from providing paid meals. Include both reimbursable meals as well as a la carte meals.

Monthly Income Meal Service:

• Sum the monthly amount of federal reimbursement and the cash received from pair participants.

Estimated Yearly Income Meal Service:

• Multiply the monthly income meal service from all sources by the number of months in operation.



Section 2

Possible Percentage of Increase Chart

In determining the feasibility of adopting Provision 2, CEs should consider the impact of increased student participation. Some of that increase may be additional free or reduced-price eligible participants, or it may be participants who would have paid for their meal under a traditional process. While any participation increase can be influenced by a wide array of contextual factors, active recruitment efforts are likely to lead to greater increases in participation.

(**NOTE**: There are demographic reports that can be helpful in determining the estimated enrollment by each of the eligible categories.)

On the Chart

- Circle the projected increase percentage for the grade level/s that will be affected by adopting Provision 2.
- Apply this information to the questions in Section 3.

Section 3

Questions to Guide Determination of P2Feasibility

• Use the space provided to answer each of the questions that are intended to determine the feasibility of adopting P2. It may be helpful to answer the questions with representatives from the nutrition program, the district, the schools, and the finance department.

(**NOTE**: Determining the feasibility for adopting Provision 2 requires careful consideration, CEs may benefit from technical assistance from TDA or their regional Education Service Center nutrition specialist.)