



Nebraska Team Nutrition



CACFP Culinary Training Knowledge & Practice Assessment

CONSENT DISCLAIMER: The purpose of this survey is to assess childcare providers' knowledge regarding culinary skills. This survey may help to identify areas of improvement with regard to trainings and technical assistance for CACFP providers. By providing information and completing the survey, you are acknowledging that you agree to and give consent for your information and answers to be analyzed and anonymously reported on as part of the CACFP Education evaluation. The survey should take about 20 minutes to complete, and you are not obligated to take this survey. For further questions or concerns, please feel free to contact any of the following investigators: Zainab Rida, zainab.rida@nebraska.gov, 402-471-4620 –or– Christy Burger, cburger2@unl.edu, 402-472-6850. Contact UNL IRB at 402-472-6965 with questions about your rights in participating in research.

Please fill in the blanks as instructed

1. What are the first two letters of your first name?
 (e.g. MA)
2. What are the last two letters of your last name?
 (e.g., EE)
- 3.. What day of the month were you born?
 (e.g., 17)
4. What is the zip code of your program?
 (e.g., 68508)
5. What is the highest degree you have completed?
 - No diploma
 - High school diploma or GED
 - Some college, but no degree
 - 2-year degree (e.g. A.A., A.S., L.P.N.)
 - 4-year degree (e.g. B.A., B.S., R.N.)
 - Graduate degree (e.g. M.A., M.D., Ph.D.)
6. How many years of experience do you have in your current position?
- 7.. How old are you?

This section asks about your child care program's characteristics.

8. Which of the following is your program?
 (Pick 1)
 - Non Profit
 - For Profit
9. Which of the following is your program?
 (Pick 1)
 - Family Child Care Home
 - Center-based facility
10. What is your role in the CACFP program?
 (Check all that apply)
 - Director
 - Manager
 - Child Care Provider
 - Cook
 - Sponsor
 - Office assistant
 - Other (please specify)
11. How many people does your program serve in each age group? Please enter a number, including zero (0) if none, on each line.

a. 0-11 months	<input type="text"/>
b. 12-23 months	<input type="text"/>
c. 24-35 months	<input type="text"/>
d. 3-5 years	<input type="text"/>
e. 6-12 years	<input type="text"/>
f. 13-18 years	<input type="text"/>
g. Older than 18 years	<input type="text"/>

12. **Are the meal(s) your program serves...**
- | | Yes | No |
|---|-----------------------|-----------------------|
| a. Prepared on-site? | <input type="radio"/> | <input type="radio"/> |
| b. Vended? | <input type="radio"/> | <input type="radio"/> |
| c. Neither prepared on-site nor vended? | <input type="radio"/> | <input type="radio"/> |

13. **Does your facility provide each of the following?**
- | | Yes | No |
|------------------|-----------------------|-----------------------|
| a. Breakfast | <input type="radio"/> | <input type="radio"/> |
| b. AM Snack | <input type="radio"/> | <input type="radio"/> |
| c. Lunch | <input type="radio"/> | <input type="radio"/> |
| d. PM Snack | <input type="radio"/> | <input type="radio"/> |
| e. Dinner/Supper | <input type="radio"/> | <input type="radio"/> |

Please choose the BEST answer for each of the following:

14. **If a recipe calls for 4 ounces of ground beef, the best tool for measurement would be a...**
- Scale
 - Dry cup
 - Liquid cup
 - Serving utensils
15. **What is the correct kitchen tool used to measure 4 ounces of lemon juice?**
- Scale
 - Liquid cup
 - Bowl
 - Tablespoon

16. **What term describes the number of servings in a recipe?**
- Portion
 - Yield
 - Scale
 - Segment

17. **What term describes cutting vegetables into small squares?**
- Mince
 - Dice
 - Slice
 - Julienne

18. **What term is used to describe cutting vegetables into flat pieces?**
- Mince
 - Dice
 - Chop
 - Slice

19. **What term is used to describe cutting vegetables into very small pieces?**
- Mince
 - Dice
 - Chop
 - Slice

20. **What term is used to describe cutting vegetables into long skinny strips?**
- Mince
 - Dice
 - Chop
 - Julienne

21. **Please rate your level of agreement on the following factors related to food menu selection on a rating scale of 1-5, where 1 is "not at all important" and 5 is "very important"**

	Not at all important	Not very important	Neutral	Somewhat important	Very important
a. Child's preference	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
b. Parent's request	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
c. CACFP meal requirement	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
d. Cost	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
e. Convenience	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
f. Seasonal availability	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
g. Nutrition content	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

22. Based on your experience with foodservice, please indicate your level of confidence with each item below on a rating scale of 1-5, where 1 is “not at all confident” and 5 is “very confident”

	Not at all confident	Not very confident	Neutral	Somewhat confident	Very confident
a. Cooking from scratch	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
b. Following a recipe	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
c. Trying a new recipe	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
d. Doubling a recipe	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
e. Using proper knife skills	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
f. Using herbs and spices	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
	Not at all confident	Not very confident	Neutral	Somewhat confident	Very confident
g. Preparing legumes and dry beans/peas	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
h. Preparing whole grains	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
i. Preparing fruits	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
j. Preparing vegetables	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
k. Making sauces and salad dressing from scratch	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
l. Peeling, chopping, and dicing vegetables	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
	Not at all confident	Not very confident	Neutral	Somewhat confident	Very confident
m. Mixing and stirring foods	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
n. Preparing or cooking with limited time	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
o. Using leftover food to create a new meal	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
p. Preparing meals that meet the updated USDA/CACFP meal pattern	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
q. Preparing and cooking a healthy meal with only a few ingredients	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
r. Cooking in large quantities efficiently	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

If you have any feedback or additional comments, please leave them here:

Thank you!