

Retail Food Assessment

For Assessors – Please identify yourself to the store/restaurant manager/staff as a DOHMH, and provide the following information: Hello, I work for the Department of Health and we're doing an assessment of every food store and restaurant in the area to learn about food availability in the community. [Provide the store staff with a DPHO brochure] **We are not here to do a health inspection.** If you don't mind, I'd like to take a few minutes and record the prices of some food, and some of the posters you have up. If you don't want us to do the assessment in your store, just let me know, and we'll leave. Thank you very much for your time.

Assessor Name(s):	Date:
Store Name:	Time assessment began <i>(after permission)</i> :
Address (get from license posted in store):	Days/Hours of operation:

Cross Streets:

Store Status: Open Closed Refused

1. Is this establishment a restaurant?

Yes → Type of food?: (pizza, Chinese, Jamaican, etc.) _____ → If fast food, name _____
 → Is there a waiter/waitress? Yes No → Plexiglass at cash register? Yes No
End here. Assessment completed.

No → Go to question 2.

2. Food Vendor Type

Small specialty store → Type: (e.g., butcher, bakery, etc.) _____
 Small variety store (e.g., bodega, deli) ; with hot grill? Yes No
 99 Cent Store
 Large variety store (e.g., independent supermarket, grocer)
 Large chain variety store (e.g., C-Town, Associated) → Name of chain: _____
 Independent drug store/convenience store (e.g., family owned)
 Chain drug store/convenience store (e.g., CVS, Duane Reade) → Name of chain: _____
 Mobile vendors (street- or car-based) Specify: Street (cart) Car (trunk)
 Gas station convenience store
 Other: _____

3. (For all food vendors) Does the food vendor have plexiglass at the cash register? Yes No

3a. (For supermarkets) Is there plexiglass holding items near the cash register? Yes No

4a. Does the store sell fresh fruits and vegetables?

Yes *(If yes, please fill out the following below)* No *(If no, skip to next question)*

Item	Available?	Price: circle piece or pound, as applies (use cheapest price for item)	Near register? Outside? <i>"Near" is within 5 feet of the register</i>
Apple	<input type="checkbox"/> Yes <input type="checkbox"/> No	\$ ____ per piece \$ ____ pound \$___per bag #__per dollar	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No

<i>Item</i>	<i>Available?</i>	<i>Price: circle piece or pound, as applies (use cheapest price for item)</i>	<i>Near register? "Near" is within 5 feet of the register</i>	<i>Outside?</i>
Banana	<input type="checkbox"/> Yes <input type="checkbox"/> No	\$ ____ per piece \$ ____ pound \$___per bag #___per dollar	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Orange	<input type="checkbox"/> Yes <input type="checkbox"/> No	\$ ____ per piece \$ ____ pound \$___per bag #___per dollar	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Sweet Potatoes/ Yams	<input type="checkbox"/> Yes <input type="checkbox"/> No	\$ ____ per piece \$ ____ pound \$___per bag #___per dollar	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Tomato	<input type="checkbox"/> Yes <input type="checkbox"/> No	\$ ____ per piece \$ ____ pound \$___per bag #___per dollar	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Carrot	<input type="checkbox"/> Yes <input type="checkbox"/> No	\$ ____ per piece \$ ____ pound \$___per bag #___per dollar	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Leafy Green Vegetables (e.g., spinach, kale, romaine lettuce; not iceberg) Types: ----- ----- -----	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No	\$ ____ per piece \$ ____ pound \$___per bag #___per dollar \$ ____ per piece \$ ____ pound \$___per bag #___per dollar \$ ____ per piece \$ ____ pound \$___per bag #___per dollar	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No

4b. Does the store sell frozen vegetables? (Look for Green veggies like spinach, broccoli or Beans like lima, string)

Yes No

5. Does the store sell dairy products?

Yes (If yes, please fill out the following below) No (If no, skip to next question) For Milk: exclude flavored, include soy

<i>Type</i>	<i>Available?</i>	<i>Price (use cheapest price for item)</i>	<i>Near register?</i>
Skim/Fat Free Milk	<input type="checkbox"/> Yes <input type="checkbox"/> No	\$ ____ per gallon \$ ____ per half gallon \$ ____ per quart \$ ___per pint or smaller	<input type="checkbox"/> Yes <input type="checkbox"/> No
1% Milk	<input type="checkbox"/> Yes <input type="checkbox"/> No	\$ ____ per gallon \$ ____ per half gallon \$ ____ per quart \$ ___per pint or smaller	<input type="checkbox"/> Yes <input type="checkbox"/> No
2% Milk/ soy lite	<input type="checkbox"/> Yes <input type="checkbox"/> No	\$ ____ per gallon \$ ____ per half gallon \$ ____ per quart \$ ___per pint or smaller	<input type="checkbox"/> Yes <input type="checkbox"/> No

Type	Available?	Price (use cheapest price for item)	Near register?
Whole Milk/ reg soy	<input type="checkbox"/> Yes <input type="checkbox"/> No	\$ ____ per gallon \$ _____ per half gallon \$ _____ per quart \$ ___per pint or smaller Of the milk, is whole milk: Less than 25% <input type="checkbox"/> 25-50% <input type="checkbox"/> 50-75% <input type="checkbox"/> 75-100% <input type="checkbox"/>	<input type="checkbox"/> Yes <input type="checkbox"/> No
Low-fat yogurt, cottage cheese	<input type="checkbox"/> Yes <input type="checkbox"/> No	\$ ____ per container \$_____ per pound	

6. Does the store sell beverages?

Yes (If yes, please fill out the following below) No (If no, skip to next question)

Type	Available?	About how much space does it take in the refrigerated case for beverages?
100% Juice	<input type="checkbox"/> Yes <input type="checkbox"/> No	Less than 25% <input type="checkbox"/> 25-50% <input type="checkbox"/> 50-75% <input type="checkbox"/> 75-100% <input type="checkbox"/>
Juice Drink (less than 100%); malta drink	<input type="checkbox"/> Yes <input type="checkbox"/> No	Less than 25% <input type="checkbox"/> 25-50% <input type="checkbox"/> 50-75% <input type="checkbox"/> 75-100% <input type="checkbox"/>
Soda	<input type="checkbox"/> Yes <input type="checkbox"/> No	Less than 25% <input type="checkbox"/> 25-50% <input type="checkbox"/> 50-75% <input type="checkbox"/> 75-100% <input type="checkbox"/>
Diet Soda	<input type="checkbox"/> Yes <input type="checkbox"/> No	Less than 25% <input type="checkbox"/> 25-50% <input type="checkbox"/> 50-75% <input type="checkbox"/> 75-100% <input type="checkbox"/>
Quarter Water/Quarter Drinks	<input type="checkbox"/> Yes <input type="checkbox"/> No	Less than 25% <input type="checkbox"/> 25-50% <input type="checkbox"/> 50-75% <input type="checkbox"/> 75-100% <input type="checkbox"/>
Water	<input type="checkbox"/> Yes <input type="checkbox"/> No	Less than 25% <input type="checkbox"/> 25-50% <input type="checkbox"/> 50-75% <input type="checkbox"/> 75-100% <input type="checkbox"/>
Alcohol (e.g., beer, wine coolers, malt liquor)	<input type="checkbox"/> Yes <input type="checkbox"/> No	Less than 25% <input type="checkbox"/> 25-50% <input type="checkbox"/> 50-75% <input type="checkbox"/> 75-100% <input type="checkbox"/>

7. Does the store sell whole wheat or whole grain bread?

Yes (If yes, please fill out the following below) No (If no, skip to next question)

Type	Price (use cheapest price for item)	Near register?
Whole-wheat or whole-grain bread	\$ ____ per loaf \$ _____ per pound	<input type="checkbox"/> Yes <input type="checkbox"/> No

8. Does the store sell snack food?

Yes (If yes, please fill out the following below) No (If no, skip to next question)

Type	Individual Serving/Snack Size Available?	Near register?	Price (use cheapest price for item)
Candy/Chocolate	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	\$ ____ per item
Cookies/Muffins/Cakes/Sweets (e.g. Hostess, Little Debbie)	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	\$ ____ per item
Regular chips (nacho, corn, potato)	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	\$ ____ per item
Special chips (baked, lowfat, pretzels, soy)	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	\$ ____ per item

9. Is advertising displayed (in the store window)?

Yes (If yes, please fill out the following below) No

Food	Advertising? <input type="checkbox"/> Yes <input type="checkbox"/> No	Brands:
Deli Meats	Advertising? <input type="checkbox"/> Yes <input type="checkbox"/> No	Brands:
Drinks: non-alcoholic, e.g., soda, juice, malta drink	Advertising? <input type="checkbox"/> Yes <input type="checkbox"/> No	Brands:
Drinks: alcoholic, e.g., beer, wine coolers, etc.	Advertising? <input type="checkbox"/> Yes <input type="checkbox"/> No	Brands:
Cigarettes	Advertising? <input type="checkbox"/> Yes <input type="checkbox"/> No	Brands:
Other products	Advertising? <input type="checkbox"/> Yes <input type="checkbox"/> No	Brands:

10. Are there health promotion messages or ads?		
<input type="checkbox"/> Yes <input type="checkbox"/> No	Message (verbatim):	Sponsor:
	Message (verbatim):	Sponsor:

Time assessment ends: _____

INTERVIEWER NOTES:
