Nutrition Incentive Hub

Firm-level Reporting Instructions for <u>FIRMS</u> of GusNIP Grantees

Version 1
July 2020

This document provides instructions, frequently asked questions, and examples related to firm-level quarterly and monthly reporting for GusNIP grantees and their firms.

Contents

Overview of Reporting Platform

To facilitate firm-level data collection for the Nutrition Incentive Hub (the Hub) we have established online forms using the Smartsheet platform. The goal of these forms is to provide grantees with easy-to-use reporting tools and to provide clear, concise reporting to USDA, Congress, stakeholders, and the public. In addition, as grantees complete these forms, their data will be accessible in multiple formats for their own reporting needs (e.g., raw data, aggregated data, dashboards with data visualization, etc.).

What is Smartsheet?

Smartsheet is the software tool the Hub is currently using to collect and review key firm-level metrics of GusNIP grantees. As a **FIRM**, you will be interfacing with Smartsheet in the following ways.

Online Forms   You will use online forms to submit your monthly and quarterly reports. These forms can be completed on a **computer, smartphone, or tablet**.

Update Requests   Your grantee representative (Charles at Fair Food Network) may choose to send you an Update Request via email through Smartsheet. If you receive an Update Request, this means there is something specific within a recent report you submitted that needs to be updated or changed. Be sure to read your Update Request email carefully and respond as prompted.

Point of Contact

If you have questions related to your reporting, please contact your grantee representative.
Name: Charles Walker
Email: cwalker@fairfoodnetwork.org
Phone: 313-605-9109

Reports and Deadlines

Below are the descriptions for two main reports that you will use monthly and quarterly: (1) firm-level Quarterly Descriptive report; and (2) firm-level Monthly Metrics report. The items that were selected for these reports are informed by the 2018 Farm Bill, the GusNIP Request for Applications (USDA requirements), and formative research conducted by the Hub.

Firm-Level Quarterly Descriptive Report

This report collects **descriptive information** of firms operating GusNIP-funded SNAP Incentive (SI) or Produce Prescription (PPR) programs.

Each firm must **submit one report, per quarterly reporting period**. Multiple reporting periods may not be combined into the same online form.

While many responses will remain the same from one reporting period to the next, several key metrics may change (e.g., financial instrument used for incentive redemption, redemption availability, operating

hours, number of FV vendors). As such, firms must **complete the full report each quarter**, providing updated information where appropriate.

Quarterly reporting periods align with the GusNIP grant cycle and are outlined below.

Reporting Period	Due Date
Oct 1 – Dec 31	January 8
Jan 1 – March 31	April 8
April 1 – June 30	July 8
July 1 – Sept 30	October 8

Firm-Level Monthly Metrics Report

This report collects **monthly metrics** of firms operating GusNIP-funded SNAP Incentive (SI) or Produce Prescription (PPR) programs.

Each firm must **submit one report, per monthly reporting period**. Multiple reporting periods may not be combined into the same online form.

Monthly reporting periods and deadlines are outlined below.

Reporting Period	Due Date
January 1-31	February 8
February 1-28 or 29	March 8
March 1-31	April 8
April 1-30	May 8
May 1-31	June 8
June 1-30	July 8
July 1-31	August 8
August 1-31	September 8
September 1-30	October 8
October 1-31	November 8
November 1-30	December 8
December 1-31	January 8

Firm Classifications for Quarterly Report

Brick and Mortar

Wholesale Club or Warehouse Store - A membership retail/wholesale hybrid with a varied selection and limited variety of products presented in a warehouse-type environment. These stores averaging 60% to 70% general merchandise/health and beauty and a grocery line dedicated to large sizes and bulk sales. Memberships include both business accounts and consumer accounts (e.g., Sam's Club, Costco, BJ's).

Supercenter - Supercenters offer a wide variety of food and non-food merchandise. These stores devote as much as 40% of the space to grocery items (e.g., Walmart Supercenters, Super Target, Meijer, Kroger Marketplace stores).

Large Chain Traditional Supermarket/Grocery Store - Publicly traded companies that operate stores, often under multiple banners and with centralized decision-making (e.g., Safeway, Kroger, Albertsons).

Medium Chain Traditional Supermarket/Grocery Store - Companies that operate multiple stores across large areas and multiple states. May be family-owned/privately held or have Employee Stock Ownership Plans (e.g., Harps, Coburns, Lowes, Hy-Vee, Publix, Houchens, Wegman's, Food City, HEB, ShopRite).

Independent Traditional Supermarket/Grocery Store - Full-service grocery stores that are independently owned or licensed. These stores often operate locally or in limited geographic areas (e.g., Piggly Wiggly, IGA, Wright's Market, ValuMarkets).

Limited-Assortment Supermarket - A low-priced grocery store that offers a limited assortment of center-store and perishable items (fewer than 2,000 items) (e.g., Aldi, Trader Joe's, Save-A-Lot, Lidl).

Fresh Format - Distinct from traditional supermarkets and traditional natural food stores, fresh stores emphasize perishables and offer center-store assortments that differ from those of traditional retailers—especially in the areas of ethnic, natural, and organic produce (e.g., Whole Foods, The Fresh Market, Fresh Thyme, Sprouts, Natural Grocers).

Co-op Grocery Store – A member-owned grocery store where the decisions regarding the production and distribution of its food are determined by its members. These stores can range in size and typically offer a large selection of natural foods.

Dollar Store - A small store format that traditionally sells staples and "knickknacks", and have, in some cases, shifted to selling food and consumable items at aggressive price points that account for at least 20%, and up to 66%, of their volume (e.g., Dollar General, Dollar Tree, Family Dollar).

Other Small Grocery or Convenience Store - A small grocery (also known as corner store, bodega, "mom-and-pop," mini-mart, country store, etc.) that carries a limited selection of staples and other convenience goods, and is often found in residential areas. These stores generate approximately up to $1 million in business annually. This store type could also be a chain store that sells gasoline.

Drug Store - A prescription-based drug store that generates 20% or more of its total sales from consumables, general merchandise, and seasonal items. This channel includes major chain drug stores (e.g., Walgreens, CVS) but does not include stores/chains that almost exclusively (e.g., The Medicine Shoppe).

E-Commerce - Food and consumable products ordered using the internet via any device, regardless of the method of payment or fulfillment. This classification includes Amazon and Peapod as well as the E-Commerce business generated by traditional Brick & Mortar retailers (e.g., Coborns (Coborns Delivers),

ShopRite (ShopRite from Home, ShopRite Delivers), Walmart). The other non-traditional retail segments above include their E-Commerce business.

Submitting, Viewing, and Editing Reports

How do I submit my reports?

- Click on the link provided to you (by email) or below for the report you plan to submit (quarterly or monthly). The link below will open an online form. There is no login or password needed. Answer all questions on the form.
  Monthly Metrics Reporting Form
  Quarterly Descriptive Reporting Form
- Once you have completed the form and reviewed your responses for accuracy, click the box titled "*Send me copy of my responses*" at the bottom of the page. Enter your email address. A copy of your report will be sent to the email address you provide.
- Click the blue Submit button to send in your report. Your report will not be submitted until you click this button.

How do I know if my report went through?

After you click the blue Submit button, a pop-up box will appear with a confirmation message saying, "Thank you for submitting your report."

What should I do with the email that shows a copy of my responses?

- Carefully review your responses and make sure no errors were made. If you discover errors, make corrections as soon as possible by filling out and submitting a new report/form.
- Save this email for your records and to reference later if needed.

What happens if I do not receive the email with a copy of my responses?

If you do not receive an email with your responses but you did see the confirmation message ("Thank you for submitting your report") then you likely entered your email address incorrectly or it has been sent to your spam folder. First check your spam emails. The email will be sent from Smartsheet Forms (forms@smartsheet.com). Subject line = "Confirmation – [Report Name]." **Do not reply to this email.** It is automatically generated.

If you still cannot find the email, contact your grantee representative to confirm whether your report was received. If it was, your grantee representative can send your report responses to you via email. If your report was not received, you will be asked to resubmit.

Can I view or download information from past reports?

Yes. You can view responses from your individual past reports in the automated emails sent to you after submitting each report.

How do I correct errors on my report?

The best time to correct errors is **before** you submit your report. You can scroll up to review your responses and make corrections.

If you discover errors after submitting your report, there are two ways to make corrections.

- Fill out and resubmit a new form/report. When you do this, be sure to add a note in the comments section indicating "*This is a corrected report. Please delete previous report for [grantee or firm name] [reporting period].*"
- You can also contact your grantee representative directly to let them know of your error. They can make edits after reports have been submitted.

Examples of Online Reporting Forms

Provided on the following pages are screenshots of several online forms. Conditional logic is built into the forms allowing relevant questions to appear based on specific answers.

Firm-Level Descriptive Quarterly Report (SNAP Incentive Programs)

SI Firm-Level Descriptive Quarterly Report

This report collects descriptive information of firms operating GusNIP-funded SNAP Incentive (SI) programs.

Each grantee must submit one report per firm, per quarterly reporting period. Multiple reporting periods may not be combined into the same online form.

While many responses will remain the same from one reporting period to the next, several key metrics may change (e.g., financial instrument used for incentive redemption, redemption availability, operating hours, number of FV vendors). As such, grantees (or firms) must complete the full report each quarter, providing updated information where appropriate.

Quarterly reporting periods align with the GusNIP grant cycle and are outlined below.

Sept 1 - Nov 30 (Due Dec 31)
Dec 1 - Feb 29 (Due March 31)
March 1 - May 31 (Due June 30)
June 1 - Aug 31 (Due Sept 30)

Grantees have the flexibility to either complete firm-level reports themselves or delegate this responsibility for firms to complete reports directly. Grantees are responsible for ensuring all data is complete, accurate, verified, and submitted on time.

QUARTERLY DESCRIPTIVE REPORT

Firm Name *
Select your firm from the list below. *Double check for accuracy.*

Select ▾

Year *
Select the year for this reporting period. (If this the Dec-Feb report, select the year for December.)

◯ 2019
◉ 2020
◯ 2021
◯ 2022

Reporting Period *
Select the reporting period for this report.

◯ Sept 1 - Nov 30
◯ Dec 1 - Feb 29
◉ March 1 - May 31
◯ June 1 - Aug 31

example answers

Months Program Operated (Mar-May) *

During this reporting period, which month(s) was the incentive program operational at this firm? Select all that apply.

If program did not operate, select "Did Not Operate."

| March ✕ | April ✕ | May ✕ | | ✕ ▼ |

ABOUT THIS FIRM (i.e., site)

If program was operational, questions about the location and hours of operation of your SNAP incentive program will appear below.

Firm Type *

Select type of firm from the list below.

○ Brick and Mortar

○ Farm Direct

Firm Operating Address *

Provide the full address of the physical location for your firm during this reporting period.

For mobile markets or mobile clinics, enter all addresses for this reporting period, separating addresses by semi-colon (;).

Enter using this format: XXX Street Name, City, State, Zip

[ ]

Year-round or Seasonal *

When does this firm operate? Select one of the options below.

○ Year-round

○ Seasonal

Days of Operation *

How many days per week did you operate the incentive program during this reporting period? Select one of the options below.

○ 1 day per week

○ 2-3 days per week

○ 4-6 days per week

○ Daily

Total Operating Days *

Enter the total number of days this firm operated the incentive program during this reporting period.

Example:

• If you operated the program 7 days/week for the full three months of this reporting period, your total operating days would be approximately 90.

• If you operated the program 1 day/week for just two of the months during this reporting period, your total operating days would be approximately 8.

[ ]

Firm Type *

Select type of firm from the list below.

◉ Brick and Mortar

○ Farm Direct

Brick and Mortar *

Select category option from the list below.

○ Wholesale Club or Warehouse Store

○ Supercenter

○ Large Chain Traditional Supermarket/Grocery

○ Medium Chain Traditional Supermarket/Grocery

○ Independent Traditional Supermarket/Grocery

○ Limited-Assortment Supermarket

○ Fresh Format

○ Co-op Grocery Store

○ Dollar Store

○ Other Small Grocery or Convenience Store

○ Drug Store

○ E-Commerce

Firm Type *

Select type of firm from the list below.

○ Brick and Mortar

◉ Farm Direct

Farm Direct *

Select category option from the list below.

○ Farmers Market

○ Farm Stand

○ Mobile Market

○ On-site Clinic Market

○ CSA

Days Incentive Earned *

Were customers able to EARN the SNAP incentive each day the program was operating at this firm, during this reporting period?

Most firms will answer "Yes." But there are some situations when earning the incentive is only available on certain days. In this case, you will answer "No."

◯ Yes
◯ No

Days Incentive Redeemed *

Were customers able to REDEEM the SNAP incentive each day the program was operating at this firm, during this reporting period?

Again, most firms will answer "Yes." But there are some situations when redeeming the incentive is only available on certain days. In this case, you will answer "No."

◯ Yes
◯ No

Operating Hours (average per day) *
Enter the average number of hours this firm was open each day during this reporting period.

Enter number only. (e.g, 5, 8, 10, etc.)

[   ]

SNAP INCENTIVE

If program was operational, questions about the SNAP incentive will appear below.

How is the SNAP incentive issued to participants/customers at this firm? *
Briefly describe how and where the SNAP incentive is ISSUED or provided to each customer at this firm. See examples below and provide your answer in a similar format.

Examples:

•   A SNAP customer goes to the farmers market manager office, swipes his/her EBT card at the EBT machine. The market manager issues the $ amount swiped in SNAP tokens (e.g., $20 in $2 increment SNAP tokens). The market manager also issues the same $ amount in incentive tokens (e.g., $20 in $2 increment incentive tokens).

•   A SNAP customer purchases groceries using his/her EBT card. The EBT card swipe activates the SNAP match and the incentive amount shows up on the bottom of the receipt (e.g., like a coupon) to be used for future FV purchases.

[   ]

How is the SNAP incentive redeemed by participants/customers at this firm? *
Briefly describe how and where the SNAP incentive is REDEEMED by customers at this firm. See examples below and provide your answer in a similar format.

Examples:

•   SNAP customers redeem tokens with individual vendors at the farmer's market

•   SNAP customers use their EBT card to purchase groceries and automatically receive 50% off their eligible FV purchases.

[   ]

Financial Instrument for Incentives *
In what form are SNAP incentives provided to customers at this firm? Select all that apply.

[Select   ▼]

Token
Paper
EBT Card
Loyalty account - unique ID / phone number
Loyalty account - plastic card
Loyalty account - mobile application
Discount
Other (specify below)

All SNAP eligible items
All fresh F&V
Canned F&V (no added salt/sugar)
Frozen F&V (no added salt/sugar)
Dried F&V (no added salt/sugar)
Plants that produce herbs and F&V
Seeds that produce herbs and F&V
Only state or regionally grown F&V
Only organic grown F&V
Other (specify below)

SNAP Purchases/Products Eligible to Trigger SNAP Incentive *
What are the allowable SNAP purchases that trigger incentives at this firm? (i.e., What can a customer purchase with their EBT card to earn the incentive?)

Select all that apply.

Select	▼

Fruit and Vegetable Products Eligible for Incentives *
What fruit and vegetable products are eligible for incentives at this firm? (e.g., What can a customer purchase with their incentive?)

Select all that apply.

Select	▼

All fresh F&V
Canned F&V (no added salt/sugar)
Frozen F&V (no added salt/sugar)
Dried F&V (no added salt/sugar)
Plants that produce herbs and F&V
Seeds that produce herbs and F&V
Only state or regionally grown F&V
Only organic grown F&V
Other (specify below)

Incentive-level Ratio *
Select the ratio for SNAP dollars to SNAP incentive for this firm during this reporting period. If this firm has more than one, select all that apply. *Double check for accuracy.*

Example: For every $1 spent on SNAP, customer will earn $1 in incentive, up to $20, daily. In this scenario, the RATIO is 1:1.

Select	▼

Incentive Frequency *
How often can a customer earn the incentive at this firm? Select one from the options below.

Example: For every $1 spent on SNAP, customer will earn $1 in incentive, up to $20, daily. In this scenario, the FREQUENCY is daily.

○ Daily
○ Weekly
○ Monthly
○ Other (specify below)

Incentive-level Cap (Max) *
What is your maximum incentive amount based on the frequency you entered above? Enter number only. (e.g., 5, 10, 25, etc.)

If this firm does not have cap, enter "no cap."

Example: For every $1 spent on SNAP, customer will earn $1 in incentive, up to $20, daily. In this scenario, the CAP is 20.

Maximum Redeemable (Participant or Household)
Is the maximum set per participant or per household?

○ per participant
○ per household

ADDITIONAL PROGRAMS

If program was operational, questions related to additional programs operating at this firm will appear below.

Nutrition Assistance Benefits Programs *
During this reporting period, did this firm accept any other nutrition assistance benefits? Select all that apply.

Descriptions:

- WIC = Special Supplemental Nutrition Program for Women, Infants, and Children
- FMNP = Farmers Market Nutrition Program (one time vouchers for WIC recipients to use on farm fresh produce)
- FDPIR = Food Distribution Program on Indian Reservations
- CSFP = Commodity Supplemental Food Program

Select ▼

Nutrition Education Activities *
During this reporting period, did this firm offer nutrition education activities for incentive participants? This could have been done independently or collaboration with a community partner. Select all that apply.

Select ▼

Auxiliary Services *
Did this firm offer any auxiliary services for incentive participants during this reporting period? Select all that apply.

Select ▼

CONTACT INFORMATION

Contact Name *
Enter your first and last name.

[   ]

Contact Email *
Enter your email address. *Double check for accuracy.*

[   ]

Contact Phone Number *
Enter your phone number. *Double check for accuracy.*
(e.g., 555-555-5555)

[   ]

Questions/Comments
Please include any questions or clarifications you have related to this report.

NOTE: If submitting a corrected report, enter "This is a corrected report. Delete previous report for [firm] [reporting period]."

[   ]

FINAL STEPS BEFORE SUBMITTING

1. Review the information you provided above and check for accuracy. Make corrections if needed.

2. Click the box below titled "Send me a copy of my responses."

3. Type your email address in the box that appears. Double check to ensure you entered it correctly. (After submitting your report, a copy of your responses will be sent automatically to the email you provide. Save for your records.)

4. Click the blue "Submit" button to send in your report.

☑ Send me a copy of my responses

Email address

[   ]
🛑 This field is required

[Submit]

Firm-Level Monthly Metrics Report

This report collects monthly metrics of firms operating GusNIP-funded SNAP Incentive (SI) programs.

Each grantee must submit one report per firm, per monthly reporting period. Multiple reporting periods may not be combined into the same online form.

Grantees may delegate these reports to be completed directly by their firms. Grantees are responsible for ensuring all data is complete, accurate, verified, and on time.

Monthly reports are due by the end of the following month (e.g., February 1-29 report is due by March 31).

MONTHLY METRICS REPORT

Firm Name *
Select your firm from the list below. *Double check for accuracy.*

Select ▼

Select the month for this reporting period. *
The data you provide should reflect the full month (e.g., June 1-30), unless your program only operated during a portion of the month.

*Double check for accuracy."

Select ▼

Select the year for this reporting period. *

Select ▼

SNAP/EBT

In this section, you'll be providing data related to SNAP/EBT at your firm.

Dollar Value ($) of SNAP PURCHASED *
Enter the total dollar amount of SNAP/EBT purchases for this reporting period.

Some firms may refer to this as the dollar amount of SNAP ISSUED or DISTRIBUTED.

Dollar Value ($) of SNAP REDEEMED *

Enter the total dollar amount of SNAP redeemed for this reporting period.

For some firms, this will be the same as SNAP Purchases (i.e., sites where customers purchase their groceries with their EBT card at a register).

For other firms, this may be different than SNAP Purchases (i.e., sites that distribute SNAP tokens or vouchers to customers which can be redeemed later.)

```
[                                        ]
```

Number (#) of SNAP Transactions *

Enter the total number of SNAP/EBT transactions for this reporting period.

For farm direct sites that issue SNAP tokens to customers, use the number of transactions where you swiped an EBT card (i.e., distributed SNAP tokens).

```
[                                        ]
```

INCENTIVES

In this section, you'll be providing data related to incentives at your firm.

Dollar Value ($) of Incentives ISSUED *

Enter the total dollar amount of incentives issued for this reporting period.

```
[                                        ]
```

Dollar Value ($) of Incentives REDEEMED *

Enter the total dollar amount of incentives redeemed for this reporting period.

For some firms, this may be the same as Incentives Issued (i.e., sites where the incentive is automatically processed and redeemed).

```
[                                        ]
```

Tracking Transactions Using Incentives *

Firms are asked to provide the number of unique transactions using incentives. (e.g., Ten $1 vouchers or tokens redeemed at point-of-sale = 1 transaction)
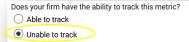
Does your firm have the ability to track this metric?

- (●) Able to track
- ( ) Unable to track

Number (#) of Transactions Using Incentives *

Enter the total number of transactions using incentives for this reporting period.

```
[                                        ]
```

Does your firm have the ability to track this metric?
- ( ) Able to track
- (●) Unable to track

Reason Unable to Track Transactions Using Incent.
Please provide a brief explanation as to why you are unable to track this metric.

In future monthly reports, you may enter "see previous response" in this field.

```
[                                        ]
```

PARTICIPANTS / CUSTOMERS

In this section, you'll be providing data related to participants at your firm.

Tracking Eligible Participants *

Firms are asked to provide the number of eligible participants (i.e., unique SNAP shoppers).

Does your firm have the ability to track this metric?
- ● Able to track
- ○ Unable to track

Number (#) of Eligible Participants *
Enter the total number of eligible participants (i.e.: unique SNAP shoppers) for this ⟨...⟩ period.

Does your firm have the ability to track this metric?
- ○ Able to track
- ● Unable to track

Reason Unable to Track Eligible Participants *
Please provide an explanation as to why you are unable to track this metric.

In future monthly reports, you may enter "see previous response" in this field.

Tracking Unique Incentive Customers *

Firms are asked to provide the number of unique incentive customers. This refers to individuals using SNAP incentives to purchase fruits and vegetables. (This is not the same as new or returning customers.)

Does your firm have the ability to track this metric?
- ● Able to Track
- ○ Unable to Track

Number (#) of Unique Incentive Customers *
Enter the number of unique incentive customers for this reporting period.

Does your firm have the ability to track this metric?
- ○ Able to Track
- ● Unable to Track

Unable to Track Unique Incentive Customers *
Please provide a brief explanation as to why you are unable to track this metric.

In future monthly reports, you may enter "see previous response" in this field.

SOURCE DOCUMENTS

This section is provided for firms who have been instructed to submit source data (e.g., batch reports, POS reports, customer transaction logs, etc.)

File Upload

Drag and drop files here or browse files

COMMENTS / STORIES

Data-related Comments or Explanations (optional)
Please provide a brief explanation for any data anomaly (e.g., a spike or dip).

If submitting a corrected report, please enter "This is a corrected report. Delete previous report for [firm] [reporting period].

Stories/Highlights (optional)
Please provide any stories, highlights, earned-media, or comments that relate to your program. If possible, include a name and contact information for anyone who would be willing to talk about their experience (customers, vendors, physicians, etc.).

CONTACT INFORMATION

Enter your first and last name. *

Preferred Method of Contact

Select ▼

FINAL STEPS BEFORE SUBMITTING

1. Review the information you provided above and check for accuracy. Make corrections if needed.

2. Click the box below titled "Send me a copy of my responses."

3. Type your email address in the box that appears. Double check to ensure you entered it correctly. (After submitting your report, a copy of your responses will be sent automatically to the email you provide. Save for your records.)

4. Click the blue "Submit" button to send in your report.

☐ Send me a copy of my responses

Submit