

FY26 Food as Medicine Grant Program Performance Reporting Requirements Guideline

A. Programmatic Reporting:

The Grantee is expected to submit programmatic reports for each of the reporting intervals outlined below. The reports are intended to support grant accountability, program monitoring, and continuous improvement, and are not designed to evaluate clinical effectiveness or conduct research. The OFSR will provide grantees with a link to the reporting platform. All grantees are responsible to submit their reports on or before the report due dates listed in this document in Section C. Reporting Schedule.

Definition of terms for the purposes of this grant program:

In order to support grantees with accurate reporting, this document defines the terms used in this guideline and grantees will be expected to report their work as defined by the terms below:

- **Referral:** A referral within the context of this grant is defined as: the formal process of connecting a client to another service provider, program, or agency for support. A referral is considered valid when there is clear communication between the referring and receiving party, and the client receives additional assistance as a result of the referral.

Each programmatic report must include the **required metrics** outlined in the table below.

Section	Metrics	Data Type
Participation	Healthcare office name and primary address	Text
	Food assistance location address(es) (if different)	Text
	Total number of incoming referrals to the Food as Medicine provider from the healthcare provider site	Number
	Describe the types of diet-related conditions treated through the program (including diabetes, pre-diabetes, obesity, hypertension, other) and specific examples of how the program has helped participants manage these conditions.	Text
Educational Programming	Total number of enrolled households that participated in 75% or more nutrition education sessions (unduplicated)	Number
	Total number of nutrition education sessions held during the performance period	Number
	Total number of food security screenings conducted	Number
	Total number of children ages 0-18 (unduplicated counts):	Number

<p>Food Security Screening¹ & Referrals</p>	<ul style="list-style-type: none"> ● Screened for diet-related disease (such as diabetes, prediabetes, obesity, or hypertension) ● Screened for food insecurity ● Screening positive for food insecurity ● Referred for food assistance ● Referred to food as medicine program (if applicable) ● Enrolled in the Food as Medicine program ● Completing the intended enrollment period ● Referred to ongoing food assistance or nutrition benefit supports at program exit 	
	<p>Total number of households with children 0-18 (unduplicated counts):</p> <ul style="list-style-type: none"> ● Screened for diet-related disease (such as diabetes, prediabetes, obesity, or hypertension) ● Screened for food insecurity ● Screening positive for food insecurity ● Referred for food assistance ● Referred to food as medicine program (if applicable) ● Enrolled in the Food as Medicine program ● Completing the intended enrollment period ● Referred to ongoing food assistance or nutrition benefit supports at program exit 	<p>Number</p>
<p>Food Security Screening Zip Codes²</p>	<p>Total number of households served, grouped by household zip codes (unduplicated counts)</p>	<p>Number</p>
<p>Service Format</p>	<p>Service Format (include all that apply)</p> <ul style="list-style-type: none"> ● Choice Style Market or Pantry - (total pounds) ● Pre-Packaged Box/Bag - (total pounds) ● Pre-Packaged Box/Bag - (total Box/Packages) ● Gift card / voucher - (total amount) 	<p>Number</p>

	<ul style="list-style-type: none"> • Other 	
Documentation	Upload photos and materials that document program activities; provide a brief caption or description for each upload.	File Upload

¹ For each metric in this section related to screening, please report on the total number of food security screenings that occurred **in connection with** the FY26 Food as Medicine grant-funded activities.

² Please report on the total number of households that screened positive for food insecurity and were referred to receive **either** Food as Medicine and/or other food assistance. This includes referrals to all forms of food-related support—not only Food as Medicine, but also any other services that involve providing food to identified households.

The reports may also include the **recommended metrics** outlined in the table below.

Section	Metrics	Data Type
Demographic Data	<i>Data collected from participants receiving an intervention through the program:</i> <ul style="list-style-type: none"> • Languages spoken in the household of participants served (provided by program participants) 	Multi-select
	<i>Data collected from participants receiving an intervention through the program:</i> <ul style="list-style-type: none"> • Total Number of Individuals Served, by Race/Ethnicity (provided by program participants) 	Number
Success Story	Share photos and/or success stories related to program activities for OFSR public use (e.g. on social media or in communications)	File upload

Evaluation Surveys

Grantees are also **required to administer** pre- and post-program surveys to evaluate client feedback on key outcomes, including fruit and vegetable consumption, overall health, and healthcare utilization. These surveys are anonymous and voluntary for clients; a list of the evaluation surveys will be provided to successful applicants by OFSR at the beginning of the grant performance period. At the conclusion of the grant period, each grantee will receive a summary of the survey responses provided by clients.

The OFSR will provide grantees with a multi-lingual web-based version of the survey, customized with a unique link and QR code for each organization. Grantees should encourage clients to

complete the pre-survey prior to the first instance of receiving services, and the post-survey at the program’s conclusion.

Client participation in the surveys is **entirely optional and must not be a condition for receiving services**. Grantees should clearly communicate this to clients. Any specific needs or additional support related to survey administration should be outlined by the applicant in this section of the application.

B. Financial Reporting:

The Grantee must submit a mid-cycle and end-of-cycle financial report following the timeline outlined below. All reports should be submitted through the reporting platform provided by OFSR on or before the report deadline listed in Section C. Reporting Schedule.

The Financial Reports should include receipts, proof-of-payment, and/or other relevant proof of project costs incurred; these costs should align with the final submitted budget and should indicate the amount of the total project budget spent during the relevant Performance Period.

For the purposes of these reporting requirements:

- “Staffing Costs” refer to compensation for paid staff supporting food distribution activities, including program coordination, logistics, or administration. Volunteer-based organizations may report zero staffing costs.
- “Food Purchases” refers to funds spent only on food items distributed to enrolled Food as Medicine households, including produce, proteins, grains, culturally preferred items. These purchases can be from farms, wholesalers, or retailers.
- “Operational Costs” include the cost of logistics that make distribution possible, such as fuel, vehicle maintenance, refrigerated storage, warehouse rent, packaging, pallets, food-safety supplies, etc.
- “Indirect Costs” include shared administrative expenses that support overall organizational operations but are not tied to a specific program, such as accounting, insurance, IT systems, or general office expenses.

Additionally, the Financial Reports should include a narrative description of the use of grant funds for activities and expenditures related to the project, and should include the financial metrics outlined in the “Budget and Sourcing” table below:

Section	Metrics	Data Type
Budget and Sourcing Metrics (Required)	• Total amount (\$) of the grant budget spent to date.	Number
	• Total amount (\$) of the grant budget spent to date on: <ul style="list-style-type: none"> ○ Staffing Costs ○ Food Purchases ○ Other Operating Costs ○ Indirect Costs 	Number
	• Narrative commentary on budget variations and the amount spent	Text
	• Total value of food purchased directly from a Mid-Atlantic Region farm.	Number (Percent)

	<ul style="list-style-type: none"> Total value of food purchased from a Mid-Atlantic-based retailer, wholesaler, and/or distributor that source from Mid-Atlantic Region farms. 	Number (Percent)
Financial Document Uploads (Required)	<ul style="list-style-type: none"> Receipts, Proof-of-Payment, and/or other relevant proof of project costs incurred 	File Upload

C. Reporting Schedule

The grant reporting periods and corresponding due dates are outlined in the table below. Grantees should reference this table to ensure timely and accurate submission of reports.

Report Type	Reporting Period	Due Date
Mid-Cycle Performance & Financial Report	05/01/2026 - 11/02/2026	12/02/2026
End-Cycle Performance & Financial Report	05/01/2026 - 04/30/2027	05/31/2027