

SCHOOLS QUESTIONNAIRE

- This questionnaire is designed to explore the facilities, initiatives and general environment relating to food, physical activity and health in the schools participating in the WAVES study. It is really important that this questionnaire is completed by all schools who have agreed to take part in the study, and we would greatly appreciate it if you could take the time to complete this questionnaire for us.
- Most questions require ticking a box , but some ask for further comments or information. We would be grateful if you could answer *all* of the questions. You may need to consult with other members of staff in order to answer some of the questions.
- Your answers will remain confidential and you will not be identifiable as an individual in any reports arising from this questionnaire.
- If you have any *school policies* relating to diet, physical activity or health in general, we would be most grateful if you could attach a copy of the relevant policies to your completed questionnaire. For each policy you attach, it would be helpful if you could indicate when it was originally written and, if it has been reviewed and updated, when this took place.
- Please *return* the completed questionnaire ASAP to: XXXX
- If you have any questions please contact XXXX

Section 1: Healthy eating in school

1. School name _____

Your name _____

Your role within the school _____

2. Which of the following does your school's policy relating to food cover? (please tick all that apply)

School does not have a policy relating to food

Curricular content

Extra-curricular initiatives

Participation in national initiatives (e.g. School Fruit & Vegetable scheme, Healthy Schools initiative)

Provision of food in school

Consumption of food in school

School events (e.g. fetes)

School educational visits

Rewards to children

Children's birthdays

Pastoral care and welfare (e.g. Free school lunches)

Other (please specify) _____

If your school does not have a policy relating to food, please indicate the main reason for this

If your school has a policy relating to food, how effective do you believe the policy has been in promoting healthy eating?

Very effective Moderately effective Has had no effect

Please attach a copy of any school policies relating to food to this questionnaire, indicating on the front when it was originally written and the dates of any revisions

3. Please rate the following statement by ticking one of the boxes below *"Healthy eating is high on our list of priorities in this school"*

Strongly agree Agree Neutral Disagree Strongly disagree

4. How is healthy eating actively promoted in your school? (please tick all that apply)

- | | |
|-------------------------------------------------------------------|-------------------------------------------------------|
| <input type="checkbox"/> Not actively promoted | <input type="checkbox"/> Curricular sessions |
| <input type="checkbox"/> Lunchtime/after school activities | <input type="checkbox"/> Activities involving parents |
| <input type="checkbox"/> School educational visits | <input type="checkbox"/> School garden |
| <input type="checkbox"/> Outside visitors (e.g. school dietician) | <input type="checkbox"/> School cookery club |
| <input type="checkbox"/> Tuck shops | <input type="checkbox"/> Breakfast clubs |
| <input type="checkbox"/> Health weeks | <input type="checkbox"/> Posters/media |
| <input type="checkbox"/> Other (please specify) _____ | |

If you have ticked any of the above, please give some details on what your school offers in relation to each of the items that have been ticked

If healthy eating is not actively promoted please indicate the main reason for this

5. In your opinion, to what extent do you think that healthy eating is supported by:

	<i>Strongly supported</i>	<i>Supported</i>	<i>Weakly supported</i>	<i>Not supported</i>
School governors	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Senior Leadership Team	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Teachers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Teaching support staff	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Catering & lunchtime supervision staff	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other school staff	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
School Council	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Pupils	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Parents	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

6. What break time food provision does your school offer? (please tick all that apply)

- Tuck shop
- Vending machine
- Provision of free fruit and vegetables for children age 7+
- No provision other than fruit for 4-6 year olds
- Other (please specify) _____

If you have ticked 'tuck shop' or 'vending machine' above, please give examples of the sorts of foods available from these

7. Does your school provide water throughout the day to pupils? Yes No

If "Yes" please describe how water is provided to pupils

8. How is lunch provided in schools? (please tick all that apply)

- Hot school meals
- Cold food provided in school (e.g. sandwiches)
- Pupils can bring lunch from home (approximately what proportion do so? _____%)
- Pupils can go home for lunch (approximately what proportion do so? _____%)
- Other (please specify) _____

9. For school provided meals do pupils have a choice of what they can eat (other than provisions for dietary requirements?) Yes No

If "Yes", please give details of this (eg. Choice of 2 main courses, and 2 puddings)

10. Do you have a contract with a school meals provider? Yes No

If "Yes":

Please state the name of the provider: _____

If "No", what is / are the reason(s)? (please tick all that apply)

Control over what food is provided Practical issues

Economic constraints Poor previous experience

Other (Please specify) _____

11. How are school meals provided?

.. Brought in ready prepared Prepared/Cooked on site

.. Other (please specify) _____

• 12. Does the school have any income from school food provision? Yes No

If "Yes", how important is this as a source of funds for the school?

Very important Important

Limited importance Not at all important

13. Does the school receive sponsorship from any industry related to food or drink?

Yes

No

If "Yes" please describe _____

14. Does your school have a breakfast club?

Yes

No

If "Yes":

Is this available for all pupils?

Yes

No

If "No" please give details of the breakfast club availability

Is there a fee to attend the breakfast club?

Yes No

If "Yes" please give details _____

What proportion of children in the school attend the breakfast club on an average day?

0-20% 21-40% 41-60%

61-80% 81-100%

15. Does your school have an after-school club providing childcare for working parents?

Yes No

If "Yes", what proportion of children in the school attend this on an average day?

0-20% 21-40% 41-60%

61-80% 81-100%

What food is offered at the after-school club?

None

Cold snacks (please give examples) _____

Warm food (please give examples) _____

Drinks (please give examples) _____

Other (please give examples) _____

Section 2: Physical activity in school

16. Which of the following does your school's policy relating to physical activity cover? (please tick all that apply)

- School does not have a policy relating to physical activity
- Having a designated physical activity co-ordinator
- Raising the profile of physical activity
- Playtime activity
- Training of staff with regard to physical activity
- Curricular physical activity
- Out of school hours activities
- School sports partnerships and community links
- Physical activities for staff
- Other (please specify) _____

If your school does not have a policy relating to physical activity, please indicate the main reason for this

If your school has a policy relating to physical activity, how effective has the policy been in increasing participation in physical activity in the school?

- Very effective Moderately effective Has had no effect

Please attach a copy of any school policies relating to physical activity to this questionnaire indicating on the front when it was originally written and the dates of any revisions

17. Please rate the following statement by ticking one of the boxes below *"Physical activity is high on our list of priorities in this school"*

Strongly agree Agree Neutral Disagree Strongly disagree

18. How is physical activity promoted in your school? (Please tick all that apply)

- | | |
|-------------------------------------------------------|---------------------------------------------------------------|
| <input type="checkbox"/> Not actively promoted | <input type="checkbox"/> Curricular sessions |
| <input type="checkbox"/> Posters/media | <input type="checkbox"/> Lunchtime activities |
| <input type="checkbox"/> After school activities | <input type="checkbox"/> Activities involving parents |
| <input type="checkbox"/> School educational visits | <input type="checkbox"/> School garden |
| <input type="checkbox"/> Health weeks | <input type="checkbox"/> Walk to school campaigns/initiatives |
| <input type="checkbox"/> Other (please specify) _____ | |

If you have ticked any of the above, please give some details on what your school offers in relation to each of the items that have been ticked

If physical activity is not promoted in your school please indicate the main reason for this

19. In your opinion, to what extent do you think promotion of physical activity is supported by:

	<i>Strongly supported</i>	<i>Supported</i>	<i>Weakly supported</i>	<i>Not supported</i>
School governors	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Senior Leadership Team	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Teachers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Teaching support staff	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Lunchtime supervision staff	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other school staff	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
School Council	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Pupils	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Parents	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

20. What is the total curriculum time (in minutes) allocated to physical education for pupils in each year group per week, and how much time do pupils actually spend being physically active during this allocated time (excluding changing time, time to arrive at venue etc.)?

Year group	Allocated curricular time per week for PE (minutes)	Actual time spent being physically active during PE sessions per week (minutes)
Reception		
Year 1		
Year 2		
Year 3		
Year 4		
Year 5		
Year 6		

21. In practice, how difficult is it to deliver the allocated amount of curricular physical education per week?

	<i>Very difficult</i>	<i>Difficult</i>	<i>Mostly okay</i>	<i>Never a problem</i>
Reception	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Year 1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Year 2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Year 3	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Year 4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Year 5	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Year 6	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

If you have answered **difficult or very difficult** for any of the year groups above, please give reasons for your answer:

22. Who teaches physical education in the school? (Please tick all that apply)

Specialist PE teacher

Teacher who is not a specialist in PE

Adult specialist from outside of the school

Other (please specify) _____

23. Which sports/physical activities shown below are included in the timetabled PE curriculum?

(please tick all that apply)

- | | |
|-------------------------------------------------------------------------|--------------------------------------------|
| <input type="checkbox"/> Team sports (e.g. football, netball) | <input type="checkbox"/> Aerobics/keep fit |
| <input type="checkbox"/> Dance | <input type="checkbox"/> Gymnastics |
| <input type="checkbox"/> Racquet sports (e.g. tennis, badminton) | <input type="checkbox"/> Swimming |
| <input type="checkbox"/> Athletics (e.g. running, jumping, field games) | |
| <input type="checkbox"/> Other (please specify) _____ | |

24. Please give the duration of break times and lunchtime in school:

Foundation: Morning break _____minutes
Lunchtime _____minutes
Afternoon break _____minutes

Key Stage 1: Morning break _____minutes
Lunchtime _____minutes
Afternoon break _____minutes

Key Stage 2: Morning break _____minutes
Lunchtime _____minutes
Afternoon break _____minutes

25. During which of the following does the school offer any structured physical activity sessions?
(please tick all that apply)

Before school starts

Morning break

Lunchtime

Afternoon break

At the start of morning lessons

At the start of afternoon lessons

Other (excluding timetabled PE)

During none of the above

Please give some details of the activities offered in relation to each of the boxes you have ticked above. Please indicate which year groups participate in each of the activities

If structured physical activity sessions in addition to timetabled PE are not offered in your school, please give the main reason for this

26. What facilities/equipment are available for physical activities during breaks and lunchtimes, and how often are they used? (please tick all that apply)

	<i>Not available</i>	<i>Available and used:</i>			
		<i>Always</i>	<i>Usually</i>	<i>Occasionally</i>	<i>Never</i>
Playground	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Playing field	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Hard court area (e.g. for tennis or basketball)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Playground games	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Permanent playground equipment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Portable play equipment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

27. For how many sports/physical activities does the school provide or have links to clubs? _____

How many of these clubs are provided by the school? _____

Please list the type of club provided by the school, the year group(s) it is on offer to, and whether it takes place at lunchtime or after school

Type of club	Year group(s) it is on offer to	Lunchtime or after school

28. Are there any transport services for pupils provided by the school? Yes No

If "Yes" what services are provided? (Please tick all that apply)

School bus/taxi

Supervised walking/walking bus

Supervised cycling

Other (please specify) _____

If "No", has your school tried any of the above, or considered them in the past?

Yes No

For each of the above that has been tried please indicate why they did not get implemented or were unsuccessful

Section 3: Other healthy lifestyle initiatives

29. Is your school part of the National Healthy Schools Programme? Yes No

If "Yes", how long has your school been part of this programme?

_____ years *If "No"*, is there a reason why the school has not become part of this programme?

30. Does the school offer any healthy lifestyle activities (e.g. healthy eating, physical activities)

to: (please tick all that apply)

Parents

Members of the local community

If you have ticked any of the above, please give details of activities offered:

31. Have there been any other school activities or initiatives that might contribute to a healthy lifestyle for children and their families in the last year? Yes No

If "Yes", please give details _____

32. Is the school planning to start any **new** such initiatives in the next 12 months?

Yes No

If "Yes", please give details _____

33. Is your school currently taking part in any other research studies related to health?

Yes No

If "Yes", please give details _____

34. In your opinion, to what extent is there room for improvement in relation to promoting **healthy eating** within each of the following areas in your school?

	<i>None</i>	<i>Little</i>	<i>Some</i>	<i>Substantial</i>
School curriculum	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Extracurricular activities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
School as medium for family education	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
School as medium for community education	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
School meal provision	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

35. In your opinion, to what extent is there room for improvement in relation to promoting *physical activity* within each of the following areas in your school?

	<i>None</i>	<i>Little</i>	<i>Some</i>	<i>Substantial</i>
School curriculum	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Extracurricular activities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
School as medium for family education	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
School as medium for community education	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
School sports/physical activity facilities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

36. Does the school support staff development with regard to encouraging healthy lifestyles for

children? Yes No

If "Yes", please give details of the available opportunities for staff development:

Thank you very much for taking part in the WAVES study and for taking the time to complete this questionnaire