



Dear Parents and Carers,

At Moorpark Junior School, we are committed to ensure each child leaves school as a well-balanced individual. We want all children to succeed and excel academically but also physically and emotionally. This questionnaire is centred on health and it will help us to use the information to ensure that we can provide the best education and experiences for a healthy lifestyle. We will be extremely pleased if you could fill out this questionnaire as honestly as possible because the outcomes will any be used for the benefit of your child. Please be assured that the information that we receive will be treated with the upmost respect and confidentiality.

The questionnaire also focuses upon e-Safety. E-safety is about the protection of children whilst they are using the internet and digital technologies to ensure they have safe and healthy experiences on-line. This includes: risk-taking and inappropriate behaviour by children and young people; risks and inappropriate behaviour by others to children and young people and illegal online activity.

Whilst our school strives to empower your children with the knowledge to stay safe, it is important that you have a good awareness of the risks and dangers yourself.

To make it more of a learning opportunity the questionnaire has been shared with the children and they have the extra home learning task this week to interview the adults at home.

Thank you for your continued support.

1. What year is your son/daughter in? 3 4 5 6

2. Child's name: _____

3. Your relationship to your child/children? Parent Carer Other

4. What does your child (or children) usually eat for lunch? _____

5. Which of these affects your choice on whether or not your child has a school meal?
 - a. Quality of food My child's preference Portion sizes
 - b. Whether they eat a main meal in the evening Range of menu choice
 - c. Cost Convenience

6. Are you aware in advance of our school menu choices for the day/week?
 - a. Yes No

7. Does your child have any eyesight problems not corrected with glasses?
 - a. Yes No

8. Does your child have any hearing problems not corrected with a hearing aid?
 - a. Yes No

9. In a typical week, how many physical activities does your child take part in outside of school?
 - a. 1-2 2-3 4+

10. What are these activities? _____

11. Are there any more afterschool clubs that you would like us to offer at Moorpark? If so, which ones? _____

12. Where would you say your child's fitness level is-
 - a. Very poor Poor Average Good Very good

13. And with regards to Q12, why do you think so?

14. Would you liked to be informed of your child's fitness level from fitness tests that we do at school?

a. Yes No

15. How does your child travel to school? _____

16. Do you, or anyone else that lives in your house smoke?

a. Yes No Prefer not to say

17. If yes, please tick,

a. Outside Inside prefer not to say

18. Does your son/daughter have access to the Internet at home?

a. Yes No

19. If Yes, what device(s) does your son/daughter use? (Tick as appropriate)

a. Xbox Playstation PC Laptop

b. Tablet Nintendo Wii Other _____

20. Does your son/daughter know how to use the privacy and security settings on these devices?

a. Yes No

21. Do you know how to use the privacy and security settings on these devices?

a. Yes No

22. Does your son/daughter have a mobile phone that can access the Internet?

a. Yes No

23. During the week at home, how long does your son/daughter spend on the Internet (in hours) each day?

a. 0 1 2 3 4 More

24. During the weekend, how long does your son/daughter spend on the Internet each day?

a. 0 1 2 3 4 More

25. Do you discuss safe use of the Internet with your son/daughter?

Yes No Don't know what to say

26. Do you discuss and set Internet rules? Yes No Don't know how to

27. Do you have an open door rule with your child that gives you access to their accounts?

Yes No Don't know what this means

28. Does your son/daughter use social networking?

- a. Facebook
- b. Twitter
- c. Instagram
- d. Snapchat
- e. YouTube

f. Other Please state any other

29. Do you use social networking? (If No move to next question)

- a. Facebook
- b. Twitter
- c. Instagram
- d. Snapchat
- e. YouTube

f. Other Please state any other

30. Do you know, and could you teach your son/daughter, the privacy and security settings that should be set on these social networks?

a. Yes No

31. Do you use any filtering or monitoring software on any of your son/daughter's devices?

a. Yes No Don't know what that is

32. If Yes, what do you use?

a. *State the name of the software*

33. Name at least 3 safety risks for children online? Can you name 6? If asked by your son/daughter, would you be able to explain clearly what they are?

34. If your son/daughter has a concern about anything online, does he/she know how to report it?

a. Yes No

35. If you have a concern about anything online, do you know how to report it?

a. Yes No

36. Does your son/daughter play online games?

a. Yes No

37. Do you understand what PEGI is?

a. Yes No

38. Would you like advice on any of the above?

a. Yes No

39. If Yes, what would you like advice on?

Many thanks for taking the time to complete our Spring 2016 Healthy Lifestyle questionnaire.