

Year 6 Questionnaire

Hello, we would like to invite you to complete this questionnaire, the aim is to identify any support and advice you may need. A member of the school health team may contact you and your parent /carer following completion of the questionnaire to offer support if needed.

Your Last Name (Surname)

Your First Name (Forename)

Any other names you have:

Date of Birth

Gender: Female (Girl) / Male (Boy) / unsure / prefer not to say

Your Present School

Your address (where you live)

Your postcode

Telephone number to contact your Parent/ Carer'

Your mobile Telephone number

Ethnic Group Asian / Black / Chinese / Mixed Race / White / Other

GENERAL HEALTH

1. Do you have a **disability**?

Yes

No

2. Do you have any of the following **health conditions**?

Asthma

Eczema

Epilepsy

Anaemia

Diabetes

Allergies

3. **Your eyesight** (when wearing glasses if you have them)

I don't have any problems reading the whiteboard or computer screen in school

I sometimes have problems reading the whiteboard or computer screen in school

I often have problems reading the white board or computer screen in school

I always have problems reading the white board or computer screen in school

4. **Do you have problems hearing?**

Yes

No

Yes, I wear a hearing aid

Yes, but I don't wear a hearing aid

5. Visiting the Dentist

- I can't remember when I last visited the dentist
- I last visited a dentist 1 or 2 years ago
- I last visited a dentist between 6 months and 12 months ago
- I have visited a dentist in the last 6 months

6. Cleaning teeth

- I always clean my teeth at least 2 times a day
- I clean my teeth 1 time each day
- I sometimes clean my teeth
- I hardly ever clean my teeth
- I don't have a toothbrush

7. Eating Fruit and Vegetables

- I do not eat any fruit or vegetables
- I eat 1 or 2 portions of fruit or veg a day
- I eat 3 or 4 portions of fruit or veg a day
- I eat 5 or more portions of fruit or veg a day

8. Eating breakfast

- I always eat breakfast
- I usually eat breakfast
- I sometimes eat breakfast
- I never eat breakfast

9. Drinking water on its own or with squash

- I drink 6-8 glasses of water a day
- I drink 4-5 glasses of water a day
- I drink 1-3 glasses of water a day
- I never drink water

10. Drinking soft sugary drinks e.g. Lucozade, Monster, Cola, Red Bull, fizzy drinks

- I never drink them
- I drink them once or twice a week
- I drink them once a day
- I drink them more than once a day

11. Physical activity out of lesson time (e.g. swimming, dancing, running, walking)

- I take part in physical activity out of lesson time more than 3 times a week
- I take part in physical activity out of lesson time once or twice a week
- I take part in physical activity out of lesson time less than once a week
- I never take part in physical activity out of lesson time

12. On a week day, how many hours Screen Time do you usually have sitting or lying down watching TV, DVD's and computer games?

- Less than 1 hour
- 1-2 hours
- 2-3 hours
- More than 3 hours

13. How I feel about my body weight

- I think my body weight would be considered underweight
- I think my body weight would be considered a healthy weight
- I think my body weight would be considered as overweight
- I think my body weight would be considered as obese

14. Being bullied

- I never get bullied
- I sometimes get bullied
- I get bullied a lot

15. Bullying others (your answer won't be seen by anybody else in your class)

- I bully others all the time
- I often bully others
- I hardly ever bully other
- I never bully others

17. Have you ever been cyber-bullied (your answer won't be seen by anybody else in your class)?

- I have never been bullied online
- I have been bullied online and it stopped
- I have been bullied online in the last 2 months

18. Playing online games

- I never play games online
- On average I play games online for less than 2 hours per day
- On average I play games online between 2 and 4 hours per day
- On average I play games online for more than 4 hours per day

19. **Using Social media** e.g. Face Book, Snapchat, Instagram, You Tube, Skype

- I never use social media
- On average I spend less than 2 hours a day using social media
- On average I spend between 2 and 4 hours a day using social media
- On average I spend more than 4 hours a day using social media

20. **Sending pictures of myself by text or online** (your answer won't be seen by anybody else in your class)

- I have never sent naked or semi naked pictures of myself to another person
- I have sent naked or semi naked pictures of myself to another people less than 3 times
- I have sent naked or semi naked pictures of myself to another people between 3 and 6 times
- I have sent naked or semi naked pictures of myself to another people more than 6 occasions

21. **Being asked to send picture of myself**

- I have never been asked to send naked or semi naked pictures of myself to another person
- I have been asked to send naked or semi naked pictures of myself to other people less than 3 times
- I have been asked to send naked or semi naked pictures of myself to other people between 3 and 6 times
- I have been asked to send naked or semi naked pictures of myself to other people more than 6 times

22. **Worrying about growing up and how your body will change** (sometimes called puberty)?

- I worry about this all the time
- I often worry about this
- I sometimes worry about this
- I do not worry about this

23. My self-confidence

- I always feel confident
- I usually feel confident
- I hardly ever have confidence in myself
- I never have confidence in myself

24. Joining in

- I never feel left out of things
- I hardly ever feel left out of things
- I usually feel left out of things
- I always feel left out of things

25. Feeling Happy

- I never feel happy
- I sometimes feel happy
- I often feel happy
- I always feel happy

26. Feeling angry

- I never feel angry
- I sometimes feel angry
- I often feel angry
- I always feel angry

27. Feeling lonely

- I never feel lonely
- I sometimes feel lonely
- I often feel lonely
- I always feel lonely

28. Making friends

- I find it easy to make friends
- I usually find it easy to make friends
- I usually find it hard to make friends
- I always find it hard to make friends

29. Do you help look after someone at home or in your family? (for example a parent, grandparent, brother or sister)

- I help to look after someone in my family every day
- I help to look after someone in my family at least once a week
- I help to look after someone in my family at least once a month
- I do not help to look after someone in my family

30. **Does looking after someone make anything difficult for you, for example with school or seeing friend?**

- Yes
- No
- Yes – but I am getting help
- Yes – but no one is helping me

31. **If I am worried – who would you be most likely to talk to if you were worrying about something?**

- I know how to get help or support in school or outside school
- I know how to get help or support in school but do not know how to get help from outside school
- I am not sure how to get help or support in school or outside school
- I don't know how to get help or support or support in school or outside school

32. **Smoking cigarettes / tobacco / ecigs - who with?** (your answer won't be seen by anybody else in your class)

- I do not smoke any cigarettes / tobacco / ecigs
- I usually smoke cigarettes / tobacco / ecigs (please indicate which of these)
- I usually smoke cigarettes / tobacco / ecigs on my own
- I usually smoke cigarettes / tobacco / ecigs with friends
- I usually smoke cigarettes / tobacco / ecigs with family

33. **Drinking alcohol – who with?** (your answer won't be seen by anybody else in your class)

- I do not drink alcohol
- I usually drink alcohol with my family
- I usually drink alcohol with my friends
- I usually drink alcohol on my own

34. Using illegal drugs e.g. cannabis, ecstasy, speed, cocaine, NPS

- I do not use illegal drugs
- I usually use illegal drugs on my own
- I usually use illegal drugs with my friends
- I usually use illegal drugs with my family

35. Would you like to see your school nurse?

- Yes
- No
- Could you tell us why?