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ABOUT YOUR SCHOOL

This questionnaire is for the head teacher.

**It asks about the physical environment of the school, the facilities available
and the school's catchment area.**

*We would be grateful if you could answer all questions, but if there are any
you feel are inappropriate please put a line through them.*

THANK YOU VERY MUCH FOR YOUR HELP

**This information is confidential. No person or establishment will be identified by
name in any report or publication.**

When completed please return the questionnaire to:

Professor Jean Golding
Children of the Nineties - ALSPAC
Institute of Child Health
24 Tyndall Avenue
Bristol
BS8 1BR

Tel: 0117 928 5085

10/03/00

SECTION A: THE ENVIRONMENT

A1. How much traffic is there on the road where your school is situated?

heavy traffic (lorries and buses often use it)	<div>1</div>
moderate traffic (mostly cars)	<div>2</div>
light traffic	<div>3</div>
very little traffic	<div>4</div>

A2. How noisy is your school environment usually?

a) Noise from outside the school (tick all that apply):

(i) Continuous loud noise (e.g. heavy traffic, machinery, etc.)	<div>1</div>
(ii) Intermittent loud noise (e.g. rush-hour traffic, plane taking off)	<div>1</div>
(iii) Continuous moderate noise	<div>1</div>
(iv) Intermittent moderate noise	<div>1</div>
(v) Usually quiet	<div>1</div>

b) Noise from within the school perimeter (e.g. playground, other classes):

(i) Noise of other classes through the walls of most classrooms:

can hear clearly and is a problem	<div>1</div>
can hear clearly but not a problem	<div>2</div>
can hear but not clearly	<div>3</div>
hardly ever hear	<div>4</div>

A2. b) (ii) Noise of people moving around the school (e.g. along corridors)

can hear clearly and is a problem

☐

can hear clearly but not a problem

☐

can hear but not clearly

☐

hardly ever hear

☐

c) Is there double glazing in the outside windows?

yes throughout the school

☐

yes on some windows

☐

no not at all

☐

A3. How is your school heated?

central boiler with radiators in classrooms

☐

storage heaters

☐

gas convector heater(s) in each classroom

☐

hot-air outlets (fan-driven)

☐

other

(please tick and describe)

☐

.....

A4. If there is a central boiler how is it fuelled?

gas

☐

oil

☐

other

☐

please describe

The school building(s):

A5. Is the school generally in good repair?

Yes, very good Yes, quite good No, not very good
No, many problems

A6. Do you feel there is overcrowding:

	Yes serious	Yes occasional	No
a) For the staff:	<input type="text" value="1"/>	<input type="text" value="2"/>	<input type="text" value="3"/>
b) For the pupils:	<input type="text" value="1"/>	<input type="text" value="2"/>	<input type="text" value="3"/>

If yes, to either of the above,

c) Is this affecting the quality of education that you are providing?

Yes, a great deal Yes, sometimes No

d) Are there aspects of a school curriculum that you are having to restrict or omit because of lack of space?

Yes No

e) Do you feel that overcrowding is affecting the morale of your staff?

Yes, a great deal Yes, moderately No

A7. Do you have good toilet and washbasin facilities for:

a) Your staff:	Yes <input type="text" value="1"/>	No <input type="text" value="2"/>
b) The pupils:	Yes <input type="text" value="1"/>	No <input type="text" value="2"/>

A8. Do you have a hall that can be used for the whole school at one time, e.g. for assemblies, plays, Christmas carols, parent/teacher events?

Yes 1 No 2 → If no, go to A9 below

If yes,

a) Are the floors: carpeted 1 wooden 2 other 3
(please describe)

.....

b) Is there curtaining or noise absorption tiles to stop echoing? (Tick all that apply)

(i) Yes, curtains 1
(ii) Yes, tiles on walls or ceiling 1
(iii) Yes, other noise absorption materials 1
(iv) No, nothing 1

A9. Is the outdoor play area for the children:

a) Large enough? Yes 1 No 2
b) Situated so that it can be easily surveyed by adults? Yes 1 No 2
c) Does it have grass as well as hard surface? Yes 1 No 2

A10. a) Where are the written SATS tests to be administered this year?

in the child's normal classroom 1
in the school hall 2
elsewhere (please describe) 3

b) Would you say that this was a quiet environment in which the children could concentrate?

no, very noisy 1 fairly quiet 3
no, quite noisy 2 very quiet 4

SECTION B: ABOUT THE SCHOOL

B1. What is the age range of children in your school?

	years		months		years		months
from	<input type="text"/>	•	<input type="text"/> <input type="text"/>	to	<input type="text"/> <input type="text"/>	•	<input type="text"/> <input type="text"/>

B2. Is the school: (please tick one only)

community school	<input type="text"/>
voluntary aided school	<input type="text"/>
voluntary controlled school	<input type="text"/>
foundation school	<input type="text"/>
foundation special school	<input type="text"/>
community special school	<input type="text"/>
non-maintained special school	<input type="text"/>
independent school	<input type="text"/>

B3. Please give the usual time the sessions start and finish (use 24-hour clock) for Year 3.

	Starts	Ends
(a) Morning	<input type="text"/> <input type="text"/> • <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> • <input type="text"/> <input type="text"/>
(b) Afternoon	<input type="text"/> <input type="text"/> • <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> • <input type="text"/> <input type="text"/>

B4. a) How many children are there on the school register?

<input type="text"/> <input type="text"/> <input type="text"/>	children
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b) How many have been excluded from school during this school year?

<input type="text"/> <input type="text"/>	for a fixed term	<input type="text"/> <input type="text"/>	permanently
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B4. c) How many are entitled to free school meals?

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 children

d) How many pupils have statements for special educational needs?

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B5. What is your admission policy? (please tick all that apply)

- | | | |
|---|--|---|
| a) Waiting list (no policy) | <table border="1" style="width: 40px; height: 20px;"><tr><td style="text-align: center;">1</td></tr></table> | 1 |
| 1 | | |
| b) Priority for children with special needs | <table border="1" style="width: 40px; height: 20px;"><tr><td style="text-align: center;">1</td></tr></table> | 1 |
| 1 | | |
| c) Priority for children in catchment area | <table border="1" style="width: 40px; height: 20px;"><tr><td style="text-align: center;">1</td></tr></table> | 1 |
| 1 | | |
| d) Priority for children with siblings in the school | <table border="1" style="width: 40px; height: 20px;"><tr><td style="text-align: center;">1</td></tr></table> | 1 |
| 1 | | |
| e) Parent request for particular type of teaching the school offers | <table border="1" style="width: 40px; height: 20px;"><tr><td style="text-align: center;">1</td></tr></table> | 1 |
| 1 | | |
| f) Other (please describe) | <table border="1" style="width: 40px; height: 20px;"><tr><td style="text-align: center;">1</td></tr></table> | 1 |
| 1 | | |
| | | |

B6. Approximately for what proportion of the children currently on your attendance register do you feel you have grounds for concern because the child's development might be impaired by his/her home circumstances? (Please tick one box only)

- | | | | |
|---------------|--|--|---|
| 100% | | <table border="1" style="width: 40px; height: 20px;"><tr><td style="text-align: center;">1</td></tr></table> | 1 |
| 1 | | | |
| 75-99% | | <table border="1" style="width: 40px; height: 20px;"><tr><td style="text-align: center;">2</td></tr></table> | 2 |
| 2 | | | |
| 50-74% | | <table border="1" style="width: 40px; height: 20px;"><tr><td style="text-align: center;">3</td></tr></table> | 3 |
| 3 | | | |
| 25-49% | | <table border="1" style="width: 40px; height: 20px;"><tr><td style="text-align: center;">4</td></tr></table> | 4 |
| 4 | | | |
| 10-24% | | <table border="1" style="width: 40px; height: 20px;"><tr><td style="text-align: center;">5</td></tr></table> | 5 |
| 5 | | | |
| less than 10% | | <table border="1" style="width: 40px; height: 20px;"><tr><td style="text-align: center;">6</td></tr></table> | 6 |
| 6 | | | |

B7. How many of the children in your provision do you believe have the following disadvantaged home circumstances?

	None	Few	Many	Most	Don't know
a) Overcrowding	<div>1</div>	<div>2</div>	<div>3</div>	<div>4</div>	<div>5</div>
b) Poor housing	<div>1</div>	<div>2</div>	<div>3</div>	<div>4</div>	<div>5</div>
c) Poverty	<div>1</div>	<div>2</div>	<div>3</div>	<div>4</div>	<div>5</div>
d) Marital difficulties	<div>1</div>	<div>2</div>	<div>3</div>	<div>4</div>	<div>5</div>
e) Poor parent-child relations	<div>1</div>	<div>2</div>	<div>3</div>	<div>4</div>	<div>5</div>
f) Child on 'at risk' register	<div>1</div>	<div>2</div>	<div>3</div>	<div>4</div>	<div>5</div>
g) Family ill-health	<div>1</div>	<div>2</div>	<div>3</div>	<div>4</div>	<div>5</div>
h) Other (please tick and describe)	<div>1</div>	<div>2</div>	<div>3</div>	<div>4</div>	<div>5</div>

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B8. How many children in your school are from homes where English is not the first language?

 children

B9. a) How many children with Special Educational Needs (Additional Educational Needs) are included in classes in your school?

 children

- B9. b) How many children with SEN/AEN who spend some time in special units/classes are included in classes in your school?

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 children

- c) How many children on the SEN/AEN Register are:

	No. of children		
(i) Stage 1	<table border="1"><tr><td></td><td></td></tr></table>		
(ii) Stage 2	<table border="1"><tr><td></td><td></td></tr></table>		
(iii) Stage 3	<table border="1"><tr><td></td><td></td></tr></table>		
(iv) Statemented	<table border="1"><tr><td></td><td></td></tr></table>		

- d) How many children are regularly visited/supported by the SEN/AEN Support Service?

	No. of children		
(i) Educational psychologist	<table border="1"><tr><td></td><td></td></tr></table>		
(ii) Peripatetic teacher of the deaf	<table border="1"><tr><td></td><td></td></tr></table>		
(iii) Peripatetic teacher of the visually impaired	<table border="1"><tr><td></td><td></td></tr></table>		
(iv) Behaviour support team	<table border="1"><tr><td></td><td></td></tr></table>		
(v) Learning support team	<table border="1"><tr><td></td><td></td></tr></table>		

SECTION C: THE TEACHING STAFF

C1. How many of the following teaching staff do you have (including the head teacher)?

	Male	Female
a) Full-time teachers	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>
b) Part-time teachers	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>
c) Teaching assistants (paid)	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>
d) Other adult assistants (unpaid):		
i) parents	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>
ii) volunteers	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>

C2. What is the overall complement of paid classroom staff (i.e. not including secretaries, caretakers etc.)?

• Full-time equivalents

C3. For how many sessions in the last 3 months has temporary staff cover been used?

none	<input type="text"/>
1-5	<input type="text"/>
6-10	<input type="text"/>
11-15	<input type="text"/>
16 or more	<input type="text"/>

C4. How often are there staff meetings to discuss the following?

	Weekly or more frequently	Fort- nightly	Monthly	Quarterly	Less than four a year	Never
a) Staff issues	<div>1</div>	<div>2</div>	<div>3</div>	<div>4</div>	<div>5</div>	<div>6</div>
b) Administration	<div>1</div>	<div>2</div>	<div>3</div>	<div>4</div>	<div>5</div>	<div>6</div>
c) Social issues relating to children's background	<div>1</div>	<div>2</div>	<div>3</div>	<div>4</div>	<div>5</div>	<div>6</div>
d) Children with special needs	<div>1</div>	<div>2</div>	<div>3</div>	<div>4</div>	<div>5</div>	<div>6</div>
e) Teaching policy	<div>1</div>	<div>2</div>	<div>3</div>	<div>4</div>	<div>5</div>	<div>6</div>
f) Curriculum	<div>1</div>	<div>2</div>	<div>3</div>	<div>4</div>	<div>5</div>	<div>6</div>
g) Education issues	<div>1</div>	<div>2</div>	<div>3</div>	<div>4</div>	<div>5</div>	<div>6</div>
h) Other (please tick and describe)	<div>1</div>	<div>2</div>	<div>3</div>	<div>4</div>	<div>5</div>	<div>6</div>

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C5. Are the staff who coordinate the teaching of the following subjects specialists in the subject?

	Yes	No
a) Maths	<div>1</div>	<div>2</div>
b) Literacy/English	<div>1</div>	<div>2</div>
c) Science	<div>1</div>	<div>2</div>
d) ICT/computing	<div>1</div>	<div>2</div>
e) Design & technology	<div>1</div>	<div>2</div>

C6. The head teacher:

a) How long have you been head teacher (or acting head) at this school?

< 1 year	<div>1</div>
1-2 years	<div>2</div>
3-9 years	<div>3</div>
10 or more years	<div>4</div>

b) Are you:

Male	<div>1</div>	Female	<div>2</div>
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c) How long have you been a head teacher altogether?

< 1 year	<div>1</div>
1-2 years	<div>2</div>
3-9 years	<div>3</div>
10 or more years	<div>4</div>

SECTION D: SCHOOL MEALS

D1. a) Does your school have a tuck shop?

Yes No

b) **If yes**, please tick the types of foods and drinks available:

	Yes	No
(i) Sweets/chocolate	<input type="text" value="1"/>	<input type="text" value="2"/>
(ii) Fruit	<input type="text" value="1"/>	<input type="text" value="2"/>
(iii) Crisps/savoury snacks	<input type="text" value="1"/>	<input type="text" value="2"/>
(iv) Drinks	<input type="text" value="1"/>	<input type="text" value="2"/>
(v) Other (please describe)	<input type="text" value="1"/>	<input type="text" value="2"/>

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D2. Does your school have a water fountain?

Yes No

D3. **At break times:**

a) Are the children allowed to eat?

Yes No

b) **If yes**, are they allowed to eat:

any food they like
certain types of food only — please list types:
food from tuck shop only

D4. At break times:

- a) Are the children allowed a drink?

Yes 1 No 2

- b) **If yes**, is it:

water only 1

milk or water only 2

any drinks 3

D5. At lunch time

For children with packed lunches:

- a) Are the children allowed a drink with their packed lunch?

Yes 1 No 2

- b) **If yes**, is it:

	Yes	No
(i) Water <u>only</u>	<input type="text"/> 1	<input type="text"/> 2
(ii) Drinks brought from home with certain restrictions e.g. not fizzy drinks (please tick & describe)	<input type="text"/> 1	<input type="text"/> 2
(iii) Any drinks brought from home	<input type="text"/> 1	<input type="text"/> 2
(iv) Drinks available in school other than water (please describe)	<input type="text"/> 1	<input type="text"/> 2

.....

D6. What happens to food left over from packed lunches?

- | | |
|--------------------------------------|----------------------|
| put back in lunch box and taken home | <input type="text"/> |
| put in the bin at school | <input type="text"/> |
| either of the above | <input type="text"/> |

D7. Do the children swap foods with each other?

- | | |
|-------------------------|----------------------|
| yes | <input type="text"/> |
| no, this is discouraged | <input type="text"/> |
| don't know | <input type="text"/> |

D8. **For children who eat school lunch:**

Is there a written Nutritional Policy for planning meals in your school?

Yes	<input type="text"/>	No	<input type="text"/>	Don't know	<input type="text"/>
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If yes,

a) Who is responsible for carrying out the policy?

- | | |
|--|----------------------|
| catering staff in this school | <input type="text"/> |
| catering person in charge of several schools | <input type="text"/> |
| head teacher | <input type="text"/> |
| other (please specify) | <input type="text"/> |

.....

b) Please could you attach a copy of the policy if possible. Please include information on portion sizes if available and a copy of some menus used.

For office use

D8. c) Are the children allowed a drink with their school meal?

Yes ☐ 1 No ☐ 2

If **yes**, is it:

	Yes	No
(i) Water <u>only</u>	<input type="checkbox"/> 1	<input type="checkbox"/> 2
(ii) Drinks brought from home with certain restrictions e.g. not fizzy drinks (please tick & describe)	<input type="checkbox"/> 1	<input type="checkbox"/> 2
(iii) Any drinks brought from home	<input type="checkbox"/> 1	<input type="checkbox"/> 2
(iv) Drinks available in school other than water (please tick & describe)	<input type="checkbox"/> 1	<input type="checkbox"/> 2

.....

d) Are the children allowed second helpings?

Yes ☐ 1 No ☐ 2 Sometimes ☐ 3

e) If a child leaves his/her food regularly, is there any policy to deal with this?

Yes ☐ 1 No ☐ 2

If **yes**,

	Yes	No
(i) Parents are informed	<input type="checkbox"/> 1	<input type="checkbox"/> 2
(ii) Other (please state)	<input type="checkbox"/> 1	<input type="checkbox"/> 2

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SECTION E: PARENTS' ASSOCIATIONS

E1. Does your school have a Parents' Association?

Yes 1 No 2 — If **no**, go to E2 on page 19

If **yes**,

a) What activities are they involved in?

	Yes	No
(i) Social events to raise funds for essential items e.g. books, computers, sports kits	<input type="text"/> 1	<input type="text"/> 2
(ii) Social events not primarily for fund raising	<input type="text"/> 1	<input type="text"/> 2
(iii) Providing parent volunteers to help class teachers e.g. hear children read, help as class assistants	<input type="text"/> 1	<input type="text"/> 2
(iv) Providing parent volunteers to help with out-of- -school activities e.g. costumes for plays, school trips	<input type="text"/> 1	<input type="text"/> 2
(v) Selling school uniforms (new and/or ASNU to raise funds.	<input type="text"/> 1	<input type="text"/> 2
(vi) Other (please describe)	<input type="text"/> 1	<input type="text"/> 2

.....

- E1. b) How many parent volunteers have been helping teachers in class time during this school year?

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- c) Approximately how much money does the Parents' Association raise for the school each year?

£

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- E2. What proportion of parents on average would you estimate tend to come to parents' evenings when pupils' progress is being discussed?

<20%	<div>1</div>	20-49%	<div>2</div>	50-74%	<div>3</div>	75-89%	<div>4</div>	90-100%	<div>5</div>
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- E3. How often, on average, are you involved with complaints from parents or disputes with them?

nearly every day	<div>1</div>
2-3 times/week	<div>2</div>
once a week	<div>3</div>
once a month	<div>4</div>
once a term	<div>5</div>
never/hardly ever	<div>6</div>

F1. This questionnaire was completed by: (tick all that apply)

a) Head teacher ☐

b) Other ☐
(please describe)

.....

F2. Date of completion of this questionnaire

THANK YOU VERY MUCH FOR YOUR HELP

Space for any comments you might like to make. Please note, for confidentiality reasons we will not be able to reply to these.

Please remember that we would like a copy of your Nutritional Policy (if appropriate) and some recent sample menus.

For office use only

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