



Health Needs Assessment Questionnaire. Year 6 (Primary School)

Information for Head teachers.
V5 October 2017.

The school nursing services have worked with colleagues in the LCC Public Health and School Improvement Services to develop a Health Needs Assessment Questionnaire (HNAQ) for year 6 pupils via a secure LCC web platform. The pupil responses from the collated questionnaires will generate:

- A summary report for the school which will provide the school with information about the health needs of its pupils which can inform the PSHE curriculum and pastoral support. School Nurses will have access to the school report and may be able to provide some associated advice to schools
- An individual report for each pupil, accessed only by school nurses, to identify and address individual health needs, so the School Nurse can offer targeted follow-up. This may also inform the CAF process
- Information for Lancashire County Council to include in population health needs assessments and inform future provision for children and young people in Lancashire

The contents of the questionnaire that will appear on line are:

Welcome

This questionnaire asks you questions about your health and lifestyle

Your honest answers are very important

Only the **School Nurse will be able to see your individual responses** to the questions. If there are any **responses that indicate you may have a particular health issue, they will contact you individually**. They will always act in your best interest.

Information about me will only be shared without my agreement (consent) when there is a **risk** to mine or another person's safety or protection.

Your school will receive a report that summarises the responses of everyone at your school. They could use the report to decide what needs to be included in your PSHE classes.

There is no time limit to complete the questionnaire,

Please pick the answer that is closest to how you feel.

You can leave any questions and move onto the next.

If you need any help with what to do please ask your School Nurse/teacher. But remember to **give your own answer, not what you think you should say**.

Questionnaire Contents

Primary Health Needs Questionnaire

Q1. Leisure Time. On a week day, about how many hours do you usually spend watching TV programmes, movies or online videos?

None/less than 1 hr

Between 1-2 hrs

Between 2-3 hrs

More than 3 hours

Q2. Leisure Time. On a week day, about how many hours do you usually spend playing video games?

None/less than 1 hr

Between 1-2 hrs

Between 2-3 hrs

More than 3 hours

Q3. Leisure Time. On a week day, about how many hours do you usually spend using social media?

None/less than 1 hr

Between 1-2 hrs

Between 2-3 hrs

More than 3 hours

Q4. Leisure Time. On a week day, about how many hours do you usually spend browsing the internet?

None/less than 1 hr

Between 1-2 hrs

Between 2-3 hrs

More than 3 hours

Q5. Being Active. About how many hours a week do you usually spend doing physical activity when you are at school?

None

Less than 2 hrs a week

Between 2-4 hrs a week

More than 4hrs

Note- By physical activity we mean anything that leaves you out of breath and can include swimming, dancing, running, walking, as well as playing sports like football, netball and cricket.

Q6. Being Active. About how many hours a week do you usually spend doing physical activity after home time or at weekends?

None

Less than 2 hrs a week

Between 2-4 hrs a week

More than 4hrs

Note- By physical activity we mean anything that leaves you out of breath and can include swimming, dancing, running, walking, as well as playing sports like football, netball and cricket.

Q7. Being Active. How much do you enjoy doing physical activities like playing sports?

Enjoy it a lot

Enjoy it a little

Don't enjoy it at all

Q8. Travelling About. How often do you travel to school by car?

Always

Usually

Hardly ever

Never

Q9. Travelling About. How often do you travel to school by bus?

Always

Usually

Hardly ever

Never

Q10. Travelling About. How often do you travel to school by bicycle?

Always

Usually

Hardly ever

Never

Q11. Travelling About. How often do you walk to school?

Always

Usually

Hardly ever

Never

Q12. Travelling About. How often do you wear a seat belt when travelling in a car/ van.

Always

Usually

Hardly ever

Never

Q13. Travelling About. Going to and from school

I never feel safe going to and from school

I often don't feel safe going to school

I usually feel safe going to school

I always feel safe going to school

Q14. Eating and Drinking. About how many portions of fruit and vegetables do you eat each day?

5 or more portions

3 or 4 portions

1 or 2 portions

I do not eat any fruit or vegetables

Q15. Eating and Drinking. How often do you eat breakfast?

Always

Usually

Sometimes

Never

Q16. Eating and Drinking. How many glasses of water (on its own or with squash) do you drink each day?

6-8 glasses

4-5 glasses

1-3 glasses

I never drink water

Q17. Eating and Drinking. How often do you drink sugary fizzy drinks e.g. Lucozade, Cola, fizzy drinks

More than once a day

About once a day

About once or twice a week

Less often

I never drink them

Q18. Eating and Drinking. How often do you drink high energy drinks, for example Monster, Red Bull?

More than once a day

About once a day

About once or twice a week

Less often

I never drink them

Q19. How often do you clean your teeth?

Twice a day or more

Once each day

Less often

Never

Q20. How often do you visit the dentist?

At least every six months.

At least once a year

Less often

Never

Q21. Smoking, how often do you smoke cigarettes/ tobacco?

At least once a week

About once a month

Less often

Never

Note - remember only the school nurse and people who don't know you will see your answer. This information will not be shared with your teachers, parents or carers.

Q22. Smoking, how often do you use e-cigarettes?

At least once a week

About once a month

Less often

Never

Q23. Alcohol. Drinking alcohol, who with?

I do not drink alcohol

I mostly drink alcohol with my family

I mostly drink alcohol with my friends

I mostly drink alcohol on my own.

Notes remember, no-one who knows you will see your answer

Q24. Alcohol, When?

I do not drink alcohol

I usually drink alcohol at home

I usually drink alcohol at social events

I usually drink alcohol in all situations

Q25. Drugs. Have you ever used drugs? Eg. Cannabis, ecstasy, speed, cocaine, drugs that used to be called legal highs e.g bubble, M-cat.

Once

More than once.

I have never taken drugs

Q26. Do you know where to get advice about drug or alcohol use (your own or someone else's)?

Yes, in school

Yes, from support services outside of school

I don't know how to get help or support in school or outside school

Q27. Your Body. How do you feel about your body weight?

I feel I am underweight

I feel my body weight would be considered a healthy weight

I feel my body weight would be considered as overweight

I feel my body weight would be considered as obese

Q28. Your Body. Do you ever have a problem reading the whiteboard in school? If you wear glasses please think about if you have ever had a problem reading the whiteboard in school when you are wearing your glasses.

Always

Often

Sometimes

Never

Q29. Your Body. Do you have any problem hearing?

Yes, and I wear a hearing aid

Yes, and I don't wear a hearing aid

No

Q30. Your Body: How often have you been sunburnt (painful red skin or peeling skin)?

Many times

A few times

Once or twice

Never

Q31. Your Body. How much sleep do you usually get at night?

6 hours or less

Between 6 and 8 hours

8 hours or more

Q32. Your Body. How long does it usually take you to get to sleep at night?

No time at all

30 minutes or less

Between 30 and 60 minutes

60 minutes or more

Q33 Your Body. Do you worry about growing up and how your body will change (sometimes called puberty)?

Not at all/ never

Sometimes

Often

All the time.

Q34. Relationships. How easy do you find it to make friends?

Very easy

Fairly easy

Not very easy

Not at all easy

Q35. Relationships. Have you ever been bullied?

I have never been bullied

I have been bullied in the past but it has stopped

I have been bullied more than once in the last 2 months – but I am getting help

I have been bullied more than once in the last 2 months – but no-one is helping me

Q36. Relationships. Have you ever been cyber-bullied?

I have never been bullied

I have been bullied in the past but it has stopped

I have been bullied more than once in the last 2 months – but I am getting help

I have been bullied more than once in the last 2 months – but no-one is helping me

Notes Cyber-bullying is any form of bullying that takes place online or through smartphones and tablets. It can take place on social networking sites, messaging apps, gaming sites and chat rooms such as Facebook, Xbox Live, Instagram, YouTube, Snapchat and other chat rooms.

Q37. Relationships. Do you know where you can go to for help if you are being bullied?

Yes

No

Q38. Have you ever sent a naked or semi-naked picture of yourself to another person?

No, never

Yes, once

Yes, more than once

Q39. Have you ever been asked to send a naked or semi-naked picture of yourself to another person?

No, never

Yes, once

Yes, more than once

Q40. Do you help to 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

If you do look after someone, who do you look after?

Text box

What do you do for them?

Text box

Q41. Does looking after someone make anything difficult for you, for example with school or seeing friends?

Yes

No

Yes – but I am getting help

Yes – and no one is helping me

Q42. Joining in. How often do you feel left out of things?

Always

Often

Hardly ever

Never

Q43. Feeling happy. How often do you feel happy?

Always

Often

Hardly ever

Never

Q44. Your Feelings. How often do you feel hopeful about your future?

Always

Often

Hardly ever

Never

Q45. Your Feelings. How often do you feel angry?

Always

Often

Hardly ever

Never

Q46. Your Feelings. How often do you feel lonely?

Always

Often

Hardly ever

Never

Q47. Your Feelings. How often do you feel worried about things?

Always

Often

Hardly ever

Never

Q48 Your Feelings. If I am worried – Who would you be most likely to talk to if you are worrying about something?

A teacher or other adult in school

A friend

Someone at home

No-one

Q49. Do you have any illnesses or health problems that mean that you have to go for check-ups or to the hospital or take medicine?

Yes

No

Q49a If so, please tell us about this?

Free text box

Q49b Is there anything else you would like to tell us? Would you like an appointment to see your school nurse?

Text box

Q50. Where do you get most of your information about keeping healthy? (tick box)

Family/carer

Nurses & Doctors

Internet

School

Friends