## Supplementary File 2 - National Survey

Thank you for taking part in our survey "Physical activity and Screen time practices in OSHC: Understanding Australian OSHC"

We want to understand what types of activities and duration are offered in your OSHC service.
The following questions are asked across varying aspects of OSHC (before and after school care). If your service provides both, please complete both components, you will be prompted accordingly. The final section contains our draft Physical Activity and Screen Time Guidelines for OSHC for you to provide feedback and comment on. This survey should take approximately 15 minutes to complete.

1. Location:Australian Capital TerritoryNew South WalesNorthern TerritoryQueenslandSouth AustraliaTasmaniaVictoriaWestern Australia
2. What is your average daily attendance at OSHC?
3. Does your service provide Before School care? YES NO - if yes prompts to complete the components, if NO skips to AFTER SCHOOL CARE
4. What are your typical hours of operation?

Start Time:
End Time:

The following items will ask about general play, screen-based activities, and energetic play activities offered in your OSHC services during before school care.

These questions relate to your TYPICAL programming during before school care. Please think about what is offered on a typical day. If your schedule has changed due to COVID-19, please answer the questions based on what happened in your OSHC service before COVID19. (e.g. the first half of Term 1 2020).

For each activity, please indicate if it is available in 15 minute increments. Please only tick activities that are offered every day or most days. For example, if a service offers energetic indoor play every day from 7:00 to 8:00, the form should be filled out like this:

## Before School Care

* 7. Please select the times energetic play opportunities are available:6:30-6:45am6:45-7:00am

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\(\checkmark\) 7:30-7:45am
```

```
\checkmark 7:45-8:00am
```

$7: 00-7: 15 a m$
7:15-7:30am8:00-8:15am8:15-8:30am

## OK

If staff led active games are offered occasionally (e.g. once or twice a week), do not tick any boxes, as we are interested in what is happening every day or most days
5. Does your OSHC service provide opportunities for Physical Activity (e.g. sports equipment/playground play) during Before School Care?

If YES, prompts you to complete the questions, if NO skips to Recreational Screen Time
6. Do you provide energetic play opportunities indoors (e.g. indoor gym/hall/games)? If YES prompts to provide time, if NO skips to next question
7. Please select the times available for energetic play opportunities indoor:

| $6: 30-$ | $6: 45-$ | $7: 00-$ | $7: 15-$ | 7:30 - | 7:45- | 8:00- | 8:00- | 8:30- | 8:45- |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| 6.45am | 7.00am | 7:15am | 7:30am | 7:45am | 8:00am | 8:15am | 8:15am | 8:45am | 9:00am |
| 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |

8. Do you provide energetic play opportunities outdoors (e.g. oval/playground) ? If YES prompts to provide time, if NO skips to next question
9. Please select the time available:

| $\begin{gathered} 6: 30- \\ 6.45 \mathrm{am} \end{gathered}$ | $\begin{gathered} \text { 6:45 - } \\ \text { 7.00am } \end{gathered}$ | $\begin{gathered} \text { 7:00 - } \\ \text { 7:15am } \end{gathered}$ | $\begin{gathered} \text { 7:15 - } \\ \text { 7:30am } \end{gathered}$ | $\begin{gathered} \text { 7:30 - } \\ \text { 7:45am } \end{gathered}$ | $\begin{gathered} \text { 7:45 - } \\ \text { 8:00am } \end{gathered}$ | $\begin{aligned} & \text { 8:00 - } \\ & \text { 8:15am } \end{aligned}$ | $\begin{aligned} & \text { 8:00 - } \\ & \text { 8:15am } \end{aligned}$ | $\begin{aligned} & \text { 8:30- } \\ & \text { 8:45am } \end{aligned}$ | $\begin{gathered} \text { 8:45 - } \\ \text { 9:00am } \end{gathered}$ |
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10. Do you provide staff led active games/ activities? If YES prompts to provide time, if NO skips to next question
11. Please select the time available:

| 6:30-6.45am | 6:45-7.00am | 7:00-7:15am | 7:15-7:30am | 7:30-7:45am | 7:45-8:00am | 8:00-8:15am | 8:00-8:15am | 8:30-8:45am | 8:45-9:00am |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
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12. Can children access an indoor playground for active play? If YES prompts to provide time, if NO skips to next question
13. Please select the time available:

| $\begin{aligned} & \text { 6:30- } \\ & \text { 6.45am } \end{aligned}$ | $\begin{gathered} \text { 6:45 - } \\ \text { 7.00am } \end{gathered}$ | $\begin{gathered} \text { 7:00 - } \\ \text { 7:15am } \end{gathered}$ | $\begin{gathered} \text { 7:15 - } \\ \text { 7:30am } \end{gathered}$ | $\begin{gathered} \text { 7:30- } \\ \text { 7:45am } \end{gathered}$ | $\begin{gathered} \text { 7:45 - } \\ \text { 8:00am } \end{gathered}$ | $\begin{gathered} \text { 8:00- } \\ \text { 8:15am } \end{gathered}$ | $\begin{gathered} \text { 8:00 - } \\ \text { 8:15am } \end{gathered}$ | $\begin{aligned} & \text { 8:30- } \\ & \text { 8:45am } \end{aligned}$ | 8:45-9:00am |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| $\bigcirc$ | $\bigcirc$ | $\bigcirc$ | $\bigcirc$ | $\bigcirc$ | $\bigcirc$ | $\bigcirc$ | $\bigcirc$ | $\bigcirc$ | $\bigcirc$ |

14. Can children access an outdoor playground for active play? If YES prompts to provide time, if NO skips to next question
15. Please select the time available:

| $\begin{gathered} 6: 30- \\ 6.45 \mathrm{am} \end{gathered}$ | $\begin{gathered} \text { 6:45 - } \\ \text { 7.00am } \end{gathered}$ | $\begin{aligned} & \text { 7:00 - } \\ & \text { 7:15am } \end{aligned}$ | $\begin{gathered} \text { 7:15 - } \\ \text { 7:30am } \end{gathered}$ | $\begin{aligned} & \text { 7:30 - } \\ & \text { 7:45am } \end{aligned}$ | $\begin{gathered} \text { 7:45 - } \\ \text { 8:00am } \end{gathered}$ | $\begin{aligned} & \text { 8:00 - } \\ & \text { 8:15am } \end{aligned}$ | $\begin{gathered} \text { 8:00- } \\ \text { 8:15am } \end{gathered}$ | $\begin{gathered} 8: 30- \\ \text { 8:45am } \end{gathered}$ | $\begin{gathered} \text { 8:45 - } \\ \text { 9:00am } \end{gathered}$ |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
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16. Can children use sports equipment (e.g. balls/hoops) ? If YES prompts to provide time, if NO skips to next question
17. Please select the time available:

| 6:30-6.45am | 6:45-7.00am | 7:00- | 7:15- | 7:30- | 7:45- | 8:00- | 8:00- | 8:30- | 8:45- |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  |  | 7:15am | 7:30am | 7:45am | 8:00am | 8:15am | 8:15am | 8:45am | 9:00am |
| 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |  |  |

18. Does your service provide any other physically active activities not already listed during the before school care session? [List includes: energetic play indoors, energetic play outdoors, staff led games, playground inside, playground outside, sports equipment] If YES prompts to provide time and specify the activity, if NO skips to next question
19. Please select the time available and Specify the activity:

| $6: 30-6.45 a m$ | $6: 45-7.00 a m$ | $7: 00-$ | $7: 15-$ | $7: 30-$ | 7:45- | 8:00- | 8:00- | 8:30- |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  |  | 7:15am | 7:30am | 7:45am | 8:00am | 8:15am | 8:15am | 8:45am |
| 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |

20. Does your service provide any other physically active activities not already listed during the before school care session? [List includes: energetic play indoors, energetic play outdoors, staff led games, playground inside, playground outside, sports equipment] If YES prompts to provide time and specify the activity, if NO skips to next question
21. Please select the time available and Specify the activity:

| $6: 30-6.45 a m$ | $6: 45-$ | $7: 00-$ | $7: 15-$ | 7:30 - | 7:45- | 8:00- | 8:00 - | 8:30- | 8:45- |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  | 7.00am | 7:15am | 7:30am | 7:45am | 8:00am | 8:15am | 8:15am | 8:45am | 9:00am |
| 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |  |  |

22. Does your service provide any other physically active activities not already listed during the before school care session? [List includes: energetic play indoors, energetic play outdoors, staff led games, playground inside, playground outside, sports equipment] If YES prompts to provide time and specify the activity, if NO skips to next question
23. Please select the time available and Specify the activity:

| $6: 30-6.45 a m$ | $6: 45-$ | $7: 00-$ | $7: 15-$ | $7: 30-$ | 7:45- | 8:00- | 8:00- | 8:30- | 8:45- |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  | 7.00am | 7:15am | 7:30am | 7:45am | 8:00am | 8:15am | 8:15am | 8:45am | 9:00am |
| 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |  |  |

24. Does your OSHC service provide Recreational Screen Time (e.g. ipads/tv/computer) during Before School Care?

If YES, prompts you to complete the questions, if NO skips to Sedentary Activities
25. Do you allow TV/DVD viewing? If YES prompts to provide time, if NO skips to next question
26. Please select the time available:

| 6:30-6.45am | 6:45-7.00am | 7:00- | 7:15- | 7:30- | 7:45- | 8:00- | 8:00- | 8:30- | 8:45- |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  |  |  | 7:15am | 7:30am | 7:45am | 8:00am | 8:15am | 8:15am | 8:45am |

27. Do you allow use of ipads/tablets? If YES prompts to provide time, if NO skips to next question
28. Please select the time available:

| 6:30-6.45am | 6:45-7.00am | $\begin{gathered} \text { 7:00 - } \\ \text { 7:15am } \end{gathered}$ | $\begin{gathered} \text { 7:15 - } \\ \text { 7:30am } \end{gathered}$ | $\begin{aligned} & \text { 7:30 - } \\ & \text { 7:45am } \end{aligned}$ | $\begin{gathered} \text { 7:45 - } \\ \text { 8:00am } \end{gathered}$ | $\begin{aligned} & \text { 8:00 - } \\ & \text { 8:15am } \end{aligned}$ | $\begin{gathered} \text { 8:00- } \\ \text { 8:15am } \end{gathered}$ | $\begin{gathered} \text { 8:30 - } \\ \text { 8:45am } \end{gathered}$ | $\begin{gathered} \text { 8:45 - } \\ \text { 9:00am } \end{gathered}$ |
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| 0 | $\bigcirc$ | $\bigcirc$ | $\bigcirc$ | $\bigcirc$ | $\bigcirc$ | $\bigcirc$ | $\bigcirc$ | $\bigcirc$ | $\bigcirc$ |

29. Do you allow use of computers (not for homework)? If YES prompts to provide time, if NO skips to next question
30. Please select the time available:

| 6:30-6.45am | $6: 45-7.00 a m$ | 7:00 - | 7:15- | 7:30- | 7:45- | 8:00- | 8:00- | 8:30- | 8:45- |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  |  | 7:15am | 7:30am | 7:45am | 8:00am | 8:15am | 8:15am | 8:45am | 9:00am |
| 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |  |  |

31. Do you allow access to seated video games? If YES prompts to provide time, if NO skips to next question
32. Please select the time available:

| 6:30-6.45am | $6: 45-7.00 a m$ | $7: 00-$ | $7: 15-$ | 7:30- | 7:45- | 8:00- | 8:00- | 8:30- |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  |  | 7:15am | 7:30am | 7:45am | 8:00am | 8:15am | 8:15am | 8:45am |
| 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |

33. Do you allow access to standing/active video games? If YES prompts to provide time, if NO skips to next question
34. Please select the time available:

| 6:30-6.45am | $6: 45-7.00 a m$ | 7:00- | 7:15- | 7:30- | 7:45- | 8:00- | 8:00- | 8:30- | 8:45- |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  |  | 7:15am | 7:30am | 7:45am | 8:00am | 8:15am | 8:15am | 8:45am | 9:00am |
| 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |  |

35. Does your service provide any other recreational screen activities not already listed ? [Listed: TV/DVD viewing, Computer Use, ipads/tablets, Video games seated, Video games standing ] If YES prompts to provide time and specify activity, if NO skips to next question
36. Please select the time available:

| 6:30-6.45am | 6:45-7.00am | $\begin{gathered} \text { 7:00 - } \\ \text { 7:15am } \end{gathered}$ | $\begin{gathered} \text { 7:15 - } \\ \text { 7:30am } \end{gathered}$ | $\begin{gathered} \text { 7:30- } \\ \text { 7:45am } \end{gathered}$ | $\begin{gathered} \text { 7:45 - } \\ \text { 8:00am } \end{gathered}$ | $\begin{gathered} 8: 00- \\ \text { 8:15am } \end{gathered}$ | $\begin{gathered} \text { 8:00 - } \\ \text { 8:15am } \end{gathered}$ | $\begin{gathered} \text { 8:30 - } \\ \text { 8:45am } \end{gathered}$ | $\begin{aligned} & \text { 8:45 - } \\ & \text { 9:00am } \end{aligned}$ |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
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37. Do you provide any other additional recreational screen activities? if YES prompts to provide time and specify activity, if NO skips to next question.
38. Please select the time available and SPECIFY the activity:

| 6:30-6.45am | $6: 45-7.00 a m$ | $7: 00-$ | $7: 15-$ | $7: 30-$ | 7:45- | 8:00- | 8:00- | 8:30- | 8:45- |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  |  | 7:15am | 7:30am | 7:45am | 8:00am | 8:15am | 8:15am | 8:45am | 9:00am |
| 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |  |

39. Do you provide any other additional recreational screen activities? if YES prompts to provide time and specify activity, if NO skips to next question.
40. Please select the time available and SPECIFY the activity:

| 6:30-6.45am | $6: 45-7.00 a m$ | 7:00 - | 7:15- | 7:30- | 7:45- | 8:00 - | 8:00- | 8:30- | 8:45- |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  |  | 7:15am | 7:30am | 7:45am | 8:00am | 8:15am | 8:15am | 8:45am | 9:00am |
| 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |  |  |

41. Does your OSHC service provide Sedentary Activities (e.g. board games/lego/indoor toys) during Before School Care?

If YES, prompts you to complete the questions, if NO skips to After School Care
42. Does your service provide breakfast? If YES prompts to provide time, if NO skips to next question
43. Please select the time available:

| 6:30-6.45am | $6: 45-7.00 a m$ | 7:00- | 7:15- | 7:30- | 7:45- | 8:00- | 8:00- | 8:30- | 8:45- |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  |  | 7:15am | 7:30am | 7:45am | 8:00am | 8:15am | 8:15am | 8:45am | 9:00am |
| 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |  |

44. Does your service provide arts and crafts? If YES prompts to provide time, if NO skips to next question 45. Please select the time available:

| 6:30-6.45am | $6: 45-7.00 a m$ | 7:00 - | 7:15- | 7:30- | 7:45- | 8:00- | 8:00- | 8:30- | 8:45- |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  |  | 7:15am | 7:30am | 7:45am | 8:00am | 8:15am | 8:15am | 8:45am | 9:00am |
| 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |  |  |

46. Does your service provide cooking/food preparation activities? If YES prompts to provide time, if NO skips to next question
47. Please select the time available:

| 6:30-6.45am | $6: 45-7.00 a m$ | $7: 00-$ | $7: 15-$ | 7:30- | 7:45- | 8:00- | 8:00- | 8:30- | 8:45- |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  |  | 7:15am | 7:30am | 7:45am | 8:00am | 8:15am | 8:15am | 8:45am | 9:00am |
| 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |  |  |

48. Does your service provide board games / lego / construction activities? If YES prompts to provide time, if NO skips to next question 49. Please select the time available:

| 6:30-6.45am | $6: 45-7.00 a m$ | 7:00 - | 7:15- | 7:30- | 7:45- | 8:00- | 8:00- | 8:30- | 8:45- |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  |  | 7:15am | 7:30am | 7:45am | 8:00am | 8:15am | 8:15am | 8:45am | 9:00am |
| 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |  |

50. Does your service assist with homework/reading? If YES prompts to provide time, if NO skips to next question
51. Please select the time available:

| 6:30-6.45am | 6:45-7.00am | $\begin{gathered} \text { 7:00- } \\ \text { 7:15am } \end{gathered}$ | $\begin{gathered} \text { 7:15 - } \\ \text { 7:30am } \end{gathered}$ | $\begin{gathered} \text { 7:30- } \\ \text { 7:45am } \end{gathered}$ | $\begin{gathered} \text { 7:45 - } \\ \text { 8:00am } \end{gathered}$ | $\begin{gathered} 8: 00- \\ \text { 8:15am } \end{gathered}$ | $\begin{aligned} & \text { 8:00- } \\ & \text { 8:15am } \end{aligned}$ | $\begin{gathered} \text { 8:30- } \\ \text { 8:45am } \end{gathered}$ | $\begin{aligned} & \text { 8:45 - } \\ & \text { 9:00am } \end{aligned}$ |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| $\bigcirc$ | $\bigcirc$ | $\bigcirc$ | $\bigcirc$ | $\bigcirc$ | $\bigcirc$ | $\bigcirc$ | $\bigcirc$ | $\bigcirc$ | $\bigcirc$ |
| 52. Does your service provide time/s NO skips to next question <br> 53. Please select the time available: |  |  |  |  |  |  |  |  |  |
| 6:30-6.45am | 6:45-7.00am | $\begin{gathered} \text { 7:00- } \\ \text { 7:15am } \end{gathered}$ | $\begin{gathered} \text { 7:15 - } \\ \text { 7:30am } \end{gathered}$ | $\begin{gathered} \text { 7:30- } \\ \text { 7:45am } \end{gathered}$ | $\begin{aligned} & \text { 7:45 - } \\ & \text { 8:00am } \end{aligned}$ | $\begin{gathered} \text { 8:00 - } \\ \text { 8:15am } \end{gathered}$ | $\begin{aligned} & \text { 8:00- } \\ & \text { 8:15am } \end{aligned}$ | $\begin{gathered} 8: 30- \\ 8: 45 \mathrm{am} \end{gathered}$ | $\begin{gathered} \text { 8:45 - } \\ \text { 9:00am } \end{gathered}$ |
| $\bigcirc$ | $\bigcirc$ | $\bigcirc$ | $\bigcirc$ | $\bigcirc$ | $\bigcirc$ | $\bigcirc$ | $\bigcirc$ | $\bigcirc$ | $\bigcirc$ |

54. Does your service provide role play / dress up opportunities? If YES prompts to provide time, if NO skips to next question 55. Please select the time available:

| 6:30-6.45am | $6: 45-7.00 a m$ | 7:00- | 7:15- | 7:30- | 7:45- | 8:00- | 8:00- | 8:30- | 8:45- |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  |  | 7:15am | 7:30am | 7:45am | 8:00am | 8:15am | 8:15am | 8:45am | 9:00am |
| 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |  |  |

56. Does your service provide opportunities to listen/play music? If YES prompts to provide time, if NO skips to next question 57. Please select the time available:

| 6:30-6.45am | 6:45-7.00am | $\begin{gathered} \text { 7:00 - } \\ \text { 7:15am } \end{gathered}$ | $\begin{gathered} \text { 7:15 - } \\ \text { 7:30am } \end{gathered}$ | $\begin{gathered} \text { 7:30- } \\ \text { 7:45am } \end{gathered}$ | $\begin{gathered} \text { 7:45 - } \\ \text { 8:00am } \end{gathered}$ | $\begin{gathered} \text { 8:00- } \\ \text { 8:15am } \end{gathered}$ | $\begin{aligned} & \text { 8:00- } \\ & \text { 8:15am } \end{aligned}$ | $\begin{gathered} \text { 8:30- } \\ \text { 8:45am } \end{gathered}$ | $\begin{gathered} \text { 8:45 - } \\ \text { 9:00am } \end{gathered}$ |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| $\bigcirc$ | $\bigcirc$ | $\bigcirc$ | $\bigcirc$ | $\bigcirc$ | $\bigcirc$ | $\bigcirc$ | $\bigcirc$ | $\bigcirc$ | $\bigcirc$ |

58. Does your service provide indoor freeplay? If YES prompts to provide time, if NO skips to next question
59. Please select the time available:

| 6:30-6.45am | 6:45-7.00am | 7:00- | 7:15- | 7:30- | 7:45- | 8:00- | 8:00- | 8:30- | 8:45- |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  |  | 7:15am | 7:30am | 7:45am | 8:00am | 8:15am | 8:15am | 8:45am | 9:00am |
| 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |  |

60. Does your service provide any other sedentary activities not already listed during the before school care session? [Listed: Breakfast, Arts/Crafts, Cooking/Food preparation, Boardgames/lego, Homework/reading with assistance, Homework/reading without assistance, Role play/dress ups, Listening to music/playing music, Indoor freeplay] If YES prompts to provide time and specify the activity, if NO skips to next question (AFTER SCHOOL CARE)
61. Please select the time available and specify the activity:

| 6:30-6.45am | $6: 45-7.00 a m$ | $7: 00-$ | $7: 15-$ | 7:30- | 7:45- | 8:00- | 8:00- | 8:30- |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  |  | 7:15am | 7:30am | 7:45am | 8:00am | 8:15am | 8:15am | 8:45am |
| 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |

62. Does your service provide any other sedentary activities not already listed during the before school care session? [Listed: Breakfast, Arts/Crafts, Cooking/Food preparation, Boardgames/lego, Homework/reading with assistance, Homework/reading without assistance, Role play/dress ups, Listening to music/playing music, Indoor freeplay] If YES prompts to provide time and specify the activity, if NO skips to next question (AFTER SCHOOL CARE)
63. Please select the time available and specify the activity:

| 6:30-6.45am | $6: 45-7.00 a m$ | 7:00- | 7:15- | 7:30- | 7:45- | 8:00- | 8:00- | 8:30- | 8:45- |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  |  | 7:15am | 7:30am | 7:45am | 8:00am | 8:15am | 8:15am | 8:45am | 9:00am |
| 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |  |

64. Does your service provide any other sedentary activities not already listed during the before school care session? [Listed: Breakfast, Arts/Crafts, Cooking/Food preparation, Boardgames/lego, Homework/reading with assistance, Homework/reading without
assistance, Role play/dress ups, Listening to music/playing music, Indoor freeplay] If YES prompts to provide time and specify the activity, if NO skips to next question (AFTER SCHOOL CARE)
65. Please select the time available and specify the activity:

| 6:30-6.45am | $6: 45-7.00 a m$ | 7:00 - | 7:15- | 7:30- | 7:45- | 8:00- | 8:00- | 8:30- | 8:45- |
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|  |  | 7:15am | 7:30am | 7:45am | 8:00am | 8:15am | 8:15am | 8:45am | 9:00am |
| 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |  |

66. Please provide any other comments about activity scheduling during Before School Care:

## AFTER SCHOOL CARE

67. Does your OSHC service provide After School Care? If YES, prompts to next question, if NO Skips to Draft Guidelines.
68. What are your typical hours of operation?

The following questions relate to your TYPICAL programming during before school care. Please think about what is offered on a typical day. If you schedule has changed due to COVID-19, please answer the question based on what happened in your OSHC service before COVID19. (e.g the first half of Term 1 2020).

For each activity, please indicate if it is available in 15 minute increments. Please only tick activities that are offered every day or most days.
For example, if a service offers energetic indoor play is offered every day from 3:305 to 5:30, the survey should be filled out like this:

* 9. Please select the times available for outdoor energetic play opportunities :3:00-3:15pm3:15-3:30pm
\checkmark 4:45-5:00pm
\checkmark 4:45-5:00pm
$\checkmark$ 5:00-5:15pm
$3: 30-3: 45 \mathrm{pm}$
5:15-5:30pm
$\checkmark$ 3:45-4:00pm
5:30-5:45pm5:45-6:00pm6:00-6:15pm6:15-6:30pm

69. Does your OSHC service provide Physical Activity (e.g. sports equipment, playground play) opportunities during After School Care? If YES prompts to next question, if NO prompts to Recreational Screen Time.
70. Do you provide energetic play opportunities indoor (e.g. indoor gym/hall/games)? If YES prompts to provide time, if NO skips to next question
71. Please select the time available:

| $\begin{gathered} 3: 00- \\ 3: 15 \mathrm{pm} \end{gathered}$ | $\begin{gathered} 3: 15- \\ 3: 30 \mathrm{pm} \end{gathered}$ | $\begin{gathered} 3: 30- \\ 3: 45 \mathrm{pm} \end{gathered}$ | $\begin{gathered} \text { 3:45- } \\ \text { 4:00pm } \end{gathered}$ | $\begin{gathered} \text { 4:00- } \\ 4: 15 \mathrm{pm} \end{gathered}$ | $\begin{gathered} \text { 4:15- } \\ \text { 4:30pm } \end{gathered}$ | $\begin{gathered} \text { 4:30- } \\ \text { 4:45pm } \end{gathered}$ | $\begin{gathered} \text { 4:45- } \\ \text { 5:00pm } \end{gathered}$ | $\begin{gathered} 5: 00- \\ 5: 15 \mathrm{pm} \end{gathered}$ | $\begin{gathered} \text { 5:15- } \\ \text { 5:30pm } \end{gathered}$ | $\begin{gathered} 5: 30- \\ 5: 45 \mathrm{pm} \end{gathered}$ | $\begin{aligned} & \text { 5:45- } \\ & \text { 6:00pm } \end{aligned}$ | $\begin{aligned} & \text { 6:00- } \\ & \text { 6:15pm } \end{aligned}$ | $\begin{gathered} \text { 6:15- } \\ \text { 6:30pm } \end{gathered}$ |
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| - | 0 | 0 | 0 | - | - | - | 0 | - | 0 | 0 | 0 |  |  |

72. Do you provide energetic play opportunities outdoor (e.g. oval/playground)? If YES prompts to provide time, if NO skips to next question
73. Please select the time available:

| $\begin{gathered} 3: 00- \\ 3: 15 \mathrm{pm} \end{gathered}$ | $\begin{gathered} 3: 15- \\ 3: 30 \mathrm{pm} \end{gathered}$ | $\begin{gathered} 3: 30- \\ 3: 45 \mathrm{pm} \end{gathered}$ | $\begin{aligned} & \text { 3:45- } \\ & 4: 00 \mathrm{pm} \end{aligned}$ | $\begin{gathered} \text { 4:00- } \\ 4: 15 \mathrm{pm} \end{gathered}$ | $\begin{gathered} \text { 4:15- } \\ \text { 4:30pm } \end{gathered}$ | $\begin{gathered} 4: 30- \\ 4: 45 \mathrm{pm} \end{gathered}$ | $\begin{gathered} \text { 4:45- } \\ \text { 5:00pm } \end{gathered}$ | $\begin{gathered} \text { 5:00- } \\ \text { 5:15pm } \end{gathered}$ | $\begin{gathered} \text { 5:15- } \\ \text { 5:30pm } \end{gathered}$ | $\begin{gathered} 5: 30- \\ 5: 45 \mathrm{pm} \end{gathered}$ | $\begin{gathered} \text { 5:45- } \\ \text { 6:00pm } \end{gathered}$ | $\begin{gathered} \text { 6:00 - } \\ \text { 6:15pm } \end{gathered}$ | $\begin{gathered} \text { 6:15 - } \\ \text { 6:30pm } \end{gathered}$ |
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74. Do you provide staff led active games/active activities? If YES prompts to provide time, if NO skips to next question
75. Please select the time available:

| $\begin{gathered} 3: 00- \\ 3: 15 \mathrm{pm} \end{gathered}$ | $\begin{gathered} 3: 15- \\ 3: 30 \mathrm{pm} \end{gathered}$ | $\begin{gathered} 3: 30- \\ 3: 45 \mathrm{pm} \end{gathered}$ | $\begin{gathered} 3: 45- \\ 4: 00 \mathrm{pm} \end{gathered}$ | $\begin{gathered} \text { 4:00 - } \\ 4: 15 \mathrm{pm} \end{gathered}$ | $\begin{gathered} \text { 4:15- } \\ \text { 4:30pm } \end{gathered}$ | $\begin{gathered} 4: 30- \\ 4: 45 \mathrm{pm} \end{gathered}$ | $\begin{gathered} \text { 4:45- } \\ \text { 5:00pm } \end{gathered}$ | $\begin{gathered} \text { 5:00- } \\ \text { 5:15pm } \end{gathered}$ | $\begin{gathered} \text { 5:15 - } \\ \text { 5:30pm } \end{gathered}$ | $\begin{gathered} 5: 30- \\ 5: 45 \mathrm{pm} \end{gathered}$ | $\begin{aligned} & \text { 5:45- } \\ & \text { 6:00pm } \end{aligned}$ | $\begin{gathered} \text { 6:00- } \\ \text { 6:15pm } \end{gathered}$ | $\begin{gathered} \text { 6:15- } \\ \text { 6:30pm } \end{gathered}$ |
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76. Can children access an indoor playground for active play? If YES prompts to provide time, if NO skips to next question 77. Please select the time available:

| $\begin{gathered} 3: 00- \\ 3: 15 \mathrm{pm} \end{gathered}$ | $\begin{gathered} 3: 15- \\ 3: 30 \mathrm{pm} \end{gathered}$ | $\begin{gathered} 3: 30- \\ 3: 45 \mathrm{pm} \end{gathered}$ | $\begin{gathered} 3: 45- \\ \text { 4:00pm } \end{gathered}$ | $\begin{gathered} \text { 4:00- } \\ \text { 4:15pm } \end{gathered}$ | $\begin{gathered} \text { 4:15- } \\ \text { 4:30pm } \end{gathered}$ | $\begin{gathered} \text { 4:30- } \\ \text { 4:45pm } \end{gathered}$ | $\begin{gathered} \text { 4:45- } \\ \text { 5:00pm } \end{gathered}$ | $\begin{gathered} \text { 5:00- } \\ \text { 5:15pm } \end{gathered}$ | $\begin{gathered} \text { 5:15- } \\ \text { 5:30pm } \end{gathered}$ | $\begin{gathered} 5: 30- \\ 5: 45 \mathrm{pm} \end{gathered}$ | $\begin{aligned} & \text { 5:45- } \\ & \text { 6:00pm } \end{aligned}$ | $\begin{gathered} \text { 6:00- } \\ \text { 6:15pm } \end{gathered}$ | $\begin{gathered} \text { 6:15- } \\ \text { 6:30pm } \end{gathered}$ |
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78. Can children access an outdoor playground for active play? If YES prompts to provide time, if NO skips to next question
79. Please select the time available:

| $\begin{gathered} 3: 00- \\ 3: 15 \mathrm{pm} \end{gathered}$ | $\begin{gathered} 3: 15- \\ 3: 30 \mathrm{pm} \end{gathered}$ | $\begin{gathered} 3: 30- \\ 3: 45 \mathrm{pm} \end{gathered}$ | $\begin{gathered} 3: 45- \\ 4: 00 \mathrm{pm} \end{gathered}$ | $\begin{gathered} \text { 4:00 - } \\ \text { 4:15pm } \end{gathered}$ | $\begin{aligned} & \text { 4:15- } \\ & \text { 4:30pm } \end{aligned}$ | $\begin{gathered} \text { 4:30- } \\ \text { 4:45pm } \end{gathered}$ | $\begin{gathered} \text { 4:45- } \\ \text { 5:00pm } \end{gathered}$ | $\begin{gathered} \text { 5:00- } \\ \text { 5:15pm } \end{gathered}$ | $\begin{gathered} 5: 15- \\ \text { 5:30pm } \end{gathered}$ | $\begin{gathered} 5: 30- \\ 5: 45 \mathrm{pm} \end{gathered}$ | $\begin{aligned} & \text { 5:45- } \\ & \text { 6:00pm } \end{aligned}$ | $\begin{gathered} \text { 6:00- } \\ \text { 6:15pm } \end{gathered}$ | $\begin{gathered} \text { 6:15- } \\ \text { 6:30pm } \end{gathered}$ |
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80. Can children use sports equipment (e.g. balls/hoops)? If YES prompts to provide time, if NO skips to next question
81. Please select the time available:

| $\begin{gathered} 3: 00- \\ 3: 15 \mathrm{pm} \end{gathered}$ | $\begin{gathered} 3: 15- \\ 3: 30 \mathrm{pm} \end{gathered}$ | $\begin{gathered} 3: 30- \\ 3: 45 \mathrm{pm} \\ \hline \end{gathered}$ | $\begin{gathered} 3: 45- \\ 4: 00 \mathrm{pm} \\ \hline \end{gathered}$ | $\begin{gathered} \text { 4:00 - } \\ \text { 4:15pm } \end{gathered}$ | $\begin{gathered} \text { 4:15- } \\ \text { 4:30pm } \\ \hline \end{gathered}$ | $\begin{gathered} 4: 30- \\ 4: 45 \mathrm{pm} \end{gathered}$ | $\begin{gathered} \text { 4:45- } \\ \text { 5:00pm } \end{gathered}$ | $\begin{gathered} \text { 5:00- } \\ \text { 5:15pm } \end{gathered}$ | $\begin{gathered} \text { 5:15- } \\ \text { 5:30pm } \end{gathered}$ | $\begin{gathered} 5: 30- \\ 5: 45 \mathrm{pm} \end{gathered}$ | $\begin{aligned} & \text { 5:45- } \\ & \text { 6:00pm } \end{aligned}$ | $\begin{gathered} \text { 6:00- } \\ \text { 6:15pm } \end{gathered}$ | $\begin{gathered} \text { 6:15 - } \\ \text { 6:30pm } \end{gathered}$ |
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82. Does your service provide any other physical activities not already listed during the afterschool care session? [List includes: energetic play indoors, energetic play outdoors, staff led games, playground inside, playground outside, sports equipment] If YES prompts to provide time and specify the activity, if NO skips to next question
83. Please select the time available and Specify the activity:

| $\begin{gathered} 3: 00- \\ 3: 15 \mathrm{pm} \end{gathered}$ | $\begin{gathered} 3: 15- \\ 3: 30 \mathrm{pm} \end{gathered}$ | $\begin{gathered} 3: 30- \\ 3: 45 \mathrm{pm} \end{gathered}$ | $\begin{gathered} \text { 3:45- } \\ \text { 4:00pm } \end{gathered}$ | $\begin{gathered} \text { 4:00 - } \\ \text { 4:15pm } \end{gathered}$ | $\begin{gathered} \text { 4:15- } \\ \text { 4:30pm } \end{gathered}$ | $\begin{gathered} \text { 4:30- } \\ \text { 4:45pm } \end{gathered}$ | $\begin{gathered} \text { 4:45- } \\ \text { 5:00pm } \end{gathered}$ | $\begin{gathered} 5: 00- \\ \text { 5:15pm } \end{gathered}$ | $\begin{gathered} \text { 5:15 - } \\ \text { 5:30pm } \end{gathered}$ | $\begin{gathered} 5: 30- \\ \text { 5:45pm } \end{gathered}$ | $\begin{gathered} \text { 5:45- } \\ \text { 6:00pm } \end{gathered}$ | $\begin{gathered} \text { 6:00- } \\ \text { 6:15pm } \end{gathered}$ | $\begin{gathered} \text { 6:15- } \\ \text { 6:30pm } \end{gathered}$ |
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84. Does your service provide any other physical activities not already listed during the afterschool care session? [List includes: energetic play indoors, energetic play outdoors, staff led games, playground inside, playground outside, sports equipment] If YES prompts to provide time and specify the activity, if NO skips to next question
85. Please select the time available and Specify the activity:

| $\begin{gathered} \text { 3:00- } \\ \text { 3:15pm } \end{gathered}$ | $\begin{gathered} 3: 15- \\ 3: 30 \mathrm{pm} \end{gathered}$ | $\begin{gathered} 3: 30- \\ 3: 45 \mathrm{pm} \end{gathered}$ | $\begin{gathered} 3: 45- \\ 4: 00 \mathrm{pm} \end{gathered}$ | $\begin{gathered} \text { 4:00 - } \\ \text { 4:15pm } \end{gathered}$ | $\begin{gathered} \text { 4:15- } \\ \text { 4:30pm } \end{gathered}$ | $\begin{gathered} 4: 30- \\ 4: 45 \mathrm{pm} \end{gathered}$ | $\begin{gathered} \text { 4:45- } \\ \text { 5:00pm } \end{gathered}$ | $\begin{gathered} 5: 00- \\ 5: 15 \mathrm{pm} \end{gathered}$ | $\begin{gathered} 5: 15- \\ 5: 30 \mathrm{pm} \end{gathered}$ | $\begin{gathered} 5: 30- \\ 5: 45 \mathrm{pm} \end{gathered}$ | $\begin{aligned} & \text { 5:45- } \\ & \text { 6:00pm } \end{aligned}$ | $\begin{gathered} \text { 6:00- } \\ \text { 6:15pm } \end{gathered}$ | $\begin{gathered} \text { 6:15- } \\ \text { 6:30pm } \end{gathered}$ |
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86. Does your service provide any other physical activities not already listed during the afterschool care session? [List includes: energetic play indoors, energetic play outdoors, staff led games, playground inside, playground outside, sports equipment] If YES prompts to provide time and specify the activity, if NO skips to next question
87. Please select the time available and Specify the activity:

| $\begin{gathered} 3: 00- \\ 3: 15 \mathrm{pm} \end{gathered}$ | $\begin{gathered} 3: 15- \\ 3: 30 \mathrm{pm} \end{gathered}$ | $\begin{gathered} 3: 30- \\ 3: 45 \mathrm{pm} \end{gathered}$ | $\begin{gathered} 3: 45- \\ 4: 00 \mathrm{pm} \end{gathered}$ | $\begin{gathered} \text { 4:00 - } \\ \text { 4:15pm } \end{gathered}$ | $\begin{gathered} \text { 4:15- } \\ \text { 4:30pm } \end{gathered}$ | $\begin{gathered} 4: 30- \\ 4: 45 \mathrm{pm} \end{gathered}$ | $\begin{gathered} \text { 4:45- } \\ \text { 5:00pm } \end{gathered}$ | $\begin{gathered} 5: 00- \\ 5: 15 \mathrm{pm} \end{gathered}$ | $\begin{gathered} \text { 5:15- } \\ \text { 5:30pm } \end{gathered}$ | $\begin{gathered} 5: 30- \\ 5: 45 \mathrm{pm} \end{gathered}$ | $\begin{aligned} & \text { 5:45- } \\ & \text { 6:00pm } \end{aligned}$ | $\begin{gathered} \text { 6:00 - } \\ \text { 6:15pm } \end{gathered}$ | $\begin{gathered} \text { 6:15 - } \\ \text { 6:30pm } \end{gathered}$ |
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88. Does your OSHC service provide Recreational Screen Time (e.g. TV/DVD, computer use) opportunities during After School Care?

If YES, prompts you to complete the questions, if NO skips to Sedentary Activities
89. Do you allow TV/DVD viewing? If YES prompts to provide time, if NO skips to next question
90. Please select the time available:

| $\begin{gathered} 3: 00- \\ 3: 15 \mathrm{pm} \end{gathered}$ | $\begin{gathered} 3: 15- \\ 3: 30 \mathrm{pm} \end{gathered}$ | $\begin{gathered} 3: 30- \\ 3: 45 \mathrm{pm} \end{gathered}$ | $\begin{gathered} 3: 45- \\ \text { 4:00pm } \end{gathered}$ | $\begin{gathered} \text { 4:00- } \\ \text { 4:15pm } \end{gathered}$ | $\begin{gathered} \text { 4:15- } \\ \text { 4:30pm } \end{gathered}$ | $\begin{gathered} \text { 4:30- } \\ \text { 4:45pm } \end{gathered}$ | $\begin{gathered} \text { 4:45- } \\ \text { 5:00pm } \end{gathered}$ | $\begin{gathered} \text { 5:00- } \\ \text { 5:15pm } \end{gathered}$ | $\begin{gathered} \text { 5:15- } \\ \text { 5:30pm } \end{gathered}$ | $\begin{gathered} 5: 30- \\ 5: 45 \mathrm{pm} \end{gathered}$ | $\begin{aligned} & \text { 5:45- } \\ & \text { 6:00pm } \end{aligned}$ | $\begin{gathered} \text { 6:00- } \\ \text { 6:15pm } \end{gathered}$ | $\begin{gathered} \text { 6:15- } \\ \text { 6:30pm } \end{gathered}$ |
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91. Do you allow use of ipads/tablets? If YES prompts to provide time, if NO skips to next question
92. Please select the time available:

| $\begin{gathered} 3: 00- \\ 3: 15 \mathrm{pm} \end{gathered}$ | $\begin{gathered} 3: 15- \\ 3: 30 \mathrm{pm} \end{gathered}$ | $\begin{gathered} 3: 30- \\ 3: 45 \mathrm{pm} \end{gathered}$ | $\begin{gathered} 3: 45- \\ 4: 00 \mathrm{pm} \end{gathered}$ | $\begin{gathered} \text { 4:00- } \\ \text { 4:15pm } \end{gathered}$ | $\begin{gathered} \text { 4:15- } \\ \text { 4:30pm } \end{gathered}$ | $\begin{gathered} 4: 30- \\ 4: 45 \mathrm{pm} \end{gathered}$ | $\begin{gathered} \text { 4:45- } \\ \text { 5:00pm } \end{gathered}$ | $\begin{gathered} 5: 00- \\ 5: 15 \mathrm{pm} \end{gathered}$ | $\begin{gathered} 5: 15- \\ 5: 30 \mathrm{pm} \end{gathered}$ | $\begin{gathered} 5: 30- \\ 5: 45 \mathrm{pm} \end{gathered}$ | $\begin{aligned} & \text { 5:45- } \\ & \text { 6:00pm } \end{aligned}$ | $\begin{gathered} \text { 6:00- } \\ \text { 6:15pm } \end{gathered}$ | $\begin{gathered} \text { 6:15- } \\ \text { 6:30pm } \end{gathered}$ |
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93. Do you allow use of computers (not for homework)? If YES prompts to provide time, if NO skips to next question
94. Please select the time available:

| $\begin{gathered} 3: 00- \\ 3: 15 p m \end{gathered}$ | $\begin{gathered} 3: 15- \\ 3: 30 \mathrm{pm} \end{gathered}$ | $\begin{gathered} 3: 30- \\ 3: 45 \mathrm{pm} \end{gathered}$ | $\begin{gathered} \text { 3:45- } \\ 4: 00 \mathrm{pm} \end{gathered}$ | $\begin{gathered} \text { 4:00- } \\ \text { 4:15pm } \end{gathered}$ | $\begin{gathered} \text { 4:15- } \\ \text { 4:30pm } \end{gathered}$ | $\begin{aligned} & \text { 4:30- } \\ & \text { 4:45pm } \end{aligned}$ | $\begin{gathered} \text { 4:45- } \\ \text { 5:00pm } \end{gathered}$ | $\begin{gathered} 5: 00- \\ 5: 15 \mathrm{pm} \end{gathered}$ | $\begin{gathered} \text { 5:15- } \\ \text { 5:30pm } \end{gathered}$ | $\begin{gathered} 5: 30- \\ 5: 45 \mathrm{pm} \end{gathered}$ | $\begin{aligned} & \text { 5:45- } \\ & \text { 6:00pm } \end{aligned}$ | $\begin{gathered} \text { 6:00 - } \\ \text { 6:15pm } \end{gathered}$ | $\begin{gathered} \text { 6:15- } \\ \text { 6:30pm } \end{gathered}$ |
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95. Do you allow access to seated video games? If YES prompts to provide time, if NO skips to next question 96. Please select the time available:

| $\begin{gathered} 3: 00- \\ 3: 15 \mathrm{pm} \end{gathered}$ | $\begin{gathered} \text { 3:15- } \\ \text { 3:30pm } \end{gathered}$ | $\begin{gathered} 3: 30- \\ 3: 45 \mathrm{pm} \end{gathered}$ | $\begin{gathered} \text { 3:45-} \\ \text { 4:00pm } \end{gathered}$ | $\begin{gathered} \text { 4:00- } \\ \text { 4:15pm } \end{gathered}$ | $\begin{gathered} \text { 4:15- } \\ \text { 4:30pm } \end{gathered}$ | $\begin{gathered} \text { 4:30- } \\ \text { 4:45pm } \end{gathered}$ | $\begin{gathered} \text { 4:45- } \\ \text { 5:00pm } \end{gathered}$ | $\begin{gathered} \text { 5:00 - } \\ \text { 5:15pm } \end{gathered}$ | $\begin{gathered} \text { 5:15- } \\ \text { 5:30pm } \end{gathered}$ | $\begin{gathered} 5: 30- \\ \text { 5:45pm } \end{gathered}$ | $\begin{aligned} & \text { 5:45- } \\ & \text { 6:00pm } \end{aligned}$ | $\begin{gathered} \text { 6:00- } \\ \text { 6:15pm } \end{gathered}$ | $\begin{gathered} \text { 6:15 - } \\ \text { 6:30pm } \end{gathered}$ |
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97. Do you allow access to standing/active video games? If YES prompts to provide time, if NO skips to next question
98. Please select the time available:

| $\begin{gathered} 3: 00- \\ 3: 15 \mathrm{pm} \end{gathered}$ | $\begin{gathered} 3: 15- \\ 3: 30 \mathrm{pm} \end{gathered}$ | $\begin{gathered} 3: 30- \\ 3: 45 \mathrm{pm} \end{gathered}$ | $\begin{gathered} 3: 45- \\ 4: 00 \mathrm{pm} \end{gathered}$ | $\begin{gathered} \text { 4:00- } \\ \text { 4:15pm } \end{gathered}$ | $\begin{gathered} \text { 4:15 - } \\ \text { 4:30pm } \end{gathered}$ | $\begin{gathered} \text { 4:30- } \\ \text { 4:45pm } \end{gathered}$ | $\begin{gathered} \text { 4:45 - } \\ \text { 5:00pm } \end{gathered}$ | $\begin{gathered} 5: 00- \\ 5: 15 \mathrm{pm} \end{gathered}$ | $\begin{gathered} \text { 5:15- } \\ \text { 5:30pm } \end{gathered}$ | $\begin{gathered} 5: 30- \\ 5: 45 \mathrm{pm} \end{gathered}$ | $\begin{gathered} \text { 5:45- } \\ \text { 6:00pm } \end{gathered}$ | $\begin{gathered} \text { 6:00- } \\ \text { 6:15pm } \end{gathered}$ | $\begin{gathered} 6: 15- \\ \text { 6:30 pm } \end{gathered}$ |
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99. Does your service provide any other recreational screen activities not already listed ? [Listed: TV/DVD viewing, Computer Use,
ipads/tablets, Video games seated, Video games standing ] If YES prompts to provide time, if NO skips to next question
100. Please select the time available:

| $\begin{gathered} 3: 00- \\ 3: 15 p m \end{gathered}$ | $\begin{gathered} 3: 15- \\ 3: 30 \mathrm{pm} \end{gathered}$ | $\begin{gathered} 3: 30- \\ 3: 45 \mathrm{pm} \end{gathered}$ | $\begin{gathered} \text { 3:45 - } \\ \text { 4:00pm } \end{gathered}$ | $\begin{gathered} \text { 4:00- } \\ \text { 4:15pm } \end{gathered}$ | $\begin{gathered} \text { 4:15 - } \\ \text { 4:30pm } \end{gathered}$ | $\begin{gathered} 4: 30- \\ 4: 45 \mathrm{pm} \end{gathered}$ | $\begin{gathered} \text { 4:45- } \\ \text { 5:00pm } \end{gathered}$ | $\begin{gathered} \text { 5:00- } \\ \text { 5:15pm } \end{gathered}$ | $\begin{gathered} \text { 5:15- } \\ \text { 5:30pm } \end{gathered}$ | $\begin{gathered} \text { 5:30- } \\ \text { 5:45pm } \end{gathered}$ | $\begin{gathered} \text { 5:45- } \\ \text { 6:00pm } \end{gathered}$ | $\begin{gathered} \text { 6:00- } \\ \text { 6:15pm } \end{gathered}$ | $\begin{gathered} \text { 6:15 - } \\ \text { 6:30pm } \end{gathered}$ |
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101. Does your service provide any other recreational screen activities not already listed ? [Listed: TV/DVD viewing, Computer Use, ipads/tablets, Video games seated, Video games standing ] If YES prompts to provide time and specify the activity, if NO skips to next question
102. Please select the time available and specify the activity:

| $\begin{gathered} 3: 00- \\ 3: 15 \mathrm{pm} \end{gathered}$ | $\begin{gathered} 3: 15- \\ 3: 30 \mathrm{pm} \end{gathered}$ | $\begin{gathered} 3: 30- \\ 3: 45 \mathrm{pm} \end{gathered}$ | $\begin{gathered} \text { 3:45-} \\ \text { 4:00pm } \end{gathered}$ | $\begin{gathered} \text { 4:00- } \\ \text { 4:15pm } \end{gathered}$ | $\begin{gathered} \text { 4:15 - } \\ \text { 4:30pm } \end{gathered}$ | $\begin{gathered} \text { 4:30- } \\ \text { 4:45pm } \end{gathered}$ | $\begin{gathered} \text { 4:45- } \\ \text { 5:00pm } \end{gathered}$ | $\begin{gathered} 5: 00- \\ \text { 5:15pm } \end{gathered}$ | $\begin{gathered} \text { 5:15- } \\ \text { 5:30pm } \end{gathered}$ | $\begin{gathered} 5: 30- \\ 5: 45 \mathrm{pm} \end{gathered}$ | $\begin{gathered} \text { 5:45- } \\ \text { 6:00pm } \end{gathered}$ | $\begin{aligned} & \text { 6:00- } \\ & \text { 6:15pm } \end{aligned}$ | $\begin{gathered} \text { 6:15- } \\ \text { 6:30pm } \end{gathered}$ |
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103. Does your service provide any other recreational screen activities not already listed ? [Listed: TV/DVD viewing, Computer Use ipads/tablets, Video games seated, Video games standing ] If YES prompts to provide time and specify the activity, if NO skips to next question
104. Please select the time available and specify the activity:

| $\begin{gathered} 3: 00- \\ 3: 15 \mathrm{pm} \end{gathered}$ | $\begin{gathered} 3: 15- \\ 3: 30 \mathrm{pm} \end{gathered}$ | $\begin{gathered} 3: 30- \\ 3: 45 \mathrm{pm} \end{gathered}$ | $\begin{gathered} \text { 3:45- } \\ \text { 4:00pm } \end{gathered}$ | $\begin{gathered} \text { 4:00 - } \\ 4: 15 \mathrm{pm} \end{gathered}$ | $\begin{gathered} \text { 4:15- } \\ \text { 4:30pm } \end{gathered}$ | $\begin{gathered} \text { 4:30- } \\ 4: 45 \mathrm{pm} \end{gathered}$ | $\begin{gathered} \text { 4:45- } \\ \text { 5:00pm } \end{gathered}$ | $\begin{gathered} 5: 00- \\ 5: 15 \mathrm{pm} \end{gathered}$ | $\begin{gathered} \text { 5:15- } \\ \text { 5:30pm } \end{gathered}$ | $\begin{gathered} 5: 30- \\ 5: 45 \mathrm{pm} \end{gathered}$ | $\begin{aligned} & \text { 5:45- } \\ & \text { 6:00pm } \end{aligned}$ | $\begin{gathered} \text { 6:00- } \\ \text { 6:15pm } \end{gathered}$ | $\begin{gathered} \text { 6:15- } \\ \text { 6:30pm } \end{gathered}$ |
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105. Does your OSHC service provide Sedentary Activities (e.g. board games/lego/indoor toys) during After School Care? If YES, prompts you to complete the questions, if NO skips to After School Care
106. Does your service provide arts and crafts? If YES prompts to provide time, if NO skips to next question
107. Please select the time available:

| $\begin{gathered} \text { 3:00- } \\ \text { 3:15pm } \end{gathered}$ | $\begin{gathered} 3: 15- \\ 3: 30 \mathrm{pm} \end{gathered}$ | $\begin{gathered} 3: 30- \\ 3: 45 \mathrm{pm} \end{gathered}$ | $\begin{gathered} 3: 45- \\ 4: 00 \mathrm{pm} \end{gathered}$ | $\begin{gathered} \text { 4:00 - } \\ 4: 15 \text { pm } \end{gathered}$ | $\begin{gathered} \text { 4:15- } \\ \text { 4:30pm } \end{gathered}$ | $\begin{gathered} 4: 30- \\ 4: 45 \mathrm{pm} \end{gathered}$ | $\begin{gathered} \text { 4:45- } \\ \text { 5:00pm } \end{gathered}$ | $\begin{gathered} 5: 00- \\ 5: 15 \mathrm{pm} \end{gathered}$ | $\begin{gathered} 5: 15- \\ \text { 5:30pm } \end{gathered}$ | $\begin{gathered} 5: 30- \\ 5: 45 \mathrm{pm} \end{gathered}$ | $\begin{aligned} & \text { 5:45- } \\ & \text { 6:00pm } \end{aligned}$ | $\begin{gathered} \text { 6:00- } \\ \text { 6:15pm } \end{gathered}$ | $\begin{gathered} \text { 6:15- } \\ \text { 6:30pm } \end{gathered}$ |
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108. Does your service provide cooking/food preparation activities? If YES prompts to provide time, if NO skips to next question
109. Please select the time available:

| $\begin{gathered} 3: 00- \\ 3: 15 p m \end{gathered}$ | $\begin{gathered} 3: 15- \\ 3: 30 \mathrm{pm} \end{gathered}$ | $\begin{gathered} \text { 3:30- } \\ \text { 3:45pm } \end{gathered}$ | $\begin{gathered} \text { 3:45 - } \\ 4: 00 \mathrm{pm} \end{gathered}$ | 4:00 - | 4:15 - | $\begin{gathered} 4: 30- \\ 4: 45 \mathrm{pm} \end{gathered}$ | $4: 45-$ | $\begin{gathered} \text { 5:00- } \\ \text { 5:15pm } \end{gathered}$ | $\begin{gathered} \text { 5:15 - } \\ \text { 5:30pm } \end{gathered}$ | $\begin{gathered} 5: 30- \\ 5: 45 \mathrm{pm} \end{gathered}$ | $\begin{aligned} & \text { 5:45- } \\ & \text { 6:00pm } \end{aligned}$ | $\begin{gathered} \text { 6:00 - } \\ \text { 6:15pm } \end{gathered}$ | 6:15 - |
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| 110. Does your service provide board games / lego / construction activities? If YES prompts to provide time, if NO skips to next question |  |  |  |  |  |  |  |  |  |  |  |  |  |
| $\begin{gathered} 3: 00- \\ 3: 15 \mathrm{pm} \end{gathered}$ | $\begin{gathered} 3: 15- \\ 3: 30 \mathrm{pm} \end{gathered}$ | $\begin{gathered} 3: 30- \\ 3: 45 \mathrm{pm} \end{gathered}$ | $\begin{gathered} 3: 45- \\ 4: 00 \mathrm{pm} \end{gathered}$ | $\begin{gathered} 4: 00- \\ \text { 4:15pm } \end{gathered}$ | $\begin{gathered} \text { 4:15- } \\ \text { 4:30pm } \end{gathered}$ | $\begin{gathered} 4: 30- \\ 4: 45 \mathrm{pm} \end{gathered}$ | $\begin{gathered} \text { 4:45- } \\ \text { 5:00pm } \\ \hline \end{gathered}$ | $\begin{gathered} \text { 5:00- } \\ \text { 5:15pm } \\ \hline \end{gathered}$ | $\begin{gathered} 5: 15- \\ \text { 5:30pm } \end{gathered}$ | $\begin{gathered} 5: 30- \\ 5: 45 \mathrm{pm} \end{gathered}$ | $\begin{gathered} \text { 5:45- } \\ \text { 6:00pm } \end{gathered}$ | $\begin{gathered} \text { 6:00- } \\ \text { 6:15pm } \end{gathered}$ | $\begin{gathered} \text { 6:15 - } \\ \text { 6:30pm } \end{gathered}$ |
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| 112. Does your service assist with homework/reading? If YES prompts to provide time, if NO skips to next question <br> 113. Please select the time available: |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| $\begin{gathered} 3: 00- \\ 3: 15 \mathrm{pm} \end{gathered}$ | $\begin{gathered} 3: 15- \\ 3: 30 \mathrm{pm} \end{gathered}$ | $\begin{gathered} 3: 30- \\ 3: 45 p m \end{gathered}$ | $\begin{gathered} 3: 45- \\ \text { 4:00pm } \end{gathered}$ | $\begin{gathered} 4: 00- \\ 4: 15 \mathrm{pm} \end{gathered}$ | $\begin{gathered} \text { 4:15 - } \\ \text { 4:30pm } \end{gathered}$ | $\begin{gathered} 4: 30- \\ 4: 45 \mathrm{pm} \end{gathered}$ | $\begin{gathered} \text { 4:45- } \\ \text { 5:00pm } \end{gathered}$ | $\begin{gathered} 5: 00- \\ 5: 15 \mathrm{pm} \end{gathered}$ | $\begin{gathered} 5: 15- \\ \text { 5:30pm } \end{gathered}$ | $\begin{gathered} 5: 30- \\ 5: 45 \mathrm{pm} \end{gathered}$ | $\begin{gathered} \text { 5:45- } \\ \text { 6:00pm } \end{gathered}$ | $\begin{gathered} \text { 6:00- } \\ \text { 6:15pm } \end{gathered}$ | $\begin{gathered} \text { 6:15 - } \\ \text { 6:30pm } \end{gathered}$ |
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114. Does your service provide time/space for children to do homework/reading without assistance? If YES prompts to provide time, if NO skips to next question
115. Please select the time available:

| $\begin{gathered} 3: 00- \\ 3: 15 \mathrm{pm} \end{gathered}$ | $\begin{gathered} 3: 15- \\ 3: 30 \mathrm{pm} \end{gathered}$ | $\begin{gathered} 3: 30- \\ 3: 45 \mathrm{pm} \end{gathered}$ | $\begin{gathered} \text { 3:45-} \\ \text { 4:00pm } \end{gathered}$ | $\begin{gathered} \text { 4:00 - } \\ 4: 15 \mathrm{pm} \end{gathered}$ | $\begin{gathered} \text { 4:15 - } \\ \text { 4:30pm } \end{gathered}$ | $\begin{gathered} \text { 4:30- } \\ 4: 45 \text { pm } \end{gathered}$ | $\begin{gathered} \text { 4:45- } \\ \text { 5:00pm } \end{gathered}$ | $\begin{gathered} \text { 5:00- } \\ \text { 5:15pm } \end{gathered}$ | $\begin{gathered} \text { 5:15 - } \\ \text { 5:30pm } \end{gathered}$ | $\begin{gathered} 5: 30- \\ 5: 45 \mathrm{pm} \end{gathered}$ | $\begin{aligned} & \text { 5:45- } \\ & \text { 6:00pm } \end{aligned}$ | $\begin{gathered} \text { 6:00 - } \\ \text { 6:15pm } \end{gathered}$ | $\begin{gathered} \text { 6:15 - } \\ \text { 6:30pm } \end{gathered}$ |
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116. Does your service provide role play / dress up opportunities? If YES prompts to provide time, if NO skips to next question
117. Please select the time available:

| $\begin{gathered} 3: 00- \\ 3: 15 \mathrm{pm} \end{gathered}$ | $\begin{gathered} 3: 15- \\ 3: 30 \mathrm{pm} \end{gathered}$ | $\begin{gathered} 3: 30- \\ 3: 45 \mathrm{pm} \end{gathered}$ | $\begin{gathered} 3: 45- \\ 4: 00 \mathrm{pm} \end{gathered}$ | $\begin{gathered} \text { 4:00 - } \\ 4: 15 \mathrm{pm} \end{gathered}$ | $\begin{gathered} \text { 4:15- } \\ \text { 4:30pm } \end{gathered}$ | $\begin{gathered} \text { 4:30- } \\ 4: 45 \mathrm{pm} \end{gathered}$ | $\begin{gathered} \text { 4:45- } \\ \text { 5:00pm } \end{gathered}$ | $\begin{gathered} 5: 00- \\ 5: 15 \mathrm{pm} \end{gathered}$ | $\begin{gathered} 5: 15- \\ \text { 5:30pm } \end{gathered}$ | $\begin{gathered} 5: 30- \\ 5: 45 \mathrm{pm} \end{gathered}$ | $\begin{aligned} & \text { 5:45- } \\ & \text { 6:00pm } \end{aligned}$ | $\begin{gathered} \text { 6:00- } \\ \text { 6:15pm } \end{gathered}$ | $\begin{gathered} \text { 6:15 - } \\ \text { 6:30pm } \end{gathered}$ |
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118. Does your service provide opportunities to listen/play music? If YES prompts to provide time, if NO skips to next question
119. Please select the time available:

| $\begin{gathered} 3: 00- \\ 3: 15 \mathrm{pm} \end{gathered}$ | $\begin{gathered} 3: 15- \\ 3: 30 \mathrm{pm} \end{gathered}$ | $\begin{gathered} 3: 30- \\ 3: 45 \mathrm{pm} \end{gathered}$ | $\begin{gathered} 3: 45- \\ \text { 4:00pm } \end{gathered}$ | $\begin{gathered} \text { 4:00- } \\ \text { 4:15pm } \end{gathered}$ | $\begin{gathered} \text { 4:15- } \\ \text { 4:30pm } \end{gathered}$ | $\begin{gathered} 4: 30- \\ 4: 45 \mathrm{pm} \end{gathered}$ | $\begin{gathered} \text { 4:45- } \\ \text { 5:00pm } \end{gathered}$ | $\begin{gathered} \text { 5:00 - } \\ \text { 5:15pm } \end{gathered}$ | $\begin{gathered} \text { 5:15- } \\ \text { 5:30pm } \end{gathered}$ | $\begin{gathered} 5: 30- \\ 5: 45 \mathrm{pm} \end{gathered}$ | $\begin{aligned} & \text { 5:45- } \\ & \text { 6:00pm } \end{aligned}$ | $\begin{gathered} \text { 6:00- } \\ \text { 6:15pm } \end{gathered}$ | $\begin{gathered} \text { 6:15- } \\ \text { 6:30pm } \end{gathered}$ |
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120. Does your service provide indoor freeplay? If YES prompts to provide time, if NO skips to next question
121. Please select the time available:

| 3:00- | $3: 15-$ | $3: 30-$ | $3: 45-$ | $4: 00-$ | $4: 15-$ | $4: 30-$ | $4: 45-$ | 5:00- | 5:15- | 5:30- | 5:45- | 6:00- | 6:15- |
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| 3:15pm | $3: 30 p m$ | $3: 45 p m$ | $4: 00$ pm | $4: 15 p m$ | $4: 30$ pm | 4:45pm | 5:00pm | 5:15pm | 5:30pm | 5:45pm | 6:00pm | 6:15pm | 6:30pm |
| 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |

122. Does your service provide any other sedentary activities not already listed during the after school care session? [Listed: Breakfast, Arts/Crafts, Cooking/Food preparation, Boardgames/lego, Homework/reading with assistance, Homework/reading without assistance, Role play/dress ups, Listening to music/playing music, Indoor freeplay] If YES prompts to provide time, if NO skips to next question (Draft Guidelines)
123. Please select the time available and specify the activity:

| $\begin{gathered} 3: 00- \\ 3: 15 \mathrm{pm} \end{gathered}$ | $\begin{gathered} \text { 3:15- } \\ \text { 3:30pm } \end{gathered}$ | $\begin{gathered} 3: 30- \\ 3: 45 \mathrm{pm} \end{gathered}$ | $\begin{gathered} 3: 45- \\ 4: 00 \mathrm{pm} \end{gathered}$ | $\begin{gathered} \text { 4:00- } \\ \text { 4:15pm } \end{gathered}$ | $\begin{gathered} 4: 15- \\ 4: 30 \mathrm{pm} \\ \hline \end{gathered}$ | $\begin{gathered} 4: 30- \\ 4: 45 \mathrm{pm} \end{gathered}$ | $\begin{gathered} \text { 4:45- } \\ \text { 5:00pm } \end{gathered}$ | $\begin{gathered} 5: 00- \\ \text { 5:15pm } \end{gathered}$ | $\begin{gathered} \text { 5:15- } \\ \text { 5:30pm } \end{gathered}$ | $\begin{gathered} \text { 5:30- } \\ \text { 5:45pm } \end{gathered}$ | $\begin{aligned} & \text { 5:45- } \\ & \text { 6:00pm } \end{aligned}$ | $\begin{gathered} \text { 6:00- } \\ \text { 6:15pm } \end{gathered}$ | $\begin{gathered} \text { 6:15- } \\ \text { 6:30pm } \end{gathered}$ |
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124. Does your service provide any other sedentary activities not already listed during the after school care session? [Listed: Breakfast, Arts/Crafts, Cooking/Food preparation, Boardgames/lego, Homework/reading with assistance, Homework/reading without assistance, Role play/dress ups, Listening to music/playing music, Indoor freeplay] If YES prompts to provide time, if NO skips to next question (Draft Guidelines)
125. please select the time available and specify the activity:

| $\begin{gathered} 3: 00- \\ 3: 15 \mathrm{pm} \end{gathered}$ | $\begin{gathered} 3: 15- \\ 3: 30 \mathrm{pm} \end{gathered}$ | $\begin{gathered} 3: 30- \\ 3: 45 \mathrm{pm} \end{gathered}$ | $\begin{gathered} \text { 3:45- } \\ 4: 00 \mathrm{pm} \end{gathered}$ | $\begin{gathered} \text { 4:00 - } \\ \text { 4:15pm } \end{gathered}$ | $\begin{gathered} \text { 4:15 - } \\ \text { 4:30pm } \end{gathered}$ | $\begin{gathered} \text { 4:30- } \\ 4: 45 \mathrm{pm} \end{gathered}$ | $\begin{gathered} \text { 4:45- } \\ \text { 5:00pm } \end{gathered}$ | $\begin{gathered} 5: 00- \\ 5: 15 \mathrm{pm} \end{gathered}$ | $\begin{gathered} 5: 15- \\ 5: 30 \mathrm{pm} \end{gathered}$ | $\begin{gathered} 5: 30- \\ 5: 45 \mathrm{pm} \end{gathered}$ | $\begin{aligned} & \text { 5:45- } \\ & \text { 6:00pm } \end{aligned}$ | $\begin{gathered} \text { 6:00- } \\ \text { 6:15pm } \end{gathered}$ | $\begin{gathered} \text { 6:15 - } \\ \text { 6:30pm } \end{gathered}$ |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |

126. Does your service provide any other sedentary activities not already listed during the after school care session? [Listed: Breakfast, Arts/Crafts, Cooking/Food preparation, Boardgames/lego, Homework/reading with assistance, Homework/reading without assistance, Role play/dress ups, Listening to music/playing music, Indoor freeplay] If YES prompts to provide time, if NO skips to next question (Draft Guidelines)
127. please select the time available and specify the activity:

| $\begin{gathered} 3: 00- \\ 3: 15 \mathrm{pm} \end{gathered}$ | $\begin{gathered} 3: 15- \\ 3: 30 \mathrm{pm} \end{gathered}$ | $\begin{gathered} 3: 30- \\ 3: 45 \mathrm{pm} \end{gathered}$ | $\begin{gathered} 3: 45- \\ 4: 00 \mathrm{pm} \end{gathered}$ | $\begin{gathered} \text { 4:00 - } \\ \text { 4:15pm } \end{gathered}$ | $\begin{gathered} \text { 4:15- } \\ \text { 4:30pm } \end{gathered}$ | $\begin{gathered} \text { 4:30- } \\ 4: 45 \mathrm{pm} \end{gathered}$ | $\begin{gathered} \text { 4:45- } \\ \text { 5:00pm } \end{gathered}$ | $\begin{gathered} 5: 00- \\ 5: 15 \mathrm{pm} \end{gathered}$ | $\begin{gathered} 5: 15- \\ 5: 30 \mathrm{pm} \end{gathered}$ | $\begin{gathered} 5: 30- \\ 5: 45 \mathrm{pm} \end{gathered}$ | $\begin{aligned} & \text { 5:45- } \\ & \text { 6:00pm } \end{aligned}$ | $\begin{gathered} \text { 6:00- } \\ \text { 6:15pm } \end{gathered}$ | $\begin{gathered} \text { 6:15 - } \\ \text { 6:30pm } \end{gathered}$ |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| ○ | O | 0 | O | O | ○ | $\bigcirc$ | $\bigcirc$ | $\bigcirc$ | $\bigcirc$ | - | $\bigcirc$ | - | ○ |

128. Please provide any other comments about activity scheduling during After School Care:

## DRAFT GUIDELINES

The following are guidelines developed by our team through a stakeholder consultation process. In this process we surveyed several OSHC educators, parents, researchers, health professional and academics and combined this with the best available evidence to provide these guidelines as a suggestion for how to improve physical activity and screen time practices in OSHC

| Session | Physical Activity | Recreational Screen Time* |
| :--- | :--- | :--- |
| Before School Care | Schedule 45 minutes of <br> time for children to <br> engage in a variety of <br> physical activities <br> including energetic <br> play. More is better. | Discourage children from engaging with <br> screens, with total screen time no more <br> than $\mathbf{3 0}$ minutes. Less is better. |
| After School Care | Schedule 90 minutes of <br> time for children to <br> engage in a variety of <br> physical activities, <br> including energetic <br> play. More is better. | Discourage children from engaging with <br> screens, with total screen time no more <br> than 60 minutes. Less is better. |
| Vacation Care | Throughout the day <br> schedule at least 3 <br> hours of time for <br> children to engage in a <br> variety of physical <br> activities, including <br> energetic play. More is <br> better. | Discourage children from engaging with <br> screens. No more than $\mathbf{2}$ hours over the <br> entire day. Less is better. |

After having read these guidelines, what are your overall thoughts/opinions/comments?
Please select the comment you agree with most:
129. For Before School Care, the physical activity recommendation is:
a. too high
b. just right
c. too low

Please explain your answer:
130. For After School care, the physical activity recommendation is:
a) too high
b) just right
c) too low

Please explain your answer:
131. For Vacation Care, the physical activity recommendation is:
a) too high
b) just right
c) too low

Please explain your answer:
132. Do you have any additional comments with regard to the physical activity time recommendations in any aspect of OSHC?

Please select the comment you agree with most:
133. For Before School Care, the screen time recommendation is:
a. too high
b. just right
c. too low

Please explain your answer:
134. For After School care, the screen time recommendation is:
d) too high
e) just right
f) too low

Please explain your answer:
135. For Vacation Care, the screen time recommendation is:
d) too high
e) just right
f) too low

Please explain your answer:
136. Do you have any additional comments with regard to the screen time recommendation in any aspect of OSHC?:
137. Please provide feedback on the wording of the physical activity recommendations:
138. Please provide feedback on the wording of the screen time recommendations:
139. How confident are you that you could adjust your programming to suit these physical activity recommendations? (1 not at all, 5 very confident)

| Not <br> at <br> all | Not <br> confident | Neutral | Confident | Very <br> confident |
| :---: | :---: | :---: | :---: | :---: |
| 1 | 2 | 3 | 4 | 5 |

Please justify your answer (long text):
140. How confident are you that you could adjust your programming to suit these recreational screen time recommendations? (1 not at all, 5 very confident)

| Not <br> at <br> all | Not <br> confident | Neutral | Confident | Very <br> confident |
| :---: | :---: | :---: | :---: | :---: |
| 1 | 2 | 3 | 4 | 5 |

Please justify your answer(long text):
141. What would be the most appropriate way to communicate the guidelines and recommendations to staff? (select all that apply)

- Face to face workshop
- Online workshop
- Video Tutorial
- From a supervisor at work
- Written material to read in own time
- Combination of all the above

140. Do you have any additional comments/suggestions?
141. What duration of session length is appropriate for this staff training?

- 30 mins
- 60 mins
- 2 hours
- 3 hours

142. What types of educational/training materials would be appropriate for staff and the OSHC centre to help implement the guidelines? (select all that apply)

- Online training
- Electronic resources
- Printed resources for staff (posters, cards, folders)
- Printed resources for children (posters, cards, folders)
- Other please specify:

143. Please comment on what is important to consider as part of staff training (open, long text):
144. Please rank what you consider to be the top 3 barriers to implementing these guidelines:

- Indoor play space
- Behaviour management
- Family attitudes
- Children's attitudes
- Staffing beliefs
- Workplace culture
- Other

145. Please rank what you consider to be the top 3 enablers to implementing these guidelines:

- Adequate and appropriate training for who?
- Staff understanding of the guidelines
- OSHC families education and understanding of the guidelines
- Workplace policy
- Other

