The Port Broughton Area School Governing Council are investigating an Out of School Hours Care (OSHC) service and are conducting this very important survey to determine the need for care in our community.

An OSHC service may offer care: before school and/or after school and/or on pupil-free days and/or during school holidays.

OSHC services provide supervised recreational activities and care for school age children using a range of appropriate activities which encourage children to interact with friends, learn life skills, problem solve and be challenged by new experiences in a safe and relaxed environment.

OSHC services must meet the requirements of the Australian Government's National Quality Framework for Early Childhood Education and Care and are regulated by the Education and Early Childhood Services Registration and Standards Board of South Australia.

The National Quality Framework includes a National Quality Standard which is divided into seven quality areas:

1. Educational program and practice
2. Children's health and safety
3. Physical environment
4. Staffing arrangements
5. Relationships with children
6. Collaborative partnerships with families and communities
7. Leadership and service management.

In OSHC the educational program and practice is guided by an approved national learning framework, My Time Our Place: Framework for School Age Care in Australia.

Attendance in OSHC can be on a casual, part-time, regular or emergency basis.

There is a cost for care and varies depending on the fee set by the service and the income of the family. Families of children attending an OSHC service may be eligible for financial assistance towards the part payment of child care fees through the Australian Government's Child Care Benefit and Child Care Rebate. For more information about Child Care Benefit or Child Care Rebate please visit www.mychild.gov.au/childcarerebate

The information you provide will enable us to make an informed decision in establishing the best service to meet the families' needs of our growing community of Port Broughton.

Please complete and return the survey by: Friday 10th 2015 to the front office of the school PBAS, 12 East Terrace, Port Broughton SA 5522 or Email: dl0741_info@schools.sa.edu.au
Survey

TO BE COMPLETED BY PARENT/GUARDIAN

1. Do you currently use an out of school hours care service or have other child care arrangements in place i.e. Family Day Care, child care, private paid care, neighbours/friends/family?

Yes / No

Please provide detail:
Before school care


After school care


Vacation care


If an outside school hours care or vacation care service was provided at

......................................................................................................................................................... would you use it?

Insert site

Before school care  Yes [  ]  No [  ]
After school care  Yes [  ]  No [  ]
Vacation care  Yes [  ]  No [  ]

2. What preschool or school/s does your child/ren attend?

Name preschool / school in space below and number of children attending in brackets.

......................................................................................................................................................... [  ]
......................................................................................................................................................... [  ]
......................................................................................................................................................... [  ]
3. Why would you use this service?

- you and/or partner work full time [ ]
- you and/or partner work part time [ ]
- you and/or your partner are looking for work [ ]
- you and/or your partner are studying [ ]
- opportunities for your child/ren to participate in recreational experiences [ ]
- respite [ ]
- other [ ]

4. When would you use a BEFORE SCHOOL service?

*Please complete the appropriate box/s and specify the number of children in each age range.*

<table>
<thead>
<tr>
<th>Day of the week</th>
<th>Frequency</th>
<th>Number of children</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>E = every week</td>
<td>Preschool - Year 3</td>
</tr>
<tr>
<td>Monday</td>
<td>F = fortnightly</td>
<td></td>
</tr>
<tr>
<td>Tuesday</td>
<td>O = occasionally</td>
<td></td>
</tr>
<tr>
<td>Wednesday</td>
<td>N = never</td>
<td></td>
</tr>
<tr>
<td>Thursday</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Friday</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

5. What time would a BEFORE SCHOOL service need to open to meet your needs?

(Please circle)
- 6.00am
- 6.30am
- 7.00am
- 8.00am
- Other .........................................................

6. When would you use an AFTER SCHOOL service?

*Please complete the appropriate box/s and specify the number of children in each age range.*

<table>
<thead>
<tr>
<th>Day of the week</th>
<th>Frequency</th>
<th>Number of children</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>E = every week</td>
<td>Preschool - Year 3</td>
</tr>
<tr>
<td>Monday</td>
<td>F = fortnightly</td>
<td></td>
</tr>
<tr>
<td>Tuesday</td>
<td>O = occasionally</td>
<td></td>
</tr>
<tr>
<td>Wednesday</td>
<td>N = never</td>
<td></td>
</tr>
<tr>
<td>Thursday</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Friday</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

7. What time would an AFTER SCHOOL service need to be open until to meet your needs?

(Please circle)
- 4.30pm
- 5.00pm
- 6.00pm
- 6.30pm
- Other .........................................................
8. When would you use a VACATION CARE service?

Please complete the appropriate box/s and specify the number of children.

<table>
<thead>
<tr>
<th>Day of the week</th>
<th>Frequency</th>
<th>Number of children</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Preschool</td>
</tr>
<tr>
<td>Monday</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Tuesday</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Wednesday</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Thursday</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Friday</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Please indicate the school holiday periods you would use:

- December/January: [ ]
- April: [ ]
- June/July: [ ]
- September/October: [ ]

9. For what period of time would a VACATION CARE service need to open to meet your needs?

(Please circle)

- **Start**
  - 6.00am
  - 6.30am
  - 7.00am
  - 7.30am
  - 8.00am

- **Finish**
  - 4.30pm
  - 5.00pm
  - 5.30pm
  - 6.00pm
  - 6.30pm

Other: ____________________

10. Do you have a child/ren with additional needs that will use the service?

Yes / No

Please outline the particular needs of the child/children:

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________
11. Any other comments or questions


If you wish, please provide the following details:

Name: ..........................................................
Address: ......................................................


Email: .........................................................
Phone: ....................................................... 
Contact time: ..............................................

Thank you for making the time to complete this survey.
It is vital that you have the chance to advise your family’s needs