**ACT Kindergarten Health Check**

ACT Government Health Directorate

## Background

Since 1998, all children enrolled in kindergarten (the first year of full time school in the ACT) are invited to participate in the Kindergarten Health Check. The Health Check is part of the ACT Health Child, Youth and Women's Health program. It includes checks on vision, hearing, height, weight, and development. Parents provide written consent for their child to participate, and completed a questionnaire covering demographic details; self-reported Aboriginal and Torres Strait Islander status, health history, and a range of health-related questions. It also includes the Strengths and Difficulties Questionaire (SDQ) and the Parent’s Evaluation of Development Status (PEDS) questionnaire. The Academic Unit of General Practice collates the questionnaire data, and school health nurses perform the health checks, according to a pre-defined ACT Health Directorate protocol. Results are sent to children’s GP and children are referred to specific health services as required.  The information is used to monitor child health trends and improve health services in the ACT.

## General Enquiries:

Population Health Informatics

Epidemiology Section

Data Analytics Branch

ACT Health Directorate

Email: [healthinfo@act.gov.au](mailto:healthinfo@act.gov.au)

Please submit Data Linkage Request via:

[Data Analytics Branch - Jira Service Management (atlassian.net)](https://act-health.atlassian.net/servicedesk/customer/portal/20)

## ACT Kindergarten Health Check Data Collection – Variable information

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| --- | --- | --- |
| **Child's Demographics** | | |
| **Variable** | **Description** | **Coding** |
| YRSCREEN | Year of health check |  |
| BirthMonth | Child's Month of Birth |  |
| BirthYear | Child's Year of Birth |  |
| AgeYears | Child's Age in years at the middle of the year of health check |  |
| Sex | Child's gender | 1 = Male  2 = Female 9 = Not Stated |
| ResSub | Child's Suburb of Residence |  |
| StateRes | Child's State of Residence | 1 = New South Wales 2 = Victoria 3 = Queensland 4 = South Australia 5 = Western Australia 6 = Tasmania 7 = Northern Territory 8 = Australian Capital Territory 9 = Other territories (Cocos (Keeling) Islands, Christmas Island and Jervis Bay Territory) 0 = Overseas |
| ResPC | Child's Post code of residence |  |
| IndigStatus | Child’s Aboriginal and Torres Strait Islander status. | 1 = Australian Aboriginal 2 = Torres Strait Islander 3 = Both Australian Aboriginal & Torres Strait Islander 4 = Non Indigenous 9 = Not stated |
| UsualGP | Child has a usual General Practitioner / practice | 0 = No 1 = Yes 99 = Not Completed (Default) |
| NorthSouth | North or South side (of Lake Burley Griffin) school | 0 = North 1 = South |
| PublicPrivate | Government or Private school | 0 = Government 1 = Private |
| Week | Which week of the term the screen started in (some schools split over several days) |  |
| Term | Which term the screen started in |  |
| **Child Health** | | |
| Q1ConcVis | Parent concern re: Vision | 0 = No 1 = Yes 99 = Not Completed (Default) |
| Q2PrscGls | Child prescribed glasses? | 0 = No 1 = Yes 99 = Not Completed (Default) |
| Q2aGlsWr | When should child wear glasses | 1 = Reading/ close work 2 = Board/long distance 3 = all the time 4 = other 99 = Not Completed (Default) |
| Q3VisMC | Child received medical care for vision issues? | 0 = No 1 = Yes 99 = Not Completed (Default) |
| Q4ConcHrg | Parent concern re: Hearing/airways | 0 = No 1 = Yes 99 = Not Completed (Default) |
| Q4bAsthma | Parent reports asthma/ concern about asthma | 0 = No 1 = Yes 99 = Not Completed (Default) |
| Q5aRErInf | Child has had: Repeated ear infections | 0 = No 1 = Yes 99 = Not Completed (Default) |
| Q5bDschEr | Child has had: Discharging ears | 0 = No 1 = Yes 99 = Not Completed (Default) |
| Q5cHrgLss | Child has had: Hearing Loss | 0 = No 1 = Yes 99 = Not Completed (Default) |
| Q5dGmmts | Child has had: Grommets | 0 = No 1 = Yes 99 = Not Completed (Default) |
| Q5eSnrg | Child has had: Snoring | 0 = No 1 = Yes 99 = Not Completed (Default) |
| Q6HrgMC | Child has received medical care for ears , hearing or airways | 0 = No 1 = Yes 99 = Not Completed (Default) |
| Q7aWtgPt | Would you like information on Wetting pants | 0 = No 1 = Yes 99 = Not Completed (Default) |
| Q7bWtgBd | Would you like information on Wetting the bed | 0 = No 1 = Yes 99 = Not Completed (Default) |
| Q7cSoilPt | Would you like information on Soiling Pants | 0 = No 1 = Yes 99 = Not Completed (Default) |
| **Parental Concerns - PEDS Parent Evaluation of Development Status**  **(for further information, please refer to the PEDS website** <http://www.pedstest.com/AboutOurTools/LearnAboutPEDS/IntroductiontoPEDS.aspx> ) | | |
| PredConc | Number of predictive concerns | 0 = (Default) 99 = Not Completed |
| NonPred | Number of non-predictive concerns | 0 = (Default) 99 = Not Completed |
| **Strength and Difficulties Questionnaire**  **(for further information, please refer to the SDQ website** <http://www.sdqinfo.com/a0.html> ) | | |
| Q1\_consid | Item 1 : considerate | 0 = Not true 1 = Somewhat true 2 = Certainly true 99 = Not Completed/missing |
| Q2\_restles | Item 2 : restless | 0 = Not true 1 = Somewhat true 2 = Certainly true 99 = Not Completed/missing |
| Q3\_somatic | Item 3 : somatic symptoms | 0 = Not true 1 = Somewhat true 2 = Certainly true 99 = Not Completed/missing |
| Q4\_shares | Item 4 : shares readily | 0 = Not true 1 = Somewhat true 2 = Certainly true 99 = Not Completed/missing |
| Q5\_tantrum | Item 5 : tempers | 0 = Not true 1 = Somewhat true 2 = Certainly true 99 = Not Completed/missing |
| Q6\_loner | Item 6 : solitary | 0 = Not true 1 = Somewhat true 2 = Certainly true 99 = Not Completed/missing |
| Q7\_obeys | Item 7 : obedient | 0 = Certainly true 1 = Somewhat true 2 = Not true 99 = Not Completed/missing |
| Q8\_worries | Item 8 : worries | 0 = Not true 1 = Somewhat true 2 = Certainly true 99 = Not Completed/missing |
| Q9\_caring | Item 9 : helpful if someone hurt | 0 = Not true 1 = Somewhat true 2 = Certainly true 99 = Not Completed/missing |
| Q10\_fidgety | Item 10 : fidgety | 0 = Not true 1 = Somewhat true 2 = Certainly true 99 = Not Completed/missing |
| Q11\_friend | Item 11 : has good friend | 0 = Certainly true 1 = Somewhat true 2 = Not true 99 = Not Completed/missing |
| Q12\_fights | Item 12 : fights or bullies | 0 = Not true 1 = Somewhat true 2 = Certainly true 99 = Not Completed/missing |
| Q13\_unhappy | Item 13 : unhappy | 0 = Not true 1 = Somewhat true 2 = Certainly true 99 = Not Completed/missing |
| Q14\_popular | Item 14 : generally liked | 0 = Certainly true 1 = Somewhat true 2 = Not true 99 = Not Completed/missing |
| Q15\_distrac | Item 15 : easily distracted | 0 = Not true 1 = Somewhat true 2 = Certainly true 99 = Not Completed/missing |
| Q16\_clingy | Item 16 : nervous in new situations | 0 = Not true 1 = Somewhat true 2 = Certainly true 99 = Not Completed/missing |
| Q17\_kind | Item 17 : kind to younger children | 0 = Not true 1 = Somewhat true 2 = Certainly true 99 = Not Completed/missing |
| Q18\_lies | Item 18 : lies or cheats | 0 = Not true 1 = Somewhat true 2 = Certainly true 99 = Not Completed/missing |
| Q19\_bullied | Item 19 : picked on or bullied | 0 = Not true 1 = Somewhat true 2 = Certainly true 99 = Not Completed/missing |
| Q20\_helpout | Item 20 : often volunteers to help | 0 = Not true 1 = Somewhat true 2 = Certainly true 99 = Not Completed/missing |
| Q21\_reflect | Item 21 : thinks before acting | 0 = Certainly true 1 = Somewhat true 2 = Not true 99 = Not Completed/missing |
| Q22\_steals | Item 22 : steals | 0 = Not true 1 = Somewhat true 2 = Certainly true 99 = Not Completed/missing |
| Q23\_oldbest | Item 23 : better with adults than with children | 0 = Not true 1 = Somewhat true 2 = Certainly true 99 = Not Completed/missing |
| Q24\_afraid | Item 24 : many fears | 0 = Not true 1 = Somewhat true 2 = Certainly true 99 = Not Completed/missing |
| Q25\_attends | Item 25 : good attention | 0 = Certainly true 1 = Somewhat true 2 = Not true 99 = Not Completed/missing |
| emotion | Subscale score: emotional symptoms | 0-3 = Normal 4 = borderline 5-10 = abnormal |
| conduct | Subscale score: conduct problems | 0-2 = Normal 3 = borderline 4-10 = abnormal |
| hyper | Subscale score: hyperactivity/inattention | 0-5 = Normal 6 = borderline 7-10 = abnormal |
| peer | Subscale score: peer problems | 0-2 = Normal 3 = borderline 4-10 = abnormal |
| prosoc | Subscale score: prosocial | 0-4 = abnormal 5 = borderline 6-10 = Normal |
| ebdtot | total difficulties score | 0-13 = Normal 14-16 = borderline 17-40 = abnormal |
| **Asthma, Eczema, Hayfever** | | |
| q1EvWhWh | Has your child ever had a wheeze or whistling in the chest? | 0 = No 1 = Yes 99 = Not Completed (Default) |
| q2EvrAs | Has your child ever had Asthma? | 0 = No 1 = Yes 99 = Not Completed (Default) |
| q3WhWh | In last 12 months: Has the child had wheeze or whistling in the chest? | 0 = No 1 = Yes 99 = Not Completed (Default) |
| q3DryC | In last 12 months: Has the child had dry cough at night (not associated with infection) | 0 = No 1 = Yes 99 = Not Completed (Default) |
| q3WhCC | In last 12 months: Has the child had wheezing with coughs and colds | 0 = No 1 = Yes 99 = Not Completed (Default) |
| q3SoBEx | In last 12 months: Has the child had shortness of breath when exercising, playing games or participating in sports | 0 = No 1 = Yes 99 = Not Completed (Default) |
| q4aWhz | Average respiratory symptoms in last 12 months: Wheeze or whistle in the chest | 4 = Never 5 =< 1 day/Week 6 = 1-3 days/week 7 = 4 or 4+days/week 99 = Not Completed (Default) |
| q4bNCW | Average respiratory symptoms in last 12 months: Night cough | 4=Never 5=<1 day/Week 6=1-3 days/week 7=4 or 4+days/week 99= Not Completed (Default) |
| q4cSoB | Average respiratory symptoms in last 12 months: Shortness of breath | 4=Never 5=<1 day/Week 6=1-3 days/week 7=4 or 4+days/week 99= Not Completed (Default) |
| q5ItchRsh | Ever had itchy rash, coming & going for at least 6 months | 0 = No 1 = Yes 99 = Not Completed (Default) |
| q6PlItchRsh | Has itchy rash affected elbows, behind knees, ankles, buttocks etc. | 0 = No 1 = Yes 99 = Not Completed (Default) |
| q7EvrEcz | Has your child ever had eczema? | 0 = No 1 = Yes 99 = Not Completed (Default) |
| q8NsePrb | In last 12 months has child had child had sneezy, runny, blocked nose without cold/flu | 0 = No 1 = Yes 99 = Not Completed (Default) |
| q9NseEy | In last 12 months has nose problem accompanied itchy/watery eyes | 0 = No 1 = Yes 99 = Not Completed (Default) |
| q10EvHF | Has your child ever had hay fever? | 0 = No 1 = Yes 99 = Not Completed (Default) |
| q11FamAs | Any member of immediate family had Asthma | 0 = No 1 = Yes 99 = Not Completed (Default) |
| q11FamEcz | Any member of immediate family had Eczema | 0 = No 1 = Yes 99 = Not Completed (Default) |
| q11FamHF | Any member of immediate family had Hayfever | 0 = No 1 = Yes 99 = Not Completed (Default) |
| **Weight, Diet, Physical Activity** | | |
| q1DescWt | How would you describe your child's weight? | 1 = Underweight 2 = Healthy weight 3 = Over weight 4 = Obese 5= Don't know 99 = Not Completed (Default) |
| q2ConcWt | Do you have concerns about your child's weight? | 0 = No 1 = Yes 99 = Not Completed (Default) |
| q3ConcHt | Do you have concerns about your child's height? | 0 = No 1 = Yes 99 = Not Completed (Default) |
| q4VegDy | How many serves of vegetables does child eat each day? | 0 - 97 Serves  99 = Not Completed |
| q4VegWk | How many serves of vegetables does child eat each week? | 0 - 97 Serves  99 = Not Completed |
| q4NoVeg | My child doesn't eat vegetables. | 0 = No (Default) 1 = Yes 99 = Not Completed |
| q4VegDK | Doesn't know how many vegetables eaten | 0 = No (Default) 1 = Yes 99 = Not Completed |
| q5FrtDy | How many serves of fruit does child eat each day? | 0 - 97 Serves  99 = Not Completed |
| 5FrtWk | How many serves of fruit does child eat each week? | 0 - 97 Serves  99 = Not Completed |
| q5NoFrt | My child doesn't eat fruit | 0 = No (Default) 1 = Yes 99 = Not Completed |
| q5FrtDK | Doesn't know how many serves of fruit eaten | 0 = No (Default) 1 = Yes 99 = Not Completed |
| q6EatHb | Do you have concerns about your child's eating habits? | 0 = No 1 = Yes 99 = Not Completed (Default) |
| q7PASWDy | On how many days does child do physical activity in school week (max 5)? | 0 = none 1 - 5 = Number of days 99 = Not Completed |
| q7PASWDK | On how many days does child do physical activity? Don't know. Parent can’t remember/can’t work out average. | 0 = No (Default) 1 = Yes |
| q8PAHr | How many hours does your child do physical activity? | 0 - 97 Hours  99 = Not Completed |
| q8PAMin | How many minutes does your child do physical activity? | 0 - 97 Minutes  99 = Not Completed |
| q8PADK | Don't know how much child does physical activity on school days. | 0 = No (Default) 1 = Yes |
| q9PAWEDy | On how many days does child do physical activity on the weekend (max 2)? | 0 = none 1-2 = Number of days 99 = Not Completed |
| q9PAWEDK | Don't know how many days does child do physical activity on the weekend? | 0 = No (Default) 1 = Yes |
| q10PAHr | How many hours does your child do physical activity on the weekend? Record hours. | 0 - 97 Hours |
| q10PAMin | How many minutes does your child do physical activity on weekend days? Record minutes. | 0 - 97 Minutes |
| q10PAWEDK | Don't know how much child does physical activity on weekend days? | 0 = No (Default) 1 = Yes |
| **School Assessment data** | | |
| Weight | Child's weight in kilograms | 00.0 kilograms |
| Height | Child's height in metres | 0.000 metres |
| RefNutGP | Referral - To GP and /or Nutritionist/dietitian | 0 = No (Default) 1 = Yes |
| VisChks | Vision checks done on squint, tracking and convergence | 0 = No (Default) 1 = Yes |
| VisR3 | Acuity R eye at 3m |  |
| VisL3 | Acuity L eye at 3m |  |
| VisRWG | Acuity R eye at 3m with glasses |  |
| VisLWG | Acuity L eye at 3m with glasses |  |
| VisConc | Vision concerns detected |  |
| VisNT | Vision not tested | 0 = No (Default) 1 = Yes |
| VisNAD | Vision NAD (normal) | 0 = No (Default) 1 = Yes |
| VisRT | Vision retest at 6 years recommended | 0 = No (Default) 1 = Yes |
| RefOpto | Referral - Orthoptist/ Optometrist | 0 = No (Default) 1 = Yes |
| HearR | /500 Hz, Hearing (in dB @ xHz) R ear | 0 (Default) |
| HearR1 | /1000 Hz | 0 (Default) |
| HearR2 | /2000 Hz | 0 (Default) |
| HearR4 | /4000 Hz | 0 (Default) |
| HearL | /500 Hz, Hearing (in dB @ xHz) L ear | 0 (Default) |
| HearL1 | /1000 Hz | 0 (Default) |
| HearL2 | /2000 Hz | 0 (Default) |
| HearL4 | /4000 Hz | 0 (Default) |
| HearNT | Hearing not tested | 0 = No (Default) 1 = Yes |
| HearNAD | Hearing normal - All hearing values within normal limits | 0 = No (Default) 1 = Yes |
| HearRT | Hearing retest by school nurses @ clinic – Recommended Hearing retest was recommended by the school health nurses. Hearing retests ceased in 2017. | 0 = No (Default) 1 = Yes |
| RefAudio | Referral - nurse audiometry | 0 = No (Default) 1 = Yes |
| HOContin | Parents provided with handout/s for continence | 0 = No (Default) 1 = Yes |
| HOSnor | Parents provided with handout/s for snoring | 0 = No (Default) 1 = Yes |
| HOANES | Parents provided with handout/s for Asthma Nurse Educator Service | 0 = No (Default) 1 = Yes |
| HOSpchDI | Parents provided with handout for Speech Drop-in centre times | 0 = No (Default) 1 = Yes |
| HOPhysDI | Parents provided with handout for Physio Drop-in centre times | 0 = No (Default) 1 = Yes |
| RefOth | Referral - other service/specialist | 0 = No (Default) 1 = Yes |
| Pcontact | Parent contacted | 0 = No (Default) 1 = Yes |
| PPres | Parent present (usually catch up clinics) | 0 = No (Default) 1 = Yes |
| ScrnStatus | Screening Status | 1 = Screened at school 2 = Absent from school, but seen at catch-up clinic 3 = Absent from school, & DNA catch-up clinic 4 = Left the school 0 = No consent/not screened |
| Assdate | Date of assessment |  |