**Exemplar outdoor learning survey**

1. **Your views on children learning and playing outdoors**

We are planning to offer different childcare opportunities in the borough and are keen to explore how we can make better use our wonderful outdoor spaces (parks, woods, school grounds, forests etc). Outdoor learning is becoming increasingly popular. It has a positive impact on children’s sense of well-being and development, offers opportunities for children to do different things in different ways, gives children first-hand contact with weather, seasons and the natural world and offers children freedom to explore, use their senses, take risks and be physically active and exuberant and most importantly **is fun!**

Children taking part in outdoor learning would be given appropriate clothing and footwear, they would have access to toilets, we would ensure staff are suitably trained and we would ensure your child’s safety at all times. Let us know what you think about outdoor learning.

**What is the maximum number of hours per week would you be prepared to allow your child to spend outdoors?** (please tick 1 box only)

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **0** |  | **3** |  | **6** |  | **15** |  | **30** |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Please tick one box for each of these statements below | ***Yes*** | ***No*** | ***Unsure*** |
| *The amount of time I would be happy to let my child spend outdoors would depend on the weather* |  |  |  |
| *I would be happy for my child to spend some time*  *off site in places such as Epping Forest* |  |  |  |
| *I would be happy for my child to spend some time*  *off site in a local park* |  |  |  |
| *I would be happy for my child to spend some time outdoors in the nursery grounds* |  |  |  |
| *I would be happy for my child to travel to different locations as long as I knew my child was safe* |  |  |  |
| *I think it is really important that children spend time outside and learn about nature and the environment* |  |  |  |

If you would like us to contact you about our plans for outdoor learning please leave your name and a contact email or phone number

|  |  |
| --- | --- |
| Name |  |
| Contact |  |

**Thank you for completing this survey. Please return it to \*\*\*\*\*\*\*\*\*\***