

School Safety Zone Evaluation Questionnaire

1. Please read the instructions carefully.
2. Please use blue or black pen to fill in the questionnaire.
3. Please check you have answered all the appropriate questions.
4. Please return your completed questionnaire to the school by the end of term.

**Win £100
for your
school**

Dear parent, we would like your views about the School Safety Zone outside your child's school. We are piloting School Safety Zones at a number of schools across the county. They aim to create a safer environment around school for pedestrians and cyclists by asking motorists to limit their speed to 20mph during school start and finish times. Your opinions will help us to evaluate the success of the project and find out how journeys have been affected. There will be a prize of £100 for the school who returns the most completed questionnaires by the end of the school term. If you have any questions about this survey or about School Safety Zones please contact Chris Smith, Regional School Travel Advisor, on 07733 300887.



School:

Q1

**Thinking about your child/ren at this school, what year group/s are they in?
Please write in the boxes**

Child 1 is in year

Child 2 is in year

Child 3 is in year

I have other children at this school in my household

Q2

How does your child/ren usually travel to school (for the main part of the journey)? Please tick ✓ one box only

Walk

Cycle

Car share
(where children from more than one household travel in the same vehicle)

Bus/train

Car/taxi

Other

Q3

How does your child/ren usually travel home from school (for the main part of the journey)? Please tick ✓ one box only

Walk

Cycle

Car share
(where children from more than one household travel in the same vehicle)

Bus/train

Car/taxi

Other

School reference:

Q4**Before today have you ever seen or heard of the School Safety Zone?**

Please tick ✓ one box only

Yes No Don't know **Q5****Does your child/ren usually travel to and from school...**

Please tick ✓ one box only

Alone With an adult With other children With an adult and other children **Q6****Has the way your child/ren get to and from school changed in the last 12 months?**

Please tick ✓ one box only

Yes - all the time → go to Q7Yes - sometimes → go to Q7No → go to Q9**Q7****How has the way your child/ren get to and from school changed?**

Please write in below

Q8**Have any of these changes been influenced at all by the introduction of the School Safety Zone? Please tick ✓ one box only**Yes No Don't know **Q9****Does your child/ren cross the road within the area signed as a School Safety Zone when travelling to or from school? Please tick ✓ one box only**Always Sometimes Occasionally Never Don't know **Q10****What effect, if any, do you think the School Safety Zone has had on the speed of traffic within the zone? Please tick ✓ one box only**It has considerably reduced speeds It has slightly reduced speeds It has had no effect on speeds It has slightly increased speeds It has considerably increased speeds Don't know

Q11

Has the School Safety Zone made your child/ren's journey to and from school... Please tick ✓ one box only

- Much safer
A little less safe
 A little safer
Much less safe
 Has made no difference to their safety
Don't know

Q12

How strongly do you agree or disagree with the following statements about traffic in the School Safety Zone? Please tick ✓ one box for each statement only

	Strongly agree	Tend to agree	Neither agree nor disagree	Tend to disagree	Strongly disagree	It does not apply/don't know
When the School Safety Zone started, traffic speeds reduced. But now, traffic speeds have gone back to what they were before	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Traffic speeds are still too high in the School Safety Zone	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<hr style="border-top: 1px dashed #000;"/>						
The existing speed limit needs to be enforced more	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
As a driver, I am more aware of my speed when in the School Safety Zone	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<hr style="border-top: 1px dashed #000;"/>						
The speed of traffic does not affect the way my child/ren travel to/from school	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Q13

Many schools are developing a School Travel Plan to encourage more walking, cycling and bus use for school journeys. Do you know if your child/ren's school has developed a Travel Plan? Please tick ✓ one box only

- Yes it has → go to Q14
 No it hasn't → go to Q15
 Don't know → go to Q15

Q14

Has the School Travel Plan helped you improve your child/ren's journey to and from school? Please tick ✓ one box only

- Yes - it has helped a lot
 Yes - it has helped a little
 No - it hasn't helped at all
 Don't know

Q15

How strongly do you agree or disagree that School Safety Zones are a worthwhile initiative for Lancashire County Council? Please tick ✓ one box only

- Strongly agree
 Tend to agree
 Neither agree nor disagree
 Tend to disagree
 Strongly disagree
 Don't know

Q16 Is there anything else that concerns you about your child/ren's journey to and from school? Please tell us if there are places on your child's journey that you feel are unsafe. Please write in below

Q17 How could we improve your child/ren's journey to and from school?
Please write in below

Thank you very much for taking part in this survey.

Please return it to your child/ren's school before the end of term where they will be collected and returned to Lancashire County Council.