



Live, Longer, Stronger – Our Healthy Kids

Information and Consent Form

The Live, Longer, Stronger – Our Healthy Kids Program (OHK) is a health, well-being and education focussed program delivered by the Aboriginal Health and Medical Research Council of NSW (AH&MRC). Designed for primary school-aged children, the program is inclusive and aims to inspire children by providing a comprehensive platform to empower young minds in the pursuit of healthier lifestyles, both in the present and the future.

The OHK program will run 1 day per week, up to 10 weeks, over a school term. An AH&MRC Aboriginal Health Educator will deliver the program at school and will be supported by an Aboriginal Health Worker Trainee.

Each session will run for 90 minutes, with 45 minutes allocated to the topic of the week and 45 minutes for a fun and engaging physical activity. Activities can include Traditional Indigenous Games (TIG), basketball, tag, etc. Depending on the session and conditions (weather/heat etc.) cultural activities can also be included in the program such as traditional dance, weaving, didgeridoo and clapsticks.

What are the program topics?

Weekly sessions will focus on one of the below program topics:

- Nutrition
- Physical Activity
- Thoughts & Feelings (Mental Health)
- Healthy Habits (Years 1-2),
 Vaping and Smoking (Years 3-6)
- Friends (Bullying & Social Media)
- Healthy Hygiene Practices
- Keeping Safe (Healthy and Unhealthy Relationships)
- Positive Role Models

We'll seek students' understanding of program topics at the beginning, mid-way and at the end of the ten weeks.

How will my child's health be assessed?

Ear Health, Oral Health and Eye Health screenings will be carried out for all students who participate in the program. Height, weight and body mass index will also be measured at the beginning of the program and at the end of the program. A letter with screening results will be provided for students to take home to provide further insight and include any recommendations if required.

We'll refer Aboriginal and Torres Strait Islander children within the program for an annual Aboriginal and Torres Strait Islander Health Check (715). Please advise if your child has had their '715' health check within the last 9 – 12 months and at which practice.

How is my child's information kept confidential?

We are committed to the confidentiality of all students and their families who participate in the OHK program. AH&MRC staff are bound by policies governing confidentiality. All information will be kept strictly confidential.

Do I need to provide consent for my child?





Consent is required for your child to participate in the program which includes health screenings, lessons and physical activities. There may be photos, videos and voice recordings taken of children participating in the program, and consent is required to allow any of the images or recordings to be shared on media platforms.

Please note that you can withdraw your consent at any time during the program. Withdrawal of consent must be in writing and emailed via to <u>LLS@ahmrc.org.au</u>

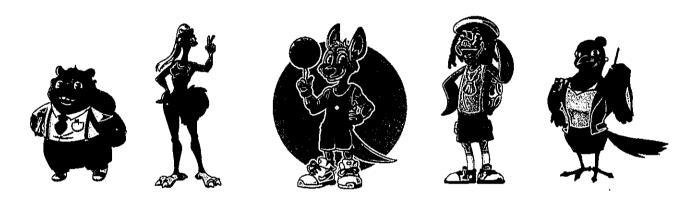
Please complete the consent form on the following page and return it to the LLS OHK Team at your school in person or via email. You can also scan the QR code to complete it online, if preferred.

For further information on this program, please email <u>LLS@ahmrc.org.au</u> or contact:

Grayson Morgan Team Leader – Health Education M: 0417 797 923

E: gmorgan@ahmrc.org.au

Carley Lowcock
Regional Health Education Coordinator - Western
M: 0419 473 857 / 02 9030 3474
E: clowcock@ahmrc.org.au



The Live, Longer, Stronger - Our Healthy Kids Program aims to close the gap in health status for Aboriginal and Torres Strait Islander children.



This consent form is available to complete online at https://forms.office.com/r/4kuMMj6kaQ?origin=lprLink or by scanning the QR code





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Consent Details

Please sele	ct the boxes below to indicate:
☐ Yes ☐ No	I give permission for my child to participate in the Live, Longer, Stronger – Our Healthy Kids Program, which includes health screenings, lessons and physical activities and will be delivered at school
☐ Yes	I give permission for photos, videos and voice recordings that may be taken of my child during the program to be used to promote the LLS program on media platforms.
☐ Yes	I understand I can withdraw consent for any or all of the above, at any time during the program, and will notify withdrawal of consent in writing to <u>LLS@ahmrc.org.au</u>
☐ Yes	My child has had an annual Aboriginal and Torres Strait Islander Health Check (715), within the last 9 – 12 months. If yes, please advise which Practice (AMS / Health Service/ etc):
Child's d	etails
Name	
DOB	Age Class T shirt size
School Gende	
My Child	Aboriginal
Please ins	ert your details and sign below to provide your consent for the above information.
Parent /	Caregiver Details
Name	e :
Relation to chi Phon	ld e
Numb Date	

We value you and your child's privacy. All information collected is for internal use only and will not be distributed to the public for financial or private gain. If you would like to talk to someone about this, please email us at <u>LLS@ahmrc.org.au</u>