\*\*\*DELETE THIS PAGE PRIOR TO USING THIS SURVEY\*\*\*

How to use this document

This survey is for use PRIOR TO Healthy Choices implementation. The questions could be adapted to allow use after Healthy Choices is being, or has been implemented.

1. Consider piloting this survey with a small number of customers prior to use, or with some internal staff
2. Adapt the questions below as required according to the organisation and food outlet this survey is being used in (particularly question 4)
3. Do not ask children under the age of 18 years any questions
4. If the survey is completed verbally do not ask question 10 about gender, surveyor to complete
5. In the situation where there is the possibility of presenting the findings at a research conference or in a publication consider the need for ethics approval from a relevant organisation prior to completing the surveys.
6. Use the HEAS Customer survey data analysis template to analyse and report on the results of this survey as required.

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Customer survey

*[Insert org or food outlet name] is considering making changes to the food and drink options and is keen to hear what customers think about this change. If you would like to have your say, please complete the anonymous survey below.*

Please tick

1. Which one of the following options best describes your link to this organisation?
* Staff
* Visitor
* Member
* Patient
* Other, please specify \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
1. In the past 6 months, how often have you purchased food or drink from this food outlet? *(please tick one)*
* Every day
* Three or more days a week
* One or two days a week
* Less than twice per month
1. How much do you spend per visit on food and drink? *(please tick one)*
* Less than $3
* $3 - $5
* $6 - $10
* $11 - $15
* $16 or more
1. What food and/or drink do you usually purchase from this food outlet?

Food/snacks:

* Lollies, chocolate
* Cakes, biscuits, muffins
* Chips (packet)
* Ice creams or icy poles
* Sandwiches/rolls/wraps
* Fruit
* Sausage rolls, hot chips, fried foods
* Hot meals
* Fruit
* Sushi
* Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Drinks:

* Tea, coffee
* Iced coffee
* Milkshake/smoothie
* Hot chocolate
* Soft drink
* Diet soft drink
* Water
* Juice
* Sports, energy drinks
* Flavoured milk
* Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
1. Please select the most appropriate response for you:
* I buy whatever foods and drinks are available from this food outlet
* If this food outlet doesn’t have the particular food or drink I want to buy I go elsewhere.
1. Choose 3 of the following factors which are most likely to influence your purchasing at this food outlet.

*Please number 1 (most important) to 3 (least important)*

* Cost
* Convenience
* Healthiness
* Taste
* Child’s preference
* Habit
* Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
1. What other foods or drinks would you like this food outlet to sell?

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Would you support this food outlet selling healthier foods and drinks?
	* Yes
	* No

Why?: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Do you have any other feedback you would like to provide about this food outlet?

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Gender:
* Male
* Female
1. Age group:
* 18-20years
* 21-30years
* 31-44years
* 45-60years
* 61+ years
1. What is your postcode: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*This survey was developed by the Nutrition Australia Vic Division, in collaboration with the Global Obesity Centre (GLOBE), Deakin University.*