

Self-administered 13-item questionnaire (study B)

	Disagree	Slightly Disagree	Slightly Agree	Agree	
1	My child was asked questions, either directly or on a survey, about his/her health habits.				
	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
2	My child was helped to set specific goals to improve his/her eating or exercise.				
	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
3	My child was given a copy of his/her treatment plan.				
	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
4	My child and I were treated with care and concern by the nurse/GP.				
	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
5	My child's care was well organised.				
	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
6	I have confidence and trust in the nurse/GP that I saw today.				
	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
	Not at all satisfied	Slightly satisfied	Somewhat satisfied	Very satisfied	Extremely satisfied
7	Overall, how satisfied are you with the consultation you had today?				
	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
		Useless	Somewhat useless	Somewhat useful	Useful
8	How useful was it to receive personalised weight management feedback?				
	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
9	Do not answer this question if your child is younger than 11 years old: How useful was it to receive an estimate of your child's risk for medical conditions?				
	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
	Not comfortable	Slightly uncomfortable	Comfortable	Very comfortable	

	Disagree	Slightly Disagree	Slightly Agree	Agree
10	How comfortable were you with being asked questions about your child's lifestyle and medical history?			
	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
11	Do not answer this question if your child is younger than 11 years old: How comfortable were you with being asked questions about whether your child has been teased or bullied?			
	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
12	How comfortable were you with the computer-aided consultation?			
	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
13	How comfortable was your child with the computer-aided consultation?			
	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>