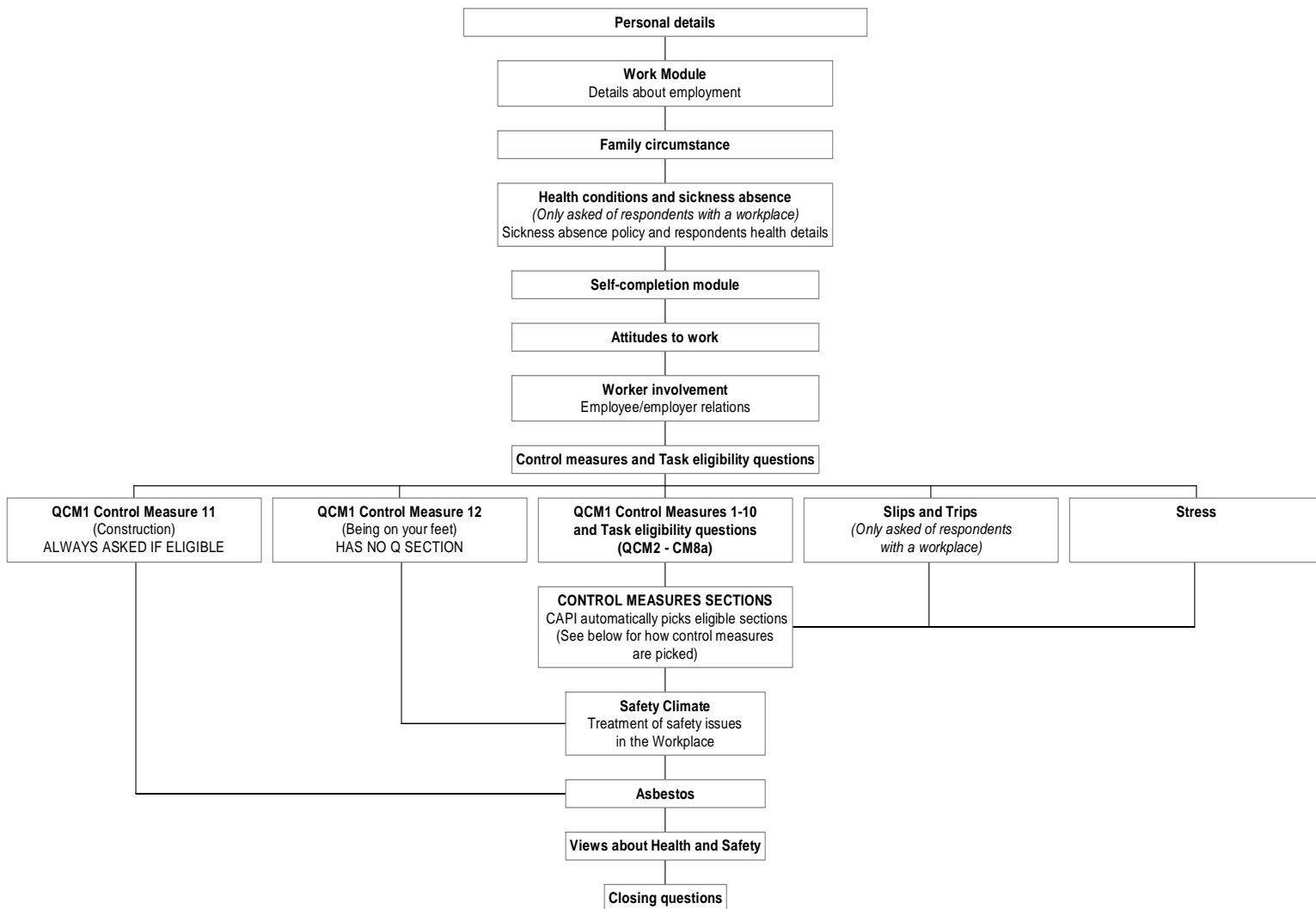


HSE FIT 3

LONGITUDINAL RESEARCH

PLEASE NOTE THIS IS FOR REFERENCE ONLY:

QUESTIONNAIRE STRUCTURE



How control measures sections are picked

Dependent on respondents' answers at CM1 and task eligibility questions each respondent will be asked the following sections:

(This excludes CONSTRUCTION and BEING ON YOUR FEET)

Eligible for 0 tasks = section asked related **stress** and **slips/trips** about ONLY

Eligible for 1 tasks = sections asked relating to **this task** and **stress** and **slip/trips**

Eligible for 2 tasks = sections asked relating to these **2 tasks** and **stress** and **slips/trips**

Eligible for 3 tasks = sections asked relating to these **3 tasks** and **slips** (half the time) and **stress** (half the time)

Eligible for 4 tasks = sections asked relating to these **4 tasks** NO stress or slips/trips

Eligible for 5+ tasks = respondent will be asked **4 tasks** selected at random and NO stress or slips/trips

QS1 Firstly, can I just check that you work for an organisation that pays your wages or salary?

Yes – Proceed to HHQ1

No – CLOSE - “Unfortunately you are not eligible for this study and we will not be able to continue with the survey”

INFO SCREEN

READ OUT: Throughout the interview I will be asking you to look at showcards. The green showcards are lettered A-K, the white showcards are numbered 1-48

PERSONAL DETAILS MODULE

NEW QUESTION

HHQ1. Could you please tell me how old you were on your last birthday?

PLEASE ENTER

Age in years – allow range of 16-99

HHQ2. Interviewer – record sex of respondent

Male

Female

HHQ3. **SHOWCARD 1** Could you look at this card please and tell me to which of these groups you consider you belong?

White – British

White – Irish

Any other white background (specify)

Mixed – White and Black Caribbean

Mixed – White and Black African

Mixed – White and Asian

Any other mixed background (specify)

Asian/Asian British – Indian

Asian/Asian British – Pakistani

Asian/Asian British – Bangladeshi

Any other Asian background (specify)

Black/Black British – Caribbean

Black/Black British – African

Any other Black background (specify)

Chinese

Any other background (specify)

(PLEASE GIVE DETAILS)

Refused

HHQ4. Is English your first language?

Yes - GO TO QWHA

No

ASK IF NO AT HHQ4. OTHERS GO TO QWHa.

HHQ4a. **SHOWCARD 2** Which, if any, of the languages on this card is your first language?

INTERVIEWER CODE TO PRECODES.

Welsh

Gaelic

Urdu

Punjabi

Gujarati

Hindi

Bengali

Sylheti

Cantonese

Somali

Tamil

Turkish

Kurdish

Arabic

Other language (specify)

WORK MODULE**ASK ALL**

QWHa. You told me earlier that you have a paid job at which you currently work for a total of at least 7 hours a week away from your home. Please can you tell me which phrases best describe where you usually do this job...

INTERVIEWER:

READ OUT, ENSURING YOU READ EVERY CODE BEFORE THE RESPONDENT GIVES THEIR FINAL ANSWER(S)
CODE ALL THAT APPLY

At the same or different people's homes*

Driving or working on public roads*

At the same place or premises (e.g. the same office, shop, construction site, factory) for at least 7 hours across a week

At different places or premises (e.g. different offices, shops, factories or other premises) for at least 7 hours across a week in one of these places

Working in other sorts of places or for other periods of time*

PEOPLE ANSWERING CODES IDENTIFIED WITH A * DO NOT ANSWER WORKPLACE QUESTIONS THROUGHOUT THE SURVEY

QWHa CODE 3 ONLY PLEASE SHOW Text sub1a:

TextSub1a

"Throughout the survey I am going to ask you a number of questions to do with your workplace and this is the place I'd like you to tell me about"

QWHa CODE 3 AND EITHER 1,2,5 SHOW Textsub1b

TextSub1b

Throughout the survey I am going to ask you a number of questions to do with your workplace. We're only interested in a formal workplace and the job that you do at this formal workplace, that is the 'same place or premises' you have just mentioned rather than [Textfill peoples homes/driving or working on public roads/other sorts of places] where you also work.

QWHA CODE 4 AND EITHER 1,2,5 SHOW TextSub1c

TextSub1c

Throughout the survey I am going to ask you a number of questions to do with your workplace. We're only interested in a formal workplace, that is the 'different places or premises' you have just mentioned rather than [Textfill peoples homes/driving or working on public roads/other sorts of places] where you also work.

ASK IF CODE 4 AND 1 or 2 or 5 AT QWHa

QWHb. Can I just check, is there at least ONE place or premises where you work at least 7 hours a week or more?

READ OUT Please remember this EXCLUDES peoples homes/driving or working on public roads/other sorts of places

Interviewer: If Yes please ask if that is one place or more than one place...

Yes – there is one place

Yes – but there is more than one place

No

QWHA CODE 4 ONLY AND QWHB CODE 1 (work in one place) SHOW TextSub1a

QWHb CODE 2 (WORK IN MORE THAN ONE PLACE) PLEASE SHOW Textsub2a SCREEN:

TextSub2a

IF RESPONDENT SAYS THAT THEY WORK IN MORE THAN ONE PLACE (CODE 2 AT QWHb) READ OUT "Throughout the survey I am going to ask you a number of questions to do with your workplace. As you have told me that you work in more than one, I'd like you to only tell me about the place that you usually work and the job that you do at this formal workplace. This is the place where you work most time over a month and if this is equal this is the place where you worked last.

ASK ALL

QWH5c. Do you have an employer?

Yes

No

ASK ALL THOSE WHO HAVE AN EMPLOYER (code 1 QWH5c) AND NOT CODES 3 AND 4 AT QWHA. OTHERS GO TO QWH3b

QWH5d. Can you please tell me if you have one employer or more than one employer?

One employer

More than one employer

IF CODE 2 AT QWH5D READ OUT:

Throughout the survey I am going to ask you some questions to do with your employer. As you have told me that you work for more than one, I'd like you to only tell me about one employer and the job that you do for that employer. This will be the employer who you worked the most hours for over the past month - If you work equal hours this is the employer you last did some work for.

ASK IF CODES 3 OR 4 AT QWHA AND CODE 1 AT QWH5c OTHERS GO TO QWHc

QWH3b. Do you usually work at your employer's premises or at some other premises?

Employer's premises

Other premises

ASK ALL WHO HAVE AN EMPLOYER AT QWH5c (CODE 1). OTHERS GO TO QWHd.

QWHc. When did you start working for your current employer?

PLEASE ENTER MONTH AS A NUMBER, e.g. Jan = 1, Feb = 2

Month - If can't remember exact month, prompt for time of year and enter mid season month.

READ OUT – Was it Winter (January), Spring (April), Summer (July) or Autumn (October).

Year

Don't know

Month

Don't Know

ASK ALL WHO DO NOT HAVE AN EMPLOYER AT QWH5c (CODE 2). OTHERS GO TO QWH1.

QWHd. When did you start working in your present job?

Month - If can't remember exact month, prompt for time of year and enter mid season month.

READ OUT – Was it Winter (January), Spring (April), Summer (July) or Autumn (October).

Year

Don't know

Month

Don't Know

ASK ALL

QWH1. Please tell me the exact job title and describe fully the sort of work you do in this job.

IF MORE THAN ONE JOB – Ensure respondent is thinking about the job we asked them to focus on at the start of the survey

ENTER JOB TITLE: _____

DESCRIBE FULLY WORK DONE:

(IF RELEVANT 'WHAT ARE THE MATERIALS MADE OF?')

QWH3. What does the firm or organisation you work for actually make or do?

Please give details, for example -
 Manufacturing (main goods produced, materials used)
 Wholesale or retail - and what type of goods sold.
 Financial e.g. bank, insurance etc.
 Education - give level of education.
 NHS e.g. hospital, doctors surgery etc.

QWH4a. Thinking about all aspects of your job do you think that your job could potentially have an effect on your health or safety?

Yes
 No
 Don't know

ASK IF CODE 1 AT QWH4a. OTHERS GO TO QWH5a.

QWH4b. In what ways do you think it can have an effect on your health and safety?

PROBE. What else?

QWH5a. Are you a manager or supervisor of any other employees?

Yes - Manager
 Yes - Foreman/supervisor
 NOT manager or supervisor
 Don't know

QWH5b. And are you managed or supervised yourself?

Yes
 No
 Don't know

QWH6. **SHOWCARD 3** Which of the types of organisations on this card do you work for in your main job? CODE ONE ONLY

Private firm/company/plc.
 Private / independent school
 Private Household
 Civil Service or central government (not armed forces)
 Local government or council
 National Health Service
 State Higher or Further Education
 State Nursery, Primary or Secondary Education
 Non-profit making organization (include charities, co-operatives etc)
 Armed forces
 Police

Fire Service
Prison Service
Other (PLEASE GIVE DETAILS)
Don't know

ASK ALL

QWH8a. Thinking about all aspects of your job do you have direct contact with members of the public in the course of your job? INTERVIEWER: This can include parents of children, or patients.

Yes
No
Don't know

IF YES AT QWH8a. OTHERS GO TO QWH9a.

QWH8b Is that most of the time or just some of the time?

Most of the time
Some of the time

ASK ALL

QWH9a. How many people work in this country for the company or organisation that pays your wages at all of its sites or offices, NOT just the place where you work or in your department?

IF QWH5D = MORE THAN ONE EMPLOYER PLEASE SHOW FOLLOWING REMINDER:

IF MORE THAN ONE JOB – Respondent must think about job they were focussed in on at the start of the survey

1-10
11-24
25-50
51-249
250 – 499
500+
Don' t know

ASK ALL WHO DON'T KNOW AT QWH9a. OTHERS GO TO QWH10a.

QWH9b. Would you say that there are.....READ OUT

Fewer than 25 people
Between 25 and 50 people
Between 51 and 249 people
Or 250 or more people working for this company or organisation?
Don't know DO NOT READ OUT

ASK APART FROM THOSE WHO DO NOT HAVE AN EMPLOYER (QWH5C CODE 2)

QWH10a. IF HAVE A WORKPLACE (QWHA codes 3 OR 4) ASK

How many people are employed by your employer at the place where you work?

IF DON'T HAVE A WORKPLACE ASK (QWHA codes 1 OR 2 OR 5)

How many people are employed by your employer?

INCLUDE ALL EMPLOYEES INCLUDING PART-TIME AND SHIFT WORKERS

1-10
11-24
25-50
51-249

250 – 499
500+
Don't know

ASK ALL WHO DON'T KNOW AT QWH10a. OTHERS GO TO QWH11a.

QWH10b. Would you say that there are.....READ OUT

Fewer than 25 people
Between 25 and 50 people
Between 51 and 249 people
Or 250 or more people employed by your employer
Don't know DO NOT READ OUT

ASK ALL APART FROM THOSE WHO DO NOT HAVE AN EMPLOYER (QWH5C CODE 2). OTHERS GO TO QWH12a

QWH11a. Are there any trade unions, or a similar body such as a staff association, recognised by your employer?

INTERVIEWER: CODE ALL THAT APPLY

Yes – a trade union
Yes – a staff association
No
Don't know

ASK ALL WHO HAVE A TRADE UNION OR STAFF ASSOCIATION AT THEIR WORKPLACE (QWH11a CODES 1 OR 2) OTHERS GO TO QWH12a.

QWH11b. Are you a member of this trade union or staff association?

Yes – trade union
Yes – staff association
No

ASK ALL

QWH12a. **SHOWCARD 4** Could you please tell me whether you also currently **hold** any of these roles relevant to health and safety at work?

INTERVIEWER: CODE ALL THAT APPLY

Trade Union Health and Safety Representative
Workplace Safety Advisor
Staff / worker health and safety representative
Fire warden
First aider
Counsellor/ Mentor
Risk assessor
Other (please specify)
None of the above

QWH13. Thinking about your current job, how many hours a week, excluding overtime and meal breaks, are you usually expected to work?

INTERVIEWER: EXCLUDE MEAL BREAKS EVEN IF THEY ARE PAID
IF NO NORMAL HOURS ASK FOR AVERAGE. ROUND UP TO NEAREST HOUR.

Hours
WRITE IN:
Don't know.
Refused.

QWH14. Still thinking about your current job, how many hours overtime did you work last week (or in the last week you worked), whether it was paid or unpaid?
ROUND UP TO NEAREST HOUR

Hours
WRITE IN:
None
Don't know.
Refused

QWH15. **SHOWCARD 5** Which of the categories on this card best describes the times of day you **usually** work? INTERVIEWER: CODE ALL THAT APPLY

Mornings only
Afternoons only
During the day
Evenings only
At night
Both lunchtime and evenings
Other times of day
Rotating shifts
Varies/no usual pattern
Daytime and evenings
Other (PLEASE GIVE DETAILS)

INDIVIDUAL SECTION – FAMILY CIRCUMSTANCES**ASK ALL**

I'd now like to ask you a few questions about your responsibilities both at home, and outside of your home.

QFC1. Do you have a child under 16 or other dependant you would normally have to take time off work to look after if they were sick?

Yes

No

**ASK IF CODE 1 AT QFC1 AND IF QWHc (TIME IN JOB) IS AT LEAST 3 MONTHS.
OTHERS GO TO QHC1.**

QFC2. Altogether over the last 3 months, have you had to take one or more working days off work because of a child or other dependant?

Yes

No

**ASK THOSE WHO HAVE TAKEN ONE OR MORE WORKING DAYS OFF WORK (CODE
QFC2 = 1) OTHERS GO TO ROUTING BEFORE QHC1**

QFC3. The last time you had to do this how many working days off did you need to take?

INTERVIEWER IF don't know, probe for best estimate

ENTER NUMBER

RANGE 0-999

Don't know

**ASK THOSE WHO HAVE TAKEN ONE OR MORE WORKING DAYS OFF WORK (CODE
QFC2 = 1) OTHERS GO TO ROUTING BEFORE QHC1**

QFC4. And what type of days [Textfill if only one day taken off: day] off did you take? Was it...READ OUT

Sick leave

Holiday/ annual leave

Compassionate leave

Special leave

Other - specify

HEALTH CONDITIONS AND SICKNESS ABSENCE MODULE

READ OUT TO ALL WHO HAVE AN EMPLOYER (QWH5C CODE 1)

I'd now like to ask a few questions about your employer's policy on sickness absence, followed by some questions about your health.

READ OUT TO ALL WHO DON'T HAVE AN EMPLOYER (QWH5C CODE 2) AND THEN GO STRAIGHT TO QHC5.

I'd now like to ask you a few questions about your health

ASK ALL APART FROM THOSE WHO DON'T HAVE AN EMPLOYER (QWH5C CODE 2)

QHC1. Does your employer have a requirement that you have to tell them that you are going to be off sick on the first day of absence?

Yes

No

Don't know

ASK ALL APART FROM THOSE WHO DON'T HAVE AN EMPLOYER (QWH5C CODE 2)

QHC2. Taking 'day' to include Saturdays and Sundays does your employer require staff to produce a note from their G.P. for ill-health related absences of.....

Precodes – yes, no and don't know

One day

2-3 days

4-6 days

7 days and over

ASK ALL APART FROM THOSE WHO DON'T HAVE AN EMPLOYER (QWH5C CODE 2)

QHC3. And does your employer have a policy of contacting staff at home when they are on sick leave to find out when they are likely to return to work?

INTERVIEWER: IF RESPONDENT SAYS THAT "IT DEPENDS" THEN CODE AS YES.

Yes

No

Don't know

ASK ALL APART FROM THOSE WHO DO NOT HAVE A MANAGER/SUPERVISOR AT QWH5b (CODE 2)

QHC4. And, as far as you know, are managers or supervisors in your organisation expected to formally talk to their staff when coming back from sick leave about the reason for their sickness absence?

Yes,

No

Don't know

ASK ALL

QHC5. SHOWCARD 6. We are interested in the health symptoms that people may experience, even if these might have not resulted in a visit to a GP or other health professional. Please can you look at the list and tell me which, if any, of the things listed on it you have experienced in the last three months that is between (DATE 3 MONTHS AGO) and now?

INTERVIEWER: CODE ALL THAT APPLY. What else?

1. Severe or recurrent headaches, such as migraine
2. Skin or scalp rashes, burning sensation or itchiness
3. Skin cracking, soreness or dryness
4. Hair loss, other than normal receding or thinning
5. Ringing in the ears / tinnitus
6. Loss of hearing / deafness
7. Pain or discomfort in lower back
8. Pain or discomfort in upper back or neck
9. Pain or discomfort in arms, wrists or hands
10. Pain or discomfort in legs
11. Problems with eyesight
12. Stiffness or difficulty in moving your fingers or hands
13. Stiffness or difficulty in moving your arms or legs
14. Difficulty in controlling the movement in your hands, arms or legs
15. Tingling or numbness in fingers, hands or wrists
16. Tingling or numbness in other areas of the body and/or face
17. Feeling of coldness in the fingers or toes regardless of room or outside temperature
18. None of these
19. Other – specify

SHOWCARD 7 And please can you look at this card and tell me if you have experienced any of the following in the past 3 months?

1. Breathlessness
2. Repeated coughing
3. Wheezing
4. Heart burn or acid indigestion
5. Heart palpitations
6. Upset stomach or bowels
7. Tiredness, nausea or vomiting related to pregnancy
8. Nausea or vomiting (NOT due to pregnancy)
9. Head cold or sore throat
10. Anxious or worrying more than you normally do
11. Feeling panicky or unable to cope
12. Feeling tired for no apparent reason
13. Difficulty in sleeping
14. Feeling very sad or low
15. None of these
16. Other – specify

ASK FOR EACH CONDITION MENTIONED AT QHC5

QHC6 Do you think that your (condition mentioned at HC5) has been caused by work, either in the job that you are currently doing, or one in the past?

Yes

No

Don't know

ASK FOR ALL WHO SAY YES AT QHC6 FOR EACH CONDITION MENTIONED AT QHC5. OTHERS GO TO QHC7

QHC9ai. Was this **ORIGINALLY** caused by something to do with your current job or a previous job? IF PREVIOUS JOB, ASK WHETHER SAME TYPE OF JOB OR A DIFFERENT TYPE OF JOB COMPARED WITH THEIR CURRENT JOB.

Current job
Previous job - same type
Previous job - different type

ASK IF PREVIOUS JOB – DIFFERENT TYPE AT QHC9ai OTHERS GO TO

QHCbi. Please tell me the exact job title and describe fully the sort of work you did in this job.

ENTER JOB TITLE: _____
DESCRIBE FULLY WORK DONE:
(IF RELEVANT `WHAT ARE THE MATERIALS MADE OF?')

QHCbii What did the firm or organisation you worked for actually make or do?
Please give details, e.g. -
Manufacturing (main goods produced, materials used)
Wholesale or retail - and what type of goods sold.
Financial e.g. bank, insurance etc.
Education - give level of education.
NHS e.g. hospital, doctors surgery etc.

ASK FOR EACH CONDITION MENTIONED AT QHC5

QHC7. And please can you tell me if you think that doing your current job makes this condition worse or not? INSERT SYMPTOM FROM QHC5.

Yes – it makes it worse
No – it doesn't make it any worse
Don't know

QHC8 Do you have any *other* health conditions, illnesses or injuries, including long-term disabilities that you think were caused by work, either in the job that you are currently doing, or one in the past?

CODE UP TO 3. IF MORE THAN 3 MENTIONED ASK RESPONDENT TO PROVIDE DETAILS ON THE 3 THEY CONSIDER TO BE THE MOST SERIOUS (TO THEM).

ASK FOR EACH AT QHC8 UP TO A MAXIMUM OF THREE. IF NONE MENTIONED GO TO QHC9d.

QHC9ai. Was this **ORIGINALLY** caused by something to do with your current job or a previous job? IF PREVIOUS JOB, ASK WHETHER SAME TYPE OF JOB OR A DIFFERENT TYPE OF JOB COMPARED WITH THEIR CURRENT JOB.

Current job
Previous job - same type
Previous job - different type

ASK IF CODE 3 ONLY AT QHC9ai. OTHERS GO TO QHC9c

QHC9b. Please tell me the exact job title and describe fully the sort of work you did in this job.

ENTER JOB TITLE: _____
DESCRIBE FULLY WORK DONE:
(IF RELEVANT `WHAT ARE THE MATERIALS MADE OF?')

QHCa9 What does the firm or organisation you worked for actually make or do?

Please give details, e.g. -

Manufacturing (main goods produced, materials used)

Wholesale or retail - and what type of goods sold.

Financial e.g. bank, insurance etc.

Education - give level of education.

NHS e.g. hospital, doctors surgery etc.

ASK FOR EACH CONDITION MENTIONED AT QHC8 UP TO A MAXIMUM OF THREE

QHC9c. And please can you tell me if being at work and doing your current job makes this condition worse or not?

Yes – it makes it worse

No – it doesn't make it any worse

Don't know

ASK ALL

QHC9d Can I just check, are you off work sick at the moment?

Yes

No

**ASK THOSE WHO ARE NOT OFF WORK SICK AT THE MOMENT (NO AT QHC9d)
OTHERS GO TO QHC11**

IF QWHc IS LESS THAN 3 MONTHS, REPLACE TEXT IN SQUARE BRACKETS WITH "since you started your job"

QHC10. **CALENDAR CARD.** Thinking about your current job, please can you tell me if you have had any time off due to your own sickness or injury [during the last 3 months, that is between (date 3 months ago)] and now] and Please use this calendar to help you try to remember.

Yes **GO TO HC11**

No **GO TO HC18ai**

Don't know **GO TO HC18ai**

ASK ALL WHO HAVE HAD TIME OFF IN THE LAST 3 MONTHS (QHC10 CODE1) OR THOSE WHO ARE OFF SICK AT THE MOMENT (QHC9d CODE 1). OTHERS GO TO QHC18ai.

IF QWHc IS LESS THAN 3 MONTHS, REPLACE TEXT IN SQUARE BRACKETS WITH "when you started your job".

QHC11. How many days in total were you off work from your current job due to your sickness or injury between ([date 3 months ago) and now] [*Textfill: including your current absence up to today*]? INTERVIEWER: IF RESPONDENT IS UNSURE, ASK THEM TO ESTIMATE.

RECORD NUMBER

ASK IF MORE THAN HALF A SICK DAY REPORTED AT QHC11. OTHERS GO TO QHC14.

QHC12. You've said that you were off sick for (number of days from QHC11) days during this period. Were those days off all in one spell, or did you have more than one spell off sick from work? IF YES ASK: How many different spells did you have off sick?

All in one spell

2 spells

3 spells

4 spells

5 spells

6 or more spells

Can't remember/don't know

ASK IF RESPONDENT REPORTS ONE OR MORE SPELLS OF CONSECUTIVE ABSENCE AT QHC12, OR IF THEY DON'T KNOW OR CAN'T REMEMBER. OTHERS GO TO QHC18ai. IF HHQ5 IS LESS THAN 3 MONTHS REPLACE TEXT WITH "SINCE YOU STARTED YOUR CURRENT JOB

QHC13. Thinking about [*Textfill: your current sickness absence/the LAST* time that you were off sick in the last 3 months], please can you tell me how many days you had off [*Textfill: so far/on* that occasion]?

ENTER NUMBER

Don't know

ASK ALL WHO HAVE HAD TIME OFF IN THE LAST 3 MONTHS (QHC10 CODE1) AND THOSE WHO ARE OFF SICK AT THE MOMENT (QHC9d CODE 1)

QHC14. Please can you tell me why you [*Textfill: are/were*] off sick [*Textfill: currently/on* that occasion]?

INTERVIEWER: THIS IS THE LAST TIME THEY WERE OFF SICK

OPEN-ENDED RESPONSE

REFUSED

QHC15. Was this absence that you have just told me about related to a long-standing health condition or injury that you suffer from?

Yes - ONE ALREADY MENTIONED

Yes – OTHER LONG -STANDING HEALTH CONDITION NOT ALREADY MENTIONED

No – NOT RELATED TO OTHER LONG-STANDING HEALTH CONDITION

ASK IF CODE 1 AT QHC15. OTHERS GO TO FILTER BEFORE QHC17

QHC16 Please can you tell me which illness or health condition caused the absence on this occasion?

USE CODES AND VERBATIMS MENTIONED AT HC5 AND HC8. CODE ONE ONLY.

REFUSED

ASK IF CODE 2 AT QHC15. OTHERS GO TO FILTER BEFORE QHC18ai

QHC17 Please can you tell me which long-standing health condition caused your absence on this occasion.

OPEN – ENDED

REFUSED

ASK ALL THOSE WHO HAVE AN EMPLOYER (QWH5C CODE1) AND WHO ARE NOT CURRENTLY SICK (CODE 2 AT QHC9D).

QHC18ai. Thinking about the last time that you were off sick and before you returned to work did your employer know that you were off sick?

Yes

No

Never been off sick before **GO TO HC24**

Can't remember **GO TO HC19**

ASK ALL THOSE WHO HAVE AN EMPLOYER (QWH5C CODE1) AND WHO ARE CURRENTLY SICK (QHC9d CODE 1).

QHC18aii. Apart from your current spell, thinking about the last time that you were off sick and before you returned to work did your employer know that you were off sick?

Yes

No

Never been off sick before **GO TO HC24**

Can't remember **GO TO HC19**

ASK THOSE WHOSE EMPLOYER KNEW THEY WERE OFF SICK (QHC18ai CODE 1) OR CODE 1 QHC18aii. OTHERS GO TO FILTER BEFORE QHC19

QHC18aiii Please look at this card and tell me which best describes how this happened?

SHOWCARD 8

I told my employer in advance that I was going to be off sick

My employer contacted me about why I wasn't at work

I contacted my employer to let them know I was off sick**

Someone contacted my employer for me**

I was taken ill at work and went home/was sent home

Other (please specify)

ASK ALL WHO NOTIFIED THEIR EMPLOYER ABOUT THEIR ABSENCE (CODES 3 AND 4 at QHC18aiii). OTHERS GO TO QHC19.

QHC18b **SHOWCARD 9** When did [Textfill: you / they] do this?

On the first day that I was off sick

On the second or third day that I was off sick

On the fourth or fifth day that I was off sick

After the fifth day that I was off sick

Can't remember/Don't know

ASK ALL WHO HAVE HAD TIME OFF IN THE LAST 3 MONTHS (QHC10 CODE1) OR THOSE WHO ARE OFF SICK AT THE MOMENT (QHC9d CODE 1). DO NOT ASK IF NO MANAGER/SUPERVISOR AT QWH5b (CODE 2). OTHERS GO TO QHC21.

QHC19. Thinking about when you were likely to return to work while you were off sick...

READ OUT

Did your manager or supervisor contact you about this

Did you contact your manager or supervisor about this

Your manager or supervisor didn't contact you, and you didn't contact them

You already told them before you went on sick leave

You told them when you called in sick

Can't remember GO TO QHC21

ASK IF RESPONDENT REPORTS THAT SOMEONE FROM THEIR WORK CONTACTED THEM AT CODE 1 AT QHC19. OTHERS GO TO QHC21

QHC20 **SHOWCARD 9 AGAIN.** Please can you look at this card and tell me when they first made contact with you.

On the first day that I was off sick

On the second or third day that I was off sick

On the fourth day or fifth day that I was off sick

After the fifth day that I was off sick

Can't remember/Don't know

ASK ALL WHO HAVE HAD TIME OFF IN THE LAST 3 MONTHS (QHC10 CODE1) OR THOSE WHO ARE OFF SICK AT THE MOMENT (QHC9d CODE 1). APART FROM THOSE WHO DON'T HAVE AN EMPLOYER (QWH5C CODE 2). OTHERS GO TO QHC24.

QHC21. Did you provide your employer with a note from your G.P. for this spell of sickness absence?

Yes

No

Don't know/can't remember

ASK THOSE WHO ARE NOT CURRENTLY SICK (QHC9d CODE2). OTHERS GO TO QHC24. DO NOT ASK IF NO MANAGER/SUPERVISOR AT QWH5b (CODE 2)

QHC23a. When you returned to work, did your manager or supervisor speak to you FORMALLY to check with you why you had been off sick?

Yes

No

Don't know/can't remember

ASK IF YES AT QHC23a.

QHC23b. When was that? READ OUT.

On the first day back

In the first week back

Later than that

Can't remember

ASK ALL

QHC24. Thinking about the last 3 months while working [**Textfill for those who have been working in the job less than three months:** Since starting] in the job that we have been talking about, were there any occasions when you went to work when you were really too ill and should have taken sick leave?

Yes

No

Don't know

ASK THOSE WHO SAY YES AT QHC24

QHC25. How many days should you have taken off sick [**Textfill for those who have been working in the job less than three months:** since you started this job?/in the last 3 months that is between (date 3 months ago) and now?]

INTERVIEWER: ASK FOR AN ESTIMATE

RECORD NUMBER

SELF COMPLETION MODULE

The next set of questions are for you to answer yourself, using the computer. The questions will ask about how you're feeling at the moment, and also about issues at work. The computer is very easy to use. This way your answers will be completely confidential and I will not be able to see them unless you wish me to

Are you happy to answer these questions yourself?

INTERVIEWER: If respondent asks why the questions are self completion say "The questions in the section are usually asked by self completion and we are following the standard approach"

INTERVIEWER CODE

- 1 Respondent accepted self-completion
- 2 Respondent refused self-completion
- 3 Interviewer will administer self-completion using computer – spontaneous code only

IF COMPLETED BY RESPONDENT:

INTERVIEWER – hand over computer to respondent and ask them to read the instructions provided on the screen.

This question is just to help you to get used to answering the questions in this section. I like using computers...

PRESS 1 for STRONGLY AGREE
 PRESS 2 for AGREE
 PRESS 3 for NEITHER AGREE NOR DISAGREE
 PRESS 4 for DISAGREE
 PRESS 5 for STRONGLY DISAGREE

- (1) Strongly agree
- (2) Agree
- (3) Neither agree nor disagree
- (4) Disagree
- (5) Strongly disagree

IF COMPLETED BY INTERVIEWER AND RESPONDENT:

These first few questions are going to ask for your views about your health, work and personal life and how well you are able to do your usual activities.

IF COMPLETED BY RESPONDENT

Answer every question by selecting the number as indicated. If you are unsure about how to answer a question, please give the best answer you can.

ASK ALL

QSC1. In general, would you say your health is

Excellent
 Very good
 Good
 Fair
 Poor

QSC2. The following questions are about activities you might do during a typical day. Does your health now limit you in these activities? If so, how much?

Yes, limited a lot
 Yes, limited a little
 No, not limited at all
 Don't Know

- a. Moderate activities such as moving a table, pushing a vacuum cleaner, bowling or playing golf
- b. Climbing several flights of stairs

QSC3. During the past four weeks, how much of the time have you had any of the following problems with your work or other regular daily activities as a result of your physical health?

All of the time
 Most of the time
 Some of the time
 A little of the time
 None of the time
 Don't Know

- a. Accomplished less than you would like
- b. Were limited in the kind of work or other activities you could do

QSC4. During the past four weeks, how much of the time have you had any of the following problems with your work or other regular activities as a result of any emotional problems (such as feeling depressed or anxious)?

All of the time
 Most of the time
 Some of the time
 A little of the time
 None of the time
 Don't Know

- c. Accomplished less than you would have liked
- d. Did work or activities less carefully than usual

QSC5. During the past four weeks, how much did pain interfere with your normal work (including both work outside the home and housework)?

Not at all
 A little bit
 Moderately
 Quite a bit
 Extremely
 Don't Know

QSC6. These questions are about how you feel and how things have been with you during the past four weeks. For each question, please give the one answer that comes closest to the way you have been feeling.

How much of the time during the past four weeks

All of the time
Most of the time
Some of the time
A little of the time
None of the time
Don't Know

- a. Have you felt calm and peaceful
- b. Did you have a lot of energy
- c. Have you felt downhearted and depressed?

QSC7. During the past four weeks, how much of the time has your physical health or emotional problems interfered with your social activities (like visiting friends or relatives)?

All of the time
Most of the time
Some of the time
A little of the time
None of the time

IF QWHC IS LESS THAN THREE MONTHS, CHANGE TEXT IN SQUARE BRACKETS TO "since you started your job"

QSC8a. Thinking now about events [over the past 3 months in your job], has anyone been abusive or violent towards you while you have been at work?

Yes
No
Don't Know

ASK IF CODE 1 AT QSC8a. OTHERS GO TO QSC9.

QSC8b. Did that happen once or more than once?

Once
More than once
Don't Know

For the next set of items, please describe what happened the most recent time this happened to you.

QSC8c. Looking at the list below, please can you code the items that best describe what has happened to you? You may code more than one item.

Someone grabbed or pushed me or tried to*
Someone pushed or slapped me or tried to*
Someone hit or punched me or tried to*
Someone kicked me or tried to*
Someone attacked me with a weapon or tried to*
Someone spat at me or tried to*
Someone verbally abused me
Something else happened to me
Don't want to answer

ASK THOSE WITH A MARKED WITH A * AND CODED BY THE RESPONDENT AT QSC8c

QSC8cii Thinking back to the previous question, you mentioned that (code at QSC8c), can you confirm, did they...READ OUT

Actually (code at QSC8c)

Or try to (code at QSC8c)

QSCd. Do you know the person, or any of the people, who did this to you?

Yes

No

Don't Know

QSC8e. Did you officially report this incident to your management, security staff, Trade union or health and safety representative or staff representative at work?

Yes - management

Yes - security staff

Yes – Trade union representative

Yes - Staff health and safety representative

Yes - Other staff representative

Yes - someone else at work

No

Don't Know

ASK IF CODE 7 AT QSC8e. OTHERS GO TO QSC9.

QSC8f. Please can you look at the list below and code the items that best describe why you didn't report the incident. You can code as many items as you wish.

It was a private/personal/family matter

I dealt with the matter myself

I reported it to the police

I was concerned that it would make things worse

Management wouldn't have done anything about it

I didn't want to cause any trouble

It was too trivial to report

Something else

Don't know

ASK ALL WITH AN EMPLOYER CODE 2 AT QHC5C AND A WORKPLACE (QWHA CODES 3 or 4)

SC9. Thinking about where you usually work or where you worked most recently, which if any of these things are provided to protect you from violence or abuse?

Advice or training on how to deal with verbal abuse or violence at work

Advice or training on how to deal with bullying at work

'Zero tolerance' policy on workplace abuse or violence or bullying

Signs in the workplace about abuse or violence to staff

Personal security equipment (e.g. personal alarms)

Mobile phones

Protective vests/stab vests

Not working alone

Other

None

Don't know

SC9A. And again, which of these things are provided to protect you from violence or abuse?

Video/security cameras/ CCTV
 Alarm systems/panic buttons
 Security guards on site
 Security screens
 Coded door locks/swipes
 Well-lit parking areas/corridors/passage ways
 Other
 None
 Don't know

IF COMPLETED BY INTERVIEWER:

I am now going to go through some statements. Please tell me which answer best applies to you.

IF COMPLETED BY RESPONDENT:

Now please read through the statements that are going to appear over the next few screens and use the codes provided to enter which answer you feel best applies to you.

SC10 I am clear what is expected of me at work
 Never Seldom Sometimes Often Always
 1 2 3 4 5

SC11 I know how to go about getting my job done
 Never Seldom Sometimes Often Always 1 2 3 4 5

SC12 I am subject to personal harassment in the form of unkind words or behaviour
 Never Seldom Sometimes Often Always 5 4 3 2 1

SC13 I am given supportive feedback on the work I do
 Never Seldom Sometimes Often Always 1 2 3 4 5

SC14 I have a choice in deciding how I do my work
 Never Seldom Sometimes Often Always 1 2 3 4 5

SC15 I have unrealistic time pressures
 Never Seldom Sometimes Often Always 5 4 3 2 1

SC16 I get help and support I need from colleagues
 Never Seldom Sometimes Often Always 1 2 3 4 5

SC17 Staff are always consulted about change at work
 Never Seldom Sometimes Often Always 1 2 3 4 5

SC18 My colleagues are willing to listen to my work related problems
 Never Seldom Sometimes Often Always 1 2 3 4 5

SC19 Relationships at work are strained
 Never Seldom Sometimes Often Always 5 4 3 2 1

[END OF SELF-COMPLETION MODULE]

IF COMPLETED BY RESPONDENT: THANK YOU. PLEASE CAN YOU NOW HAND BACK THE COMPUTER TO THE INTERVIEWER.

IF COMPLETED BY INTERVIEWER: READ OUT:

Thank you. This is now the end of the self-completion section. We will now continue on with the survey.

ATTITUDES TO WORK AND ORGANISATIONS MODULE

ASK IF LANGUAGE USUALLY SPOKEN IS ANOTHER LANGUAGE THAN ENGLISH (HHQ4a=2). OTHERS GO TO QAW2.

QAW1. I recorded earlier that English is not your first language. How easy or difficult do you find reading information at work that is provided to you in English? Do you find it...

READ OUT

Very easy
Fairly easy
Neither easy nor difficult
Fairly difficult
Very difficult

ASK ALL

QAW2. **SHOWCARD A** I'm going to read out a list of various aspects of jobs, and after each one I'd like you to use this card to tell me which phrase best describes how satisfied or dissatisfied you are with that particular aspect of your main job.

Very satisfied
Fairly satisfied
Neither satisfied or dissatisfied
Fairly dissatisfied
Very dissatisfied
Don't know

(PROMPT IF NECESSARY: 'HOW SATISFIED WOULD YOU SAY YOU ARE WITH..... IN YOUR PRESENT JOB?'.)

The actual work itself
The hours you work
The training you have been given to do your job
The way your health and safety is protected while you are at work

QAW3. **SHOWCARD A AGAIN.** And all things considered, how satisfied or dissatisfied are you with your present job

Very satisfied
Fairly satisfied
Neither satisfied or dissatisfied
Fairly dissatisfied
Very dissatisfied
Don't know

WORKER INVOLVEMENT MODULE

ASK ALL APART FROM THOSE WHO DON'T HAVE AN EMPLOYER AT QWH5c. OTHERS GO TO QWI12.

QWI1. In general how would you describe relations between management and other employees? Are they...READ OUT

very good,
fairly good,
not very good,
or, not at all good?
Not applicable (do not read out)
Don't know

QWI2. And in general, would you say that employees are... READ OUT

very well managed
fairly well managed
not very well managed
or, not at all well managed
Don't know
Not applicable (do not read out)

ONLY ASK b) TRADE UNIONS OR STAFF ASSOCIATIONS OF THOSE WHO SAID YES AT QW11A

QWI3. **SHOWCARD 10** As far as you are aware, how much does the organisation consult [textfill] here in turn when making decisions about any aspect of health and safety?

Always
Usually
Sometimes
Hardly ever
Never
Don't know
Not applicable (for codes a and c only)

- a) Employees
- b) Trades Unions or staff associations
- c) Other employee representatives

QWI6. **SHOWCARD 11** Please look at this list and tell me if there are any of these available in your job to help you raise concerns about health and safety?

INTERVIEWER PLEASE CODE ALL THAT APPLY

Staff suggestion scheme
Trade Union health and safety representative
Staff representative on health and safety
Informal discussions between workers and managers
Formal discussions between workers and managers
Health and Safety committee or forum
Health and Safety manager or director
Staff reports
Assessment scheme
Informal discussions
Appraisals
Other methods (specify)
None
Don't know
Not applicable

IF ANY CODED AT QWI6. OTHERS GO TO QWI8.

QWI7. **SHOWCARD B.** In your view, how effective is the consultation between workers and managers in improving health and safety?

Very effective
 Fairly effective
 Not very effective
 Not at all effective
 Don't know

ASK ALL APART FROM THOSE WHO DON'T HAVE AN EMPLOYER (QWH5C CODE 2)

QWI8. **SHOWCARD A AGAIN** Taking into account everything your employer is doing to involve workers in decisions about health and safety at work, how satisfied are you with this consultation?

Very satisfied
 Fairly satisfied
 Neither satisfied nor dissatisfied
 Fairly dissatisfied
 Very dissatisfied
 Don't know

ASK IF TIME IN CURRENT JOB (QWHc) IS AT LEAST 12 MONTHS, AND IF HAVE EMPLOYER (QWH5C CODE 1). OTHERS GO TO QWI10.

QWI9. Compared with 12 months ago, do you think there is now more consultation, less consultation or about the same amount of consultation between your employer and workers about health and safety?

More consultation
 Less consultation
 About the same amount of consultation
 Not applicable
 Don't know

ASK ALL APART FROM THOSE WHO DON'T HAVE AN EMPLOYER (QWH5C CODE 2)

QWI10. **SHOWCARD C.** Please tell me how strongly you agree or disagree with the following statements. Please take your answer from this card.

Strongly agree
 Agree
 Neither agree nor disagree
 Disagree
 Strongly disagree
 Don't know

My employer gives me enough information on health and safety issues
 My employer never consults me on health and safety matters
 I can have my say in decisions about how health and safety is managed at work
 My employer does not listen to suggestions from workers about improving health and safety
 My employer carries out regular health and safety risk assessments at work

ASK ALL APART FROM THOSE WHO DON'T HAVE AN EMPLOYER (QWH5C CODE 2)

QWI11. As an employee, to what extent are you encouraged by your employer to raise any concerns about your health and safety in your job? Are you READ OUT

Strongly encouraged
 Encouraged a little
 Or not encouraged at all?
 Don't know
 Not Applicable

ASK ALL WHO HAVE AN EMPLOYER (QWH5c CODE 1) OTHERS GO TO QCM1.

QWI12a. Does your employer provide routine health screening, either at, or through work?

Yes

No

Don't know

ASK ALL WHOSE EMPLOYER PROVIDES HEATH SCREENING. OTHERS GO TO QCM1.

QWI12b. And have you ever had any aspect of your health screened while in your present job?

Yes

No

ASK IF CODE 1 AT QWI12b. OTHERS GO TO QCM1.

QWI13. Was this through READ OUT.

INTERVIEWER: CODE ALL THAT APPLY

A questionnaire or other survey

A medical / clinical check by a nurse, doctor or other health professional

Or in some other way (SPECIFY)?

QWI14. **SHOWCARD 12** Looking at this card, at your last health screening, what was checked? PROBE: Anything else?

INTERVIEWER PLEASE CODE ALL THAT APPLY

Hearing

Vision (eye test)

Hand Arm Vibration Syndrome (HAVS)

Skin (e.g. dermatitis)

Blood tests (e.g. cholesterol, diabetes)

Blood pressure

Dental Check up

Stress

Diet

Exercise

Lungs / breathing

Movement in limbs or joints

Other (specify)

Not applicable

QWI15. When was your last routine health screen? Was it READ OUT.

In the last 6 months

In the last year

In the last two years

In the last five years

Longer than five years ago

Don't know

Not Applicable

CONTROL MEASURES

QCM1 **SHOWCARDS 13, 14 (b) AND 15 (b)** Now, thinking about ALL aspects of your main job over the last month or over the month when you were last at work, did your job involve performing any of these?

INTERVIEWER: CODE ALL THAT APPLY. PLEASE ENSURE THAT THE RESPONDENT ONLY THINKS ABOUT THE JOB THEY HAVE BEEN TALKING ABOUT SO FAR

IF RESPONDENT WORKS PART TIME AT QWH13 (LESS THAN 21 HOURS A WEEK) THEN REPLACE 4 HOURS WITH 2 HOURS AT CODES 9,10 AND 12.

SHOWCARD 13

1. PHYSICALLY MOVING, LIFTING OR CARRYING ANYTHING HEAVY INCLUDING PATIENTS OR LOADS
2. DOING ANY TASK AT HEIGHT INCLUDING STANDING ON CHAIRS OR USING LADDERS OR SCAFFOLDING
3. WORKING WHERE THERE ARE VEHICLES MOVING AROUND IN THE WORKPLACE
4. LOADING OR UNLOADING GOODS VEHICLES OR TRAILERS
14. NONE OF THESE

SHOWCARD 14 / SHOWCARD 14b FOR THOSE WHO WORK LESS THAN 21 HOURS A WEEK

7. PROLONGED SKIN CONTACT WITH WATER INCLUDING FREQUENTLY WASHING YOUR HANDS SEVERAL TIMES AN HOUR
8. WORKING WHERE NOISE FROM MACHINERY IS LOUD AND CONTINUOUS
9. SITTING DOWN TO DO YOUR JOB USUALLY FOR FOUR (TWO) OR MORE HOURS A DAY ALTOGETHER EXCLUDING DRIVING AS PART OF YOUR PAID JOB
14. NONE OF THESE

SHOWCARD 15 / SHOWCARD 15b FOR THOSE WHO WORK LESS THAN 21 HOURS A WEEK

10. DRIVING AS PART OF YOUR PAID JOB FOR MORE THAN 4 (2) HOURS A DAY ALTOGETHER MOSTLY ON PUBLIC ROADS
11. WORKING IN CONSTRUCTION, BUILDING OR MAINTENANCE
12. BEING ON YOUR FEET TO DO YOUR JOB USUALLY FOR FOUR (TWO) OR MORE HOURS A DAY ALTOGETHER EXCLUDING DRIVING AS PART OF YOUR PAID JOB
14. NONE OF THESE

IF NEITHER CODE 10 OR CODE 13 IS SELECTED, CHECK SCREEN – “YOU SAID THAT YOU NEITHER SIT DOWN TO DO YOUR JOB FOR 2/4 HOURS A DAY ALTOGETHER, OR ARE ON YOUR FEET FOR 2/4 HOURS A DAY. IS THIS CORRECT?”

IF “NOT CORRECT” RE-CODE QCM1.

ASK IF CODE 3 (THOSE WHO WORK WHERE THERE ARE VEHICLES MOVING AROUND IN THE WORKPLACE) MENTIONED AND CODE 11 (THOSE WHO DRIVE AS PART OF THEIR JOB) NOT MENTIONED AT QCM1.

QCM2. You said that your job involves working where there are vehicles moving around the workplace. Can I check, does that involve **mostly** driving on public roads?

Yes – Do not ask MV section

No – Ask MV section

ASK ALL WHO WORK WHERE THERE ARE VEHICLES AS PART OF THEIR JOB (QCM1 CODES 3 OR 4) APART FROM THOSE WHO CODE 1 AT QCM2. OTHERS GO TO FILTER BEFORE QPT1

QCM3. You mentioned earlier that you work where there are vehicles. Can I just check, is that only in car parks?

Yes – Do not ask MV section

No – Ask MV section

ASK IF CODE 11 AT QCM1 (THOSE WHO WORK IN CONSTRUCTION)

QCM4a Taking into account people working for other firms, how many work altogether at the site or place where you work?

INTERVIEWER. If respondent is unsure which workplace. It is the place where you work most time over a month and if this is equal this is the place where you worked last

1-10

11-24

25-50

51-249

250 – 499

500+

Don' t know

ASK IF CODE 11 AT QCM1 (THOSE WHO WORK IN CONSTRUCTION)

QCM4b. You said that your job involved working in construction, building or maintenance. Does your job usually involve refurbishing, altering or demolishing private commercial or public buildings or premises?

Yes– Ask Asbestos section

No – Do not ask Asbestos section

ASK IF CODE 7 AT QCM1

QCM5. **SHOWCARD 16** Using this card and thinking about a typical day, please tell me how often the work you do in your job involves prolonged skin contact with water? Is that...

All the time–Go to QHW2a

Several times an hour or more– Go to QHW2a

At least once an hour– Go to QHW2a

Less often than once an hour – Go to filter before QCM6

Don't know – Go to filter before QCM6

QHW2a. On how many days does your job usually involve prolonged skin contact with water?
Is that...READ OUT

Every day of the working week – Ask HW section
Most days of the working week - Ask HW section
At least once a week – Ask HW section
At least once a month – Go to filter before QCM6
Less often than once a month – Go to filter before QCM6
Don't know – Go to filter before QCM6

ASK ALL

QCM6 Thinking about your job over the last month or in the last month that you worked, did your job involve working with any power tools that

- a) are noisy Yes/No
- b) produce a lot of dust Yes/No
- c) Cause numbness or tingling in your hands Yes/No

IF YES TO CODES a, b or c, ASK PT SECTION
IF NO TO ALL, DO NOT ASK PT SECTION

ASK ALL

QCM7. **SHOWCARD 17** And thinking again about your job over the last month, please can you look at this card and tell me which, if any, of the items you have worked with?"

Beauty, cosmetic or hair products
Flour or grain
Other foodstuffs
Flowers, plants or plant saps
Cement, mortar or plaster
Rubber or latex materials, including gloves
Tile adhesive
Soaps, detergents or bleach
Alcohol wipes or disinfectants
Epoxy resins or hardeners
Printing solvents or printing ink
Oils, including metal working fluids
Other (specify)
None
Don't know

IF ANY ITEMS MENTIONED ASK CH SECTION – EXCLUDING OTHER

ASK ALL

QCM8a **SHOWCARD 18** And again, thinking about your job over the last month did your job involve working where there are any of the following?"

Flour dust
Dust from farming activities e.g. straw, hay or grain dust
Dusts generated during work with animals
Wood dust/sawdust
Stone dust
Brick dust, cement dust or plaster dust
Fine sand
Solvent fumes
Asbestos
Welding fumes
Solder fumes
Vehicle spray paints / isocyanates
Cutting oils/coolants/metal working fluids

Epoxy resins/hardening agents
Chlorine*
Ammonia*
Diesel exhaust fumes*
Dust or fumes from plastics or other synthetics*
Other - specify
None of these
Don't know

**IF ONLY * ITEMS, OR OTHER OR NONE MENTIONED, DO NOT ASK SECTION DG.
OTHERWISE ASK DG SECTION
IF ASBESTOS MENTIONED ASK QA SECTION**

ASK ALL

QCM9. **If more than one task measure selected** - Which, if any, do you think could potentially have an effect on your health or safety?
If one task measure selected - Do you think this could potentially have an effect on you health or safety?

READ OUT ALL SELECTED TASKS

1: MOVING, LIFTING OR CARRYING ANYTHING HEAVY (INCLUDING PATIENTS OR LOADS).

ASK ALL WHO MOVE, LIFT OR CARRY HEAVY ITEMS AS PART OF THEIR JOB (QCM1 CODE 1) AND ARE SELECTED TO ANSWER THIS SECTION. OTHERS GO TO FILTER BEFORE QFH1.

QML1. **SHOWCARD D** Using this card and thinking about a typical month, please can you tell me how frequently your job involves physically moving, lifting or carrying heavy items?

All the time
 Several times a day or more
 At least once a day
 At least once a week
 At least once a month
 Less often than once a month
 Don't know

QML2a. **SHOWCARD E** On the most recent day when you were physically moving, lifting or carrying heavy items, how many hours altogether did you spend doing that?

Less than 1 hour
 1 hour but less than 2 hours
 2 hours but less than 4 hours
 4 hours but less than 8 hours
 8 hours or more
 Don't know

QML2b. In your job when physically handling heavy items, do you usually do the same heavy handling task over and over again or a variety of tasks?

Same task over and over
 Variety of tasks

QML3. Could you please tell me what kinds of items you usually physically move, lift or carry?

DO NOT READ OUT

People / patients
 Food / drink
 Mail bags / parcels
 Machinery
 Furniture
 Laundry / clothes
 Building materials / metals
 Books / newspapers / magazines
 Rubbish / rubbish bags
 Gas cylinders
 Electrical equipment
 Other specify

ASK ALL WHO SAY THAT THEY THINK MOVING, LIFTING OR CARRYING HEAVY ITEMS POSES A RISK TO THEIR HEALTH AND SAFETY AT QCM9. OTHERS GO TO QML7.

QML4a. Thinking about physically handling heavy items in your job, would you say that you were very concerned, fairly concerned, not very concerned or not at all concerned about any risk of back problems?

Very concerned

Fairly concerned
Not very concerned
Not at all concerned
Don't know

ASK ALL WHO SAY THEY ARE VERY OR FAIRLY CONCERNED AT QML4a (CODES 1 OR 2). OTHERS GO TO QML6a

QML4b. Can you please tell me why you are at risk of back problems?

OPEN-ENDED RESPONSE

QML5a. **SHOWCARD F** And how certain are you that you know how to minimise any risks of injuring yourself when you are physically handling heavy items?

Very certain
Fairly certain
Not very certain
Not at all certain
Don't know

ASK ALL WHO SAY THAT THEY THINK MOVING, LIFTING OR CARRYING HEAVY ITEMS POSES A RISK TO THEIR HEALTH OR SAFETY AT QCM9 APART FROM THOSE WHO DON'T HAVE AN EMPLOYER (QWH5C CODE 2)

QML6a. How much more, if anything, do you think that your employer could be doing to reduce any risks of back problems from physically handling heavy items? Is it
READ OUT

A lot more
A little more
Or nothing more?
Don't know

ASK CODE 1 OR 2 AT QML6a. OTHERS GO TO QML7.

QML6b. What more do you think your employer could be doing? PROBE: Anything else?

ASK ALL WHO SAY THAT THEY MOVE, LIFT OR CARRY HEAVY ITEMS AT QCM1. DO NOT ASK IF NO MANAGER/SUPERVISOR AT QWH5b (CODE 2)

QML7. **SHOWCARD G** While in your present job and when you are physically handling heavy items, when was the last time a manager, supervisor, trainer or advisor checked that you were avoiding the risk of back problems?

In the last week
In the last month
In the last 6 months
In the last year
In the last two years
In the last five years
Longer than five years ago
Never
Don't know

ASK ALL WHO SAY THAT THEY MOVE, LIFT OR CARRY HEAVY ITEMS AT QCM1.

QML9a. In your present job, has anyone given you any training or information on how to physically move, lift or carry heavy items without the risk of back problems?

- Yes
- No
- Don't know

ASK ALL WHO HAVE RECEIVED TRAINING AT QML9a (CODE 1) OTHERS GO TO QML11.

QML9b. **SHOWCARD G AGAIN** And when was the last time you had any training or information on this?

INTERVIEWER If respondent answers 'Never' go back to the previous question and recode 'No'

- In the last week
- In the last month
- In the last 6 months
- In the last year
- In the last two years
- In the last five years
- Longer than five years ago
- Don't know

QML10. **SHOWCARD H** To what extent did this training or information help you reduce any risks of back problems through physically handling heavy items? Would you say READ OUT

- It helped a lot
- It helped a little
- It didn't make much difference
- Or it didn't make any difference?
- Don't know

ASK ALL WHO SAY THAT THEY MOVE, LIFT OR CARRY HEAVY ITEMS AT QCM1.

QML13. **SHOWCARD 19** Please can you look at this card and tell me which, if any of the following are available at work or for you to use while at work?

- Other staff whose job it is to help you handle heavy items
- Lifting aids, such as hoists
- Moving aids, such as trolleys, wheelbarrows or trucks
- Moving aids such as wheelchairs or stair lifts
- None of these
- Don't know

ASK FOR EACH AID USED AT QML13. IF NONE USED, GO TO QML16.

QML14. **SHOWCARD 20** Looking at this card, and thinking about (each item from QML13), please can you tell me which phrase you would say best applies to you?

- I always use them when I should
- I usually use them when I should
- I sometimes use them when I should
- I hardly ever use them when I should
- I never use them when I should
- Don't know

ASK ALL WHO DON'T ALWAYS USE AID WHEN THEY SHOULD (QML14 CODES 2, 3, 4 OR 5). OTHERS GO TO QML16.

QML15. **SHOWCARD J.** Please can you use the phrases on this card to tell me why you don't always use (EACH CODE FROM QML13) when you should?

INTERVIEWER: CODE ALL THAT APPLY

No one else does
 Someone said didn't need to
 Not available
 Broken / not working
 Forgot to use it
 Makes the job more difficult
 Makes the job slower
 Don't think it is important to
 Not been shown how to
 Other (please specify)
 Don't know

ASK ALL WHO SAY THAT THEY MOVE, LIFT OR CARRY HEAVY ITEMS AT QCM1 AND HAVE A WORKPLACE (QWHA CODES 3 or 4).

QML16 **SHOWCARD 21** Thinking about lifting aids where you usually work, using the phrases on this card, would you say most people who move, lift or carry heavy items

Always use them when they should
 Usually use them when they should
 Sometimes use them when they should
 Hardly ever use them when they should
 Never use them when they should
 Not applicable (no lifting aids are provided)
 Don't know

QML17. **SHOWCARD B** Taking into account all the measures in place where you usually work, in your view how effective are they at reducing any risks of back problems to workers when handling heavy items?

Very effective
 Fairly effective
 Not very effective
 Not at all effective
 Don't know

IF CODE 2, 3, OR 4 AT QML17. OTHERS GO TO FILTER BEFORE QFH1.

QML18. **SHOWCARD K** From this card, why do you think they aren't more effective?

INTERVIEWER: CODE ALL THAT APPLY.

Workers don't know the correct procedures
 Workers don't follow the correct procedures
 Supervision is poor
 Too much pressure to work quickly
 Equipment broken / not working
 Insufficient equipment provided / available
 The safety procedures are not relevant to the way we do the work
 Too many new workers / high turnover of workers
 Training on health and safety is poor / non-existent
 English is not a first language for many workers
 Other (specify)
 Don't know

2: FALLS FROM HEIGHT

ASK ALL WHO WORK AT HEIGHT AS PART OF THEIR JOB (QCM1 CODE 2) AND ARE SELECTED FOR THIS SECTION. OTHERS GO TO FILTER BEFORE QMV2.

QFH1. **SHOWCARD D** Using this card, thinking about a typical month, please can you tell me how frequently you would say that your job involves working at height, including scaffolding, ladders or even standing on chairs?

All the time
 Several times a day or more
 At least once a day
 At least once a week
 At least once a month
 Less often than once a month
 Don't know

QFH2. **SHOWCARD E** On the most recent day when you were working at height, how many hours altogether did you spend doing that?

Less than 1 hour
 1 hour but less than 2 hours
 2 hours but less than 4 hours
 4 hours but less than 8 hours
 8 hours or more
 Don't know

ASK ALL WHO SAY THAT WORKING AT HEIGHT MAY POSE A RISK TO THEIR HEALTH OR SAFETY AT QCM9. OTHERS GO TO QFH8.

QFH4a. Thinking about working at height, would you say that you are very concerned, fairly concerned, not very concerned or not at all concerned about the risk of falling in your present job?

Very concerned
 Fairly concerned
 Not very concerned
 Not at all concerned
 Don't know

ASK ALL WHO SAY THEY ARE VERY OR FAIRLY CONCERNED AT QFH4a (CODES 1 OR 2). OTHERS GO TO QFH6.

QFH4b. Can you please tell me why you are at risk of falling?

OPEN-ENDED RESPONSE

ASK IF HAVE A WORKPLACE (QWHA CODES 3 or 4)

QFH5a. **SHOWCARD F** And how certain are you that you know how to minimise any risks from falling when working at height where you usually work?

Very certain
 Fairly certain
 Not very certain
 Not at all certain
 Don't know

ASK ALL WHO SAY THAT WORKING AT HEIGHT MAY POSE A RISK TO THEIR HEALTH OR SAFETY AT QCM9 APART FROM THOSE WHO DON'T HAVE AN EMPLOYER (QWH5C CODE 2). OTHERS GO TO QFH14a.

QFH6. How much more, if anything, do you think that your employer could be doing to reduce any risks of you falling when working at height? READ OUT

A lot more
 A little more
 Or nothing more
 Don't know

ASK IF CODE 1 OR 2 AT QFH6. OTHERS GO TO QFH14a.

QFH7. What more do you think your employer could be doing? PROBE: Anything else?

ASK ALL WHO SAY THAT THEY WORK AT HEIGHT AT QCM1.

QFH14a. **SHOWCARD 22** Please can you look at this card and tell me, which, if any, you ever do during the course of your job.

Stand on tables or chairs
 Use kick stools or hop ups
 Use stepladders
 Use moveable ladders
 Climb fixed ladders
 Use podiums or other low level platforms
 Work on mezzanine floors or loading bays
 Work on cherry pickers, scissor lifts or Mobile Elevated Work Platforms
 Work on low-level scaffolds
 Work on high-level scaffolds
 Use tower scaffolds
 Operate or work in a crane
 Use rope access equipment
 Work on flat or pitched roofs
 Use any other equipment that enables you to work at height (specify)
 None of the above

ASK ALL WHO CODE MORE THAN ITEM AT QFH14a. OTHERS GO TO FILTER BEFORE QFH8.

QFH14b. **SHOWCARD 22 AGAIN.** And which of these do you do most often?

CODE ONE ONLY.

INTERVIEWER: IF THEY SAY THEY USE THEM EQUALLY, ASK FOR ONE LAST USED.

ASK ALL WHO SAY THAT THEY WORK AT HEIGHT AT QCM1 EXCEPT CODES 1 OR 2 AT QFH14A. DO NOT ASK IF NO MANAGER/SUPERVISOR AT QWH5b (CODE 2) QFH8. SHOWCARD G When was the last time a manager, supervisor, trainer or advisor where you are working checked that you are avoiding the risk of falling?

In the last week
 In the last month
 In the last 6 months
 In the last year
 In the last two years
 In the last five years
 Longer than five years ago
 Never
 Don't know

ASK ALL WHO SAY THAT THEY WORK AT HEIGHT AT QCM1.

QFH10a. While in your present job, has anyone given you any training or information on how to minimise the risk of falling?

Yes
 No
 Don't know

ASK ALL WHO HAVE RECEIVED TRAINING AT QFH10a (CODE 1) AND WHO HAVE BEEN WORKING IN THEIR CURRENT JOB FOR OVER 3 MONTHS AT QWHc. OTHERS GO TO QFH15.

QFH10b. **SHOWCARD G AGAIN** And when was the last time you had any training or information on this? CODE ONE ONLY

INTERVIEWER If respondent answers 'Never' go back to the previous question and recode 'No'

In the last week
 In the last month
 In the last 6 months
 In the last year
 In the last two years
 In the last five years
 Longer than five years ago
 Don't know

QFH11. **SHOWCARD H AGAIN** To what extent did this training or information help you minimise any risk of falling? Would you say...

It helped a lot
 It helped a little
 It didn't make much difference
 It didn't make any difference
 Don't know

ASK ALL WHO WORK AT HEIGHT EXCEPT THOSE WHO ONLY CODE 1 OR 2 OR 3 OR NONE AT QFH14a. OTHERS GO TO QFH18a.

QFH15. **SHOWCARD 23** Please could you look at this card and tell me which, if any of the following are provided at work when you are working at height?

Ropes / ties to secure a moveable ladder at the top
 Ropes / ties to secure a moveable ladder at the bottom
 Someone to stand on the bottom rung of a moveable ladder as you climb
 Stabilisers for movable ladders
 Fixed edge protection or guardrails

Equipment such as work restraints or safety harnesses
 Air bags
 Safety nets
 A rescue plan if something goes wrong
 Other specify
 None of the above
 Don't know

ASK FOR EACH AID USED AT QFH15 EXCEPT FIXED EDGE PROTECTION OR GUARDRAILS, AIR BAGS, SAFETY NETS AND RESCUE PLAN. IF NONE USED, GO TO QFH18a.

QFH16. **SHOWCARD 20** Looking at this card, and thinking about (each item from QFH15), please can you tell me which phrase you would say best applies to you? ROTATE

I always use them when I should
 I usually use them when I should
 I sometimes use them when I should
 I hardly ever use them when I should
 I never use them when I should
 Don't know

ASK ALL WHO DON'T ALWAYS USE AID WHEN THEY SHOULD (QFH16 CODES 2, 3, 4 OR 5). OTHERS GO TO QFH18a.

QFH17a. **SHOWCARD J** Please can you use the phrases on this card to tell me why you don't always use (EACH CODE FROM QFH15) when you should?

INTERVIEWER: CODE ALL THAT APPLY

No one else does
 Someone said didn't need to
 Not available
 Broken / not working
 Forgot to use it
 Makes the job more difficult
 Makes the job slower
 Don't think it is important to
 Not been shown how to
 Other (please specify)
 Don't know

IF RESPONDENT MENTIONS USING MOVEABLE LADDERS (QFH14a CODE 4) AND QWHc IS AT LEAST 12 MONTHS. OTHERS GO TO QFH18a.

QFH17b. Are you using moveable ladders in your job more often, less often or about the same compared with 12 months ago?

More often
 Less often
 About the same

ASK ALL WHO SAY THAT THEY WORK AT HEIGHT AT QCM1 (CODE 1) AND HAVE A WORKPLACE (QWHA CODES 3 or 4)

QFH18a. And thinking about where you usually work, how often, if at all, do you see other workers taking risks when using ladders? Is that...READ OUT

Always
 Usually
 Sometimes
 Hardly ever
 Never
 Don't know

ASK IF CODE 11 AT QFH14a AND QWHc or IS AT LEAST 12 MONTHS. OTHERS GO TO QFH19.

QFH18b. Are you using tower scaffolds in your job more often, less often or about the same compared with 12 months ago?

- More often
- Less often
- About the same

ASK ALL WHO SAY THAT THEY WORK AT HEIGHT AT QCM1 AND HAVE A WORKPLACE (QWHA CODES 3 or 4).

QFH19. **SHOWCARD B** Taking into account all the measures in place where you usually work, in your view how effective are they at reducing any risks to workers of falling from height?

- Very effective
- Fairly effective
- Not very effective
- Not at all effective
- Don't know

IF CODE 2, 3, OR 4 AT QFH19. CODE ALL MENTIONED

QFH20. **SHOWCARD K** From this card, why do you think they aren't more effective?

- Workers don't know the correct procedures
- Workers don't follow the correct procedures
- Supervision is poor
- Too much pressure to work quickly
- Equipment broken / not working
- Insufficient equipment provided / available
- The safety procedures are not relevant to the way we do the work
- Too many new workers / high turnover of workers
- Training on health and safety is poor / non-existent
- English is not a first language for many workers
- Other (specify)
- Don't know

**3: WORKING WHERE THERE ARE VEHICLES MOVING AROUND THE WORKPLACE
AND**

4: LOADING OR UNLOADING GOODS VEHICLES OR TRAILERS

ASK ALL WHO WORK WHERE THERE ARE VEHICLES (QCM1 CODES 3 AND 4) AND ARE ELIGIBLE AT QCM2 AND 3 AND ARE SELECTED TO ANSWER THIS SECTION . OTHERS GO TO FILTER BEFORE QPT1.

QMV2. **SHOWCARD D** Using this card, thinking about a typical month, please can you tell me how frequently you would say that your job involves working with or near vehicles?
CODE ONE ONLY

All the time
Several times a day or more
At least once a day
At least once a week
At least once a month
Less often than once a month
Don't know

QMV3a. **SHOWCARD E** On the most recent day when you were working with or near vehicles, how many hours altogether did you spend doing that?

Less than 1 hour
1 hour but less than 2 hours
2 hours but less than 4 hours
4 hours but less than 8 hours
8 hours or more
Don't know

ASK ALL WHO WORK WITH OR NEAR VEHICLES AND SAY THAT THEY THINK THIS MAY POSE A RISK TO THEIR HEALTH OR SAFETY AT QCM9. OTHERS GO TO QMV8.

QMV5a. Thinking about working with or near vehicles in your job, would you say that you were very concerned, fairly concerned, not very concerned or not at all concerned about the risk of being injured?

Very concerned
Fairly concerned
Not very concerned
Not at all concerned
Don't know

ASK ALL WHO SAY THEY ARE VERY OR FAIRLY CONCERNED AT QMV5a (CODES 1 OR 2). OTHERS GO TO QMV7.

QMV5b. Can you please tell me why you are at risk of being injured?

OPEN-ENDED RESPONSE

QMV6a. **SHOWCARD F** And how certain are you that you know how to minimise any risks of being injured when you are working with or near vehicles?

Very certain
Fairly certain
Not very certain
Not at all certain
Don't know

ASK ALL WHO WORK WITH OR NEAR VEHICLES AND SAY THAT THIS MAY POSE A RISK TO THEIR HEALTH OR SAFETY AT QCM9 APART FROM THOSE WHO DON'T HAVE AN EMPLOYER (QWH5C CODE 2).

QMV7a. How much more, if anything, do you think your employer could be doing to reduce any risks of you being injured when working with or near vehicles? Is that READ OUT

A lot more
A little more
Or nothing more?
Don't know

ASK IF CODES 1 OR 2 AT QMV7a. OTHERS GO TO QMV8.

QMV7b Please can you tell me what more your employer could be doing to reduce your risks? PROBE: Anything else?

ASK ALL WHO SAY THAT THEY WORK WITH OR NEAR VEHICLES AT QCM1. DO NOT ASK IF NO MANAGER/SUPERVISOR AT QWH5b (CODE 2)

QMV8. **SHOWCARD G** While in your present job and while you have been working with or near vehicles, when was the last time a manager, supervisor, trainer or advisor checked that you were avoiding the risk of being injured?

In the last week
In the last month
In the last 6 months
In the last year
In the last two years
In the last five years
Longer than five years ago
Never
Don't know

ASK ALL WHO SAY THAT THEY WORK WITH OR NEAR VEHICLES

QMV10. While in your present job, has anyone given you any training or information on avoiding the risk of being injured when working with or near vehicles?

Yes
No
Don't know

ASK ALL WHO HAVE RECEIVED TRAINING AT QMV10 (CODE 1). OTHERS GO TO QMV12.

QMV11a. **SHOWCARD G AGAIN** And when was the last time you had any training or information on this?

CODE ONE ONLY.

INTERVIEWER IF RESPONDENT ANSWERS 'NEVER' GO BACK TO THE PREVIOUS QUESTION AND RECODE 'NO'

In the last week
In the last month
In the last 6 months
In the last year
In the last two years
In the last five years
Longer ago than five years ago
Don't know

QMV11b. **SHOWCARD H** To what extent do you feel this training or information helped you reduce any risks of being injured when working with or near vehicles?

It helped a lot
 It helped a little
 It didn't make much difference
 It didn't make any difference
 Don't know

ASK ALL WHO SAY THAT THEY WORK WITH OR NEAR VEHICLES AT QCM1.

QMV14a. **SHOWCARD 24** Thinking only about what you do during the course of your job, could you look at this card and tell me which of the following vehicles you...

INTERVIEWER: DRIVING TO AND FROM WORK SHOULD NOT BE INCLUDED

- a) Work in the same area as, or load or unload
- b) Drive

Passenger vehicle / people mover (inc. car, van, bus, coach)
 Goods vehicle / trailer (inc. truck and vans)
 Mobile crane or lorry-mounted crane / lorry loader
 Earth / bulk moving plant (inc. bulldozer, dumper, excavator, JCB)
 Rough or all-terrain vehicle (inc. quad bike)
 Lift truck (inc. fork lift or clamp lift truck)
 Tractor
 MEWPs (Mobile elevated work platforms)
 Refuse / Recycling truck/ dustbin lorries
 Other (specify)
 None of these
 Don't know

ASK IF DRIVE (CODE Bs) MORE THAN ONE AT QMV14a. OTHERS GO TO FILTER BEFORE QMV14c.

QMV14b. **SHOWCARD 24 AGAIN.** Choosing from this card, can you please tell me if there is one kind of vehicle you mostly drive?

INTERVIEWER IF USE THEM EQUALLY, ASK FOR THE ONE LAST USED.

USE VEHICLE TYPES FROM QMV14a

ASK ALL WHO SAY THAT THEY WORK WITH OR NEAR VEHICLES

QMV14c. And does your job involve standing, riding or driving on vehicles or machines that cause your body to jolt or vibrate?

Yes
 No

ASK ALL WHO SAY THAT THEY WORK WITH OR NEAR VEHICLES AND HAVE A WORKPLACE (QWHA CODES 3 or 4).

QMV15. **SHOWCARD 25** Please can you look at this card and tell me whether any of the following apply where you usually work?

On site speed limit signs (b)
 Safety checks on vehicles (b)
 Marked out vehicle routes (b)
 Marked out pedestrian routes (a)
 Warning signs to show that vehicles are operating in the area
 Barriers to separate where you can walk from moving vehicles
 Warning sounds that vehicles are reversing
 Someone with high visibility clothing directing reversing vehicles
 Monitoring of driving standards
 Vehicle licensing checks (b)

Drivers licensing checks (b)
None of these

ASK FOR EACH ITEM MENTIONED AT QMV15 AND MARKED a OR b. IF NONE MENTIONED, GO TO FILTER BEFORE QMV18a.

QMV16. **SHOWCARD 26** Looking at this card, and thinking about (ITEMS MARKED (b) FOR THOSE WHO DRIVE AND ITEM MARKED (a) FOR THOSE WHO WORK, LOAD OR UNLOAD AT QMV14a), please can you tell me which phrase you would say best applies to you?

I always follow the correct procedures
I usually follow the correct procedures
I sometimes follow the correct procedures
I hardly ever follow the correct procedures
I never follow the correct procedures
Don't know

ASK ALL WHO DON'T ALWAYS COMPLY WHEN THEY SHOULD (QMV16 CODES 2, 3, 4 OR 5) . OTHERS GO TO FILTER BEFORE QMV18a.

QMV17. **SHOWCARD J** Please can you use the phrases on this card to tell me why you don't always comply (EACH CODE FROM QMV15) when you should?

INTERVIEWER: CODE ALL THAT APPLY

No one else does
Someone said didn't need to
Not available
Broken / not working
Forgot to use it
Makes the job more difficult
Makes the job slower
Don't think it is important to
Not been shown how to
Other (please specify)
Don't know

ASK IF DRIVER (QMV14a ANY CODE b) AND HAVE A WORKPLACE (QWHA CODES 3 or 4). OTHERS GO TO FILTER BEFORE QMV18b

QMV18a. Thinking about other drivers where you usually work, how often would you say that most drivers stick to the marked out vehicle routes? Is that...READ OUT

Always
Usually
Sometimes
Hardly ever
Never
Not applicable (no other drivers or no marked routes)
Don't know

ASK IF WORK ON FOOT/LOAD OR UNLOAD (QMV14 ANY CODE a). OTHERS GO TO QMV19 AND HAVE A WORKPLACE (QWHA CODES 3 or 4).

QMV18b. Thinking about other workers on foot where you usually work, how often would you say that most stick to the marked out pedestrian routes?

READ OUT

Always
Usually
Sometimes
Hardly ever

Never
Not applicable (no other workers on foot or no marked pedestrian routes)
Don't know

ASK ALL WHO SAY THAT THEY WORK WITH OR NEAR VEHICLES AND HAVE A WORKPLACE (QWHA CODES 3 or 4).

QMV19. **SHOWCARD B** Taking into account all the measures in place where you usually work, in your view how effective are they at reducing any risks to workers being injured when working with or near vehicles?

Very effective
Fairly effective
Not very effective
Not at all effective
Don't know

ASK IF CODE 2, 3 OR 4 AT QML19. OTHERS GO TO FILTER BEFORE QPT1.

QMV20 . **SHOWCARD K** From this card, why do you think they aren't more effective?
INTERVIEWER: CODE ALL THAT APPLY.

Workers don't know the correct procedures
Workers don't follow the correct procedures
Supervision is poor
Too much pressure to work quickly
Equipment broken / not working
Insufficient equipment provided / available
The safety procedures are not relevant to the way we do the work
Too many new workers / high turnover of workers
Training on health and safety is poor / non-existent
English is not a first language for many workers
Other (specify)
Don't know

5: WORKING WITH POWER TOOLS OR MACHINERY

ASK ALL WHO WORK WITH POWER TOOLS AS PART OF THEIR JOB (AT QCM6) AND ARE SELECTED TO ANSWER SECTION. OTHER GO TO FILTER BEFORE QCH1

QPT1. **SHOWCARD D** Using this card, thinking about a typical month, please can you tell me how frequently your job involves working with power tools or machinery?

All the time
 Several times a day
 At least once a day
 At least once a week
 At least once a month
 Less often than once a month
 Don't know

QPT2. **SHOWCARD E** On the most recent day when you were working with power tools or machinery how many hours altogether did you spend doing that?

Less than 1 hour
 1 hour but less than 2 hours
 2 hours but less than 4 hours
 4 hours but less than 8 hours
 8 hours or more
 Don't Know

THOSE WHO CODE 'LESS THAN 1 HOUR' AT QPT2 PLEASE AUTOMATICALLY CODE '0' AT QPT3

QPT3. On that day, what was the most time you spent using power tools or machinery without a break?

CODE TO NEAREST WHOLE HOUR

ASK ALL WHO SAY THAT THEY THINK USING POWER TOOLS MAY POSE A RISK TO THEIR HEALTH OR SAFETY AT QCM9 AND WHO DID SAY THAT THEIR TOOLS ARE NOISY AT QCM6. OTHERS GO TO QPT7.

QPT4a. Thinking about using power tools in your job, would you say that you were very concerned, fairly concerned, not very concerned or not at all concerned about any risks to your health and safety from any noise produced by the power tools or machinery you use?

Very concerned
 Fairly concerned
 Not very concerned
 Not at all concerned
 Don't know

ASK ALL WHO SAY THEY ARE VERY OR FAIRLY CONCERNED AT QPT4a (CODE 1 OR 2). OTHERS GO TO QPT 4c

QPT4b. Can you please tell me why your hearing is at risk from the noise?

OPEN-ENDED RESPONSE

ASK ALL WHO SAY THAT THEY THINK USING POWER TOOLS MAY POSE A RISK TO THEIR HEALTH OR SAFETY AT QCM9 AND WHO DID SAY THAT POWER TOOLS CAUSE NUMBNESS AND TINGLING IN THEIR HANDS AT QCM6.

QPT4c. And would you say that you were very concerned, fairly concerned, not very concerned or not at all concerned about any risks to your health and safety from the vibration produced by the power tools or machinery you use?

Very concerned
Fairly concerned
Not very concerned
Not at all concerned
Don't know

ASK ALL WHO SAY THEY ARE VERY OR FAIRLY CONCERNED AT QPT4c (CODE 1 OR 2). OTHERS GO TO QPT4dii.

QPT4di. Can you please tell me why your health is at risk from the vibration?

OPEN-ENDED RESPONSE

ASK ALL WHO SAY THAT THEIR POWER TOOL CAUSES NUMBNESS OR TINGLING IN YOUR HANDS AT QCM6. OTHERS GO TO QPT4e

QPT4dii. When using your usual power tools, how often do they cause numbness and tingling in your hands? Is that...READ OUT

Always
Usually
Sometimes
Hardly ever
Never

ASK ALL WHO SAY THAT THEY THINK USING POWER TOOLS MAY POSE A RISK TO THEIR HEALTH OR SAFETY AT QCM9 AND WHO DID SAY THAT THEIR TOOLS PRODUCE DUST AT QCM6.

QPT4e. And would you say that you were very concerned, fairly concerned, not very concerned or not at all concerned about any risks to your health and safety from the dust produced by the power tools or machinery you use?

Very concerned
Fairly concerned
Not very concerned
Not at all concerned
Don't know

ASK ALL WHO SAY THEY ARE VERY OR FAIRLY CONCERNED AT QPT4e (CODE 1 OR 2). OTHERS GO TO FILTER BEFORE QPT5a.

QPT4f. Can you please tell me why your health is at risk from the dust?

OPEN-ENDED RESPONSE

ASK ALL WHO SAY THEY ARE VERY OR FAIRLY CONCERNED (CODES 1 OR 2) AT QPT4 A, C OR E. OTHERS GO TO QPT6a.

QUESTION IS LOOPED FOR QPT4a,c,e

QPT5a. **SHOWCARD F** And how certain are you that you know how to minimise any risks to your health and safety from [textfill: NOISE, VIBRATION OR DUST DEPENDING ON CODES AT QPT 4A, C OR E] when you are using power tools or machinery?

Very certain
Fairly certain
Not very certain
Not at all certain
Don't know

ASK ALL WHO SAY THAT USING POWER TOOLS MAY POSE A RISK TO THEIR HEALTH OR SAFETY AT QCM9 APART FROM THOSE WHO DON'T HAVE AN EMPLOYER (QWH5C CODE 2).

QUESTION IS LOOPED FOR QPT4a,c,e

QPT6a. How much more, if anything, do you think your employer could be doing to prevent any risks to your health and safety from [textfill: NOISE, VIBRATION OR DUST DEPENDING ON CODES AT QPT 4A, C OR E] when using power tools or machinery? Is that... READ OUT

A lot more
A little more
Or nothing more
Don't know

ASK IF MORE AT QPT6a (CODES 1 OR 2). OTHERS GO TO QPT7.

QPT6b. What more do you think your employer could be doing to reduce the effects on your health and safety? PROBE: Anything else?

ASK ALL WHO SAY THAT THEY USE POWER TOOLS OR MACHINERY AT QCM6 AND HAVE A WORKPLACE (QWHA CODES 3 or 4).

DO NOT ASK IF NO MANAGER/SUPERVISOR AT QWH5b (CODE 2)

QPT7. **SHOWCARD G** While in your present job and while you have been using power tools or machinery, when was the last time a manager, supervisor, trainer or advisor where you were working checked that you are avoiding any risks to your health and safety?

In the last week
In the last month
In the last 6 months
In the last year
In the last two years
In the last five years
Longer than five years ago
Never
Don't know

ASK ALL WHO SAY THAT THEY WORK WITH POWER TOOLS OR MACHINERY AT QCM6.

QPT9. While in your present job, has anyone given you any training or information on how to minimise any risks to your health and safety from using power tools or machinery?

Yes
No
Don't know

ASK ALL WHO HAVE RECEIVED TRAINING AT QPT9 (CODE 1). OTHERS GO TO QPT14a.

QPT10. **SHOWCARD G AGAIN** And when was the last time you had any training or information on this?

CODE ONE ONLY

INTERVIEWER IF RESPONDENT ANSWERS 'NEVER' GO BACK TO THE PREVIOUS QUESTION AND RECODE 'NO'

In the last week
 In the last month
 In the last 6 months
 In the last year
 In the last two years
 In the last five years
 Longer than five years ago
 Don't know

QPT11. **SHOWCARD H** To what extent did this training or information help you to reduce any risks to your health and safety?

It helped a lot
 It helped a little
 It didn't make much difference
 It didn't make any difference
 Don't know

ASK ALL WHO WORK WITH POWER TOOLS OR MACHINERY AT QCM6

QPT14a. **SHOWCARD 27** Please can you look at this card and tell me, which, if any, of the things listed on it you use during the course of your job.

Chainsaws
 Cut off saws
 Hammer drills
 Concrete breakers
 Road breakers
 Whackers
 Impact wrenches
 Power hammers
 Chipping hammers
 Power chisels
 Needle scalers
 Pedestal grinders
 Polishers
 Power sanders
 Scrabblers
 Hand-held grinding tools (e.g. angle grinders)
 Power lawn mowers
 Strimmers
 Brush cutters
 Hand-fed power machinery (e.g. bench saws, bench planers, power and punch presses)
 Hand guided power equipment, e.g. routers, jigsaws, circular saws or planers
 Compressed air powered tools
 Other (specify)
 None of the above

ASK THOSE WHO HAVE CODED MORE THAN ONE AT QPT14a

QPT14b. **SHOWCARD 27 AGAIN.** Looking at this list can you please tell me whether there is one kind of power tool that you use most often?

CODE ONE ONLY

INTERVIEWER – IF USE THEM EQUALLY, ASK FOR ONE USED LAST.

QPT15. SHOWCARD 28 Please can you look at this card and tell me whether any of the following are provided for you to use while at work?

Gloves
 Safety helmet or hard hat
 Overalls/apron/protective suit
 Safety footwear
 Face shield or visor
 Other eye protection (goggles or safety glasses)
 Dust mask or respirator
 Hearing protection (ear muffs, ear defenders or ear plugs)
 Fume/gas/dust extraction attached to tools used
 Dust suppression (e.g. using water)
 Other specify
 None of the above
 Don't know

ASK FOR EACH PROVIDED AT QPT15. IF NONE USED, GO TO QPT18.

QPT16. SHOWCARD 29 Looking at this card, and thinking about (each item from QPT15), please can you tell me which phrase you would say best applies to you?

I always wear or use them when I should
 I usually wear or use them when I should
 I sometimes wear or use them when I should
 I hardly ever wear or use them when I should
 I never wear or use them when I should
 Don't know

ASK FOR EACH OF CODES 2, 3, 4 OR 5 AT QPT16. OTHERS GO TO QPT18.

QPT17. SHOWCARD 30 Please can you use the phrases on this card to tell me why you don't always use (CODE FROM QPT15) when you should?

INTERVIEWER: CODE ALL THAT APPLY
 ROTATE

I have to buy my own
 No one else does
 Not practical to use
 Someone said didn't need to
 Not available
 Broken / not working
 Forget to
 Makes the job more difficult
 Makes the job slower
 Don't think it is important to
 Not been shown how to
 Other (please specify)
 Don't know

ASK ALL WHO WORK WITH POWER TOOLS OR MACHINERY AT QCM6 AND HAVE A WORKPLACE (QWHA CODES 3 or 4).

QPT18. Thinking about most other workers who use power tools where you usually work, how often, do you see them not wearing the right equipment to protect them when using power tools? Is that...READ OUT

CODE ONE ONLY

Always
 Usually
 Sometimes
 Hardly ever
 Never
 Not applicable (no other power tool users)
 Don't know

QPT19. **SHOWCARD B** Taking into account all the measures in place where you usually work, in your view how effective are they at reducing any risks to workers' health and safety from working with power tools?

CODE ONE ONLY

Very effective
 Fairly effective
 Not very effective
 Not at all effective
 Don't know

IF CODE 2, 3, or 4 AT QPT19. OTHERS GO TO FILTER BEFORE QCH1.

QPT20. **SHOWCARD K** From this card, why do you think they aren't more effective?

INTERVIEWER: CODE ALL THAT APPLY.

Workers don't know the correct procedures
 Workers don't follow the correct procedures
 Supervision is poor
 Too much pressure to work quickly
 Equipment broken / not working
 Insufficient equipment provided / available
 The safety procedures are not relevant to the way we do the work
 Too many new workers / high turnover of workers
 Training on health and safety is poor / non-existent
 English is not a first language for many workers
 Other (specify)
 Don't know

6: HANDLING ANY MATERIALS, LIQUIDS OR SUBSTANCES THAT MIGHT CAUSE PROBLEMS THROUGH REGULAR CONTACT WITH THE SKIN FROM CM7

ASK ALL WHO SAY THEY HANDLE CERTAIN MATERIALS, LIQUIDS OR SUBSTANCES THAT MIGHT CAUSE PROBLEMS THROUGH REGULAR CONTACT WITH THE SKIN AT QCM7. OTHERS GO TO FILTER BEFORE QHW2b.

QCH1. **SHOWCARD D** You told me earlier that you work with such substance as [textfill using one or two of substances mentioned at QCM7] Using this card, thinking about a typical month, please can you tell me how frequently you would say that your job involves handling and working with these substances?

All the time
 Several times a day or more
 At least once a day
 At least once a week
 At least once a month
 Less often than once a month
 Don't know

QCH2. **SHOWCARD E** On the most recent day when you were working with these materials, how many hours altogether did you spend doing that?

Less than 1 hour
 1 hour but less than 2 hours
 2 hours but less than 4 hours
 4 hours but less than 8 hours
 8 hours or more
 Don't know

ASK ALL WHO SAY THAT THEY HANDLE ANY MATERIALS, LIQUIDS OR SUBSTANCES THAT MIGHT CAUSE PROBLEMS THROUGH REGULAR CONTACT WITH THE SKIN

QCH4a. Thinking about working with these substances, would you say that you were very concerned, fairly concerned, not very concerned or not at all concerned about any risk of developing skin problems?

CODE ONE ONLY.

Very concerned
 Fairly concerned
 Not very concerned
 Not at all concerned
 Don't know

ASK ALL WHO SAY THEY ARE VERY OR FAIRLY CONCERNED AT QCH4a (CODES 1 OR 2). OTHERS GO TO QCH6.

QCH4b. Can you please tell me why you are at risk of developing skin problems?

OPEN-ENDED RESPONSE

QCH5a. **SHOWCARD F** And how certain are you that you know how to minimise any risks of developing skin problems? Would you say that you are ...

Very certain
 Fairly certain
 Not very certain
 Not at all certain
 Don't know

ASK ALL WHO SAY THEY HANDLE CERTAIN SUBSTANCES AT QCM7 APART FROM THOSE WHO DON'T HAVE AN EMPLOYER (QWH5C CODE 2)

QCH6a. How much more, if anything, do you think that your employer could be doing to reduce any risks of you developing skin problems? Is it...READ OUT

A lot more
A little more
Or nothing more
Don't know

ASK IF MORE AT QCH6a (CODE 1 OR 2). OTHERS GO TO QCH7.

QCH6b. What more do you think your employer could be doing?
PROBE: Anything else?

ASK ALL WHO SAY THAT THEY HANDLE ANY MATERIALS, LIQUIDS OR SUBSTANCES THAT MIGHT CAUSE PROBLEMS THROUGH REGULAR CONTACT WITH THE SKIN. DO NOT ASK IF NO MANAGER/SUPERVISOR AT QWH5b (CODE 2)

QCH7. **SHOWCARD G** While you have been working with these substances, when was the last time a manager, supervisor, trainer or advisor checked that you were avoiding any risk of developing skin problems?

In the last week
In the last month
In the last six months
In the last year
In the last two years
In the last five years
Longer than five years ago
Never
Don't know

ASK ALL WHO SAID MORE THAN ONE ITEM AT QCM7

QCH14b. **SHOWCARD 17 AGAIN.** You told me earlier that you work with (list from CM7 section). Could you please tell me which you work with most often?

CODE ONE ONLY

INTERVIEWER – IF USE THEM EQUALLY, ASK FOR ONE USED LAST

ASK ALL

QCH15. **SHOWCARD 31** Please can you look at this card and tell me whether any of the following are provided at work or for you to use while at work to protect your skin?

Reusable rubber, latex or plastic gloves
Disposable rubber, latex or plastic gloves
Reusable cotton or leather gloves
Disposable other gloves
Aprons, coveralls
Protective footwear
Face mask / visor
Respirator / breathing mask
Hand or skin creams
Hand washing facilities
Ventilation booths / ventilation spaces*
Air quality alarm system equipment*
Splashguards
Antiseptic gel
Hard hat
Other specify*

None of the above
Don't know

ASK FOR EACH USED AT QCH15 APART FROM THOSE MARKED *. IF NONE USED, GO TO FILTER BEFORE QCH11ci

QCH16. **SHOWCARD 29** Looking at this card, and thinking about (each item from QCH15), please can you tell me which phrase you would say best applies to you?

I always wear or use them when I should
I usually wear or use them when I should
I sometimes wear or use them when I should
I hardly ever wear or use them when I should
I never wear or use them when I should
Don't know

ASK ALL WHO DON'T ALWAYS USE AID WHEN THEY SHOULD (QCH16 CODES 2, 3, 4 OR 5). OTHERS GO TO FILTER BEFORE QCH19a.

QCH17. **SHOWCARD J** Please can you use the phrases on this card to tell me why you don't always use (EACH CODE FROM QCH15) when you should?

INTERVIEWER: CODE ALL THAT APPLY

No one else does
Someone said didn't need to
Not available
Broken / not working
Forgot to use it
Makes the job more difficult
Makes the job slower
Don't think it is important to
Not been shown how to
Other (please specify)
Don't know

ASK ALL WHO SAY THAT SYNTHETIC GLOVES ARE PROVIDED AT THEIR WORKPLACE (QCH15 CODES 1 OR 2). OTHERS GO TO QCH11ci

QCH19a. Can I just confirm, do you usually wear rubber, plastic or latex gloves in your job?

Yes
No

IF YES AT QCH19a. OTHERS GO TO QCH11ci.

QCH19b. And do you ever wear disposable latex gloves?

Yes
No

IF YES AT QCH19a or b. OTHERS GO TO QCH11ci.

QCH20. What's the longest time you would normally wear any of these gloves before taking them off?

INTERVIEWER - IF UNDER AN HOUR PLEASE ENTER A 0 IN THE HOUR BOX.

Minutes & Hours

QCH21. Can I just check, while in your present job, have you had any specific instructions or training about how to put any of these gloves on or take them off?

Yes
No

IF YES AT QCH21. OTHERS GO TO QCH11ci

QCH22. **SHOWCARD B** In your view, how effective was this in helping you minimise any risks of skin problems? Was it...READ OUT

ROTATE

Very effective
Fairly effective
Not very effective
Not at all effective
Don't know

ASK ALL WHO QUALIFY FOR CH SECTION APART FROM THOSE WHO CODE 1 AT QCH21.

QCH11ci. While in your present job, has anyone given you any other training or information on how to protect your skin at work?

Yes – GO TO QCH11e.
No – GO TO QCH18
Don't know

ASK ALL WHO CODE 1 AT QCH21.

QCH11cii. While in your present job, apart from the instructions or training that you received about how to put your gloves on and take them off, has anyone given you any other training or information on how to protect your skin at work?

Yes – GO TO QCH11e.
No – GO TO QCH18
Don't know

ASK IF CODE 1 AT QCH11ci or QCH11cii. OTHERS GO TO FILTER BEFORE QCH11f.

QCH11e. **SHOWCARD G AGAIN** When was the last time you had any training or information on how to protect your skin in your job? CODE ONE ONLY.

INTERVIEWER IF RESPONDENT ANSWERS 'NEVER' GO BACK TO THE PREVIOUS QUESTION AND RECODE 'NO'

In the last week
In the last month
In the last 6 months
In the last year
In the last two years
In the last five years
Longer than five years ago
Don't know

ASK ALL WHO HAVE RECEIVED TRAINING AT QCH21 OR QCH11ci or QCH11cii AND HAVE A WORKPLACE (QWHA CODES 3 or 4). OTHERS GO TO QCH18.

QCH11f. **SHOWCARD H** To what extent did your training or information help you protect your skin in your job?

It helped a lot
It helped a little
It didn't make much difference
It didn't make any difference
Don't know

ASK ALL WHO SAY THAT SYNTHETIC GLOVES ARE PROVIDED AT THEIR WORKPLACE (QCH15 CODES 1 OR 2) AND HAVE A WORKPLACE (QWHA CODES 3 or 4).

OTHERS GO TO FILTER BEFORE QHW2b.

QCH18. **SHOWCARD 21** Thinking about how gloves are used at your workplace and using the answers on this card, would you say that most of the people when working with chemicals or other substances...

Always use them when they should

Usually use them when they should

Sometimes use them when they should

Hardly ever use them when they should

Never use them when they should

Not applicable (no gloves provided / no other workers need use them)

Don't know

7: PROLONGED SKIN CONTACT WITH WATER (INCLUDING FREQUENT HAND WASHING SEVERAL TIMES AN HOUR) (CODE 7 AT QCM1)

ASK ALL THOSE WHO HAVE PROLONGED SKIN CONTACT WITH WATER QCM1 CODE 7 AND ARE ELIGIBLE (AT QCM5 AND QHW2a) AND ARE SELECTED TO ANSWER THIS SECTION

QHW2b. Thinking about the last working day when you had prolonged skin contact with water, for how many hours was that altogether on that day?

CODE TO THE NEAREST WHOLE HOUR

ASK ALL WHO SAY THAT PROLONGED SKIN CONTACT WITH WATER MAY BE A RISK TO THEIR HEALTH AND SAFETY AT QCM9. OTHERS GO TO QHW6.

QHW3a. Thinking about prolonged skin contact with water in your job, would you say you were very concerned, fairly concerned, not very concerned or not at all concerned about any risks of skin problems?

Very concerned
Fairly concerned
Not very concerned
Not at all concerned
Don't know

ASK ALL WHO SAY THEY ARE CONCERNED AT QHW3a (CODES 1 OR 2). OTHERS GO TO QHW5a.

QHW3b. Can you please tell me why you are at risk of developing skin problems?

OPEN-ENDED RESPONSE

QHW4a. **SHOWCARD F** And how certain are you that you know how to minimise any risks of skin problems from prolonged skin contact with water?

Very certain
Fairly certain
Not very certain
Not at all certain
Don't know

ASK ALL WHO SAY THAT PROLONGED SKIN CONTACT WITH WATER MAY POSE A RISK TO THEIR HEALTH OR SAFETY AT QCM9. APART FROM THOSE WHO DON'T HAVE AN EMPLOYER (QWH5C CODE 2).

QHW5a. How much more do you think that your employer could be doing to reduce any risks to you of skin problems from prolonged skin contact with water? Is it...READ OUT

A lot more
A little more
Or nothing more
Don't know

ASK IF CODES 1 OR 2 AT QHW5a (CODE 1). OTHERS GO TO QHW6a.

QHW5b What more do you think your employer could be doing. PROBE: Anything else?

ASK ALL WHO SAY THAT THEIR WORK INVOLVES PROLONGED SKIN CONTACT WITH WATER AT QCM1 (CODE 7) AND HAVE A WORKPLACE (QWHA CODES 3 or 4). DO NOT ASK IF NO MANAGER/SUPERVISOR AT QWH5b (CODE 2)

QHW6a. **SHOWCARD G** While in your present job and while you have had prolonged skin contact with water, when was the last time a manager, supervisor, trainer or advisor where you usually work checked that you were avoiding any risk of skin problems?

In the last week
 In the last month
 In the last 6 months
 In the last year
 In the last two years
 In the last five years
 Longer than five years ago
 Never
 Don't know

ASK ALL WHO SAY THAT THEIR WORK INVOLVES PROLONGED SKIN CONTACT WITH WATER AT QCM1 (CODE 7).

QHW7. In your present job, has anyone given you any training or information at work on how to avoid any risks of skin problems from prolonged contact with water?

Yes
 No
 Don't know

ASK ALL WHO HAVE RECEIVED TRAINING AT QHW7 (CODE 1) AND WHO HAVE BEEN WORKING IN THEIR CURRENT JOB FOR OVER 3 MONTHS. OTHERS GO TO QHW11.

QHW8. **SHOWCARD G AGAIN** And when was the last time you had any training or information on this?

INTERVIEWER IF RESPONDENT ANSWERS 'NEVER' GO BACK TO THE PREVIOUS QUESTION AND RECODE 'NO'

In the last week
 In the last month
 In the last 6 months
 In the last year
 In the last two years
 In the last five years
 Longer than five years ago
 Don't know

QHW9. **SHOWCARD H** To what extent do you think this training or information helped you to minimise any risks of skin problems?

It helped a lot
 It helped a little
 It didn't make much difference
 It didn't make any difference
 Don't know

ASK ALL WHO SAY THAT THEIR WORK INVOLVES PROLONGED SKIN CONTACT WITH WATER AT QCM1 (CODE 7)

QHW11. **SHOWCARD 32** Please can you look at this card and tell me whether any of the following are provided at work for you to use?

Rubber, latex or plastic gloves
 Hot water
 Soap / de-greasants

Pre-work skin creams
 After work skin creams
 Warm-air hand dryer
 Paper towels
 Antiseptic gel
 None of the above
 Don't know

ASK FOR EACH CODE MENTIONED AT QHW11. OTHERS GO TO QHW14.

QHW12. **SHOWCARD 33** Looking at this card and thinking about (each item from above) please tell me which phrase best applies to you?

I always use it/them when I should
 I usually use it/them when I should
 I sometimes use it/them when I should
 I hardly ever use it/them when I should
 I never use it/them when I should
 Don't know

ASK ALL WHO DON'T ALWAYS USE (EACH ITEM FROM QHW11) (QHW12 CODES 2,3, 4 or 5). OTHERS GO TO QHW14.

QHW13a. **SHOWCARD J** Please can you use the phrases on this card to tell me why you don't always use (each code from above)

No one else does
 Someone said didn't need to
 Not available
 Broken / not working
 Forgot to use it
 Makes the job more difficult
 Makes the job slower
 Don't think it is important to
 Not been shown how to
 Other (please specify)
 Don't know

ASK ALL WHO HAVE MENTIONED A CODE AT QHW11

QHW13b Thinking about [textfil selected item from showcard 32], please tell me how often others at your work use these items? Is that...READ OUT

Always
 Usually
 Sometimes
 Hardly ever
 Never
 Don't know

ASK ALL WHO SAY THAT THEIR WORK INVOLVES PROLONGED SKIN CONTACT WITH WATER AT QCM1 (CODE 7) AND HAVE A WORKPLACE (QWHA CODES 3 or 4).

QHW14. **SHOWCARD B** Taking into account all the measures in place where you usually work, in your view how effective are they at reducing any risks of workers developing problems from prolonged skin contact with water?

Very effective
 Fairly effective
 Not very effective
 Not at all effective
 Don't know

ASK IF CODE 2, 3, OR 4 AT QHW14. OTHERS GO TO HW16.

QHW15. **SHOWCARD K** From this card, why do you think they aren't more effective?

- Workers don't know the correct procedures
- Workers don't follow the correct procedures
- Supervision is poor
- Too much pressure to work quickly
- Equipment broken / not working
- Insufficient equipment provided / available
- The safety procedures are not relevant to the way we do the work
- Too many new workers / high turnover of workers
- Training on health and safety is poor / non-existent
- English is not a first language for many workers
- Other (specify)

ASK ALL WHO SAY THAT THEIR WORK INVOLVES PROLONGED SKIN CONTACT WITH WATER AT QCM1 (CODE 7). APART FROM THOSE WHO HAVE ANSWERED THIS QUESTION AT QCH20

QHW16a. Can I just check, do you usually wear rubber, plastic or latex gloves in your job?

- Yes
- No
- Don't know

ASK IF CODE 1 AT QHW16a. OTHERS GO TO FILTER BEFORE QDG4.

QHW16b. And do you ever wear disposable latex gloves?

- Yes
- No
- Don't know

ASK IF YES AT QHW16a or b. OTHERS GO TO FILTER BEFORE QDG4.

QHW17. What's the longest time you would normally wear any of these before taking them off?

If less than 1 hour please put a 0 in the hour box.

If whole hour(s) enter a 0 in the minutes box

minutes and hours

8: WORKING WHERE THERE ARE DUSTS, FUMES OR GASES

ASK ALL WHO ARE ELIGIBLE (AT QCM8a) AND ARE SELECTED TO ANSWER THIS SECTION

QDG4. **SHOWCARD D** Using this card and thinking about a typical week, please tell me how often your job involves working where there are dusts, fumes or gases in the air?

All the time
 Several times a day or more
 At least once a day
 At least once a week
 At least once a month
 Less often than once a month
 Don't know

QDG5. On the days when you are working where there are dusts, fumes or gases in the air, how many hours a day altogether do you usually spend working there? Is that READ OUT

Less than 1 hour
 1 hour but less than 2 hours
 2 hours but less than 4 hours
 4 hours but less than 8 hours
 8 hours or more
 Don't Know

ASK ALL WHO SAY THAT WORKING WHERE THERE ARE DUSTS, FUMES OR GASES IN THE AIR MAY POSE A RISK TO THEIR HEALTH OR SAFETY AT QCM9. OTHERS GO TO QDG10.

QDG6a. Thinking about working where there are dusts, fumes or gases in the air, would you say you were very concerned, fairly concerned, not very concerned or not at all concerned about any risks to you of developing breathing problems?

Very concerned
 Fairly concerned
 Not very concerned
 Not at all concerned
 Don't know

ASK ALL WHO ARE VERY OR FAIRLY CONCERNED AT QDG6a (CODES 1 OR 2). OTHERS GO TO QDG8.

QDG6b. Can you please tell me why you are at risk of developing breathing problems?

OPEN-ENDED RESPONSE

QDG7a. **SHOWCARD F** And how certain are you that you know how to minimise any risks of developing any breathing problems when you are working where there are dusts, fumes or gases in the air?

Very certain
 Fairly certain
 Not very certain
 Not at all certain
 Don't know

ASK ALL WHO SAY THAT WORKING WHERE THERE ARE DUSTS, FUMES OR GASES IN THE AIR POSES A RISK TO THEIR HEALTH OR SAFETY AT QCM9 APART FROM THOSE WHO DON'T HAVE AN EMPLOYER (QWH5C CODE 2).

QDG8. How much more do you think your employer could be doing to reduce any risks of you developing breathing problems from working where there are dusts, fumes or gases in the air? Is that...READ OUT

A lot more
A little more
Or nothing more
Don't know

ASK IF A LITTLE OR A LOT MORE AT QDG8 (CODES 1 OR 2). OTHERS GO TO QDG10.

QDG9. What more do you think your employer could be doing?

PROBE: ANYTHING ELSE?

ASK ALL WHO WORK WHERE THERE ARE DUSTS, FUMES OR GASES IN THE AIR. DO NOT ASK IF NO MANAGER OR SUPERVISOR (QWH5b CODE 2)

QDG10. **SHOWCARD G** While in your present job and while you have been working where there are dusts, fumes or gases in the air, when was the last time a manager, supervisor, trainer or advisor checked that you were using equipment that protects your breathing?

In the last week
In the last month
In the last 6 months
In the last year
In the last two years
In the last five years
Longer than five years ago
Never
Don't know

ASK ALL WHO WORK WHERE THERE ARE DUSTS, FUMES OR GASES IN THE AIR.

QDG12. While in your present job, has anyone given you any training or information on how to avoid breathing problems when working where there are dusts, fumes or gases in the air?

Yes
No
Don't know

ASK IF RESPONDENT HAS RECEIVED TRAINING OR INFORMATION (QDG12 CODE 1). OTHERS GO TO QDG15

QDG13. **SHOWCARD G AGAIN** And when was the last time you had any training or information on this?

INTERVIEWER IF RESPONDENT ANSWERS 'NEVER' GO BACK TO THE PREVIOUS QUESTION AND RECODE 'NO'

In the last week
In the last month
In the last 6 months
In the last year
In the last two years
In the last five years
Longer than five years ago
Don't know

QDG14. **SHOWCARD H** To what extent did this training or information help you reduce any risks of developing breathing problems?

It helped a lot
 It helped a little
 It didn't make much difference
 It didn't make any difference
 Don't know

ASK ALL WHO WORK WHERE THERE ARE DUSTS, FUMES OR GASES IN THE AIR.

QDG17. **SHOWCARD 35** Please can you look at this card and tell me whether any of the following are provided at work for you to use in your job?

Room extraction (general ventilation)
 Dilution (air blower)
 Dust suppression (e.g. using water)
 Dust extraction
 Fume extraction
 Booth
 Containment (e.g. cabinet, glove box)
 Dust masks
 Respirator
 Air-fed respirator
 None of the above
 Don't know

ASK FOR EACH ITEM MENTIONED AT QDG17. OTHERS GO TO FILTER BEFORE QDG20.

QDG18. **SHOWCARD 33** Looking at this card and thinking about (each item from QDG17) please tell me which phrase best applies to you?

I always use it/them when I should
 I usually use it/them when I should
 I sometimes use it/them when I should
 I hardly ever use it/them when I should
 I never use it/them when I should
 Don't know

ASK ALL WHO DON'T ALWAYS USE (EACH ITEM FROM QDG17) (QDG18 CODES 2, 3, 4 or 5) OTHERS GO TO FILTER BEFORE QDG20.

QDG19. **SHOWCARD J** Please can you use the phrases on this card to tell me why you don't always use (each code from QDG17) when you should?

No one else does
 Someone said didn't need to
 Not available
 Broken / not working
 Forgot to use it
 Makes the job more difficult
 Makes the job slower
 Don't think it is important to
 Not been shown how to
 Other (please specify)
 Don't know

ASK ALL WHO SAY THAT PROTECTION IS PROVIDED AT WORK (QDG17 CODES 1-7) AND HAVE A WORKPLACE (QWHA CODES 3 or 4). OTHERS GO TO QDG21.

QDG20. **SHOWCARD 10** Using the answers on this card, and thinking about other workers at this site who also work where there are dust, fumes or gases in the air, how often do they use the appropriate protection against the risk of breathing problems?

Always
Usually
Sometimes
Hardly ever
Never
Don't know

ASK ALL WHO WORK WHERE THERE ARE DUSTS, FUMES OR GASES IN THE AIR AND HAVE A WORKPLACE (QWHA CODES 3 or 4).

QDG21. **SHOWCARD B** Taking into account all the measures in place where you usually work, in your view how effective are they at reducing any risks to workers of developing breathing problems?

Very effective
Fairly effective
Not very effective
Not at all effective
Don't know

ASK IF CODE 2, 3 OR 4 AT QDG21. CODE ALL MENTIONED. OTHERS GO TO FILTER BEFORE QNL1.

QDG22. **SHOWCARD K** From this card, why do you think they aren't more effective?

Workers don't know the correct procedures
Workers don't follow the correct procedures
Supervision is poor
Too much pressure to work quickly
Equipment broken / not working
Insufficient equipment provided / available
The safety procedures are not relevant to the way we do the work
Too many new workers / high turnover of workers
Training on health and safety is poor / non-existent
English is not a first language for many workers
Other (specify)

ASK ALL WHO SAY AT QDG17 THAT A RESPIRATOR IS PROVIDED AT WORK. OTHERS GO TO FILTER BEFORE QDG25.

QDG23. You told me earlier that a respirator is provided for you to use in your job. While in your present job, has anyone given you any training or information on how to wear a respirator?

Yes
No
Don't know

QDG24. And have you ever had training on how to keep a respirator in good working order?

Yes
No
Don't know

ASK ALL WHO SAY AT QDG17 THAT A DUST MASK IS PROVIDED AT WORK. OTHERS GO TO FILTER BEFORE QDG26.

QDG25. You told me earlier that dust masks are provided at work for you to use in your job. While in your present job, has anyone given you any training or information on when to change a dust mask?

Yes
No
Don't know

ASK ALL WHO SAY AT QDG17 THAT VENTILATION OR EXTRACTION EQUIPMENT ARE PROVIDED AT WORK (CODES 1, 2, 4, 5 OR 6 AT QDG17). OTHERS GO TO QDG27.

QDG26. You told me earlier that ventilation or extraction equipment are provided at your work. Have you ever had training on how to work in a ventilated booth or with dust or fume extraction equipment?

Yes
No
Don't know

ASK ALL WHO WORK WHERE THERE ARE DUSTS, FUMES OR GASES IN THE AIR.

QDG27 Do you usually clean your workstation or other equipment or does someone else do it?

Yes – I do it
No – someone else does it
No – it isn't ever cleaned
Don't know

ASK IF CODE 1 AT QDG27. OTHERS GO TO FILTER BEFORE QNL1.

QDG28. **SHOWCARD 36** Please can you look at this card and tell me how you clean your workstation or equipment?

Brushing
Blowing down with an air line / hose
H-type vacuum cleaner
Absorbent materials (for spills)
Washing facilities
Specialist contractor
Other (specify)
Don't know

9: WORKING WHERE (MACHINERY) NOISE IS LOUD AND CONTINUOUS AS PART OF THEIR JOB

ASK ALL WHO WORK WHERE NOISE IS LOUD AND CONTINUOUS AS PART OF THEIR JOB (QCM1 CODE 8) AND ARE SELECTED TO ANSWER THIS SECTION. OTHERS GO TO FILTER BEFORE QSD1.

QNL1. **SHOWCARD D** Using this card, thinking about a typical month, please can you tell me how frequently you would say that your job involves working where machinery noise is loud and continuous?

All the time
 Several times a day or more
 At least once a day
 At least once a week
 At least once a month
 Less often than once a month
 Don't know

QNL2. **SHOWCARD E** On the most recent day when you were working where noise was loud and continuous how many hours altogether did you spend doing that?

Less than 1 hour
 1 hour but less than 2 hours
 2 hours but less than 4 hours
 4 hours but less than 8 hours
 8 hours or more
 Don't Know

ASK ALL WHO SAY THAT THEY THINK WORKING WHERE NOISE IS LOUD AND CONTINUOUS MAY POSE A RISK TO THEIR HEALTH AND SAFETY AT QCM9. OTHERS GO TO QNL6.

QNL4a. Thinking about working where noise is loud and continuous in your job, would you say that you were very concerned, fairly concerned, not very concerned or not at all concerned about any risks to your hearing?

Very concerned
 Fairly concerned
 Not very concerned
 Not at all concerned
 Don't know

ASK ALL WHO SAY THEY ARE VERY OR FAIRLY CONCERNED AT QNL4a (CODES 1 OR 2). OTHERS GO TO FILTER BEFORE QNL6.

QNL4b. Can you please tell me why your hearing is at risk from the noise?

OPEN-ENDED RESPONSE

QNL5a. **SHOWCARD F** And how certain are you that you know how to protect your hearing when you are working where noise is loud and continuous?

Very certain
 Fairly certain
 Not very certain
 Not at all certain
 Don't know

ASK ALL WHO SAY THAT THEY THINK WORKING WHERE NOISE IS LOUD AND CONTINUOUS MAY POSE A RISK TO THEIR HEALTH AND SAFETY AT QCM9 APART FROM THOSE WHO DON'T HAVE AN EMPLOYER (QWH5C CODE 2). OTHERS GO TO QNL8.

QNL6. How much more, if anything, do you think that your employer could be doing to reduce any risks to your hearing from working where noise is loud and continuous? Is that READ OUT

A lot more
A little more
Or nothing more
Don't know

ASK IF CODES 1 OR 2 AT QNL6. OTHERS GO TO QNL8.

QNL7. What more could your employer be doing to reduce your risks? PROBE: Anything else?

ASK ALL WHO WORK WHERE NOISE IS LOUD AND CONTINUOUS. DO NOT ASK IF NO MANAGER/SUPERVISOR AT QWH5b (CODE 2)

QNL8. **SHOWCARD G** While in your present job and while you have been working where noise is loud and continuous, when was the last time a manager, supervisor, trainer or advisor where you are working checked that you were protecting your hearing?

In the last week
In the last month
In the last 6 months
In the last year
In the last two years
In the last five years
Longer than five years ago
Never
Don't know

ASK ALL WHO WORK WHERE NOISE IS LOUD AND CONTINUOUS

QNL10. While in your present job, has anyone given you any training or information on how to avoid any risks to your hearing when working where noise is loud and continuous?

Yes
No

ASK ALL WHO HAVE RECEIVED ANY TRAINING OR INFORMATION (QNL10 CODE 1). OTHERS GO TO QNL13.

QNL11. **SHOWCARD G AGAIN** And when was the last time you had any training or information on this?

INTERVIEWER If respondent answers 'Never' go back to the previous question and recode 'No'

In the last week
In the last month
In the last 6 months
In the last year
In the last two years
In the last five years
Longer than five years ago
Don't know

QNL12. **SHOWCARD H** To what extent did this training or information help you reduce any risks to your hearing?

It helped a lot
 It helped a little
 It didn't make much difference
 It didn't make any difference
 Don't know

ASK ALL WHO WORK WHERE NOISE IS LOUD AND CONTINUOUS

QNL15. **SHOWCARD 37** Please can you look at this card and tell me whether any of the following are provided at work for you to use?

Barriers or booths to reduce noise
 Soundproofing
 Fittings to machinery to dampen noise
 Noise limits
 Hearing protection (ear muffs, ear defenders, earplugs)
 Other (specify)
 None of the above
 Don't know

ASK ONLY FOR CODE 5 AT QNL15. OTHERS GO TO FILTER BEFORE QNL18

QNL16. **SHOWCARD 38** Looking at this card and thinking about hearing protection, please tell me which phrase best applies to you?

I always use it when I should
 I usually use it when I should
 I sometimes use it when I should
 I hardly ever use it when I should
 I never use it when I should
 Don't know

ASK ALL WHO DON'T ALWAYS USE HEARING PROTECTION WHEN THEY SHOULD (QNL16 CODES 2, 3, 4 OR 5). OTHERS GO TO FILTER BEFORE QNL18)

QNL17. **SHOWCARD J** Please can you use the phrases on this card to tell me why you don't always use hearing protection when you should?

No one else does
 Someone said didn't need to
 Not available
 Broken / not working
 Forgot to use it
 Makes the job more difficult
 Makes the job slower
 Don't think it is important to
 Not been shown how to
 Other (please specify)
 Don't know

ASK ALL WHO HAVE PROTECTION PROVIDED AT WORK (QNL15 CODES 1 – 5) AND HAVE A WORKPLACE (QWHA CODES 3 or 4). OTHERS GO TO QNL19.

QNL18. Thinking about most other workers where you usually work where noise is loud and continuous, how often do they use the hearing protection provided? Is that READ OUT

Always
Usually
Sometimes
Hardly ever
Never
Not applicable (no other workers need to wear hearing protection)
Don't know

ASK ALL WHO SAY THAT THEY WORK WHERE NOISE IS LOUD AND CONTINUOUS AT QCM1 AND HAVE A WORKPLACE (QWHA CODES 3 or 4).

QNL19. **SHOWCARD B** Taking into account all the measures in place where you usually work, in your view how effective are they at reducing any risks to your hearing from working where noise is loud and continuous? Are they

Very effective
Fairly effective
Not very effective
Not at all effective
Don't know

ASK IF CODE 2, 3 or 4 AT QNL19. OTHERS GO TO QSD1

QNL20. **SHOWCARD K** From this card, why do you think they aren't more effective?

INTERVIEWER: CODE ALL THAT APPLY.

Workers don't know the correct procedures
Workers don't follow the correct procedures
Supervision is poor
Too much pressure to work quickly
Equipment broken / not working
Insufficient equipment provided / available
The safety procedures are not relevant to the way we do the work
Too many new workers / high turnover of workers
Training on health and safety is poor / non-existent
English is not a first language for many workers
Other (specify)
Don't know

10: SITTING DOWN TO DO YOUR JOB

PLEASE NOTE FOR THOSE WHO ARE WORKING LESS THAN 21 HOURS A WEEK (QWH13) THEN "FOUR" HOURS IS REPLACED WITH "TWO"

ASK ALL WHO ARE SITTING DOWN TO DO THEIR JOB FOR AT LEAST FOUR HOURS A DAY (CODE 10 AT QCM1). OTHERS GO TO QDD1.

QSD1. **SHOWCARD 39** Using this card and thinking about a typical month, please tell me how often your job involves sitting down for four or more hours a day altogether to do your job?

Every day
Most days of the week
At least once a week
At least once a month
Less often than once a month
Don't know

QSD2. **SHOWCARD E** On the most recent day when you were sitting down to do your job how many hours altogether did you spend doing that?

Less than 1 hour
1 hour but less than 2 hours
2 hours but less than 4 hours
4 hours but less than 8 hours
8 hours or more
Don't know

ASK ALL WHO SAY THAT SITTING DOWN TO DO THEIR JOB MAY POSE A RISK TO THEIR HEALTH OR SAFETY AT QCM9 AND SIT DOWN FOR MORE THAN FOUR HOURS A DAY (QSD2 CODES 4 OR 5) OR SIT DOWN FOR MORE THAN 2 HOURS A DAY (IF PART TIME) (QSD2 CODES 3, 4 OR 5). OTHERS GO TO QSD7.

QSD4a. Thinking about the work you do while sitting down would you say you were very concerned, fairly concerned, not very concerned or not at all concerned about any risks of arm, wrist or hand problems?

Very concerned
Fairly concerned
Not very concerned
Not at all concerned
Don't know

ASK ALL THOSE WHO ARE VERY OR FAIRLY CONCERNED AT QSD4a (CODES 1 OR 2). OTHERS GO TO QSD6.

QSD4b. Can you please tell me why you think you are at risk of developing arm, wrist or hand problems?

OPEN-ENDED RESPONSE

QSD5a. **SHOWCARD F** And how certain are you that you know how to avoid any risks of arm, wrist or hand problems from this work?

Very certain
Fairly certain
Not very certain
Not at all certain
Don't know

ASK ALL WHO SAY THAT SITTING DOWN TO DO THEIR JOB MAY POSE A RISK TO THEIR HEALTH OR SAFETY AT QCM9 AND SIT DOWN FOR MORE THAN FOUR HOURS A DAY (QSD2 CODES 4 OR 5) OR AND SIT DOWN FOR MORE THAN 2 HOURS A DAY (IF PART TIME) (QSD2 CODES 3, 4 OR 5) APART FROM THOSE WHO DON'T HAVE AN EMPLOYER (QWH5C CODE 2).
 QSD6a. How much more, if anything, do you think your employer could be doing to reduce any risks of arm, wrist or hand problems from this work? Is that READ OUT

A lot more
 A little more
 Or nothing more
 Don't know

ASK IF CODES 1 OR 2 AT QSD6. OTHERS GO TO QSD7.

QSD6b. What more do you think your employer could be doing. PROBE: Anything else?

ASK ALL WHO SIT DOWN TO DO THEIR JOB FOR AT LEAST 4 HOURS A DAY (QSD2 CODES 4 OR 5) OR SIT DOWN FOR MORE THAN 2 HOURS A DAY (IF PART TIME) (QSD2 CODES 3, 4 OR 5). DO NOT ASK IF NO MANAGER/SUPERVISOR AT QWH5b (CODE 2).

QSD7. **SHOWCARD G** While in your present job and while you have been working sitting down for four or more hours a day altogether, when was the last time a manager, supervisor, trainer or advisor where you are working checked that you were minimising any risk of arm, wrist or hand problems?

In the last week
 In the last month
 In the last 6 months
 In the last year
 In the last two years
 In the last five years
 Longer than five years ago
 Never
 Don't know

ASK ALL WHO SIT DOWN TO DO THEIR JOB FOR AT LEAST 4 HOURS A DAY (QSD2 CODES 4 OR 5) OR SIT DOWN FOR MORE THAN 2 HOURS A DAY (IF PART TIME) (QSD2 CODES 3, 4 OR 5). APART FROM THOSE WHO DON'T HAVE AN EMPLOYER (QWH5C CODE 2). OTHERS GO TO QSD12.

QSD9. While in your present job, has your employer...

- a. Carried out an assessment of how you are sitting at work?
- b. Provided training or advice on how you work to avoid arm, wrist or hand problems?
- c. Provided guidance on how often you should take breaks from sitting at your job?

Yes
 No
 Don't know

ASK ALL WHO HAVE EVER RECEIVED TRAINING OR GUIDANCE (CODED YES AT QSD9 STATEMENT B AND C). OTHERS GO TO QSD12.

ASK ALL WHO SAY YES AT QSD9 (FOR STATEMENTS B AND C). USE APPROPRIATE TEXTFILL

QSD10. **SHOWCARD G AGAIN** And when was the last time you had any TEXTFILL:

- b. training or advice on how you should work to avoid arm, wrist or hand problems?
- e. guidance on how often you should take breaks from sitting at your job?

INTERVIEWER IF RESPONDENT ANSWERS 'NEVER' GO BACK TO THE PREVIOUS QUESTION AND RECODE 'NO'

In the last week
 In the last month
 In the last 6 months
 In the last year
 In the last two years
 In the last five years
 Longer than five years ago
 Don't know

QSD11. **SHOWCARD H** To what extent did this training or information help you reduce any risks of your developing arm, wrist or hand problems?

It helped a lot
 It helped a little
 It didn't make much difference
 It didn't make any difference

ASK ALL WHO SIT DOWN TO DO THEIR JOB FOR AT LEAST 4 HOURS A DAY (QSD2 CODES 4 OR 5) OR SIT DOWN FOR MORE THAN 2 HOURS A DAY (IF PART TIME) (QSD2 CODES 3, 4 OR 5).

QSD12a. In your present job, have you had a health condition as a result of the work you do whilst sitting down to do your job for four or more hours a day altogether?

Yes
 No

ASK IF YES AT QSD12a. OTHERS GO TO QSD13a.

QSD12b. Can you please tell me what that is?
 OPEN-ENDED RESPONSE

ASK ALL WHO SIT DOWN TO DO THEIR JOB FOR AT LEAST 4 HOURS A DAY (QSD2 CODES 4 OR 5) OR SIT DOWN FOR MORE THAN 2 HOURS A DAY (IF PART TIME) (QSD2 CODES 3, 4 OR 5).

QSD13a. Can I just check, does your work normally involve you sitting for more than four hours a day altogether at a desk and using a computer, or other display equipment, including checkout, control panel, CCTV, or other job involving a keyboard and screen?

Yes
 No

ASK IF YES AT QSD13a OTHERWISE GO TO QSD17

QSD14. **SHOWCARD 40** Please can you look at this card and tell me whether any of the following are provided at work for you to use?

Footrest
 Wrist rest
 Computer screen adjustable for position #
 Chair adjustable for height and angle of back support #
 Chair adjustable for height only #
 Information on how to sit to avoid pain in your arm, wrist or hands
 None of these
 Don't know

ASK FOR EACH ITEM AT QSD14 EXCEPT THOSE MARKED #. OTHERS GO TO QSD17.

QSD15. **SHOWCARD 38** Looking at this card and thinking about (each item selected at QSD14, EXCEPT THOSE MARKED #) please tell me which phrase best applies to you?

I always use it when I should
 I usually use it when I should
 I sometimes use it when I should
 I hardly ever use it when I should
 I never use it when I should
 Don't know

ASK ALL THOSE WHO DON'T ALWAYS USE EACH ITEM AT QSD14 (QSD15 CODES 2, 3, 4 OR 5). OTHERS GO TO QSD17.

QSD16. **SHOWCARD J** Please can you use the phrases on this card to tell me why you don't always use (each code from QSD14) when you should?

No one else does
 Someone said didn't need to
 Not available
 Broken / not working
 Forgot to use it
 Makes the job more difficult
 Makes the job slower
 Don't think it is important to
 Not been shown how to
 Other (please specify)
 Don't know

ASK ALL WHO HAVE MENTIONED A CODE AT QSD14 EXCEPT THOSE WITH #

QSD16a Thinking about (each selected at item from QSD14, EXCEPT THOSE MARKED #), please tell me how often others at your work place use these items? Is that...

Always
 Usually
 Sometimes
 Hardly ever
 Never
 Don't know

ASK ALL WHO SIT DOWN TO DO THEIR JOB FOR AT LEAST 4 HOURS A DAY (QSD2 CODES 4 OR 5) OR SIT DOWN FOR MORE THAN 2 HOURS A DAY (IF PART TIME) (QSD2 CODES 3, 4 OR 5) AND HAVE A WORKPLACE (QWHA CODES 3 OR 4).

QSD17. **SHOWCARD B** Taking into account all the measures in place where you usually work, in your view how effective are they at reducing any risks to your health and safety from the work you do whilst sitting down for four or more hours a day altogether? Are they...**READ OUT**

Very effective
Fairly effective
Not very effective
Not at all effective
Don't know

ASK ALL CODES 2, 3 OR 4 AT QSD17 EXCEPT THOSE WHO CODE YES AT QSD13a

QSD18. **SHOWCARD K** From this card, why do you think they aren't more effective?

INTERVIEWER: CODE ALL THAT APPLY.

Workers don't know the correct procedures
Workers don't follow the correct procedures
Supervision is poor
Too much pressure to work quickly
Equipment broken / not working
Insufficient equipment provided / available
The safety procedures are not relevant to the way we do the work
Too many new workers / high turnover of workers
Training on health and safety is poor / non-existent
English is not a first language for many workers
Other (specify)
Don't know

11: DRIVING AS PART OF YOUR PAID JOB FOR MORE THAN 4 HOURS ALTOGETHER MOSTLY ON PUBLIC ROADS (CODE 11 AT QCM1)

PLEASE NOTE FOR THOSE WHO ARE WORKING LESS THAN 21 HOURS A WEEK QWH13 THEN REPLACE “FOUR” HOURS WITH “TWO”

ASK ALL WHO ARE DRIVING AS PART OF THEIR PAID JOB FOR AT LEAST FOUR HOURS A DAY (CODE 11 AT QCM1) AND ARE SELECTED TO ANSWER THIS SECTION OTHERS GO TO QST1.

QDD1. **SHOWCARD 39** Using this card and thinking about a typical month, please tell me how often your job involves driving for four or more hours a day altogether to do your job?

Every day
Most days of the week
At least once a week
At least once a month
Less often than once a month
Don't know

QDD2. **SHOWCARD E** On the most recent day when you were driving how many hours altogether did you spend doing that?

Less than 1 hour
1 hour but less than 2 hours
2 hours but less than 4 hours
4 hours but less than 8 hours
8 hours or more
Don't know

THERE IS NO QDD3.

ASK ALL WHO SAY THAT DRIVING MAY POSE A RISK TO THEIR HEALTH OR SAFETY AT QCM9 AND SIT DOWN FOR MORE THAN FOUR HOURS A DAY (QDD2 CODES 4 OR 5) OR DRIVE FOR MORE THAN 2 HOURS A DAY (IF PART TIME) (QDD2 CODES 3,4 OR 5). OTHERS GO TO QDD7.

QDD4a. Thinking about driving to do your job for four or more hours a day altogether, would you say you were very concerned, fairly concerned, not very concerned or not at all concerned about any risk of back pain?

Very concerned
Fairly concerned
Not very concerned
Not at all concerned
Don't know

ASK ALL THOSE WHO ARE VERY OR FAIRLY CONCERNED AT QDD4a (CODES 1 OR 2). OTHERS GO TO QDD6.

QDD4b. Can you please tell me why you are at risk of developing back pain?

OPEN-ENDED RESPONSE

QDD5a. **SHOWCARD F** And how certain are you that you know how to avoid any risks of back pain from driving for four or more hours a day?

Very certain
Fairly certain
Not very certain
Not at all certain
Don't know

ASK ALL WHO SAY DRIVING MAY POSES A RISK TO THEIR HEALTH OR SAFETY AT QCM2 AND DRIVE FOR MORE THAN FOUR HOURS A DAY (QDD2 CODES 4 OR 5) OR DRIVE FOR MORE THAN 2 HOURS A DAY (IF PART TIME) (QDD2 CODES 3,4 OR 5). APART FROM THOSE WHO DON'T HAVE AN EMPLOYER (QWH5C CODE 2).

QDD6a. How much more, if anything, do you think your employer could be doing to reduce any risks of your back pain from driving for four or more hours a day altogether to do your job? Is that...READ OUT

A lot more
A little more
Or nothing more
Don't know

ASK IF CODES 1 OR 2 AT QDD6. OTHERS GO TO QDD7.

QDD6b. What more do you think your employer could be doing. PROBE: Anything else?

ASK ALL WHO SIT DOWN TO DRIVE FOR AT LEAST 4 HOURS A DAY (QDD2 CODES 4 OR 5) OR DRIVE FOR MORE THAN 2 HOURS A DAY (IF PART TIME) (QDD2 CODES 3,4 OR 5).

DO NOT ASK IF NO MANAGER/SUPERVISOR AT QWH5b (CODE 2).

QDD7. **SHOWCARD G** While in your present job and while you have been in your driving seat for four or more hours a day altogether, when was the last time a manager or supervisor where you are working checked that you are sitting so as to minimise any risk of back pain?

In the last week
In the last month
In the last 6 months
In the last year
In the last two years
In the last five years
Longer than five years ago
Never
Don't know

ASK ALL WHO SIT DOWN TO DRIVE FOR AT LEAST 4 HOURS A DAY (QDD2 CODES 4 OR 5) OR DRIVE FOR MORE THAN 2 HOURS A DAY (IF PART TIME) (QDD2 CODES 3,4 OR 5).

APART FROM THOSE WHO DON'T HAVE AN EMPLOYER (QWH5C CODE 2). OTHERS GO TO QDD12.

QDD9. While in your present job, has a manager, supervisor, trainer or advisor...

- Carried out an assessment of how you are sitting in your driving seat?
- Provided training or advice on how you should sit while driving to avoid back pain?
- Provided guidance on how often you should take breaks from sitting while driving?

Yes
No
Don't know/can't remember

ASK ALL WHO HAVE EVER RECEIVED TRAINING OR INFORMATION (CODED YES AT QDD9 STATEMENT B AND C). OTHERS GO TO QDD12a.

ASK ALL WHO SAY YES AT QDD9 (FOR STATEMENTS B AND C). USE APPROPRIATE TEXTFILL

QDD10. **SHOWCARD G AGAIN** And when was the last time you had any TEXTFILL:

- b. training or information on how you should sit while driving to avoid back pain
- c. guidance on how often you should take breaks from sitting while driving?

INTERVIEWER IF RESPONDENT ANSWERS 'NEVER' GO BACK TO THE PREVIOUS QUESTION AND RECODE 'NO'

In the last week
 In the last month
 In the last 6 months
 In the last year
 In the last two years
 In the last five years
 Longer than five years ago
 Don't know

QDD11. **SHOWCARD H** To what extent did this training or information help you reduce any risks of your developing back pain?

It helped a lot
 It helped a little
 It didn't make much difference
 It didn't make any difference

ASK ALL WHO SIT DOWN TO DRIVE FOR AT LEAST 4 HOURS A DAY (QDD2 CODES 4 OR 5) OR DRIVE FOR MORE THAN 2 HOURS A DAY (IF PART TIME) (QDD2 CODES 3,4 OR 5).

QDD12a. In your present job, have you had a health condition as a result of sitting down to drive for four or more hours a day?

Yes
 No

ASK IF YES AT QDD12a. OTHERS GO TO QDD14.

QDD12b. Can you please tell me what that is?

OPEN-ENDED RESPONSE

Refused

ASK ALL WHO SIT DOWN TO DRIVE FOR AT LEAST 4 HOURS A DAY (QDD2 CODES 4 OR 5) OR DRIVE FOR MORE THAN 2 HOURS A DAY (IF PART TIME) (QDD2 CODES 3,4 OR 5).

QDD14. **SHOWCARD 41** Please can you look at this card and tell me whether any of the following are provided at work for you to use?

Information on how to sit to avoid back pain
 Separate back support for driving seat
 None of these

ASK ALL WHO SIT DOWN TO DRIVE FOR AT LEAST 4 HOURS A DAY (QDD2 CODES 4 OR 5) OR DRIVE FOR MORE THAN 2 HOURS A DAY (IF PART TIME) (QDD2 CODES 3,4 OR 5) AND HAVE A WORKPLACE (QWHA CODES 3 or 4).

QDD17. **SHOWCARD B** Taking into account all the measures in place where you usually work, in your view how effective are they at reducing any risks to your health and safety from driving for four or more hours a day altogether? Are they READ OUT

Very effective
 Fairly effective
 Not very effective
 Not at all effective
 Don't know

ASK ALL CODES 2, 3 OR 4 AT QDD17,

QDD18. **SHOWCARD K** From this card, why do you think they aren't more effective?

INTERVIEWER: CODE ALL THAT APPLY.

Workers don't know the correct procedures
 Workers don't follow the correct procedures
 Supervision is poor
 Too much pressure to work quickly
 Equipment broken / not working
 Insufficient equipment provided / available
 The safety procedures are not relevant to the way we do the work
 Too many new workers / high turnover of workers
 Training on health and safety is poor / non-existent
 English is not a first language for many workers
 Other (specify)

12: SLIPS AND TRIPS**ASK ALL WITH A WORKPLACE (QWHA CODES 3 or 4).**

QST1. Thinking about slipping and tripping where you usually work, would you say you were very concerned, fairly concerned, not very concerned or not at all concerned about any risks in your job from slipping or tripping at work?

Very concerned
 Fairly concerned
 Not very concerned
 Not at all concerned
 Don't know

ASK IF VERY OR FAIRLY CONCERNED AT QST1 (CODES 1 OR 2). OTHERS GO TO QST5.

QST1a. Can you please tell me why you are at risk of slipping or tripping at work?

DO NOT READ OUT
 CODE TO PRECODES.

Boxes in corridors
 Oil / diesel / water or chemical spills on the floor
 Inadequate signage to warn about wet floors
 Rubbish on floors
 Loose wires
 Loose handrail
 Loose carpet
 Uneven floor surfaces
 Slippery floors / painted concrete floors
 Too many stairs
 Don't have correct footwear for floors
 Busy environment
 Poor or no lighting
 Icy weather conditions / ice in yards where working
 Other specify

QST2a. **SHOWCARD F** And how certain are you that you know how to prevent slip or trip accidents where you usually work?

Very certain
 Fairly certain
 Not very certain
 Not at all certain
 Don't know

ASK IF VERY OR FAIRLY CONCERNED AT QST1 (CODES 1 OR 2). APART FROM THOSE WHO DON'T HAVE AN EMPLOYER (QWH5C CODE 2)

QST3. How much more, if anything, do you think your employer could be doing to prevent slip or trip accidents where you usually work? Is that...READ OUT

A lot more
 A little more
 Or nothing more
 Don't know

ASK IF A LOT MORE OR A LITTLE MORE MENTIONED AT QST3 (CODES 1 OR 2). OTHERS GO TO QST5.

QST4. What more do you think your employer could be doing?

PROBE: Anything else?

ASK ALL WITH A WORKPLACE (QWHA CODES 3 or 4).

QST5. While in your present job, has a manager, supervisor, trainer or advisor given you any training or information on how to avoid slips or trips?

Yes

No

ASK IF YES AT QST5. OTHERS GO TO QST10.

QST6. **SHOWCARD G** And when was the last time you were given any training or information on this? Was this...

INTERVIEWER IF RESPONDENT ANSWERS 'NEVER' GO BACK TO THE PREVIOUS QUESTION AND RECODE 'NO'

In the last week

In the last month

In the last 6 months

In the last year

In the last two years

In the last five years

Longer than five years ago

Don't know

ASK ALL WHO HAVE RECEIVED TRAINING OR INFORMATION (QST5 CODE 1). OTHERS GO TO QST10.

QST7. **SHOWCARD H** To what extent did this training or information help you reduce the risks of slip and trip accidents?

It helped a lot

It helped a little

It didn't make much difference

It didn't make any difference

Don't know

ASK ALL WITH A WORKPLACE (QWHA CODES 3 or 4).

QST10. **SHOWCARD 42** Looking at this card, please can you tell me if you saw any of these things where you usually work on the most recent day you worked there?

A slippery floor surface (excluding spills)

Spills of liquids on floors on which someone might have slipped

Uneven or broken floor surfaces on which someone might have tripped

Loose wires or cables over which someone might have tripped

Boxes or other items obstructing corridors or walkways

None of these

ASK ALL THOSE WHO MENTION THAT THEY SAW SOMETHING AT QST10. OTHERS GO TO QST10C

QST10a Did you take any action to deal with [textfill:this/these]?

Yes

No

ASK ALL THOSE WHO AT QS10a SAID YES. OTHERS GO TO QST10C

QST10b Did you..., READ OUT

Deal with it yourself/with others

Report it to someone else

Or both?

ASK ALL WITH A WORKPLACE (QWHA CODES 3 or 4).

QST10C Thinking about most other workers how likely are they to deal with slip and trip hazards where you work?

Very likely
Quite likely
Not very likely
Not at all likely
Don't know

QST11. In general, how quickly are slip and trip hazards dealt with where you usually work? Would you say that they are dealt with...READ OUT

Very quickly
Fairly quickly
Not very quickly
Not at all quickly
Not dealt with at all
Don't know

ASK ALL WHO SAY THAT HAZARDS ARE DEALT WITH (QST11 CODES 1-4). OTHERS GO TO QSS1.

QST12. **SHOWCARD 43** Using this card, please can you tell me which, if any, of these methods are used to deal with possible slip and trip hazards where you usually work?

Workers are consulted on slip and trip risks
Workers are informed of good practice/basic housekeeping
Workers are given guidance on footwear
Workers are reminded to tidy up and clear rubbish as they work
There is a named individual who is responsible for checking slip and trip risk hazards
Walkways have to be clear and free from rubbish
Leads from computers and other machines are not trailing across the floor
Equipment is provided for tackling spills, including warning signs
Pedestrians are kept away from uneven or broken surfaces
Non-slip flooring is provided where appropriate
Other (specify)
None of the above
Don't know

QST13. **SHOWCARD B** Taking into account all the measures in place where you usually work, in your view how effective are they at reducing the risk of slip or trip accidents?

Very effective
Fairly effective
Not very effective
Not at all effective
Don't know

IF CODE 2, 3 or 4 AT QST13 . CODE ALL MENTIONED

QST14. **SHOWCARD K** From this card, why do you think they aren't more effective?

Workers don't know the correct procedures
Workers don't follow the correct procedures
Supervision is poor
Too much pressure to work quickly
Equipment broken / not working
Insufficient equipment provided / available
The safety procedures are not relevant to the way we do the work
Too many new workers / high turnover of workers
Training on health and safety is poor / non-existent

English is not a first language for many workers
Other (specify)

STRESS**ASK ALL. DO NOT ASK IF NO MANAGER/SUPERVISOR AT QWH5b (CODE 2)**

QSS1. In the last 3 months, have any of your managers, supervisors, trainers or advisors talked to you personally about the stress factors that might be associated with your job?

Yes

No

ASK ALL USE ALTERNATIVE TEXT FILL FOR THOSE WHO HAVE WORKED LESS THAN THREE MONTHS AT QWHc

QSS2. **SHOWCARD 44** Have you taken part in any of the following stress awareness or stress management activities at work [Textfill: in the last 3 months/since you started your job]

Staff briefing about stress at work
 Stress Awareness Day at work
 Staff stress survey at work
 Group discussion about work stress
 HSE Stress Management Standards Programme
 Other Stress Management programme
 Stress counselling or mentoring programme
 Staff welfare programme
 Informal discussions
 Appraisals
 Other (please specify)
 None of the above

ASK ONCE IF ANY PROGRAMME/ACTIVITY REPORTED AT QSS2

QSS3. Please tell me what, if anything changed as a result?

PROBE: Anything else?

Nothing changed

SAFETY CLIMATE QUESTIONS

ASK ALL WITH A WORKPLACE (QWHA CODES 3 or 4). EXCEPT THOSE WHO DO NOT HAVE A MANAGER/SUPERVISOR AT QWH5b (CODE 2).

QSF1. **SHOWCARD C** Thinking about the place where you usually work I am going to read out some statements and I'd like you to tell me how much you agree or disagree with each one, using the answers on this

Strongly agree
 Agree
 Neither agree nor disagree
 Disagree
 Strongly disagree
 Don't Know or not applicable

ROTATE

The company really cares about the health and safety of the people who work there
 Supervisors sometimes ignore people who are not working to the health and safety procedures
 Suggestions to improve health and safety are seldom acted upon
 Some people at my workplace have a poor understanding of the risks associated with their work
 Some of the workforce pay little attention to health and safety
 Senior management take health and safety seriously
 Productivity is usually seen as more important than health and safety
 People at my workplace think health and safety is not their problem - it's up to management and others
 People at my workplace are sometimes pressured to work unsafely by their colleagues
 People at my workplace always work safely even when they are not being supervised
 Not all the health and safety procedures, instructions or rules are strictly followed at my workplace
 Management would expect me to break health and safety procedures, instructions and rules to get the job done
 Management sometimes ignore health and safety procedures, instruction or rules that are being broken
 Management only bother to look at health and safety after there has been an accident
 Management always act quickly over health and safety concerns

ASK ALL WHO HAVE AN EMPLOYER (CODE 1 AT QWH5C)

QSF2. Please could you tell me how you would rate the overall effectiveness of health and safety management by your employer? Is it...READ OUT

ROTATE

very poor
 poor
 about average
 good or
 very good
 Don't know

ASBESTOS

ASK THOSE WHO WORK IN DEMOLITION/MAINTENANCE (QCM1 CODE 12) AND WHO ARE ELIGIBLE (YES AT QCM4b) OR ALL WHO SAY ASBESTOS AT QCM8a

ASK ALL

QA1bi Before you start a job how often, if at all, are you made aware of potential locations of asbestos?

READ OUT

- Always
- Usually
- Sometimes
- Hardly ever
- Never
- Don't know

ASK ALL

QA1ai As far as you know, in the last 6 months have you ever come into contact with, or potential contact with asbestos at work?

INTERVIEWER – IF YES PROBE FOR DEFINITELY OR POSSIBLY

- Yes – definitely
- Yes - possibly
- No
- Don't know

IF YES AT QA1ai (CODES 1 OR 2). OTHERS GO TO NEXT SECTION.

QA1b And how likely do you think it is that you have breathed in asbestos? Is it...READ OUT

- Very likely
- Quite likely
- Not very likely
- Not at all likely
- Don't know

QA1c And please can you tell me how this contact occurred? Was it through...READ OUT

- Demolition work carried out by you
- Building maintenance carried out by you
- Incidental exposure through the presence of asbestos or the work activities of others
- Or something else (specify)
- Don't know

QA1d. What was the source of this asbestos?

DO NOT READ OUT

- Insulation
- Lagging
- Asbestos cement sheets
- Other – specify
- Don't know

QA2. **SHOWCARD 45** What precautions do you take when you may have to work with asbestos?

CODE ALL THAT APPLY

- Dampen or wet the asbestos
- Don't use power tools
- Wear a face mask or other breathing protection
- Don't do the job
- Seek expert advice
- Other (please specify)
- I don't take any precautions

ASK ALL WHO USE PRECAUTIONS AT QA2 (CODES 1-6). OTHERS GO TO QA4.

QA3. Please can you tell how you know what precautions to take?

CODE TO PRECODES. CODE ALL THAT APPLY
DO NOT READ OUT

- I'm a licensed removal worker
- Advice from employer/manager/supervisor/safety rep
- Information supplied by building owner or manager
- Other (specify)
- Don't know

ASK THOSE WHO WORK IN DEMOLITION/MAINTENANCE (QCM1 CODE 12) AND WHO ARE ELIGIBLE (YES AT QCM4) OR ALL WHO SAY ASBESTOS AT QCM8a

QA4. Who, if anyone, checks that you are working safely when you are working with asbestos?

CODE TO PRECODES. CODE ALL THAT APPLY.

- Employer/manager/supervisor/safety rep
- External expert
- Other (specify)
- No one

ASK ALL CODES 1-3 AT QA4

QA5 **SHOWCARD 46** Using this card, please can you tell me how often these checks are carried out?

CODE ONE ONLY

- Hourly
- Twice a day
- Daily
- Weekly
- Monthly
- Annually
- Never
- It varies
- Don't know

GENERAL VIEWS ABOUT HEALTH AND SAFETY TRAINING RECEIVED**ASK ALL**

QTAC1 While in your present job have you had any of the following at work [textfill: in the last 12 months/since you started your job]? READ OUT

INTERVIEWER – IF MORE THAN ONE ACCIDENT PLEASE ASK ABOUT THEIR LAST

An accident where you weren't injured
 An accident where you were injured
 A "near miss" where you were nearly injured
 None of these

ASK ALL WHO SAY THEY HAD AN ACCIDENT (CODE 1 AND 2 QTAC1). IF SAY NONE OF THESE GO TO QTA

QTAC2 What happened in the accident?

INTERVIEWER – IF MORE THAN ONE ACCIDENT IN THE LAST 12 MONTHS PLEASE ASK ABOUT THEIR LAST

DO NOT READ OUT.

Contact with moving machinery or material being machined
 Hit by a moving flying or falling object
 Hit by a moving vehicle
 Hit by something fixed or stationary
 Injured while handling lifting or carrying
 Slipped tripped or fell on the same level
 Fell from a height
 Trapped by something collapsing
 Drowned or asphyxiated
 Exposed to or in contact with a harmful substance
 Exposed to fire
 Exposed to an explosion
 Contact with electricity or an electrical discharge
 Injured by an animal
 Physically assaulted by a person
 Another kind of accident PLEASE SPECIFY

ASK ALL WHO SAY THEY HAVE HAD AN ACCIDENT WHERE THEY WERE INJURED AT QTAC1 (CODE 2). OTHERS GO TO QTA

QTAC3 Thinking about the last accident where you were injured, was it recorded in the company or site injury accident book at work?

Yes
 No
 Don't know

QTA Can I just check, have you received any health and safety training or information in your current job?

Yes
 No

ASK IF YES AT QTA1

QT1. **SHOWCARD C** Please tell me if you agree or disagree with the following statements, using the phrases on this card.

Strongly disagree

Disagree
 Neither agree nor disagree
 Agree
 Strongly agree
 Not applicable / Didn't receive any
 Don't know

The training and guidance I have personally received about health and safety at my current job or place of work...

- A. Is difficult to understand
- B. Gives me all the information I need
- C. Is out of date
- D. Is over the top and unnecessary
- E. Is relevant to the work I do
- F. Addresses the most important health and safety risks in my job

ASK ALL

QT2 **SHOWCARDS 47 and 48** Thinking about all the different ways in which you might have had information about health and safety, which if any of the following have you found most useful?

SHOWCARD 47

Training provided at or through work
 HSE publications/leaflets/bulletins
 Other publications/leaflets/bulletins
 HSE website
 Other health and safety website
 HSE Health and Safety Inspectors
 Local Authority Health and Safety Inspectors
 HSE Infoline / telephone helpline
 Other (specify)
 Don't know
 None

SHOWCARD 48

Manufacturer/supplier for information about equipment and materials
 Health and safety magazines or manuals
 Health and safety consultants
 Advice from in-house health and safety personnel
 Trade union
 Employer / manager / supervisor
 Trade associations
 Trade publications
 GP or other health professional
 Other (SPECIFY)
 Don't know
 None

CLOSING QUESTION FOR THE INTERVIEW

ASK ALL

QCG1. Apart from the things you've already told me about, please can you tell me if there is anything else you have been worried about to do with your health or safety at work?

Yes

No

ASK IF YES AT QCG1. OTHERS GO TO QCG5.

QCG2. Please can you describe to me what your concerns or worries are? PROBE FULLY. INTERVIEWER: IF RESPONDENT HAS MULTIPLE CONCERNS OR WORRIES PLEASE READ OUT "PLEASE CAN YOU TELL ME ABOUT THE ONES THAT YOU THINK ARE MOST IMPORTANT"

LIST UP TO 3

(For each concern / worry mentioned)

QCG3. Did you report or mention this at work?

Yes

No

ASK FOR EACH CODE 2 AT QCG3. OTHERS GO TO QCG5

QCG4. Please can you tell me why you didn't report it or mention it to anyone?

DO NOT READ OUT. CODE TO PRECODES.

It's just a normal part of doing my job
 I don't know if anyone else shares my concerns
 My boss or supervisor would think I was complaining
 My boss or supervisor would be unsympathetic
 I don't want to cause trouble
 Other (specify)
 Don't know

ASK ALL APART FROM THOSE WHO DO NOT HAVE AN EMPLOYER (QWH5c CODE 2)

QCG5. In your view, how seriously does your employer take any risks to your health and safety?

READ OUT

Very seriously
 Fairly seriously
 Not very seriously
 Not at all seriously
 Don't know

CONSENT QUESTIONS

READ OUT TO ALL: We would like to find out more about your employment and any benefit history for research purposes **only**. To do this we are asking people to give us their National Insurance Number.

Interviewer: Your National insurance number is a series of letters and number and is given to every British citizen when they turn 16..

CONSENT FORM Could you take a few moments to read the consent form before deciding / I could read it out to you?

ASK ALL

QCC1. Would you like to give us your National Insurance number?

Yes
No

INTERVIEWER – IF YES PLEASE SIGN FORMS

INTERVIEWER AND RESPONDENT TO SIGN BOTH FORMS (EACH PARTY RETAINS A SIGNED FORM)

IF YES AT QCC1 - NI NUMBER SCREEN. OTHERS GO TO CLOSING
INTERVIEWER PLEASE ENTER IN NATIONAL INSURANCE NUMBER

ASK IF YES AT QCC1

QCC2. Interviewer to record source of National Insurance number

Recited from memory
Pay slip
Benefit book
Tax statement
NI card or letter
Other official document
Other (specify)

VOUCHER

INTERVIEWER - NOW HAND VOUCHERS TO THE VALUE OF £10 TO THE RESPONDENT AND ASK THEM TO SIGN THE RELEVANT BOX ON THE CONTACT SHEET.

Vouchers given to respondent (tickbox)
Vouchers not given – please give reason why OPEN TEXT BOX

QTR1 Was this interview translated?

Yes
No

ASK IF YES AT QTR1. OTHER GO TO CLOSE
QTR2 Which language was it translated into?

Welsh
Gaelic
Urdu
Punjabi
Gujarati
Hindi
Bengali
Sylheti
Cantonese
Somali
Tamil
Turkish
Kurdish
Arabic
Other language (specify)

ASK IF YES AT QTR1

QTR3 Who carried out the translation for this interview?

INTERVIEWER PLEASE GIVE RELATIONSHIP TO RESPONDENT, EG. BROTHER, SISTER, MOTHER, FATHER, OTHER FAMILY MEMBER, NON FAMILY MEMBER (NEIGHBOUR, INTERVIEWER, TRANSLATOR) ETC.

OPEN ENDED

RECORD NAME OF RESPONDENT, TELEPHONE NUMBER AND STABLE TELEPHONE NUMBER DETAILS FOR ALL WHO AGREE TO BE RECONTACTED.

THANK YOU SCREEN - CLOSE

Thank you so much for taking the time to answer those questions for me today. It is likely that we will be running other similar surveys in the future, within the next few months to a year, and we'd be grateful if we could contact you again to ask you some more questions. The survey will probably be conducted by telephone, but you will receive another gift voucher for taking part. Would you be happy for us to re-contact you?