

# **ANTIGEN WAVE 2**

**Round 2 Registration**

## PHE Covid-19 Testing Study

### Registration questionnaire: suggested questions

Version 2

12 June 2020

WAVE 2

JN: 20-046042-01

**INTERNAL AND CLIENT USE ONLY**

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## Landing page

- The landing page will be the first screen that respondents see on navigating to [www.reactstudy.org/antigenReg](http://www.reactstudy.org/antigenReg) (the URL contained in the invitation letter)
- The landing page will show some welcome text, and will include the following features and design elements, from top to bottom:
  - DHSC and IM logos
  - Survey title (COVID-19 testing research study)
  - Intro text and information on how to answer
  - Access code box, with text “Please enter the access code from your letter” and “Start survey” box
  - The following links:
    - [About Ipsos MORI<sup>1</sup>](#)
    - [Privacy Policy<sup>2</sup>](#)
    - [Contact us<sup>3</sup>](#)
    - [FAQ<sup>4</sup>](#)
  - No progress bar should be shown to respondents.

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Before we begin, we would like to inform you that Ipsos MORI is a member of the Market Research Society. All information will be kept confidential by Ipsos MORI and approved Imperial College London staff and researchers.

Taking part is voluntary and you can change your mind at any time.

If you would like to read our Privacy Policy, you can access it at [www.ipsos.uk/covid-swab-privacy](http://www.ipsos.uk/covid-swab-privacy). This explains the purposes for processing your personal data as well as your rights under data protection regulations to access your personal data, withdraw consent, object to processing of your personal data and other required information.

### NOTE TO SCRIPTERS:

There are 3 groups corresponding to Mail\_Grp i.e. u\_mail\_grp

<b>Mail_Grp</b>	<b>Age group</b>
Mail_Grp=1	18+
Mail_Grp=2	13-17
Mail_grp=3	5-12

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<sup>1</sup> <https://www.ipsos.com/ipsos-mori/en-uk/about-us>

<sup>2</sup> This will be a privacy policy unique to the household-level survey. It will be on the IM website, and will make reference to GDPR. and this link will take respondents directly to it. The URL will also be included on the survey materials (again, following the protocol for the main survey).

<sup>3</sup> This should launch an email to the survey email address (UK-Covid-swab-research@ipsos.com)

<sup>4</sup> These FAQ will expand on those included on the reverse of the invitation letters.

## Confirm individual

ASK ALL

### **INDCONF**

ASK 18+ AND 13-17 This survey is for [u\_firstname] [u\_name]. Are you [FF\_Surname] [FF\_Surname]?

IF CHILD is 5-12 Are you the parent or guardian of [u\_firstname] [u\_name]?

*Please select one answer*

1. Yes
2. No

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IF INDCONF = 2 AND AGE 13-17

### **INDCONFPARENT**

This survey is intended for [FF\_Surname] [FF\_Surname]. If you are the parent or guardian of [FF\_Surname] [FF\_Surname] you can complete the survey by proxy and answer the survey on their behalf. Are you the parent or guardian of [FF\_Surname] [FF\_Surname]?

1. Yes
2. No

IF INDCONFPARENT=2 OR (INDCONF=2 AND AGE 18+) OR (INDCONF=2 AND AGE 5-12)

### **CLOSE1**

"We thank you for your time spent taking this survey."  
TERMINATE

PROGRAMMER: SET TEXTFILL

IF 18+ OR (13-17 INDCONF=1) Textfill is "your"

IF 5-12 OR (13-17 INDCONFPARENT =1) Textfill is "your child"

ASK ALL

### **DOBCONF**

Is [your/your child's] date of birth [u\_ffdob]?

*Please select one answer*

1. Yes
  2. No
-

ASK IF DOBCONF = 2

**DOB**

What is [your/your child's] date of birth?

[INCLUDE DOB QUESTION FORMAT TO RECORD DAY, MONTH, AND YEAR]

1. Prefer not to say

---

ASK IF DOB = 1

**AGE**

What was your/your child's age at your/their last birthday?

[OPEN NUMERIC BOX AND APPLY TO AGE GROUPS AS OUTLINED BELOW,]

GROUP	GROUP AGE	ALLOW RANGE	ERROR MESSAGE
Mail_Grp=1	18+	RANGE 18 -112	"Please enter a value of 18 or higher"
Mail_Grp=2	13-17	RANGE 13-17	"Please enter a value between 13 – 17"
Mail_grp=3	5-12	RANGE 5- 12	"Please enter a value between 5-12"

1. Prefer not to say

IF 5-12

**AGEPARENT**

What was your age at your last birthday?

[OPEN NUMERIC BOX, RANGE 16– 112]

1. Prefer not to say

IF AGED 13-15

**PARCONS**

Does your parent or guardian give you permission to take part in this study?

1. Yes
2. No

IF PARCONS =2

**CLOSE2**

“Thank you for starting the survey!

Please ask your parent or guardian for permission to complete the survey. Once they have agreed for you to take part, please log back in to the survey."

TERMINATE

IF PARCONS = 1

**PARNAME**

Please write in the full name of your parent/carer who has agreed that you can take part:  
{text box}

## Household composition

IF AGED 18+ OR 5-12 OR (13-17 INDCONFPARENT =1)

**NADULTS**

Including yourself, how many adults aged 18 and over currently live in your household?

INFO: **Who should I include?** Include all adults aged 18 and over, including any young people aged 18 or over. Include young people who regularly spend part of the week in your household. Include yourself.

NUMERIC 1...10

IF NADULTS = 2+

**ADULTAGE**

You said that [(IF NUMBER AT NADULTS-1 = 1) there is 1 adult] [(IF NUMBER AT NADULTS-1 = 2+) there are (NUMBER AT NADULTS-1) adults] other than you in your household. How old are these adults?

[Show multiple rows up for number of adults aged 18+ in household ALLOW RANGE 18 - 112]

Header: Age in Years

Rows for each adult:

First adult

Second adult (and so on)

Columns for each adult:

Numeric box

Prefer not to say

IF AGED 13-17 (INDCONF = 1)

**NADULTS1**

How many adults aged 18 and over currently live in your household?

**INFO: Who should I include?** Include all adults aged 18 and over, including any young people aged 18 or over. Include young people who regularly spend part of the week in your household.

NUMERIC 1...10

IF NADULTS1 = 1+

**ADULTAGE1**

You said that [(IF NUMBER AT NADULTS1 = 1) there is 1 adult] [(IF NUMBER AT NADULTS1 = 2+) there are (NUMBER AT NADULTS1) adults] in your household. How old are these adults?

[Show multiple rows up for number of adults aged 18+ in household ALLOW RANGE 18 - 112]

Header: Age in Years

Rows for each adult:

First adult

Second adult (and so on)

Columns for each adult:

Numeric box

Prefer not to say

IF AGED 18+ or 5-12 (13-17 INDCONFPARENT =1)

**NCHILD**

How many children or young people aged 0 to 17 years currently live in your household?

**INFO: Who should I include?**

Include all children aged 0-17 in your household, whether or not they are your own children. Include infants and babies. Include children who regularly spend part of the week in your household.

NUMERIC 0...15

IF NCHILD = 1+

**CHILDAGE**

You said that [(IF NUMBER AT NCHILD = 1) there is 1 child] [(IF NUMBER AT NCHILD = 2+) there are (NUMBER AT NCHILD) children] in your household. How old are these children?

[Show multiple rows up for number of children aged 0-17 in household. ALLOW RANGE 0-17]

Header: Age in Years

Rows for each child:

First child

Second child (and so on)

Columns for each child:

Numeric box

Prefer not to say

IF AGED 13-17 (INDCONF = 1)

**NCHILD1**

Including yourself, how many children or young people aged 0 to 17 years currently live in your household?

**INFO: Who should I include?**

Include all children aged 0-17 in your household, whether or not they are your own children. Include infants and babies. Include children who regularly spend part of the week in your household. Include yourself.

NUMERIC 0...15

IF NCHILD1 = 2+

**CHILDAGE1**

You said that [(IF NUMBER AT NCHILD1-1 = 1) there is 1 child] [(IF NUMBER AT NCHILD1-1 = 2+) there are (NUMBER AT NCHILD1-1) children] other than you in your household. How old are these children?

[Show multiple rows up for number of children aged 0-17 in household]

Header: Age in Years

Rows for each child:

First child

Second child (and so on)

Columns for each child:

Numeric box

Prefer not to say



**WORKTYP1**

IF 18+ OR 5-12 OR (16-17 INDCONF =1) Are you ...

OR (16-17 INDCONFPARENT =1) Is your child....

**WORKTYP1**

Are you .../Is your child

1. A healthcare worker with direct patient contact
2. A healthcare worker with no patient contact
3. Working in a care home with direct contact with clients
4. Working in a care home without contact with clients
5. An essential/ key worker (as currently defined by the [Government<sup>5</sup>](#))
6. None of these
7. Don't know

**WORKTYP2**

IF WORKTYP1= 5, 6, 7

Do you/Does your child have a job that currently requires you/them to work outside your home in any of the following public facing roles?

1. Delivering to homes
2. Food retail, other shop work
3. Policing, prisons, fire & rescue, coastguard
4. Public transport (including taxis)
5. School, nursery or childcare
6. Armed forces
7. Another public facing role (please specify)
8. I work outside of my home but not in public facing role
9. No, not currently required to work outside my home

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<sup>5</sup> <https://www.gov.uk/guidance/coronavirus-covid-19-getting-tested#essential-workers>

ASK ALL

**ETHNIC**

Which one of the following best describes [your/your child's] ethnic group or background?

White [Expanding header - drop down options below]

1. English / Welsh / Scottish / Northern Irish / British
2. Irish
3. Gypsy or Irish Traveller
4. Any other White background

Mixed [Expanding header - drop down options below]

5. White and Black Caribbean
6. White and Black African
7. White and Asian
8. Any other Mixed / Multiple ethnic background

Asian / Asian British [Expanding header - drop down options below]

9. Indian
10. Pakistani
11. Bangladeshi
12. Chinese
13. Any other Asian background

Black / African / Caribbean / Black British [Expanding header - drop down options below]

14. African
15. Caribbean
16. Any other Black / African / Caribbean background

Other ethnic group [Expanding header - drop down options below]

17. Arab
  18. Any other ethnic group
  19. Prefer not to say [Separate code. No header]
-

## Registration for study

### ASK ALL

*Group 1 (18+) OR group 2 INDCONF=1 Textfill 'you'*

*Group 3 (5-12) OR group 2 INDCONFPARENT=1 'my child'*

### EXCL

Do you/Does your child have an increased risk of bleeding (for example taking anticoagulants or a medical condition such as haemophilia, or are/ are they prone to nosebleeds)?

1. Yes - I have/ my child has an increased risk of bleeding
2. No - I do not have/my child does not have an increased risk of bleeding
3. Don't know

IF EXCL = 1

### EXCLCONF

You said you have/ your child has an increased risk of bleeding (for example taking anticoagulants or a medical condition such as haemophilia or are/ they are prone to nosebleeds).

Is this correct?

If you have/ your child has an increased risk of bleeding, we will not be able to send you a swab test as there are risks associated with this test for people who have an increased risk of bleeding.

1. Yes – I have/my child has an increased risk of bleeding
2. No – I do not have/my child does not have an increased risk of bleeding
3. Don't know

IF EXCLCONF = 1

### CLOSE3

We cannot send you a swab test, as there are risks associated with this test for people who have an increased risk of bleeding. Thank you for your interest.

TERMINATE

IF (EXCL = 2 OR 3 OR EXCLCONF=2 OR 3 ) **AND** AGED 18+ (GROUP 1) **ONLY**

### SMOKENOW

Do you smoke cigarettes at all nowadays?

- 1 Yes
- 2 No
- 3 Prefer not to say

IF SMOKENOW = 2 or 3

**SMOKECIG**

Have you ever smoked cigarettes?

1 Yes

2 No

3 Prefer not to say

IF EXCL = 2 or 3 OR EXCLCONF=2 OR 3

**RESPCHK**

Are you willing to take part in this study?/Are you willing for your child to take part in this study?

Taking part is voluntary. If you agree we will send you a COVID-19 self-testing kit. The test involves taking a swab of your/your child's nose and throat. We will provide full instructions with the kit. There is no obligation to take the test if you agree to be sent it.

Once you have done the swab, the kit will be collected and taken to a laboratory. You will be informed of the result of the test.

We would also like you to complete a short questionnaire as well as doing the swab test, collecting information about [you/your child] and [your/their] current health status.

The results of the swab test will be linked to your questionnaire answers. All questionnaire information will be kept confidential by Ipsos MORI, and approved Imperial College London staff and researchers. Nobody will be able to identify you in any published results. We will send more information with the test, and you can withdraw from the study at any time. Please note that a small number of people who register to take part may not be included in the research and will be informed of this.

If your/the test is positive (suggesting that you/your child currently have/has COVID-19) we will inform NHS Test and Trace so that they can contact you. For information about NHS Test and Trace please visit [www.gov.uk](http://www.gov.uk).

1. Yes, I want / my child to take part in this study
2. No, I do not want / my child to take part. (TAKE TO FEEDBACK PAGE 2)

## Email and mobile of adults registering

ASK IF RESPCHK=1

### CONTACT

We would like to collect your email address and mobile phone number. We will use these to send you emails and text messages about this study. If you do not have a mobile telephone number, please enter a landline telephone number. Please make sure your details are correct.

*If you would prefer not to provide these details, just click 'Submit my answers'. If you would like to review your answers before you submit them, please click on the 'back' buttons to go back and review your answers'.*

**EMAIL1:** Email address [CHECK TO ENSURE VALID EMAIL ADDRESS]

EMAIL1: Please re-enter your email address [CHECK TO ENSURE VALID EMAIL ADDRESS AND BOTH EMAIL ADDRESSES ENTERED MATCH EXACTLY.]

**MOBILE1:** Mobile phone number [10 OR 11 DIGITS PERMITTED]

MOBILE1: Please re-enter your mobile phone number [10 OR 11 DIGITS PERMITTED AND BOTH PHONE NUMBERS ENTERED MATCH EXACTLY.]

If you would like to review your answers, please use the back button to do so. If you would like to submit your answers, please click 'submit my answers'.

[NOTE TO SCRIPTING: PLEASE CHANGE 'NEXT' TO 'SUBMIT MY ANSWERS' BUTTON]

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## Feedback page 1

Thank you.

You will be sent a package containing the test to be administered at home. The package will be sent by Royal Mail and should arrive between 19 and 30 June. The package will contain full instructions.

## Feedback page 2

Thank you for taking part in this survey. As you did not consent to take part in this study you will not be sent a test kit. Thank you for your interest.

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