ANTIGEN TEST

Round 19 Registration Survey

REACT1 COVID-19 Testing Study

Registration Questionnaire

March 2022

ROUND 19

22-010641-01

Contents

Landing page

- The landing page is the first screen that respondents see on navigating to 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, Imperial College London, NHS and IM logos
    - Survey title "This is the COVID-19 testing research study. Thank you for your interest in registering for this study."
    - Instructions about how to enter the access code "Please enter the access code as it appears on your letter. Please enter the first four characters in the first box and the last four characters in the second box."
    - The following links:
        - About Ipsos MORI
        - Privacy Policy
        - Contact us
        - FAQ

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 Notice , you can access it at 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.

If you agree to take part, the test kit will be sent to the same address as the letter you received inviting you to take part in this study.

There are 3 groups corresponding to Mail_Grp i.e. u_mail_grp

Mail_Grp	Age group
Mail_Grp=1	18+
Mail_Grp=2	13-17
Mail_grp=3	5-12

Confirm individual

ASK ALL
INDCONF

ASK Mail_Grp=1 AND Mail_Grp=2 This survey is for [u_firstname] [u_name]. Are you [FF_Surname] [FF_Surname]?

IF CHILD is Mail_Grp=3 Are you the parent or guardian of [u_firstname] [u_name]?

Please select one answer

1. Yes
2. No

IF INDCONF = 2 AND Mail_Grp=2
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 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 Mail_Grp=3
CLOSE1

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

IF INDCONF =2 AND Mail_Grp=1
INDCONFCARER

This survey is intended for [FF_Surname] [FF_Surname]. If you are a carer for [FF_Surname] [FF_Surname], or they need assistance, you can help them to complete the survey. Are you a carer for [FF_Surname] [FF_Surname], or assisting them?

1. Yes
2. No

IF INDCONFCARER =2
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

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

GROUP	GROUP AGE	ALLOW RANGE	ERROR MESSAGE
Mail_Grp=1	18+	YEAR RANGE 1900 -2005 4	"Our records suggest you are aged 17 or over, please check your answer."
Mail_Grp=2	13-17	YEAR RANGE 2004 - 2010	"Our records suggest [IF INDCONF = 1: you are/IF INCONFPARENT = 1 your child is] aged between 12 and 18, please check your answer"
Mail_grp=3	5-12	YEAR RANGE – 2009 - 2017	"Our records suggest your child is aged between 5 and 13, please check your answer"

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 BUT ALLOW PAST]

GROUP	GROUP AGE	ALLOW RANGE	ERROR MESSAGE
Mail_Grp=1	18+	RANGE 17 -112	"Our records suggest you are aged 17 or over, please check your answer."
Mail_Grp=2	13-17	RANGE 12-18	"Our records suggest [IF INDCONF = 1: you are/IF INCONFPARENT = 1 your child is] aged between 12 and 18, please check your answer"
Mail_grp=3	5-12	RANGE 5- 13	"Our records suggest your child is aged between 5 and 13, please check your answer"

1. Prefer not to say

IF PREFER NOT TO SAY
DAGE [Derived age for filter questions)

IF GIVE A DOB AT DOB OR PREFER NOT TO SAY AT AGE: CALCULATE AGE FROM SAMPLE INFORMATION (assume day is 15 of month)

OTHERWISE USE AGE FROM AGE FOR FILTERING

IF Mail_Grp=3
AGEPARENT

What was <u>your</u> age at your last birthday?

[OPEN NUMERIC BOX, RANGE 16– 112]

1. Prefer not to say

IF AGED 13-15 AND MAIL_GRP2
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}

[IF NUMERIC VALUE IS ENTERED DISPLAY ERROR MESSAGE 'Please check your answer']

Household composition

IF AGED Mail_Grp=1 OR Mail_Grp=3 OR (Mail_Grp=2 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...

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?

[IF MORE THAN 10 ENTERED AT NADULTS] "You said that there are (NADULTS-1) adults other than you in your household. Please tell us the ages of the 10 adults you spend most time with."

[Show multiple rows up for number of adults aged Mail_Grp=1 in household ALLOW RANGE 18 -112]
[IF MORE THAN 10 ADULTS ENTERED AT NADULTS ALLOW ONLY 10 ROWS FOR NUMBER OF ADULTS]

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 Mail_Grp1 OR Mail_Grp=2 ANDINDCONF = 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...

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?

[IF MORE THAN 10 ENTERED AT NADULTS1] "You said that there are (NADULTS-1) adults other than you in your household. Please tell us the ages of the 10 adults you spend most time with."

[Show multiple rows up for number of adults aged Mail_Grp=1 in household ALLOW RANGE 18 -112]

[IF MORE THAN 10 ADULTS ENTERED AT NADULTS1 ALLOW ONLY 10 ROWS FOR NUMBER OF ADULTS]

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 Mail_Grp=1 or Mail_Grp=3 or (Mail_Grp=2 and 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.

NOTE FOR PROGRAMMER: IF MAIL_GRP = 3 or (MAIL_GRP=2 AND INDCONFPARENT=1) IF 0 IS ENTERED, PLEASE BRING UP ERROR MESSAGE:

"You have said that there are no children aged 0-17 in your household. Please remember to include the child this survey relates to."

NUMERIC 0...15

IF NCHILD = 1+

[DO NOT FORCE ANSWER]

ASK (IF MAIL_GRP1 (AND NCHILD=<u>1</u>+)) OR (MAIL_GRP3 (AND NCHILD=2+)) OR (MAIL_GRP2 AND INDCONFPARENT=1 AND NUMBER AT NCHILD=2**+**)

CHILDAGE

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

You said that there are (NUMBER AT NCHILD) children or young people] in your household. How old are they? [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 Mail_Grp=2 (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

[DO NOT FORCE ANSWER]

IF NCHILD1 = 2+
CHILDAGE1

You said that [(IF NUMBER AT NCHILD1-1 = 1) there is 1 child or young person]. How old are they?

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

[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 Mail_Grp=1 OR Mail_Grp=3 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.   Another essential/ key worker (as currently defined by the Government) not in health or social care

6.   None of these

7.   Don't know

IF WORKTYP1= 5, 6, 7
WORKTYP2

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

10. Hospitality – e.g. pubs, restaurants, cafés, hotels

11. Personal care – e.g. hairdresser, beauty therapist, personal trainer

3. Policing, prisons, fire & rescue, coastguard

4. Public transport (including taxis)

5. Education, school, nursery

12. Childcare

6. Armed forces

7. Another public facing role (please specify)

8. I/They work outside of my home but not in a public facing role

9. No, not currently required to work outside my home at all

IF WORKTYP2 =9

EMPLREG

Did you do any paid work in the last 7 days, that is since <DAY/MONTH>, either as an employee or as self-employed?

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

IF WORKTYP2 = 5 or 12 or 8 or 7
WORKSTUDYPERS1REG

Do you/Does your child currently work in any of the following in person?

1. Pre-school

2. Primary school

3. Secondary school

4. College / university

5. None of these

IF (MAILGRP=1 OR 3 AND NADULTS=2+) OR IF MAILGRP=2
WORKTYP3

Is anyone <IF WORKTYP1 = 1-5: else> in your household …

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. Another essential/ key worker (as currently defined by the Government) not in health or social care
6. None of these
7. Don't know

WORKTYP4
IF WORKTYP3= 5, 6, 7

Does anyone <IF WORKTYP2 = 1-7, 10,11,12: else> in your household have a job that currently requires them to work outside your home in any of the following public facing roles?

1. Delivering to homes
2. Food retail, other shop work
10. Hospitality – e.g. pubs, restaurants, cafés, hotels
11. Personal care – e.g. hairdresser, beauty therapist, personal trainer
3. Policing, prisons, fire & rescue, coastguard
4. Public transport (including taxis)
5. Education, school, nursery
12. Childcare
6. Armed forces
7. Another public facing role (please specify)
8. Someone <IF WORKTYP2 = 8; else> works outside the home but not in a public facing role
9. No, no-one <IF WORKTYP2 =9, else> currently required to work outside the home at all

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IF WORKTYP4 = 5 or 12 or 8 or 7
WORKSTUDYPERS2REG

Does anyone <IF WORKSTUDYPERS1REG= 1 to 4, else> in your household currently work in any of the following in person?

1. Pre-school
2. Primary school
3. Secondary school
4. College / university
5. None of these

Vaccinations

ASK MAIL_GRP1 OR MAIL_GRP2 OR MAIL_GRP3 (AGED 12+)
CALCULATE AGE FROM SAMPLE INFORMATION (assume day is 15 of month)
VACCINE3

Have you/**Has your child** ever had a coronavirus vaccine?

1. Yes
2. No
4. Don't know

IF VACCINE3 = 1
VACCDOSE

Most of the vaccines require more than one dose which are given as separate injections some time apart.

How many doses (injections) have you/has your child had so far?

1. One
2. Two
3. Three
4. More than three

IF VACCINE3 =1
VACCINEFIRST

When did you/your child have the first dose (injection)?

If you can't remember exactly when, please enter your best guess

MONTH/YEAR

1. Prefer not to answer

IF VACCDOSE= 2 OR 3
VACCINESECOND

When did you/your child have the second dose (injection)?

If you can't remember exactly when, please enter your best guess

MONTH/YEAR

1. Prefer not to answer

IF VACCDOSE= 3
VACCINETHIRD

When did you/your child have the third "booster" dose (injection)?

If you can't remember exactly when, please enter your best guess

MONTH/YEAR

1. I have not had a third "booster" dose of the coronavirus vaccine

2. Prefer not to answer

IF VACCINE3 =1
VACCINETYPE change to single code if VACCDOSE =1. Allow up to 2 codes to be selected if VACCDOSE = 2 Allow multiple codes to be selected if VACCDOSE= 3 or 4 (code 4 exclusive).

Which vaccine did you/did your child receive?

1. Pfizer/BioNTtech
2. AstraZeneca/Oxford
3. Moderna
5. Johnson & Johnson/Janssen
6. Other (please write in)
4. Don't know (exclusive)

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]

[DO NOT FORCE ANSWER]

OTHETH

IF ETHNIC = code 18

Please tell us [your/your child's] ethnic group or background.

{text box}

1. Prefer not to say

[DO NOT FORCE ANSWER] [IF NUMERIC VALUE IS ENTERED DISPLAY ERROR MESSAGE 'Please check your answer']

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'

ASK ALL **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 kit to test for COVID-19 and flu. 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.

Please follow the instructions in your test kit to return the test to the laboratory for analysis. You will be informed of the COVID-19 test result only.

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 [IF MAIL_GRP3 OR MAIL_GRP2 AND INDCONFPARENT =1 "or your child"] in any published results. We will send more information with the test, and you can withdraw from the study at any time.

Ipsos MORI has a legal obligation to pass on your/your child's COVID-19 and flu test result (whether positive, negative or inconclusive) and a small amount of additional data about [MAIL_GRP1 OR MAIL_GRP2 and INDCONF=1 "you" [IF MAIL_GRP3 " you and your child"] [IF MAIL_GRP2 and INDCONFPARENT=1 "your child] to NHS Test and Trace: first name, surname, sex, date of birth, NHS number, ethnicity, current address (including postcode) and, if [your/your child's] COVID-19 test is positive, your telephone number and email address. If your/the COVID-19 test is positive, NHS Test and Trace may contact you. For more information about how your data is used go to the full Privacy Notice at www.ipsos.uk/covid-swab-privacy.

The test kit will be sent to the same address as the letter you received inviting [you/your child] to take part in this study.

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, including the test result.

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, please leave the email address and phone number blank. 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.]

FOR LINKAGEEXP=0 (THOSE WHO WILL NOT SEE THE NEXT QUESTION, LINKAGEEXPT.]

ASK IF EMAIL1 and MOBILE1 are both blank at CONTACT (not contact information entered) AND u_amount>0
VOUCHCONTACT

If you/your child return/returns your/their completed test, we would like to give you/them a gift voucher worth [£u_amount] as a thank you for taking part.

If you/they prefer to receive the gift voucher by email or text message, please enter your/the details below. These details will only be used to send you/them the gift voucher.

We can post the gift voucher to the same address as the letter you received inviting you/your child to take part in this study.

All gift vouchers will be sent by Ipsos MORI after the study has closed, in mid-April 2022.

For more information about the gift voucher please visit www.ipsos.uk/swabFAQs.

1. EMAIL1VOUCH: Send the gift voucher by email to [CHECK TO ENSURE VALID EMAIL ADDRESS]
2. MOBILE1VOUCH: Send the giftvoucher by text to [10 OR 11 DIGITS PERMITTED]
3. I want to receive the gift voucher by post
4. I do not want to receive a gift voucher

ASK IF (EMAIL1=POPULATED OR MOBILE1=POPULATED AT QUESTION CONTACT AND u_amount>0 AND (MAIL_GRP1 OR MAIL_GRP2).

VOUCHER

Do you agree [IF INDCONFPARENT=1 for your child] to be sent a gift voucher if you return your/they return their completed test for this study?

If you/your child return/returns your/their completed test, we would like to give you/them a gift voucher worth [£u_amount] as a thank you for taking part.

The gift voucher will be sent to you using the contact details you have provided.

All gift vouchers will be sent by Ipsos MORI after the study has closed, in mid-April 2022.

For more information about the gift voucher please visit www.ipsos.uk/swabFAQs.

1. Yes, I wish to receive a gift voucher

3. No, I do not wish to receive a gift voucher

[IF INDCONFPARENT=1 please can this screen have a "SUBMIT MY ANSWERS" button].

DO NOT ASK INDCONFPARENT=1

ASK IF RESPCHK =1

LINKAGEEXP

Imperial College would like your permission to link information held by NHS Digital and other UK NHS bodies about you/ your child to this survey data to follow your health status for up to 20 years.

If you agree to be recontacted for future research in the follow-up survey, Imperial College may also obtain your contact details from the NHS so they can contact you. All such data will be held securely by Imperial College and kept confidential.

Do you give permission for Imperial College to do this [IF PARENT COMPLETING ON BEHALF OF 5-12 YEAR OLD in Mail_Grp 3 ONLY] / until your child is 16 years old?

1. Yes
2. No

IF RESPCHK=1.

Feedback page 1

Your answers have now been submitted. Thank you for registering to take part in this study.

You will be sent a package containing the test to be administered at home. The test kit will be sent to the same address as the letter you received inviting you to take part in this study.

The package will be sent by Royal Mail and should arrive between 8 and 21 March 2022. The package will contain full instructions.

You can exit the questionnaire by closing your internet browser.

Feedback page 2

IF RESPCHK=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.