

**PREVENTION SERVICE AVAILABILITY MAPPING (PSAM)
WORKPLACE QUESTIONNAIRE**

**FOR USE IN WORKPLACES. ONE QUESTIONNAIRE SHOULD BE USED
PER WORKPLACE.**

Please fill the information below before beginning.

Please write clearly, in ink:

001.	Date (dd/mm/yyyy):	/ /
002.	District name	_____
003.	Ward name:	_____
004.	Town/Village name:	_____
005.	Workplace name:	_____
006.	Ownership:	Please check one box below:
	Government (public)	
	Private, for profit	
	Private, not for profit	
007.	Total number of employees	_____
007a.	Of the total number provided in 007, how many are male?	_____
007b.	Of the total number provided in 007, how many are female? Check: 007a and 007b should add up to the total number indicated in 007.	_____
008.	Interviewer name (last, first):	_____
009.	Respondent name (last, first):	_____

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010.	Respondent job title:	_____
011.	Workplace telephone, email and fax numbers (including local telephone codes):	Telephone: _____
		Cell phone (staff member, private): _____
		Fax: _____
		Workplace address: _____ _____
		Email: _____
012.	Workplace geographic co-ordinates:	Latitude S: _____
		Longitude E: _____

Questionnaire identification number: <W_____>

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Questionnaire overview:

Section 1: Prevention and treatment services

Section 2: Human resources

Section 3: Drugs and commodities

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Section 1. Prevention services. This section of the questionnaire focuses on the HIV prevention services available in this workplace.

Note to interviewers: Please indicate respondent's answers in the grey, rightmost column.

No.	Question	Answer
Read to the respondent: We are interested in knowing about the HIV prevention services available to employees. Please indicate whether or not each of the following is available. These are all "yes/no" questions. By previous month we mean the last completed calendar month.		
101	Does the workplace have an HIV/AIDS policy?	Yes.....1
		No.....2
102	Are employees required to take an HIV antibody test prior to employment?	Yes.....1
		No.....2
103	Does the workplace provide HIV/AIDS prevention programmes to employees?	Yes.....1
		No.....2
		SKIP TO 104
103a	Has the workplace had a prevention programme within the last 3 months?	Yes.....1
		No.....2
104	Does the workplace provide employees with information on where they can receive HIV counselling and antibody testing?	Yes.....1
		No.....2

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105	Does the workplace provide on-site or nearby peer education on HIV prevention?	Yes.....1 ENTER NUMBER OF PEER EDUCATORS: ENTER "0" if none . ENTER "999" if don't know .
		No.....2 SKIP TO 106
105a	How many peer educators have received formal training in HIV prevention?	ENTER THE NUMBER TRAINED: ENTER "0" if none . ENTER "999" if don't know .
106	Is there a workplace sponsored clinic on-site or nearby for employees?	Yes.....1
		No.....2 SKIP TO 112
107	Does the clinic provide family planning services to employees?	Yes.....1
		No.....2
108	Does the clinic provide HIV counselling and antibody testing to employees?	Yes.....1
		No.....2

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109	<p>Does the clinic provide antiretrovirals for HIV/AIDS treatment to employees?</p>	<p>Yes.....1</p> <p>IF YES, ENTER THE NUMBER ON TREATMENT:</p> <p>ENTER "0" if none.</p> <p>ENTER "999" if don't know.</p>
		No.....2
110	<p>Does the clinic provide treatment* of opportunistic infections to employees?</p> <p>* Such treatment can include acyclovir for herpes infection and antibiotics for bacterial infections</p>	<p>Yes.....1</p> <p>IF YES, ENTER THE NUMBER OF EMPLOYEES THAT RECEIVED TREATMENT IN THE PREVIOUS MONTH</p> <p>ENTER "0" if none.</p> <p>ENTER "999" if don't know.</p>
		No.....2
111	<p>Does the clinic provide STI treatment to employees?</p>	<p>Yes.....1</p> <p>IF YES, ENTER THE NUMBER OF EMPLOYEES THAT RECEIVED TREATMENT IN THE PREVIOUS MONTH</p> <p>ENTER "0" if none.</p> <p>ENTER "999" if don't know.</p>
		No.....2

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Does the workplace support or provide:		
112	Any outreach services for employees and the community?	Yes.....1
		No.....2
113	Employee relatives with additional financial, physical, or material support to cover costs related to prolonged illness and death?	Yes.....1
		No.....2
114	Referral services to clinics where employees can receive care for STIs including HIV/AIDS?	Yes.....1
		No.....2
115	Health care insurance for employees?	Yes.....1
		No.....2 SKIP TO Section 2. Human resources
Does the workplace health insurance cover:		
116	family planning services	Yes.....1
		No.....2
117	HIV counselling and antibody testing	Yes.....1
		No.....2
118	antiretrovirals for HIV/AIDS treatment	Yes.....1
		No.....2
119	treatment* of opportunistic infections * Such treatment can include acyclovir for herpes infection and antibiotics for bacterial infections	Yes.....1
		No.....2

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120	STI treatment	Yes.....1
		No.....2

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Section 2. Human resources. This section of the questionnaire asks about the availability of specific human resources.

No.	Question	Answer
<p>Read to the respondent: We are interested in knowing about the availability of specific human resources that contribute to your workplace's HIV prevention efforts. For each category of human resource we will ask you if they are available, and how many exist.</p>		
201	<p>Are there medical personnel in the workplace that can provide HIV and STI prevention and treatment services?</p>	<p>Yes.....1 IF YES, ENTER THE TOTAL NUMBER:</p>
		<p>No.....2 SKIP TO 206</p>
202	<p>Of the number indicated above, how many are:</p>	
	<p>a. Medical doctors or physicians</p>	<p>a.</p>
	<p>b. Assistant medical officers</p>	<p>b.</p>
	<p>c. Clinical officers</p>	
	<p>d. Nurses</p>	<p>c.</p>
	<p>e. Other Check: 202a through 202e should add up to the total number indicated in 201.</p>	<p>d.</p>
203	<p>Of the total number of medical personnel in the workplace, how many are trained in the syndromic management/treatment of STIs?</p>	<p>ENTER "0" if none. ENTER "999" if don't know.</p>

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204	<p>Of the total number of medical personnel in the workplace, how many are trained in HIV prevention*?</p> <p>* This includes HIV and STI prevention education, counselling, condom promotion, provision of or referral to antibody testing and STI treatment services</p>	<p>ENTER "0" if none.</p> <p>ENTER "999" if don't know.</p>
205	<p>Of the total number of medical personnel in the workplace, how many are trained in treatment of opportunistic infections?</p>	<p>ENTER "0" if none.</p> <p>ENTER "999" if don't know.</p>
206	<p>Does your workplace have any HIV counsellors?</p>	<p>Yes.....1</p> <p>IF YES, ENTER THE NUMBER:</p>
207	<p>How many of the counsellors have received formal training in HIV counselling?</p>	<p>No.....2</p> <p>SKIP TO Section 3: Commodities</p>
207	<p>How many of the counsellors have received formal training in HIV counselling?</p>	<p>ENTER "0" if none.</p> <p>ENTER "999" if don't know.</p>

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Section 3: Commodities. This is the last section of the questionnaire. Here we are interested in knowing about the prevention resources available in the workplace.

No.	Question	Answer
Read to the respondent: This final section asks about the availability of specific resources for HIV prevention programmes. These are all "yes/no" questions.		
301	Do you have HIV and STI prevention manuals, pamphlets, and/or leaflets available for employees?	Yes.....1
		No.....2
302	Do you have HIV and STI prevention materials such as posters hanging in the workplace?	Yes.....1
		No.....2
303	Do you have condoms available on-site for employees?	Yes.....1
		No.....2
304	Do you have drugs such as antibiotics in stock for the treatment of opportunistic infections and STIs available on-site or in the workplace's medical clinic?	Yes.....1
		No.....2
305	Do you have antiretroviral (ARVs) in stock available on-site or in the workplace's medical clinic?	Yes.....1
		No.....2

This is the end of the questionnaire. We thank you very much for the time you have taken to answer these questions.