

APPENDIX

Appendix A: Finalized Public Bathroom Drug Use Survey

Public Bathroom Drug Use Survey

Date: _____

V10: January 26, 2015

The purpose of this survey is to gain a better understanding of drug use that occurs in public bathrooms. This information will be used to help guide the development of programs aimed at reducing drug use in public bathrooms.

1a) Cross Street: _____

1b) Zipcode: _____

2) Most common shift worked? (Circle one) a) Morning b) Afternoon c) Evening d) Late Night

3) What type of establishment?

a) Fast Food b) Coffee Shop c) Food Market d) Clothing Store e) Shopping Mall f) Restaurant g) Bodega h) Laundromat

4a) Do you have a bathroom for customers? Yes / No [If 'Yes' to 4a, continue. If 'No', you can end the survey]

4b) Single-stall bathroom or Multiple-stall bathroom? (Circle one) **4c) Does an employee have to unlock it?** Yes / No

5) Have you encountered people using drugs in your business's bathroom in the past 6 months? Yes / No

[If 'Yes', continue. If 'No', you can end the survey]

6) On average, how many times do you encounter people using drugs in your bathroom per month? _____

7) Have customers complained about people using drugs in the bathroom? Yes / No

8) What is the most common drug paraphernalia you find in the bathroom? (Circle up to three)

a) Syringes/Needles b) Baggies c) Cotton Balls d) Aluminium Foil e) Crack Pipe/Stem

f) Bottle Caps/Cookers g) Tourniquet h) Other:

9) Does the paraphernalia ever have blood on it? Yes / No

10a) Have you called 911 due to drug use in the bathroom in the past 6 months? Yes / No

[If 'Yes', fill out Questions 10b and 10c]

10b) If Yes, how many times in the past 6 months? _____ **10c) Did you typically request:** a) Police b) EMS c) Both

11a) Have you ever called 911 because someone was unresponsive in the bathroom? Yes / No

[If 'Yes', continue, if 'No' skip to Question 12]

11b) Do you believe it was drug related? Yes / No

[If 'Yes', continue, if 'No' skip to Question 12]

11c) Number of times 911 called due to unresponsive drug-related incidences in the last 6 months? _____

11d) Did you notify your superior/corporate office to report these events? Yes / No

If Yes, what was their response?

11e) Has anyone died in your bathroom in the past 6 months as a result of drug use? Yes / No

12) Are you and your staff trained in how to recognize a drug overdose and how to reverse opioid overdoses with naloxone (Narcan)? Yes / No **Would this training be useful?** Yes / No

