



Appendix II – School-based COVID-19 outbreak investigation – Complementary case questionnaires

Supplementary questionnaires

Supplement to Section 6: Transportation Exposure

SECTION 6A: PRIVATE VEHICLE

Following are questions if you used a private vehicle in the 14 days prior to [BEST DATE].

Applies to all cases. All questions refer to the 14 days prior to [BEST DATE]. Wherever possible please consider gathering information from the school related to transportation policies in advance of the interview, to help prompt the case/proxy while questioning.

1. Who was in the vehicle?

- | | | | |
|---|-----------------------------------|--|---|
| <input type="checkbox"/> Parents / guardian | <input type="checkbox"/> Siblings | <input type="checkbox"/> Adult friend(s) | <input type="checkbox"/> Children Friend(s) |
| <input type="checkbox"/> Colleague | <input type="checkbox"/> Other: | | |

2. Please name all the people who were in the vehicle who were NON-HOUSEHOLD members two days before [BEST DATE]:

NAME	SEAT IN CAR RELATIVE TO THE CASE
<i>e.g. Jane Doe</i>	<i>Beside the case in back seat</i>

3. Do you have any additional information to share or comments?

SECTION 6B: SCHOOL BUS

Following are questions if you used a SCHOOL BUS in the 14 days prior to [BEST DATE].

Applies to all cases. All questions refer to the 14 days prior to [BEST DATE]. Wherever possible please consider gathering information from the school related to transportation policies in advance of the interview, to help prompt the case/proxy while questioning.

1. Are you able to describe the bus route or number, pickup location and time?

TRAVEL DIRECTION	ROUTE (NUMBER / NAME)	ROW AND SEAT #	PICK-UP LOCATION	PICK-UP TIME	
Home to school					
School to home					
Other:					
2. Did you have an assigned seat on the bus?			<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> UNKNOWN
3. In the 14 days prior to [BEST DATE], did your seating assignment change?			<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> UNKNOWN
4. On most days was there someone sitting near you on the school bus? (i.e. sharing the same seat, within 2 rows in front or behind, within 2 seats next to their seat and diagonally front and behind)			<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> UNKNOWN

4a. Please name all the people who were sitting near you on the bus who were NON-HOUSEHOLD members two days before [BEST DATE]:

NAME	SEAT IN BUS RELATIVE TO THE CASE
<i>e.g. Jane Doe</i>	<i>Sitting in seat directly behind the case</i>

5. Do you have any additional information to share or comments?

Name of Case:		Outbreak ID :	
School:			

SECTION 6C: PUBLIC TRANSPORTATION

Following are questions if you used public transportation in the 14 days prior to [BEST DATE].
Applies to all cases. All questions refer to the 14 days prior to [BEST DATE]. Wherever possible please consider gathering information from the school related to transportation policies in advance of the interview, to help prompt the case/proxy while questioning.

- 1. Describe the route and scheduled time that you took public transit (bus, trains, LRT).** (i.e. Did you take the same routes every day? Which days were different? Do you usually sit in the same section of the vehicle every day?)

TRAVEL DIRECTION	DATE(S)	ROUTE (NUMBER / NAME)	PICK-UP LOCATION	PICK-UP TIME
Home to school				
Home to school				
Home to school				
Home to school				
Home to school				
Home to school				
School to home				
School to home				
School to home				
School to home				
School to home				
School to home				

2. Comments:

Name of Case:		Outbreak ID :	
School:			