

Appendix 1: Questionnaire for frontline nursing staff working in psychiatric hospitals

Research Topic: Occupational Health and Safety in Psychiatric Hospitals in Ghana.

This questionnaire is a data collection instrument designed by the researchers to gather information on occupational health and safety in selected mental health hospitals. You are kindly requested to answer the questions as they apply to you, by checking the boxes or filling in the spaces provided. The study is purely for academic purposes and your confidentiality is guaranteed. By ticking the “Yes Agree” box you confirm to voluntarily participate in this research. Nonetheless, you are always at liberty to exit at any point in time from the study without any consequences regarding your career here or your persona life.

Thanks for your time. For details of the research contact the lead research on Mobile number: 0241226409 or email: arkabason@yahoo.com.

Do you confirm to have understood the purpose of the study and voluntarily agreed to participate in this study?

Yes Agree

No Disagree

Please give reasons if can for choosing not to participate.....

Questionnaire No.:.....

Date Given:.....

Date Received.....

SECTION A: RESPONDENT'S BIOGRAPHIC DATA	RESPONSE
Sex	Male <input type="checkbox"/> Female <input type="checkbox"/>
Age	Please specify:.....

SECTION B: RESPONDENT'S WORK HISTORY	RESPONSE
Employment contract	Permanent staff <input type="checkbox"/> Part time staff <input type="checkbox"/> Other (specify).....
Ward/unit of work	Please specify.....

Professional category	Registered Psychiatric Nurse	<input type="checkbox"/>
	Registered General Nurse	<input type="checkbox"/>
	Enrolled Nurse	<input type="checkbox"/>
	Community Psychiatric Nurse	<input type="checkbox"/>
	Health Assistant Clinical	<input type="checkbox"/>
	Health Extension Worker	<input type="checkbox"/>
	Ward Orderly	<input type="checkbox"/>
	Health Aid	<input type="checkbox"/>
	Other (specify).....	
Ward/unit of work	Please specify.....	
How long have you been working in this health facility?	Less than a year	<input type="checkbox"/>
	One year	<input type="checkbox"/>
	Two years	<input type="checkbox"/>
	Three years	<input type="checkbox"/>
	Four years	<input type="checkbox"/>
	Five years	<input type="checkbox"/>
	More than five years	<input type="checkbox"/>

SECTION C: RESPONDENT'S KNOWLEDGE AND SOURCES OF INFORMATION ON OCCUPATIONAL HEALTH AND SAFETY (OHS)	RESPONSE
1. Have you ever heard of occupational health and safety in the health care sector?	Yes <input type="checkbox"/> No <input type="checkbox"/>
2. If yes to question 1 which one of these were the predominant source of information to you on OHS? NOTE: Multiple responses not allowed	Through the media <input type="checkbox"/> Through a friend <input type="checkbox"/> Through a co-worker <input type="checkbox"/> Through a seminar/workshop <input type="checkbox"/> Other (Please specify one).....
3. Do you think your work in the psychiatric hospital is risky in any way than other healthcare facilities?	Yes <input type="checkbox"/> No <input type="checkbox"/>
4. If yes to question 3 what are the five key health risks/hazards associated with your work?	1..... 2..... 3..... 4..... 5.....
SECTION D: RESPONDENT'S EXPERIENCE OF OCCUPATIONAL HEALTH HAZARDS	RESPONSE
5. Have you ever been exposed to any form of health hazard(s) in the course of performing your duties in this hospital?	Yes <input type="checkbox"/> No <input type="checkbox"/>

<p>6. If yes to question 5 which one of these were you exposed to most?</p> <p>NOTE: Multiple responses not allowed</p>	<p>Biological Health Hazards <input type="checkbox"/></p> <p>Physical Health Hazards <input type="checkbox"/></p> <p>Psychosocial Health Hazards <input type="checkbox"/></p>
<p>7. How many times do you experience occupational health hazards on daily basis in this hospital?</p>	<p>One-four times <input type="checkbox"/></p> <p>Five times <input type="checkbox"/></p> <p>More than five times <input type="checkbox"/></p> <p>Ten times <input type="checkbox"/></p> <p>More than ten times <input type="checkbox"/></p> <p>Cannot remember <input type="checkbox"/></p>
<p>8. In the past one year, how many times were you exposed to occupational health hazards in this hospital?</p>	<p>Once <input type="checkbox"/></p> <p>Five times <input type="checkbox"/></p> <p>More than five times <input type="checkbox"/></p> <p>Ten times <input type="checkbox"/></p> <p>More than ten times <input type="checkbox"/></p> <p>Cannot remember <input type="checkbox"/></p>

<p>9. Which of these physical health hazards do you experience most in this health facility? (You can check more than one option)</p>	<p>Back injury due to patient lifting <input type="checkbox"/></p> <p>Physical violence from patients <input type="checkbox"/></p> <p>Physical violence from patient's relatives <input type="checkbox"/></p> <p>Needle prick <input type="checkbox"/></p> <p>Falls on slippery floor <input type="checkbox"/></p> <p>Direct skin contact of patient's body fluids (blood, urine, saliva, faeces etc.) <input type="checkbox"/></p> <p>Other (specify).....</p>
<p>10. Which of these psychosocial health hazards do you experience most as a health worker in this hospital? (You can check more than one option)</p>	<p>Unfavorable work time schedules (work shift) <input type="checkbox"/></p> <p>Work load and demand <input type="checkbox"/></p> <p>Unrealistic expectations from patients <input type="checkbox"/></p> <p>Verbal abuse and threats from patients <input type="checkbox"/></p> <p>Unrealistic expectations from superiors <input type="checkbox"/></p> <p>Frustrations due to limited resources <input type="checkbox"/></p> <p>Low morale/poor organizational climate <input type="checkbox"/></p> <p>Other (specify).....</p>
<p>11. Have you ever been diagnosed of work related medical condition (s)?</p>	<p>Yes <input type="checkbox"/></p> <p>No <input type="checkbox"/></p>
<p>12. If yes to question 11, please specify the name of medical condition (s)</p>	<p>Please specify.....</p>

SECTION E: RESPONSIBILITY FOR WORK RELATED HEALTH HAZARDS	RESPONSE
<p>13. How often do you think your exposure to an occupational health hazard is due to your personal negligence?</p>	<p>None of the occasions <input type="checkbox"/></p> <p>Once in ten occasions <input type="checkbox"/></p> <p>Twice in ten occasions <input type="checkbox"/></p> <p>Most of the occasions <input type="checkbox"/></p> <p>On all occasions <input type="checkbox"/></p>
<p>14. How often do you think your exposure to an occupational health hazard is due to system failure (Hospital management fault) or co-workers' negligence?</p>	<p>None of the occasions <input type="checkbox"/></p> <p>Once in ten occasions <input type="checkbox"/></p> <p>Twice in ten occasions <input type="checkbox"/></p> <p>Most of the occasions <input type="checkbox"/></p> <p>On all occasions <input type="checkbox"/></p>

SECTION F: RESPONDENT'S REPORTING SYSTEM OF EXPOSURE TO OCCUPATIONAL HEALTH HAZARDS	RESPONSE
15. Have you ever reported an exposure to occupational health hazard (s) to hospital management?	Yes <input type="checkbox"/> No <input type="checkbox"/>
16. If yes to question 15 what type of occupational health hazard (s) was it or were they?	Please specify.....
17. Which of these factors influenced you to report the occupational health hazard (s) exposed to?	Perceived degree of severity of health hazard <input type="checkbox"/> Co-worker influence <input type="checkbox"/> The easy reporting system <input type="checkbox"/> Other (please specify).....
18. If no to question 15 please give four main reasons why you never reported an exposure to occupational health hazard (s) to hospital management	1..... 2..... 3..... 4.....

SECTION G: RESPONDENT’S PERCEPTION OF SAFETY CONDITIONS OF PSYCHIATRIC HOSPITAL

Please circle how you will describe the general occupational health and safety conditions of your health facility	VERY GOOD 5	GOOD 4	AVERAGE 3	BAD 2	VERY BAD 1
Perception of safety conditions in the hospital					
19. Availability of logistics and material resources in the wards	5	4	3	2	1
20. State of emergency exit points in the hospital	5	4	3	2	1
21. Security measures for workers against patients attacks	5	4	3	2	1
22. State of floors in the wards and hospital	5	4	3	2	1
23. Procedures for reporting exposure to occupational health hazards in the hospital	5	4	3	2	1
24. Contribution of hospital management towards reducing incidence of occupational health hazards in the	5	4	3	2	1
25. Preparedness of the hospital for any unforeseen disaster	5	4	3	2	1
26. Availability of preventive measures for occupational health hazards in the hospital	5	4	3	2	1
27. Compensation packages for health workers who get exposed to occupational health hazards in the course of their duties	5	4	3	2	1

SECTION H: SUGGESTIONS FOR IMPROVING HEALTH AND SAFETY OF HEALTH WORKERS IN PSYCHIATRIC HOSPITAL

28. Do you have suggestions for improvement of the health and safety of staff in this hospital?
Yes _____ No _____

29. If yes, to question 28 please specify your suggestions to hospital management?.....

30. What do you think health workers in psychiatric hospitals need to do to ensure their personal health safety in the course of their duties?.....

31. Which areas do you think health personnel in psychiatric hospitals need training and education on occupational health and safety?.....

Thanks for Your Cooperation