

Appendix J: Consumer Product Safety Commission (CPSC) Survey on Usage and Functionality of Smoke Alarms and Carbon Monoxide Alarms in Households

Interviewer:

Do not read aloud the “Don’t know”, “Unsure”, or “Refused” options at any time during the interview. Only record this option if the respondent provides it him or herself. If the respondent indicates that they don’t know the answer to a question, mark the appropriate answer or fill in “DK” in the space provided.

Section A should be completed by the surveyor, prior to entering the residence. Once contact has been made with the resident, the surveyor should begin collecting information from the respondent.

A. RESPONDENT INFORMATION

Date of visit: _____

Name of surveyors making the visit: _____

Name of occupant: _____

Street address: _____ Apt. #: _____

City and state: _____ ZIP _____

Home phone: _____

**IF THE ANSWER TO A QUESTION IS “0” OR “NONE”, ENTER “0”.
Do not leave it blank, please.**

Time visit started: _____

1a. What is the type of home in which the resident resides?

- Single Family Detached Housing
- Single Family Attached Housing (e.g., townhouse, rowhouse)
- Apartment/Condo (GO TO 1b)
- Mobile/Other Manufactured Housing
- Trailer/RV
- Other (specify) _____

Code to enter building

<Display apartment code>

**If Q1a = 3, CONTINUE
ELSE, SKIP TO PREAMBLE**

Introduction to get into apartment building

The following script is to be read in the instances where there is a front desk concierge. If there is no front desk concierge present, skip script and proceed to appointment.

“Hello. We are with EurekaFacts, an independent research firm, conducting research on behalf of the Consumer Product Safety Commission (CPSC).”

Show them your EurekaFacts provided identification and credentials.

“Part of our research requires us to interview a resident of this building. We spoke with the property manager prior to coming here.”

1b. Do we have permission to enter the building?

- Yes (PROCEED TO RESIDENCE)
 No (SKIP TO Q3a)

If refused entry, say thank you and terminate.

B. SURVEY INFORMATION

Suggested Preamble to get in the door- surveyors can alter as applicable):

“Hello. I am firefighter/ Red Cross volunteer [First and Last Name] from [your [XYZ] fire department/ [Organization], and this is [First and Last Name] from an independent research firm, EurekaFacts.”

Show them a fire department or American Red Cross credentials, preferably not a badge. Have copies of letters endorsing the survey from the local fire department, CPSC, and/or American Red Cross, to show if needed.

“We are conducting a nationwide survey on household safety for the U.S. Consumer Product Safety Commission (CPSC). The survey is very important and will help the CPSC improve home safety. We called earlier and discussed this study with [Name] from this residence, and scheduled a visit for today.”

2a. Is [Name of respondent previously contacted] available to speak with us?

- Yes (CONTINUE WITH PREAMBLE)
 No

2b. Is there another person available we may speak with, who is 18 years or older and may be considered one of the heads of the household?

- Yes
 No (TERMINATE)

If respondent is not available: *When would be a good time to reach them?*

Terminate: *Thank you for speaking with us today. Unfortunately, we need to speak with an adult who can answer questions regarding the home. Have a nice day.*

“We are asking people in your community a few questions about their smoke and carbon monoxide detectors, and doing some simple tests to make sure the detectors work. If the batteries in your detector need to be replaced, we have new batteries to give out, free of charge. Also, if any of your detectors do not work, we have new ones to replace them, again free of charge. We would like to collect any detectors that don’t work and send them to the Consumer Product Safety Commission’s lab to find out why they don’t work. This interview will take up to 60 minutes, and at the end of the interview we will provide you with a \$25 gift card in appreciation for your participation.

“Before we begin, we’d like for you to review a consent form with information about the study.”

Pull up the informed consent form, and hand the tablet to the respondent.

“This is the informed consent form. It explains the reason for our visit today. Could you please read this, and if you agree to allow this interview to proceed, please sign the bottom. Let me know if you have any questions.

If participant refused, say thank you and terminate

3a. If entry to residence was not possible, what was the main reason?

- Participant refused (TERMINATE)
- Participant rescheduled (GO TO Q3b)
- Refused entry to building (TERMINATE)
- No one home (TERMINATE)
- Only a minor was home (TERMINATE)
- Vacant/commercial home/lot—bad address (TERMINATE)
- Language barrier (TERMINATE)
- Occupant refused entry (Why? _____)
- Other (specify) _____

3b. If participant rescheduled, please fill out the following information

Date _____
Time _____
Contact information _____

“Let’s begin.”

4a. Do you have any smoke detectors in your home? When considering whether you do, please do not include any uninhabited outbuildings or apartment hallways. (DO NOT READ LIST)

- Yes
- No (SKIP To 5a)
- Don't know (ASK TO INSPECT. IF YES CONTINUE, BUT IF NO TREAT AS "NO" SMOKE DETECTOR)

4b. Are any of your smoke detectors connected to a central alarm or security system that notifies the police or fire department? (DO NOT READ LIST)

[If needed: *What we mean by this is if the smoke detector detected smoke, it would automatically notify the police or fire department.*]

- Yes (SKIP TO 4d)
- No (SKIP TO 5a)
- Don't Know (CONTINUE)

4c. Thinking of all fire or smoke related incidents at your residence, has the police or fire department ever arrived in response to a notification from a central alarm or security system? (READ ALL OPTIONS BEFORE SELECTING A RESPONSE)

- Yes
- No
- Never had a fire or smoke related incident

**IF 4b = 1 or 4c = 1 or 3 CONTINUE
ELSE, SKIP TO 5a**

4d. Please tell me to what extent do you believe your home is safe with your current smoke detectors? Would you say... (READ LIST)

Interviewer: Read the descriptors but do not read the numbers. Circle the descriptor and its associated number. If participant is experiencing difficulty during in-home interview, show them the scale.

Not at all safe	Slightly safe	Moderately safe	Mostly safe	Very safe	(DON'T READ) DK	(DON'T READ) RF
(1)	(2)	(3)	(4)	(5)	(8)	(9)

5a. Do you have any carbon monoxide detectors in your home? When considering whether you do, please do not include any uninhabited outbuildings or apartment hallways.

- Yes
- No (SKIP TO Q6)

Don't know (ASK TO INSPECT. IF YES CONTINUE, BUT IF NO TREAT AS "NO" CO DETECTOR)

5b. Are any of your carbon monoxide detectors connected to a central alarm or security system that notifies the police or fire department?

[If needed: *What we mean by this is if the carbon monoxide detector detected carbon monoxide, it would automatically notify the police or fire department.*]

- Yes (SKIP TO Q5d)
- No (SKIP TO Q6)
- Don't Know (CONTINUE)

5c. Thinking of all carbon monoxide related incidents at your residence, has the police or fire department ever arrived in response to a notification from a central alarm or security system? (READ ALL OPTIONS BEFORE SELECTING A RESPONSE)

- Yes
- No
- Never had a carbon monoxide related incident

**IF 5b = 1 or 5c = 1 or 3, CONTINUE
ELSE, SKIP TO 6**

5d. Please tell me to what extent do you believe your home is safe with your current carbon monoxide detectors? Would you say... (READ LIST)

Interviewer: Read the descriptors but do not read the numbers. Circle the descriptor and its associated number. If participant is experiencing difficulty during in-home interview, show them the scale.

Not at all safe	Slightly safe	Moderately safe	Mostly safe	Very safe	(DON'T READ) DK	(DON'T READ) RF
(1)	(2)	(3)	(4)	(5)	(8)	(9)

6. Do you or another member of your household own or rent your home? (DO NOT READ LIST)

- Own
- Rent
- Don't know
- Refused

7. How long have you lived in this (apartment/ house)? Would that be... (READ LIST)

- Less than 6 months
- 6 to 11 months

- 1 to 5 years
- 6 to 10 years
- 11 years or more
- Don't know (DON'T READ)
- Refused (DON'T READ)

8. Please tell me to the best of your knowledge, in what year was this (apartment/ house) built? Was it... (READ LIST)

- 2010 or later
- Between 2000 and 2009
- Between 1990 and 1999
- Between 1980 and 1989
- Before 1980
- Don't know (DON'T READ)
- Refused (DON'T READ)

If Q1a = 1, CONTINUE

ELSE, SKIP TO 10a

9a. What types of fuel-burning appliances, if any, do you own or have in your home? By fuel burning appliances, we mean appliances that use gas, propane, oil, wood, wood pellets, coal, or kerosene. Do not include electric-powered appliances. (READ LIST, SELECT ALL THAT APPLY)

- | | |
|--|--|
| <input type="checkbox"/> Gas powered generator | <input type="checkbox"/> Wood or pellet burning fireplace or stove |
| <input type="checkbox"/> Furnace or boiler | <input type="checkbox"/> Kitchen appliances (e.g., stove, oven) |
| <input type="checkbox"/> Water heater | <input type="checkbox"/> Other (Specify) _____ |
| <input type="checkbox"/> Charcoal grill | <input type="checkbox"/> Do not own any fuel-burning appliances |
| <input type="checkbox"/> Gas Dryer | <input type="checkbox"/> Don't know (DON'T READ) |
| | <input type="checkbox"/> Refused (DON'T READ) |

9b. Does this residence have an attached garage unit? (DO NOT READ LIST)

- Yes
- No (SKIP TO Q10a)
- Don't know (SKIP TO Q10a)
- Refused (SKIP TO Q10a)

9c. For what purposes is the attached garage used? Would you say... (READ LIST, SELECT ALL THAT APPLY)

- Workshop/ workspace
- Store tools or lawn/ sports equipment
- Store vehicle(s) (e.g., motorcycle, car, SUV, van, etc.)
- Fuel burning appliances (e.g., furnace, water heater, grill, etc.)
- Other (Specify:) _____
- Don't know (DON'T READ)
- Refused (DON'T READ)

IF Q4a = 2 or 3 SKIP TO Q12

ELSE, CONTINUE

SMOKE DETECTOR

10a. About how often do you use the test button to test the smoke detector or detectors in your home? Would you say... (READ LIST)

- Never
- Once every few years (SKIP TO Q11a)
- Once every year (SKIP TO Q11a)
- Once every 6 months (SKIP TO Q11a)
- Once every 3 months (SKIP TO Q11a)
- Once every month (SKIP TO Q11a)
- Once every week (SKIP TO Q11a)
- Other (specify) _____ (SKIP TO Q11a)
- Don't know(SKIP TO Q11a) (DON'T READ)
- Refused (SKIP TO Q11a) (DON'T READ)

10b. Please tell me, what are some of the reasons that you have not tested your smoke detector or detectors? (DO NOT READ LIST, SELECT ALL THAT APPLY):

- Did not know you should test
- Did not think it was important enough
- Did not know how to test (SKIP Q10c)
- Don't need to test because they go off occasionally
- Physically unable to reach
- Other (Specify) _____
- Don't know
- Refused

10c. Do you know how to test your smoke detector or detectors, or not? (DO NOT READ LIST)

- Yes
- No
- Unsure
- Refused

11a. Do you think most or all of your smoke detectors are working? By working, I mean they would make a sound if they detected smoke right now. (DO NOT READ LIST)

- Yes (SKIP to 12a)
- No
- Don't know (SKIP TO Q12a)
- Refused (SKIP TO Q12a)

11b. What are some of the reasons your smoke detectors may not be working? Again, by working, I mean they would make a sound if it detected smoke right now. (DO NOT READ LIST, SELECT ALL THAT APPLY)

- Did not get around to fixing it
- Do not know how to fix or replace it
- Unable to install or fix it
- Unable to afford new ones
- Disconnected it (GO TO Q11c)
- It is the landlord's responsibility
- Removed battery (GO TO Q11d)
- Batteries never installed
- Batteries not working and not yet replaced
- Other reason _____
- Don't know
- Refused

11c. You mentioned that one or more of your smoke detectors was disconnected. For what reason(s) were the smoke detectors disconnected? (DO NOT READ LIST, SELECT ALL THAT APPLY)

- Nuisance when they go off
- Detector frequently went off
- Would not stop beeping/ chirping
- No longer worked
- No reason in particular
- Other reason _____
- Don't know
- Refused

11d. You mentioned that the batteries were removed from one or more of your smoke detectors. For what reason(s) were the batteries removed from the smoke detector or detectors? (DO NOT READ LIST, SELECT ALL THAT APPLY)

- Batteries no longer worked
- Batteries were leaking/ discharge
- Batteries expired
- Detector would not stop beeping/chirping
- Intended to replace batteries, but forgot to install new ones
- Installed wrong type of batteries
- Needed batteries for another device
- Other reason _____
- Don't know
- Refused

12. Do you know how to... (INSERT ITEM), or not?

	Yes	No	(DON'T READ) Unsure	(DON'T READ) Refused
a. Install a smoke detector?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Maintain a smoke detector in good working order?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

IF Q4a = 2 or 3 SKIP TO Q14a
ELSE, CONTINUE

13. To the best of your knowledge, how often should you replace your old smoke detector with a new smoke detector in your home? Would you say... (READ LIST)

- Never, unless the detector stops working
- Once every 6 months
- Once a year
- Once every 2 – 5 years
- Once every 6 – 9 years
- Once every 10 years
- Once every 10+ years
- Don't know (DON'T READ)
- Refused (DON'T READ)

FIRE HISTORY

14a. In the past 12 months, have you had any accidental fires – that is unintended or unwanted smoke or flames - in your home? Please include fires that were too small to call the fire department. (DO NOT READ LIST)

- Yes (CONTINUE)
- No (SKIP TO Q15a)
- Don't know (SKIP TO Q15a)
- Refused (SKIP TO Q15a)

IF Q4a = 2 or 3 SKIP TO Q16
ELSE, CONTINUE

If Yes:

14b. Thinking of the most recent accidental fire(s), how did you become alerted to the incident? (DO NOT READ LIST, SELECT ALL THAT APPLY)

- Saw the fire
- Smelled the fire
- Heard the fire
- Felt the heat of the fire
- Smoke detector (SKIP Q14c)
- Someone notified me
- Other (Specify) _____
- Don't remember
- Don't know
- Refused

14c. Thinking of the most recent accidental fire(s), did any of the smoke detectors go off during the fire(s)? (DO NOT READ LIST)

- Yes (SKIP TO Q15a)
- No
- Don't know (SKIP TO Q15a)
- Refused (SKIP TO Q15a)

14d. Thinking of the most recent accidental fire(s), do you think that enough smoke reached the smoke detector that it should have sounded? (DO NOT READ LIST)

- Yes
- No
- Don't know
- Refused

15a. In the past 12 months, have any of your smoke detectors gone off when there was no fire, other than when the smoke detector was being tested? (DO NOT READ LIST)

- Yes
- No (SKIP TO Q16)
- Don't know (SKIP TO Q16)
- Refused (SKIP TO Q16)

15b. Why do you think the smoke detector went off when there was no fire? (DO NOT READ LIST, SELECT ALL THAT APPLY).

- Cooking
- Fireplace
- Tobacco
- Steam from bathroom
- Low battery
- Other (Specify:) _____
- No apparent reason
- Don't know
- Refused

CO DETECTORS

16. How would you know if high levels of carbon monoxide (CO) were present in your home? (DO NOT READ LIST, SELECT ALL THAT APPLY).

- You can smell it
- You can taste it
- You can see it
- You can feel it
- Carbon monoxide detector
- Other (Specify:) _____
- Respondent does not believe there is a way to know if CO is present
- Don't know
- Refused

17. How much do you believe you know about carbon monoxide detectors? (READ LIST)

- Nothing at all
- A little
- Some
- A lot
- Don't know(DON'T READ)
- Refused (DON'T READ)

**IF Q5a =2 or 3, SKIP TO Q21
ELSE, CONTINUE**

If CO detectors present (Yes in 5a), ask:

18a. About how often do you use the test button to test your carbon monoxide detector or detectors? Would you say... (READ LIST)

- Never
- Once every few years (SKIP TO Q19a)
- Once every year (SKIP TO Q19a)
- Once every 6 months (SKIP TO Q19a)
- Once every 3 months (SKIP TO Q19a)
- Once every month (SKIP TO Q19a)
- Once every week (SKIP TO Q19a)
- Other (specify) _____ (SKIP TO Q19a)
- Don't know (SKIP TO Q19a) (DON'T READ)
- Refused (SKIP TO Q19a) (DON'T READ)

18b. What were the reasons that you have not tested your carbon monoxide detector or detectors? (Open ended, capture their response)

19a. Do you think most or all of your carbon monoxide detectors are working? By working, I mean they would make a sound if it detected carbon monoxide right now. (DO NOT READ LIST)

- Yes (SKIP TO 20)
- No
- Don't know (SKIP TO Q20)
- Refused (SKIP TO Q20)

If No:

19b. What are some of the reasons your carbon monoxide detectors may not be working? Again, by working, I mean they would make a sound if it detected carbon monoxide right now. (DO NOT READ LIST, SELECT ALL THAT APPLY)

- Did not get around to fixing it
- Do not know how to fix or replace it
- Unable to install or fix it
- Unable to afford new ones
- Disconnected it (GO TO 19c)
- It is the landlord's responsibility
- Removed battery (GO TO 19d)
- Batteries never installed
- Batteries not working and not yet replaced
- Other reason _____
- Don't know
- Refused

19c. You mentioned that one or more of your carbon monoxide detectors was disconnected. For what reason(s) were the carbon monoxide detectors disconnected? (DO NOT READ LIST, SELECT ALL THAT APPLY)

- Nuisance when they go off
- Detector frequently went off
- Would not stop beeping/ chirping
- No longer worked
- No reason in particular
- Other reason _____
- Don't know
- Refused

19d. You mentioned that the batteries were removed from one or more of your carbon monoxide detectors. For what reason(s) were the batteries removed from the carbon monoxide detector or detectors? (DO NOT READ LIST, SELECT ALL THAT APPLY)

- Batteries no longer worked
- Batteries were leaking/ discharge
- Batteries expired
- Detector would not stop beeping/chirping
- Intended to replace batteries, but forgot to install new ones
- Installed wrong type of batteries
- Needed batteries for another device
- Other reason _____
- Don't know
- Refused

20. For what reasons do you have a carbon monoxide detector? (DO NOT READ LIST, SELECT ALL THAT APPLY)

- It is required by law
- It makes me feel safe
- It is helpful in detecting carbon monoxide
- It came with the residence
- I own generators/ fuel-burning appliances
- Other (Specify:) _____
- Don't know
- Refused

21. To the best of your knowledge, how often should the carbon monoxide detectors in your home be replaced? Would you say... (READ LIST)

- Never, unless the detector stops working
- Once every 6 months
- Once a year
- Once every 2 – 5 years
- Once every 6 – 9 years
- Once every 10 years
- Once every 10+ years
- Don't know (DON'T READ)
- Refused (DON'T READ)

**IF Q5a = 2 or 3, SKIP TO Q24
ELSE, CONTINUE**

CO History

22a. In the past 12 months, has your carbon monoxide detector or detectors ever gone off, other than when the carbon monoxide detector was being tested? (DO NOT READ LIST)

- Yes
- No (SKIP TO Q23)
- Don't know(SKIP TO Q23)
- Refused (SKIP TO Q23)

If Yes:

22b. Thinking of the last time your carbon monoxide detector went off, how did you react when you heard the detector? (DO NOT READ LIST, SELECT ALL THAT APPLY)

- Left the house
- Called the fire department
- Ventilated home (opened windows, door, used fan, etc.)
- Unplugged or disconnected it
- Reset it
- Removed battery
- Other action (specify) _____
- Don't remember
- Don't know
- Refused

23. Do you know how to... (INSERT ITEM). or not?

	Yes	No	(DON'T READ) Unsure	(DON'T READ) Refused
a. Install a carbon monoxide detector?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Maintain a carbon monoxide detector in good working order?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

24. In the past 12 months, were you aware that any of your friends, relatives, neighbors, or coworkers experienced...

	Yes	No	(DON'T READ) Unsure	(DON'T READ) Refused
a. An accidental fire?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. A carbon monoxide incident? (e.g., effects of carbon monoxide poisoning)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

-TESTING DETECTORS-

Now we'd like to test your detector(s) to make sure that they are working properly.

25. How many floors (levels) are there in your home? Please include the basement and finished attic, if you have one. _____

(NOTE: For an apartment, treat the entire apartment as one floor unless more than one level. Do NOT report the number of floors in the apartment building.)

Would you show me the first detector? (Then ask to see the next one)

For each detector, fill in the following data. The computer will automatically cue up another set of these questions for the second, third, etc. detector. The first smoke detector data elements will be numbered 26-1a, 26-1b, 26-1c, etc. The second smoke detector data elements will be 26-2a, 26-2b, etc. The third detector will be 26-3a, 26-3b, etc.

The questions in this section to be addressed and answered by the survey team

26-1a. What level of the home are you currently on?

Detector #	#1	#2	#3	#4	#5	#6
Basement	1	1	1	1	1	1
First level	2	2	2	2	2	2
Second level	3	3	3	3	3	3
Third level	4	4	4	4	4	4
Finished Attic	5	5	5	5	5	5
Other _____	6	6	6	6	6	6

(NOTE: For an apartment, treat the entire apartment as first level unless more than one level. Do NOT report what floor of the building it is on.)

26-1b. What area or room of home are you currently in?

Detector #	#1	#2	#3	#4	#5	#6
Inside the bedroom	1	1	1	1	1	1
Hallway outside of bedrooms	2	2	2	2	2	2
Hallway - other	3	3	3	3	3	3
In Family room/Living room	4	4	4	4	4	4
In Kitchen	5	5	5	5	5	5
In Dining area	6	6	6	6	6	6
In Bathroom	7	7	7	7	7	7
In Closet	8	8	8	8	8	8
In Stairwell						
In Laundry room /Storage room						
Other area _____	9	9	9	9	9	9

26-1c. (READ) What type of detector is this? Would you say it is a smoke detector, carbon monoxide detector, both a smoke and CO detector, or you don't know?

Detector #	#1	#2	#3	#4	#5	#6
Smoke detector	1	1	1	1	1	1
CO detector	2	2	2	2	2	2
Smoke/CO Combined	3	3	3	3	3	3
Don't know or other (INSPECT)	4	4	4	4	4	4

(NOTE: IF Q26c = 3, test the smoke and CO portions of the detector separately.)

IF Q26c = 4

[If “Don’t Know or other”] – Please follow the following steps:

1. Inspect back of detector for manufacturer information- look for name/ type of detector.
2. If unclear, refer to your Detector reference sheet. Use either the UL number or model number to identify the type of detector.

Please select correct type of detector, if still unknown, continue.

26-1d. (READ) For quality control purposes, we’d like to collect three photographs of this detector. Do we have your permission?

Detector #	#1	#2	#3	#4	#5	#6
Yes	1	1	1	1	1	1
No	2	2	2	2	2	2
Could not take picture	3	3	3	3	3	3

[If yes] – Please obtain three photographs including the following items:

- Front of detector (to capture image of detector)
- Back of detector (UL and Manufacturer information)
- Side of detector (may have a install/replacement sticker)

[If no] “Okay. No problem.”

IF Q26c = 1, 3, or 4 CONTINUE

ELSE IF Q26c = 2, GO TO INSTRUCTION SET B

26-1e. (OBSERVE) Approximately, what is the horizontal distance between the stove or cooktop in the kitchen and the closest smoke detector on the same floor?

Detector #	#1	#2	#3	#4	#5	#6
Less than 6 feet	1	1	1	1	1	1
6 – 10 feet	2	2	2	2	2	2
11 – 20 feet	3	3	3	3	3	3
More than 20 feet	4	4	4	4	4	4
No detector on the same floor	5	5	5	5	5	5
Don’t know	6	6	6	6	6	6

IF Q26c = 1, 3, or 4, SHOW INSTRUCTION SET A

ELSE IF Q26c = 2, SKIP 26f, AND GO TO INSTRUCTION SET C

A. INSTRUCTIONS ON TESTING SMOKE DETECTOR WITH AEROSOL

PROCEED TO FIRST/NEXT DETECTOR – SMOKE TEST

Warn consumer of loud noise when the smoke detector sounds.

Use hearing protection, if needed.

- Using aerosol spray and wand, point tube at detector from a distance of 1 – 2 feet.
- Spray a three second burst of aerosol, and wait 10 seconds,
- If detector sounds, testing is complete. Collect identification data.

(Spray short burst of canned air to accelerate and clear smoke detector)

- If no detector sounds:
 - Brush to lightly clear the grille and surface of detector.
 - Spray again for 5 seconds, and wait 10 seconds.
- If detector does not sound, proceed to instructions on testing using Test Button.

26-1f. (OBSERVE) Did smoke detector sound in response to this smoke test?

Detector #	#1	#2	#3	#4	#5	#6
Yes	1	1	1	1	1	1
No	2	2	2	2	2	2
Could not test	3	3	3	3	3	3

**IF SMOKE DETECTOR SOUNDS, SKIP TO INSTRUCTION SET D
ELSE, CONTINUE TO BUTTON TEST**

B. INSTRUCTIONS ON TESTING USING TEST(S) BUTTON

IF NO IN Q26f – (SMOKE) BUTTON TEST

Warn consumer of loud noise when the smoke detector sounds.

Use hearing protection, if needed.

- Press and hold the “Test” button.
 - Read directions on the detector – some models’ “test” function requires push and release, others require push and hold.
- If detector sounds, testing is complete.
 - However, label for collection due to inoperative sensor.
 - Collect identification data.
- If no detector sound, proceed to instructions on replacing batteries/ restoring power.

PROCEED TO INSTRUCTION SET D

C. INSTRUCTIONS ON TESTING CO DETECTOR

CO BUTTON TEST

Warn consumer of loud noise when the smoke detector sounds.

Use hearing protection, if needed.

- Press and hold the “Test/ Reset” until the detector sounds:
 - Place your fingers over the sounder opening and check the power and detector by depressing the “Test/Reset” button.
- If detector sounds, testing is complete. Collect identification data.
- If no detector sounds, proceed to instructions on replacing batteries/ restoring power.

26-1g1. (OBSERVE) Did detector sound in response to the smoke test button?

Detector #	#1	#2	#3	#4	#5	#6
Yes	1	1	1	1	1	1
No	2	2	2	2	2	2
No test button on unit	3	3	3	3	3	3
Could not test	4	4	4	4	4	4

**IF COMBINATION DETECTOR , CONTINUE (IF Q26c = 3, continue to 26-1g2)
ELSE, SKIP TO INSTRUCTION SET D**

26-1g2. (OBSERVE) Did detector sound in response to the second (CO) test button?

Detector #	#1	#2	#3	#4	#5	#6
Yes	1	1	1	1	1	1
No	2	2	2	2	2	2
No additional button on unit	3	3	3	3	3	3

D. INSTRUCTIONS ON HOW TO PROCEED (SMOKE DETECTOR)

- If smoke detector sounded in response to Q26f, continue collecting identification data.
- If smoke detector did not sound in response to Q26f, but did sound in response to Q26g, label for collection (due to inoperative sensor), and continue with collecting identification data.
- If smoke detector did not sound in response to Q26f and Q26g, continue with Q26h.

E. INSTRUCTIONS ON HOW TO PROCEED (CO DETECTOR)

- If CO detector sounded in response in response to Q26g, continue collecting identification data.
- If CO detector did not sound in response to Q26g, continue with Q26h.

IF DETECTOR FAILS TO SOUND, ATTEMPT TO REPLACE/ INSTALL BATTERY ELSE, SKIP TO INSTRUCTIONS ON HOW TO PROCEED

If the smoke detector uses a 10-year seal battery, the battery cannot be replaced. A smoke detector that uses a 10-year seal battery can be identified if:

- The unit does not have any battery door or compartment.
- The label states “10-year seal battery” or similar.

26-1h. (READ) May I put a new battery in this detector to determine whether the detector needs to be replaced?

Detector #	#1	#2	#3	#4	#5	#6
Yes	1	1	1	1	1	1
No (Label)	2	2	2	2	2	2
No – 10-year Seal Battery Present	3	3	3	3	3	3

IF BATTERY REPLACED/ INSTALLED, CONTINUE WITH RESTESTING ELSE, SKIP TO INSTRUCTIONS ON HOW TO PROCEED

F. INSTRUCTIONS ON RETESTING SMOKE DETECTOR

After replacing battery/ restoring battery, repeat SMOKE TEST using up to 3 one second sprays, ten seconds apart with tube positioned against the grill.

26-1i. (OBSERVE) Did the detector sound in response to this smoke test?

Detector #	#1	#2	#3	#4	#5	#6
Yes	1	1	1	1	1	1
No (label)	2	2	2	2	2	2

IF DETECTOR SOUNDS, SKIP TO INSTRUCTIONS ON HOW TO PROCEED ELSE, CONTINUE

G. INSTRUCTIONS ON RETESTING SMOKE DETECTOR TEST BUTTON

IF NO IN Q26i –BUTTON TEST

- Press and hold the “Test” button.
 - Read directions on the detector – some models’ “test” function requires push and release, others require push and hold.
- If detector sounds, testing is complete.
 - However, label for collection due to inoperative sensor.
 - Collect identification data.

IF DETECTOR SOUNDS, SKIP TO INSTRUCTIONS ON HOW TO PROCEED ELSE, SKIP TO Q26j

H. INSTRUCTIONS ON RETESTING CO DETECTOR TEST BUTTON

IF NO in Q26g – CO BUTTON TEST

- Press and hold the “Test/ Reset” until the detector sounds:
 - Place your fingers over the sounder opening and check the power and detector by depressing the “Test/Reset” button.
- If detector sounded in response to test in, testing is complete. Collect identification data.
- If no detector sounds, label for collection, and collect identification data.

26-1j1. (OBSERVE) Did detector sound in response to this button test?

Detector #	#1	#2	#3	#4	#5	#6
Yes	1	1	1	1	1	1
No (Label)	2	2	2	2	2	2

**IF SMOKE DETECTOR, SKIP TO INSTRUCTION SET I
ELSE IF, CO DETECTORS, SKIP TO INSTRUCTION SET J
ELSE, COMBINATION DETECTOR, CONTINUE**

26-1j2. (OBSERVE) Did detector sound in response to the second test button?

Detector #	#1	#2	#3	#4	#5	#6
Yes	1	1	1	1	1	1
No (Label)	2	2	2	2	2	2
No additional button on unit	3	3	3	3	3	3

I. INSTRUCTIONS ON HOW TO PROCEED (SMOKE DETECTOR)

- If smoke detector sounded in response to Q26i, continue collecting identification data.
- If smoke detector did not sound in response to Q26i, but did sound in response to Q26j, label for collection (due to fault inoperative sensor), and continue with collecting identification data.
- If smoke detector did not sound in response to Q26e and Q26f, label for collection, and continue collecting identification data.

J. INSTRUCTIONS ON HOW TO PROCEED (CO DETECTOR)

- If CO detector sounded in response to Q26j, continue collecting identification data.
- If CO detector did not sound in response to Q26j, label for collection, and continue with collecting identification data.

26-1k. If could not test, why not?

Detector #	#1	#2	#3	#4	#5	#6
Could not reach	1	1	1	1	1	1
Homeowner would not allow	2	2	2	2	2	2
No time	3	3	3	3	3	3
Other	4	4	4	4	4	4

IF Q26c = 1, 3, or 4 CONTINUE

ELSE IF Q26c = 2, GO TO Q26i

26-1l. (OBSERVE) What type of smoke detector is this?

Detector #	#1	#2	#3	#4	#5	#6
Photoelectric	1	1	1	1	1	1
Ionization	2	2	2	2	2	2
Combined photo/ion	3	3	3	3	3	3
Combined ion with CO	4	4	4	4	4	4
Combined photo with CO	5	5	5	5	5	5
Don't know	6	6	6	6	6	6
Other _____	7	7	7	7	7	7

IF Q26l = 2 or 4 CONTINUE

ELSE IF Q26c = 1 or 3, GO TO Q26j

26-1m. (OBSERVE) What type of CO detector is this?

Detector #	#1	#2	#3	#4	#5	#6
Electrochemical	1	1	1	1	1	1
Metal Oxide	2	2	2	2	2	2
Biomimetic	3	3	3	3	3	3
Don't know	4	4	4	4	4	4
Other _____	5	5	5	5	5	5

26-1n. (OBSERVE) What type of power source does the detector have?

Detector #	#1	#2	#3	#4	#5	#6
Replaceable battery	1	1	1	1	1	1
Sealed battery	2	2	2	2	2	2
AC Only	3	3	3	3	3	3
AC with battery	4	4	4	4	4	4
Don't know	5	5	5	5	5	5

26-1o. (OBSERVE) What is the manufacture date of the detector?

Detector #	#1	#2	#3	#4	#5	#6
Year _____	_____	_____	_____	_____	_____	_____
Don't know	1	1	1	1	1	1

26-1p. (OBSERVE) What is the model number of the detector?

Detector #	#1	#2	#3	#4	#5	#6
Model number						
Don't know	1	1	1	1	1	1

26-1q. (OBSERVE) Is the detector (wired or wireless) interconnected with other detectors?

Detector #	#1	#2	#3	#4	#5	#6
Yes	1	1	1	1	1	1
No	2	2	2	2	2	2
Don't know	3	3	3	3	3	3

26-1r. (OBSERVE) Is the detector part of a private detector system?

Detector #	#1	#2	#3	#4	#5	#6
Yes	1	1	1	1	1	1
No	2	2	2	2	2	2
Don't know	3	3	3	3	3	3

26-1s. (OBSERVE) Did the detector have strobe lighting for hearing impaired?

Detector #	#1	#2	#3	#4	#5	#6
Yes	1	1	1	1	1	1
No	2	2	2	2	2	2
Don't know	3	3	3	3	3	3

**IF Q26c = 1, 3, or 4 CONTINUE
ELSE IF Q26c = 2, SKIP TO Q26u**

26-1t. (OBSERVE) Is this detector connected to a tactile notification device (bed shaker or pillow shaker) for the hearing impaired or blind?

Detector #	#1	#2	#3	#4	#5	#6
Yes	1	1	1	1	1	1
No	2	2	2	2	2	2
Don't know	3	3	3	3	3	3

FOR BATTERY ONLY

26-1u. (OBSERVE) Was this detector found to have a dead battery, that is, the old battery was connected but the detector responded to aerosol smoke after battery replacement?

Detector #	#1	#2	#3	#4	#5	#6
Yes	1	1	1	1	1	1
No	2	2	2	2	2	2

IF Q26u = 2, CONTINUE

ELSE, SKIP TO Q26w

FOR EITHER BATTERY OR AC DETECTORS:

26-1v. (OBSERVE) Was the detector found without a battery, with battery disconnected, or AC power disconnected?

Detector #	#1	#2	#3	#4	#5	#6
Yes	1	1	1	1	1	1
No	2	2	2	2	2	2

26-1w. (READ): How old do you think this detector is? Would you say...

Detector #	#1	#2	#3	#4	#5	#6
Less than 1 year old	1	1	1	1	1	1
1 – 5 years old	2	2	2	2	2	2
6 – 10 years old	3	3	3	3	3	3
More than 10 years old	4	4	4	4	4	4
Don't know (DON'T READ)	5	5	5	5	5	5
Refused (DON'T READ)	6	6	6	6	6	6

**IF DETECTOR DOES NOT WORK, CONTINUE
ELSE, SKIP TO POST INSPECTION**

IF DETECTOR DOES NOT WORK

(READ) It is important that we determine why detectors don't work.

I would like to collect this detector and send it to the U.S. Consumer Product Safety Commissions lab for analysis to find out why it does not work properly. We will provide you with a free replacement detector.

26-1x. (READ) May I collect this detector?

Detector #	#1	#2	#3	#4	#5	#6
Yes	1	1	1	1	1	1
No	2	2	2	2	2	2

**IF Q26x = 2, CONTINUE
ELSE, SKIP TO PACKAGING INSTRUCTIONS**

IF NO

(READ) That is fine. You may keep the detector. However, I will still provide you with a new detector, and give you this box so you may send your old detector to the U.S. Consumer Product Safety Commission’s lab for analysis, if you may choose to do so.

**IF Q26x = 1, CONTINUE
ELSE, SKIP TO Q26z**

CAREFULLY PACKAGE
DETECTOR

(AFTER DETECTOR HAS BEEN REMOVED/BOX GIVEN) Here is a replacement (smoke/CO) detector. I’m going to test it now to be sure it works.

PERFORM BUTTON TEST:

- If detector sounded, give respondent replacement detector.
- If detector does not sound, select & test another detector.

26-1y. (OBSERVE) Post inspection actions taken: (SELECT ALL THAT APPLY)

Detector #	#1	#2	#3	#4	#5	#6
No action required	1	1	1	1	1	1
Battery replaced	2	2	2	2	2	2
Installed missing battery	3	3	3	3	3	3
Refused battery installation/ replacement	4	4	4	4	4	4
Collected detector	5	5	5	5	5	5
Advised replacement (AC/ hard wired)	6	6	6	6	6	6
Could not replace detector/ Refused	7	7	7	7	7	7

26-1z. (READ) Are there any other detectors on this floor? This could include smoke detectors or carbon monoxide detectors.

- Yes (GO BACK to Q26-b)
- No
- Don't know (ASK TO INSPECT. IF YES, INSPECT FLOOR, IF "NO", TREAT AS NO AND CONTINUE)

**IF Q25 = 1, SKIP TO NEXT SECTION
ELSE, CONTINUE**

26-1aa. (READ) What about other floors? Are there any smoke or carbon monoxide detectors on any other floors in this (apartment/house)?

- Yes (GO BACK to Q26-a)
- No
- Don't know (ASK TO INSPECT ADDITIONAL FLOORS. IF YES, GO TO THE OTHER FLOOR, IF NO, TREAT AS "NO", AND CONTINUE)

DETECTORS

**IF Q4a = 1, CONTINUE
ELSE, SKIP TO Q28**

27. Did the occupant know the location of the smoke detectors?

- Knew all
- Knew at least one but not all
- Knew none

**IF Q5a = 1, CONTINUE
ELSE, SKIP TO NEXT SECTION**

28. Did the occupant know the location of the CO detectors?

- Knew all
- Knew at least one but not all
- Knew none

NO SMOKE DETECTORS PRESENT

IF Q4a = 2 CONTINUE
ELSE, SKIP TO NEXT SECTION

If no smoke detectors are present, ask:

29. On a scale of 1 to 5, where 1 is Not at All Necessary, and 5 is Extremely Necessary, how necessary do you feel it is to have a smoke detector installed in your home?

1 2 3 4 5 DK RF

30. Please tell me what are some of the reasons you don't have a smoke detector installed in your home. (DO NOT READ LIST, SELECT ALL THAT APPLY)

- Don't think I need one
- Did not come with residence
- They are a nuisance
- They did not or don't work
- Never got around to replacing previous detectors
- It is the landlord's responsibility
- Other reason _____
- Don't know
- Refused

NO CO DETECTORS PRESENT

IF Q5a = 2 CONTINUE
ELSE, SKIP TO Q32a

If no CO detectors present, ask:

31. On a scale of 1 to 5, where 1 is Not at All Necessary, and 5 is Extremely Necessary, how necessary do you feel it is to have a carbon monoxide detector installed in your home?

1 2 3 4 5 DK RF

**32. Can you tell me what are some of the reasons you don't have a carbon monoxide detector installed in your home?
(Open ended, Probe: Anything else?)**

**IF Q4a = 2 or 3 or Q5a = 2 or 3 SKIP TO Q34a
ELSE, CONTINUE**

Post-inspection Follow up Questions with Respondent

Now I would like to ask a few additional questions about your detectors.

33a. After we contacted you to arrange for this visit, did you buy any additional smoke or carbon monoxide detectors, or replace any batteries in your detectors? (DO NOT READ LIST, SELECT ALL THAT APPLY)

- Yes
- No (SKIP TO Q34a)
- Don't Know (SKIP TO Q34a)
- Refused (SKIP TO Q34a)

If Yes:

33b. How many new smoke detectors? _____

33c. How many new carbon monoxide detectors? _____

33d. How many detectors were installed with new batteries?

34a. In the past 12 months, have you looked for any information about either fire safety or carbon monoxide safety, or not? (DO NOT READ LIST)

- Yes
- No
- Unsure
- Refused

**IF Q34a = 1, CONTINUE
ELSE, SKIP TO Q35**

- 34b. Where do you obtain information about fire safety? (READ LIST ONE AT A TIME) (SELECT ALL THAT APPLY)

Sources of information	Fire safety
TV news, or radio	<input type="checkbox"/>
Internet search engines like Google	<input type="checkbox"/>
Family or friends	<input type="checkbox"/>
Community or religious organizations	<input type="checkbox"/>
Social media like Facebook	<input type="checkbox"/>
Local fire department	<input type="checkbox"/>
Other (SPECIFY) (DON'T READ) _____	<input type="checkbox"/>
None of these (DON'T READ)	<input type="checkbox"/>
Don't know or remember (DON'T READ)	<input type="checkbox"/>
Refused (DON'T READ)	<input type="checkbox"/>

- 34c. Where do you obtain information about carbon monoxide safety? (READ LIST ONE AT A TIME) (SELECT ALL THAT APPLY)

Sources of information	Carbon monoxide safety
TV news, or radio	<input type="checkbox"/>
Internet search engines like Google	<input type="checkbox"/>
Family or friends	<input type="checkbox"/>
Community or religious organizations	<input type="checkbox"/>
Social media like Facebook	<input type="checkbox"/>
Local fire department	<input type="checkbox"/>
Other (SPECIFY) (DON'T READ) _____	<input type="checkbox"/>
None of these (DON'T READ)	<input type="checkbox"/>
Don't know or remember (DON'T READ)	<input type="checkbox"/>
Refused (DON'T READ)	<input type="checkbox"/>

35. How often do you or another member of the household cook at home using a stove or oven? Does a member of this household cook... (READ LIST)

- Never
- Less than once a month
- A few times per month
- A few times per week
- Every day
- Rarely
- Don't know (DON'T READ)
- Refused (DON'T READ)

DEMOGRAPHICS

Great! To ensure that we interview a broad mix of residents, I have a few brief demographic questions to ask about you and others within this household. It should only take a few minutes of your time.

36. How many people live or stay in your household? This can include:

- Anyone who is living or staying here for more than 2 months
- Yourself, if you are living here for more than 2 months
- Anyone else staying here who does not have another place to stay, even if they are here for 2 months or less

Please do not include anyone who is living somewhere else for more than 2 months, such as a college student living away or someone in the Armed Forces on deployment.

Enter number of people _____

37. Thinking of the individual(s) who live here, is there anyone...(INSERT ITEM)

	Yes	No	(DON'T READ) Don't know	(DON'T READ) Refused	If yes, how many?
Under 5 years old?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5 - 17 years old?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
18 – 64 years old?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
65 years old or older?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

38. What is the highest level of education you have completed or the highest degree you have received? (DO NOT READ LIST)

- Less than high school, no diploma
- High school diploma, or high school equivalent (GED)
- Trade or Vocational school degree
- Some college, no degree
- Associate's degree
- Bachelor's degree
- Master's degree or higher
- Don't know
- Refused

39. **Is anyone in the household of Hispanic or Latino origin or descent? (DO NOT READ LIST)**

- Yes
- No
- Don't know
- Refused

40. **What is your race? (SELECT ALL THAT APPLY)**

- White
- Black or African American
- Asian
- American Indian or Alaska Native
- Native Hawaiian or other pacific islander
- Some Other Race (Specify) **(DON'T READ)** _____
- Don't know **(DON'T READ)**
- Refused **(DON'T READ)**

41. **Is anyone in the household deaf or hard of hearing? (DO NOT READ LIST)**

- Yes
- No
- Don't know
- Refused

42. **Does anyone in the household have a physical, mental, or other health condition that has lasted 6 or more months which makes it difficult for them to carry out day to day activities? (DO NOT READ LIST)**

- Yes
- No
- Don't know
- Refused

43. **Do any people in the home smoke cigarettes, cigars, hookahs, or pipes? Please do not include e-cigarettes or vaping devices. (DO NOT READ LIST)**

- Yes
- No
- Don't know
- Refused

44. In the last 12 months, what was your total household income from all sources, before taxes? Just stop me when I get to the right category (READ LIST) (If necessary, read)

- Less than \$15,000
- \$15,000 to under \$25,000
- \$25,000 to under \$35,000
- \$35,000 to under \$50,000
- \$50,000 to under \$75,000
- \$75,000 to under \$100,000
- \$100,000 to under \$150,000
- \$150,000 to under \$200,000
- \$200,000 or more
- Don't know (DON'T READ)
- Refused (DON'T READ)

Thank you so much for participating in this survey. You can call us if you have any questions about fire or CO safety.

Time visit ended: _____