



DRIVERS' SAFETY SURVEY



This survey can be filled in at www.usdaw.org.uk/transport

Employer: _____ Town: _____ Home Postcode: _____

Size of vehicle driven (ie van driver/HGV driver): _____

1. Have you ever been the victim of an attempted theft or robbery from your vehicle while at work? **YES/NO**

a) Describe what happened: _____

2. How often, in the last 12 months, have you been the victim of abuse or aggression from other road users:

a) 1-2 times 3-6 times Every month Never

b) What triggered the attack? _____

3. At the point of delivery have you been the victim of abuse or aggression? **YES/NO**

a) What triggered the attack? _____

4. Have you ever had to refuse to deliver because you were concerned about your personal safety? **YES/NO**

a) Describe the incident: _____

In your opinion what are the main personal safety and security issues for professional drivers?

5. What is the top thing that can be done by the following groups to make your work safer:

a) Your employer? _____

b) Customers? _____

c) Government? _____

d) Vehicle manufacturers? _____

e) The Union? _____

Share your story and help the campaign!

Using real life stories and experiences of Usdaw members are vital for our campaigns. Please consider sharing your experiences.

Yes - I'm prepared to share my experiences – please contact me.

Name: _____

Contact Telephone No: _____

Email Address: _____

To return you completed survey,
just write FREEPOST USDAW on
the envelope and put it the post.

*U***s***d***a***w*

*Union of Shop, Distributive
and Allied Workers*

www.usdaw.org.uk