DHHS - Social Services Division

Board Action

File #: 17-292

Commissioner Brown - DHHS (ACCESS Division) - Approval of FY2017-2018 Gaston County ACCESS System Safety and Security Plan *(No Funding Impacted Herein)*

STAFF CONTACT

Cheree Wilson - Central Transportation (ACCESS) - 704-862-3220

BUDGET IMPACT

Required approval to continue receiving NCDOT/PTD funding.

BUDGET ORDINANCE IMPACT

N/A

BACKGROUND

The ACCESS System Safety and Security Plan, which is a required document by NCDOT/PTD, must be revised annually to meet current requirements of NCDOT/PTD. Once revised the plan must be approved and signed by the Board. This plan assists the department in meeting requirements to receive NCDOT funding for the program.

POLICY IMPACT

N/A

ATTACHMENTS

ACCESS System Safety and Security Plan

DO NOT TYPE BELOW THIS LINE

I, Donna S. Buff, Clerk to the County Commission, do hereby certify that the above is a true and correct copy of action taken by the Board of Commissioners as follows:
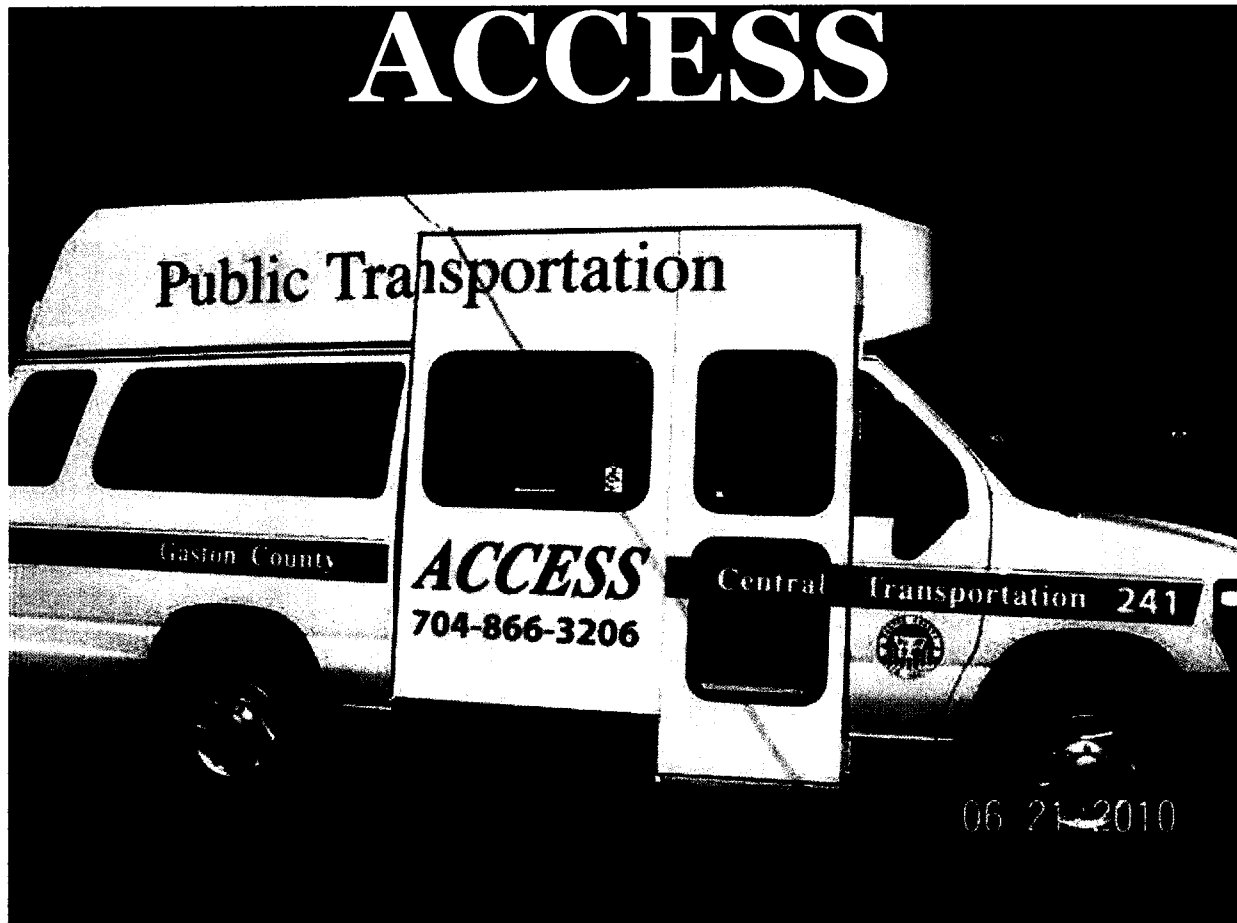
NO.	DATE	M1	M2	Brown	Fraley	Grant	Hovis	Keigher	Philbeck	Worley	Vote
2017-217	09/26/2017	TP	AF	A	A	A	A	AB	A	A	U

DISTRIBUTION:
Laserfiche Users

A=AYE, N=NAY, AB=ABSENT, ABS=ABSTAIN, U=UNANIMOUS

GASTON COUNTY ACCESS

SYSTEM SAFETY PLAN

(PLAN REVISED JULY 2017)

TABLE OF CONTENTS

SYSTEM SAFETY PLAN
DESCRIPTIONS OF ELEMENTS

1. POLICY STATEMENT AND AUTHORITY FOR SYSTEM SAFETY PLAN

A. Effective October 2012, Moving Ahead for Progress in the 21st Century (MAP-21) mandated requirements for all public transportation to develop and implement a safety plan. As defined by MAP-21 public transportation is regular, continuing shared-ride surface transportation services that are open to the general public or open to a segment of the general public defined by age, disability, or low income.

B. North Carolina Board of Transportation 2003 Resolution established the requirement for each transit system to develop and implement a System Safety Plan (SSP).

C. Establish the SSP as an operating document that has been prepared for and approved by the transit system top management, chief executive officer or the governing board.

D. The authority statement in the SSP should define, as clearly as possible, the following:
   1. The authority for establishment and implementation of the SSP
   2. How that authority has been delegated through the organization

E. The SSP must adequately address the SIX CORE ELEMENTS.

2. DESCRIPTION OF PURPOSE FOR SYSTEM SAFETY PLAN

A. Address the intent of the *SSP* and define why it is being written.

B. Establish the safety philosophy of the whole organization and provide a means of implementation.

C. A *SSP* could be implemented for the following reasons:
   - To establish a safety program on a system wide basis.
   - To provide a medium through which a system can display its commitment to safety.
   - To provide a framework for the implementation of safety policies and the achievement of related goals and objectives.
   - To satisfy federal and state requirements.
   - To meet accepted industry standards and audit provisions.
   - To satisfy self-insurance or insurance carrier provisions.

D. The relationship of system safety to system operations should be defined.

E. All departments involved must have a clear definition of their individual responsibilities relative to the scope of the *SSP*.

F. This section should also contain system safety definitions applicable to the operating systems.

3. CLEARLY STATED GOALS FOR VEHICLE SAFETY MANAGEMENT PROGRAM

A. The overall goal of a *SSP* is to identify, eliminate, minimize and control safety hazards and their attendant risks by establishing requirements, lines of authority, levels of responsibility and accountability, along with methods of documentation for the organization.

B. These goals should be system-specific, tailored to the individual needs of the system, as well as being:
   1. Long term - the goal must have broad and continuing relevance.
   2. Meaningful - they must not be so broad as to be meaningless; desired results must be identified.
   3. Realizable - any goal that meets the first two criteria but cannot be attained is meaningless.

C. Example:
   1. A goal might be to establish a high level of safety comparable to other transit systems in the U.S.
   2. Identify, eliminate, minimize, and/or control all safety hazards
   3. Provide appropriate action and measures to obtain necessary safety-related agreements, permits and approvals from outside agencies, where applicable.

4. IDENTIFIABLE AND ATTAINABLE OBJECTIVES

A. Objectives are the working elements of the *SSP*, the means by which the identified goals are achieved.
   1. Must be quantifiable and meaningful.
   2. Met through the implementation of policies.
B. Policies are central to the *SSP* and must be established by top management.
   1. They set the framework for guiding the safety program, on a relatively long-term basis.
   2. Policies are measurable.
   3. Policies are methods for reaching a specified objective.
C. Example:
   The establishment of a safety program incorporating public, patron, employee, and property safety including fire protection, loss prevention and life safety requirements.
- **Policies depend on the goals defined by the transit system and its safety philosophy.**

5. SYSTEM DESCRIPTION/ORGANIZATIONAL STRUCTURE
A. System Description
   1. Briefly describe the system's characteristics. The information should be sufficient to allow non-technical person and those not employed in transit to understand the system and its basic operation.

   2. Components that should be included in the system description:
      a. History
      b. Scope of service
      c. Physical features
      d. Operations
      e. Maintenance
      f. System Modifications
B. Organizational Structure
   1. Organizational diagrams showing the title of each position.
   2. Diagram showing the structure of the system safety unit identifying the key positions.
   3. Diagrams showing the relationships and lines of communication between the system safety unit and other departments in the organization.
   4. Describe the relationship of the transit system to local political jurisdictions.

SYSTEM SAFETY PLAN

Program Description:
The System Safety Plan (SSP) was developed utilizing established guidance listed in the procedural manuals of the North Carolina Department of Transportation Standard Operating Procedure SSP-001 and the State Management Plan. The SSP consists of and addresses the required six (6) core elements:

1. Driver/Employee Selection
2. Driver/Employee Training
3. Safety Data Acquisition Analysis
4. Drug, Alcohol and Abuse Program
5. Vehicle Maintenance
6. Security

Gaston County ACCESS number one priority is the adherence to policies and procedures of the core elements. All of the elements listed are equal in importance and the policies and procedures must be met. The compliance will ensure that we meet all Federal Transportation Administration (FTA) and North Carolina Department of Transportation Public Transportation Division (NCDOT/PTD) policies and regulations.

Driver/Employee Selection Element:
Fair hiring practices are used to select employees. Each potential employee will complete a written application. The Coordinator and/or appointed official and supervisor shall interview each potential employee.

Driver/Employee Training Element:
The minimum requirements for vehicle operator training are Defensive Driving, Americans with Disabilities Act, Blood borne Pathogens and Emergency Procedures for Vehicle Operators. In addition to the minimum requirements the follow actions must be completed:

1. The training must be completed annually
2. The training material must be on file for review by NCDOT/PTD
3. Records of each individual trained must be retained on file for five (5) years
4. Each driver must have an annual driver's performance evaluation to provide refresher training, assess skills, techniques, knowledge, etc....
5. Each driver will receive updates on how to drive during inclement weather, backing, railroad crossing, and unpaved roads.
6. Drivers will have safety related posters and information on how to drive safely posted on the bulletin board and in the training room.

Safety Data Acquisition Analysis Element:
The goal of the Safety Program is the reduction of accidents and injuries to transit customers, employees and the general public. Safety is a shared responsibility between system management and employees. It is the policy of Gaston County ACCESS to provide a place of employment that is free from recognized hazards that could result in death or serious injury to employees, customers or the general public. It is the responsibility of each employee to report all incidents or unsafe conditions to their supervisor. Supervisors must immediately take necessary corrective action to prevent unsafe conditions.

Prohibited behaviors are behaviors that are in violation of the System Safety Policy. Such behaviors include behaviors that threaten the safety of employees, customers and the general public. Other unacceptable behaviors include those that result in damage to system, employee and public and/or private property. An employee who intentionally violates the safety policy and procedures will be subject to appropriate disciplinary action, as determined by the findings of an investigation. Such discipline may include a warning, demotion, suspension or immediate dismissal. In addition, such actions may cause the employee to be held legally liable under State or Federal Law.

Drug Alcohol and Abuse Program Element:
The goal is to provide a safe, healthy and productive drug-free work environment for all employees. A person being under the influence of a drug or alcohol while on the job poses serious safety and health risk to the user, co-workers as-well-as passengers. Gaston County ACCESS has established a policy of a drug-free work environment. A standard of zero tolerance for use of alcohol, illegal substances, or the misuse of prescription medications during work hours or the presence of these substances in the body during work hours regardless of when consumed. Random drug test will be administered.

Vehicle Maintenance Element:
The goal is to ensure each vehicle and wheelchair lift is properly maintained to maximize the service life, maintain reliability, mitigate high maintenance costs and sustain proper safety and mechanical condition. To accomplish this goal we will at a minimum adhere to the vehicle manufacturer's maintenance/service manual and the wheelchair lift service manual.

Security Element:
The overall purpose of the Security Program is to optimize -- within the constraints of time, cost, and operational effectiveness -- the level of protection afforded to vehicles, equipment, facilities, passengers, employees, volunteers and contractors, and any other individuals who come into contact with the system both during normal operations and under emergency conditions.

Policy/Procedure Name	SSP#	Revision #	Date	Description

Policy/Procedure Name	SSP#	Revision #	Date	Description

Policy/Procedure Name	SSP#	Revision #	Date	Description

Policy/Procedure Name	SSP#	Revision #	Date	Description

Policy/Procedure Name	SSP#	Revision #	Date	Description

Policy/Procedure Name	SSP#	Revision #	Date	Description

Policy/Procedure Name	SSP#	Revision #	Date	Description

Policy/Procedure Name	SSP#	Revision #	Date	Description

The security of passengers and employees is paramount to promoting the objectives of FTA and NCDOT. We will take all reasonable and prudent actions to minimize the risk associated with intentional acts against passengers, employees and equipment/facilities. To further this objective, ACCESS has developed security plans and procedures and emergency response plans and procedures. The plans have been coordinated with local law enforcement, emergency services and with other regional transit providers, which addresses the conduct of exercises in support of their emergency plans, and assessment of critical assets and measures to protect these assets.

The SSP will be updated as changes occur. An annual review is required to ensure all information is current. The annual review must be adopted by the board.

This operational policy was adopted by the Gaston County Board of Commissioners.

Date _____

Month _____

Year _____

System Manager (Signature) _____

Governing Board Chairman (Signature) _____

RESOLUTION FOR APPROVAL OF REQUIREMENT FOR COMMUNITY TRANSPORTATION SYSTEMS TO IMPLEMENT SYSTEM SAFETY PLANS

WHEREAS, the Federal Transit Administration's strategic safety goal is to promote the public health and safety by working toward the elimination of transportation related deaths, injuries and property damage;

WHEREAS, the Federal Transit Administration and the National Transportation Safety Board require the reporting of certain transportation related accidents;

WHEREAS, the vision for public transportation services in North includes the provision of safe, affordable transportation choices, statewide to those who have travel options and to those whose options are limited;

WHEREAS, the development and implementation of System Safety Plans by Community Transportation systems is a fundamental step toward these goals;

WHEREAS, the North Carolina Department of Transportation, Public Transportation Division recognizes the safety implications of the development of System Safety Plans and provides training and technical assistance to transit systems to assist in the development and implementation of their System Safety Plans;

WHEREAS, rural transit systems receiving federal and state funds are not currently required to have a System Safety Plan;

WHEREAS, the Public Transportation Division, in an effort to promote safe public transportation services recommends requiring that each rural transit system in the state that receives federal and/or state funds must have an approved System Safety Plan which includes provision for local system safety data collection and reporting;

WHEREAS, the Transit, Rail and Ferry Committee has concurred in this recommendation.

THEREFORE BE IT RESOLVED AS FOLLOWS:

That the North Carolina Board of Transportation approves the recommended requirement that each Community Transportation System that receives federal and/or state funds must have an approved System Safety Plan which includes provision for local system safety data collection and reporting

The SSP should reflect the changing needs of our system programs. As a transit system evolves and operates, it must consistently monitor the programs and update the SSP accordingly.

To ensure that this occurs, **the transit management staff should prepare an annual report that assesses the adequacy and effectiveness of all phases of the SSP.** The annual report should be submitted to the local Transportation Advisory Board and a copy submitted to NCDOT/PTD Safety & Training Unit.

Report topics include:

- ❖ Results of incident investigations and analysis
- ❖ Identification of possible hazardous conditions
- ❖ Results of inspections
- ❖ Established plans for handling future incidents
- ❖ Recommendations for SSP revisions
- ❖ Analysis of departmental involvement in the administration of the SSP

Members of the SSP Review Committee as-well-as system managers are jointly responsible for maintaining and updating the SSP. The local Transportation Advisory Board must approve the required revisions.

MISSION STATEMENT

It is the mission of Gaston County ACCESS Central Transportation to enhance the quality of life for the citizens of Gaston County by providing timely, cost efficient, high quality, general public, elderly and disabled, and human service transportation.

SYSTEM GOALS

Core Services

ACCESS is the transportation "clearing house" for the Gaston County's human service agencies. ACCESS identifies and arranges the most efficient and economical transportation services for all requests. ACCESS directly provides the needed transportation, unless the requests are far more than the department can handle. If this is the case, the department makes the arrangements with outside private providers who can handle the requests, such as private transport services or other public transit providers.

Department Vision: To meet the increasing transportation needs in Gaston County. We will continue our subscription route and demand response transportation services. To improve our efficiency by acquiring new technology, and expand our capacity and availability by improving our dial-a-ride system and increasing our general public transportation by utilizing a fleet of lift equipped vehicles, and small, lift equipped cutaway transit vehicles operating deviated, fixed routes.

Objectives

- To improve route efficiency by utilizing technological resources and improving routing.

9

- To coordinate with the human service agencies more closely and assist with eligibility and placement of customers requiring non-medical general transportation or wheelchair transportation to reduce costs to the customer and improve overall revenue for the County
- To maintain the accuracy and timeliness of billing and revenue functions.
- To receive at least a satisfactory rating on 95% on customer feedback surveys, customer service cards, and quality improvement telephone contacts.
- To maintain reliable fleet condition.
- To increase the number of passengers served by optimizing the schedule and routes.

SYSTEM DESCRIPTION

Gaston County ACCESS (ACCESS) is a consolidated transportation system operating in Gaston County, NC. ACCESS offers subscription route and demand/response transportation by contractual agreement with the following human service organization:

> Gaston County Department of Social Services
> Veterans Services
> Gaston Skills
> Holy Angels
> Support Inc.

Rural General Public (RGP) service is available on all of our subscription routes if the route deviates no more than 2.5 miles. RGP services are also available in the towns of Dallas, Bessemer City, Cherryville, High Shoals, Mount Holly, Belmont, McAdenville, Cramerton, Lowell, Spencer Mountain, and Ranlo. All service is accessible to persons with disabilities.

Service Area
Gaston County ACCESS Transit System serves all of Gaston County including the municipalities within its borders. Gaston County is a rural county. The ridership of ACCESS is comprised mainly of the clients and consumers of the participating organizations. Destination points are at the discretion of the participating agency and include transportation services to points outside Gaston County.

A.   Service
      1. Types of Service
           a. Subscription– Individual riders or groups traveling regularly from the same address, place a request for daily or frequent service. Passengers are transported to and from medical appointments, Aging programs, sheltered workshops, educational facilities, clinics, other human service programs and employment.

           b. Dial-a-ride– General Public rider's call Gaston County ACCESS to schedule transportation.

      2. Promotion of Service- Gaston County ACCESS will do the following to promote the transportation services:
           a.   Speak to civic organizations to promote the transit system.

      b.   Post hours of operation in public places including phone numbers.

      c.   Develop brochures for the system and distribute them across the service area.

      d.   Promote safe, reliable and courteous service through proper driver training and customer relation skills.

B.   Service Information– Gaston County ACCESS provides service for the following purposes:

Nutrition	Education
Dialysis	Health Department
Employment	General Public
Medical	EDTAP– Elderly and Disabled

Days and Hours of Service

ACCESS is closed for the following holidays:

New Year's Day	Martin Luther King Day
Good Friday	Memorial Day
Independence Day	Labor Day
Thanksgiving	Day after Thanksgiving
Christmas Eve	Christmas Day
Day after Christmas	

ACCESS is closed on the third Friday of the following months for staff training days:

March, June, September, December

Service Operating Procedures

Definitions of Services

Passenger is defined as an individual who has completed the enrollment process with an agency for transportation or has completed the enrollment process for Gaston County ACCESS. Each passenger must be approved and authorized to receive transportation services, or use the service as the general public for a fee.

Escort is defined as an individual who is authorized to ride with and be able to provide assistance to a passenger.

General Public/Private Pay refers to those individuals whose trip will not be paid by an agency or Medicaid. Payment will be collected when you board the vehicle.

Subscription Trip is defined as daily, weekly and or monthly. Subscription trips may be assigned to one route for an extended period of time.

Demand Response Trip is defined as daily, weekly and or monthly schedule appointments. Shared use transportation service operating in response to calls from passengers or their agents to the transportation operator, who schedules a vehicle to pick up the passengers to transport them to their destinations. Transportation service may also be used as or operate as a ride sharing arrangement that is open to the public.

Subscription trips are defined as assigned to one route for an extended period of time and rotation may be used for this type of trip.

No-show is defined as no passenger transported from a destination.

Description of Services

1) This agency operates a Subscription route, demand response and general public transportation service. Passengers needing transportation for medical appointments, buy groceries, shopping, social and recreation functions, etc., must call 866-3206 or 810-5813 at least 72 hours in advance to schedule transportation. All grocery shopping trips will be limited to one hour. *All requests will be served on a space available basis.* Medicaid is for medical trips to medical facilities only.

2) Service is curb to curb and will not be provided for passengers from their door to vehicle. Passengers must arrange for assistance, if needed, from house to vehicle. This includes wheelchair users/disabled persons.

3) This agency provides non-emergency transportation only. If passenger is unable to sit up, has severe pain, or other debilitating problems, this agency cannot transport them. Please explain your disability at the time of the request.

4) This agency's vehicles are accessible. All vehicles have two-way radios, and all are properly maintained for safety and cost efficiency.

Service and Service Area

1) The service area for transportation service includes all of Gaston County, and when permitted, the entire state of North Carolina.

2) Service is provided daily Monday – Friday from 5:00 A.M. until 5:00 P.M. on a space available basis.

3) Service is provided into Durham, Chapel Hill, Salisbury, Raleigh and Winston-Salem, on Monday, Wednesday, and Friday only. Service to Charlotte will be provided Monday through Friday. Return trips must leave Durham, Chapel Hill, Salisbury, Raleigh, Charlotte, and Winston-Salem no later than 2:00 p.m. Services to other cities will need prior approval.

4) No transportation will be provided on icy or snowy days or when unsafe road conditions exist.

5) No transportation will be provided for standard holidays that occur Monday – Friday. Also no transportation will be provided on our staff training days. The staff training days are on the third Friday in March, June, September, and December each year.

Reservations, Scheduling and Cancellations

1) Office hours are 4:00 A.M. – 6:00 P.M. Monday – Friday. <u>Appointments can be scheduled from 9:00am until 4:00pm daily Monday-Friday.</u> To cancel a reservation you must call at least twenty four hours prior to the reservation time.

2) The telephone number for reservations or cancellations is 704 866-3206 or 704 810-5813. Passengers that are deaf, hard of hearing or speech impaired may call 1-800-735-2962 TDD/TTY. Leave message on the voice mail if you need to call after hours and someone will get back to you regarding scheduling trip at the earliest possible time.

3) All calls for transportation must be made 72 hours or more in advance in order to ensure services. Requests for trips received less than 72 hours prior to the requested pickup time will be honored on a <u>space-available basis</u>. All Medicaid recipients must be approved by the Department of Social Services, call 704 862-7513 for more information.

4) ACCESS requests that passengers to be ready one hour in advance of pick-up time. Actual pick-up time will be adjusted based on the system needs. Passengers traveling to Charlotte, Durham, Chapel Hill, Winston Salem, etc. are to be ready for pick up three to four hours before their appointment time. This agency is committed to honoring passenger's schedule needs in a cost-effective fashion. Veterans traveling to Salisbury are to be ready at 5:00 a.m.

5) Drivers will wait no longer than <u>3 minutes</u> for walk on passengers to board the van and <u>5 minutes</u> for wheelchair passengers. Driver will not wait longer for passengers who are not ready at pick-up time. Extra time will be granted persons with severe disabilities as needed.

6) Passengers discharged by a medical facility outside the county must call ACCESS prior to the discharged day and time. Passengers are to call 72 hours in advance for a return home trip. ACCESS will not schedule same day dismissals from a medical facility. If a passenger becomes ill during transport by ACCESS, the driver will call dispatch by two-way radio, and the dispatcher will call 911 for an ambulance.

7) Failure to cancel an appointment in a timely manner on 3 occasions could result in suspension of service for 3 months, a small fee or denial of future service for continued abuse.

8) General Public fares are based on location for a one way trip anywhere within Gaston County. One-way fare to Gaston College from the Gastonia Transit Station is $1.00. General Public funds cannot be used for current agency passengers.

9) Cash payment for General Public trips must be made upon boarding the vehicle. Please have correct change. Driver will not issue change.

Passenger Assistance

1) It is the policy of this agency that passengers unable to access the system on their own (wheelchair, walker, blind, etc.) be accompanied by an escort. The passenger is responsible for furnishing his or her own escort. An escort must be physically able to provide assistance to the passenger and physically able to assist themselves on and off the vehicle. Passengers

in wheelchairs must be secured in the wheelchair with a safe restraint, such as a belt, harness, etc. before boarding the vehicle. ACCESS will not transport anyone in a wheelchair that is missing parts or is deemed unsafe.

2) This agency does not transport children unaccompanied under the age of 16 to medical appointments. An adult must accompany all children below that age.

3) Passengers needing mobility aids, wheelchairs, walkers, etc. must provide their own.

4) All passengers in wheelchairs must have a safe wheelchair access. This includes a ramp. No wheelchairs will be taken up or down steps.

5) Drivers will assist passengers in boarding and exiting from the vehicle only.

6) This agency only allows service animals on the vehicle.

7) Limited assistance will be provided elderly passengers and persons with disabilities, as requested. Passengers and or escorts must be able to handle all equipment, carryon bags and shopping bags. Drivers will not carry bags from or into a residence.

8) Passengers scheduled for appointments will not be transported if the following symptoms are evident:
   - Chest pains
   - Shortness of breath
   - Severe nausea
   - Vomiting or diarrhea
   - Abdominal pain
   - Labor pain

If the driver finds the passenger in distress upon arriving at the passenger's home, the driver will notify ACCESS, and ACCESS will recommend transport by the Gaston Emergency Medical Services (GEMS).

All return trips will only be made from the location of the drop off. If you travel to a new location without using the ACCESS vehicle you will not be picked up from the new location unless prior arrangements have been made.

SERVICE ANIMAL POLICY

All service animals, individually trained to provide assistance to an individual with a disability, may accompany a passenger with a disability or trainer in facilities or on vehicles operated by Gaston County Access. Animals that are pets are not allowed. Categories of animals are those meeting the definition of a service animal listed by FTA. The following criteria apply to passengers, operators and the transit system when transporting a passenger with a service animal:

Owner Responsibility

- Must be in full control of animal
- Animal must be in good health and behave appropriately
- Animal may not travel in vehicle seat or block aisle
- Owner is responsible for the cost to repair any damage to property caused by animal [NC G.S. 1684.4]

Transit System Responsibility

- At the time a reservation is made, the dispatch will ask if they are traveling with a service animal
- Assign driver who is not allergic or fearful of animals to transport passenger traveling with a service animal
- Cannot require special ID, inquire about customer's disability or ask for a demonstration of tasks animal is trained to perform
- May ask if animal is a service animal and what tasks the animal is trained to perform
- May not charge passenger extra for traveling with a service animal unless the animal takes up the space of another passenger [NC G.S. 1684.4]

Operator Responsibility

- Cannot assign passenger with a service animal to a specified area
- Do not handle animal or carry case
- Can hand leash to passenger if asked to by passenger
- If needed, remind other passengers that the service animal is working and not to distract, pet or speak to it unless owner allows
- Do not separate or attempt to separate animal from owner
- Do not allow animal to ride lift unless in the lap of the owner or if the owner is a standee passenger
- Know transit and owner responsibilities
- Contact dispatch or management regarding any problems or questions

ACCESS reserves the right to deny transportation of passenger with service animal if the animal poses a direct threat to the health or safety of others until the problem is rectified.

Passenger Conduct and Responsibilities

ACCESS Transportation system agency requests that all passengers conduct themselves with courtesy and consideration to the driver and other passengers. The driver is responsible for on-vehicle behavior. All instructions from the driver are to be followed by the passenger. ACCESS Transportation system reserves the right to refuse service based on violation of agency rules and regulations.

Inappropriate Behavior on Vehicle:

A passenger's right to transportation can be terminated by the transportation system due to misconduct of the passenger. Misconduct includes but is not limited to:

1) No tobacco products are to be used in the vehicle this includes smoking, chewing, or dipping.
2) Disruptive or abusive behavior to other passengers or the driver will not be tolerated.
3) Passengers are not permitted to eat, or drink in vehicles
4) No abusive or foul language. No profanity or vulgarity is allowed while on board a transportation system vehicle.
5) Lack of personal hygiene is offensive to others. Passengers should be clean before boarding the vehicle.
6) No horseplay of any kind allowed. No annoyance to other passengers. This can distract the driver.
7) Possessions of alcohol and/or illegal drugs are not allowed. Prior use of alcoholic beverages or illegal drugs before boarding the vehicle will result in denial of transportation.
8) Passengers are required to buckle up, seat belts are provided.
9) Passengers must secure any carry-on or personal items.
10) No weapons (knives or firearms) will be allowed on a system vehicle.
11) All passengers must wear seat belts to insure the safety of all individuals in the vehicle. Passengers will be denied transportation services if they choose not to abide by the seat belt policy.
12) No inappropriate display of affection or sexual activity to the driver or another passenger.
13) No release of human waste, including spitting, on the vehicle. This does not include instances of vomiting due to treatments, medication, or illness.

> The driver will reserve the right to refuse transport to any passenger who appears to be intoxicated or under the influence of drugs.

Passenger Comment and Complaint Procedures

ACCESS Transportation system is committed to being responsive to passenger perceptions about their transportation services and welcomes feedback from passengers. Any comments/complaints may be addressed by calling 704 866-3220 or in writing to the following address:

> Gaston County ACCESS
> P. O. Box 1578
> Gastonia, NC 28053-1578
> Cheree.wilson@gastongov.com

Complaint procedures are as follows:

1) Transportation Coordinator will discuss complaint with passenger. If the complaint is valid, immediate changes will be made, if possible. Safety and security complaints will be tracked in Safety & Security Complaint excel spreadsheet.

2)   If the complaint is against a driver, the Coordinator will discuss the problem with the driver involved within two (2) working days. If it is determined that the driver is at fault, corrective measures will be taken immediately.

3)   Passenger making the complaint will be notified within five (5) working days of the status of the complaint.

Americans with Disabilities Act (ADA) of 1990 and 49 CFR Parts 37 and 38

Titles II and III of the Americans with Disabilities Act of 1990 provide that no entity shall discriminate against an individual with a disability in connection with the provision of service. The law sets forth specific requirements for vehicle and facility accessibility and the provision of service. Each public entity operating a fixed route system must provide paratransit or other special service to individuals with disabilities that is comparable to the level of service provided to individuals without disabilities who use the accessible fixed route system.

It is the policy of The Gaston County ACCESS Transportation System to provide equal opportunity to all people who are admitted to, participate in, or are the recipients of ACCESS services.

Procedures:

As a recipient of Federal financial assistance, ACCESS does not exclude, deny benefits to, or otherwise discriminate against any person on the grounds of race, color, religion, sex, national origin, or on the basis of disability or age in admission to, participation in, or receipt of the services and benefits of any of its programs and activities or in employment therein, whether carried out by ACCESS directly or through a contractor or any other entity with whom ACCESS arranges to carry out its programs and activities.

This statement is in accordance with the provisions of Title VI of the Civil Rights Act of 1964, Section 504 of the Rehabilitation Act of 1973, the Age Discrimination Act of 1975, Americans with Disabilities Act of 1990, and Regulations of the U.S. Department of Health and Human Services issued pursuant to the acts, Title 45 Code of Federal Regulations Part 80, 84, and 91. (Other Federal Laws and Regulations provide similar protection against discrimination on grounds of sex and creed.)

In case of questions concerning this policy, or in the event of a desire to file a complaint alleging violations of the above, please contact the ACCESS Office at 704-866-3207.
*Complaints must be filed in writing or in person no later than 180 days after the alleged act of discrimination occurred to, 816 West Mauney Avenue, or by mail to P. O. Box 1578 Gastonia, NC 28053-1578

Gaston County ACCESS Complaint Form

Date_____

1. Complainant: _____
2. Address: _____
3. Nature of Complaint or request:_____

_____
_____
_____
_____
_____

4. Directions to Location: _____
_____
_____

Reported by: _____   Date_____

INVESTIGATION OF REQUEST OR COMPLAINT
To Be Completed By ACCESS

1. Person(s) contacted:_____
_____
_____
_____

2. Final Disposition of the matter: _____
_____
_____
_____
_____
_____Date:_____

3. Persons Notified of Final Disposition:
   Name: _____   Date: _____
   Name: _____   Date: _____

Signature _____
Title: _____

Please Fax to ACCESS when completed. The fax number is (704) 866-3232.

18

Transit System Responsibilities

1) ACCESS Transportation System is responsible for providing clean, on-time, reliable, safe, and efficient service.
2) The system is not responsible for passenger's items left on vehicle.
3) The system is responsible for abiding by the policies detailed in other sections of the service policy.
4) The system has insurance coverage exceeding legally mandated minimums.
5) The system abides by all applicable Federal, State and Local regulations.
6) The system is committed to keeping all vehicles and other equipment properly maintained and in safe working order.

ACCESS No Show Policy

1) When the vehicle arrives at passenger's home and there is no response, the driver will attempt to get a response by using the horn and if possible go to the door.
2) Driver will notify dispatch, and dispatch will call the residence.
3) If no response to the telephone call, the driver will proceed to the next pick up.
4) ACCESS will contact the agency to make them aware of the no-show if this is a subscription rider.
5) The vehicle will not return to the home until the passenger and or the agency notify ACCESS.
6) *When a passenger has had a total of three no-shows, the passenger will be billed on the fourth one-dollar and any future no-shows.*

ACCESS will make every attempt to transport each person scheduled. Dispatchers will call the contact person listed in our files in case of an emergency or if the passenger is elderly or handicapped. At no time can ACCESS force a passenger to ride the vehicle. All pick up and cancellations should be called in to dispatch, at 704 866-3206 or 704 810-5813.

Safety

1) The ACCESS Transportation system maintains a Drug and Alcohol Testing Program to ensure safety sensitive personnel are drug and alcohol free when providing service.
2) The ACCESS Transportation system requires drivers to be trained in CPR, First Aid, and Passenger Sensitivity in order to provide safe transportation services.
3) All drivers receive at least 12 hours of driver training when hired and refresher training quarterly.
4) All drivers must have proper licenses. All drivers are required to possess a Commercial Driver's License, with passenger endorsement.
5) All passengers are to be seated and wear seat belts. All passengers in wheelchairs are to be safely secured when vehicle is in motion.
6) The ACCESS Transportation system has standard on-vehicle safety equipment on all vehicles.
7) All drivers conduct a pre-trip inspection on the vehicle before beginning service.
8) The ACCESS Transportation system is committed to the safe operation of its vehicles, including the safe boarding and exiting of the passengers.

9)   The ACCESS Transportation system will not operate if weather conditions make it unsafe to operate vehicles on the roadways.

Emergency Procedures

In case of an accident or other emergency the passenger should:

1)   Follow the driver's instructions.
2)   Remain calm.
3)   Maintain orderly evacuation of the vehicle, if warranted.
4)   Stay off roadway in a safe location.
5)   Do not smoke anywhere near the vehicle.
6)   Call for emergency response if the driver is incapacitated.
7)   Drivers will provide detailed and accurate reports of all accidents/incidents, using the system's standard and Gaston County accident/incident report form.

Emergency/Natural Disaster

In the event of an emergency or natural disaster, all scheduled transportation service will be discontinued. Every effort will be made to take those passengers who are en route or at appointments to their homes as quickly as possible. This agency will assist the county emergency management services provide emergency transportation service in the event of a disaster. The system vehicles will be used to transport disabled and or the elderly, and any other citizen to safe shelters.

Inclement Weather Policy (example-snow, ice, hurricane)

The transportation system is responsible for the safe operation and management of transportation service. In order to carry out this responsibility with the assistance of other agencies, the following procedures will be used in the event of inclement weather.

The system Coordinator will contact the emergency management director (Gaston County communications) at 5:00 A.M. for a recommendation on the safe transportation operation for the day. As a general guideline, if the county schools are closed, rural transportation routes will not operate. If the road condition permits essential medical trips and life sustaining dialysis trips will be provided. The cancellation or delay is for the safety of passengers and system personnel.

Human service agencies whose services are affected by the decision will be contacted by the transportation Coordinator no later than 6:00 A.M.

The system transportation Coordinator will telephone designated TV stations (WBTV channel 3 or Cable channel 2) with any inclement weather announcements. These announcements may involve complete cancellation of service, delay of the start of service, or cancellation of specific routes. You may call the ACCESS office for instructions.

If inclement weather occurs in midday, the same procedures will apply. Transportation take-home procedures may have to be modified and will be determined by transportation system staff.

Statement of Non-Discrimination

This agency does not discriminate in the provision of service to any individual based on race, creed, color, sex, age, or national origin. All persons will be treated equally with respect and dignity.

This agency is an equal opportunity employer and will not discriminate in the employment of persons because of race, creed, color, sex, age, or national origin.

Any and all information regarding any individual person served by Gaston County ACCESS Transportation System is strictly confidential.

QUARTERLY INSPECTIONS
AND
REPORTS
DATE: _____

NAME OF Contractor – SAFETY DATA	1ST Qtr. Jul-Sep	2nd Qtr. Oct-Dec	3rd Qtr. Jan-Mar	4th Qtr. Apr-Jun	COMMENTS/ACTIONS
Safety Data					
Passenger Injuries/Claims					
Employee Injuries					
Accident Reports					
Incidents					
Preventability					
Trend Analyses					
Safety Meeting Minutes					
Note: Incident reports are submitted to NCDOT as a quarterly requirement.					

QUARTERLY INSPECTIONS
AND
REPORTS

DATE: _____

NAME OF Contractor – DRIVER/ EMPLOYEE	1ST Qtr. Jul-Sep	2nd Qtr. Oct-Dec	3rd Qtr. Jan-Mar	4th Qtr. Apr-Jun	COMMENTS/ACTIONS
Employee Information					
Annual Background Check					
Annual Driving Record Check					
Drug & Alcohol Test					
Orientation (Brief Transit System SSP)					
Defensive Driving Skills Training					
Customer Sensitivity Training					
ADA Training					
Emergency Procedures Training					
NOTE: Training reports are submitted to NCDOT as a quarterly requirement.					

DRIVER/EMPLOYEE SELECTION

DRIVER/EMPLOYEE SELECTION

Driver selection is critical to safe transit operations. The driver of a transit vehicle is directly responsible for the safety of their passengers and other motorists that share the road with transit buses. This policy addresses the processes that must occur prior to the employment offer.

General: Refer to the Drivers Handbook Policy "Position Description Van Driver" for:
General Job Description
Essential Job Functions
Mandatory Job Requirements

Qualifications

Application
Each potential employee shall complete a written application.

Interviews
The Transportation Director and one additional transportation associate shall interview each potential employee.

Physical Requirements
No person shall be able drive, require or permit any person to drive any vehicle in the service or transporting clients or on agency business unless the driver possesses the following minimum qualifications.

a. Mental and Physical Conditions-Drivers shall be in sound physical and mental condition. Drivers shall not have physical or mental defects or limitations likely to interfere with safe driving, passenger assistance or emergency activities, in the opinion of the party responsible for hiring or supervising drivers and the physician performing the driver's physical examination. The driver must be physically capable of assisting persons with disabilities including wheelchair users if the job duties require it.
b. Eyesight-Drivers must have vision in both eyes, normal depth perception, normal peripheral vision and be free of any disease or condition that could impair vision. Drivers must have 20/40 vision in each eye with or without corrections, and 140 degrees or better horizontal vision. Drivers must be able to distinguish between green, red and yellow.
c. Hearing-Drivers shall have adequate hearing to assure safe response to vehicle horns, emergency vehicle sirens, and train signals.
d. Alcohol, narcotics and drugs-Drivers shall not be addicted to the use of alcohol, narcotics or habit-forming drugs. Drug and alcohol tests shall be conducted in accordance with State and/or Federal Regulations. Additional reference to this requirements may be obtained in the Drivers Handbook policies which follow that are hereby incorporated into this Safety Policy:
   a. Medication
   b. Drug Free Workplace
   c. Drug and Alcohol Testing Program/Policy
e. Doctor's Physical Examination-refer to Drivers Handbook Policy "Physical Examination of Drivers" which is hereby incorporated into this Safety Policy. The Policy covers 4 elements of examination:

a. Pre-Employment
b. Annual
c. Return from extended leave (beyond 60 days)
d. Reasonable Concern

Age
Drivers shall be at least twenty-one years of age.

Knowledge of English
Drivers shall be able to read, write and speak the English language.

Driver Licensing
Drivers transporting people shall hold a valid NC Drivers' License or Commercial Drivers' License as appropriate. Each prospective driver must sign an authorization allowing the agency to perform inquiries to the DMV. In no case will an individual be given a road test, placed in training or allowed to operate an agency vehicle without a DMV check that passes the following criteria:
These criteria include:
-Good driving record with no Driving While Intoxicated (DWI), Driving Under the Influence (DUI) or similar charges, reckless driving, railroad crossing violations or leaving the scene of accident offenses.
-No more than a total of one moving violation or accident within the last three years.
-No suspended or revoked licenses.
-Minimum of five years driving experience.

Operating Skills
Drivers shall have experience in safely driving some type of motor vehicle (including private automobile) for not less than five (5) years, including experience throughout the four seasons.

Criminal Record Checks
An original criminal record check, issued within the past 10 days, shall be obtained by the prospective employee and given to the Transportation Director as part of the application process. Persons with felony convictions include crimes of violence, drug usage or sales, physical abuse, fraud or theft. A pattern of unlawful behavior shall also disqualify an applicant.

Ability to perform simple math.

Reasonable knowledge of the service are and ability to read basic maps.

A road test given by a designated Agency Supervisor is required.

MOTOR VEHICLE BACKGROUND CHECK

MVR INFORMATION:

Last Name:_____ First:_____ Middle:_____

Date of Birth: ____/____/____ Social Security #: _____

Driver's License #: _____ State: _____ Exp. Date: ____/____/___

Department: _____ Building: _____

I authorize all corporations, former employers, credit agencies, educational institutions, law enforcement agencies, city, state, county, and federal courts, military services, and persons to release information they may have about me to the person or company with which this form has been filed. This releases the aforesaid parties from any liability and responsibility for collecting the above information.

Signature _____ Date: ____/____/____

FAIR CREDIT REPORTING ACT DISCLOSURE & AUTHORIZATON

DISCLOSURE

As a current employee of *Gaston County ACCESS*, you are a consumer with rights under the Fair Credit Reporting Act. When any of the following circumstances exist, *Gaston County ACCESS* may choose to obtain and use information contained in either a consumer report or an investigative consumer report from an agency about you: (1) when considering your application for employment (2) when making a decision whether to offer you employment, (3) when deciding whether to continue your employment (if you are hired), or (4) when making other employment-related decisions directly affecting you.

A "consumer reporting agency" is a person or business which, for monetary fees, dues, or on a cooperative nonprofit basis, regularly assembles or evaluates consumer credit information or other information on consumers for the purpose of furnishing consumer report to others, such as the *Gaston County ACCESS.*

A "consumer report" means any written, oral or other communication of any information by a consumer reporting agency bearing on your credit worthiness, credit standing, credit capacity, character, general reputation, personal characteristics, or mode of living which is used of expected to be used or collected in whole or in part for the purpose or serving as a factor in establishing your eligibility for employment.

An "investigative consumer report" means a consumer report or portion thereof in which information on your character, general reputation, personal characteristics, or mode of living is obtained through personal interviews with your neighbors, friends, or associated reported on or with others with who you are acquainted of who may have knowledge concerning any such items of information.

Gaston County ACCESS may request an investigative consumer report. You may request, in writing and within a reasonable time, additional disclosures regarding the nature and scope of the investigation as well as a written summary of your rights under Fair Credit Reporting Act.

AUTHORIZATION

By signing below, I, _____, hereby voluntarily authorize the *Gaston County ACCESS* to obtain either a consumer report or an investigative consumer report about me from a consumer reporting agency and to consider this information when making decisions regarding my employment at *Gaston County ACCESS.* I understand that I have rights under the Fair Credit Reporting Act, including the rights discussed above.

Name: _____   Date: _____

PROCEDURES FOR SELECTING A SAFE DRIVER

When hiring vehicle operators, be sure to have the driver candidates undergo the following:

- A pre-employment driving test

- A pre-employment physical exam

- A pre-employment psychological screening test

- A background investigation and fingerprints (five years)

- Submission of driving record (five years)

- Pre-employment drug testing

- Basic training in driver skills

- Orientation based on individual skills

- Defensive driving skills training

- Refresher driver training (if applicable)

- Customer Sensitivity Training

- ADA Requirement Training (Wheelchair Lift and Securement)

- Emergency Procedure Training (Evacuating)

EXAMINATION TO DETERMINE PHYSICAL CONDITION OF DRIVER

Last Name	First	MI	Signature	
Street Address			DOB (month/day/year)	Age
City	State	Zip Code	Social Security Number	Date

HEALTH HISTORY

Yes	No		Yes	No		Yes	No
☐	☐	Head or Spine Injury	☐	☐	Gonorrhea	☐	☐
Kidney Disease							
☐	☐	Seizures or Fainting	☐	☐	Diabetes	☐	☐
Muscular Disease							
☐	☐	Severe Injury or Illness	☐	☐	GI Ulcer	☐	☐
Any Disease							
☐	☐	Cardiovascular Disease	☐	☐	Nervous Stomach	☐	☐
Permanent Defect							
☐	☐	T.B.	☐	☐	Rheumatic Fever	☐	☐
Psychiatric Disorder							
☐	☐	Syphilis	☐	☐	Asthma	☐	☐
Other Nervous Disorder							

If answer is YES, explain:_____

_____

_____

_____

PHYSICAL EXAMINATION

General Appearance:　　　☐ Good　　　☐ Fair　　　☐ Poor

NOTE: Visual acuity of at least 20/40 required in each eye with field of vision of 70° horizontal meridian in each eye

** Operated by Contractor or Services Outsourced**

MANAGEMENT REVIEWS

There must be an effective mechanism to monitor and document the contractor's activities. An acceptable program would consist of periodic written reports of activities submitted by the contractor to the grantee, supplemented by periodic oversight inspections by the grantee. The grantee must provide oversight in order to verify the contractor's compliance with FTA and NCDOT regulations and polices.

DRIVER/EMPLOYEE TRAINING

October 30, 2007

MEMORANDUM

TO: Community Transportation Systems

FROM: Miriam S. Perry, Director

SUBJECT: Policy Guidance for Minimum Training Standards for Community and Human
             Service Transportation System Vehicle Operators

The stated mission of the North Carolina Department of Transportation is "**Connecting people and places in North Carolina - safely and efficiently, with accountability and environmental sensitivity.**" Community Transportation systems must meet all Federal and state guidelines, regulations and laws regarding the safe transportation of their passengers. The Minimum Training Standards for Community and Human Service Transportation System Vehicle Operators are to be implemented by local systems as part of the effort toward meeting those requirements. The effective date of the standards is July 1, 2008.

Please contact your regional safety and training specialist if you have any questions concerning this policy.

SOURCE DOCUMENTS
1. Federal Transit Administration (FTA) Circular 9040.1F "Non-Urbanized Area Formula Program Guidance and Grant Application Instructions" effective April 1, 2007, Section X (see 49 U.S.C. Chapter 53 - Section 5329: Investigation of Safety Hazards)
2. 29 CFR **1910.1030(g)(2)**-Blood borne pathogens-Information and Training
3. 49 CFR 655.14-Prevention of Alcohol Misuse and Prohibited Drug Use in Transit Operations-Education and Training Programs
4. 49 CFR 37.173-Americans with Disabilities Act-Training requirements

MSP/pta

Attachment: **Minimum Training Standards for Community and Human Service Transportation System Vehicle Operators**

Minimum Training Standards for Community and Human Service Transportation System Vehicle Operators

- **Defensive Driving**
  - Shall include all vehicle operators, including any employees that operate the vehicles in revenue service or carry passengers for any other trip purpose;
  - *Initial training must be a certified program, or curriculum must be equal to an existing certified program.*
- **Americans with Disabilities Act (ADA)**
  - Shall include sensitivity to passenger needs, passenger assistance, wheelchair handling, proper securement (both passenger and mobility device) and proper use of wheel chair lift, including emergency operation.
  - The ADA requires training all personnel to "proficiency", which is defined as expert performance. All vehicle operators must be periodically evaluated (at least once per year after the probationary period is completed) to ensure that they are using all of the ADA equipment correctly, and providing proper passenger assistance. A ride check evaluation ("Driver Performance Evaluation") form (including instructions for use) is available from the NCDOT/PTD Safety and Training Unit for this purpose. The Safety and Training staff uses the Ride Check Evaluation form during System Safety Plan Reviews.
  - *Drivers that are not meeting proficiency must be given remedial training until they are proficient.*

- **Blood borne Pathogens**
  - Shall follow the Occupational Safety and Health Administration guidelines for the training as listed in Standard 29 CFR 1910.1030(g)(2)
  - The OSHA Standard spells out the content of the training.
  - *Training must be done annually (OSHA requirement).*

- **Emergency Procedures for Vehicle Operators**
  - Shall include all procedures (communication and notification, passenger handling, vehicle evacuation, etc.), use of equipment (web cutters, fire extinguishers, etc.) and protocols (radio communication, after accident reporting, etc.) required by the local system.
  - *Participation in local or regional Emergency Management drills is strongly encouraged.*

- **Illegal Drug Use**
  - Shall include all training on the effects and consequences of prohibited drug use on personal health, safety, and the work environment, and on the signs and symptoms that may indicate prohibited drug use. *This shall be done upon hire.* (Required under 49 CFR 655.14)

- **General**
    - **All new hires must have all of the training completed as soon as possible, but no later than ninety (90) days of hire. New hires must complete Defensive Driving and ADA training prior to starting revenue service.**
    - *Refresher training must be done annually.*
    - All of the training materials must be on file for review by the NCDOT/PTD. Materials shall include but not be limited to course outline (may be included in instructor's manual), instructor's manual, sample student manual (if one is used), handouts and copy of Power Point slides if used in lieu of instructor's manual.
    - Records of training performed (for each individual trained) must be kept on file for a minimum of five (5) years. Records shall include proof of attendance (roster or certificate of completion, if provided), date of the course, and type of instruction delivery (instructor led, self-instruction, etc.), name and certification (if applicable) of instructor
    - The system must make a periodic, but no less than annual evaluation of each driver's performance of the techniques, skills or knowledge required under each of the categories and provide refresher or remedial training as needed, in addition to the scheduled training.

ACCESS OFFICE TRAINING

1. ANSWERS THE PHONE
2. TAKE APPOINTMENTS
2.1. MEDICAID-AUTHORIZATION REQUIRED
2.2. EDTAP-MUST BE APPROVED
2.3. SENIOR-AUTHORIZATION REQUIRED
2.4. RGP-MUST BE APPROVED
3. ENTER APPOINTMENTS INTO ROUTEMATCH
3.1. MEDICAID
3.2. EDTAP
3.3. SENIOR
3.4. RGP
4. USE OF TWO-WAY RADIO
5. ROUTEMATCH SCREENS
5.1. CUSTOMERS
5.1.1. ADD CUSTOMERS
5.1.2. UPDATE ADDRESS
5.1.3. ENTER TAB INFORMATION
5.2. TRIPS
5.2.1. STANDING TRIPS
5.2.1.1.HOW TO UPDATE A STANDING TRIP
5.2.2. WINDOWS
5.3. DISPATCHING
5.3.1. MOVE VEHICLES
5.4. SCHEDULING
6. SCHEDULE TRIPS TO ROUTES
7. VERIFICATION
7.1. MANIFEST
7.2. INVOICE
7.3. ALL DISALLOWED TRIPS
8. MEDICAID REPORT
9. MEDICAID SUBSCRIPTIONS REPORT
10. NO SHOW REPORT- DAILY & WEEKLY
11. OPERATE OFFICE EQUIPMENT
12. OPEN AND CLOSE OFFICE
13. ADD ADDRESSES
13.1. GEOCODED AND NON-GEOCODED
14. ASSETWORKS
14.1. UPDATE MILEAGE & LIFT COUNT
14.2. FINISH WORK ORDERS
14.3. ASSIGN COSTS
15. TIMESHEETS
15.1. VERIFY
15.2. KEY
16. TRACK RGP PAYMENTS

PERFORMANCE EVALUATION POLICY

This administrative policy was adopted by the *Gaston County ACCESS*

Description:
This section on performance evaluation concerns only non-probationary or part-time employees; temporary employees shall be evaluated in a similar manner, in-so-far as possible.

- *Frequency*: Each *Gaston County ACCESS* driver will have a ride check evaluation not less than annually. New employees require three evaluations within the first year of employment. The first evaluation is due within three months, the second at the three month point from their hiring date and the third is their annual evaluation. Periodic or special performance evaluations are subject to determination by competent authority, such as the system manager and the immediate supervisor.

- *Responsibility*: Each *Gaston County ACCESS* employee will be evaluated by his or her immediate supervisor or designated appointee.

- *Documentation Required*: Each *Gaston County ACCESS* driver's completed evaluation sheet will be personally reviewed with him/her by the immediate supervisor or higher authority. Both the supervisor and the employee will sign and date the evaluation sheet in the appropriate places. The employee may attach comments to explain or clarify any points made in the evaluation. It will then be filed in the subject employee's training record in a confidential manner.

Evaluation results will be the basis for promotion, salary actions, demotions, suspensions, dismissals, and other such actions.

All performance appraisals are maintained in a secure manner.

EMPLOYEE CONDUCT POLICY

This administrative policy was adopted by the *Gaston County ACCESS*

Description:

No employee of *Gaston County ACCESS* shall have the authority to make statements on behalf of *Gaston County ACCESS* without prior approval of the system manager. All employees shall conduct themselves in such a manner which shall bring credit to the *Gaston County ACCESS* organization or to the particular subcontractor to which the employee is attached.

Behavior of any employee which may affect the safety and wellbeing of other employees of *Gaston County ACCESS* or subcontractor, or to personnel served by *Gaston County ACCESS* or subcontractor, shall be cause for disciplinary action, whether or not such behavior relates to proper performance of the employee's job.

TRAINING PROGRAM FOR DRIVERS
AND OTHER SAFETY SENSITIVE EMPLOYEES

Once qualified candidates are identified and hired, initial and on-going training is critical to insure proper operations and adherence to the transit providers' rules and regulations. Proper training of operating personnel is a vital part of a safe transit environment. This policy addresses specific elements of drivers' training that must occur prior to placing the new employee on the road without peer supervision.

The following material contained in this policy will be used by the Transportation Director in qualifying candidates for driver positions and subsequent training.

Initial Hire Procedures for Drivers (Process to follow)

Motor Vehicle Background Check

In addition to agency policies that are referenced in the attached material the following policies are incorporated in the drivers' training. (Location of Policy DH= Drivers' Handbook PM=Agency Personnel Manual)

Training Policy	Location	Document Name
Child Safety	DH	Transporting Children
Employee Conduct	DH	Confidentiality
	DH	Medication
	PM	Sexual Harassment
	PM	Standards of Performance and Conduct
	PM	Work Schedule
Passengers	DH	Passenger Injuries and Illness
	DH	Passenger Relations
Vehicles	DH	Accident Report Kit
	DH	Accidents – Off Hour
	DH	Backing Up/Parking
	DH	Blood borne Pathogens
	DH	Defensive Driving
	DH	Elderly and Disabled Passengers
	DH	Emergency Driving Procedures
	DH	Fires
	DH	General Driver/Vehicle Information
	DH	Incident Report
	DH	Passenger Evacuation
	DH	Seizures
	DH	Traffic Signals, Signs and Markings
	DH	Wheelchairs

SCHEDULE IN-PLACE FOR REFRESHER TRAINING COURSES

Gaston County ACCESS is committed to a program that will insure that its drivers receive training in job elements that are critical to their and their passengers' safety.

Training sessions will be logged by employee on the NCDOT/PTD Employee Development quarterly submission document.

Subjects of training will be prioritized by the following events:
Demonstration of need that may arise as the result of
Employee Report of Unsafe Conditions
Incident Investigation findings
Safety Committee recommendations

Initiations by NCDOT/PTD

Annual follow-up on critical issues, e.g.; Roll over danger, Emergency Evacuation, Assisting Passengers and Safe driving habits

Infectious Disease Awareness

Training per the requirements of the FTA Drug and Alcohol Policy Standards

The Director of Transportation is responsible for scheduling and either facilitating or arranging for a facilitator for a minimum of two training sessions (subjects) annually.

Topic: Blood borne Pathogens

Overview of the OSHA Standard

This standard limits occupational exposure to blood and other potentially infectious materials since any exposure could result in transmission of blood borne pathogens, which could lead to disease or death. Acquired Immunodeficiency Syndrome (AIDS), Hepatitis B and Hepatitis C are serious concerns for workers exposed to blood and other potentially infectious materials. Blood borne pathogen exposure may occur in many ways, but needle stick injuries are the most common cause. Exposure may also occur through contact of contaminants with the nose, mouth, eyes, or skin.

The standard covers all employees who could be "reasonably anticipated" to face contact with blood and other potentially infectious materials as a result of performing their job duties. To reduce or eliminate the hazards of occupational exposure, an employer must implement an exposure control plan for the worksite with details on protection measures. Engineering controls are the primary means of eliminating or minimizing employee exposure and include the use of safer medical devices. Work practice controls such as hand washing are stressed by the standard. Appropriate personal protective equipment must be used when necessary. The standard requires that the Hepatitis B vaccination be made available to all employees who have occupational exposure to blood. The standard specifies procedures to be made available to all employees who have had an exposure incident.

Step 1: Planning the Lesson

- **Instructional Materials.**
  1. PowerPoint presentation
  2. Instructor notes.
  3. Other materials.

- **Instructional Objectives.**
  1. Complete the required topics for the OSHA 10-hour course.
  2. Complete the following optional topics:
     a.
     b.
     c.
  3. Present *Blood borne Pathogens* to [number] participants.
  4. Incorporate active participation in each lesson.
  5. Provide a quiz or short evaluation at the end of the course.
  6. Ensure feedback from participants at various points in the training.

- **Guest Speakers/Presenters and Topics/Responsibilities.**

Sample Lesson Plan – Blood borne Pathogens

Step 2: Presenting the Lesson

- **Lesson Introduction.**
  Introductory remarks or transition from previous lesson.

- **Learning Objectives/Outcomes.**
  Upon completion of the lesson, participants will be able to:

  1. Give at least 3 examples of workers who are at risk of exposure to blood borne pathogens.

     Possible responses.
     - Physician, nurse, police, firefighter

  2. List the three ways exposure to blood borne pathogens commonly occurs.

     Possible responses.
     - Needle sticks.
     - Cuts from other contaminated sharps such as scalpels or broken glass.
     - Contact of the eye, nose, mouth or cut/abraded skin with contaminated blood.

  3. Describe at least 5 key aspects of a Blood borne Pathogen Exposure Control Plan.

     Possible responses.
     - Must be a written plan.
     - Identifies jobs and tasks where occupational exposure to blood or other potentially infectious material occurs.
     - Describes how the employer will use engineering and work controls.
     - Describes how the employee will ensure use of personal protective equipment (PPE).
     - The plan must be accessible to employees.
     - Must be reviewed at least annually to reflect changes in technology that will help eliminate or reduce employee exposure.

  4. Explain how properly used PPE and appropriate housekeeping methods protect against exposure to blood borne pathogens.

     Possible responses.
     - Gowns, gloves, face shields, eye protection, mouthpieces and resuscitation devices provide a barrier between potential contaminants and susceptible parts of the body.
     - Cleaning and decontamination of work surfaces reduce the chances of exposure to a blood borne pathogen.

- **Learning Objectives/Outcomes (Continued)**

  5. List three important steps to take if exposed to a blood borne pathogen.

     Possible responses.

43

- Wash exposed area with soap and water.
- Flush splashes to nose, mouth or skin with water.
- Irrigate eyes with water or saline.
- Report the exposure.
- Seek the assistance of a health care professional to determine what follow-up actions or treatment may be needed.

- **Planned Activities, Discussion, or Participant Interaction.**

Step 3: Evaluating Student Learning and Instruction

- **Lesson Evaluation and Comments.**

References

OSHA Standard
- 29 CFR 1910 Subpart Z (1910.1030)
  - ➤ http://www.osha-slc.gov/OshStd_data/1910_1030.html
- 29 CFR 1910 Subpart Z (1910.1030 App A) Hepatitis B Vaccine Declination
  - ➤ http://www.osha-slc.gov/OshStd_data/1910_1030_APP_A.html

OSHA Publications
  - ➤ http://www.osha-slc.gov/OshDoc/Additional.html
- 3128 Blood borne Pathogens and Acute Care Facilities
- 3129 Controlling Occupational Exposure to Blood borne Pathogens in Dentistry
- 3130 Occupational Exposure to Blood borne Pathogens – Precautions for Emergency Responders
- 3131 Blood borne Pathogens and Long-Term Care Workers

OSHA References/Resources
- CPL 2-2, 44D, Enforcement Procedures for the Occupational Exposure to Blood borne Pathogens, Appendix C – Web Site Resource List
  - ➤ http://www.osha-slc.gov/OshDoc/Directive_pdf/CPL_2-2_69.pdf
- OSHA Technical Links – Blood borne Pathogens
  - ➤ http://www.osha-slc.gov/SLTC/bloodbornepathogens/index.html
- OSHA Technical Links – Needle stick Prevention
  - ➤ http://www.osha-slc.gov/SLTC/needlestick/index.html
- Protecting Nursing Home Workers: OSHA's Safety and Health Program Approach
  - ➤ http://www.osha-slc.gov/SLTC/nursinghome/training/nursing/index.html
- Video: *As It Should be Done: Workplace Precautions Against Blood borne Pathogens*
  - ➤ http://www.osha-slc.gov/SLTC/video/asitshouldbedone/video.html

BACKING PROCEDURES

Vehicle backing is strongly discouraged unless it is absolutely necessary. The following procedures are suggested in the event that an operator is required to use the reverse gear:

- Except for backing out of a parking stall, drivers should only back a vehicle when it is absolutely necessary. If it becomes necessary to back the vehicle while the vehicle is in service, a driver should use an adult as a spotter. The spotter should not be asked to exit the vehicle because that can cause the spotter to be vulnerable to injury. Use of a spotter does not relieve the driver of the responsibility to back the vehicle safely.

- Before backing, check carefully in all directions including the rear of the vehicle.

- Turn on the four-way flashers.

- Begin honking the horn (if the vehicle does not have a working 'backing-up' alarm) and continue to give short continuous beeps on the horn while in motion.

- As a rule when stopping in traffic, stop far enough back to see the rear tires on the vehicle ahead. This allows a driver the ability to go around a stalled vehicle on the left or right if necessary without the need to reverse direction. This procedure does not always work but it is another good example of how to avoid backing.

- Be sure to stay out of intersections and crosswalks until they are free to traffic. Do not get into positions where backing a large vehicle becomes necessary.

- If the view is obstructed and the driver is in doubt, he or she should exit the vehicle (if it is reasonable safe to do so) to check behind and around it.

CROSSING RAILROAD TRACKS

To insure that everyone arrives safely at their destination, consistently utilize the following procedures when approaching and crossing railroad tracks:

- Upon approaching the railroad crossing, proceed into the far right lane.

- Turn on the four-way flashers 100 feet before reaching the tracks the vehicle must stop behind the white line (if a line is present) and not in the path of the crossing barrier.

- Turn off heaters, fans, radios, etc. so that you can hear a train. If necessary, ask passengers to remain silent during the crossing.

- Open the door completely and listen for an approaching train or (if driving a van) open the window completely and listen.

- Look in both track directions as you listen for an approaching train.

- When you can conclude that no train is approaching, close the door (watching the door while it is closing) or window.

- Check your left mirror for traffic.

- Proceed slowly over the tracks to avoid damage to the vehicle.

- Turn off the four-way flashers after the vehicle is past the tracks.

DEALING WITH BRAKE FAILURE PROCEDURES

The guidelines below can assist you in safely maneuvering your vehicle during brake failure:

- Do not force the brake to the floor; you will destroy any chance of rebuilding pressure.

- Gently pump the brake pedal to see if you can restore pressure.

- Sound your horn and flash your lights to alert other drivers.

- Shift to the lowest gear possible.

- Remain calm and guide your vehicle into an environment where you can slow the vehicle and bring it to a natural stop.

- Look for an outlet. Can you use a natural upgrade to slow the vehicle? Is there a large open parking lot that you can coast across?

- Do not pull the parking brake – you could put the vehicle in a tailspin. As an exception in vans or small buses, it may be necessary to use emergency brake but you should control the release with your hand to prevent the brake from locking.

- Do not permit the wheels to lock until the vehicle has stopped.

EN-ROUTE PROCEDURES

***List system specific guidance...

- Depart on time and stay on schedule, but never at the expense of passenger safety.

- Drive safely and smoothly. Operate at all times on compliance with applicable traffic regulations, ordinances, and laws of the jurisdiction in which the vehicle is being operated.

- Avoid lengthy conversations with passengers, since conversations can distract a driver from safely operating the vehicle.

- A vehicle with passenger doors in the open position should not be operated with passengers aboard. The doors should not be opened until the vehicle is stopped or at a railroad crossing. A vehicle with inoperable doors should not be operated with passengers aboard.

- During darkness, interior lighting and lighting of step-wells on vehicles should be sufficient for passengers to enter and exit safely.

- Passengers should not be permitted in the step-wells of the vehicle nor occupy an area forward of the standee line when the vehicle is in motion.

- Standee passengers should not be permitted on vehicles that are not designed to accommodate standing passengers.

- Fueling the vehicle when passengers are being transported should be avoided unless it is necessary.

- When passengers are aboard, the transit system requires the driver to be secured to the driver's seat with a restraining belt at all times while the vehicle is in motion.

- Vehicles should not be left unattended at any time when passengers are aboard.

- When transporting passengers, drivers should stop at all railroad crossings in compliance with North Carolina Statues.

HELPING PASSENGERS WITH PERSONAL ASSISTANCE DEVICES

Use the following guidelines when you are interacting with a passenger who has special needs:

Assisting Passengers Who are Using Canes or Critters:
- Always ask the disabled passenger if you can assist her/him prior to assisting the passenger
- Assist from the opposite side of the cane.
- Canes, walkers and other personal assistance devices should be stored so that they do not interfere with movement in the vehicle.
- Amputees should be seated in cool areas during hot weather.

Assisting Developmentally Disabled Passengers:
- Treat the passengers with respect.
- Be patient and repeat instructions when necessary.
- Be firm if they insist on doing something that will endanger you, them or the other passengers.

Assisting Hearing-Impaired Passengers:
- Look directly at them so they can see your lips.
- Talk normally (do not shout) and do not exaggerate your speech.
- Be prepared to repeat yourself.
- Get another person to talk to them if the passenger has trouble reading your lips.
- Use a pad and pencil when

Assisting Speech-Impaired Passengers:
- Do not hesitate to ask speech-impaired persons to repeat anything that you do not understand.
- Be patient; the passenger's speech condition may become more difficult to understand if the passenger is under stress.

Assisting Passengers with Visual Impairments:
- Don't touch the passenger until you tell them who you are and what you intend to do.
- Do not shout at the passenger.
- Before boarding the passenger, take their hand and show them the door openings as well as the seat and mention any hazards.
- When escorting the passenger, remain on the opposite side of their cane and have them hold your arm. Advise the passenger of any changes in ground texture or elevation level.
- When walking with a passenger, call out turns and maneuvers at least five (5) steps in advance.
- If the passenger uses a service animal, it may be helpful to lean the name of the animal for future reference. Avoid any abrupt movements toward the animal or the passengers.
- Seat visually impaired passengers against vehicle walls when possible or seat the passengers in seats with arm rests in order to assist them in keeping their balance.

NIGHT TIME DRIVING PROCEDURES

Several hazards associated with night driving are list below:
- Reduced visibility
- Glare
- The need for increased reaction time
- An increased number of tired and intoxicated drivers

Procedures for driving at night:
- Inspect and clean your headlights, taillights, windshield, clearance lights, reflectors and turn signals.

- Increase your space cushion by driving a slightly slower speed than you usually would during the day.

- Turn your lights on early and avoid the glare of oncoming bright lights by watching the right edge of the roadway. If someone is needlessly using bright light, do not turn your bright lights on in response to their lights.

- Make sure that your speed does not overdrive your headlight visibility.

- Do not break more than necessary. Use engine and lower gears to help you to slow down the vehicle when traction is poor.

- Keep the fuel tank at least half full.

TRANSPORTING ELDERLY PASSENGERS PROCEDURES

Use special care in serving elderly passengers:

- Dispatcher need to be especially patient when giving elderly passengers information regarding vehicle routes and schedules.

- Give elderly passengers more time to get on or off the vehicle.

- Ask the elderly passengers if they would like your assistance before assisting them.

- If the elderly passenger refuses assistance, stay close to prevent them from tripping or falling.

- When assisting elderly passengers, do not put too much pressure on the passenger's arm.

- When letting elderly passengers on or off a vehicle, pull the vehicle close to the curb so the passenger won't have to step very far.

- Be sure elderly passengers do not sit too close to heaters or other such hazards.

- Elderly passengers may need to be reminded where to get off of the vehicle.

- Keep temperature controls warm in the winter and cool in summer.

- In cases of emergencies, drivers should notify dispatchers about possible health problems of elderly passengers.

WHEELCHAIR BOARDING METHODS

Your customers' safety will depend on more than just safely transporting them to their destination, their safety will also depend on how well you board and secure their wheelchairs. Several wheelchair boarding guidelines are indicated below:

- Roll the wheelchair onto the lift, making sure that the front wheels are inside the platform roll stop while the roll stop is in the upright position.

- Lock the brakes.

- If the passenger has the capability to do so, ask the passenger to hold on to the hand rails provided on the lift. If the passenger does not have the capability to hold onto the handrails, ask the passenger to hold his/her hands in his/her lap.

- Before operating the lift for boarding, ask the passenger if he/she is ready. Keep one hand on the lift controls. Ask the passenger if it is okay for you to rest your other hand lightly on the armrest of the wheelchair as the lift goes up while you stand on the ground; this will keep you alert to the stability of the chair while also providing the passenger with psychological comfort.

- Make sure that the lift is level with the floor before stopping. Be sure that there is a smooth surface created by the vehicle transition plate so that the wheelchair rolls smoothly over it and into the vehicle.

- From inside the vehicle, hold the wheelchair handle as you unlock the brakes. (Turn the power back on or engage the clutches of a motorized wheelchair if needed.)

- Make sure the passenger's head does not hit the ceiling upon entering the doorway.

- The ADA states that wheelchairs should always be secured facing the front of the vehicle, with the exception given to some older vehicles that are not yet appropriately equipped.

- The driver should never stand on the lift.

WHEELCHAIR LIFT AND SECUREMENT PROCEDURES

Always follow the guidelines below to ensure safe lift operation and passenger safety:

- Always inspect a lift prior to each use (look for loose nuts, bolts,)

- Before deploying a lift for use, safely park the vehicle on level ground, turn the engine off (unless otherwise specified by the manufacturer) and check for obstacles to avoid in area where lift is to be deployed. Make sure that hands, feet and clothing are away from folding parts of the lift.

- Only passengers and their mobility devices should ride the lift.

- When operating a lift with a passenger on it, allow the lift to go all the way up to floor level or down to the ground without stopping.

- Have the passenger use the handrails and never leave a passenger unattended on a lift.

Assisting Wheelchair Users on the Lift:

- Wheelchair users can choose to ride a lift either facing away from the vehicle or facing the vehicle. The preferred method is to have the passenger facing away from the vehicle because it positions the bulk of the weight where there is more structural support and allows the driver to pull the wheelchair into the vehicle or push the wheelchair onto the lift by the handgrips.

- In the preferred positions, the small front wheels of the wheelchair are less likely than the large back wheels of the wheelchair are less likely than the large back wheels to roll over the platform roll stop.

- The preferred position also reduces the possibility of the passenger's feet or toes getting caught between the lift platform and the vehicle when the passenger is riding upward.

SECURING AN OCCUPIED WHEELCHAIR

To insure the safety of your passengers, consistently use good practices in handling wheelchairs:
- **Always** use a four point tie-down to the floor of vehicle.
- Tie-downs should be attached to the strongest part of the device which is the frame.
- Lap boards or metal and plastic trays attached to the chairs should be removed and secured.
- Liquid oxygen being transported should be securely mounted/fastened to prevent damage
- Aspirators, ventilators/other equipment must be securely mounted to wheelchair or vehicle.
- Never restrain a child's head separately such as with a headband attached to the back of the seat. Restraining a child's head separately can cause excessive strain on the child's neck. Many children now have special neck braces to support their head during transport.

EMPLOYEE TRAINING RECORD

NAME: _____

Training	Date	Driver Initial	Instructor Initial
Orientation to Transit Agency			
Personnel Policy			
Substance Abuse Policy			
Service Policy			
Radio Manual			
Notebook			
Timesheet/pay schedule			
Trip sheet/logs/reservations			
Pre/Post-Trip Safety Inspection			
Classroom, video			
Demonstration			
Defensive Driving			
Classroom, video			
Driving			
Emergency Procedures			
Passenger Relations			
SNAAP Classroom			
Wheelchair			
Video			
Practical			
Smith System			
Back to Basics			
The Critical point			
Child Passenger Safety			
Ride Check Evaluation			
Driver with Driver			
Emergency Equipment Training			
Fire Extinguisher			
Blood-borne Pathogen			
Emergency Triangle			
CPR/First Aid (CPR Annually/First Aid Every 3-Years: Ref. OSHA 1910-151)			
Web cutter			

Employee's Signature: _____

Director's Signature: _____

EMPLOYEE DEVELOPMENT/DRIVER TRAINING REPORTING

Employee Development Reporting
If you are using TrIP Admin, the spreadsheets will be created automatically by use of the TrIP Export function; by clicking the button marked "Employee Development". The report can then be sent by e-mail to trainingptd@dot.state.nc.us .

If you are not a TrIP user, simply fill out the spreadsheet using the directions below, and send them to the same e-mail address.

Instructions for Spreadsheet Data Entry
Note: Be sure to fill the columns out exactly as described. Do NOT move the order of the columns or rows. The data is collected in a specific order so that it can be taken from the spread sheets submitted by each system, compiled and analyzed for the purpose of identifying trends in incidents statewide. If you have any questions, please contact Richard R Jones, Manager, Safety and Training Unit at (919)733-4713, Ext. 241, or at rrjones@ncdot.gov

Column A: System Name
Fill in the name of your system as it appears on your grant application.

Column B: Employee ID Number
You must enter the Employee ID number. This is the only way that the database can identify the employee, since all of the data is anonymous with regard to the individuals involved in the reported incidents. If you do not enter an employee number, the data cannot be recorded. Do not use an easily recognizable piece of personal data, such as the employee's Social Security number, or their birth date.

Each employee number must be unique. Be sure to keep track of numbers previously assigned. Develop a system for setting the ID numbers.

Column C: Course Name
Enter the name of the course, for example, Blood borne Pathogens, CPR/First Aid, and Defensive Driving.

Column D: Date of Birth
This shows the date of birth of the employee involved in the incident. The field will default to a format that looks like this: 09/02/1977 (mm/dd/yyyy). If you enter 09/02/77, it will change to show the year as a four-digit number.

Column E: Hire Date
This shows the employee's date of hire. This field has the same characteristics as the Date of Birth field.

Column F: Position
Enter the employee's position (examples: driver, dispatcher, van operator, etc.)

Column G: Course Date

This shows the date of the course that was held. The field will default to a format that looks like this: 09/02/1977 (mm/dd/yyyy). If you enter 09/02/77, it will change to show the year as a four-digit number.

Column H: Form of Training
This shows the form of training provided, i.e., Classroom, Video, Computer Based-CD-ROM, Computer Based-Web Based, etc.

Column I: Cost
Enter the dollar amount cost of the course. This should reflect the cost for the individual employee.

Column J: Certified
This is a drop down box. If the employee was certified as a result of completing the course, the box must say TRUE. If not, the box must say FALSE.

Column K: Instructor
Enter the name of the instructor, if applicable.

Driver Training Reporting
If you are using TrIP Admin, the spreadsheets will be created automatically by use of the TrIP Export function; by clicking the button marked "Driver Training". The report can then be sent by e-mail to trainingptd@dot.state.nc.us .

If you are not a TrIP user, simply fill out the spreadsheet using the directions below, and send them to the same e-mail address.

Instructions for Spreadsheet Data Entry
Note: Be sure to fill the columns out exactly as described. Do NOT move the order of the columns or rows. The data is collected in a specific order so that it can be taken from the spread sheets submitted by each system, compiled and analyzed for the purpose of identifying trends in incidents statewide.

If you have any questions, please contact Richard R Jones, Manager, Safety and Training Unit at (919)733-4713, Ext. 241, or at rrjones@ncdot.gov

Column A: System Name
Fill in the name of your system as it appears on your grant application.

Column B: Employee ID Number
You must enter the Employee ID number. This is the only way that the database can identify the employee, since all of the data is anonymous with regard to the individuals involved in the reported incidents. If you do not enter an employee number, the data cannot be recorded. Do not use an easily recognizable piece of personal data, such as the employee's Social Security number, or their birth date.

Each employee number must be unique. Be sure to keep track of numbers previously assigned. Develop a system for setting the ID numbers.

Column C: Course Name
Enter the name of the course, for example, Blood borne Pathogens, CPR/First Aid, and Defensive Driving.

Column D: Issue State
This is the state in which the employee's driver's license is issued. In most cases it will be NC for North Carolina. **Use the two-letter USPS code for the state, do not spell out the entire state name (example North Carolina=NC, Tennessee=TN).**

Column E: Regular Classed?
This is a drop down box. If the driver has a regular license (not a Commercial Driver's license), the box must say TRUE. If the driver does not have a regular license, the box must say FALSE.

Column F: CDL Classed?
This is a drop down box. If the driver has a Commercial Driver's License, the box must say TRUE. If the driver does not have a CDL, the box must say FALSE.

Column G: Class Type
This is a drop down box that shows the three classes (A, B, or C) of driver's license (either regular or CDL). Make sure that the drop box lists one of the classes.

Column H: Date of Birth
This shows the date of birth of the employee involved in the incident. The field will default to a format that looks like this: 09/02/1977 (mm/dd/yyyy). If you enter 09/02/77, it will change to show the year as a four-digit number.

Column I: Hire Date
This shows the employee's date of hire. This field has the same characteristics as the Date of Birth field.

Column J: Position
Enter the employee's position (examples: driver, dispatcher, van operator, etc.)

Column K: Course Date
This shows the date of the course that was held. The field will default to a format that looks like this: 09/02/1977 (mm/dd/yyyy). If you enter 09/02/77, it will change to show the year as a four-digit number.

Column L: Form of Training
This shows the form of training provided, i.e., Classroom, Video, Computer Based-CD-ROM, Computer Based-Web Based, etc.

Column M: Certified
This is a drop down box. If the driver was certified as a result of completing the course, the box must say TRUE. If not, the box must say FALSE.

Column N: Cost
Enter the dollar amount cost of the course. This should reflect the cost for the individual driver.

Column O: Instructor
Enter the name of the instructor, if applicable.

RIDE CHECK: DRIVER EVALUATION

Date of Evaluation_____

Driver's Name_____

Evaluator's Name/Position_____

Passenger Reception

1. ☐ Confirms identity/destination of passenger
2. ☐ Present at entry door while boarding
3. ☐ Greets passenger in a friendly manner
4. ☐ Uses proper assistance techniques (What are the driver's responsibilities?)
5. ☐ Assists passengers to and from the vehicle door if needed
6. ☐ Stops proper distance from curb
7. ☐ Avoids use of AM/FM radio
8. ☐ Uses correct ADA language at all times

Vehicle Condition

1. ☐ Daily pre-trip inspection complete/documented
2. ☐ Web cutter and emergency triangles are available
3. ☐ Registration and insurance card in vehicle
4. ☐ Driver's license/logs with driver
5. ☐ Vehicle exterior clean
6. ☐ Vehicle interior clean
7. ☐ Dashboard/windshield area clear of all objects
8. ☐ Tie downs properly employed
9. ☐ Tie downs clean/ stowed in box
10. ☐ Seat belts in good working condition
11. ☐ Fire extinguisher is available, serviceable, properly mounted/tagged
12. ☐ First Aid/Blood borne pathogen kit available in vehicle
13. ☐ Flash light working (if applicable)
14. ☐ Communications system operable
15. ☐ Child seat used/stowed properly
16. ☐ Daily defect report filled out
17. ☐ Lift operational check
18. ☐ Keeps logs up to date

Performance While Enroute

1. ☐ Driver uses correct posture when driving
2. ☐ Both hands on steering wheel
3. ☐ Appropriate uniform/footwear
4. ☐ Driver and passengers use seatbelts
5. ☐ Driver gets out of vehicle and looks before backing
6. ☐ Adjust mirrors before moving vehicle. Keeps eyes moving
7. ☐ Signals entry into traffic every time. Leaves himself an out
8. ☐ Moves vehicle smoothly while slowing braking and stopping. Make sure they see you

9. ☐ Telegraphs use of brake or flashers when stopping
10. ☐ Squares corners when turning
11. ☐ Moves at appropriate speeds for current road conditions
12. ☐ Maintains following distance safety zone (4 seconds)
13. ☐ Uses proper caution at intersections
14. ☐ Anticipates stale green lights (slows down)
15. ☐ Seats passengers properly
16. ☐ Stops at all railroad crossings
17. ☐ Comes to a complete stop, leaving private property
18. ☐ Uses proper lane changing procedure
19. ☐ Stops behind line or plane at intersections
20. ☐ Observes proper communication procedures
21. ☐ Uses turn signals properly
22. ☐ Maintains order in vehicle
23. ☐ Maintains scheduled stops and pick-ups
24. ☐ Avoids unauthorized stops
25. ☐ Uses four second distance rule, adds seconds to following distance when driving conditions change…keep safety cushion

Passenger Discharge

1. ☐ Uses parking brake when de-boarding passengers
2. ☐ Stops proper distance from curb. Assist passengers off vehicle (when needed or when passengers request help)
3. ☐ Renders adequate assistance to wheelchair passengers
4. ☐ Advises Base when leaving vehicle and upon return to vehicle
5. ☐ Makes sure passenger is safely inside of destination before leaving property
6. ☐ Follows passengers instruction for assistance when needed

Comments_____

_____

Course of Action (required/taken)_____

_____

_____
Driver's Signature   Date

_____
Supervisor's Signature   Date

Driver's Comments_____

RIDE CHECK
DRIVER PERFORMANCE EVALUATION EXPLANATION

PASSENGER RECEPTION
The Driver...
1. Asks the name of the passenger and the destination before boarding, unless the passenger is a subscription rider.
2. Is available at the door to assist the passenger on or off the vehicle (if needed).
3. Acts courteously, offers help by asking, "May I help" or "how may I help you?"
4. Follows guidance from the passenger, if help is needed.
5. Uses the passenger's instructions to assist in boarding and exiting the vehicle, if needed.
6. Stops the vehicle six (6) inches or four (4) feet from curb to keep passengers from falling off the vehicle as they load and unload. (This depends on the stopping or parking situation.)
7. Uses AM or FM radio only when passengers are not aboard, then only for the news and weather forecast.
8. Uses correct language under ADA guidelines. (Refer to the ADA handout given to drivers who have taken the SNAAP training.)

VEHICLE CONDITION

The Driver...

1. Performs a pre-trip inspection and completely fills out the pre-trip inspection form before starting the first run of the day.
2. Ensure registration and insurance cards are current and available.
3. Has driver license in possession and current route logs on person at all times.
4. Vehicle is clean on exterior.
5. Vehicle is kept clean inside at all times.
6. Nothing is on the dashboard, rear view mirror, or sun visors that could create a hazardous situation.
7. Safely attaches tie down straps into floor tracks, and use the four-point tie down on wheelchairs.
8. Removes tie downs from floor after each use. Stores tie down straps in their proper place.
9. Seat belts/tie down straps are not tangled, missing or broken.
10. Checks fire extinguisher for serviceability and expiration date.
11. Checks the first aid and Blood borne Pathogen Kits regularly (PPE) and re-supplies when needed.
12. Ensures web cutter and emergency triangles are available.
13. Checks batteries daily to make sure flashlight is usable. (If applicable)
14. Tests the two-way radio and/or other communication device for operability.
15. Child seats are placed in vehicle properly and stowed when not in use.
16. Fills out daily defect report correctly.
17. Keeps logs up to date as trip is completed for each passenger.

PERFORMANCE ENROUTE
The Driver...
1. Does not slouch in the seat while driving. Arms are not on or out of the window frame.
2. Both hands are on the steering wheel at the 9 and 3 or the 10 and 2 position. Gets the big picture.
3. Clothing should be appropriate for job.
4. Uses seat belt correctly and requires correct use of seat belt for all passengers.
5. Gets out and looks behind vehicle, for obstacles, before backing.
6. Adjusts mirrors before leaving base (for safety and visibility). Keep eyes moving.
7. Uses signals for all maneuvers in traffic. Leaves an out.
8. Does not jerk the vehicle when stopping and starting. Uses the brakes without stomping or slamming (stops vehicle smoothly).
9. Presses the brakes slightly to warn tailgaters to slow down or uses flashers when coming to a quick stop.
10. Does not whip around corners. Slows down to 2 to 5 miles per hour when turning corners. Positions vehicle for proper safe turns. (Squares the corner.)
11. Does not travel too slow or too fast for conditions on the road or for the posted speed limit.
12. Does not enter intersection without proper caution, uses the four second rule. Keeps safety cushion under control.
13. Slows down when green light has been green for some time at a distance.

14. Checks mirrors, looks over shoulder, signals, and moves into passing lane, signals and returns to proper lane. Leaves *(himself/herself)* an out.
15. Signals at proper distance for an intended turn. Cancels signal when maneuver is completed.
16. Does not allow profanity or misbehavior in the vehicle.
17. Keeps on schedule safely but does not jeopardize safety for schedule.
18. Only transports passenger on route schedule. No unauthorized passengers or stops.
19. Maintains a safe distance when following someone in all weather conditions.

PASSENGER DISCHARGE:

The Driver...
1. Uses parking brake when loading or unloading passengers.
2. Stops the vehicle 6 inches to 4 feet from curb to discharge passengers. Assists passenger off vehicle.
3. Assists all passengers as required.
4. Advises dispatcher of absence from vehicle and advises dispatcher of return to vehicle.
5. Does not leave elderly and disabled passengers unattended. Makes sure they are in the hands of caretakers or inside their homes/destinations before driver leaves the property (case by case judgments).

MANAGEMENT REVIEWS

There must be an effective mechanism to monitor and document the contractor's activities. An acceptable program would consist of periodic written reports of activities submitted by the contractor to the grantee, supplemented by periodic oversight inspections by the grantee. The grantee must provide oversight in order to verify the contractor's compliance with FTA and NCDOT regulations and polices.

SAFETY DATA ACQUISITION & ANALYSIS

Safety Data Acquisition/Analysis

Description of Element

Understanding safety data is an important step toward allocating important (and often scarce) resources to implement safety program elements. Safety data relative to transit provider operations can be used to determine safety trends in system operation. The data include information gathered from within the system on safety-related events such as passenger injuries or claims, employee injuries, accidents, incidents, and preventability. Driver reports (sometimes called logs) can be an important source of safety problems, such as dangerous stop locations, problems with vehicle equipment, safety problems with the route, and other issues. The data is useful in a formal hazard identification and resolution process to help identify hazards before they cause accidents. The data may also help improve system performance, not only in respect to safety, but also in overall delivery of service to the riding public. In addition, trend analyses of safety data can help determine the effectiveness of safety initiatives that have been implemented.

A. One of the most important services the safety unit provides for the transit organization is the collection, maintenance, and distribution of safety data relative to system operation.
   • Includes information gathered from within the system on various operating events relative to safety.
B. Analysis of this system specific data can be used to determine trends and patterns in system operation.
C. Used as part of the Hazard Resolution Process, data collection and analysis can be used to identify hazards before they cause accidents.
   • This is done by techniques such as trend analysis and thus become a vital component of efforts to improve system performance, not only in respect to safety but also in overall delivery of service to the riding public.
D. The responsibilities for providing, receiving, processing and analyzing data should be listed here and can be general or specific, based on the needs of the transit system.

SAFETY PLAN PURPOSE

A System Safety Plan has many beneficial purposes for your employees and passengers. A plan provides:

- A documented approach to accomplishing a system safety program.
- A means of providing safety policies and procedures to drivers, vehicle maintenance, office and facility personnel.
- A way to reduce accidents and injuries through preventative measures.

SAFETY OBJECTIVES

In the transit environment, when properly applied, system safety:

1. Ensures safety is addressed during system planning, design and construction

2. Provide analysis tools and methodologies to promote safe system operation through the identification of safety hazards and the implementation of technology, procedures, training, and safety devices to resolve these hazards

TRANSIT SYSTEM SAFETY PHILOSOPHY
NCDOT Safety Philosophy Statements

A Safety Philosophy is part of the North Carolina Department of Transportation (NCDOT) mission. North Carolina public transit systems can uphold this mission by acknowledging and implementing the NCDOT safety philosophy statements shown below:

- ❖ All accidents and injuries can be prevented.

- ❖ Management/supervisors are responsible, and will be held accountable, for preventing injuries and occupational illnesses.

- ❖ Occupational safety and health is part of every employee's total job performance.

- ❖ Working safely is a condition of employment.

- ❖ All workplace hazards can be safeguarded.

- ❖ Training employees to work safely is essential and is the responsibility of management/supervision.

- ❖ Preventing personal injuries and accidents is good business.

SAFETY GOALS - EXAMPLE

As a public transportation provider in North Carolina, transit systems should utilize and uphold statewide safety goals. These goals include:

❖ Instilling a safety attitude and a safe work place/customer service environment

❖ Establishing a commitment to safety

❖ Developing and maintaining a comprehensive, structured safety program

❖ Developing and maintaining safety standards and procedures

❖ Providing formalized safety training

❖ Reducing accident and injury rates

❖ Selecting equipment that promotes and enhances safety

❖ Safeguarding hazards

❖ Making necessary changes in the system to uphold safety

❖ Establishing an incentive/reward program that rewards safe employee practices

❖ Increasing employee safety awareness

❖ Applying new research and development in safety efforts

❖ Meet NCDOT/PTD minimum training standard

Creates a proactive transit safety culture that supports employee safety and safe system operation through motivated compliance with agency rules and procedures and the appropriate use and operation of equipment

SAFETY FUNCTIONS ACTION PLAN

This plan lists the actions a system can use in developing and carrying out a safety and emergency response program. When all aspects are implemented, the action plan can help a system to address emergency and fire prevention requirements that will protect people, property and the environment.

Safety Functions of Facilities Manager
- Provide training to all employees for their roles in all safety and emergency plans
- Conduct quarterly drills to exercise the emergency response plans
- Annually conduct emergency rescue from confined space drill
- Conduct all other actions required in the system safety plan to implement, develop and maintain an effective Emergency Response Plan

Safety Functions of the Maintenance Manager
- Ensure maintenance personnel are trained in the proper procedures for chemical handling and storage procedures, potential ignition sources (such as boilers, gas fired equip0ment, welding, etc.) and their control procedures, and the type of fire protection equipment or systems installed to prevent or control ignitions or fires.
- Ensure that personnel are properly trained and equipped to carry out safety and emergency plans.
- Express responsibility for the maintenance for the maintenance of equipment and systems installed to prevent or control ignitions or fires. The manager is also responsible for the control of fuel source hazards. The manager should have written maintenance procedures available in the Maintenance Office.

Overall System Fire Prevention Functions
- The entire facility should be protected by an automatic water sprinkler system. Inspection and maintenance procedures are maintained by the maintenance manager.
- If smoking is permitted, designated smoking areas are established and regulations are located on bulletin boards throughout the facility.
- If welding and hot work are done at the system facility, a fire prevention plan for welding and hot work should be included in the system safety program.
- The alarm systems are maintained by the Maintenance Department. Each alarm is tested monthly; supervisors should be notified before the test.

SAFETY RESPONSIBILITIES – SPECIFIC POSITIONS

Agency Administrator/County Manager
Under the direction of the Agency Administrator/County Manager there is:

- An active Safety Committee, consisting of department heads and other designated persons, meeting on a scheduled basis.
- A thorough and effective Accident Investigation to include reporting and recording procedure, and a written report on actions taken to prevent recurrence of accidents, including action taken against individual violators of safety rules and practices.
- A training program for employees and supervisory personnel directly related to avoiding a possible injury or illness in the area of assigned operations.
- A periodic audit of all premises, equipment, and, materials so that recommendations can be developed to obtain compliance with established standards.
- A communications system established and maintained to ensure that all personnel responsible for safety matters are kept abreast of new standards or procedures published by the Department of Labor.
- Specific goals established for the safety program, with progress toward those goals measured on a monthly basis. Copies of monthly progress reports are forwarded to the Administrator/Director.

The seven steps to achieving your safety policy are accomplished through:
- A Safety Manual
- A Safety Coordinator/Officer
- A Safety Committee
- Employee Training and Supervision
- Employee Safety Meetings
- Accident Investigation
- Departmental Self-Inspection

Management
Management will demonstrate support for the safety program through every visible means, including:
- Providing a safe and healthful work place.
- Providing personal protective equipment as well as machine guards and safety devices commensurate with the state of the art.
- Reviewing accident records and accomplishments of the safety program with the Safety Committee.
- Evaluating effectiveness of the safety program.
- Participating directly and/or indirectly in safety activities as may be required to maintain the enthusiasm and interest off all concerned.
- Abiding by Safety rules and regulations when exposed to conditions governed by the rules.
- Directing that any flagrant disregard of safety rules and regulations by employees be grounds for dismissal as outlined in Personnel Policy.

Responsibility

The Agency Executive Director/County Manager is directly responsible for all safety efforts in the organization. Enthusiasm and faith in the safety program must be such as to maintain the interest and support of all Department Heads and Supervisors. This attitude is reflected down through the Department Heads and Supervisors to the individual workers. The specific accident prevention duties include the following:

- Active participation and direction in the planning of details for accident prevention which will bring the best results for all employees. Expansion and adaptation of program and procedures to all departments within the organization.
- Demonstrated support of the program through personal participation and through approval of necessary expenditures for such items as personal protective equipment, mechanical guards, good lighting, good ventilation, and other physical improvements to the working environment, as well as expenditures for safety training materials, awards and incentives, etc.
- Continuing review of the effectiveness of accident prevention efforts in various sections and departments, with necessary follow-up and bolstering of efforts when required.

Safety Coordinator Responsibility
Implement and administer the safety program.

- Maintain records as necessary to comply with laws and objectives of the safety program. These records should include:
    - Copy of Report of Injury, illness or Accident
    - Supervisor's Accident Investigation Reports
    - Required OSHA forms
    - Minutes of all Safety Meetings
    - Safety Program status reports
- Submit status reports to Safety Committee
- Make periodic visits to all buildings/operations to assist and consult in developing safe work methods, accident investigations, training, and other technical assistance.
- Analyze accident reports and investigations weekly.
- Act as Chairperson of the Safety Committee.
- Promote "safety awareness "in all employees through stimulating educational training programs.
- Compliance with all OSHA, state and local laws, and established safety standards.
- Assist Supervisors in all matters pertaining to safety.
- Maintain contact with available sources of topical safety information such as American Society of Safety Engineers, National Safety Council, NCALGESCO, NC Department of Labor, and NC Industrial Commission.
- Provide training programs for Supervisors.
- Represent management in the implementation of the Safety Policy.
- Recommend immediate corrective action in cases of hazardous operations.
- Submit a copy of Accident/Incident Reports to NCDOT/PTD Safety & Training Unit

Supervisors

Supervisors are the key persons in the scheme of loss control because of the close relationship with the employee and intimate knowledge of operating procedures.

Supervisors of each department are charged with the responsibilities of quality and quantity of production within the department, and therefore are responsible for the work conduct of same. Supervisors should be afforded the necessary tools and knowledge to carry out their duties with efficiency and safety.

Supervisors should:
- Have a thorough knowledge of System Safety Policy.
- Provide instruction and training to workers so that they conduct their job in a safe manner. [(See section on Training New Employees)]
- Make daily inspections of the department to ensure that no unsafe conditions or unsafe practices exist.
- Initiate immediate corrective action where unsafe conditions or practices are found. When a capital expenditure is required to make necessary corrections, a written report shall be submitted to the Agency Administrator/County Manager and the Safety Coordinator.
- Properly complete accident reports and investigate all accidents to determine what must be done to prevent recurrence of a similar accident.
- Be familiar with procedures that must be followed in case of an emergency.
- Enforce safety rules and regulations of the organization.
- Set a good example for safety by working in a safe manner and encouraging others to do so.

Employees
To assist the employee in developing keen "safety awareness" the following responsibilities are assigned:
- To abide by the safety rules and regulations of the organization.
- To regard the safety of fellow workers at all times.
- To report any unsafe condition to the Supervisor.
- To contribute ideas and suggestions for improving the safety of conditions or procedures to the Supervisor.
- To use individual knowledge and influence to prevent accidents.
- To attend safety training sessions.
- To report accidents and injuries immediately.

RELATIONSHIP BETWEEN SYSTEM SAFETY AND SYSTEM OPERATIONS

Management of Unsafe Conditions
- Eliminate hazards by removing the machines, tool, method, material, or structure that is causing the hazard through appropriate means. Contacting officials of OSHA, or EPA, may be necessary for proper disposal.
- Control the hazard by enclosing or guarding the point of hazard at the source.
- Train personnel on steps to take when confronted by a hazardous condition and provide procedures to safely avoid the hazard.
- Provide and ensure the use of personal protective equipment to shield employees from the hazard.

At no time should protective devices or safety practices are set aside to get the job done faster and cheaper. The price paid for such indiscretion may greatly exceed the anticipated gain from the action.

Designated Safety Official (Transportation Coordinator)

The Supervisor or Lead Safety Officer is the individual who is directly responsible for implementing the System Safety Program. It is the basic responsibility of the supervisor to plan and conduct safe operations. **It is also the duty and responsibility of each supervisor to fully orient and instruct all employees in safe practices and procedures.** He or she is expected to be a member of the safety and Accident Review Committee and be in charge of collecting and disseminating safety data. The supervisor or Lead Safety Officer is specifically charged with the following responsibilities for the System Safety Program:

- Have full knowledge of all standard and emergency operating procedures;
- Perform safety audits of operations;
- Ensure that employees make safety a primary concern when on the job;
- Actively investigate all incidents and accidents;
- Prohibit unsafe conduct and conditions;
- Conduct safety meetings which are a vital part of safety atmosphere;
- Listen and act upon any safety concerns raised by employees; and
- Report to management any safety concerns or possible hazards.

Employees

It is the responsibility of each employee of the Transit System to abide by all rules and regulations and to comply with all laws pertaining to safety and health in the workplace. **It is the responsibility of each supervisor of the Transit System to provide explicit instructional and procedural safety training for each employee.** Safety becomes a shared responsibility between management and the employee, and working safely is a condition of employment.

Employees are required to identify, report and correct unsafe conduct and conditions. Under (OSHA) 29 CFR part 1910; employees have the right to report any unsafe working conditions without being subjected to any retaliation whatsoever. Each employee must be an integral part of the SYSTEM SAFETY PROGRAM.

All transit employees are required to attend safety meetings. Safety meetings involve employees in the Safety Program and are very useful ways of training employees. Safety meetings and

committees are used to present information, discuss problems and new ideas and discuss recent accidents and injuries. Safety meetings and commitment shall include, but shall not be limited to, the following:

1.   Wearing the prescribed uniform and safety shoes as required.

2.   Reporting promptly and in writing, to your supervisor, all injuries and illnesses associated with the jobs.

3.   Reporting, no matter how slight, all fires, accidental damage to property, hazardous material spills and other emergency occurrences to your supervisor.

4.   Disposing of all hazardous materials in an acceptable and lawful manner.

5.   Working under the influence of alcohol or illegal drugs is specifically forbidden. Use of prescription drugs, which may affect your alertness or work abilities, shall be reported to your supervisor (49 CFR parts 40, 653, and 654).

6.   Taking care not to abuse tools and equipment, so these items will be in usable condition for as long as possible, as well as ensure they are in the best possible condition while being used.

COMPUTER DATA ENTRY SAFETY PROCEDURES

The following actions can help to reduce muscle fatigue and tension while enabling maximum performance:

- Adjust seat height and backrest angle to fit the user in a seated position. Adjust footrest for proper height and angle.

- Screens should have adjustable height and tilt; screens should be arranged so that they are never higher than eye level for the users.

- Position documents roughly perpendicular to the line of sight using a document holder.

- Adjust keyboard to fit the operator. Keyboards should be detached in order to allow for positioning.

- Always use anti-glare screens.

- Users should maintain correct hand and wrist posture when entering data. Repetitive motion illness develops over an extended period of time. Learn work habits that reduce risks and be aware of early symptoms of the illness.

- A footstool may be used as a footrest for petite operators.

- Frequent work breaks should be taken after continuous work periods requiring more than five hours of screen viewing time, constant rapid muscular action, fixed positions on jobs that are highly repetitive.

OFFICE SAFETY PROCEDURES

The following suggestions can help to make your office environment a safe one:

- Don't place computers, calculators, or adding machines too close to the edge of the desk or other surfaces.

- Machines that tend to move during operation should be fastened down or secured with rubber feet or mats.

- Electric office machines should be equipped with three-prong electrical cords.

- Avoid stretching cords between desks or across aisles.

- Never store combustible office materials in HVAC closets or electrical rooms.

- Do not permit floor coverings to become tripping hazards.

- Keep floors clean. Clean up all spills on floors immediately. Pick up papers, pencils, clips and any objects that will cause tripping hazards.

- Place wastebaskets where they will not present a tripping hazard.

- Never stack anything so high as to obstruct vision. Make sure that stacks are not within 18 inches of ceiling sprinkler heads.

- Electrical cords and phone lines should be secured to prevent tripping hazards.

- Know where building emergency exits are located. These areas should not be used for storage.

- File drawers should be closed immediately after use so no one can run into or trip over them. Only one drawer should be opened at a time to prevent the cabinet from falling forward.

- Entryway steps should be marked with contrasting colors.

- Be sure all electrical equipment is grounded and the cord is in good condition. If a machine is shocking or smoking, unplug it and immediately report the defect.

- The use of portable electric, gas or other heating devices is prohibited.

- Be cautious as you approach doors that open in your direction.

- Slow your pace when approaching a blind corner in a hallway.

- Do not run in corridors.

- Office tables, chairs, and desks must be maintained in good condition and remain free from sharp corners, projecting edges wobbly legs, etc.

- Never use chairs, desks or other furniture as a makeshift ladder. Use a stepladder for climbing but do not use the top two steps.

- Do not lean forward in a roller chair to pick up an object.

- Keep the blades of paper cutters closed when not in use.

- Never run power cords under carpet or chair pads.

SAFE LIFTING PROCEDURES

Preserve your back health by using the following lifting strategies:

- Before lifting a load, think of other means of moving it using a device that can help you to pull, push or roll the load.

- Have firm footing and make sure the standing surface that you are on is not slippery.

- Determine the best way to hold the load using handles, gripping areas or special lifting tools. Get a firm grip on the load.

- Keep your back straight by tucking your chin in.

- Tighten your stomach muscles and lift with your legs.

- Lift the load slowly.

- Hold the load as close to the body as possible; be sure you position the load close to the body before lifting.

- Do not twist during your lift or when moving the load. Turn with your feet rather than your back.

- Set the load down gently, using your legs and keeping your back as straight as possible.

- Be sure your fingers are out of the way when putting the load down and when moving the load through tight spaces.

- Ask for help if you need it and use lifting tools and devices whenever they are available.

HAZARD IDENTIFICATION AND ANALYSIS METHODOLOGY

Hazard Assessment Matrix

One way to conduct hazard assessments is to use a **"Hazard Assessment Matrix"**. The Matrix condenses "hazard assessment" into a chart and prioritizes those hazards that are evaluated. Two hazard severity categories are used to designate the magnitude of the "worst case" potential effects of the hazard are as follows:

- **Category I – Critical**
  Hazard can result in severe injuries or death to passengers, employees, or others who encounter the Transportation System and/or cause major property damage.

- **Category II – Marginal**
  Hazard can result in minor injury or negligible property damage.

After hazards are assessed for their potential severity, they can be examined to determine the probability that they may lead to an accident. As an increase in knowledge about safety is established through the course of the System Safety Program, prior accident information will be factored into the probability analysis if it is appropriate to do so.

A   **Frequent**
    The hazard is likely to cause an accident on a recurrent basis.

B   **Remote**
    An accident is unlikely but possible during the life of the hazard.

HAZARD ASSESSMENT MATRIX		
Frequency of Occurrence	**Hazard Categories**	
	Critical I	**Marginal II**
A Frequent	I A	II A
B Remote	I B	II B

Hazard Risk Index	
I A	Unacceptable or Undesirable (Management Decision Necessary)
II A, I B	Acceptable with Management Review
II B	Acceptable without Management Review

Hazard Analysis

Date of Hazard Analysis:_____

Hazard Risk Index	*Criteria*
I A	*Unacceptable or Undesirable (Management Decision Necessary)*
II A, I B	*Acceptable with Management Review*
II B	*Acceptable without Management Review*

Prepared By:_____Date:_____

POTENTIAL WORK SITE HAZARDS IDENTIFICATION

Policy

A.   The designated Supervisor at EACH Employee work site shall identify at least ANNUALLY any potential Occupational Safety or Health Hazards at that work site.

    1.   Any time a new substance, process, procedure, or piece of equipment is introduced and presents a potential hazard or a hazard is identified during a Safety Inspection, an updated Identification must be completed IMMEDIATELY.

B.   A copy of the completed Hazards Identification shall be posted at the work site and must be reviewed with any new employee assigned to that work site BEFORE the new employee beings to work and will be recorded in the employee's training record.

A copy of the completed Hazards Identification must also be forwarded to the applicable Program Manager/Director and Safety Officer for review action and for file for follow-up inspections.

HAZARDS IDENTIFICATION

Work Site Name _____ (Center/Office)

Location _____

Potential Hazards	Employee Action to be Followed
1.	
2.	
3.	
4.	
5.	

Completed by: _____   _____
                      Work Site Supervisor   **Date**

REVIEW ACTION
    A. _____No remediation action possible
    B. _____Remediation to be done

Hazard	Action	Schedule	Responsibility
1.			
2.			
3.			
4.			
5.			

    C.   Comments:_____

_____

_____

By:_____ _____
            Program Manager/Director   Date

_____ _____
            Safety Officer   Date

FOLLOW-UP ABATEMENT ACTION

Hazard	Abatement Action Completed	Date	Completed By
1.			
2.			
3.			

Submitted by:_____ _____
                     Position   Date
Reviewed by:_____ _____
                     Position   Date

_____ _____
             Safety Officer   Date

Comments:_____

_____

_____

_____

_____

BLOOD BORNE PATHOGENS/INFECTION CONTROL

If a bio-hazardous spill occurs as part of a vehicular accident, then first aid for injured passengers should be the first priority, along with notification of appropriate medical assistance personnel. Bio-hazardous spills may also occur from an on-vehicle injury without a vehicular accident. Again, first aid provision comes first. Additionally, a bio-hazardous spill may occur as a result of vomiting or loss of bladder control, in which case, first aid is normally not necessary. However, anytime the driver does administer first aid, latex gloves and other personal protective equipment should be used.

Contaminated items should be carefully placed in the designated bio-hazard disposal bag.

Following first aid administration, where necessary, the vehicle must be cleared of the spill. The following steps should be followed:

1. Put on a new pair of latex gloves;

2. Contain the spill as best as possible with paper towels and/or solidifying powder

3. Clean up spill with paper towels, or if a solidifying powder is used, use a dustpan and brush.

4. Clean area of spill with the cleaning or decontamination solution and wipe with paper towels and/or fresh solidifying powder.

5. ***Place all items used to clean spill into bio-hazardous waste disposal bag.***

6. If the exterior of the disposal bag has not been contaminated by the spill, then remove both Latex gloves and place them in the disposal bag, and seal the bag.

7. If the exterior of the bio-hazardous waste disposal bag has been contaminated by the spill, seal the bag and place inside another bag.

8. ***Upon return to home base, place the plastic bag(s) into the designated disposal container.***

9. Management will have it disposed of by an appropriate medical hazard disposal organization for proper ultimate destruction.

SAFETY MEETING REPORT
(MONTHLY, BI-MONTHLY OR QUARTERLY)

Date:_____

Address:_____

Meeting Chairman: _____

Attendance should be documented.

Other Persons Present: _____

_____

_____

_____

_____

_____

_____

Formal Presentation (Name of presenter and topic): _____

_____

_____

_____

Other Subjects Discussed: _____

_____

_____

_____

_____

Reports on Weekly Meetings: _____

_____

_____

_____

_____

_____

Employees' Comments/Suggestions: _____

_____

_____

_____

_____

Chairman's Signature_____

SAFETY TERMS AND DEFINITIONS

ACCIDENT

An unforeseen event or occurrence that results in death, injury, or property damage – *System Safety Program Training Participant's Guide*

An incident involving a moving vehicle. Includes collisions with another vehicle, object or person (except suicides) and derailment/left roadway. This also includes Personal Casualties incidents on the vehicle and entering/exiting the vehicle. – *Federal Transit Administration (FTA) - Safety Management Information Statistics (1999 SAMIS Annual Report)(2000)* http://transit-safety.volpe.dot.gov/publications/default.asp

Occurrence in a sequence of events that produces unintended injury, death or property damage. Accident refers to the event, not the result of the event. – *National Safety Council (NSC), National Safety Council Statistics Glossary [online](Research & Statistics, 25 July 2000[15 March 2002]);* http://www.nsc.org/lrs/glossary.htm

HAZARD

Any real or potential condition that <u>can cause</u> injury, death or damage to or loss of equipment or property
- theoretical condition
- identified before an incident actually occurs
FTA - Implementation Guidelines for State Safety Oversight of Rail Fixed Guideway Systems (1996) http://transit-safety.volpe.dot.gov/publications/default.asp

INCIDENT

An unforeseen event or occurrence which does not necessarily result in death, injury, contact or property damage - *FTA - Implementation Guidelines for State Safety Oversight of Rail Fixed Guideway Systems (1996)*
http://transit-safety.volpe.dot.gov/publications/default.asp

Collisions, personal casualties, derailments/left roadway, fires, and property damage greater than $1,000 associated with transit agency revenue vehicles and all transit facilities - *FTA - Safety Management Information Statistics (1993 SAMIS Annual Report) (1995)*
http://transit-safety.volpe.dot.gov/publications/default.asp

RISK

Probability of an accident multiplied by the consequences of an accident (often in $) - *System Safety Program Training Participant's Guide*

Exposure or probable likelihood of a hazard (accident, crisis, emergency or disaster) occurring at a system. Risk is measured in terms of impact and vulnerability - *FTA - Critical Incident Management Guidelines (1998)*
http://transit-safety.volpe.dot.gov/publications/default.asp

SAFETY

Freedom from those conditions that can cause death, injury, occupational illness, damage to or loss of equipment or property, or damage to the environment – *Military Standard 882-D*

Freedom from danger - *FTA - Implementation Guidelines for State Safety Oversight of Rail Fixed Guideway Systems (1996)*
http://transit-safety.volpe.dot.gov/publications/default.asp

SECURITY

Precautions taken to guard against crime, attack, sabotage, espionage, etc. – *The Learning Network, Inc., A-Z Dictionary [online] (2000-2002[15 March 2002])*
http://www.infoplease.com

Freedom from intentional danger - *FTA - Implementation Guidelines for State Safety Oversight of Rail Fixed Guideway Systems (1996)*
http://transit-safety.volpe.dot.gov/publications/default.asp

SYSTEM SECURITY

All activities associated with providing security to transit patrons and securing transit property including supervision and clerical support. Includes patrolling revenue vehicles and passenger facilities during revenue operations; patrolling and controlling access to yards, buildings and structures; monitoring security devices; and, reporting security breaches – *US Department of Transportation, Bureau of Transportation Statistics, Transportation Expressions [online](1996[15 March 2002])*
http://www.bts.gov/btsprod/expr/expsearch.html

MANAGEMENT REVIEWS

There must be an effective mechanism to monitor and document the contractor's activities. An acceptable program would consist of periodic written reports of activities submitted by the contractor to the grantee, supplemented by periodic oversight inspections by the grantee. The grantee must provide oversight in order to verify the contractor's compliance with FTA and NCDOT regulations and polices.

```
+---------------------------------------------------------------+
|              ORGANIZATIONAL STRUCTURE                         |
|                  FISCAL YEAR 2017                             |
|                                                               |
|  DEPARTMENT NUMBER 4520    DEPARTMENT NAME Gaston County      |
|                            Department of Health and Human     |
|                            Services                           |
+---------------------------------------------------------------+
```

Gaston County Board of Commissioners

```
            County Manager

        Assistant County            Transportation Advisory Board
            Manager

                      DHHS Director

                       DSS Director

             Adult & Aging Services Administrator

               Transportation Coordinator

   Billing Clerk        Safety              Dispatch
                    Officer/Training        Supervisor

                        Drivers             Dispatchers
```

HAZARD IDENTIFICATION AND ANALYSIS METHODOLOGY

Hazard Assessment Matrix

One way to conduct hazard assessments is to use a **"Hazard Assessment Matrix"**. The Matrix condenses "hazard assessment" into a chart and prioritizes those hazards that are evaluated. Two hazard severity categories are used to designate the magnitude of the "worst case" potential effects of the hazard are as follows:

- **Category I – Critical**
  Hazard can result in severe injuries or death to passengers, employees, or others who encounter the Transportation System and/or cause major property damage.

- **Category II – Marginal**
  Hazard can result in minor injury or negligible property damage.

After hazards are assessed for their potential severity, they can be examined to determine the probability that they may lead to an accident. As an increase in knowledge about safety is established through the course of the System Safety Program, prior accident information will be factored into the probability analysis if it is appropriate to do so.

A   Frequent
The hazard is likely to cause an accident on a recurrent basis.

B   Remote
An accident is unlikely but possible during the life of the hazard.

HAZARD ASSESSMENT MATRIX		
Frequency of Occurrence	**Hazard Categories**	
	Critical I	**Marginal II**
A Frequent	I A	II A
B Remote	I B	II B

Hazard Risk Index	
I A	Unacceptable or Undesirable (Management Decision Necessary)
II A, I B	Acceptable with Management Review
II B	Acceptable without Management Review

<u>Hazard Analysis</u>

Date of Hazard Analysis:_____

Hazard Risk Index	*Criteria*
I A	*Unacceptable or Undesirable (Management Decision Necessary)*
II A, I B	*Acceptable with Management Review*
II B	*Acceptable without Management Review*

Prepared By:_____Date:_____

POTENTIAL WORK SITE HAZARDS IDENTIFICATION

Policy

      C.   The designated Supervisor at EACH Employee work site shall identify at least ANNUALLY any potential Occupational Safety or Health Hazards at that work site.

1. Any time a new substance, process, procedure, or piece of equipment is introduced and presents a potential hazard or a hazard is identified during a Safety Inspection, an updated Identification must be completed <u>IMMEDIATELY.</u>

      D.   A copy of the completed Hazards Identification shall be posted at the work site and must be reviewed with any new employee assigned to that work site BEFORE the new employee beings to work and will be recorded in the employee's training record.

            A copy of the completed Hazards Identification must also be forwarded to the applicable Program Manager/Coordinator and Safety Officer/Trainer for review action and for file for follow-up inspections.

HAZARDS IDENTIFICATION

Work Site Name _____ (Center/Office)

Location _____

Potential Hazards	Employee Action to be Followed
1.	
2.	
3.	
4.	
5.	

Completed by: _____   _____
                       Work Site Supervisor   **Date**

REVIEW ACTION
    D.   _____No remediation action possible
    E.   _____Remediation to be done

Hazard	Action	Schedule	Responsibility
1.			
2.			
3.			
4.			
5.			

    F.   Comments:_____

_____

_____

By:_____   _____
           Program Manager/Coordinator   Date

_____   _____
                Safety Officer   Date

FOLLOW-UP ABATEMENT ACTION

Hazard	Abatement Action Completed	Date	Completed By
1.			
2.			
3.			

Submitted by:_____   _____
                   Position   Date

Reviewed by:_____   _____
                   Position   Date

             _____   _____
                   Safety Officer   Date

Comments:_____

_____

_____

_____

_____

MONTHLY BUILDING INSPECTION FORM

Building: _____   **Inspector:** _____   **Date:** _____

OK	Not ok	Description	Comments/Action(s)
		Electric cord attached to building surface or run through door/ceiling/wall.	
		Electric cord frayed, cut, or damaged.	
		Light-duty 2-prong extension cord used.	
		Ground pin missing from cord.	
		Empty opening (knockout) in electric box.	
		Exposed live electrical parts.	
		Ungrounded equipment.	
		Storage within 3' of electric panels.	
		Circuit breakers/disconnects not labeled.	
		Fire extinguishers blocked/obscured.	
		Fire extinguishers w/o monthly check.	
		Exit doors blocked/locked.	
		Exit signs/arrows not in place and visible.	
		Emergency evacuation lights not tested.	
		Storage >5' w/o stepstool or ladder.	
		Storage within 18"of sprinkler heads.	
		Storage within 3' of heater/heat source.	
		Storage aisles <28"wide.	
		Storage stacks lean/unstable.	
		Compressed gas not capped/chained	
		Excessive flammables outside of cabinets.	
		Incompatible chemicals stored together.	
		Chemicals not labeled with name/hazards.	
		Material Safety Data Sheets not available.	
		Emergency shower/eyewash not tested weekly.	
		Housekeeping not up to standards.	
		Wet/slippery floors not marked/corrected.	
		Trip hazards in floor, stairs, sidewalks etc.	
		First-aid kit and PPE not available.	
		Burned out or missing light bulbs.	
		Oily/greasy rags not in covered metal can.	
		Guardrails/stair-rails in place as required	
		PPE provided and properly used.	
		Other:	
		Other:	

CSB 6/23/05 Rev 1

PERSONAL PROTECTIVE EQUIPMENT
HAZARD ASSESSMENT AND CERTIFICATION
FORM

Use this form to determine if your employees are potentially exposed to the list of items. The form guides you through a thought process. First check either yes or no to whether the employee is exposed to the particular hazards during any part of the employees' job duties. If the employee is exposed to the hazard, then determine if the hazard can be eliminated and still get the job done. If not, can the method or equipment be changed to eliminate the hazard? If so, consider doing it. If the hazard cannot be eliminated, is the condition one where adding a guard would protect the employee from the hazard? Many times machinery or equipment can be successfully guarded. If this is the case, indicate a guard is being installed to protect the employee from the hazard.

The last column refers to Personal Protective Equipment (PPE). You must list specifically the appropriate type of PPE the employee will be required to use to protect him/herself from the particular hazard. Such PPE could include: hard hats to protect the head from falling objects; safety shoes to protect against having objects dropped on or rolled over the toes; respirators; safety glasses or face shields (to protect the eyes and face); hearing protection; any chaps and other PPE for protection when using chain saws. These are only examples of the specific types of PPE that would commonly be listed. After you have decided on the appropriate PPE, the employee must be provided with the PPE and trained in its correct use and care. Records must be kept of all training including date, topic of training, instructor and participants.

The Hazard Assessment form must be signed by the person completing or certifying that it is correct. The form should be reviewed when new equipment is considered, when changes are made in the processes or if the employee receives new job duties. If employees are affected by any of these changes, and additional PPE is required, then list it on the assessment form and train the employee in the newly required PPE.

Review the form annually, at a minimum, to determine if it is still correct. Date and sign the form certifying that the form is correct.

PERSONAL PROTECTIVE EQUIPMENT
HAZARD ASSESSMENT

Plant _____ Dept. _____ Date(s) _____
Supervisor _____ Job _____

Eye and Face

Is there danger from:

	No	Yes	(Eliminated, Guarded, PPE) E, G	List Specific PPE
1) Flying Particles	___	___	___	_____
2) Molten Metal	___	___	___	_____
3) Liquid Chemicals	___	___	___	_____
4) Acids	___	___	___	_____
5) Caustic Liquids	___	___	___	_____
6) Chemical Gases or Vapors	___	___	___	_____
7) Light Radiation	___	___	___	_____
8) Other	___	___	___	_____

Head

Is there danger from:

	No	Yes	E, G	List Specific PPE
1) Falling or Flying Objects	___	___	___	_____
2) Work Being Performed Overhead	___	___	___	_____
3) Elevated Conveyors	___	___	___	_____
4) Striking Against a Fixed Object	___	___	___	_____
5) Forklift Hazards	___	___	___	_____
6) Exposed Electrical Conductors	___	___	___	_____
7) Other	___	___	___	_____

MISCELLANEOUS

Is there danger from:

	No	Yes	E, G	List Specific PPE
1) Lifting	___	___	___	_____
2) Blood-borne Pathogens	___	___	___	_____

Foot

Is there danger from:

	No	Yes	(Eliminated, Guarded, PPE) E, G	List Specific PPE
1) Falling and Rolling Objects	___	___	___	_____
2) Objects Piercing the Sole	___	___	___	_____
3) Electrical Hazards	___	___	___	_____
4) Wet or Slippery Surfaces	___	___	___	_____
5) Chemical Exposure	___	___	___	_____
6) Environmental	___	___	___	_____

7) Other   _____ _____ _____ _____

Hand

Is there danger from:

	No	Yes	E,G	List Specific PPE
1) Skin Absorption	_____	_____	_____	_____
2) Cuts or Lacerations	_____	_____	_____	_____
3) Abrasions	_____	_____	_____	_____
4) Punctures	_____	_____	_____	_____
5) Chemical Burns	_____	_____	_____	_____
6) Thermal Burns	_____	_____	_____	_____
7) Harmful Temperature Extremes	_____	_____	_____	_____
8) Other	_____	_____	_____	_____

Respiratory

Has the workplace area been evaluated for:

	No	Yes	E, G	List Specific PPE
1) Harmful Dusts	_____	_____	_____	_____
2) Fogs	_____	_____	_____	_____
3) Fumes	_____	_____	_____	_____
4) Mists	_____	_____	_____	_____
5) Smokes	_____	_____	_____	_____
6) Sprays	_____	_____	_____	_____
7) Vapors	_____	_____	_____	_____
8) Other	_____	_____	_____	_____

Torso

Are employees bodies protected from:

	No	(Eliminated, Guarded, PPE) Yes	E, G	List Specific PPE
1) Hot Metals	_____	_____	_____	_____
2) Cuts	_____	_____	_____	_____
3) Acids	_____	_____	_____	_____
4) Radiation	_____	_____	_____	_____

Comments:

Certification

This hazard assessment has been performed to determine the required type of PPE for each affected employee. The assessment includes:

Walk-through survey
Specific job analysis
Review of accident statistics
Review of safety equipment selection guideline materials
Selection of appropriate required PPE

Assessment Certified by (Supervisor) _____

Date _____

EMPLOYEE TRAINING AND CERTIFICATION
PROPER USE OF PERSONAL PROTECTIVE EQUIPMENT (PPE)

Instructor Name _____

Date _____

TRAINING OBJECTIVES:

Company/employee responsibilities
Work area hazards
How PPE will protect
When PPE should be worn
What PPE should be worn
How to don, doff, assure proper fit, adjust, and wear properly
Limitations of the PPE
Proper care, maintenance, cleaning (sanitation)
Reporting and replacement of worn damaged PPE
Useful life
Proper disposal of PPE

The following employees have received training on specific PPE and have demonstrated an understanding of the PPE.

Attendance List

Department	Name	Signature

CSB 03/07/2011 Revision 2

Blood borne Pathogen Exposure

OSHA's blood borne pathogens standard, <u>29 CFR 1910.1030</u> applies to all persons who may reasonably anticipate contact with blood or other potentially infectious materials in the course of their employment. This includes contact with skin, eyes, mucous membranes or contact from piercing the skin. The focus of the regulation is the creation of a written exposure control plan that describes how the employer will protect employees from exposure. The following will outline the components that must be included in an exposure control plan. (29 CFR 1910.1030(c))

Gaston County ACCESS is committed to providing a safe and healthful work environment for our entire staff. In pursuit of this goal, the following exposure control plan (ECP) is provided to eliminate or minimize occupational exposure to blood borne pathogens in accordance with OSHA standard 29 *CFR* 1910.1030, "Occupational Exposure to Blood borne Pathogens."

The ECP is a key document to assist our organization in implementing and ensuring compliance with the standard, thereby protecting our employees.

This ECP includes:

- Determination of employee exposure
- Implementation of various methods of exposure control, including:
  - Universal precautions
  - Engineering and work practice controls
  - Personal protective equipment
  - Housekeeping
- Hepatitis B vaccination
- Post-exposure evaluation and follow-up
- Communication of hazards to employees and training
- Recordkeeping

Exposure Determination

An exposure determination is a listing of all job classifications in which employees will be exposed or may occasionally be exposed to potentially infectious materials on the job. Any specific procedures or tasks in which exposure occurs must also be listed without regard to the use of personal protective equipment (PPE). (29 CFR 1910.1030(c) (2))

Employee Education and Training

<u>Employees will receive annual training to be sure they understand the hazards associated with blood borne pathogens,</u> the modes of transmission, the exposure control plan, OSHA's blood borne pathogens standard itself, the use and limitations of engineering controls, new devices which utilize updated technologies, work practices and PPE. Other topics discussed at this training should include: what to do when confronted with an emergency involving blood or other potentially infectious materials; post-exposure evaluations; the hepatitis B virus (HBV) vaccine; and the use of <u>signs and labels</u>. (29 CFR 1910.1030(g) (2))

Control Measures

The employer shall take appropriate preventative measures against occupational exposure. Employers shall provide PPE to employees with occupational exposure to eliminate or minimize the risk of infectious material entering their bodies. PPE is considered to be appropriate only if it does not permit blood or other potentially infectious materials to pass through or reach the employees' outer clothing, undergarments, skin, eyes, mouth or other mucous membranes under normal conditions of use. Following is a list of PPE and when it should be used.

- <u>Gloves</u>: Wear whenever hand contact with blood or other potentially infectious materials is possible. Disposable (single-use) gloves, such as examination gloves, must be replaced as soon as possible when contaminated or when their ability to function as a barrier is compromised. They are not to be reused. (29 CFR 1910.1030(d)(3)(ix)(A))
  Utility gloves can be reused if decontaminated, but must be discarded if cracked, discolored, punctured or showing any signs of deterioration. (29 CFR 1910.1030(d)(3)(ix)(c))
- <u>Masks, eye protection and face shields</u>: Use in combination whenever splashes spray or droplets of infectious materials are generated. (29 CFR 1910.1030(d)(3)(x))
- <u>Gowns, aprons and other protective clothing</u>: Wear when exposure to the body, head, feet, or clothing is possible. The type and characteristics of the covering will depend on the task and the exposure anticipated. (29 CFR 1910.1030(d)(3)(ix))
- <u>CPR mouthpieces</u>: Use when CPR is given. Mouthpieces should have a one-way valve to prevent contamination from the victim. (29 CFR 1910.1030(d)(3)(i))

HBV Vaccinations

Once employees receive training, vaccinations should be made available to those who run the risk of exposure. (29 CFR 1910.1030(f) (2))

(1910.1030(f)(2)(i) Hepatitis B vaccination shall be made available after the employee has received the training required in paragraph (g)(2)(vii)(I) and **within 10 working days of initial assignment** to all employees who have occupational exposure unless the employee has previously received the complete hepatitis B vaccination series, antibody testing has revealed that the employee is immune, or the vaccine is contraindicated for medical reasons).

Post-Exposure Evaluation and Follow-Up

Employers shall provide a confidential medical evaluation for any employees involved in an exposure incident. The purpose of this evaluation is to document the exposure route and circumstances surrounding the incident, blood testing, Human Immunodeficiency Virus (HIV)/hBV status of source and appropriate medical and psychological treatment. (29 CFR 1910.1030(f) (3))

Waste Disposal

All forms of blood or infectious materials, contaminated items that could release infectious materials or contaminated sharps must be placed in appropriate sharps containers or closable, color-coded or properly labeled leak proof biohazard waste containers or bags . Infectious waste shall be disposed of in accordance with federal, state and local regulations. (29 CFR 1910.1030(d) (4) (iii))

Tags, Labels and Bags

Warning labels shall be attached to all containers used for the storage or transport of potentially infectious materials. The labels shall be orange or red-orange with the biohazard symbol in a contrasting color. Red containers or bags can be substituted for warning labels. (29 CFR 1910.1030(g))

Housekeeping and Laundry Practices

Employers shall create a schedule for periodic cleaning and appropriate disinfecting to ensure that the worksite is kept clean and sanitary. Contaminated laundry shall be placed and transported in properly labeled or color-coded bags and containers. (29 CFR 1910.1030(d) (4)), (29 CFR 1910.1030(d) (4) (iv))

Recordkeeping

The employer shall maintain medical and training records for each employee who faces the possibility of being exposed or who has been occupationally exposed to a blood borne pathogen (29 CFR 1910.1030(h)). Employers are also required to establish and maintain a sharps injury log.

BLOOD BORNE PATHOGENS/INFECTION CONTROL

If a bio-hazardous spill occurs as part of a vehicular accident, then first aid for injured passengers should be the first priority, along with notification of appropriate medical assistance personnel. Bio-hazardous spills may also occur from an on-vehicle injury without a vehicular accident. Again, first aid provision comes first. Additionally, a bio-hazardous

spill may occur as a result of vomiting or loss of bladder control, in which case, first aid is normally not necessary. However, anytime the driver does administer first aid, latex gloves and other personal protective equipment should be used.

Contaminated items should be carefully placed in the designated bio-hazard disposal bag.

Following first aid administration, where necessary, the vehicle must be cleared of the spill.

The following steps should be followed:

9. Put on a new pair of latex gloves;
10. Contain the spill as best as possible with paper towels and/or solidifying powder
11. Clean up spill with paper towels, or if a solidifying powder is used, use a dustpan and brush.
12. Clean area of spill with the cleaning or decontamination solution and wipe with paper towels and/or fresh solidifying powder.
13. ***Place all items used to clean spill into bio-hazardous waste disposal bag.***
14. If the exterior of the disposal bag has not been contaminated by the spill, then remove both Latex gloves and place them in the disposal bag, and seal the bag.
15. If the exterior of the bio-hazardous waste disposal bag has been contaminated by the spill, seal the bag and place inside another bag.
16. ***Upon return to home base, place the plastic bag(s) into the designated disposal container.***
17. Management will have it disposed of by an appropriate medical hazard disposal organization for proper ultimate destruction.

If the exposure occurs in the field:

1. County employee/volunteer rescue member reports exposure to his or her supervisor who will complete an incident report. Exposures occurring during the hours of 8:00am to 5:00pm should be reported to Chuck Starr at 704-866-3157, Safety and Worker's Compensation Coordinator. **Supervisors** should call the County on call nurse at 919-733-4646 if the exposure occurs before 8:00am, after 5:00pm, weekends, or holidays.

2. The Safety and Worker's Compensation Coordinator or nurse on call will contact the MD for orders if it is determined to be a true exposure. They will call you back (so don't leave the phone) with instructions. You will proceed to the Safety and Worker's Compensation Coordinator office at the Administration Building, or after 5:00pm, to an agreed location for the following:

   A. Females will have a pregnancy test. Any positive findings will be called to the MD for further orders.
   B. Appropriate medicine (if needed) and lab forms for GMH-ER will be given to the employee and will then report to GMH-ER. Labs will be drawn and billed to Gaston County. The lab form should be marked STAT. If a rapid HIV test has been ordered on the source person, there may not be an order for medications unless the rapid HIV has a positive result. If medication is ordered, the employee can then take

the first dose of medication. They should **NOT** wait until they return to work or home. Time is very important in the effectiveness of the prophylaxis and needs to be started ASAP. We would like to give the first dose of medication within 2 hours of the exposure. Sheriff's office personnel should follow protocol set up with the jail medical staff.

3. Occupational Medicine will be doing the follow up with the employee. If the employee is to remain on the medication for the full 28 days, the Infectious Disease MD will also follow them.

4. The source person (the person who's bodily fluids you were exposed to) will be tested for several things including HIV (rapid). They will be informed that the county will pay for any costs. Inmates will have blood drawn by the jail nursing staff. Others (non-inmates) should report to GMH-ER for their testing. The blood should be sent STAT to GMH Lab and all forms marked STAT.

5. If the source refuses testing, we will call the magistrate and a court order can be issued. Most of the source individuals are cooperative. If they continue to refuse to be tested after the court order is obtained, they may be taken to GMH-ER to have the blood drawn while restrained. The employee does have the right to decline any medical treatment but the employee should seriously consider following the MD orders if he recommends labs and medicines.

6. The confidential test results for the employee and the source will be sent directly to the Safety and Worker's Compensation Coordinator for review and follows up with the MD.

7. If it is found that the source individual is HIV negative, then anti-viral drugs will be discontinued. It will be up to the discretion of the MD if any follow up labs will be needed. HIV positive status will be addressed immediately and you will follow up with the Infectious Disease MD.

8. Any clothing that is contaminated with bodily fluid should be removed as soon as possible, placed in a plastic bag clearly marked "Biohazard", and taken to GEMS to be laundered. Contaminated laundry should not be taken home to be washed. If the item must be dry cleaned, it must again be placed in a plastic bag clearly marked "Biohazard" prior to laundry personnel handling the soiled item.

9. Please remember it is not necessary to call the on call person unless it is a body fluid exposure. If you have been stuck with a **CLEAN** needle, etc., your supervisor should fill out the supervisor's investigative report. Please to not call the on call person for this.

10. The supervisor should always send a completed supervisor's investigative report to the Safety and Worker's Compensation Coordinator for all

exposures. This and all reports of accidents should be sent directly to the Safety and Worker's Compensation Coordinator at the Administration Building within 24 hours of the accident.

Personal Injury on the Job

1.   Any personal injury should be reported to the supervisor immediately. A supervisor's investigative report should be sent to the Safety and Worker's Compensation Coordinator within 24 hours.

2.   Call the Safety and Worker's Compensation Coordinator at **704-866-3157** during the hours of 8:00 to 5:00pm. On weekends, holidays, before 8:00am or after 8:00pm, call the on call nurse.

3.   For emergencies at other times other than those listed above, we will continue to use GMH-ER. Use common sense. If the emergency is life threatening, go straight to the ER. You may call the Safety and Worker's Compensation Coordinator after you get the employee to the hospital.

4.   Never give you BCBS card for Worker's Comp insurance. The same applies to prescriptions. The on-call nurse or the Safety and Worker's Compensation Coordinator should authorize all treatment.

5.   Any questions should be directed to the Safety and Worker's Compensation Coordinator at 704-866-3157.

SAFETY MEETING REPORT
(MONTHLY, BI-MONTHLY OR QUARTERLY)

Date:_____

Address:_____

Meeting Chairman: _____

Attendance should be documented.

Other Persons Present: _____

_____

_____

_____

_____

_____

_____

Formal Presentation (Name of presenter and topic): _____

_____

_____

_____

Other Subjects Discussed: _____

_____

_____

_____

_____

Reports on Weekly Meetings: _____

_____

_____

_____

_____

_____

Employees' Comments/Suggestions: _____

_____

_____

_____

_____

_____

Chairman's Signature_____

SAFETY TERMS AND DEFINITIONS

ACCIDENT

An unforeseen event or occurrence that results in death, injury, or property damage – *System Safety Program Training Participant's Guide*

An incident involving a moving vehicle, Includes collisions with another vehicle, object or person (except suicides) and derailment/left roadway. This also includes Personal Casualties incidents on the vehicle and entering/exiting the vehicle. – *Federal Transit Administration (FTA) - Safety Management Information Statistics (1999 SAMIS Annual Report) (2000)* http://transit-safety.volpe.dot.gov/publications/default.asp

Occurrence in a sequence of events that produces unintended injury, death or property damage. Accident refers to the event, not the result of the event. – *National Safety Council (NSC), National Safety Council Statistics Glossary [online] (Research & Statistics, 25 July 2000[15 March 2002]);* http://www.nsc.org/lrs/glossary.htm

HAZARD

Any real or potential condition that <u>can cause</u> injury, death or damage to or loss of equipment or property
- theoretical condition
- identified before an incident actually occurs
- *FTA - Implementation Guidelines for State Safety Oversight of Rail Fixed Guideway Systems (1996)* http://transit-safety.volpe.dot.gov/publications/default.asp

INCIDENT

An unforeseen event or occurrence which does not necessarily result in death, injury, contact or property damage - *FTA - Implementation Guidelines for State Safety Oversight of Rail Fixed Guideway Systems (1996)*
http://transit-safety.volpe.dot.gov/publications/default.asp

Collisions, personal casualties, derailments/left roadway, fires, and property damage greater than $1,000 associated with transit agency revenue vehicles and all transit facilities - *FTA - Safety Management Information Statistics (1993 SAMIS Annual Report) (1995)*
http://transit-safety.volpe.dot.gov/publications/default.asp

RISK

Probability of an accident multiplied by the consequences of an accident (often in $) - *System Safety Program Training Participant's Guide*

Exposure or probable likelihood of a hazard (accident, crisis, emergency or disaster) occurring at a system. Risk is measured in terms of impact and vulnerability - *FTA - Critical Incident Management Guidelines (1998)*
http://transit-safety.volpe.dot.gov/publications/default.asp

SAFETY

Freedom from those conditions that can cause death, injury, occupational illness, damage to or loss of equipment or property, or damage to the environment – *Military Standard 882-D*

Freedom from danger - *FTA - Implementation Guidelines for State Safety Oversight of Rail Fixed Guideway Systems (1996)*
http://transit-safety.volpe.dot.gov/publications/default.asp

SECURITY

Precautions taken to guard against crime, attack, sabotage, espionage, etc. – *The Learning Network, Inc., A-Z Dictionary [online] (2000-2002[15 March 2002])*
http://www.infoplease.com

Freedom from intentional danger - *FTA - Implementation Guidelines for State Safety Oversight of Rail Fixed Guideway Systems (1996)*
http://transit-safety.volpe.dot.gov/publications/default.asp

SYSTEM SECURITY

All activities associated with providing security to transit patrons and securing transit property including supervision and clerical support. Includes patrolling revenue vehicles and passenger facilities during revenue operations; patrolling and controlling access to yards, buildings and structures; monitoring security devices; and, reporting security breaches – *US Department of Transportation, Bureau of Transportation Statistics, Transportation Expressions [online](1996[15 March 2002])* http://www.bts.gov/btsprod/expr/expsearch.html

DRUG AND ALCOHOL POLICY

DRUG AND ALCOHOL POLICY

Purpose

To establish guidelines that ensures a safe, healthy and productive drug-free work environment for the employees of the Agency. (Update Drug and Alcohol testing information in you plan to reflect the ability to test safety sensitive positions anytime they are performing or just about to perform job functions).

Scope

This policy affects and applies to all Agency employees.

Policy

Being under the influence of a drug or alcohol while on the job poses serious safety and health risks to the user and to co-workers. Therefore, the Agency has established the following policy to ensure a drug-free work environment:

a) Gaston County ACCESS has zero tolerance for the use of alcohol, illegal substances, or the misuse of prescription medications during work hours or the presence of these substances in the body during work hours regardless of when consumed.

b) Drug and alcohol tests may be administered pre-employment, re-entry, post-accident, for causes or random.

c) A positive test result is any amount of alcohol or illegal substance as revealed by the test. The medical Review Officer will make the final decision as to a positive or negative test result. A positive test result will result in immediate termination.

d) Alternate types of tests may be conducted when two or more tests within twelve months are found to be inclusive or a situation warrants such tests.

e) Failure to submit to a drug/alcohol test when requested or leaving the test site without completing the test is grounds for immediate termination. Other behaviors will be considered a refusal; tampering with the specimen or not reporting for a drug test without a valid reason immediately following an accident.

f) An ongoing drug free awareness program to inform employees has been established and begins with their initial agency orientation then continues on an annual basis.

g) All employees will receive 1 hour of substance abuse awareness education as presented by a Substance Abuse Professional. All supervisory personnel will receive 1 hour of substance abuse awareness education and 1 hour of training on the physical, behavioral, speech, and performance indicators of probable alcohol misuse as presented by a Substance Abuse Professional.

h) Each employee will sign a statement of understanding that, as a condition of employment under grants providing funding for his/her position, the employee will abide by the terms of the drug free workplace statement and notify *[System name]* in writing of his/her conviction for a violation of a criminal drug statue occurring in the workplace no later than five calendar days after such a conviction.

i) An employee may voluntarily come forward and ask for rehabilitation counseling. He/she would be suspended without pay until a Substance Abuse Professional could certify that the employee is fit to return to duty. Any employee with a substance abuse problem is encouraged to seek help through the Agency Employee Assistance Program.

Administration

The Coordinator will administer this policy.

Drug and Alcohol Program

"*Prevention of Alcohol Misuse and Prohibited Drug Use in Transit Operations*," as implemented by 49 CFR Part 655 (August 2001), as amended, and to be read in conjunction with 49 CFR Part 40, requires all sub recipients receiving Federal Transit Administration funds under Capital Grant, Urbanized Area Formula Grant, or Non-Urbanized Area Formula Grant Programs to have a drug and alcohol testing program in place for all safety sensitive employees.

In addition, the U.S. Department of Transportation has issued 49 CFR Part 40, "*Procedures for Transportation Workplace Drug and Alcohol Testing Programs,*" which prescribes testing methods to be followed.

Certification must be signed by the sub recipient's governing board or other authorized individual or body in compliance with the above. Failure to certify compliance with the drug and alcohol rules will result in jeopardizing federal funding from FTA. In addition, an FTA grant recipient is subject to criminal sanctions and fines for false statements or misrepresentation under Section 1001 of Title 18 of the U.S. Code.

Drug and Alcohol Regulations

NCDOT sub recipients of specific Federal Transit Administration (FTA) funding must establish and maintain a Drug and Alcohol Testing Program in accordance with 49 CFR §655, and in consonance with 49 CFR Part 40.

To ensure compliance with FTA Drug and Alcohol Testing Program requirements public transportation providers must:

- Establish an anti-drug use and alcohol misuse program as outlined in 49 CFR § 655.11-12;

- Establish an education and training program for all covered employees as outlined in 49 CFR § 655.14;

- Establish and provide written notice to every covered employee, of the employer's anti-drug and alcohol misuse program policy, in accordance with 49 CFR § 655.15 -17;

- Establish a program that provides testing for prohibited drugs as outlined in 49 CFR § 655.21;

- Establish a program that provides testing for alcohol as outlined in <u>49 CFR § 655.31-35</u>, and in conjunction with <u>49 CFR Part 40</u>;

- Comply with the testing requirements as detailed in <u>49 CFR § 655.41-62</u>;

- Maintain in a secure location, with controlled access, all records of its anti-drug and alcohol misuse program as detailed in <u>49 CFR § 655.71</u>, and in accordance with records disclosure instructions provided in <u>49 CFR § 655.73</u>; and

- Annually prepare, maintain, and electronically complete and submit a Drug and Alcohol Management Information System (DAMIS) Report reflecting the results of its anti-drug and alcohol misuse testing programs performed for the previous calendar year. Transit agencies complete this report electronically. The NCDOT/PTD will provide DAMIS Report preparation instructions, along with a transit agency user ID# and Password to all FTA Section 5311 *sub recipients*, upon receipt from FTA.

To ensure NCDOT sub recipient compliance with FTA mandated Drug and Alcohol Testing Program and the Drug-Free Workplace requirements, the NCDOT:

- Periodically reviews each transit agency's Drug and Alcohol Program Policy for compliance;

- Conduct on-site visits to review all aspects of each transit agency's Drug and Alcohol Program that cannot be accomplished via desktop audit, such as compliance with program management requirements, records maintenance and storage review, ensuring that all applicable Drug and Alcohol Program regulations are readily available, reviewing documentation of employee training, collector compliance with regulations, and reviewing any other program compliance requirements;

- Provide technical assistance in all matters pertaining to transit agency Drug and Alcohol Program management as requested, or deemed to be appropriate;

- Provide employee/supervisor training, such as "Reasonable Suspicion Referral for Supervisors" and other program related training as available/required;

- Monitor transit agency Drug and Alcohol program management activities via accessing and reviewing the 3rd Party Administrator (TPA) Website;

- Monitor collection sites for compliance with FTA Drug and Alcohol Testing Program requirements;

- Coordinate efforts that would eventually allow individual transit agencies to review their Drug and Alcohol Testing Program activities via accessing the current TPA website;

- Collect, compile, and review all data necessary to validate each transit agency's Drug and Alcohol Management Information System (DAMIS) Report. Each transit agency prepares this report electronically. The NCDOT reviews each report and then electronically forwards the data to FTA prior to March 15 of each year.

Drug-Free Workplace Act

The Drug-Free Workplace Act of 1988 requires *some* federal contractors and *all* federal grantees to agree that they will provide drug-free workplaces as a condition of receiving a contract or grant from a federal agency.

VEHICLE MAINTENANCE

MAINTENANCE

April 17, 2007

TO: Community Transportation Systems

FROM: NCDOT/PTD

SUBJECT: Maintenance Plan

Recipients must keep Federally-funded equipment and facilities in good operating order.

Recipients must have a written maintenance plan. The maintenance plan should identify the goals and objectives of a maintenance program, which may include vehicle life, frequency of road calls, maintenance costs compared to total operating costs, etc. The maintenance program should also establish the means by which such goals and objectives will be obtained.

At a minimum, the plan should designate the specific goals and objectives of the program for preventive maintenance inspections, servicing, washing, defect reporting, maintenance-related mechanical failures, warranty recovery, vehicle service life, and vehicle records. The program must address the particular maintenance cycles for each capital item.

Recipients must have records showing when periodic maintenance inspections have been conducted on vehicles and equipment. Include information showing that the periodic maintenance program meets at least minimum requirements of the manufacturer.

Maintenance of ADA elements may be incorporated in the regular maintenance plan or addressed separately. At a minimum, the grantee must demonstrate that such features as lifts, elevators, ramps, securement devices, signage, and communications equipment are maintained and operational. The recipient is required to develop a system of maintenance checks for lifts on non-rail vehicles to ensure proper operation. Additionally, a recipient is required to remove an accessible van with an inoperable lift from service before the next day, unless no spare vehicles are available to replace that vehicle. When a vehicle with an inoperable lift is operated, the vehicle must not be in service for more than five days.

Recipients must keep written maintenance plans and checklist systems, as well as maintenance records for accessible equipment.
Recipients are required to maintain systems for recording warranty claims and enforcement of such claims. Recipients should have written warranty recovery procedures. The warranty recovery system should include warranty records and annual summaries of warranty claims submitted.

Federally funded equipment needs to be maintained whether operated directly by a recipient or by a third-party contractor. When a recipient has contracted out a portion of its operation, a maintenance plan for Federally-funded equipment should be in existence and be treated similarly to a recipient-operated service. In those cases, the third-party contractor must have in place a system to monitor the maintenance of federally funded equipment.

PREVENTIVE MAINTENANCE STANDARDS

All vehicles, wheelchair lifts and associated equipment, system owned or operating under contract with the system, is placed on a comprehensive preventive maintenance program for the purpose of *increasing safety and reducing operational costs*.

The Preventive Maintenance Plan should consist of:

- Making preventive maintenance arrangements
- Conducting a Pre/Post-Trip Inspection course for driver
- Completing a corresponding inspection checklist
- Utilizing AssetWorks Fleet Management Program to document, schedule and track equipment maintenance
- Maintaining maintenance record on file for each vehicle
- Completing statistical reporting
- Reporting common problems
- Utilizing manufacturers Preventive Maintenance Guidelines Manual
- Keeping all maintenance records for the life of the vehicle to include three (3) years after disposition

*Note: The Preventive Maintenance Program has been developed for the purpose of safety, reliability and vehicle use longevity. The guidelines are not designed to interfere with or violate the Manufacturer's Warranty Maintenance Schedule.

Gaston County ACCESS will retain all records pertaining to maintenance, service, warranty and other documents as required for vehicles, wheelchair lifts and associated equipment. The records will be maintained for at least the life of the vehicle which includes three (3) years after the vehicle's disposal.

Maintenance Records Include:
- AssetWorks Fleet Management Program documentation
- Documents showing vehicle identity
- Documents showing vehicle, wheelchair lift and associated equipment completed maintenance and inspection dates
- Documents showing mileage
- Documents identifying the contractor that provides non-owned vehicles
- Documents showing maintenance contractors' names and addresses
- Vehicle Accident Reports
- A copy of the document notifying NCDOT of a fatal accident by the close of business or the end of the working day
- A copy of the document notifying NCDOT within 24 hours of a fatal death that occurs within 30 days as a result of an accident
- Documents that report to NCDOT within 48 hours all accidents/incidents
- Documents showing completion of the driver's daily Pre/Post-Trip Inspection Checklists*
  * maintain the previous (5) years (Ref: 49 CFR 18.42)

ANNUAL PTMS INSPECTION

Form must be completed and maintained with vehicle maintenance records.

Date: _____

Vehicle: _____

Wheelchair Lift Cycle Reading: _____

Odometer Reading: _____

Inspector: _____

Inspection Key
For Each Item
OK =OK
"X" = Adjusted
"0"= Repairs Are Necessary
For Each "0" Give an Explanation

Body
___ Check windshield and other glass for cracks/damage
___ Check wheels for cracks/damage
___ Interior and exterior decals, signs, numbers (ex: railroad crossing, no turn on red, etc....)
___ Body damage
___ Destination signs for proper operation (Front, Rear, and Back)
___ General physical condition of the vehicle
___ System name completely spelled out and condition
___ Sign identifying the vehicle as "Available for Public Use" if required

Each ACCESS vehicle is assigned a number which is affixed to each vehicle in a visible location (front bumper, each side over the front tires, on the back door). The phone number and facility name is put on the vehicles when purchased.

Each driver is responsible for ensuring that periodic maintenance is reported in order for work to be performed on the vehicle assigned to him/her at Gaston County ACCESS. The driver will indicate on the Pre-Trip Inspection Form when the vehicle is within 500 miles of the next scheduled service.

All requests for service and maintenance must be given to the Lead Driver. The lead driver will enter all service request and repairs into AssetWorks, a Web-based program that NCDOT/PTD has developed and implemented to enhance the safety and reliability of public transportation vehicles that serve the citizens of North Carolina. A work order is generated through the AssetWorks program and copy of the form must be taken with the vehicle to Gaston County Fleet Maintenance (GCFM) and a copy of the form is filed in the Vehicle Maintenance Log.

In the event of a mechanical failure while the vehicle is in service, the driver will call the ACCESS office and the office will notify the Safety Officer/Trainer and/or Coordinator to report the need for service. The ACCESS office and/or the Safety Officer/Trainer will contact GCFM during normal business hours or the wrecker service at other times.

Preventative Maintenance Schedule

Regularly, Normal operations

Wash vehicle interior and exterior –need is determined by the amount of use and road conditions.

Clean the windshield wiper blades as required.

CLASS_CLASS_CODE =
FORD-PM-2011 TEMPLATE

FORD-PM-2011 TEMPLATE, A

PM Task	Description
PMMP-00	***** MULTIPOINT INSPECTION *****
PMDSC-07	WARNING SYSTEM: HORN;SWITCHES GAUGES;TROUBLE LIGHT;BACKUP
PMDSC-08	WINDSHIELD WIPERS; WIPER FLUID / SPEED; CONDITION/OPERATION
PMDSC-09	ALL GLASS: WINDSHIELD; REAR; AND SIDE GLASS FOR CONDITION
PMDSC-10	COMFORT SYSTEM: HEATER; DEFROSTER; AIR CONDITIONER-OPERATION
PMUHI20	CHECK AIR FILTER CONDITION
PMSAC29	CHECK FOR OIL LEAKS
PMSAC55	INSPECT COMPLETE EXHAUST SYSTEM AND HEAT SHIELDS
PMSAC03	STEERING TIGHT / NO SLACK
PMMP-01	SHOCKS/STRUTS: OTHER SUSPENSION COMPONENTS; LEAKS/DAMAGE
PMMP-02	BRAKE SYSTEM: LINES;HOSES;PARKING BRAKE;WHEEL END PLAY/NOISE
PMMP-02A	INSPECT BRAKE PADS & ROTORS; REPLACE IF NECESSARY
PMMP-03	ENGINE COOLING SYSTEM: HOSES AND CLAMPS
PMSOI-01	FLUIDS/LEVEL/LINES:TRANSMISSION; FILTER; POWER STEERING;AXLE
PMUHI07	BATTERY: SECURE; TERMINALS CLEAN; PERFORMING PROPERLY
PMUHI98C	INSPECT ACCESSORY DRIVE BELT(S); REPLACE IF NECESSARY
PMHBI93	ROTATE TIRES; INSPECT FOR WEAR AND TEAR
PMEXT-01	TIRES; TREAD; WEAR; WHEEL LUGS; HUBCAPS; VALVE CORES CONDIT
PMDSV02	TREAD DEPTH L/F _____/32 PRESSURE _____
PMDSV04	TREAD DEPTH L/R OUTSIDE _____/32 PRESSURE _____
PMDSV05	TREAD DEPTH L/R INSIDE _____/32 PRESSURE _____
PMRSV02	TREAD DEPTH R/F _____/32 PRESSURE _____
PMRSV04	TREAD DEPTH R/R OUTSIDE _____/32 PRESSURE _____
PMRSV05	TREAD DEPTH R/R INSIDE _____/32 PRESSURE _____
PMDC01	***** OTHER ITEMS *****
PMSAC28A	CHANGE OIL; REPLACE OIL FILTER; USE OEM RECOMMENDED OIL
PMSAC93	INSPECT WHEELS FOR END PAY AND NOISE
PMUHI05	BRAKE MASTER CYLINDER FULL / NO LEAKS
PMWDE81A	INSPECT CABIN AIR FILTER (IF EQUIPPED)
PM-QT12	CHECK OPERATION OF ALL EMERGENCY EXITS; HATCH/WINDOWS/DOORS

FORD-PM-2011 TEMPLATE, ANNUAL

PM Task	Description
PM-ANU-01	MIL INDICATOR BULB
PM-ANU-02	DLC (DIAGNOSTIC LINK CONNECTOR)
PM-ANU-03	COMMUNICATION ESTABLISHED

PM-ANU-04 MIL COMMAND ON
PM-ANU-05 MIL INDICATOR BULB
PM-ANU-06 HEADLIGHT
PM-ANU-07 PARKING LIGHT
PM-ANU-08 TAIL LIGHTS
PM-ANU-09 BEAM INDICATOR LIGHT/SWITCH
PM-ANU-10 LICENSE PLATE
PM-ANU-11 STOP LIGHTS
PM-ANU-12 DIRECTIONAL SIGNALS
PM-ANU-13 HORN
PM-ANU-14 WINDSHIELD WIPER
PM-ANU-15 REAR VIEW MIRROR
PM-ANU-16 FOOT BRAKE
PM-ANU-17 EMERGENCY BRAKE
PM-ANU-18 STEERING MECHANISM
PM-ANU-19 TIRES
PM-ANU-20 EXHAUST SYSTEM
PM-ANU-21 CLEARANCE LIGHTS (BUSES; TRUCKS; TRAILERS)
PM-ANU-22 REFLECTORS
PM-ANU-23 WINDOW TINTING VISBLE LIGHT TRANSMISSIOM. 35% TOLARANCE
PM-ANU-24 CATALYTIC CONVERTER
PM-ANU-25 AIR INJECTION SYSTEM (AIS)
PM-ANU-26 PCV VALVE
PM-ANU-27 UNLEADED GAS RESTRICTOR
PM-ANU-28 EXHAUST GAS REGULATOR (EGR)
PM-ANU-29 THERMOSTATIC AIR CONTROL (TAC)
PM-ANU-30 FUEL EVAPORATON CONROL
PM-ANU-31 OXYGEN (02) SENSOR
FORD-PM-2011 TEMPLATE, B

PM Task	Description
PMMP-00	***** MULTIPOINT INSPECTION *****
PMDSC-07	WARNING SYSTEM: HORN;SWITCHES GAUGES;TROUBLE LIGHT;BACKUP
PMDSC-08	WINDSHIELD WIPERS; WIPER FLUID / SPEED; CONDITION/OPERATION
PMDSC-09	ALL GLASS: WINDSHIELD; REAR; AND SIDE GLASS FOR CONDITION
PMDSC-10	COMFORT SYSTEM: HEATER; DEFROSTER; AIR CONDITIONER-OPERATION
PMUHI20	CHECK AIR FILTER CONDITION
PMSAC29	CHECK FOR OIL LEAKS
PMSAC55	INSPECT COMPLETE EXHAUST SYSTEM AND HEAT SHIELDS
PMSAC03	STEERING TIGHT / NO SLACK
PMMP-01	SHOCKS/STRUTS: OTHER SUSPENSION COMPONENTS; LEAKS/DAMAGE
PMMP-02	BRAKE SYSTEM: LINES;HOSES;PARKING BRAKE;WHEEL END PLAY/NOISE

PM Task	Description
PMMP-02A	INSPECT BRAKE PADS & ROTORS; REPLACE IF NECESSARY
PMMP-03	ENGINE COOLING SYSTEM: HOSES AND CLAMPS
PMSOI-01	FLUIDS/LEVEL/LINES:TRANSMISSION; FILTER; POWER STEERING;AXLE
PMUHI07	BATTERY: SECURE; TERMINALS CLEAN; PERFORMING PROPERLY
PMUHI98C	INSPECT ACCESSORY DRIVE BELT(S); REPLACE IF NECESSARY
PMHBI93	ROTATE TIRES; INSPECT FOR WEAR AND TEAR
PMEXT-01	TIRES; TREAD; WEAR; WHEEL LUGS; HUBCAPS; VALVE CORES CONDIT
PMDSV02	TREAD DEPTH L/F _____/32 PRESSURE _____
PMDSV04	TREAD DEPTH L/R OUTSIDE _____/32 PRESSURE _____
PMDSV05	TREAD DEPTH L/R INSIDE _____/32 PRESSURE _____
PMRSV02	TREAD DEPTH R/F _____/32 PRESSURE _____
PMRSV04	TREAD DEPTH R/R OUTSIDE _____/32 PRESSURE _____
PMRSV05	TREAD DEPTH R/R INSIDE _____/32 PRESSURE _____
PMDC01	***** OTHER ITEMS *****
PMSAC28A	CHANGE OIL; REPLACE OIL FILTER; USE OEM RECOMMENDED OIL
PMSAC93	INSPECT WHEELS FOR END PAY AND NOISE
PMUHI05	BRAKE MASTER CYLINDER FULL / NO LEAKS
PMWDE81A	INSPECT CABIN AIR FILTER (IF EQUIPPED)
PM-QT12	CHECK OPERATION OF ALL EMERGENCY EXITS; HATCH/WINDOWS/DOORS
PMUHI01	TRANSMISSION FLUID FULL / NO LEAKS
PM255A	LUBRICATE FRONT AXLE & U-JOINTS
PMSAC97	INSPECT HALF SHAFT DUST BOOTS; IF EQUIPPED
PMSAC91A	INSPECT STEERING LINKAGE;DRIVESHAFT;BALL/U-JOINTS;LUBRICATE
PMWDE81	REPLACE CABIN AIR FILTER (IF EQUIPPED)
PM-CAM-00P	***** PERFORM 6 MONTH CAMERA INSPECTION *****
PMSEON-1	CHECK OPERATION; ADJUSTMENT AND CONDITION OF ALL CAMERAS
PMSEON-2	CHECK CAMERA SYSTEM DVR RECORDING PROPERLY; LIGHTS ON ETC
PMSEON-3	CLEAN BACK OF CAMERA DVR WITH COMPRESSED AIR

FORD-PM-2011 TEMPLATE, C

PM Task	Description
PMMP-00	***** MULTIPOINT INSPECTION *****
PMDSC-07	WARNING SYSTEM: HORN;SWITCHES GAUGES;TROUBLE LIGHT;BACKUP
PMDSC-08	WINDSHIELD WIPERS; WIPER FLUID / SPEED; CONDITION/OPERATION
PMDSC-09	ALL GLASS: WINDSHIELD; REAR; AND SIDE GLASS FOR CONDITION
PMDSC-10	COMFORT SYSTEM: HEATER; DEFROSTER; AIR CONDITIONER-OPERATION
PMUHI20	CHECK AIR FILTER CONDITION
PMSAC29	CHECK FOR OIL LEAKS
PMSAC55	INSPECT COMPLETE EXHAUST SYSTEM AND HEAT SHIELDS
PMSAC03	STEERING TIGHT / NO SLACK
PMMP-01	SHOCKS/STRUTS: OTHER SUSPENSION COMPONENTS; LEAKS/DAMAGE

PMMP-02	BRAKE SYSTEM: LINES;HOSES;PARKING BRAKE;WHEEL END PLAY/NOISE
PMMP-02A	INSPECT BRAKE PADS & ROTORS; REPLACE IF NECESSARY
PMMP-03	ENGINE COOLING SYSTEM: HOSES AND CLAMPS
PMSOI-01	FLUIDS/LEVEL/LINES:TRANSMISSION; FILTER; POWER STEERING;AXLE
PMUHI07	BATTERY: SECURE; TERMINALS CLEAN; PERFORMING PROPERLY
PMUHI98C	INSPECT ACCESSORY DRIVE BELT(S); REPLACE IF NECESSARY
PMHBI93	ROTATE TIRES; INSPECT FOR WEAR AND TEAR
PMEXT-01	TIRES; TREAD; WEAR; WHEEL LUGS; HUBCAPS; VALVE CORES CONDIT
PMDSV02	TREAD DEPTH L/F _____/32 PRESSURE _____
PMDSV04	TREAD DEPTH L/R OUTSIDE _____/32 PRESSURE _____
PMDSV05	TREAD DEPTH L/R INSIDE _____/32 PRESSURE _____
PMRSV02	TREAD DEPTH R/F _____/32 PRESSURE _____
PMRSV04	TREAD DEPTH R/R OUTSIDE _____/32 PRESSURE _____
PMRSV05	TREAD DEPTH R/R INSIDE _____/32 PRESSURE _____
PMDC01	***** OTHER ITEMS *****
PMSAC28A	CHANGE OIL; REPLACE OIL FILTER; USE OEM RECOMMENDED OIL
PMSAC93	INSPECT WHEELS FOR END PAY AND NOISE
PMUHI05	BRAKE MASTER CYLINDER FULL / NO LEAKS
PMWDE81A	INSPECT CABIN AIR FILTER (IF EQUIPPED)
PM-QT12	CHECK OPERATION OF ALL EMERGENCY EXITS; HATCH/WINDOWS/DOORS
PMUHI01	TRANSMISSION FLUID FULL / NO LEAKS
PM255A	LUBRICATE FRONT AXLE & U-JOINTS
PMSAC97	INSPECT HALF SHAFT DUST BOOTS; IF EQUIPPED
PMSAC91A	INSPECT STEERING LINKAGE;DRIVESHAFT;BALL/U-JOINTS;LUBRICATE
PMWDE81	REPLACE CABIN AIR FILTER (IF EQUIPPED)
PMSAC52	CHANGE FUEL FILTER
PMSAC51	CHANGE TRANSMISSION FLUID AND REPLACE FILTER
PMSAC79	REPLACE WHEEL BEARING GREASE; GREASE 4X2 WHEEL BEARING SEALS
PMSFW61	REPLACE CLIMATE-CONTROLLED SEAT FILTER (IF EQUIPPED)
PM-CAM-00P	***** PERFORM 6 MONTH CAMERA INSPECTION *****
PMSEON-1	CHECK OPERATION; ADJUSTMENT AND CONDITION OF ALL CAMERAS
PMSEON-2	CHECK CAMERA SYSTEM DVR RECORDING PROPERLY; LIGHTS ON ETC
PMSEON-3	CLEAN BACK OF CAMERA DVR WITH COMPRESSED AIR

FORD-PM-2011 TEMPLATE, D

PM Task	Description
PMMP-00	***** MULTIPOINT INSPECTION *****
PMDSC-07	WARNING SYSTEM: HORN;SWITCHES GAUGES;TROUBLE LIGHT;BACKUP
PMDSC-08	WINDSHIELD WIPERS; WIPER FLUID / SPEED; CONDITION/OPERATION
PMDSC-09	ALL GLASS: WINDSHIELD; REAR; AND SIDE GLASS FOR CONDITION

PM Task	Description
PMDSC-10	COMFORT SYSTEM: HEATER; DEFROSTER; AIR CONDITIONER-OPERATION
PMUHI20	CHECK AIR FILTER CONDITION
PMSAC29	CHECK FOR OIL LEAKS
PMSAC55	INSPECT COMPLETE EXHAUST SYSTEM AND HEAT SHIELDS
PMSAC03	STEERING TIGHT / NO SLACK
PMMP-01	SHOCKS/STRUTS: OTHER SUSPENSION COMPONENTS; LEAKS/DAMAGE
PMMP-02	BRAKE SYSTEM: LINES;HOSES;PARKING BRAKE;WHEEL END PLAY/NOISE
PMMP-02A	INSPECT BRAKE PADS & ROTORS; REPLACE IF NECESSARY
PMMP-03	ENGINE COOLING SYSTEM: HOSES AND CLAMPS
PMSOI-01	FLUIDS/LEVEL/LINES:TRANSMISSION; FILTER; POWER STEERING;AXLE
PMUHI07	BATTERY: SECURE; TERMINALS CLEAN; PERFORMING PROPERLY
PMUHI98C	INSPECT ACCESSORY DRIVE BELT(S); REPLACE IF NECESSARY
PMHBI93	ROTATE TIRES; INSPECT FOR WEAR AND TEAR
PMEXT-01	TIRES; TREAD; WEAR; WHEEL LUGS; HUBCAPS; VALVE CORES CONDIT
PMDSV02	TREAD DEPTH L/F _____/32 PRESSURE _____
PMDSV04	TREAD DEPTH L/R OUTSIDE _____/32 PRESSURE _____
PMDSV05	TREAD DEPTH L/R INSIDE _____/32 PRESSURE _____
PMRSV02	TREAD DEPTH R/F _____/32 PRESSURE _____
PMRSV04	TREAD DEPTH R/R OUTSIDE _____/32 PRESSURE _____
PMRSV05	TREAD DEPTH R/R INSIDE _____/32 PRESSURE _____
PMDC01	***** OTHER ITEMS *****
PMSAC28A	CHANGE OIL; REPLACE OIL FILTER; USE OEM RECOMMENDED OIL
PMSAC93	INSPECT WHEELS FOR END PAY AND NOISE
PMUHI05	BRAKE MASTER CYLINDER FULL / NO LEAKS
PMWDE81A	INSPECT CABIN AIR FILTER (IF EQUIPPED)
PM-QT12	CHECK OPERATION OF ALL EMERGENCY EXITS; HATCH/WINDOWS/DOORS
PMUHI01	TRANSMISSION FLUID FULL / NO LEAKS
PM255A	LUBRICATE FRONT AXLE & U-JOINTS
PMSAC97	INSPECT HALF SHAFT DUST BOOTS; IF EQUIPPED
PMSAC91A	INSPECT STEERING LINKAGE;DRIVESHAFT;BALL/U-JOINTS;LUBRICATE
PMWDE81	REPLACE CABIN AIR FILTER (IF EQUIPPED)
PMSAC57A	REPLACE SPARK PLUGS IF NECESSARY
PMSAC63	CHANGE MOTORCRAFT PREMIUM GOLD ENGINE COOLANT
PMSAC68	REPLACE REAR AXLE FLUID ON DANA AXLES; SYNTHETIC LUBRICANT
PM-CAM-00P	***** PERFORM 6 MONTH CAMERA INSPECTION *****
PMSEON-1	CHECK OPERATION; ADJUSTMENT AND CONDITION OF ALL CAMERAS
PMSEON-2	CHECK CAMERA SYSTEM DVR RECORDING PROPERLY; LIGHTS ON ETC
PMSEON-3	CLEAN BACK OF CAMERA DVR WITH COMPRESSED AIR

FORD-PM-2011 TEMPLATE, E

PM Task	Description

PMMP-00	***** MULTIPOINT INSPECTION *****
PMDSC-07	WARNING SYSTEM: HORN;SWITCHES GAUGES;TROUBLE LIGHT;BACKUP
PMDSC-08	WINDSHIELD WIPERS; WIPER FLUID / SPEED; CONDITION/OPERATION
PMDSC-09	ALL GLASS: WINDSHIELD; REAR; AND SIDE GLASS FOR CONDITION
PMDSC-10	COMFORT SYSTEM: HEATER; DEFROSTER; AIR CONDITIONER-OPERATION
PMUHI20	CHECK AIR FILTER CONDITION
PMSAC29	CHECK FOR OIL LEAKS
PMSAC55	INSPECT COMPLETE EXHAUST SYSTEM AND HEAT SHIELDS
PMSAC03	STEERING TIGHT / NO SLACK
PMMP-01	SHOCKS/STRUTS: OTHER SUSPENSION COMPONENTS; LEAKS/DAMAGE
PMMP-02	BRAKE SYSTEM: LINES;HOSES;PARKING BRAKE;WHEEL END PLAY/NOISE
PMMP-02A	INSPECT BRAKE PADS & ROTORS; REPLACE IF NECESSARY
PMMP-03	ENGINE COOLING SYSTEM: HOSES AND CLAMPS
PMSOI-01	FLUIDS/LEVEL/LINES:TRANSMISSION; FILTER; POWER STEERING;AXLE
PMUHI07	BATTERY: SECURE; TERMINALS CLEAN; PERFORMING PROPERLY
PMUHI98C	INSPECT ACCESSORY DRIVE BELT(S); REPLACE IF NECESSARY
PMHBI93	ROTATE TIRES; INSPECT FOR WEAR AND TEAR
PMEXT-01	TIRES; TREAD; WEAR; WHEEL LUGS; HUBCAPS; VALVE CORES CONDIT
PMDSV02	TREAD DEPTH L/F _____/32 PRESSURE _____
PMDSV04	TREAD DEPTH L/R OUTSIDE _____/32 PRESSURE _____
PMDSV05	TREAD DEPTH L/R INSIDE _____/32 PRESSURE _____
PMRSV02	TREAD DEPTH R/F _____/32 PRESSURE _____
PMRSV04	TREAD DEPTH R/R OUTSIDE _____/32 PRESSURE _____
PMRSV05	TREAD DEPTH R/R INSIDE _____/32 PRESSURE _____
PMDC01	***** OTHER ITEMS *****
PMSAC28A	CHANGE OIL; REPLACE OIL FILTER; USE OEM RECOMMENDED OIL
PMSAC93	INSPECT WHEELS FOR END PAY AND NOISE
PMUHI05	BRAKE MASTER CYLINDER FULL / NO LEAKS
PMWDE81A	INSPECT CABIN AIR FILTER (IF EQUIPPED)
PM-QT12	CHECK OPERATION OF ALL EMERGENCY EXITS; HATCH/WINDOWS/DOORS
PMUHI01	TRANSMISSION FLUID FULL / NO LEAKS
PM255A	LUBRICATE FRONT AXLE & U-JOINTS
PMSAC97	INSPECT HALF SHAFT DUST BOOTS; IF EQUIPPED
PMSAC91A	INSPECT STEERING LINKAGE;DRIVESHAFT;BALL/U-JOINTS;LUBRICATE
PMWDE81	REPLACE CABIN AIR FILTER (IF EQUIPPED)
PMSAC52	CHANGE FUEL FILTER
PMSAC51	CHANGE TRANSMISSION FLUID AND REPLACE FILTER
PMSAC79	REPLACE WHEEL BEARING GREASE; GREASE 4X2 WHEEL BEARING SEALS
PMSFW61	REPLACE CLIMATE-CONTROLLED SEAT FILTER (IF EQUIPPED)

PMSAC57A	REPLACE SPARK PLUGS IF NECESSARY
PM-CAM-00P	***** PERFORM 6 MONTH CAMERA INSPECTION *****
PMSEON-1	CHECK OPERATION; ADJUSTMENT AND CONDITION OF ALL CAMERAS
PMSEON-2	CHECK CAMERA SYSTEM DVR RECORDING PROPERLY; LIGHTS ON ETC
PMSEON-3	CLEAN BACK OF CAMERA DVR WITH COMPRESSED AIR

PRE-TRIP INSPECTION

Pre-trip inspections are crucial to the success of Gaston County ACCESS' Preventative Maintenance Program. Each driver will inspect his or her vehicle before leaving the parking area by completing the Pre-Trip Vehicle Inspection Form. The completed checklist must be submitted to the Safety Officer/Trainer at the end of the driver's shift if no visible problems were detected. If a problem was detected during the inspection the driver will immediately report to the office so that necessary maintenance can be noted and scheduled accordingly. Drivers must sign each checklist for each vehicle used that day.

Under the Hood

Check for problems under the hood at the beginning of your inspection before starting the engine. It is easier and safer when the engine is cool.

Check the oil, radiator and battery fluid levels. If low, make a note of it on your inspection checklist. If any fluids are below the safe level, contact the office and or see the Safety Officer/Trainer for assistance.

Also, check hoses for cracks or possible leaks and belts for any visible damage. Report any wear on the checklist, as soon as it begins to show.

Vehicle Interior

Since you will need to leave the vehicle compartment while the vehicle is running, it is a good idea to put chocks behind the wheels before starting the motor.

Begin while seated behind the steering wheel.
First, put on the parking brake.
Then, turn on the ignition.
Check the oil pressure, fuel and alternator gauges.

If the oil pressure light stays on or the gauge shows the oil pressure to be dangerously low, turn the motor off until the problem can be corrected. Alert the office and the office will notify the Safety Officer/Trainer and document on your pre-trip inspection form.

If the alternator or generator light stays on, the battery may not be charging. To guard against the possibility of becoming stranded along the route by a dead battery, have the problem located and corrected right away.

Check the windshield wipers to make sure they are working and not worn or stripped.

During the pre-trip inspection drivers should do regular checks of the camera system. Before beginning each shift, make sure they check that the diagnostics alarm button light is a solid green. A flashing green light or no light at all, indicates a recording problem that should be reported to their supervisor immediately.

Vehicle Exterior

Turn on all exterior lights. With the vehicle in park and the emergency brake still on, begin the exterior check from the front of the vehicle.

During the exterior inspection, be sure to note and report on the incident form any evidence of fresh damage to the vehicle. Reporting such damage now may save you a lengthy and difficult explanation or report later. Space is also provided for you on the Daily Vehicle Inspection Checklist to note and describe any exterior damage.

Check the headlights, signal lights, emergency flashers and clearance lights to make sure they are working. (You may need a co-worker's assistance).

Check the left front tire for any signs of road damage or under-inflation.
> A soft tire is very susceptible to severe road damage.
> An over-inflated tire causes a bumpier and less comfortable ride especially for   elderly or disabled passengers.
> Check the condition of the side marker light.

Move to the back of the vehicle and inspect the rear left tire or duals for obvious damage.

While at the back of the vehicle, check the tail lights, the brake lights, turn signal lights, emergency flashers and any other clearance lights, reflectors or signs. (This will require assistance). Make sure they are free of mud and dirt buildup. Carry a rag with you to clean any dirty lights, which may be hard to see even after dark.
If there are any other lights or outside signs for your boarding doors or lifts, make sure they are in place and clean.

Next, look under the vehicle. Make sure there are no foreign or unfamiliar objects hanging down or wedged underneath. Also, check to see if there are any puddles or vehicle fluids under the vehicle. If the vehicle is leaking fluid, report it to your supervisor.

Move to the front of the vehicle and examine the right front tire in the same manner as the left tire and check the condition of the side marker light.

Adjust each of your mirrors so that you can see what you need to see from your normal driving position. When you are adjusting your mirrors, keep in mind what you want to be able to see within your safety zone.

Test your horn to make sure it works.

Turn the steering wheel gently to make sure it is not loose.

Push on the brake pedal. If the tension feels spongy or soft, note this on your checklist. Your brakes may need to be adjusted.

Check the blower fan to see if it works so you'll be able to use the heater, defroster or air conditioner.

Check the interior lights. If any lights are not working, note this on your checklist.

Note on your checklist anything in the interior of the vehicle that needs attention

Daily Pre/Post-Trip Inspection Sheet AM or PM (circle one)

Driver _____ **Date** _____
Vehicle _____ **Mileage** _____ **Next Service Due** _____

The items on this form should be checked daily. A separate sheet should be filled out for each vehicle driven. These forms are due DAILY. Place an X by any item that needs attention. Place a check mark by the rest. Any discrepancies should be detailed on the bottom of this sheet.

_____	Ignition Key
_____	Current Vehicle Registration
_____	Check communications (two way check)
_____	Visual Inspection for Exterior Damage/Leaks/Loose Items
_____	Check inside Engine compartment for Leaks/Loose Items
_____	Oil Level
_____	Washer Fluid Level
_____	Coolant Level
_____	Brake Fluid Level
_____	Power Steering Fluid Level
_____	Start Engine and Check Transmission Fluid (Fluid should be hot)
_____	Check Tires for wear and pressure(visually): LF ____ LR ____ RF ____ RR ____
_____	Check for triangular flares
_____	Check inside for proper Cleaning
_____	Check Wiper Blades
_____	Check all Gauges to ensure they are working
_____	Check Horn and Backup Alarm
_____	Check Heater/Defroster
_____	Check Windshield Wipers/ Washers
_____	Check Headlights/Signal lights/4way flashers/Tail lights/Backup lights/horn/Strobe light if installed
_____	Check lift, run one complete cycle. Cycle Count (If Equipped)____
_____	Check interior lights
_____	Check Mirrors for damage and adjustments
_____	Check fuel level *(FULL. PROPANE VEHICLES; gas no less than ¼ full)*
_____	Check First Aid Kit on board and full
_____	Check Fire Extinguisher on board/Gauge showing charged, proper seal & pin
_____	Check adequate tie-downs/tie down tracks (must be clean and stored)
_____	Check BIOHAZ KIT (Sealed)
_____	Web Cutter
_____	Check Camera System: check that the diagnostics alarm button light is solid green
_____	Check continually, as you drive, for any strange smells, sounds, vibrations, or anything that just doesn't feel right.
_____	Propane gauge properly registers fuel levels. *(may take mileage to determine)*

The following discrepancies were noted (Use reverse side if necessary):_____

_____

Driver's Signature: _____ **Date:** _____

Corrective action taken: _____

Supervisor's Signature: _____ **Date:** _____

ONBOARD SAFETY EQUIPMENT

The following items have been placed in all vehicles:

Seat Belts - An adjustable driver's restraining belt that complies with FMVSS 209 (Seat Belt Assemblies) and FMVSS 210 (Seat Belt Anchorages) regulations

Fire Extinguisher - Include a fully charged dry chemical or carbon dioxide fire extinguisher that has at least a 1A:BC rating and bears the Underwriter's Laboratory, Inc. label. The extinguisher should be accessible and must be securely mounted in a visible place or a clearly marked compartment.

Red Reflector - Vehicles should be equipped with three (3) portable red reflector warning devices in compliance with North Carolina Statutes. The triangle case must be mounted to the vehicle.

Web Cutter – Must be visible and easily accessible by the vehicle driver.

Blood borne Pathogen Kit – The kit must fully stocked at all times Kit includes disposable gloves for your hands, disinfectant spray for decontamination of any spill, paper towels for clean up, absorbent powder for clean up, approved bags & containers for proper disposal, dust pan, brush and tongs for handling sharps items, mouth and nose mask and disinfectant towelettes for immediate hand cleaning)

First Aid Kit – The kit must fully stocked at all times Kit should consist of the following items:

Bandage Compress	Sting, Kill Swabs
Gauze Pads	Instant Cold Pack
Triangular Bandages	Sterile Buffered Isotonic Eyewash Kit
Gauze Bandages	Adhesive Bandages
Triple Antibiotic Ointment	Adhesive Tape
CPR Micro-shield Rescue Breather & Gloves	Disposable Gloves
Rescue Blanket	Bum Spray
Alcohol Wipes	Scissors

Maintenance Repair Request Form

VEHICLE#_____MILEAGE_____

☐   Air Conditioner _____

☐   Belts _____

☐   Brakes _____

☐   Battery _____

☐   Oil Change (Last Oil Change Mileage) _____

☐   Lights _____

☐   Lift _____

☐   Radiator _____

☐   Transmissions _____

☐   Tires _____

☐   Other: _____

Driver _____ Date in Fleet Maintenance _____

Date _____ Date out of Fleet Maintenance _____

Fleet Maintenance signature_____Date_____

ACCESS   staff   signature
_____Date_____

*PLEASE NOTE THE SERVICE NEEDED IN THE SPACE PROVIDED.

SECURITY

Security

Purpose

The overall purpose of Gaston County ACCESS's Security Program is to optimize -- within the constraints of time, cost, and operational effectiveness -- the level of protection afforded to Gaston County ACCESS's vehicles, equipment, facilities, passengers, employees, volunteers and contractors, and any other individuals who come into contact with the system both during normal operations and under emergency conditions.

The security of passengers and employees is paramount to promoting the objectives of FTA, NCDOT and there partner organizations in developing a Security Program. Gaston County ACCESS will take all reasonable and prudent actions to minimize the risk associated with intentional acts against passengers, employees and equipment/facilities. To further this objective, Gaston County ACCESS has developed security plans and procedures and emergency response plans and procedures. The plans have been coordinated with local law enforcement, emergency services and with other regional transit providers, which addresses the conduct of exercises in support of their emergency plans, and assessment of critical assets and measures to protect these assets.

Goals
1. The Security Program provides Gaston County ACCESS with a security and emergency preparedness capability that will:

2. The Security Program's number one goal is the protection and safety of system employees, passengers, vehicles and equipment.

3. Ensure that security and emergency preparedness are addressed during all phases of system operation, including the hiring and training of agency personnel; the procurement and maintenance of agency equipment; the development agency policies, rules, and procedures; and coordination with local public safety and community emergency planning agencies.

4. Promote analysis tools and methodologies to encourage safe system operation through the identification, evaluation and resolution of threats and vulnerabilities, and the on-going assessment of agency capabilities and readiness.

5. Create a culture that supports employee safety, equipment/facility protection and security and safe system operation (during normal and emergency conditions) through motivated compliance with agency rules and procedures and the appropriate use and operation of equipment.

Objectives

In this new environment, every threat cannot be identified and resolved, but Gaston County ACCESS can take steps to be more aware, to better protect passengers, employees, facilities and equipment, and to stand ready to support community needs in response to a major event. To this end, our Security Program has five objectives:

1. Achieve a level of security performance and emergency readiness that meets or exceeds our requirements
2. Increase and strengthen community involvement and participation in the safety and security of our system
3. Develop and implement a vulnerability assessment program, and based on the results of this program, establish a course of action for improving physical security measures and emergency response capabilities
4. Expand our training program for employees, volunteers and contractors to address security awareness and emergency management issues
5. Enhance our coordination with NCDOT/PTD regarding security and emergency preparedness issue

PROGRAM GUIDELINES

Listed below are the actions taken to ensure that Gaston County ACCESS is in compliant with all FTA and NCDOT mandated regulatory requirements and polices.

1. The Security Plan will be reviewed annually and signed by (SSP-001, 6.3).
2. Distribute Security Plan to key staff members (SSP-001, 6.4).
3. Post Security Plan on bulletin board so that all employees can read.
4. Conduct monthly briefings with employees to discuss security awareness (SSP-001, 6.5).
5. Establish a plan to monitor facilities and vehicles on a regular basis (SSP-001, 6.6).
6. Delegate and assign security responsibilities (SSP-001, 6.7).
7. The Coordinator will be made aware of all security issues and will work with management to develop possible solutions (SSP-001, 6.8).
8. Establish procedures to control access to secure areas and vehicle operations (SSP-001, 6.9).
9. Facilities and vehicles are monitored by local law enforcement by the use of random patrols (SSP-001, 6.10).
10. After normal hours of operation the facility and vehicles are secured and all external lights are turned on (SSP-001, 6.11).
11. Brief all employees on required reporting procedures for reporting suspicious people, activities, packages, devices or vehicles (SSP-001, 6.13).
12. Brief all employees on required actions to take to protect themselves and passengers in case of an explosion or evacuation when a suspicious package is identified (SSP-001, 6.14).
13. Train all managers and supervisors in security incident management (SSP-001, 6.15).
14. Develop procedures to respond to bomb threats or similar threats to include evacuation procedures, search procedures and notification of local authorities (SSP-001, 6.16).
15. Develop safety and emergency response policies...brief all personnel (SSP-001, 6.17).
16. Develop a policy on responding to passenger, vehicle or traffic emergencies (SSP-001, 6.18).
17. Devise procedures to show appropriate degree of supportiveness for drivers when emergency situations occur (SSP-001, 6.20).
18. Inform law enforcement and emergency response personnel of planned changes to system facilities, operations, etc., (SSP-001, 6.21).
19. Establish policy and procedures to coordinate training exercises with law enforcement and emergency service personnel (SSP-001, 6.22).
20. Develop an Emergency Management Plan which is integrated with Regional Emergency Management Plans (SSP-001, 6.23).

21. Establish Mutual Aid Agreement with regional public agencies such as local government, Fire and Police, etc...to coordinate actions during natural or other disasters (SSP-001, 6.24).
22. Assign and brief roles/responsibilities employees have during various emergencies (SSP-001, 6.25).

FTA's Top 20 Security Program Action Items for Transit Agencies

The following Action items identify the most important elements that transit agencies should incorporate into their System Security Program Plans. These top twenty (2) items are based on good security practices identified through FTA's Security Assessments and Technical Assistance provided to the largest transit agencies. Specific information on these elements may be found in FTA's *Transit System Security Program Planning Guide*. FTA is working with transit agencies to encourage them to incorporate these practices into their programs.

Management and Accountability

1. Written security program and emergency management plans are established.

2. The security plan is updated to reflect anti-terrorist measures and any current conditions.

3. The security plan is an integrated system security program, including regional coordination with other agencies, security design criteria in procurements and organizational charts for incident command and management systems.

4. The security plan is signed, endorsed and approved by top management.

5. The security program is assigned to a senior level manager.

6. Security responsibilities are defined and delegated from management through to the front line employees.

7. All operations and maintenance supervisor, forepersons, and managers are held accountable for security issues under their control.

Security Problem Identification

8. A threat and vulnerability assessment resolution process is established and used.

9. Security sensitive intelligence information sharing is improved by joining InfracGuard, the FBI Regional Task Force and the Surface Transportation Intelligence Sharing & Analysis Center (SAC); security information is reported through the National Transit Database (NTD).

Employee Selection

10. Background investigations are conducted on all new front-line operations and maintenance employees (i.e., criminal history, motor vehicle records, and credit history).

11. Criteria for background investigations are established.

Training

12. Security orientation or awareness materials are provided to all front-line employees.

13. Ongoing training programs on safety, security and emergency procedures by work area are provided.

14. Public awareness materials are developed and distributed on a system wide basis.

Audits and Drills

15. Periodic audits of security policies and procedures are conducted.

16. Tabletop and functional drills are least once every six months and full-scale exercises, coordinated with regional emergency response providers, are performed at least annually.

Document Control

17. Access to documents of security critical systems and facilities are controlled.

18. Access to security sensitive documents is controlled.

Access Control

19. Background investigations are conductors of contractors or others who require access to security critical facilities, and ID badges are used for all visitors, employees and contractors to control access to key critical facilities.

Homeland Security

20. Protocols have been established to respond to the Office of Homeland Security Threat Advisory Levels.

Reporting a Crime, Incident or Suspicious Activity

In an Emergency

To report crimes in progress call the Police immediately at 9-1-1. Dial 9-1-1 to report fires, report suspicious people, activities, packages, devices substances, unknown vehicles and medical emergencies as well. Dialing 9-1-1 from any telephone, including pay phones, will connect you directly to the Police Department.

Crime in Progress

Crimes can be averted and suspects apprehended more quickly if suspicious activity is reported promptly. If someone's actions or the situation is disturbing, threatening, or out of the ordinary, call the Police Department. Officers will assess the situation and take the necessary and appropriate action.

Reporting Suspicious Activities, Persons or Vehicles

Report suspicious behavior or circumstances to communications at 704-866-3300 (for non-emergencies) or 911 in an emergency. **What is suspicious activity?** Generally, if you trust

your instincts, they'll tell you what is suspicious about someone's actions. Below, we've listed some types of behavior commonly associated with criminal activity to help "educate your instincts."

Suspicious Persons or Activities

- Any person going door-to door in a residential neighborhood. A person is especially suspicious if, after a few houses visited, one or more of them goes into a back or side yard. More suspicious if another remains in the front when this occurs. (Possible lookout for a burglary in progress inside.
- Waiting in front of a house or business. Particularly suspicious if owners are absent- or business establishment is closed. (Possible burglary, theft, or trespass in progress.
- Non-Resident going into back or side yard of house. Suspicious under almost any circumstances. (Possible burglary or trespass in progress.
- Person running. Suspicious especially if something of value is being carried (possibly fleeing scene of crime).
- Exhibiting unusual mental or physical symptoms. (Possibly injured, or under the influence of drugs, or otherwise needing medical or psychiatric assistance.)
- Carrying property, depending upon the circumstance. For example, if at an unusual hour or in an unusual place, and if the property is not wrapped, as if it had just been purchased. (Possible subject leaving the scene of a burglary, robbery or theft.)
- Much human traffic to and from residence. Not suspicious unless it occurs on a daily or very regular basis, especially during late or unusual hours. (Possible vice or narcotics activities, or "fence" operation.)

Suspicious Vehicles

- Certain moving vehicles. Especially slow moving vehicles at daytime/night, without lights, or if the course appears to be aimless or repetitive. This is suspicious in any location, but particularly in areas of schools, parks, or playgrounds. (Possible significance: "casing" for places to rob or burglarize. Drug pusher or sex offender.)
- Certain parked and occupied vehicles. May contain one or more persons, especially significant if observed at an unusual hour. (Possible significance: lookout for a burglary or robbery in progress. True, even if occupants appear to be lovers.)
- Vehicles being loaded with valuables. Suspicious if parked in front of a closed business or unattended residence, even if the vehicles is a legitimate looking commercial unit, possibly bearing a sign identifying it as a repair vehicle, moving van, etc. (Possible significance: burglary or other theft in progress.)
- Abandoned vehicle. (Possible stolen car.)
- Vehicle containing weapons. Suspicious under any circumstances. (Possible significance: owner may engage in criminal activity.)
- Other unusual activity involving vehicles. Persons attempting to enter a locked vehicle, especially at night or in a parking lot. (Possible significance: burglary, theft or malicious mischief in progress.)
- Person detaching mechanical parts or accessories from a vehicle. Especially at night in the street or in a parking lot. (Possible significance: Theft or malicious mischief in progress.)
- Objects thrown from a vehicle, especially while traveling at high speed. (Possible significance: disposal of contraband or garbage dumping.)

135

- Property in vehicles. Not suspicious unless the property is not normally found in vehicles, especially if observed at unusual hours, or if TV sets, stereos, tape decks, or auto parts are involved. (Possible significance: stolen property.)
- Certain parked and occupied vehicles may contain one or more persons. Especially significant if observed at an unusual hour.

After hour's numbers:

Cheree Wilson   704-913-6540

Twanna Littlejohn   980-925-9200

WORKPLACE SECURITY ASSESSMENT FORM

Facility (Worksite): _____

                  Location:_____

                  Date:_____

                  Inspection No.:_____

Describe the physical layout of the establishment. Indicate its location to other businesses or residences in the area and access to the street. _____

_____

_____

Number/gender of employees on-site between 10 p.m. and 5 a.m. _____

Describe nature and frequency of client/customer/passenger/other contact:_____

_____

Yes   No

❑   ❑   Are cash transactions conducted with the public during working hours? If yes, how much cash is kept in the cash register or in another place accessible to a robber?

_____

Yes   No

❑   ❑   Is there safe or lock-box on the premises into which cash is deposited?

What is the security history of the establishment and environs?_____

_____

_____

What physical security measures are present?_____

_____

_____

Yes   No

❑   ❑   Has security training been provided to employees? If so, has the training been effective?

Security Incident Recording Form

Date of Incident:_____   Time of Incident:_____AM/PM

Location:_____

# of Fatalities:_____# of Injuries:_____   Property Damage Estimate: $_____

Types of Security Incidents: Check all that apply.

Homicide	☐	Burglary	☐	Motor Vehicle Theft	☐
Forcible Rape	☐	Bombing	☐	Chemical or Biological Release	☐
Robbery	☐	Arson	☐	Aggravated Assault	☐
Hijacking	☐	Bomb Threat	☐	Kidnapping	☐
Other	☐				

Description of Incident: *Attach law enforcement report(s) if available.*

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

Recorded By:_____Date:_____

Title:_____Phone #:_____

ACCESS Daily Security Checks

Name	Date	Time	**Area Check Findings** Employee Parking, Vehicle Parking, Building	**Area Check Secure** Employee Parking, Vehicle Parking, Building Area Secure/ Initial

EMERGENCY MANAGEMENT

Emergency Management

Before Disaster Strikes
- Develop a workable Plan
- Work with your colleagues and counterparts in the police department, fire department, health department, public buildings department, and emergency management office to develop a plan that will be successful
- Review your plan regularly and update it when your system changes or new threats emerge
- Plan for the worst. Determine what you will do if...
  - ☐ Normal communication system (television, web, radio, telecommunication) are not available
  - ☐ Electrical power is cut off
  - ☐ There are massive deaths or injuries
  - ☐ There are air-borne chemical or biological hazards

- Practice, Practice, Practice
  - ☐ Conduct regular emergency/disaster drills (not just fire drills) to keep skills sharp and your plan up-to-date
  - ☐ Build interagency relationship; every level of transit leadership should personally know his/her counterparts in the agencies and organizations who will be responding to an emergency situation

- Some Things that Really Matter
  - ☐ Put the resources in place to execute your plan – people, equipment, facilities
  - ☐ Identify alternative means of transportation for the transit-using public in case one or more of your primary modes is disabled
  - ☐ Radio communication capability is essential because cell phones are not reliable during the emergencies; be sure you have multiple communication systems, in case one or more is inoperative
  - ☐ Conduct criminal and credit background checks on every employee
  - ☐ Make sure every employee has a photo identification and require that it be displayed at all times

Emergency Response
- Establish Command Central
  - ☐ Immediately set up a joint operations center so that your key responders can talk to each other face-to-face and make joint decisions

  Although it was not clear at the outset whether there was a terrible accident or a terrorist incident, the command center leadership made the decision to respond to the situation as a terrorist attack. As a result, the NYC transit authority immediately evacuated all trains, passengers and transit employees from the World Trade Center area – and there were no transit-related deaths or serious injuries and no equipment losses as a result of the collapsed building.

- Improvise!
  - ☐Be ready and willing to improvise; even a good plan can't anticipate everything

141

NYC Transit made the decision to let everyone leave the city for free; this decision made *the evacuation process quicker and built tremendous goodwill with the public.*

In the Aftermath
- Communicate with the Public
  - ☐ Use your website to communicate your service plans and availability with the public on a real-time basis.

- NYC Transit has been getting 10 million hits a day, compared to a usual 200,000 hits, and updates its site every 2 hours even if no substantive changes to service have been made.

    ☐ Work with local television and radio stations to get information about closings and alternative routes to the public

- Restore Public Confidence
  - ☐ Increase law enforcement visibility; put a uniformed officer on every train, if possible, to reassure the public and deter potential threats
  - ☐ Tell people – with brochures, ads, and announcement – how they can help enhance security

Emergency Evacuation and Fire Prevention Plan Training

Date:_____   Location:_____

Instructor:_____Title:_____

Emergency Evacuation Plan Elements to be Reviewed

- ❑ Emergency Escape Procedures
- ❑ Escape Route Assignments
- ❑ Special Procedures for Personnel to Operate Critical Equipment
- ❑ Procedures to Account for Employees
- ❑ Special Rescue and Medical Personnel
- ❑ Employee Training Programs

Fire Prevention Plan Elements to be Reviewed

- ❑ **Major Workplace Fire Hazards**
- ❑ Fire Prevention Practices
- ❑ Fire Equipment Maintenance Personnel
- ❑ Means of Reporting Fires and other Emergencies
- ❑ Alarm Systems
- ❑ Personnel Responsible for Control of Fuel Source Hazards
- ❑ Proper Maintenance Procedures
- ❑ Proper Housekeeping

Other Elements to be Reviewed

- ❑ Names and Titles of Emergency and Fire Prevention Plan Coordinators
- ❑ Emergency and Fire Prevention Plan Availability

Employees Trained

Name/SS#	Work Location/Unit	Job Title	Signature

Instructor's Signature: _____

External Emergency Plan

Notification of Emergency

When notice has been received that an event has occurred or the potential of an event occurring, which has or may produce a large number of casualties, the following information should be obtained by the person receiving the information:

1. Name of person making notification and from what telephone number.
2. Location of emergency including address.
3. Estimated number of casualties.
4. Type of emergency (fire, explosion, plane crash, natural, weather related, etc.).
5. Time call received.
6. Estimated time of emergency event occurrence.

The person receiving the call shall then notify the Safety Officer/Trainer and/or Safety Officer.

Activation of Emergency Action Plan

If the decision is made to implement the External Emergency Plan, the following actions shall be taken:

Coordinator will:

1. Act under guidance of trained experts when available.

2. Organize the Emergency Action Plan.

3. Assess the situation and make appropriate decisions for passenger and employee safety as situation demands.

4. Be responsible for the notification of the "all clear".

5. Provide information for media release.

INTERNAL EMERGENCY PLAN

Activation of Internal Emergency Plan

1. The Dispatcher should be notified promptly of any emergency situation using 10-code.
2. Dispatcher will call "911" to notify County Communications of situation giving as much information as possible.
3. The dispatcher will keep records of all incoming calls that involve the emergency and relay them to the Safety Officer/Trainer. The Safety Officer/Trainer will notify Coordinator.
4. If the Coordinator implements evacuation, see Evacuation Plan.

Coordinator Will:

1. Initiate Emergency Action Plan if deemed necessary and be the contact at the *[Disaster Operations (Board Room).]*
2. Provides a means to inform staff of the emergency and provide updates.
3. Provide the news media with information release.
4. Provide personnel to assist Emergency Operations.
5. Provide agencies with vehicle layouts and/or blueprints of the affected area.
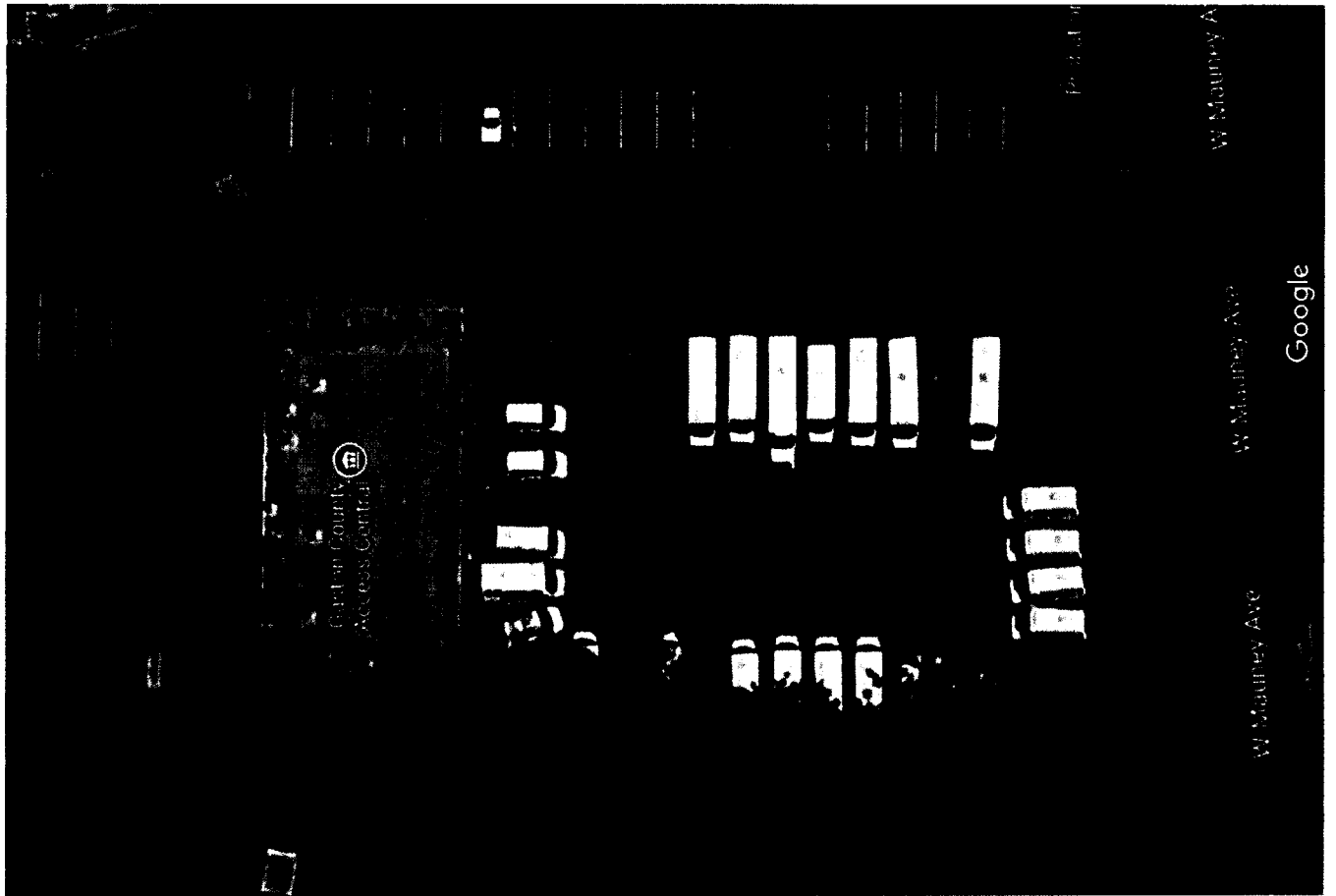
ACCESS Building Map

Rally Point

X

Employee Parking Lot

County Vehicle Parking Area

Exit

101 Office		102 Office
103 Office		104 Conference Room
Storage Room	105 Training Room	106 Radio
stairs		Copier

Exit

| | 108 Office |

Janitorial Closet

| Restroom | Restroom | 110 Office | 109 Break Area |

146
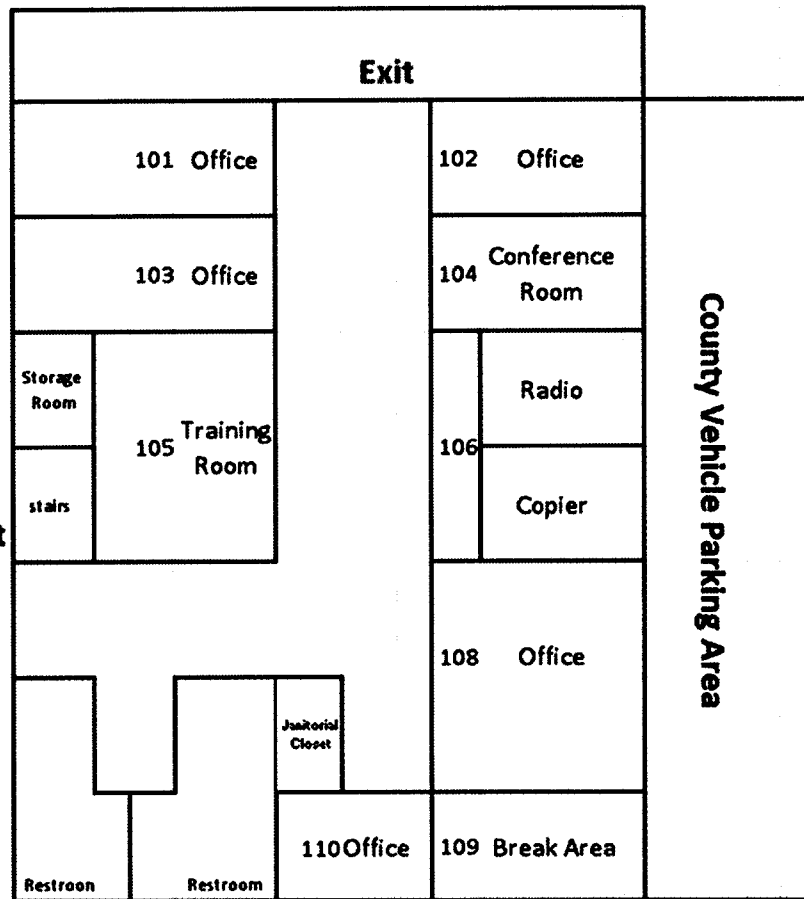
Administrative Checklist

1. CONTROL DOOR?

   a.   Are doors locked at night?   Yes _____   No _____
Who has keys and how are they controlled? _____

   c.   What non- employees (vendors, etc.) have access to the facility?   _____

                                                                         _____

2. LIGHTING

   a.   Is yard lit?   Yes___No_____
Approximate % of yard lit   : 25% ____50%____75% ____100%_____
Approximate % of buses lit: 25% ____50%____75%____100%_____

   b.   Are the number of lights sufficient for drivers' safety in dark?   Yes ____No_____

   c.   Are they automatically turned on at night?   Yes ____No_____

3. LOCK DOWN OF FACILITY

   a.   Does management have a plan for lock down in an emergency?   Yes ____   No _____

   b.   Who is responsible for ensuring everything is locked at end of day?   _____

   c.   Is there a list of what persons have keys to the office?   Yes ___   No_____

   d.   Are locks re-keyed after an employee is terminated?   Yes ___   No_____

4. ACCESS TO BUILDING

   a.   Is access to building by key/access card/button control?   Key ___ Card___ Button____

   b.   Who is responsible for distribution/control of keys?   _____

   c.   What method is used to keep track of same? (log, memory, etc.)   _____

   d.   What non-Employees (vendors, etc.) have access to building?   _____

5. EMPLOYEE IDENTIFICATION

   a.   Are employees issued photo ID tags?   Yes ____   No _____

   b.   Are ID's collected from persons leaving company?   Yes ____   No _____

   c.   Are they changed periodically, or dated with an expiration?   Yes ____   No _____

6. COMPUTER SECURITY

   a.   Do they have key locks for entry into hard drives?   Yes ____   No _____

   b.   Are passwords used for access?   Yes ____   No _____

   c.   Has management been instructed to be aware of activity   Yes ____   No _____

7. ACCESS TO KEYS OF Vehicles

   a.   Do drivers have their own keys to their buses all the time (take home)?   Yes _____   No____

147

b. Are all/most buses keyed identical?   Yes _____   No____

c. How are keys distributed in the a.m.?

  _____

d. How many sets of keys exist?   One (1)   _____

                                              Two (2)   _____
                                              Three (3)   _____
                                              Four (4)   _____
                                              Other   _____
                                                                              _____

e. Does maintenance have their own set for every vehicle?   Yes ___   No _____

f. How are keys secured?   Lock Box   _____
                                              Office   _____
                                              Hidden   _____
                                              Took Home   _____
                                              Other   _____
                                                                               _____

g. Is it a work rule that it is a violation to make duplicate keys of   Yes ___   No _____
    vehicles for personal use?

9. SECURITY OF BUS EN-ROUTE

a. Are there radio codes to report a disaster?   Yes ___No_____

b. Are drivers trained in how to handle/communicate a kidnapping?   Yes ___No_____
    Of a passenger by a third party?   Yes ___No_____
    Of a bus and passenger by outsider?   Yes ___No_____

10. SECURITY BREACHES

a. Have you had any security breaches during the past quarter?   Yes _____
    1. Parked empty vehicle?   Yes _____   No __
    2. Driver while on vehicle?   Yes _____   No__
    3. Passenger?   Yes _____   No__
    4. Building?   Yes _____   No__
    5. Computer System?   Yes _____   No__

BOMB THREAT PLAN

Purpose

To establish an orderly plan for safe thorough investigation and action in the event of a bomb threat to *Gaston County ACCESS* minimizing the risk to passengers and employees.

Always Avoid Panic!

1. Receipt of a Warning:
   If a bomb threat comes to the switchboard or to an employee at any location, the person receiving the call is to do the following:

   a. Quickly access paper and pen

   b. Ask the caller to repeat the message. Tell the caller you don't understand.

   c. Keep the caller engaged in conversation as long as possible.

   d. Ask questions.

   e. Listen carefully to the responses.

   f. Write responses on paper as quickly as possible.

   g. Get as much information as possible.

   h. While engaged in conversation, if possible, alert another staff member by writing on paper to call Police.

   i. If the caller wants to talk voluntarily, give him every opportunity to do so before asking the next question.

   j. Discuss the call only with Coordinator or police involved in the investigation.

2. Activation of the Bomb Threat Plan
   Upon receipt of the bomb threat carry out the following:

   a. Notify Coordinator as soon as possible.

   b. On entering and leaving a room, do not turn any type of switches on or off, as a bomb could be detonated in this matter. If necessary, use flashlights for light.

   c. Coordinator is to call 911 and request local law enforcement.

3. Affected Area

   a. Quickly assess the information obtained or being obtained by the person receiving the call.

   b. Based on information from the caller and Law Enforcement's recommendation, the Coordinator will quickly make the decision where to all an Internal Emergency.

   c. If Internal Emergency is initiated, refer to Internal Emergency Plan.

4. Coordinator/Safety Officer/Trainer will:

   a. Act under guidance of trained experts when available.

   b. Organize Gaston County ACCESS Emergency Action Plan.

149

c. Access the situation and make appropriate decisions for passengers and employee safety as situation demands.

d. When a suspected bomb is found, a danger area will be identified and blocked off in all directions.

e. Be responsible for the notification of the "all clear" in the event no bomb is found.

f. Provide information for media release. Publicity is not recommended.

5. The Search

Local Law Enforcement will be in charge of all Bomb Threat Operations. Including the

notification of Bomb Squads, Search Teams, and will keep in immediate contact with the

Coordinator or her designee.

a. If the threat states the bomb's location, search that area immediately. Staff from the suspected area is best to search that area because they are familiar with what belongs there.

b. Searchers only look for an object resembling the bomb's description (if any was given) and report anything suspicious. They are not to touch, move, or jar any suspicious item or anything attached to it.

c. If no location has been mentioned public areas including lobby and bathrooms should be searched first. Then limited access areas (for staff and authorizer personal only) areas are searched second. Private areas restricted to staff) can be searched last.

d. Searchers should be as discreet as possible to avoid alarming individuals in the search area, especially passengers.

e. If a suspicious object or device is located, the device's location and description should be relay immediately to the Command Post. The danger area should be identified and blocked off with a clear zone at least 300 feet.

f. Open all doors and windows to minimize damage from blast. After a suspicious object is found, the situation is then turned over to the local law enforcement. But the search should not end there because more than one device may have been place in another area not year searched. Some or all areas should be evacuated, based on the device's size and location.

g. Removal and disarming of a bomb must be left to bomb disposal professionals.

BOMB THREAT CHECKLIST

Questions to Ask Caller:

1. When is the bomb going to explode?

2. Where is it right now?

3. What does it look like?

4. What kind of bomb is it?

5. What will cause it to explode?

6. Did you (the caller) place the bomb?

7. Why?

8. What is your address?

9. What is your name?

Exact Wording of the Threat:

_____

_____

_____

_____

_____

_____

Sex of Caller: M or F   **Race:**_____

Age:_____ **Length of Call:**_____

Number at which call is received:
read _____
maker
Time:_____ **Date:**_____

Report Call Immediately to:

_____
Contact Number

_____
Contact Name or Title

_____
Contact Organization

_____
Secondary Contact Info

_____
Secondary Contact Info

Caller's Voice:

____Calm	____Nasal
____Angry	____Stutter
____Excited	____Lisp
____Slow	____Rasp
____Rapid	____Deep
____Soft	____Ragged
____Loud	____Clearing Throat
____Laughter	____Deep Breathing
____Crying	____Cracking Voice
____Normal	____Disguised
____District	____Accent
____Slurred	____Familiar

If voice is familiar, whom did it sound like?

_____

Background Sounds:

____Street noises	____Factory machinery
____Television	____Animal noises
____Voices	____Clear
____PA System	____Static
____Music	____Local
____House noises	____Long Distance
____Motor	____Booth
____Office Machinery	____Other

Threat Language:

____Well Spoken (Educated)	____Incoherent
	____Taped
____Foul	____Message
____Irrational	by threat

Remarks:_____

_____

_____

_____

_____

_____

_____

_____

MUTUAL AID AGREEMENT

WHEREAS, the purpose of this pre-disaster agreement between the agencies is to provide for immediate assistance to protect life and property;

WHEREAS, this Agreement is authorized under Gaston County ACCESS; *which is activated only in the event of a proclamation of an emergency by the local and/or state government approving authority;*

WHEREAS, each agency that becomes a party to this Agreement shall be termed a Signatory Agency;

WHEREAS, a Signatory Agency asking for assistance from any other Signatory Agency will hereinafter be referred to as a Requesting Agency;

WHEREAS, the Signatory Agency agreeing to assist another Signatory Agency asking for assistance hereunder will hereinafter be referred to as a Responding Agency;

WHEREAS, it is necessary and desirable that this Agreement be executed for the exchange of mutual aid; with the intent to supplement not supplant agency personnel.

NOW, THEREFORE, it is hereby agreed by the parties hereto that:

1. Each Signatory Agency has authority hereunder to furnish available resources and services to a Requesting Agency to assist in the prevention, response, recovery and mitigation of proclaimed emergencies/disasters. Any such Responding Agency shall have complete and sole discretion to determine what resources and services are available for its response to any such request. The Responding Agency may limit its response to provision of personnel, equipment, and materials it has determined to be qualified, appropriate, and/or necessary to its response to a Requesting Agency. The Responding Agency shall have no responsibilities or incur any liabilities because it declines to provide resources and/or services to any individual or entity including any Signatory Agency.

2. Resources of the Responding Agency that are made available to the Requesting Agency shall, whenever possible, remain under the control and direction of the Responding Agency. The Requesting Agency shall coordinate the activities and resources of all Responding Agencies.

3. The Responding Agency shall retain the right to withdraw some or all of its resources at any time. Notice of any such intention to withdraw resources shall be communicated to the Requesting Agency's authorized representative not less than five (5) business days before actual withdrawal except the period for prior notice of intent to withdraw resources may be shortened, or completely dispensed with, under emergent circumstances.

4. The Requesting Agency shall be obligated to reimburse any Responding Agency at its usual and customary rates for its actual costs incurred in the provision of available resources and services in response to a request for assistance including, but not limited to, actual costs of labor, equipment, materials, and related expenses as well as for loss or damage to equipment. The Responding Agency shall submit an itemized invoice specifying all reimbursable costs to the Executive Head of the Requesting Agency within sixty (60) days after completion of work. Unless otherwise agreed, the Requesting Agency shall fully reimburse the Responding Agency for legitimate invoiced costs within ninety (90) days after its receipt of any such invoice.

5. Any dispute regarding reimbursable costs that is not resolved by agreement of the Requesting and Responding Agencies involved with that particular invoice shall be decided in writing by the

authorized representative of the Requesting Agency. The decision of the Requesting Agency shall be final and conclusive unless, within ten (10) days from the date the Responding Agency receives its copy of that decision, the Responding Agency mails or otherwise furnishes a written appeal to the authorized representative of the Requesting Agency. In connection with any such appeal, the Responding Agency shall be afforded an opportunity to be heard and to offer evidence in support of its position. The decision of the authorized representative of the Requesting Agency shall be final subject to appeal to the Gaston County Court.

6. All privileges, immunities, rights, duties, and benefits of officers and employees of the Responding Agency shall remain in effect while those officers and employees are performing functions and duties at the request of a Requesting Agency, unless otherwise provided by law. Employees of the Responding Agency shall remain employees of the Responding Agency while performing functions and duties at the request of a Requesting Agency.

7. The Requesting Agency shall indemnify and hold any Responding Agency, and its agents, employees, and/or officers, harmless from and shall process and defend at its own expense any and all claims, demands, suits, penalties, losses, damages, or costs of whatsoever kind or nature (hereafter "claims") brought against any Responding Agency arising out of or incident to the execution, performance, or failure to perform of or under this Agreement; provided, however, that if such claims are caused by or result from the concurrent negligence of (a) a Requesting Agency, its agents, employees, and/or officers; and (b) a Responding Agency, its agents, employees, and/or officers, this indemnity provision shall be valid and enforceable only to the extent of the negligence of the Requesting Agency, its agents, employees, and/or officers; and provided further that nothing herein shall require the Requesting Agency to hold harmless or defend a Responding Agency, its agents, employees, and/or officers, from any claims arising from the sole negligence of a Responding Agency, its agents, employees, and/or officers.

8. This Agreement shall be effective upon approval by two or more Signatory Agencies and shall remain in effect so long as two or more Signatory Agencies remain consenting parties to this Agreement.

9. Upon execution of this Agreement, a Signatory Agency shall send an original or a certified copy of the executed agreement to the North Carolina Department of Transportation, Public Transportation Division.

10. Any Signatory Agency to this Agreement may cancel its participation in this Agreement by giving written notice to the Signatory Agencies listed in this Agreement.

11. This Agreement is supplemental to, and not a substitute for, pre-existing mutual aid agreements and is not intended to restrict the right of any Signatory Agency to negotiate additional mutual aid agreements with a Signatory Agency or others.

12. This Agreement is for the benefit of the Signatory Agencies only and no other person or entity shall have any rights whatsoever under this Agreement as a third party beneficiary, or otherwise.

13. All rights and remedies provided in the Agreement are distinct and cumulative to any other right or remedy afforded by law or equity, and may be exercised independently, concurrently, or successively to such rights or remedies, and shall not be construed to be a limitation of any duties, obligations, rights and remedies of the parties hereto.

Gaston County ACCESS

_____   _____
Signatory System Name   Date

Cheree V. Wilson

_____   _____
Signatory Agency Authorized Representative   Date

Designated Primary Contact for this Signatory Agency:

Office:	Contact:	Phone Number
Gaston County ACCESS	Cheree V. Wilson	(704)866-3220

Emergency 24 Hour Phone Number: (704)913-6540

Approved As To Form

_____   _____
Office of the Attorney General   *Date*