

10.2019

# Triennial Review

5307 only (Block Grant) Subrecipients

FLORIDA DEPARTMENT OF TRANSPORTATION  
OFFICE OF FREIGHT, LOGISTICS AND PASSENGER OPERATIONS



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A stylized map of the state of Florida, composed of horizontal blue lines of varying lengths, positioned in the background behind the text.

# **TRIENNIAL REVIEW GUIDE**

**5307 only (Block Grant) SUBRECIPIENTS**

## **PURPOSE**

The purpose of a 5307 transit system review is to complete the statutorily mandated By System Safety Review and to ensure compliance with the State Block Grant Program requirements. It also includes ensuring compliance with any other requirements related to other state funding programs.

## TECHNICAL ASSISTANCE

The focus of the Compliance Monitoring Program will be both compliance *and* technical assistance. Technical assistance will be provided:

- ◆ As necessary during the data compilation period (assistance with data uploads);
- ◆ On-site while explaining preliminary compliance findings during an exit conference;
- ◆ After release of the draft report, assisting the subrecipient understand the nature of the deficiency;
- ◆ In the development of subrecipient remedial action to the deficiency; and
- ◆ To FDOT as systemic compliance problems arise in the course of the reviews.

## COMPLIANCE REPORTS

## SECTION 1. SELECTION AND ELIGIBILITY/ELIGIBLE SERVICES

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### FTA FUNDS RECEIVED BY SUBRECIPIENT

States and subrecipients must be eligible under the specific requirements of the FTA programs and have the legal, financial, and technical capacity to carry out the proposed program of projects.

1. What are the Federal funds received by this subrecipient during the last three years (check all that apply)?

- Section 5311     Section 5310     Section 5305(d)     5339  
 Section 5307  
 Other \_\_\_\_\_

- 
2. Does the subrecipient receive any state funds from the Block Grant, Commuter Assistance, Park and Ride Lot, Service Development or Transit Corridor programs? If so, list funding programs.

### ORGANIZATIONAL STATUS OF THE SUBRECIPIENT

Describe the organizational status of the recipient.

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### LOCAL MATCH/FINANCIAL CAPABILITY

All state funded projects require a 50% local match. A REDI waiver can be used in lieu of the local match. A statewide significant Service Development project may be eligible for up to 100% funding. The local share may be provided from an undistributed cash surplus,

a replacement or depreciation cash fund or reserve, a service agreement with a state or local service agency or private social service organization. Some examples of these sources of local match include: state or local appropriations; dedicated tax revenues; private donations; revenue from service contracts; transportation development credits; and net income generated from advertising and concessions. Non-cash share such as donations, volunteered services, or in-kind contributions is eligible to be counted toward the local match as long as the value of each is documented and supported, represents a cost which would otherwise be eligible under the program, and is included in the net project costs in the project budget.

Income from contracts to provide human service transportation may be used either to reduce the net project cost (treated as revenue) or to provide local match for operating assistance. In either case, the cost of providing the contract service is included in the total project cost.

It is also imperative to determine if the subrecipient has the financial capability to accept and manage the state funds.

1. What are the sources funds being used to generate the local match?

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2. Is the recipient generating sufficient local match for the grant?

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3. Does the recipient appear financial sound?

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4. Do recipient financial records appear to be maintained using Generally Accepted Accounting Principles? Can funds be traced to level of expenditures?

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5. Is the recipient charging indirect costs? If so, has the District approved their indirect cost rates/plan?

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6. Sample invoices to ensure reported expenditures are supported by the proper documentation?

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7. Project Management:

a) Is recipient implementing a capital grant with its own workforce? If so, does the subrecipient meet the requirements of needing a force account plan?

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b) If recipient is doing facility construction or rehabilitation, review their monitoring and oversight process for the construction project.

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## SECTION 2. EQUIPMENT MANAGEMENT

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### EQUIPMENT – GENERAL (NON-VEHICLE OR FACILITY)

Any property (equipment, furniture and fixtures, vehicles, buildings, and land) purchased with 50% or more state funds administered by the FDOT and valued at \$5,000 or more must be accounted for in the agency fixed asset listing.

Each capital items shall be assigned a unique identification number throughout its life; the identification number should not be reused. Equipment purchased as an integral part of the vehicle does not need to be separately inventoried; for example, a lift or destination sign that is purchased as part of a vehicle does not need to be inventoried. Capital items are to be depreciated in accordance with generally accepted accounting principles. However, depreciation expense is not an allowable reimbursable cost to Federal programs if purchased, in part or in whole, with federal funds.

#### **Determining Useful Life for Project Property**

*For all State administered programs, the State is responsible for approving the useful life proposed by the recipient.* In the grant application, the grantee shall propose and identify a useful life for the capital asset to be purchased with State funds. The department recommends using [Internal Revenue Service guidelines](#) when determining useful life for project property/equipment. The grantee should make sure to check these guidelines for changes on a regular basis.

1. Does the subrecipient use all equipment acquired with state funds in a manner consistent with the original project application or purpose?

Yes     No

2. Does the subrecipient have any project equipment that is no longer needed for transportation purposes?

Yes     No

If “Yes,” has the subrecipient notified FDOT that the equipment is no longer needed for program purposes?

Yes     No

3. How does the subrecipient document inventory of non-vehicle assets with a state interest?

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4. Has the recipient disposed of any project equipment during the last three years?

Yes  No

If "Yes," had the equipment exceeded its useful life as determined by FDOT?

Yes  No

If "No," did the subrecipient notify FDOT for transfer to another transit program?

Yes  No

5. Does the recipient maintain property/asset records for all equipment acquired with FTA funds?

Yes  No

If "Yes," are all the required data elements contained in the inventory record?

<b>Yes</b>	<b>No</b>	<b>Requirement</b>
<input type="checkbox"/>	<input type="checkbox"/>	Description of the property
<input type="checkbox"/>	<input type="checkbox"/>	Serial number or other identification numbers
<input type="checkbox"/>	<input type="checkbox"/>	Source of the property (grant source, program number)
<input type="checkbox"/>	<input type="checkbox"/>	Name of the title holder
<input type="checkbox"/>	<input type="checkbox"/>	Acquisition date
<input type="checkbox"/>	<input type="checkbox"/>	Cost
<input type="checkbox"/>	<input type="checkbox"/>	Percentage of Federal participation in the cost of the property
<input type="checkbox"/>	<input type="checkbox"/>	Location of the equipment
<input type="checkbox"/>	<input type="checkbox"/>	Use and current condition
<input type="checkbox"/>	<input type="checkbox"/>	Disposition information (if applicable), including date of disposal and sales price

6. If the recipient disposed of any project equipment prior to the end of useful life via a transfer to another project, what methods were used to establish fair market value?

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7. Has the subrecipient transferred any project equipment with remaining useful life to another entity?

Yes  No

## PROPERTY MANAGEMENT AND CONTROL (VEHICLE AND FACILITY)

The Common Rule requires all recipients and subrecipients adopt property management standards for all equipment acquired under any program. Property management records must adhere to the elements specified in this section.

A control system shall be in effect to insure adequate safeguards to prevent loss, damage, or theft of the equipment. Any loss, damage, or theft of equipment shall be investigated and fully documented; if the equipment was purchased with at least 50% state funds, and had not passed the end of its useful life, the recipient shall promptly notify FDOT.

Recipients shall, at a minimum, provide the equivalent insurance coverage for real property and equipment acquired with 50% state funds as provided to property owned by the recipient.

Recipients must carry insurance on vehicles, equipment, and facilities to cover the state interest in the asset.

1. Does the recipient maintain satisfactory continuing control over all FDOT administered state funded assets (e.g., maintains direct control over the asset)?

Yes     No

If "No," has the recipient leased equipment to another entity?

Yes     No

If "Yes," is there a formal agreement between the parties?

Yes     No

If "Yes," does the lease:

Yes	No	Lease Requirement
<input type="checkbox"/>	<input type="checkbox"/>	Specify FDOT interest in the vehicle?
<input type="checkbox"/>	<input type="checkbox"/>	Specifies permissible/non-permissible incidental use of the vehicle?
<input type="checkbox"/>	<input type="checkbox"/>	Require lessee to perform vehicle maintenance in accordance with OEM recommendations?
<input type="checkbox"/>	<input type="checkbox"/>	Assign insurance responsibility and all appropriate hold-harmless/indemnification provisions?
<input type="checkbox"/>	<input type="checkbox"/>	Have a finite period of performance?
<input type="checkbox"/>	<input type="checkbox"/>	Notification protocols in the event the vehicle is involved in an accident?

2. Has the recipient suffered any casualty loss of project equipment during the last three years?

Yes     No

If "Yes," did the subrecipient receive an insurance settlement?

Yes     No

Did the subrecipient request guidance from FDOT on the procedures for re-investing the settlement proceeds in a replacement vehicle?

Yes     No



## SECTION 3. PROJECT AND FINANCIAL MANAGEMENT

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### AUDIT

1. Review the agency's most recent A-133 audit performed in accordance with the Single Audit Act. Ask the agency if there are any audit exceptions included in the audit, and discuss these with the agency to determine the nature and severity of the exceptions. Review the Recipient/Subrecipient Single Audit Procedure No. 450-010-001. Contact the Statewide Grant Coordinators at 850-414-4391 to determine if there are additional single audit issues that need to be resolved. *(An A-133 audit is required for any entity that exceeds \$750,000 or more in Federal awards in a single year. If the entity expends less than \$750,000 in Federal awards in a year they are exempt from the Federal audit requirements for that year.)*
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## SECTION 4. PROCUREMENT

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### ACQUISITION METHODS

Recipients must comply with state procurement requirements contained in the current Florida Statutes, Chapter 287. Does the recipient have an agency purchasing policy?

Yes     No

If "Yes", does the agency's purchasing policy incorporate Federal and state purchasing rules?

Yes     No

1. Has the recipient made any state funded purchases?

Yes     No

If "Yes", review a sampling of procurements to determine if the recipient followed their purchasing policy.

Yes     No

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## SECTION 5. OTHER PROVISIONS

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### CONTRACTING AND INVOICING RELATED QUESTIONS

1. List the types of funds agency receives

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2. Fill out the following matrix for each funding program or contract (as applicable)

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Funding Program:		Contract/s:	
Review Item	Status	Comments	Action Item
Missing Documents in files			
Invoice issues			
Time extension/SJPA needs			
Work Program discussion			
Any other relevant topics (specify_____)			

Funding Program:		Contract/s:	
Review Item	Status	Comments	Action Item
Missing Documents in files			
Invoice issues			
Time extension/SJPA needs			
Work Program discussion			
Any other relevant topics (specify_____)			

Funding Program:		Contract/s:	
Review Item	Status	Comments	Action Item



Missing Documents in files			
Invoice issues			
Time extension/SJPA needs			
Work Program discussion			
Any other relevant topics (specify _____)			

At the end of the visit, ask the recipient if they have any questions about or problems with DOT policies and procedures that they need to discuss further. If questions arise that you are unable to answer immediately, make the commitment to follow up quickly.

## REPORTING (5307, 5311 & BLOCK GRANT)

Recipients that receive Section 5307, 5311, and State Public Transit Block grant funds must collect, record and report financial and non-financial data in accordance with the Uniform System of Accounts (USOA) and the National Transit Database (NTD) Reporting Manual. (49 USC 5335(a) and F.S. Chapter 341.052).

All other recipients are required to report based on reporting requirements identified in their JPAs (typically in Exhibit A for JPAs and Attachment A for SJPA's).

1. When was the Recipient's last progress or quarterly report? Is it timely and consistent with the JPA/SJPA? Was it entered into or uploaded into TransCIP? (Recipient's projects in TransCIP should be reviewed prior to the on-site review.)

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2. When did the recipient last provide a complete report to NTD of all transit operations?

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3. How does the grantee ensure correct reporting of operating expenses for ADA complementary paratransit?

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4. What is the system for collecting unlinked passenger trip and passenger mile information? If the grantee uses automatic passenger counters (APCs), verify the agreement with NTD and note in this section. How does the grantee validate the counts throughout the year?

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## BLOCK GRANT RELATED QUESTIONS

1. Prior to conducting the site visit, review all block grant files pertaining to the recipient. Become familiar with the status of each project, fund balances, audit exceptions, Transit Development Plans, etc. Note any problems that have arisen in the past.

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2. What is the status of the TDP at the time of the visit? Has the TDP been adopted by the policy board and been reviewed by the MPO?

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3. Are recommendations for service changes in the TDP being adopted?

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4. Has FTA, the A-133 auditors or the Office of the Inspector General taken exception to or disallowed any of the recipient's National Transit Database (NTD) data in the past? If so what corrective actions have been taken?

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## SERVICE DEVELOPMENT AND TRANSIT CORRIDOR RELATED QUESTIONS

1. Prior to conducting the site visit, review all Service Development files pertaining to the recipient. Become familiar with the status of each project, fund balances, audit exceptions, etc. Note any problems that have arisen in the past.

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2. List recipient's current Service Development and Transit Corridor projects.

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3. Consult with the recipient on the reported progress in meeting objectives and milestones of project/s.

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## COMMUTER ASSISTANCE RELATED QUESTIONS

1. Prior to conducting the site visit, review all Commuter Assistance files pertaining to the recipient. Become familiar with the status of each project, fund balances, audit exceptions, etc. Note any problems that have arisen in the past.

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2. List recipient's current Commuter Assistance projects.

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3. Consult with the recipient on the reported progress in meeting objectives and milestones of project/s.

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# 2019 Triennial Maintenance Review Workbook for 5307 Agencies

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*Revised 2/15/2019*





### 3. Vehicle Inventory

Number of Vehicles Operated in Agency Fleet:	
Number of CDL-Required Vehicles (16+ passenger vehicles)	
Number of Vehicles Wheelchair Accessible	
# of Type I Vehicles:	
# of Type II Vehicles:	
# of Type III Vehicles:	

How many locations do the vehicles operate out of? Please identify the locations from which vehicles operate in the table below:

Primary Location	
Location 2 (if applicable)	
Location 3 (if applicable)	
Location 4 (if applicable)	

3a. Does the agency have a contingency fleet? If so, is the contingency fleet properly maintained?

3b. Does the agency have a capital equipment replacement plan or have a proper method for tracking and monitoring the agency's capital replacement needs?

3c. Does the agency have a spare ratio? If so, what is it?



#### 4. Maintenance Plan

The agency's maintenance plan was assessed according to FDOT minimum standards.

Maintenance Plan Element	Page Number Where Element Is Found
Does the agency maintain a vehicle fleet roster that meets FDOT requirements?	
Does the maintenance plan describe pre-trip and post-trip inspection policies and practices as required by FDOT?	
Does the maintenance plan describe preventative maintenance inspection policies and practices as required by FDOT?	
Does the maintenance plan describe wheelchair lift and/or ramp inspection procedures as required by FDOT?	
If the agency has an in-house maintenance shop, does the agency describe shop policies and maintenance staff duties and responsibilities as required by FDOT?	
Does the maintenance plan describe vehicle history file policies?	
Does the maintenance plan describe information management procedures and practices?	
Does the maintenance plan describe warranty procedures?	
Does the maintenance plan describe accident reporting policies and procedures as required by FDOT?	
Does the maintenance plan describe road call procedures and practices	
Does the maintenance plan describe cleaning procedures?	
Does the maintenance plan provide an adequate description of the agency's unique and specific maintenance procedures/practices throughout the report? (If the agency used a template, did they provide adequate descriptions of their unique practices?) Please explain.	

**Additional Comments/Notes/Reviewer Observations:**



## 6. Fleet Maintenance

### Preventative Maintenance Inspection On-Time Assessment

Number of vehicle files reviewed	
Time period of vehicle file review	
Number of PM inspection intervals reviewed	
Number of PM inspection intervals conducted "on time" according to FTA requirements	
Percentage of "on-time" PM inspections (divide # of on-time intervals by total # of PM intervals reviewed)	

### *Agency Preventative Maintenance Inspection Procedures and Practices*

- 6a. Are maintenance activities conducted in-house or outsourced? What type of work is outsourced?
- 6b. How does the agency track upcoming preventative maintenance inspections?
- 6c. What is the target interval used to schedule and conduct PM inspections?
- 6d. Is the PM inspection program based on a progressive sequence system or a single level system?
- 6e. Does the PM inspection target intervals used by the agency exceed FDOT minimum standards (6,000 miles)? If so, did the agency provide a justification? And is this justification described in the agency's maintenance plan?
- 6f. What is the target interval used to conduct oil changes? Does this interval exceed OEM requirements?

- 6g. If the oil change target interval exceeds 6,000 miles and/or OEM, does the agency document an oil analysis program?
- 6h. Does the agency use a checklist form to document preventative maintenance inspections?
- 6i. Does the form include the minimum information required (date, mileage, list of vehicle components being inspected, and the entity conducting the inspection)?
- 6j. Does the PM inspection program include the minimum list of vehicle components required by FDOT to be inspected for each vehicle type (Type I, Type II, and Type III vehicles)?
- 6k. Are the preventative maintenance inspection forms thoroughly completed? If not, please provide comments.
- 6l. Does the PM inspection program account for long-term OEM maintenance activities such as transmission fluid changes and services, differential fluid changes and services, and engine tuneups?

Are these intervals described in the agency's maintenance plan or included in the sequence or schedule of PM inspections to ensure manufacturer requirements are met?

- 6m. When defects are identified during preventative maintenance inspections, are they repaired in a timely manner?

- 6n. Are wheelchair lifts and/or ramps being properly maintained during preventative maintenance inspections?
  
- 6o. Are additional vehicle accessories (such as farebox systems, destination signs, etc.) on routine preventative maintenance programs, if applicable?
  
- 6p. What methods does the agency use to routinely track and monitor maintenance activities and trends? How often are these activities conducted?
  
- 6q. Are in-service failures (road calls) documented and tracked by the maintenance manager?
  
- 6r. Are unscheduled maintenance activities analyzed to determine the root cause of any mechanical failures? If so, how?

**Additional Comments/Notes/Reviewer Observations related to PM inspection practices:**

**Based on the file review, the following maintenance trends were observed:**

- 6s. Does the agency conduct PM inspections using the target interval and/or sequence described in their maintenance plan?
  
- 6t. Does the agency show a trend of conducting unscheduled repairs shortly after PM inspections are performed?
  
- 6u. Does the agency show a trend of conducting repeat repairs?
  
- 6v. Was an abundance of road call instances observed?
  
- 6w. Does the agency appear to be conducting warranty repairs where applicable?

**Additional Fleet Maintenance Comments/Notes/Reviewer Observations related to the file review:**

## 7. Pre/Post Trip Inspections

### *Agency Pre-trip/post-trip Inspection Procedures and Practices*

- 7a. Are both pre-trip inspections and post-trip inspections being conducted?
- 7b. Does the pre-trip/post-trip inspection form include all of the required vehicle components? If not, which components are missing?
- 7c. What is the agency's process for reporting defects identified during pre-trip/post-trip inspections to maintenance staff?
- 7d. What is the agency's process for handling safety-related defects identified during pre-trip/post-trip inspections?
- 7e. Did the agency provide pre-trip/post-trip inspections for the required minimum 14-day period?
- 7f. Were the pre-trip/post-trip forms thoroughly completed by drivers? If not, please provide details.
- 7g. Were defects identified on the sample of pre-trip/post-trip forms reviewed?
- 7h. If defects were identified during the vehicle safety inspection conducted on-site, were these defects also identified by drivers in the sample of pre-trip/post-trip inspection forms reviewed? If not, were the defects of a nature that should have been identified by drivers during these inspections? Please explain

7i. If defects were identified in the sample reviewed, were they repaired in a timely manner?

7j. If defects were identified in the sample reviewed, were the repairs documented according to FDOT minimum standards?

7k. Were drivers observed conducting pre-trip inspections during the on-site review?

7l. If so, did these inspections appear to be thoroughly conducted by the drivers?

**Additional Comments/Notes/Reviewer Observations on Pre-trip/post-trip Inspection Practices:**





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# **Bus Transit System Safety and Security Review Workbook**

**June 29, 2018**



## Review Report Tracking

### Agency Information

Agency: \_\_\_\_\_

Agency Contact: \_\_\_\_\_

Email: \_\_\_\_\_

Phone Number: \_\_\_\_\_

### Review Notification (at least 45 days prior)

Date: \_\_\_\_\_

Sent By: \_\_\_\_\_

### Pre-review Materials (must be received 21 days prior to review)

Date: \_\_\_\_\_

Sent By: \_\_\_\_\_

### On-site Review

Review Date(s): \_\_\_\_\_

Review Team: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

### Report Submittal

Draft Report to CUTR: (no more than 14 days post visit)

Report Prepared By:

Report Approved By:

Report Approval Date: (within 30 days post visit)

Submit Date to FDOT: \_\_\_\_\_

(Attach electronic copy of delivery/read receipt)

## Overall Process Checklist

### Prior to Review (at least 45 days)

1. Review schedule date and times from FDOT Central and/or district consultants ( )
2. Are required:
  - a. Coordination with district consultant ( )
  - b. Coordination with Diana Byrnes (D&A) ( )
  - c. Coordination with other team members ( )
3. Notify agency of areas to be addressed: ( )
  - a. Organization chart ( )
  - b. Operational standards and procedures ( )
  - c. Employee handbook ( )
  - d. Policies and procedures (including dispatch) ( )
  - e. Bus driver selection policies and procedures ( )
  - f. Records retention ( )
  - g. Personnel files ( )
  - h. Time sheets ( )
4. Request a copy of agency SSPP ( )
5. Review previous reports, if available ( )
6. Week before review – send reminder ( )
  - a. Proposed times and agenda ( )

### Review

7. Introductions ( )
8. Sign-in sheet ( )
9. Obtain and review copy of SPP ( )
10. Overall system information
11. Obtain listing of all operators ( )
12. Determine pay periods to be reviewed and obtain copies:
  - a. Minimum of two (2) pay periods, approximately 6 months apart ( )
13. Complete review and document:
  - a. Operator licenses – form as stated in SSPP ( )
  - b. Operator Medical Examination Certificate ( )
  - c. Training records ( )
  - d. Payroll ( )
14. Route check ( )
15. Exit interview ( )

### Post Review

16. Report to CUTR within 14 days of completion of review ( )  
\*As directed by FDOT

## Document Checklist

### Pre-Review Materials:

Documents	Date Requested	Date Received
Approved System Safety Program Plan and associated procedures and policies		
Current Driver Roster		
Bus driver selection policies and procedures.		
Employee/driver "handbook"		
Operational standards and procedures		
Organizational chart with position responsibility		
SSPP polices/requirements for contractors		
Wireless Communication Policy/Plan		
Copy of initial and refresher course syllabuses		
Drug and Alcohol Policy		
Emergency Procedures		
Record Keeping Policies		
Routes and Service schedules		
Annual Safety and Security Certifications and record of submittals to FDOT District Offices		

### Reviewed On-site (request during pre-review):

General Documents	Date Requested	Date Received
Internal audit reports, findings, and corrective action plans implemented during the last three years		
Request a copy of the medical form/standards use by the BTS.		

Agency Policies and Procedures	Date Requested	Date Received
Background check policy/procedures		
Copy of accident/event investigation policies and procedures		
Dispatch policies/procedures		
Driver hours of service policy/procedures		
Hazard identification and resolution policy/procedure		

Agency Policies and Procedures	Date Requested	Date Received
License check policy/procedures		
Medical examinations policy/procedures		
Safety policy documents and any current safety bulletins		

Accident/Incident Investigation	Date Requested	Date Received
Include a list of investigations for the last three years		
Copy of hazard analyses and/or investigations for the last three years		
Any annual and/or periodic safety and hazard reports & analyses of data prepared for management		

**Additional Documents to be Reviewed Onsite**

Documents	Date Reviewed
Driver timesheet records for two, two week periods in the previous 3 years	
Drivers licenses	
Event investigation files for the previous 3 years	
Facility life safety inspections and records for the previous 3 years	
Hazard identification files including findings and corrective actions in the past 3 years	
Medical certificates	
Security Program Plan	

## **Introduction**

### ***(If not done by District Consultant)***

(Introduce CUTR's team members and have agency introduce each participant, along with title and responsibilities.)

Greetings, thank you for taking the time to meet with us. We understand that your employee's have numerous responsibilities and we will do our best to minimize any disruptions.

We are here on behalf of the Florida Department of Transportation. The purpose of our visit today is to review your Safety and Security areas, in accordance with F.A.C. 14-90, the FDOT Statement Management Plan and associated Triennial Review Process, as well as Chapters 341 and 344, Florida Statutes and FDOT Procedure 725-030-009.

We will assist you in understanding the requirements of any particular circular, rule, regulation or law, provide copies of relevant regulatory citations and technical assistance materials, and render additional assistance to you in order to grantee/subrecipient findings, as necessary.

We will be reviewing operator personnel files and a minimum of two (2) pay periods, approximately six (6) months apart, to ensure that operators driving hours and accident/incident files are in compliance with Rule Chapter 14-90, F.A.C.

Specific records to be reviewed are:

- (1) Develop and Adopt System Safety Program Plan (SSPP)
- (2) Develop and Adopt Security Program Plan (SPP)
- (3) Develop and Adopt Wireless Communications Plan
- (4) Qualification, Selection and Training of Drivers
- (5) Operational and Safety Procedures
- (6) Record Maintenance, Retention and Distribution
- (7) Drug Free Workplace & Substance Abuse Management
- (8) Establish Written Maintenance Plan/Bus Maintenance
- (9) Event Investigation
- (10) Medical Examinations & Certifications for Bus Drivers
- (11) Operational and Driving Requirements
- (12) Vehicle Procurement
- (13) Bus Safety Inspections
- (14) Certification

We will also be conducting ride along(s) – reviewing operators on-board.

If at any time during the review process you have a question, please feel free to ask.

At the end of this process, we will let you know if there are any open issues, which require additional documentation and the required response date.

Our report will be forwarded to FDOT District Office, who will issue the final report.







## Explanation of Findings

### Reviewer Guidance: Safety & Security Review Template

The district office may combine a safety and security compliance review with other state required on-site compliance reviews, but only findings or comments resulting from compliance with **Rule Chapter 14-90, F.A.C.**, and/or the Bus Transit System's SSPP and SPP, should be included in the safety and security formal review written report submitted to the bus transit system.

Any finding resulting from the review will be categorized as follows:

**Deficiency:** Area(s) found to be deficient or inadequate in complying with the bus transit System's SSPP or SPP and/or Rule 14-90, F.A.C. Requirements to address deficiency will be indicated. **The bus transit system is required to develop and submit a CAP and implementation schedule for approval for each deficiency arising from a compliance review.** The district office will provide the CAP and implementation schedule for all deficiencies arising from a non-compliance review.

**Areas of Concern:** Weakness in the adoption or implementation of the Bus Transit System's SSPP or SPP and implementing procedures, and/or weaknesses with regard to conformance with Rule 14-90. F.A.C. Recommendations will be provided to address areas of concern. **The bus transit system is required to develop and submit a CAP and implementation schedule for each area of concern, for approval by the district office.**

**Observation:** An offered suggestion, view, or comment regarding safety and security performance. An observation may address or refer to information obtained during the review. Reviewers are encouraged to provide appropriate observations and recommendations on best practices even when no deficiency or area of concern exists.

**Corrective Action Plan:** Action(s) required to correct deficiency, including individual(s) and departments responsible for completing each action, plan and actual date(s) of completion, and rationale for incomplete or postponed action, as necessary.

### Compliance Review Findings

Described below are the findings derived from the inspection of each of the 14 areas identified in the review. Findings shall consist of information obtained during the review and identified as an "Deficiency" or "Area of Concern" as applicable. A sampling of records may be performed for any individual area. Observations are not intended to reflect a condition of non-compliance.

# System Information

## General Information

Total Number of Drivers: \_\_\_\_\_

Full time: \_\_\_\_\_ Part time: \_\_\_\_\_ Volunteers: \_\_\_\_\_

Total Number of Buses: \_\_\_\_\_ Buses W/C accessible: \_\_\_\_\_

No of Type I Buses: \_\_\_\_\_ No of Type II Buses: \_\_\_\_\_  
(> 22', including bumper) (< 22', including bumper)

Dispatch Location(s): \_\_\_\_\_  
(If different than operational location)

Operational Location(s): \_\_\_\_\_

Maintenance Location(s): \_\_\_\_\_  
(If different than operational location)

Community Transportation Coordinator (CTC): Yes: \_\_\_\_\_ No: \_\_\_\_\_

CTC Operator: Yes: \_\_\_\_\_ No: \_\_\_\_\_

CTC Name: \_\_\_\_\_

Contracted Passenger Service Operations (Describe):  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Contract operator(s) have own adopted SSPP and SPP approved by transit system or CTC:

Yes: \_\_\_\_\_ No: \_\_\_\_\_

Describe: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Contract operator(s) adopts and implements the Transit System's or CTC's SSPP:

Yes: \_\_\_\_\_ No: \_\_\_\_\_

Describe: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## SSPP Review

### Section 14-90.004 (1), F.A.C.

At a minimum, the SSPP appropriately addresses the following safety elements and requirements	Yes/ No	Location of Element(s)	Comments Deficiency, Areas of Concern, Observation
Approved System Safety Program Plan (SSPP)  Approval Date: _____  Approved By: _____			
Organizational chart			
Safety polices and responsibilities			
Vehicle and equipment standards and procurement criteria			
Operational standards and procedure			
Bus driver selection policies and procedures			
Driver hours of service policy/procedures (driving hours and work period's policy)			
Background check policy/procedures (level)			
Bus driver and employee training policies, procedures, and manuals (include list of courses and syllabuses)			
Copy of initial and refresher course syllabuses			
Vehicle maintenance			
Copy of accident/event investigation policies and procedures			
Hazard identification and resolution			
License and MEC policy			

At a minimum, the SSPP appropriately addresses the following safety elements and requirements	Yes/No	Location of Element(s)	Comments Deficiency, Areas of Concern, Observation
Safety data acquisition and analysis			
SSPP requirements for contractors			
Records retention			
Certification requirements			
Requirements for safety inspections of all operable transit buses at least annually			
Wireless communications plan (WCP) requirements			
SSPP flow-down requirement to contractors /subcontractors			
Employee/driver handbook			

**Security Program Plan (SPP)**  
**(During Review – Onsite)**

**Section 14-90.004 (2), F.A.C.**

SPP addresses the following security elements and requirements at a minimum	Yes/ No	Location of Element(s)	Comments Deficiency, Areas of Concern, Observation
Approved Security Program Plan (SPP) Approval Date: _____ Approved By: _____			
Security policies, goals, and objectives			
Organization, roles, and responsibilities			
Emergency management processes and procedures: mitigation, preparedness, response and recovery			
Procedures for the investigation of events under Rule 14-90.004(5), F.A.C.			
Procedures for the establishment of interfaces with emergency response organizations			
Procedures for interagency coordination with local law enforcement jurisdictions			
Employee security and threat awareness training programs			
Security data acquisition and analysis			
Emergency preparedness drills and exercises			
Certification requirements			
SPP requirements for contractors			
Procedures for oversight and monitoring of contractors compliance with security requirements			
Security and threat awareness training			

SPP addresses the following security elements and requirements at a minimum	Yes/ No	Location of Element(s)	Comments Deficiency, Areas of Concern, Observation
Procedures for SPP maintenance and distribution: includes disclosure prohibition per <i>Section 119.071(3)(a), F.S.</i>			



## Wireless Communications Plan (WCP)

### Section 14-90.004(12-14), F.A.C.

At a minimum, the WCP appropriately addresses the following safety elements and requirements	Yes/No	Location of Element(s)	Comments Deficiency, Areas of Concern, Observation
Prohibits the use of a personal wireless communications device while the transit vehicle is in motion			
Plan requires that all personal wireless communications devices be turned off, with any earpieces removed from the operator's ear while occupying the driver's seat			
Contains a policy on the use of a wireless communications device issued to the operator by the transit system			
Has guidelines developed for the use of a wireless communications device in emergency situations (example: medical emergencies, family emergencies, and/or when regular issued equipment is inoperable during the emergency)			
Has a policy or procedure that, guarantees the use of a wireless communications device will not interfere the operator's safety related duties			
Has a wireless communications driver educational training program			
The driver educational program addresses the proper use of a wireless communications device issued by the transit system			
The driver educational program addresses hazards (accidents/incidents) associated with the use of a wireless communications device			

## Qualification, Selection, and Training of Drivers

### Section 14-90.004(3), F.A.C.

The bus transit system has established the following criteria for the selection and qualification of all drivers	Yes/ No	Location of Element(s)	Comments Deficiency, Areas of Concern, Observation
Standards for driver qualifications and criteria for background checks			
Driver and criminal background checks for all new drivers			
Verification and documentation of valid driver licenses for employees who drive buses			
<b>The bus transit system has a driver training program that provides explicit instructional and procedural training and testing in the following areas:</b>			
Bus transit system safety and operational policies and procedures			
Operational bus and equipment inspections			
Bus equipment familiarization			
Basic operations and maneuvering			

The bus transit system has established the following criteria for the selection and qualification of all drivers	Yes/ No	Location of Element(s)	Comments Deficiency, Areas of Concern, Observation
Specific instructions to the bus driver on how to safely approach and depart from a transit bus stop to avoid contact with pedestrians and other hazards			
Boarding and alighting passengers			
Operations of wheelchair lifts and other special equipment			
Defensive driving			

The bus transit system has established the following criteria for the selection and qualification of all drivers	Yes/ No	Location of Element(s)	Comments Deficiency, Areas of Concern, Observation
Passenger assistance and securement			
Handling of emergencies and security threats			
Security & threat awareness			
Driving conditions			

## Operational and Safety Procedures

### Rule 14-90.004(3)(e), F.A.C.

Bus transit system provides the following written operational and safety procedures	Yes/ No	Location of Element(s)	Comments Deficiency, Areas of Concern, Observation
Communication & handling of hazards, unsafe conditions, security threats, and emergencies.			
Familiarization and operation of safety and emergency equipment, wheelchair lift equipment and restraining devices.			
Application and compliance with all applicable federal and state laws, rules, and regulations.			
Requirements for drivers to complete and submit a daily inspections report. ( <b>Rule 14-90.006, F.A.C.</b> )			

## Records Retention and Distribution

The bus transit system maintains the following records for at least four years	Yes/No	Location of Element(s)	Comments Deficiency, Areas of Concern, Observation
<b>Driver Records Rule 14-90.004(3)(g), F.A.C.</b>			
Records of bus drivers background checks and qualifications			
Detailed description of training administered & completed by each driver			
Each bus driver's daily duty status: total days worked, on-duty hours, driving hours and time reporting on and off duty			
<b>Event and Incident Reporting and Investigation Records Rule 14-90.004(7), F.A.C.</b>			
Notification and investigation reports, findings, causal factors, corrective action plans, supporting documents			
<b>Medical Records Rule 14-90.0041(4), F.A.C.</b>			
Required proof of biennial, pre-employment, and any follow-up medical exams of employee bus drivers			
<b>SSPP &amp; SPP Review and Revision Rule 14-90.010(d), F.A.C.</b>			
Reviews of the SSPP and SPP have been conducted to ensure they are up-to-date			

## Event Investigation

### Section 14-90.004(5), F.A.C.

Bus transit systems addresses investigation of events as follows	Yes/No	Location of Element(s)	Comments Deficiency, Areas of Concern, Observation
Bus transit system has written investigation policy or procedure(s) for any event involving a bus or taking place on the bus transit system			
Investigation is conducted for a fatality or where an individual is confirmed dead within 30 days of a bus transit event			
Investigation is conducted for injuries involving medical attention away from the scene for two or more individuals			
Investigation is conducted for property damage over \$1,000 to transit system buses, non-bus transit system vehicles, other bus system property or facilities, or any other property			
Investigation is conducted for evacuation of bus due to life safety event, where there is imminent danger to the passengers			
Events are investigated and documented in a final report that includes a description of the investigation activities, identified causal factors and any identified corrective actions			
Corrective action plans are developed by the bus transit system that will identify planned actions and schedule for implementation			
Bus transit system monitors and tracks the implementation and completion of each corrective action			

## Medical Examinations for Bus Transit System Drivers

### Section 14-90.0041, F.A.C.

Bus transit system has established the following medical examination requirements for all applicants to driver positions and for existing drivers	Yes/No	Location of Element(s)	Comments Deficiency, Areas of Concern, Observation
Medical examination requirements are established using Form Number 725-030-011, effective 05/09, or an equivalent form that meets or exceeds standards			
Medical examinations are completed for new drivers			
Bus transit system has on file a completed and signed medical examination certificate (signed by medical examiner and driver) for each bus driver, dated within the past 24 months			
A return to duty examination is completed for any driver prior to returning to duty after having been off duty for 30 or more days due to an illness, medical condition or injury			

Note: For determining compliance with the medical examination requirements, the review should only involve the inspection of the medical examination certificate for certification status, dates, signatures, and completion of information. The reviewer should never record an individual's personal medical history or examination results.



## Operating and Driving Requirements

### Section 14.90.006, F.A.C.

The bus transit system has established a driver's handbook and/or procedures to address the following operating and driving requirements	Yes/No	Location of Element(s)	Comments Deficiency, Areas of Concern, Observation
A requirement for buses to be operated at all times in compliance with applicable traffic regulations, ordinances, and laws of the jurisdiction in which they are being operated			
A procedure for a bus transit system driver to report the suspension or revocation of a license to operate a motor vehicle immediately or no later than the end of the business day following the day he or she received the notice			
A process for tracking and monitoring on duty and driving hours compliant with the driving and on-duty hours standards.			
A driver that has been required to drive for 12 hours in a 24- hour period or a driver that has been on duty for 16 hours in a 24-hour period has had 8 hours off duty prior to returning to duty			
A driver that has been on duty for 72 hours in any period of seven consecutive days has had 24 consecutive hours off duty prior to returning to duty			
Pre-operational or daily inspections and reporting are required for drivers to identify defects and deficiencies			
A process or procedure exists to address and resolve deficiencies and record corrective actions for inspection findings			

<b>The bus transit system has established a driver's handbook and/or procedures to address the following operating and driving requirements</b>	<b>Yes/No</b>	<b>Location of Element(s)</b>	<b>Comments Deficiency, Areas of Concern, Observation</b>
Inspections address the following parts and devices to ascertain that they are in safe condition and good working order: service brakes, parking brakes, tire and wheels, steering, horn, lighting devices, windshield wipers, rear mirrors, passenger doors, exhaust system, equipment for transporting wheelchairs, and safety, security, and emergency equipment			
<b>The Bus Transit System addresses the following required safety criteria in their operational procedures, driver's handbook, and the driver training program.</b>			
Requirement that a bus with any passenger door in the open position shall not be operated with passengers aboard			
During darkness, interior lighting and lighting in stepwells on buses shall be sufficient for passengers to enter and exit safely			
Prohibition against passengers occupying the stepwell or any area forward of the standee line while the bus is in motion			
Prohibitions for fueling buses in closed building or refueling while passengers are on-board			
Requirement for the driver to be properly secured to the driver's seat with a restraining belt at all times while the bus is in motion			
Requirement that buses shall not be left unattended with passengers aboard for longer than 15 minutes			
Requirement that buses shall not to be left unattended in an unsafe condition with passengers aboard at any time			
Proper setting of parking brake and holding device			

## Review Minimum Requirements

Randomly select agency driver records based on the following percentage range:

Range (agency drivers)	Selection Sample	Minimum Selection	Maximum Selection
0-125	30%	10	25
126-325	20%	26	60
326-525	15%	61	75
526 and above	10%	76	100

### Background Check

Background check must include levels and types conducted. Randomly select 30% (30 bus driver minimum) of ALL BTS Drivers. If applicable, up to 33% of the driver selection must be new hires (bus operators hired within the last 3 years and not currently in training) Review ALL BTS driver records less than 30. If the reviewer notices a major problem in a specific review area, an additional 30% selection of driver records should be reviewed. If the additional review produces the same troubling results, then all records for the review section must be reviewed. If during their review of an area, the reviewer notices an issue with a specific record, they have the option to expand their review to include that particular record in their review.

### Driver Licenses

- Visually check license (go back 3 years); picture, CDL class as applicable, endorsement, expiration date, and any restrictions
- Cross check date of hire with date issued
- Make sure license is current: run a free online check at:  
<https://services.flhsmv.gov/DLCheck/DLCheckResultView.aspx>

### Medical Exam Certificate

Medical exam certificate form should match the SSPP – Florida State Form or equivalent.

### Accident Reviews

For accident reviews include at least 3 years and trend analysis.

- Include a list of Investigations for the last three years (select at least 10%, but no less than 5 complete files, to review onsite). Review investigation files for at least 3 major events. Review of files should include notifications, investigation activities, determination and any findings, corrective actions, and follow up activities (opened and close during the last three years).
- Hazard identification and resolution policy/procedure.
- Copy of hazard analyses and/or investigations for the last three years (select at least 10%, but no less than 5 complete files to review onsite). Review of files should include analysis and/or investigation activities, determination and any findings, corrective actions, and follow up activities (opened and closed during the last three years).







Name	Medical Exam Date	Medical Certification Expiration Date	License Date	License Expiration Date	Background Check/Level	Comments

















## Accident Investigation

### Section 14-90.004(5-7), F.A.C.

- |    |  |     |    |
|----|--|-----|----|
| 1. | Does the transit system have a method in place to review accidents/incidents?        | Yes | No |
| 2. | Is there an accident/incident review committee?                                      | Yes | No |
| 3. | Who is on the accident/incident review committee (list job titles)?                  |     |    |
| 4. | Does the review determine whether the accident/incident was an organizational issue? | Yes | No |
| 5. | How often does the committee meet?   |     |    |
| 6. | Does the committee address security issues?  | Yes | No |
| 7. | Does the committee decide preventability?  | Yes | No |
| 8. | If yes, what are the agency guidelines to determine preventability?                  |     |    |
| 9. | If an organizational issue, how is that documented and addressed?                    |     |    |

10. Agency policy should explain how the agency will document each investigation in a final report that must provide a description of investigation activities, identified contributory factors, and any identified corrective action plan. This part should also list requirements for any refresher training and the retention of reports for a period of no less than 4 years.  
Having a copy of the local law enforcement agency report should only be a part of the agency investigation/report.
  
11. What follow-up system is in place to ensure that the corrective action is working?
  
12. If it was the operator's fault, what corrective action was taken?
  
13. Performing a trend analysis of data provides the ability to determine the effectiveness of the organization in managing its activities and improving its proficiency in safety efforts.  
Completing a trend analysis on the program elements provides a summary of compliance rates, areas of violation, schedule adherence, and summary of corrective action plan activities and follow activities.
  
14. Annual/periodic safety and hazard reports & analysis of data







## Route Check

Date: \_\_\_\_\_ Time: \_\_\_\_\_

Agency: \_\_\_\_\_

Operator Name: \_\_\_\_\_

Type of Vehicle:  Fixed Route |  Paratransit |  Other \_\_\_\_\_

Vehicle Number: \_\_\_\_\_ Route Number: \_\_\_\_\_

Did the Driver:	Y/N	Did the Driver:	Y/N
Make sure all viewing areas are clear?		Use the 4 second rule?	
Adjust mirrors before starting route?		Enter intersections with caution?	
Properly Secure wheelchairs?		Obey speed limits?	
Remove tie downs after each use?		Make sure passengers are properly positioned before starting?	
Assist the wheelchair customer if needed?		Stops behind the plane of the intersection?	
Stop the vehicle 6" or 4' from the curb?		Stops between 15 and 50' of a RR track?	
Act courteously assisting passengers?		Look both directions at RR crossing?	
Obey wireless policy?		Answer the radio properly?	
Uses correct language under ADA guidelines?		Monitor passengers and report misbehavior?	
Slouch in the seat?		Keeps schedule?	
Keep arms/hands from beyond the window frame?		Does not operate bus with passenger door open?	
Wear the seat belt properly?		Completely stop before doors are open?	
Keep both hands on the wheel?		Use interior lighting during darkness?	
Observant of road conditions?		Keep passengers behind the standee line while bus is in motion?	
Use signals at proper distances?		Take corners appropriately?	
Stop/start smoothly?		Use the parking brake when the bus is left unattended?	
Does not leave bus unattended with passengers for more than 15 minutes?		Doors are not locked preventing passengers from exiting when unattended?	
Did the operator greet the passenger?			

Comments: \_\_\_\_\_  
 \_\_\_\_\_

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## Route Check

Date: \_\_\_\_\_ Time: \_\_\_\_\_

Agency: \_\_\_\_\_

Operator Name: \_\_\_\_\_

Type of Vehicle:  Fixed Route |  Paratransit |  Other \_\_\_\_\_

Vehicle Number: \_\_\_\_\_ Route Number: \_\_\_\_\_

Did the Driver:	Y/N	Did the Driver:	Y/N
Make sure all viewing areas are clear?		Use the 4 second rule?	
Adjust mirrors before starting route?		Enter intersections with caution?	
Properly Secure wheelchairs?		Obey speed limits?	
Remove tie downs after each use?		Make sure passengers are properly positioned before starting?	
Assist the wheelchair customer if needed?		Stops behind the plane of the intersection?	
Stop the vehicle 6" or 4' from the curb?		Stops between 15 and 50' of a RR track?	
Act courteously assisting passengers?		Look both directions at RR crossing?	
Obey wireless policy?		Answer the radio properly?	
Uses correct language under ADA guidelines?		Monitor passengers and report misbehavior?	
Slouch in the seat?		Keeps schedule?	
Keep arms/hands from beyond the window frame?		Does not operator bus with passenger door open?	
Wear the seat belt properly?		Completely stop before doors are open?	
Keep both hands on the wheel?		Use interior lighting during darkness?	
Observant of road conditions?		Keep passengers behind the standee line while bus is in motion?	
Use signals at proper distances?		Take corners appropriately?	
Stop/start smoothly?		Uses the parking brake when the bus is left unattended?	
Does not leave bus unattended with passengers for more than 15 minutes?		Doors are not locked preventing passengers for exiting when unattended?	
Did the operator greet the passenger?			

Comments: \_\_\_\_\_  
 \_\_\_\_\_

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## Florida Department of Transportation

Review Date(s): \_\_\_\_\_

Agency: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Report Date: \_\_\_\_\_

Approved by: \_\_\_\_\_

Name: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_





## END OF GUIDE