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FMCSA Driver and Management Research Study: Telephone Survey Instrument

**Driver and Management Training
Needs for Small Passenger Vehicle Carriers**

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Introduction: Hello, I am _____ from the Virginia Tech University in Blacksburg. We're part of a team doing research for the Department of Transportation to identify the kinds of safety information that van and limousine operators need to improve their safety efforts. We are calling only to do research to improve safety; this is not a telemarketing call. _

I'd like to ask some questions about your company.

(1) Is there someone who knows about your company's overall operation and can talk to me now for about 30 minutes?

[Ensure the individual is an owner, general manager, operations manager, safety director, or holds another position which would mean that he/she is knowledgeable about the company's overall operation. If 'no,' ask for a name of an appropriate individual and a good time to call back.]

We mailed a letter about the research to your company on [date]. Did you receive this letter?

[If 'no,' read the letter over the telephone to the owner or manager. Ask whether he/she has any questions when you are finished. Answer any questions and then proceed the process for a yes response.]

[If 'yes,' ask "can I proceed with the survey?" If the response is 'no,' state "the survey is anonymous and confidential. We will not write your name or your company's name anywhere on the survey, and your answers will not be shared with anyone. Your participation would be appreciated, but it is optional. Can I proceed with the survey?" If the response is 'no' again, thank the person for his/her time and hang up.]

Thank you. As a reminder, this survey is voluntary, anonymous and confidential. We will not write your name or your company's name anywhere on this survey, and your answers will not be shared with anyone.

The information that you provide may be used to develop educational tools for small passenger vehicle operators like your company.

(2) Does your company operate at least two vehicles that are designed to transport 9 to 15 passengers, including the driver?

Yes _____ no _____

[If the answer is 'no,' thank the person and end the interview.]

During this survey, we need your candid responses so we can learn from your everyday experience and meet the needs of business owners and managers like yourself around the country. Again, your answers will be anonymous. We will not associate your company's name with the responses you give.

The survey will only take about 30 minutes.

(3) What is your current job with the company?_

Owner _____ Manager *[Specify type below]* _____ Driver _____ Mechanic _____

Other (specify) _____

Thank you for your help with this research. We're collecting information about the best ways to provide safety related information for companies like yours. We hope that learning a bit about your safety practices will help other van and limo operators across the country operate more safely.

- (4) **How many 9-15 passenger vans and limos do you operate?**
a. Number of vans ____, Number of limos ____
- (5) **Do you offer passenger service in more than 2 states in the U.S., or into Mexico or Canada?**
a. Yes __
b. No __
- (6) **On average, how many miles do you estimate all your 9-15 passenger vans or limos traveled in 2005?**
a. _____ miles
b. I don't know
- (7) **On average, how many passengers do your vehicles carry at one time?**
Number: _____
- (8) **When you have mechanical work done on your vehicles, is the main reason** (choose one)
a. Scheduled maintenance based on mileage or time
b. Repairs for problems reported by drivers
c. Repairs after a vehicle breaks down
d. Periodic inspections

[Skip the following question if the company only operates limos]

(9) When transporting passengers in your vans, do you often (please indicate yes or no to all that apply)

- a. Stow luggage behind the rear seat
- b. Stow luggage on the roof
- c. Tow a trailer for luggage
- d. We rarely carry luggage

(10) How many drivers work for your company now? How many full-time? How many part-time?

- a. Total _____
- b. Full-time _____
- c. Part-time _____

(11) Do your drivers work a regular shift or does their schedule change frequently?

- a. Drivers always or usually work the same shift
- b. Drivers occasionally work the same shift
- c. Drivers work schedules usually change frequently

(12) How often do your drivers drive between midnight and 6 a.m.?

- a. All of the time or most of the time
- b. Occasionally
- c. Never or rarely

(13) Last week, on average, how many hours per day did your drivers work? This includes their total time on duty (driving, doing non-driving work, waiting, etc.)?

- a. Number _____
- b. I don't know

(14) Was this a normal week for your drivers or do they usually work longer or shorter hours?

- a. Longer hours (number) _____
- b. Shorter hours (number) _____
- c. About the same _____

(15) On a normal workday, what activities do drivers typically perform? I will read a list. Please say yes or no to each activity.

- a. Check that passenger seatbelts are working
- b. Check tire pressure
- c. Inspect vehicle lights, wipers, mirrors, and windshield
- d. Report problems with their vehicle to the company in a written inspection report
- e. Record hours worked in a driver's log book

(16) Are your drivers required to wear a safety belt?

- a. Yes
- b. No

(17) How many of your passengers wear seat belts when they travel with you?

- A. All or almost all _____
- B. Some _____
- C. None or almost none _____

(18) I will now read a list of practices your company might have to monitor the safety of its drivers. Please say “yes” or “no” to each practice.

- A. The company keeps a file on each driver.
- B. Managers periodically ride along with drivers.
- C. Managers discuss problems with drivers when customers complain.
- D. Managers keep a list of all accidents.
- E. Managers review the drivers’ record from the DMV.
- F. The company requires a medical examination for drivers.
- G. The company checks references from previous employers.
- H. The company requires new drivers to pass a road test.
- I. The company provides training for drivers.
- J. Managers regularly discuss safety issues with drivers

We're almost done. There are only a few more questions.

(19) In the past 12 months, have you obtained any safety or training information for your drivers?

- A. Yes
- B. No [If no, skip to question 18]

(20) If yes, where do you get safety and training information for you or your drivers? Please say "yes" or "no" when I read each source.

- A. I have not collected safety or training information
- B. Driver licensing agency or Department of Motor Vehicles (DMV)
- C. Federal and State Regulations
- D. Government agency publications
- E. Industry and business associations
- F. Insurance company
- G. Driving school, community college, or formal training
- H. Friends and associates in the trucking or bus industry
- I. Newspapers and magazines
- J. Internet
- K. You already have most of the information you need
- L. You create your own training
- M. Other (please specify): _____

(21) If you operate 9 to 15 passenger vans, have your drivers reported any handling problems when the van is fully loaded?

- A. Yes ____
- B. No ____
- C. I don't know ____

(22) If they did report any handling problems, what did you and your drivers do to address problems? (open-ended)

Closing

Finally, there are four more questions. These are open-ended questions where you can express your opinion and offer other ideas.

(23) In your opinion, what are the most important actions you and your managers and drivers can take to ensure 9-15 passenger vehicle carriers operate safely? (open-ended)

(24) What safety information would be most useful to you for operating and managing these types of vehicles? (open-ended)

(25) If you could share advice regarding safety matters with other companies like yours, what would you tell them? (open-ended)

(26) Is there anything else you would like to add? (open-ended)

Thank you for your participation in this survey.