Attachment

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Form Approved OMB No. XXXX-XXXX Exp. Date XX/XX/XXXX

Management Practices (Time Period 1)

Your Role in Organization (e.g., safety director):	
A. EDUCATION	YES NO
1. Are drivers provided training about fatigue?	
If Yes to Item 1, what topics are covered in this training?	
2. Are drivers provided training about the safety-related risks of fatigue?	
If Yes to Item 2, what topics are covered in this training?	
3. Are schedulers provided training on these issues?	
4. Are management personnel provided training on these issues?	
5. Are dispatchers provided training on these issues?	
6. Was the effectiveness of training activities evaluated in any way (e.g., pre-post-training quizzes)?	

Public reporting burden of this collection of information is estimated to average 45 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing the collection of information. An agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. Send comments regarding this burden estimate or any other aspect of this collection of information, including

suggestions for reducing this burden to CDC/ATSDR Information Collection Review Office, 1600 Clifton Road NE, MS D-74, Atlanta, Georgia 30333; ATTN: PRA (0920-XXXX)

B. ALERTNESS STRATEGIES	YE	S NO
7. Are drivers provided training on alertness strategies?		
If Yes to Item 7, please indicate which alertness strategies?	_	_
Getting 7-9 hours of sleep	П	
Napping		
Healthy food		
Exercise		
Staying hydrated Caffeine as a short-term countermeasure		
Effect of over-the-counter and prescription drugs		
Limit/eliminate nicotine use	П	
Elitibelii ilidate fileotifie ase	П	П
8. Are there written policies regarding the use of alertness strategies?		
If Yes to Item 8, do the written policies differ in any way in how they are enforced please indicate how they differ?		Yes,
9. Are there written policies regarding on-duty rest opportunities?		
10. Not including the sleeper berth, are there facilities to support opportunities to workplace (e.g., break room that can be made quiet and dark to take a nap after prior to your drive home)?		
11. Was the effectiveness of the alertness strategies evaluated in any way? If Yes to Item 11, how were they evaluated?		
12. Do drivers get refresher training on alertness management in addition to any they might receive? If Yes to Item 12, how often are these activities performed (e.g., weekly, monthly etc.)?		

C. SCHEDULING	YE	S NO
13. Are there written organizational policies for drivers regarding basic work/rest schedules, in addition to federal hours-of-service regulations, (such as minimum duration of off-periods, maximum work time, maximum number of consecutive work periods, and recovery time between work cycles)?		
14. Is there an explicit written procedure that is used for exceptions to these policies?		
15. Have any changes been made to the number of staff for the purpose of reducing fatigue? If Yes to item 15, indicate what changes have been made to staff and what year changes were made.	[] thos	[] e
16. Have any changes been made to the delivery schedule for the purpose of reducing driver fatigue in the last 3 months? If Yes to Item 16, indicate what changes have been made to the delivery schedu year those changes were made.		nd what
17. Have any changes been made to delivery routing for the purpose of reducing If Yes to Item 17, indicate what changes have been made to the delivery routing those changes were made.	and	☐ ☐ what yea
18. Have any changes been made to work shift scheduling for the purpose of red fatigue? If Yes to Item 18, indicate what changes have been made to the work shift scheduling for the purpose of red fatigue?		
year those changes were made		
D. HEALTHY SLEEP19. Is information offered to drivers and other personnel about sleep disorders,	YE:	S NO
how to recognize sleep disorders, and/or how to get help if they suspect they have a sleep disorder? If Yes to item 19, what information is given?		
20. Is there a written policy that addresses diagnosis, treatment, and continued duty status of personnel with possible sleep disorders?		

YES NO

E. ORGANIZATIONAL

21. Do managers provide: Education to obtain adequate sleep? Alertness strategies to reduce fatigue? Scheduling practices that reduce fatigue? Encouragement to obtain adequate sleep?		
22. Is there someone at your company who is responsible for coordinating fatigue management activities?	e	
23. Is there a napping room at the terminal (reserved location for napping/sleep)?	? 🛮	
24. Is there a gym at the terminal (location for drivers to exercise)?		
25. Is top management involved in fatigue management activities and policy development?		
26. Is there a system that encourages drivers to submit reports of fatigue hazards If Yes to Item 26:, How does this system work (also indicate if this process is confidential)?	s? []	
How are reports submitted?		
What information is requested in the reports?		
Who are reports submitted to?		
What is the procedure for responding to reports?		
Who receives the responses to the reports?		
 27. If yes to Item 26, have any reports of fatigue hazards been reported? 28. If yes to Item 27, did any report result in a change to reduce the identified ha If Yes to Item 28, could you briefly describe one example of such a change one you consider the most significant, or just the first one that comes to mind)? 	azaro e (e.	d? □ □
		