Rapides Area Planning Commission
Rural Public Transit Pilot

Policy Manual

February 2024

803 Johnston Street
Alexandria, LA 71301
www.rapc.info

Rapides Area Planning Commission
Rural Public Transit Pilot

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Introduction:

The Rapides Area Planning Commission (RAPC) is developing a Rural Public Transit Pilot program (RPTP) as a centrally coordinated public transportation system to improve the efficiency and fulfill unmet rural public transportation demand throughout the Central Louisiana region.

As part of the first phase, RAPC will pilot the RPTP within Natchitoches and Grant Parishes providing on-demand, curb-to-curb rural public transportation through direct operations.

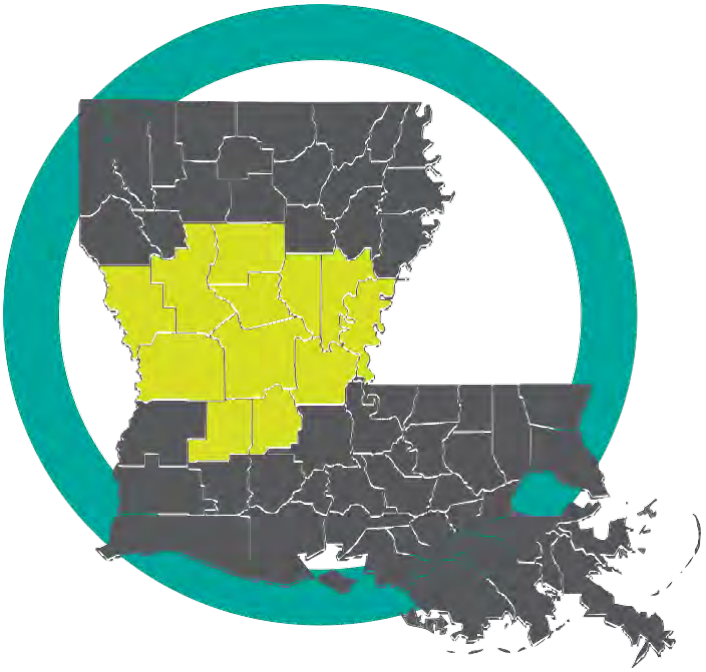
Need:

RAPC completed the Central Louisiana Rural Public Transportation (CLRPT) Study in December 2021. The study identified the need for additional public transportation resources in the 12- parish central Louisiana region through technical analysis and stakeholder engagement. A key recommendation of the study was the creation of a centralized Rural Public Transit Cooperative (RPTC) by RAPC to facilitate activities that will improve transit reliability and accessibility in the region.

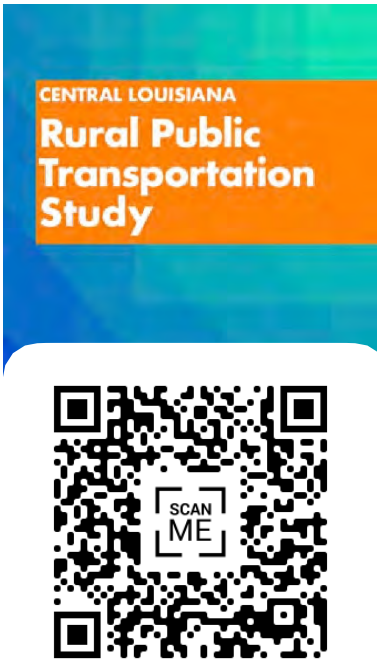
Development of the Rural Public Transportation Pilot program (RPTP) includes implementation of a variety of administrative and operational activities along with the commencement of a funding and sustainability plan to grow RPTP operations incrementally and sustainably in three phases.

The first phase consists of short-term pilot (2-years) and includes procurement of four vehicles and operating assistance to begin rural curb-to-curb demand response transit service in Natchitoches and Grant Parishes.

CLRPT Study Area:



Scan to view CLRPT Study:



Key Findings:

- Healthcare, social services, economic development, education, municipal/parish governance agencies and community partners identified transportation as a critical need and priority.
- Over 40% of Grant and Natchitoches Parish census tracts area are defined as areas of persistent poverty, with 18.8% and 32.3% total population respectively.
- Population includes a disproportional number of disabled, low income, and seniors.
- Combined annual unmet trip demand estimated at 60,000+ transportation trips needed.
- Unmet transportation needs include employment, access to healthcare, goods, and other services.

Estimated Unmet Rural Transit Demand

Parish	Total Est. Annual Rural Transit Demand	Total Est. Daily Rural Transit Demand	Actual Annual Trips	Annual Daily Trips (Annual/ 365)	Unmet Annual	Unmet Daily
Grant	26,522	73	0	0	26,522	73
Natchitoches	40,816	112	0	0	40,816	112

Regulations & Programs:

In its role of providing financial assistance to develop new transit systems and improve, maintain, and operate existing systems nationwide, FTA oversees thousands of grants provided to states, tribes, and local public agencies to support public transportation. Grantees have a responsibility to comply with statutory and regulatory requirements associated with the management of federally assisted grants.

Requirements:

FTA monitors grants and federally funded projects to confirm that grantees establish and follow federally mandated procedures, such as:

- Demonstrating legal, financial, and technical capacity to carry out programs and projects
- Providing technical inspection and supervision by qualified professionals of all work in progress
- Ensuring compliance with procurement requirements, including the Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards
- Complying with all applicable civil rights statutes and implementing regulations
- Complying with applicable safety and asset management

The Rapides Area Planning Commission developed this comprehensive policy for the Rural Public Transit Pilot program to ensure compliance to FTA statutory and regulatory requirements.

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Fare Schedule

First Come, First Serve

Service is depended on the availability of seats, vehicles, and time restraints.

BACKGROUND

The Rapides Area Planning Commission's Rural Public Transit Pilot provides curb-to-curb transportation service throughout the combined Grant and Natchitoches Parish area as part of a pilot program operated by the Rapides Area Planning Commission.

This flexible service ride provides rides locally and to nearby destinations but requires a ride reservation be made in advance. The Rural Public Transit Pilot operates a fleet of 4 vehicles funded by the Federal Transit Administration, Section 5311 and non-federal matching funds.

ADA Accessible Service

All vehicles are ADA accessible. Escort service is not provided. Persons with a disability must be able to function on their own or provide their own escort. One escort is allowed to ride for free when accompanying a **registered** customer who is a senior 65 or older and has a disability.

RESERVATIONS

Transportation is provided to the General Public and ADA eligible individuals in Natchitoches and Grant Parish, Monday – Friday, 7:00 am to 5:00 pm. Riders must state all desired stops when booking their reservations. **CLOSED HOLIDAYS**.

Call (318) 664-9720 or visit www.rapc.info/transit-pilot to make reservations Monday through Friday, 8:00am – 1:00pm. NO RESERVATIONS WILL BE ACCEPTED AFTER 1:00 PM OF THE DAY BEFORE.

FARE SCHEDULE

	Full Fare / Trip	Half-Fare / Trip	*Half fares are available for **registered** customers who are seniors 65 and older, and children under the age of 12.*
IN TOWN DESTINATION	**$4.00**	**$2.00**	Trips wholly within a town or city
OUT OF TOWN DESTINATION	**$12.00**	**$6.00**	Trips ending in a town or city different from its origin

- Extra stops require an additional trip, and the fares are based on the above rates.
- Failure to cancel one (1) hour in advance will result in a 'NO SHOW' (see our NO-SHOW POLICY).
- Drivers will wait ten (10) minutes at your scheduled stop before departing to pick up the next passenger.
- Customers are required to provide a car seat for children ages 0 to 4 years.
- All riders must comply with our rural transit service policy prior to riding (see our SERVICE POLICY).

METHODS OF PAYMENT

Rapides Area Planning Commission will not accept cash payment for fares. Payment must be made using a credit, debit, or ATM card over the phone. Refunds are available if you call and cancel your trip a minimum of an hour before your scheduled pickup time (see our NO-SHOW POLICY).

Half-fares are available for registered customers who are seniors 65 and older, and children under the age of 12 who are accompanied by a paying adult. No charge for children aged 0 to 4 years.

Medicaid/Insurance
Currently, we **do not accept** payments using Medicaid or insurance.

SCHEDULING HOURS
8:00am – 1:00pm, Monday - Friday
See Holiday and Special Training Closings.

HOW TO SCHEDULE A RIDE

1. Visit our website at www.rapc.info/transit-pilot OR
2. Call the Rural Transit Pilot Scheduling Team at 318-664-9720
3. Be prepared to tell the SCHEDULER:
    - Passenger name and phone number
    - Date of birth
    - Ethnicity
    - Name & Physical address of pick-up location
    - Name & Physical address of drop off location
    - Time and date of appointment
    - Preferred pick-up time
    - Any/all additional stops
    - Number of passengers that will accompany you
    - Emergency contact name and phone number
    - If you need special assistance, if you use a mobility device or will need lift equipment to board *(to ensure your vehicle is properly equipped)*
4. Please be sure to have all your information ready when scheduling a ride. Name, phone number, date of birth, and ethnicity are required for each accompanying passenger, including escorts.
5. When scheduling, keep in mind that a trip request will have to be filled out for each individual rider (this does not pertain to escorts or children under the age of 4).
6. When requesting a trip reservation or assisting someone who cannot request a trip themselves, make sure to list the phone number of the person who will be providing payment.

If You, Must Cancel Your Trip, Please call one (1) hour in advance of pick-up time. There is no charge for cancelling a trip, however; no shows may result in suspended service.

CURB-TO-CURB SERVICE

1. Please allow a 40-minute scheduling window for pick-up times. For example, if your preferred pick-up time is 8:00 am, we may schedule a pick-up between 7:40 am and 8:20 am.
2. Drivers will only wait 10 minutes past the scheduled pick-up time for the passenger before the trip is canceled and considered a “No Show”.
3. We will not change your destination/drop off point during transport. Drivers are not permitted to transport you to any other destination other than your predetermined scheduled trip. If changes need to be made to your schedule, you must contact dispatch an hour before your trip begins. If you need to add a stop to your scheduled trip you must send in a request before 1:00 pm the day prior.

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PASSENGER SAFETY RULES

PASSENGER SAFETY ON RURAL PUBLIC TRANSIT PILOT VEHICLES

Safety of our passengers is our number one concern, and these rules must be followed by everyone:

1. Do not lean or extend the body or articles from the vehicle.

2. No smoking, vaporing, tobacco use, eating or drinking on the bus.

3. No consumption of any alcoholic beverage or possess an open container of any alcoholic beverage.

4. No soliciting, advertising, selling, or distributing goods or services, exception as authorized by RAPC.

5. Do not possess, use, or sell any controlled substance.

6. Do not carry or possess any dangerous weapons including but not limited to guns, knives, swords, box cutters or other devices that are capable of being used as a form of weapon.

7. Do not possess or transport any flammable liquid, or other hazardous material. This includes, but is not limited to, gasoline, kerosene, propane, industrial chemicals, any other flammable chemical, and any toxic substance.

8. Proper clothing consisting of a top, bottom and shoes must be worn at all times. The top or shirt must conceal the front side of the torso; the bottom or pants must conceal from the waist down to approximately 18 inches and if the shoes are of lace style, these laces must be tied.

9. All riders shall maintain appropriate and reasonable personal hygiene that is not seriously disruptive to fellow passengers. Urinating, defecating, vomiting, spitting or inappropriately discharging of bodily fluids on transit property will not be tolerated and is considered a health concern for our transit system.

10. When de-boarding the bus, please wait until the bus has pulled away before crossing the street.

11. Do not engage in disruptive, disturbing behavior including: distracting the driver, disrespecting fellow passengers', loud conversation, profanity or operating any electronic device with sound without earphones. Verbal or physical abuse of fellow passengers, employees, or damage to equipment will not be tolerated.

12. All Passengers must use safety restraint equipment at all times if such equipment is available on a vehicle.

13. Passengers who are either less than four (4) years of age or who weigh less than forty (40) pounds are required to use an appropriately sized child safety seat, and any such seat is required to be properly secured with available restraint equipment at all times. These child safety seats are the sole responsibility of the guardian of the child.

14. It is the passenger's responsibility to use the oxygen cylinder to make sure each oxygen cylinder is secured to prevent movement and leakage. Each cylinder should be loaded and secured in an upright position. "Secured" means that the cylinder is not free to move when the vehicle is in motion.

15. It is the passenger's responsibility to use the oxygen cylinder to make sure oxygen cylinders or other medical support equipment should never be stored or secured in the aisle. Make sure that the seating of the passenger requiring oxygen does not restrict access to exits or use of the aisle.

16. Since the release of oxygen from a cylinder could accelerate a fire, it is the passenger's responsibility to use the oxygen cylinder to make sure each cylinder should be secured away from sources of heat or potential sparks. Securing personal oxygen tanks are the passenger's responsibility.

17. The aisles of the bus must be clear at all times.

18. Do not vandalize the vehicle or transit property.

19. Violation of any federal, state, parish, or local criminal laws.

PEOPLE WHO REFUSE TO FOLLOW THE NECESSARY RULES CAN BE TEMPORARILY OR PERMANENTLY SUSPENDED IF DEEMED NECESSARY BY THE TRANSIT AGENCY TO ENSURE THE SAFETY OF OUR PASSENGERS AND EMPLOYEES.

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LOBBYING POLICY

Description of Policy

Grantees who receive an award of $100,000 or more Federal funds are required to file the certification required by 49 CFR part 20, "New Restriction on Lobbying." Each tier certifies to the tier above that it will not and has not used Federal appropriated funds to pay any person or organization for influencing or attempting to influence an officer or employee of any agency, a member of Congress, officer or employee of Congress, or an employee of a member of Congress in connection with obtaining any Federal contract, grant or any other award covered by 31 U.S.C. 1352. Each tier shall also disclose the name of any registrant under the Lobbying Disclosure Act of 1995 who has made lobbying contracts on its behalf with non-Federal funds with respect to that Federal contract, grant or award covered by 31 U.S.C. 1352. Such disclosures are forwarded from tier to tier to the recipient.

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COST ACCURAL POLICY

Description of Policy

The Rapides Area Planning Commission's Rural Public Transit Pilot Program will maintain its accounting records on the accrual basis in a manner that facilitates the preparation of audited financial statements conforming to generally accepted accounting principles.

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PREVENTITVE MAINTENANCE POLICY

Making Preventive Maintenance Arrangements

The Rural Public Transit Pilot Program (RPTP) contracts with ROSS Bus & Equipment Sales and ALPRO Automotive to perform Preventive Maintenance needs. The Transit Manager is responsible for scheduling the vehicles for their PM work. When scheduling, the Transit Manager sends out calendar invites to the driver/drivers and dispatch along with an email detailing the maintenance to be done, and when and where the maintenance will take place. The Transit Manager is responsible for overseeing whether or not the recommended PM schedules are being followed. The PM intervals have been determined based on factors such as manufacturers' recommendations, mileage, and wear and tear on the buses.

Maintaining Comprehensive Maintenance Records

At the end of every month, the Transit Manager will add any maintenance record for each of the vehicles to the living file. The record will include a detailed notation for each time maintenance is performed on the vehicle, including whether the maintenance was preventive or unscheduled, and if a road call was required. Other pertinent information to include regarding each maintenance entry includes: the mileage, the dates in and out of the shop, a description of the repair, the cost of the maintenance work (broken down by parts and labor), and the name of the mechanic who performed the work. Fuel use for each vehicle will also be tracked and a record will be kept to quickly determine maintenance and fuel costs for various types of vehicles and repairs, as well as providing an easy mechanism for identifying ongoing mechanical issues.

Vehicle Preventive Maintenance Schedule

Scheduled Maintenance	
Every Two Weeks	Wash vehicle interior and exterior.
Check Every Month	Engine oil level. Function of all interior and exterior lights. Tires (including spare) for wear and proper pressure. Windshield washer fluid level.
Check Every Six Months	Battery connections. Clean if necessary. Body and door drain holes for obstructions. Clean if necessary. Cooling system fluid level and coolant strength. Door weatherstrips for wear. Lubricate if necessary. Parking brake for proper operation. Seatbelts and seat latches for wear and function. Safety warning lamps (brake, ABS, airbag, and seatbelts) for operation. Washer spray and wiper operation. Clean or replace blades as necessary.
MULTI-POINT INSPECTION	
Multi-point Inspection	Accessory drive belt(s). Battery performance. Engine air filter. Exhaust system. Exterior lamps and hazard warning system operation. Horn operation. Radiator, cooler, heater, and A/C hoses.

	Suspension component for leaks or damage. Steering and linkage. Tires (including spare) for wear and proper pressure.
Scheduled Maintenance (check at every scheduled maintenance interval)	Fluid levels; fill if necessary Oil and fluid leaks. Windshield for cracks, chips, or pits Washer spray and wiper operation
Normal Scheduled Maintenance	
Every 7,500 miles	Rotate the tires, inspect tire wear, and measure tread depth. Inspect the wheels and related components for abnormal noise, wear, looseness or drag.
Every 10,000 miles or 700 engine hours, whichever comes first	Change the engine oil and filter.
Every 15,000 miles	Inspect the automatic transmission fluid level. Inspect the brake pads, rotors, hoses, and parking brake. Inspect the engine cooling system strength and hoses. Inspect the exhaust system and heat shields. Inspect the steering linage, ball joints, suspension, tie-rod ends, driveshaft and the U-joints.
Brake Fluid Maintenance	
Every 3 Years	Change the brake fluid.
Wheelchair Lift Maintenance	
Every Year	Service wheelchair lift yearly. (Wheelchair lift is cycled daily by drivers, required by Pre-Trip Inspection.)
Other Maintenance Items	
Every 30,000 miles	Replace the engine air filter. Torque the rear acle U-bolts to specification.
Every 60,000 miles	Replace the front wheel bearing grease and grease seal if you use non-seal bearings.
Every 97,500 miles	Replace the spark plugs. Replace the rear axle fluid.
Every 105,000 miles	Inspect the accessory drive belts.
Every 150,000 miles	Change the automatic transmission fluid. Change the automatic transmission filter. Replace the accessory drive belts if not replaced within the last 100,000 miles. Replace the front wheel bearings and seals if you use non-sealed bearings.
Every 200,000 miles	Change the engine coolant.

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SERVICE POLICY

Description Of Services
The Rural Public Transit Pilot is operated by the Rapides Area Planning Commission providing non-emergency, demand-response transportation service to the general public and ADA eligible individuals residing inside the Natchitoches and Grant Parish service area. The service operates a fleet of 4 vehicles funded by the Federal Transit Administration, Section 5311, and non-federal matching funds. This is a demand-response service and reservations are accepted on a first come first served basis with a minimum of 24 hours required. Drivers will not enter passengers' home and the agency does not provide an escort service. However, passengers with disabilities are allowed free service for one escort. The system operates lift-equipped vehicles throughout the service area. Time allowed for boarding and alighting is 3 minutes for all passengers with regards to extraordinary situation at the agency's discretion.

Service Area
Transportation services are provided for the general public to destinations inside the combined two-parish Grant and Natchitoches Parish service area.

Days And Hours Of Service
Riders must state desired stops when booking their reservations. General Public and ADA eligible individuals Transportation is provided in Natchitoches and Grant Parish, Monday – Friday. First pick-up 7:00 am and last pick-up 5:00 pm. Riders must state all desired stops when booking their reservations. CLOSED HOLIDAYS. Call (318) 487-5401 to make reservations Monday through Friday, 8:00 am - 1:00 pm.

A minimum 24-hour advance notice is required on all reservations. No reservations will be accepted after 1:00 pm of the day before.

Services are provided from Monday through Friday within our service areas, apart from the following holidays:

- Labor Day
- Martin Luther King's Birthday
- All Saint's Day
- President's Day
- Thanksgiving Day
- Day after Thanksgiving
- Mardi Gras Day
- Good Friday
- Christmas Eve
- Christmas Day
- New Year's Eve
- New Year's Day
- Memorial Day
- Juneteenth
- Independence Day

Reservations, Scheduling, & Cancellations

Request for transportation service must be made by calling the office for a reservation at least 24 hours in advance. Passengers are expected to name all required stops and times when making reservations and must call in any trip changes or trip cancellations. A passenger who is not home for pick up or cancels a trip at the time of pick up will no longer be eligible for services after the third time. While we try very hard to honor a passengers' scheduling needs, we must also operate in a cost-efficient manner. This will sometimes result in adjusting pick-up times to fill the system's needs. Passengers must realize that a driver may be at least 30 or more minutes early for pick up and the passengers should be ready to go. Do not wait until the last minute to get ready. Our schedules are usually full, and drivers are instructed to wait no more than 10 minutes before moving on. A second van will not be sent later because a passenger is not ready when the van arrives. The trip will have to be rescheduled for another day. There may be times when circumstances beyond our control may cause us to run late. Please be patient and know that we are doing our very best. When no exact time for a return time is known in advance, such as doctor's appointments, passengers will be required to wait until a van is available. When scheduling transportation please state if a handicapped vehicle is needed and if an escort will be riding.

***To schedule a trip, call the Rapides Area Planning Commission Rural Public Transit at 318-664-9720, at least 24 hours in advance. No appointments will be accepted after 1:00 p.m. the day before.**

Passenger Assistance

The Rapides Area Planning Commission's Rural Public Transit Pilot complies with ADA requirements by attempting to accommodate all wheelchair mobility aids in common use. However, the passenger must provide his or her own wheelchairs or mobility services. Safety considerations are a major concern in assisting wheelchair riders. Therefore, we will report any mobility devices or ramps that we consider unsafe to the passenger for their own safety. When a disabled passenger is unable to function on their own, we will recommend they supply their own escort. An escort is someone accompanying a passenger and assisting that person in entering and leaving buildings and is expected to sit close to their passenger on the van and may assist the driver in securing the passenger and/or the passenger packages. The drivers are not responsible for carrying packages or other personal items for passengers except in certain situations. No pets are allowed on vans. The only animals allowed are service animals. Children under the age of seventeen (17) must be accompanied by a parent, legal guardian, or responsible person.

Passenger Conduct And Responsibility Agreement
Passengers are expected to show courtesy and consideration to the driver and other passengers. The driver's instructions are to be always followed. Inappropriate behavior will not be tolerated, and system rules will be enforced. Passengers must wear seat belts and secure carry-on items and personal belongings. Passengers must also always remain in their seats when the van is in motion. Children 4 years of age or under must be in a safety restraint seat. It is the responsibility of the guardian to provide any required child restraint seat needed. There will be no smoking, chewing tobacco, eating, drinking of any sort and drug use on our vehicles. The only exception will be in the event of medical needs. Passengers are expected to practice good personal hygiene. Foul language, fighting, harassing driver or other passengers, and carrying weapons are also forbidden. Any passenger with an infectious or contagious medical condition shall report at the time when they call to schedule their ride. Passengers are expected to abide by the agency fare policy. Fares are given prior to the departure of the trip. Failure to abide by these rules will result in a passenger being denied services.

Passenger Comment And Complaint Procedures
Our transit system is dedicated to giving the best service possible and to further this goal we would like to hear what our riders have to say about our system. We encourage our riders to make their thoughts and suggestions known to us. We need to know what we are doing right, as well as what needs improvement. Passengers may call in or write comments to:

Gracie Skinner
RAPC Transit Manager
P.O. BOX 1758
Alexandria, La. 71306
318-487-5401 x20
gracie@rapc.info

All comments or complaints are confidential if requested. Complaints will be reviewed, and the transit system will respond to all complaints within 10 working days. Evaluations of service forms are available on all vehicles.

Transit System Responsibilities
Rapides Area Planning Commission's Rural Public Transit Pilot is responsible for providing safe, clean, reliable service in a timely and cost-efficient manner. Our system abides by all applicable federal, state, and local laws and regulations as well as the policies detailed in this service policy. Agency insurance coverage is more than the legal minimum. All vehicles are inspected daily for defects and regular maintenance schedules are maintained. Our agency cannot be responsible for any items left on our vehicles. Passengers are responsible for their own belongings. Our agency is committed to maintaining an alcohol and drug-free workplace and we have a separate drug and alcohol policy that we follow. Drivers undergo pre-employment and random drug and alcohol testing.

Safety
To assure safety, all drivers are required to have a clean driving record and the proper license. Drivers receive regular ongoing training that is updated yearly. All RPTP employees are required to complete all DOTD required trainings yearly. All passengers must be seated and wearing seat belts and wheelchair passengers strapped down whenever a vehicle is in motion. Our system has wheelchair tie downs. If a wheelchair cannot be secured the passenger will be transferred into a regular seat if possible. Drivers will not move vehicle until all are safety compliant. Anyone refusing to wear a seat belt will be denied service. We are at all times committed to the safe operation of our vehicles including the safe boarding and de-boarding of passengers. All passengers' belongings and service animals are to be out of the walkway to prevent falls.

Emergency Procedure
In the event of severe weather that may force emergency closings anyone with appointments will be notified and rescheduled. Severe weather with winds of 45 MPH all vehicles will be parked. Passengers must take responsibility of notifying the driver if they or another passenger are ill, injured or otherwise in distress while on the vehicle. Should an accident or vehicle emergency occur passengers are expected to follow the driver's instructions, remain calm, make an orderly evacuation of the vehicle, if necessary, stay off the roadway and in a safe location until further notification and assist the driver in calling for emergency response if driver is in distress and unable to call for help

Non-Discrimination Act
All passengers will be informed that under Title VI of the Civil Rights Act of 1964, no person shall be denied service because of race, color, or national origin and further that under Section 504 of the Rehabilitation Act 1973, no person shall be denied service because of disability. Passengers have a right to a quiet and comfortable environment without fear of verbal, mental, or physical abuse from employees or other passengers.

Closing Statement
This is your service and your cooperation and input in this program will only make it better for you and our drivers. Please feel free to call us for further information at 318-487-5401.

RURAL TRANSIT PILOT SERVICE POLICY

By signing this document, I _____ acknowledge that I have been provided a copy of the Rapides Area Planning Commission's Rural Public Transit Pilot Service Policy, and that I understand it is my responsibility to read and comply with the policy.

_____ _____
Signature of Passenger Date

_____ _____
Signature of Driver Date

Rapides Area Planning Commission
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TITLE VI

I. Policy Statement

The **Rural Public Transit Pilot,** operated by the Rapides Area Planning Commission, ensures compliance with Title VI of the Civil Rights Act of 1964, 49 CFR, Part 21, and related statutes and regulations to the end that “no person in the United States shall, on the ground of race, color, or national origin, be excluded from participation in, be denied the benefits of, or be subjected to discrimination under any program or activity receiving Federal financial assistance” (42 U.S.C. Section 2000d) including the denial of access for Limited English Proficient (LEP) persons.

The purpose of this plan is to assist the **Rural Public Transit Pilot** in its administration and management of Title VI related activities. The Rapides Area Planning Commission’s Title VI Coordinator for the **Rural Public Transit Pilot** is Kathy Powell, Office Manager, Title VI Officer. She can be contacted at 318-487-5401 and/or kathy@rapc.info.

II. Notice to the Public

The **Rural Public Transit Pilot** has developed a Title VI Notice to provide information to the public regarding the **Rural Public Transit Pilot**’s Title VI obligations and to inform the public of the protections against discrimination afforded to them by Title VI. The notice also includes contact information to file a discrimination complaint with the Rapides Area Planning Commission/**Rural Public Transit Pilot** as well as information to file a complaint directly with the Federal Transit Administration (FTA).

The **Rural Public Transit Pilot** has posted the Title VI Notice on the agency’s website and in public areas of the agency’s offices including the receptionist area and meeting rooms. The notice is also posted in all transit vehicles. This notice will be translated into other languages as needed. A copy of the notice is included as Appendix A.

III. Complaint Procedures and Form

A Title VI complaint may be filed by any individual or individuals who allege that they have been subjected to discrimination or adverse impact under any FTA funded program or activity based on race, color, or national origin. The **Rural Public Transit Pilot** adopted Title VI complaint procedures to investigate and track complaints. A formal, signed, written Title VI complaint form must be filed within 180 days of the date of the alleged act of discrimination. A copy of the complaint form is included in Appendix B. The complaint procedures and complaint form are also posted on the Rapides Area Planning Commission/**Rural Public Transit Pilot** System website. If information is needed in another language, the complainant can contact 318-487-5401.

The statement “If information is needed in another language, contact 318-487-5401 will be posted with the complaint procedures in English and in any other language(s) spoken by LEP populations that meet the Safe Harbor threshold.
Completed complaint forms should be submitted to:

Kathy Powell
RAPC Title VI & ADA Coordinator, Office Manager
Rapides Area Planning Commission
P.O. Box 7586
Alexandria, LA 71306
318-487-5401
kathy@rapc.info
www.rapc.info

Once the complaint is received, the Rapides Area Planning Commission/**Rural Public Transit Pilot** will review it to determine who has jurisdiction. The complainant will receive an acknowledgement letter informing her/him whether the complaint will be investigated by the Rapides Area Planning Commission/**Rural Public Transit Pilot**'s office. The Rapides Area Planning Commission/**Rural Public Transit Pilot** will only process complaint forms that are complete and signed.

In a situation where the complainant is unable or incapable of providing a written complaint, a verbal complaint of discrimination may be made to the Rapides Area Planning Commission/**Rural Public Transit Pilot**. Under these circumstances, the complainant will be interviewed, and the Rapides Area Planning Commission/**Rural Public Transit Pilot** will assist the complainant in converting the verbal allegations to a formal written complaint.

The Rapides Area Planning Commission/**Rural Public Transit Pilot** has 15 business days to investigate the complaint. If more information is needed to resolve the case, the Rapides Area Planning Commission/**Rural Public Transit Pilot** may contact the complainant. The complainant has 15 business days from the date of this letter to send the requested information to the investigator assigned to the case. If the investigator does not receive the additional information from the complainant within 15 business days, the Rapides Area Planning Commission/**Rural Public Transit Pilot** can administratively close the case. A case can also be administratively closed if the complainant no longer wishes to pursue the case.

After the investigator reviews the complaint, she/he will issue one of two letters to the complainant: a closure letter or a letter of finding (LOF). A closure letter summarizes the allegations and states that there was not a Title VI violation and that the case will be closed. A LOF summarizes the allegations and the interviews regarding the alleged incident and explains whether any disciplinary action, additional training of the accused staff member, or other action will occur. If the complainant wishes to appeal the decision, they have 15 days after the date of the closure letter or the LOF to submit an appeal letter to the Rapides Area Planning Commission/**Rural Public Transit Pilot**.

If the complainant is not satisfied with actions taken locally or if they demand further action, the complaint will be referred to:

Title VI / ADA Programs Manager
LADOTD - Compliance Programs Section
P.O. Box 94245
Baton Rouge, LA 70804-9245
225-379-1923
225-379-1385 (fax)

A person may also file a complaint directly with the Federal Transit Administration:

FTA Office of Civil Rights
Attn: Complaint Team
East Building, 5th Floor – TCR
1200 New Jersey Avenue SE
Washington, DC 20590

IV. Transit-Related Investigations, Complaints, and Lawsuits

The Rapides Area Planning Commission/**Rural Public Transit Pilot** shall maintain a log of Title VI complaints received. The log shall include the date the complaint was filed, a summary of the allegations, the status of the complaint, and actions taken in response to the complaint. Active Title VI transit-related investigations and lawsuits shall also be included in this log. This log shall be included in the Title VI Program that is submitted to LADOTD every three years.

No Title VI transit-related investigations, complaints, or lawsuits have occurred since the previous submission of the Title VI Program to LADOTD. A template of the Log of Transit-Related Title VI Transit Investigations, Complaints, and Lawsuits that will be used if a complaint or lawsuit is filed can be found in Appendix C.

V. Public Participation Plan

The Rapides Area Planning Commission/**Rural Public Transit Pilot** commits to provide early and continuous opportunities for public participation in the transit decision making process. These opportunities are open to everyone including minority, low income, and Limited English Proficiency (LEP) populations. The Public Participation Plan provides for an open exchange of information and ideas between the public and transit decision makers. The Rapides Area Planning Commission's Public Participation Plan is ongoing and reviewed regularly to identify, meet, and serve the community's needs.

In an effort to integrate the opinions of minority, low-income, and LEP populations into community outreach activities, the Rapides Area Planning Commission/**Rural Public Transit Pilot**'s public participation program will:

- Coordinate with community-based organizations to identify and implement strategies to reach out to members in the affected minority, low-income, and LEP communities.
- Reduce barriers to public participation from these segments of the population.
- Place public notices on transit websites, in the receptionist areas, and on transit vehicles.
- Utilize the media (social media, local newspapers, radio, television, mobile transit app) to notify minority, low-income, and LEP populations of public involvement efforts.
- Provide opportunities for public participation through means other than written communication, such as virtual meetings, personal interviews, or the use of recording devices to capture oral comments.
- Hold in-person public meetings in locations, facilities, and at meeting times that are convenient and accessible to the minority, low-income, and LEP populations.
- Ensure that the decision-making process adequately considers the issues and concerns raised by minority, low-income, and LEP populations.
- Develop transit and Title VI information in English and other languages as needed.
- Make public information available in electronically accessible formats.
- Distribute information at community events or piggyback engagement efforts onto regularly scheduled community meetings.
- Utilize interactive and collaborative online technologies, such as social media, blogs, video sharing, and transit mobile app.
- Cross-promote opportunities for public participation with municipalities, community organizations, housing authorities, apartment complexes, colleges, vocational schools, and major area employers.
- Develop signs, fliers, or other materials to mail or distribute to the general public and to post in libraries, community centers, etc.
- Use non-traditional media outlets to solicit input, such as local neighborhood publications and online outlets like YouTube, Twitter, Instagram and Facebook.
- Post public participation opportunities on Cenla Transit Coalition's social media sites.
- To date, the Rapides Area Planning Commission/**Rural Public Transit Pilot** has participated in the following public outreach and involvement activities:
- Rapides Area Planning Commission/**Rural Public Transit Pilot** staff members have participated in and supported Community-Based Transportation Programs for disadvantaged communities.
- Public Meetings have been held at convenient times and accessible locations for minority, low-income, and LEP populations.

- Meeting notifications have been published in newspapers that service minority, low-income, and LEP populations.
- Rapides Area Planning Commission/**Rural Public Transit Pilot** staff members attended local meetings to identify community needs and to participate as a stakeholder agency.
- Rapides Area Planning Commission/**Rural Public Transit Pilot** staff members participated in public outreach efforts to explain specific transit proposals and to solicit comments.
- Public notices were posted on the transit website, in the receptionist area, and on the transit vehicles.
- Title VI information was developed and distributed in English and Spanish.
- Notices of public participation opportunities were posted on the Rapides Area Planning Commission's website.

VI. Limited English Proficiency Plan

The Four Factor Analysis is used to identify Limited English Proficient (LEP) persons who need language assistance, outline how language assistance is provided, and describe how the Rapides Area Planning Commission/**Rural Public Transit Pilot** considers the needs of LEP persons. This assessment balances the following four factors:

1. The number or proportion of LEP persons eligible to be served or likely to be encountered by the Rapides Area Planning Commission/**Rural Public Transit Pilot'**s transit program. In addition to the number or proportion of LEP persons served, the analysis identifies:

    A. How LEP persons interact with the Rapides Area Planning Commission/ **Rural Public Transit Pilot**;

    B. Where LEP communities are located and the number or proportion of LEP persons from each language group to determine the appropriate language services for each language group;

    C. The literacy skills of LEP populations in their native languages to determine whether document translation will be an effective practice or whether translated auditory resources will be more effective; and

    D. Whether or not LEP persons are underserved by the Rapides Area Planning Commission/**Rural Public Transit Pilot's** transit program due to language barriers.

2. The frequency with which LEP persons come into contact with the transit program, activities, or services. The following areas were evaluated:
    A. Transit user demographics;
    B. Trips scheduled through the mobile app, websites, and over the phone;
    C. Public meeting participation;
    D. Customer service interactions;
    E. Rider surveys; and
    F. Operator surveys.

3. The nature and importance of the Rapides Area Planning Commission/**Rural Public Transit Pilot**'s transit program, activities, or services to people's lives.

4. The resources available to the Rapides Area Planning Commission/**Rural Public Transit Pilot** for outreach to LEP persons and the costs associated with that outreach.

The Rapides Area Planning Commission/**Rural Public Transit Pilot** developed a Limited English Proficiency Plan which is located in Appendix D. It includes:

- Results of the Four Factor Analysis, including a description of the LEP population(s) served;

- A description of how language assistance services will be provided;

- The methods used by the Rapides Area Planning Commission/**Rural Public Transit Pilot** to provide language assistance services;

- A description of how employees are trained to provide timely and reasonable language assistance to LEP populations;

- A description of how notice is provided to LEP persons about the availability of language assistance; and

- An explanation of how the plan is monitored, evaluated, and updated.

Safe Harbor Provision
In accordance with the Safe Harbor Provision, the Rapides Area Planning Commission/ **Rural Public Transit Pilot** identified the following language group which exceed the threshold of 1,000 persons or 5%, whichever is less, of the total population eligible to be served by the program: Spanish. This language group was identified by using the Limited English Proficiency Assessment. The assessment and survey are included in Appendix D along with a copy of the current census data for the Rapides Area Planning Commission/Rural Public Transit Pilot's service area.

The Rapides Area Planning Commission/**Rural Public Transit Pilot** focuses translation efforts in Spanish, which is the largest language group other than English. Vital documents such as public notices, complaint forms, and complaint procedures are available in Spanish. The Rapides Area Planning Commission also provides free translation services upon request.

VII. Minority Representation on Planning and Advisory Bodies

The Rapides Area Planning Commission/**Rural Public Transit Pilot** will not deny a person the opportunity to participate as a member of a planning, advisory, or similar body which is an integral part of the program on the grounds of race, color, or national origin.

The Rapides Area Planning Commission/**Rural Public Transit Pilot** has transit related non-elected planning boards, advisory councils or committees, or similar committees that are selected by the Rapides Area Planning Commission/**Rural Public Transit Pilot**.

All committees actively recruit and continue to reach out to community groups to find additional diverse individuals to represent the population and help provide experience and ideas to improve transit services. All committees encourage participation by posting applications and information on the Rapides Area Planning Commission/**Rural Public Transit Pilot**'s website regarding the need for additional members.

VIII. Guidance on Determining Site or Location of Facilities

When acquiring land and/or constructing facilities, the Rapides Area Planning Commission/**Rural Public Transit Pilot** shall not make selections with the purpose or effect of excluding persons from, denying them the benefits of, or subjecting them to discrimination under any Federally funded transit program based on the grounds of race, color, or national origin. The Rapides Area Planning Commission/**Rural Public Transit Pilot** shall comply with all federal requirements including 49 CFR Part 21 and FTA Circular 4702.1B and all subsequent provisions.

The Rapides Area Planning Commission/**Rural Public Transit Pilot** will complete a Title VI equity analysis during the planning stage of any new facility related to the potential site location to ensure the location is selected without regard to race, color, or national origin. Wherever necessary and/or required, the Rapides Area Planning Commission/**Rural Public Transit Pilot** will engage in outreach to persons potentially impacted by the placement of facilities. A Title VI equity analysis will be completed before the site selection to compare the equity impacts of various alternatives. A copy of the Title VI Construction Project Analysis form that will be used to perform the equity analysis can be found in Appendix E.

IX. Board Meeting Resolution of Approved Title VI Program

The Rapides Area Planning Commission approved the Title VI program on October 26, 2022. A copy of the authorizing resolution is included as Appendix F.

Appendix A
Title VI Notice to the Public

TITLE VI NOTICE OF PROTECTION AGAINST DISCRIMINATION

Rapides Area Planning Commission's Rural Public Transit Pilot transit program operates its service without regard to race, color, and national origin in accordance with Title VI of the Civil Rights Act. Any person who believes she or he has been aggrieved by any unlawful discriminatory practice under Title VI may file a complaint with the Rapides Area Planning Commission.

For more information on the civil rights program and the procedures to file a complaint, contact:

Rapides Area Planning Commission
P.O. Box 1758,
Alexandria, LA 71306
318-487-5401
www.rapc.info

A complaint may be filed directly with the Federal Transit Administration by contacting:

Office of Civil Rights
Attention: Complaint Team
East Building, 5th Floor-TCR
1200 New Jersey Ave., SE
Washington DC 20590
FTACivilRightsCommunications@dot.gov

If information is needed in another language, then contact 318-487-5401.
Si sen necesita información en otro idioma, comuniques al 318-487-5401.

Title VI Notice to the Public in Spanish

TITLE VI NOTICE OF PROTECTION AGAINST DISCRIMINATION

Rapides Area Planning Commission's Rural Public Transit Pilot transit program opera sus programas sin distinción de raza, color y origen nacional de acuerdo con el Título VI de la Ley de Derechos Civiles. Cualquier persona que crea que ha sido agraviada por cualquier acto ilícito práctica discriminatoria bajo el Título VI puede presentar una queja ante laRapides Area Planning Commission.

Para obtener más información sobre el programa de derechos civiles y los procedimientos para presentar una queja, comuníquese con:

Rapides Area Planning Commission
P.O. Box 1758,
Alexandria, LA 71306

318-487-5401
www.rapc.info

Se puede presentar una denuncia directamente ante el Administración Federal de Tránsito poniéndose en contacto con:

Office of Civil Rights
Attention: Complaint Team
East Building, 5th Floor-TCR
1200 New Jersey Ave., SE
Washington DC 20590
FTACivilRightsCommunications@dot.gov

Appendix B
Title VI Complaint Forms

Rapides Area Planning Commission

TITLE VI Discrimination Complaint Form

SECTION I.		
Your Name	Phone	Name of Person(s) Who Discriminated Against Y
Your Address (Street No., P.O. Box, Etc.)		Location & Position of Person (if known)
Your City, State, Zip		City, State, Zip of Alleged Incident

Discrimination occurred because of:			Date of Alleged Incident
___ Race/Color	___ Sex	___ Relation ___ Disability	
___ Age	___ National Origin	___ Income Status	

Explain as briefly and clearly as possible what happened and how you were discriminated against. Indicate who was involved and witnessed the discrimination. Be sure to include how other persons were treated differently than you. Attach any written material pertaining to your case.

SECTION II.		
Are you filing this complaint on your own behalf?	Yes	No
* NOTE: If you answered yes to this question, skip to Section III.		
If not, please supply the name and relationship of the person whom you are filing this complaint:		
Please explain why you are filing for a third party:		
Please confirm that you have obtained the permission of the aggrieved party to file a complaint on their behalf:	Yes	No

ADA and Title VI inquiries should be forwarded to the Rapides Area Planning Commission, 803 Johnston Street, Alexandria, Louisiana, 71301, (318) 487-5401.

SECTION III.		
Have you previously filed a complaint with this Agency?	Yes	No

Have you filed this complaint with any other Federal, State, or local agency? If yes, please name said agency and briefly describe the incident.

Signature:	Date:
Please return this form to: Title VI & ADA Manager Alexandria-Pineville Metropolitan Planning Organziation P.O. Box 7586 Alexandria, Louisiana 71306	Phone: (318) 487-5401

Accessible Format Requirements for this Form?	Large Print		Audio Tape	
	TDD		Other	

ADA and Title VI inquiries should be forwarded to the Rapides Area Planning Commission, 803 Johnston Street, Alexandria, Louisiana, 71301, (318) 487-5401.

Rapides Area Planning Commission

(Comisión de Planificación del Área de Rapides)

TÍTULO VI Formulario de Queja por Discriminación

SECCIÓN I.		
Te llamas	Teléfono	Nombre de la(s) persona(s) que lo discriminó:
Su dirección (número de calle, apartado de correos, etc.)		Ubicación y posición de la persona (si se conoce)
Su ciudad, estado, cremallera (Zip)		Ciudad, estado, cremallera del presunto incidente

La discriminación se produjo debido a:			Fecha del presunto incidente
___ Raza/Color	___ Sexo	___ Relación ___ Discapacidad	
___ Edad	___ Origen nacional	___ Estado de ingresos	

Explique lo más breve y claramente posible lo que sucedió y cómo fue discriminado. Indique quién estuvo involucrado y fue testigo de la discriminación. Asegúrese de incluir cómo otras personas fueron tratadas de manera diferente a usted. Adjunte cualquier material escrito relacionado con su caso.

SECCIÓN II.		
¿Está presentando esta queja en su propio nombre?	Sí	No
* NOTA: Si respondió afirmativamente a esta pregunta, vaya a la Sección III.		
De lo contrario, proporcione el nombre y la relación de la persona a la que está presentando esta queja:		
Por favor, explique por qué está solicitando un tercero:		
Confirme que ha obtenido el permiso de la parte agraviada para presentar una queja en su nombre:	Sí	No

Las consultas de la ADA y el Título VI deben enviarse a 803 Johnston Street, Alexandria, Louisiana, 71301 (318) 487-5401.

SECCIÓN III.		
¿Ha presentado previamente una queja ante esta Agencia?	Sí	No

¿Ha presentado esta queja ante alguna otra agencia federal, estatal o local? En caso afirmación, nombre dicha agencia y describa brevemente el incidente.

Firma:	Fecha:
Por favor, devuelva este formulario a: Title VI & ADA Manager Alexandria-Pineville Metropolitan Planning Organziation P.O. Box 7586 Alexandria, Louisiana 71306	Teléfono: (318) 487-5401

¿Requisitos de formato accesible para este formulario?	Letra grande		Cinta de audio	
	TDD		Otro	

Las consultas de la ADA y el Título VI deben enviarse a 803 Johnston Street, Alexandria, Louisiana, 71301 (318) 487-5401.

Appendix C
List of Transit-Related Investigations, Complaints, and Lawsuits

	Date (Month, Day, Year)	Summary (include basis of complaint: race, color, or national origin)	Status Pending or Closed	Action(s) Taken
Investigations	NONE			
1				
2				
Complaints	NONE			
1				
2				
Lawsuits	NONE			
1				
2				

Appendix D
Limited English Proficiency Assessment

Transit Provider	Rapides Area Planning Commission
Date Completed:	Monday, December 12, 2022

Examine Census Data at https://data.census.gov/advanced

1) Select "goegraphy" and the location(s) to be included (Select "Place to choose a City)
2) Select "Topics" and then "Populations and People" and then "Language Spoken at Home"
3) Click "Search" in the bottom-right corner
4) Select "**S1601** | LANGUAGE SPOKEN AT HOME"

Notes
The default data source will be the most recent American Community Survey 5-Year Estimates. The table will present a breakdown of the languages spoken in the selected geopgraphy and identify the population estimate that speaks the language and their abiity to speak English less than "very well".
Add up the population estimates for all geographically relevant cities, parishes, and/or census tracts in the service area.

Geography (City/Parish/Census Tract)	**Popluation**	**Population that Speaks English Less than Very Well** (Number)	**Population that Speaks English Less than Very Well** (as Percent of Total Population)	**Language/Languages Spoken by "Speak English Less Than Very Well" Population**
Grant Parish	20987	658	3.1%	Spanish
Natchitoches Parish	35537	79	0.2%	Spansih and Asian & Pacific Island
Totals	56524	737	1.3%	

1. Survey your drivers. Do they indicate that there is a need for lanugage assitance for riders? If so, which languages?	This is a new start service. Driver surveys will be perfromed at the end of the first year of operation.
2. Survey your receptionist, customer service representative, and scheduler/dispatcher. Do they indicate that there is a need for lanuage assistance for riders? If so, which languages?	This is a new start service. Driver surveys will be perfromed at the end of the first year of operation.
3. Inventory languages other than English that are spoken by staff.	This is a new start service. Driver surveys will be perfromed at the end of the first year of operation.

SOURCE: **S1601**|LANGUAGE SPOKEN AT HOME, 2021 American Community Survey, 5-Year Estimates

Staff Survey - Limited English Proficiency Interactions

Individuals with limited English proficiency do not speak English as their primary language; have a limited ability to read, speak, write, or understand English; or are native English speakers with low levels of literacy.

1. Did you encounter any LEP people in your work activities in the past six months?

2. Which language(s) did you encounter in the past six months?

3. How many times did you encounter a LEP person speaking the language selected in Question 2 in the past six months?

4. Which type of work activity were you doing when you encountered this language?

   Choose all that apply:
   - ☐ Outreach/Public Meeting
   - ☐ Email
   - ☐ Phone Call
   - ☐ Other, please specify: _____

Table: ACSST5Y2021.S1601

	Grant Parish, Louisiana											
	Total		Percent		Percent of specified language speakers							
					Speak English only or speak English "very well"		Percent speak English only or speak English "very well"		Speak English less than "very well"		Percent speak English less than "very well"	
Label	Estimate	Margin of Error	Estimate	Margin of Error	Estimate	Margin of Error	Estimate	Margin of Error	Estimate	Margin of Error	Estimate	Margin of Error
Population 5 years and over	20,987	±38	(X)	(X)	20,329	±151	96.9%	±0.8	658	±167	3.1%	±0.8
Speak only English	19,568	±234	93.2%	±1.1	(X)	(X)	(X)	(X)	(X)	(X)	(X)	(X)
Speak a language other than English	1,419	±239	6.8%	±1.1	761	±206	53.6%	±10.1	658	±167	46.4%	±10.1
SPEAK A LANGUAGE OTHER THAN ENGLISH												
Spanish	995	±165	4.7%	±0.8	403	±129	40.5%	±10.9	592	±144	59.5%	±10.9
5 to 17 years old	9	±16	0.0%	±0.1	9	±16	100.0%	±100.0	0	±25	0.0%	±100.0
18 to 64 years old	912	±157	4.3%	±0.7	323	±108	35.4%	±10.6	589	±146	64.6%	±10.6
65 years old and over	74	±71	0.4%	±0.3	71	±71	95.9%	±12.6	3	±6	4.1%	±12.6
Other Indo-European languages	220	±112	1.0%	±0.5	204	±108	92.7%	±12.0	16	±26	7.3%	±12.0
5 to 17 years old	32	±44	0.2%	±0.2	32	±44	100.0%	±59.9	0	±25	0.0%	±59.9
18 to 64 years old	175	±94	0.8%	±0.4	162	±90	92.6%	±14.3	13	±25	7.4%	±14.3
65 years old and over	13	±14	0.1%	±0.1	10	±11	76.9%	±46.1	3	±8	23.1%	±46.1
Asian and Pacific Island languages	132	±112	0.6%	±0.5	95	±101	72.0%	±34.0	37	±40	28.0%	±34.0
5 to 17 years old	51	±62	0.2%	±0.3	51	±62	100.0%	±47.5	0	±25	0.0%	±47.5
18 to 64 years old	81	±71	0.4%	±0.3	44	±47	54.3%	±34.0	37	±40	45.7%	±34.0
65 years old and over	0	±25	0.0%	±0.2	0	±25	-	**	0	±25	-	**
Other languages	72	±69	0.3%	±0.3	59	±64	81.9%	±40.4	13	±26	18.1%	±40.4
5 to 17 years old	0	±25	0.0%	±0.2	0	±25	-	**	0	±25	-	**
18 to 64 years old	72	±69	0.3%	±0.3	59	±64	81.9%	±40.4	13	±26	18.1%	±40.4
65 years old and over	0	±25	0.0%	±0.2	0	±25	-	**	0	±25	-	**
CITIZENS 18 YEARS AND OVER												
All citizens 18 years old and over	17,033	±144	(X)	(X)	16,870	±151	99.0%	±0.4	163	±74	1.0%	±0.4
Speak only English	16,276	±188	95.6%	±1.1	(X)	(X)	(X)	(X)	(X)	(X)	(X)	(X)
Speak a language other than English	757	±191	4.4%	±1.1	594	±177	78.5%	±9.5	163	±74	21.5%	±9.5
Spanish	524	±147	3.1%	±0.9	382	±130	72.9%	±11.9	142	±69	27.1%	±11.9
Other languages	233	±115	1.4%	±0.7	212	±111	91.0%	±12.2	21	±28	9.0%	±12.2

Table: ACSST5Y2021.S1601

	Natchitoches Parish, Louisiana											
	Total		Percent		Percent of specified language speakers							
					Speak English only or speak English "very well"		Percent speak English only or speak English "very well"		Speak English less than "very well"		Percent speak English less than "very well"	
Label	Estimate	Margin of Error	Estimate	Margin of Error	Estimate	Margin of Error	Estimate	Margin of Error	Estimate	Margin of Error	Estimate	Margin of Error
Population 5 years and over	35,537	±88	(X)	(X)	35,458	±91	99.8%	±0.1	79	±48	0.2%	±0.1
Speak only English	34,902	±167	98.2%	±0.5	(X)	(X)	(X)	(X)	(X)	(X)	(X)	(X)
Speak a language other than English	635	±174	1.8%	±0.5	556	±156	87.6%	±6.6	79	±48	12.4%	±6.6
SPEAK A LANGUAGE OTHER THAN ENGLISH												
Spanish	371	±133	1.0%	±0.4	322	±116	86.8%	±8.6	49	±37	13.2%	±8.6
5 to 17 years old	122	±85	0.3%	±0.2	110	±83	90.2%	±13.6	12	±16	9.8%	±13.6
18 to 64 years old	168	±84	0.5%	±0.2	154	±82	91.7%	±9.4	14	±16	8.3%	±9.4
65 years old and over	81	±38	0.2%	±0.1	58	±29	71.6%	±29.6	23	±28	28.4%	±29.6
Other Indo-European languages	180	±91	0.5%	±0.3	159	±87	88.3%	±13.2	21	±24	11.7%	±13.2
5 to 17 years old	15	±20	0.0%	±0.1	15	±20	100.0%	±87.6	0	±29	0.0%	±87.6
18 to 64 years old	131	±78	0.4%	±0.2	124	±74	94.7%	±12.1	7	±16	5.3%	±12.1
65 years old and over	34	±30	0.1%	±0.1	20	±21	58.8%	±38.9	14	±19	41.2%	±38.9
Asian and Pacific Island languages	41	±30	0.1%	±0.1	32	±25	78.0%	±31.2	9	±16	22.0%	±31.2
5 to 17 years old	3	±5	0.0%	±0.1	3	±5	100.0%	±100.0	0	±29	0.0%	±100.0
18 to 64 years old	38	±30	0.1%	±0.1	29	±24	76.3%	±33.6	9	±16	23.7%	±33.6
65 years old and over	0	±29	0.0%	±0.1	0	±29	-	**	0	±29	-	**
Other languages	43	±47	0.1%	±0.1	43	±47	100.0%	±51.7	0	±29	0.0%	±51.7
5 to 17 years old	4	±8	0.0%	±0.1	4	±8	100.0%	±100.0	0	±29	0.0%	±100.0
18 to 64 years old	36	±49	0.1%	±0.1	36	±49	100.0%	±56.5	0	±29	0.0%	±56.5
65 years old and over	3	±5	0.0%	±0.1	3	±5	100.0%	±100.0	0	±29	0.0%	±100.0
CITIZENS 18 YEARS AND OVER												
All citizens 18 years old and over	28,994	±67	(X)	(X)	28,934	±82	99.8%	±0.2	60	±44	0.2%	±0.2
Speak only English	28,558	±146	98.5%	±0.4	(X)	(X)	(X)	(X)	(X)	(X)	(X)	(X)
Speak a language other than English	436	±129	1.5%	±0.4	376	±121	86.2%	±9.5	60	±44	13.8%	±9.5
Spanish	237	±92	0.8%	±0.3	205	±90	86.5%	±13.4	32	±32	13.5%	±13.4
Other languages	199	±84	0.7%	±0.3	171	±81	85.9%	±13.7	28	±26	14.1%	±13.7

Rapides Area Planning Commission
Rural Public Transit Pilot

LIMITED ENGLISH PROFICIENCY (LEP) PLAN

Introduction
This Limited English Proficiency Plan (LEP) was prepared to address the Rapides Area Planning Commission's **Rural Public Transit Pilot program** responsibilities as a recipient of Federal financial assistance relating to the needs of individuals with limited English skills. This plan has been prepared in accordance with Title VI of the Civil Rights Act of 1964, 42 U.S.C. § 2000d, et seq. and its implementing regulations, which state that no person shall be subjected to discrimination on the basis of race, color, or national origin.

Plan Summary
The Rapides Area Planning Commission/**Rural Public Transit Pilot** developed this Limited English Proficiency Plan to help identify reasonable steps for providing language assistance to persons with limited English proficiency who wish to access transit services provided by the Rapides Area Planning Commission/**Rural Public Transit Pilot**. As defined in Executive Order 13166, LEP persons are those who do not speak English as their primary language and/or have limited ability to read, speak, write, or understand English.

This plan outlines how the Rapides Area Planning Commission/**Rural Public Transit Pilot** identifies a person who may need language assistance, the ways in which assistance may be provided, staff training that may be required, and how LEP persons are notified that assistance is available.

As the first step in preparing this plan, the Rapides Area Planning Commission/**Rural Public Transit Pilot** took the U.S. DOT Four Factor Analysis which considers the following factors:

1. The number or proportion of LEP persons eligible to be served or likely to be encountered by a program, activity, or service sponsored by the Rapides Area Planning Commission/**Rural Public Transit Pilot**.

2. The frequency with which LEP persons come into contact with the Rapides Area Planning Commission/**Rural Public Transit Pilot**'s transit programs, activities, or services.
3. The nature and importance of transit programs, activities, or services provided by the Rapides Area Planning Commission/**Rural Public Transit Pilot** to people's lives.
4. The resources available to the Rapides Area Planning Commission/**Rural Public Transit Pilot** for outreach to LEP persons and the costs associated with that outreach.

Four Factor Analysis Results

1. The number or proportion of LEP persons eligible to be served or likely to be encountered by a program, activity, or service sponsored by Rapides Area Planning Commission/**Rural Public Transit Pilot**.

   The Rapides Area Planning Commission/**Rural Public Transit Pilot** reviewed the 2020 U.S. Census Report and determined that the total population for the combined Grant and Natchitoches transit service area is 56,524. Of those persons, 737 persons (1.3%) residents report speaking English less than very well. Those persons with limited English proficiency speak the following languages at home: 592 speak Spanish, 16 speak Indo-European languages, 37 speak Asian and Pacific Island languages and 13 speak other languages. The most popular language spoken at home (other than English) is Spanish. The Rapides Area Planning Commission/**Rural Public Transit Pilot** will likely encounter more persons who speak Spanish that benefit from the transit programs than any other LEP persons.

2. The frequency with which LEP persons come into contact with the Rapides Area Planning Commission/**Rural Public Transit Pilot**'s transit program, activities, or services.

   The Rapides Area Planning Commission/**Rural Public Transit Pilot** assessed the frequency with which staff and drivers have contact with LEP persons, both presently and in the past. Since the agency is a new start, this data is not available until service begins. The following contact points and frequencies were identified:

CONTACT POINTS	FREQUENCY
Drivers - Demand Response	
Customer Service Representatives	
Website	
Field Supervisors	

3. **The nature and importance of the transit program, activities, or services provided by the Rapides Area Planning Commission/Rural Public Transit Pilot to people's lives.**

   The Rapides Area Planning Commission/**Rural Public Transit Pilot** provides door-to-door, demand-response transportation for medical appointments, employment, retail shopping, and recreational opportunities.

   The largest geographic concentration of LEP individuals in the Rapides Area Planning Commission/**Rural Public Transit Pilot**'s service area communicates by speaking Spanish.

These individuals may depend upon our specialized transportation services. It is also likely that the Rapides Area Planning Commission/**Rural Public Transit Pilot** may encounter LEP individuals at community outreach events.

4. **The resources available to the Rapides Area Planning Commission/Rural Public Transit Pilot and the overall cost to provide LEP assistance.**

   The Rapides Area Planning Commission/**Rural Public Transit Pilot** also determined which documents would be most beneficial if translated into other languages and the cost associated with this effort. An inventory of available organizations with which to partner for outreach and translation efforts was also identified. In addition, bilingual staff, volunteer community agencies, as well as mobile-app and web-based translation services were identified as ways to reduce the cost of translation services.

Limited English Proficiency (LEP) Plan Outline

Five action items comprise the Rapides Area Planning Commission/**Rural Public Transit Pilot**'s Limited English Proficiency Plan:

1. Identify Individuals Requiring Language Assistance
2. Providing Language Assistance
3. Training Staff
4. Provide Notice to LEP Persons
5. Monitor and Update the Limited English Proficiency Plan

1. Identify Individuals Requiring Language Assistance

The Rapides Area Planning Commission/**Rural Public Transit Pilot** identifies an LEP person who requires language assistance by:

- Examining customer service records to identify language assistance that has been received in the past at meetings, online, or over the phone to determine whether language assistance might be needed for similar situations in the future;

- Surveying drivers and other first-line staff who have direct or indirect contact with LEP individuals; and

- Assigning a staff person to greet participants as they arrive at events sponsored by Rapides Area Planning Commission/**Rural Public Transit Pilot**. By engaging participants in conversation, staff may informally gauge each attendee's ability to speak and understand English.

2. Provide Language Assistance

The Rapides Area Planning Commission/**Rural Public Transit Pilot** assists an LEP person who requires language assistance by:

- Networking with local human service organizations that provide service to LEP individuals and seeking opportunities to provide information on the Rapides Area Planning Commission/**Rural Public Transit Pilot**'s programs and services through these organizations;

- Posting the Rapides Area Planning Commission/**Rural Public Transit Pilot**'s Title VI Notice, Complaint Procedures, Complaint Form, and Limited English Proficiency Plan on the agency's website;

- Providing travel training to LEP persons;

- Identifying in-house staff with other language abilities to assist with translation services;

- Making public notices, publications, and other printed materials (including online content) available in other languages;

- Utilizing a web-based translation service application such as Google Translate.

3. Train Staff

The Rapides Area Planning Commission/**Rural Public Transit Pilot** will train staff members on their role and responsibilities in providing meaningful access to services for LEP persons by:

- Educate staff on the Title VI requirements for providing meaningful access to services for LEP persons;

- Providing staff with a description of language assistance services offered by the Rapides Area Planning Commission/**Rural Public Transit Pilot**;

- Providing staff with specific procedures to be followed when encountering a LEP person, including how to handle a potential Title VI complaint; and

- Providing Conversational Spanish training classes available upon request.

4. Provide Notice to LEP Persons

The Rapides Area Planning Commission/**Rural Public Transit Pilot** will provide notice to LEP persons in both oral and written communications by:

- Offering general information, such as operation hours, fares, etc., on the Rapides Area Planning Commission/**Rural Public Transit Pilot**'s customer service line.

- Providing the following written communications in both English and Spanish:
  - Brochures/Flyers
  - Title VI Notice
  - Complaint Procedures
  - Complaint Form

5. Monitor and Update the LEP Plan

This plan is designed to be flexible and should be viewed as a work in progress. As such, it is important to consider whether new documents and services should be made accessible for LEP persons and to monitor changes in demographics and types of services.

The Rapides Area Planning Commission/**Rural Public Transit Pilot** will update the Limited English Proficiency Plan as required by the U.S. DOT. At a minimum, the plan will be reviewed and updated when data from the most recent U.S. Census is made available, when clear and higher concentrations of LEP individuals are present in the Rapides Area Planning Commission/**Rural Public Transit Pilot**'s service area, and/or during the process of updating the Rapides Area Planning Commission/**Rural Public Transit Pilot**'s Title VI Program.

The Rapides Area Planning Commission/**Rural Public Transit Pilot** will monitor and update its Limited English Proficiency Plan by:

- Determining how the needs of LEP persons are addressed;

- Determining the current LEP population in the service area and whether the need for translation services has changed;

- Determining whether local language assistance programs are effective and sufficient to meet the need;

- Determining whether the Rapides Area Planning Commission/**Rural Public Transit Pilot**'s financial resources are sufficient to fund the needed language assistance efforts;

- Determining whether the Rapides Area Planning Commission/**Rural Public Transit Pilot** has fully complied with the goals of the Limited English Proficiency Plan;

- Determining whether complaints have been received concerning the Rapides Area Planning Commission/**Rural Public Transit Pilot'**s failure to meet the needs of LEP individuals.

Dissemination of the Rapides Area Planning Commission/Rural Public Transit Pilot's LEP Plan

The Limited English Proficiency Plan will be disseminated to customers and the community by:

- Publishing the LEP Plan and the Title VI Plan on the Rapides Area Planning Commission's website so that any person or agency with internet access can view and download these documents. Alternatively, any person or agency may also request a copy of the plan at no cost via telephone, e-mail, mail, or in-person. LEP individuals may request that these plans be translated into various languages. If feasible, the Rapides Area Planning Commission/**Rural Public Transit Pilot** will accommodate such requests.

- Distributing the Limited English Proficiency Plan to human service organizations in the service area.

Questions or comments regarding the Limited English Proficiency Plan may be submitted to the Rapides Area Planning Commission/**Rural Public Transit Pilot** using the following contact information:

Transportation Director
P.O. Box 1758
Alexandria, LA 71306
318-487-5401
www.rapc.info

Appendix E
Title VI Construction Project Analysis

Name of Agency: _____
Contact Person: _____
Mailing Address: _____
City/State/Zip: _____
Contact Person: _____ **Title:** _____
Phone: _____ **Fax:** _____
Email Address: _____

1. Describe the low-income and/or minority populations and minority-owned businesses within the area affected by the construction project and the method used to identify these populations and businesses.

2. Describe the adverse effects the project would have on the groups identified above both during and after construction.

3. Provide a detailed list of all minority-owned businesses and households that will be affected by the construction project.

4. Describe the potential negative environmental impact, such as noise, air, or water pollution.

5. Describe the relocation program and/or other measures that will be used to mitigate any identified adverse social, economic, or environmental effects of the proposed construction project.

6. For each of the identified low-income and/or minority communities, describe the potential positive effects such as an improvement in transit service, mobility, or accessibility.

7. Describe all mitigation and environment enhancement actions incorporated into the project to address the adverse effects, including any special features of the relocation program that go beyond the requirements of the Uniform Relocation Act and address adverse community effects such as separation or cohesion issues, and replacement of community resources destroyed by the project.

8. Describe the remaining effects, if any, and why further mitigation is not proposed.

9. Provide a comparison of mitigation and environmental enhancement actions that affect predominantly low-income and minority areas with mitigation and environmental enhancement actions implemented in predominantly non-low-income and non-minority areas if the project traverses these different areas. If there is no basis for such a comparison, describe why that is so.

Rapides Area Planning
Commission Rural Public Transit
Pilot

SYSTEM SAFETY PROGRAM (SSPP) PLAN

Rural Public Transit Pilot Program
System Safety Program Plan (SSPP)

STATEMENT OF SAFETY POLICY

The System Safety Program Plan (SSPP) formally defines the technical and managerial Safety Program employed by the Rapides Area Planning Commission's Rural Transit Pilot Program. The purpose of the Plan is to reduce injuries, property damage, and delays in service due to breakdowns and accidents in order to achieve and maintain a high level of safety within the Rapides Area Planning Commission's Rural Transit Pilot Program. The SSPP shall apply to all areas of the Rapides Area Planning Commission's Rural Transit Pilot Program to include design, procurement, administration, operation, training, and maintenance as provided in the Louisiana Department of Transportation and Development (LADOTD) "Transit Bus Safety Standard" ("Standard"). This Standard provides the operational safety policies and programs for the [Transit Provider], including the specific policy, management, tasks, and implementation identified in the SSPP. Enhanced Safety Elements shall be addressed for implementation when the [Transit Provider] passengers, vehicles and routes grow and/or the number or severity of accidents increase. The [Transit Provider] shall determine the need and availability of resources to implement any of the Enhanced Elements.

The Rapides Area Planning Commission's Rural Transit Pilot Program shall suspend any operation or portion thereof that poses an immediate danger to the safety of passengers, employees and all others that come in contact with the system. In addition, every driver and employee of the Rapides Area Planning Commission's Rural Transit Pilot Program will be instructed on and must comply with all applicable standards contained in the SSPP.

Revisions

DATE	INSERT PAGE/SECTION	REPLACE PAGE/SECTION

Distribution to Plan Holders

DATE	NAME	TITLE/SECTION

Contents

1.0 Introduction

This System Safety Program Plan (SSPP or Plan) identifies the Rapides Area Planning Commission's Rural Transit Pilot Program safety policy and the responsibilities associated with system safety for all employees, and for all organizations or persons providing support to the Rapides Area Planning Commission's Rural Transit Pilot Program. The Safety Program applies to all phases of the Rapides Area Planning Commission's Rural Transit Pilot Program operation and maintenance as provided in the Louisiana Department of Transportation and Development (LADOTD) "Transit Bus Safety Standard ("Standard"). This Standard provides the operational safety policies and programs for the [Transit Provider], including the specific policy, management, tasks, and implementation identified in the SSPP.

1.1 System Safety Purpose

The Purpose of this System Safety Program Plan is to:

- Conserve life and property.
- Prevent accidents and injuries and reduce the frequency of safety related incidents.
- Control and minimize the effects of accidents and incidents.
- Maintain the safe operation of the bus transit system.
- Provide for the operational safety of patrons, passengers, and Rapides Area Planning Commission's Rural Transit Pilot Program employees.
- Provide for the occupational safety and health of Rapides Area Planning Commission's Rural Transit Pilot Program employees.
- Provide for the safety of Rapides Area Planning Commission's Rural Transit Pilot Program property that supports public bus transit.
- Ensure that the safety concerns of the elderly and handicapped and/or disabled are addressed.
- Maintain safety of the general public that comes into contact with the transit system.

1.2 Goals and Objectives

The overall goal of the Rapides Area Planning Commission's Rural Transit Pilot Program is to provide safe, reliable, dependable transportation in the most cost-effective manner possible. The following objectives are applied to all aspects of operations to increase safety awareness and reduce accidents:

1. Identify unsafe conditions and practices.
2. Develop methods to control or eliminate accidents/incidents.
3. Determine the simplest, most effective solution to control accidents/incidents.
4. Work with LADOTD to resolve any safety or compliance issues.

2.0 System Description

Fixed Routes	____0____
Vehicles, total	____6____
Vehicles, operate in the fixed routes	____0____
Vehicles, operate in demand/response	____6____
Service, days per week	____5____
Service, hours per day	7 am -5 pm

3.0 System Safety Management

3.1 Safety Responsibility

The Rapides Area Planning Commission's Rural Transit Pilot Program] is responsible for the implementation, maintenance, and compliance with all Federal, State, and Local regulations, ordinances, and laws. The Rapides Area Planning Commission's Rural Transit Pilot Program ensures that all requirements of the SSPP are met.

3.2 Safety Responsibility of Other Departments and Organizations

The Police Department responds to accidents involving Rapides Area Planning Commission's Rural Transit Pilot Program vehicles within its jurisdiction. The Police Department ensures that all accidents are investigated, per its policy and procedures.

The Fire Department responds to incidents / accidents that require the Fire Departments' expertise as it relates to fires, threats of terrorism, bomb threats, and other types of emergency situations in accordance with the Fire Department operational procedures.
The Rapides Area Planning Commission's Rural Transit Pilot Program determines transportation vehicle operator's accident preventability.

4.0 System Safety Program Methodology and Tasks

4.1 Safety Requirements

Rapides Area Planning Commission's Rural Transit Pilot Program is responsible for the maintenance of all Rapides Area Planning Commission's Rural Transit Pilot Program buses, passenger vehicles, support vehicles and equipment as outlined below whether the maintenance is contracted or "in-house".

a. Vehicles and Equipment.
b. Each vehicle has current records.
c. Routine preventive maintenance and maintenance recommended by the manufacturer is performed.
d. Each vehicle has maintenance and repair files, which record the make, model, license number, date, and mileage for all repairs and service.
e. Each vehicle is inspected on days of use by the driver ("Daily Driver Pre-Trip Inspection", Appendix A).
f. All appropriate manufacturers recall instructions are followed.
g. Biennial safety inspections are completed on time.
h. Each vehicle must be equipped with a charged fire extinguisher at all times.
i. Any vehicle deemed to be unsafe must be removed from service immediately.

4.1.2. Vehicle Maintenance

Safety-related vehicle equipment includes:

a. Service brakes and parking brake
b. Tires, wheels, and rims
c. Steering mechanism
d. Vehicle suspension
e. Mirrors and other rear vision devices (e.g., video monitors)
f. Lighting and reflectors or reflective markings
g. Wheelchair lifts/ramps

The vehicle maintenance program includes the following categories:

- Daily servicing needs
- Scheduled Maintenance
- Failure Maintenance/Repair

Maintenance personnel are trained and qualified to perform maintenance and repair activities. Biennial inspections are conducted in accordance with the "Road Equipment Inspection Report", Appendix B.

4.1.3. Operating Requirements

a. Unauthorized persons are not allowed to drive a Rapides Area Planning Commission's Rural Transit Pilot Program transit vehicle.
b. Drivers must have their seat belt fastened and all mobility devices properly secured any time the vehicle is in motion.
c. Smoking, eating, and drinking are prohibited in the vehicle.
d. Drivers must assist passengers boarding and departing the vehicle when appropriate (i.e.: wheelchair assistance, elderly, handicapped).
e. Drivers must use emergency flashers when the vehicle is disabled.
f. Vehicles should not be fueled while passengers are aboard.
g. Drivers will not leave a vehicle unattended with the keys in the vehicle when passengers are aboard.
h. All emergency exit doors and hatches operated with a key must be unlocked during operations.
i. Wheelchair passengers must be properly secured in the vehicle at all times while the vehicle is in motion.
j. All accidents, incidents, and problems must be reported immediately to the dispatcher and in writing at the end of the driver's shift using the "Notification/Investigation Report" Form (Appendix C).
k. Any part of operations deemed to be unsafe will be suspended immediately.

4.1.4 Driver Requirements

The driver selection criteria shall address specific, safety-related items:

a. Licensing –
    1. Rapides Area Planning Commission's Rural Transit Pilot Program drivers must possess a Louisiana Class C commercial driver's license (CDL) for vehicles that have a 15 passenger or higher capacity.
    2. Rapides Area Planning Commission's Rural Transit Pilot Program drivers must possess a Louisiana Class D chauffeur license for any vehicle designed or utilized for the transportation of passengers for hire or fee. All other drivers must possess a Louisiana Class E license.

b. Driving record – The driver shall have an acceptable past driving record over a reasonable period of time.
c. Physical requirements – The driver shall be physically able to perform the functions associated with the driving assignment.

- Driver Duties
  a. Drivers are required to notify management immediately of any personal and /or work-related driving violations.
  b. All Rapides Area Planning Commission's Rural Transit Pilot Program drivers must have an initial physical examination prior to hiring. Each exam must be recorded by the physician on a form approved by LADOTD. Rapides Area Planning Commission's Rural Transit Pilot Program will maintain physical exam records for a minimum of four (4) years.
  c. All CDL drivers are required to have an updated physical every two (2) years.
  d. Recommend that all drivers have an updated physical every two (2) Years.
  e. All drivers must be drug free. Drivers WILL NOT drive under the influence of drugs or alcohol. (First violation of this policy will result in IMMEDIATE DISMISSAL).
  f. Drivers WILL NOT drive if their ability is impaired by fatigue, illness, or other causes that make it unsafe for the driver to drive or continue driving.
  g. Drivers WILL NOT drive more than 12 hours or be on duty more than 16 hours in any one 24-hour period. (One hour of additional driving is allowed if necessitated by adverse conditions resulting from weather, road traffic or medical emergencies and disasters.) Drivers are not permitted to drive more than 70 hours in any seven consecutive calendar days.
  h. Drivers must carry their Driver's License with them at all times when operating a Rapides Area Planning Commission's Rural Transit Pilot Program vehicle.
  i. Drivers will inspect buses prior to morning departure to ensure safe operating conditions and will complete and submit a "Daily Driver Pre-Trip Inspection" Checklist for each assigned vehicle before leaving the yard.
  j. Drivers are responsible for submitting a written report on any defects or deficiencies they believe could cause mechanical malfunctions or affect the safe operation of the vehicle.
  i. Drivers have the responsibility and the authority to park any vehicle that they deem to be operationally unsafe.
  j. Drivers will ensure that each vehicle has a charged fire extinguisher on board at all times.

4.1.5 Training

a. Each driver must successfully complete the required training program given by Rapides Area Planning Commission's Rural Transit Pilot Program.
b. Drivers are thoroughly instructed on the Rapides Area Planning Commission's Rural Transit Pilot Program drug policy.

4.2 Hazard Assessment Policy

4.2.1 Identification of System Considerations

Rapides Area Planning Commission's Rural Transit Pilot Program drivers, dispatchers, and

supervisors are trained in safety prevention.

4.2.2 Accident / Incident Prevention and Corrective Action

Rapides Area Planning Commission's Rural Transit Pilot Program implements accident/incident prevention and corrective actions to improve safety.

4.3 Safety Program Tasks

The Rapides Area Planning Commission's Rural Transit Pilot Program:

4.3.1 Collects and Maintains Safety Data

Rapides Area Planning Commission's Rural Transit Pilot Program reviews safety files and data collected.

4.3.2 Conduct Accident / Incident Investigations

The "Notification/Investigation Report" (Appendix C) is completed. The [Transit Provider] may be present at the site to record the accident or incident as needed to support response agencies.

4.3.3 Develop and Perform Safety Training and Incentive Programs

Rapides Area Planning Commission's Rural Transit Pilot Program provides safety training to all maintenance staff, drivers and dispatchers and actively encourages drivers to be safety conscious.

4.3.4 Conduct Safety Tests and Inspections

Rapides Area Planning Commission's Rural Transit Pilot Program drivers are responsible for performing pre-trip safety inspections on the vehicles. Drivers must complete a "Pre-Trip Safety Inspection Checklist" for each assigned vehicle prior to beginning of service.

4.3.5 Drug and Alcohol Program

The Rapides Area Planning Commission's Rural Transit Pilot Program maintains a pro-active substance abuse program.

4.3.6 Maintain Safety Interface and Coordination

The Rapides Area Planning Commission's Rural Transit Pilot Program coordinates all reviews of safety related documentation.

4.3.7 Applicable Laws and Regulations

This SSPP and its implementation are governed by the LADOTD Bus Standard and applicable local, state, and federal requirements.

5.0 System Safety Program Implementation and Maintenance

5.1 Program Schedule, Review, and Update Process

The Rapides Area Planning Commission's Rural Transit Pilot Program reviews the SSPP annually and revises it if necessary. Any SSPP revision is filed with the LADOTD.

5.2 Revisions

Any revision to the SSPP or page(s) thereof is identified by a Revision Number and Effective Date of the revision.

5.3 Management Internal Review of System Safety Program

The Rapides Area Planning Commission's Rural Transit Pilot Program monitors the operations and the maintenance activities to ensure that all requirements and standards described in the SSPP are followed.

The internal safety review or inspection process shall be conducted periodically to maintain safety program performance. Specific areas for review and review checklists shall be determined by the [Transit Provider] based on experience, and may address:

Maintenance/Vehicles
Facilities/Equipment
Rules/Procedures
Training

Drug & Alcohol Abuse Program
Accident/Incident Reporting

5.4 System Safety Plan Annual Certification

As set forth in the LADOTD Bus Standard, the Rapides Area Planning Commission's Rural Transit Pilot Program submits to the LADOTD, annually, no later than February 1 for the prior year, a Certification verifying adoption of, and compliance with the Rapides Area Planning Commission's Rural Transit Pilot Program System Safety Program Plan and the required information identified in the Certification Form, Appendix D. Biennially the safety certification will also include confirmation of the completion of the biennial vehicle safety inspections. Biennially, the safety certification will also include confirmation of the completion of the biennial vehicle safety inspections. Reports for Safety and Security may be combined or submitted separately. If separate submissions are planned, appropriate modifications to the Form are required.

Appendix A

Pre-Trip Daily Vehicle Inspection

DATE: _____ VIN #_____

EXTERIOR INSPECTION

____ Headlights
____ Turn signals
____ Back-up Lights
____ Tires, for inflation and tread wear
____ Windshield Wipers
____ Windows
____ Mirrors
____ Body Damage
____ Cleanliness
____ Wheelchair Lift/Ramp Operations (if applicable)

INTERIOR INSPECTION

____ Brakes
____ Steering
____ Gauges and Indicators
____ Transmission Selector
____ Cleanliness
____ Seatbelt working properly

ENGINE INSPECTION

Fluid Levels:

____ Oil
____ Transmission
____ Brake
____ Steering
____ Radiator
____ Battery
____ Windshield Washer
____ Belts and Hoses

Driver Name: _____ Agency Name: _____

Appendix B DOTD Vehicle Inspection

Date of Inspection _____ Agency_____
Parish_____ VIN#_____
Year _____ Make _____
Model_____ Odometer_____

Each of the following items should be reviewed by the inspector. Any comments or recommendations should be made below.

	Working Order (Yes or No)		**Working Order (Yes or No)**
Head Lights		Air Cleaner	
Taillights		Oil Filter	
Stop Lights		Wire Harness	
Signal Lights		Brake and Clutch Pedal Clearance	
Windshield Wipers		Steering System	
Doors		Brake Master Cylinder and Lines	
Cab and Body Metal Parts		Exhaust Emission Control System	
Bumpers (Front and Rear)		Transmission and Shift Linkage	
Tires (Front and Rear)		Differential	
Wheel and Rims		Fuel Tank	
Exhaust System		Driveshaft and Universal Joints	
Battery and Cables		Ignition System	
Radiator and Hoses		Chassis Lubrication	
Instrument Panel		Coolant	
Horn		Springs – Shackles – Shocks	
Back up alarm (if applicable)		Suspension	
Seats		Engine Related parts	
Heater and Air Conditioner		Fluid Levels	
Wheelchair Lift		Floor surface clear of trip hazards	

Vehicle Damage (i.e. dents) if yes, please describe:

_____

Comments / Recommendations:

_____

Inspector Signature: _____

Director will complete this portion and submit to your DOTD Program Manager by December 31st.

Date of Last Inspection _____Monthly insurance costs for this vehicle_____

Annual Repair Costs _____Average Mile per Gallon Fuel Consumption_____

Date of last passenger trip _____Picture attached if inspector documented damage _____

Director/Designee Signature

_____

Appendix C *DEPARTMENT OF TRANSPORTATION AND DEVELOPMENT*

Notification/Investigation Reports are to be entered into STTARS

Use as a TEMPLET to gather information

REPORT IS DUE WITHIN 24 HRS OF ACCIDENT

VEHICLE ACCIDENT REPORT FORM

DATE OF ACCIDENT: _____AGENCY: _____

VIN: _____ YEAR: _____ MAKE: _____ MODEL: _____

DRIVER: _____

LOCATION OF ACCIDENT: _____

WAS POLICE REPORT FILED: YES _____ NO _____ NUMBER OF VEHICLES INVOLVED: _____

NUMBER OF INJURIES: _____ FATALITIES: _____

DAMAGE TO PROPERTY/EQUIP: YES _____ NO _____ $ AMT OF DAMAGE: _____

IS VEHICLE OPERATIONAL: YES _____ NO _____ ESTIMATED DOWN TIME: _____

COMMENTS (BRIEF DESCRIPTION OF ACCIDENT):

_____

_____

_____

CORRECTIVE ACTION TAKEN IF NECESSARY:

_____

_____

_____

_____

Agency Contact Person: _____ Phone: _____

Email: _____

Digital pictures of damage must be submitted with this form within 24 hours of accident. (Cell phone camera pictures are acceptable) UPLOAD IN STTARS

If you have a question or need assistance, contact your Regional Program Manager.

>>Requirements<<<<<<<<<<<<<<<<<<<<<<<<<<<<<<<<<<<<

1. **DOTD must be notified within 24 hours by Fax, Email or hand deliver if a death or injury requiring transportation to a medical facility, OR, property damage estimated to be greater than $25,000.00. Law Enforcement Agency report is acceptable.**

Appendix D

Rapides Area Planning Commission's Rural Transit Pilot Program

System Security Plan
System Safety Program Plan
ANNUAL SAFETY & SECURITY CERTIFICATION

In accordance with the Louisiana Department of Transportation and development (LADOTD) the Transit Provider certifies to the following:

1. The adoption of a System Safety Program Plan (SSPP) and System Security Program Plan (SSP) pursuant to the LADOTD "Transit Bus Safety Standard.
2. Compliance with adopted safety requirements in the SSPP.
3. Performance of biennial safety inspections on all operational vehicles as required in the LADOTD "Road Equipment Inspection Report".

Biennial Submissions Only, Otherwise, N/A

Name and address of entity which has performed safety inspections:

Name: ____ Date: ________________________

Address: ____

Number of Reportable Accidents and Security Incidents: ______

(Attach all pages of the "Notification/Investigation Report" Form)

~~~~~~

"The Transit Provider is certified safe for passenger service operations"

Signature: ____ Date: ________________________

Name: ____

Title: ____

~~~~~~

Annual Certification shall be submitted no later than February 1 for the prior calendar year period.

FOR OFFICIAL USE ONLY
~~~~~~

Rapides Area Planning Commission Rural Public Transit Pilot

COMPLAINT POLICY & PROCEDURES

Overview

It is the policy of the Rapides Area Planning Commission's **Rural Public Transit Pilot** to operate the rural public transportation program in an open and fair manner for employees, passengers, other transit providers, and the general public. No employee, passenger, other transit provider, or the general public will be discriminated against or suffer any reprisals from making a complaint. Complaints must be in writing and specific. Vague or general charges of unfairness that are not substantiated by facts will not be processed. When an allegation is made that a specific violation, misinterpretation, or inappropriate act has occurred the following steps should be taken to resolve the issue. Rapides Area Planning Commission/**Rural Public Transit Pilot** will resolve the complaint within fifteen business days of the date of receipt of the written complaint.

Employee Complaint Policy

If an employee has issues with another employee, passenger, or other member of the general public, he or she should bring the matter to the attention of a Supervisor or similar authority within 3 days of the occurrence. Complaints must be specific and in writing. If the complaint involves the Supervisor or similar authority, the employee should address the issue with the Transit System Director. The Supervisor or similar authority will listen to all parties involved in the situation, investigate with outside sources if necessary, and resolve the matter within fifteen business days of the receipt of the written complaint. If the Supervisor or similar authority cannot resolve the matter, it will be brought to the Transit System Director for resolution. If the matter is not satisfactorily resolved at this point, the next higher authority will be consulted. If the employee does not feel the matter has been resolved at this point, the Personnel Director or similar authority should be consulted, and the matter brought before the Personnel Board or similar authority if necessary.

Passenger Complaint Policy

If a passenger has issue with a Rapides Area Planning Commission/**Rural Public Transit Pilot**'s employee, another passenger, or other member of the general public, he or she should bring the matter to the attention of the Transit System Director or similar authority within 3 days of the occurrence. Complaints must be specific and in writing. If the complaint involves the Transit System Director or similar authority, the passenger should address the issue with the Director of Transportation. If the complaint involves the Director of Transportation or similar authority, the passenger should address the issue with the Executive Director. The Director or similar authority will listen to all parties involved in the situation, investigate with outside sources if necessary, and resolve the matter within fifteen business days of the receipt of the written complaint. If the Director of Transportation or similar authority cannot resolve the matter, it will be brought to the Executive Director for resolution. If the matter is not satisfactorily resolved at this point, the next higher authority will be consulted. If the passenger does not feel the matter has been resolved at this point, the Rapides Area Planning Commission's Liaison or similar authority should be consulted, and the matter brought before the entire Rapides Area Planning Commission if necessary.

Private Transit Operator Complaint Policy

If a private transit operator has issues with Rapides Area Planning Commission/**Rural Public Transit Pilot**, they should address the matter with the Transit System Director within 3 days of the occurrence. Complaints must be specific and in writing. The Transit System Director will investigate and resolve the matter within fifteen business days of the receipt of the written complaint. If the matter is not satisfactorily resolved at this point, the next higher authority will be consulted. If the private operator does not feel the matter has been resolved at this point, the Rapides Area Planning Commission's Director of Transportation or similar authority should be consulted, and the matter brought before the entire Rapides Area Planning Commission if necessary.

Rapides Area Planning Commission
Rural Public Transit Pilot

HANDICAP ACCESSIBILITY & SERVICE ANIMALS

Purpose

The Rapides Area Planning Commission (RAPC)'s Rural Public Transit Pilot is proud of the fact that we are able to furnish reliable, reasonably priced transportation for individuals with mobility disabilities. The lifts and wheelchair securement systems designed for our vehicles are easy to operate and make transporting passengers which are unable to enter our vehicles via the steps a very simple matter. When scheduling a ride, give 24 hours' notice, inform us of your needs, and we will send the proper vehicle to accommodate those needs.

All vehicles are equipped with safety features including handrails, well-lighted 8–10-inch striped steps and lifts that are 30" to 33" wide. Consistent with Department of Transportation regulations, RAPC will transport a mobility device/wheelchair with three or more wheels and its occupant so long as the lift can safely accommodate the size and weight of the mobility device and its occupant and there is space for the mobility device on the vehicle to be safely secured. The definition of a wheelchair is a manually operated or powered-driven device designed primarily for the use by an individual with mobility disability for the main purpose of indoor or/and outdoor locomotion. Examples are manual and power wheelchairs and electric scooter used by people with mobility disabilities. If the device is powered, our drivers are not permitted to operate them at any time.

Passengers utilizing a wheelchair may transfer to a regular seat in the vehicle if the passenger wishes to do so and is able to complete the transfer with no assistance from the driver. Drivers are not permitted to lift or pull any individual to enable them to transfer into or out of a regular seat or wheelchair.

RAPC requires that all mobility devices be secured when being transported utilizing the 4-point security system within our vehicles. Our drivers have been trained and are required to use a 4 and 6-point tie-down system for safest security for our passengers. Only RAPC trained staff is to operate the lift systems on our vehicles.

For origin to destination service, your home ramp must meet safety specifications, or you will be required to meet the driver at the vehicle. The safety specifications for home ramps states that they must be at least 36" wide, and that the maximum slope is 1:12 (it must have only a 1" rise for every 12" of incline). Further, the ramp must be constructed of decking boards installed crosswise for traction and must have guard rails on each side. Ramps and wheelchair paths must be properly paved and/or kept clear of snow, ice, parked cars, trash, gravel, tree roots and other obstructions.

If your mobility devices and/or ramps don't meet the standard safety requirements, due to safety concerns we will request that these items be brought up to standards to eliminate safety hazards before our driver will be able to assist you further.

Any passenger, whether in a wheelchair or not, who is unable to enter or exit the vehicle by the use of the stairs may also utilize the lift for boarding and de-boarding the vehicle.

Remember the driver can only perform reasonable assistance when boarding and de-boarding. Reasonable assistance is defined as opening of a door, offering of an arm, or helping with minimal number of packages (See Parcel Policy). Drivers are trained to provide minimal assistance only and are not trained to provide medical assistance. RAPC offers origin to destination service meaning our driver will provide reasonable assistance within a 25-foot radius of the bus. Our drivers must maintain sight of the vehicle to ensure the safety of any passengers on board as well as security of the vehicle itself. We do not enter homes and there is a limit of three (3) steps, so passengers please have a friend or family member accompany you as a Personal Care Assistant (PCA) if you need further assistance. There is no charge for one Personal Care Assistant to ride.

Service Animals

Animals such as guide dog(s), signal dog or other animals individually trained to work or perform tasks for an individual with a disability, are welcome to board the vehicle with the disabled person at no charge. The animal trained to work or perform tasks for an individual is to be under the control of the individual not RAPC. If an animal has created a prior incident posing a direct threat to the health and safety of others, the service animal will be excluded from service with RAPC. Please respect that these are working animals and are not to be touched or distracted while performing their duties.

Rapides Area Planning Commission
Rural Public Transit Pilot

AMERICANS WITH DISABILITIES ACT (ADA) GRIEVANCE PROCEDURE

Purpose
This grievance procedure is established to meet the requirements of the Americans with Disabilities Act of 1990. It may be used by anyone who wishes to file a complaint alleging discrimination on the basis of disability in the provision of services, activities, programs, or benefits by the Rapides Area Planning Commission's **Rural Public Transit Pilot**. Rapides Area Planning Commission/**Rural Public Transit Pilot**'s personnel policies govern employment-related complaints of disability discrimination.

The complaint should be in writing and contain information about the alleged discrimination such as name, address, phone number of complainant and location, date, and description of the problem. Alternative means of filing complaints, such as personal interviews or a tape recording of the complaint will be made available for persons with disabilities upon request.

Formal complaints should be submitted by completing the ADA Grievance form found on our website at www.rapc.info or contact the Rapides Area Planning Commission's for the form to be mailed directly to you.

The complaint should be submitted by the grievant and/or their designee as soon as possible but no later than 60 calendar days after the alleged violation to:

Kathy Powell
RAPC Title VI & ADA Coordinator, Office Manager
Rapides Area Planning Commission
P.O. Box 7586
Alexandria, LA 71306
318-487-5401
kathy@rapc.info
www.rapc.info

Within 15 calendar days after receipt of the complaint, Director of Transportation or his/her designee will meet with the complainant to discuss the complaint and the possible resolutions. Within 15 calendar days of the meeting, Director of Transportation or his/her designee will respond in writing, and where appropriate, in format accessible to the complainant, such as large print or Braille. The response will explain the position of the Agency and offer options for substantive resolution of the complaint.

If the response by Director of Transportation or his/her designee does not satisfactorily resolve the issue, the complainant may appeal the decision within 15 calendar days after receipt of the response to the Director of Transportation or his/her designee. Within 15 calendar days after receipt of the appeal, the Director of Transportation or his designee will meet with the complainant to discuss the complaint and possible resolutions. Within 15 calendar days after the meeting, the Director of Transportation or his/her designee will respond in writing, and, where appropriate, in a format accessible to the complainant, with a final resolution of the complaint.

All written complaints received by Director of Transportation or his/her designee, appeals to the Rapides Area Planning Commission's Executive or his/her designee, and responses from these two offices will be retained by the Agency for at least three years.

Rapides Area Planning Commission
Rural Public Transit Pilot

REASONABLE MODIFICATION POLICY, REQUEST PROCEDURES, & FORM

Purpose
The purpose of the reasonable modification policy is to ensure that Rapides Area Planning Commission's **Rural Public Transit Pilot** offers equal and effective opportunities and access to public transportation services for persons with disabilities and full compliance with the provisions of the Title II of the Americans with Disabilities Act of 1990 and Section 504 of the Rehabilitation Act of 1973.

Policy
Rapides Area Planning Commission/**Rural Public Transit Pilot** is committed to providing equal access and opportunity to qualified individuals with disabilities in all programs, services, and activities. Rapides Area Planning Commission/**Rural Public Transit Pilot** recognizes that in order to have equally effective opportunities and benefits, individuals with disabilities may need reasonable modifications to policies and procedures. Rapides Area Planning Commission/**Rural Public Transit Pilot** will adhere to all applicable federal and state laws, regulations, and guidelines with respect to providing reasonable modifications, as necessary, to afford equal access to programs for persons with disabilities. Rapides Area Planning Commission/**Rural Public Transit Pilot** does not discriminate on the basis of disability in admission to, participation in, or receipt of services and benefits under any transit program or activity. Rapides Area Planning Commission/**Rural Public Transit Pilot** will take appropriate steps to ensure that persons with disabilities have an equal opportunity to participate.

No qualified individual with a disability shall, by reason of such disability, be excluded from participation in or be denied the benefits of the services, programs, or activities of Rapides Area Planning Commission/**Rural Public Transit Pilot** or be subject to discrimination by Rapides Area Planning Commission/**Rural Public Transit Pilot**.

Reasonable Modifications
A reasonable modification is a change or exception to a policy, practice, or procedure that allows disabled individuals to have equal access to programs, services, and activities. Rapides Area Planning Commission/**Rural Public Transit Pilot** will make reasonable modifications to policies, practices, and procedures when necessary to ensure access to transit services for qualified individuals with disabilities, unless:

- Making the accommodation would fundamentally alter the nature of the public transportation service.

- Making the accommodation would create a direct threat to the health or safety of other passengers.

The individual with a disability is able to fully use Rapides Area Planning Commission/ **Rural Public Transit Pilot**'s service without the accommodation being made.

For the purposes of this section, the term reasonable accommodation shall be interpreted in a manner consistent with the term ‘‘reasonable modifications’’ as set forth in the Americans with Disabilities Act Title II regulations at 28 CFR 35.130(b)(7), and not as it is defined or interpreted for the purposes of employment discrimination under Title I of the ADA (42 U.S.C. 12111–12112) and its implementing regulations at 29 CFR part 1630.

Eligibility Criteria
An individual is eligible to be considered to receive a reasonable modification if that individual has: a physical or mental impairment that substantially limits one or more of the major life activities of such individual; a record of such impairment; or been regarded as having such impairment.

Requests for Reasonable Modifications
Rapides Area Planning Commission/**Rural Public Transit Pilot** shall make information about how to contact Rapides Area Planning Commission/**Rural Public Transit Pilot** to make requests for reasonable modifications readily available to the public through its website and rider policy guidelines. Rapides Area Planning Commission/**Rural Public Transit Pilot** shall follow these procedures in taking requests:

a. Individuals requesting modifications shall describe what they need in order to use the service.

b. Individuals requesting modifications are not required to use the term ‘‘reasonable modification’’ when making a request. Personnel at Rapides Area Planning Commission/**Rural Public Transit Pilot** will determine if the request represents a reasonable modification and proceed in accommodating the request accordingly.

c. Whenever feasible, Rapides Area Planning Commission/**Rural Public Transit Pilot** requests that individuals make such requests for modifications before Rapides Area Planning Commission/**Rural Public Transit Pilot** is expected to provide the modified service.

d. Where a request for modification cannot practicably be made and determined in advance (*e.g.*, because of a condition or barrier at the destination of a paratransit, demand response, or fixed route trip of which the individual with a disability was unaware until arriving), operating personnel shall make a determination of whether the modification should be provided at the time of the request. Operating personnel may consult with Rapides Area Planning Commission/**Rural Public Transit Pilot**’s management before making a determination to grant or deny the request.

Requests for accommodation may be made either orally or in writing. The reasonable accommodation process begins as soon as the request for accommodation is made. The request can be submitted in any written format. Alternative means of filing a request, such as personal interviews, phone calls, or taped requests, will be made available for persons with disabilities if unable to communicate their request in writing or upon request.

Interactive Process
When a request for accommodation is made, Rapides Area Planning Commission/ **Rural Public Transit Pilot** and the individual requesting accommodation must engage in a good faith interactive process to determine what, if any accommodation shall be provided. The individual and the Rapides Area Planning Commission/**Rural Public Transit Pilot** must communicate with each other about the request, the process for determining whether accommodation will be provided, and the potential accommodations. Communication is a priority throughout the entire process.

Time Frame for Processing Requests and Providing Reasonable Modification
Rapides Area Planning Commission/**Rural Public Transit Pilot** will process requests for reasonable accommodation and then provide accommodations, where appropriate, in as short a time frame as reasonably possible. Rapides Area Planning Commission/ **Rural Public Transit Pilot** recognizes, however, that the time necessary to process a request will depend on the nature of the accommodation(s) requested and whether it is necessary to obtain supporting information.

Granting a Reasonable Modification Request
As soon as Rapides Area Planning Commission/**Rural Public Transit Pilot** determines that a reasonable accommodation will be provided, that decision shall be immediately communicated to the individual. This notice must be in writing in order to maintain the required information for reporting purposes. Upon request, alternative means of response will be provided.

In choosing among alternatives for meeting nondiscrimination and accessibility requirements with respect to new, altered, or existing facilities, or designated or specified transportation services, Rapides Area Planning Commission/**Rural Public Transit Pilot** shall give priority to those methods that offer services, programs, and activities to qualified individuals with disabilities in the most integrated setting appropriate to the needs of individuals with disabilities.

Denying a Reasonable Modification Request
As soon as Rapides Area Planning Commission/**Rural Public Transit Pilot** determines that a request for reasonable accommodation will be denied, Rapides Area Planning Commission/**Rural Public Transit Pilot** will communicate the basis for the decision in writing to the individual requesting the modification. The explanation for the denial will clearly state:

a. the specific reasons for the denial;

b. any alternative accommodation that may create the same access to transit services as requested by the individual; and

c. the opportunity to file a complaint relative to the Rapides Area Planning Commission/**Rural Public Transit Pilot**'s decision on the request.

Complaint Process
Rapides Area Planning Commission/**Rural Public Transit Pilot** has a process for investigating and tracking complaints from qualified individuals. These procedures shall be posted on the Rapides Area Planning Commission/**Rural Public Transit Pilot**'s website and will be provided to any individual where the Rapides Area Planning Commission/**Rural Public Transit Pilot** has denied a request for accommodation. The process and any forms necessary to file a complaint are readily available from the web. Alternative means of filing complaints, such as personal interviews, phone calls, or taped requests, will be made available for persons with disabilities if unable to communicate their request in writing or upon request.

Any person who believes she or he has been discriminated against in obtaining a reasonable modification may file a complaint by completing and submitting a Rapides Area Planning Commission/**Rural Public Transit Pilot**'s Reasonable Modification Complaint Form. Rapides Area Planning Commission/**Rural Public Transit Pilot** investigates complaints received no more than 30 days after receipt. Rapides Area Planning Commission/**Rural Public Transit Pilot** will process complaints that are complete. Once the complaint is received, the complainant will receive an acknowledgement of receipt. If more information is needed to resolve the complaint, Rapides Area Planning Commission/**Rural Public Transit Pilot** may contact the complainant. The complainant has 30 business days from the date of the letter to send requested information to Rapides Area Planning Commission/**Rural Public Transit Pilot**.

If Rapides Area Planning Commission/**Rural Public Transit Pilot** is not contacted by the complainant or does not receive the additional information within 30 business days, the Rapides Area Planning Commission/**Rural Public Transit Pilot** may administratively close the complaint. In addition, a complaint may be administratively closed if the complainant no longer wishes to pursue their case.

After Rapides Area Planning Commission/**Rural Public Transit Pilot** investigates the complaint, a decision will be rendered in writing to the complainant. Rapides Area Planning Commission/**Rural Public Transit Pilot** will issue either a Letter of Closure or Letter of Finding.

a. *Letter of Finding* – This letter will summarize the complaint, any interviews conducted regarding the complaint, and explains what actions will be taken by Rapides Area Planning Commission/**Rural Public Transit Pilot** to address the complaint.
b. *Letter of Closure* – This letter will explain why Rapides Area Planning Commission/**Rural Public Transit Pilot** has determined that the complaint does not merit accommodation under the Americans with Disabilities Act and that the complaint will be closed.

If the complainant disagrees with the decision of Rapides Area Planning Commission/ **Rural Public Transit Pilot**, an opportunity to appeal the decision may be pursued provided the complaint files notice of appeal within 21 days of the initial decision of Rapides Area Planning Commission/**Rural Public Transit Pilot**.

In the event of appeal, the complainant will be granted all due process, including the ability to be presented with additional evidence, present the case in person during an appeal hearing, and to be represented by counsel.

Designated Employee
Rapides Area Planning Commission/**Rural Public Transit Pilot** shall designate one official within the organization responsible for processing reasonable modification requests and handling complaints. This individual is:

Kathy Powell
RAPC Title VI & ADA Coordinator, Office Manager
P.O. Box 7586
Alexandria, LA 71306
318-487-5401
kathy@rapc.info
www.rapc.info

Rapides Area Planning Commission will maintain all records related to reasonable modification requests and denials for at least three (3) years.

Request For Reasonable Modifications

In accordance with the Americans with Disabilities Act (ADA) and directives from the Federal Transit Administration, Rapides Area Planning Commission/**Rural Public Transit Pilot** will make every effort, to the maximum extent feasible, to ensure that a person with a disability has access to, and benefits from, its services. Rapides Area Planning Commission/**Rural Public Transit Pilot** will make reasonable modifications to its policies, programs, and procedures applicable to its transportation services when necessary to avoid discrimination and ensure accessibility for people with disabilities.

Reasonable modifications do have limitations and are not intended to:

- Cause a direct threat to the health and safety of others
- Create undue financial and administrative burdens
- Constitute a fundamental alteration to a service
- Not necessary to provide equal access to Rapides Area Planning Commission/**Rural Public Transit Pilot transit service**

Considerations when making a reasonable modification request:

- Individuals requesting modifications shall describe what they need in order to use the service.
- Individuals requesting modifications are not required to use the term “reasonable modification” when making a request.
- Whenever feasible, requests for modifications shall be made and determined in advance, before the transportation provider is expected to provide the modified service, for example, during the paratransit eligibility process, through customer service inquiries, or through the entity's complaint process.
- Where a request for modification cannot practicably be made and determined in advance (e.g., because of a condition or barrier at the destination of a paratransit or fixed route trip of which the individual with a disability was unaware until arriving), operating personnel of the entity shall make a determination of whether the modification should be provided at the time of the request. Operating personnel may consult with the entity's management before making a determination to grant or deny the request.

The request must identify the modification needed in order to use the service. Whenever feasible, please make the request in advance, before the modification is needed to access the service.

Within the scope of the ADA and reasonable modification, if Rapides Area Planning Commission/**Rural Public Transit Pilot** denies a request it will make every effort, to the maximum extent feasible, to ensure that a person with a disability has access to, and benefits from, its services.

Procedure: To request reasonable modifications based on a disability please use the Reasonable Modification Request Form or contact the Rapides Area Planning Commission’s Title VI & ADA Coordinator for assistance.

Title VI & ADA Coordinator,
Rapides Area Planning Commission,
P.O. Box 7586, Alexandria, LA 71306,
318-487-5401
www.rapc.info

You may be asked to complete a request form. Rapides Area Planning Commission will review the request in accordance with its reasonable modification plan. Rapides Area Planning Commission/**Rural Public Transit Pilot** strives to respond, in writing, to each request within 15 calendar days. **All the information involved with this process will be kept confidential.**

ADA Reasonable Modification Request Form

Use this form to request a modification to current Rapides Area Planning Commission/**Rural Public Transit Pilot** policies or procedures. Be specific and provide as much detailed information as possible. This will allow us to effectively process and evaluate your request. Before filling out this form please review Rapides Area Planning Commission/**Rural Public Transit Pilot**'s Americans with Disabilities Act (ADA) Request for Reasonable Modifications Procedures.

Please include the following items in your request:
- Based on a disability, why is the modification necessary?
- Provide a description of your limitation(s) and how it is affected by Baldwin Regional Area Transit System's policies/procedures.

Name: _____
Date: _____
Phone: _____
Email: _____
Mailing Address: _____
City: _____ State: _____ Zip: _____

Best way to contact you: phone email mail
other: _____

Modification Request:

_____
_____
_____
_____
_____
_____
_____

Please send to:

Kathy Powell
Title VI & ADA Coordinator, Office Manager
Rapides Area Planning Commission
P.O. Box 7586
Alexandria, LA 71306
318-487-5401
kathy@rapc.info

All the information involved with this process will be kept confidential.

PARCELS & ASSISTANCE

ASSISTANCE

Our drivers can perform only reasonable assistance in boarding and de-boarding. Reasonable assistance is defined as opening of a door, offering of an arm, or helping with minimal number of packages (See Parcel Policy below). Drivers are trained to provide minimal assistance only and are not trained to provide medical assistance. The Rapides Area Planning Commission's Rural Public Transit Pilot offers origin to destination service meaning our driver will provide reasonable assistance within a 25-foot radius of the bus. Our drivers must maintain sight of the vehicle to ensure the safety of any passengers on board as well as security of the vehicle itself. We ***do not*** enter homes and there is a limit of three (3) steps, so passengers please have a friend or family member accompany you as a Personal Care Assistant (PCA) if you need further assistance. No additional charge will be made for the Personal Care Assistant (PCA) to accompany the passenger. This PCA must be a minimum of 18 years old and must have the ability to assist the passenger with all of their needs. A passenger is limited to one Personal Care Assistant. All nursing homes or assisted-living passengers must be accompanied by a PCA. This PCA is deemed necessary since either a family member, or a medical physician has deemed the residents at these facilities as needing additional assistance.

PARCELS

Parcels (Groceries) are allowed if the passenger can reasonably carry and control the parcel. The passenger must be able to get the parcel(s) on and off the vehicle in one trip, stabilize it, and control it through the transit trip. For non-ambulatory passengers or other passengers with disabilities, the parcel should be such that the driver or an accompanying person can carry the parcel(s) on and off the vehicle in one trip, stabilize it, and with the assistance of a cardboard box or likeness, have the parcel(s) under control for the trip. Any parcel that either directly or indirectly threatens the safe transportation of passengers will not be allowed. Only the driver or the PCA may assist with passenger parcels.

On Demand Response routes, drivers can only wait at your residence for three (3) minutes. Please be prompt, as the driver must be able to pick up the next passenger on time.

No child under the age of 13 years old may ride a demand response route without an adult of the age of 18 years or older.

Because of unpredictable traffic and weather — you must allow for a 30-minute variation in pick-up time. For example, if your scheduled pick-up time is 9:00 AM, you will be picked up anytime between 8:45 AM and 9:15 AM. When making your appointments, please take this fact into consideration.

Rapides Area Planning Commission
Rural Public Transit Pilot

NO SHOW POLICY

Purpose

The Rapides Area Planning Commission's Rural Public Transit Pilot "No Show Policy" was developed to prevent the abuse of our transit system and the increased cost to operate due to no shows. The goal of this policy is to eliminate individuals from scheduling trips and not canceling these trips if they are not able to travel. An additional goal is to help decrease the cost of operations to prevent an increase in our fares. Our transit program will record and review no shows for abuse.

Please contact our transit program's Scheduling Department at 318-664-9720 for questions regarding our "No Show Policy".

A No Show is defined as:

- Any travel-time having occurred to pick up a passenger that does not ride.
- There has been no advance call by the customer or customer's representative to cancel the scheduled trip.
- The trip is not canceled one hour prior to scheduled pick up time.
- Any time a driver waits 10 minutes and passenger is not present or ready to leave.
- When a passenger cancels a trip once you have arrived at the pick-up location.
- Non-canceled rides will be declared a No Show. If your first pick-up for the day is a No Show the remaining trips for the day will be canceled unless scheduling has been notified.

No Show Policy

Passenger accumulating three (3) No Shows in a 30-day period will be suspended from all transit service for 14 days for the abuse of our transit program. If a passenger receives more than one suspension within a year, the second suspension will be thirty (30) days or longer. It will be determined on a case-by-case basis and may be a permanent suspension. Once a passenger receives two (2) No Shows, the passenger will be given verbal warning.

Prior to any suspension a written notification will be mailed to the passenger. Individuals may appeal a suspension. All appeals must be in writing prior to the suspension date and directed to the Director of Transportation at P.O. Box 7586 Alexandria, Louisiana 71306.

Rapides Area Planning Commission
Rural Public Transit Pilot

Substance Abuse Management Policy

RAPC Rural Public Transit Pilot
Substance Abuse Management
Policy

In accordance with USDOT and FTA Regulations

The Rural Public Transit Pilot, operated by the Rapides Area Planning Commission (RAPC), is dedicated to providing safe, dependable, and economical transportation service to its patrons. Rural Public Transit Pilot employees are a valuable resource, and it is our agency's goal to provide a safe, healthy and satisfying working environment, free of the potential dangers posed by a safety-sensitive employee's use of prohibited drugs or misuse of alcohol.

This policy is established to comply with the Federal Transit Administration regulations codified as 49 CFR Part 655, as amended and USDOT regulations codified as 49 CFR Part 40, as amended. ***Policy provisions authorized by Rural Public Transit Pilot are italicized and bolded throughout this policy.*** All other policy provisions are implemented under the authority of the United States Department of Transportation (USDOT) and the Federal Transit Administration (FTA).

This policy is approved by: Matt Johns,

AICP Title of approving official: RAPC Executive

Director

Signature of approving official: _____

Date Signed: _____

Policy effective date: _____

Substance Abuse Policy Table of Contents

1. **Testing Program Background**

The Omnibus Transportation Employee Testing Act of 1991 (OTETA) directed the United States Department of Transportation (USDOT) to promulgate regulations outlining the procedures for transportation workplace drug and alcohol testing. The USDOT regulations titled, "Procedures for Transportation Workplace Drug and Alcohol Testing" are codified as 49 CFR Part 40. The regulations ensure uniform practices for specimen collections, laboratory analysis, medical review, result reporting and the Return-to-Duty process for violating employees. The regulations are applicable to safety-sensitive employees in transportation workplaces throughout the nation (transit, railroad, aviation, commercial drivers, etc.).

The OTETA also directed each transportation administration to craft industry-specific regulations that define which employees are subject to testing, the testing circumstances, policy statement requirements and training requirements, relevant to that industry. Rural Public Transit Pilot is required to comply with both the USDOT regulations described above, as well as the Federal Transit Administration regulations "Prevention of Prohibited Drug Use and Alcohol Misuse in Transit Operations" which are codified as 49 CFR Part 655.

2. **Employee Applicability**

This policy and the USDOT/FTA testing program apply to all safety-sensitive Rural Public Transit Pilot employees. The policy also applies to volunteers who are required to hold a Commercial Driver's License (CDL) and volunteers that receive remuneration in excess of actual expenses accrued while carrying out assigned duties. Adherence to this policy and the USDOT/FTA testing program is a condition of employment in a safety-sensitive position with Rural Public Transit Pilot. All employees of Rural Public Transit Pilot who perform, or could be called upon to perform, any of the following duties are defined as safety-sensitive employees:

1. Operate a public transportation vehicle, while in or out of service
2. Operate an ancillary vehicle when the vehicle requires a commercial driver's license
3. Control the movement of a public transportation vehicle
4. Perform maintenance on a vehicle or equipment used in public transportation
5. Carry a firearm for security purposes

The Rural Public Transit Pilot positions classified as safety-sensitive include:

- Transit Program Manager
- Drivers

3. **USDOT/FTA Prohibited Drug Classes**

Consumption of these drugs is prohibited at all times.

- Amphetamines
- Cocaine
- Marijuana
- Opioids
- Phencyclidine (PCP)

4. **Pre-employment Drug and Alcohol Background Checks**

In accordance with 49 CFR Part 40.25, Rural Public Transit Pilot must make and document good faith efforts to perform drug and alcohol background checks for all applicants applying for a safety-sensitive position and all current employees applying for transfer into a safety-sensitive position. Testing information will be requested from each of the applicant's previous DOT covered employers during the two years prior to the date of application. Rural Public Transit Pilot must obtain the applicant's written consent for the release of their drug and alcohol testing information from their previous DOT covered employers to Rural Public Transit Pilot. Applicants refusing to provide written consent are prohibited from performing safety-sensitive functions for Rural Public Transit Pilot.

Safety-sensitive applicants who have previously violated the USDOT testing program must provide documentation that they have successfully completed the USDOT's Return-to-Duty process with a DOT-qualified Substance Abuse Professional (SAP). Failure to provide satisfactory documentation will exclude the applicant from being hired or transferred into a safety-sensitive position with Rural Public Transit Pilot.

5. **Pre-Employment Testing**

All applicants for safety-sensitive positions shall undergo a pre-employment urine drug test. Rural Public Transit Pilot must receive an MRO-verified negative drug test result prior to the applicant's first performance of any safety sensitive function, including behind-the-wheel training.

If an applicant's pre-employment urine drug test result is verified as positive, the applicant will be excluded from consideration for employment in a safety-sensitive position with Rural Public Transit Pilot. The applicant will be provided with a list of USDOT-qualified Substance Abuse Professionals.

An employee returning from an extended leave period of 90 consecutive days or more, and whose name was <u>also</u> removed from the random testing pool for 90 days or more,

must submit to a pre-employment urine drug test. Rural Public Transit Pilot must be in receipt of a negative drug test result prior to the employee resuming any safety-sensitive function. A verified positive pre-employment drug test is a violation of the USDOT/FTA testing program. Violating current employees will be required to successfully complete the USDOT's return-to-duty process prior to resuming safety-sensitive functions. ***Per Rural Public Transit Pilot authority, a disciplinary suspension may be imposed.***

6. **Random Testing**

Safety-sensitive employees will be subject to random, unannounced testing. Rural Public Transit Pilot will perform random testing in a manner that meets or exceeds the FTA minimum annual testing requirements, as amended. The selection of employees for random testing will be made using a scientifically valid method. All safety-sensitive employees will have an equal chance of being selected each time a random draw is performed. Random alcohol tests will be conducted just before, during or just after the employee's performance of a safety-sensitive function. Random drug tests may be conducted anytime an employee is on duty, on call for duty or on standby for duty.

Once an employee is notified that they have been selected for a random test, they must proceed immediately to the testing location. Failure to proceed immediately may be deemed a refusal to test.

7. **Reasonable Suspicion Testing**

All safety-sensitive employees must submit to reasonable suspicion drug and/or alcohol testing when a supervisor or company official trained in detecting signs and symptoms of drug use or alcohol misuse has made specific, contemporaneous, articulable observations concerning an employee's appearance, speech, behavior and/or body odor. Reasonable suspicion testing for alcohol misuse will occur when observations are made just before, during, or just after the employee's performance of a safety-sensitive function. Reasonable suspicion testing for prohibited drugs may be conducted anytime an employee is on duty or on standby for duty and a trained supervisor has made the observations.

8. **Post-Accident Testing**

Fatal Accidents: Safety-sensitive employees must submit to post-accident drug and alcohol testing following an accident involving a public transportation vehicle that results in the loss of human life. In addition to a surviving operator of the vehicle, any other surviving safety-sensitive employee whose performance could have contributed to the accident must also be tested.

Non-Fatal Accidents: All safety-sensitive employees whose actions cannot be

completely discounted, as a contributing factor must submit to post-accident drug and alcohol testing when a non-fatal accident meets one or more of the following thresholds:

1. An individual suffers bodily injury and immediately receives medical treatment away from the scene
2. One or more vehicles incurs disabling damage that requires the vehicle(s) to be towed away from the accident scene
3. If the public transportation vehicle is a rail car, trolley car, trolley bus or vessel and has been removed from service.

Rural Public Transit Pilot officials will use the best information available at the scene, to determine if a safety-sensitive employee's performance can be completely discounted as a contributing factor to the accident.

Post-accident drug and alcohol tests will be conducted as soon as practicable following the accident. Any safety-sensitive employee involved in an accident must refrain from alcohol use for eight (8) hours following the accident or until the employee undergoes a post-accident alcohol test. Any safety-sensitive employee who leaves the scene of the accident without a justifiable reason or explanation prior to submitting to drug and alcohol testing, will be deemed to have refused the test. However, employees are not prohibited from leaving the scene of an accident to obtain assistance in responding to the accident or to obtain necessary emergency medical care.

9. **Urine Specimen Collections**

Urine specimen collections will be conducted in accordance with USDOT rule, 49 CFR Part 40, as amended. Collectors will be appropriately trained and qualified to perform urine specimen collections for USDOT covered employees. Urine specimen collectors will use the split-specimen collection method and will afford the donor (employee) the greatest degree of privacy permitted per 49 CFR Part 40, as amended. When an observed collection is required, the observer will be of the same gender as the donor (employee).

10. **Refusal to Submit to Urine Drug Testing**

The following actions constitute a "refusal to test" in accordance with 49 CFR Part 40, as amended:

(1) Failure to appear for any test within a reasonable time, as determined by the employer, consistent with applicable DOT agency regulations, after being directed to do so by the employer (pre-employment testing not applicable).

(2) Failure to remain at the testing site until the testing process is completed (after the process has been started)

(3) Failure to provide a urine specimen for any drug test required by this part or DOT agency regulations
(4) In the case of a directly observed or monitored collection in a drug test, fail to permit the observation or monitoring of your provision of a specimen
(5) Failure to provide a sufficient amount of urine when directed, and it has been determined, through a required medical evaluation, that there was no adequate medical explanation for the failure
(6) Failure or decline to take an additional drug test the employer or collector has directed you to take
(7) Failure to undergo a medical examination or evaluation, as directed by the MRO as part of the verification process, or as directed by Rural Public Transit Pilot
(8) Failure to cooperate with any part of the testing process (e.g., refuse to empty pockets when directed by the collector, behave in a confrontational way that disrupts the collection process, fail to wash hands after being directed to do so by the collector).
(9) For an observed collection, failure to follow the observer's instructions to raise your clothing above the waist, lower clothing and underpants, and to turn around to permit the observer to determine if you have any type of prosthetic or other device that could be used to interfere with the collection process.
(10) Possessing or wearing a prosthetic or other device that could be used to interfere with the collection process.
(11) Admitting to the collector or MRO that you adulterated or substituted the specimen.
(12) When the MRO verifies your drug test result as adulterated or substituted.

Refusing to submit to a USDOT/FTA required test is a violation of USDOT/FTA testing program. Employees are required to be immediately removed from safety-sensitive duty and provided with a list of USDOT-qualified Substance Abuse Professionals. Violating employees will be required to successfully complete the USDOT's return-to-duty process prior to resuming safety-sensitive functions. ***Per Rural Public Transit Pilot authority, a disciplinary suspension may be imposed.***

11. **Urine Specimen Analysis**

All specimens will be transported or shipped to a laboratory certified by the Department of Health and Human Services (DHHS). All specimens will be analyzed at the laboratory in accordance with 49 CFR Part 40, as amended. The procedures that will be used to test for the presence of prohibited drugs will protect the employee and the integrity of the drug testing process, safeguard the validity of the test results, and ensure that the test results are attributed to the correct employee. Laboratory confirmed drug test results will be released only to a certified Medical Review Officer

(MRO) for review and verification.

Negative-Dilute Specimens

Upon receipt of an MRO verified negative-dilute drug test result with creatinine levels greater than 5 mg/dl and less than 20 mg/dl, Rural Public Transit Pilot will require applicants and employees to submit to a second urine collection per 49 CFR Part 40.197. The collection of the second specimen will not be conducted using direct observation procedures. The MRO verified result of the second urine drug test will be accepted by Rural Public Transit Pilot as the final result and the test of record. ***Rural Public Transit Pilot will apply this policy provision uniformly for all pre-employment and random urine drug tests reported by the Medical Review Officer to have creatinine levels greater than 5mg/dl but less than 20mg/dl (negative-dilute results).*** Once notified that a second collection is required, employees must proceed immediately for testing. An employee's failure to report immediately may be deemed as a refusal to submit to testing, which is a violation of the USDOT/FTA testing program.

12. **Role of the Medical Review Officer (MRO)**

The role of the Medical Review Officer is to review and verify laboratory confirmed test results obtained through a DOT-covered employer's testing program. When a non-negative drug test result is received, the MRO will communicate with the donor (employee) to determine if a legitimate medical explanation exists. When a legally prescribed medication has produced a non-negative result, the MRO will verify the prescription and report the result as "negative" to Rural Public Transit Pilot. Medical conditions and other information obtained by the MRO during the interview with the donor will be maintained in a confidential manner. However, if the MRO believes that a medication prescribed to the donor may pose a significant safety risk, the MRO will require the donor to contact his/her prescribing physician and request that the physician contact the MRO within 5 business days. The MRO and prescribing physician will consult to determine if the employee's medication use presents a significant safety risk. Rural Public Transit Pilot will be notified by the MRO when the outcome of the consultation results in a determination that the donor's medication use presents a significant safety risk. If the employee's prescribing physician fails to respond, the safety concern will be reported to Rural Public Transit Pilot. Based on the MRO recommendation, Rural Public Transit Pilot may deem the employee medically disqualified from performing safety-sensitive functions. The MRO assigned to review and verify laboratory drug test results for Rural Public Transit Pilot is:

Insert the specific name of your agency's assigned MRO

Insert address of MRO

Insert telephone number of MRO

13. **Consequence for MRO Verified Positive Drug Test**

When Rural Public Transit Pilot is notified of an MRO verified positive drug test, or a test refusal due to adulteration or substitution; the violating employee will be immediately removed from safety-sensitive duty and provided a list of DOT-qualified Substance Abuse Professionals. Applicants will be excluded from hire and provided with a list of DOT-qualified Substance Abuse Professionals.

Violating employees will be required to successfully complete the USDOT return-to-duty process prior to resuming safety-sensitive functions. ***Per Rural Public Transit Pilot authority, a disciplinary suspension may be imposed.***

14. **Split Specimen Testing**

As an important employee protection, split specimen collection procedures will be used for all USDOT/FTA urine collections. When an employee challenges an MRO verified result, he/she may request that the split specimen (bottle B) be tested at a different DHHS certified laboratory that conducted the test of the primary specimen (bottle A). Instructions for requesting the split specimen test will be provided by the Medical Review Officer during his/her interview with the donor (employee). In accordance with USDOT rule, Rural Public Transit Pilot will ensure that the fee to process the split specimen test is covered in order for a timely analysis of the split specimen. ***Rural Public Transit Pilot may seek reimbursement for the cost of the split specimen test.***

15. **Alcohol Prohibition**

Safety-sensitive employees are prohibited from consuming alcohol while performing safety-sensitive functions, within (4) four hours prior to performing a safety sensitive function, or during the hours that they are on call or standby for duty. No safety-sensitive employee shall report for duty or remain on duty while having an alcohol concentration of 0.02 or greater.

Safety-sensitive employees must not consume alcohol within eight (8) hours following an accident or until the employee submits to post-accident testing, whichever occurs first.

16. **Alcohol Testing**

All alcohol screening tests, and confirmation tests will be performed in accordance with USDOT rule, 49 CFR Part 40. The procedures that will be used to test for alcohol misuse will protect the employee and the integrity of the testing process, safeguard the validity of the test results, and ensure the test results are attributed to the correct employee.

When an alcohol-screening test indicates a blood alcohol concentration (BAC) of 0.02 or greater, a confirmation test will be performed using an evidential breath testing

device listed on the USDOT/ODAPC webpage as an "Approved Evidential Breath Measurement Device". The confirmed blood alcohol concentration (BAC) result will be transmitted by the technician to Rural Public Transit Pilot in a confidential manner. A safety-sensitive employee who has a confirmed blood alcohol concentration (BAC) of 0.02 or greater but less than 0.04 will be removed from safety-sensitive duties for a period of at least (8) eight hours or until test results fall below 0.02.

17. **Consequence for a USDOT/FTA Alcohol Violation**

A safety-sensitive employee who has a confirmed blood alcohol concentration (BAC) of 0.04 or greater has violated the USDOT/FTA testing program and will be removed from safety-sensitive duty and provided a list of DOT-qualified Substance Abuse Professionals. Violating employees will be required to successfully complete the USDOT return-to-duty process prior to resuming safety-sensitive functions. ***Per Rural Public Transit Pilot authority, a disciplinary suspension may be imposed.***

18. **Refusal to Submit to Alcohol Testing**

The following actions constitute a refusal to submit to an alcohol test:
(1) Fail to appear for any test within a reasonable time, as determined by the employer, consistent with applicable DOT agency regulations, after being directed to do so by the employer.
(2) Fail to remain at the testing site until the testing process is complete
(3) Fail to provide an adequate amount of saliva or breath for any USDOT required alcohol test
(4) Fail to provide a sufficient breath specimen, and the physician has determined, through a required medical evaluation, that there was no adequate medical explanation for the failure
(5) Fail to undergo a medical examination or evaluation, as directed by the [Agency]
(6) Fail to sign the certification at Step 2 of the ATF
(7) Fail to cooperate with any part of the testing process.

Refusing to submit to a USDOT/FTA required test is a violation of USDOT/FTA testing program. Employees must be immediately removed from safety-sensitive duty and provided with a list of USDOT-qualified Substance Abuse Professionals. Violating employees will be required to successfully complete the USDOT return-to-duty process prior to resuming safety-sensitive functions. ***Per Rural Public Transit Pilot authority, a disciplinary suspension may be imposed.***

19. **USDOT Return-to-Duty Process**

When Rural Public Transit Pilot is notified of an employee's MRO verified positive drug test or an employee's confirmed blood alcohol concentration (BAC) of 0.04 or greater, the employee will be immediately removed from safety-sensitive duties and

will be provided with a list of DOT-qualified Substance Abuse Professionals. Violating employees will be required to successfully complete the USDOT's Return-to-Duty process prior to returning to safety-sensitive duty. The Return-to-Duty process must be in accordance with USDOT rule, 49 CFR Part 40, Subpart O.

Return-to-Duty Tests

Upon successful completion of the USDOT Return-to-Duty process, employees must submit to a Return-to-Duty drug and/or alcohol test (test types will be determined by the DOT-qualified SAP who evaluated the employee). Rural Public Transit Pilot must receive an MRO verified negative drug test result and/or a confirmed blood alcohol concentration (BAC) result of less than 0.02, prior to the employee's return to safety-sensitive duties. In accordance with USDOT rule, return-to-duty drug testing will be conducted using direct observation collection procedures.

Follow-up Tests

Once the violating employee has resumed safety-sensitive duties, he/she will be subject to unannounced drug and/or alcohol testing referred to in the regulation as follow-up testing. The frequency of the follow-up tests and the duration of the follow-up testing will be determined by the USDOT-qualified Substance Abuse Professional who evaluated the employee. In accordance with USDOT rule, all follow-up drug testing will be conducted using direct observation collection procedures.

20. **Rural Public Transit Pilot Contacts**

Designated Employer Representative (Drug & Alcohol Program Manager)
Nickolas Blackstone

318-498-5401, ext. 34

nick@rapc.info

Alternate (back-up) Program Manager
Heidi Murrell

318-487-5401, ext. 18

heidi@rapc.info

Further information may be obtained from the USDOT's Office of Drug and Alcohol Policy and Compliance website: https://www.transportation.gov/odapc and the Federal Transit Administration's (FTA) website:
https://transit-safety.fta.dot.gov/DrugAndAlcohol/Default.aspx.

ORDER FOR TESTING

To be completed by collection site personnel upon arrival at site and returned to employer with Employer's copy of Chain of Custody Form.

Time _____ Date _____ Collection Site Personnel Initials _____

Print Collection Site Personnel Name _____

The Federal Transit Administration issued regulations (49 CFR Part 655) that require all safety-sensitive employees/applicants to submit to drug and alcohol testing as a condition of employment in a safety-sensitive position. Refusing to submit to testing; adulterating, substituting, or tampering with the specimen; or failing to cooperate with any part of the collection process is a violation of the regulations and of company policy.

Testing is to be accomplished on the date, time and location indicated below. **You must present this form at the collection site.**

Print Full Name:_____ ID # _____

Collection Site Location: _____

You must report no later than _____ am/pm, on _____(date)
Failure to complete a drug and/or alcohol test will be considered a test refusal.
*** Pre-employment tests** = *New applicants, transfer from a non-safety-sensitive position, return to active status.*
**** Return-to-Duty tests** = *Only performed following a positive/refusal to test and successful completion of SAP counseling.*

Type of Test: ☐ Drug ☐ Alcohol ☐ Both

Test Authority: ☐ DOT-FTA ☐ Non-DOT ☐ DOT- Other _____

Test Category: ☐ Pre-employment* ☐ Random
☐ Post-accident ☐ Reasonable Suspicion
☐ Return-to-duty** ☐ Follow-up
☐ Retest, Specify: _____

Observed Collection: ☐ Yes ☐ No

Transported: ☐ Yes, By Whom:_____ ☐ No

Picture ID: ☐ Yes ☐ No

Other Special Instructions:_____

Supervisor Authorizing Test: _____ _____ _____
Print Name Date Time Notified

Designated Employer Representative / DAPM:_____ _____
Print Name Phone Number

PRE-EMPLOYMENT DRUG TESTING ACKNOWLEDGEMENT

I, hereby acknowledge and understand that, as part of my application for employment for a position which involves the performance of safety-sensitive functions as defined by 49 CFR Part 655, as amended, I must submit to a urine drug test under the authority of the U.S. Department of Transportation, Federal Transit Administration. I acknowledge and understand that my employment is contingent on the passing of the aforementioned drug test, and I will not be assigned to perform a safety-sensitive function unless my urine drug test has a verified negative result.

_____	_____
Signature of Applicant	Date
_____	_____
Print Name	Date

(Your application will not be considered for employment of a covered safety-sensitive position unless this acknowledgment is completed and signed.)

ACKNOWLEDGEMENT
OF
EMPLOYER'S DRUG AND ALCOHOL TESTING POLICY

I, _____, the undersigned, hereby
Print Full Name

acknowledge that I have received a copy of the anti-drug and alcohol misuse program policy mandated by the U.S. Department of Transportation, Federal Transit Administration for all covered employees who perform a safety-sensitive function. I understand this policy is required by 49 CFR Part 655, as amended, and has been duly adopted by the governing board of the employer. Any provisions contained herein which are not required by 49 CFR Part 655, as amended, that have been imposed solely on the authority of the employer are designated as such in the policy document.

I further understand that receipt of this policy constitutes a legal notification of the contents, and that it is my responsibility to become familiar with and adhere to all provisions contained therein. I will seek and get clarification for any questions concerning the provisions contained in the policy. I also understand that compliance with all provisions contained in the policy is a condition of employment.

I further understand that the information contained in the approved policy dated _____, is subject to change, and that any such changes, or addendum, shall be disseminated in a manner consistent with the provision of 49 CFR Part 655, as amended.

_____ _____
Signature of Employee *Date*

SAFETY-SENSITIVE EMPLOYEE APPLICATION SUPPLEMENT

Previous US Department of Transportation Drug and Alcohol Testing

_____ _____,
Applicant First Name, Middle Initial, Last Name Social Security Number

Have you ever participated in USDOT-regulated drug and alcohol testing with previous employers?
Yes_____(if yes, complete #1 and #2) **No**_____(if no, skip to #2)

1. In the last two years, have you ever:

   a) Tested positive (0.04 or greater) for alcohol?
   Yes_____ No_____

   b) Had a verified positive drug test result?
   Yes_____ No_____

   c) Refused a required drug or alcohol test (or had a verified adulterated or substituted drug test result)?
   Yes_____ No_____

   d) Violated any other DOT drug or alcohol testing regulation within the last two years?
   Yes_____ No_____

2. Have you tested positive, or refused to test, on any pre-employment drug or alcohol test administered by an employer to which you applied for, but did not obtain, safety-sensitive transportation work covered by DOT agency drug and alcohol testing rules in the last two years?
   Yes_____No

If you responded "YES" to any of the above questions, please provide documentation or your successful completion of DOT return-to-duty requirements. If you do not have this information, please explain why: _____

_____
(Use additional pages as necessary)

"*I certify that the facts contained in this form are true and complete to the best of my knowledge and understand that, if employed, falsified statements on this form shall be grounds for dismissal.*"

_____ _____
Signed Date

AUTHORIZATION FOR RELEASE OF INFORMATION FROM PREVIOUS EMPLOYER ON US DOT DRUG AND ALCOHOL TESTING

(A **separate form** must be filled out for each US DOT-regulated employer who employed the applicant during the two-year period preceding the date of the employee's application or transfer)

I, _____ _____, authorize that:
Print First Name, Middle Initial, Last Name Last 4 digits of Social Security Number

Contact Person: _____

Previous Employer: _____

_____

Street Address or
P.O. Box: _____ Telephone: _____

City, State, Zip _____ Fax: _____

may release the information requested below concerning my US DOT drug and alcohol testing records to:

Contact Person: _____

Prospective Employer: _____

Street Address or
P.O. Box: _____ Telephone: _____

City, State, Zip _____ Fax: _____

_____ _____
Applicant's Signature ***Date***

This information will be used solely for the purpose of ascertaining whether I am eligible to perform safety-sensitive functions for the _____. This authorization for release of information is valid for one year from the date of signature.

COMPLETED BY PREVIOUS EMPLOYER

Check here ☐ if this employee did **not** participate in US DOT-regulated drug and alcohol testing while under your employment. Then sign below and return this form.
OR respond to the following questions regarding this employee's US DOT-regulated drug and alcohol testing history while employed with your agency/firm.

1. Has this employee tested positive (0.04 or greater) for alcohol in the last two years? Y ___ N ___
2. Has this employee had a verified positive drug test result in the last two years? Y ___ N ___
3. Has this employee refused a required drug or alcohol test in the last two years? Y ___ N ___
4. Has this employee violated any other US DOT drug or alcohol testing regulation within the last two years? Y ___ N ___
5. Has a previous employer reported a drug and alcohol rule violation to you? Y ___ N ___
6. If you answered yes to any of the above items, did the employee complete the return to duty process? Y ___ N ___

*Note: If you answered **"yes" to item 5**, you must provide the previous employer's report. If you answered **"yes" to item 6**, you must also transmit the appropriate return-to-duty documentation (e.g. SAP report(s), follow-up testing record).*

_____ _____
Previous Employer's Signature Date

Please return this form to the prospective employer at the address listed above.

‘GOOD FAITH EFFORT’ DOCUMENTATION

Release of Information from Previous Employer on DOT Drug and Alcohol Testing

1. _____ *’s* first attempt at acquiring information from previous
Agency Name
employer on DOT drug and alcohol testing, for _____,
Employee’s Full Name

was performed on _____. _____sent an
Date *Agency Name*

‘authorization for release’ form, through certified mail, to the following DOT Employer:

_____

_____

_____
Previous Employer’s Address (add additional sheets for additional employers)

2. _____ *’s* second attempt at acquiring information from previous employer
Agency Name
on DOT drug and alcohol testing, for the aforementioned employee, was performed on_____.
Date
_____attempted to call the previous employer at the following
Agency Name
telephone numbers:

_____
Employer’s Name and Telephone Number (add additional sheets for additional employers)

☐ Left Voice-Mail Message ☐ Successfully Reached Company Representative
(Check appropriate box)

3. _____ *’s* third attempt at acquiring information from previous employer
Agency Name
on DOT drug and alcohol testing, for the aforementioned employee, was performed on_____.
Date
_____attempted to call the previous employer at the following
Agency Name
telephone numbers:

_____
Employer’s Name and Telephone Number (add additional sheets for additional employers)

☐ Left Voice-Mail Message ☐ Successfully reached Company Representative
(Check appropriate box)

POST ACCIDENT TESTING DECISION REPORT

A separate sheet must be filled out for each covered employee that contributed to the accident

System Name: _____ Date of Accident: _____

Time of Accident: _____ Time Employer was notified: _____

Location of Accident: _____

Safety-Sensitive Employee: _____ Position: _____
i.e. Driver, Dispatcher, etc.

1. Did the accident involve a public transit vehicle? ☐ Yes ☐ No

2. Did the accident involve the operation of the vehicle? ☐ Yes ☐ No

3. Was there loss of life as a result of the accident?* ☐ Yes ☐ No

4. Did an individual suffer a bodily injury and immediately receive medical treatment away from the scene?* ☐ Yes ☐ No

5. Was there disabling damage to any of the involved vehicles? * ☐ Yes ☐ No

6. a) Did you perform a drug and/or alcohol test? **(Use Decision Tree on back of this form)** ☐ Yes DOT-FTA Authority ☐ Yes (NON-DOT) Company Authority ☐ No

b) If no, why not? _____

c) For a non-fatal accident, can the covered employee(s) performance be completely discounted as a contributing factor to the accident? ☐ Yes ☐ No

7. a) Was an alcohol test performed within 2 hours? ☐ N/A ☐ Yes ☐ No

b) If no, why: _____

8. If no alcohol test occurred, and more than 8 hours elapsed from the time of the accident, please explain: _____

_____

9. a) Was a drug test performed within 32 hours? ☐ N/A ☐ Yes ☐ No

b) If no, why: _____

10. a) Did the employee leave the scene of the accident without a reasonable explanation? ☐ Yes ☐ No

b) If Yes, please explain: _____

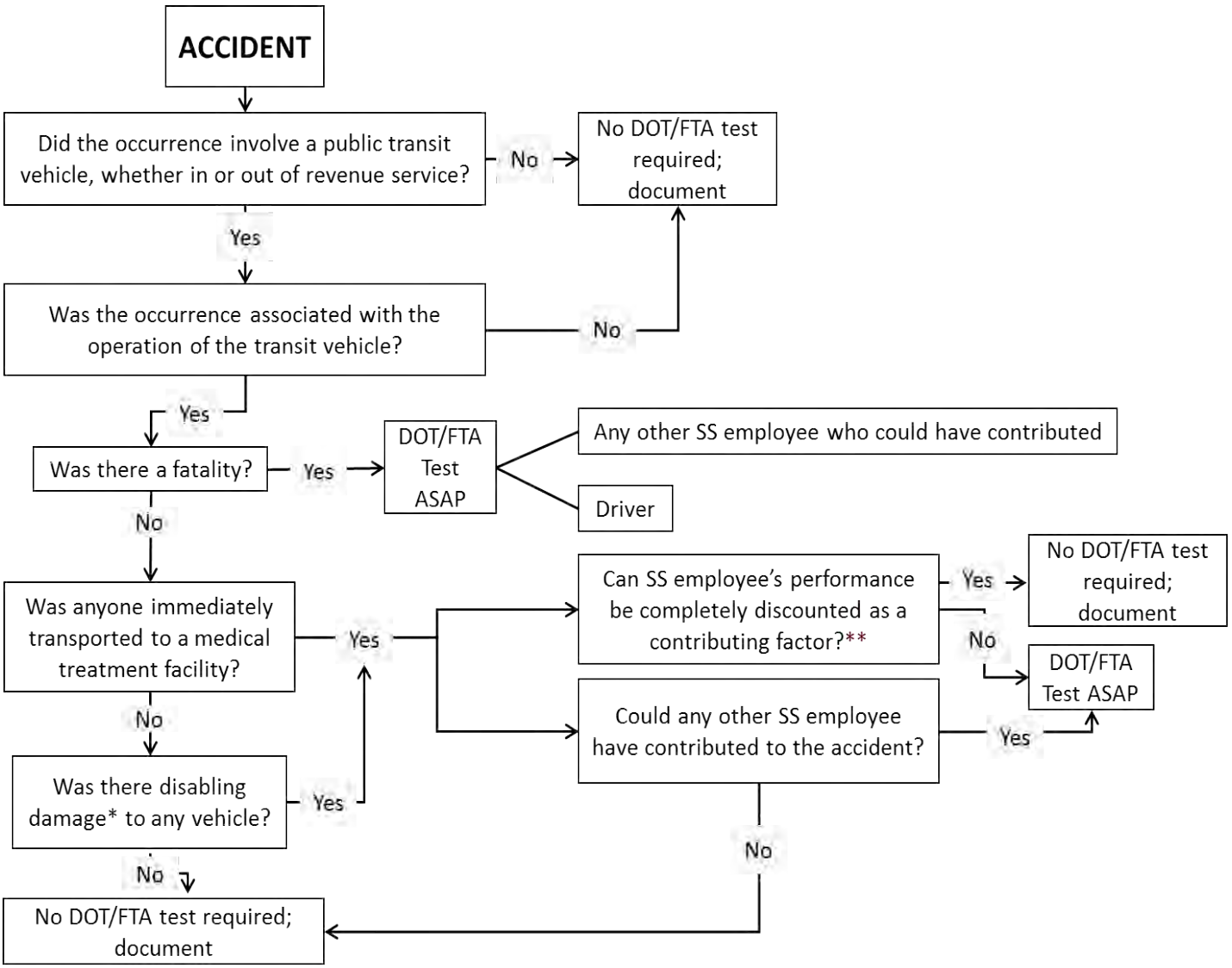
Test Determination:

Name of supervisor making determination: _____

Time employee was informed of determination: _____

_____ _____
Signature & Title Date

Post Accident Decision Tree



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* **Disabling Damage:** Damage that precludes departure of a motor vehicle from the scene of the accident in its usual manner in daylight after simple repairs.

(1) Inclusion: Damage to a motor vehicle, where the vehicle could have been driven, but would have been further damaged if so driven.

(2) Exclusions:

A. Damage that can be remedied temporarily at the scene of the accident without special tools or parts.

B. Tire replacement without other damage even if no spare tire is available.

C. Headlamp or taillight damage.

D. Damage to turn signals, horn, or windshield wiper, which makes the vehicle inoperable.

** **Contributing Factor:** The determination of whether or not a safety-sensitive employee's performance was a contributing factor should be the decision of the company official investigating the accident; not based on the police officer's accident fault determination. This decision should not be made hastily. The company official's determination must be based on the best available information at the time of the accident.

REASONABLE SUSPICION INCIDENT CHECKLIST

Employee's Full Name

Date / Time of Observation

Supervisor's Full Name & Telephone

Date of Supervisor's Reasonable Suspicion Decision Training

This checklist is to be completed when a supervisor – trained in accordance with USDOT Agency regulations for reasonable suspicion/cause determination requirements – determines that an incident has occurred which provides reasonable suspicion that an employee is exhibiting behaviors consistent with the symptoms of drug use and / or alcohol misuse. Mark each applicable item on this form and add any additional facts or circumstances which you have observed.

A. Nature of Incident / Cause for Suspicion

___1. Observed/reported possession or use of a prohibited substance (including passenger complaint).
___2. Apparent drug or alcohol intoxication.
___3. Observed drug or alcohol intoxication.
___4. Arrest for drug-related offense
___5. Other, Please specify:

B. Behavioral Indicators

___1. Verbal abusiveness
___2. Physical abusiveness
___3. Extreme aggressiveness or agitation
___4. Withdrawal, depression, tearfulness, or responsiveness
___5. Inappropriate verbal responses to questioning or instruction
___6. Other erratic or inappropriate behavior (e.g. hallucinations, disoriented, confused) Please specify:

C. Physical Signs and Symptoms

___1. Possession, dispensing, or using prohibited substance
___2. Slurred or incoherent speech
___3. Unsteady gait or other loss of physical control, poor conditioning
___4. Dilated or constricted pupils or unusual eye movement
___5. Bloodshot or watery eyes
___6. Extreme aggressiveness or agitation
___7. Excessive sweating or clamminess of skin
___8. Flushed or very pale face
___9. Highly excited or nervous
___10. Nausea or vomiting
___11. Disheveled appearance or out of uniform
___12. Odor of alcohol
___13. Odor of Marijuana
___14. Dry mouth (frequent swallowing/lip wetting)
___15. Shaking hands or body tremors/twitching
___16. Dizziness or fainting
___17. Breathing irregularity or difficulty breathing
___18. Runny nose or sores around nostrils
___19. Inappropriate wearing of sunglasses
___20. Puncture marks or "tracks"
___21. Other (Specify)_____

_____

_____

D. Written Summary

Please summarize the facts and circumstances surrounding the incident. The observations must be specific, contemporaneous, and articulable regarding the appearance, behavior, speech, or body odors of the safety-sensitive employee. Attach additional sheets as needed.

_____

_____

_____

_____

_____

_____

The above document of physical, behavioral, and performance indicators of the named employee were observed by:

_____	_____	_____
Supervisor's Full Name	Signature	Date

SUBSTANCE ABUSE PROFESSIONAL REFERRAL
EMPLOYEE NOT PRESENT

*If the employee **is not present** to sign the Substance Abuse Professional Referral letter, send this form to the employee utilizing **certified mail**.*

Employee/Applicant Full Name:_____

Employee/Applicant Identification Number: _____

This letter serves to notify that the aforementioned individual was in violation of DOT drug and alcohol regulations (49 CFR Part 655 and/or 40) on _____. In accordance with 49 CFR Part 655.62, this agency is required to advise the individual of the resources available for evaluating and resolving problems associated with prohibited drug use and/or alcohol misuse.

Date

The following Substance Abuse Professional(s) is available for the individual:

Name: _____

Address: _____

City/State: _____

Phone: _____

Alternate Substance Abuse Professional Referral:

Name: _____

Address: _____

City/State: _____

Phone: _____

_____ _____
Agency Representative Full Name, Title Telephone Number

_____
Agency Name

_____ _____
Agency Representative Signature Date

SUBSTANCE ABUSE PROFESSIONAL REFERRAL

I acknowledge that I have received a referral to a Substance Abuse Professional in accordance with 49 CFR Part 655.62.

The cost of this service will be paid by: _____.

Substance Abuse Professional Referral:

Name: _____

Address: _____

City/State: _____

Phone: _____

Alternate Substance Abuse Professional Referral:

Name: _____

Address: _____

City/State: _____

Phone: _____

I _____have received a copy of this referral.
Employee/Applicant Full Name

_____ _____
Employee/Applicant Signature Date

_____ _____
Agency Representative Full Name, Title Telephone Number

_____
Agency Name

_____ _____
Agency Representative Signature Date

Drug Testing Custody and Control Form (CCF) Review Checklist

- Does the form read "*Federal Drug Testing Custody and Control Form*" at the top?
- **In Step 1:**
  - ❑ Is the correct employer name and address listed? (The employer's name must be listed here, not the C/TPA.)
  - ❑ Is the correct MRO's name, address, phone, and fax number listed?
  - ❑ Is the correct employee ID number or SSN listed?
  - ❑ Is the FTA box marked?
  - ❑ Is the reason for the test marked correctly?
  - ❑ Is the box indicating this is a five-panel test marked?
  - ❑ Is the collection site address indicating the location where the test was actually performed, and the site's telephone numbers completed accurately?
- **In Step 2:**
  - ❑ Is the Temperature between 90° and 100°F marked ('Yes' or 'No, Enter Remark')?
  - ❑ Is the "Split" collection box marked?
  - ❑ If it was an observed collection, is the "Observed" box marked? (This box should not be marked if an observed collection was not performed.)
  - ❑ Is there an appropriate comment included in the Remarks Section? The most common need for remarks include: Temperature Out of Range; Insufficient Volume; Adulteration; and Employee Refuses to Sign.
- **In Step 3:**
  - ❑ Even though there is no information provided in Step 3 of the form, look at the bottom of the CCF in the Step 7 portion of the Employer's copy for a faint shadow, imprint, or traces of carbon ink of a date or the employee's initials.
    - During the collection process, the collector dates, and the employee initials, the bottles seals **after** they have been affixed to the bottles. Carbon shadows in Step 7 indicate the date and/or initials were written on the bottle seals **before** they were affixed to the bottles. **This practice is unacceptable.**
- **In Step 4:**
  - ❑ Has the collector printed their name and signed?
  - ❑ Is the time and date correct? Make sure the appropriate AM or PM time is indicated. (If an alcohol test was also performed, compare the time on the ATF with the time on the CCF to make sure the alcohol test was completed first.)
  - ❑ Is the delivery service name clearly identified in the "Specimen Bottles Released To" box?
- **In Step 5:**
  - ❑ Are the employee's name, telephone number(s), and date of birth provided?
  - ❑ Is the date provided?
  - ❑ Did the employee sign the form? If not, is this documented in the Remarks Section of Step 2?

Alcohol Testing Form (ATF) Review Checklist

- Does the form read *"U.S. Department of Transportation (DOT) Alcohol Testing Form"* at the top?

- **In Step 1:**
  - ☐ Is the correct employee's name and ID number or SSN listed?
  - ☐ Is the correct employer name and address listed?
  - ☐ Is the DER name and phone number accurate?
  - ☐ Is the reason for the test marked correctly?

- **In Step 2:**
  - ☐ Did the employee sign and date the form?

- **In Step 3:**
  - ☐ Did the alcohol technician designate his/her title (BAT or STT), and indicate the type of device used?
  - ☐ Is the testing facility information listed accurately?
  - ☐ Did the alcohol technician sign and date the ATF?
  - ☐ If a confirmation test was performed, was the 15-minute waiting period observed (i.e. is the "Yes" box checked)?

    If a confirmation test was not performed, neither the "Yes" nor "No" box should be checked.
  - ☐ If a confirmation test result is 0.02 or greater, did the employee sign Step 4? If not, did the BAT make an appropriate comment in the remarks section.

- **EBT Printout:**
  - ☐ Are the printed results for a screening or confirmation test affixed to the ATF with tamper-evident tape, if not printed directly on the form?

    The results of a screening test below 0.02 may be hand-printed on the ATF in Step 3 if the screening device is not designed to print.

AFFIDAVIT OF CORRECTION

According to 49 CFR Part 40, as amended, **the collector of the drug test referenced below** must take all practicable action to correct errors on the Federal Drug Testing Custody and Control Form so that the test is not cancelled.

Transit System Name: _____ Date of Test: _____

Test Category: _____ Specimen ID#: _____

Donor Name: _____ Collector Name: _____

Date Collector Was Notified of Error: _____

This affidavit addresses the following errors that were not performed in accordance with 49 CFR Part 40, as amended:

Step 1 Requirements (§40.63) (check all that apply)

____A. Missing/Incorrect Employer Name, Address, Phone, and Fax
____B. Missing/Incorrect MRO Name, Address, Phone and Fax No.
____C. Missing Donor SSN or Employee I.D. No.
____D. Missing/Incorrect Testing Authority
____E. Missing/Incorrect Reason for Test
____F. Missing/Incorrect Drug Tests to be Performed
____G. Missing/Incorrect Collection Site Name, Address, Phone and Fax No.

Step 2 Requirements (§40.65-70) (check all that apply)

____Collector failed to indicate if the specimen was within the acceptable temperature range
____Collector failed to mark 'Split'
____Collector arbitrarily marked 'Observed'
____Collector failed to mark 'Observed'
____Missing explanation within 'Remarks' section. (i.e. any unusual circumstances that occur during collection)

Step 3 Requirements (§40.71) (check all that apply)

____Bottle seals were filled out while still affixed to the CCF

Step 4 Requirements (§40.73) (check all that apply)

____Missing collector's signature
____Missing collector's printed name (First, MI, Last)
____Missing/Incorrect Date of Collection
____Missing/Incorrect Time of Collection
____Missing Courier Name

Step 5 Requirements (§40.73) (check all that apply)

____Missing donor's signature
____Missing donor's printed name (First, MI, Last)
____Missing/Incorrect Date of Collection
____Missing donor's Daytime and/or Evening Phone No.
____Missing/Incorrect donor's Date of Birth

Collector Remarks:

1. Description of error: _____

2. Description of corrective action: _____

3. Measures taken to ensure the same error(s) do not reoccur: _____

By signing below, in accordance with 49 CFR Part 40.209, I certify that the aforementioned errors occurred on the referenced drug test and that appropriate measures have been taken to ensure the same errors will not reoccur.

_____ _____

Collector Signature / Title Date

DOT Alcohol Testing Form - Affidavit of Correction

According to 49 CFR Part 40, the alcohol technician of the alcohol test referenced below must take all practicable action to correct errors on the DOT Alcohol Testing Form.

Date of Test: _____ Alcohol Test #: _____

Donor Name: _____ Technician Name: _____

This affidavit addresses the following errors:

Use of DOT Alcohol Testing Form (§40.227):
_____Incorrect form used (i.e. Non-DOT testing form used)

Step 1 Requirements (§40.241) *Check all that apply:*
_____A. Missing/Incorrect Employee Name
_____B. Missing/Incorrect Donor SSN or Employee ID No.
_____C. Missing/Incorrect Employer Name, Address
_____C. Missing/Incorrect DER Name, Phone No.
_____D. Missing/Incorrect Reason for Test

Step 2 Requirements (§40.241)
_____Missing Date of Employee's Signature

Step 3 Requirements (§40.243-§40.251):
_____Missing Technician's title (BAT or STT)
_____Technician failed to indicate the type of device used
_____Technician failed to mark the 15-minute waiting period was observed (If confirmation test was performed)
_____Technician arbitrarily marked the 15-minute waiting period (no confirmation test was performed)
_____Missing Screening Test information (if device is not designed to print)
_____Missing appropriate comment in the Remarks (i.e. any unusual circumstances during the collection)
_____Missing/Incorrect Alcohol Technician's Company Name, Address
_____Missing/Incorrect Alcohol Technician's Printed Name (First, MI, Last)
_____Missing Alcohol Technician's Signature
_____Missing/Incorrect Date of Alcohol Technician's Signature

---

Technician Remarks (Description of error/corrective action): _____

_____

In accordance with 49 CFR Part 40.271, I certify that the information above is true and accurate.

_____ _____

Alcohol Technician Signature Date

UNEVENTFUL BREATH ALCOHOL TEST (result less than 0.02) - Did the Breath Alcohol Technician (BAT)...

- ☐ Require employee to provide positive photo identification (Part 40.241(c)).
- ☐ Perform the Alcohol test before the drug test, if applicable
- ☐ Explain testing procedures on back of Alcohol Testing Form (ATF) (40.241(e))
- ☐ Complete Step 1 of ATF (40.241(f))
  - – Employee Name, ID Number
  - – Employer Name and Contact information
  - – DER Name and Telephone Number
  - – Reason for Test
- ☐ Have the employee complete Step 2 of the ATF (40.241(g))
- ☐ Open individually sealed mouthpiece and attach to EBT (40.243(b))
- ☐ Instruct employee to blow forcefully until EBT indicates that an adequate amount of breath has been obtained (40.243(c))
- ☐ Show employee the result displayed on EBT (40.243(d))
- ☐ If EBT prints result on paper strip: Did the BAT affix the strip to the ATF using tamper evident tape (40.243(f))
- ☐ If EBT does not print results on paper strip: Did the BAT complete the following information on Step 3 of the ATF (40.243(g)):
  - – Identification of the machine
  - – Time
  - – Sequential Test Number
  - – Test Outcome
- ☐ Complete Step 3 of the ATF by dating and signing the certification (40.247(a))
- ☐ Distribute the ATF copies to appropriate individuals (40.247(a)):
  - – Copy 1 to Employer
  - – Copy 2 to Employee
  - – Retain Copy 3

After the Breath Alcohol Test is completed, review the following items:

- ☐ Was consent - giving the collection site or its personnel indemnification - required for testing? (40.355(a))
  - – Collection sites cannot require an employee to sign a consent, release, waiver of liability, or indemnification agreement with respect to any part of the alcohol or drug testing process covered by 49 CFR Part 40. No one may do so on behalf of a service agent.
- ☐ Is the EBT listed on the USDOT-ODAPC Website for "Approved Evidential Breath Measurement Devices"?https://www.transportation.gov/odapc/Approved-Evidential-Breath-Measurement-Devices
- ☐ Was the correct ATF used? (40.225(a))
  - The DOT ATF must be used for every DOT alcohol test. The ATF must be a three-part carbonless manifold form. The ATF is found in Appendix G of 49 CFR Part 40. You may view this form on the ODAPC website (www.transportation.gov/odapc)
- ☐ Were all necessary equipment, personnel, and materials for breath testing provided at the location where testing occurred? (40.221(d))
- ☐ Did the breath alcohol testing location afford visual and aural privacy to prevent unauthorized persons from seeing or hearing test results? (40.221(c))
- ☐ Did the BAT remain with the employee for the entire duration of the alcohol testing procedure? (40.223(e)(3))
- ☐ Does the BAT have a copy of the quality assurance plan (QAP) for the EBT? (40.233(c))
- ☐ Ask to see the external calibration checks for the EBT (40.233(c))
- ☐ Have the BATs completed the required training and acquired the proper credentials? (40.213(g))
- ☐ Ask to see the credentials of the BAT
- ☐ Does the BAT have a current copy of 49 CFR Part 40? (40.213)
- ☐ Is the BAT signed-up for the USDOT-ODAPC List-Serv?

UNEVENTFUL URINE COLLECTION - Did the Collector…

- ☐ Require employee to provide positive identification (Part 40.61(c)).
- ☐ Direct the employee to remove outer clothing (jacket, hat) and to leave these garments and other personal items (briefcase, purse, etc.) in a mutually agreeable location (Part 40.61(f)).
  - Advises employee that failure to comply constitutes a refusal to test.
  - Allows employee to keep wallet, if requested (40.61(f)(2)).
- ☐ Direct employee to empty pockets and display items in them (Part 40.61(f)(4)).
  - If no potential adulterants are found, allow employee to return items to pockets.
- ☐ Complete Step 1 of CCF (Part 40.63(a)).
  - Ensures that the name and address of the drug testing laboratory appears at the top of the CCF.
  - Ensures that the Specimen ID at the top of the CCF matches the Specimen ID on labels/seals.
  - Checks the Reason for Test box (Pre-Employment, Random, Post-Accident, etc.).

- Checks the FTA box (Testing Authority)
- Checks the Drug Tests to Be Performed box (THC, COC, PCP, OPI, AMP for DOT).

☐ Instruct employee to wash/dry hands and not to wash hands again until delivering specimen to collector (Part 40.63(b)).

☐ Ensure collection container is selected and unwrapped in presence of employee (Part 40.63(c)).

☐ Secure urination facility before the collection (If single-toilet room with a full-length privacy door) (Parts 40.41 & 43).
- Secures any water sources or make them unavailable to employees (e.g., turn off water inlet, tape handles to prevent opening faucets).
- Ensures that the water in the toilet bowl contains bluing agent.
- Ensures that soap, disinfectants, cleaning agents, or other possible adulterants are not present.
- Inspects the site to ensure that no foreign or unauthorized substances are present.
- Tapes or otherwise securely shuts any movable toilet tank or puts bluing agent in the tank.
- Ensures that undetected access (e.g., through a door not in your view) is not possible.
- Secures areas and items (e.g., ledges, trash receptacles, paper-towel holders, under-sink areas, drop-down ceiling panels) that appear suitable for concealing contaminants.

☐ Direct employee to go into room used for urination and instruct employee to:
- Provide at least 45 ml of urine.
- Not flush the toilet.
- Return specimen to the collector as soon as the void is complete.
- Set a reasonable time limit for voiding (Part 40.63(d)(2)).
- Allow only the employee into the room used for urination (40.41(d)(1)).

☐ Check that the specimen:
- Contains at least 45 ml of urine. If not, follow shy bladder procedure (Part 40.65(a)).
- Reads temperature strip within 4 minutes (Part 40.65(b)).

☐ Mark appropriate box in Step 2 of CCF (Yes = from 90 to 100 degrees).

☐ Check specimen for signs of tampering (Part 40.65).

☐ Check specimen for unusual color, foreign objects/material, or other signs of tampering (odor).

☐ Mark box in Step 2 of the CCF indicating a split specimen collection (Part 40.71(b)(1)).

☐ Pour at least 30 ml of urine into the primary specimen bottle (Part 40.71(b)(2)).

☐ Pour at least 15 ml of urine into the secondary specimen bottle (Part 40.71(b)(2)).

☐ Secure the lids or caps on the specimen bottles (Part 40.71(b)(4)).

☐ Place the tamper-evident seals on the specimen bottles (Part 40.71(b)(5)).
- Dates the specimen bottle seals (Part 40.71(b)(6)).
- Ensures that the employee initials specimen bottle seals (Part 40.71(b)(7)).

☐ Direct employee to read and sign certification statement on Copy 2, Step 5 of CCF and to provide date of birth, printed name, day and evening contact telephone numbers (Part 40.71(a)(1)).

☐ Print collector name in Copy 1, Step 4 of CCF; record the date and time of collection; sign statement; enter actual name of delivery service transferring the specimen to laboratory (Part 40.73(a)(2)).

☐ Ensure that all copies of the CCF are legible and complete (Part 40.73(a)(3)).

☐ Remove Copy 5 of the CCF and give it to the employee (Part 40.73(a)(4)).

☐ Place specimen bottles and Copy 1 of CCF in plastic bag and secure both pouches of plastic bag (Part 40.73(a)(5)-(a)(6)).

☐ Advise employee that he/she may leave the site (Part 40.73(a)(7)).

☐ Recheck the urination facility, performing all steps as was done prior to the collection to ensure the site's continued integrity.

After the Urine Collection is completed, review the following items:

☐ Was the correct CCF used?
- The Federal CCF must be used for all USDOT collections (40.45(a) www.transportation.gov/odapc)

☐ Ask to see the location where the urine specimens are maintained until they are picked-up by the courier. Is this location secure?

☐ Does the collector have ready access to the most recent version of the Urine Specimen Collection Guidelines published by USDOT-ODAPC?

☐ Does the collector have ready access to the most recent version of 49 CFR Part 40?

☐ Ask to see the training credentials for the collector to show they meet the requirements of 49 CFR Part 40.33

☐ Is the collector signed-up for the USDOT-ODAPC List-Serv?

Employee	Date/Time of Positive Result	Type of Violation	SAP Referral	Outcome	Transferred all documentation to this folder?	
		☐ Positive ☐ Refusal ☐ Other:		☐ Termination ☐ Counseling ☐ Other:	☐ Yes ☐ No ☐ Other:	Initial
		☐ Positive ☐ Refusal ☐ Other:		☐ Termination ☐ Counseling ☐ Other:	☐ Yes ☐ No ☐ Other:	Initial
		☐ Positive ☐ Refusal ☐ Other:		☐ Termination Counseling ☐ Other:	☐ Yes ☐ No ☐ Other:	Initial
		☐ Positive ☐ Refusal ☐ Other:		☐ Termination ☐ Counseling ☐ Other:	☐ Yes ☐ No ☐ Other:	Initial

Employee	Date/Time of Accident	Accident Result	Date/Time of Test	Date/Time of Test Result	Transferred all documentation to folder?	
		☐ Fatality ☐ Immediate Transport to Medical Facility ☐ Disabling Damage ☐ Other:			☐ Yes ☐ No ☐ Other:	Initial
		☐ Fatality ☐ Immediate Transport to Medical Facility ☐ Disabling Damage ☐ Other:			☐ Yes ☐ No ☐ Other:	Initial
		☐ Fatality ☐ Immediate Transport to Medical Facility ☐ Disabling Damage ☐ Other:			☐ Yes ☐ No ☐ Other:	Initial
		☐ Fatality ☐ Immediate Transport to Medical Facility ☐ Disabling Damage ☐ Other:			☐ Yes ☐ No ☐ Other:	Initial
		☐ Fatality ☐ Immediate Transport to Medical Facility ☐ Disabling Damage ☐ Other:			☐ Yes ☐ No ☐ Other:	Initial

Employee	**Testing Acknowledgement**	**Safety-Sensitive Application Supplement**	**Previous Employer Record Check**	**Policy Acknowledgement**	**Order for Test**	**Date/ Time of Test**	**Date/ Time of Result**	**Hire Date**	**Date Began Safety-Sensitive Functions**
	☐ Complete ☐ Pending:	☐ Complete ☐ Pending:	☐ Complete ☐ Pending:	☐ Complete ☐ Pending:	☐ Complete ☐ Pending:	☐ Complete ☐ Pending:	☐ Complete ☐ Pending:		
	☐ Complete ☐ Pending:	☐ Complete ☐ Pending:	☐ Complete ☐ Pending:	☐ Complete ☐ Pending:	☐ Complete ☐ Pending:	☐ Complete ☐ Pending:	☐ Complete ☐ Pending:		
	☐ Complete ☐ Pending:	☐ Complete ☐ Pending:	☐ Complete ☐ Pending:	☐ Complete ☐ Pending:	☐ Complete ☐ Pending:	☐ Complete ☐ Pending:	☐ Complete ☐ Pending:		
	☐ Complete ☐ Pending:	☐ Complete ☐ Pending:	☐ Complete ☐ Pending:	☐ Complete ☐ Pending:	☐ Complete ☐ Pending:	☐ Complete ☐ Pending:	☐ Complete ☐ Pending:		

Employee	Random Selection Sheet	Order For Test	Date/Time of Test	Test Day	Date/Time of Result	Transferred all documentation to folder?	
	☐ Yes ☐ No ☐ Other:			☐ Monday ☐ Tuesday ☐ Wednesday ☐ Thursday ☐ Friday ☐ Saturday ☐ Sunday		☐ Yes ☐ No ☐ Other:	Initial
	☐ Yes ☐ No ☐ Other:			☐ Monday ☐ Tuesday ☐ Wednesday ☐ Thursday ☐ Friday ☐ Saturday ☐ Sunday		☐ Yes ☐ No ☐ Other:	Initial
	☐ Yes ☐ No ☐ Other:			☐ Monday ☐ Tuesday ☐ Wednesday ☐ Thursday ☐ Friday ☐ Saturday ☐ Sunday		☐ Yes ☐ No ☐ Other:	Initial
	☐ Yes ☐ No ☐ Other:			☐ Monday ☐ Tuesday ☐ Wednesday ☐ Thursday ☐ Friday ☐ Saturday ☐ Sunday		☐ Yes ☐ No ☐ Other:	Initial
	☐ Yes ☐ No ☐ Other:			☐ Monday ☐ Tuesday ☐ Wednesday ☐ Thursday ☐ Friday ☐ Saturday ☐ Sunday		☐ Yes ☐ No ☐ Other:	Initial

Employee	Date/Time of Suspicion	Date/Time of Test	Date/Time of Test Result	Reasonable Suspicion Incident Check List?	Transferred all documentation to this folder?	
				☐ Yes ☐ No ☐ Other:	☐ Yes ☐ No ☐ Other:	Initial
				☐ Yes ☐ No ☐ Other:	☐ Yes ☐ No ☐ Other:	Initial
				☐ Yes ☐ No ☐ Other:	☐ Yes ☐ No ☐ Other:	Initial
				☐ Yes ☐ No ☐ Other:	☐ Yes ☐ No ☐ Other:	Initial
				☐ Yes ☐ No ☐ Other:	☐ Yes ☐ No ☐ Other:	Initial

Employee Name _____	Order For Test	Return to Duty Release	Follow-up Test Plan	Date/Time of Test	Consistent with SAP's Follow Up Plan?	Test Result & Date	Notes
Return to Duty Test		☐ Yes ☐ No	☐ Yes ☐ No		☐ Yes ☐ No		
Follow-up Test*		N/A	N/A		☐ Yes ☐ No		
Follow-up Test*		N/A	N/A		☐ Yes ☐ No		
Follow-up Test*		N/A	N/A		☐ Yes ☐ No		
Follow-up Test*		N/A	N/A		☐ Yes ☐ No		
Follow-up Test*		N/A	N/A		☐ Yes ☐ No		
Follow-up Test*		N/A	N/A		☐ Yes ☐ No		

* The SAP determines the number of Follow-up tests (minimum of 6 tests in the first 12 months). This information will be included in the Follow-up testing plan.

Site Name	Date of Interview	Compliant?	Follow up for non-compliant area(s)	Date of error(s) correction	Comments	Initials
		☐ Yes ☐ No	☐ Yes ☐ No ☐ N/A			
		☐ Yes ☐ No	☐ Yes ☐ No ☐ N/A			
		☐ Yes ☐ No	☐ Yes ☐ No ☐ N/A			
		☐ Yes ☐ No	☐ Yes ☐ No ☐ N/A			
		☐ Yes ☐ No	☐ Yes ☐ No ☐ N/A			

Designated Employer Representative (DER) Contact Report
Private and Confidential

Donor Name: _____ ID Number: _____

Donor Contact Phone Number(s) from CCF: _____

MRO Name: _____ Contact Number: _____

Date of MRO Notification: _____ Time of MRO Notification: _____

DER Contact Attempts:

Date	Time	Phone Number	Outcome

49 CFR PART 40.131(d) As the DER, you must attempt to contact the employee immediately, using procedures that protect, as much as possible, the confidentiality of the MRO's request that the employee contact the MRO. If you successfully contact the employee (i.e., actually talk to the employee), you must document the date and time of the contact and inform the MRO. You must inform the employee that he or she should contact the MRO immediately. You must also inform the employee of the consequences of failing to contact the MRO within the next 72 hours (see §40.133(a)(2)).

(1) As the DER, you must not inform anyone else working for the employer that you are seeking to contact the employee on behalf of the MRO.

(2) If, as the DER, you have made all reasonable efforts to contact the employee but failed to do so, you may place the employee on temporary medically unqualified status or medical leave. Reasonable efforts include, as a minimum, three attempts, spaced reasonably over a 24-hour period, to reach the employee at the day and evening telephone numbers listed on the CCF. (Emphasis added)

(i) As the DER, you must document the dates and times of these efforts.

(ii) If, as the DER, you are unable to contact the employee within this 24-hour period, you must leave a message for the employee by any practicable means (e.g., voice mail, e-mail, letter) to contact the MRO and inform the MRO of the date and time of this attempted contact.

Release of Information Form – 49 CFR Part 40 Drug and Alcohol Testing

Section I. To be completed by the new employer, signed by the employee, and transmitted to the previous employer:

Employee Printed or Typed Name: _____

Employee SS or ID Number: _____

I hereby authorize the release of information from my Department of Transportation regulated drug and alcohol testing records by my previous employer, listed in *Section I-B*, to the employer listed in *Section I-A*. This release is in accordance with DOT Regulation 49 CFR Part 40, Section 40.25. I understand that information to be released in *Section II-A* by my previous employer, is limited to the following DOT-regulated testing items:

1. Alcohol tests with a result of 0.04 or higher;
2. Verified positive drug tests;
3. Refusals to be tested;
4. Other violations of DOT agency drug and alcohol testing regulations;
5. Information obtained from previous employers of a drug and alcohol rule violation;
6. Documentation, if any, of completion of the return-to-duty process following a rule violation.

Employee Signature: _____ Date: _____

I-A.
New Employer Name: _____

Address: _____

_____

Phone #: _____ Fax #: _____

Designated Employer Representative: _____

I-A.
Previous Employer Name: _____

Address: _____

_____

Phone #: _____ Fax #: _____

Designated Employer Representative (if known): _____

Section II. To be completed by the previous employer and transmitted by mail or fax to the new employer:

II-A. In the two years prior to the date of the employee's signature (in Section I), for DOT-regulated testing:

1. Did the employee have alcohol tests with a result of 0.04 or higher? **YES ___ NO ___**
2. Did the employee have verified positive drug tests? **YES ___ NO ___**
3. Did the employee refuse to be tested? **YES ___ NO ___**
4. Did the employee have other violations of DOT agency drug and alcohol testing regulations? **YES ___ NO ___**
5. Did a previous employer report a drug and alcohol rule violation to you? **YES ___ NO ___**
6. If you answered "yes" to any of the above items, did the employee complete the return-to-duty process? **N/A ___ YES ___ NO ___**

NOTE: If you answered "yes" to item 5, you must provide the previous employer's report. If you answered "yes" to item 6, you must also transmit the appropriate return-to-duty documentation (e.g., SAP report(s), follow-up testing record).

II-B.
Name of person providing information in Section II-A: _____

Title: _____

Phone #: _____

Date: _____

Release of Information Form – 49 CFR Part 40 Drug and Alcohol Testing

<u>Section I</u>. To be completed by the new employer, signed by the employee, and transmitted to the previous employer:

Employee Printed or Typed Name: _____

Employee SS or ID Number: _____

I hereby authorize release of information from my Department of Transportation regulated drug and alcohol testing records by my previous employer, listed in *Section I-B*, to the employer listed in *Section I-A*. This release is in accordance with DOT Regulation 49 CFR Part 40, Section 40.25. I understand that information to be released in *Section II-A* by my previous employer, is limited to the following DOT-regulated testing items:

1. Alcohol tests with a result of 0.04 or higher;
2. Verified positive drug tests;
3. Refusals to be tested;
4. Other violations of DOT agency drug and alcohol testing regulations;
5. Information obtained from previous employers of a drug and alcohol rule violation;
6. Documentation, if any, of completion of the return-to-duty process following a rule violation.

Employee Signature: _____ Date: _____

I-A.
New Employer Name: _____

Address: _____

_____

Phone #: _____ Fax #: _____

Designated Employer Representative: _____

I-A.
Previous Employer Name: _____

Address: _____

_____

Phone #: _____ Fax #: _____

Designated Employer Representative (if known): _____

<u>Section II</u>. To be completed by the previous employer and transmitted by mail or fax to the new employer:

II-A. In the two years prior to the date of the employee's signature (in Section I), for DOT-regulated testing:

1. Did the employee have alcohol tests with a result of 0.04 or higher? **YES ___NO ___**
2. Did the employee have verified positive drug tests? **YES ___NO ___**
3. Did the employee refuse to be tested? **YES ___NO ___**
4. Did the employee have other violations of DOT agency drug and alcohol testing regulations? **YES ___NO ___**
5. Did a previous employer report a drug and alcohol rule violation to you? **YES ___NO ___**
6. If you answered "yes" to any of the above items, did the employee complete the return-to-duty process? **N/A ___YES ___NO ___**

NOTE: If you answered "yes" to item 5, you must provide the previous employer's report. If you answered "yes" to item 6, you must also transmit the appropriate return-to-duty documentation (e.g., SAP report(s), follow-up testing record).

II-B.
Name of person providing information in Section II-A: _____

Title: _____

Phone #: _____

Date: _____

Rapides Area Planning Commission
Rural Public Transit Pilot

Transportation Program Travel Expense Form

Travel Expense for Transportation Program

Dates of Travel
Agency Name
Employee Name

Date	Travel Time		Description	Mileage	Hotel	Meals			* Travel	Training Cost /
	AM	PM			Expenses	Breakfast	Lunch	Dinner	Airfare/Car Rental	Registration
			Sub Totals	0						
			Mileage is calculated at $0.58 per mile	$ -	$ -	$ -	$ -	$ -	$ -	$ -

TOTAL TRAVEL EXPENSES **$** -

Employee Signature _____

Supervisor Signature _____

Dates of Travel	Should show the start date and end date of the travel.
Employee Name	The person who traveled and incurred the expenses.
Date	Expenses should be entered each day of travel and match the dates of travel entered at top of page.
Travel time	Record the begin time on the first day of travel and end time on the last day of travel.
Description	Where did travel begin and end, what was the purpose of travel.
Mileage	Total miles driven in personal vehicle. Maximum allowed is 99 total miles. Include map from start of trip to destination.
Hotel expenses	The total of nightly room with taxes. If parking is included in hotel bill, then parking is eligible. Do not include items on the hotel receipt for room service, or other incidental charges.
Meals	The cost of each meal should be entered. The cost is based on the schedule in the state travel regulations for the geographic area. If a meal is provided by the training, it is NOT eligible for reimbursement. For same day travel, meals are not eligible.
Meals	Overnight Travel must begin before 6am to include breakfast, before 10am to include lunch, and before 4pm to include dinner.
Meals	Overnight Travel must extend beyond 9am to include breakfast, beyond 2pm to include lunch, and beyond 8pm to include dinner.
***Travel**	Cost of airfare, including baggage fees. Rental car requires prior approval by DOTD
Training costs	Any costs incurred to pay for training or a conference registration.

Appendix A

Policy Authorization

RAPIDES AREA PLANNING COMMISSION
BOARD OF COMMISSIONERS

RESOLUTION #RAPC-240123-01

(Adopting RAPC Rural Public Transit Pilot Program Policy Manual)

I, Craig Smith, Chairman of the Rapides Area Planning Commission Board of Directors, do hereby certify that at a meeting of the RAPC Board of Commissioners duly convened in Alexandria, Louisiana, at 3:00pm on January 23, 2024, the following Resolution was adopted:

WHEREAS, policies may be adopted and amended at the discretion of the RAPC Board of Directors and are subject and subordinate to applicable federal and state laws, rules, and regulations; and

WHEREAS, the purpose of the manual is to provide for guidance regarding the fair and consistent administration of RAPC personnel, but neither any contract nor implied contract rights are created hereby; and

WHEREAS, the Executive Director, Legal Counsel, and Human Resources Department have reviewed the Policies; and

WHEREAS, the RAPC Board of Commissioners deems it the best interest of the employees of the Rural Public Transit Pilot to formally adopt the Policy Manual.

NOW, THEREFORE, BE IT RESOLVED by the RAPC Board of Directors, as follows:

1. ADOPTION: The RPTP Policy Manual is hereby adopted and all previous versions of the RPTP Policy Manual are superseded.

2. EFFECTIVE DATE: This Resolution shall take effect February 1, 2024.

Signed and executed this 23rd day of January 2024.

ATTEST: Matt Johns
Title: CEO

Name: Craig Smith
Title: Chairman