

ROUTE ASSESSMENT CHECKLIST

School Authority: _____ **Date:** _____

Route being assessed: _____ **School Year:** _____

This assessment was developed in response to a recommendation from the Premier's 2008 Report on School Bus Safety and is intended to provide a standardized method for the evaluation of school bus route risks. School jurisdictions are responsible for reviewing the identified risks and resolving them where possible in accordance with local best practices and policies. This checklist provides route planners, student transportation management and spare bus operators with additional information on any risks associated with this route.

Assessment conducted by: (check all that apply)

Bus Operator: _____
(Name)

Transportation Staff: _____
(Name)

Other: _____
(Name)

Summarize findings (attach any additional field notes, photos etc):

Reviewed by:

(To be reviewed by School Authority Transportation Manager or designate)

Name: _____

Position: _____

Date: _____

ROUTE ASSESSMENT CHECKLIST

1. Are there poor sight lines or visibility problems on this route or at any stop locations? **Yes** **No**
(e.g. stops located on hills or curves, physical barriers such as trees or buildings, areas with frequent fog)
If yes, provide a location, explanation of risk, and comments.

2. Are there any primary or secondary highway stops of concern on this route? **Yes** **No**
(e.g. high traffic volume, poor visibility, frequent red light infractions)
If yes, provide a location, explanation of risk and comments.

3. Are there any drop off or pick up locations including school sites that have insufficient space for the safe loading and unloading of passengers? (e.g. crowded stops, inadequate signage) **Yes** **No**
If yes, provide a location, explanation of risk and comments.

4. Are there any turnarounds that are a concern or unsafe as defined in the S Endorsement manual? **Yes** **No**
(e.g. poor visibility for oncoming traffic, obstacles, driveway width and grade, winter snow removal)
If yes, provide a location, explanation of risk and comments.

5. Are there any roadway crossings such as controlled or uncontrolled intersections, merge lanes, railroad/commuter train crossings that are a concern on this route? (e.g. high traffic volume, difficult left hand turns, hidden intersections, inadequate signage, poor visibility at rail crossings) **Yes** **No**
If yes, provide a location, explanation of risk, and comments.

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6. Are there any roadways on this route where the road structure, width or height is inadequate for the safe passage of the bus? (e.g. uneven road surface, road heaves, narrow roads, sharp shoulders) **Yes** **No**
If yes, provide a location, explanation of risk, and comments.

7. Are there any non-weather related variable risks on this route? (e.g. frequent wildlife on the road, long term construction projects) **Yes** **No**
If yes, provide a location, explanation of risk, and comments.

8. Are there any weather related variable risks on this route? (e.g. fog, drifting snow, icy patches) **Yes** **No**
If yes, provide a location, explanation of risk, and comments.

9. Does your school authority have an inclement weather / bus cancellation policy? **Yes** **No**
Are you familiar with it? **Yes** **No**
Does it allow bus operators to make route adjustments to address any weather related safety issues while on route? **Yes** **No**
Provide additional comments below.

10. Do you have any other safety concerns regarding this route? **Yes** **No**
If yes, provide additional comments below.
