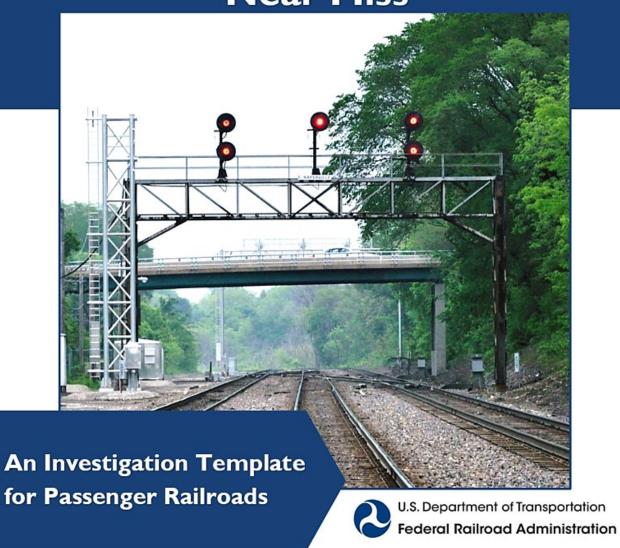
# Stop Signal Overrun (SSO) & Near Miss



### PREPARED BY



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ABSTRACT: This stop signal overrun (SSO) and near miss investigation template represents a tool to identify contributing factors for SSO events and events which would have resulted in a SSO if not for positive train control intervention. As the SSO database grows, railroads can use the aggregate data to analyze how contributing factors change over time and as a way to understand the efficacy of particular mitigation efforts. This template serves to provide railroads with a starting point for the types of data to collect to understand why stop signal overrun events occur.

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#### PURPOSE OF THIS TEMPLATE

This template represents a tool to identify contributing factors for stop signal overrun (SSO) events and those that would have resulted in a SSO if not for Positive Train Control intervention.<sup>1</sup> As the SSO database grows, railroads can use the aggregate data to analyze how contributing factors change over time and as a way to understand the efficacy of particular mitigation efforts.

#### HOW TO USE THIS TEMPLATE

- The template is comprised of separate sections to be completed by:
  - Relevant departments within the railroad
  - Individuals involved in the event (e.g., train crew, dispatcher)
  - The person(s) overseeing the investigation (e.g., principle investigator)
- For each investigation:
  - Sections A, E, F, G, and I should be completed by the principle investigator, with the input of train crew members where applicable.
  - o Sections B, C, and D should be completed by the relevant departments.
  - Section H should be completed by each employee with knowledge of the incident (e.g., train crew, dispatcher).
- The assumption is that the investigation will be coordinated by one department (e.g., the safety department), and this department will be responsible for compiling, storing, and maintaining the investigation forms so that they are centrally located.
- For the investigation template to be most useful, data from each incident should be entered into a database.
- Since SSO events are rare events, data from multiple events should be analyzed over time to understand the multiple interacting factors that contribute to SSO events and how they change over time.

#### LONGER TERM VISION

This template serves to provide railroads with a starting point for the types of data to collect to understand why stop signal overrun events occur. We hope that the investigation process will change from a paper-based data entry process to computer-based data entry process that will

<sup>&</sup>lt;sup>1</sup> This template coincides with the Federal Railroad Administration's "<u>Preventing Stop Signal Overruns: Good Practices for Passenger Railroads</u>" lessons learned document.

simplify and streamline the data acquisition process. This will reduce the potential for making data entry errors, reduce the time it takes to collect the data, make it easier to share the data within the organization, and facilitate analysis that will enable railroads to identify important trends over time.

Incident	Number:			

## A: Stop Signal Overrun Cover Page

Incident date:/		
Incident time:::		
Railroad(s) involved number(s) <sup>2</sup>	Train(s) / equipment involved	Incident
1		
2		
3		
Railroad responsible for track maint	enance:	
	Location	
City and state:	Milepost:	
County:	Signal number:	
Division:	Nearest interlocking:	
Location type:	Nearest station:	
<ul><li>Main</li><li>Siding</li><li>Passenger Station</li><li>Crossing</li></ul>	US DOT/AAR Crossing ID:	
☐ Yard		
☐ Industry		
Terminal		
☐ Other		
Track number/name:		

<sup>&</sup>lt;sup>2</sup> If multiple railroads are involved (such as in a stop signal overrun event followed by an accident), they may each have a separate incident number. There may also be multiple train/equipment numbers.

Investigation Information Railroad performing investigation:
Investigator name and title:
Investigator phone number:
Investigator signature:

Date of investigation:

Incident Number: \_\_\_\_\_

Incident Number:	
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## B: Track Information and Environment

Track Information	
Maximum allowable speed:	
Annual track density:	Environment Weather (check all applicable)
FRA track class:    Excepted	□ Bright sun □ Clear □ Overcast □ Fog □ Haze/Smoke □ Wind/Rain □ Thunderstorm/Lightning □ Snow □ Hail □ Ice □ Other: Light Conditions
☐ Straight ☐ Curved  Track grade:	<ul><li>□ Dawn</li><li>□ Daylight</li><li>□ Dusk</li><li>□ Night</li></ul>
<ul><li>□ Ascending</li><li>□ Descending</li><li>□ Level</li></ul>	Was visibility reduced?  Yes  No
Were track conditions (e.g. rail adhesion) compromised by factors such as wet leaves, ice, etc.?	If yes, car lengths visible:
☐ Yes ☐ No	
If yes, please specify conditions:	

Incident N	lumber:	

# C: Operation Information

Train Information	Other Equipment Involved
Railroad:	Please describe any other equipment
Train number:	below:
Power type:	
□ Locomotive □ Cab control car □ EMU (Electric Multiple Unit)	
Distributed power:	<del></del>
☐ Yes ☐ No	Schedule Information  Departure time: : am /
Remotely controlled:	pm
☐ Yes ☐ No	Origin:
Total train length:	Destination:
Total train weight:	
Number of locomotives:	At the time of the incident, the train or job was:
Head end locomotives:	More than 5 minutes ahead of schedule
Helper locomotives:	☐ On time or within 5 minutes of
Number of cars in consist:	schedule  5–10 minutes behind schedule  10–15 minutes behind schedule
Loaded cars:	☐ More than 15 minutes behind
Unloaded cars:	schedule  Other
Number of cabooses:	
	Reason for delay (if applicable):

Operation Type	Operating Rules
Type of operation (check all applicable):	Rules in effect:
<ul><li>□ Freight</li><li>□ Passenger / Commuter</li><li>□ Yard Assignment</li><li>□ Maintenance</li></ul>	☐ GCOR ☐ NORAC ☐ Other:
Other:	Was the crew operating on a foreign
Movement type:	railroad (i.e. train not owned by the host railroad)?
Shoving Pulling Push/pull Other:	Yes No Rules in effect/method of operation
	(check all applicable):
Activity:  Departure Enroute Arrival Switching in yard Other: Direction of travel:  North South East West Not applicable  Actual (recorded) speed:	<ul> <li>□ Main block</li> <li>□ Timetable</li> <li>□ Radio</li> <li>□ Verbal permission</li> <li>□ Train order</li> <li>□ Centralized traffic control</li> <li>□ Interlocking</li> <li>□ Track warrant control</li> <li>□ Direct traffic control</li> <li>□ Yard limits</li> <li>□ Other than main track rules</li> <li>□ Positive train control</li> <li>□ Automatic train control</li> <li>□ Automatic block signal</li> <li>□ Automatic cab signal</li> <li>□ Automatic train stop</li> </ul>
Estimated speed (if actual speed unknown):	None/dark Other:
Was the equipment unattended at the time of the incident?	Did the train start from a stationary position?
☐ Yes ☐ No	☐ Yes ☐ No
	Was section (block) ahead occupied?
	☐ Yes

	No
--	----

# D: Signal and Train Control

Signal Type and Placement Signal Type:	If yes, specify other signal and explain:
<ul><li>□ Position</li><li>□ Colored</li><li>□ Semaphore</li><li>□ Other:</li></ul>	Have prior overruns happened at this signal?
Lighting Type:	☐ Yes ☐ No
☐ Incandescent ☐ LED ☐ Other:	If yes, give incident numbers or dates:
Are there markers to indicate stop locations?	Signal Visibility and Maintenance What is the furthest distance from which
☐ Yes ☐ No ☐ N/A	the signal could be seen by a crew?
Is the signal in a non-standard position?	
☐ Yes ☐ No	Was signal visibility impaired?
If yes, describe how it is non-standard:	☐ Yes ☐ No
	What factors limited signal visibility, if any?
Are there other signals in close proximity (e.g., that might have resulted in a 'read through') or confusion as to which was the controlling signal)?   Yes  No	<ul> <li>□ Weather (e.g. rain, snow, fog)</li> <li>□ Lighting (dawn, dusk, or nighttime)</li> <li>□ Glare – sunlight</li> <li>□ Glare – train headlights</li> <li>□ Track curvature</li> <li>□ Obstruction – structure</li> <li>□ Obstruction – vegetation</li> <li>□ Obstruction – other crewmember</li> </ul>

	Obstruction – locomotive design	Reason for Stop Signal
	Other:	Why was the signal displaying a stop
Were t	there any maintenance issues with	indication?
the sig	nal?	Protecting a switch
☐ Bulb burned out — signal improperly displayed	Meet or pass with another train	
	Equipment in the block ahead	
	Bulb burned out – signal entirely	Obstruction or broken rail detected
dark	Protected work zone	
	Signal post down	Signal malfunction or circuit failure
	Signal obstructed by dirt / snow	None—stop signal was unnecessary
	Signal malfunction	Other:
	Other:	

Preceding Si	ignals and Unsignaled Stops	
Preceding si	ignal Identifier(s): Milepost/control point(s):	Signal aspect(s):
Distance bet	tween immediate preceding signal and the sig	gnal that was overrun:
	n make an unsignaled stop or unscheduled sto he signal that was overrun?	op between the immediately preceding
	signaled stop scheduled stop	
	e give the reason for the stop (e.g. "unsignale ssenger incident").	d station stop" or "unscheduled stop
which may h	have contributed to the stop signal overrun:	
Were any of	Locomotive Technolo f the following technologies present in the loc	
☐ Cab :☐ Posit☐ Ener		
•	s were present: gnals operating at the time of the SSO?	
☐ Yes	□ No	
If they were	not operating, why were they not operating?	?
<ul><li>□ Manuall</li><li>□ Malfunc</li><li>□ Other:</li></ul>	y cut out tioning	

What was cab signal in preceding block, if appl	licable?
If PTC was present:  Type of PTC system:	If yes, when did automatic braking activate?
Was it operating at the time of the SSO?	
☐ Yes ☐ No	
If it was not operating, why was it not operating?	
<ul> <li>Outside of PTC territory</li> <li>Manually cut out</li> <li>Malfunctioning</li> <li>Other:</li> </ul>	
If it was operating—What state/mode was the system in?	
Did the system provide any alerts or indications to the crew?	
☐ Yes ☐ No	
If yes, please describe any indications or alerts:	
Did automatic braking activate?	
☐ Yes ☐ No	

If energy management was present:  Type of energy management:	Did the system provide any alerts or indications to the crew?
	☐ Yes ☐ No
Was it operating at the time of the SSO?  ☐ Yes ☐ No	If yes, please describe any indications or alerts:
If it was not operating, why was it not operating?	
<ul> <li>Manually cut out</li> <li>Malfunctioning</li> <li>Other:</li> </ul> If it was operating—What state/mode was the system in?	Describe any other relevant information about the role of energy management in the stop signal overrun.

Incident Number:	
Incident Number:	

## E: Train Crew Overview

This section provides an overview of the train crew's experience during the incident. Sections E, F, and G contain questions that pertain to the experience of individual employees.

## **Crew Composition**

Please fill in <u>the number</u> of crew members in the table below:

	Regular crew members:	Extra board crew mem	ibers:
Locomotive Engineers			
Conductors			
Assistant conductors			
(Rear brakemen)			
Ticket takers			
How long has this crew been wo	orking together, if applicable?		
Which individuals were in the ca	ab at the time of the stop signal	overrun?	
☐ Engineer			
☐ Conductor			
Cirici (specify job title).			
Total number of employees in the	ne cab:		
Crew Response to Stop Signal			
When did the crew first recognize	ze the stop signal?		
_			
☐ Before passing the signa			
After passing the stop sig	gnal		
Unknown			
☐ Other			
Did the crew attempt to brake b	pefore passing the stop signal?	☐ Yes	☐ No
If yes, at what distance from the	e stop signal was braking initiate	d?ft.	
How much time elapsed between mins	en the brakes being applied and	passing the stop signal?	
How far past the stop signal did	the train go before stopping?	ft.	
Did the train pass the point of d	anger (e.g. switch, broken rail)?	Yes	☐ No
If no, how close did the train cor	me to the point of danger, if app	licable?ft.	
Did the train strike another train	n or piece of equipment before s	topping? 🗆 Yes 🖵 No	

If no, how close did	the train come to oth	ner equipment, if applic	cable?ft.	
Who initiated commoverrun took place?		he dispatcher and the t	rain crew that a	stop signal
lacksquare The dispatch	lled the dispatcher ner notified the crew			
Which crewmembe	rs were calling out sig	gnals?		
☐ Neither	•			
Which crewmembe applicable)	r(s) correctly identifie	ed the stop signal prior	to passing it? (ch	eck all
<ul><li>□ Engineer</li><li>□ Conductor</li><li>□ Other</li></ul>				
Was there any misc	ommunication or cor	ıfusion between crewm	nembers?	
☐ Yes	☐ No			
If yes, please descri	be the miscommunic	ation or source of confu	usion:	
•	rong signal (e.g., read the controlling signal	d through to the followi	ing signal, or beli	eve that an
☐ Yes	☐ No			
If yes, please explai	n which signals the cr	ew misread:		
For the previous sig response.	nal(s), please indicate	e whether the crew adj	usted speed corr	ectly in
Signal identifier:	Signal aspect:	Crew correctly adju	sted speed?	
			□No	
		☐ Yes	□No	

		☐ Yes	□No
	tion / Task Demands ny factors inside or outside the cab draw the	e crew's attent	ion away from the signal?
	Factors outside cab Personal factors (e.g. mind wandering to i	nternal though	nts)
=	to inside cab, indicate which factors inside t gnal, if any?	the cab drew th	ne crew's attention away from
	overheard?) Cab signal Cab displays Equipment malfunction Visual alerts/warnings Audio alerts/warnings Reviewing paperwork Work-related conversation Non-work-related conversation Cell phone/PED use		her, train-to-train, or
checke	e elaborate on any factors checked above. Fed, describe the malfunction that occurred, the the nature of the communication and w	or if "radio co	mmunication" is checked,
=	to outside cab, indicate which factors outsion the signal, if any?	de the cab drev	w the crew's attention away
	Wayside hazard (e.g. trespasser, wildlife, of Other train or equipment Other signal (e.g. next signal after the stop	•	)

	elaborate on any factors checked above. For example, if "wayside hazard" is checked, be the hazard.
If yes to	o personal factors, please elaborate:
Expect Was th	rations e crew anticipating a permissive signal?
	Yes No
If yes, v	why did the crew anticipate a permissive signal? (check all applicable)
_ _	Did not see or respond to prior restricting signal Prior signal was not restricting Permissive signals are typical at this location Dispatcher did not communicate an unusual condition (e.g., a stop signal at a location where there is normally a permissive signal) Other
Was th	e crew anticipating a different route?
	Yes No
If yes, v	why did the crew anticipate a different route? (check all applicable)
	Current route is different than usual routing Dispatcher did not communicate different-than-usual routing Other

Incident	Number:	

# F: Crew Member Information (one copy per employee)

Name:	3 -			
Age:				
Gender:				
Occupation/Job title:				
Employee number:				
Experience and Current Assi	gnment			
Time in current craft:	years	months	weeks	
Time at this railroad:	years	months	weeks	
Seniority date:				
Date of last rules class:				
Job assignment:				
<ul><li>Regular job</li><li>Pool board</li><li>Extra board</li><li>Time in current assignment: _</li></ul>	years	mont	hsweeks	
Date most recently qualified o	on this territory:		<del></del>	
When was the last time this e	mployee was rou	ited by this sign	nal?	
Was the employee ever tested ☐ No	d on the signal th	at was overrun	during an exam?	☐ Yes
If yes, did it take them multipl ☐ No	e attempts to co	rrectly identify	the aspect on the exam?	☐ Yes
How much experience did the	crew have oper	ating this partic	ular type of locomotive?	
years/months/wee	eks/days (circle o	one)		
How frequently did the emplo route) prior to the incident?	yee work on this	s particular port	ion of track (e.g., this yard	l, this
☐ First time working this☐ Rarely (did not work th☐ Infrequently (less than	nis track for over	6 months)		

<sup>&</sup>lt;sup>3</sup> For railroad use only; black out this field to de-identify reports if shared externally.

☐ Hearing impairment
Did the employee have any known medical conditions that would impair his or her ability to perform this job?
Fitness for Duty <sup>4</sup> Date of last medical exam:
Summarize the employee's sleep and work schedule over the past 72 hours prior to the accident:
Most recent turn time duration (if applicable):
Total time on duty at the time of the SSO:hoursminutes
Time off prior to shift:dayshours
Day of work cycle: of
Job assignment type (49 CFR Part 228.5): ☐ Type 1 ☐ Type 2
Schedule and Rest  Shift start time on the date of the incident: AM/PM
·
If yes, explain. Give dates or other incident identifiers.
Has this individual had other prior rule violations?
If yes, explain. Give dates or other incident identifiers.
Stop Signal Overrun and Rule Violation History  Has this individual had any prior stop signal overruns? ☐ Yes ☐ No
<ul><li>Consistently (once per week or more)</li><li>Always (all or most shifts)</li></ul>

<sup>&</sup>lt;sup>4</sup> Railroads may wish to attach separate documentation of drug/alcohol test results, medical records, etc.

☐ Color deficit
Other visual impairment
☐ Sleep apnea
Other sleep disorder
□ Other:
Was the employee using any prescription or over-the-counter medications that could affect their job performance?
☐ Yes ☐ No
Was there evidence of drug or alcohol impairment at the time of the incident?
☐ Yes ☐ No
If you have a taken of the allower who are allowered
If yes to either of the above, please elaborate.
if yes to either of the above, please elaborate.
Actions related to the SSO
Actions related to the SSO
Actions related to the SSO Could the crewmember see the signal from their location?
Actions related to the SSO Could the crewmember see the signal from their location?  Yes No

Incident	Number:	

# G: Dispatcher Information (one copy per employee)

Basic Information				
Name:5				
Age:				
Gender:				
Experience and Current Assign Occupation/job title:				
Employee number:				
Job assignment:				
<ul><li>☐ Regular</li><li>☐ Extra board</li></ul>				
Desk(s) dispatcher normally cov	vers:			
Desk(s) dispatcher was covering	g at the time of the	he passed sto	p signal:	
How long have they been qualif	ied on this desk	(s):		
Length of time working at this d	lesk:	years	months	weeks
Length of time working in this c	raft:	years	months	weeks
Length of time working at this ra	ailroad:	years	months	weeks
Schedule and Rest Time employee came on duty: _	:			
Time off prior to coming on dut	y: days,	hours		
Summarize the employee's slee accident:	p and work sche	dule over the	past 72 hours pr	ior to the
accident.				
Routing and Communications	with Crews			

 $<sup>^{\</sup>rm 5}$  For railroad use only; black out this field to de-identify reports if shared externally.

<ul> <li>□ Different route than usual</li> <li>□ Maintenance issue (e.g. dark signal)</li> <li>□ Meet or pass at different time or location</li> <li>□ Other:</li> </ul>
If yes, did the dispatcher contact the train crew ahead of time to let them know of the unusual conditions?
□ Yes □ No
Did the last train that passed the signal note any abnormalities related to the signal or route?
☐ Yes ☐ No
If yes, please describe:
How long did it take from the time the passed stop signal occurred to the time the dispatcher became aware that a passed stop signal occurred?
How did the dispatcher first become aware that the stop signal was passed?
<ul> <li>Contacted by train crew that passed stop signal</li> <li>Contacted by some else:</li> <li>Audio/visual alert or indicator on dispatch computer system</li> <li>Overheard radio communication</li> </ul>
What actions did the dispatcher take upon becoming aware of the passed stop signal?
Technology Factors  Did the dispatcher's computer system display an indication of the passed stop signal?
<ul><li>□ Visual</li><li>□ Audio</li><li>□ Both</li><li>□ Neither (no indication)</li></ul>
If so, did the dispatcher detect the audio or visual indication of the passed stop signal on the computer system display?
<ul><li>☐ Yes, immediately</li><li>☐ Yes, but delayed</li><li>☐ No</li></ul>

Did the dispatcher correctly interpret the visual/auditory indication?
<ul><li>☐ Yes, immediately</li><li>☐ Yes, but delayed</li><li>☐ No</li></ul>
Were there any anomalous, erroneous or misleading indications on the dispatcher computer system at the time that the train passed the stop signal?
Was there visual or auditory indication that a passed stop signal occurred on anyone else's computer system (e.g., computer system of supervisor or manager)?

H: Employee Narratives ( <i>one copy per</i>	employee)
To be filled out by crewmembers, dispo	atcher, and any others with knowledge of the incident.
Basic Information Name:	Date recorded:
Employee Number:	::
Occupation/Job Title:	<del></del>
Narrative Please describe, from your own perspo (use the backside of this sheet or addi	ective, the events leading up to the stop signal overrun tional sheets if needed.)
How did you identify or learn about th	ne stop signal overrun?
What actions (if any) did you take afte	er becoming aware of the stop signal overrun?
•	nat you believe contributed in any way to the stop signal nental factors, characteristics of the territory, technology rs, etc.)
Please describe any suggestions for ho	ow to address the factors you listed above to prevent

Incident Number: \_\_\_\_\_

Incident	Number:	

# I: Incident Severity<sup>6</sup>

Was the incident reported to FRA?				
☐ Ye	□ No			
Select inci	Select incident type (check all that apply):			
<ul> <li>□ Stop signal overrun</li> <li>□ Repeat stop signal overrun at signal</li> <li>□ Near miss—PTC enforcement prevented stop signal overrun</li> </ul>				
Was there an obstruction on the tracks?				
☐ Ye	□ No			
If yes, spe	ify what the obstruction was:			
Did the cr	Did the crew pass the point of danger (e.g. ran through switch or hit obstruction)?			
☐ Yes ☐ No				
Distance p	est signal:ft.			
Distance from point of danger:ft.				
Select any accidents that occurred as a result of the stop signal overrun, if applicable:				
☐ He Re ☐ Sid	ailment id on collision r end collision e collision ing collision ken train collision er (please describe)			

<sup>&</sup>lt;sup>6</sup> Some of this information may already be collected on FRA forms in the case of a more serious accident following a stop signal overrun. However, by collecting it here it can be used to populate additional forms as needed.

Derailment	S	Injuries and Fatalities	
Locomotives derailed:		Number of fatalities:	
Freight:	Loaded cars derailed:	Employee fatalities:	
	Unloaded cars derailed:	Passenger fatalities:	
		Other fatalities:	
Passenger:	Occupied cars derailed:	Number of injuries:	
		Employee injuries:	
	Unoccupied cars derailed:	Passenger injuries:	
Hazardous Materials		Other injuries:	
Were there	hazardous materials onboard?		
☐ Yes	□ No		
Number of h	nazmat cars damaged/derailed:		
Number of h	nazmat cars releasing product:		
Number of p	people evacuated:		
	timates quipment damage:		
	rack, signal, and way damage:		
\$	<del></del>		
Estimated st	tructure damage:		
\$			
Estimated cl	leaning costs:		
<b>~</b>			

Incident	Number:	

## J: Incident Diagram

Sketch train positions, signal positions, switches and interlockings—or attach photographs, track charts etc. as needed to illustrate the incident.