

Federal Motor Carrier Safety Administration
Office of Analysis, Research and Technology

Effects of a Fatigue
Management Program
on Fatigue in the
Commercial Motor
Vehicle Industry

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Development of a North American Fatigue Management Program

◆ Phase 1

- Literature review and development of Fatigue Management Program (FMP) approach

◆ Phase 2

- Development of educational materials and procedures for a field operational test

◆ Phase 3

- Field operational test

◆ Phase 4

- Finalization of recommended practice guidelines, tools, education and training materials



Sponsors

- ◆ Alberta Transportation (TRANS)
- ◆ Alberta Workers' Compensation Board (WCB)
- ◆ Commission de la santé et de la sécurité du travail du Québec (CSST)
- ◆ Société de l'assurance automobile du Québec (SAAQ)
- ◆ Transport Canada (TC)
- ◆ U.S. DOT, acting through FMCSA

In-kind, Operational, and Other Financial Support

- ◆ Alberta Motor Transport Association (AMTA)
- ◆ American Transportation Research Institute (ATRI), of the American Trucking Associations
- ◆ Association du camionnage du Québec (ACQ)
- ◆ Canadian Trucking Alliance (CTA)
- ◆ Respironics Inc.



Study Goals

1. To implement a comprehensive FMP, involving:
 - Educational sessions at all levels of company
 - Driver sleep disorder screening and treatment
2. To assess the implementation of the FMP through pre/post FMP comparisons of
 - Drivers' fatigue, sleep duration, satisfaction levels and performance
 - Corporate measures (e.g., absenteeism, claims) and perception of fatigue management practices and policies



Hypotheses

- ◆ A comprehensive FMP will:
 - Improve drivers' awareness of good sleep practices, result in better and longer sleep during work days
 - Lead to reduced fatigue and improved alertness, performance and road safety during work days
 - Lead to pronounced improvements for drivers treated for sleep disorders
 - Improve fatigue management practices in the company



Process

- ◆ Submit protocol to ethics committee
- ◆ Recruit companies
- ◆ Present overview to management
- ◆ Set up stakeholder committee
- ◆ Set up implementation committee
- ◆ Recruit drivers
- ◆ Collect pre-FMP driver and corporate data
- ◆ Present educational program at all levels in company
- ◆ Screen for sleep disorders and provide treatment
- ◆ Collect post-FMP driver and corporate data



Participating Companies

◆ Québec

- Robert Transport based in Montréal

◆ Alberta

- ECL Group based in Calgary and Edmonton

◆ California

- J.B. Hunt Transport (headquarters based in Arkansas) and operating in 48 states
 - Locations used in northern and southern California: Fresno, Ontario, and Tracy



Participating CMV Drivers

◆ Inclusion criteria:

- Minimum 3 yrs. driver's license, 1 yr. CMV license, 1 yr. with company

◆ Target:

- 40 per site, expectation of 30 for post-FMP

◆ Final numbers:

- 23 Alberta
- 29 Québec
- 25 California

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Pre- and Post-FMP
Data Collection





Driver Data Collection

2 rest days	4–6 duty days	2 rest days
<ul style="list-style-type: none"> ◆ Sleep-wake log ◆ Actigraphy ◆ Mood/fatigue assessment ◆ PVT 	<ul style="list-style-type: none"> ◆ Sleep-wake log ◆ Actigraphy ◆ Mood/fatigue assessment ◆ PVT ◆ Workload assessment ◆ Factors contributing to fatigue ◆ Critical incidents 	<ul style="list-style-type: none"> ◆ Sleep-wake log ◆ Actigraphy ◆ Mood/fatigue assessment ◆ PVT



Corporate Data Collection

- ◆ Company performance indicators
 - Examples: # Panic Brakes, Medical Claims
- ◆ Alertness Management Safety Evaluation
 - Completed by drivers, dispatchers, managers
 - Addressed perception of company fatigue policies and activities

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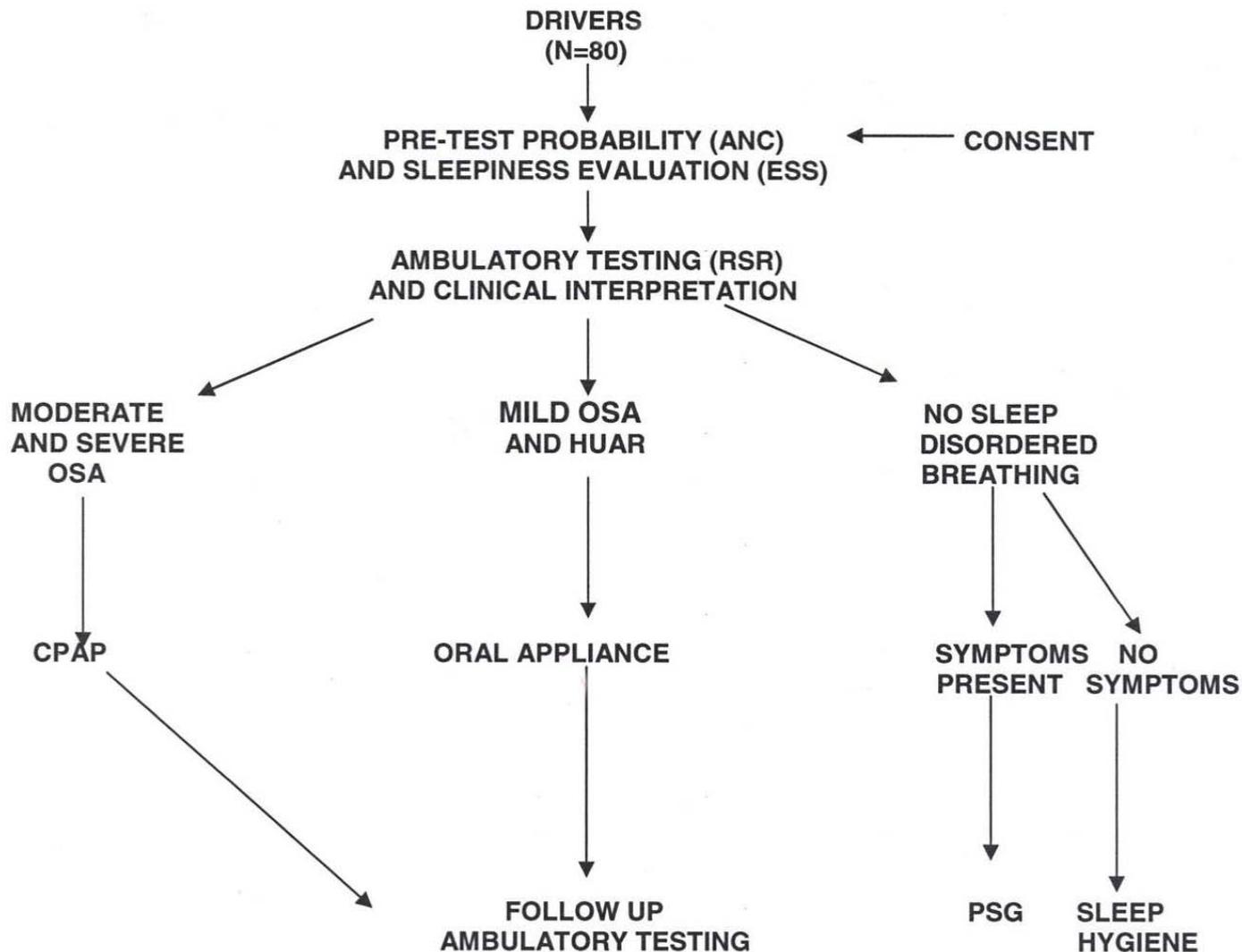


FMP Program



Education Program

- ◆ 4 modules
 - Core
 - Trip Planning
 - Wellness and Lifestyle
 - Sleep and Sleep Disorders
- ◆ Train-the-trainer
- ◆ Educational quizzes
- ◆ Bi-monthly newsletters



ANC: Adjusted Neck Circumference
CPAP: Continuous Positive Airway Pressure
ESS: Epworth Sleepiness Scale
HUAR: High Upper Airway Resistance
PSG: Polysomnogram
RSR: Remmers Sleep Recorder
SDB: Sleep Disordered Breathing

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Results of Sleep Disorder Screening and Treatment





Sleep Apnea Diagnosis

n=94

Percentage	Diagnosis (RDI hr. ⁻¹)
29%	No Abnormality (less than 5)
39%	Mild (5 to 14.9)
23%	Moderate (15 to 29.9)
9%	Severe (less than or equal to 30)
100%	Total



Sleep Apnea Prevalence

- ◆ 71% with sleep apnea is a higher-than-average prevalence
 - Pack et al (2002) found 28% in a similar population
- ◆ Treatment for sleep apnea ranked 2.3 on a scale of 0 to 3 re reason for treatment



Adherence to Treatment

- ◆ Defined as CPAP use >4 hours/70% of nights
- ◆ Site A 60%
- ◆ Site B 69%
- ◆ Site C 5%
- ◆ Standard treatment by independent sleep physicians at all sites

Adjusted Neck Circumference Predictor

- ◆ 95% moderate apneics and all severe apneics had ANC>43
- ◆ Caveat:
 - This population had higher-than-average prevalence (71% vs. 28% – Pack et al. 2002)
 - ANC may be a less effective predictor in a more typical population

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FMP Challenges



Challenges: FMP Education

- ◆ Time commitment for FMP Education
 - Four 90-minute sessions had to be reduced
- ◆ Difficulty of bringing large groups of drivers together at the same time
 - Combined sessions; web training
- ◆ Difficulty of subject matter for trainers
- ◆ Train the trainer not possible at 2/3 sites

Challenges: Sleep Apnea Screening and Treatment

- ◆ Issues re: drivers, identified with sleep apnea, driving before treatment initiated
- ◆ Involvement of non-company insurers due to lack of availability of sleep clinics
- ◆ Reluctance of insurers to fully support treatment of sleep apnea in CMV drivers
- ◆ Adherence to treatment



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