

Projects:	Lynnwood Link Extension				
Audit Type:	pe: Safety and Security Audit Profiles 6000 and 7000		and 7000		
PREPARED BY (TALSON):					
Norman Jones – Au	ıditor	Date:	September 10, 2024		
Robert Farrow – Auditor		-	September 10, 2024		
APPROVED BY (TA	LSON):				
Kenneth Brzozowsk	ki – Project Manager	Date:	September 24, 2024		
APPROVED FOR ISS	<u>SUE (SOUND TRANSIT):</u>				

Patrick Johnson – ST Director, Audit Division

Date: October 8, 2024



## Contents

I.	EXECUTIVE SUMMARY	. 3
II.	SCOPE AND METHODOLOGY	. 4
III.	FINDINGS	. 6
IV.	OBSERVATIONS	. 7
V.	MANAGEMENT RESPONSE FORMS	7
VI.	DISTRIBUTION	.8



### I. EXECUTIVE SUMMARY

Commencing in July 2024 and extending through September 2024, Talson Solutions, LLC (Talson) performed a Safety and Security Certification Audit (SSCA) of Sound Transit's Lynnwood Link Extension project (LLE). The audit was performed on behalf of the Sound Transit's Audit Division, focusing on contracts L200, L300, and L800 with specific activities related to Audit Profiles 6000 and 7000.

### **Objectives**

The objective of SSCAs is to verify evidence that construction and operational activities are in conformance with Sound Transit hazard mitigation plans and certification policy. Sound Transit uses Certifiable Item (CI) forms in the Safety and Security Information Management System (SSIMs) to evidence hazard mitigating documentation in accordance with required specifications and plans. Hazard mitigation and certification standards are detailed within the Agency Safety and Security Certification Plan (SSCP), dated April 2023 and the Agency Safety and Security Management Plan (SSMP), dated March 2022. Specific focus was placed on: *Construction Conformance Verification*<sup>1</sup>; System Integrated and Pre-Operational Testing; Operations and Maintenance Readiness; and System Readiness, Fire/Life/Safety, and Safety and Security Certification Report (SSCVR) accuracy.

### <u>Results</u>

The Lynnwood Link Extension project appears to be substantially complete and ready for operations and revenue service. Preparation of Standard Operating Procedures (SOP), Standard Management Procedures (SMP), manuals, risk mitigation against the Preliminary Hazard Analysis (PHA), and other requirements have adequately been prepared, tested for compliance and/or addressed and are in alignment with agency Safety and Security protocols and objectives for revenue operations. Fire, Life, Safety, and Emergency Management Procedures have been established as well as appropriate responses to the Threat Vulnerability Analysis (TVA).

The audit did not result in the identification of any issues or evidence of non-conformance or adverse testing results that would negatively impact revenue service. The audit did result in **three** (3) findings related to discrepant documentation and CI form data lacking sufficient detail. There were no observations noted. Preliminary audit results were shared with appropriate Sound Transit personnel prior to the Closeout Briefing and issuance of the SSCA Report. Continued discussion and correspondence may occur through the auditor's evaluation and acceptance of Audit Response Forms (ARFs), detailed in Section V. of this report.

As part of the audit, Talson noted difficulty in obtaining safety critical training records from the Safety Department which were needed to confirm required training occurred. The training records, logs, schedules and methods of verification were not readily accessible to safety personnel responsible for closing the related CIs. Talson ultimately obtained and verified training records from the Asset Transition Office and King County Metro.

<sup>&</sup>lt;sup>1</sup> There were some elements within contracts that were incomplete during Task Order 38's AP 3000 audit. Additional Certifiable Items were sampled as part of this audit.



Although not noted as an observation, Talson also identified a parking lot within the Mountlake Terrace station that had no camera coverage. L800 Certifiable Item ID No. 22 required adequate camera coverage over public spaces related to the station. However, since the parking lot was owned by the Washington Department of Transportation, a decision by Sound Transit had been previously made to not mitigate or certify the noted hazard and mitigation plan as listed within the CI. The universal business decision made to not provide camera coverage in any parking lot utilized by Sound Transit was not noted within the CI prior to closure.

The Safety and Security Certification Verification Report has been authorized and signed by Sound Transit's Chief Executive Officer on July 24, 2024, with State Safety Oversight concurrence issued August 6, 2024.

### II. SCOPE AND METHODOLOGY

SSCAs provide assurance that identified hazards are effectively mitigated and appropriately documented during each phase of a capital project spanning from preliminary engineering to revenue service. The Audit Profiles (APs) of SSCAs are specific to the completed phases of a capital project:

- > Audit Profile 1000 Hazard Analysis
- > Audit Profile 2000 Design
- > Audit Profile 3000 Construction
- > Audit Profile 4000 System Testing
- > Audit Profile 5000 Vehicle Fabrication
- > Audit Profile 6000 Training/SOPs
- Audit Profile 7000 Fire/Life Safety Readiness / Certification Reporting

SSCP, Appendix 5 (dated 2023) outlines the use of CI Checklist Forms within SSIMs for uploading documented evidence that each identified hazard has been mitigated throughout each completed capital project phase. SSCA testing targets stratified sampling for 15% of all completed CIs covering each identified contract and element. Each sampled CI is verified for relevancy, appropriateness, traceability, and proper referencing. A three (3) tiered rating system is used to categorize the results:

- Acceptable: No deviation from the implemented SSCP / SSMP standards.
- **Conditionally Acceptable:** Minor deviation of the implemented SSCP /SSMP standard and unlikely to result in a nonconforming product or service.
- **Unacceptable:** A significant breakdown or partial breakdown in processes that resulted in, or incorrectly documented, a nonconforming product or service.

Cls that are rated below "Acceptable" may or may not result in the assignment of audit findings, observations, and/or corrective action plans based on the criteria listed in Section V of this report and the professional judgement of the auditor.



Audit Profiles for this audit focused on the following:

#### Audit Profile 6000 – Operations and Maintenance Readiness

- Reviewed contracted and internal training for sufficient planning and timeliness for completion to minimize risk and mitigate system safety hazards and vulnerability to identified security threats
- Reviewed that the Rule Book, established SOPs, and SMPs are updated or developed as required to support system safety certification
- Assessed relevant Safety & Security Plans and Procedures are updated as required to support system safety certification

#### Audit Profile 7000 – System Readiness, Fire/Life Safety, and Safety Certification Reporting

- Reviewed specific fire/life/safety items for coordination and familiarization with outside agencies
- Verified certificates and verification reports were signed for completion and reviewed for accuracy
- Reviewed Safety Certification Documentation: certificates issues, general certification documentation, and other certification documentation (such as for emergency management drills)
- Assessed compliance to FTA's Oversight Procedure 54 (OP54) requirements for Safety & Security and Pre-Revenue Operation

#### Talson's Audit Activities

- Conducted a Kick Off meetings with applicable personnel on July 18, 2024
- Assessed relevant compliance documentation including prior audit reports, SSCP, SSMP, and the LLE specific PHA, dated March 22, 2017
- Interviewed Operational and Emergency Management personnel onsite
- Observed pre-operations scenarios and testing
- Reviewed various SOPs, SMPs, procedures, and training records
- > Reviewed uploaded documentation and notations within each sampled certifiable item
- Completed Audit Profiles 3000 and 6000 Testing Checklists/Workpapers
- Conducted a Closeout Briefing with preliminary results on August 19, 2024
- Produced audit draft and final reports



### III. FINDINGS

The audit resulted in three (3) findings:

#### No. 1 – AP 6000 – CI References and Documentation Uploaded

CI forms within SSIMs had missing references to uploaded documents and listed files that were not uploaded or located. These have been marked as *Conditional Acceptable* within the audit checklist to be shared with Sound Transit staff.

- Safety Audit Profile 6000: 13 out of 52 samples (25%)
- Security Audit Profile 6000: 10 out of 25 samples (40%)

Example: Unreferenced Documentation	Operational Conformance SOP / SMP / FMP
Example: Documentations Referenced	Operational Conformance Operations to provide documentation. SMP 21.30 Graffiti & Vandalism SMP 25.12 Graffiti Incident Response SMP 31.11 Link Custodial Procedure Link Facilities Maintenance Oversight Plan FAC-SOP-10007 Facilities On-Cail Services FAC.CP-003 Facilities Maintenance Plan

This is marked as a finding due to the re-occurrences of the issue.

#### No. 2 – AP 6000 – Safety Training Cls

Closed Safety and Security CIs, with safety critical training requirements, lacked evidence of verification and accessibility of training records and schedules including type of training, date/location and attendance. As a result, Talson encountered difficulty locating and verifying the training records that evidenced the certified mitigations.

In comparison, construction and integrated testing conformance CIs upload all applicable hazards, ratings, designs, specs, photos, inspection records, testing requirements and matrices, testing results, and personnel signoff. These are uploaded and referenced in coordination with applicable certificates of conformance and verification memos that are attached for the SSCVR. The same standards of evidence are not consistently applied to personnel training within CIs.

The following applicable CIs are marked as **Unacceptable**:

L200/L300: 236, 238, 239, 247, 248, and 250.



#### No. 3 – AP 7000 – Deviation from Policy

Neither Operations, nor Safety maintains or verifies the King County Metro operator training records as part of the certification process. The Agency Safety and Security Management Plan (SSMP), dated 2022 (Revision 8), section 6.3, D - E requires that the Operations Department maintain and verify all operations and maintenance training records, including sign in sheets. This includes the requirement: "Operations personnel directly responsible for operating rail vehicles, systems, and equipment must be certified, and were appropriate, licensed." as stated in D.

**Section 6.3, E:** "The Operations Department confirms training content aligns with personnel required qualifications and maintains training records along with class attendance sheets. Operations and maintenance manual submittals, training syllabus outlines and instructor manuals will be submitted and approved before training of personnel."

The SSMP should be updated to clearly state that Sound Transit does not maintain or verify the training records associated with King County operators; or Sound Transit should ensure that its agency maintains and verifies the certified licensing schedules and records with adequate accessibility for certification purposes.

### IV. OBSERVATIONS

The audit resulted in **no (0) observations:** 

### V. Management Response Forms

Observations can be addressed separately, but management corrective action should be submitted within 30 days of the final distribution of this report and corresponding Management Response Form. Verification of conforming corrective action and root cause explanation will be reviewed by Talson upon submission of the Management Response Form by Sound Transit.

Below are the definitions of a Finding and an Observation, along with the acceptable response requirements:

- A. **Findings** indicate areas where Sound Transit or another entity is non-compliant with its own established policy, plan, procedure and/or regulation and which must be corrected, and documented in writing on a corrective action plan. Action plans should also include a specific, measurable amount of time it will take to correct the issue and reduce risk.
- B. **Observations** do not mean the issue is deficient. However, the auditor has determined that the issue poses the potential risks of becoming a finding in the future if recommended changes are not put in place to prevent occurrence.



## VI. DISTRIBUTION:

Safety and Security Audit Dates:	July 2024 – October 2024		
Organization: Responsible Party:	Sound Transit(Auditee)Branden Porter, Acting Chief Safety Officer(Auditee)		
Talson Auditor(s):	Ken Brzozowski, Norman Jones, and Robert Farrow (Auditors)		
Report To:	Robert Taaffe, Acting Director, Transportation Safety & Security		
Distribution List:	<ul> <li>Moises Gutierrez, DCEO &amp; Chief Program Oversight Officer</li> <li>Terri Mestas, Deputy CEO, Mega Project Capital Delivery</li> <li>Craig DeLalla, Acting Chief Engineer, PSO</li> <li>Randy Harlow, Executive Project Director, DECM</li> <li>Kerry Pihlstrom, Acting Executive Director, Asset Transition Office</li> <li>Jodi Mitchell, ST Deputy Director – Safety Business Processes, Transportation Safety &amp; Security</li> <li>Josiah Durham, ST Manager, Transportation Safety &amp; Security</li> <li>Heather Wright, Deputy Director, Audit Division</li> <li>Michael Flood, ST Senior Auditor, Audit Division</li> <li>Molly Hughes, WSDOT State Safety Oversight Program Administrator</li> <li>Andrew Royer, WSDOT State Safety Oversight Program Administrator</li> </ul>		
Attachments:	SSCA Management Response Forms		