Governmental entities often have large fleets of vehicles and can significantly reduce accident rates by following basic management techniques. There are seven management strategies that make a substantial difference in any organization’s vehicle safety record. These strategies should be included in a written fleet safety policy that is specifically adapted to your operation. Specifically:

1. **Monitor safety performance.** Managers communicate their priorities by what they monitor. Managers that are aware of their safety performance are far more likely to make sure the safety program is being conducted properly. Statistics should be maintained comparing vehicle accident frequency to previous years and benchmarks. At least quarterly (monthly in the case of large fleet operators) the person responsible for the safety program should prepare a report to top management that summarizes the accident rate and specific accidents. This report should include both occupational accidents and vehicle accidents.

2. **Include all drivers in the safety program.** Employers may not be aware of the full extent of their non-owned vehicle exposure. Identify everyone who drives on behalf of the operation, even those individuals who use personal and/or rented vehicles.

3. **Screen and select drivers carefully.** Establish clear hiring standards and a thorough screening process for anyone who drives on business.

4. **Require all personnel to complete a safety orientation and periodic refresher training.** Organizations where all workers are up to date on their safety training average 46% fewer reportable accidents. Large fleet operators often have in house training resources while smaller operators depend on contractors or resources provided by their insurer.

5. **Discuss safety with employees at the start of each shift.** Organizations where supervisors and crew leaders discuss safety with their associates each morning average 54% fewer accidents. Managers and supervisors have the responsibility to make sure each operation is properly planned and that each employee is reminded of the critical safety procedures required for each day’s activities.

6. **Review all accidents to determine if they were preventable.** Fleet operators should establish a formal accident review committee that includes representation from senior management. The National Safety Council publishes guidelines for these deliberations. Where applicable, a representative of the bargaining unit should be included in the committee.

7. **Establish a formal plan for vehicle inspection, repair and maintenance.** Fleet operators should develop a preventative maintenance program for vehicles and equipment that includes a pre-trip inspection to identify deficiencies and preventative maintenance based on manufacturers’ recommendations that is completed and documented by qualified persons.
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Purpose

The purpose of this Fleet Safety Program is to detail the policies and procedures to minimize the frequency and severity of vehicle accidents. Any deviations from this program must be immediately brought to the attention of ____________________.

Scope

This policy applies to:

- All drivers of owned, leased, rented or borrowed vehicles.
- All drivers of non-owned vehicles while being operated on (INSERT YOUR MUNICIPALITY/ AUTHORITY HERE) business.

______________________(Title) __________________________ is responsible for the program’s implementation, management and recordkeeping requirements.

Program Responsibilities

______________________(Title) __________________________ is responsible for oversight of this program. All driver selection, vehicle maintenance, training and other program components will be coordinated under their direction. Additional duties include:

- Evaluates applicants to determine if they are eligible to drive our vehicles or other vehicles on Municipal/Utility business
- Authorizes those persons who are allowed to operate vehicles
- Oversees annual review of MVRs
- Ensures vehicles are maintained in safe condition
- Develops and enforces fleet safety rules and policies
- Define policy regarding use of personal vehicle on municipal business
- Investigates all vehicle accidents and recommends any necessary corrective actions
- Ensures that a supervisor’s incident report is completed and submitted
- Coordinates driver training programs
- Annually reviews this written program and makes any changes needed. Documents the annual review on the proper forms (found in Appendix A) and submits the report to upper management

Driver Selection

(INSERT YOUR MUNICIPALITY/AUTHORITY HERE) will check the driving history of all applicants through the use of a Motor Vehicle Record (MVR) before they are granted driving privileges. An updated MVR for all approved drivers will be obtained and reviewed annually thereafter. A driver list is maintained and updated annually, and includes the date of the last MVR obtained for each driver. The approved drivers’ list will be recorded on the proper form found in Appendix B and maintained by the Program Administrator.

Employees will be prohibited from operating vehicles on Municipal/Utility business under any of the following conditions:

- Employee does not have a valid driver’s license, or the license has been suspended or revoked
- Employee does not have at least one year of verifiable driving experience.
Employee’s MVR indicates more than three moving violations and/or preventable accidents in the past three years, or more than 2 moving violations and/or preventable accidents within the most recent year. **Suggested modify to reflect your current policy**

Employee’s MVR indicates any one of the following major violations within the past three years:

- Driving under the influence
- Reckless driving
- Vehicular manslaughter/homicide
- Leaving the scene of an accident
- Operating with a suspended or revoked license

**<enter any additional driver selection criteria used by your organization>**

**Authorized Vehicle Use**

______________________________(Title) ___________________ determines who is authorized to operate vehicles on Municipal/Utility business. No employee or nonemployee (for example, an employee’s spouse or child) is allowed to operate a Municipal/Utility vehicle, or their own vehicle on Municipal/Utility business, unless the Program Administrator has authorized that person to drive. Before any non-employee is permitted to use a Municipal/Utility vehicle, he or she must meet the same qualifications as employees. Use of Municipal/Utility vehicles by employees and nonemployees under the age of 18 is prohibited.

**Vehicle Maintenance**

Regular inspections and maintenance will be completed on all Municipal/Utility owned and operated vehicles per the manufacturer’s recommendations. If during an inspection any of the items are found deficient, the vehicle will be removed from service until it can be repaired or replaced. All problems must be promptly reported to the Program Administrator. Each driver will inspect the vehicle before each use. The inspection will consist of all items listed in the Vehicle Self-Inspection Report (form located in Appendix C).

**Driver Safety Rules**

All motor vehicle operators must obey all state laws and posted signs when operating vehicles. In addition, the following rules must be followed at all times.

**Cell Phones and Other Distractions**

The use of handheld or hands-free cell phones, or other devices that take attention away from the driving task, are prohibited when driving Municipal/Utility vehicles. Passengers may use devices only if the use will not be distracting to the driver. Cell phone calls should be made prior to or at the completion of a trip. If a call must be made during a trip, drivers must pull into a safe location and stop before making the call. If the driver receives an incoming call while driving, they must allow the call to go to voicemail and return the call when stopped in a safe location.

**Police – Officers on duty will restrict Phone use to department related calls or calls directly pertaining to law enforcement issues.**

Eating while driving is prohibited. Non-alcoholic drinks may be consumed with great discretion and only in situations where driving hazards are minimal (i.e., not in traffic, through road construction, etc.)

**Seat Belts**
Seat belts must be properly worn by all drivers and passengers while the vehicle is in operation. Children being transported must remain properly secured in a child safety seat or booster seat according to state law.

Fatigued Driving & Driving Under the Influence

Drivers will not operate a motor vehicle at any time when his/her ability is impaired, affected or influenced by alcohol, illegal drugs, medication, illness, fatigue or injury.

It is the employee’s responsibility to notify his/her supervisor of their inability to drive a vehicle.

Severe Weather

Extreme caution must be exercised when driving in severe weather conditions. If a driver has any doubt about the safety of travel, they must contact their supervisor for guidance.

Radar Detectors

The use of radar detectors or any other device with the purpose of detecting or interfering with police radar is prohibited.

Glass & Mirrors

All damaged glass should be reported immediately. To reduce windshield damage, and maintain good visibility, drivers will:

- Keep a safe distance between vehicles, especially on gravel roads
- Use clean, greaseless, dry cloths to wipe the windshield
- Replace worn wiper blades as soon as they begin to streak
- Use plastic or rubber ice scrapers, never metal
- Keep all glass & mirrors free of dirt, mud and snow

Towing

Only vehicles specifically approved for towing may be used to tow trailers of any size or type.

Enter any additional driver safety rules used by your organization>

Traffic Violations and Citations

Drivers are responsible for all citations received. Traffic citations must be reported to ______________________(Title) ______________________ as soon as possible who will review the driving privileges of any employee charged with a serious offense. Disciplinary action may include warnings, probation or suspension of driving privileges. For those jobs that require operation of a Municipal/Utility owned vehicle, loss of driving privileges may result in termination.

Vehicle Accident Investigation

Vehicle accident investigations are handled internally and may utilize external documents such as police reports. Vehicle accident reports are to be filled out by the driver and returned to ______________________(Title) ______________________ as soon as reasonably possible. ______________________(Title) ______________________ will determine accident preventability and the proper course of disciplinary action that may be necessary. This person will also determine if additional training is needed to prevent similar accidents from occurring in the future. Trends in types of accidents or multiple accidents by the same driver will receive additional scrutiny, as they may signal the need for additional training or changes to driver selection procedures.

If you are involved in an accident, perform the following steps:
• Stop your vehicle and protect the scene. You do not want a secondary accident to occur.
• Call for medical assistance and assist any injured people, if necessary.
• Call the police and ____________________(Title) ___________________ or a supervisor as soon as possible.
• Locate any witnesses and get important information from them. If possible, get names, addresses and phone numbers.
• Exchange pertinent information with other drivers.
• Take photos of the accident.
• Fill out a vehicle accident report form and send it to the Program Administrator (forms are in Appendix D).

When in an accident, drivers must:

• Never admit fault or apologize. Apologies could be interpreted as an admission of fault.
• Never argue with other drivers or witnesses.
• Never argue with the police.
• Never make a statement to the media. Refer them to_______________________(Title) ___________________.
• Never discuss details of the incident with anyone except a representative of (INSERT YOUR MUNICIPALITY/AUTHORITY HERE) or the police.
• Report every accident no matter how small to the _____________________(Title) ___________________.

Vehicle Accident Report forms must be kept in each vehicle for use after an accident. If the vehicle you are driving does not have a Vehicle Accident Report form in it, contact the Program Administrator.

Driver Training

Upon initial assignment of driving privileges, each driver will be required to attend a training session that outlines the rules and procedures in our Fleet Safety Program. Ongoing training will be offered to all drivers, at least annually, to ensure they are kept up-to-date with defensive driving techniques and changes to the policies and program. Driver ride-a-longs may also be conducted upon initial hire and periodically thereafter as deemed appropriate by _______________________________________________. Training and retraining will be documented (Training Record/Certification forms are in (Appendix E).

Periodic Program Review

At least annually, the Program Administrator will conduct a program review to assess the progress and success of the Fleet Safety Program. The review will consider the following:

• Evaluation of all training programs and records
• The frequency and severity of vehicle accidents during the previous year
• The need for changes to the Fleet Safety Program, based on evaluation of the program and results
• The need for changes to the driver selection/disqualification criteria

Record Retention

All records will be retained for XX years.<Refer to Public record retention requirements>

Revision History

<Revision XX – March 2012>
## Appendix A – Annual Evaluation Report

<table>
<thead>
<tr>
<th>Date of Evaluation:</th>
<th>Evaluated by (list all present):</th>
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### Written Program Reviewed:
- Yes
- No

### Comments on Written Program:

### Do vehicle accident records indicate a need for additional employee training on the program?
- Yes
- No

### The following content was added/modified/removed from the written program:

### Comments:
Appendix B – Driver List

Those listed below have been authorized to operate motor vehicles on Municipal/Utility business and have received instruction regarding the *(INSERT YOUR MUNICIPALITY/AUTHORITY HERE)* Fleet Safety Program.

<table>
<thead>
<tr>
<th>Employee Name</th>
<th>Date of Last MVR Check</th>
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</table>
Appendix C – Vehicle Self-Inspection Report

VEHICLE SELF-INSPECTION REPORT

<table>
<thead>
<tr>
<th>Not OK</th>
<th>OK</th>
<th>Before Starting Engine</th>
<th>Not OK</th>
<th>OK</th>
<th>After Starting Engine</th>
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<tbody>
<tr>
<td></td>
<td></td>
<td>Body</td>
<td></td>
<td></td>
<td>Brakes</td>
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<td></td>
<td></td>
<td>Brake/head/tail/clearance lights</td>
<td></td>
<td></td>
<td>Parking brake</td>
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<td></td>
<td></td>
<td>Direction signals/emergency flashers (4-way)</td>
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<td>Engine/drive train</td>
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<td></td>
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<td>Mirrors (inside and outside)</td>
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<td>Gauges (oil/fuel/temp/air)</td>
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<td></td>
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<td>Windows/windshield</td>
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<td>Heater/defroster/air conditioner</td>
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<td>Wheels and tires</td>
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<td>Speedometer</td>
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<td>– Air pressure to manufacturer's recommendation</td>
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<td>Steering</td>
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<td></td>
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<td>– Minimum of ~1/16 inch tread depth</td>
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<td>Transmission</td>
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<td></td>
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<td>– No visible sign of the tire deterioration</td>
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<td>Other:</td>
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<td>Windshield wipers and washers</td>
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<td>Horn</td>
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<td>Seat belts (all seating positions)</td>
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<td>Seats securely fastened to the floor</td>
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<td>Battery</td>
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<td>Belts/hoses</td>
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<td>Fluid levels/leaks</td>
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<td>Muffler and exhaust system</td>
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<td>License plate(s)</td>
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<td>Suspension system</td>
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<td>Fire extinguisher</td>
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<td>First aid kit</td>
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<td>Reflectors/flags/flares</td>
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<td>Other:</td>
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| Remarks: |

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<tr>
<th>Condition of above vehicle is</th>
<th>Satisfactory</th>
<th>Unsatisfactory</th>
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Signature: ____________________________
TO PASSENGERS AND OTHERS

My employer requires that I report details of all accidents. If you witnessed this one, please assist me by writing your name below. Write a brief description of your version of the accident on the reverse side, even if you consider me at fault.

Name______________________________

Home Address _________________________ Tel. __________

Business Address _________________________ Tel. __________

Date __________
ACCIDENT REPORT FORM

ACCIDENT REPORT FORM

DRIVERS'S RESPONSIBILITY:

Keep this form in your vehicle.

Complete the report in case of an accident and return promptly.

ACCIDENT REPORT FORM

Police Officer Information

Officer Names (4 Badge Numbers):

Accident Report Number

Police Officer Information

INSTRUCTIONS:

1. Use solid line to show path of vehicle before accident.

2. Use dotted line to show path of vehicle after accident.

3. Number each vehicle and show direction of travel with an arrow.

4. Show pedestrians with an X.

Clear and indicate the direction of flow. Show name of streets, locations of vehicles, travel.
Appendix E – Training Record/Certification for Fleet Safety Program

This is to certify that the undersigned received training in accordance with the (INSERT YOUR MUNICIPALITY/AUTHORITY HERE) Fleet Safety Program.

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Print Instructor’s Name

Instructor’s Signature

Instructor’s Title

Date of Training