The information in this material (formerly provided through (Name of Organization) Services Corporation) are recommendations and should be used as a resource for managing safety risks. These guidelines and suggestions are for informational purposes only. This material is not intended to be a substitute for professional risk management advice and evaluation.

Sample Transportation Policy

SAMPLE TRANSPORTATION POLICY

It is the practice of the [(Name of Organization) to provide transportation for
designated (Name of Organization) program	activities such as child care, camping, senior adults, and other
program services when necessary. It is the p	olicy of this (Name of Organization) that all (Name of
Organization) owned or leased vehicles (bus,	, van, car, truck or trailer) are operated in compliance with all
Federal, State and Local laws and regulations	S.

VEHICLE ADMINISTRATION

- 1. The Board of Directors and/or Branch Board of Managers must approve the purchase, lease or disposal of all vehicles that have a value of [\$ XXXX] or more.
- 1.1 A staff person of the (Name of Organization), should maintain a schedule of all current, or previously, owned, or leased vehicles. This should include, but is not limited to:
 - Year, make, model, and plate # of vehicle
 - ► Purchase price
 - ► Vehicle Identification Number (VIN)
 - ► Passenger capacity
 - ► Date of acquisition
 - Date of disposal
- 2. All owned vehicles are the property of the (Name of Organization) and therefore all titles, licensing, and pertinent records of ownership must be processed and filed in the office of the CEO/CFO/Risk Manager/Designee. Leased vehicles should be leased in the name of the (Name of Organization) and all contracts and agreements processed and filed in the office of the CEO/CFO/Risk Manager/Designee.
- 2.1 All vehicles shall be licensed, inspected regularly, and in compliance with federal, state or local laws and regulations. Documentation of this information must be kept on file.
- 3. (Name of Organization) owned or leased vehicles will be used to transport (Name of Organization) members and for (Name of Organization) business only. The use of (Name of Organization) owned or leased vehicles by staff for personal use for loan, lease, or rent is prohibited. [Local situations may require amendments to this policy]
- 4. There should be proper traffic controls and signage on the (Name of Organization) property (camp/parking lot).
- 5. The phone numbers for the (Name of Organization), police, and ambulance will be posted in the vehicle at all times. If possible, each there should be a mobile phone in each vehicle.
- 6. Parents should be informed of all emergency procedures, pick up and drop off times, and the process of communication in the event of a change in schedule.
- 7. Loading and unloading procedures should be developed according to the location(s). This should include the side of the street where the transfer takes place and what should be done prior to leaving the location (all sitting down, lock doors, all in seat belts, etc.).

8. A list of all children in each vehicle and their emergency contact information should be kept in the vehicle and at the branch.

DRIVERS

- 9. It is strongly recommended that all drivers who transport program participants be at least [21] years of age and insurable. Drivers must have a valid license for the class of vehicle they drive.
- 10. If (Name of Organization) staff drive personal vehicles on (Name of Organization) time, they should present a current personal insurance card. (Name of Organization) staff should not drive program participants in their personal vehicles except in emergency situations.
- 11. A MVR (Motor Vehicle Report) shall be obtained on all drivers prior to using (Name of Organization) vehicles. A standard for traffic convictions should be developed [suggestion of a max of 1 in the last 2 years or 2 or less in last 5 years]. Updated MVRs shall be reviewed annually for all drivers
 - 12. All drivers shall complete and have on file a Drivers Information Form (See Addendum E).
- **13.** Drivers of passengers shall be trained to assure the safety of each passenger and the property of others. Each driver shall be instructed how to operate the vehicles properly and safely. A road test should be conducted prior to all owing the driver to take the vehicle with passengers.
- **14.** Either the driver or someone else on the vehicle must be trained and responsible for rendering first aid or obtaining first aid in the event of an accident.
- **15.** Logs should be kept documenting when the vehicles are used, why, and the mileage (see Addendum B). File all documentation future reference.
- **16.** The driver should do a quick visual inspection every time they get in to the vehicle and a documented inspection on a weekly basis (see Addendum C).
- 17. There should be two adults in any vehicle transporting minors.

Passengers

- 18. Rules and emergency procedures should be explained to passengers before every trip.
- **19.** Seat belts must be operable and worn at all times when they are available on the vehicle and children should be in safety seats as necessary.
- **20.** The number of passengers will not exceed the original design of the vehicle.
- 21. Passengers shall remain seated at all times the vehicle is in motion, with no portion of their body extending through the windows or over the sides.
- 22. Passengers shall not throw anything from the vehicle.
- **23.** All children shall have a signed parental transportation permission form on file at the (Name of Organization).
- 24. A roster of all passengers shall be on board the vehicle and on file at the (Name of Organization) for all

trips. The emergency authorization to treat form should also be on board with the children in the event of an accident.

Vehicle/Equipment

- **25.** All vehicles will be equipped with a first aid kit, an approved fire extinguisher, warning reflectors, flashlight, flares, and appropriate jack and lug wrench.
- **26.** All vehicles will be maintained in clean, safe, and serviceable condition, as recommended by the manufacturer (See Addendum D).

The driver or designated staff person will complete a vehicle use log and check list to include, but not limited to: mileage, fuel and oil consumption, tires condition, safety equipment listed in # 19 prior to and after each use (see Addendum B).

The interior of each vehicle will be cleaned thoroughly after each day's

use.

The exterior of each van or truck will be cleaned at least once a week and the exterior of each bus will be cleaned at least once each month.

- **27.** Each vehicle should have proper documentation; vehicle registration, insurance card, accident report, all applicable stickers (city, state, safety, etc.), current plates, emergency phone numbers for the (Name of Organization), and emergency authorization to treat forms of the minor passengers.
- **28.** Each van and bus shall have two clearly visible signs indicating the name of the (Name of Organization).

Accidents

- **29.** See Addendum A for Vehicle emergencies.
- **30.** In the event of an accident, the driver will notify the (Name of Organization), report the facts to the police, and complete a standard accident report form.
- 31. A copy of the police report must be obtained as soon as available.

Addendum A - Vehicle Emergency Proced	ures
Addendum B - Vehicle Use Log	
Addendum C - Weekly Vehicle Maintenan	ce Check List
Addendum D - Maintenance Schedule & L	og
Addendum E - Driver Information Form	
Adopted:	_(Name of Organization) Board of Directors
Date:	

This material contains general information only. It is not intended to be a substitute for advice from a safety expert or legal counsel, nor to supplant any legal duty to provide safe premises, workplace or operation. This Sample Policy is provided by (Name of Organization) in support of (Name of Organization) Risk Management Practices and Safety Education.

Addendum A

VEHICLE EMERGENCY PROCEDURES

In the event of a vehicle accident or emergency:

Organization) representatives.

V	Stop vehicle; turn off the ignition.						
∇	Turn on hazard lights; check for fire.						
∇	Keep passengers in vehicle if it is the safest place; evacuate passengers to side of road, keeping them out of oncoming or passing traffic.						
∇	Place emergency reflectors 100 to 150 feet ahead of and behind the vehicle.						
V	Administer first aid to anyone who is injured.						
∇	Contact appropriate local authorities, as needed [Log Names]:						
	Sheriff Dept: Police Dept: Ambulance: Hospital: Fire Dept: (Name of Organization):						
∇	Obtain name, address, license number, license plate number, etc. of others involved in the accident/emergency. See the license and insurance card to make sure you are receiving the correct information. Document the extent and location of the damage to the other vehicle.						
∇	Obtain name, address, and phone numbers of all witnesses, including the first person(s) to arrive following the accident/emergency.						
∇	When asked for your statement by the investigating officer:						
	 Do not admit fault. Do not accuse the other driver(s). Be accurate and factual. 						
V	Fill out accident report and obtain a copy for records.						
Δ	Be courteous: discuss the accident/emergency only with the investigating officer and (Name of						

Addendum B

VEHICLE USE LOG

	n: ear:			Model:	:		Date: Plate #:	
Date	Trip Destination	Driver's Name (Printed)	Beginning Gas Level [% of tank]	Ending Gas Level [% of tank]	Starting Mileage	Ending Mileage	Repair Needs or Vehicle Malfunctions	
								-
								-
								-
								١

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Addend	lum C	WEEKLY VEHIC	CLE M	AINTENAN	NCE CHE	CK LIST	1	Date:
Associa	tion:	Com	pleted by:					Mileage:
Vehicle	Year:			Model:			Plate #:	
	Before Vehicle St	art-Up Check	ОК			Comments		
1. Er	ngine Oil Level							
2. Er	ngine Coolant Level							
3. Ba	attery Level							
4. W	indshield and Mirrors [cle	an if necessary]						
5. Pr	oper Operation of All Doc	ors and Windows						
6. M	lirrors for Proper Operation	n and Field of Vision						
7. Er	mergency Brake Operable							
8. Ti	ire Wear [excessive or irre	gular]						
9. In	spection Sticker and Licen	se Plate Sticker						
10. Cl	heck Ground Under Vehicl	e for Fluid Leaks						
11. Er	mergency Equipment [fire	ext., flares, first aid kit, etc.]						
12. D	ocumentation [insurance ca	ard, registration, etc.]						
13. Cl	heck for Cleanliness & Dar	mages [interior and exterior]						
	After Vehicle Sta	art-Up Check	ок			Comments		
1 Fi	iel Level Gauges and Wa	rning Lights						

2. Electric Locks & Windows

3.	Tire Air Pressure	
4.	Windshield Wipers	
5.	Horn	
6.	Head Lights, Tail Lights, Turn Signals, Flashers	
7.	Defrosters and Heaters [when applicable]	

Addendum D VEHICLE MAINTENANCE SCHEDULE & LOG		Page No:
Association:		Make:
Vehicle Year:		Model:

MAINTENANCE SCHEDULE

LOG

Every 3-6,000 Miles	Completed [Y/N]	Date	Odometer	Completed By	Comments
Oil Change and Filter, Lubricate					
Replace Air Filter					
Clean Battery Terminals					
Check Belts and Hoses					
Check Coolant					
Check Steering, Transmission, and Differential Fluids					

Every 12,000 Miles	Completed [Y/N]	Date	Odometer	Completed By	Comments

Engine Tune Up, Mechanical Check Up			
Front End Alignment			
Rotate and Balance Tires			

Every 24,000 Miles	Completed [Y/N]	Date	Odometer	Completed By	Comments
Flush Coolant					
Change Transmission and Differential Oil					
Pack Front Wheel Bearings					
Replace Belts and Hoses					

Addendum E

DRIVER INFORMATION FORM

Name:					Date:		
Address:							
City:			State:		Zip Coo	le:	
Chauffeur's License No:			Licens	ing State:			
Driver's License No:			Licens	ing State:			
Date of Birth::		Date of (Name of C Employment:	Organiza	ation)	Marital Status:		
Years of Driving Experience:				(Name of Organization) Unit:			
Description of duties with (Name	e of Or	ganization) requirin	g use of	vehicle:			
% of time driving vehicle during	g norma	al work day:	% of time carrying passengers while driving vehicle:				
Have you ever been convicted of Driving While Intoxicated, Reckless Driving, or other felony driving convictions? If yes, explain:							
List all traffic violations/	/auton	nobile accidents w	ithin las	t three year	rs. If none, state	NONE" below.	
Accident Description		Location			rsonal Injury perty Damage	Date	

I understand that a Motor Vehicle Report (MVR) will be requested on a yearly basis to verify driving history over the last five years. If any information on this page should change, the Human Resources Department (or whomever administers the program) should be contacted immediately. This includes any situation (on or off the job) which may influence your authorization to drive the (Name of Organization) vehicles.

Signature of Applicant	Signature of Executive Director
ignature of Applicant	Signature of Executive Director
Motor Vehicle Reco	ord Received [mm/dd/yy]: