Vehicle Accidents Reporting Procedure

Effective Date: 9/18/06
Approval Date: 9/18/06
Allan Rawland, Director

Purpose
To inform employees how to report a vehicle accident that occurs while operating a County-owned, leased or private vehicle used for County business.

General Information
San Bernardino County is self-insured and self-administered for vehicle liability coverage. This includes comprehensive coverage for vehicles and property damage to others.

Investigation and Resolution
County policy delegates the authority for the investigation and resolution of all vehicle accidents to the Risk Management Department. No other County department or employee may contact the involved party (ies) for the purpose of determining liability or to attempt a resolution of the claim.

- Initial investigation of vehicle accidents (documenting circumstances, corrective action plans, and scheduling of remedial training) is the responsibility of the department that is operating the involved vehicle. Risk Management may perform additional investigations on selected accidents

- Contact by attorneys, adjusters, insurance companies, or other members of the public are to be referred to the Risk Management Division at 909-386-8631

- All report forms may be obtained from Risk Management

County Requirement
The County of San Bernardino requires a report by the law enforcement jurisdiction on every vehicle accident involving a County-owned, leased vehicle or private vehicle used for County business. If an emergency or other situation prohibits an officer’s response, a counter report must be filed by the County driver at the Police, Sheriff or CHP office with jurisdiction.

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When a vehicle accident occurs, or if staff may be named as a party to an accident, prompt and thorough reporting must be made as follows:

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| Employee involved in accident in a County-owned, leased or private vehicle used for County business. | • Report the accident to the immediate supervisor or designee, even if medical attention is not needed  
• If the accident results in injury to any of the parties involved, call 911  
• If the accident results in damage to property, contact the local police department for a vehicle accident report  
• If the County vehicle is disabled and in need of towing, contact Motorpool Fleet Services at 909-387-7859 |
| Employee involved in accident while operating county or leased vehicle | If physically able to do so, complete the Vehicle Accident Report form. This form is also located in the glove compartment of each County Vehicle. All items must be completed to the fullest extent possible. Be specific and draw a diagram of the accident site and vehicles in the space indicated. |
| Supervisor | • Complete the NCR Incident Report form. Complete all sections that are relevant to a vehicle accident. If required, continue the narrative on a plain piece of paper  
• If employee is injured, refer to Occupational Injury and Illness procedure  
• If death to a consumer, refer to Reporting Death of a Consumer procedure  
• If serious injury to a consumer or death or serious injury to employee or member of the general public, IMMEDIATELY contact the Director, Assistant Director, appropriate Deputy Director, Program Manager and Risk Management at (909) 386-8623 |
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| Supervisor (continued) | • If the accident occurs outside of regular office hours, call the County Communications Center at (909) 356-3807 to contact a Risk Management representative  
                       • Obtain the Director’s signature on all forms completed  
                       • Submit all report forms to DBH Payroll, and copies to Director’s office and the Department’s Disaster/Safety Coordinator within 24 hours of the vehicle accident  
                       • Maintain a photocopy of the “Vehicle Accident Report” and the “Incident Report” in the clinic’s Accident/Incident file. (Safety Binder, Section 8). Strike ALL medical information from the copy  
                       • Ensure that Motorpool Fleet Services is notified if vehicle is disabled and needs towing |
| Payroll          | • Process the original forms and sends them to Risk Management within 24 hours of the accident. This includes copies of the “Incident Report” and the original “Vehicle Accident Report”  
                       • Send copies of forms to the Disaster/Safety Coordinator |
| Safety Coordinator | • Review the accident reports quarterly with DBH Safety Committee  
                       • Make recommendations to management to reduce occurrence of accidents  
                       • Maintain data on all accidents for tracking and annual report |