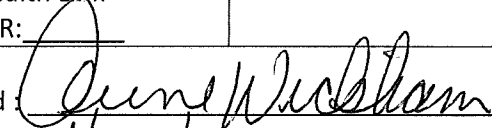


SWMBH Operating Policy 1.6

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|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------|----------------------|
| Subject: Driving Personal Vehicle for Work | | Accountability: Operations | Effective Date: 4/20/2017 | Pages: 2 |
| REQUIRED BY: BBA Section _____ PIHP Contract Section _____ NCQA/URAC Standard _____ Other _____ | | | Last Reviewed Date: 4/20/2017 | Past Reviewed Dates: |
| LINE OF BUSINESS: <input type="checkbox"/> Specialty Waiver (B/C) <input type="checkbox"/> 1115 Waiver <input type="checkbox"/> Healthy Michigan <input type="checkbox"/> SUD Medicaid <input type="checkbox"/> SUD Block Grant <input type="checkbox"/> MI Health Link <input type="checkbox"/> OTHER: _____ | | APPLICATION: <input checked="" type="checkbox"/> SWMBH Staff and Ops <input type="checkbox"/> Participant CMHSPs <input type="checkbox"/> SUD Providers <input type="checkbox"/> MH / DD providers <input type="checkbox"/> Other: _____ | Last Revised Date: | Past Revised Dates: |
| Approved:  Date: 4/28/17 | | | Required Reviewer: Director of Operations | |

I. Purpose

To set terms and conditions associated with employees driving their personal vehicles for work purposes. This policy applies to all Southwest Michigan Behavioral Health (SWMBH) employees and interns using their vehicles for work.

II. Standards and Guidelines

- A. Before using your personal vehicle for work, each employee will:
 1. Properly register, license and insure their vehicle within the correct rate class coverage;
 2. Have, maintain and renew insurance coverage at all times while the vehicle is used for work;
 3. Provide SWMBH with current insurance information before using the vehicle for work and at annual intervals as required;
 4. Ensure vehicles properly maintained consistent with manufacturer safety specifications.
- B. All purchases, insurance, licensing, operating, maintenance and repair costs associated with using personal vehicles for work are the responsibility of the employee and/or vehicle owner.
- C. General Driving Requirement
 1. At all times, the employee will operate their vehicle consistent with legal requirements and SWMBH procedures.
 2. Employee will operate the vehicle in a manner that meets requirements in the Motor Vehicles Act and its regulations, the Workers Compensation Act, the Occupational Health and Safety Regulation, and other driving laws.
 3. In winter, vehicle is to be equipped with safe and competent tires appropriate for Michigan weather conditions consisting of sufficient tread depth.
 4. While operating vehicle, the use of phones or any electronic device must adhere to the state and local laws within the jurisdiction.
 5. Employee will not provide transportation to individuals for any reason outside of SWMBH business while operating vehicle for work purposes.

SWMBH Operating Policy 1.6

D. Incident Reporting and Investigations

1. If involved in a motor vehicle incident while on work time, employees will cooperate to help SWMBH meet its obligations, and to take steps to prevent future occurrences. The employee will:
 - a. Immediately report crashes, accidents or other incidents to their immediate supervisor;
 - b. Complete the Motor Vehicle Incident Reporting form and submit it to Human Resources;
 - c. Cooperate with SWMBH to complete necessary reports when applicable;
 - d. Be willing to participate in the incident investigation, and work with the investigation team to facilitate the investigations, report and corrective measures.

III. Definitions

- A. Work-related driving is operating a motor vehicle in the course of your work, including driving to and from SWMBH work sites and offices, client or contractor offices or work locations, affiliate Community Mental Health agencies, committee and general meeting locations, any and all offsite tasks involving using your personal motor vehicle. This may also include other driving approved by your Senior Leader or other SWMBH Management. Work-related driving does not include commuting from your home to your primary workplace.
- B. An employee-owned vehicle is a vehicle for which the employee is the registered owner or the sole signatory of a vehicle-lease agreement.

IV. Attachments

- A. SWMBH 1.6A Employee Vehicle Information Form
- B. SWMBH 1.6B Vehicle Incident Form



Southwest Michigan Behavioral Health

Request for Motor Vehicle Information

Staff Last Name: _____, First Name: _____

Driver's License Number: _____

▪ **Vehicle 1**

Make: _____ Model: _____ Year: _____

License Number: _____

Full name of who vehicle is registered to: _____

Vehicle registrant's relationship to you: _____

Name of Insurance Company: _____

Insurance Policy Number: _____

▪ **Vehicle 2**

Make: _____ Model: _____ Year: _____

License Number: _____

Full name of who vehicle is registered to: _____

Vehicle registrant's relationship to you: _____

Name of Insurance Company: _____

Insurance Policy Number: _____

▪ **Vehicle 3**

Make: _____ Model: _____ Year: _____

License Number: _____

Full name of who vehicle is registered to: _____

Vehicle registrant's relationship to you: _____

Name of Insurance Company: _____

Insurance Policy Number: _____

Please provide HR copies of the below with the completed form:

- Current Driver's License
- Current Registration for each vehicle referenced on this form
- Current insurance certificate for each vehicle referenced on this form

Auto Accident Report Form

Keep In Your Glove Box

When an accident occurs:

| First Steps | Do Not Say | While Still At the Scene |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <ul style="list-style-type: none">• Remain calm• Get to a safe place• Check for injuries• Administer First Aid• Call police/EMT | <ul style="list-style-type: none">• It's all my fault, (even if it is).• My insurance will pay for everything.• It's OK, I have full coverage. | <ul style="list-style-type: none">• Get as much information as possible on this report.• Take Pictures• When the police come, cooperate and tell them what you know. |

Accident Details

| | |
|-------------------------|--|
| Day/Date/Time AM/PM | |
| Weather/Road Conditions | |
| Location of Accident | |
| Accident Details | |