

Driving Safety Procedure

BP WIND ENERGY POLICIES AND PROCEDURES

Driving Safety Procedure

[Document Control Details](#)

Driving Safety Procedure

1.0 Purpose/Scope

- 1.1 Through proper implementation of this procedure, it is intended that personal injury and property loss due to vehicle accidents will be minimized. This procedure supports the BP Group Recommended Practice: *Driving Safety*.
- 1.2 This procedure applies to all BPWE employees and contractors (full-time, and part-time) where the BP Group Recommended Practice (GRP): Driving Safety is applicable, and those individuals operating motor vehicles owned, rented, or leased by BPWE or its clients and to any other motor vehicle, used by personnel engaged in BPWE business.
- 1.3 This procedure addresses operation of registered, motorized over-the-road vehicles, i.e., cars, trucks, and vans by BPWE authorized operators.

2.0 Reference

- 2.1 BP Group - GRP 3.7-0002 Driving Safety
- 2.2 HSSE 11.10.01 Incident Notification, Reporting and Investigation

3.0 Responsibilities

Responsibility for implementing the procedure begins with senior management and flows through all levels of management/supervision to the individual vehicle operator. However, it is the vehicle operator's responsibility to understand and comply with this procedure.

3.1 Facility/Project Manager

- A. Confirm personnel assigned to driving tasks, including new employees and transferees, are trained and qualified to operate that class of vehicle,
- B. Is responsible for communicating the requirements of this procedure and for ensuring that all Service Providers and/or Contractor Supervisors operating at BPWE sites put systems in place to comply with this procedure,
- C. Confirm drivers licenses have been checked and records maintained,
- D. Confirm the vehicle meets the BP Group minimum vehicle specifications,
- E. Confirm the manufacturer's recommendations for vehicle maintenance have been met and applicable records have been maintained,
- F. Confirm appropriate emergency response equipment has been selected and supplied in each vehicle,
- G. Confirm the BPWE Driving Safety Practices are followed and that training to the standard is periodically updated.

3.2 HSSE Advisor

- A. Responsible for advising and assisting Line Management in the implementation of this procedure.
- B. Responsible for reviewing and updating this procedure.

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3.3 Employees

- A. Complete training as required,
- B. Advise supervision of any medical, physical, or psychological condition that would impair driving performance,
- C. Inspect the vehicle before use to confirm it is in proper working condition,
- D. Promptly report any malfunction or problem with the vehicle to their supervisor.

4.0 Acronyms and Definitions

Acronyms Table

Acronym	Definition
BPWE	British Petroleum Wind Energy
HSSE	Health, Safety, Security, and Environmental
OSHA	Occupational Safety and Health Administration
VDR	Vehicle Data Recorder
VTA	Virtual Training Assistant

Definitions Table

Term	Definition
Affected Vehicle	<ul style="list-style-type: none"> Any company vehicle assigned to a BP employee or any pool vehicle when used by a BP employee. Any personal vehicle used on company business with operating expenses reimbursed by that company. Any rental or leased vehicle used by an employee on company business. <p><i>Non-reimbursable commuting is excluded.</i></p>
Authorized Passengers	<p>Authorized Passengers in Company vehicles are limited to:</p> <ul style="list-style-type: none"> BPWE employees, BPWE contractors or vendors when on BPWE business, BPWE clients or potential clients and others on legitimate BPWE business, The operators' immediate family and others, if authorized by their Line Manager.
BP Premises	Any site, location, vehicle, or vessel that is owned or operated by or on behalf of a BP company.
Company Business	Any activity performed to meet BP's business needs defined as 'work-related' under the U.S. OSHA record keeping requirements; personal or optional activities are excluded.
Company Vehicle	A vehicle owned and/or under long-term lease to BP.
Drive Time	The time spent driving a vehicle on BP business.

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Term	Definition
Driving Safety Course	Training which meets the BP Defensive Driving Performance Specification and Fatigue Awareness requirements (see Attachment 7). Any defensive driving courses other than the one listed in Attachment 7 must be approved by the BPWE HSSE Director.
Heavy Vehicle	Any vehicle greater than three and one-half tons of fixed chassis or articulated trailer, excluding a mobile plant.
Journey Management Plan	A management system to verify that all applicable journeys are assessed, appropriately risk minimized, documented and implemented.
License	A documented, personal identification authorizing the named person to drive designated classifications of vehicles on stated on-road or off-road locations. Depending on the vehicle and the area in which it is operated, licenses may, where not issued by a public authority, be issued by an approved BP authority (e.g., refinery, site, or airport authority).
Light Vehicles	Any vehicle less than three and one-half ton, excluding a mobile plant.
Medical Condition	A state of health that may interfere, temporarily or permanently, with the individual's ability to control the vehicle.
Cell Phone	A wireless telephone or two-way communication device.
Mobile Plant	Any specialized motorized equipment or vehicle used exclusively within the confines of a controlled site, or vehicle used for lifting, material handling, construction, drilling, and excavation work. This excludes standard light vehicles used within a controlled site and is not applicable to fixed cranes.
Professional Driver	Any heavy vehicle driver, bus driver, chauffeur, and/or any light vehicle driver who drives more than 16,000 kilometers (10,000 miles) per year on business (or pro-rata mileage for any part of a year) and is thereby regarded as having driving as a core competency as part of their job. A mobile plant operator who as part of their job drives for more than 15 percent of working hours (or pro-rata time for any part of the year) is deemed to be a professional driver.
Rental Vehicle	A vehicle that is not owned by BP, which is rented or hired for a specific period of time. This includes short-term and long-term leases for light vehicles. Leased heavy vehicles are defined as heavy vehicles.
Work Force	Every direct employee of BP and its subsidiaries and joint ventures (>50% ownership) and contractor companies that engage in direct work on BP premises on behalf of BP, or to transport our people, materials, intermediates, and products.
Working Hours	All paid hours on BP business, inclusive of work breaks.

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5.0 Procedure

Motor vehicle accidents are recognized as a leading cause of work and non-work related serious injuries and fatalities. Therefore, the operation of motor vehicles must not be perceived as a routine activity. Successful implementation of the following elements of the BPWE Driving Safety Procedure will result in fewer driving related incidents, injuries and fatalities. Adherence is mandatory, as is compliance with relevant laws and regulations. Failure to comply will be subject to the BPWE Disciplinary Policy.

5.1 General Requirements

- A. Company Vehicles are to be used for BPWE business only.
- B. The use of company vehicles for personal business is prohibited. In certain situations, written agreements may allow for personal use of Company Vehicles.
- C. Allow only authorized passengers to ride in company vehicles.

5.2 Vehicle Requirements

- A. Vehicles must be selected and purchased as “fit-for purpose”, assuring proper equipment and meeting the recommended set of vehicle safety specifications described in the BP Driving Safety GRP. Where applicable, equipment changes will follow the BPWE eMOC process.
- B. Motorcycles shall not be used on BPWE managed site unless an eMOC is in place.
- C. Radar detectors are prohibited while on BPWE business.
- D. Any cargo being carried by a motor vehicle including equipment, materials, BPWE property, or personal property shall be properly secured by the motor vehicle operator at all times.
- E. Drivers that have been assigned a Company Vehicle shall assure that the vehicle is maintained in accordance with manufacturer’s recommendations.
- F. Under no circumstance should anyone operate a motor vehicle if they believe it is not in safe working condition.
- G. The motor vehicle operator shall ensure that the vehicle they are operating has the appropriate vehicle registration and insurance coverage in place prior to driving.

5.3 BP - Personal Vehicle

- A. All personal vehicles used for company business shall be evaluated against recommended vehicle safety specifications in the BP Group Driving GRP (see *Attachment 1*).
- B. Maintenance of a personal vehicle is the responsibility of the employee who owns and operates the vehicle. Under no circumstance should anyone operate a personal motor vehicle on BP company business if it is not in safe working condition.
- C. The motor vehicle operator shall ensure that the vehicle they are operating has the appropriate vehicle registration and insurance coverage in place prior to driving. If using a Personal Vehicle, the motor vehicle operator shall assure that registration and insurance coverage required by the state in which the vehicle is registered are maintained.

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5.4 OEM / Resident Contractor Vehicles

- A. BPWE Management shall engage OEM / Resident Contractors which operate vehicles on BPWE operated sites to require adoption of the BP Group Driving Safety GRP.
 - 1. The request for compliance to the Driving Safety GRP shall be identified at the time of the contract scope/execution and documented in the contract.
 - 2. If a contractor does not have a Driving Safety Program, they will be expected to develop a program prior to contract.
- B. Contract language shall address the requirement for a Driving Safety Program by contractors that are **required** to drive on BPWE operated sites.
- C. Contractor shall be responsible for implementing, monitoring and auditing adherence to the Driving Safety program.

5.5 Motor Vehicle Operators

- A. A current, valid driver's license and/or other required certification for the type and class of motor vehicle to be operated must be held by the individual prior to and during their operation of any vehicle on BPWE operated site or for BPWE business.
- B. Motor vehicle operators must notify their line manager immediately of any event that might change their driver's license status.
- C. Personnel shall not operate a motor vehicle on Company business when they are in such a mentally or physically impaired condition that they are not able to properly operate the vehicle in a safe manner. This includes conditions such as operating a vehicle while under the influence of drugs, medicines, or alcohol, or when under conditions of extreme stress, fatigue, or any other physical or mental impairment that may hinder safe vehicle operation.
- D. BPWE employees and resident contractors who operate rental, company or personal vehicles on behalf of BPWE must be in a driving safety program operated by their employer which ensures the following conditions are met:
 - Be in possession of, and show at time of issue of vehicle, a valid driver's license appropriate for the class of vehicle being operated.
 - Agree to participate in and complete a BP-provided or BP-approved defensive driving course within 6 months of being assigned to operate a vehicle on behalf of BPWE (see Attachment 7). Note: any defensive driving course other than the one listed in Attachment 7 must be approved by the BPWE HSSE Director.
 - The vehicle is included in a formal preventative maintenance and inspection program.
- E. Non-resident contractors shall agree to adopt this driving safety procedure or a similar procedure that ensures the requirements of this procedure are met.

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5.6 Pre-trip Inspection and Planning

- A. Prior to use of any motor vehicle on Company business, a pre-trip vehicle inspection must be conducted.
- B. The operator should walk around the vehicle's exterior and look for potential safety hazards such as cracked windshields, missing mirrors, defective tires, and other vehicle body damage or defects. For Company vehicles and rental vehicles, exterior and/or interior defects should be reported to the responsible Line Manager.
- C. Operators should familiarize themselves with interior features and controls and make appropriate adjustments, e.g., seat, mirrors, necessary to assure safe operation.

5.7 Operator Distractions

- A. A major cause of motor vehicle accidents is distractions such as cell phone use, tuning the radio, map reading, eating, etc. Motor vehicle operators shall avoid any activity or distraction that may prevent safe motor vehicle operation.
- B. Drivers are **prohibited from using a cell phone or two-way radio**, whether it is BPWE-provided or personal, while operating a motor vehicle on Company business.
 - 1. This applies to both hands-free and non-hands-free devices.
 - 2. If the use of such a device by the motor vehicle operator is necessary, it is only allowed when the motor vehicle is stationary and in a safe location off the roadway.
- C. Passive listening to necessary communication by two-way radio is allowed provided that the driver neither has to divert attention from driving, nor respond to the communication while driving.

5.8 Accident Reporting

- A. All accidents involving a Company or Personal Vehicle being used on Company business must be reported by the vehicle operator to their immediate supervisor , ***no matter how minor the incident.***
- B. All accidents involving a Company Vehicle, Personal Vehicle, or Third Party Vehicle occurring on a BPWE operated site must be reported by the vehicle operator to their immediate supervisor and to BP site management.
- C. For vehicle accident reporting, incident investigation, and other necessary requirements, please refer to the BPWE Incident Reporting Procedure.
- D. A vehicle accident form has been added to this procedure (see Attachment 4).

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6.0 Training

- 6.1 All BPWE employees who are required to drive a vehicle on work related business must complete a “recognized defensive driving course” every three years (see Attachment 7). Note: Any defensive driving course other than the one listed in Attachment 7 must be approved by the BPWE HSSE Director.
- 6.2 All new hires are expected to complete the training within six months of hire date.
- 6.3 All BPWE employee “driver training” will be documented through the learning management system (VTA).
- 6.4 Contractors are required to maintain their driver training documentation and provide it to BPWE Line Managers upon request for audit or inspection purposes.

7.0 Auditing

- 7.1 The requirements called for in this procedure are subject to periodic inspection by the BP site manager (Facility/Project) and annually during the BPWE site specific audit.
- 7.2 This procedure shall be audited (and updated when necessary) at a minimum of every three years.

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8.0 Exhibits

Attachment 1 - Vehicle Safety Specifications

All vehicles driven on **company business** (including personal vehicles) should have the following attributes and/or safety features recommended in the BP Driving Safety Standard.

Indicate all specifications below that are applicable to your vehicle.

Yes No N/A

- | | | |
|--------------------------|--------------------------|--|
| <input type="checkbox"/> | <input type="checkbox"/> | Anti-lock brakes – consult owner's manual or look for an ABS indicator light on the instrument panel |
| <input type="checkbox"/> | <input type="checkbox"/> | Air Bag – driver side as a minimum |
| <input type="checkbox"/> | <input type="checkbox"/> | Brake Lights (rear) – left, right and eye level central mounted third stop light |
| <input type="checkbox"/> | <input type="checkbox"/> | Bull Bars Guards (metal) – Not permitted. These are heavy metal guards around the fenders of Off Road Vehicles. If metal bull guards are present, the vehicle will be considered non-compliant. |
| <input type="checkbox"/> | <input type="checkbox"/> | Emergency Lights (front & rear)-flashing emergency Breakdown lights |
| <input type="checkbox"/> | <input type="checkbox"/> | Head Restraints – driver & passenger front seats at a minimum. Head restraints for rear seats are strongly recommended |
| <input type="checkbox"/> | <input type="checkbox"/> | Mirrors – outboard driver & passenger side and internal rear view mirror |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> Rear fold down seat locking mechanism - ensure fold down & removable seats can be secured in place |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> Rollover Protection – Open-top vehicles must be fitted with rollover protection |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> Safety Screens/Bars & Load constraint features – Ensure occupants are protected from shifting cargo by safety screen/bars, tie-down points, or safety netting |
| <input type="checkbox"/> | <input type="checkbox"/> | Seat Belts – Specify three point/diagonal seatbelts for front and rear outboard seats. Specify lap belts for all other seats as a minimum. |
| <input type="checkbox"/> | <input type="checkbox"/> | Side impact protection – side impact bars which are internal to door structure and padded internal door panels free from raised or hard surfaces. Federal Requirement on all U.S. sold vehicles as of January 1, 1973 (Federal Motor Vehicle Safety Standards and Regulations No. 214) |
| <input type="checkbox"/> | <input type="checkbox"/> | Steering wheel and column – padding on wheel spokes and hub with wheel securing nut set deep into the hub, and collapsible columns. Federal Requirement on all U.S. sold vehicles as of January 1, 1973 (Federal Motor Vehicle Safety Standards and Regulations No. 204) |
| <input type="checkbox"/> | <input type="checkbox"/> | Tires – radial tires with a minimum tread depth of 1.6mm (2/32nd inch) across 75% of the width of the tire. Tires must be fit for purpose, terrain and season (i.e., off-road vs. on road, all-terrain, winter driving) |
| <input type="checkbox"/> | <input type="checkbox"/> | Vehicle Condition / Maintenance – Follow preventive maintenance schedule in accordance with manufacturer requirements and document compliance. A current emissions or vehicle inspection sticker will satisfy this requirement. In the absence of such programs, this signed Self-Verification form will serve as documentation of the employee's assurance that the vehicle in question is maintained in accordance with the manufacturer's recommendations or some other fit-for-purpose maintenance program. |
| <input type="checkbox"/> | <input type="checkbox"/> | Vehicle Mass – Vehicle must weigh more than 1000 kg or 2200 lbs (curb weight). Vehicle weight can often be found on a metal data plate affixed to the inside driver door |
| <input type="checkbox"/> | <input type="checkbox"/> | Windscreens/Windshields and Windows - Specify laminated glass windscreens / windshields and tempered glass side and rear windows |

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Attachment 2: Pre-Trip Assessment Guidance

Purpose and Scope

A pre-trip assessment should be performed by the driver and/or passengers before driving an affected vehicle. The driver and/or passengers of the vehicle should use this **mental checklist** before each trip.

Weather Conditions

What are the weather conditions?

- Is it raining, snowing, icing, etc? If so, is the **trip necessary right now**, or should I wait?
- Will I **need extra equipment/preparation** for the weather? (Raincoat, umbrella, sand, survival kit, snow/mud tires, chains, scraper, etc?)

Driver Conditions

What is the driver's (or my) condition?

- Am I **licensed and competent** to drive this particular vehicle?
- Do I have **adequate time** to make this trip safely without being rushed? (If not, consider having someone else make the trip for you, putting off the trip until another time, or postponing the after-trip plans.)
- Am I '**conditionally right**' to drive this vehicle? (Alert, not under the influence, 20/20 vision, mentally and emotionally stable, not fatigued or tired, etc.)
- Do I remember the 5 Keys to Defensive Driving;
 1. Aim high in steering,
 2. Keep your eyes moving,
 3. Make sure they see you,
 4. Get the big picture and
 5. Leave yourself an out?

Route Conditions

What are the route conditions?

- Do I know where I am going and how to get there?
- Do I need a map or directions and need to study or plan the route?
- What are the known or foreseeable hazards of this particular route and how can I eliminate or minimize them? (For example, dangerous intersections, high speed limits, rush hour, no shoulders, two-lane, hills/curves, farm machinery, etc.)

Vehicle Conditions

What is the condition of the vehicle?

- Current inspection sticker and automobile registration,
- Seatbelts (working and enough for number of passengers),
- Tires inflated with correct pressure and have correct tread depth,
- Working wipers in good condition,
- Breaking and blinker lights working and clean,
- Clear/unobstructed vision, adjustment of mirrors,

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- Oil, fuel and window washer fluid level,
- Is the vehicle appropriate for the task,
- Working horn,
- Size and type for passengers and
- Size and type for the cargo?

Cargo Passenger Conditions

What are the cargo/passenger conditions?

- Do **all** passengers have access to working seatbelts/shoulder harnesses?
- Are **all** passengers buckled up before vehicle is put into motion?
- Are **all** cargo and/or potential 'projectiles' properly secured?
- Does cargo require special provisions? (Such as hazardous waste, cylinders, animals, pipe, instrumentation, etc.)

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Attachment 3: Vehicle Inspection Checklist

Line Manager: _____ Date Inspected: _____

Vehicle Description & License #: _____

Vehicle Mileage: _____

Item	OK	N/A	Needs Repair (yes/no)	Comments (describe & assign action if repair is needed)
Vehicle Registration				
Valid License Plates				
Insurance information (self)				
Tires (Inflation, tread depth)				
Seat Belts				
Operator's Manual				
Maintenance Records				
Springs				
Shocks				
Exhaust System				
Engine				
Steering				
Horn				
Mirrors				
Mobile Radio				
Fire Extinguisher				
Brakes working				
Parking Brake				
Windshield Wipers				
Windshield				
Washers				
Headlights: Hi/Lo				
Turn Signals				
Brake Lights				
Backup Lights				
Instrument Lights				
Tail Lights				
Body Condition				
Backup Alarm				

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Attachment 4: Vehicle Accident Form (two pages)



Submit form to BP Site Manager: print a copy or complete electronically *

Please contact BP HSSE Advisor with any questions.

* this form can be filled-in electronically as a Word template - diagram on back of form must be completed by hand

Vehicle Accident Report

Note: Distribution per Vehicle Accident Reporting Instructions
Applicable to the Site Where the Vehicle Accident Occurred.
If accident involves non-BP personnel, telephone BP Site Manager
Immediately

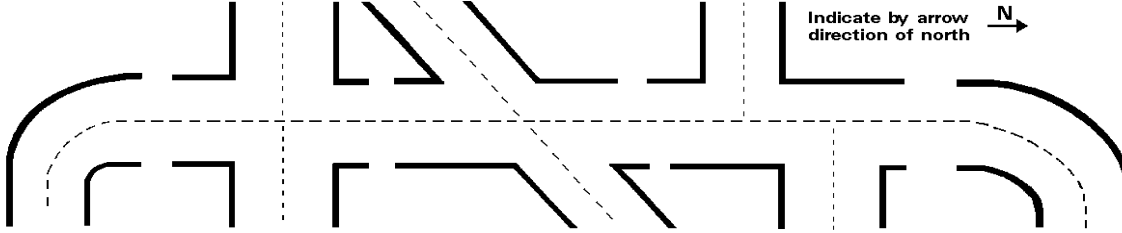





Case Number

To be Completed by Employee

*** = Mandatory Field**

* Site/ Facility/ Location		Operation (Development/Construction/Operations)		Supervisor's Phone No. (incl. area code)		
Facility Name		Facility Street Address/City/State/Country				
Personal Information			<input type="radio"/> Contractor Firm: <input type="radio"/> Employee <input type="radio"/> Other		* Employee ID/SSN	
* Last Name	* First	Middle	Birth Date (d / m / y)			
Title		Gender	<input type="radio"/> Male <input type="radio"/> Female		Married <input type="radio"/> Yes <input type="radio"/> No	
Date Hired (d / m / y)		Home Phone (include area code)		Work Phone (include area code)		
Home Address		City		State/Province		
ZIP/Postal Code & Country		<input type="radio"/> Salaried <input type="radio"/> Hourly <input type="radio"/> Casual		<input type="radio"/> Full-Time <input type="radio"/> Part-Time		
Main Input 1						
* Date (d / m / y)	Time	<input type="checkbox"/> a.m. <input type="checkbox"/> p.m.	Did injury occur on overtime?	Shift From	To	
Have Police been Notified? (attach report if possible)		Department or Badge Number				
<input type="radio"/> Yes <input type="radio"/> No						
Citation Issued		<input type="radio"/> Company Driver <input type="radio"/> Other Driver(s) <input type="radio"/> Both <input type="radio"/> None		Citation Type		
Were Persons Injured During the Accident? <input type="radio"/> Yes <input type="radio"/> No (complete same information for each person injured)						
Injuries	Name		Address			
	Age	Injury Location	Employee Code			
	<input type="radio"/> Other Vehicle <input type="radio"/> Operator's Vehicle <input type="radio"/> Pedestrian		<input type="radio"/> Employee <input type="radio"/> Contractor <input type="radio"/> Non-Employee			
	Extent of Injuries					
Were There Damages to Others' Property? <input type="radio"/> Yes <input type="radio"/> No (if more than one, attach additional sheets)						
Damage to Others' Property	Make		Model	Year	Type	License Number
	Owner		Owner's Phone (include area code)		Owner's Address	
	Vehicle Operator		Operator's Phone (include area code)		Operator's Address	
	Is other damaged vehicle or property insured?		Name of Insurance Company & Policy Number			Estimated Cost of Repairs
	<input type="radio"/> Yes <input type="radio"/> No					
Description of Damage						
Witnesses? <input type="radio"/> Yes <input type="radio"/> No						
Witnesses	Name		Address			
	Statement					

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Main Input 2 * = Mandatory Field					
* Complete Description of Incident - Include Location					
Statements (after the accident, what was said and by whom?)					
Vehicle Information 1 Motor Vehicle Information (if more than one vehicle involved, attach additional sheet)					
Make	Model	Year	Unit/ID Number	License Number	State/Province & Country
Vehicle Type	Vehicle Class	Driver's License Number		Expiration Date (d / m / y)	
Owner of Vehicle	Owner's Address				Other Insurance
Name of Operator	Operator's Address				Operator's Phone (include area code)
For what purpose was the vehicle being used at the time of the accident?					
Where may the vehicle be seen? (address)					
Vehicle Occupied? <input type="radio"/> Yes <input type="radio"/> No					
If Yes <input type="checkbox"/> Seat belt used by driver? <input type="radio"/> Yes <input type="radio"/> No					
Passenger(s) in vehicle? <input type="radio"/> Yes <input type="radio"/> No If Yes, seat belts used by passenger(s)? <input type="radio"/> Yes <input type="radio"/> No					
Estimated Cost of Repairs	Vehicle Speed (before braking)	Posted Speed Limit	Speed of Other Vehicle		
	<input type="checkbox"/> miles <input type="checkbox"/> kilometers	<input type="checkbox"/> miles <input type="checkbox"/> kilometers	<input type="checkbox"/> miles <input type="checkbox"/> kilometers		
Complete the following diagram showing direction and positions of vehicles involved, injured parties, witnesses, designating clearly point of contact					
					
Instructions:					
(1) Use solid line to show path of vehicle before accident →  (5) Show railroad by -+-----+ (6) Show location of traffic control, if any.					
(2) Number each vehicle and show direction of travel →  (7) Indicate distances in feet.					
(3) Show motorcycle by  (8) If street or view obstructed, indicate how obstructed.					
(4) Show pedestrian by 					
Vehicle Information 2					
Accident Scene (check appropriate number for each section)					
(10) Vehicle Type 1. <input type="checkbox"/> Passenger Car 2. <input type="checkbox"/> Pickup 3. <input type="checkbox"/> Truck 4. <input type="checkbox"/> Van 5. <input type="checkbox"/> Other					
(15) Road Conditions (select a maximum of three) 1. <input type="checkbox"/> Dry 2. <input type="checkbox"/> Dusty 3. <input type="checkbox"/> Muddy 4. <input type="checkbox"/> Rough 5. <input type="checkbox"/> Smooth 6. <input type="checkbox"/> Snow or ice 7. <input type="checkbox"/> Wet 8. <input type="checkbox"/> Other	(20) Road Composition 1. <input type="checkbox"/> Black top 2. <input type="checkbox"/> Concrete 3. <input type="checkbox"/> Dirt 4. <input type="checkbox"/> Shale/Gravel 5. <input type="checkbox"/> Board 6. <input type="checkbox"/> Other	(25) Light Conditions (select a maximum of two) 1. <input type="checkbox"/> Dark 2. <input type="checkbox"/> Dawn 3. <input type="checkbox"/> Daylight 4. <input type="checkbox"/> Dusk 5. <input type="checkbox"/> Overcast (including rain or fog) 6. <input type="checkbox"/> Road lighted 7. <input type="checkbox"/> Other	(30) Weather Conditions (select a maximum of two) 1. <input type="checkbox"/> Clear 2. <input type="checkbox"/> Fog, haze, or smoke 3. <input type="checkbox"/> High wind, tornado, hurricane 4. <input type="checkbox"/> Rain, drizzle, thunderstorm 5. <input type="checkbox"/> Snow, hail, or sleet 6. <input type="checkbox"/> Other	(40) Type of Road 1. <input type="checkbox"/> Private property/ lease road 2. <input type="checkbox"/> Rural 3. <input type="checkbox"/> City street 4. <input type="checkbox"/> Highway 5. <input type="checkbox"/> Other	(45) Road Configuration (select a maximum of three) 1. <input type="checkbox"/> Curve 2. <input type="checkbox"/> Hill 3. <input type="checkbox"/> Straight 4. <input type="checkbox"/> Intersection 5. <input type="checkbox"/> Intersection (angle) 6. <input type="checkbox"/> Other
(36) Temperature <input type="checkbox"/> C <input type="checkbox"/> F					
Date of Report (d / m / y)		* Signature of Vehicle Operator 		Immediate Supervisor Supervisor in Charge	

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Attachment 5: Journey Management Plan (Example)

Job/Task: Operation of motor vehicle on company business

Date: _____

Steps of Task	Potential Hazard	Safe Plan	Resources
1 Store luggage in trunk. Secure loose material. Verify spare tire, jack, and tools.	Trunk lid may have been opened by others, creating hazard. Loose material in vehicle may strike occupants during an unanticipated driving incident.	Store luggage and material in trunk. Lift luggage with back in neutral position and prevent reaching too far with load. Assure presence of spare tire, jack, and tools. Check trunk lid to be sure closed.	Driver, spare tire, jack tools
2 Check vehicle's body and tires. Check behind and around vehicle for obstacles.	Damage to vehicle that would affect its safe operation. Obstacles may not be visible from driver's position.	Walk around vehicle, check tires, check for defects, and check for obstructions behind and around vehicle. Pull forward; avoid backing when possible.	Driver
3 Examine windows and mirrors for visibility obstruction(s). Assure adequate window washer fluid.	Snow, ice, mud, etc. can obscure visibility.	Remove ice, snow, mud, etc. Drive only after fog, ice, snow, or mud is removed from windows and mirrors. Use ventilation system set to outside air versus recirculated air. Adjust temperature for comfort.	Driver, scraper, adequate supply of windshield washer fluid
4 Buckle seat belts.	Unsecured driver or passenger(s)	Buckle seat belt(s) prior to starting vehicle	Seat belt
5 Adjust seat and mirror(s).	Disruption to driver. Driver unable to see side and rear views properly	Adjust seat prior to starting vehicle. Adjust mirror(s) to eliminate blind spots prior to starting vehicle.	Driver
6 Identify switch for headlights, wind shield wipers, radio, etc.	Disruption to driver attempting to locate while driving	Locate and adjust switches prior to starting vehicle.	Driver & vehicle manual
7 Turn off mobile phone or give to passenger to answer.	Distraction to driver	Driver use of cell phone prohibited. If no passenger to answer call, stop in a safe area to call.	Driver & passenger
8 Review map. Plan travel route.	Sudden lane changes can cause collisions. Reading map is distraction.	Review map and ask directions if needed. Memorize road names or numbers. Have a passenger read map.	Map & passenger
9 Start vehicle.	Vehicle moving while starting	Be sure foot is on the brake and vehicle is in park or neutral (std shift), then start vehicle.	Driver & passenger
10 Follow defensive driving rules.	Other drivers not following the rules	Use three-second-following rule, look both ways before entering intersection, etc.	Defensive driver training

Driver's Name Printed: _____ **Driver's Signature:** _____

1. Write name of job at top of form. 2. Write steps of task in a safe sequence. 3. List all possible hazards involved with each step. 4. In the Safe Plan column, state actions that will be taken to eliminate the hazards. 5. In Resources column, list necessary equipment, tools, etc. 6. Ask each passenger, who helped develop and will use JMP, to sign it. 7. If conditions change or a deficiency in the plan is discovered, the current JMP must be modified or a new JMP created. 8. Review JMP at the end of the task for improvements and submit to supervisor, as appropriate.

Driving Safety Procedure**Attachment 6: Journey Management Plan (JMP)**

Job/Task: _____

Date: _____

Steps of Task	Potential Hazard	Safe Plan	Resources

Driver's Name Printed _____ Driver's Signature _____

1. Write name of job at top of form. 2. Write steps of task in a safe sequence. 3. List all possible hazards involved with each step. 4. In the Safe Plan column, state actions that will be taken to eliminate the hazards. 5. In Resources column, list necessary equipment, tools, etc. 6. Ask each passenger, who helped develop and will use JMP, to sign it. 7. If conditions change or a deficiency in the plan is discovered, the current JMP must be modified or a new JMP created. 8. Review JMP at the end of the task for improvements and submit to supervisor, as appropriate

Driving Safety Procedure

Attachment 7: National Safety Council Defensive Driving - Login Instructions

New Students:

1. Go to www.safetyserve.com/bpwind/
2. Click on “**New Student**” and then click “**New Student Registration**”.
3. Type in “**bpwind**” as your ACCESS CODE and click on “**Submit**”.
4. You will be presented with a registration page. Type in your information, including a Login ID and a password of your choice. Click on the “**Submit**” button. (Please note – you will receive a confirming email reminding you of the login ID and password you created for access to the site at a later date as a Returning Student. ***Do not register again as a New Student.***)
5. You will be presented with the “My Place” page. Click on **Safety** and then click on **NSC Defensive Driving 8.2** under available courses to begin the course.

Returning Students:

1. Go to www.safetyserve.com/bpwind/
2. Click on “**Returning Student**” button.
3. Type in your Login ID and your password, created by you during registration, and click on “Login”.

***Certificate of Completion** – In many states, individuals who complete a recognized defensive driving course may qualify for a discount on their automotive insurance policy. Check with your agent to see if you qualify for a discount.

Driving Safety Procedure

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