

# DIOCESE OF DES MOINES

## VEHICLE AND DRIVER SAFETY POLICY

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**PURPOSE:** The purpose of this policy is to ensure that all of the various entities that are part of the Diocese of Des Moines are following the same procedures regarding the use of vehicles on behalf of the Church. Our priority is to provide for the safety of the drivers and the passengers. It is recommended that the number of drivers be limited and that they be adequately screened. This policy applies to all employees and volunteers who are required or expected by their responsibilities to operate a vehicle.

All Church entities will implement the following policy regarding Drivers, the Use of Private Vehicles, Vehicle Maintenance, Vehicle Safety, Accident Reporting, Record Keeping, and the Use of 11-15 Passenger Vehicles

### I. DRIVERS

#### A. All Operators

1. Drivers must be 21 years of age or older.
2. A driver must have a valid, non-probationary driver's license and no physical disability that would impair his/her ability to drive the vehicle safely.
3. Operators must possess a current valid driver's license for the type of vehicle they will be operating.
4. No operator will be hired or be allowed to provide volunteer transportation on behalf of any Church entity who has had any of the following citations or convictions in the past three years:
  - a. operating a vehicle during a period of license suspension, revocation or forfeiture
  - b. driving under the influence of alcohol or drugs
  - c. hit and run accident
  - d. failure to report an accident
  - e. negligent homicide arising out of the use of a motor vehicle
  - f. using a motor vehicle for the commission of a felony
  - g. operating a motor vehicle without the owner's authority
  - h. permitting an unlicensed person to drive
  - i. reckless driving
  - j. a combined total of three or more accidents and/or moving violations
5. It is the responsibility of the operator to ensure that passengers adhere to the current State of Iowa safety belt laws and regulations.
6. All operators are expected to take **and pass with 70% accuracy** the online defensive driving course Be Smart-Drive Safe. <http://www.cmgdrivesafe.com/>

## B. Employee Operators

1. Vehicles owned by the diocese cannot be used for personal use without authorization.
2. A copy of the **Motor Vehicle Record (MVR)** for the last 3 years from each state where he/she has ever had a valid driver's license is required and will be obtained in the background check process.

## C. Volunteer Operators

1. Any volunteer who drives on a regular basis for Church business must complete the **Volunteer Driver Application** (Appendix A) and the background check form. Please retain the Volunteer Driver Application in your office.
2. A copy of the Motor Vehicle Record (MVR) for the last 3 years from each state where he/she has ever had a valid driver's license is required and will be obtained in the background check process.
3. Potential drivers should not be utilized if they answered "YES" to any of the questions asked on the Volunteer Driver Application.

## II. Use of Private Vehicles

- A. All privately owned vehicles used on behalf of the Church must be insured. They must have a valid and current registration, license plates and proof of insurance card.
- B. The vehicle must be in safe operating condition.
- C. The private automobile insurance company of the owner of the vehicle will be the primary insurance carrier.
- D. The minimum liability limit for privately owned vehicles is: \$100,000/\$300,000.
- E. A **Private Vehicle Use Application** (Appendix B) must be completed for each vehicle.

## III. Organization Owned Vehicle Maintenance

- A. Each institution will implement a quarterly vehicle maintenance and inspection program in addition to the manufacturers' operation and maintenance recommendations for all vehicles that they own.
- B. All Church owned vehicles must be equipped with a road safety kit and inspected fire extinguisher
- C. Cell phones and other electronic devices are not permitted to be used while operating a motor vehicle on behalf of the Church.

## IV. Accident Reporting

If an accident occurs:

- A. Obtain medical assistance, if needed, **at the scene** as soon as possible.
- B. Contact local police, sheriff or highway patrol authorities as required.
- C. Exchange driver, vehicle and insurance information.
- D. Report the accident/moving violation to the insurance agent.
- E. Report the accident/moving violation to the Church/School.

F. Complete the **Vehicle Accident Report** (Appendix C).

V. Record Keeping

- A. Records pertaining to driver selection and training should be kept on file for a period of three years following termination of their driving privileges.
- B. Vehicle maintenance logs and vehicle inspections, must be maintained for the duration of ownership of Church owned vehicles.
- C. All organization owned vehicles must carry, at all times, a current **vehicle proof of insurance identification card**.
- D. Retention of Forms:
  - Appendix A: Volunteer Driver Application*, retain for a minimum of 3 years
  - Appendix B: Private Vehicle Use Application*, retain for a minimum of 3 years
  - Appendix C: Vehicle Accident Report*, retain for 7 years from date of accident

VI. Use of 11-15 Passenger Vehicles

The attached policy (Appendix D) must be followed with respect to the use of vehicles that can transport 11-15 passengers.

*Approved by the Presbyteral Council on February 14, 2013*

*Approved by the Diocesan Finance Council on February 19, 2013*

*Approved and implemented by Bishop Richard Pates on March 28, 2013.*

## VOLUNTEER DRIVER APPLICATION

We greatly appreciate your interest in assisting us to meet our transportation needs. Responsible risk management dictates that we ask our volunteer drivers to answer the following questions. Thank you for your understanding and cooperation.

Name:	_____
Address:	_____
City/State/Zip:	_____
Telephone:	_____
Date of Birth:	_____
Email:	_____
Driver's License Number:	_____
State of Issue:	_____
Expiration Date:	_____

**Have you had any of the following citations or convictions in the past THREE years?**

	<b>YES</b>	<b>NO</b>
Driving under the influence of alcohol or drugs	_____	_____
Hit and run	_____	_____
Failure to report an accident	_____	_____
Negligent homicide arising out of the use of a motor vehicle	_____	_____
Using a motor vehicle for the commission of a felony	_____	_____
Permitting an unlicensed person to drive	_____	_____
Reckless driving	_____	_____
Three moving violations or accidents in the last three years	_____	_____

Are you currently taking any medication that may make you drowsy? **YES NO**

**It is expected that all passengers will adhere to Iowa Safety belt laws and regulations.**

I certify that the information given above is true and complete to the best of my knowledge. I agree that I will refrain from using a cell phone or any other electronic device while operating a vehicle on behalf of the Church. **I agree to notify you if any of the above information changes.**

\_\_\_\_\_  
Volunteer Signature

\_\_\_\_\_  
Date

RETAIN THIS FORM ON FILE FOR A MINIMUM OF THREE YEARS

## PRIVATE VEHICLE USE APPLICATION

We greatly appreciate your interest in assisting us to meet our transportation needs. Responsible risk management dictates that we ask you to answer the following questions. Thank you for your understanding and cooperation.

Owner's Name: _____
Address: _____
City/State/Zip: _____
Vehicle Year/Make/Model: _____
Vehicle Identification Number: _____
License Plate #: _____

Automobile Insurance Company: _____
Agent's Name: _____
Address: _____
City/State/Zip: _____
Telephone: _____

**PLEASE BE AWARE: In case of an accident, the insurance on this vehicle will be the primary coverage. The vehicle must be insured for the minimum liability limits of: \$100,000/\$300,000.**

**It is expected that all passengers will adhere to the Iowa safety belt laws and regulations. It is the driver's responsibility to ensure this.**

I certify that the information given above is true and complete and that to the best of my knowledge the vehicle is currently in a safe operating condition. I agree to maintain insurance coverage for the liability limits stated above. I agree to notify you if any of the information changes. **I agree to refrain from using a cell phone or any other electronic device while operating a vehicle on behalf of the Church.**

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

RETAIN THIS FORM ON FILE FOR A MINIMUM OF THREE YEARS

**VEHICLE ACCIDENT REPORT**

Driver: \_\_\_\_\_

Date of birth: \_\_\_\_\_

License #: \_\_\_\_\_

Vehicle: \_\_\_\_\_

Year

Make

Model

Vehicle Identification Number: \_\_\_\_\_

<b>Accident Information</b>	Date: _____ Time: _____ City: _____ State: _____ Street location: _____ Description: _____ _____ Use reverse side if necessary.
<b>Other Vehicle</b>	Year/Make/Model: _____ License plate #: _____ State: _____ Owner's name and address: _____ Driver's name and address: _____ Driver's license #: _____ State: _____ Expiration date: _____ Relationship to owner: _____ Description of damage: _____ _____ Insurance company: _____ Phone #: _____ Policy #: _____ Expiration date: _____
<b>Injuries</b>	Name _____ Address _____ _____ Extent of injuries _____ _____ Use the reverse side if necessary.
<b>Witness / Passengers</b>	Name _____ Address _____ _____ Extent of injuries _____ _____ Use the reverse side if necessary.
<b>Other Property Damage</b>	Owner's name _____ Address _____ _____ Extent of damage _____ _____ Use the reverse side if necessary.

USE REVERSE SIDE TO PROVIDE A DIAGRAM OF THE SCENE

\_\_\_\_\_  
Signature\_\_\_\_\_  
Date

RETAIN THIS FORM ON FILE FOR A MINIMUM OF 7 YEARS FROM THE ACCIDENT

## CATHOLIC UMBRELLA POOL II

### 11 to 15 Passenger Van, Bus and Shuttle Use Policy

Effective July 1, 2003, Catholic Umbrella Pool II adopted the following policies governing the use of 11 to 15 passenger vans (whether owned, leased, or borrowed).

1. The use of non-owned (borrowed) or short-term leased 11 to 15 passenger vans to transport children or adults is prohibited.  
11 to 15 passenger vans may be used for cargo hauling **only if** all but the two front seats are removed.
2. 11-15 passenger vans can be replaced with either a school bus or a Multifunction School Activity Bus (MFSAB). A MFSAB is a vehicle which complies with the Federal Motor Vehicle Safety Standards (FMVSS) applicable to school buses for crash survivability and mirrors.
3. If a MFSAB is used for the transportation of children, these vehicles **must** meet FMVSS 111; FMVSS 220; FMVSS 221; and FMVSS 222 (see below). If purchasing a MFSAB to transport children, it is important to confirm with the seller that the vehicle meets all four FMVSS. There are vehicles that visually appear to be conforming, but are not.
4. When acquiring a bus or shuttle to transport adults, the four FMVSS should also be followed. However, CUP II may approve adult transportation for a nonconforming bus or shuttle that meets at least two of the FMVSS's in limited circumstances. Requests for exceptions be submitted to Catholic Mutual.
5. Although MFSAB's are preferred, mini-vans may continue to be used to transport children or adults. A mini-van is defined as a passenger vehicle **designed** to transport no more than **8** total occupants.

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Below are the four FMVSS referred to in the above policy. Additional information on how to determine if a bus or shuttle meets FMVSS standards can be obtained from Catholic Mutual's Risk Management Department at (800) 228-6108.

FMVSS 111 – Fulfills the safety requirement for the rear-view and cross-view visibility.

FMVSS 220 – Establishes requirements for the school bus body structure in rollover accidents.

FMVSS 221 – Regulates the strength of body panel joints in school buses.

FMVSS 222 – Establishes occupant protection requirements for school bus passenger seating and barriers.

**Important Note:**

***Vans, Buses, and Shuttle Buses capable of transporting 16 plus passengers must also comply with the above FMVSS. As outlined in number six of the above policy, exceptions can be made if the vehicle is used solely for the transport of adults.***