

Company Driver

HEALTH & SAFETY CHECKLIST

Company

Name of Driver

Description of Vehicle

Vehicle Registration

Management

| | YES | NO | N/A | COMMENTS |
|--|--------------------------|--------------------------|--------------------------|----------------------|
| The driver has been instructed to inform the employer of any amendments to the licence. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="text"/> |
| The driver is made aware of the company's zero tolerance policy towards drink driving. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="text"/> |
| The driver has suitable insurance cover.* | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="text"/> |
| The driver has a copy of the company handbook/driver rules.** | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="text"/> |
| The driver is aware that they must report any conditions that could affect their driving ability.*** | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="text"/> |
| Guidance has been provided to the driver on acceptable driving hours in order to minimise fatigue. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="text"/> |
| The driver has been issued with clear instructions regarding mobile phone usage. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="text"/> |
| Changes to road traffic legislation are brought to the attention of the driver. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="text"/> |
| If the driver handles loads, they have been given manual handling training. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="text"/> |
| The driver carries out regular pre-journey checks, particularly before making long journeys, e.g. tyres, windscreen, lights, brake fluid, washer bottle levels and other safety items. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="text"/> |
| Records have been retained of the pre-journey checks. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="text"/> |
| Clear road traffic accident and emergency procedures have been provided to the driver. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="text"/> |

| | YES | NO | N/A | COMMENTS |
|--|--------------------------|--------------------------|--------------------------|----------------------|
| Clear instructions have been given to the driver with regard to adverse weather conditions. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="text"/> |
| Breakdown cover is provided and relevant details are retained by the driver. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="text"/> |
| If appropriate, the driver has been given personal security training.**** | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="text"/> |
| Clear instructions have been provided to the driver regarding journey planning (e.g. allocating extra time to allow for breaks and to minimise driver stress and fatigue). | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="text"/> |

The Vehicle

| | | | | |
|---|--------------------------|--------------------------|--------------------------|----------------------|
| The vehicle has been serviced as per the manufacturer's recommendations. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="text"/> |
| The vehicle is subject to MOT tests, with any necessary repairs carried out. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="text"/> |
| If the vehicle is considered smoke-free under applicable legislation, suitable "No Smoking" signs are displayed.***** | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="text"/> |

Ergonomics

| | | | | |
|---|--------------------------|--------------------------|--------------------------|----------------------|
| The driving workstation is set up correctly. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="text"/> |
| The driving workstation is clear and uncluttered. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="text"/> |
| Does the driver suffer from any problems that may be driving related, e.g. back pain, pain in the limbs and joints, neck pain, numbness or loss of feeling in the hands, etc? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="text"/> |

The Driver

| | | | | |
|--|--------------------------|--------------------------|--------------------------|----------------------|
| The driver holds an appropriate, valid driving licence. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="text"/> |
| The driver is not suffering from any condition that may affect their driving ability, e.g. heart condition or epilepsy. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="text"/> |
| The driver has sufficient driving experience (e.g. number of years since passing test, advanced driving/ defensive driving courses, etc) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="text"/> |

Notes

- * Drivers using their own vehicle for work activities must have the vehicle insured for business use.
- ** The Policy should include adherence to speed limits and the Highway Code, use of mobile phones, smoking in company vehicles, personal security (e.g. leaving items and equipment out of view, locking doors, etc).
- *** The use of medication such as antihistamines (commonly used to control hay fever) and some proprietary cold cures may induce drowsiness. The label of the medication should state if it is unsafe to drive when taking it.
- **** Personal security training should be given to drivers who handle money, valuable goods, etc.
- ***** Generally any vehicle that is used by more than one person or carries passengers (including taxis) will be considered smoke-free. Smoking is allowed in a company car that is provided for the sole use of the driver.