

Driving at Work – Managing Work Related Road Safety

Health and safety law requires employers to ensure so far as reasonably practicable the health, safety and welfare of all employees and to safeguard others who may be put at risk from their work activities. This includes when they are undertaking work related driving activities.

Name	Date
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A. Competency

Do you hold a current driving licence?	Yes / No
Date of passing test	___/___/___
Has the validity of the driving licence been checked by your line manager?	Yes / No
Does the job require anything more than a current driving licence, valid for the type of vehicle to be driven?	Yes / No
Are you aware that you must drive within the constraints of the law and the Highway Code?	Yes / No

B. Training

If necessary, have you received training on any specialist vehicles that may be used during the course of your duties?	Yes / No
Have you been trained to carry out routine safety checks such as those on lights, tyres and wheel fixings?	Yes / No
Do you know how to correctly adjust safety equipment, eg seat belts and head restraints?	Yes / No
Do you know how to use anti-lock brakes (ABS) properly?	Yes / No
Do you know how to check washer fluid levels before starting a journey?	Yes / No
If applicable, do you know how to ensure safe load distribution?	Yes / No

C. Fitness and Health

Are you medically fit to drive?	Yes / No
Are you able to satisfy the eyesight requirements set out in the Highway Code? (read the number plate of a parked vehicle from 20 metres)	Yes / No
Are you aware that you should not drive whilst taking a course of medicine that might impair your judgement? In cases of doubt you should seek the view of your GP.	Yes / No
Are you aware of the dangers of fatigue?	Yes / No
Do you know what to do if you start to feel sleepy?	Yes / No

D. The Vehicle

If the vehicle you are driving is over 3 years old, does it have a valid MOT certificate?	Yes / No
Are windscreen wipers inspected regularly and replaced as necessary?	Yes / No
Do you carry out basic safety checks (eg tyres, lights?)	Yes / No
Is the safety equipment appropriate and in good working order?	Yes / No
Are seatbelts and head restraints fitted correctly and do they function properly?	Yes / No
Do you know what action you should take if you consider your vehicle unsafe and who you should contact?	Yes / No
If you are using a privately owned vehicle for work purposes, is it adequately insured?	Yes / No