

CUSTOMER FLEET HEALTHCHECK

NAME _____

JOB TITLE _____

COMPANY NAME _____

TYPE OF BUSINESS _____

EMAIL ADDRESS _____

- 1 What is your fleet size?
- 2 How many cash takers do you have?
- 3 How many employees use their own vehicles for business?
- 4 Name of person responsible for Health and Safety and risk management?

- | | YES | NO |
|--|-----------------------|-----------------------|
| 5 Do you have a senior member of staff committed to implementing and monitoring a risk management program, incorporating road risks? | <input type="radio"/> | <input type="radio"/> |
| 6 Is a member of your organisation up to date with the current legal requirements? | <input type="radio"/> | <input type="radio"/> |
| 7 Do you have detailed company car policy? | <input type="radio"/> | <input type="radio"/> |
| 8 Has this policy been reviewed within the last twelve months? | <input type="radio"/> | <input type="radio"/> |
| 9 Do you have a policy in relation to road risks setting out your objectives? | <input type="radio"/> | <input type="radio"/> |
| 10 If yes is this clearly communicated to managers and all levels of staff? | <input type="radio"/> | <input type="radio"/> |
| 11 Do you hold information on your drivers including age, experience, accident record, etc? | <input type="radio"/> | <input type="radio"/> |
| 12 Do you carry out a detailed assessment of new starters? | <input type="radio"/> | <input type="radio"/> |
| 13 Do you have a procedure in place to carry out risk assessments on all aspects of your use of roads including journey planning, vehicle and driver safety? | <input type="radio"/> | <input type="radio"/> |
| 14 Have the members of staff carrying out these assessments been trained in this area? | <input type="radio"/> | <input type="radio"/> |
| 15 Are areas of concern highlighted to senior members of staff and acted upon? | <input type="radio"/> | <input type="radio"/> |
| 16 Do you collect data in relation to employees driving patterns? | <input type="radio"/> | <input type="radio"/> |
| 17 Do you record detailed accident data involving all vehicles driven by employees on company business? | <input type="radio"/> | <input type="radio"/> |

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