**JOURNEY MANAGEMENT RECORD FORM**

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| --- | --- | --- | --- | --- |
| **General Information** | | | | |
| **Name of Employee:** | | **Department:** | **Name of Administrative Assistant:** | |
| **Journey Information** | | | | |
| **Date of Departure:** | **Time of Departure:       AM**  **PM** | | | **Plate Number:** |
| **Arrival Location:** | **Estimated Arrival Time:       AM  PM** | | | **Estimated time of contact with Administrative Assistant       Email  AM  PM  Phone Call** |
| **Number of Passengers:** | **Name of Passengers:** | | | |
| **Hazards** | | | | |
| **Night Driving (Dusk to Dawn) Yes  No  If YES please provide reasons** | | | | |
| **Forecasted Weather Conditions: Good  Fair  Poor** | | | | |
| **Forecasted Road Conditions: Good  Fair  Poor  Road Closed  Construction  Unknown** | | | | |
| **Vehicle in good working order? Yes  No**  **Vehicle Walk around Conducted? Yes  No**  **Any Hazards found? Yes  No** | | | | |

**Planning the Journey**

* Verify the destination
* Decide if the additional stops along the way are necessary
* Choose a departure time,
* Estimate an approximated arrival time

**Evaluating the Hazards**

* Where the journey takes place (busy highway, gravel road, ect)
* Weather and road conditions (snow, rain, construction, ect)
* If any passengers will be in the vehicle
* If the journey is a short or long journey
* What are the consequences if an incident did occur

**Assessing the Risks**

* What is the likelihood of harm?
* What is the severity of harm?
* What is the risk of exposure?

**Implementing Control Measures**

* Decide if delaying the journey is preferable- e.g. if there is a snow storm or heavy rains
* Do not drive fatigued

**Filling Out the “Record of Journey”**

* Form is found in the Health and Safety Manual
* Fill out form completely prior to journey commencing

**Emailing a Copy of “Record of Journey”**

* A completed “Record of Journey” will be emailed to [xyz@<company>.ca](mailto:xyz@%3ccompany%3e.ca) prior to any journey commencing
* The administrative assistant will maintain a file for audit purposes

**A VEHICLE WALK AROUND SHALL BE COMPLETED BEFORE JOURNEY STARTS**

* Ensure that all tires are properly inflated and are not bulging or have uneven wear
* Ensure that the spare tire is in place, and properly inflated
* Ensure that there is no debris around vehicle moving
* Ensure that all fluid levels are acceptable (Full gas tank, full windshield washer fluid)
* Ensure that the windshield wipers work
* Ensure that brake, tail, head, and signal lights all work properly
* If there is visible damage to the vehicle, ensure that it is safe to operate
* Ensure that the check engine light is not lit
* Check to see if the horn is in working condition
* Ensure that an emergency kit is in the vehicle

**IF A JOURNEY IS LONGER THAN TWO HOURS**

* Before a journey begins, ensure that a two-hour check-in is established with the Health and Safety Administrative Assistant. It should either be a telephone call, text or an email stating that you are still travelling and your expected time of arrival as well as an update on the journey (including any changes to destination or the timeframe for the journey). This must be done when the vehicle is not moving and is safely parked.

**CHECK IN AT THE END OF THE JOURNEY**

* Ensure that a call, text or email is placed to the Health and Safety Administrative Assistant that the end of a successful journey. If the journey takes place after hours, or the estimated arrival time is after working hours, an alternative method of checking in must be established before the journey begins. These methods include, but are not limited to, checking in with a significant other, checking in with parents, and emailing a co-worker or manager that has a mobile phone.

**IF A MOTOR VEHICLE ACCIDENT OCCURS**

Ensure to complete the Motor Vehicle Collision Report and send to [xyz@<company>.ca](mailto:xyz@%3ccompany%3e.ca)