



MINISTRY OF HEALTH AND SOCIAL WELFARE

# VEHICLE MANAGEMENT



## COUNTY-LEVEL POLICY AND PROCEDURE MANUAL

DECENTRALIZED MANAGEMENT SUPPORT SYSTEMS

2009



**USAID**  
FROM THE AMERICAN PEOPLE

 **BASICS**

**PLEASE NOTE:**

**This document should be considered a**

**PROVISIONAL DRAFT**

**until it has been validated by the MoHSW for training  
of and roll-out to the County Health Teams.**



Ministry of Health & Social Welfare  
P.O. Box 10-9009  
1000 Monrovia 10  
Republic of Liberia  
West Africa



U.S. Agency for International Development  
Bureau for Global Health  
Office of Infectious Diseases and Nutrition  
Ronald Reagan Building  
1300 Pennsylvania Ave., NW  
Washington, D.C. 20523 USA  
Tel: (202) 712-0000  
Email: [globalhealth@phnip.com](mailto:globalhealth@phnip.com)  
[www.usaid.gov/our\\_work/global\\_health](http://www.usaid.gov/our_work/global_health)

4245 N. Fairfax Dr.  
Suite 850  
Arlington, VA 22203 USA  
Tel: (703) 312-6800  
Fax: (703) 312-6900  
Email: [basics@basics.org](mailto:basics@basics.org)  
[www.basics.org](http://www.basics.org)

2009

Support for this publication was provided by the USAID Bureau for Global Health.

BASICS (Basic Support for Institutionalizing Child Survival) is a global project to assist developing countries in reducing infant and child mortality through the implementation of proven health interventions. BASICS is funded by the U.S. Agency for International Development (contract no. GHA-I-00-04-00002-00) and implemented by the Partnership for Child Health Care, Inc., comprised of the Academy for Educational Development, John Snow, Inc., and Management Sciences for Health. Subcontractors include the Manoff Group, Inc., the Program for Appropriate Technology in Health, and Save the Children Federation, Inc.



## CONTENTS

<b>ACRONYMS AND ABBREVIATIONS</b> .....	<b>ii</b>
<b>1. INTRODUCTION</b> .....	<b>1</b>
<b>2. OFFICIAL VEHICLE USAGE POLICY</b> .....	<b>2</b>
<b>3. CHT TRANSPORTATION OFFICER</b> .....	<b>3</b>
<b>4. CONTROLLING USAGE OF CHT VEHICLES</b> .....	<b>5</b>
4.1 TRANSPORTATION OF CHT PERSONNEL.....	5
4.2 TRANSPORTATION OF CHT SUPPLIES.....	5
4.3 TRANSPORTATION OF PATIENTS.....	6
4.4 EMERGENCY TRANSPORTATION OF PATIENTS .....	6
4.5 TRANSPORTING PERSONNEL TO AND FROM WORK AND HOME.....	6
4.6 OFFICIAL USE OF PERSONAL VEHICLES.....	7
4.7 DRIVER QUALIFICATIONS AND RESPONSIBILITIES .....	9
4.8 MISUSE, NEGLIGENCE, IMPROPER CARE OF VEHICLES.....	10
<b>5. MANAGING AND SCHEDULING USAGE OF CHT VEHICLES</b> .....	<b>12</b>
5.1 VEHICLE REQUEST .....	12
5.2 VEHICLE SCHEDULE .....	18
5.3 VEHICLE LOG .....	21
5.4 ACCIDENT REPORT .....	25
5.5 QUARTERLY VEHICLE REPORT .....	28
5.6 ANNUAL VEHICLE INVENTORY .....	32
<b>6. PREVENTIVE MAINTENANCE</b> .....	<b>34</b>
6.1 SCHEDULING PREVENTIVE MAINTENANCE .....	34
6.2 VEHICLE MAINTENANCE CHECKLIST .....	37
6.3 REQUESTING MAINTENANCE .....	41
<b>7. REPAIR</b> .....	<b>44</b>
7.1 REQUESTING REPAIR.....	44
7.2 ASSESSING REPAIR REQUIREMENTS .....	47
<b>8. MAINTENANCE AND REPAIR SERVICES</b> .....	<b>49</b>
8.1 CHT MAINTENANCE FACILITY .....	49
8.2 CENTRAL MOHSW MAINTENANCE AND REPAIR FACILITY .....	50
8.3 PRIVATE MAINTENANCE AND REPAIR FACILITIES.....	50
<b>9. VEHICLE FILES</b> .....	<b>52</b>
9.1 SUMMARY OF REQUIRED VEHICLE FILES.....	52
9.2 INDIVIDUAL VEHICLE FILES .....	53
9.3 GENERAL VEHICLE FILES .....	53
9.4 SPARE VEHICLE KEYS .....	54
<b>10. MOTORCYCLES</b> .....	<b>54</b>
10.1 MOTORCYCLE USAGE .....	54
10.2 MOTORCYCLE MAINTENANCE AND REPAIR .....	56
<b>BLANK FORMS</b> .....	<b>58</b>

## **ACRONYMS AND ABBREVIATIONS**

BPHS	Basic Package of Health Services
CHD	County Health Department
CHDD	County Health Department Director
CHO	County Health Officer
CHSA	County Health Services Administrator
CHT	County Health Team
MoHSW	Ministry of Health and Social Welfare
SOP	Standard Operating Procedure
TO	Transportation Officer

## **1. INTRODUCTION**

At the Ministry of Health and Social Welfare, we are gaining new efficiencies by decentralizing aspects of the Ministry's management support systems. This is actually a move to deconcentrate specific responsibilities and functions to the county level. In this case, the management, maintenance and repair of county-level vehicles are deconcentrated from the Central Ministry to the County Health Team. We believe that this will lead to more effective use of scarce vehicle resources that are vital to the functioning of the health system, which has constant needs for transportation of supervisors, patients, drugs and supplies.

The purpose of this manual is to define the policies and procedures of the decentralized county-level Vehicle Management system that supports County Health Teams (CHT) in their activities to deliver of the Basic Package of Health Services (BPHS).

Because vehicle resources are limited, costly and difficult to maintain, it is essential that guidelines and management oversight be established and formalized.

This manual was developed to achieve the following objectives:

- To bring together, in one document, written, unwritten and informal regulations and to establish official policies, guidelines and standard operating procedures.
- Clarify existing policies and procedures and establish new policies and procedures as needed.
- Provide standardized tools and forms to facilitate vehicle management.
- Standardize vehicle management in the counties to the maximum extent possible.

This Manual is divided into two major sections. The first part concerns the usage of vehicles, and the second with the maintenance and repair of vehicles.

Of all the physical assets of the Ministry, vehicles are undoubtedly the most frequently subjected to misuse. Because of this, the Ministry has developed this manual to lay down clear policies that govern the use of official vehicles.

This Manual refers mainly to four-wheel vehicles used by the Ministry. However, motorcycles are also useful forms of transportation that involve special considerations. A separate section on these vehicles is in Chapter 10 of this Manual.

## 2. OFFICIAL VEHICLE USAGE POLICY

### POLICY

**Official Ministry of Health and Social Welfare vehicles shall be used for official purposes only. Use of vehicles for personal business is prohibited.**

### GUIDELINES

Government vehicles are to be used only for official business. Official use of vehicles is defined as the transport of personnel, patients, drugs, supplies and materials in carrying out the work of the Ministry. Official use normally will not include the transport of personnel between home and work, or personal errands such as shopping, carrying children to school, etc., or the carrying of supplies and materials intended for personal use. Decisions as to what is considered "Official Use" at the county level will normally be made by the CHSA in consultation with the CHO and based on the letter and spirit of the policies and procedures set forth in this Manual. Individual employees do NOT have the authority to grant exceptions to the "Official Use Only" policy.

#### **General regulations for the use of official vehicles:**

- Vehicles are NOT to be used for home-to-work transport except when authorized in writing by the CHO.
- Vehicles are NOT to be operated by a driver who is under the influence of drugs or alcohol.
- Vehicles are NOT to be operated by a driver who does not possess a valid driver's license.
- Vehicles are NOT to be driven without a signed Vehicle Request form authorizing the trip.
- Vehicles are to use the most direct, safe route to reach a destination, and NOT divert to an indirect route to suit the personal interests of the driver or passengers.
- Maximum speed is 95 kilometers per hour; however, drivers must travel at a reduced speed as appropriate given road and weather conditions.
- Vehicles must NOT be overloaded with passengers or freight.
- Smoking is NOT allowed in official vehicles.
- Guns, firearms or weapons may NOT be transported in official vehicles.
- Every occupant of a vehicle, including the driver, must wear seat belts whenever the vehicle is in motion.
- Prior to the start of each trip, the driver must make a routine mechanical inspection of the vehicle. If the vehicle fails this inspection for any reason, the Transportation Officer must be told before the start of the trip.



- A driver or passenger who believes a vehicle is not roadworthy may refuse to operate or ride in such vehicle.
- Vehicles are NOT to be used for transporting persons who are not Ministry employees, except when authorized by the CHSA or CHO, or when transporting patients. This restriction includes the transport of relatives, neighbors, and friends.
- Vehicles are NOT to be used to transport Ministry employees for lunches, dinners, and social functions. The exception to this rule may be when a social function is work related and authorized by the CHO. For example, an official farewell party for a departing staff member or an official reception or dinner.

### 3. CHT TRANSPORTATION OFFICER

<b>POLICY</b>	<p><b>The CHO in each county shall appoint one member of the CHT to fulfill the role of CHT Transportation Officer.</b></p> <p><b>The CHT Transportation Officer shall be responsible for the smooth running of the CHT transportation system by scheduling transportation of personnel and materials and for arranging maintenance and repair of vehicles.</b></p>
---------------	---

#### GUIDELINES

In order to accomplish the smooth running of the CHT Vehicle Management system, it is essential that a Transportation Officer (TO) be appointed. The duties of the TO do not need to be performed on a full-time basis, but can be part-time in addition to normal responsibilities in the CHT. It is recommended that the TO be selected from amongst the personnel in the Administrative Department. The TO's normal duties should not involve frequent travel away from the CHT office so that he/she is normally present at the CHT office to perform the daily scheduling and management of vehicles.

The CHT Transportation Officer will be responsible for managing the CHT's fleet of vehicles. These responsibilities include:

- *Authorizing Vehicle Usage:* The TO is delegated specific responsibilities by the CHSA to authorize routine transportation requests. Routine transportation requests must follow the general guidelines for the use of official vehicles listed above. The TO must use appropriate judgment in deciding if a requested trip is not within these general guidelines and, if necessary, consult with the CHSA for advice. Only the CHSA (or CHO in the CHSA's absence) may authorize certain types of vehicle usage, including emergency transportation, overnight journeys and trips outside the county and to Monrovia.
- *Scheduling and Coordinating Vehicle Travel:* The TO will prepare a Vehicle Schedule each week that shows all requested travel for the next two weeks. This schedule will coordinate the travel of CHT employees who require transport by having them share rides. Additionally, the TO will monitor the arrival and departure of visitors so that

CHT employees may share rides with the visitors. If changes in the scheduling of vehicles are required, the TO will promptly notify those who have requested vehicles and received approval.

- *Dispatching Vehicles:* The TO will ensure that roadworthy vehicles are prepared for their journeys, drivers given instructions and passengers notified of departure times and locations. Return time and condition of vehicles will also be monitored.
- *Supervising and Managing:* The TO will manage the use of vehicles, fuel and other transportation resources; supervise drivers; give driving assignments; enforce performance standards for drivers; monitor vehicle roadworthiness; and prepare/maintain the reports and files as shown in Chapter 9 of this Manual. The TO will also review vehicle logs and follow up with inconsistencies in the logs or any report or indication that a vehicle has been used inappropriately. Such instances will be referred to the CHSA for further investigation.
- *Planning:* The CHT TO should assist each health facility in the county to work out a transportation plan. The plan should include the following information: how to contact the CHT when emergency transportation is needed; how to request transportation of personnel and materials from the CHT; knowledge of where private vehicles can be obtained in an emergency; the cost of hiring private vehicles; a policy on who pays for the cost of transport; transport services available to surrounding towns and villages.
- *Maintaining/Repairing Vehicles:* The TO will keep a vehicle preventive maintenance schedule to ensure roadworthiness and minimize the need for costly mechanical repairs. Damage to and repair of vehicles will be monitored and managed.

*Qualifications of the TO* are not rigidly established. The CHO and CHSA should appoint an existing CHT employee to this position based on the following general guidelines concerning the demonstrated abilities and personal qualities of the individual:

- Ability to attend to detail-oriented work such as planning and scheduling;
- Ability to understand and implement policies and procedures;
- Ability to rigorously, objectively and fairly enforce policies and follow established procedures;
- Excellent personal integrity and honesty.

*Alternate Transportation Officer:* an additional CHT staff person should be appointed as Alternate Transportation Officer to cover times when the TO is absent from the CHT. The alternate will be formally delegated the responsibilities as Acting TO by the CHSA when required. The Alternate should be familiar with the duties of the TO and be briefed/debriefed by the TO before and after the TO is absent from the CHT.

*Transportation records, reports and files:* The TO is responsible for managing and retaining all documentation concerning CHT vehicles and their usage. Each of these is explained in detail in various Sections of this Manual.

## 4. CONTROLLING USAGE OF CHT VEHICLES

### POLICY

CHT Vehicles are valuable assets that shall be carefully managed, protected and appropriately used to facilitate the smooth functioning of the CHT.

### GUIDELINES

The purpose of managing and maintaining vehicles is to have transportation resources available to serve the priority goals and objectives identified in the CHT's work plan, as well as provide transportation for unplanned urgent and emergency purposes. The most important use of vehicles in accomplishing the CHT's plans is the transportation of CHT personnel and supplies.

#### 4.1 TRANSPORTATION OF CHT PERSONNEL

A top priority of vehicle usage is the movement of CHT personnel for official purposes. The week-by-week priorities need to be established by the CHO and CHT Department Heads and communicated to the Transportation Officer. Normally, the priorities for personnel include transportation for:

- Health facility supervision,
- Attendance at meetings,
- Participation in workshops,
- Maintenance of equipment and infrastructure,
- Health promotion or vaccination campaigns

#### 4.2 TRANSPORTATION OF CHT SUPPLIES

Supplies will usually be transported along with personnel who make trips on official business. In such cases, the driver will be responsible for getting the supplies to their destination safely. If supplies require special handling (e.g., vaccines requiring cold chain), this will also be the responsibility of the driver (in such cases drivers must be given adequate instructions to ensure safe handling). CHT staff responsible for distribution of supplies should make requests of the Transportation Officer well in advance so that arrangement might be made for coordinating that need with the movement of personnel on supervision visits, etc. Vehicles may be exclusively used for delivery of supplies only when supplies are of such volume that no room would be left in the vehicle for passengers, or they are urgently needed somewhere. In most cases, if proper supply chain planning is done, there will be few cases of urgent transportation needs for supplies.

### **4.3 TRANSPORTATION OF PATIENTS**

The scarcity of official CHT vehicles dictates that except in emergency situations, as described below, patients are responsible for their own transportation to and from health facilities. Patients may, however, be transported to health facilities in official vehicles by sharing a ride with CHT personnel who are already on an authorized journey, such as a supervisor returning to the CHT headquarters after a supervisory visit. Except in unusual circumstances, and with the prior approval of the CHO through the Transportation Officer, vehicles may NOT be diverted from their most direct authorized route to pick up or drop off patients to their home locations.

### **4.4 EMERGENCY TRANSPORTATION OF PATIENTS**

In emergencies, defined as life-threatening situations (e.g. obstetric emergencies, accidents), official CHT vehicles may be used for transporting patients to an appropriate referral facility.

As with any other usage of an official vehicle, the CHT employee making such request must obtain the approval of the Transportation Officer by using a Transportation Request form. However, in a life-threatening emergency where time is of the essence, the patient(s) may be transported to an appropriate facility immediately using an official vehicle without prior authorization. In such cases, the CHT employee approving such immediate use of the vehicle must complete a Transportation Request form and obtain the retroactive authorization of the TO as soon as possible after the vehicle has been used for that purpose.

Once the life-threatening situation has been resolved, the patient has been stabilized and is no longer in an emergency condition; the return transportation of the patient to the point of origin is the responsibility of the patient or the patient's family or employer.

The CHT and each health facility should maintain a list of potential vehicles that may be available for transporting emergency patients when an official CHT vehicle is not available. For example: police and military vehicles, vehicles belonging to local shop owners, other government vehicles. This information will be used to advise a patient's family in the event of an emergency transport request. If there is need to hire a private or commercial vehicle, this will be done by the patient's family or employer.

### **4.5 TRANSPORTING PERSONNEL TO AND FROM WORK AND HOME**

Transporting of CHT personnel to and from work may be authorized through the TO and will be permitted only under the following circumstances:

- A medical emergency that requires the immediate presence of an employee at work;
- Official duties outside normal work hours when personal or public transport is not readily available;
- Hazardous weather or other dangers pose a threat to the employee.

## 4.6 OFFICIAL USE OF PERSONAL VEHICLES

### POLICY

**Each County Health Team will decide whether to establish a policy allowing reimbursement for official use of private vehicles. This policy, and the rate of reimbursement, will be based on a joint decision of the CHO and the Central MoHSW.**

### GUIDELINES

In certain limited situations, reimbursement may be made to CHT personnel when they use their personal vehicles for official purposes. Each CHT must decide whether to establish a policy allowing such reimbursement, based on a decision by the CHO in consultation with the Central Ministry. If the CHT has a policy allowing reimbursement, prior written authority is required in order to use of a private vehicle for official purposes. An Authorization to Use Personal Vehicle form must be completed and approved by the CHT Transportation Officer and the CHSA before the private vehicle is used. For travel outside of the county the CHO's approval must also be obtained. Processing of the reimbursement claim will be made through the Transportation Officer to the CHSA. The rate for reimbursement per kilometer will be determined by the CHT in collaboration with the Central Ministry. In addition to the Authorization form, a Vehicle Log sheet must also be completed that records each official part of the trip (see Manual Section 5.3). Only the official portions of the journey will be reimbursed. For instance, if approval is obtained to drive a personal vehicle to Monrovia to attend a workshop, only the part of the journey from the county to Monrovia and return will be reimbursed—not local running within Monrovia.

It must be clearly noted that if a personal vehicle is in an accident or damaged during use for official purposes, it is the responsibility of the owner of the vehicle to pay for any repair. The CHT and MoHSW may not be held responsible for such damages. Similarly, maintenance of a personal vehicle used for official purposes is the responsibility of the owner of the vehicle—the reimbursement rate is calculated to cover fuel and maintenance costs.

The intent of allowing use of personal vehicles for official purposes is to provide an economical alternative to the use of official vehicles. This is particularly the case when, for example, travel to attend a workshop in another county would result in depriving the CHT of that vehicle during the time of the workshop; a driver's costs would also need to be paid; or two round trips of the official vehicle would be required to drop off and then pick up the persons attending the workshop. However, the intention is NOT to encourage uncontrolled or unlimited reimbursement for use of personal vehicles.

See the sample Authorization to Use Personal Vehicle form in Figure 1.



County Health Team  
**AUTHORIZATION TO USE  
PERSONAL VEHICLE**

**SECTION I: TO BE COMPLETED BY DRIVER**

Full Name of Driver: John Flumo County of Assignment: Maryland

Intended Travel Dates: From 12 Nov 2010 to 10 Nov 2010 Estimated Total Km 500

**Note: Claim for reimbursement must be accompanied by a Vehicle Log sheet with each part of the official travel recorded.**

Reason for use of personal vehicle:

*To attend MoHSW workshop on the Basic Package of Health Services at Thinker's Village, Monrovia during 15-18 November 2010. I will carry two other CHT staff with me who will also be attending the workshop.*

Signature of driver: John Flumo Date: 6 Nov 2010

**SECTION II: TO BE COMPLETED BY TRANSPORTATION OFFICER**

Recommended for approval for reimbursement at 12 cents per Km

Disapproved

Comments:

*You must check with the Central Procurement Office before returning to see if there are any small supplies that you can carry back to the CHT.*

Signature of Transportation Officer: Mary Wissek Date: 7 November 2010

**SECTION III: TO BE COMPLETED BY COUNTY HEALTH SERVICES ADMINISTRATOR**

Remarks:

Approved (for trips within county)

Recommended for Approval by CHO (for trips outside of county)

Disapproved

Comments:

*No local running within Monrovia is approved*

Signature of County Health Services Administrator: John Quaye Date: 8 Nov 2010

**SECTION IV: TO BE COMPLETED BY COUNTY HEALTH OFFICER**

CHO approval required for trips outside of county.

Approved

Disapproved

Comments:

*He must carry the 2 additional staff he mentions.*

Signature of County Health Officer: Sam Juhl MD Date: 9 Nov 2010

Figure 1. Authorization to Use Personal Vehicle form (sample)

## 4.7 DRIVER QUALIFICATIONS AND RESPONSIBILITIES

### GUIDELINES

All drivers must have a valid driver's license and preferably be literate. Applicants for a driver's position must have prior driving experience and references that attest to their good driving skill and reliability. A thorough check of the applicant's driving history will be a requirement before employment.

While a driver has responsibility for the operation of a vehicle, the Transportation Officer will authorize when and where an official vehicle will be used. Drivers do NOT authorize the use of official vehicles. A driver who is transporting a Ministry employee will be answerable to that employee for the duration of the trip. Drivers are not permitted to decide when and where to operate a vehicle without the authorization of the Transportation Officer, except in cases of emergency. However, after the emergency (e.g., accidents, road conditions) has passed, the driver must report such usage to the Transportation Officer.

Responsibilities of drivers:

- *Assignment of Vehicles:* If there are sufficient numbers of drivers, the Transportation Officer will permanently assign each vehicle to one driver. Vehicles with more than one driver generally have greater maintenance problems than vehicles with a single driver.
- *Safety Standards:* All safety regulations listed in Chapter 2 must be followed, particularly:
  - Maximum speed is 55 miles per hour (92 kilometers per hour); however, drivers must travel at a reduced speed as appropriate given road and weather conditions.
  - Drivers and passengers are required to wear seat belts at all times.
  - Overloading of vehicles with passengers or freight is prohibited.
  - Prior to the start of each trip, the driver must make a routine mechanical inspection of the vehicle. If the vehicle fails this inspection for any reason, the Transportation Officer must be told before the start of the trip.
- *Security:* When a vehicle is parked, the keys must be removed, the windows closed, and all doors locked. During weekends, holidays, and at night, official vehicles should be parked in a safe, secure area. If possible, this area should be fenced, have a locked gate, and security lights. Personal property, or valuable official property (e.g., laptop computers), must not be left in vehicles overnight.
- *Vehicle Servicing:* The driver must regularly check the vehicle odometer to determine when routine servicing will be required and notify the Transportation Officer to make arrangements for servicing.
- *Authorization and Instructions:* Prior to beginning a journey, the driver is required to read the authorized Vehicle Request form and follow the approved itinerary (often one of the passengers will have the authorized Vehicle Request form and must hand it over to the driver to read before beginning a journey). Drivers must not carry

personnel to and from any location unless such personnel can produce an authorized Vehicle Request form that indicates the location is part of the approved itinerary. An exception to that may be when the driver is given verbal instructions by the Transportation Officer for local running in the vicinity of the CHT office.

- *Records and Reports:* Drivers must keep a Vehicle Log for each vehicle. On the first day of each month, the driver will give the log sheets for the previous month to the Transportation Officer. Drivers who are not fully literate must be trained, at a minimum, to read and write odometer readings to fill in Vehicle Log forms. Passengers can assist such drivers in filling in the other parts of the Vehicle Log form.
- *Vehicle Cleaning:* Vehicles should be given a basic cleaning daily, inside and out. On a weekly basis vehicles will be cleaned more thoroughly.
- *Emergency Medical Treatment:* The driver may be called upon to assist medical personnel in extreme emergency situations, either in the ambulance or at the scene of the emergency. Because of this drivers must be trained in basic first aid.
- *Loading/Unloading of Supplies:* Drivers may be required to assist with the loading and unloading of official supplies and materials.
- *Delivery/Messenger Services:* Drivers may be requested to deliver packages, letters, messages or other forms of communication by using the vehicles to which they have been assigned. When such deliveries are made to someone other than whom the package or message is addressed, the driver should record the name of the person with whom the item was left, and obtain assurances that the item will reach the person for whom it is intended.
- *Travel of CHT Vehicles to Monrovia:* Drivers of CHT vehicles that travel to Monrovia must check in with the Central MoHSW Division of Transport upon arrival and before returning to their county. This will facilitate the transport/delivery of personnel, supplies, letters, circulars, etc. to the county. When in Monrovia, vehicles must be parked within the MoHSW compound in Monrovia after working hours and on weekends and holidays.

#### **4.8 MISUSE, NEGLIGENCE, IMPROPER CARE OF VEHICLES**

Drivers and other personnel will be subject to formal disciplinary action for misuse, negligence and/or improper care of a vehicle. Examples that may result in formal disciplinary action are:

- *Intentional Misuse of a Vehicle:* A driver knowingly misuses an official MoHSW vehicle for personal reasons. CHT personnel who are passengers instruct drivers to carry them to unauthorized locations (this may be especially true in cases where drivers are illiterate and cannot read the approved Vehicle Authorization form).
- *Negligence:* A driver or passenger damages a vehicle because of improper care or attention, including parking in improper or insecure areas.
- *Loss of Vehicle or Vehicle Parts:* A vehicle or vehicle parts are either lost or stolen because of inadequate driver precaution or care.



- *Failure to Report an Accident:* A driver does not report an accident to the CHT Transportation Officer within 24 hours; a driver does not inform police of an accident involving damage to another vehicle, property damage or injury to a person.
- *Safety Violation:* There is danger to life because of the reckless or improper operation of a vehicle; for example, excessive speeding, driving while intoxicated, not wearing seat belt by driver or passenger(s).

## 5. MANAGING AND SCHEDULING USAGE OF CHT VEHICLES

### POLICY

Transportation will be authorized for staff and/or patients only after a careful review of overall CHT transportation needs and vehicle availability.

Careful scheduling to maximize vehicle sharing is essential due to shortages of vehicles and the high cost of fuel.

### 5.1 VEHICLE REQUEST

#### GUIDELINES

The purpose of written vehicle requests is to allow the Transportation Officer to properly schedule transportation needs. To better ensure that vehicles are available when needed, in all cases a Vehicle Request form should be completed and submitted to the Transportation Officer no later than 9:00 AM of the last work day of the week (usually Friday) prior to the proposed travel (see sample form in Figure 2). Additional requests may be submitted at any time, but the TO will not be able to ensure that a vehicle will be available without adequate notice. In general, it is best to request transportation as early as possible to better make sure a vehicle will be available for your needs.

Assignment of an official vehicle will be based on

- vehicle availability,
- priority of need; and
- urgency.

In some cases, the emergency need for a vehicle may require the rescheduling ("bumping") of some previously approved travel in order to accommodate the emergency.

Wherever possible, vehicles will be scheduled so that they can be shared by more than one person. Also, persons traveling to health facilities for supervision may be required during their journey to carry supplies to that facility and other facilities that may be in nearby locations.

A copy of the authorized Vehicle Request form must be reviewed by the driver and carried in the vehicle at all times during the journey.

Staff who have submitted a Vehicle Request must inform the TO as soon as possible of any change in or cancellation of their proposed journey.

Different levels of authorization are required for different types of journeys:

- *Local Running During Regular Working Hours:* Requests for an official vehicle for local running (defined as an area within 10 kilometers or 5 miles of the CHT office) may be made through a Vehicle Request form or verbally to the Transportation Officer. The TO must authorize such journeys. Unplanned, non-emergency local running requests will be honored only if such travel will not disrupt planned vehicle journeys.

- *Long Distance Travel within the County:* For travel within the county that is more than five miles distant from the CHT headquarters, and/or involves an overnight stay, a Vehicle Request form must be completed and submitted by 9:00 AM of the last work day of the week prior to the proposed travel. The TO must authorize.
- *Travel Outside the County:* A Vehicle Request form must be completed and submitted by 9:00 AM of the last work day of the week prior to the proposed travel. The TO and the CHSA must authorize.
- *Travel to Monrovia:* A Vehicle Request form must be completed and submitted by 9:00 AM of the last work day of the week prior to the proposed travel. The TO, the CHSA and the CHO must authorize.
- *Travel after Regular Working Hours, on Weekends or Holidays:* A Vehicle Request form must be completed and submitted by 9:00 AM of the last work day of the week prior to the proposed travel. The TO and the CHSA must authorize.
- *Emergency Travel:* Defined as life-threatening situations (e.g. obstetric emergencies, accidents), such travel requires a Vehicle Request form. The TO, the CHSA and the CHO must authorize. In situations where time is of the essence, the TO may authorize the travel, or the patients or personnel may be transported to an appropriate location in an official vehicle without prior TO authorization. In such cases, however, the CHT employee approving such immediate use of the vehicle must complete a Vehicle Request form and submit it to the TO as soon as possible after the vehicle has been used for that purpose; the TO will then obtain the appropriate retroactive authorizations.

## STANDARD OPERATING PROCEDURE

<b>SOP Title:      <b>Vehicle Request</b></b>			
<b>Purpose:</b> To request an official vehicle.			
<b>Responsibilities:</b>			
<b>Title (Acronym)</b>	<b>Level</b>	<b>Responsibility</b>	
CHT Staff	County	Submit Vehicle Requests to Transportation Officer no later than 9:00 AM of the last work day of the week (usually Friday) prior to the proposed travel.	
Transportation Officer (TO)	County	Receives Vehicle Request forms and obtains required approvals; prepares weekly Vehicle Schedule based on vehicle availability and priority of need.	
County Health Services Administrator (CHSA); County Health Officer (CHO)	County	Authorize Vehicle Requests according to Scope of journey and Authorization Requirements	
<b>Procedures:</b>			
Resources required: Copies of Vehicle Request form			
<ol style="list-style-type: none"> <li>As soon as transportation requirements are known, or no later than 9:00 AM of the last work day of the week (usually Friday) prior to the proposed travel, CHT staff complete a Vehicle Request form.</li> <li>To complete the form: enter Name, Title and Date; Mark the Purpose and Scope of the travel; enter Detailed Purpose of journey; enter Proposed Itinerary plus any clarifying Comments.</li> <li>Submit completed form to the TO.</li> <li>If there are any questions about the proposed travel, the TO makes inquiries of the requestor or the requestor's supervisor.</li> <li>TO approves or denies the request, and obtains additional approval from CHSA and CHO as required in the following table:</li> </ol>			
<b>Type of Journey</b>	<b>Authorization Required by:</b>		
	<b>TO</b>	<b>CHSA</b>	<b>CHO</b>
Local Running During Regular Working Hours (Verbal OK)	✓		
Long Distance Travel within the County	✓		
Travel Outside the County	✓	✓	
Travel to Monrovia	✓	✓	✓
Travel after Regular Working Hours, on Weekends or Holidays	✓	✓	
Emergency Travel (Retroactive authorization if necessary )	✓	✓	✓

**SOP Title:      Vehicle Request**

6. TO, CHSA, or CHO enter any additional comments or instructions on the form.
7. TO uses the information in the approved forms to prepare the Vehicle Schedule.
8. TO returns the approved Vehicle Request form to the requestor, or returns unapproved forms to the requestor with the reasons for denial indicated.
9. Requester gives the authorized form to the driver of the vehicle to read prior to the start of the journey and carries the authorized form in vehicle at all times during the journey.
10. Requestor informs the TO as soon as possible of any change in or cancellation of their proposed journey



Requested by (print name/title): Alfred Momo Date: 7 October 2010

<b>Purpose:</b> <input type="checkbox"/> Emergency transportation of patient <input type="checkbox"/> Supervision of health facilities <input checked="" type="checkbox"/> Pick up/Delivery of supplies <input type="checkbox"/> Maintenance/Repair <input checked="" type="checkbox"/> Other (describe) →	<b>Scope:</b> <input type="checkbox"/> Within county <input type="checkbox"/> Outside county <input checked="" type="checkbox"/> To Monrovia  <b>Detailed Purpose:</b> Drop off supplies at Central HC, pick up vehicle spare parts and stationery supplies at vendors, drop off survey forms to Research Unit at MOHSW HQ.
---	--

**PROPOSED ITINERARY:**

Date/Time	From	To	Comments
13 Oct 2010 8am	CHT Sanequellie	Central HC	Deliver drugs & supplies
13 Oct 2010 8am	Central HC	Monrovia	Pick up supplies in Monrovia
15 Oct 2010 4pm	Monrovia	CHT Sanequellie	

**Transportation Officer's Approval (Required for all travel):**

Approved  Denied Signature: Mary Wisneh Date: 10 Oct 2010

**County Health Services Administrator Approval (Required for travel during non-working hours, outside of county and to Monrovia):**

Approved  Denied Signature: John Quaye Date: 10 October 10

**County Health Officer's Approval (Required for travel to Monrovia):**

Approved  Denied Signature: Sam Johl MD Date: 11 Oct 10

**For Use by Transportation Officer:**

Vehicle/Driver assigned: Toyota Pickup RL7890

Quantity of Fuel Issued: 60 liters

**Comments, Instructions, Restrictions on Usage of Vehicle:**

*Be sure to park vehicle in Ministry compound overnight and return to Sanequellie no later than 5:00pm Saturday.*

*Check with Mr. Tolley at HR office to pick up more Performance Appraisal forms.*

SAMPLE

Figure 2. Vehicle Request Form (Sample)



## 5.2 VEHICLE SCHEDULE

### GUIDELINES

The Transportation Officer will prepare a Vehicle Schedule that covers a two-week period on the last day of each work week (usually Friday) based on availability of vehicles and priority of need. Vehicle Requests received during the week will be reviewed and approved/denied as appropriate, and included in the Vehicle Schedule.

Requests received without adequate notice (i.e., received after 9:00 AM of the last work day of the previous week) will be given low priority unless a case for their urgency can be made. If such Requests are authorized, again based on vehicle availability and priority of need, the Vehicle Schedule will be updated.

Some reassignment or rescheduling of trips may need to take place to accommodate urgent, emergency or high priority needs. It is the responsibility of the TO to notify in a timely manner the individuals who have requested vehicles when rescheduling or changes need to take place. See a sample Vehicle Schedule in Figure 3.

### STANDARD OPERATING PROCEDURE

<b>SOP Title:      Vehicle Schedule</b>		
<b>Purpose:</b> To schedule official vehicle usage for the coming two week period.		
<b>Responsibilities:</b>		
<b>Title (Acronym)</b>	<b>Level</b>	<b>Responsibility</b>
CHT Staff	County	Submit Vehicle Requests to Transportation Officer as soon as transportation requirement is known, one week prior to need for vehicle.
Transportation Officer (TO)	County	Prepares weekly Vehicle Schedule based on vehicle availability and priority of need.
<b>Procedures:</b> Resources required: Copies of approved Vehicle Request forms; Copies of Weekly Vehicle Schedule form		
<ol style="list-style-type: none"> <li>1. At the end of each week, the Transportation Officer gathers together all Vehicle Request forms and reviews the forms taking into consideration vehicle availability and priority of need. Requests are approved or denied depending on whether they are consistent with the Official Vehicle Policy and the CHT work plan.</li> <li>2. If there are any questions about the proposed travel, the Transportation Officer should make inquiries of the requestor or the requestor's supervisor.</li> <li>3. The TO enters the appropriate day and month on the form for the next two weeks. The make and number of CHT vehicles is entered at the top of the columns on the form.</li> <li>4. The TO enters into the appropriate space on the form any routine transportation</li> </ol>		



**SOP Title:      Vehicle Schedule**

requirements, such as pick-up and drop-off of staff for routine meetings, regular shopping for hospital supplies, etc.

5. Using the approved Vehicle Requests the TO writes in the estimated times of departure and return, destination and requestor name in the column for the most appropriate vehicle assigned to the journey. As necessary, the TO consults with CHT staff members if an appropriate trip is not possible at the time requested given lack of availability of vehicles; adjustment of timing of the trip is discussed and agreed with the requestor.
6. Journeys lasting more than one day can be indicated with lines and arrows.
7. The TO makes two copies of the Schedule
8. When the Schedule is complete, the TO presents it to the CHSA for approval, making any changes required by the CHSA before his/her approval.
9. TO posts one copy of the Vehicle Schedule on a prominent notice board so CHT drivers and staff can readily see the approved journeys for the next two weeks.
10. TO keeps one copy conveniently displayed or available in his/her office.
11. TO returns the Vehicle Request forms, whether approved or denied, to the requestors.
12. During the week, if changes in vehicle requirements occur, either due to cancellations of journeys, or unexpected/emergency needs, the TO writes in the appropriate changes on both copies of the Vehicle Schedule and promptly notifies those affected by the change.



County Health Team  
**VEHICLE SCHEDULE**

Vehicle: Day/Date	<i>Toyota Land Cruiser RL 3434</i>	<i>Toyota Prada RL 1234</i>	<i>Nissan Pickup RL 7890</i>	<i>Ambulance RL 4869</i>
Monday 10 Oct		<i>Deliver vaccines: Northtown HC &amp; Valley, Mamapa &amp; Norota Clinics - all day</i>	<i>Deliver supplies to Southtown &amp; Hilltown Clinics - all day</i>	<i>Hospital Support</i>
Tuesday 11 Oct	<i>Supervision: Western &amp; Rivertown Clinics (Flumo)</i>	<i>Supervsn: Bigtown HC &amp; Lalata Clinic (Togba)</i>	<i>Collect firecoal for Hospital 11am-5pm</i>	
Wednesday 12 Oct	<i>Routine Maintenance ABC Garage 9-12</i>	<i>Supervsn: Bobota &amp; Smalltown Clinics (Togba)</i>		
Thursday 13 Oct	<i>AM - Supervsn: Central HC &amp; Eastern Clinic (Flumo)</i>	<i>Carry Hosp staff to PTL FBO training center for workshop - all day</i>	<i>Collect Supplies from Monrovia Dpt 8:00AM (Changed to Monday)</i>	
Friday 14 Oct	<i>Monthly Partners Meeting: CHT Senior Staff 9am-1pm</i>		<i>Collect local supplies for hospital - all day</i>	<i>Routine Maintenance ABC Garage - all day</i>
Saturday/ Sunday 15-16 Oct	<i>Sun: Carry CHT staff to Gbarnga Dpt 2pm</i>		<i>Return 2:00PM</i>	
Monday 17 Oct	<i>BPHS workshop in Gbarnga</i>		<i>RESCHEDULED: Collect Supplies from Monrovia Dpt 8:00AM</i>	<i>Hospital Support</i>
Tuesday 18 Oct				
Wednesday 19 Oct	<i>Return from Gbarnga 4pm</i>		<i>Return 2:00PM</i>	
Thursday 20 Oct	<i>Joint supervision visit: Northtown HC &amp; Mamapa Clinic (Flumo)</i>	<i>Joint supervision visit: Northtown HC &amp; Mamapa Clinic (Togba)</i>	<i>Repair of damaged tire ABC Garage</i>	
Friday 21 Oct	<i>Supervision: Valley Clinic 8am-1pm (Flumo)</i>		<i>Collect local supplies for hospital - all day</i>	
Saturday/ Sunday 22-23 Oct				
Future Trips Planned	<i>Immunization Campaign 5-10 November</i>			

Prepared by: Joe Bama Date: 10 Oct 2010 Approved by: Mary Johnson, CHSA Date: 10 Oct 2010

Figure 3. Vehicle Schedule form (Sample)

### 5.3 VEHICLE LOG

<b>POLICY</b>	<p><b>Every trip using an official vehicle shall be entered in the Vehicle Log and reviewed regularly by the Transportation Officer.</b></p> <p><b>The Vehicle Log shall be completely and accurately maintained by the Driver of each official CHT vehicle since it is the key document required to monitor the usage of vehicles and to audit whether they are used appropriately for official purposes.</b></p>
---------------	--

#### **GUIDELINES**

In order to monitor and keep a detailed account of the travel of official vehicles, Daily Vehicle Logs must be maintained. The log is in the form of a clip board containing log sheets. The driver is required to keep the Vehicle Log up-to-date by filling in the month, day and time, details of the journey, and odometer readings at start and end of the trip. The driver also writes on the log the amount of fuel filled in the vehicle.

The Authorized Passenger who has the authorized Vehicle Request form will approve each part of the journey by signing the log book at each location the vehicle stops for more than 30 minutes and at the conclusion of the journey.

The Transportation Officer reviews the Vehicle Logs as a means of monitoring the movements of each of the CHT's vehicles, and to prepare the Monthly Vehicle Usage Report.

See the sample Vehicle Schedule in Figure 4.

## STANDARD OPERATING PROCEDURE

<b>SOP Title:      Vehicle Log</b>		
<b>Purpose:</b> To monitor the usage of vehicles by keeping track of each journey.		
<b>Responsibilities:</b>		
<b>Title (Acronym)</b>	<b>Level</b>	<b>Responsibility</b>
CHT Driver	County	Maintains log by entering information for each trip; submits completed logs to TO.
Authorized Passenger	County	Signs log before each phase of journey; produces valid, authorized Vehicle Request form for driver to review.
Transportation Officer (TO)	County	Reviews logs as a means of monitoring and auditing vehicle usage.
<b>Procedures:</b>		
Resources required:		
<ul style="list-style-type: none"> <li>• Copies of Vehicle Log form</li> <li>• Clipboard</li> </ul>		
<ol style="list-style-type: none"> <li>1. Driver obtains several copies of the Vehicle Log, clips into a clipboard and keeps in an appropriate place in vehicle.</li> <li>2. Driver opens each new form by entering the Vehicle Make/Number, County and whether the odometer reads in miles or kilometers (that way “mi” or “km” does not have to be indicated for each odometer reading entered); the year is also indicated in the heading of the Date column so that only the day and month need be written in for each entry.</li> <li>3. For each part of a journey the driver makes an entry on a separate line on the form; a “part of a journey” is defined as from the beginning of the movement of the vehicle until it stops and remains in that location for 30 minutes or more.</li> <li>4. The driver is responsible for ensuring that each line of the log form contains all required information: <ul style="list-style-type: none"> <li>• Date</li> <li>• Authorized Passenger’s Name</li> <li>• Driver’s Name</li> <li>• Departure: Time &amp; Odometer reading</li> <li>• Arrival: Time &amp; Odometer reading</li> <li>• Total Miles/Km</li> <li>• Destination</li> <li>• Fuel Filled (actually filled into vehicle, not the number of coupons issued)</li> <li>• Authorized Passenger’s Signature</li> <li>• Purpose of Journey</li> </ul> </li> <li>5. The Authorized Passenger must sign the log at the beginning of each part of the journey; an “Authorized Passenger” is defined as the person whose name is on the authorized Vehicle</li> </ol>		

**SOP Title: Vehicle Log**

Request form that must be carried on the journey and shown to the driver at the beginning of the journey. **IMPORTANT:** *Any passenger wishing to use a vehicle for a journey other than local running must produce a valid, authorized Vehicle Request form to show to the driver or the driver is not permitted to carry that passenger. FURTHERMORE: The driver is not permitted to carry the passenger(s) to any location that is not included on the Vehicle Request form, except in cases of emergency.* Other passengers may join with the Authorized Passenger, but there must be at least one Authorized Passenger on every journey.

6. An exception to the requirement for an Authorized Passenger in above item no. 5 is local running during normal working hours. Local Running is defined as travel within an area 10 kilometers or 5 miles from the CHT office where the vehicle is normally stationed. Such requests may be made verbally by the TO. The TO should authorize the trip by signing the log in the "Authorized Passenger" space at the beginning of the local running journey, but the driver may sign for subsequent parts of the journey. Such local running may include trips to pick up supplies or pick-up/drop-off personnel or patients. **IMPORTANT:** *As with any other journey, whenever the vehicle stops for at least 30 minutes, a new line on the log form must be filled in.* Unplanned, non-emergency local running requests will be honored only if such travel will not disrupt planned vehicle journeys. Local running after normal working hours, on weekends and holidays is only permitted with a valid, authorized Vehicle Request form.
7. An additional exception to above item no. 5 is when a driver is required to carry supplies or messages to and from a location. In such cases the driver will submit a Vehicle Request form to the TO and receive authorization. The driver should not undertake the journey without having the authorized form and carrying it during the journey.
8. When all lines on a Vehicle Log form are filled in, the driver gives the form to the TO and opens a new sheet. **NOTE:** At the end of the last day of every month, the driver also gives the log sheets to the TO whether or not all lines have been filled.
9. The TO reviews the completed Vehicle Log forms at the end of each week to determine that the forms are being completed correctly by drivers and authorized passengers. Any journeys or parts of journeys that are not in keeping with the authorized use of the vehicle will be investigated and appropriate corrective actions taken.
10. The TO files the completed log sheets in the respective vehicle's file.
11. At the end of every month, the TO uses the completed log sheets to prepare a Quarterly Vehicle Usage Report (see Section 5.5).



County Health Team  
**VEHICLE LOG**

Vehicle Make/Number: Toyota Land Cruiser RL 4908 County: Grand Cape Mount Odometer reads:  Miles  Kilometers

Date Year: 2010	Authorized Passenger Name	Driver's Name	Departure		Arrival		Total Miles/ Km	Destination	Fuel Filled	Authorized Passenger Signature	Purpose of Journey
			Time	Odometer	Time	Odometer					
25 Aug	J. Togba	A. Tamba	8:35am	43609	9:45am	43646	37	Central HC		J. Togba	Supervision
"	J. Togba	A. Tamba	10:55 am	43646	11:30 am	43664	18	Smalltown Clinic		J. Togba	Supervision
"	J. Togba	A. Tamba	12:45pm	43664	1:40 pm	43692	22	CHT HQ		J. Togba	Supervision
"	Saysay	A. Tamba	2:50pm	43692	3:35pm	43700	8	Robertsport - CHT HQ		Saysay	Buy supplies
"	Mary King	A. Tamba	10:30pm	43700	10:55pm	43712	12	M. King home - Hospital		Mary King	Pick up CM -emergency
26 Aug	Mary King	A. Tamba	2:35am	43712	3:15am	43724	12	M King home - return CHT HQ		Mary King	Carry CM home
"	-	A. Tamba	8:45am	43724	9:30am	43732	8	Robertsport- return CHT HQ	80 Utr	TAMBA	Buy fuel
"	J. Johnson	A. Tamba	10:00 am	43732	12:55pm	43855	123	Monrovia - MOHSW		J. Johnson	Buy supplies & spare parts
27 Aug	J. Johnson	A. Tamba	9:00am	43855	12:00pm	43878	23	Toyota, ABC Supply Shop		J. Johnson	"
"	J. Johnson	A. Tamba	2:30pm	43878	5:35pm	44004	126	Return CHT HQ		J. Johnson	"

Figure 4. Vehicle Log (Sample)

## 5.4 ACCIDENT REPORT

<b>POLICY</b>	<p><b>Every accident involving an official CHT vehicle shall be reported to the County Health Services Administrator and County Health Officer through the Transportation Officer.</b></p>
---------------	--

### GUIDELINES

The first concern of a driver after an accident is to care for any possible injuries to passengers or pedestrians. If another vehicle is involved in the accident, it is essential that the owner's name and address, registration number and make of vehicle and details of insurance coverage are obtained. Also, the names and addresses of any witnesses to the accident should be written down.

Whenever a CHT vehicle has been involved in an accident or damaged, no matter whose fault it may be, if no other vehicle was involved, or even if the vehicle was not moving at the time, an Accident Report needs to be submitted by the driver of the vehicle. The Transportation Officer should assist any driver who has difficulty completing the form. In cases where a parked vehicle has been broken into an Accident Report should be submitted.

### STANDARD OPERATING PROCEDURE

<b>SOP Title: Vehicle Accident Report</b>		
<b>Purpose:</b> To provide details of accidents involving vehicles.		
<b>Responsibilities:</b>		
<b>Title (Acronym)</b>	<b>Level</b>	<b>Responsibility</b>
CHT Driver	County	Submits Vehicle Accident Report form to Transportation Officer.
Transportation Officer (TO)	County	Reviews Vehicle Accident Report form and enters opinion of cause of accident.
County Health Services Administrator (CHSA)	County	Reviews entries of driver and TO and enters comments and recommendations on form.
<b>Procedures:</b> Resources required: copies of Vehicle Accident Report form		
1. Within 48 hours of an accident involving a CHT vehicle, the driver of that vehicle must submit a completed and signed Vehicle Accident Report form.		
2. TO reviews form makes inquiries, investigates by questions any passengers who were in the vehicle, interviews witnesses and reviews police report, if any.		
3. TO forms an opinion of the cause of the accident and enters that on the form, including any		

**SOP Title:      Vehicle Accident Report**

recommendation for disciplinary action; signs and submits form to CHSA.

4. CHSA reviews form and enters comments; signs form and gives to TO.

5. TO discusses CHSA's comments with driver and refers driver to Human Resources Officer in cases requiring disciplinary action.

6. TO files form with vehicle's records.





**SECTION I: TO BE COMPLETED BY DRIVER**

Full Name of Driver: Albert Tamba

Date/Time of Accident: 5 April 2010 Registration No. of Vehicle: RL 9285

Place of Accident: 5 kilometers north of Totota

Make, Year & Model of Vehicle: Toyota Land Cruiser 2006

For what purpose was vehicle being used at time of accident? *Give full details.*  
*Carrying Logistics Officer to Monrovia to pick up supplies and also to deliver survey forms to the MSE Unit.*

Names of passengers at time of accident:

*Jasper Johnson*

Name of persons injured or killed in the accident

*Jasper Johnson was slightly injured on his leg*

Names and addresses of witnesses to the accident:

*No witnesses*

Details of other vehicle(s) involved, if any:

Make, Year & Model of Vehicle(s): Toyota Corolla 2000 Registration No. P 3487

Name and Address of Driver: Joe Magnoon, Bongo Quarter, Totota

Was accident reported to police? Yes  If yes, date and place reported:

*Totota Police Station*

Give details of the accident:

*The other car swerved suddenly into my side of the road to avoid a large pothole, but did not get back to his side of the road soon enough causing me to pull hard to the right and going into a ditch.*

Signature of driver: *Albert Tamba* Date: 6 April 2010

Name, title and signature of person who assisted driver to complete this report:

*Jasper Johnson, Logistics Officer*

**SECTION II: TO BE COMPLETED BY TRANSPORTATION OFFICER**

Was the driver authorized and licensed to drive this vehicle at the time of the accident: Yes

In your opinion, what was the cause of the accident?

*Reckless driving on the part of the driver of the other vehicle.*

What disciplinary action is recommended, if any?

*None. Albert has had a good driving record for many years*

Signature of Transportation Officer: *Robert Nala* Date: 8 April 2010

**SECTION III: TO BE COMPLETED BY COUNTY HEALTH SERVICES ADMINISTRATOR**

Remarks:

*I agree with the TO, Albert is a good driver. Nevertheless he should be cautioned to maintain safe speed on road to Monrovia where there are potholes.*

Signature of CHSA: *Rufus Tamba* Date: 10 April 2010

Figure 5. Accident Report Form (Sample)

## 5.5 QUARTERLY VEHICLE REPORT

<b>POLICY</b>	<p>The CHT Transportation Officer shall prepare a quarterly report that indicates the condition, amount of usage and repairs required of all official vehicles to be used by the CHSA and CHO to monitor the condition of the CHT vehicle fleet.</p>
---------------	--

### GUIDELINES

By the 5<sup>th</sup> day following the end of a calendar quarter, the TO gathers information from Vehicle Logs and other documents and prepares a Quarterly Vehicle Report. This report is useful in documenting the condition of vehicles and repairs that have been performed or needed. Through this report the CHO and CHSA can monitor usage, including total distance traveled and fuel consumption, as well as the condition of each vehicle and the status of repairs performed and required.

### STANDARD OPERATING PROCEDURE

<b>SOP Title:</b>	<b>Quarterly Vehicle Report</b>	
<b>Purpose:</b>	To monitor condition of vehicles, distance traveled, fuel consumption and repairs performed and required.	
<b>Responsibilities:</b>		
<b>Title (Acronym)</b>	<b>Level</b>	<b>Responsibility</b>
Transportation Officer (TO)	County	Prepares report and submits to CHSA.
County Health Services Administrator (CHSA) & County Health Officer (CHO)	County	Review report and uses information to form recommendations for usage and repair of vehicles.
<b>Procedures:</b>	Resources required: copies of Quarterly Vehicle Report form; calculator	
1.	On blank form, TO enters county, marks quarter, enters year and page number.	
2.	Enters the make and number of each vehicle in a separate box on the form, using as many pages as required (two vehicles per page).	
3.	Using the Vehicle Logs submitted during the quarter for each vehicle, TO enters <ul style="list-style-type: none"> <li>• name of driver assigned to vehicle,</li> <li>• whether odometer reads in kilometers or miles,</li> <li>• general usage of vehicle,</li> <li>• whether vehicle uses diesel or gasoline,</li> <li>• odometer reading at beginning and end of quarter,</li> <li>• total distance traveled (if any odometers read in miles, first convert to kilometers by dividing miles by 0.6), and</li> </ul>	

**SOP Title: Quarterly Vehicle Report**

- total liters of fuel consumed.
4. TO enters the condition of each vehicle at the beginning of the quarter (information taken from end of quarter condition indicated on last quarterly report) and enters brief statement of repair work performed during the quarter.
  5. TO, with assistance of drivers and mechanic(s), inspects each vehicle and enters the condition at the end of the quarter; a brief statement is entered if repairs are required.
  6. After entering information for each individual vehicle, TO enters the following on the first page only:
    - the total number of vehicles owned and operated by the CHT (whether running or not), then adds up the total kilometers traveled and enters the total;
    - total liters of fuel consumed and enters on first page;
    - average kilometers per liter by dividing the total kilometers by the total fuel consumed (only one or two decimal places required).
  7. TO signs and dates form and submits to CHSA; files copy in appropriate location..
  8. CHSA reviews form noting the following, compared to previous quarters:
    - Total distance traveled by all vehicles and by individual vehicles;
    - Total fuel consumed by all vehicles and by individual vehicles;
    - Average kilometers per liter fuel—if consumption per kilometer seems excessive, CHSA may wish to investigate by auditing Vehicle Logs to determine whether fuel issued actually was filled into vehicle;
    - Repairs required will need to be budgeted for and arranged in the next quarter;
    - If any vehicle beyond repair, CHSA will need to consult central MoHSW to determine method of disposing of vehicle;
  9. CHSA discusses findings and recommendations based on the report and other observations with CHO and CHT Department Heads.



County: <i>Grand Gedeh</i>		Quarter: <input type="checkbox"/> January 1-March 31 <input checked="" type="checkbox"/> April 1-June 30 <input type="checkbox"/> July 1-September 30 <input type="checkbox"/> October 1-December 31		Year: <i>2010</i>	Page: <i>1</i>
<b>First Page Only</b>	Total number of CHT vehicles: <input type="text" value="4"/>	Total distance travelled in quarter: <input type="text" value="13,080"/> Km	Total fuel consumed in quarter: <input type="text" value="1,648"/> Liters	Average Km per Liter: <input type="text" value="7.95"/>	
Vehicle Make/Number: <i>Totota Land Cruiser RL 3875</i>			Driver: <i>Albert Tamba</i>		
General usage: <input type="checkbox"/> Ambulance <input checked="" type="checkbox"/> Personnel transport <input type="checkbox"/> Materials transport <input type="checkbox"/> Other:					
Fuel: <input checked="" type="checkbox"/> Diesel <input type="checkbox"/> Gasoline		Odometer indicates: <input type="checkbox"/> Miles <input checked="" type="checkbox"/> Kilometers			
Odometer Reading at beginning of quarter	Odometer Reading at end of quarter	Total distance travelled during quarter	Total fuel consumed during quarter		
<i>85,489</i>	<i>89,950</i>	<i>4,461</i> Km	<i>561.7</i> Liters		
Condition at beginning of quarter	<input checked="" type="checkbox"/> Good running condition <input type="checkbox"/> Running, needs repair <input type="checkbox"/> Not running, needs repair <input type="checkbox"/> Not running, not repairable				
Describe repair performed during this past quarter	<i>None</i>				
Condition at end of quarter	<input type="checkbox"/> Good running condition <input checked="" type="checkbox"/> Running, needs repair <input type="checkbox"/> Not running, needs repair <input type="checkbox"/> Not running, not repairable				
Describe repair required in next quarter	<i>Needs new rear shock absorbers and new front brake pads</i>				
Vehicle Make/Number: <i>Nissan Pick-up RL 5937</i>			Driver: <i>John Saysay</i>		
General usage: <input type="checkbox"/> Ambulance <input type="checkbox"/> Personnel transport <input checked="" type="checkbox"/> Materials transport <input type="checkbox"/> Other:					
Fuel: <input checked="" type="checkbox"/> Diesel <input type="checkbox"/> Gasoline		Odometer indicates: <input type="checkbox"/> Miles <input checked="" type="checkbox"/> Kilometers			
Odometer Reading at beginning of quarter	Odometer Reading at end of quarter	Total distance travelled during quarter	Total fuel consumed during quarter		
<i>124,598</i>	<i>129,665</i>	<i>5,067</i> Km	<i>637.4</i> Liters		
Condition at beginning of quarter	<input type="checkbox"/> Good running condition <input checked="" type="checkbox"/> Running, needs repair <input type="checkbox"/> Not running, needs repair <input type="checkbox"/> Not running, not repairable				
Describe repair performed during this past quarter	<i>Replaced wheel bearings, shock absorbers, brakes and muffler.</i>				
Condition at end of quarter	<input checked="" type="checkbox"/> Good running condition <input type="checkbox"/> Running, needs repair <input type="checkbox"/> Not running, needs repair <input type="checkbox"/> Not running, not repairable				
Describe repair required in next quarter	<i>None expected</i>				

Prepared by: *Jacob Quaye, TO* Date *5 July 2010*

Figure 6. Quarterly Vehicle Report (Sample page 1)



County: <i>Grand Gedeh</i>		Quarter: <input type="checkbox"/> January 1-March 31 <input type="checkbox"/> July 1-September 30		<input checked="" type="checkbox"/> April 1-June 30 <input type="checkbox"/> October 1-December 31		Year: <i>2010</i>	Page: <i>2</i>
<b>First Page Only</b>	Total number of CHT vehicles: <input type="text"/>	Total distance travelled in quarter: <input type="text"/> Km	Total fuel consumed in quarter: <input type="text"/> Liters	Average Km per Liter: <input type="text"/>			
Vehicle Make/Number: <i>Totota Ambulance RL 8765</i>				Driver: <i>George Johnson</i>			
General usage: <input checked="" type="checkbox"/> Ambulance <input type="checkbox"/> Personnel transport <input type="checkbox"/> Materials transport <input type="checkbox"/> Other:							
Fuel: <input checked="" type="checkbox"/> Diesel <input type="checkbox"/> Gasoline		Odometer indicates: <input type="checkbox"/> Miles <input checked="" type="checkbox"/> Kilometers					
Odometer Reading at beginning of quarter	Odometer Reading at end of quarter	Total distance travelled during quarter		Total fuel consumed during quarter			
<i>45,591</i>	<i>49,143</i>	<i>3,552</i>		<i>448.6</i> Liters			
Condition at beginning of quarter	<input checked="" type="checkbox"/> Good running condition <input type="checkbox"/> Running, needs repair <input type="checkbox"/> Not running, needs repair <input type="checkbox"/> Not running, not repairable						
Describe repair performed during this past quarter	<i>None</i>						
Condition at end of quarter	<input checked="" type="checkbox"/> Good running condition <input type="checkbox"/> Running, needs repair <input type="checkbox"/> Not running, needs repair <input type="checkbox"/> Not running, not repairable						
Describe repair required in next quarter	<i>None expected</i>						
Vehicle Make/Number: <i>Toyota Prada RL 4432</i>				Driver: <i>None</i>			
General usage: <input type="checkbox"/> Ambulance <input checked="" type="checkbox"/> Personnel transport <input type="checkbox"/> Materials transport <input type="checkbox"/> Other:							
Fuel: <input checked="" type="checkbox"/> Diesel <input type="checkbox"/> Gasoline		Odometer indicates: <input type="checkbox"/> Miles <input checked="" type="checkbox"/> Kilometers					
Odometer Reading at beginning of quarter	Odometer Reading at end of quarter	Total distance travelled during quarter		Total fuel consumed during quarter			
<i>77,987</i>	<i>77,987</i>	<i>0</i>		<i>0</i> Liters			
Condition at beginning of quarter	<input type="checkbox"/> Good running condition <input type="checkbox"/> Running, needs repair <input type="checkbox"/> Not running, needs repair <input checked="" type="checkbox"/> Not running, not repairable						
Describe repair performed during this past quarter	<i>Vehicle had major accident in 2009 and is not able to be repaired.</i>						
Condition at end of quarter	<input type="checkbox"/> Good running condition <input type="checkbox"/> Running, needs repair <input type="checkbox"/> Not running, needs repair <input checked="" type="checkbox"/> Not running, not repairable						
Describe repair required in next quarter							

Prepared by: *Jacob Quaye, TD*

Date *5 July 2010*

Figure 7. Quarterly Vehicle Report (Sample page 2)

## 5.6 ANNUAL VEHICLE INVENTORY

<b>POLICY</b>	<p>The CHT shall prepare an annual inventory report based on a comprehensive inspection that indicates the condition and required repairs or major maintenance of all official vehicles.</p>
---------------	--

### GUIDELINES

During the first week of July of each year, the Transportation Officer, with assistance of drivers and a qualified mechanic will inspect all CHT vehicles to determine their condition. This inspection should be comprehensive and include a detailed report of the condition of each vehicle and recommendations for repairs or major maintenance. The purpose of the inventory is to document, on an annual basis, the presence and state of roadworthiness of all CHT vehicles. A copy of the Inventory should be sent to the Central MoHSW Transportation Division.

### STANDARD OPERATING PROCEDURE

<b>SOP Title:</b> Annual Vehicle Inventory		
<b>Purpose:</b> To report on presence and condition of CHT vehicles.		
<b>Responsibilities:</b>		
<b>Title (Acronym)</b>	<b>Level</b>	<b>Responsibility</b>
Transportation Officer (TO)	County	Prepares report and submits to CHSA.
County Health Services Administrator (CHSA) & County Health Officer (CHO)	County	Review report and uses information to form recommendations for disposition of vehicle fleet.
<b>Procedures:</b> Resources required: copies of Annual Vehicle Inventory form		
<ol style="list-style-type: none"> <li>1. By the 10<sup>th</sup> day of July each year, on blank form, TO enters county, year, number of vehicles and page number.</li> <li>2. TO enters the make/model, plate number and year of manufacture of each vehicle in a separate box on the form, using as many pages as required (five vehicles per page).</li> <li>3. TO enters the condition of each vehicle at the end of the inventory year (information taken from end of quarter condition indicated on the April-June quarterly report), and enters brief statement of repair work recommended or other relevant comments.</li> <li>4. TO signs and dates form and submits to CHSA; files copy in appropriate location.</li> <li>5. CHSA reviews and submits to CHO who forwards a copy to the Central MoHSW Transportation Division.</li> </ol>		



County: <i>Grand Gedeh</i>		Inventory Year: <i>2010</i>	Total Number of Vehicles: <i>4</i>	Page: <i>1</i>
Make/Model	Number	Year	Condition of Vehicle at end of Inventory Year	
<i>Totota Land Cruiser</i>	<i>RL3875</i>	<i>2006</i>	<input type="checkbox"/> Good running condition <input checked="" type="checkbox"/> Running, needs repair <input type="checkbox"/> Not running, needs repair <input type="checkbox"/> Not running, not repairable	
			Comments, recommended repairs:  <i>Needs new rear shock absorbers and new front brake pads</i>	
<i>Nissan Pick-up</i>	<i>RL5937</i>	<i>2004</i>	<input checked="" type="checkbox"/> Good running condition <input type="checkbox"/> Running, needs repair <input type="checkbox"/> Not running, needs repair <input type="checkbox"/> Not running, not repairable	
			Comments, recommended repairs:  <i>Recently had major maintenance and repair.</i>	
<i>Totota Ambulance</i>	<i>RL8765</i>	<i>2009</i>	<input checked="" type="checkbox"/> Good running condition <input type="checkbox"/> Running, needs repair <input type="checkbox"/> Not running, needs repair <input type="checkbox"/> Not running, not repairable	
			Comments, recommended repairs:  <i>Still under warranty.</i>	
<i>Toyota Prada</i>	<i>RL4432</i>	<i>2004</i>	<input type="checkbox"/> Good running condition <input type="checkbox"/> Running, needs repair <input type="checkbox"/> Not running, needs repair <input checked="" type="checkbox"/> Not running, not repairable	
			Comments, recommended repairs:  <i>Vehicle had major accident in 2009 and is not able to be repaired. Recommend disposal through standard MOHSW policy.</i>	
			<input type="checkbox"/> Good running condition <input type="checkbox"/> Running, needs repair <input type="checkbox"/> Not running, needs repair <input type="checkbox"/> Not running, not repairable	
			Comments, recommended repairs:	

Prepared by: *Jacob Quaye, TO*      Date *5 July 2010*

**Figure 8. Annual Vehicle Inventory (Sample)**

## 6. PREVENTIVE MAINTENANCE

### POLICY

**The CHT shall develop and follow a program that ensures proper maintenance and repair of vehicles. Preventive maintenance of vehicles will result in fewer costly repairs, reduced down-time, and a longer useful life.**

### GUIDELINES

Preventive maintenance is designed to identify actual and potential problems early. A Maintenance program can be established by following these steps:

1. The first step in a vehicle preventive maintenance program is to develop a preventive maintenance schedule.
2. The second step is to frequently inspect vehicles and attend promptly to whatever maintenance problems can be solved by the CHT staff – including maintaining correct tire pressure, keeping fluid levels topped up, tightening loose nuts and bolts, etc.
3. The third step is to get needed outside maintenance service promptly. Certain engine adjustments and more complicated maintenance actions require the services of a qualified mechanic that should not be attempted by CHT personnel.

### 6.1 SCHEDULING PREVENTIVE MAINTENANCE

### POLICY

**The CHT Transportation Officer shall prepare a quarterly schedule indicating routine maintenance of vehicles and ensure maintenance is performed.**

### GUIDELINES

Preventive maintenance of vehicles can be managed by following the manufacturer's recommended maintenance schedule that is supplied with the vehicle when new. Generally this involves a set of maintenance actions that occur at regular intervals according to the odometer reading. Given road conditions in Liberia, it is best to follow the manufacturer's recommendations for "harsh environment."



## STANDARD OPERATING PROCEDURE

<b>SOP Title: Quarterly Vehicle Maintenance Schedule</b>		
<b>Purpose:</b> To schedule when preventive maintenance servicing of vehicles is due during the quarter		
<b>Responsibilities:</b>		
<b>Title (Acronym)</b>	<b>Level</b>	<b>Responsibility</b>
Transportation Officer (TO)	County	Based on manufacturer’s recommended maintenance intervals, TO schedules vehicle maintenance using Quarterly Vehicle Maintenance Schedule form.
<b>Procedures:</b>		
Resources required: Copies of Quarterly Vehicle Maintenance Schedule form		
<ol style="list-style-type: none"> <li>At the beginning of each quarter of the year (January 1-March 31; April 1-June 30; July 1-September 30; October 1-December31), TO fills in a blank form by entering the following information (see sample form in Figure 9): <ul style="list-style-type: none"> <li>Dates of quarter</li> <li>Make and number of each CHT vehicle</li> <li>Odometer reading at beginning of quarter</li> <li>Odometer reading and date of last oil/filter change</li> </ul> </li> <li>For each vehicle, based on the manufacturer’s recommended servicing interval (usually something like 5,000 km), TO enters the odometer reading when the next oil/filter change will be due. The estimated date when that odometer reading will be reached based on past mileage per quarter is calculated and entered into the “Estimated Date” space for that vehicle.</li> <li>A space for a second oil/filter change is available. If it is estimated that the odometer reading when the service is due will be reached during the quarter, the estimated date is entered. If it will not occur until after the quarter, “Next Quarter” is written in.</li> <li>If any major servicing will be due, according to the manufacturer’s recommendations that can be noted in the “Major Service Requirement” space.</li> <li>At the end of the quarter, the odometer reading of each vehicle is recorded on the form.</li> <li>If there are any other issues concerning the maintenance of a vehicle, those issues can be noted in the “Other Maintenance Issues” space.</li> <li>TO enters his/her name and date the Schedule was prepared.</li> <li>TO consults the completed Schedule on a weekly basis and compares odometer readings from Vehicle Logs with the odometer reading indicated on the form when the next oil/filter change is due. As the odometer reading for servicing is approaching, TO makes appropriate arrangements for servicing the vehicle.</li> </ol>		



County Health Team  
**QUARTERLY VEHICLE  
MAINTENANCE SCHEDULE**

Quarter: October - December 2010

<b>Vehicle:</b>		Toyota Land Cruiser RL 3434	Toyota Prada RL 1234	Nissan Pickup RL 7890	Ambulance RL 4869		
<b>Odometer Reading Beginning of Quarter</b>		65,786 km	43,209 km	102,459 km	5,897 km		
<b>Last Oil/Filter Change</b>	<b>Odometer</b>	62,000 km	44,000 km	98,000 km	0 km (new)		
	<b>Date</b>	13 Aug 2010	26 Sep 2010	13 July 2010	1 Aug 2010		
<b>Oil/filter Change(s) due</b>	<b>Odometer</b>	67,000 km	49,000 km	103,000 km	6,000 km		
	<b>Estimated date</b>	1 Nov 2010	15 Dec 2010	15 Oct 2010	5 Oct 2010		
	<b>Odometer</b>	72,000 km	54,000 km	108,000	12,000 km		
	<b>Estimated date</b>	Next Quarter	Next Quarter	31 Dec 2010	Next Quarter		
<b>Major Service Requirement</b>		80,000 km due next quarter		120,000 km, but may need serious engine overhaul			
<b>Odometer Reading End of Quarter</b>							
<b>Other Maintenance Issues</b>					Vehicle entitled to free warrantee service at dealer		

Prepared by Jacob Quaye Date 2 October 2010

Figure 9. Quarterly Vehicle Maintenance Schedule form (Sample)

## 6.2 VEHICLE MAINTENANCE CHECKLIST

<b>POLICY</b>	<p><b>Drivers shall perform daily and weekly inspection of vehicles, correct minor problems according to established procedure and refer serious problems to the Transportation Officer.</b></p>
---------------	--

### GUIDELINES

Preventive maintenance can also be facilitated by frequent inspection of vehicles to determine if some minor adjustment or part replacement is required and avoid costly future repair. Drivers have maintenance responsibilities in addition to driving the vehicle. These responsibilities will include regular inspection of the mechanical condition of the vehicle. If a driver finds actual or potential mechanical problems, he will note the problem on the Vehicle Maintenance Checklist. If the problem is minor, and within the approved list of actions the driver may take, such problems are corrected by the driver. More serious problems outside the level of ability of the driver will be referred to the Transportation Officer, who will decide if it is safe to operate the vehicle, or whether the vehicle should first be repaired before it is put on the road.

### STANDARD OPERATING PROCEDURE

<b>SOP Title:      Vehicle Maintenance Checklist</b>		
<b>Purpose:</b> Completion of daily and weekly maintenance checks to ensure that vehicles are properly maintained and safe to operate.		
<b>Responsibilities:</b>		
<b>Title (Acronym)</b>	<b>Level</b>	<b>Responsibility</b>
Driver	County	Completes daily and weekly checking of vehicle condition; remedies minor problems/defects; reports serious problems/defects to Transportation Officer
Transportation Officer (TO)	County	Receives reports from drivers concerning problems/defects with vehicles and arranges remedial actions; monitors quality of drivers in completing checklists and performing minor remedial actions.
<b>Procedures:</b>		

**SOP Title: Vehicle Maintenance Checklist**

Resources required:

- Copies of Vehicle Maintenance Checklist form
- Clipboard
- Tire pressure gauge

2. Each day prior to using a vehicle, the Driver assigned to the vehicle completes the DAILY section of the checklist (see sample form in Figure 10).
3. If there is no problem with a particular item on the checklist, then the Driver indicates “OK” by placing a  mark in the box for that item below the appropriate day of the week.
4. If an item is “Not OK” Driver places an  mark in the box for that item below the appropriate day of the week and writes a brief description of the problem in the space provided (using the back of the form if more space required).
5. After completing the daily checklist, Driver takes corrective actions for minor problems marked “Not OK” that Driver is qualified to remedy (see the table following this SOP for a list of corrective actions that may be taken by drivers).
6. If there is a serious problem with a particular item on the checklist marked “Not OK” that the Driver is not qualified to remedy (see the table following this SOP for a list of problems that must be referred to the TO). NOTE: The vehicle must not be used to carry personnel or materials until the problem is remedied.
7. Once a week, the WEEKLY section of the form will be completed by Driver, following the same procedures as noted above for the Daily Check.
8. Problems with any items that are not included on the form can either be added to one of the blank spaces in the “Daily Check” section, or noted in the “Describe any other problem(s) with vehicle” space at the bottom of the form and refers the problem to the TO as soon as possible).
9. After completion of the form at the end of the week, Driver submits form to TO.
10. TO reviews forms and notes any problems that need attention.

**Corrective vehicle maintenance actions that may be taken by drivers  
or referred to the CHT Transportation Officer**

<b>Item to Inspect</b>	<b>Problem</b>	<b>Corrective action that can be taken by driver</b>	<b>Refer to TO for correction/repair</b>
<b>Engine oil</b>	Low oil level	Top up with appropriate oil – do not overfill	Not required
<b>Tire pressure (including spare) – check when tires are cold</b>	Tire pressure too low or too high	Fill to appropriate pressure – do not overfill	Report to TO for repair if puncture or damaged tire suspected
<b>Brakes</b>	Squealing or other noise	None	Report to TO
<b>Head lights</b>	Not functioning	None	Report to TO
<b>Brake lights</b>	Not functioning	None	Report to TO

<b>Corrective vehicle maintenance actions that may be taken by drivers or referred to the CHT Transportation Officer</b>			
<b>Item to Inspect</b>	<b>Problem</b>	<b>Corrective action that can be taken by driver</b>	<b>Refer to TO for correction/repair</b>
<b>Turn signal lights</b>	Not functioning	None	Report to TO
<b>Horn</b>	Not functioning	None	Report to TO
<b>Jack, tools, spare tire in vehicle</b>	Not in vehicle or not functioning	Locate and put in vehicle before running	Report to TO if not functioning or cannot locate
<b>Fluid leaks</b>	Fluid leaking from vehicle	None	Report to TO
<b>Fuel level</b>	Below level needed for journey	Fill vehicle with sufficient fuel for planned journey	Request fuel from TO
<b>Steering</b>	Steering wheel shakes or vibrates	None	Report to TO
<b>Seat Belts</b>	Buckle does not close, damaged, missing	None	Report to TO
<b>Cleanliness</b>	Dirty vehicle	Clean vehicle inside and out	Not required
<b>Battery fluid level (if sealed battery do not check)</b>	Level too low	Top up – do not overfill	Not required
<b>Battery terminals</b>	Dirty	Clean outside of terminals	Report to TO if inside of terminals need cleaning
<b>Radiator fluid level</b>	Level too low	Top up with appropriate fluid – do not overfill	Not required
<b>Brake fluid level</b>	Level too low	Top up with brake fluid – do not overfill	Not required
<b>Windscreen wiper blades</b>	Worn out	None	Report to TO
<b>Windscreen washer level</b>	Level too low	Top up with water or washer fluid	Not required
<b>Tires for wear and/or damage</b>	Tires worn too low or damaged	None	Report to TO
<b>Check for loose nuts, bolts, screws</b>	Loose nuts, bolts, screws; vehicle body rattling	Tighten nuts, bolts screws on body, but not engine or other mechanical parts	Report loose nuts, bolts, screws on engine or other mechanical parts to TO
<b>Other electrical</b>	Electrical device on vehicle not functioning properly	None	Report to TO
<b>Other mechanical</b>	Vehicle or specific mechanical device not functioning properly	None	Report to TO



**COUNTY HEALTH TEAM  
VEHICLE MAINTENANCE CHECKLIST**

Vehicle Number: RL 1234      Dates: from 5 Oct 2010 to 11 Oct 2010

Daily Check	✓ = OK X = Not OK							Comments, Attention Required, Action taken (use back of form if more space required)
	M	T	W	Th	F	Sa	Su	
Engine oil level	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Topped up with oil
Tire pressure (incl. spare)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Added pressure
Brakes	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Head lights	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Brake lights	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Turn signal lights	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Horn	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Jack, tools, spare tire	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Jack was missing, borrowed by other driver - returned to vehicle
Fluid leaks	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Fuel level	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Filled fuel
Steering	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Steering feels loose, reported to TO
Seat Belts	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Cleanliness	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Washed vehicle
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Weekly Check	✓ = OK X = Not OK	Comments, Attention Required, Action Taken (use back of form if more space required)						
Battery fluid level	<input checked="" type="checkbox"/>	Did not check - sealed battery						
Battery terminals	<input checked="" type="checkbox"/>							
Radiator fluid level	<input checked="" type="checkbox"/>							
Brake fluid level	<input checked="" type="checkbox"/>	Topped up with brake fluid						
Windscreen wiper blades	<input checked="" type="checkbox"/>							
Windscreen washer level	<input checked="" type="checkbox"/>							
Tires for wear and/or damage	<input checked="" type="checkbox"/>							
Check for loose nuts, bolts, screws	<input checked="" type="checkbox"/>	Tightened bumper bolts						
Describe any other problem(s) with vehicle: <i>Back wheels make loud rattling noise on bad roads.</i>								

Driver Name: Jack Benson      Date: 11 Oct 2010

Completed forms are to be submitted to the transportation officer.

**Figure 10. Vehicle Maintenance Checklist (Sample)**

### 6.3 REQUESTING MAINTENANCE

#### GUIDELINES

Whether requesting preventive maintenance or repair services (see next Chapter), a Vehicle Work Request form must be filled out and all signatures obtained. Exactly where maintenance services are performed, and who performs them will vary county-by-county. If the CHT has mechanics on staff who have the appropriate skills and tools, they should perform the service. If not, then options include obtaining services from NGO garages, or private/commercial garages that may be available in the county. The least expensive is to have the service done by the CHT—private garages can be expensive. If service at private garages required, the CHT must use the appropriate procurement procedures, as described elsewhere. The CHT should also procure and stock (in a secure place) an appropriate quantity of supplies and spare parts, such as oil, oil filters, air filters, brake pads, shock absorbers, etc. This will increase efficiency and reduce costs.

#### STANDARD OPERATING PROCEDURE

<b>SOP Title:      Vehicle Work Request</b>		
<b>Purpose:</b>	To request preventive maintenance work required to keep CHT vehicles in good running condition. <b><i>(Note: this form may be used for both preventive maintenance and repair of vehicles)</i></b>	
<b>Responsibilities:</b>		
<b>Title (Acronym)</b>	<b>Level</b>	<b>Responsibility</b>
Transportation Officer (TO)	County	Completes Vehicle Work Request forms based on Vehicle Maintenance Schedule and repair needs identified by drivers and his/her own assessment of the condition of vehicle
Accounting Officer (AO)	County	Develops cost estimate and determines source of funds; consults with TO as appropriate.
County Health Services Administrator (CHSA)	County	Reviews and approves/disapproves Vehicle Work Requests; consults with CHO and TO as appropriate
Logistics Officer (LO)	County	Assigns work to CHT mechanics, or initiates procurement of maintenance service from local private garage if CHT mechanics unavailable; consults with TO as appropriate.

**SOP Title:        Vehicle Work Request**

**Procedures:**        Resources required: Copies of Vehicle Work Request form

1. At the end of every week the TO reviews the Vehicle Maintenance Schedule and determines whether any vehicles require preventive maintenance services during the following week; the TO should physically verify that odometer readings have been reached that indicate maintenance service is required.
2. If preventive maintenance service is required TO completes a Vehicle Work Request form by entering the required information, including a statement that adequately describes the work needed. If only simple maintenance (oil/filter change) is required, a Vehicle Assessment Report form (see Section 7.2) does not need to be attached.
3. TO signs form and submits to the Accounting Officer.
4. Accounting Officer develops cost estimate and enters on form, indicating what the source of funds and whether there are adequate funds in that account or budget line item; consults with TO to clarify any uncertainties in what has been requested; signs form and submits to CHSA.
5. CHSA reviews form and approves or disapproves, noting reasons if disapproved; signs form and gives to Logistics Officer.
6. Logistics Officer assigns work to CHT mechanics if appropriately skilled to undertake the maintenance service; issues supplies from the storeroom as required; if qualified CHT mechanics not available initiates procurement action to select and assign the work to a private local garage. Date the work is promised is also noted.
7. When work is completed Logistics Officer enters date completed and whether work was accomplished in a satisfactory manner, noting reason if not. Signs form and returns to TO.
8. TO also enters the day and time of planned maintenance servicing in the Vehicle Schedule (see Section 5.2).
9. TO files form in vehicle's file.





TRANSPORTATION OFFICER		
Name & Title of Person Requesting: <i>Robert Nala</i>	Date of Request: <i>24 March 2010</i>	Date work completion required: <i>30 March 2010</i>
Vehicle make and no.: <i>Toyota Land Cruiser RL 5678</i>		Odometer: <i>84,307 km</i>
Description of problem and work required: (Vehicle Assessment Form attached: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No)		
<ul style="list-style-type: none"> <li>• <i>Oil and oil filter change.</i></li> <li>• <i>Air filter cleaned and refitted</i></li> <li>• <i>Inspect brakes</i></li> <li>• <i>Inspect shock absorbers</i></li> <li>• <i>Adjust hand brake</i></li> </ul>		
Signed: <i>Robert Nala</i>		Date: <i>24 March 2010</i>
ACCOUNTING OFFICER		
Estimated Cost: <i>Oil and filter: \$35.00</i> <i>Labor: \$25.00 (if outside garage)</i>		Source of Funds: <i>Petty cash (vehicle maintenance budget line item)</i>
Adequate Funds Available: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (If no, return to CHSA)		
Signed: <i>Mercy Kollie</i>		Date: <i>25 March 2010</i>
COUNTY HEALTH SERVICES ADMINISTRATOR		
<input checked="" type="checkbox"/> Approved    Comments: <i>Make sure servicing done by 30 March since immunization campaign starting just after that.</i>		<input type="checkbox"/> Disapproved    Reason for disapproving:
Signed: <i>Rufus Damba</i>		Date: <i>26 March 2010</i>
LOGISTICS OFFICER		
Work Assigned to: <i>James Saysay, CHT Mechanic</i>		Date promised: <i>28 March 2010</i>
		Date completed: <i>30 March 2010</i>
Work Satisfactorily Completed: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (if No, state reason) <i>Two days later than promised.</i>		
Signed: <i>Jasper Johnson</i>		Date: <i>30 March 2010</i>

Figure 11. Vehicle Work Request (Preventive Maintenance) form (Sample)

## 7. REPAIR

<b>POLICY</b>	<b>Repairs to vehicles should be accomplished as efficiently as possible to avoid disruption of transportation for vital health services.</b>
---------------	---

### GUIDELINES

Repairs are normally required when one of two things happens:

- Something on a vehicle has broken or worn out and it is running poorly or has a breakdown, or
- The vehicle has had an accident and has been damaged.

### 7.1 REQUESTING REPAIR

As with preventive maintenance, all repairs require a Vehicle Work Request to be filled in with all signatures before repairs can be undertaken. If the CHT has mechanics on staff who have the appropriate skills and tools, they should perform the repairs. If not, then options include obtaining services from NGO garages, or private/commercial garages that may be available in the county, as explained in the next Chapter of this Manual. If repair service at private garages is required, the CHT must use the appropriate procurement procedures. The CHT should also procure and stock (in a secure place) an appropriate quantity of supplies and spare parts, such as oil, brake pads, shock absorbers, clutch plates, fan belts, spark plugs, tires, etc. This will increase efficiency of obtaining repairs and reduce costs.

In case of emergency repairs where some payment had to be made to allow the vehicle to return to CHT headquarters, a Vehicle Work Request form must be completed and signatures obtained retroactively. This is required as part of the process of receiving reimbursement for any out-of-pocket money paid for emergency repairs.

### STANDARD OPERATING PROCEDURE

<b>SOP Title:</b>	<b>Vehicle Work Request</b>	
<b>Purpose:</b>	To request repair work required to keep CHT vehicles in good running condition. <i>(Note: this form to be used for both preventive maintenance and repair of vehicles)</i>	
<b>Responsibilities:</b>		
<b>Title (Acronym)</b>	<b>Level</b>	<b>Responsibility</b>
Transportation Officer (TO)	County	Completes Vehicle Work Request forms based repair needs identified by drivers and his/her own inspection and assessment of the condition of vehicle

**SOP Title:      Vehicle Work Request**

Accounting Officer (AO)	County	Develops cost estimate and determines source of funds; consults with TO as appropriate.
County Health Services Administrator (CHSA)	County	Reviews and approves/disapproves Vehicle Work Requests; consults with CHO and TO as appropriate
Logistics Officer (LO)	County	Assigns repair work to CHT mechanics, or initiates procurement of repair service from local private garage if CHT mechanics unavailable; consults with TO as appropriate.

**Procedures:**      Resources required: Copies of Vehicle Work Request form

1. When a vehicle requires repair, whether due to breakdown or accident, TO completes a Vehicle Work Request form; if the repair is required due to an accident, the TO should also ensure that an Accident Report is also completed appropriately (see Section 4.8).
2. TO may need to consult with one or more mechanics to determine the extent of the repairs required; if to be completed by a private garage, such garages can provide a full description of the problem and quote estimates of the cost of the repair. If the work is to be performed by the CHT mechanics, or the MoHSW Central Garage, a Vehicle Assessment Report form (see Section 7.2) should be completed.
3. TO enters information in Vehicle Work Request form including vehicle make and number, date required, odometer reading and a statement that adequately describes the work needed.
4. TO signs form and submits to the Accounting Officer.
5. Accounting Officer develops cost estimate and enters on form, indicating what the source of funds and whether there are adequate funds in that account or budget line item; consults with TO to clarify any uncertainties in what has been requested; signs form and submits to CHSA.
6. CHSA reviews form and approves or disapproves, noting reasons if disapproved; signs form and gives to Logistics Officer.
7. Logistics Officer assigns work to CHT mechanics if they are appropriately skilled to undertake the repairs; issues supplies and spare parts from the storeroom as required; if qualified CHT mechanics not available initiates procurement action to select and assign the work to a private local garage. Date the work is promised is also noted.
8. When work is completed Logistics Officer enters date completed and whether work was accomplished in a satisfactory manner, noting reason if not. Signs form and returns to TO.
9. TO also enters the day and time of planned repair in the Vehicle Schedule (see Section 5.2).
10. TO files form in vehicle's file.



TRANSPORTATION OFFICER		
Name & Title of Person Requesting: <i>Robert Nala</i>	Date of Request: <i>2 July 2010</i>	Date work completion required: <i>10 July 2010</i>
Vehicle make and no.: <i>Mazda Pickup RL 4321</i>		Odometer: <i>45,498 km</i>
Description of problem and work required: (Vehicle Assessment Form attached: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No) <ul style="list-style-type: none"> <li>• <i>Repair damaged front right fender, front grille and replace broken headlight.</i></li> <li>• <i>Replace damaged right front wheel rim, tire and brake parts</i></li> <li>• <i>Repair punctured radiator and replace coolant.</i></li> </ul> <p><i>See attached Vehicle Assessment form for further details.</i> <i>Checking to determine if this repair can be covered by insurance.</i></p>		
Signed: <i>Robert Nala</i>		Date: <i>2 July 2010</i>
ACCOUNTING OFFICER		
Estimated Cost: Parts: <i>\$678.57</i> Labor: <i>\$225 (if done by private garage)</i>		Source of Funds: <i>vehicle maintenance and repair budget line item</i>
Adequate Funds Available: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (if no, return to CHSA)		
Signed: <i>Mercy Kollie</i>		Date: <i>5 July 2010</i>
COUNTY HEALTH SERVICES ADMINISTRATOR		
<input checked="" type="checkbox"/> Approved    Comments: <i>Do not start repairs until determine whether covered by insurance.</i>		<input type="checkbox"/> Disapproved    Reason for disapproving:
Signed: <i>Rufus Bamba</i>		Date: <i>6 July 2010</i>
LOGISTICS OFFICER		
Work Assigned to: <i>Tip-Top Garage, Zwedru (can proceed since not covered by insurance)</i>		Date promised: <i>12 July 2010</i> Date completed: <i>12 July 2010</i>
Work Satisfactorily Completed: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (if No, state reason)		
Signed: <i>Jasper Johnson</i>		Date: <i>12 July 2010</i>

Figure 12. Vehicle Work Request (Repair) form (Sample)

## 7.2 ASSESSING REPAIR REQUIREMENTS

### GUIDELINES

To assist with the task of determining exactly what is required to repair a vehicle, an assessment must be conducted by a qualified mechanic. The mechanic determines through inspection exactly what is required and enters that information on a Vehicle Assessment Report form. This report assists the TO and Logistics Officer to procure the proper services and spare parts. If repair will be done at a private garage, they should use the assessment to propose a detailed cost estimate as part of the procurement process.

### STANDARD OPERATING PROCEDURE

<b>SOP Title:      Vehicle Assessment Report</b>		
<b>Purpose:</b> To provide a report of the work and parts required to keep a vehicle well maintained, or return a vehicle to roadworthiness after a breakdown or accident.		
<b>Responsibilities:</b>		
<b>Title (Acronym)</b>	<b>Level</b>	<b>Responsibility</b>
Transportation Officer (TO)	County	Initiates Vehicle Assessment Report form by filling in particulars of vehicle; gives to qualified mechanic to fill in the description of work and parts needed, or receives information from mechanic and enters on form.
<b>Procedures:</b> Resources required: Copies of Vehicle Assessment Report form		
<ol style="list-style-type: none"> <li>1. When a vehicle requires repair or major preventive maintenance, in addition to a Vehicle Work Request, the TO initiates a Vehicle Assessment Report form. The vehicle make, numbers, and odometer reading, etc. are entered on the form.</li> <li>2. Assisted by a qualified mechanic at the CHT or the MoHSW Central Garage, the TO or the mechanic enters a description of the work required and the parts and supplies required, including quantities. The TO should assist the mechanic to ensure that the written description and listing of requirements is clear.</li> <li>3. If a qualified mechanic is not available at the CHT, assistance from a mechanic at a private garage may be required.</li> <li>4. TO or mechanic signs and prints name and title.</li> <li>5. TO attaches the Vehicle Assessment Report form to the Vehicle Work Request from before submitting to the Accounting Officer.</li> </ol>		



No.: 65

Date: 6 Feb 2010

Vehicle model: Toyota Land Cruiser	Plate No.: RL 6789	Odometer reading: 78,027	
Driver's name: Albert Tamba			
Serial No: 23V5983AN3456	Engine No: 1HZ06348	Department/Program: Lofa County CHT	
Description of work to be done, Comments	No.	Parts/items needed	Quantity
<p>Routine maintenance, replacement of brakes, clutch and repair of suspension and undercarriage.</p> <p>Windshield has several large cracks and should be replaced, but part not in stock in Monrovia. Need to order for future replacement.</p>	1	Fuel Filter	1 pc
	2	Fuel Element	1 pc
	3	Air Filter	1 pc
	4	Engine Oil #50	8 ltr
	5	Oil Filter	1 pc
	6	Clutch Disk	1 pc
	7	Clutch Pressure Plate	1 pc
	8	Shock Absorbers	4 pcs
	9	Steering Damper	1 pc
	10	Brake Pads (Front)	1 set
	11	Brake Shoes (Rear)	1 set
	12	Stabilizer Bushing (Front)	4 pcs
	13	Stabilizer Bushing (Rear)	8 pcs

Signed: James Saysay Name, Title James Saysay, Head Mechanic

Figure 13. Vehicle Assessment Report form (Sample)

## 8. MAINTENANCE AND REPAIR SERVICES

### POLICY

**CHTs are authorized to procure and pay for vehicle maintenance and repair from local services facilities located within their counties up to approved monetary limits; such costs that exceed those limits must be referred to the Central Ministry.**

### GUIDELINES

Keeping vehicles running by arranging for routine maintenance and repair of damage or mechanical breakdown is the responsibility of the CHT. In order to fulfill that responsibility, CHTs may procure and pay for such services within authorized limits. The procurement of such services must follow established Ministry procurement policies and procedures. As with all procurement actions, adequate documentation of vehicle maintenance and repair services must be kept. To the maximum extent possible, CHTs should utilize the services of local garages—but only if such facilities are capable of rendering competent, efficient and cost-effective services. In this chapter, the options for procuring vehicle maintenance and repair services will be explored, with a view to giving CHTs as much latitude as possible in procuring such services.

### NOTICE

**At the time of writing of this Manual the policies and procedures of the Ministry with regard to county-level procurement have not been finalized. Certain details concerning the procurement of vehicle maintenance and repair services at the county level will have to await the finalization of these county-level procurement policies and procedures.**

#### 8.1 CHT MAINTENANCE FACILITY

Some CHTs have vehicle maintenance facilities that are located at or near their headquarters. Where such facilities exist the CHT should request that the Central Ministry Transportation Office visit their CHT and assess the capabilities of their vehicle maintenance and repair facility. The Central Transportation Office can assess competencies of personnel, and availability of tools and other equipment. Based on that assessment, CHT facilities will be rated as to the level of services they are authorized to perform. Recommendations can also be made by the Central Transportation Office as to the type of additional training and/or physical improvements the CHT facility might require to qualify it to perform a wider range of services.

If it is determined that required maintenance and/or repair services are within the capability of the CHT garage, a Vehicle Work Request and a Vehicle Assessment Report must be completed and approved before such work is performed.

While it is economical to repair vehicles at the CHT's own facility, work that is beyond the skill of the mechanics, or the tools and equipment available, should not be performed — improper repair work can lead to the development of other mechanical problems and result in more costly repairs in future. When the capability of the CHT's facility is in question, repair work should be referred to a more qualified garage.

## **8.2 CENTRAL MOHSW MAINTENANCE AND REPAIR FACILITY**

At the time of writing of this Manual the Central Ministry garage is not functioning beyond the capacity to perform simple vehicle maintenance and repair. There are plans to revitalize this facility, but until that occurs it is advisable to procure services from private/commercial garages if the work required is beyond the capability of the CHT garage.

## **8.3 PRIVATE MAINTENANCE AND REPAIR FACILITIES**

When vehicle maintenance and/or repair service are required that are beyond the capability of the CHT garage, CHTs may choose to procure such services from private/commercial garages in their county, or another county (including Monrovia) by following the established Ministry procurement procedures. These procedures are designed to ensure fair and open competition among qualified vendors that will result in good quality services at the lowest possible cost. Generally this involves requesting at least three quotations for the required work and engaging in an evaluation of those quotations to select the best value provider. Monetary values are established for each county that permit the procurement of services from private garages up to set limits (or "thresholds") by following the appropriate procedures. When the required services will cost more than the authorized limit of the CHT, then the Central Ministry must be contacted for advice on how to proceed. This normally will involve the submission of a Vehicle Work Request to the Central Procurement Office through the Central Transportation Office. The Procurement Office will then decide whether the required services should be procured at a garage within the county or in Monrovia.

The Central Transportation Office also has the capability of assessing private maintenance and repair facilities at the county level. CHTs should request that the Central Ministry provide such assessment service to determine the capabilities of private garages in their counties.

One method of expediting procurement of services is to request pre-establish fee schedules from qualified garages that provide costs for typical services. For example, some services are of a definite and limited nature, such as the replacement of brake pads and/or shoes. A list of such services can be submitted to garages and they may quote their costs, broken down between labor and parts (in case the CHT wishes to provide the parts and only procure labor from the garage). However, services such as those required to repair accidental damage or complicated mechanical breakdown, are not possible to include in a pre-established fee schedule. Such repairs will require separate quotes from garages.



Examples of distinct and definable maintenance and repair services that may be included in a pre-established fee schedule:

- Maintenance:
  - Oil change
  - Oil, air and fuel filter replacement
  - Flushing and refilling cooling system
  - Draining and refilling brake fluid
  - Inspect belts and hoses
  - Tire rotation
  - Tightening of undercarriage bolts
- Repair:
  - Brake pad or shoe replacement
  - Disc brake rotor replacement
  - Brake drum replacement
  - Tire puncture repair
  - Battery replacement
  - Fan belt replacement
  - Radiator hose replacement
  - Shock absorber replacement
  - Windshield replacement
  - Exhaust system replacement
  - Clutch/pressure plate/throw-out bearing replacement
  - Leaf or coil spring replacement

If pre-established fee schedules have been established through a fair and open competitive procurement process the CHT can simply choose which facility to send a vehicle to for the required maintenance or repair. In such cases the choice can be based on the lowest cost without engaging in a competitive procurement process each time services are required. The garage that is selected should confirm in writing that they will honor the pre-established service fee before commencing work, however. It is recommended that pre-established fee schedules be re-competed at least annually.

In addition to private garages that are commercially operated, there may also be garages operated by NGOs or other partners. If such vehicle service facilities do exist in the county, the CHT should discuss with their management the possibility of having their vehicles serviced and/or repaired there. Such garages should submit a fee-schedule as part of the procurement process described above. The Central Transportation Office may also be requested to assess their capabilities.

## 9. VEHICLE FILES

### POLICY

CHTs are required to keep files that document the usage, condition, maintenance and repair of each official vehicle under their control.

### GUIDELINES

The CHT Transportation Officer is responsible for keeping files of all the completed forms described in this Manual.

#### 9.1 SUMMARY OF REQUIRED VEHICLE FILES

The following table is a summary of these documents, where they are described in the Manual, their purpose and when they are of used:

CHT Vehicle Records, Reports and Files			
Document	Manual Chapter/ Section	Purpose	When Used
Vehicle Request	5.1	Requesting official vehicles	As required for every journey
Vehicle Schedule	5.2	Scheduling usage of vehicles	Weekly
Vehicle Log	5.3	Recording vehicle journeys	Daily
Accident Report	5.4	Reporting on details of vehicle accidents	For every accident
Monthly Vehicle Usage Report	5.5	Reporting on details of usage of vehicles	Monthly
Vehicle Inventory	5.6	Recording the presence and condition of vehicles	Annual
Quarterly Vehicle Maintenance Schedule	6.1	Scheduling preventive maintenance	Quarterly
Vehicle Maintenance Checklist	6.2	Recording daily and weekly inspection of vehicles	Daily
Vehicle Work Request	6.3 & 7.1	Requesting maintenance or repair services	When maintenance/ repair services needed
Vehicle Assessment Report	7.2	Assessing condition of vehicle to determine repair & maintenance requirements	When maintenance/ repair services needed

<b>CHT Vehicle Records, Reports and Files</b>			
Vehicle Maintenance/Repair Records	8	Records received from maintenance/repair facilities giving details of services, parts and costs	As received from maintenance/repair facilities
Driver Information	9	Particulars of drivers, including copies of valid licenses	Updated as change occurs
Vehicle Information	9	Particulars of vehicles, including registration papers and warranty documents	Updated as change occurs
Insurance Information	9	Copies of insurance policies, payments and claims	Updated as change occurs

The recommended method for retaining records is to set up, for each CHT vehicle, a properly labeled ring binder with appropriate dividers in which such forms are kept--these ring binders should be kept in a bookcase in the TO's office. General files that refer to all vehicles, such as Vehicle Schedules, should also be kept in properly labeled ring binders. Alternatively a file cabinet in which folders are kept may be maintained by the TO.

## **9.2 INDIVIDUAL VEHICLE FILES**

The following forms and papers should be kept in the individual vehicle files:

- Registration papers
- Insurance policies
- Warrantee certificates and information
- Vehicle user manuals and other information provided by the manufacturer
- Usage Logs
- Accident Reports
- Vehicle Work Requests
- Vehicle Assessment Reports
- Maintenance and repair records

## **9.3 GENERAL VEHICLE FILES**

In addition to individual vehicle files, separate binders or folders should be kept for:

- Vehicle Requests
- Preventive Maintenance Schedules
- Vehicle Schedules
- Quarterly Vehicle Reports
- Annual Vehicle Inventories
- Driver information (photocopies of licenses, etc.)

## 9.4 SPARE VEHICLE KEYS

Also of importance is that the TO must keep in a secure place, such as the CHT safe, properly labeled duplicate keys and/or remote devices for each vehicle.

## 10. MOTORCYCLES

### POLICY

**CHT personnel who use official motorcycles must be properly trained, licensed, and able to perform simple motorcycle maintenance.**

### GUIDELINES

Motorcycles are a useful means of transport. However, motorcycles provided for official purposes must be handled properly and safety precautions followed.

The number one concern governing motorcycle usage is

#### **SAFETY FIRST.**

Avoiding injuries or death from motorcycle usage is of primary importance—everything else is secondary.

The CHT Transportation Officer is responsible for ensuring that:

- motorcycle drivers are licensed,
- are provided with sufficient safe driving training, and
- are able to perform simple motorcycle maintenance.

### 10.1 MOTORCYCLE USAGE

While motorcycles can be very useful and provide flexibility in reaching destinations that may not be accessible by four-wheel vehicles, it must be recognized that in general they are more dangerous to operate than four-wheel vehicles. Motorcycles lack the protection of a surrounding vehicle body and leave the driver and passenger fully exposed in a collision with another vehicle, object or even the road itself. Because of this it is very important to exercise a high degree of caution when operating a motorcycle, including:

- speed adjusted to road conditions, especially wet or loose road surfaces;
- travel at night should be avoided;
- travel on main roads should be limited

- helmets should be worn at all times.

All of the general regulations for the use of official vehicles listed in Chapter 2 of this Manual (Official Vehicle Usage Policy) also apply to official motorcycles. To ensure complete understanding of these regulations, they are repeated below, with a some modification to better suit motorcycle usage:

- CHT personnel may NOT operate a motorcycle until they have received instruction in safe motorcycle operation and received certification by the CHT Transportation Officer that they have met all requirements to become a motorcycle driver, including possession of a valid driver's license.
- Motorcycles are NOT to be used for home-to-work transport except when authorized in writing by the CHO.
- Motorcycles are NOT to be operated by a driver who is under the influence of drugs or alcohol.
- Motorcycles are NOT to be operated by a driver who does not possess a valid driver's license.
- Only the CHT staff person to whom the motorcycle is assigned is allowed to operate the motorcycle—no other person, whether a CHT employee or otherwise, may operate the motorcycle without the prior written approval of the Transportation Officer (the only exception to this is operation of the motorcycle by a qualified mechanic for short distances for purposes of assessment for repair or maintenance).
- Motorcycles are NOT to be driven without a signed Vehicle Request form authorizing the trip (in the case of motorcycles, a blanket authority may be approved covering multiple, routine journeys—such as health facility supervision).
- Motorcycles are NOT permitted to be operated outside the county of assignment without the CHO's approval for every such journey.
- Motorcycles are to use the most direct, safe route to reach a destination, and NOT divert to an indirect route to suit to suit the personal interests of the driver or passengers.
- Smoking is NOT allowed on official motorcycles.
- Guns, firearms or weapons may NOT be transported on official motorcycles.
- The driver and any passenger MUST wear a helmet whenever the motorcycle is in motion.
- A driver or passenger who believes a motorcycle is not roadworthy may refuse to operate or ride on such motorcycle.
- Travel on motorcycles at night should be avoided unless absolutely necessary—the motorcycle's headlight must always be turned on at night.
- Travel on main roads should be limited—when traveling on main roads the motorcycle's headlight should be turned on, even during daylight, to make it more visible to oncoming traffic.
- Carrying of passengers is discouraged and should only be done when the passenger is a CHT employee and is absolutely necessary to achieve official purposes. This restriction includes the transport of relatives, neighbors, and friends.

- Motorcycles are NOT to be used to transport Ministry employees for lunches, dinners, and social functions. The exception to this rule may be when a social function is work related and authorized by the CHO. For example, an official farewell party for a departing staff member or an official reception or dinner.

Failure to follow these regulations may result in disciplinary action, including temporary or permanent loss of authority to operate the motorcycle.

Motorcycle drivers are also encouraged to wear proper protective clothing, such as sturdy shoes, when operating a motorcycle, to minimize injury in case of accident.

Motorcycle operation requires the application of common sense. While it is not possible to develop guidelines covering all possible situations, following obvious safe driving practices will help to minimize injuries and damage. Some examples might be:

- Walking the motorcycle, rather than riding it, across narrow bridges;
- Not running the motorcycle through a stream or river unless the depth of water is known;
- Not carrying large, unbalanced loads on the motorcycle;
- Not carrying more than one passenger;
- Not operating a motorcycle for long distances on main roads unless really essential.

## **10.2 MOTORCYCLE MAINTENANCE AND REPAIR**

Motorcycles require routine maintenance and repair. Each motorcycle must be provided with a basic set of tools. Routine maintenance is normally performed by the driver of the motorcycle. More complex repairs are referred to professional mechanics at the CHT or commercial garages.

A Daily Inspection Checklist for motorcycle drivers includes:

- ✓ fuel and oil levels
- ✓ crankcase for leaks
- ✓ brakes
- ✓ throttle
- ✓ wheels and tire pressure
- ✓ lights, mirror, horn
- ✓ battery fluid level
- ✓ chain and sprockets

The Routine Maintenance Checklist includes (follow manufacturer's recommended service schedule):

- ✓ Clean or replace air filter
- ✓ Clean fuel filter screen
- ✓ Clean or replace spark plug
- ✓ Change crankcase oil
- ✓ Inspect, tighten all nuts and bolts
- ✓ Other recommended servicing



## **BLANK FORMS**

**(Suitable for photocopying)**

Authorization to Use Personal Vehicle

Vehicle Request

Vehicle Schedule

Vehicle Log

Vehicle Accident Report

Quarterly Vehicle Report

Annual Vehicle Inventory

Vehicle Maintenance Schedule

Vehicle Maintenance Checklist

Vehicle Work Request

Vehicle Assessment Report





County Health Team  
**AUTHORIZATION TO USE  
PERSONAL VEHICLE**

**SECTION I: TO BE COMPLETED BY DRIVER**

Full Name of Driver: \_\_\_\_\_ County \_\_\_\_\_

Intended Travel Dates: From \_\_\_\_\_ to \_\_\_\_\_ Estimated Total Km \_\_\_\_\_

**Note: Claim for reimbursement must be accompanied by a Vehicle Log sheet with each part of the official travel recorded.**

Reason for use of personal vehicle:

Signature of driver: \_\_\_\_\_ Date: \_\_\_\_\_

**SECTION II: TO BE COMPLETED BY TRANSPORTATION OFFICER**

Approved for reimbursement at \_\_\_\_\_ cents per Km

Disapproved

Comments:

Signature of Transportation Officer: \_\_\_\_\_ Date: \_\_\_\_\_

**SECTION III: TO BE COMPLETED BY COUNTY HEALTH SERVICES ADMINISTRATOR**

Remarks:

Approved (for trips within county)

Recommended for Approval by CHO (for trips outside of county)

Disapproved

Comments:

Signature of County Health Services Administrator: \_\_\_\_\_ Date: \_\_\_\_\_

**SECTION IV: TO BE COMPLETED BY COUNTY HEALTH OFFICER**

CHO approval required for trips outside of county.

Approved

Disapproved

Comments:

Signature of County Health Officer: \_\_\_\_\_ Date: \_\_\_\_\_



Requested by (print name/title): \_\_\_\_\_

Date: \_\_\_\_\_

<b>Purpose:</b> <input type="checkbox"/> Emergency transportation of patient <input type="checkbox"/> Supervision of health facilities <input type="checkbox"/> Pick up/Delivery of supplies <input type="checkbox"/> Maintenance/Repair <input type="checkbox"/> Other (describe) →	<b>Scope:</b> <input type="checkbox"/> Within county <input type="checkbox"/> Outside county <input type="checkbox"/> To Monrovia <b>Detailed Purpose:</b>  
---	---

**PROPOSED ITINERARY:**

Date/Time	From	To	Comments

<b>Transportation Officer Approval (Required for <u>all travel</u>):</b> <input type="checkbox"/> Approved <input type="checkbox"/> Denied    Signature: _____ Date: _____
<b>County Health Services Administrator Approval (Required for <u>travel during non-working hours, outside of county and to Monrovia</u>):</b> <input type="checkbox"/> Approved <input type="checkbox"/> Denied    Signature: _____ Date: _____
<b>County Health Officer Approval (Required for <u>travel to Monrovia</u>):</b> <input type="checkbox"/> Approved <input type="checkbox"/> Denied    Signature: _____ Date: _____
<b>For Use by Transportation Officer:</b>  Vehicle/Driver assigned: _____  Quantity of Fuel Issued: _____
<b>Comments, Instructions, Restrictions on Usage of Vehicle:</b>         



Vehicle: Day/Date					
Monday					
Tuesday					
Wednesday					
Thursday					
Friday					
Saturday/ Sunday					
Monday					
Tuesday					
Wednesday					
Thursday					
Friday					
Saturday/ Sunday					
Future Trips Planned					

Prepared by \_\_\_\_\_ Date \_\_\_\_\_





**SECTION I: TO BE COMPLETED BY DRIVER**

Full Name of Driver: \_\_\_\_\_

Date/Time of Accident: \_\_\_\_\_ Registration No. of Vehicle: \_\_\_\_\_

Place of Accident: \_\_\_\_\_

Make, Year & Model of Vehicle: \_\_\_\_\_

For what purpose was vehicle being used at time of accident? *Give full details.*

Names of passengers at time of accident:

Name of persons injured or killed in the accident

Names and addresses of witnesses to the accident:

Details of other vehicle(s) involved, if any:

Make, Year & Model of Vehicle(s): \_\_\_\_\_ Registration No. \_\_\_\_\_

Name and Address of Driver: \_\_\_\_\_

Was accident reported to police? \_\_\_\_\_ If yes, date and place reported:

Give details of the accident:

Signature of driver: \_\_\_\_\_ Date: \_\_\_\_\_

Name, title and signature of person who assisted driver to complete this report:

**SECTION II: TO BE COMPLETED BY TRANSPORTATION OFFICER**

Was the driver authorized and licensed to drive this vehicle at the time of the accident: \_\_\_\_\_

In your opinion, what was the cause of the accident?

What disciplinary action is recommended, if any?

Signature of Transportation Officer: \_\_\_\_\_ Date: \_\_\_\_\_

**SECTION III: TO BE COMPLETED BY COUNTY HEALTH SERVICES ADMINISTRATOR**

Remarks:

Signature of County Health Services Administrator: \_\_\_\_\_ Date: \_\_\_\_\_





County:		Quarter: <input type="checkbox"/> January 1-March 31 <input type="checkbox"/> April 1-June 30 <input type="checkbox"/> July 1-September 30 <input type="checkbox"/> October 1-December 31		Year:	Page:
<b>First Page Only</b>	Total number of CHT vehicles: <input style="width:50px;" type="text"/>	Total distance travelled in quarter: <input style="width:100px;" type="text"/> Km	Total fuel consumed in quarter: <input style="width:50px;" type="text"/> Liters	Average Km per Liter: <input style="width:50px;" type="text"/>	

Vehicle Make/Number:			Driver :		
General usage: <input type="checkbox"/> Ambulance <input type="checkbox"/> Personnel transport <input type="checkbox"/> Materials transport <input type="checkbox"/> Other:					
Fuel: <input type="checkbox"/> Diesel <input type="checkbox"/> Gasoline			Odometer indicates: <input type="checkbox"/> Miles <input type="checkbox"/> Kilometers		
Odometer Reading at beginning of quarter	Odometer Reading at end of quarter	Total distance travelled during quarter	Total fuel consumed during quarter		
		Km	Liters		
Condition at <b>beginning of quarter</b>	<input type="checkbox"/> Good running condition <input type="checkbox"/> Running, needs repair <input type="checkbox"/> Not running, needs repair <input type="checkbox"/> Not running, not repairable				
Describe repair performed during this <b>past quarter</b>					
Condition at <b>end of quarter</b>	<input type="checkbox"/> Good running condition <input type="checkbox"/> Running, needs repair <input type="checkbox"/> Not running, needs repair <input type="checkbox"/> Not running, not repairable				
Describe repair required in <b>next quarter</b>					

Vehicle Make/Number:			Driver :		
General usage: <input type="checkbox"/> Ambulance <input type="checkbox"/> Personnel transport <input type="checkbox"/> Materials transport <input type="checkbox"/> Other:					
Fuel: <input type="checkbox"/> Diesel <input type="checkbox"/> Gasoline			Odometer indicates: <input type="checkbox"/> Miles <input type="checkbox"/> Kilometers		
Odometer Reading at beginning of quarter	Odometer Reading at end of quarter	Total distance travelled during quarter	Total fuel consumed during quarter		
		Km	Liters		
Condition at <b>beginning of quarter</b>	<input type="checkbox"/> Good running condition <input type="checkbox"/> Running, needs repair <input type="checkbox"/> Not running, needs repair <input type="checkbox"/> Not running, not repairable				
Describe repair performed during this <b>past quarter</b>					
Condition at <b>end of quarter</b>	<input type="checkbox"/> Good running condition <input type="checkbox"/> Running, needs repair <input type="checkbox"/> Not running, needs repair <input type="checkbox"/> Not running, not repairable				
Describe repair required in <b>next quarter</b>					

Prepared by: \_\_\_\_\_ Date: \_\_\_\_\_



County Health Team  
**ANNUAL VEHICLE INVENTORY**

County:		Inventory Year:	Total Number of Vehicles:	Page:
Make	Number	Year	Condition of Vehicle at end of Inventory Year	
			<input type="checkbox"/> Good running condition <input type="checkbox"/> Running, needs repair <input type="checkbox"/> Not running, needs repair <input type="checkbox"/> Not running, not repairable	Comments, recommended repairs:
			<input type="checkbox"/> Good running condition <input type="checkbox"/> Running, needs repair <input type="checkbox"/> Not running, needs repair <input type="checkbox"/> Not running, not repairable	Comments, recommended repairs:
			<input type="checkbox"/> Good running condition <input type="checkbox"/> Running, needs repair <input type="checkbox"/> Not running, needs repair <input type="checkbox"/> Not running, not repairable	Comments, recommended repairs:
			<input type="checkbox"/> Good running condition <input type="checkbox"/> Running, needs repair <input type="checkbox"/> Not running, needs repair <input type="checkbox"/> Not running, not repairable	Comments, recommended repairs:
			<input type="checkbox"/> Good running condition <input type="checkbox"/> Running, needs repair <input type="checkbox"/> Not running, needs repair <input type="checkbox"/> Not running, not repairable	Comments, recommended repairs:

Prepared by: \_\_\_\_\_ Date: \_\_\_\_\_





Ministry of Health & Social Welfare  
 Republic of Liberia

County Health Team  
**QUARTERLY VEHICLE  
 MAINTENANCE SCHEDULE**

Quarter: \_\_\_\_\_

<b>Vehicle:</b>							
<b>Odometer Reading Beginning of Quarter</b>							
<b>Last Oil/Filter Change</b>	<b>Odometer</b>						
	<b>Date</b>						
<b>Oil/filter Change(s) due</b>	<b>Odometer</b>						
	<b>Estimated date</b>						
	<b>Odometer</b>						
	<b>Estimated date</b>						
<b>Major Service Requirement</b>							
<b>Odometer Reading End of Quarter</b>							
<b>Other Maintenance Issues</b>							

Prepared by \_\_\_\_\_ Date \_\_\_\_\_



TRANSPORTATION OFFICER		
Name & Title of Person Requesting:	Date of Request:	Date work completion required:
Vehicle make and number:		
Description of problem and work required: (Vehicle Assessment Form attached: <input type="checkbox"/> Yes <input type="checkbox"/> No)		
Signed:		Date:
ACCOUNTING OFFICER		
Estimated Cost:	Source of Funds:	
Adequate Funds Available: <input type="checkbox"/> Yes <input type="checkbox"/> No (If no, return to CHSA)		
Signed:		Date:
COUNTY HEALTH SERVICES ADMINISTRATOR		
<input type="checkbox"/> Approved	Comments:	<input type="checkbox"/> Disapproved Reason for disapproving:
Signed:		Date:
LOGISTICS OFFICER		
Work Assigned to:	Date promised:	
	Date competed:	
Work Satisfactorily Completed: <input type="checkbox"/> Yes <input type="checkbox"/> No (if No, state reason)		
Signed:		Date:





