MASSACHUSETTS DEPARTMENT OF CORRECTION

103 DOC 122

VEHICLE USAGE AND CONTROL

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MASSACHUSETTS DEPARTMENT OF CORRECTION	DIVISION: Deputy Commissioner, Prison Division
TITLE: VEHICLE USAGE AND CONTROL	NUMBER: 103 DOC 122

Purpose: To establish Department of Correction ("Department") Policy concerning the use and control of motor vehicles owned or operated by the Department.

References: These regulations are issued pursuant to M.G.L. Chapter 90 § 7A; M.G.L. Chapter 124, § 1 (c), & (g).

Applicability: Staff **Public Access:** Yes

Location: Department Central Policy File
Each Institution's Policy File
Central Transportation Unit's Policy File

Responsible Staff for the Implementation and Monitoring Of Policy:

- Director of the Central Transportation Unit
- Superintendents

Effective Date: 05/29/2015

Cancellation: 13 DOC 122.00 cancels all previous Department policy statements, bulletins, directives, orders, notices, rules and regulations regarding vehicle usage; to the extent they are inconsistent with this policy.

Severability Clause: If any part of 103 DOC 122.00 is for any reason held to be in excess of the authority of the Commissioner such decisions shall not affect the validity of any part of this policy.

122.01 Definitions

Commissioner: The Commissioner of Correction.

Confidential Registration: State vehicle with a private state plate issued by the Department of Motor Vehicles to protect the identification of the operator.

Department Duty Station: The station within the Department through which all significant occurrences shall be reported twenty–four (24) hours per day, seven (7) days per week. The Duty Officer Station is located within the Bay State Correctional Center.

Director of Administrative Services: The unit director who reports directly to the Deputy Commissioner of the Administrative Services Division whose responsibilities include the oversight of Fiscal Services.

Director of State Transportation: The unit director who reports directly to the Deputy Commissioner of the Prison Division whose responsibilities include, but are not limited to, the management of the Central Transportation Unit ("CTU") and the Vehicle Maintenance Program.

Duty Officer: Those individuals designated as Department Duty Officer who shall ordinarily be responsible to work approximately fourteen (14) calendar days or two tours of duty per year in this capacity as designated by the Deputy Commissioner Prison Division. These individuals during their tour of duty evaluate information provided by a facility to the department duty station of an incident that occurred during non-business hours. The Duty Officer coordinates and ensures appropriate action has been taken and directs any follow-up that may be needed.

General Issue Keys: Any key ring with no designated restriction in accordance with 502.08 (5) and issue requirements in accordance with 502.09 (6). They are coded white on the main key board and can be issued to any staff member. (The references to 502 are incorrect.)

Head Farmer: The staff member who oversees growth, harvest, and production of food stuffs at institutions who have such operations.

Institution Duty Officer: The staff person assigned by the Superintendent who is responsible to evaluate information received from the institution during off duty hours, coordinate and ensure appropriate action has been taken, and direct any follow-up that may be needed.

Operational Services Division (OSD) Fleet Administrator: Manager within the OSD assigned to procure, manage and maintain all vehicles for state agencies with/in the Commonwealth of Massachusetts.

Superintendent: The chief administrative officer of a state correctional institution.

Special Unit Director: Staff members responsible for the administration and daily operation of the various divisions throughout the Department.

Central Transportation Unit Dispatcher: Staff member assigned to send, receive, and record all radio communications at the CTU.

Security Vehicles: Any Department vehicle equipped with a secure inmate containment system.

Motor Pool: Vehicles available for all Department employees for the performance of their duties if their work assignment for the day calls them away from their permanent work location.

Department Gassing Facilities: Fueling stations owned and operated by the Department located at North Central Correctional Institution (NCCI), the MCI-Concord Warehouse, CTU in Norfolk, the Bridgewater Complex Storehouse, and MCI-Cedar Junction.

1-800 “How am I Driving” program: A sticker displayed on the left rear bumper of all unmarked Department vehicles that display a State Plate, with the exception of security vehicles utilized to transport inmates and surveillance vehicles, to encourage citizens to dial the 1-800 number to provide positive and negative comments on the driving of any state employee.

122.02 Operators of State Vehicles

1. With the exception of certain vehicles intended for use in growing, harvesting or production of food stuffs, or in conjunction with vehicles maintenance activities, state vehicles may only be operated by an employee. The employee must possess a valid license of the correct type and class to operate a motor vehicle.

2. The Head Farmer at a Department institution containing facilities or land to grow, harvest or produce food stuffs, may make recommendations to the Superintendent concerning those inmates whom the Head Farmer believes should have the authority to operate certain farm vehicles. The

Superintendent, or his/her designee, shall designate in writing those inmates who may be permitted to operate such vehicles. The Head Farmer or the employee in charge of the vehicle maintenance activities for the institution or division shall ensure that documented training is conducted in the safe operation of such vehicles. State vehicles shall not be operated on the public ways of the Commonwealth by inmates.

3. Superintendents and Special Unit Directors shall develop written procedures detailing those occasions under which inmates may be permitted to operate state vehicles in conjunction with vehicle maintenance procedures. The Superintendent or Special Unit Director, or their respective designees, shall periodically review the listing of such inmates and shall indicate their approval of the listing in writing at least on an annual basis. Inmates allowed to test drive vehicles may not operate state vehicles on public ways of the Commonwealth, nor shall they be permitted to leave the confines of state correctional institution property.

122.03 State Vehicles

State vehicles shall only be used by employees to conduct Department business. Operator employees must possess a valid driver’s license. Due to liability considerations, consultants or intern contractors are prohibited from using state vehicles unless a waiver is granted by the Operational Services Division (OSD), Fleet Administrator. A state owned, leased or rented vehicle may never be used for personal reasons.

All receipts for fuel received when using State issued gas cards shall be forwarded to the respective fiscal office on a monthly basis. If receipts are not available then the users with the card issued shall sign an attestation that the fuel was received by them in their official course of business.

The use of a state vehicle to commute between work site and personal dwelling shall only be allowed in those situations outlined in paragraph 103 DOC 122.12, Overnight Travel or paragraph 103 DOC 122.13, Domicile Travel. Employees may not at any time carry any passenger not affiliated with the employee's Department business use of the vehicle.

Superintendents and Special Unit Directors shall develop written procedures to ensure that prior to a vehicle being utilized, the vehicle is inspected for security issues, and mechanical issues i.e. lights and gas, and proper documentation (see 103 DOC 122.05).

All security vehicles provided to transport inmates that are medium or maximum security level shall require that the rear side windows be disengaged to remain in the up position.

Security Bars should be attached to rear side windows to prevent inmate passengers from kicking glass out of the door.

All security vehicles provided for medium or maximum security level inmate passengers shall have a security screen between front and rear seats that is ventilated at least by half.

122.04 Private Vehicles

1. Authorized Use - Employees may obtain prior authorization from Department Heads, the Director of the CTU, Superintendents or their designees to use privately owned vehicles for official business, subject to the following conditions:

   a. Motor Pool – Employees must first attempt to obtain a vehicle from the Department Motor Pool.

   b. Transportation of Inmates - Under no circumstance shall a private vehicle be used for inmate transportation.

   c. Insurance Liabilities - Any use of private vehicles for official business shall be strictly at the risk of the operator of the vehicle. The Department shall assume no liability for damages to the vehicle or other related costs, if any, in connection with the use of private vehicles other than any liability occurring to the Commonwealth pursuant to the Tort Claims Act, M.G.L., Chapter 258, or the Workmen's Compensation Laws, M.G.L., Chapter 152, § 26 and 69. In the event of an accident using a private vehicle on official state business, the accident shall

be reported to the individual who authorized the use of the private vehicle.

d. Travel Expense Reimbursement – If an employee has verified a motor pool vehicle is unavailable and has received prior approval, they shall be reimbursed for expenses incurred for authorized use of their private motor vehicles at the approved rate of their respective bargaining agreement. Management Employees shall be reimbursed for authorized use of their private motor vehicles in accordance with the Rules Governing Paid Leave and Other Benefits for Managers and Confidential Employees (Red Book). The employee must complete a Reimbursement Form and submit the form to the appropriate fiscal office for payment. Employee Reimbursement Forms shall be completed and submitted in accordance with procedures issued by the Director of Administrative Services and must be submitted on a monthly basis. Employee Reimbursement form can be found on the Department intranet page under applications on line forms.

122.05 Seat Belts

Pursuant to Executive Order 241, (Attachment 1), all state employees and their passengers must use seat belts when traveling in state vehicles. Exceptions may be granted for the transportation of those persons who would be unable to release themselves from any form of passenger restraint due to physical disability or those persons being transported under the provisions of 103 DOC 530, Inmate Transportation, where it would be reasonable to assume that they would be unable to release themselves from passenger restraints. All inmates in a state vehicle that are not in restraints must use the seatbelts.
The operator of the state vehicle shall visually confirm that unrestrained inmates have the seatbelt engaged prior to moving the vehicle.

All inmates traveling in vehicles equipped with the officer safety belt system must be secured with the seat belt system prior to moving the vehicle.

122.06 Documentation

Superintendents and Special Unit Directors shall develop written procedures to ensure that all Department vehicles have the following documents in the vehicles at all times:

1. State registration
2. Driver log
3. OSD Policy and Procedures Manual(Attachment 2)
4. Blank accident report (Attachment 3)

If applicable, the vehicle must also carry:

1. A completed overnight travel authorization form, OSD-10 (Attachment 4)
2. Confidential registration (if applicable)
3. Standard state plate (if confidential registration authorized)

122.07 Accidents

1. If physically able, any employee involved in an accident while operating a state vehicle, whether or not the state vehicle was damaged, shall fill out an accident report. In addition, the employee shall contact the Superintendent, Special Unit Director, or their respective designee as soon as possible, unless the operator is incapacitated due to injury. In the event the accident occurs during other than business hours, the operator shall contact the Department Duty Station or Institution Duty Officer as appropriate, unless incapacitated due to injury.

2. At the scene of the accident, the employee shall:

   a. Call for medical assistance if necessary, using the Department security radio network mobile radio, if available, or by telephone;
   b. Call for additional security assistance in the event inmates are being transported, using the Department security network mobile radio, if available, or by telephone;
   c. Notify the institution or the CTU dispatcher via the Department security network mobile radio, if available, and request that state or local police be notified as appropriate;
   d. Obtain all information necessary to fully complete the accident report;
   e. If towing is required for the state vehicle,

the Director of the CTU, or his/her designee, shall be notified.

3. At the scene of the accident, the employee shall not:

   a. Argue, make accusations or admit guilt;
   b. Sign anything, or make any promises.

4. Any inmate passengers are to be examined by appropriate Department medical personnel following any accident, whether or not they reported any injuries. Copies of the medical reports shall be attached to any accident or incident reports filed.

5. The Superintendent or Special Unit Director, or their respective designee, shall ensure that the Director, Administrative Services, and the Director of the CTU, or their respective designee are telephonically notified within one (1) business day of any accident involving a state vehicle.

6. The Superintendent or Special Unit Director shall develop written procedures to ensure that an original copy of all accident reports, employee incident reports regarding the accident, and medical examinations of inmates following the accident, are submitted to the Director of the CTU within five (5) business days. Any and all correspondence received by a Superintendent or Special Unit from insurance companies regarding any accident involving a state vehicle shall be forwarded by the Superintendent or Special Unit Director, to the Director of the Central Transportation Unit within five (5) business days. The Director of the CTU or his/her designee shall ensure that copies of all accident reports involving an excess of $1,000 property damage to a state vehicle, injury or death to any party, or potential claim against the Commonwealth, are forwarded to the Deputy Commissioner of the Administrative Services and the Department's General Counsel as soon as possible.

122.08 Out Of State Travel

Out of state travel in a state vehicle is permitted only with a pre-approved Travel Authorization Form (hereinafter "Form TAF"), (Attachment 5**).** For out of state travel for the purpose of attending a conference or

training, a completed Form TAF must be submitted to the Director of Administrative Services at least forty-five (45) days before planned travel. Those vehicles assigned to members of, the Department's Investigations/Apprehension Unit and the CTU shall be exempt from the advanced notification requirements only of this section. The Chief, Investigations/Apprehension Unit, and the Director of the CTU or their respective designees shall ensure that notification is provided to the Director of Administrative Services as soon as practicable in the event a vehicle assigned to their Unit or Division has been required to travel out of state. All submissions of Form TAF for out of state travel shall be made in accordance with procedures issued by the Director of Administrative Services.

122.09 Stolen Vehicles

1. Stolen vehicles shall be reported immediately. During business hours, the report shall be made to the Superintendent, Special Unit Director or their respective designee. During other than normal business hours, the report shall be made to the Department Duty Station or institution duty officer, as appropriate. The Superintendent, Special Unit Director, or their designee shall ensure that appropriate law enforcement agencies have been notified to include the Governor's Anti-Theft Unit at 781-393-1200.

2. No later than the next business day, the Superintendent, Special Unit Director or their designee shall ensure that the Director of the CTU is notified of the theft of any vehicle. The Director of the CTU or his/her designee shall ensure that the Fleet Administrator, OSD is notified of the theft within two (2) business days of the theft.

3. In the event the vehicle is recovered, the same notifications shall be made, utilizing the same time frames.

122.10 State and Local Motor Vehicle Law and Regulations

1. Operating under the influence: Any employee arrested for, or charged with, operating a vehicle, whether a state vehicle or not, under the influence of alcohol or other illegal substances and subsequently temporarily loses his/her driver’s

license, shall lose all privileges to operate a state vehicle pending the outcome of the trial. In the event the operator is convicted of operating under the influence of alcohol or other illegal substances, and the operator was driving a state vehicle at the time of the offense, the employee shall permanently lose his/her privileges to drive a state vehicle. This policy statement is not subject to appeal and there shall be no exceptions. Additionally, any employee convicted of operating a state vehicle under the influence of alcohol or other illegal substance may be subject to disciplinary actions, up to and including termination.

2. Traffic violations including speeding tickets: The Department does not pay nor reimburse the payment of traffic violations incurred by operator employees of state vehicles or operators of non-state vehicles being used for state business. These monetary penalties are the personal responsibility of the employee. Employees are responsible for promptly paying any fines.

3. Annual Safety Inspection: Superintendents and Special Unit Directors shall develop written procedures to ensure all motor vehicles undergo an annual safety inspection by qualified individuals as required Pursuant to M.G.L. chapter 90, § 7A.

4. Tolls: Superintendents and Special Unit Directors shall develop written procedures for issuance and tracking of Fastlane Transponders. In the event that a state vehicle is not equipped with a Fast Lane Transponder. The operator shall pay the toll and be reimbursed by the Department for the amount of the toll paid. Receipts shall be kept of all toll payments.

5. Toll Violations: The Department does not pay nor reimburse the payment of toll violations incurred by employees of state vehicles or operators of non-state vehicles being used for state business. These monetary penalties are the personal responsibility of the employee. Employees are responsible for promptly paying any fines.

122.11 Parking Tickets

The Department does not pay nor reimburse the payment of

parking violations incurred by operator employees of state vehicles or operators of non-state vehicles being used for state business. These monetary penalties are the personal responsibility of the employee. Employees are responsible for promptly paying any fines.

122.12 Preventative Maintenance

1. Each Superintendent and Special Unit Director shall develop procedures to ensure that preventative maintenance is performed on all Department vehicles in accordance with the following schedule, (Attachment 6): Superintendents and Special Unit Director shall be responsible to monitor vehicles utilizing the Fleet Management database and ensure that the service is performed.

2. Every Four(4) months or 5,000 miles:
   a. change engine oil and filter;
   b. lubricate chassis.

3. Every 10,000 miles:
   a. Inspect tires and rotate if needed;
   b. check charging system;
   c. check and clean battery.

4. Every 15,000 miles:
   a. inspect automatic transmission fluid;
   b. inspect brake pads/shoes/rotors/drums/brake lines and hoses, and parking brake system;
   c. inspect engine cooling system and hose;
   d. inspect steering linkage, suspension and if equipped drive shaft and ball joints;
   e. replace cabin air filter, if equipped.

5. Every 30,000 miles:
   a. inspect exhaust system and shields;
   b. replace engine air filter;
   c. replace fuel filter.

6. Every 50,000 miles:
   a. change transmission fluid and filter;
   b. change PCV valve.

7. Every 100,000 miles:
   a. complete tune up;

b. replace spark plugs;
c. replace plug wires, if needed;
d. inspect ignition system.

8. Documentation of completion of preventative maintenance as well as of immediate completion of safety repairs shall be maintained in the Fleet Management database and a hard copy shall be maintained on file at the Norfolk garage site. Superintendents and Special Unit Directors shall develop written procedures to ensure that vehicles are not used again until safety repairs are made.

122.13 Overnight Travel

1. An employee may be permitted to drive a state vehicle home on a given day if the Department business of the employee requires that he attend a meeting or perform other work outside the office either after regular hours on the given day, or before regular office hours the following morning.

2. The use of state vehicles for occasional overnight travel requires the prior written approval of the Superintendent, Special Unit Director, or their respective designee, using form OSD-10 (Attachment 4). The approved form shall be held by the Superintendent, or Special Unit Director. A copy of the form shall be kept with the vehicle during the relevant period.

122.14 Domicile Travel

In limited situations, an employee may be authorized to use a state vehicle for domicile travel when the nature of an individual's duties requires it. The Superintendent or Special Unit Director shall submit a request in writing to the Deputy Commissioner of the Prison Division stating in detail the reason that an employee requires the use of a state vehicle for domicile travel. The Deputy Commissioner of the Prison Division shall make a recommendation to the Commissioner. The Commissioner shall be the sole authority to approve or disapprove such requests.

122.15 Internal Revenue Service Reporting

1. Federal law requires employers, including the Commonwealth of Massachusetts, to include "fringe benefit income" on annual W-2 forms submitted to

the IRS for each employee. Such fringe benefit income includes an amount reflecting an employee's use of any "employer provided vehicle for commuting".

2. Employer provided vehicles include state owned or leased vehicles or those provided to state employees by a contractor in connection with a state contract. The Internal Revenue Service provides exemptions for use of employer provided vehicles; it defines as a "qualified non-personal use vehicle". Employees who have questions regarding these exemptions are advised to contact their tax advisor. Two (2) specific exemptions include law enforcement and fire vehicles.

3. All state employees who have used an employer provided vehicle to commute a minimum of fifteen (15) commutes, either as a driver or passenger, at any time during the calendar year must be listed on the Certification of Motor Vehicles Use form OSD-IRS, (Attachment 7).

   The certificate shall be submitted to the Director, Administrative Services, who shall forward it to OSD by the OSD due date. A copy of the “Summary Certification for Department of Employee Motor Vehicle Use” shall be forwarded to the Department’s Division of Human Resources Payroll Director in order for payroll earnings to be adjusted via the Human Resources Computer Management System.

122.16 Confidential Registration

1. Each Superintendent or Special Unit Director may request that a vehicle assigned to his/her unit be supplied with confidential plates and registration. Requests for such plates will only be considered if they are necessary for undercover investigatory work or to protect the physical safety of personnel using the vehicle. The request must be submitted to the Director of the CTU, using form OSD -CC (Attachment 8). The Director of the CTU shall forward such request to the Deputy Commissioner of the Prison Division. Upon approval by the Commissioner and the Under Secretary of Public Safety, the Director of the CTU or his designee shall ensure that the form is processed by the OSD, Fleet Administrator. The Director of the CTU shall

ensure the pick up and delivery of confidential plates and registration when received from the Registry of Motor Vehicles.

2. The confidential registration shall be valid for two (2) years. If the Superintendent or Special Unit Director wishes to renew the confidential registration, they shall submit a request at least thirty (30) days before the expiration date. The procedures shall be followed in order to renew a registration. In the event the confidential registration should expire before the renewal process has been completed, the confidential plate shall be removed and replaced with the standard state plate until the renewal has been received.

3. All vehicles with confidential registration shall simultaneously have state registration and state plate. The state registration and state plate shall be carried in the vehicle at all times.

122.17 Inventory

1. Each Superintendent or Special Unit Director shall ensure that vehicles which are excess to needs or no longer serviceable are quickly removed from the institution's property. The Superintendent or Special Unit Director shall utilize attachment 12 to notify the Director of the CTU. The Director of the CTU shall be responsible for the removal of the vehicle and for transfer or disposal in accordance with the OSD Procedure.

2. The Director of the CTU shall send a monthly report to OSD of all vehicles assigned to the Department.

122.18 Purchase of Vehicles

All purchases of vehicles shall be approved in advance by the Director of the CTU. All purchase documents shall state that delivery is to be made to the CTU Fleet Maintenance Facility at MCI-Norfolk. The Director of the CTU, or his designee, shall ensure that a vehicle inspection is completed prior to acceptance by the Department.

122.19 Vehicle Control

Each Superintendent or Special Unit Director shall develop procedures for and designate one (1) employee to

be the Vehicle Control Officer. This employee shall be responsible to:

1. Keep a record of all vehicles assigned to the institution or division. This record shall identify each vehicle and shall indicate the name of any employee using the vehicle, the date and time of issue, the date and time of return, the outgoing mileage, and the return miles as well as the purpose of the trip. (Maintain on File for three (3) years);

2. Ensure that an inventory and mileage of all vehicles assigned to the institution or unit is completed on a monthly basis and reported by the fifth day of each month. The Director of the CTU shall develop reporting mechanisms for this process.

   a. For those Facilities/Divisions that are online with the Fleet Management database, the Vehicle Control Officer shall be responsible for entering odometer readings online.
   b. For those Facilities/Divisions not currently online, the Vehicle Control Officer shall be responsible for submitting odometer readings to the CTU Service manager.

3. Ensure that all security vehicles have roof decal numbers that reflect the plate number of that vehicle.

4. Inspect all vehicles at least weekly and document.

5. Ensure that all proper paperwork is in each vehicle.

6. Ensure the preventative maintenance schedule is followed.

7. Develop and maintain a cleaning schedule for all vehicles.

122.20 Motor Pool

1. The Director of the CTU shall be responsible to maintain regional motor pools for the Department. Motor pools shall be located at:

   a. Old Colony Correctional Center for the

Bridgewater Complex;

b. Bay State Correctional Center for the Norfolk/ Walpole Complex;
c. Milford Headquarters;
d. MCI-Concord for the MCI-Concord/Northeastern Correctional Center Area;
e. Souza-Baranowski Correctional Center for the Shirley Complex;
f. MCI-Framingham for the Framingham/South Middlesex Correctional Center/Hodder House Complex.

2. The motor pool shall be available for all Department employees for the performance of their duties. The motor pool shall not be utilized by staff as a means to commute back and forth from a permanent work location. An employee is only authorized to utilize a motor pool vehicle if his/her work assignment for the day calls them away from his/her permanent work location.

3. Prior to a vehicle being assigned to a motor pool, a Vehicle Inspection Sheet (Attachment 9) shall be completed by the staff member accepting the vehicle.

4. The vehicle shall then be serviced to ensure proper maintenance of the vehicle is completed. The completed vehicle inspection sheet shall be forwarded to the Director of the CTU.

5. The keys for the vehicle shall be turned over to the locksmith for the area and a key ring shall be made and placed on a separate and distinct key board which provides easy viewing to determine whether Motor Pool vehicles are currently available.

4. Staff should contact the facility and give a seventy-two (72) hour advanced notice to request a vehicle. Superintendents of facilities with Motor Pools shall develop written procedures for staff to reserve a vehicle in advance.

5. Each Facility is responsible for maintaining an Outer Control Motor Vehicle Log Book, which shall contain at a minimum the following information of the Staff Member requesting the vehicle:

a. Operators Name;
b. Vehicle number;

c. Destination;
d. Time Out;
e. Time In;
f. Signature of Operator;
g. Signature of issuing officer.

6 The driver of the vehicle shall be responsible to complete a Vehicle Driver's Log (Attachment 10). The log shall contain:

a. Start Date and Time;
b. End Date and Time;
c. Odometer Reading Start;
d. Odometer Reading End;
e. Beginning Location;
f. Destination; and
g. Driver.

7. When a staff member has temporary approval for overnight travel in accordance with 103 DOC 122.08 a copy of the form shall be submitted prior to taking the vehicle.

8. A vehicle gas card shall be available in the glove compartment of all motor pool vehicles. Staff utilizing the vehicles shall use the Department's gassing facilities as their primary source for gas.

9. The Vehicle Control Officer at each designated site shall be responsible to complete an inspection of all motor pool vehicles monthly utilizing the "Motor Pool Monthly Vehicle Inspection Sheet (Attachment 11). The completed form shall be forwarded to the Director of the CTU.

10. The Director of the CTU shall review the use of all vehicles to ensure the proper distribution of vehicles to the different regions.

11. The Director of the CTU shall ensure an audit is conducted on all motor pool vehicles on an annual basis.

122.21 Designated Vehicles

The Commissioner of Correction may authorize certain staff members or Divisions access to "designated vehicles" for official business only. These vehicles shall be assigned to a particular employee or Division

for official business only. Employees or Divisions with "designated vehicle" authorization shall allow other staff members within the agency or division to utilize the vehicle when not in use for official business only. These vehicles should be located at the permanent work site of the employee or at the Division offices. Employees may request from the Commissioner of Correction in writing to locate the vehicle at an alternative site for easy access purposes if their work duties routinely call them away from their permanent work location.

122.22 1-800 "How am I Driving Program"

1. In accordance with the OSD's Policy and Procedures, all Department vehicles that display a State Plate, with the exception of security vehicles utilized to transport inmates and surveillance vehicles, shall display the State's "How am I Driving", 1-800 telephone number. The sticker shall be displayed on the left rear bumper. This sticker encourages citizens to dial the 1-800 number to provide positive and negative comments on the driving of any state employee. The OSD shall monitor all calls as outlined in the OSD Policy and Procedures.

2. When notified by the OSD, the Director of the CTU shall have ten (10) business days to investigate, identify the driver, and respond to the OSD.

3. If complaints continue to occur after this initial warning within the same fiscal year, the OSD's Fleet Administrator shall direct the Director of the CTU to revoke the driving privileges of the driver.

122.23 Emergencies

Whenever, in the opinion of the Commissioner, Deputy Commissioner or Superintendent of a state correctional institution, an emergency exists which requires suspension of all or part of these regulations, he/she may order such suspension provided that any suspension lasting beyond forty-eight (48) hours must be authorized by the Commissioner.

THE COMMONWEALTH OF MASSACHUSETTS
EXECUTIVE DEPARTMENT
STATE HOUSE, BOSTON 02133

By His Excellency

MICHAEL S. DUKAKIS
GOVERNOR

EXECUTIVE ORDER NO. 241

AN EXECUTIVE ORDER REGARDING THE USE OF SEAT BELTS
BY STATE EMPLOYEES AND THEIR PASSENGERS
IN STATE VEHICLES.

WHEREAS, the Commonwealth was founded upon the collective desire of her people to protect and preserve the lives of her citizens, and

WHEREAS, our society has grown to rely upon the automobile as a means of economic and recreational transportation, and

WHEREAS, national statistics demonstrate that one out of every five deaths occurring on the job are motor vehicle-related, and

WHEREAS, three out of four deaths occurring off the job are motor vehicle related, as are half of all serious injuries, and

WHEREAS, lap safety belts have been proven to reduce the likelihood of fatal injury for adults by 40% and lap/shoulder safety belts reduce the chance of death by more than 60%, and

WHEREAS, the chances of avoiding moderate or critical injuries in a crash improve 31% if a lap belt is worn and by at least 57% where a lap/shoulder belt is worn, and

WHEREAS, state employees who serve the Commonwealth are responsible individuals who pride themselves in maintaining the highest standards of personal concern for themselves and others, and

WHEREAS, the actions of employees of the Commonwealth exemplify a standard of personal behavior for the public at large;

NOW, THEREFORE, I, Michael S. Dukakis, Governor of the Commonwealth of Massachusetts, by virtue of the authority vested in me as Supreme Executive Magistrate, do hereby issue this Order as a necessary step to insure the safety of state employees and to set an example for the people throughout the state to travel safely upon the public ways.

ARTICLE I

It is the policy of the Commonwealth to require the use of safety belts by all state employees and their passengers when they are traveling in state-owned vehicles.

ARTICLE II

It is the policy of the Commonwealth to require the immediate report of the malfunction or absence of safety belts in state vehicles to the Director of Motor Vehicle Management for the Commonwealth.

ARTICLE III

The Secretary of Administration and Finance, in consultation with the Secretary of Public Safety, shall promulgate such regulations, including appropriate sanctions, as shall be deemed necessary to fulfill the purposes of this executive order.

This Order shall take effect immediately.

Given at the Executive Chamber in Boston this 21st day of June in the year of our Lord one thousand nine hundred and eighty-four, and of the Independence of the United States of America two hundred and nine.

MICHAEL S. DUKAKIS
GOVERNOR
Commonwealth of Massachusetts

MICHAEL JOSEPH CONNOLLY
SECRETARY OF THE COMMONWEALTH

GOD SAVE THE COMMONWEALTH OF MASSACHUSETTS

OSD Policy and Procedures Manual
NOT ATTACHED

Motor Vehicle Crash Operator Report
NOT ATTACHED

The Commonwealth of Massachusetts
Department of Procurement and General Services'
{Operational Services Division

OVERNIGHT TRAVEL
Form OSD-10

Driver's Name:_____Driver's License Number:

Agency:_____Phone Number: _____State Vehicle: _____Travel Destination: _____Dates of Travel:

Justification for Overnight Use:

The Vehicle will be Parked During Off-Duty Periods at the Following Locations:

Circle One:
Garaged Driveway Street

Signature of Operator:_____ Date:

Signature of Agency Head:_____ Date:

FOR OVM USE ONLY: **Dispatcher Initials:**
Authorized Cars Only

THE ORIGINAL OSD FORM-10 MUST BE KEPT ON FILE IN ADDITION, A COPY OF THE APPROVED FORM MUST BE KEPT IN THE VEHICLE AT ALL TIMES.

Attachment 5

THE COMMONWEALTH OF MASSACHUSETTS
TRAVEL AUTHORIZATION FORM (Form TAF)

Shaded areas must be completed if travel is subsidized by a private party, per 801 CMR 7.00

1. Date of Request:	2. Travel Request #:	3. Department/Division: Department of Correction	4. DEPT/ORGN:	5. Appropriation No.:

6. Name of Traveler(s):	7. Title(s):	8. Dates of Travel:

9. Travel Itinerary and Justification **(If travel is privately subsidized, statement of purpose must include anticipated benefit to the Commonwealth and Employee.)**

☐ Supporting documentation, ie. agendas or brochures, is attached.

10. Estimated Expenses:	Private Funds	State/Federal Funds	Personal Funds	Other Funds
Transportation: (check all that apply) ☐ Air ☐ Rail ☐ Bus ☐ Taxi ☐ Car: ☐State ☐ Personal ☐ Rental				
Lodging:				
Meals:				
Other: (please list): Registration				
Sub Total(s)				
Grand Total				

11. Include names of all other travelers (including family, friends or coworkers) and how they will pay. In addition, if the travel consists of a non-business component, please describe:

Not Applicable ☐

12. Privately Subsidized Travel Information: **Not Applicable** ☐

Name of Contact Person: **Company:** **Address:** **Business Activity:**	**Describe all activities offered and intent to participate:**
Telephone Number:	**Relationship Between Private Party and the Commonwealth:**

13. Certifications and Authorizations

I hereby certify under the pains and penalties of perjury that, to the best of my knowledge, the above information is true and correct.
Signature of Traveler: Date:

I hereby certify that sufficient funds are available for the above described travel accommodations. ☐ **Delegation from Secretary granted.**
Signature of Department Head or Designee: Title: Date:

☐ Approved ☐ Disapproved ☐ Approved With Modifications - ☐Comments Attached

Signature of Cabinet Secretary:	**Date:**

Instructions on Back of this form

TRAVEL AUTHORIZATION FORM (Form TAF) - INSTRUCTIONS

Travelers should receive fare and rate estimates from the statewide contract travel agents. (See *OSD Update 97-1, Statewide Contract for Travel Services,* for contractor information) If travel is being subsidized, or partially subsidized by a private party, shaded areas must be completed to comply with 801 CMR 7.00. Travel itinerary and other details need only be completed to the extent that each Department's internal control policies are satisfied.

1. Date of Request: Date the form is executed by traveler.
2. Travel Request #: Departmental Fiscal Officer may insert internal control or sequence number for audit/tracking purposes.
3. Department/Division: Insert the name of your department and division.
4. DEPT/ORGN: Insert traveler's Departmental MMARS three-letter code and four-digit Organization Number.
5. Appropriation Number: Insert the appropriation number against which travel purchases are to be encumbered and expended.
6. Name(s) of Traveler(s): List travelers if itineraries are the same, **EXCEPT in the case of privately subsidized travel, where an individual form for each traveler is required.**
7. Title(s): Position/Title of each traveler.
8. Dates of Travel: List the dates of travel.
9. Travel Itinerary and Justification: The traveler should provide the destination and a brief summary of the trip itinerary. State the sponsoring organization. To comply with 801 CMR 7.00, privately subsidized travel must be for an express benefit for the employee in an official capacity and for the Commonwealth. State what those benefits are. Supporting documentation may be attached.
10. Estimated Expenses:
    Private Funds: Indicate the total funding for this trip on behalf of the state traveler from a private source pursuant to 801 CMR 7.00.
    State/Fed Funds: Indicate the total funds that will be expended by the Department on behalf of the state employee traveler, either in direct payment to a travel service vendor, charge account vendor, or through employee reimbursements.
    Personal Funds: Indicate the amount of personal funds that are to be used (required by 801 CMR 7.00).
    Transportation: Include the total round-trip travel fare for a common carrier (air, rail bus, etc.). If using a personal vehicle, indicate the rate per mile that is reimbursable under the relevant provisions of current Collective Bargaining Agreements for union members or applicable Rules for non-union employees.
    Lodging: Include the total hotel room and tax expenditure. Use more than one line if more than one hotel property is used.
    Meals: Indicate the total reimbursable amount for meals. It is not necessary to break out the individual amounts for each meal. This will be accounted for in attached receipts and departmental internal control procedures.
    Other: State type and expense of any anticipated expenses not otherwise named, such as telephone calls.
    Sub Total: Total the dollar expenditure expected for each line.
    Grand Total: List the grand total for the trip. (The sum of the sub totals for Private Fund, State/Fed Fund, Personal Fund and Other Fund.)
11. Persons Accompanying Employee: If other parties, including other state employees, are accompanying the traveler, state their name(s), Titles, and Relationship (whether a personal or business relationship).
    Non-Business Component of Travel: Explain if personal travel will extend or is included in this trip, also if spouse, family, or others will participate, state briefly the nature of the travel. If not applicable, check "Not Applicable."
12. Privately Subsidized Travel Information: If this trip is being subsidized or partially subsidized by a private party, describe in the categories provided, the necessary information of the private party subsidizing the travel for official purposes, and explain what their connection is with the Commonwealth. If travel is not being privately subsidized, check "Not Applicable."
13. Certifications and Authorizations: This section has up to three signature requirements.
    a) When Travel is privately subsidized, the Traveler must the sign the certification.
    b) The Department Head or delegate should check the box indicating that he or she is authorized by the Cabinet Secretary to grant final approval for out-of-state travel, then Approve, Disapprove, or Approve with Modifications the travel request on this form. The Department Head may make changes to the document, or refer to the modifications to be made in the space provided as necessary.
    c) The respective Cabinet Secretary must sign this form when privately subsidized travel is authorized. The Cabinet Secretary must also sign this form if general travel authorization is not delegated to the respective Department Head (see above).

Attachment 6

Vehicle Maintenance Record

Vehicle Number _____ Year & Make _____ Model _____	5000	10000	15000	20000	25000	30000	35000	40000	45000	50000	55000	60000	65000	70000	75000	80000	85000	90000	100000
Lube Oil & Filter 5,000																			
Check for Tire Rotation 10,000																			
Charging & Start Systems Check 10,000																			
Battery Clean & Check 10,000																			
Check Breaks 15,000																			
Check Cooling System 15,000																			
Change Fuel Filter 30,000																			
Change Air Filter 30,000																			
PVC Valve 50,000																			
Transmission Fluid & Filter 50,000																			
Major Tune up 100,000																			

The Commonwealth of Massachusetts
Department of Procurement and General Services'
Office of Vehicle Management

CERTIFICATE OF MOTOR VEHICLE USE
Form OSD-IRS

Part A*-Usage

I hereby certify that, during the period from November 1, 200____ to October 31, 200___, I used a non-exempt vehicle provided in connection with my employment by the Commonwealth of Massachusetts for no more than:
_____ One-way Commuting Trips

Part B - Exemption:

Check One: _____ All_____ Some

of my continuing use of my employer - provided vehicle in 200____ was exempt from IRS reporting requirement because of:

_____
_____
_____
_____
_____

(Refer to the IRS Publication - *Business Use of a Car, for authorized exemptions*.)

Signature of Employee:_____

Signed under the pains and penalties of perjury this_____day of_____, 200_____

This form must be returned by November 15, 200___ to: Operational Services Division, One Ashburton Place, Room 1017, Boston, MA 02108

FAILURE TO RETURN THIS FORM BY THE DEADLINE WILL AFFECT YOUR INCOME AS REPORTED TO THE IRS FOR 200_____.

* Everyone should fill out Part A of this certification. If you made no commutes in employer-provided vehicles, or if all of your commutes are exempt, please place a zero in the blank. Otherwise, list the number of non-exempt commutes you have made in employer-provided vehicles. Your W-2 will reflect this number multiplied by $1.50.

The Commonwealth of Massachusetts
Department of Procurement and General Services'
Operational Services Division

CONFIDENTIAL/CONVENTIONAL
REGISTRATION REQUEST
Form OSD-CC

State Vehicle Registration:_____
Agency: _____
Address: _____
_____
_____
Contact: _____
Telephone #:_____
Vehicle Year: _____
Make: _____
Model: _____

Type Plate: Conventional_____ Confidential_____

Type of Request New_____ Renewal_____ Transfer_____

Two-Year Period Plate Required: From _____ To _____

Agency Head: _____ Date:_____

Cabinet Secretary: _____ Date: _____

OSD Fleet Administrator_____ Date:_____

Approved:_____ Denied:_____

Vehicle Inspection Sheet

Date: _____ **Location:** _____

State Plate #: _____ **Registration:** ☐ **yes** ☐ **no**

Confidential Plate #: _____ **Registration:** ☐ **yes** ☐ **no**

Mileage: _____ **# Keys:** _____

Make: _____ **Type:** _____ **Year:** _____ **VIN#:** _____

Vehicle Operation Manual Policy and Procedures: ☐ **yes** ☐ **no**

Accident Reports: ☐ **yes** ☐ **no**

Daily Use Logs: ☐ **yes** ☐ **no**

Gas Card: ☐ **yes** ☐ **no**

Tires (condition): ☐ **Excellent** ☐ **Good** ☐ **Need replacing**

Clean: _____

_____

Damage: _____

_____

What service was done: _____

_____

Date services were completed: _____

_____ _____

Staff Signature **Date**

Note: Submit a copy of this form (Vehicle Inspection Sheet) with the confidential plate and registration and any Fast Lane transponders found in the vehicle to the Central Transportation Unit in Norfolk.

Investigations: **Vehicles will keep confidential plate on vehicle**

Attachment 10

Vehicle Driver's Log

Plate #: _____
VIN: _____
Agency Assigned: _____

Start Date/Time	End Date/Time	Odometer Reading Start	Odometer Reading End	Beginning Location	Destination	Driver

This form must remain in the vehicle at all times.

Motor Pool
Monthly Vehicle Inspection Sheet

Location: _____ Date: _____

1. Plate #: _____ Mileage: _____
   Make: _____ Model: _____
   Year: _____
   VIN: _____
   Condition:

First Aid Kit:	☐ Yes	☐ No
Fire Extinguisher:	☐ Yes	☐ No
OSD Policy:	☐ Yes	☐ No
Vehicle Driver's Log:	☐ Yes	☐ No

Service completed during month: _____

2. Plate #: _____ Mileage: _____
   Make: _____ Model: _____
   Year: _____
   VIN: _____
   Condition:

First Aid Kit:	☐ Yes	☐ No
Fire Extinguisher:	☐ Yes	☐ No
OSD Policy:	☐ Yes	☐ No
Vehicle Driver's Log:	☐ Yes	☐ No

Service completed during month: _____

3. Plate #: _____ Mileage: _____
   Make: _____ Model: _____
   Year: _____
   VIN: _____
   Condition:

First Aid Kit:	☐ Yes	☐ No
Fire Extinguisher:	☐ Yes	☐ No
OSD Policy:	☐ Yes	☐ No
Vehicle Driver's Log:	☐ Yes	☐ No

Service completed during month: _____

4. Plate #: _____ Mileage: _____
   Make: _____ Model: _____
   Year: _____
   VIN: _____
   Condition:

First Aid Kit:	☐ Yes	☐ No
Fire Extinguisher:	☐ Yes	☐ No
OSD Policy:	☐ Yes	☐ No
Vehicle Driver's Log:	☐ Yes	☐ No

Service completed during month: _____

Vehicle Control Officer: _____
Signature

Forward to Director of CTU monthly upon completion.

DEPARTMENT OF CORRECTION
CENTRAL TRANSPORTATION UNIT

Request for Disposal/Turn in of Vehicle

From: _____
Institution/Division

_____
Authorized by, Superintendent or Fiscal Officer Only

Date: _____

I request authorization to dispose of/turn in the below listed vehicle.
It has been determined that the vehicle is:

_____ No longer serviceable, due to excessive maintenance cost

_____ Excess to institution or division needs

PLATE	MAKE/MODEL/TYPE/YEAR	VIN NUMBER

Approved:

Fleet Manager

Disposition:

_____ Auctioned: _____

_____ Transferred To: _____

Date: _____

Approved _____
Superintendent Date

Master Institution Trip Log

Institution: _____ Week Ending: _____

DATE	DESTINATION	TIME OUT	TIME IN	# OF COS	CO'S NAMES	TRIP TYPE (1)	# OF INMATES	ORIG.INST.	VEH.REG.	VEH. TYPE (2)	MILAGE OUT	MILAGE IN	O.T. PER C.O.	SUMMARY FOR THE WEEK	
														NO.OF TRIPS BY AREA	
														COURT	
														MEDICAL	
														TRANSFER	
														ESC.FURLOUGH	
														OTHER	
														TOTAL	
														OVERTIME SUMMARY	
														COURT	
														MEDICAL	
														TRANSFER	
														ESC.FURLOUGH	
														OTHER	
														TOTAL HOURS	
														REQUESTED BY C.T.U.	

(1) TYPE OF TRIP

A-	COURT
B-	MEDICAL
C-	ESC. FURLOUGH
D-	TRANSFER

(2) TYPE OF VEHICLE

A-	BUS
B-	VAN
C-	SEDAN
D-	STATION WAGON

PREPARED BY: _____

SUPERINTENDENT'S REVIEW & SIGNATURE _____