

## **Policies and Procedures**

SECTION: ADMINISTRATIVE	POLICY # ADM 9	PAGE 1 of 2
TITLE: Incident/Accident Reporting Policy	EFFECTIVE DATE: 11.22.24	
SUPERCEDES: N/A New Policy	Dated:	

## DISTRIBUTION: CareerSource North Central Florida (CSNCFL) Staff and Service Providers

**PURPOSE:** To provide policy by which Incidents/Accidents are reported to CSNCFL management staff and Alachua County.

## **POLICY**

Incidents/accidents are defined as undesirable or unfortunate happenings that occur unintentionally and usually result in harm, injury, damage, or loss; casualty; mishap involving CSNCFL staff or CSNCFL customers.

All incidents/accidents must be reported by CSNCFL staff verbally to the Manager On Duty (MOD) immediately to determine if law enforcement or emergency services must be notified. An Incident/Accident reporting form must be completed and submitted by the MOD by end of shift of the date of incurrence. That form can be located at Incident/Accident Form.

The form will need to include the following:

- Date of the incident/accident
- Time of the incident/accident
- Date reported
- Incident/Accident type

- Affiliation
- Employee/Customer information
- Vehicle information
- Vehicle/Equipment incident details
- Witness information (including staff witnesses)
- Supervisor's summary statement which includes:
  - o A detailed description of the accident
  - Who was involved
  - How the incident occurred
  - o Circumstance surrounding the incident
  - o Attachments of additional pages and photographs if applicable
  - Supervisor Name, Position, Signature and Date

The Incident/Accident form will be forwarded for further review by the Chief Executive Officer (CEO) or designee.

Failure to follow the Incident/Accident Reporting Policy may result in disciplinary action as laid out in the CSNCFL Employee Handbook.

Acknowledgement:		
Printed Employee Name	Position	
Employee Signature	Date	
OFFICIAL CICNATURE		

OFFICIAL SIGNATURE

PHYLLIS MARTY
Chief Executive Officer