

Administrative Order

TITLE: Property/Liability Incident Reporting Requirements

NUMBER: AO-27

CANCELS: August 31, 2000

APPROVED: November 3, 2008

ORIGINATOR: Human Resources/Risk Management

REVIEW: November 3, 2011

I. Purpose and Scope

To establish procedures for reporting incidents/accidents covered by Brevard County's Property and Liability Insurance Programs.

II. Definitions and References

- A. *Administrative Office* shall include any Department or Office of the Board of County Commissioners that participates in and is covered under the County's Property and Liability Insurance Programs.
- B. *Agency* shall include any Charter Office (Offices of the Clerk of the Court, Property Appraiser, Sheriff, Supervisor of Elections or Tax Collector) that participates in and is covered under the County's Property and/or Liability Programs.
- C. *Employee* and *Supervisor* shall include any person employed in the capacity of employee or supervisor by any *Administrative Office* or *Agency*.
- D. *Claim* means the assertion of a legal right that carries with it a demand for relief.
- E. *Incident* means any circumstances that may reasonably be expected to give rise to a *Claim*.
- F. *Wrongful Act* means any actual or alleged breach of duty, neglect, error, misstatement, misleading statement, omission or *Employment Practices Violation*.
- G. *Employment Practices Violation* means actual or alleged:
 - 1. wrongful dismissal, discharge or termination (either actual or constructive) of employment, including breach of implied contract;
 - 2. harassment (including sexual harassment whether *quid pro quo*, hostile work environment or otherwise);
 - 3. discrimination, including but not limited to, discrimination based upon age, gender, race, color, national origin, religion, sexual orientation or preference, pregnancy or disability;
 - 4. retaliation (including lockouts);
 - 5. employment-related misrepresentation(s) to an employee or applicant for employment;
 - 6. wrongful failure to employ or promote;
 - 7. wrongful deprivation of career opportunity, wrongful demotion or negligent employee evaluation, including the giving of negative or defamatory statements in connection with an employee reference;

8. wrongful discipline;
9. failure to provide or enforce adequate or consistent policies and procedures relating to *Employment Practices Violations*; AND/OR
10. violation of an individual's civil rights relating to any of the above.

H. Form Acord 1: *Property Loss Notice*

I. Form Acord 2: *Automobile Loss Notice*

J. Form Acord 3: *General Liability Notice of Occurrence/Claim*

K. Form BCC-207: *Supervisor's Report of Accident*

L. *Florida Statute Chapter 768.28*

M. *Brevard County Merit System Policy XII, Disciplinary Action*

N. *Risk Management's Indoor Air Quality (IAQ) Protocol*

III. Incident/Accident Reporting Responsibilities

FAILURE TO PROMPTLY REPORT OR RENDER NOTICE OF INCIDENTS, ACCIDENTS, OR CLAIMS COULD RESULT IN DENIAL OF COVERAGE BY THE INSURANCE CARRIER.

Responsibilities of *employees, supervisors, Administrative Offices, and Agencies* which are involved in or witness to any incident or accident involving bodily injury, personal injury, or property damage as a result of County operations, or which become aware of any incident involving circumstances that may reasonably be expected to give rise to a claim being made by an applicant, employee or former employee of an *Administrative Office* or *Agency* involving allegations of *Employment Practices Violations*.

- A. General Employee/Supervisor Responsibilities: Auto Liability, General Liability, County Vehicle, County Property and *Employment Practices Violation* incidents and claims:
 1. Any *Administrative Office* or *Agency* employee witnessing or involved in an incident or accident shall report the incident or accident to his/her supervisor as soon as possible.
 2. If possible, the employee shall lend assistance to any injured party and attempt to obtain names, telephone numbers and addresses of any witness(es) to the accident or incident.
 3. **NO employee, supervisor, Administrative Office or Agency is authorized to discuss or agree with any person as to any responsibility or obligation of the County.**
 4. *Administrative Offices* and *Agencies* shall report to Risk Management within one (1) business day following all events resulting in bodily injury or property damage estimated in excess of \$500. Incidents or accidents involving serious injury or property damage shall be reported immediately to Risk Management via telephone at 637-5452 or fax at 637-5364.
 5. *Administrative Offices* shall report all allegations of *Employment Practices Violations* to the Human Resources Employee Relations Manager and/or the ADA Officer, who will provide Risk Management with notice as soon as possible.
 6. *Agencies* shall report all allegations of *Employment Practices Violations* to Risk Management as soon as possible.

B. Automobile Liability Incidents/ Accidents

1. Any employee involved in an accident while operating a County vehicle or personal vehicle on official County business shall notify his/her *Administrative Office* or *Agency* supervisor as soon as possible. The appropriate law enforcement jurisdiction must be notified for completion of an official investigative report. A copy of the police report is to be forwarded to Risk Management as soon as possible.
2. The employee and supervisor shall complete form *Acord 2: Automobile Loss Notice*. The report shall include a detailed description of the accident and shall be forwarded to Risk Management within one (1) business day following the occurrence.
3. If any employee, using a personal vehicle is involved in an accident while on official County business, the employee must contact his/her insurance company which will be solely responsible for physical damage to the personal vehicle and which shall be primary for liability coverage. The County insurance plan may be secondary for liability coverage up to *Florida Statutes 768.28* limits.
4. Each *Administrative Office* and *Agency* shall submit a completed form *BCC-207: Supervisor's Report of Accident* to Risk Management within three (3) business days of the occurrence.

C. General Liability Incidents/ Accidents

1. Any employee witnessing, involved in, or in receipt of report of any incident or accident resulting in bodily injury or property damage occurring on County property or in the course of County operations, shall report the occurrence to his/her *Administrative Office* or *Agency* supervisor as soon as possible.
2. The employee and supervisor shall complete form *Acord 3: General Liability Notice of Occurrence/Claim*, and forward it to Risk Management within one (1) business day of the reported incident.
3. Each *Administrative Office* and *Agency* shall submit a completed form *BCC-207: Supervisor's Report of Accident* to Risk Management within three (3) business days of the occurrence.

D. County Property Incidents/ Accidents

1. When County-owned or leased property (valued in excess of \$500) is stolen or is damaged by Accident, Act of God, or a Building Indoor Air Quality issue, the *Administrative Office* or *Agency* acting as custodian for the property shall complete form *Acord 1: Property Loss Notice*, and forward it to Risk Management within one (1) business day of the event.
2. In the event damage or loss arises from theft or vandalism, each *Administrative Office* or *Agency* shall contact the appropriate law enforcement jurisdiction to report the offense and initiate any appropriate criminal investigation. A copy of the investigative report is to be forwarded to Risk Management as soon as possible.
3. Each *Administrative Office* or *Agency* shall submit a completed form *BCC-207: Supervisor's Report of Accident* to Risk Management within three (3) business days of the occurrence.
4. Each *Administrative Office* or *Agency* shall take adequate steps to prevent continuing deterioration of property.

E. Employment Practices Violations Incidents/Claims

1. Each *Administrative Office* or *Agency* shall report all allegations of *Employment Practices Violations* to the Human Resources Employee Relations Manager and/or the ADA Officer, who will provide Risk Management with notice as soon as possible.
2. All agencies shall report all allegations of *Employment Practices Violations* to Risk Management as soon as possible.

F. Additional Supervisory Responsibilities

1. Each *Administrative Office* or *Agency* supervisor will provide Risk Management with immediate claim notification via telephone or fax for all losses involving serious bodily injury or property damage. All losses resulting in bodily injury or property damage in excess of \$500 shall be reporting in writing within one (1) business day.
2. The *Administrative Office* or *Agency* supervisor shall conduct a full and complete investigation to identify the cause of the accident, determine corrective action and determine whether disciplinary action in conformance with *Brevard County Merit System Policy XII, Disciplinary Action* is applicable.
3. The *Administrative Office* or *Agency* supervisor shall complete form *BCC-207: Supervisor's Report of Accident* to report incidents or accidents involving Auto Liability, General Liability, County Vehicle and County Property claims and forward the completed report, signed by the employee and the supervisor, to Risk Management within three (3) business days of the occurrence.
4. Each *Administrative Office* or *Agency* shall forward all claims, subpoenas, or suit papers and any other incident or accident related materials, such as photographs, law enforcement reports, estimates, etc., to Risk Management as soon as possible.
5. Each *Administrative Office* or *Agency* will cooperate with Risk Management, the third party administrator, and any other vendor/service provider authorized by Risk Management during the investigation, processing and handling of any incident or claim.

V. **Reservation of Authority**

The authority to issue and/or revise this Administrative Order is reserved to the County Manager.

Signed by: Peggy Busacca 11/3/08
Peggy A. Busacca, County Manager