

**County Risk Services, Inc. – Third Party Administrator for
Association of County Commissions of Alabama Self-Insurance Pools**

2019-2020 SAFETY INCENTIVE DISCOUNT PROGRAM

APPLICATION

The members of the BALDWIN County Commission hereby verify that we have fully complied with all the requirements of the ACCA Self-Insurance Pools **2019-2020 Safety Incentive Discount Program** and are returning this application and documentation for consideration to receive the safety incentive discount. We understand this application and all the required documentation should be received to be eligible.

Signed by: _____
County Commission Chairman Date

The current appointed **County Safety Coordinator** is: KEN STRONG

County Job Title: RISK MANAGER Email Address: ken.strong@baldwincountyal.gov

Requirements: I, KEN STRONG, serving as this County's Safety Coordinator, am verifying by my initials below that all the requirements of the **2019-2020 SIDP** have been completed and are being maintained in my county; and I am emailing this signed application and all required documentation before its deadline of Sept. 30, 2020.

SIDP REQUIREMENTS

	Safety Coordinator Initials	Required Documentation
Ensured Safety Coordinator Resolution and/or commission minutes were on file w/CRS	<u>K.S.</u>	Need if not on file
Attended <u>one</u> (1) Safety Coordinator Training	<u>K.S.</u>	N/A
Ensured <u>one</u> (1) Public Official/Administrative Staff & <u>one</u> (1) Dept. Supervisor attended Loss Prev. Training	<u>K.S.</u>	N/A
Emailed current Countywide Safety Committee List w/names, titles, depts & email	<u>K.S.</u>	Safety Comm. List
Emailed documentation for <u>two</u> (2) or more Countywide Safety Committee meetings	<u>K.S.</u>	2 Sign-ins/Agendas
Emailed documentation for <u>four</u> (4) or more safety meetings for Sheriff's Office	<u>K.S.</u>	4 Sign-ins/Agendas
Emailed documentation for <u>four</u> (4) or more safety meetings for Jail/Corrections	<u>K.S.</u>	4 Sign-ins/Agendas
Emailed documentation for <u>four</u> (4) or more safety meetings for Road & Bridge Dept	<u>K.S.</u>	4 Sign-ins/Agendas
Emailed documentation for <u>four</u> (4) or more safety meetings for each Other Safety-Sensitive Depts	<u>K.S.</u>	Sign-ins/Agendas
Ensured Safety Inspections in Safety-Sensitive Depts were conducted	<u>K.S.</u>	N/A
Ensured Incidents & Accidents in Safety-Sensitive Depts were reviewed and documented	<u>K.S.</u>	N/A
Ensured Safety Records in Safety-Sensitive Depts were being maintained & followed-up	<u>K.S.</u>	N/A
Emailed documentation for a current year Employee Orientation for employees and new hires	<u>K.S.</u>	1 Signed Page
Ensured County has adopted and enforced Written <i>Drug & Alcohol Abuse Policies and Procedures</i> <u>on file</u>	<u>K.S.</u>	If changed in 19-20
Ensured County has adopted and enforced Written <i>Return-to-Work / Modified-Duty Policy</i> <u>on file</u>	<u>K.S.</u>	If changed in 19-20
Ensured County has adopted and enforced Written <i>Seat Belt Policy</i> <u>on file</u>	<u>K.S.</u>	If changed in 19-20
Ensured County has adopted and enforced Written <i>Wireless Communication Devices... Policy</i> <u>on file</u>	<u>K.S.</u>	If changed in 19-20
Ensured Commission, Sheriff's Office/Jail cooperated with CRS Risk Management Program	<u>K.S.</u>	N/A
Emailed documentation for Commission's response to CRS Risk Management with-in 90 days	<u>K.S.</u>	1 Response Letter
Emailed documentation for Sheriff's Office/Jail's response to CRS Risk Management with-in 90 days	<u>K.S.</u>	1 Response Letter
Ensured <u>two</u> (2) or more Sheriff's Deputies attended scheduled Safety Training	<u>K.S.</u>	N/A
Ensured same <u>two</u> (2) Correctional Officers/Jail Staff attended at least <u>three</u> (3) AJTA courses	<u>K.S.</u>	N/A
Ensured Road & Bridge Safety Director or Deputy Safety Director attended Road Supervisor's Training	<u>K.S.</u>	N/A

Email this signed & dated application and all required documentation to mcollier@countyrisk.org

NO LATER THAN SEPTEMBER 30, 2020