

**SUBJECT:** Red Flag Program

**PURPOSE:** To establish policies, procedures and standards, and to provide administrative and technical instructions for all personnel in the administration of the Red Flag Program for driver's license monitoring, in accordance with Administrative Procedure 610, Section II, Policies, Subsection C, Motor Vehicle Driver's License.

**SCOPE:** This procedure sets forth County-wide policies and procedures applicable to all "County employees and volunteers who are assigned a County-owned vehicle, or who on occasion *may* drive a County vehicle..." (Administrative Procedure 610).

**AUTHORIZATION:** Chief Administrative Officer and Director, Office of Central Services

**RESPONSIBILITY:** All County departments and agencies.

**PROCEDURE:**

I. General

- A. Driver's license information shall include; employee's/volunteer's last name, first name, driver's license number, State of issue, and date of birth.
- B. All drivers' license information shall be maintained in a confidential computer database within the Fleet Management Division to be accessed by the County Fleet Administrator/Program Facilitator.
- C. The Program Facilitator shall coordinate employee/volunteer driver's license information with the Motor Vehicle Administration in all applicable States and jurisdictions in order to obtain driving records for all County employees/volunteers.
- D. The Maryland Motor Vehicle Administration's computer system automatically generates and mails copies of County employees'/volunteers' driving records to the Program Facilitator whenever a change is made to the employee's/volunteer's driving record.
- E. Changes to an employee's/volunteer's driving record include, but are not limited to, points acquired and suspension or revocation of driver's license.
- F. All correspondence related to the Red Flag Program, including driving records and other personal employee/volunteer information, shall be housed in a locked file cabinet in the office of the Program Facilitator in the Fleet Management Division.

NOTE: The Maryland Vehicle Law, Title 16, Section 16-102(a)(6) requires a new resident of the State of Maryland to obtain a Maryland Driver's License within 30 days of residency.

II. Processes

A. New/Terminated Employees/Volunteers and Change of Residence

1. New employees'/volunteers' who reside in a State other than Maryland or who are licensed by a State other than Maryland shall complete and sign a Driver's License Verification and Consent Form (Attachment A), which shall also be signed by the employee's/volunteer's supervisor. Driver's License Verification and Consent Forms and terminated employees'/volunteers' driver's license information (see Section 1.A. of this Procedure) shall be forwarded, in writing, ***via confidential envelope***, to Red Flag Program Facilitator, Fleet Management Division, 8019 Central Avenue, Capitol Heights, Maryland 20743.
2. New driver's license information for employees/volunteers that have moved to another State or have recently become residents of Maryland shall be submitted as stated in Item 1 above.
3. Driver's license information for new and terminated employees/volunteers, and employees/volunteers who are new Maryland residents or have moved to another state, shall be forwarded to the above-referenced in Section II.A.1. on the first day of each month.
4. The Red Flag Program's computer database shall be updated within one week of receipt of new/terminated employee/volunteer information and updated/changed driver's license information.
5. New/Terminated employees'/volunteers' and new Maryland residents' driver's license information shall be forwarded to the Maryland Motor Vehicle Administration within one week of receipt from Departments/Agencies to include/remove new/terminated employees/volunteers from the Red Flag Program.

B. Driver's License Validity Verification

1. Supervisors and/or department/agency heads shall annually ensure their employees'/volunteers' drivers license validity by reviewing a current driving record for each employee/volunteer during the employees'/volunteers' annual past performance appraisal.
2. Employees'/Volunteers' driving records shall be obtained via written request from the department/agency head to the Program Facilitator no less than thirty days prior to the employees'/volunteers' annual past performance appraisal due date.
3. The Program Facilitator will request copies of the specified driving record(s) from the Motor Vehicle Administration within 24 hours of receipt from the requesting department/agency.
4. Once the Program Facilitator receives the requested driving record(s) from the Motor Vehicle Administration, those records will immediately be forwarded to the department/agency head for appropriate action.

C. Department/Agency Notification of Violations

1. The department/agency head shall be notified via confidential memorandum from the County Fleet Administrator if an employee/volunteer within their department/agency has acquired six or more points on their driving record or have had their driver's license suspended or revoked. A copy of the employee's/volunteer's driving record shall be attached to the memorandum.

***\*Exception: Fire Department employees/volunteers whose driving records meet the above-mentioned conditions or have acquired four or more points shall be faxed directly to the Fire Department's Risk Manager, in order for the Fire Department to continue to comply with their own internal Risk Management Procedures.***

2. The Director of Central Services shall be copied, confidentially, on all violation letters sent to department/agency heads, including copies of

referenced driving records, in order to monitor the Program.

D. Corrective Action

1. In accordance with Administrative Procedure 610, it is the department's/agency's responsibility to remove driving privileges of employees/volunteers whose driving privileges have been suspended or revoked or who have obtained six or more points on their driving record (four or more points for Fire Department employees/volunteers). It is also the department's/agency's responsibility to take appropriate disciplinary action, within the scope of the County's Personnel Law and/or appropriate bargaining unit.
2. Within two weeks of violation notification, the department/agency shall, *confidentially*, notify the Red Flag Program Facilitator, in writing, what corrective action has been taken.

**CROSS-REFERENCING/  
RELATIONSHIPS:**

Administrative Procedure 610

This procedure is effective upon signature.

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Date

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Dr. Jacqueline F. Brown  
Chief Administrative Officer

**PRINCE GEORGE'S COUNTY GOVERNMENT**

**DRIVER'S LICENSE VERIFICATION AND CONSENT FORM**

The following accurately reflects the information on my current driver's license. I understand it is my responsibility to notify my supervisor within one business day of any suspension, revocation or cancellation of my license. It is also my responsibility to notify my supervisor within one business day of an accumulation of six or more points on my license for moving violations, in Maryland or any other state. Further, I understand that Prince George's County Government maintains the Red Flag Driver's License Monitoring Program that monitors State and local government employee driving records for any moving violations (i.e. speeding, reckless driving, revoked license, or any other action involving the motor vehicle driver's license).

By way of my signature on this Driver's License Verification and Consent Form, I authorize my employer, Prince George's County Government, to obtain copies of my driving record, periodically, from the State Motor Vehicle Administration from which my driver's license has been issued. I further authorize the appropriate issuing Motor Vehicle Administration to release my driving records to my employer.

**TO BE COMPLETED BY SUPERVISOR:**

**DRIVER'S LICENSE INFORMATION**

Name:

Date of Birth:

Issuing State:

License Number

Class

Expiration Date:

**DOT PHYSICAL EXAMINATION INFORMATION**

Date of Certification:

Expiration Date:

\_\_\_\_\_  
Department

\_\_\_\_\_  
Employee's Signature

\_\_\_\_\_  
Date

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I have physically reviewed the license and examination information if applicable, and hereby verify the information listed above as current and accurate.

\_\_\_\_\_  
Supervisor's Name

\_\_\_\_\_  
Supervisor's Signature

\_\_\_\_\_  
Date