

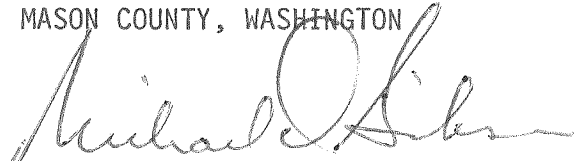
RESOLUTION NO. 102-88

WHEREAS, on December 13, 1988 the Board of Mason County Commissioners signed an inter-local agreement creating Washington Counties Risk Pool and agreed to its terms and conditions as a member county of the Risk Pool effective January 1, 1989.

NOW, THEREFORE BE IT RESOLVED, that the enclosed claims manual is hereby adopted as the procedure to follow for all Mason County employees to report incidents and situations in which the County may have some liability exposure.

DATED this 13th day of December , 1988.

BOARD OF COUNTY COMMISSIONERS
MASON COUNTY, WASHINGTON


Chairperson Gibson

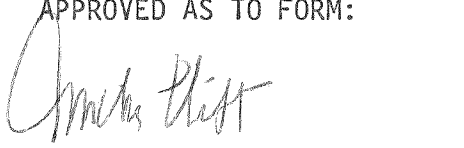
Absent
Commissioner Eager


Commissioner McGee

ATTEST:


Clerk of the Board

APPROVED AS TO FORM:


Deputy Prosecutor

xc: Cmmrs
Accounting Dept (2)
Treasurer

WASHINGTON COUNTIES RISK POOL

CLAIMS MANUAL

A. PURPOSE

The following procedures have been adopted for reporting incidents and situations in which the county may have some liability exposure. This manual advises all county elected officials, appointed department heads and employees ("county officials and employees") about the county's insurance program and explains how claims against the county shall be handled. In addition, this manual advises county officials and employees of their responsibilities. All county officials and employees should receive and know the provisions of Sections A through F of this manual.

B. WASHINGTON COUNTIES RISK POOL

Beginning on January 1, 1989 , the county joined the Washington Counties Risk Pool ("Pool") for the following areas normally covered by commercial insurance: general liability, professional liability -- public officials, professional liability - law enforcement, commercial automobile liability, and excess liability (Umbrella). Because of the Pool's retrospective rating procedure, most of an award paid to an injured person and costs of defense will ultimately be borne by the county. It is important that all county officials and employees be careful in their actions and not expose the county to unnecessary liability.

C. HAZARDS

1. County officials and employees are the "eyes and ears" of county government. They should report hazards or other unsafe conditions to the appropriate office for repair.
2. Road hazards, damaged highway signs and unsafe road conditions should be reported immediately to the Road Department at x450/x386 8a-5p or 911 after 5p .
3. Unsafe conditions in any county building should be reported to the Dir. General Services at x362 or Asst Dir, x356 .
4. Other matters should be reported to the appropriate department or to the Board of Mason County Commissioners at x419 or Dir. Central Services at x423 .

D. TRAFFIC COLLISIONS

1. County officials and employees involved in traffic collisions during working hours, while on county business

and/or while in a county vehicle shall not make any statements at the scene except in private to an investigating law enforcement officer. No statements shall be made to, or in the presence of, the other parties or witnesses to the accident. "Fault" shall not be acknowledged. "Fault" is a legal determination that will be made by the appropriate officials later.

2. Involved county officials and employees shall write down the names, addresses, and telephone numbers of all participants in the accident and all witnesses to the traffic collision. In particular, the driver's license number, vehicle license number and insurance company of each party to any traffic collision should be recorded. Please be observant and accurate, and take pictures if possible.
3. Traffic collisions occurring within the county shall be reported immediately to the Sheriff's Office at one of the following numbers: 911 or 1-800-562-5628.
4. Traffic collisions occurring outside of the county shall be reported immediately to the Washington State Patrol or the appropriate County Sheriff's Office or City Police Department.

E. INCIDENT REPORTS

All traffic collisions and incidents involving county officials, employees, automobiles or property which might subject the county to a claim for damages shall be reported by telephone immediately to the head of the county employee's department and to the County Risk Manager or Deputy Prosecuting Attorney handling civil claims. Traffic collisions and incidents should be reported by telephone immediately to the Pool and the Pool's claims adjuster when:

- (1) Ultimate liability may exceed \$100,000;
- (2) Death;
- (3) Brain injury, spinal cord damage, real or specific;
- (4) Impaired or loss of use of limbs;
- (5) Injury significantly affecting the capacity of sight, taste, smell or hearing;
- (6) Significant disfigurement;
- (7) Injury to the reproductive organs;
- (8) Possible highway design/maintenance liability;
- (9) Law enforcement liability;
- (10) Potential Errors and Omissions liability; or
- (11) Other incidents that may merit special notification.

Thereafter, before leaving work on the day of the incident, the county official or employee involved shall prepare a written Incident Report, a copy of which is set forth below in Appendix

A. The Incident Report shall be reviewed by such employee's department head and promptly forwarded to the Office of the Prosecuting Attorney. Such Incident Reports are confidential attorney work product and the contents shall not be copied or divulged to others. Neither the county official or employee nor the department shall retain a copy of the confidential Incident Report.

The county official or employee involved and all other county officials and employees shall cooperate fully with the investigation of the incident performed under the direction of the Pool or the Office of the Prosecuting Attorney.

F. FILING CLAIMS

Claims are made against the county by filing a written Claim for Damages, an example of which is set forth below in Appendix B, with the Clerk of the Board of County Commissioners. Claims forms are available only from the Office of the Prosecuting Attorney and the County Risk Manager. If a department is contacted by a claimant about making a claim, the department shall not volunteer information and shall refer the claimant to the Office of the Prosecuting Attorney or the County Risk Manager. No county official or employee shall assist the claimant in preparing a claim or review with the claimant a completed claim for legal sufficiency. No county official or employee shall notarize a completed claim.

After a claim is filed, the Clerk of the Board of County Commissioners shall indicate on such claim the date of filing. The Clerk shall provide copies to the Pool, the Prosecuting Attorney, the County Risk Manager, and to elected officials and department heads of the offices and departments involved. The appropriate elected officials and department heads shall assist the Office of the Prosecuting Attorney by providing necessary reports.

The Prosecuting Attorney's files are kept confidential as attorney work product. A department shall not retain a copy of a confidential written report. If a copy of a confidential report is kept by a department in its files, it may be subject to disclosure under the Public Disclosure Law and under court rules of discovery. The confidentiality of the report is thereby destroyed. Copies of these confidential reports may be obtained by the office or department after settlement has been made and a liability release has been obtained. However, since these written reports are confidential as attorney work product until that time, county officials and employees should freely express themselves in reporting on a claim in any confidentially written report requested by and furnished to the Prosecuting Attorney's Office. Such reports should have the following legend written at the top:

CONFIDENTIAL ATTORNEY WORK PRODUCT

This report is made at the request of the Prosecuting

Attorney to prepare a legal defense to a claim that may be or has been made against the county. As such, the contents of this report are confidential as part of the Prosecuting Attorney's work product and shall not be divulged to others.

G. CLAIM REVIEW

The Office of the Prosecuting Attorney, with the assistance of the County Risk Manager, shall promptly screen every Claim for Damages submitted against the county and advise the Pool and the Board of County Commissioners about the disposition of all such claims. The county may adjust and settle small claims of up to one-fifth of the county's deductible amount, or \$5,000, whichever is smaller, without using the Pool's claims-adjusting services.

The Board of County Commissioners shall dispose of such small claims by adoption of an appropriate resolution stating the Board's findings in the matter. The Board shall promptly give written notice to the claimant of such disposition. A copy of the notice and resolution shall also be sent to the Pool, the Office of the Prosecuting Attorney, the County Risk Manager and elected officials and department heads of the offices and departments involved.

The Pool shall coordinate claims administration of larger claims. The Pool shall decide whether a claim will be forwarded to the Pool's claims adjuster for adjusting or handled in-house by county or Pool staff. The adjuster has authority to settle any claim up to Twenty Five Thousand Dollars (\$25,000). The adjuster shall inform the County Risk Manager of the progress of the claim and discuss settlement of the claim prior to the final adjustment. If the county objects to the settlement, the adjuster shall try to resolve the disagreement. If the adjuster is unable to do so, Pool personnel shall confer with the county and the adjuster to resolve the disagreement. If the dispute is still unresolved, the Pool shall have the ultimate authority to settle the claim.

Settlement of claims of Twenty Five Thousand Dollars (\$25,000) and more must be approved by the Executive Committee of the Pool's Board of Directors. The adjuster shall first contact the affected county for approval, then present the settlement to the Executive Committee of the Pool's Board of Directors in Executive Session. Board review of the larger claims allows all member counties the opportunity to understand the full facts of the claims and to use the information in their respective loss control programs.

H. PAYMENT OF CLAIMS

Each county shall establish a Claims Fund pursuant to RCW 36.33.065 and fund it adequately to pay claims and costs as they come due.

I. LAWSUITS

By statute, the county is brought into a lawsuit by service of the Summons and Complaint upon the County Auditor. No county employee, not even the County Risk Manager or member of the Prosecuting Attorney's Office, is authorized to accept service of process. Copies of the pleadings shall be sent immediately to the Pool, the Board of County Commissioners, Office of the Prosecuting Attorney, County Risk Manager and elected officials and department heads of the offices and departments involved.

After reviewing the sufficiency of service of process, the Prosecuting Attorney shall file a Notice of Appearance for the county with the court. A copy of the Notice of Appearance shall be sent to the Pool. The Pool shall decide whether the pleadings will be forwarded to a Pool Attorney or defended by the Prosecuting Attorney. If a Pool Attorney is assigned, the Prosecuting Attorney shall appoint the Pool Attorney pursuant to RCW 36.27.040 as a special deputy prosecuting attorney, and the Pool Attorney shall associate with the Prosecuting Attorney on the case.

Attorneys shall report quarterly or more regularly to the Pool. Suits defended by the Pool shall be reviewed periodically by four (4) person Litigation Review Panels composed of the Executive Director of the Pool, the Pool's claims adjuster, and two (2) Prosecuting Attorneys or Deputies appointed by the President of the Pool, none of whom are representatives of the member county involved in the disagreement. The Prosecuting Attorney and the associating Pool Attorney shall resolve in good faith disputes in case tactics or settlement negotiations. If the attorneys are unable to resolve such disputes, the Litigation Review Panel shall attempt to resolve the disagreement. The decision of the Panel shall be final and enforceable by a court of competent jurisdiction.

COUNTY INCIDENT REPORT

CONFIDENTIAL ATTORNEY WORK PRODUCT

This incident report is made at the request of the Prosecuting Attorney to prepare a legal defense to a claim that may be or has been made against the county. As such, the contents of this report are confidential as part of the Prosecuting Attorney's work product and shall not be divulged to others.

- a. Claimant's Name?
- b. When did the incident occur (date and time)?
- c. Where did it take place? (street address or location in building)
- d. What happened? (use back of sheet if necessary).
- e. What was damaged?
- f. What is the estimated dollar amount?
- g. Why does the claimant believe the County may be responsible?
- h. Are other persons also responsible? (If so, state names and addresses.)
- i. What defenses are available to the County?
- j. Who witnessed the incident (names, addresses, telephone numbers)?

Claimant's Witnesses:

k. County's Witnesses:

1. Date Prepared: m. /s/
Name, Position and Department
- n. Date Reviewed: o. /s/
Department Head
- p. Date Received: q. /s/
Deputy Prosecuting Attorney

CLAIM FOR DAMAGES

This Claim Form is provided solely as an accommodation to claimants, and the County makes no representations as to its legal sufficiency. Responsibility for complying with all requirements of State law regarding claims rests with the claimant. No County Employee is authorized to advise a claimant in completing this form or reviewing its sufficiency. The County expressly disclaims responsibility for any such advice or review. (If more space is needed to answer any items, attach additional sheets and specify the item number.)

TO: CLERK OF THE BOARD OF COUNTY COMMISSIONERS,
County Courthouse, WA

STATE OF WASHINGTON)
) ss
COUNTY OF)

_____, being first duly sworn on
(print full name)
oath, deposes and says that I am the claimant herein and believe
the contents of this claim to be true. I hereby present a claim
for damages against _____ County, Washington, based
upon the following information as required by RCW 36.45.020:

1. My actual residence at the time of presenting and filing this claim is:
2. My actual residence during the six (6) months immediately prior to the time this claim accrued was:
3. The incident for which I make claim against the County occurred on the _____ day of _____, 19____, at _____ a.m./p.m.
4. The incident occurred at the following location:

5. My injury or damages were caused or happened as follows:

6. The nature of the injury or damages I sustained are:

7. The amount of damages I sustained are itemized. (A billing or two (2) estimates of the cost of repairs must be attached to this claim, together with the name of your insurance agency.):

DATED this _____ day of _____, 19____.

Claimant

SUBSCRIBED and SWORN to before me this _____ day of _____, 19____.

Notary Public
(Appointment Expires: _____)