Message from the Chair

by David M. Hall, CPCU, ALCM

David M. Hall, CPCU, ALCM, currently serves as the section manager for Innovation and Small Business Solutions for the Central Zone of State Farm. He has worked in commercial lines his entire career at State Farm, passing through Pennsylvania, Indiana, Louisiana and now Oklahoma offices. Hall frequently speaks around the country on small business continuity planning. He also shares his expertise in volunteer roles with numerous professional and community organizations, including the Institute for Business and Home Safety, Tulsa Partners (as board vice president) and the Disaster Resistant Business Council (as chair) in Tulsa.

I recently had the opportunity to visit Joplin, Mo., and see for myself the destruction caused by the incredibly powerful tornado that devastated this area less than three months ago. We've seen some dramatic examples of the power of nature in the past year, including earthquakes around the world, tornados in the southeastern United States, floods, drought and winter storms that affected countless businesses and individuals.

I recently had the opportunity to write about business continuity planning in *CPCU News*. In that article, we discussed small business statistics and how they can be influenced by preparedness — but who are the influencers? Ideas that don't or can't spread may be nice, but they are not practical. The question then is how do we, as insurance or loss control experts, spread this idea?

While I can't speak for everyone, I do know this is not an easy subject to engage. It's usually easy to discuss in the time immediately after a major tornado, hurricane or other event. But as time fades, so does the public resolve to strengthen building codes, provide additional planning services or training, or advocate planning. Here's where we, as a group of professionals, need to step up and step in. Sometimes, large public issues need to be moved along slowly, continuously, persistently. Sometimes, influencing one person can change the outcomes of many.

If you're already involved, if you speak to chambers of commerce, Lions Clubs, Kiwanis Clubs or anyone else, please continue to use your experience and expertise to influence as many people as you can. If you're not, please consider getting involved. I'm sure the people of Joplin or Tuscaloosa, Ala., or anywhere else could have used our expertise and our experience. ■

What's in This Issue

Editor's Note

by Julie L. Sealey, CPCU, CSP, ARM, ALCM, CHSP

Julie L. Sealey, CPCU, CSP, ARM, ALCM, CHSP, is lead loss control for Samsung Fire and Marine Insurance. She worked as an industrial organic flavor and fragrance chemist before joining the insurance industry. For more than 25 years, Sealey has held various insurance loss control and safety consulting positions in the Pennsylvania and New Jersey areas. She serves on the CPCU Society Loss Control Interest Group Committee.

In this issue, we present articles on the many emerging and continuing issues in loss control and safety. As loss control and insurance professionals, we see a never-ending array of safety issues, yet our continued writing and reading of the issues helps us with our daily professional activities.

This year's string of natural disasters — earthquakes, tsunamis, tornados, hurricanes and floods — showed that contingency plans are of utmost importance. Carey Madsen, MBA, provides insight into the highest possible level of business continuity following a crisis or disaster with personally experienced examples in "Are You Maximizing All of Your Resources in Crisis Prevention and Recovery?"

With the 100th anniversary of the massive fire at the Triangle Shirtwaist Factory in New York that killed 146 because of hazardous working conditions, the recent Deepwater Horizon oil rig explosion and the Fukushima Nuclear Power Plant disaster, Paul Stremple provides a review of a worker safety panel discussion in "Panel Lobbies for Better Labor Safety."

Employees in health care workplaces are increasing in numbers as the baby boomer generation patient population ages, as are incidents of aggressive patients or clients. Nina Nobile, MA, CSP, HEM, HAZWOPER, has provided a description of the situation and the loss control actions in "Violence Against Health Care Workers."

The emerging issue of radiofrequency (RF) radiation is described and discussed. So put aside your smartphone, get smart and read the article by Gloria Vogel, CFA, "RF Radiation from Wireless Antennas: The Next Black Swan?"

Although smartphones are often blamed for auto crashes, speeding is a major factor. Find out about the speeding factor in "Exceeding the Speed Limit" by Paul Farrell.

Please send us your comments about what has been written. Let us know what additional continued and emerging loss control issues you would like to see. ■

Are You Maximizing All of Your Resources in Crisis Prevention and Recovery?

by Carey Madsen, MBA

Carey Madsen, MBA, is managing director of InView Communications. Prior to joining InView, she was the director of corporate communications for Qwest Communications International Inc., where she oversaw internal and external communications strategies for the company's consumer and small business operations. Her industry background includes experience in wireless, broadband and digital television technologies, as well as contact center, e-commerce and retail distribution channels. She previously held positions in corporate sponsorship, marketing and media relations for Major League Baseball's Colorado Rockies in Denver, Colo.

Editor's note: This article appeared as a blog on the InView Communications website and is reprinted with permission.

Risk management and business continuity planning are critical and integral parts of most business operations today. Ensuring employee and customer safety and well-being, and the stability and security of physical and virtual assets; as well as maintaining the highest possible level of business continuity following a crisis or disaster are always top priorities.

However, too often, organizations complicate an already difficult situation and even prolong the recovery process by neglecting to create and maintain a comprehensive crisis communications plan before trouble strikes.

Why do so many companies do so well with business continuity and disaster recovery, but fail when it comes to communications preparedness? Frequently, organizations do not fully recognize the communications function as the preventative asset that it truly is. While most managers are certainly familiar with their communications colleagues' skills and resources when it comes to promoting good news, other critical business functions are often overlooked. A qualified communications team should act as strategic counsel to leadership in protecting and informing employees, business partners and customers before trouble is on the horizon, and as one of the organization's operational leaders to mitigate damage and share a purposeful message when trouble actually unfolds.

Crises take many forms and have the potential to impact numerous stakeholder groups, and competing interests often arise in the aftermath. It's not uncommon for legal counsel, risk managers and others focused on mitigating risk, controlling loss, and managing liabilities to feel at odds with communications professionals' efforts to influence public sentiment through prompt and frequent communication with media and other publics. But these diverse groups actually share many of the very same goals, and the best crisis-recovery success stories rely on collaboration across all functional areas.

Informed Teams Make Better Decisions

A coastal homeowner can't take measures to protect their home against damage if they don't have access to weather reports that tell them a hurricane is coming. Nor can even the best communicators prepare for a storm they're not aware of.

Many years ago while working at a Fortune 500 firm, I started my day with a phone call from a major network television station asking for comment about a product recall that was just announced by a large electronics manufacturer and the Consumer Product Safety Commission (CPSC). It goes without saying that no company representative wants to learn about a potentially serious product safety issue from a member of the media, and over the next several uncomfortable minutes, I learned that my firm was suspected to be one of several major consumer distributors of the device which had been reported to explode while in use, in some cases causing burns and other injuries.

Not only did our company look foolish and irresponsible, we missed a significant opportunity to position ourselves as a consumer advocate, and a leader in the recall efforts. We turned a one-time story into a multi-day game of media speculation while we scrambled to confirm facts and communicate appropriate, factual responses to media, customers and regulators.

A popular misconception is that communications teams only have one direction and speed for news: external and fast. In this example, several hours of research determined that, the organization was indeed a major distributor of the faulty product, and that numerous internal parties had been aware of and working on the issue for weeks. Recall logistics had been arranged, costs had been forecasted, liabilities discussed. The crisis team intentionally avoided contacting the communications department because they didn't want anyone to "issue a press release."

But this lack of communication cost the company tens of thousands of dollars in the end. Public and media response resulted in a broader, voluntary recall of similar, but not impacted product models, and the brand damage was clear. It usually only takes one case where a company spokesperson learns of a major corporate crisis from a member of the media to cure this type of problem, but it's a painful lesson that can easily be avoided.

Employees: An Asset or a Liability?

The previous example merely scratches the surface of the impact that an effective

Are You Maximizing All of Your Resources in Crisis Prevention and Recovery?

Continued from page 3

communications plan, or lack thereof, can have on any type of organizational crisis. With many situations, internal — or employee — communications become the most critical first line of defense. As they are often seen when promoting your company's product or service, your employees serve as your brand's ambassadors to the external world — customers, members of the community, potential new employees, regulators, to name a few. But far too often organizations take the opposite approach in times of crisis, instead cutting off normal communications and focusing exclusively on the control of information. This is a critical mistake. In a crisis, employees have the potential to play three vital roles:

(1) The canary in the coal mine. Front line employees are often the first to become aware of critical issues, and when properly prepared, can significantly impact an organization's ability to respond quickly and appropriately.

(2) Communicators who can inform, protect and direct other employees and customers to avoid danger, take action, or begin recovery efforts.

(3) Designated spokespersons who officially represent the company to media and other publics, or the majority of other employees who clearly understand their role is not to represent the organization, but instead to direct external parties to the correct contacts.

Without a plan and rapid communications, employees cannot know which of these roles they have responsibility for, let alone execute them effectively. Make the most of your network of employee ambassadors and arm them with the tools they need to successfully fulfill their roles.

An Integrated Part of Your Business Strategy

An effective crisis communications plan takes the same well-rounded approach found in other areas of strategic planning:

- It respects the organization's values, strategic objectives and operating plans.

- It protects the company's most valuable assets, including employees, customers, physical and intellectual property.

- It reflects the evolving realities of "business-as-usual" through regular discussions and revisions.

- It directs leadership in unusually chaotic times toward more swift, decisive action and information flow.

We can't anticipate every business risk that our company or our clients face, but we can ensure that an effective plan is in place before a crisis occurs. Making the most of relationships with employees and external stakeholders through communications helps to accomplish critical organizational goals to protect company assets, and preserve an organization's brand equity. ■

Is Your Organization Prepared? Are Your Clients Prepared? Ask Yourself:

Do your employees know who to contact in the event of a crisis?

Do you have designated spokespersons?

Do other employees understand where to direct public and media inquiries?

Do they know what (and more importantly, what not) to say?

Is there a clear decision-making process within your leadership team? (Don't assume the answer is yes — if consensus hasn't been formally reached in this area, you likely have multiple opinions at the senior team table.)

Do you understand how your key stakeholders get their news?

Getting Started:
Convene critical decision makers to create a living plan.
Critical plan components:
Integrate with other Business Continuity/Disaster Recovery processes
Identify key stakeholder groups
Establish consensus on crisis leadership roles and decision-making flow
Designate appropriate spokespersons
Outline primary and alternative communications vehicles by audience
Communicate the plan. Early and often.
Update the plan at regular intervals, to ensure relevance and effectiveness.

Panel Lobbies for Better Labor Safety

by Paul Stremple

Paul Stremple is a contributor at the *Daily Bruin*, a student-run newspaper at the University of California, Los Angeles (UCLA), and a fourth-year English student. He can be reached at pstremple@media.ucla.edu.

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In 1911, 146 workers were killed in a massive fire at the Triangle Shirtwaist Factory in New York because of hazardous working conditions.

One hundred years later, unsafe working conditions persist that must be addressed, said E. Richard Brown, a public health professor and the director of the UCLA Center for Health Policy Research. Brown spoke to an audience of roughly 40 students, faculty and staff at a panel in the UCLA Alumni Center Thursday.

He highlighted the Deepwater Horizon oil rig explosion last year and the recent incident at Fukushima Nuclear Power Plant as high-profile examples of recent failures in worker safety. Brown blamed Republicans in Congress for seeking to weaken job safety standards on behalf of corporate interests by referring to efforts to improve working conditions as "unnecessary regulations that are job-killers."

The panel, titled "Worker Health & Public Policy: Still a Burning Issue?" was hosted by the UCLA Labor Occupational Safety and Health program and corresponded with Workers' Memorial Day.

Portraits of 23 California workers killed on the job in the last year were placed around the UCLA Alumni Center conference room as a reminder of the ongoing struggle for workers' rights and safe work environments.

UCLA-LOSH Director Linda Delp introduced the panel with a brief video about the Triangle Shirtwaist fire, an event that helped galvanize the early labor movement, she said. The locked doors and windows that caused the deaths of so many workers in the Triangle Shirtwaist fire were similar to present-day conditions, she said, specifically mentioning the imprisonment of Thai garment workers in El Monte, which was discovered in 1995.

Delp spoke about Sheharbano Sangji, a 23-year-old staff research assistant at UCLA who died in 2009 from injuries sustained in a lab chemical fire.

According to *Daily Bruin* archives, UCLA was fined $23,900 by the California Division of Occupational Safety and Health Administration after the incident for numerous violations, including failure to "implement procedures to correct unsafe working conditions."

Also present at the panel were representatives for local workers' rights groups including the Don't Waste LA Campaign, the CLEAN Carwash Campaign and CHIRLA/Domestic Workers Alliance California Bill of Rights.

Ellen Widess, the new chief of Cal-OSHA, served as the panel's keynote speaker.

After praising the various groups on the panel for their work, Widess said her charge was to help Cal-OSHA move past the "glacial pace of standard setting" for workplace safety. She said she hopes to "revitalize the agency and restore credibility" that Cal-OSHA has lost in recent years under the Schwarzenegger administration.

Widess said there are fewer Cal-OSHA inspectors working today than in 1994, yet the workforce in California has grown by 3.8 million workers.

Citing the lack of staff and resources at Cal-OSHA in a California budget climate she characterized as "starving," Widess encouraged student involvement and university collaboration in the ongoing process of improving labor rights and workplace safety. ■

Violence Against Health Care Workers

by Nina Nobile, MA, CSP, HEM, HAZWOPER

Nina Nobile, MA, CSP, HEM, HAZWOPER, is with Zurich Services Corporation in Princeton, N.J. She has more than 25 years' experience in risk engineering, including more than 15 years working directly with health care and social services customer groups.

"**W**hy does my mommy keep getting beaten up at work? Sometimes the people she tries to help hit her and try to hurt her. Sometimes she cries in the dark. She doesn't know I am watching. I want to give her a big hug, but I can't let her know that I know. She would feel sad if she knew that I was worried." These could be the words of a child of a woman in one of many occupations, including police women, soldiers, security guards, wrestlers, prison guards and other occupations where violence is anticipated. Unfortunately, these could also be the words spoken by a child of any number of the dedicated health care workers around the world today. It is a phenomenon occurring in countries around the globe. In fact, workers in the health care segment experience violence 16 times a frequently as those in other service occupations[1] (Elliott, 1997).

Violence against health care workers is a growing concern for health care workers, health care institutions and society at large. In a study conducted in Germany by Gerberich, et. al., four major health care institutes asked employees to participate in a survey concerning violence that they have experienced as health care workers. Violence was defined as being any verbal or physical assault they experienced while performing duties associated with their jobs.[2]

After analyzing the data and sources of data, the respondents were classified by the populations they work with. Those who worked with the elderly and the mentally/emotionally disturbed were exposed to violent and aggressive behavior much more frequently and significantly than those who worked with different demographics. Studies in the U.S. and other health care settings around the globe back these findings up.

The average health care worker experiences at least one act of violence in a lifetime while on the job, according to a study by C. Anderson in her article discussing the vulnerability of one nurse over another. The study she cites categorizes workplace violence events into four types: emotional, verbal, physical and sexual. Nearly 90 percent of the study groups reported having experienced emotional and verbal abuse. Between 35 and 80 percent of the hospital staff also experience physical abuse, while 16 to 76 percent of nurses report sexual harassment (Rippon, 2000)[3].

In studies conducted on prior history and predisposition to violence, it is suggested that those employees working in certain situations will be more vulnerable. Some of those situations include night hours, emergency rooms and psychiatric wards where stress levels are higher may pose a greater frequency of violence against health care employees. Once some employees experience violence, they may develop more passive behaviors or become more compliant thus inviting aggression by others (Irwin 1999)[4]. Additionally, those who have experienced prior violent episodes in their careers or personal lives may be more vulnerable because of their prior victimization (Collins 1998)[5].

According to WorkSafeBC, the workers' compensation Board of British Columbia, there are five important steps in assessing and controlling risk of violence in the healthcare environment. These steps are:

- **Establishing a Working Group and Enlisting Support.** The group should consist of representatives from disciplines that may be able to effect good controls including safety, psychiatry, dementia, head injury experts, senior management and representatives from all shifts.

- **Conducting a Risk Assessment.** Evaluate where the work process, condition, situation, activity or any other parameter that conceivably contributes to potential for workplace violence.

- **Developing and Implementing Control Measures.** Once exposures to violence are identified through the risk assessment, control measures should be implemented. These measures should be chosen to match the risks identified. They can include any number of measures. Hazards can be eliminated in some cases. If not eliminated, the risks can be controlled in a variety of ways. Sometimes short-term solutions are necessary before long-term improvements can be implemented. Once decided upon, there should be written policy statements, procedures and arrangements within the work environment to control and/or mitigate these risks. Always consider which measures will safeguard the greatest number of people. Finally, plan for post-incident procedures should the control measures fail.

- **Providing Education and Training.** Employees should be trained initially regarding what types of violent events have occurred at the workplace they'll be working in and what types of violent situations can be expected. Secondly, staff should be educated as to how to behave to protect themselves and the attacker from the risk of violent behavior. This can happen in any number of ways, including in-house training curriculums, outside vendors providing training and combinations of the two. Both options provide the availability to have staff-trained professionals to train others initially and periodically as deemed necessary to maintain a safe workplace environment.

- **Conducting an Annual Review.** Once a violence prevention program is in place, a system for evaluating the effectiveness of that program should be developed. Procedures for implementing the program should be decided upon and employed to measure the effectiveness of the program. The evaluation or review system should be continuous and should be a quality check on the various elements of the violence prevention program.

It should include a discussion of the findings with the working group that helped establish the rules policies and procedures used in the program. Recommendations developed following reviews of the various elements of the violence prevention program should be followed until fully implemented. Target dates may be needed to insure that they occur in a timely fashion. Additionally, the working group should continue to evaluate and decide upon any changes necessary to enhance the violence prevention effort. The working group should continue to monitor the changes and the existing elements of the violence prevention program for effectiveness. Finally, the program should be continuously reassessed to insure adequacy of control over probable risk of violent events.

Putting it all together may take a lot of doing, but the peace of mind you will afford your staff, yourselves and the families of health care workers in your organization is well worth it. One day, health care workers will stop feeling that violent events are part of the jobs they do. Likewise, the children of health care workers will be able to stop worrying about their parents when they go to work to help take care of people.[6] ■

Endnotes

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RF Radiation from Wireless Antennas: The Next Black Swan?

As Wireless Industry Boom Continues, Insurers Must Confront Radiation Exposure Risks

by Gloria Vogel, CFA

Gloria Vogel, CFA, is managing director at Vogel Capital Management, a New York-based investment and consulting firm. She is also an adjunct professor at New York University's School of Continuing and Professional Studies, and a contributing author on the website www.seekingalpha.com, where she writes an insurance blog. She spent several years at Swiss Re in investor relations, credit analysis and private equity investments, and was an equity research insurance analyst at several major investment banks, including Lehman Brothers and Bear Stearns.

Third-party worker over-exposure to RF (radiofrequency) radiation from wireless antennas is a risk where the insurance industry remains vulnerable to large losses, but it is an area where the industry has failed to identify and appreciate its potential exposure. While many insurers have telecom carve-outs in place, or policy exclusions and aggregate limits, they remain unaware that they are still exposed through general property liability, workers compensation, or other policies.

Unfortunately, it often takes an event with large insured losses to bring the need for loss prevention into industry focus. In fact, there are many examples of insured losses that could have been prevented with sound policies towards improved safety oversight and better loss control, but the insurance industry is often looking at events retrospectively rather than anticipating potential problems that may lie ahead. Just because a black swan has never been seen doesn't mean that one doesn't exist.

A black swan is a highly improbably event with three principal characteristics:

(1) It is unexpected.

(2) It has major impact.

(3) After the fact, the event is rationalized by hindsight.

Just because there have been few known claims to date for RF radiation exposure from wireless antennas doesn't mean that there won't be hundreds of thousands of them in the future. Indeed, today's workers are unaware that their health issues may be related to their exposure to those wireless antennas. It won't take much to raise their awareness; the first plaintiffs' bar TV campaign will cause a firestorm of litigation across the nation.

This lack of focus on loss prevention by insurers, plus limited public safety oversight by government, is apparent with respect to RF radiation third-party worker over-exposure. Property owners (residential and commercial) that host wireless antenna sites believe that they have no risk exposure based upon assurances from their wireless tenants. But, that simply isn't true. All workers have the right to a safe workplace — including roofers, painters, electricians, HVAC technicians and maintenance personnel, who must service properties

with wireless antennas. Applicable laws and regulations specifically require that employers provide their employees with working conditions that are free of known dangers; that workers receive information and training about hazards; and that workers learn methods to avoid harm.

Today, property owners do not monitor the hazards of RF radiation from wireless antennas. Property owners and their insurers thus have exposure to claims from injured third-party workers on their properties — from those who are regularly put in jeopardy by having to work in close proximity to wireless antenna systems without any means of protection from RF radiation over-exposure.

An important distinction exists between RF exposure from cell phones and RF exposure from wireless antennas. RF emissions from wireless antennas are hundreds of times more powerful than any from hand-held devices. These are two completely separate issues! While the link between cell phones and brain cancer is currently unsupported by scientific or medical evidence, the FCC has identified human exposure limits to RF radiation based on long-standing, peer-reviewed scientific research that establishes a causal link between RF exposures and cognitive injuries: (http://www.ewh.ieee.org/soc/embs/comar/standardsTIS.pdf). Moreover, there is already established legal precedent for claims (AT&T Alascom v. Orchitt).

Escalation in claims will be driven by the ever-increasing proliferation of wireless systems, with more residential and commercial property owners leasing their space to satisfy the "demand for all things wireless." Already, there are more than 500,000 governmental and commercial antenna systems throughout the United States, and that figure is likely to grow substantially as we move from 3G to 4G networks and increased broadband.

The Answer

What's the answer to the wireless RF problem? It is a national RF safety protocol that will ensure all workers have the necessary training, certification, and dynamic site-specific safety information to protect against RF radiation at every wireless transmission site in the nation. Individual insurers need to focus on implementing their own loss control measures to minimize claims from RF radiation over-exposure. This might include working with outside firms to provide safety training and monitoring of RF risk exposure, applying additional exclusions and caps on coverage, or seeking other solutions.

It's time for insurers to act now to refocus attention on additional loss prevention for all high-risk areas. The industry needs to be more proactive in mitigating risk before disaster strikes, rather than being reactive in taking steps afterwards. Identifying risks and controlling losses can add value to policyholders and insurers alike. Accordingly, let's see renewed focus on loss prevention measures so those monumental black swan losses never occur. Let's look at all existing and emerging risks, especially those of RF radiation from third-party worker claims. ■

Exceeding the Speed Limit

by Paul Farrell

Paul Farrell is chief executive officer of SafetyFirst Systems LLC. He joined the company in 1999 as director of marketing. Previously, he spent 13 years in the insurance industry's loss control area in both field and home office staff positions. He has significant technical expertise, not only to the marketing arena but in staff training, as well as the writing skills necessary to create brochures, public relations materials, manuals and articles.

Editor's note: This article first appeared on the "Safety Is My Goal's Blog" on June 6, 2011, and is reprinted with permission.

Sometimes it seems like "exceeding the posted speed limit" doesn't get as much attention as other safety issues like drunk driving or "texting" on a cell phone while driving, but it is just as lethal. According to National Safety Council, "Exceeding the posted speed limit or driving at an unsafe speed was the most common error in fatal accidents." (http://www.nsc.org/safety_road/Driver Safety/Pages/Speeding.aspx)

Speeding is the most commonly cited factor in deaths from collisions where there was some form of "improper driving" assessed by the team investigating and reporting the crash. This is also confirmed in the most recent Large Truck Crash Causation Study by the Federal Motor Carrier Safety Administration (http://www.fmcsa.dot.gov/facts-research/LTCO2009/LTCO2009.aspx): "The top two driver-related factors for large trucks and passenger vehicles in fatal crashes were the same: driving too fast … and failure to keep in proper lane."

Interestingly, only 12% of fatal crashes where speeding was the principal factor occurred on interstate highways — speeding in your home town, going 45 in a 25 zone, etc. were more likely to lead to a fatality than exceeding the limit on a limited access highway. This is likely due to many factors: The relative absence of pedestrians and bicycles on highways; the road design of rural highways and county roads; sharper curves, poor illumination and oncoming traffic that is not separated by a barrier or median strip.

Speed increases the potential of having a crash for two specific reasons:

As a vehicle travels faster, more time is needed to safely complete any turn, swerve or stop. (You need more time.)

Additionally, greater speed significantly reduces the time available to view and judge the situation, and decide what action to take. (You have less time.)

Speeding also raises the chances of severe injuries or death during the crash. The amount of energy that is released at the moment of impact is directly related to your vehicle's speed. Speeding increases the crash energy by the square of the speeds involved. According to the Insurance Institute for Highway Safety (IIHS), "when impact speed increases from 40 to 60 mph (a 50 percent increase), the energy that needs to be managed increases by 125 percent." (http://www.iihs.org/research/qanda/speed_limits.html)

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Exceeding the Speed Limit

Simply put, the faster you go, your injuries will be more extensive and the more likely it becomes that seatbelts, airbags, antilock brakes, traction control systems or other safety devices will not be effective enough to save your life.

There are other consequences to speeding that can affect drivers, too. Most states add extra penalties (points, fines) for speeding violations that are more than 15 miles per hour above the posted limit.

This type of violation (excessive speed) is perceived as a major violation by most employers and insurance carriers and could affect future employment prospects or increases personal insurance costs.

If you need additional information about speeding, this month's Safety First Ten-minute Training Topic covered this in more detail. Also, you can check out NHTSA's tool box on speeding — http://www.trafficsafetymarketing.gov/speed/toolkit/ This offers materials in both English and Spanish and it's a free resource! ■