



the Quill

a quarterly publication on safety & risk management

HEALTH ON THE
ROAD

What's Inside?

- + Stopping safely during an emergency
- + Safety committees: Safety's best resource
- + OSHA Overview: Emergency eye and face wash units





In this issue of The Quill, we continue our “Safety as an operational tool” series with an article focusing on health on the road. Driver wellness is a top concern in the industry. Truck drivers have to overcome the circumstances of their job – sitting for hours at a time, eating on the road, inconsistent sleep patterns, etc. – to lead a healthy

lifestyle. On page 11, you’ll read more about some of the factors involved and how you as an individual and as a fleet can help.

We also provide safety tips for drivers if they find it necessary to stop on the shoulder during an emergency. Too many tragic collisions occur when drivers are struck on the side of the road when trying to pull over or merge back onto the road surface. You’ll find these safety tips on page 5. And our OSHA Overview on page 3 highlights emergency eye and face wash units with important protocols to enforce.

On the back cover, you’ll see Daily Express featured for their safety banquet. We congratulate all their drivers on their accident-free miles accomplishments. We congratulate Daily Express for creating a solid safety culture that truly includes all drivers, maintenance workers, all levels of management and all the individuals that work under their direction.

Finally, we hope to see you all at our annual Claims + Safety Seminar on August 25 and 26. It’s a great time to network with your fellow safety professionals and learn about hot topics in the industry. Learn more and RSVP at www.claimsandsafety.com.

Happy reading and feel free to contact me at 800-644-5501 ext. 2692 or thequill@baldwinandlyons.com if you have any feedback on this issue or thoughts for future articles.

Yours in safety,

Dennis Shinault, CDS
Director of Loss Prevention

2014 Claims + Safety Seminar

Join us August 25 – 26 in Indianapolis for our annual Claims + Safety Seminar. This is your chance to hear from industry experts and network with other safety professionals. New this year, we’ll have a panel discussion about top-of-mind issues.

We will also have two optional events to extend your stay: A visit to the IMMI Center for Advanced Product Evaluation to watch a safety demonstration involving a real truck crash and an OSHA 10-hour General Industry Certification course.

For more information and to RSVP online, please visit www.claimsandsafety.com. The registration deadline is Friday, July 18.

About Baldwin & Lyons

Founded in 1930, Baldwin & Lyons specializes in marketing and underwriting insurance for the transportation industry. Today, we operate three domestic property and casualty insurance companies providing both admitted and excess and surplus lines platforms, a Bermuda-based captive solution, a fully licensed Canadian branch and two brokerage firms. Our companies accept risks covering more than a dozen different specialty products and services and provide brokerage services for virtually any property and casualty risk. We have a vision and plan for growth that is supported by our stability, experience and commitment to innovation. With an intense focus on our mission and strict adherence to our values, Baldwin & Lyons has been able to achieve consistent results for the benefit of all stakeholders.

What does The Quill mean?



The founders of Baldwin & Lyons chose the quill as a symbol to represent their property and casualty insurance company. It was a fitting choice. The quill was the dominant writing instrument for more than 1,000 years, longer than any other; perhaps because of its fine stroke and great flexibility. Likewise, for more than 80 years, Baldwin & Lyons has maintained a stable presence in the property and casualty insurance market and is a recognized leader in the transportation industry. With an intense focus on results, the company has grown and diversified.

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IN CASE YOU MISSED IT Did you know you can view archived issues of *The Quill* online? Visit www.baldwinandlyons.com/the-quill to access the archive. To request additional hard copies of a certain issue, email your name, company and address to thequill@baldwinandlyons.com.

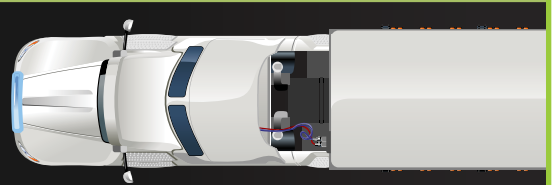


After reading this issue of *The Quill*, we want to hear from you! Do you have a useful resource for educating your drivers that our readers should know about? Are there topics you'd like to see covered in future issues? Send your feedback and ideas to thequill@baldwinandlyons.com.

Emergency eye and face wash units

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STOPPING SAFELY DURING AN EMERGENCY



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HEALTH ON THE ROAD

PAGE 11

Emergency eye and face wash units

Eyewash stations are common in many facilities. The OSHA eyewash regulations are found in 29 CFR 1910.151(c) which states: “Where the eyes or body of any person may be exposed to injurious corrosive materials, suitable facilities for quick drenching or flushing of the eyes and body shall be provided within the work area for immediate emergency use.”

While not having the force of a regulation under the Occupational Safety and Health Act, the current American National Standards Institute (ANSI) standard addressing emergency eyewash and shower equipment (ANSI Z358.1-2004, with changes made in 2009 by the International Safety Equipment Association and approved by ANSI updating the standard to ANSI/ISEA Z358.1-2009) provides for eyewash and shower equipment in appropriate situations when employees are exposed to hazardous materials. ANSI standards become mandatory OSHA standards only when, and if, they are adopted by OSHA (incorporated by reference). OSHA, therefore, refers employers to ANSI/ISEA Z358.1-2009 as a recognized source of guidance for protecting employees who are exposed to injurious corrosive materials.

ANSI’s definition of “hazardous material” includes caustics, as well as additional substances and compounds that have the capability of producing adverse effects on the health and safety of humans. ANSI’s standard also provides detail with respect to the location, installation, nature, and maintenance of eyewash and shower equipment. There is no defined quantity of a chemical that triggers the requirements of 29 CFR 1910.151(c). The determining factor is the possible exposure of an employee to injury from contact that can produce an adverse safety and health effect. But some state administered plans may have specifications so check your state programs as well.

The ANSI Standard in section 7.4.4 states that eyewash facilities are to be located in a position that requires no more than 10 seconds to reach or is no more than 55 feet from the hazard. This distance must be unimpeded and able to navigate to while blind. However, where a strong acid or caustic is used, the unit should be immediately adjacent to the hazard.

The shower/eye wash/face wash must also have stay open valves and be able to be activated in one second or less. It is important that the dispensing heads be clean and sanitary at all times to prevent foreign debris and chemicals from contaminating the exposed area while being drenched. Plumbed units must be inspected weekly and activated to

verify proper operation. This activation helps to verify that the system is working and keeps fresh uncontaminated water in the lines. For gravity-feed units, manufacturer recommendations must be followed for inspection and maintenance intervals. All units must be inspected annually to ensure compliance with ANSI/ISEA Z358.1-2009.

The following requirements also apply:

SHOWERS

1. Plumbed units must have a flow of at least 20 gallons per minute (GPM) at 30 pounds per square inch (PSI)
2. Heads must be positioned 82 – 96” from the floor
3. Spray pattern must have a minimum diameter of 20” at 60” above floor level
4. The center of the spray pattern shall be located at least 16” from the nearest obstruction

GRAVITY-FEED + PLUMBED EYE WASH STATION

1. Units must have a flush rate of .4 gallons per minute (GPM) for 15 minutes for gravity-feed units and plumbed shall have the same rate of flow but also at 30 PSI
2. Heads must be positioned 33 – 45” from the floor
3. Positioned 6” from the wall or nearest obstruction

EYE/FACE WASH STATION:

1. Units must have a flush rate of 3 gallons per minute (GPM) for 15 minutes
2. Heads must be positioned 33 – 45” from the floor
3. Heads must be large enough to cover both the eyes and face or regular size eye wash heads can be used in conjunction with a face-spray ring

Too many times, personal eye wash bottles are found to be a substitute for plumbed or gravity-feed units. Many of these only have approximately 20 ounces of fluid. Because they cannot meet the flow requirements for 15 minutes, they are not a substitute for OSHA compliance. These are simply to provide immediate first aid to provide you time to get the worker to an appropriate eye/face/shower type unit. The 10 second time frame to get to the appropriate unit remains even when using these bottles. As with the gravity-feed units, pay close attention to the expiration date of the bottles and the manufacturer’s instructions. Many times when the safety/sanitary seal is broken, the unused contents must be discarded. ■



REGULATORY GUIDANCE:

Medical regulations

What happens if a driver is not truthful about his/her health history on the medical examination form?

The FMCSA medical certification process is designed to ensure drivers are physically qualified to operate commercial vehicles safely. Each driver is required to complete the Health History section on the first page of the examination report and certify that the responses are complete and true. The driver must also certify that he/she understands that inaccurate, false or misleading information may invalidate the examination and medical examiner's certificate.

FMCSA relies on the medical examiner's clinical judgment to decide whether additional information should be obtained from the driver's treating physician. Deliberate omission or falsification of information may invalidate the examination and any certificate issued based on it. A civil penalty may also be levied against the driver under 49 U.S.C. 521(b)(2)(b), either for making a false statement or for concealing a disqualifying condition.

May a medical examiner restrict a driver's duties?

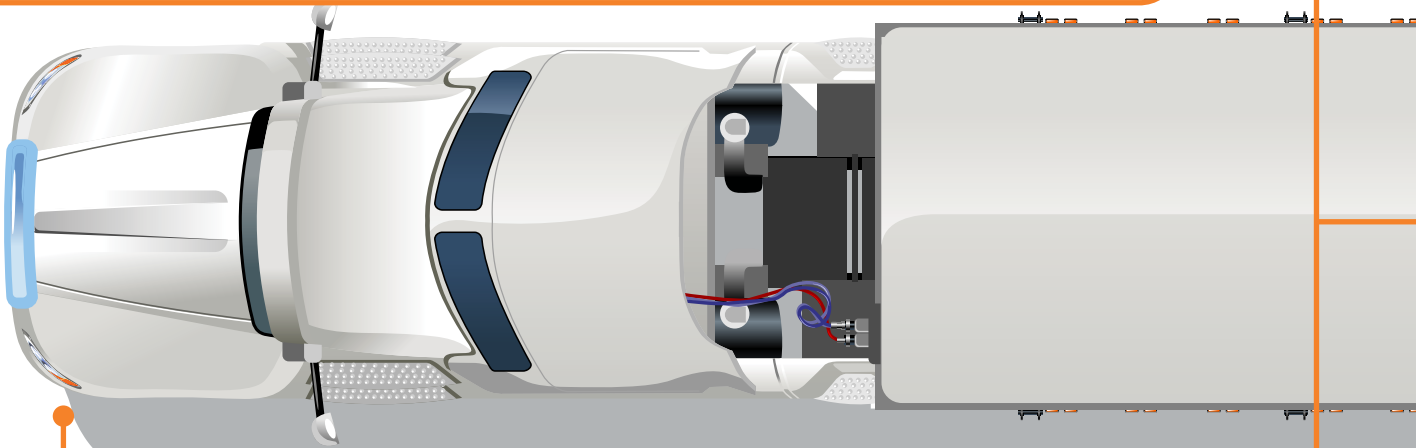
No. The only conditions a medical examiner may impose upon a driver otherwise qualified involve the use of corrective lenses or hearing aids, securement of a waiver or limitation of driving to exempt intracity zones (see §391.43(g)). A medical examiner who believes a driver has a condition not specified in §391.41 that would affect his ability to operate a CMV safely should refuse to sign the examiner's certificate. ■

+ Regulations can change by the day. For the most up to date information, visit [FMCSA.DOT.gov](https://www.fmcsa.dot.gov).

STOPPING SAFELY DURING AN EMERGENCY

1

Pick a point where your vehicle will be visible. The primary factor for determining a stopping location is your safety and the safety of the other motorists. Before selecting your stopping location, scan the area ahead for at least the next mile. If there are challenges such as debris, bridges, construction, other stopped vehicles, curves in the road, hills, soft, slanted, uneven or narrow shoulders, proceed to a safer area if at all possible. Being visible and recognized as a stopped vehicle on the shoulder is critical to your safety as well as the safety of other motorists.



2

Pick your stopping point so that you also have plenty of room in front of you free of any challenges. You will need space to build a safe, legal speed before you merge back onto the roadway.

3

Signal your intentions before, during and after you pull over.

Even if you take all the proper safety precautions when stopping on the side of the road, especially on the highways and interstates, tragic accidents can occur. Sudden breakdowns or an emergency creates a serious driving hazard. Road shoulders should be used for emergency stopping only. The best choice is to continue to the next exit that has a safe and legal area to park. Far too often, especially at night or when the other motorist is ill, fatigued or otherwise distracted, they may inadvertently follow your vehicle off the roadway not knowing you are stopping on the shoulder. **If you must stop on the shoulder, follow these safety precautions at a minimum:**

Place emergency warning devices around the truck as per company policy and Federal Motor Carrier Safety Regulation 392.22.

5

4

Pull your vehicle as far off the roadway as possible. Do not leave any part of your vehicle parked on the travel lane. However, to prevent potential rollover, do not pull onto grassy/dirt areas or other soft/dropping portions of the shoulder. Choose your spot wisely.

6

Regardless if it is day or night, turn on your emergency 4-way flashers immediately.



7

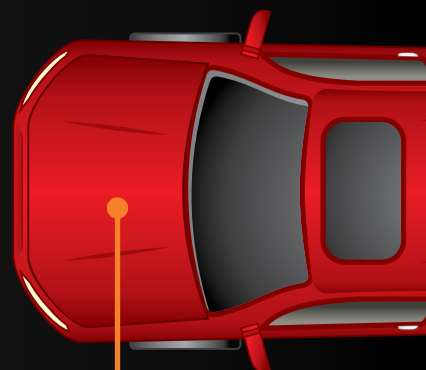
If you must walk around your vehicle, always wear brightly colored/fluorescent and reflective clothing so you may be seen.

8

Call for assistance.

9

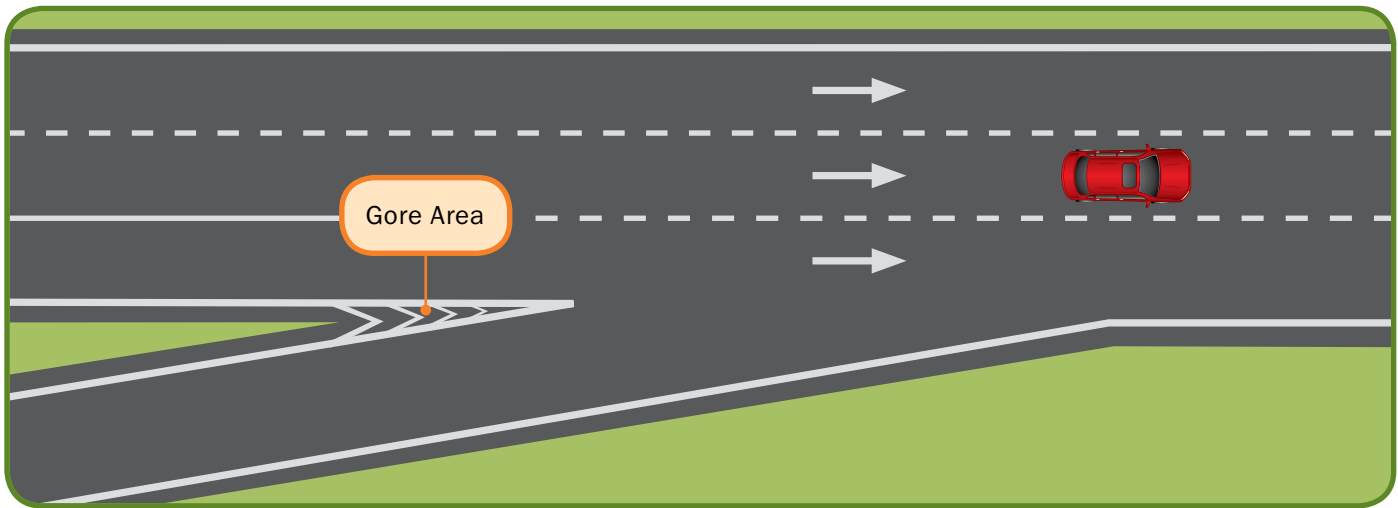
Constantly be aware of approaching traffic so you will not be struck.



continued >>

Never park in the gore area of the roadway

The gore, gore point, or gore area/zone is the triangular piece of land found where roads merge or split. Gores on freeways are frequently marked with stripes or chevrons at both entrance and exit ramps. These stripes help drivers entering the freeway to estimate how much time they have to match the speed of through traffic. Driving in or through the gore area is a violation of traffic laws and is dangerous. The gore area is dangerous to stop/park in because there is typically high speed traffic driving on both sides, thus doubling the potential for a collision. Parking in the gore area is also dangerous to other drivers because your vehicle will greatly reduce their visibility of traffic they need to merge with. Gore areas normally do not provide enough distance to slow down or accelerate when merging back onto the highway.



Before you try to re-enter the traffic flow, please follow these simple life saving steps:

- Scan the area in front of you to observe any conditions that will prevent safe entry back onto the roadway such as other stopped vehicles, hills, debris and bridges that prevent you from building ample merge speed in time.
- Before moving your vehicle, check your mirrors to make sure there is adequate space between you and approaching vehicles.
- Continuously signal your intentions well in advance to alert other motorists.
- Use the shoulder as an acceleration lane before entering the flow of traffic.
- Depending on weather conditions, safely accelerate to the minimum legal speed for the road you are on and continue to build speed quickly and safely once in the travel lane. Count on the traffic you are merging with to be traveling at the posted speed limit. Entering the traffic lane too slowly can cause collisions, especially if oncoming vehicles misjudge your speed and don't brake in time. If others are expected to brake because you are going too slow, you may not have chosen the best option for merging, and the collision will most likely be preventable and chargeable to you.
- Merge onto the travel lane leaving enough space between your vehicle and the others to prevent a collision.
- Never pull immediately back into the travel lane from a dead stop. We have all seen this happen. As with any lane change or merging maneuver, if you strike another vehicle, or are rear-ended by another vehicle as you reenter the travel lane, the collision will be deemed preventable on your part.

Even if you follow all safety precautions during an emergency roadside stop and a collision occurs, you can individually be held legally responsible. ■

AROUND THE CLOCK CLAIMS CARE

CorVel offers a nurse triage call center for all of your employees, 24 hours a day, 7 days a week.

At the time of a non-life threatening or serious injury, employees can call and speak with a registered nurse who will evaluate the nature of the incident or injury and determine the employee's immediate medical needs.

The call a nurse program provides an outlet for your injured employees to get information about their condition prior to filing a claim. The nurse may be able to provide your employee with simple ways to take care of the issue on their own and potentially avoid the filing of a claim. If the nurse feels the employee needs to see a doctor and file a claim, they can direct the employee to an in-network provider so that you as the employer can benefit from in-network cost savings. Early intervention from an independent reliable source has proven to be very beneficial to employees and employers alike.

SERVICES:

- Immediate intervention and evaluation to determine if medical treatment is required or if first aid is sufficient
- Nurses are all specialized in occupational injuries
- Nationwide 24/7 intake and follow-up with the employee 24 hours later
- Timely communication with all interested parties

FEATURES OF THIS SERVICE INCLUDE:

- Channeling to preferred network providers if medical treatment is recommended
- Nurses receive comprehensive information regarding the incident
- Nurses provide healthcare advocacy for the injured worker
- Bilingual capabilities as well as translators available if needed
- Workplace posters/wallet cards with a toll free call center number

THE BENEFITS FOR EMPLOYERS ARE:

- Employees who require medical care are channeled to the appropriate level of care, such as an occupational medicine clinic or urgent care center rather than an emergency room. Some injuries may only require first aid on site. The nurse contacts providers to alert them to expect the employee.
- Nurse follow-up with the injured worker after 24 hours to confirm that the recommended course of action was appropriate or to make further recommendations, if necessary
- Consistent data reporting and analysis
- Can reduce claim costs and reported claims by appropriate treatment and timely return to work

Each employer location is set up in CorVel's system to provide for detailed reporting. During the implementation process, CorVel works with the employer to set communication protocols, determine any specific provider preferences and identify if modified duty is available and if drug screens are required.

CorVel's staff of registered nurses is licensed in all 50 states and advocates timely return to work with quality care for your employees. Our nurses use nationally recognized triage protocols with industry standards to facilitate appropriate treatment options.

**FOR MORE INFORMATION ABOUT THIS PROGRAM, CONTACT
KATHY NORTON AT KATHY_NORTON@CORVEL.COM**



SAFETY COMMITTEES:

There are a few key elements to establishing a true safety culture in your company.

1

First and foremost, safety should be a personal value for everyone in the company and it should begin at the top.

2

Operations management, which consists of all management at the terminal and corporate levels alike, should have ownership in the safety process and be completely involved by participating in and fully supporting the safety program.

3

The third key factor which is often left out of the safety formula is an empowered and engaged Safety Committee.

Safety Committees serve many purposes other than having regular meetings. They are important in reviewing safety concerns brought by workers and customers. Safety activities should incorporate individuals from the committee who can provide more insight into the job being performed and how it can be done safely. Regular facility inspections, including equipment, are necessary to ensure workplace hazards do not exist and equipment operates safely. Safety Committees can be assigned responsibilities as part of the inspection process and encouraged to report unsafe conditions.

The structure of a Safety Committee is nearly as important as the day-to-day functions it performs. Each work group/area should be represented in order to have critical input from all operations when items are discussed. The individuals who represent a work group/area can take the message to their peers/workers in a way which makes sense to that particular operation. An example of a well-rounded committee would include: operations, human resources, dispatch, finance, facility maintenance, vehicle maintenance and, of course, the safety department. Safety Committee members should be selected on the basis of their ability to demonstrate safe working habits, their willingness to participate in the process, and availability to perform tasks necessary within their work group.

Not all companies can have an identical setup of a Safety Committee. For small to medium size companies (i.e. between 5 – 200 workers), roughly 10 percent of the work group should be represented in the Safety Committee.

AN EXAMPLE OF A WELL-ROUNDED SAFETY COMMITTEE



For larger companies (i.e. more than 200 workers), a representative for each work area would be the minimum. In addition, within each department or work area, a subcommittee can be formed to address concerns

SAFETY'S BEST RESOURCE

specific to that group. The representative(s) from that subcommittee can then bring those concerns to the main Safety Committee. In this way, concerns and activities from all work groups can be addressed in the same forum. Workers should know who the representative from their group is and should feel comfortable to bring safety concerns to the attention of the committee. Management should always be present to ensure the committee stays on-task and the meetings do not turn into a complaint session between departments.

In order to maintain a common focus, many companies provide some basic training to committee members to streamline their activities. First, members should have a basic understanding of the company safety program in terms of what is and is not acceptable. There should also be information available to determine root causes for all types of losses encountered. Members can be part of a review team after an accident or injury to determine what preventative actions can be taken with the work group after such a loss. Various activities should be developed by committee members to impact the root cause and prevent a similar incident from occurring.

In order to maintain a common focus, members should have a basic understanding of the company safety program in terms of what is and is not acceptable.

Another best practice is to train members on how to conduct behavior-based observations which focus on the most common and severe root causes from the injury/accident trend analysis. These observations should not include discipline, but can include mentoring opportunities based on acceptable behaviors within the company. Giving the committee members knowledge of

basic principles will empower them to make a difference in the reduction of unsafe conditions or behaviors, and improve the overall safety culture in the organization.

There should be regular meetings of a Safety Committee to maintain communication between departments and continually keep safety at the forefront of all work functions. The best practice would be to meet monthly (or at least quarterly) to discuss issues such as:

- accident/injury review
- audits
- volume increase/decrease
- areas of concern deemed appropriate for discussion
- follow-up on abatement of regular facility or equipment inspection items
- assignment of injury/accident prevention activities for each group
- safety concerns brought by any worker or the general public
- hazard remediation

More regular or unscheduled meetings should occur when a condition warrants it. The committee can also be an extension of the normal communication between departments and operations managers to ensure that safety is first in everything done within your organization.

The committee should be one of the most influential resources in your company. Participation from all work areas, support from the management team, regular meetings, engagement in the safety process, and empowerment to make necessary changes are all keys to the success of the Safety Committee and the overall safety culture where you work. ■

SAFETY AS AN OPERATIONAL TOOL: HEALTH ON THE ROAD

This is the third of four articles presenting best practices safety managers can promote to produce both measurable operational improvements, and increased driver and fleet safety. In this article, we present the health challenges drivers face and steps they can take to improve their health.

THE HEALTH CHALLENGE FOR DRIVERS

Anyone who has driven a large commercial motor vehicle knows it can be difficult, stressful and exhausting work. Now there is also evidence that many drivers face major health risks as well.

In January 2014, the National Institute of Occupational Safety and Health released a study of long-haul drivers which compares their health characteristics to those of the general population of U.S. workers. In addition to the individual problems described in the table, 88 percent of all respondents reported experiencing at least one of the three risk factors: hypertension, smoking or obesity, compared to 54 percent of general workers.

HEALTH CHARACTERISTIC	LONG-HAUL DRIVERS	ALL WORKERS
OBESITY (BMI >30)	68.9%	30.5%
DIABETES	14.4%	6.8%
CURRENT CIGARETTE SMOKER	50.7%	18.9%
DELAYED OR NO HEALTH CARE IN PRIOR 12 MONTHS	18.3%	9.7%
HYPERTENSION	26.3%	24.1%
PERCEIVED HEALTH (EXCELLENT, VERY GOOD OR GOOD)	83.5%	93.9%
NOT RECEIVED FLU SHOT IN PRIOR 12 MONTHS	80%	67%

SEVEN STEPS TO HEALTH ON THE ROAD

1 SLEEP RIGHT



Healthy people sleep in deep sleep cycles of 75 to 90 minutes, known as circadian cycles. During each, the brain releases chemicals that enable deep sleep at the start and clears them at the end. Being awakened in the middle of a cycle produces a feeling of being drugged.

Adults typically need a minimum of four cycles to refresh their mental acuity and become physically restored. Changing sleep schedules often results in difficulty falling asleep and reduced sleep quality. It takes several days to recover from a major change and one or two days to recover from insufficient sleep, known as “sleep debt.” Drivers should not change their sleep behaviors during their off-duty days or they will experience jet lag symptoms.

The low point of alertness is 12 hours from the middle of the prior sleep period. If a person sleeps from 10 p.m. to 6 a.m., they’ll experience a drowsy period at 2 p.m. the next afternoon. This is the best time for a nap, however it should be no more than 15 minutes or deep sleep chemicals will be released. A 15 minute nap produces four hours of increased alertness.

2 SLEEP APNEA SCREENINGS

Obstructive sleep apnea is the most common form of sleep apnea, a condition where an airway blockage occurs during sleep causing choking and reduced oxygen intake. The most common treatment is a continuous positive airway pressure (CPAP) machine that uses forced air to keep a sleeping person’s airway open.

3 CONTROL WHAT YOU EAT AND DRINK



All foods contain calories, vitamins and other nutrients that affect our weight, energy level, alertness levels and sleep quality. An ideal diet provides the correct number of calories to maintain body weight and enable good health. Drivers should count calories to make sure they’re not consuming more calories than they are burning.

Foods high in refined sugars are stored as body fat if not burned shortly after being consumed. Great snack foods include raw or roasted nuts, bananas, fruits and vegetables.

Rice and beans help build protein and are converted to sugar slower than high starch foods like potatoes. Baked chicken or turkey is high in protein and low in fat.

Stimulants like caffeine can boost alertness but also increase blood pressure, so they should be used moderately and not within four hours of sleeping. Foods high in calcium contribute to relaxation whereas foods high in sugar produce instant energy.

The low point of alertness is 12 hours from the middle of the prior sleep period. If a person sleeps from 10 p.m. to 6 a.m., they’ll experience a drowsy period at 2 p.m. the next afternoon. This is the best time for a nap, however it should be no more than 15 minutes or deep sleep chemicals will be released.

4

EXERCISE FREQUENTLY



Physical activity is critically important to maintain good health, especially for drivers who sit for long periods each day. Sitting causes blood to pool in legs and ankles and increases heart stress. Drivers should treat all stops as exercise opportunities. They should use their inspection periods to walk around their vehicles, not just to improve the thoroughness of their inspections, but because the exertion is good for them. Some fleets provide pedometers for drivers to track their activity each day. Three miles (5,000 steps) is a typical daily target for adults. Many smartphone apps link with activity monitors and help users manage their weight, eating habits, sleeping patterns and exercise levels.

5

STAY MENTALLY ACTIVE



Recent studies have shown mental activity has a positive effect on long-term health and longevity. All drivers have opportunities to be mentally active both when they are on or off duty, whether it involves memorization exercises, solving puzzles or reading. Solving problems causes the brain to release chemicals that produce mild euphoria, reduce muscle tension and lower blood pressure. Drivers should be encouraged to find a mental exercise which is fun or satisfying so it will become habitual.

6

STOP SMOKING



Nothing good comes from smoking or using tobacco products in any form as far as long-term health is concerned. Tobacco products, whether smoked or chewed, are associated with many forms of cancers and produce other negative side effects such as suppressing antioxidants. Tobacco contains nicotine, which is a strong stimulant and addictive, particularly when consumption begins in adolescence. Using nicotine patches and other substitutes are healthier than smoking or chewing, but still perpetuate the addiction.

7

JOIN WELLNESS PROGRAMS



Many progressive trucking companies provide driver wellness programs to encourage their drivers to lead healthier lifestyles. Programs may include reaching weight targets with interim milestone awards, company-sponsored exercise programs, sleep apnea screening and treatment, smoking cessation and general wellness education.

THE BOTTOM LINE

Health is personal. Trucking companies that invest in the improved health of their drivers through education, training and wellness programs are likely to reduce medical insurance costs and lost work days and improve driver turnover rates. Each of these attributes is easily measured and produce both real-life benefits for the drivers and cost savings to the fleet.



SUBROGATION DEPARTMENT

Technically speaking, subrogation is the assumption by a third party of another's legal right to collect a debt or damages. In other words, subrogation is the process of recovering money that Baldwin & Lyons has paid to an insured on a claim where there is an at-fault party. Payments may come directly from the at-fault party or their insurance carrier.

Our Subrogation Department attempts to be as aggressive as possible in recovering money paid on claims. Both the facts of loss and the venue, because of comparative negligence, are major determining factors that are taken into consideration when deciding if subrogation efforts should be taken on a claim. All new claims and referrals from other units in the Claims Department are reviewed for subrogation potential. If we feel there is even the slightest chance of recovering any money paid, we will establish a subrogation diary in order to investigate the possibility of recovery in more detail.

Information that is important to gather or items to consider include:

- Was someone other than our insured responsible or at-fault for our insured's loss, either totally or in part?
- Who is the at-fault party?
- What is the at-fault party's contact information?
- Is the at-fault party insured?
- Where exactly did the claim occur?
- Are there any witnesses?

SUBROGATION SUCCESS STORY

A truck driver in New Mexico rear-ended another vehicle, fatally injuring its two occupants. From the initial report of loss, this claim did not appear to be a viable candidate for subrogation. However, because this loss occurred in a pure comparative state, a subrogation diary was established and the ensuing investigation showed that the claimant vehicle was stopped on an interstate at night with no lights on. The claimant's insurance carrier denied liability and we pursued subrogation through arbitration and **were awarded 50 percent of our damages for a total of \$12,214.**

MEET & GREET



Elsy Mitchener

Subrogation Examiner

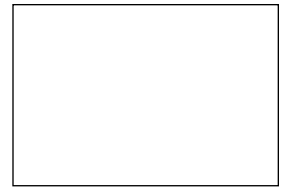
Time with Baldwin & Lyons:
5 years

Professional background:

I previously worked at Nationwide Insurance as a claims adjuster and also have experience as an insurance agent. I have a Bachelor of Arts in Organizational Leadership and Supervision from Purdue University.

Subrogation philosophy:

I enjoy working with workers' compensation and physical damage claims subrogation to identify the third party involved. Subrogation is a very important last step in our claims resolution process and an important aspect of our business. The successful recovery of money we have paid on claims allow us to pass the savings to our insureds and keep their insurance rates down.



Daily Express honors safe drivers

Earlier this year, Daily Express, Inc. of Carlisle, Pa., held its 47th annual Safety Awards Banquet. To make it more fun, they used a Mardi Gras theme. Awards were presented to 200 Daily Express contractors and drivers for operating 12 consecutive months without involvement in a preventable accident.

Contractor Andy Seipel was honored with a 42-year safe driving award. In addition, Paul Dauk was honored as the Contractor of the Year and Howard Reynolds was recognized as Company Driver of the Year.

Whitey Bingaman, Wayne Graham, Nick Hartman, Jerome Mortimer, Arnie Rosenthal, Greg Ryan and Paul Wickard were inducted into the Million Mile Club for driving accident-free at Daily Express for one million miles. The following contractors were recognized for reaching the exceptional milestone of driving two million miles without being involved in a preventable accident:



- | | | | |
|-------------------|------------------|-------------------|-----------------|
| • Barry Beale | • Lynn Daugherty | • Dave Line | • Frank Peacock |
| • Brian Carlson | • Bill Ehret | • Fran Linnabary | • Bill Russell |
| • George Chilcote | • Larry Hamman | • Ron Martin | • Andy Seipel |
| • Earl Clark | • Bob Janicki | • Jack Moore | • Elmer Weidman |
| • Jay Confer | • Harry Knox | • Nehemiah Norris | • Lenny Yocum |
| • Al Corneby | • K W Lewis | • Dick Parsons | |

Coordinator Chuck McGlade and his special equipment fleet were presented a plaque for winning the 2012/2013 Winter Safety Challenge.



Daily Express follows the official rules of the American Trucking Associations governing the issuance of safety awards. Baldwin & Lyons congratulates these drivers and all workers at Daily Express on their commitment to safety.