

The State of Safety

A State-by-State Report







About the National Safety Council

The National Safety Council (nsc.org) is a nonprofit organization whose mission is to eliminate preventable deaths at work, in homes and communities, and on the road through leadership, research, education and advocacy. Founded in 1913 and chartered by Congress, NSC advances this mission by partnering with businesses, government agencies, elected officials and the public in areas where we can make the most impact.

Welcome

At the National Safety Council, saving lives is our focus. Despite living in an era of unprecedented access to data and analytics, safety remains hard to quantify. We know things that are not measured cannot be improved. We are on a mission to eliminate preventable deaths in our lifetime. However, that goal will remain elusive, unless we can figure out how to measure safety in every area of our life.

We know where people are dying, and where we face the greatest risk. Municipalities, employers, and individuals can help us eliminate the loss of more than 140,000 lives every year due to preventable deaths.

This report helps us quantify the state conditions for safety based not on the number of lives lost, but on the specific policies and laws that ensure the safety of citizens within their borders. It provides us a snapshot in time as well as lessons that can be shared, so that policymakers can make the safest decisions possible.

Keeping people safe is not a partisan issue. I hope these findings will identify opportunities to improve safety on our roads, in our homes and communities, and in our workplaces. Going forward, many more states may earn a top grade, and most importantly, make preventable deaths a thing of the past.

Deborah A.P. Hersman President & CEO National Safety Council

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Executive Brief

Preventable deaths in the United States are at an all-time high. There are 40.6 million serious, preventable injuries and over 146,000 fatalities each year, with more than half occurring at home. Preventable injuries cost society more than \$850 billion each year, not to mention human costs which cannot be quantified. Most Americans worry more about headlinegrabbing tragedies rather than common, everyday events like car crashes, falls and prescription drug overdoses that take hundreds of lives each day.

The NSC mission is to eliminate preventable deaths at work, in homes and communities, and on the road through leadership, research, education and advocacy. Examining state actions and policies is a critical part of curtailing preventable deaths and injury. The State of Safety provides a bird's eye view of where states are on safety-related actions and policies that can remedy preventable deaths and injuries across our roadways, home and communities, and workplaces.

The State of Safety also outlines recommended policy actions and examples of promising practices that can help states save lives. It provides a holistic overview of the effectiveness and viability of state actions and programs that can reduce risk, while identifying gaps in each state's safety culture that may lead to more injuries and deaths if left unaddressed.

We know that the state of safety is perilous – no state received an overall "A" on safety. Twenty-six states received either a "D" or "F" for safety overall. Much more can be done at the state level to create conditions for safe practices to take root; enact and enforce life saving legislation; and encourage agencies, employers and citizens to make safe decisions that affect us all.

Recent increases in preventable fatalities across the nation are alarming. Of particular concern is how poorly states are doing in our homes and communities, where nearly threequarters of all preventable deaths and injuries occur. Only Maryland received an "A" in this category and just three states – California, Connecticut and New Mexico – received a "B." States can do more to combat prescription drug overdoses, improve fire safety and prevent drownings. On road safety, states did seemingly better, with eight states receiving an "A," however efforts to address seat belt use enforcement, distracted driving, child passenger safety, and teen driving safety issues are lacking.

In workplace safety, Illinois and Washington state received "A" grades, but even top states are overlooking opportunities to safeguard workers. Only three states were rated "On Track" for overall worker health and wellness. Many gaps remain across the board, and the unfortunate reality is that people will continue to die and get hurt unless states act.

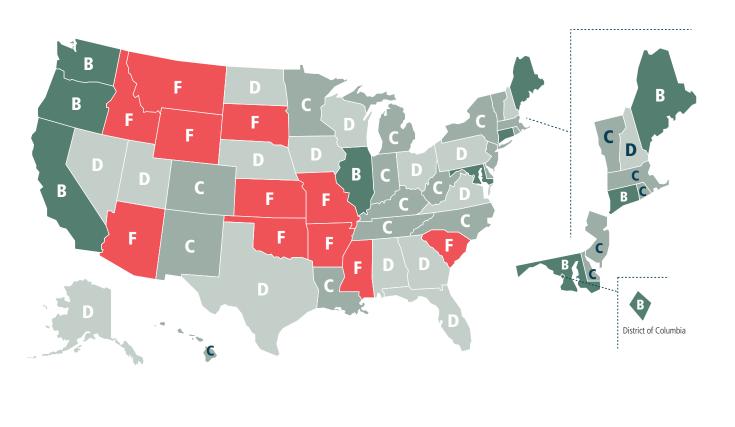
States are often ranked on the number of fatalities within their borders. The numbers alone are unable to answer the most important question: How can these deaths be prevented?

This report seeks to answer this question, and provides a way to highlight and eliminate dangerous gaps. It is a starting point for states willing to take the lead on safety. By identifying leading indicators, state policymakers can do more to ensure that we can all live in a world where we can safely work, play and travel. Zero preventable deaths is the only acceptable goal and we hope you will join us in making zero a reality.



THE STATE OF SAFETY OVERALL GRADE MAP

STATE GRADES IN RANK ORDER



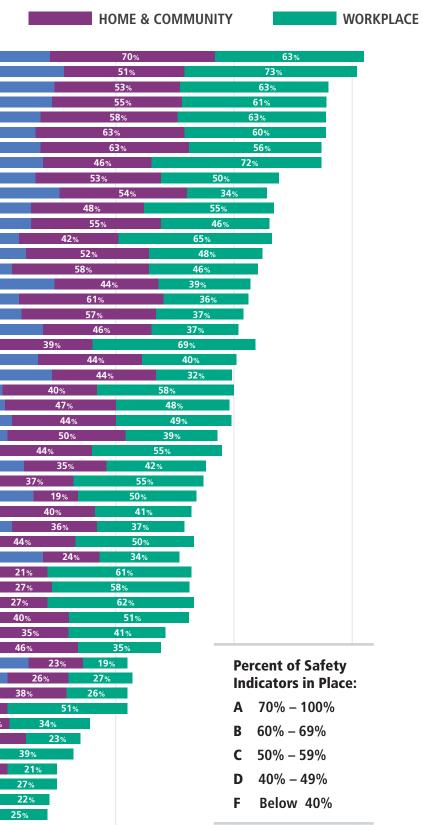
| Α | В | С | D | F |
|------------|----------------------|----------------|---------------|----------------|
| No state | 8 STATES: | 17 STATES: | 15 STATES: | 11 STATES: |
| received | California | Colorado | Alabama | Arkansas |
| an overall | Connecticut | Delaware | Alaska | Arizona |
| "A" grade | District of Columbia | Hawaii | Florida | Idaho |
| | Illinois | Indiana | Georgia | Kansas |
| | Maine | Kentucky | lowa | Mississippi |
| | Maryland | Louisiana | Nebraska | Missouri |
| | Oregon | Massachusetts | Nevada | Montana |
| | Washington | Michigan | New Hampshire | Oklahoma |
| | | Minnesota | North Dakota | South Carolina |
| | | New Jersey | Ohio | South Dakota |
| | | New Mexico | Pennsylvania | Wyoming |
| | | New York | Texas | |
| | | North Carolina | Utah | |
| | | Rhode Island | Virginia | |
| | | Tennessee | Wisconsin | |
| | | Vermont | | |

West Virginia

| | OVERALL | OVERALL | ROADS | I |
|----------------------|---------|----------|------------|-------------|
| Maguland | GRADE | % | 77.4 | |
| Maryland Illinois | B B | 69 68 | 72% 78% | |
| District of Columbia | B | 68 64 | | |
| Maine | B | 63 | 74% 73% | |
| Oregon | B | 63 | 68% | |
| Connecticut | B | 63 | 66% | |
| California | B | 63 | 68% | |
| Washington | B | 62 | 69% | |
| Hawaii | C | 57 | 66% | |
| Louisiana | c | 57 | 76% | |
| Kentucky | C | 56 | 64% | |
| New Jersey | C | 56 | 64% | |
| Minnesota | C | 55 | <u> </u> | |
| North Carolina | C | 54 | 62% | |
| Massachusetts | C | 54 | 56% | |
| Delaware | C | 54 | 74% | |
| New Mexico | C | 53 | 59% | |
| Rhode Island | C | 52 | 60% | |
| Indiana | C | 52 | 69% | |
| Colorado | C | 52 | 51% | |
| Tennessee | C | 52 | 67% | |
| West Virginia | С | 52 | 73% | |
| New York | С | 50 | 52% | |
| Michigan | С | 50 | 53% | |
| Vermont | С | 50 | 56% | |
| Texas | D | 48 | 54% | |
| Pennsylvania | D | 48 | 46% | |
| Wisconsin | D | 47 | 61% | |
| Virginia | D | 45 | 45% | 3 |
| Utah | D | 45 | 65% | |
| North Dakota | D | 44 | 51% | |
| Alabama | D | 44 | 56% | |
| Nevada | D | 44 | 39% | 44% |
| Georgia | D | 44 | 69% | |
| New Hampshire | D | 43 | 50% | 21% |
| Nebraska | D | 43 | 46% | 27 % |
| Alaska | D | 43 | 44% | 27% |
| Ohio | D | 43 | 40% | 40% |
| Iowa | D | 41 | 45% | 35 |
| Florida | D | 40 | 38% | 46% |
| Kansas | F | 37 | 63% | |
| Oklahoma | F | 37 | 54% | |
| Arkansas | F | 36 | 41% | 38% |
| Arizona | F | 34 | 30% 24% | |
| South Carolina | F | 30 | 40% 15% | |
| South Dakota | F | 28 | 23% 39% | |
| Montana | F | 26 | 11% 32% | 39 |
| Wyoming | F | 25 | 33% 21% | 2 |
| Mississippi | F | 25 | 34% 14% | 279 |
| Idaho | F | 25 | 33% 17% | 229 |
| Missouri | F | 24 | 29% 17% | 25% |
| | | | | |

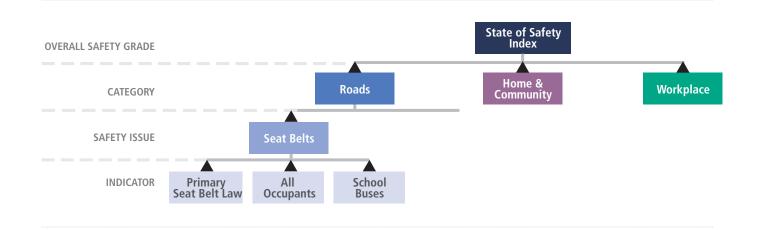
State rank order was determined by the overall score, and may not match the total percentages of the scores for each section. For state specific information on safety indicators, please visit nsc.org/stateofsafety to download your state's grade report.





Methodology

The State of Safety report represents a hierarchical structure in which similar safety-related indicators are grouped into sub-categories, categories, and further into an overall index as shown below.



The State of Safety report framework consists of three sections that collectively reflect key spheres of human activity, preventable injuries and deaths, and NSC strategic priorities:

- 1. Road Safety
- 2. Home and Community Safety
- 3. Workplace Safety

Each section comprises of sub-category safety issues pertaining either to etiological mechanisms of injury (e.g., fall, poisoning, fire), risk or protective factors (e.g., distracted driving, seat belt use), vulnerable populations (e.g., older drivers, child passengers), or domains of legislative action (e.g., health promotion in the workplace). Six Home and Community sub-categories, eight Road safety sub-categories and three Workplace sub-categories are included.

Finally, each safety issue was represented by a set of indicators identified by NSC subject matter experts as specific programs, policies or practices that can impact safety within each of the 50 states and the District of Columbia.

The final selection of indicators was contingent upon the availability of state-level data from trustworthy public entities, including nonprofit organizations, associations, state government agencies and the U.S. federal government (see reference section for complete list of referenced data sources), as well as good practices over which state governments have some degree of control, and that have an influence on overall safety and a reduction of preventable death and injury. A total of 62 indicators are included in the State of Safety report. Every attempt was made to provide the most recent data available.

All indicators for each of the safety issues were summed up to determine sub-category grades: **On Track**, **Developing** and **Off Track**. Since the number of indicators per sub-category varied, the cut-off points used to calculate the grades varied as well. For example, for sub-categories with three indicators, states with all three indicators in place received a grade of On Track, with two indicators – Developing, and with fewer than two indicators in place – Off Track.

All indicators were also assigned a weight on a scale of one to five, based on the perceived level of impact of the state action in preventing adverse safety and health outcomes. A group of 367 industry-wide professionals rated the indicators in the Home and Community, Road, and Workplace on a five-point scale from one (low impact) to five (high impact). These indicator weights are identified on each issue page of the report.

Whenever possible, NSC consulted and surveyed experts at the state and federal level, across industries, and nationwide to ensure consensus around the potential impact of any given indicator. In the final analysis, indicator weights were converted into percentage values based on the respective sum of indicator weights within each sub-category. Sub-category safety issues were weighted by the expert panels, all weights adding up to a total of 100 points for each section of the report. The table below specifies how all safety issues were weighted:

ROAD SAFETY ISSUES

| Alcohol Impaired Driving: 16% |
|---|
| Child Passengers: 16% |
| Distracted Driving: 20% |
| Older Drivers: 8% |
| Seat Belts: 13% |
| Speeding: 9% |
| Teen Drivers: 12% |
| Vulnerable Road Users: 6% |
| Total: 100% |
| HOME AND COMMUNITY SAFETY ISSUES |
| Drownings: 14% |
| Firearms: 20% |
| Home Fires: 17% |
| Older Adults Falls: 16% |
| Poisonings: 19% |
| Youth Sports-Related Concussions: 14% |
| Total: 100% |
| WORKPLACE SAFETY ISSUES |
| Prevention, Preparedness and Enforcement: 50% |
| Workers' Compensation: 25% |
| <u>.</u> |

Total: 100%

The three sections – Road Safety, Home and Community Safety, and Workplace Safety – were all weighted equally. States received a letter grade as well as a rank between one and 51 for each section as well as the overall index. States were ranked based on how close they came to a maximum possible weighted score of having all the indicators in place. The percentage values, rounded to the nearest tenth of a percent, indicate states' relative positions. Tied scores received a value equal to the highest position in a sequence. Based on these percentage values, the letter grades for each category and the overall index were assigned as follows:

- A 70% 100%
 B 60% 69%
 C 50% 59%
 D 40% 49%
- F Below 40%

Three states were affected by missing data for indicators in the Workers' Compensation sub-category. In this case, sub-category grades were not assigned. Overall, missing data accounted for less than 0.2% of the total data points included in the State of Safety report.

Disclaimer: This report is a communication tool intended to identify best practices and state-level recommendations. This report is not an exhaustive scientific study on these critical focus areas or ways to address them. We recognize the following limitations.

First, the strategic priorities and critical safety issues identified are not exhaustive nor representative of all safety problems within a state. Indicators were selected based on availability of state-level data and, therefore, do not include all of best practice policy or legislative actions. In order to be able to compare state rankings, indicators were selected only if comparable data was available. NSC was careful to only grade states on indicators for which comparable data was available and actions were being taken at the state level. No single indicator should be considered a proxy for how well any given state is performing on safety. However, in aggregate NSC believes these indicators are ones against which the improvement can be measured.

Although several other indicators were initially considered for inclusion, they were ultimately excluded due to data availability and validity concerns. Some areas like emergency response or drowsy driving, did not have significant statewide action that could be captured for grading. Emerging issues are highlighted, as well as best practice actions taken at the local or municipal level.

In some instances, state legislation may have been enacted, or other policy actions taken, prior to the publication of this report that may not have been captured in this report grading. NSC made every effort to use the latest available data and noted the date of data sources for each indicator or safety issue as appropriate.



Road Safety

40,200 fatalities 2016 estimate

After dropping steadily for decades, we are in the midst of the deadliest spike in roadway fatalities in 50 years.

An estimated 40,200 people died on our nation's roads in 2016, making motor vehicle crashes the second leading cause of unintentional death in the United States. Road fatalities are also the leading cause of death in 16 states according to 2015 data.¹ These deaths are primarily driven by distraction, speed and alcohol, and are entirely preventable.

Making the nation's roadways safer calls for a variety of approaches that recognize how the vehicle, the driver, passengers and the roadway itself all play a role in safety.

States have a major role to play in ensuring safe roads. Traffic laws, when visibly enforced, are very effective at promoting safe practices, even though driver behaviors overall are difficult to change. A comprehensive road safety approach that integrates laws, enforcement and driver education can shift culture over time so safety becomes the norm, and safe behaviors become customary.

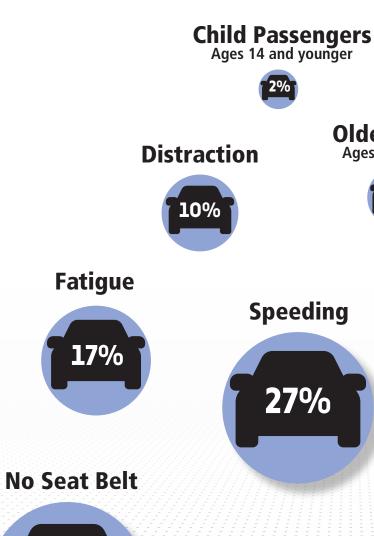
| TOP 5 STATES FOR ROAD SAFETY | BOTTOM 5 STATES FOR ROAD SAFETY |
|------------------------------------|---------------------------------------|
| Illinois | Wyoming |
| Louisiana | Arizona |
| District of Columbia | Missouri |
| Delaware | South Dakota |
| Maine | Montana |

In this report, states are graded on policy and legislation pertaining to 24 different indicators across eight safety issues: alcohol impaired driving, child passenger safety, distracted driving, older drivers, seat belt use, speeding, teen drivers and vulnerable road users.

EMERGING ISSUE: FATIGUE

Drowsy or fatigued driving is an issue that requires improved crash reporting. Driving without adequate sleep has been equated to impaired driving in terms of increased risk and reaction time and decreased self-regulation.² Currently only New Jersey and Arizona have laws pertaining to drowsy driving. The National Transportation Safety Board added human fatigue to its 2016 list of most wanted transportation safety improvements.













Teen Drivers



Alcohol





Vulnerable

Road Users

based on 35,092 roadway deaths in 2015 and do not add up to

Alcohol Impaired Driving

Drunk driving (.08 BAC) crashes account for about 10,000 traffic fatalities each year – approximately one-third of all roadway **deaths**.¹ Drivers lose certain faculties critical to safe driving at alcohol concentrations as low as .01. Impairment truly begins with the first drink.³

Although most drivers know that drunk driving is a serious safety threat, 10% of drivers report they got behind the wheel in the last three months despite feeling too impaired to drive. Of those drivers, 48% said they drove unsafely or dozed off, and 47% reported nearly being involved in a crash.⁴

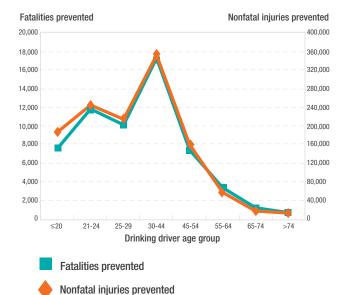
INDICATORS FOR STATE STATUS

Indicators listed in order of impact. Weight on scale of 1-5 shown in parentheses below.

- State sobriety checkpoint program (5)
- Ignition interlock required for all first-time and repeat DUI offenders (5)
- Administrative 90+ day license revocation for drivers who test above .08 or refuse test (4)
- Ban on open containers for drivers and passengers (3)

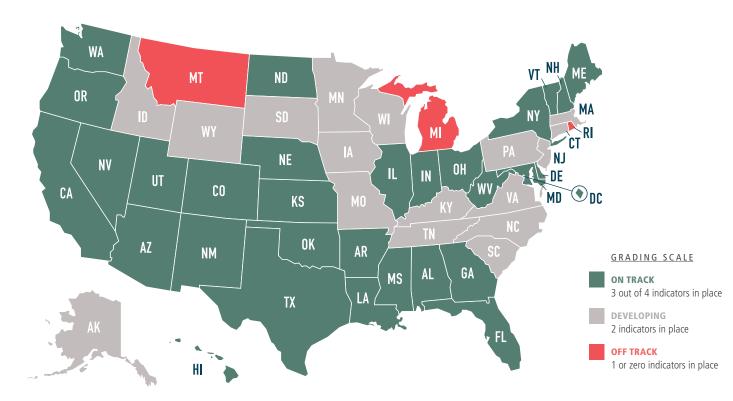


15-year estimated fatalities and injuries prevented through installation of alcohol interlocks in all new vehicles by drinking driver age group, United States⁵





Source: American Journal of Public Health



Child Passengers

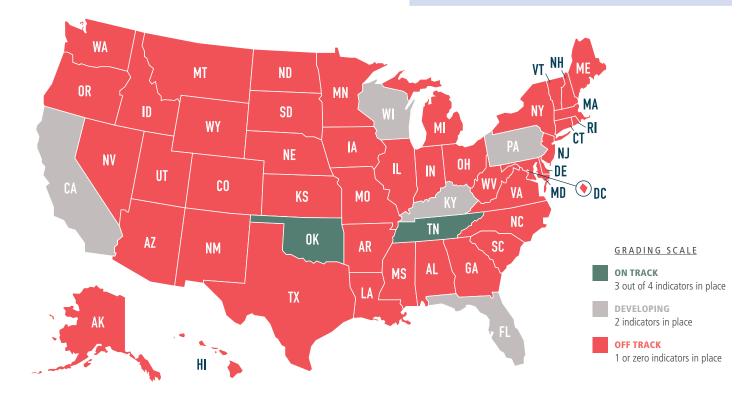
An average of three children younger than 12 are killed in traffic crashes every day.¹ One-third are not buckled up, despite requirements in all 50 states for restraining infants and children in car seats, booster seats, and seat belts.⁶ Child safety seat legislation varies from state to state based on a child's age, weight and height.

In the event of a crash, infants younger than 1 are 71% more likely to survive in properly installed car seats. Toddlers under age 4 are 54% more likely to survive.⁷ Despite the availability of certified instructors and technicians through programs like those offered in partnership with the National Child Passenger Safety Board, research shows 59% of car seats are not installed correctly.⁸ In addition, no state currently requires children younger than 13 to ride in the back seat – the safest place for a child.

INDICATORS FOR STATE STATUS

Indicators listed in order of impact. Weight on scale of 1-5 shown in parentheses below.

- Keep children rear-facing at least through age 2 (5)
- Keep children in proper child restraint or booster through at least age 8 (5)
- Address children left in hot cars through legislation (3)
- Good Samaritan protections for people who help children in unattended cars (2)



700 fatalities in 2015

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PROMISING PRACTICE:

Alaska Injury Prevention Center staff and Anchorage Safe Community members have worked to educate parents, train child passenger safety technicians, and check and distribute child safety seats, bringing the number of child deaths in traffic crashes down to zero between 2012 and 2015 statewide. Although Alaska doesn't meet the booster through age eight threshold, the state does require children ages 4 to 7 who are under 4'9" or 65 pounds. to be secured in a booster or car seat. Prior to Alaska's booster seat law going into effect in 2009, only 22% of 7-year-olds were seen properly restrained in Anchorage in a booster seat study. That number has increased steadily to 84% in 2013.9

Distracted Driving

Distracted drivers killed 3,477 people in 2015,¹⁰ and injure more than 1,100 every day.¹¹ This figure is likely much higher due to underreporting of distractions in crashes.¹² At any given moment, up to 7% of all drivers are using a cell phone while driving. Teen drivers are even more at-risk, with distraction leading to 6 out of 10 crashes.¹³

Even hands-free is not risk-free. Hands-free devices, including integrated infotainment systems, do not reduce crash risk. The brain remains distracted by the conversation or task, also known as cognitive distraction. The area of the brain that processes moving images decreases by one-third when listening or talking on a phone.¹⁴

Currently, no state has a law that completely bans all electronic device use, including hands free, behind the wheel. NSC believes a full ban is the best way to prevent crashes involving distracted drivers.

INDICATORS FOR STATE STATUS

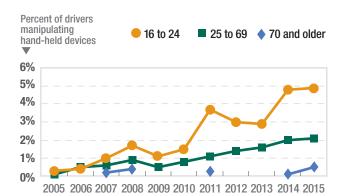
Indicators listed in order of impact. Weight on scale of 1-5 shown in parentheses below.

- Total ban on cellphones (hand-held and hands-free) for teens and novice drivers (3)
- Texting ban for all drivers (3)

3,477 fatalities* in 2015

MULTI-TASKING: THE BIG FAT MYTH The brain quickly toggles between tasks - but can't do two things at the same time The activity in the area of the brain that processes moving images decreases by up to 1/3 when talking on a phone.

Driver visibly manipulating hand-held devices by age, 2005-2015



Source: NHTSA National Center for Statistics and Analysis



As the U.S. population is living longer, many more Americans driving into their 70's, 80's and beyond. Today, 1 in 15 drivers on the road are 75 or older, and drivers over 84 represent the fastest growing demographic for licensed drivers.¹⁵ Although older drivers comprise only 7% of two-car crashes, they are more likely to be seriously injured or killed than any other age group.¹⁶

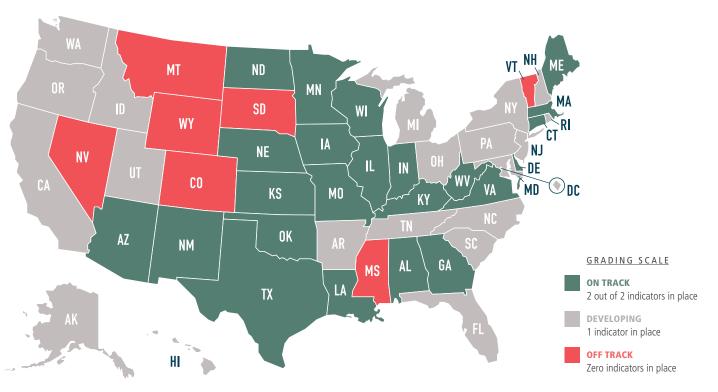
Older drivers also tend to self-regulate their driving habits. Effective guidelines and practices can identify and evaluate drivers on a case-by-case basis to address visual, cognitive, or physical functions that might compromise driving ability. While cars are often a preferred means of transportation for older adults, states should also consider transportation alternatives.

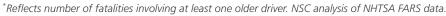
INDICATORS FOR STATE STATUS

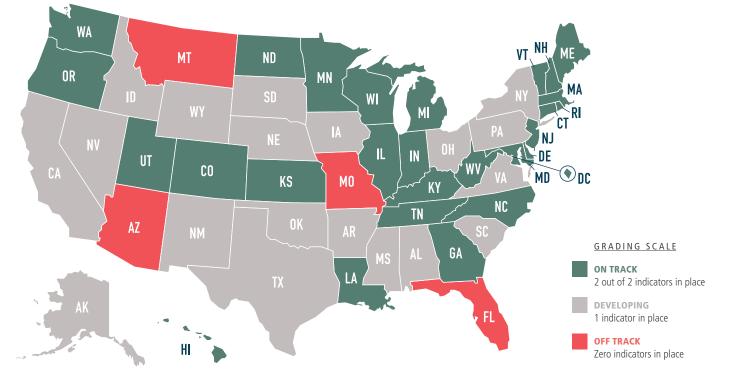
Indicators listed in order of impact. Weight on scale of 1-5 shown in parentheses below.

- In-person license renewal for older drivers required^{**} (2)
- State medical review board boards of medical professionals can advise licensing for drivers on an individual basis (2)

** Several states require older drivers to renew in person every other period, but only states that require in-person renewal for every period were counted for this report.







*NHTSA reported fatality data reflects all manner of distraction, not just electronic devices.

1,824 fatalities*

PROMISING PRACTICE:

The Federal Highway Administration has developed a "Handbook on Designing Roadways for the Aging Population" which incorporates road design, retroreflective and larger signage and engineering best practices to address functional challenges faced by older drivers and pedestrians. Florida, Iowa and Michigan are currently leading the way in adopting these recommendations, part of a safe systems design approach for all road users.¹⁷

Seat Belts

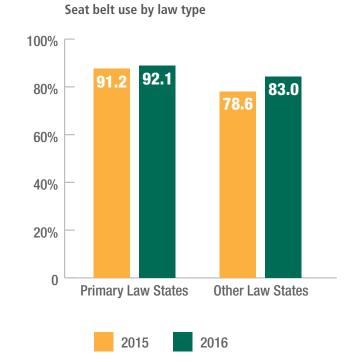
In 2015, seat belts saved nearly 14,000 lives.¹⁸ More Americans buckle up today than ever – around 90%, but it took nearly threequarters of a century to adopt this basic life saving technology. Back in 1981, seat belt use hovered around 11%.¹⁹ It wasn't until 1984 that the first state law requiring seat belt use appeared.

Today, people who buckle up are 45% less likely to die and 50% less likely to be moderately injured in a car crash.²⁰ In fatal crashes, 50% of fatalities occur among people who are unbuckled.²¹ Rear-seat passengers are three times more likely to die in a crash if they are unbelted.²² State laws that require rear-seat occupants to buckle up have shown a 10-point increase in belt usage over states without rear-seat belt use laws in place.²³ Primary enforcement also raises seat belt use for all motorists.¹

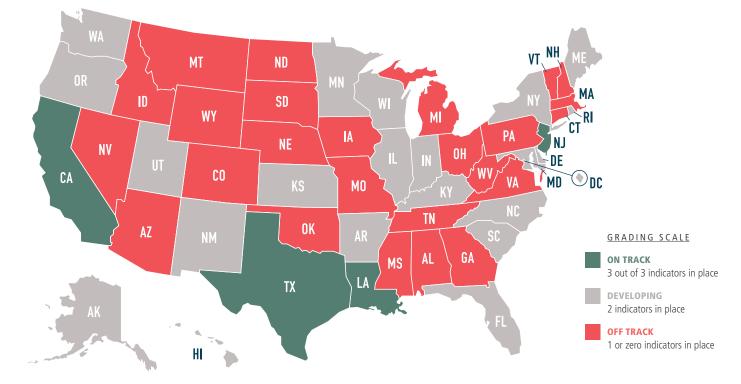
INDICATORS FOR STATE STATUS

Indicators listed in order of impact. Weight on scale of 1-5 shown in parentheses below.

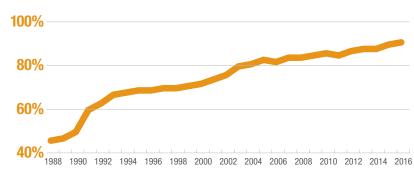
- Primary seat belt law (5)
- All occupants and seating positions covered by seat belt law (3)
- Seat belts on school buses required (2)



Source: National Occupant Protection Use Survey (NOPUS) and NHTSA's National Center for Statistics and Analysis



Historic national seat belt use rate*





9,874 fatalities

*Seat belt use rate estimates prior to 2000 reflect weighted national seat belt use rates using state collected data. Estimates starting in 2000 reflect NOPUS estimates. Comparisons made between these two estimate methods should be made with caution.

Speeding

9,557 fatalities in 2015

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More than 9,000 people are killed every year in speed-related incidents.²⁴ In 2010, speeding-related crash costs to the economy totaled nearly \$52 billion.²⁵

Across the country, speed limits have been increasing. In 1973, Congress required that states adopt 55 mph speed limits in order to receive highway funding. National maximum speed laws were repealed in 1995, returning speed limit authority to the states.

Studies show as speed increases, the survival rate in crashes decreases. Survival for pedestrians is higher with speed limits at 25 mph or lower in residential areas.²⁶ Nearly one-third of all traffic fatalities in the United States involve excessive speed.¹ Stronger laws combined with higher visibility and consistent enforcement can help reduce fatalities.

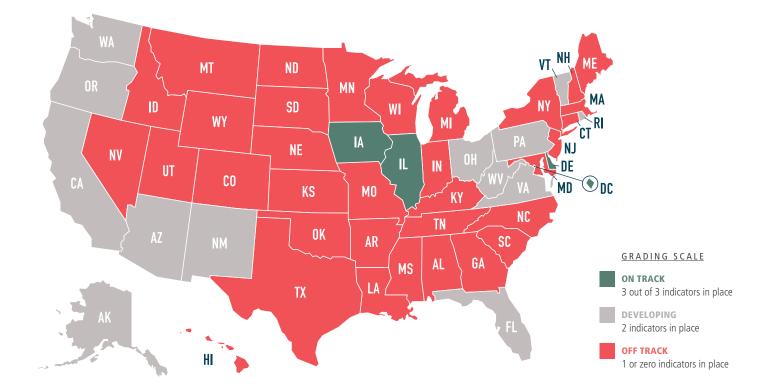
INDICATORS FOR STATE STATUS

Indicators listed in order of impact. Weight on scale of 1-5 shown in parentheses below.

- Automated enforcement of speeding or red light cameras (5)
- Urban interstate speed limit of 55 mph (4)
- Lower speed limits in school zones (2)



In 2010, Florida legislature passed the Mark Wandall Traffic Safety Program Act, authorizing automated enforcement cameras in the state to address motorists running red lights. Red light running fatalities in the state decreased 24% between 2011 and 2015 following implementation, and crashes involving vulnerable road users decreased significantly across the state.27



Teen Drivers

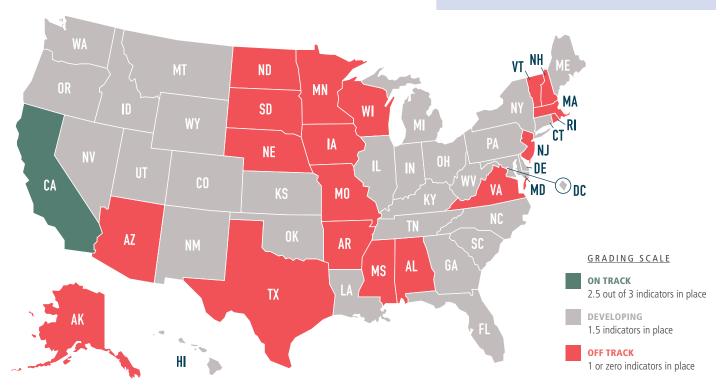
Car crashes are the number one killer of teens, claiming more lives than suicide and homicide.²⁸ Graduated Driver Licensing (GDL) effectively reduces crash risk for teen drivers by 20 to 40%.²⁹ GDL is a licensing system administered at the state level that allows new drivers to build skill and experience gradually.

In addition to requiring at least 50 hours of supervised practice driving, states with the best GDL programs address two other major risks to teen and novice drivers: night driving, and driving with young passengers. Teen drivers are almost three times as likely to be involved in a crash at night versus during the day.³⁰ Just a single young passenger can increase a teen's crash risk by 44%.³¹ Unfortunately, most states have age or driver education loopholes that permit these safety measures to be circumvented.

INDICATORS FOR STATE STATUS

Indicators listed in order of impact. Weight on scale of 1-5 shown in parentheses below.

- Young passenger restriction for 12 months partial credit for at least 6 month restriction (5)
- 10 p.m. or earlier nighttime restriction for 12 months partial credit for at least 6 month or nighttime restriction before midnight (4)
- Supervised driving minimum of 50 hours plus 10 hours at night, with no deduction for driver's ed course - partial credit for at least 40 hours plus 10 at night (4)



*Reflects number of fatalities in crashes involving at least one teen driver. NSC analysis of NHTSA FARS data.

4,702 fatalities*

PROMISING PRACTICE:

While New Jersey didn't meet the high threshold for teen driving metrics set in this report, the state implemented the first GDL decal provision in the country in May 2010. New Jersey required all novice drivers under 21 to affix a special decal to their license plates, allowing police to more easily enforce GDL restrictions. The decal was considered to be a deterrent to risky driving behaviors. On average, crash rates decreased 9.7% each year, preventing an estimated 3,200 crashes. New Jersey is currently the only state in the nation with a decal provision in its GDL plan.³²

Vulnerable Road Users

11,324 fatalities* in 2015

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Vulnerable roadway users such as motorcyclists, bicyclists and pedestrians are less protected than people in vehicles. This puts them at greater risk of injury in the event of a collision.

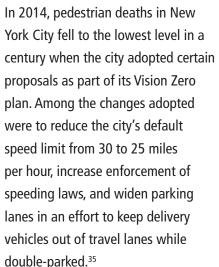
Approximately 4,500 people a year are killed in motorcycle-related crashes, and another 90,000 are injured. Fatalities have climbed 16% between 2004 and 2013. Meanwhile, 1,000 people are killed annually and 500,000 people injured in bicycling-related incidents, with fatalities rising by 12%.¹ Most alarmingly, 5,376 pedestrians were killed after being struck by motor vehicles in 2015.³³

Helmets play a critical safety role for bicyclists, motorcycle riders and passengers. Bicycle helmets can reduce the risk of head injury by 60% and brain injury by 58%.³⁴ Pedestrians can be protected through laws requiring motorists to stop when pedestrians are in the roadway, and through a variety of roadway engineering approaches.

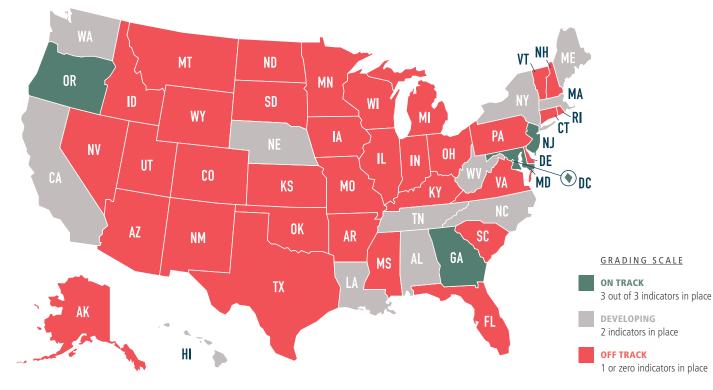
INDICATORS FOR STATE STATUS

Indicators listed in order of impact. Weight on scale of 1-5 shown in parentheses below.

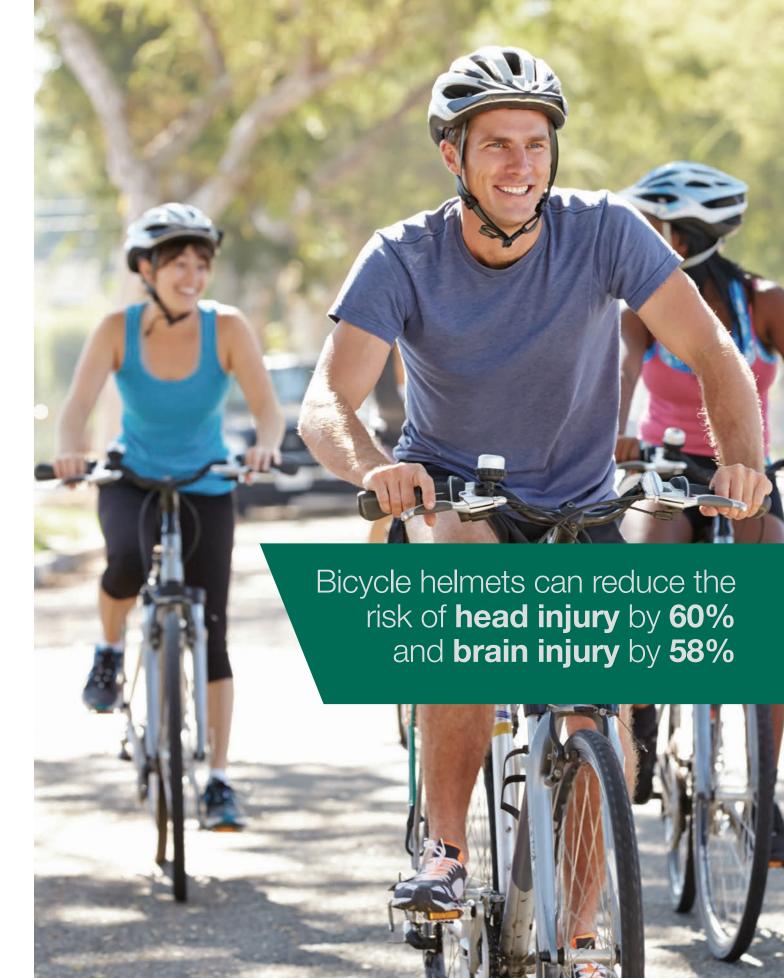
- Motorcycle helmets required for all riders (5)
- Bicycle helmets required for all young riders (4)
- Required stop for pedestrians in uncontrolled walkway or roadway (4)



PROMISING PRACTICE:



*Pedestrians: 5,376; Bicyclists: 818; Motorcylists: 4,976; Other/unknown non-motorists: 154



ROAD SAFETY STATE GRADES AND RANKING

| State | Road Rank | Grade | Alcohol Impaired Driving | Child Passengers | Distracted Driving | Older Drivers | Seat Belts | Speeding | Teen Drivers | Vulnerable Road Users |
|-------------------------|--------------|-------|--------------------------------|---------------------|-----------------------|------------------|------------|------------|-----------------|--------------------------|
| Illinois | 1 | А | On track | Off track | On track | On track | Developing | On track | Developing | Off track |
| Louisiana | 2 | Α | On track | Off track | On track | On track | On track | Off track | Developing | Developing |
| District of Columbia | 3 | A | On track | Off track | On track | Developing | Developing | On track | Developing | On track |
| Delaware | 4 | Α | On track | Off track | On track | On track | Developing | On track | Developing | Off track |
| Maine | 5 | Α | On track | Off track | On track | On track | Developing | Off track | Developing | Developing |
| West Virginia | 6 | Α | On track | Off track | On track | On track | Off track | Developing | Developing | Developing |
| Maryland | 7 | Α | On track | Off track | On track | Developing | Developing | Off track | Developing | On track |
| Indiana | 8 | В | On track | Off track | On track | On track | Developing | Off track | Developing | Off track |
| Washington | 9 | В | On track | Off track | On track | Developing | Developing | Developing | Developing | Developing |
| Georgia | 10 | В | On track | Off track | On track | On track | Off track | Off track | Developing | On track |
| Oregon | 11 | В | On track | Off track | On track | Developing | Developing | Developing | Developing | On track |
| California | 12 | В | On track | Developing | Developing | Developing | On track | Developing | On track | Developing |
| Tennessee | 13 | В | Developing | On track | On track | Developing | Off track | Off track | Developing | Developing |
| Hawaii | 14 | В | On track | Off track | On track | Developing | Developing | Off track | Developing | Developing |
| Connecticut | 15 | В | Developing | Off track | On track | On track | Off track | Off track | Developing | Off track |
| Utah | 16 | В | On track | Off track | On track | Developing | Developing | Off track | Developing | Off track |
| New Jersey | 17 | В | Developing | Off track | On track | Developing | On track | Off track | Off track | On track |
| Kentucky | 18 | В | Developing | Developing | On track | On track | Developing | Off track | Developing | Off track |
| Kansas | 19 | В | On track | Off track | On track | On track | Developing | Off track | Developing | Off track |
| North Carolina | 20 | В | Developing | Off track | On track | Developing | Developing | Off track | Developing | Developing |
| Wisconsin | 21 | В | Developing | Developing | On track | On track | Developing | Off track | Off track | Off track |
| Rhode Island | 22 | В | Off track | Off track | On track | Developing | Developing | Developing | Off track | Off track |
| Minnesota | 23 | С | Developing | Off track | On track | On track | Developing | Off track | Off track | Off track |
| New Mexico | 24 | С | On track | Off track | Developing | On track | Developing | Developing | Developing | Off track |
| Alabama | 25 | С | On track | Off track | Developing | On track | Off track | Off track | Off track | Developing |
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| State | Road Rank | Grade | Alcohol Impaired Driving | Child Passengers | Distracted Driving | Older Drivers | Seat Belts | Speeding | Teen Drivers | Vulnerable Road Users |
|------------------|--------------|-------|--------------------------------|---------------------|-----------------------|------------------|------------|------------|-----------------|--------------------------|
| Vermont | 27 | С | On track | Off track | On track | Off track | Off track | Developing | Off track | Off track |
| Oklahoma | 28 | С | On track | On track | Developing | On track | Off track | Off track | Developing | Off track |
| Texas | 29 | С | On track | Off track | Developing | On track | On track | Off track | Off track | Off track |
| Michigan | 30 | С | Off track | Off track | On track | Developing | Off track | Off track | Developing | Off track |
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| North Dakota | 32 | С | On track | Off track | On track | On track | Off track | Off track | Off track | Off track |
| Colorado | 33 | С | On track | Off track | On track | Off track | Off track | Off track | Developing | Off track |
| New Hampshire | 34 | С | On track | Off track | On track | Developing | Off track | Off track | Off track | Off track |
| Nebraska | 35 | D | On track | Off track | Developing | On track | Off track | Off track | Off track | Developing |
| Pennsylvania | 36 | D | Developing | Developing | Developing | Developing | Off track | Developing | Developing | Off track |
| lowa | 37 | D | Developing | Off track | Developing | On track | Off track | On track | Off track | Off track |
| Virginia | 38 | D | Developing | Off track | Developing | On track | Off track | Developing | Off track | Off track |
| Alaska | 39 | D | Developing | Off track | Developing | Developing | Developing | Developing | Off track | Off track |
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| Nevada | 43 | F | On track | Off track | Developing | Off track | Off track | Off track | Developing | Off track |
| Florida | 44 | F | On track | Developing | Off track | Developing | Developing | Developing | Developing | Off track |
| Mississippi | 45 | F | On track | Off track | Developing | Off track | Off track | Off track | Off track | Off track |
| Idaho | 46 | F | Developing | Off track | Developing | Developing | Off track | Off track | Developing | Off track |
| Wyoming | 47 | F | Developing | Off track | Developing | Off track | Off track | Off track | Developing | Off track |
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| Missouri | 49 | F | Developing | Off track | Off track | On track | Off track | Off track | Off track | Off track |
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| Montana | 51 | F | Off track | Off track | Off track | Off track | Off track | Off track | Developing | Off track |

For state specific information on safety indicators, please visit **nsc.org/stateofsafety** to download your state's grade report. State of Safety, State by State Report Card, ©2017 National Safety Council.



Home and Community Safety

121,904 fatalities in 2015

We are at an all-time high for preventable deaths. **Every** four minutes, someone in the U.S. dies because of a preventable injury. More than 70% of these deaths occur in homes and communities. About 42% involved workers while they are off the job.

Home and community deaths are driven by everyday circumstances like falls, poisonings, choking or sports injuries. Seemingly mundane, they are not viewed as significant hazards even though they pose a far greater threat, and disproportionately affect children and older adults. Overall, these deaths add up to a cost of \$240 billion annually and are entirely preventable.¹

The home and community safety areas outlined in this report include 24 indicators grouped under six safety issues: youth sports-related concussions, drowning, older adult falls, firearm fatalities, home fires and poisonings. Poisoning itself accounts for over 50% of all deaths in this category, driven primarily by the opioid epidemic.

States play a pivotal role in protecting citizens and promoting public health outcomes. Prevention is key, and currently there are many gaps - signaled by only a single state receiving an "A" in Home and Community Safety. Legislation and state-level coalitions can mitigate common risk factors, prevent injuries and fatalities, and ensure better outcomes through access to lifesaving programs and technology, First Aid and CPR, and first response.

EMERGING ISSUE: **CHOKING**

Choking and mechanical suffocation represent additional leading causes of preventable deaths. States were not graded on these issues given the lack of state-level control. CPR and First Aid, which often includes instruction on abdominal thrusts, is included as an indicator under Drowning, which provide skills to prevent choking and impacts home and community safety overall.

BOTTOM 5 TOP 5 STATES STATES FOR HOME AND FOR HOME AND COMMUNITY SAFETY COMMUNITY SAFETY Utah Maryland Missouri Connecticut California Idaho New Mexico South Carolina

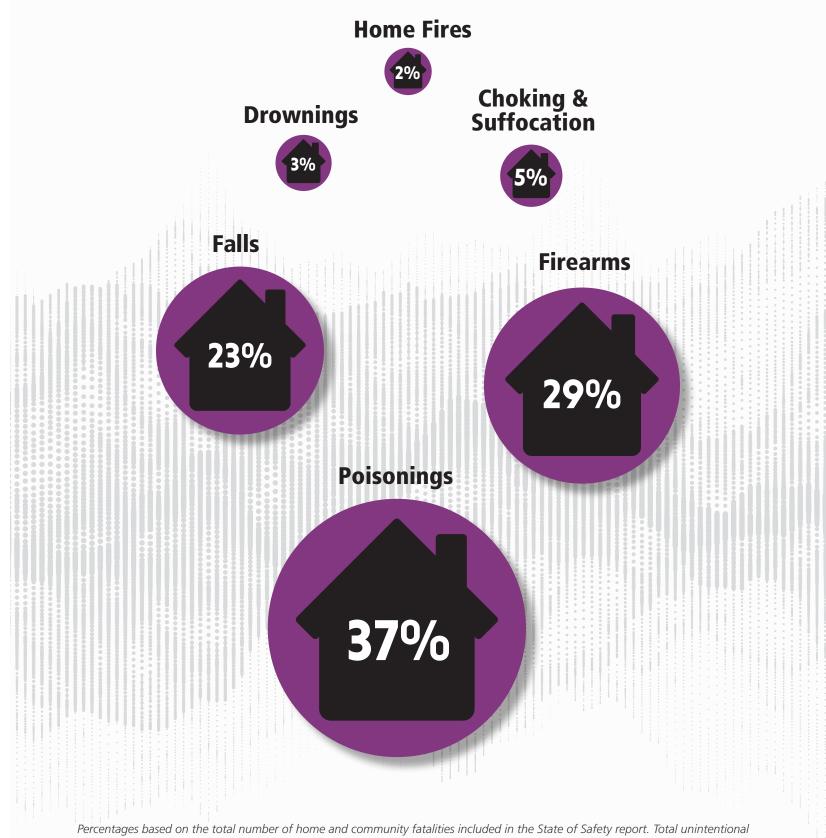
Mississippi

Massachusetts



Youth Sports-Related Concussions

Leading Causes of Preventable Death



deaths in the U.S. were 146,571 in 2015.

IN THE HOME AND COMMUNITY

nsc.org/stateofsafety

Drownings

In 2015, there were 3,602 drowning deaths in the United States. Although this number includes victims of all ages, **drowning is a leading cause** of death for children 1 to14 years old. Forty-six percent of drownings among this age group occur in swimming pools.³⁶

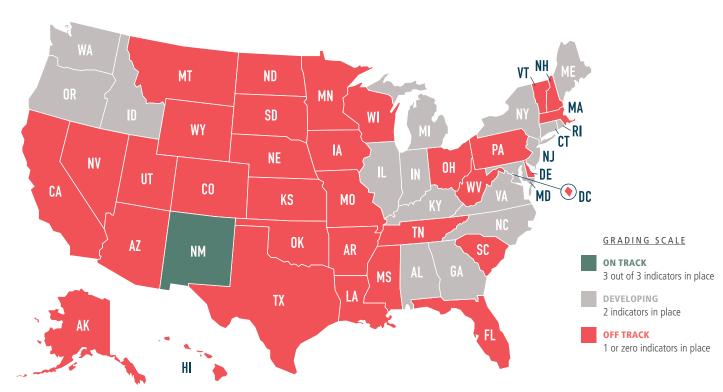
Swim instruction reduces the risk of drowning, especially for children age 4 and vounger. Additional effective efforts include requiring four-sided fencing for both public and private outdoor pool and spa owners. A newly created Model Aquatic Health Code (MAHC) for public water facilities provides state-level drowning prevention. MAHC details safety provisions to prevent injury and illness, including guidelines for lifeguard training as well as equipment and material standards at public pools.⁴⁶ First Aid and CPR training is also a key component of prevention.

Note: Comprehensive data for state interventions addressing drowning in natural bodies of water was unavailable for this report. Many states have child death reviews that provide more information about circumstances of drowning and support policy development.

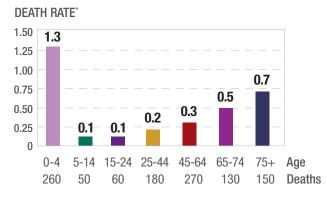
INDICATORS FOR STATE STATUS

Indicators listed in order of impact. Weight on scale of 1-5 shown in parentheses below.

- State has updated public pool and water facility regulations to conform with Model Aquatic Health Code (5)
- High school graduates required to know CPR (4)
- Regulations require barriers to be installed around residential pools (2)



Drowning death rate by age group



3,602 fatalities

*Deaths per 100,000 population in each age group

Source: Injury Facts, 2017 Edition

Firearms

While unintentional firearms fatalities are relatively low (approximately 500 a year), firearms play a role in some 35,000 intentional deaths³⁸ and 80,000 injuries³⁹ every year. Half of all suicides involve the use of a firearm, and suicides comprise nearly two-thirds of all U.S. firearm deaths. The overall annual economic impact of all firearm related deaths and injuries is nearly \$174 billion in medical and lost productivity costs, criminal justice expenses and lost quality of life.⁴⁰

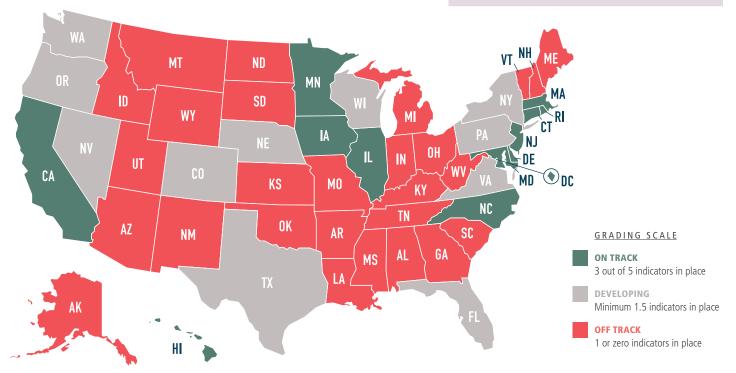
Suicide rates are at a 30 year high, but legislation can make a difference.

Access to guns is regulated through laws relating to purchasing, selling, storage, training and background checks. Laws reducing child access to firearms through safe gun storage are associated with lower overall adolescent suicide rates.⁴¹ States may mandate sharing mental health and criminal records with the National Instant Criminal Background Check System (NICS) to prevent access to individuals who are involuntarily committed, subject to a domestic violence protective order, or otherwise prohibited from owning firearms under federal law.⁴²

INDICATORS FOR STATE STATUS

Indicators listed in order of impact. Weight on scale of 1-5 shown in parentheses below.

- Universal background checks partial credit if only applies to handguns (5)
- Any waiting period for firearm purchases partial credit if only applies to handguns (5)
- License or permit with training required for firearm purchase partial credit for permit only (5)
- State law mandates sharing of mental health records with NICS database (4)
- Safe Storage law (4)



* NSC analysis of CDC mortality data for 2015. Includes 22,018 suicides, 12,979 homicides, and 489 unintentional firearm fatalities.

35,486 fatalities*

PROMISING **PRACTICE:**

Gun shops and firing ranges in New Hampshire were engaged as partners in a pilot public health campaign focused on suicide prevention. The NH Firearm Safety Coalition developed and disseminated brochures, posters and tip sheets, with the input of gun owners and dealers, to help retailers spot customers potentially at risk for suicide and encourage gun safety. Since 2011, 48% of commercial firearm retailers in New Hampshire are participating in the project. The Harvard Injury **Control Research Center has** expanded the project to 12 states.43

Home Fires

Although on the decline for the past few decades, home fires still claimed more than 2.600 lives in 2015.44 Smoke inhalation contributes to more home fire deaths than actual burns. Working smoke alarms cut the chances of dying in a house fire in **half.** Three in five home fire deaths occur in residences with no smoke alarms at all or where alarms were present but failed to operate.45

Effective fire prevention plans involve local fire departments and are usually organized at the community level. Residential sprinklers can also save lives, although adoption at the municipal level can conflict with state law.

INDICATORS FOR STATE STATUS

Indicators listed in order of impact. Weight on scale of 1-5 shown in parentheses below.

- Sprinkler system requirements in newly built one- and two-family homes (5)
- State legislation requires residential smoke alarms with 10-year lifetime batteries (4)



\ll

The Injury Prevention Center of Greater Dallas and the Dallas Fire Rescue Department worked together to reach neighborhoods with high incidences of home fires. A team of firefighters and volunteers installed more than 34,000 smoke alarms and reached over 42,000 people in a door-to-door effort to educate the public on the importance of alarm maintenance and fire prevention. After a 10-year review, program participants saw home fire deaths and injuries drop 74%.46

PROMISING PRACTICE:

Older Adult Falls

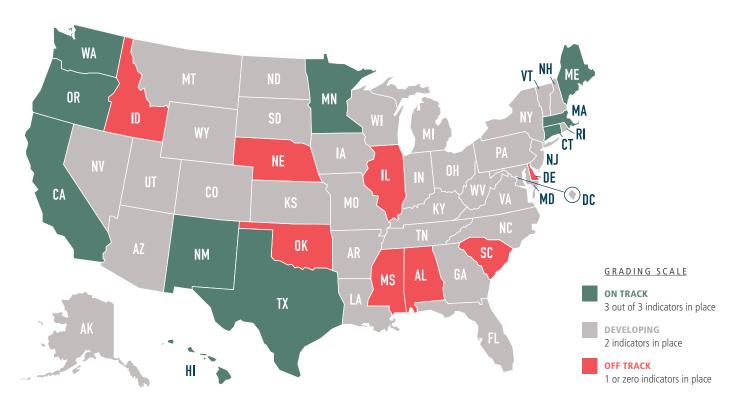
Falls affecting adults 65 and older have increased 168% since 1999.¹ Falls are now the leading cause of preventable death among older Americans, killing more than 30,000 people each year, and among the most common causes of traumatic brain injury. Falls are the leading cause of death in 10 states, and contribute to additional injuries, hospitalizations and emergency room visits nationwide for Americans of all ages.

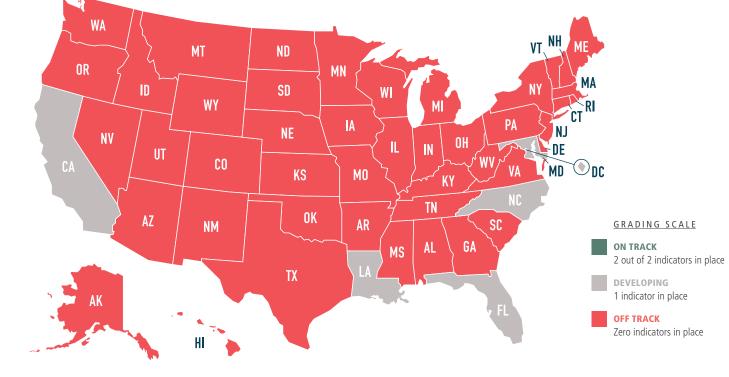
Adults 65 and older have 1 in 3 chance of experiencing a fall each year however, aging itself doesn't cause falls. Instead, muscle weakness, medications, cluttered or poorly lit areas are culprits for falls.⁴⁷ Evidence-based interventions like exercise programs have been shown to be very successful in significantly reducing risks associated with older adult falls, and many states are working to ensure older adult communities utilize fall prevention strategies for residents through state coalitions.

INDICATORS FOR STATE STATUS

Indicators listed in order of impact. Weight on scale of 1-5 shown in parentheses below.

- Fall prevention strategies and education for community-dwelling older adults required (4)
- State fall prevention coalition in place (3)
- Pharmacists may modify prescription medication through collaborative practice agreement or protocol (2)





28,400 fatalities

PROMISING PRACTICE:

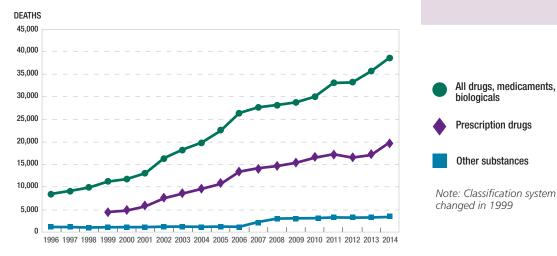
The Centers for Disease Control and Prevention funded several evidence and community based group exercise interventions to reduce older adult falls. An analysis of two programs, Tai Chi: Moving for Better Balance and Otago Exercise Program resulted in fewer falls and medical costs. providing a return on investment greater than 100%. Stepping On program participants, similarly, reduced their falls by 30-50%. Stepping On is currently available in 20 states.48

Poisonings

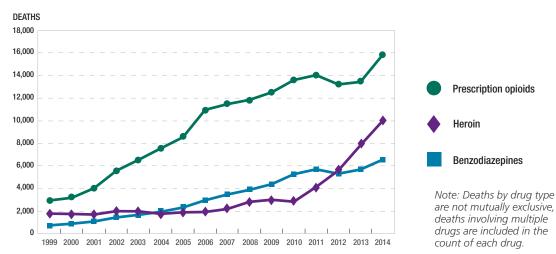
Drug poisonings now eclipse car crashes as the leading cause of preventable death among adults. Poisonings include deaths from drugs, medicines, other solid and liquid substances, gases and vapors. Four hundred Americans die from unintentional carbon monoxide poisoning every year.⁴⁹ The major culprit in drug-related deaths is opioid pain relievers, taking 60 lives every single day.¹

The United States consumes 80% of the world's opioids, but accounts for less than 5% of the world's population.⁵⁰ Prescriber education and guidelines, patient education, overdose prevention efforts, and access to treatment as well as programs like Prescription Drug Monitoring Programs (PDMPs) are some of the ways this deadly epidemic can be reversed.

Unintentional poisoning deaths, United States, 1996-2014



Unintentional poisoning deaths by selected drugs, United States, 1999-2014



PROMISING PRACTICE:

In Kentucky, New York and Tennessee – three of the first states to mandate prescriber use through PDMP (Prescription Drug Monitoring Programs) – program implementation resulted in reductions in opioid prescriptions and in patients visiting multiple providers. Tennessee reported a 36% reduction in doctor shopping following PDMP implementation, while New York saw a 75% reduction.⁵¹

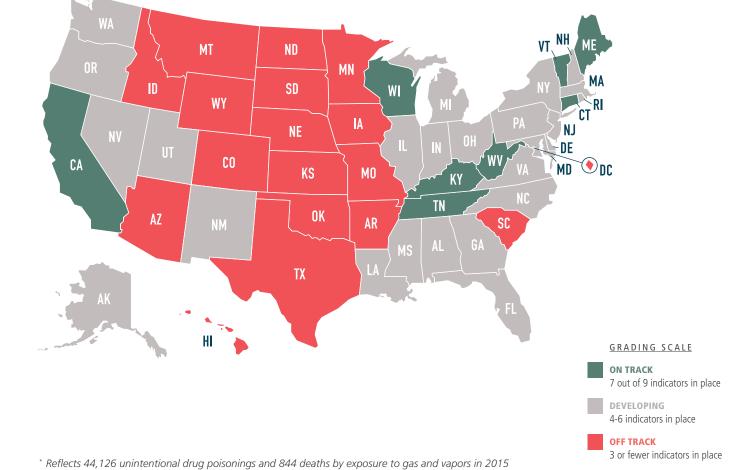


INDICATORS FOR STATE STATUS

Indicators listed in order of impact. Weight on scale of 1-5 shown in parentheses below.

- Buprenorphine availability to treat opioid and heroin use disorders (5)
- Mandatory prescriber education on pain management (5)
- Prescription Drug Monitoring Program (PDMP) consult for first-time opioid prescriptions (5)
- State allows third-party prescribing or standing orders for naloxone (5)
- Regulation of pain clinics or pain management services to eliminate "pill mills" (4)
- Good Samaritan protections for providing overdose assistance (3)
- Carbon monoxide detectors required in private residences via state statute or building codes (4)
- Carbon monoxide detectors required in schools (3)
- Carbon monoxide detectors required in hotels and motels^{**} (3)

**Statute and administrative rules pertaining to fossil fuel burning appliances in hotels and motels



44,970 fatalities^{*}

Youth Sports-Related Concussions

Every three minutes a child in the U.S. is treated for a sports-related concussion. Children under age 18 suffer between 1.1 and 1.9 million concussions per year.⁵² Despite a 500% uptick between 2010 and 2014,⁵³ concussions continue to be underreported and undiagnosed.

The number of sports-related concussions is highest in high school athletes, but they are significant and on the rise in younger athletes, especially in contact sports like football, hockey, lacrosse and soccer. The effects of concussions can be both short-term and long-term, and impact mobility, memory, and even personality changes. These circumstances make it critical that coaches, parents and athletes are educated to recognize the signs of a concussion, and to prevent premature return to play.

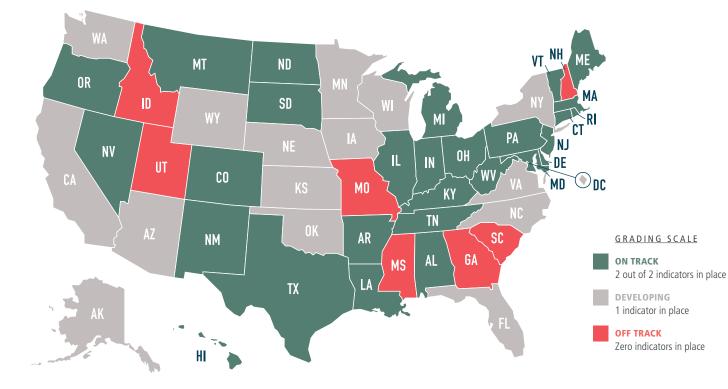
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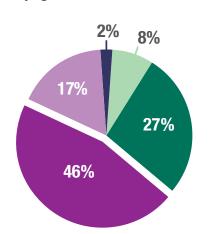
- State legislation includes the following key components of return-to-play laws (4):
- Provision of education or training on concussion recognition and appropriate responses, including education for parents and athletes
- Removing a youth athlete from play or practice in the event of a suspected concussion
- Returning a youth athlete to practice or competition after evaluation and clearance by a designated health care provider
- Concussion recognition and awareness training for coaches (4)



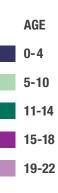
When the Wisconsin State Interscholastic Athletic Association limited the amount and duration of full-contact activities during football team practices for Wisconsin high school athletes in 2014, the concussion rate for those athletes fell by more than 50% as compared to the previous two seasons.⁵⁴ The Centers for Disease Control and Prevention has several resources that states could use to support implementation of this recommendation and would not impose a cost burden on schools or coaches.



Concussions by age







Source: FAIR Health's NPIC[®] database of more than 20 billion privately billed medical and dental healthcare claims from more than 60 contributors nationwide.

Every three minutes a child in the U.S. is treated for a sports-related concussion

HOME AND COMMUNITY SAFETY STATE GRADES AND RANKING

| State | Rank | Grade | Drownings | Firearms | Home Fires | Older Adult Falls | Poisonings | Youth Sports- Related Concussions |
|----------------------|------|-------|------------|------------|------------|----------------------|------------|--|
| Maryland | 1 | А | Developing | On track | Developing | Developing | Developing | On track |
| Connecticut | 2 | В | Developing | On track | Off track | On track | On track | On track |
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For state specific information on safety indicators, please visit **nsc.org/stateofsafety** to download your state's grade report. State of Safety, State by State Report Card, ©2017 National Safety Council.

4,836 fatalities in 2015

Thirteen American workers die on the job each day.⁵⁵ For the second year in a row, the U.S. has seen a slight increase in worker deaths, with 4,836 reported workplace fatalities in 2015 – the highest total since 2008. Leading causes of workplace death include motor vehicle crashes, falls, and contact with objects and equipment, as well as violence and other injuries. The most dangerous industries include agriculture, transportation, warehousing, mining and construction.

Additionally, more than 12,000 American workers are injured each day.¹ Leading causes of worker injury include overexertion; slips, trips and falls; and incidents involving contact with objects or equipment. Each one of these events is preventable.

While many aspects of occupational safety and health are regulated at the federal level, states wield a great deal of influence and can encourage employers to put policies in place to create safer workplaces. These preventative actions can help eliminate pain and suffering for all American workers. However, compliance with legislation should only be viewed as a starting point if we want to substantially reduce worker death and injury. Employers need to comply with federal and state regulations and standards, but also go above and beyond to achieve workplace safety best practices.

BOTTOM 5

FOR WORK SAFETY

South Dakota

STATES

Missouri

Idaho

Kansas

Wyoming

| In this report, states are graded on policy and legislation |
|---|
| pertaining to 11 different indicators across three safety |
| issues: prevention, preparedness and enforcement; worker |
| health and wellbeing; and workers' compensation. |

EMERGING ISSUE: **Temporary Worker Safety**

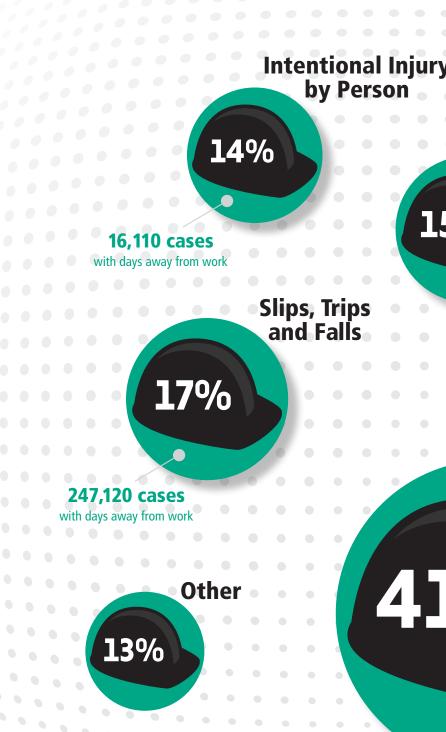
Regardless of who issues their paycheck, the 15 million temporary and contract workers in the U.S. deserve safe job sites.⁵⁶ State-by-state data show temporary workers can have double the risk of suffering severe injuries at work and often are assigned to higher risk jobs.⁵⁷ Despite the dangerous nature of some of these jobs, some temporary workers may not receive the same degree of training and protection as full-time employees. Increased injuries and deaths among these workers show the need for host employers and staffing agencies to clearly define their respective roles so each party fulfills its responsibilities.



Prevention, Preparedness and Enforcement

Workers' Compensation

Worker Health and Wellbeing



TOP 5

FOR WORK SAFETY

Washington

Colorado

Minnesota

District of Columbia

STATES

Illinois

Workplace Deaths

15%

Contact V Obiects

224,840 cases with days away from

Transportation

41%

47,320 cases with days away from work

Prevention, Preparedness and Enforcement

Excellence in workplace safety requires states to be both proactive and reactive. On the proactive side, states can ensure workplaces have programs to address safety and health issues and engage workers at all levels. In many states, this is a requirement or highly incentivized. In some states, an active safety committee is also required. OSHA estimates that establishing safety and health programs can reduce injuries by 15 to 35%⁵⁸ for employers that do not currently have a program.

At the same time, states also need to react to emerging issues and threats, such as workplace violence. States can ensure the right training and response systems are implemented to lessen risk. Nearly 16% of all work-related fatalities are now due to violence - the third leading cause of workplace death.¹ Many states are passing workplace violence laws to help combat this growing issue. Enhanced 911 meanwhile provides dispatchers with precise caller location within a building or campus when a landline is used and ensures swift first response in case of an emergency.⁵⁹

OSHA has issued some guidelines to protect workers that states should follow. Additionally, OSHA efforts to establish rules have suffered at the slow pace of regulation or more recently are being repealed by Congress. While these actions may not be fully implemented as law, they do provide guidance for states and employers on standards that should be in place.

PROMISING PRACTICE:

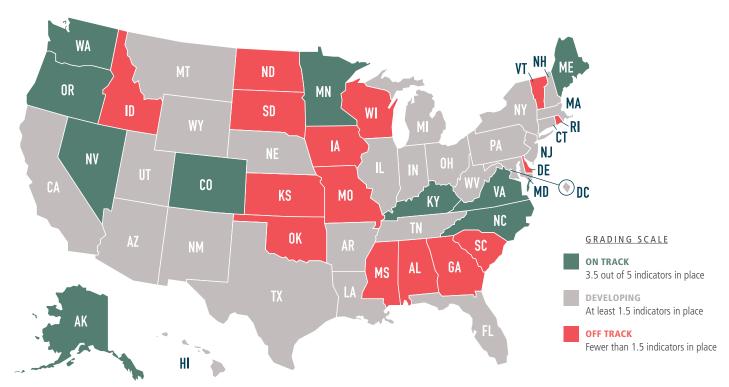
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As the 2015 recipient of the Robert W. Campbell Award for achieving excellence through the integration of environmental, health and safety management (EHS) into its business operations, Phoenix-based Honeywell Aerospace knows the value of having an injury and illness prevention program in place. Since integrating its EHS system into the Honeywell Operating System and building a culture of safety within the organization,⁶⁰ Honeywell Aerospace has reduced its incident rates by almost 50% and improved its audit scores by almost 40%.⁶¹ Its injury rates are the lowest in the history of the business group.

INDICATORS FOR STATE STATUS

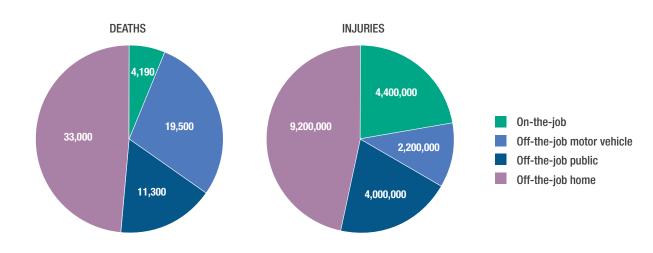
Indicators listed in order of impact. Weight on scale of 1-5 shown in parentheses below.

- State requirement of safety and health programs (also known as illness and injury prevention programs) for employers – partial credit awarded (3)
- State/local government employee OSHA coverage (3)
- Existence of state workplace safety committee law/mandate partial credit awarded (3)
- Existence of state workplace violence law partial credit awarded (3)
- Existence of multi-line telephone system enhanced 911 program for employers (3)





Workers' on- and off-the-job deaths and injuries, United States, 2015



Note: Partial credit was awarded in instances in which states took some, but not all, of the necessary steps to implement these indicators.



OSHA estimates employer safety and health programs can reduce injuries by **15** to **35%**

Workers' Compensation

All states have very complex and unique workers' compensation environments, but all are aimed at the same goal – doing right by workers hurt on the job. Providing workers' compensation is a costly endeavor. An estimated \$62.3 billion was paid under workers' compensation in 2014, according to the National Academy of Social Insurance.¹

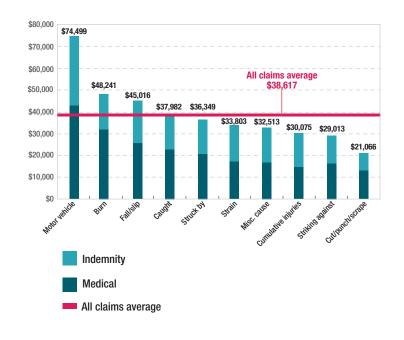
Although there are many variables to consider for workers' compensation, looking at key measures like maximum benefits and length of coverage is a good indicator that states are providing acceptable levels of protection.

INDICATORS FOR STATE STATUS

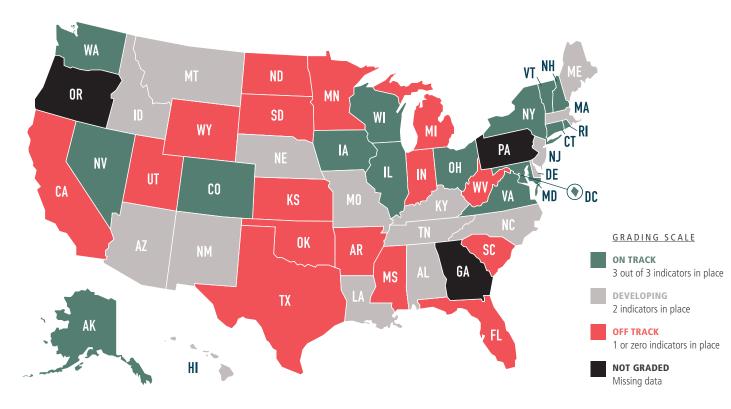
Indicators listed in order of impact. Weight on scale of 1-5 shown in parentheses below.

- Maximum length of benefits in weeks for workers' compensation – temporary disability (3)
- Maximum weekly benefit permanent disability (3)
- Maximum length of benefits in weeks for workers' compensation – permanent disability (3)

Average total incurred costs per claim by cause of injury, 2013-2014



Source: The National Council on Compensation Insurance



Worker Health and Wellbeing

A true culture of health and safety depends on not only a strong safety program, but also focuses on worker wellbeing.⁶² Employers should invest in comprehensive programs that integrate both worker safety and wellbeing, as they go hand in hand.

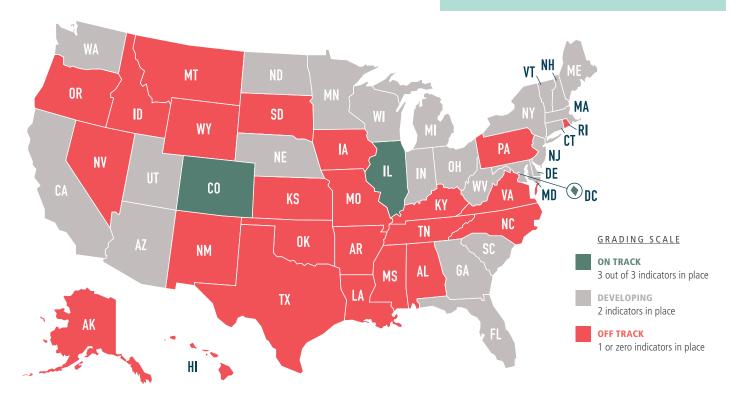
States have increasingly come to realize that direct physical harm is not the only component in a sound safety system. In fact, they have significant ability to control key workplace environmental risk factors by implementing drug-free and anti-smoking laws. States can also mandate the existence of workplace wellness programs and, although this is still an evolving area, research shows promising links to safety outcomes.⁶²



INDICATORS FOR STATE STATUS

Indicators listed in order of impact. Weight on scale of 1-5 shown in parentheses below.

- State drug-free workplace law partial credit awarded (4)
- State workplace anti-smoking law partial credit awarded for partial implementation (3)
- State workplace wellness law (3)



PROMISING PRACTICE:

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A study of Salt Lake County government employees looked at both the health and cost effects of a workplace health program.⁶³ Merrill et al. (2011) evaluated the Healthy Lifestyle Initiative Program (HLIP) from 2004 to 2008. The program included free annual screenings, financial incentives and educational programs to raise awareness of health issues. They found that HLIP participants were more likely to exercise and had better selfperceived health, and saved more than \$3.5 million over four years due to lower prescription drug and medical costs. Every dollar spent on HLIP saved the county \$3.85.

WORKPLACE SAFETY STATE GRADES AND RANKING

| State | Rank | Grade | Prevention, Preparedness and Enforcement | Worker Health and Wellbeing | Workers' Compensation |
|----------------------|------|-------|--|--------------------------------|--------------------------|
| Illinois | 1 | А | Developing | On track | On track |
| Washington | 2 | А | On track | Developing | On track |
| Colorado | 3 | В | On track | On track | On track |
| Minnesota | 4 | В | On track | Developing | Off track |
| District of Columbia | 5 | В | Developing | On track | On track |
| Maryland | 6 | В | Developing | Developing | On track |
| Oregon | 7 | В | On track | Off track | Missing data |
| Alaska | 8 | В | On track | Off track | On track |
| Maine | 9 | В | On track | Developing | Developing |
| New Hampshire | 10 | В | Developing | Developing | On track |
| Connecticut | 11 | В | Developing | Developing | On track |
| Nebraska | 12 | С | Developing | Developing | Developing |
| New York | 13 | С | Developing | Developing | On track |
| California | 14 | С | Developing | Developing | Off track |
| Virginia | 15 | С | On track | Off track | On track |
| Kentucky | 16 | С | On track | Off track | Developing |
| Pennsylvania | 17 | С | Developing | Off track | Missing data |
| Arizona | 18 | С | Developing | Developing | Developing |
| Ohio | 19 | С | Developing | Developing | On track |
| Utah | 20 | С | Developing | Developing | Off track |
| Nevada | 21 | С | On track | Off track | On track |
| Hawaii | 22 | С | Developing | Off track | Developing |
| Vermont | 23 | D | Off track | Developing | On track |
| Michigan | 24 | D | Developing | Developing | Off track |
| North Carolina | 25 | D | On track | Developing | Developing |
| Massachusetts | 26 | D | Developing | Developing | Developing |
| | | | | | |

| State | Rank | Grade | Prevention, Preparedness and Enforcement | Worker Health and Wellbeing | Workers' Compensation |
|----------------|------|-------|--|--------------------------------|--------------------------|
| New Jersey | 27 | D | Developing | Developing | Developing |
| Wisconsin | 28 | D | Off track | Developing | On track |
| Iowa | 29 | D | Off track | Off track | On track |
| North Dakota | 30 | D | Off track | Developing | Off track |
| Tennessee | 31 | D | Developing | Off track | Developing |
| Texas | 32 | F | Developing | Developing | Off track |
| Delaware | 33 | F | Off track | Developing | Developing |
| Montana | 34 | F | Developing | Off track | Developing |
| Indiana | 35 | F | Developing | Developing | Off track |
| Alabama | 36 | F | Off track | Off track | Developing |
| Rhode Island | 37 | F | Off track | Off track | On track |
| New Mexico | 38 | F | Developing | Off track | Developing |
| Florida | 39 | F | Developing | Developing | Off track |
| Louisiana | 40 | F | Developing | Off track | Developing |
| South Carolina | 41 | F | Off track | Developing | Off track |
| Georgia | 42 | F | Off track | Developing | Missing data |
| West Virginia | 43 | F | Developing | Developing | Off track |
| Oklahoma | 44 | F | Off track | Off track | Off track |
| Mississippi | 45 | F | Off track | Off track | Off track |
| Arkansas | 46 | F | Developing | Off track | Off track |
| Missouri | 47 | F | Off track | Off track | Developing |
| South Dakota | 48 | F | Off track | Off track | Off track |
| Idaho | 49 | F | Off track | Off track | Developing |
| Wyoming | 50 | F | Developing | Off track | Off track |
| Kansas | 51 | F | Off track | Off track | Off track |

For state specific information on safety indicators, please visit **nsc.org/stateofsafety** to download your state's grade report. State of Safety, State by State Report Card, ©2017 National Safety Council.

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