

HRSA Monthly Report

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Stephen Worley

Incident Reports

Incident reports were reviewed (other than those of simple capsizes). Comments were made on a few and some were forwarded to others for information. Incident Reports that describe medical treatment beyond first aid and those that describe medical issues are routinely shared with the Honorary Medical Adviser and, where appropriate, his advice is conveyed to the people involved.

Some months ago it was reported that a rower became ill and details were provided (9502). The HMA advised that she should consult her cardiologist. It has recently been reported that she did so and subsequently underwent treatment. She has now returned to rowing,

Two reports from the same incident contained information about the use of inappropriate language in the presence of children. They were referred to the Lead Safeguarding Officer.

An incident was reported (9940) in which a school 1x was afloat, together with a launch, when red boards were displayed. The person making the report was concerned that the flow rate and the temperature of the water would make this activity dangerous. It was explained that red boards in this area are advisory and do not impose a prohibition. Whether or not it is advisable for a particular crew to go afloat at a specific venue, when red boards are displayed, has to be a matter for the club and the crew. However, the club may subsequently be asked to explain its decision. There is further guidance in a Safety Alert issued in February 2016, see <https://www.britishrowing.org/wp-content/uploads/2015/09/Safety-Alert-Red-Flags.pdf> .

The data for 2017 are being analysed, as in previous years, and early results show that there were 2269 incidents reported. Of those, 742 (33%) (604 in 2016) involved simple capsizes and 1527 (67%) (1196 in 2016) described “significant” incidents. It is hoped and expected that the increase in the number of reports shows an improvement in the willingness to report rather than an increase in the number of incidents.

The following table contains a breakdown of the significant incidents:-

Capsize (not simple)	173	11%
Collision	896	59%
Equipment related	21	1%
Event Inspections	7	0%
Falls and Other Injuries	133	9%
Health related	50	3%
Launch Incidents	23	2%
Other	29	2%
Trailer Incidents	13	1%
Near Miss	182	12%
Total Significant	1527	100%

Please note that these numbers may change slightly as more duplicates are eliminated.

Complaint Received

A “formal” complaint was received from the mother of a junior sculler in a head race. It appeared that the single sculler had become very cold due to her having spent a protracted time stationary on the water in cold conditions. It was also snowing.

She was waiting for about 50 minutes for the remainder of the division to start as she was positioned close to the end of the division. It is understood that her waiting position was between the course and the bank where she was not able to exercise to keep warm.

Some of the mother’s questions were answered and the complaint was forwarded to the event organisers without identifying the mother. The incident was also discussed with the RRSA who was present at the event as an umpire.

A reply was sent to the mother asking for permission for the event organisers to contact her directly. So far there has been no response.

Two potential opportunities have been identified. Waiting times would be shorter if divisions were smaller and there would be more freedom for competitors to move around and keep warm if the waiting area were upstream of the start rather than alongside the course. It is planned to incorporate these two ideas into the 2018 revision of RowSafe (see below). It is understood that the event organisers are reviewing their procedures in preparation for next year’s event.

Work with the Cornish Pilot Gig Association (CPGA)

There was a safety presentation on the morning of the CPGA AGM on 21st January. This was attended by 64 people from at least 38 Clubs. The contents were described in the December report. The feedback from the presentation has been very positive. A document listing the hyperlinks used in the presentation, and other supporting information, has been provided.

Some people have had difficulty in accessing the on-line learning modules on Risk Assessment and Risk Management. Detailed advice has been provided describing how to access the “free” versions without having to log into RowHow. This is summarised in Appendix I.

A presentation on Leadership Skills (based on Safety Leadership) was presented to approximately 38 coaches (mostly from CPGA clubs) at the West Region Coaches Forum on 28th January. Again the feedback was very positive. A document summarising the presentation has been circulated to those who attended. For more information on the Forum contact Andrea Worley on <mailto:s.a.worley@btinternet.com>.

Two CPGA clubs have recently used the Incident Reporting system. It will be suggested that the names of CPGA clubs are included in the drop down list to make it easier for those clubs to use the system. Incident Reports mentioning CPGA clubs are forwarded to the Association Rowing Safety Adviser.

RowSafe

RowSafe 2017 Some broken links in RowSafe 2017 have been identified and it has been requested that they should be repaired.

RowSafe 2018 The 2018 update should be issued in April. The following opportunities for improvement have been identified:-

- Add a section on Ocean Rowing
- Add references to the Safety Alerts published in 2017 and any published in early 2018.
- Add a link to the RNLI advice on Lifejackets
- Add a note on the importance of back stays
- Add a note on algal blooms
- Review the Health Chapter with the HMA with particular reference to diabetes.
- Extend the guidance in Radio Procedure to include an example of urgency working
- Check all links and repair or remove any that do not function correctly
- Add a note on blades for young junior scullers
- Add information about the dangers of flow over weirs
- Strengthen the guidance on reduced waiting time on the water in cold weather at heads.
- Add a link to a recovery position video in the health section.
- Reinforce the recommendations on conspicuity

If you have any suggestions for further improvements then please send them to safety@britishrowing.org.

Ocean Rowing

A meeting has been held with Nikki Holter of Atlantic Campaigns. There was a wide-ranging and very useful discussion of ocean rowing safety. The planned approach to the provision of guidance to rowers in RowSafe and the way in which this may lead to pressure to improve safety via customer education was considered to be appropriate.

Ocean rowing boats are self-righting and it is now understood that capsizes are common. It was concluded that the present focus should be on:-

- the prevention of rowers falling overboard and being separated from their boat (as discussed in the December 2017 report) and
- preparations for capsize and action to take in the event of a capsize.

The proposal to organise advice by sea state and time of day (day-night) was discussed and considered likely to be effective. Having generic Risk Management Plans and a specific risk management card sorting game, as previously planned, would also be helpful.

Lifejackets

As Getek lifejackets are no longer available, an alternative product, that would be suitable for use when rowing, has been sought. The Secumar Secufit was suggested by Willem van Poelje of Ruderclub Jason in Arnhem; it is shown below. This lifejacket is available with crotch straps and should be used with them.



For further information see <https://www.secumar.com/en/product/secufit/>.

Anyone uncertain about the need to use crotch straps should view the video at <https://www.youtube.com/watch?v=m-CmyKdy3MU>

Water Safety On-line

There was a request to review the Water Safety Online course at <https://westmerciasar.org.uk/homeanddry/free-water-safety-online-course/> and assess its suitability for rowers. The conclusion was that it the format was good and it contained some interesting information but very little of it was relevant to rowers.

Other Advice

The following requests for information were received.

- *There has been some discussion about the light levels that would be appropriate for rowing without lights at dawn and dusk. The Chartered Institute of Building Services Engineers (CIBSE) guidance was consulted and it was suggested that levels of about 100 to 500 Lux would be sufficient providing visibility is good. Reference to this guidance can be found at <https://www.kellwood.co.uk/lighting/technical/cibse-recommended-lux-levels>.*
- *Why cannot launches on the tideway be limited to one per squad so as to reduce the wash?* It was explained that this was a matter for the Thames Regional Rowing Council (perhaps with the PLA) and the request was forwarded accordingly. The person asked “*why does a school need two launches either side of two fours creating wash?*” He was invited to submit an incident report and did so (9934).
- *Our RRSA has recommended that all juniors and preferably adult single scullers at our club wear a lifejacket until the weather warms up due to the coldness of the river, is this necessary?* The response is presented in Appendix 2.
- *A request from a sailing club stated “We have a fixed seat Burlsedon rowing gig which is regularly rowed by 2 or 3 rowers plus a cox. We are currently completing a Risk Assessment and I have a query. The rowers want to be able to row at night during the winter but insist that the wearing of buoyancy aids is an impediment to their stroke. The Club Exec, however, is insistent that buoyancy aids should be worn with an activated glowstick attached to the shoulder strap.” The response was that it is never easy to provide advice without knowing about the venue and the people involved. However, in this case I believe that the Club Exec is providing good advice. Information about the Secumar Secufit lifejacket, described above, was provided.*
- *Is there a basic medical form in RowSafe?* It was assumed that this request related to membership forms or entry forms for (able-bodied) athletes. The response explained the care needed to maintain medical confidentiality and is summarised in Appendix 3.

Appendix 1 – Access to the on-line learning modules

The following actions are recommended before opening a course.

Browser:

- Chrome (recommended)
- Fully updated version of Firefox
- Internet Explorer 9.0

Please note: If you are using Internet Explorer 11 there is a known problem with resizing the window and the course won't display properly. Please press **F11** on your keyboard twice to display the course correctly.

Flash Player

Needs to be installed (<http://get.adobe.com/flashplayer/>).

If you are using Internet Explorer 11 please ensure that you have Flash Player 10 or higher installed.

If you are using Google Chrome as a browser (recommended) please see the following website for instructions: <https://goo.gl/I4InRd> on how to enable flash and add the following exception as per the instructions: <https://www.rowhow.org>"

The same should work for all the modules.

Appendix 2 – Should we wear lifejackets in cold weather - Response

“This is difficult as I do not know your venue and it is always important to take local conditions into account when assessing risk.

If the water is cold then we should be concerned about the gasp reflex, this causes people to inhale when immersed in cold water. Inhaling when the face is underwater can draw enough water into the lungs to cause death. Lifejackets, if inflated in time, tend to protect against this risk.

You should then consider the risk of hypothermia if a rower survives their initial contact with cold water. If the rower is not able to get themselves out of the water (e.g. on top of their inverted boat) and off the water quickly then this risk becomes significant. If they could find themselves some distance from the shore (if the river is wide) or if there are areas where it is difficult to climb up the bank (due perhaps to vegetation, walls, etc.) then having a lifejacket could assist their survival.

Simply put, if somebody does capsize then a lifejacket could save their lives.

The issue with older juniors is more complex. You may choose to allow an adult (over 18) to put their own life at risk providing they do not endanger anyone else. In the case of a child (a person who is yet to reach the age of 18) then you have a responsibility to care for them. They are not, in law at least, capable of making these decisions for themselves. The club has a duty of care.

I feel that your Safety Adviser knows the circumstances in which you row far better than I can and has provided you with advice that he feels is appropriate. You would be well advised to take it. Just think of the consequences to the club if an unfortunate incident occurs and the club could be shown not to have taken the advice it was given “

Appendix 3 – Issues of medical confidentiality

This is a very difficult and sensitive area and we do not address it in RowSafe.

There are issues about medical confidentiality so you cannot ask anyone to tell you about their medical conditions. Even if you could, and they did, then you would probably not understand what their condition is, how severe it is, or what its impacts will be.

However, if someone wants to talk to a rowing coach, or anyone else, about some issue that is concerning them then listening could help. If, for example, they were worried about depression and their doctor had advised them to take more exercise and expand their social circle then simple active listening could itself be therapeutic. It could lead into a conversation about how we can work together for everyone's benefit.

Simply put, you cannot ask but you can listen.

Confidentiality is still important even if someone has volunteered information. You will need their specific, expressed permission before this information can be shared in any way. Even then there has to be a need to know. If the person chooses to share this information themselves then this is their right just as it is their right not to share the information.

There are two issues where we can run into difficulty the first is where a person's condition can put them at risk when participating in an activity. Your task then is to ensure that they understand the nature of the activity and any associated risks. It is then their responsibility, with the help of their doctors, to decide whether or not to participate.

We have to be even more careful here in extreme cases. If someone is clearly not in good health then strenuous exercise could be hazardous. We would not permit them to use equipment that we controlled to exercise strenuously. This is nothing to do with confidentiality it is just common sense.

The more difficult situation is dealing with a person whose condition can expose others to the risk of harm. Again, you can only work with the information that you are given. It is very easy to take this too far, for example, asking a cox to confirm that they are not colour blind may be a step too far.

In my view it is OK to ask people, in very general terms, whether there is any information that would help you to keep them, and others, safe. You may need to put this into a rowing context. This can be in the same breath as asking them if they can swim. This conversation should stick to what they can do and what they cannot do safely and how you can help them to be safe.

In some cases people may explain that they may need help, they may even explain how that help can be provided. For example, someone may say "I am extremely allergic to bee stings and carry an epi-pen, I would like to show a few people how to use it".

It may be reasonable to explain the situation and invite a new member to consult with his doctor before starting serious exercise. However, it may not be reasonable to say "You cannot row until you have brought us a Fit Note from your doctor".

I know of a doctor who delighted in strenuous rowing in his single. Unfortunately in 2016 he died, when sculling, from a suspected aortal aneurism. He was about 69. I am told that he had had the relevant tests and was very aware of the risks so chose to row in a boat on his own. He died doing what he loved.

I am sorry that this is not an easy answer but real life sometimes gets complicated.