



BRITISHROWING

# HRSA Monthly Report

March 2020

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TEAMWORK | OPEN TO ALL | COMMITMENT

## Coronavirus

There have been several requests for advice on coronavirus (COVID-19). The response has been that the situation is changing rapidly and it is best to refer to the British Rowing latest advice to the rowing community, this is available [here](#).

## Incident Reports in March

### Another Cardiac incident

Last month I explained the concern about incidents with the potential for Serious Injuries and Fatalities (SIF) particularly in relation to serious cardiac arrhythmias on indoor rowing machines. There were two incidents of this type in February (one fatal) and there has been another in March.

In the latest incident the student collapsed on an indoor rowing machine and was treated with CPR and an Automated External Defibrillator (AED) at the scene, was taken to hospital by ambulance and received further treatment and survived. Counselling was offered to the staff and students affected.

This incident and the previous incidents were discussed with the Honorary Medical Adviser and the Indoor Rowing Team. Now that clubs have closed, it is understood that some rowers have taken indoor rowing machines home to train and some already have them at home. The consequence of a collapse at home, as compared with one at a gym or club, could be very significant as there may be nobody present to call for help and support the casualty.

It should always be remembered that exercise is good for both physical and mental health. Medical research shows that regular exercise, even vigorous exercise, is good for cardiac health. It is important to be a regular exerciser and to build the performance level gradually.

A Safety Alert entitled "[Indoor Rowing is Good for You](#)" has been prepared and will be distributed soon, a copy is included with this report. This is intended for people who are training on indoor rowing machines at home.

### Incidents when training indoors

Two incidents were reported when rowers were injured when training indoors. In one, a rower was doing step-ups and stepped back onto a water bottle. The rower was taken to hospital, was diagnosed with a broken metatarsal, and will not be able to put weight on affected foot for about 6 weeks.

In another incident a rower tripped on a slider (that the indoor rowing machine was placed on) causing a wound to her leg that required hospital treatment. She will need to return to hospital for further dressing/treatment

Please advise members to take extra care and to keep the area where they exercise tidy. At this time, hospitals have more important things to do than to treat easily avoidable injuries.

### **Check the shoes, not just the heel restraints**

A 2x with a beginner crew capsized and one of the rowers had difficulty in releasing a foot from a shoe. The heel part of the shoe was ripped. The shoes may have been too small for the rower but the condition of the shoe may have contributed to the problem. The rowers were rescued by the safety boat.

The faulty shoes have been removed from the boat. All the club's other boats equipment will be checked, and any faulty equipment will be replaced before the boats are used again. Rowers will be told again that they must check the boats before they go afloat.

### **Boats capsize at frontstops**

There were two incidents where boats capsized partly because they tried to take a full initial stroke.

In one incident, an octuple had a pair of sculls removed because one scull had broken. The remaining rowers then set off downstream stopped at the catch and capsized. The crew stayed with the boat until being picked up by the lifeboat that arrived remarkably quickly after being called by the coach.

In another incident, a senior 4+ capsized on slightly choppy water. The crew climbed on top of the upturned hull and then the cox used her mobile phone in a waterproof pouch to ring the PLA to report the capsize. A men's 8 were close by and stayed alongside for 5 minutes until a passing clipper, police launch and PLA boat came alongside to secure a rescue of the five rowers. The police launch kindly secured the boat and blades and took it back the half mile to the club. The crew was delivered safely to land; being taken the last 300 meters by the RNLI boat that had also attended. In future the crew will perform stationary starts with two half strokes and then two three quarter rather than immediately starting with full slide stroke.

### **Allergic reaction**

A rower suffered what was probably an allergic reaction when indoor rowing at a Rowing Club. She complained of pain in her eyes and tried to rinse them. This did not improve her condition and she was becoming quite distressed. Her eyes became swollen so that they were both closed, her arms and chest were blotchy, her hands were swollen and there was a tingling sensation in her throat. She was suffering from a rapid onset of the allergic reaction.

Someone at the club dialled 999, and took advice from the 999 call handler. This was to keep her sitting down, calm and to give her sips of water. A first responder arrived soon after and took over. An antihistamine was administered under the guidance and supervision of a paramedic. She was then taken to hospital by ambulance as a precaution. It is reported that later she was and recovering well.

The club should be congratulated for recognising and managing the rower's anaphylaxis so well. Members of the club kept calm, sought advice immediately, and followed that advice.

## Two boats swamped in the same place on the same day

In the first incident, a 4+ was swamped in rough conditions where the river meets the harbour mouth. The boat was beached, emptied, re-floated and rowed back to the boathouse.

Fifteen minutes later an 8 from the same club was swamped. The boat remained buoyant although under water. As crew manoeuvred it to return to the beach it encountered two incoming wave crests which caused the boat to snap. The boat remained attached through the backstay of a rigger. All 8 were able to row slowly and gradually back to shore as conditions improved closer to the beach.

## Watch Videos when you train indoors

Rowers can easily watch training and technique videos on their smartphones when they are using their Concept2 machines. Simply fit a Smartphone cradle on top of the monitor and fit the smartphone into the cradle. The cradles are available [here](#) and cost £5 plus shipping.

There are good videos on the British Rowing Go Row Indoor site as follows:-

- [British Rowing Technique](#)
- [Go Row Indoor 20 minute workout class](#)
- [Go Row Indoor 20 minute workout #1](#)
- [Go Row Indoor 20 minute workout #2](#)
- [Go Row Indoor 20 minute workout #3](#)
- [Go Row Indoor 20 minute workout #4](#)
- [Go Row Indoor 20 minute workout #5](#)
- [Go Row Indoor 20 minute workout #7](#)

Take care to start each video at the beginning.

The Go Row Indoor Workout page can be accessed using the QR code opposite.



## News from the RNLI

The Royal National Lifeboat Institution has curtailed its face to face Lifejacket Clinics for the duration of the pandemic and has issued a video on [How to Check and Maintain Your Lifejacket](#). Please refer to this video and check any lifejackets that you have at home.

## Capsize Drill questions

There were two enquiries about the capsize and recovery drill. In one the question related to doing the drill in a river rather than in a pool as it was felt that doing it in the river was more realistic. The response was that it all depends on the conditions where you row and the content of the drill. Providing the capsize drill on the river covers:-

- getting free of the boat
- getting out of the water and
- getting off the water

then it should be OK. Getting out of the water generally means getting climbing on top of the inverted boat.

If the river is narrow and shallow then wading ashore may be sufficient. Swimming with the boat is rarely a good option but climbing on top of the boat and using the hands to paddle to safety is always good. If buddy rescue is also practised (both rescuing and being rescued) then that would be perfect.

The other question was based on the difficulty of completing a capsize drill with 100+ first year rowers at a school, using a swimming pool. The process currently followed is for the drill to consist of two phases - one where boys capsize without blades (with two boys in the water to supervise), then a second phase where they simulate a real capsize with blades. The key point of emphasis is that in almost all circumstances boys must stay with the boat after a capsize. The aim of the drill is to give boys confidence in the event of a capsize (both when underwater and when in the water after a capsize).

It was recommended that rowers are encouraged not to swim with the boat, this may be safe in the pool but is dangerous under real rowing conditions.

There is further guidance in section 3.7 of [RowSafe](#).

At our most recent Capsize and Recovery course we had a former Greek National Rowing Squad athlete who weighed about 130kg. He was concerned that he may be too heavy for the 1x that we were using. He was so heavy that he would not be able to row far in it but it did support him in the water (although it was largely swamped), he was able to complete a buddy rescue, and then capsize the boat and climb onto the inverted boat and paddle it with his hands. There was no damage to the boat.

## Online Safety Training Modules

The links to the free versions of the four online safety training modules no longer work. This is because the new version of RowHow does not allow direct access to these modules. BR members can find them by signing into RowHow and selecting Online Training, Safety. Non-members can access the training by creating a free BR account.

The Safety Page of the website is in the process of being updated.

## Coach with Epilepsy

A rower who has epilepsy who has rowed for four years, would now like to coach. She is on medication to control her epilepsy and understands that she cannot row. She would like to coach from a launch driven by someone else. She would wear an auto-inflation life jacket whilst being a second person in a high sided launch.

The response was that there is Medical Panel guidance on Rowing and Epilepsy [here](#). This advice is also contained in section 8.6.2 of RowSafe [here](#).

As far as coaching from a launch driven by someone else is concerned then she should consider the safety implications. In effect, this means that she should do her own risk assessment. Factors to take into account should include:

- the advice on coaching afloat from your doctor or medical team (if they advise against it then follow that advice)
- the extent to which she can tell that she is going to have a seizure, can she get herself into a safe place in the boat in time?
- the frequency of her seizures
- the "severity" of her seizures, are they "grand mal" seizures, "petit mal" seizures or "absences" or something else
- the ability and willingness of the launch driver to cope if she have a seizure afloat
- the type and fitting of her lifejacket (see below)

The lifejacket may become a critical piece of equipment. I understand that people having an epileptic episode tend to exhale and therefore become less buoyant. Please ensure that the lifejacket is:-

- automatic but **not** one with a hydrostatic (pressure based) firing mechanism (these inflate when they are a metre or so below the surface)
- provides 150 Newtons or more of buoyancy
- in good condition (please see the Safety Alert entitled "Check your Lifejacket" [here](#))
- correctly fitted (please see the Safety Alert entitled "Lifejackets" [here](#))

## Lights in daylight

In a previous monthly report, I stated that:-

*'It had also been suggested that lights were an alternative to hi-vis kit; this is not the case. Lights work well in the dark and reduced visibility but not in daylight. Hi-vis is intended for daylight and dusk. Use lights and wear white above the waist if it is dark.'*

It has been suggested that flashing lights can be highly effective in daylight and a useful addition to the wearing of hi-viz kit. These are readily available as accessories for cyclists but may need to be used on their brightest setting. Lights with a 'Daylight Flash' strobe effect, can be very effective.

There was also a comment on an incident report explaining that wearing white above the waist at night also aids conspicuity.

## Work with the CPGA

The Cornish Pilot Gig Association will hold a Virtual Rowing Championship following the decision to cancel the World Pilot Gig Championship and its advice to suspend all gig rowing activity, at all levels, as a result of the COVID-19 pandemic. The Virtual Rowing Championship will provide a focus for gig rowers and help them to maintain both their physical and mental health.

Information was provided on the recent cardiac arrests (or serious cardiac arrhythmias), including the one in March, when indoor rowing and the following advice was also provided.

*“I do not want to recommend that everyone buy an AED just in case they collapse but if they are using a gym (if they can find one that is open) or other location where AEDs are available then it may help if a friend knows where it is. It would be much better to focus on prevention rather than treatment. I have been taking advice and doing some work and the preliminary advice is for rowers to build up to a big event rather than try to deliver an exceptional performance on the day. Overexertion by rowers who have not acclimated to intense indoor rowing can be dangerous. I will probably expand on this in my next Monthly Report.*

*There is some guidance in the [Safety Alert](#) distributed last month. This links to progressive training plans on the British Rowing Indoor Rowing website. Please feel free to share this with your clubs and their members. “*

## Support for Incident Reporting

There was a suggestion that clubs who report the most incidents should not be congratulated for doing so because they were thought to be the most unsafe clubs. This is clearly misguided thinking.

We reward the clubs that report most incidents because we regard the reporting of incidents as a "good thing". Clubs that report the most incidents are recognised in this way because they have developed a culture where it is OK to share their issues openly so that others may learn from them. We would like all clubs to develop a similar culture.

I worry more about the clubs that do not report incidents because they have not developed a culture of openness and sharing. In my view, the least safe clubs are those that are not willing to share and those, if any, who would prefer to hide their issues. Reporting enhances the ability of all of us to learn and improve.

This issue was discussed briefly at a National Rowing Safety Committee meeting and there was strong support for the view that we should continue to encourage reporting and continue to reward the clubs that report most incidents.

## RowSafe 2020 update

The 2020 updates have been defined and provided so that the web version of RowSafe 2020 can be prepared. A presentation has been prepared describing the changes, this is included with this report and will be displayed in due course on the RowSafe page of the website. New versions of RowSafe are usually published in April but this year's may be a little late as this is an exceptional year for us all.

## Carbon Monoxide (CO) in the Kitchen

There was an enquiry about a club that had undertaken a Gas Safety check for the building, having installed a new gas cooker. This resulted in a Warning Notice for exceeding the acceptable CO limit by 10%. Also the Engineer would not consider the kitchen as being for domestic use. As a result the failed on the extraction system not having a statutory auto interlock. The club is taking steps to resolve the problem.

This is not a topic that I often get involved with. I agreed to research this and include the relevant advice in the Club Hub Safety Guides.

## Master Trainers

There was reference in last month's report to a Master Trainer. This is a senior member of a gym's training staff and not a trainer of aged rowers. Master Trainers provide support and advice to other trainers in gyms and to gym users on fitness in general and on the safe and effective use of the equipment in gyms. British Rowing has provided extensive training on Indoor Rowing to Master Trainers.

## WAID database research

I was invited to contribute to a Water Industry Database (WAID) research project by being interviewed online. WAID is a service developed by the [National Water Safety Forum](#). The [published annual reports](#) and [UK Drowning Prevention Strategy](#) are based upon the WAID dataset. The database focusses on drownings in UK inland and coastal waters.

“Drowning” is interpreted to mean death associated with immersion in water and includes deaths due to hypothermia due to water immersion. In 2018, the latest year for which data are available, there were 585 deaths of which 243 were suspected to be accidental and 232 were suspected suicides.

British Rowing does not contribute data to the WAID database because we have had no deaths in the water since March 2015.

The interview focussed on:-

- The British Rowing incident reporting system,
- The willingness of people to use the system,
- The blame free culture that British Rowing has developed,
- The analysis of data from the incident reporting system,
- The publication of these data and the analyses,
- The use of this information to identify opportunities for improvement,
- The publication of HRSA Monthly Reports and Safety Alerts,
- The training for rowers and coaches on cold water immersion and hyperthermia,
- The training of rowers on how to avoid capsizes and what to do if they do capsize,
- The use of lifejackets by coxes, people in launches and non-swimmers, and
- The contribution made by rowers in saving the lives of non-rowers who would otherwise drown.

## **We need your help**

With most rowing activities suspended, we now have time to think. We need your ideas.

Every year we analyse the incidents and come to the same conclusion. This is simply that most rowing incidents that cause harm are caused by at-risk behaviours. Can you please suggest ways in which we help people to improve their behaviour.

The type of behaviours that we need to encourage are:-

- Keeping a good lookout in all directions at all times
- Adhering to the circulation plan and staying in the right place on the waterway
- Checking the boat before going afloat
- Wearing hi-vis clothing
- Using appropriate lights at night
- Keeping the landing area and the boathouse tidy

Please feel free to suggest more.

We have tried to deal with the notorious “cox’s blind spot” excuse by adding the advice for coxes to ask rowers when their view is obstructed. This is included in RowSafe.

If there is anything that you would like to suggest then please write to [safety@britishrowing.org](mailto:safety@britishrowing.org). There will be prizes for the best ideas.