



Honorary Rowing Safety Adviser Monthly Report

March 2025

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TEAMWORK | OPEN TO ALL | COMMITMENT

Tragic death of a rower in a Head Race

A rower collapsed during a head race and was taken ashore. The rower was given CPR. It is understood that the rower received four shocks from an AED.

The investigation is not yet complete so many of the details are not known but it is thought that this was a medical incident rather than a racing incident.

There are announcements on the British Rowing website here [Incident: Vesta International Masters Head of the River Race - British Rowing](#) and on the Competition website here [Vesta Rowing Club](#).

Rowing Coach saves a person attempting to take their own life

A British Rowing Satellite Coach noticed some ripples on the water below the embankment and checked and found a person in the water about five metres off the landing steps. The person was fully clothed and struggling to stay afloat. A backpack and coat had been left on the steps. The coach rushed to the water's edge and shouted encouraging them to swim back to the shore. The coach extended their arm but could not reach the person. The coach walked into the water until it was knee deep and was able to reach the person and pull them in. By this stage the person was sinking but still conscious.

The action by the coach to reach and enter the water until it was knee deep was quite correct. In these circumstances, if you cannot reach then look for something that you use to reach the casualty. Do not put your own life in danger.

The person was emotionally distressed and immediately said they had tried to take their own life. The coach provided reassurance and some Mental Health First Aid and warming and called the emergency services. Police and Ambulance attended, and the person was taken for physical assessment at A&E. They were also admitted for further psychiatric help.

It is not unusual for rowers to encounter people who are having mental health crises or who enter the water in an attempt to end their own lives and it is not unusual for rowers to find dead bodies in the water. The final item in last month's HRSA [report](#) describes such an incident. A rescue of a person who attempted to take their own life was described in the [November report](#).

If you see someone who you think may be contemplating taking an action that would put their own life at risk, then please try to engage them in conversation. This does not have to be deep and meaningful, just start to talk about the weather or say, "Do you know where I can get a coffee?", or simply ask if they are OK, anything will do. There is guidance on how to do this in the videos here [Suicide Prevention Day Take a minute save a life](#) and [Samaritans launch campaign to prevent rail suicides](#) and on the webpage here [How to start a conversation with somebody who needs help | Small Talk Saves Lives | Samaritans](#).

There is also information about the NHS supported programme "Zero Suicide" here [Zero Suicide Alliance \(ZSA\)](#) and in the video here [Zero Suicide Alliance training](#).

Incidents in March

Dealing with anti-social behaviour

A member of the public approached an assistant female coach as club members were packing up and started shouting abuse. This person later returned and continued swearing and being abusive in the presence of juniors.

In another incident, a rower from another club requested help and support from the launch drivers returning to their club because they were being harassed by an apparently intoxicated motorised fishing boat driver.

After a while spent trying to calm the situation down, the Police were called but the boat driver left the scene. The Police arrived shortly after and took a statement from the rower and several witnesses. The rower returned to the water and rowed back to their base and a watch was kept on the river, but the driver did not reappear.

Club members were notified and advised to remain respectful to other users of the river, keep a watch for fishing lines and stay clear of them. Anyone witnessing any abusive behaviour, was advised that video or pictures are useful, but the primary imperative is to keep yourself safe.

A Police report was filed, and this included photos and video.

In a further incident rowers in a 2x and 1x were approached and followed for over three km by an apparently drunken and aggressive person in a high-powered fishing boat. The person was swearing and threatening the rowers and then drove off after circling and washing the rowers down very badly. This person then saw the 1x again and followed it for five km to where the single docked at the rowing club. The person then came ashore where he physically threatened boat club members. The police were called.

The club issued the following message its coaches and juniors: -

***3 R's; Don't REACT, REMOVE yourself from situation,
REPORT to CRSA, EA, Police etc.***

Do not train if you are unwell

A rower felt dizzy after completing an indoor rowing session. They fell to the floor and were offered first aid. The rower was conscious and responsive throughout. They were helped to a seated position and a cold compress was applied to the back of their neck. After the incident the rower explained that they had been suffering from a virus for the past week.

The advice in [RowSafe](#) is to discourage rowers from taking exercise when they are ill as the disease may spread or worsen. The general advice is: -

- If you do not feel well, do not exercise to make yourself feel better.
- If you are unwell and wish to train or compete, you should seek medical advice.
- If you are uncertain, do not train or compete.

Rowing or training when suffering from a virus infection (respiratory or gastro-intestinal tract) could not only put yourself at risk but could put others at risk by spreading the virus.

Protection upstream of weirs helps rowers.

Last month I wrote about a 4x+ *was being held broadside on across a weir on one side of the river, their boat was being pressed against the large green buoys.* This month the same line of buoys protected a 1x who was pulled towards the weir and became fast against buoys. The rower remained calm and upright and was recovered using the safety launch.

In another incident at a different location an 8+ and an 8x+ were swept onto the barrier of the weir, side by side. They were assisted by four coaches in two launches.

The protection upstream of a weir can protect rowers but the advice remains: -

Always keep well clear of Weirs

Sickness following exposure to contaminated water

There were at least five reports this month relating to sickness following exposure to contaminated water. As one reporter said, *"this problem has not gone away, and it may be becoming more common"*.

These reports are valuable to us as they help us to make the case for clean water. Please encourage rowers to always take precautions of washing hands, showering and washing down equipment after rowing and please also encourage them to report any sickness that they think is due to exposure to contaminated water.

Take care to ensure that boats are checked before they go afloat

Control Commission checks found that two boats from the same club had defective heel restraints. They were fixed before crew was permitted to boat.

In another incident the bottom nut on a 2- fell off a gate while waiting in the spinning area at the head of the river. The crew managed to get ashore at a landing but couldn't find anything to repair the boat so pushed off to try and row to another landing. The gate then became detached from the rigger and the crew capsized.

Please ensure that boats are checked before they go afloat.

Take Care not to include names in Incident Reports

There have been occasions where names have been included in Incident Reports. Please take care not to do this unless you would like to praise a particular individual. The inclusion of names does not help us to identify lessons we can learn and could be an issue under GDPR. The inclusion of the names of Juniors would introduce safeguarding concerns. However, please feel free to include boat names and numbers, this is not personal information.

Take care to keep your seat

A cox in an 8+ stood up to shout a warning to another other 8+. The cox then fell in, damaging the rudder yoke and snapping the cable while doing so. Please encourage coxes not to stand up when coxing.

Take Care when overtaking

A cox in an 8+ was pulling out to overtake another crew when they saw another crew on the other side of the river (so moving in the opposite direction) also moving into the middle of the river to overtake a crew. Both crews in the middle pulled blades in to avoid contact but there were still some blades clashing.

Rather than pulling in blades it would be better to maintain a better lookout and think ahead. Do not move out unless you know that it is safe to do so.

Take care to learn from your incidents

There was a collision between a 4x and a paddle boarder who was with two others. The Paddle boarder was knocked off their board and fell into the water. This was followed by good natured discussions between the crew and the paddle boarders to identify how they could both improve to avoid future incidents. The rowers identified the need to keep a better lookout, and the Paddle boarders learned how to keep informed of the times when the rowers would be afloat.

Take care to encourage rowers to keep a better lookout

An 8+ collided with a 15ft aluminium safety boat during a head race. The safety boat was moored to a well-marked hazard. The crew of the 8+ did not see the launch and headed directly towards it. The crew was warned by loud hailer, unaided voice and safety horn on board the safety boat but did not respond. The crew finally responded when they were half a boat length from the launch. Unable to stop, their bow went under the launch.

In another incident there was a head on collision in the middle of the river due to each crew not seeing the other in time. There were several other mid-river collisions this month. Please encourage rowers to be more aware of their position on the river and to keep a better lookout.

In a further incident a 4x paddling at half pressure, rowed into a stationary launch. The steersperson of the 4x failed to look around. The launch driver was filming another crew from a stationary position. There were no injuries but there was serious damage to bow section the 4x, likely to cost thousands to repair.

Take care to concentrate on what you are doing

When unloading weights from a small bar on a bench press apparatus, a rower was distracted and had not realised the bar was unsecured and nobody had hold of the bar. The bar tipped up and weights fell off the bar onto the floor, narrowly missing the rower's foot. Please encourage rowers to take more care.

Take care with your wash

On several occasions, on different days, a rowing club launch driver drove at full speed past several crews including fine singles. This caused boats to be partially swamped. The driver, who is RYA qualified, was spoken to and warned about their dangerous driving.

Take care with older launch drivers

Towards the end of an early morning school coaching session, the driver of one of the launches (crewed by two octogenarians) suffered a fainting episode. The other person in the launch took control, moved the driver to the passenger seat and brought the launch back to the landing stage. By this time the driver had regained consciousness, was helped out of the launch and into the club house, given sweet tea and made comfortable. The driver confirmed that they had not had breakfast.

The club concluded that this driver will not drive a launch unaccompanied and that launch drivers will wear auto-inflation life jackets rather than buoyancy aids

Register your Defibrillator

Last month I reported on the number of Clubs that have ready access to a defibrillator. It was very pleasing to note that 88% of rowing clubs have ready access to one.

However, this month I have been checking on registrations with [The Circuit](#), this feeds information into [Defibfinder](#), all under the aegis of the British Heart Foundation. I have checked about a hundred potential locations, and I have found only two rowing clubs that have registered their AEDs, and one of those clubs is mine.

[The Circuit](#) is the national defibrillator network that provides a national overview of where defibrillators can be found. At the moment, many defibrillators never get used because emergency services don't know where they are or how to access them. This can cost lives and that is why this new infrastructure is so vital.

The emergency services have access to this information. If their support is needed, perhaps following a 999 call, then they will know where the closest AED can be found. The access code to publicly available AEDs can be found by dialling 999.

Please go to [The Circuit](#) and take a couple of minutes, and that is about how long it takes, to register your defibrillator. This service is provided free of charge.

Support available from the RNLI

A Regional Rowing Safety Adviser (RRSA) wrote to say that they had arranged for the local RNLI to give a on float to live, cold water shock and hypothermia. It was subsequently found that RNLI Water Safety officers and advisers are all around the country, any rowing club can email Water_Safety@rnli.org.uk and ask for visit, this could be advice like above, or Lifejacket Clinics, or Throw Bag training.

Anaphylaxis

Last month I wrote about protecting a rower with a nut allergy. This was followed by email exchanges and a request that I publish information on recognition and the immediate care for a person suffering from an allergic reaction or anaphylaxis. Anaphylaxis is a severe, potentially life-threatening allergic reaction often involving difficulty breathing, a drop in blood pressure, and skin reactions, that can develop rapidly and requires immediate medical attention,

Adrenaline Autoinjectors (AAIs) are designed for self-administration. People needing them should have their own. However, people needing an injection from an AAI may, occasionally, need help to inject themselves. The administration of a single AAI dose may not be sufficient as its benefits may last for typically five to ten minutes, and a second dose may be required. Current guidance from the Medicines and Healthcare Products Regulatory Agency (MHRA) is that anyone prescribed an AAI should carry two of the devices at all times.

AAIs are also known as “EpiPens” or “Next”, these are both manufacturers’ names. Adrenaline is also known as Epinephrine. There is further information in a video here [Adrenaline auto-injectors \(AAIs\): new guidance and resources for safe use - GOV.UK](#).

If you do have to help someone by using their AAI, then follow the instructions on the device. There is more information in the videos here [How to use your EpiPen - YouTube](#) and here [Dr Zoe Demonstrates How to Use an EpiPen | This Morning](#).

The advice is: -

“Always give an adrenaline auto-injector if there are ANY signs of anaphylaxis present.

You should administer the person’s own AAI if available, if not use the spare AAI. The AAI can be administered through clothes and should be injected into the upper outer thigh in line with the instructions issued for each brand of injector.

IF IN DOUBT, GIVE ADRENALINE

*After giving adrenaline **do NOT move the person**. Standing someone up with anaphylaxis can trigger cardiac arrest. Provide reassurance. The person should lie down with their legs raised. **If breathing is difficult, allow the person to sit.***

If someone appears to be having a severe allergic reaction, it is vital to call the emergency services without delay – even if they have already self-administered their own adrenaline injection and this has made them better. A person receiving an adrenaline injection should always be taken to hospital for monitoring afterwards.

ALWAYS DIAL 999 AND REQUEST AN AMBULANCE IF AN AAI IS USED.”

ANAPHYLAXIS SYMPTOMS AND ACTIONS SHEET



Visit us at:

www.allergyuk.org

or call our Helpline on:

01322 619 898

Anaphylaxis (pronounced ana- fill - axis) is a medical emergency, common causes of anaphylaxis include food, wasp/bee venom (stings) and medication. Recognising the signs and symptoms early and treating quickly with the medicine 'adrenaline' is vital to save life.

Symptoms

Signs of a severe allergic reaction (anaphylaxis) include **one or more of the following symptoms**:



Airway:

- Swollen tongue
- Difficulty swallowing
- Throat tightness
- Change in voice (hoarse/croaky)



Breathing:

- Difficulty breathing
- Chest tightness
- Noisy breathing
- Persistent cough
- Wheeze



Circulation:

- Feeling dizzy or faint
- Collapse
- Loss of consciousness
- Pale and floppy (in babies/small children)

ACTION

Give Adrenaline - If you suspect someone is having a severe allergic reaction, give adrenaline **WITHOUT DELAY** - if available. **IF IN DOUBT, GIVE ADRENALINE!**

How to use your Adrenaline Autoinjector device

Epipen - <https://www.epipen.co.uk/en-gb/patients>

Jext - <https://adults.jext.co.uk>

Position

Lie the person flat with legs raised, if breathing is difficult allow to sit with legs raised. **Do not stand the person up!**



Call for help

Dial 999 for an ambulance and state anaphylaxis (ana -fill- axis) to get medical help as soon as possible

Management

Stay with the person having the allergic reaction until medical help arrives.

If there is no improvement after five minutes and another adrenaline autoinjector (AAI) is available, a second dose of adrenaline can be given ideally in the other leg.

If a person has an allergic reaction that requires adrenaline, they should always go to hospital for further observation and treatment e.g. additional doses of adrenaline.

Adrenaline

Adrenaline is an emergency medicine used to treat a severe allergic reaction. It works quickly to reverse the symptoms of anaphylaxis by reducing swelling, opening up the airway and improving blood pressure.

Antihistamines should never be taken instead of adrenaline in the case of a severe allergic reaction. If asthma and symptoms of a severe allergic reaction occur at the same time then adrenaline should always be given first and the asthma relief inhaler afterwards.

AAIs are prescribed by a doctor for those at risk of a severe allergic reaction based on an individual's needs. They are designed to be user-friendly and to be used by anyone that has been trained

It is important to know how to use the type of AAI you have been prescribed.

This can be found here [Anaphylaxis-Symptoms-and-Action-Sheet-6.pdf](#)

[This report contains safety guidance. Please read our safety message and disclaimer.](#)

Take Care not to harm Swans

Concern has been expressed that rowing boats can disturb and even injure swans. Information for rowers, coxes, coaches, and club and competition officials has been provided on the British Rowing website here [Swans and Rowing - British Rowing](#). This includes information on: -

- The law
- Understanding swan behaviour and
- Safety measures for rowers

Please take care as some people feel very strongly about the threat that they think rowers pose to swans, as can be seen here [Hammer-wielding man arrested after bringing Cambridge Christmas boat race to a halt](#).

When do rowers need buoyancy aids

I was asked when new rowers, juniors and adults, might stop wearing a buoyancy aid as RowSafe suggests this might be when you have good understanding of their swimming and floating ability or when they have performed a capsize drill.

The response was that we are keen that rowers are confident in the water and able to float. Clubs may also want them to be able to swim. This all depends on the club's risk assessment.

Anyone who asks to use a buoyancy aid, or whose parents ask on their behalf, should be provided with one.

If an adult turns up and declares, usually by ticking a box and signing a form, that they can float or swim then the club may choose to accept that. Older adults may well believe that they can swim but it may have been so long since they did so that they will be surprised how difficult they will find it. Ask them when they last went swimming.

In the case of juniors this is not so easy, parents may be tempted to declare that their children can swim just to get them accepted. The easiest way to deal with this is to get them all to wear a buoyancy aid when afloat until they have demonstrated their ability to float or swim.

The government targets are that by the end of Key Stage 2, pupils should be able to swim competently, confidently, and proficiently over at least 25 meters, use a range of strokes effectively, and perform safe self-rescue in different water-based situations.

However, there is detailed, and worrying, information here [Playing all the Right Notes - Going Horizontal](#) about the extent to which people really can swim.

What to do with long hair

I was asked for more detailed information about the need to tie up long hair. The recommendation in RowSafe is to *ensure that hair, if long, is tied up into a bun or “top knot” such that it does not interfere with rowing and cannot be entangled in the equipment in the boat.* This follows the learning from the incident in Limerick in 2019 when a young rower was held underwater as her long hair became entangled with the rigger of her capsized boat.

Having consulted British Rowing staff who have long hair, as I know very little about hairstyles, the recommendation is: -

If your hair is long enough to plait, then reduce the risk and plait it or put it in a bun or top knot

Trailer Inspections

I was asked whether there is a requirement for a trailer to have a MOT test. The response was that I checked and there is no requirement for annual MOTs on the lightweight trailers normally used for boat transport but there is a requirement to ensure that they are in good condition. I found a Trailer Service and Repair Manual from a commercial company here [Microsoft Word - Covers KF082B.docx](#).

There is a requirement for MOTs on trailers with an unladen weight of more than 1,020kg with powered braking systems (instead of standard overrun brakes and as well as the required parking brake). There is more information here [Get an MOT for a heavy goods vehicle \(HGV\), bus or trailer: Overview - GOV.UK](#)

The Terrorism (Protection of Premises) Bill

This Bill, also known as Martyn’s law, has completed its passage through parliament and will probably become law in a few weeks, however, it probably will not “come into effect” for two years. The Act is intended to ensure public premises and events are better prepared for terrorist attacks and ready to respond. It will require them to take reasonably practicable actions, to mitigate the impact of a terrorist attack and reduce physical harm. The basic requirements apply at premises where it is reasonable to expect that between 200 and 799 individuals may be present at the same time. There are enhanced requirements for larger events.

There is more information on the British Rowing website here [Information for rowing clubs and competitions about the Terrorism \(Protection of Premises\) Bill - British Rowing](#) and the Home Office factsheet here [Martyn’s Law Factsheet – Home Office in the media](#).

Safety Management and Safety Leadership Training

During a recent holiday abroad, Training on Safety Management and Safety Leadership was presented to local and regional organisations. This was well received. Prospectuses for this training are available. Please contact me at safety@britishrowing.org if you would like more information.

Clubs sharing facilities and boats

I was asked about the responsibilities that a club may have if a school is operating out of the club's boathouse. There was concern that the pupils were going afloat in conditions where club members would not be able to go afloat.

The response was that this is quite difficult and may depend on the relationship the club has with the school. It would help if the club had a written agreement with the school that defines the relationship between the school and the club.

If the club simply allows the school to use space in the club buildings for the storage of their own equipment and to use the club facilities (changing rooms, landing stages, pontoons, etc.) but the club does not permit the school to use its boats or launches then there are, in effect, two separate organizations each with access to parts of the same facility.

If, however, the school operates under any of the club's policies or use the club's boats or launches, etc. then the club can stipulate that they do so following the club's rules.

In either case you can insist that they keep the areas that you both use clean and tidy, particularly the gym.

If the club, is not comfortable with the way the school manages its activities then the club should make this clear to them, particularly at times when the arrangements are reviewed.

There was also a question about liability, particularly in relation to launch engine failure. The response was that this is difficult, and the club may need to refer it to its insurers. My advice was to look at the agreement and hope to be able to use that to identify who has responsibility for launch (and engine) maintenance and condition.

The coke fallacy

A Regional Rowing Safety Adviser (RRSA) wrote to say that they reviewed a Club Risk Assessment which in the section on swallowing canal water says under "What further action is necessary". - "Inform participants of any issues and to wash hands thoroughly with antibacterial soap and then drink a can of coke after the outing." The RRSA wanted to check that drinking a can of coke (other fizzy drinks are available) is urban myth and has no benefit?

The RRSA was absolutely correct, this is a complete fallacy and drinking coke, for this purpose, will have no beneficial effects, however, hand washing is essential.

Problems with tiles on your pontoon?

A rower wrote to explain the problems his club has been having with their pontoon. This rower has been working on a solution. If you have a pontoon with tiles that look like this and if you have been having problems with broken tiles, then please let me know and I will put you in touch. Please contact safety@britishrowing.org

