



FULHAM REACH BOAT CLUB
EST. 2014

EMERGENCY RESPONSE PLAN

1. Introduction

Fulham Reach Boat Club's (FRBC) Emergency Response Plan states what is to be done in the event of an emergency. An emergency could arise during a session or competition and can be for a participant, a coach, an official, a spectator, or even a member of staff. This plan can be given to every person who may be involved in handling an emergency to ensure a coordinated and effective response.

An emergency response should include the following:

1. Personnel involved in dealing with the injured person/people.
2. Who will call Emergency Services?
3. Who will get emergency supplies, if needed?
4. What supplies are available, where are they kept?
5. What type of communication is available and where it is located.
6. If other medical personnel is available, and when they are available. If present at the competition, they should be able to see and communicate with athletic trainers.
7. Address of Fulham Reach Boat Club.
8. What the chain of command is.
9. What gates or doors need to be unlocked and who will unlock them.
 - a. Will these gates be unlocked for all sessions, or only if needed.
 - b. Who has access to these keys?

2. Maintenance of Equipment & Supplies

Anyone who may be asked to assist in an emergency should be qualified to use emergency equipment and should also be well versed and follow National Health standards on blood-borne pathogens and disease prevention transmission. They must know how to perform basic CPR and first aid and know where emergency supplies are stored.

Equipment and supplies should be checked regularly to make sure that they are still in good working condition and will be available at each session. This has been scheduled to be checked every month in the 'Boat Club' Calendar. If supplies appear to be damaged, not working, or are not available at that time, they should be replaced and reordered immediately.

3. Utilisation of Emergency Personnel

Emergency personnel should be told of their roles beforehand so that if an emergency arises, everyone knows exactly what they are supposed to do. The most qualified people should be helping the person/people who are injured, while the less skilled people should be given the jobs of calling Emergency Services, getting emergency supplies, opening gates or doors, flagging down the ambulance, crowd control, and whatever else needs to be done at that time.

4. Emergency Medicine

It should be known who is in charge of a situation and who is trained to assist.

Emergency equipment should be present and in good working condition. All coaches are trained in how to use equipment properly.

Emergency information on all athletes should be present at all sessions (contact the teacher on site if this is a school group attending or use the school contact sheet located by the office phone). Certification in CPR, first aid, and prevention of disease transmission refresher days should be done annually.

5. Emergency Capsize Response

1. Rescue and assist the participant in getting back into the boat.
 - a. In any scenario with or without a coach, a boat larger than a double that has capsized you should call the RNLI for assistance immediately. This applies to any scenario with more than two people in the water.
 - b. In a capsize or someone falling off the pontoon there is only a matter of minutes before they can become trapped under the pontoon or swept with the current onto Hammersmith Bridge north buttress during a flood tide, or on to the private pontoon and wharf wreck. Call for assistance immediately.
2. Radio for assistance from another launch and the office to advise assistance required on the landing stage for potential hypothermic participants. If there is no response when radioing the office, call the office landline. All coaches should have this on speed dial.
3. Shuttle the athletes back to shore immediately. Radio/ Calling the office to advise of the situation including details of any medical emergencies that need to be attended to. (If the situation allows have a launch stay with the capsized boat to prevent other crews hitting it).
4. Determine if the emergency action plan needs to be activated. If so, designate another individual to activate emergency medical services (999) to be transferred to our closest Accident and Emergency Department at Chelsea and Westminster Hospital 369 Fulham Road, London SW10 9NH.
5. Treat the individual according to current medical practices.
6. When emergency medical services arrive, accompany or designate a responsible liaison to accompany the individual to the hospital.
7. Notify CEO and Safety Officer – Boathouse Manager Alastair Horn, and if a school pupil notify the Head of PE for the corresponding school. School contract details are located near the office phone.

6. Cold weather and recognition of cold-induced stress

Recognising early signs of cold-induced stress may prove to be important in preventing cold weather-related injuries. The following signs and symptoms are considered to be early warning signs:

- shivering
- abnormal sensation at the distal extremities (e.g. numbness, pain, or burning sensation)
- disorientation
- slurred speech

Signs & Symptoms of Common Cold Injuries	
<p>Hypothermia</p> <ul style="list-style-type: none"> • Shivering • Cold sensation, goose bumps, • confusion, numbness • Intense shivering, lack of • coordination, sluggishness • Violent shivering, difficulty speaking, • mental confusion, stumbling, • depression • Muscle stiffness, slurred speech and 	<p>Frostbite</p> <ul style="list-style-type: none"> • Pain • Burning • Numbness • Tingling • Skin turns hard and white • Skin starts to peel or get blisters • Skin starts to itch • Skin gets firm, shiny, and greyish/ yellow
<p>Mild Hypothermia</p> <p>As the core body temperature drops further, below 35 degrees Celsius (mild hypothermia), other more serious signs and symptoms may be evident. This includes;</p> <ul style="list-style-type: none"> • Skin feels colder than normal but may still be lukewarm. • Shivering. • Dehydration. • Mental confusion. • Poor coordination of voluntary movements (ataxia) – slurred speech, stumbling, clumsiness. 	<p>Chilblain</p> <ul style="list-style-type: none"> • Red or cyanotic lesions • Swelling • Itching, numbness, burning or tingling • Skin necrosis

<p>Severe Hypothermia</p> <p>When the core body temperature drops below 32 degrees Celsius, there are more serious signs and symptoms and the hypothermia may be irreversible in some situations.</p> <ul style="list-style-type: none"> • Skin cold to touch. • No shivering. • Reduced consciousness. • Low blood pressure (hypothermia). • Heart rate below 60 beats per minute (bradycardia). • Weak pulse. • Shallow breathing. • Muscle stiffness. 	<p>Immersion (trench) foot</p> <ul style="list-style-type: none"> • Burning, tingling, itching • Loss of sensation • Cyanotic/blotchy skin • Swelling • Blisters • Skin fissures • Situations where an athlete is exposed to cold-weather and would like to lay down and rest are considered by the • The emergency action plan should immediately be activated.
<p>As the core body temperature drops below 28 degrees Celsius, a person may be mistaken for being dead.</p> <ul style="list-style-type: none"> • Coma. • Absent pupil reflexes. • Faint pulse that may be difficult to detect. • Shallow breathing that may be barely detectable 	

Avoid the following actions:

- Do not put them in a hot bath
- Do not massage their limbs
- Do not use heating lamps
- Do not give them alcohol

7. Hot weather and recognition of heat stress

Any outdoor/on-water sessions conducted during heat waves or during extreme temperatures will be at the discretion of the coaching team. Temperatures above 30C carry a high risk of thermal injury. The health and Safety of participants is always our priority, therefore at the coaches discretion on-water sessions may be changed to an indoor session in an air-conditioned environment.

Recognition: Signs & Symptoms of Common Heat Injuries	
<p>Exercise-associated muscle (heat) cramps</p> <ul style="list-style-type: none"> • Dehydration • Thirst • Sweating • Transient muscle cramps • Fatigue 	<p>Exercise (heat) exhaustion</p> <ul style="list-style-type: none"> • Core temp above 40C • Dehydration • Dizziness • Light-headedness • Syncope • Headache • Nausea • Intestinal cramps/diarrhoea • Pallor • Profuse sweating • Cool, clammy skin • Weakness
<p>Heat Syncope</p> <ul style="list-style-type: none"> • Dehydration • Fatigue • Tunnel vision • Pale/sweaty skin • Decreased pulse rate • Dizziness • Light-headedness • Fainting 	<p>Exertional heat stroke</p> <ul style="list-style-type: none"> • Core temp (> 40degrees Celsius) • Dizziness • Drowsiness • Irrational behaviour • Confusion/disorientation/irritability • Loss of consciousness • Dehydration • Weakness • Hot and wet/dry skin • Tachycardia (100-120 bpm) • Hypotension • Hyperventilation
<p>Exercise-associated muscle (heat) cramps</p> <ul style="list-style-type: none"> • Stop activity • Replace lost fluids w/ high sodium drink • Mild stretching & massage • IVs must be ordered by physician 	<p>Heat syncope</p> <ul style="list-style-type: none"> • Move athlete to shaded area • Monitor vital signs • Elevate legs above head • Rehydrate
<p>Exercise (heat) exhaustion</p> <ul style="list-style-type: none"> • Measure core temp • Remove excess clothing • Cool athlete w/ fans, ice towels, or ice bags if temp > 38 Degrees Celsius 	

9. Dealing with violent behaviour or criminal activity

FRBC does not tolerate any violent behaviour or criminal activity.

Staff and members should not attempt to restrain a violent individual, but to move themselves to a safe place if possible. Police (999) should be called if the situation requires restraint and de-escalation. Should medical attention be necessary, either the on-site First Aider should be consulted, or emergency services should be called for the transfer to the Accident and Emergency Department at Chelsea and Westminster Hospital 369 Fulham Road, London SW10 9NH.

In the case of criminal activity:

- if the individual is on ROTL or RDR, the Prisons Manager must be informed so that the prison in question can be alerted, the arrangement be terminated and appropriate action taken
- if the individual is living in the community under licence having served prison time, the Prisons Manager must be informed, so as to alert the local Probation Service
- if no past criminal activity is known, then the case is to be directed to local Police (020 8563 1212)

10. Discovery of a body in the River

1. First response is to call 999 and ask for the coastguard, provide them with as much information regarding location as possible (landmarks etc.)
2. Do not draw attention to it if your participants have not noticed. Simply keep rowing past and radio our other coaches on the water and the office. To advise of discovery and location. Phone the office if radio not working.
3. Once away from body maintain position until the coastguard have arrived. This will reduce the likelihood of the crew seeing anything that may cause distress. If safety or weather does not permit then return to the pontoon.
4. Once on land speak to the teacher in charge separately to advise of the situation. Bring to teacher/guardian / parents attention any students / athletes that appears distressed.

11. Roles of First Responders

1. Immediate care of the injured person by applying First Aid.
2. Activation of Emergency Response Plan.
3. Establish if an ambulance needs to be called, if so designate an individual to call them immediately.
4. Designate an individual to notify the teacher onsite/ parent or guardian.
5. Caller will provide pertinent information (location of the injured person(s), what happened, how many people have been injured, nature of the injury, what aid is being provided, cell phone number and address of the club)
6. Emergency equipment retrieval.
7. Designate an individual to wait for Emergency Services, unlock and open all appropriate entrances, and direct to scene. The designated individual will be waiting for the ambulance outside the main door to FRBC (Fulham Reach Boat Club, Unit A, Distillery Wharf, Chancellors Road, London W6 9GX)
8. Designate an individual to limit scene to first aid providers and move bystanders away from the area.

This emergency response plan is not exhaustive, all staff are trained in emergency workplace First Aid however advice of a medical professional is always paramount and sought. The coaching and management team at FRBC will always refer an athlete to A & E or a Doctor should they feel the athletes' mental or physical wellbeing is at risk.