**Safety Plan Additions – Cold Water Immersion.**

**Working assumptions**

* *RTWC Member Clubs will have published their safety plan and risk assessments which are regularly reviewed.*
* *Safety Plans for all river users should contain advice regarding actions to be taken following CW Immersion*
* *Member Clubs will have their own strategies for ensuring members are risk aware and actions to be taken following an incident, in particular at induction.*
* *Member Clubs have notice boards where safety plans are displayed.*
* *All members have an entry fob.*

**Emergency Action Plan following cold-water immersion**

In the event of cold-water immersion

* Try to keep calm in the first minute and keep head out of the water away from the direction of wind/waves to prevent breathing in water and being unable to breathe **(cold shock response/gasp reflex)** which can last for a minute
* If out of your depth & unable to wade ashore following a capsize hold onto the capsized hull as a buoyancy aid & attempt to swim it to shore.
* If the water is cold, get as much of your body out of the water as soon as possible, draping yourself over the upturned hull (if necessary, turning over the hull for this purpose).
* If possible, "buddy-up"; holding on to each other until rescued to provide mutual warmth and support and to help ensure all are accounted for.
* Other boats in the vicinity should fetch help or a launch if one is available.

DO NOT ATTEMPT TO RESCUE FROM AN unstable boat in particular from a rowing scull - you are likely to tip over, putting more people in the water with no one to get help.

* Dial 999 if carrying a phone and ask for assistance (Police, Ambulance, Fire)

**Possible serious incidents associated with cold water immersion.**

The following gives guidance for recognizing and treating possible serious incidence associated with cold-water immersion.

**Hypothermia**

The symptoms of hypothermia depend on how cold the environment is and how long you are exposed for. Severe hypothermia needs urgent medical treatment in hospital. Shivering is a good guide to how severe the condition is. If the person can stop shivering on their own, the hypothermia is mild. If they cannot stop shivering it is moderate to severe.

**Mild Cases**

In mild cases, symptoms include:

* Shivering
* Feeling cold
* Low energy
* Discomfort at higher temperatures than normal
* Cold, pale skin

**Moderate Cases**

The symptoms of moderate hypothermia include:

* Violent uncontrollable shivering
* being unable to think or pay attention,
* confusion (some people don't realise they are affected),
* loss of judgment and reasoning,
* difficulty moving around or stumbling (weakness),
* feeling afraid,
* memory loss,
* fumbling hands and loss of coordination,
* drowsiness,
* slurred speech,
* listlessness and indifference, or
* slow, shallow breathing and a weak pulse.

**Severe cases**

The symptoms of severe hypothermia include:

* loss of control of hands, feet, and limbs,
* uncontrollable shivering that suddenly stops,
* unconsciousness,
* shallow or no breathing,
* weak, irregular or no pulse,
* stiff muscles, and
* dilated pupils.

Although hypothermia is defined as occurring when the body temperature drops below 35°C (95°F), mild hypothermia can start at higher body temperatures.

As the body temperature decreases further, shivering will stop completely. The heart rate will slow and a person will gradually lose consciousness. When unconscious, a person will not appear to have a pulse or be breathing. Emergency assistance should be sought immediately and CPR provided while the person is warmed. CPR is an emergency procedure, consisting of 30 chest compression followed by 2 rescue breaths.

**Defibrillator**

A defibrillator is installed in the Dry Area corridor adjacent to the single use changing rooms.

**Treating hypothermia**

As hypothermia can be a life-threatening condition, seek medical attention as soon as possible.

Hypothermia is treated by preventing further heat being lost and by gently warming the patient.

If you are treating someone with mild hypothermia, or waiting for medical treatment to arrive, follow the advice below to prevent further loss of heat.

Things to do for hypothermia:

* Move the person indoors, or somewhere warm, as soon as possible.
* Once sheltered, gently remove any wet clothing and dry the person
* Wrap them in blankets, towels, coats (whatever you have), protecting the head and torso first
* Your own body heat can help someone with hypothermia. Hug them gently
* Increase activity if possible, but not to the point where sweating occurs, as that cools the skin down again.
* **Rewarm the body slowly**
* If possible, give the person warm drinks (but not alcohol) or high energy foods, such as chocolate, to help warm them up
* Once body temperature has increased, keep the person warm and dry

It is important to handle anyone that has hypothermia very gently and carefully.

**Things you should NOT do:**

* Don't warm up using a hot shower, as this may send cold blood from the body's surfaces to the heart or brain too suddenly, causing a stroke or heart attack;
* Don't apply direct heat (hot water or a heating pad, for example) to the arms and legs, as this forces cold blood back to the major organs, making the condition worse
* Don't give the person alcohol to drink, as this will decrease the body's ability to retain heat
* Don't rub or massage the person’s skin, as this can cause the blood vessels to widen and decrease the body’s ability to retain heat. In severe cases of hypothermia there is also a risk of heart attack

**Near-Drowning**

The goal is to safely rescue the victim and begin first aid.

In a near-drowning emergency, the sooner the rescue and first aid begin, the greater the victim's chance of survival. Do not endanger yourself in rescuing the victim during this process.

Rescue options to reach the drowning victim in the water:

* Use a Throw Line
* Throw a rope with a buoyant object
* Use a long stick
* Bring a stable boat alongside the victim and tow the victim to shore.

Do not haul the victim into an unstable boat because it may cause the boat to capsize, and both of you will be in the water. Cold water may render the victim too hypothermic to grasp objects within their reach or to hold while being pulled to safety. As a last resort, you can attempt a swimming rescue if you are sufficiently trained in water rescue. Do not attempt a rescue beyond your capabilities, otherwise you may harm yourself.

For a swimming rescue, approach the person from behind while trying to calm the victim as you move closer. A panicked victim can pull you down. Grab a piece of clothing or cup a hand or arm under the victim's chin and pull the person face up to shore while providing special care to ensure a straight head-neck-back alignment especially if you think the person has spine injuries.

**First aid for a near-drowning victim**

The focus of the first aid for a near-drowning victim in the water is to get oxygen into the lungs without aggravating any suspected neck injury. If the victim's breathing has stopped, give 5 mouth-to-mouth rescue breaths as soon as you safely can. This could mean starting the breathing process in the water.

Once on shore, reassess the victim's breathing and circulation (heartbeat and pulse). If there is breathing and circulation without suspected spine injury, place the person in recovery position (lying on the stomach, arms extended at the shoulder level and bent, head on the side with the leg on the same side drawn up at a right angle to the torso) to keep the airway clear and to allow the swallowed water to drain. If there is no breathing, begin CPR. Continue CPR (30 chest compression followed by 2 rescue breaths) until help arrives or the person revives. Keep the person warm by removing wet clothing and covering with warm blankets to prevent hypothermia. Remain with the recovering person until emergency medical personnel have arrived.

**STRONG RECOMMENDATIONS:**

• Hypothermia is deadly quick at lower temperatures: so, risk assess, be risk aware.

•Consider buddying up with at least one other boat, or with the coach/safety boat.

•Always have your mobile phone with you if there is no coach boat, so that you can call 999 for help. Keep it in a zip-loc bag - then it won't sink!

**Key Telephone Numbers & Emergency Locations**

***Nearest A&E Hospital:***

***University Hospital Of North Tees. Tel: 01 642 617617 Fax: 01642 624089***

***Address: Hardwick Road, Stockton-on-Tees, Cleveland, TS19 8PE***

***Website: http://www.nth.nhs.uk***

***Email : communications@nth.@nhs. uk***

***You are located at River Tees Watersports Centre The Slipway, North Shore, Stockton-on-Tees TS18 2NL***

***All river users are advised to ensure they carry a mobile phone when on the water.***

***In an emergency call 999. Please state whether Police, Fire or Ambulance***