



BRITISHROWING

Honorary Rowing Safety Adviser Monthly Report

January 2023

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TEAMWORK | OPEN TO ALL | COMMITMENT

Successful Resuscitation in Mounts Bay

On the 6th December 2022, the Cape Cornwall Gig Club's training gig "Longships" was rowing in Mounts Bay off Penzance. It was towards the end of the outing when the rower, at 2, collapsed and fell backward off his seat into the bottom of the boat. He was lying supine with his lower legs in a raised position on his seat.

The rower sitting behind him at 1 (bow) immediately recognised that the casualty was not breathing and he started CPR without delay. The casualty was making gurgling, breathing sounds but the rower at 1 recognised this as agonal breathing and realised that immediate CPR was needed.

The cox, took control of the remaining crew and instructed them to row back to the harbour at best speed. The cox also alerted the emergency services and arranged for the emergency services to meet the boat on the slipway. Her calm manner and coordinated actions were pivotal to the successful outcome.

The rower at 1 continued to deliver effective CPR for a protracted time, (more than 10 minutes). Delivering effective CPR is an exhausting process that takes considerable effort. At no time in the gig boat was mouth to mouth given – the position of the casualty's head, underneath a seat, excluded this. Early in this process the casualty had a grey pallor and some cyanosis (blue tinge to the lips) but as the CPR continued, the rower at 1 noticed that the colour was returning to the casualty's face and his lips were becoming more pink. The casualty did not start normal breathing and remained unconscious throughout.

On arrival at the harbour, the crew drove the boat into the slipway and the casualty was quickly taken from the boat and placed on a nearby pontoon. Another member of the crew continued CPR and the rower who was at 1 then delivered mouth to mouth. The ambulance arrived a short time later and took over the care of the casualty. The ambulance crew applied their AED, which instructed them to deliver an immediate shock. The casualty's circulation immediately returned and he started breathing. The ambulance crew then provided oxygen by mask, and he was prepared for transfer by road to the waiting air ambulance for onward journey to Treliske Hospital in Truro. He was discharged 3 weeks later in time for New Year's celebrations with his family and continues making a full recovery from his ordeal.

The combined efforts of the rower at 1, the cox and indeed the whole crew in the gig that day gave the casualty the chance to survive.

Rowing is all about pulling together as a team and, in this case, the crew, working as a team, was able to save the life of the rower who suffered a cardiac arrest whilst in a gig boat at sea.

Factors that contributed to the success of this resuscitation

1 Instant Recognition

The rescuer recognised that the breathing sounds (gurgling) were Agonal breathing and knew that this is not effective in drawing air into the lungs. As a result he immediately started to deliver CPR.

2 The Casualty's feet were elevated

This would assist the delivery of blood to the brain. It is fortunate that the casualty landed in this position but it is not recommended that, when delivering CPR, the feet should be raised. It is best to focus on CPR and not waste time positioning the casualty.

3 The actions of the Cox

The cox acted promptly to call the crew to order, head for the harbour and its slipway at best speed and call for help. It is important to get the casualty ashore quickly. The fact that the boat was moving quickly would tend to make the boat more stable and tend to facilitate CPR.

4 Get the casualty out of the boat and on to land quickly

The crew removed the casualty from the boat quickly. It is best to be determined rather than delicate in these circumstances. Speed is important and any delay can be harmful.

5 Ventilation is an added extra

The use of mouth to mouth, in parallel with CPR, once ashore would also improve the probability of the casualty surviving and the quality of that survival.

6 Early use of an AED

The early arrival of the ambulance and the early use of the AED also helped.

Training in Basic Life Support

St John Ambulance will provide free first aid awareness sessions, see the website [here](#). They can be delivered online (e.g. via Teams) or in person.

There are free online resources provided by the [British Heart Foundation](#), and the [Resuscitation Council UK](#). Also try the Staying Alive Hands Only CPR training [here](#) and [here](#). Hands only CPR works, there is enough oxygen in the blood and muscles and other tissues to keep the casualty alive for at least 15 minutes, but it is important to ensure that the oxygenated blood is pumped to the brain.

BASIC LIFE SUPPORT STEP-BY-STEP

SEQUENCE/ACTION	TECHNICAL DESCRIPTION
SAFETY 	<ul style="list-style-type: none"> • Make sure that you, the victim and any bystanders are safe
RESPONSE Check for a response 	<ul style="list-style-type: none"> • Shake the victim gently by the shoulders and ask loudly: <i>"Are you all right?"</i>
AIRWAY Open the airway 	<ul style="list-style-type: none"> • If there is no response, position the victim on their back • With your hand on the forehead and your fingertips under the point of the chin, gently tilt the victim's head backwards, lifting the chin to open the airway
BREATHING Look, listen and feel for breathing 	<ul style="list-style-type: none"> • Look, listen and feel for breathing for no more than 10 seconds • A victim who is barely breathing, or taking infrequent, slow and noisy gasps, is not breathing normally
ABSENT OR ABNORMAL BREATHING Alert emergency services 	<ul style="list-style-type: none"> • If breathing is absent or abnormal, ask a helper to call the emergency services or call them yourself • Stay with the victim if possible • Activate the speaker function or hands-free option on the telephone so that you can start CPR whilst talking to the dispatcher
SEND FOR AED Send someone to get an AED 	<ul style="list-style-type: none"> • Send someone to find and bring back an AED if available • If you are on your own, DO NOT leave the victim, but start CPR
CIRCULATION Start chest compressions 	<ul style="list-style-type: none"> • Kneel by the side of the victim • Place the heel of one hand in the centre of the victim's chest - this is the lower half of the victim's breastbone (sternum) • Place the heel of your other hand on top of the first hand and interlock your fingers • Keep your arms straight • Position yourself vertically above the victim's chest and press down on the sternum at least 5 cm (but not more than 6 cm) • After each compression, release all the pressure on the chest without losing contact between your hands and the sternum • Repeat at a rate of 100-120 min⁻¹

A Little more information about CPR

Follow the steps depicted above.

When checking for breathing, do not be misled by breathing sounds, this could be Agonal breathing (a brain stem response to low blood oxygen concentration). There is more information on Agonal breathing [here](#); watch the video.

Check that the casualty is breathing **in and out, regularly, and repeatedly**. You should see the chest rise and fall, regularly, again and again, and continue to do so. If you do not see this then start CPR immediately. Performing CPR will do no harm, even if the heart is still beating. Failure to deliver effective CPR will put the casualty's life at risk.

The purpose of CPR is to maintain blood flow around the body. This will maintain the blood flow to the brain. Lack of blood flow to the brain will cause brain damage and ultimately death. By maintaining blood flow to the brain you can help the casualty to stay alive.

The casualty should be lying supine (on his or her back) on a hard surface. Deliver CPR by pressing hard and repeatedly on the base of the casualty's sternum at a rate of 100 to 120 compressions per minute. This compression will pump the blood in the heart to the rest of the body. Remember to release this pressure after each compression so that the heart fills with blood ready for the next compression.

Delivering effective CPR is exhausting and the outcome often depends on the quality of the delivery. It is often best done in relays if several people are available. Make sure that you are trained to do this properly and encourage your friends to do the same.

Can an AED be used in a metal launch

There was a request for information about whether an Automated External Defibrillator could safely and effectively be used on a person in a metal launch

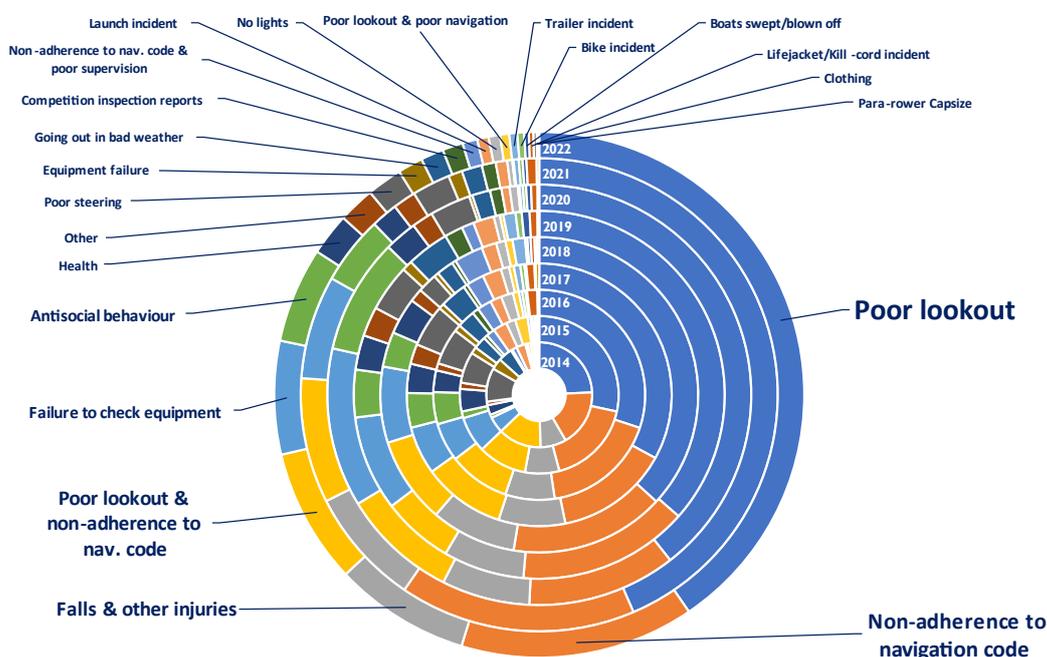
The response was that AEDs can safely be used in metal boats. The current passes between the pads and the pads are placed on either side of the heart so that the current will pass through the heart. The effect of "leakage", if any, should not reduce the effect on the casualty and will not harm the person operating the AED. The same applies if the casualty is lying on a wet surface or in a few millimetres of water.

However, AEDs should not normally be carried in launches. They are not designed for this environment and may not function as or when required. An AED on a launch may not be available to others, perhaps on land.

Analysis of 2022 Incidents

The analysis has been completed and posted on the website [here](#). It shows that the number of reported incidents has risen beyond pre-covid levels and that the distribution of incidents by cause is little changed.

Comparison with previous years



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At-risk behaviour continues to account for over 90% of all significant incidents

We celebrate the fact that so many clubs make such a significant contribution to Rowing Safety by sharing what they have learned. The following clubs have been awarded a Safety Good Practice Award for 2023, based on their use of the Incident Reporting System in 2022. This year these are awarded to the 12 British Rowing Clubs that submitted the most Incident Reports and also to the ten clubs that submitted the most reports as a proportion of their membership.

Position	Club	Incidents reported
1	Lea RC	78
2=	Avon County RC	48
2=	Derby RC	48
4	Reading Rowing Club	44
5=	City of Bristol Rowing Club	36
6	Maidenhead RC	35
7	Christchurch RC	32
8	Latymer Upper School BC	32
9	York City RC	31
10=	Broxbourne RC	30
10=	Kingston RC	30
12	Durham ARC	28

Position	Club	Incidents by membership
1	St John's College (Oxford) BC	44%
2	Newport RC	43%
3	Taunton RC	33%
4	De Montfort University (Leics) BC	30%
5	Derwent RC	29%
6	Salford University BC	27%
7	Shanklin Sandown RC	25%
8	Lancaster Royal Grammar School BC	24%
9=	Burway RC	21%
9=	Queens Park High School BC	21%

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

Clubs that do not report incidents

The review of incident reports was also used to identify those clubs that do not report incidents. I plan to contact the larger clubs first, those with more than 100 members, to enquire why they reported no incidents. Just to put this into context, there are 222 clubs with more than 100 members of whom 56 did not report any incidents in 2022.

Incidents Reported in January

Sometimes Incident Reports are so well written that anonymised versions should be shared. Please find one such in Appendix 1.

Take Care on the Ice

During the course of a Head Race, the First Aiders treated two people who were injured on land when they slipped and fell due to the icy conditions. One person suffered a suspected broken arm/shoulder so was sent to A&E. A second person suffered damage to their to arm and was advised to go to the Minor injuries unit.

In another incident a person slipped and fell on ice while walking outside the clubhouse.

Take care in cold conditions

A 2x of inexperienced rowers capsized when trying to “hold it up” to avoid a collision. The air temperature was low (variously reported at -5° and -2.5 ° C). Please take care to ensure that inexperienced rowers are not afloat, in small boats, with little support in cold conditions.

Take extra care when the stream is strong

An 8+ was rowing downstream doing some single stroke exercises. The cox was unaware that, due to the faster running river, there would be more draw from the weir. As the boat rowed slowly past the weir, they were pulled into the last Buoy. The boat hit the brick wall the other side of the buoy line.

In another incident, an 8+ was rowing downstream round a bend and was swept by the strong stream into a buttress of a bridge.

In yet another incident a rope securing a launch broke and the launch was swept towards a bridge. The launch was pulled towards the second arch and met a tree wedged on the bridge. It was pulled under in about 30 seconds.

A 4x was swept by the stream into a buoy, flooded with water and sank. The crew was taken ashore by coaching launches.

Please be careful when the stream is strong and consider not going afloat.

In another incident a launch engine failed and the launch drifted into the weir. Please ensure that your engines are serviced and reliable.

Take care to avoid being distracted

An 8+ collided with a bank on the River Cam, paddling upstream on a traffic-free straight stretch. The cox was momentarily distracted (15 seconds max) by resetting a speed coach. The bow contacted the bank, and the cox became aware of the obstacle and instructed the crew to hold it up. Damage was sustained to the bow of the boat, and the hull was breached.

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

People with health concerns, at competitions, and elsewhere

There was a request from a Safety Adviser who was working on the plan for a 6k rowing event and was concerned at the lack of Emergency Evacuation Points. The Safety Adviser was considering asking clubs for information on rowers with Pre and Existing Health Conditions and asked for advice.

The response was this is difficult for many reasons. Rowers collapse due a variety of causes, some not related to pre-existing health conditions. Collapse is often due to not having eaten sufficiently. This sounds stupid but it happens.

Some pre-existing conditions are not known or not diagnosed. If they are not known to the sufferer then there can be no notification. If they are not diagnosed then the medics will not know how to treat them, other than how to treat the symptoms.

You could remind rowers to take whatever they are likely to need with them. So, for example:-

- if they suffer from diabetes then they may choose to carry glucose tablets (they are less likely to need an insulin injection)
- if they suffer from asthma then they should carry their rescue inhaler
- if they are prone to have severe allergic reactions and have EpiPens then they should carry them
- if they are prone to awake seizures of almost any kind then they should not be competing in this event
- if they have a heart condition then they probably should not be competing in this event, they should check with their doctor

Take care with allergic reactions (to insect stings, for example - again not common at this time of year). An allergic reaction in this case is unlikely to be caused by a food allergy because people with EpiPens are very, very careful about what they eat. An EpiPen contains enough adrenaline (epinephrine) to last about 5 minutes. These are strong prescription medicines and not normally included in First Aid kits (they may be carried in ambulances). If any are needed then one is not likely to be sufficient.

Severe dehydration is unlikely at this time of year but you can advise rowers to ensure that they are well hydrated and carry water.

Emphasise the nature of the event to potential competitors and discourage any who are likely to have a problem completing the event from entering.

Asking about medical conditions is always problematic. If someone gives you the full (Latin) name of their condition then you may be no wiser. We have to be wary of medical confidentiality, if someone doesn't want to tell us then we cannot insist. Asking what support they may need in order to manage their condition pre-supposes that you can provide that support. By all means ask clubs whether any of their rowers is likely to need help but emphasise that this is not an event for people who may not be able to complete the course.

Also please consider your rescue provision. Ensure that you have sufficient launches and marshals with throw lines and radios to cover the course. Brief launch crews on how to retrieve an unconscious person from a boat and where to take them. (If they can get an unconscious person out of a boat then retrieving a conscious one should be easy.) Re-examine the course and look for more landing points. Have well equipped first aiders at each of these points, preferably with AEDs.

Support for the Netherlands Rowing NGB

There was a request for information on the British Rowing approach to rowing safety from the KNRB Safety Committee. The following information was provided:-

Our approach to rowing safety is explained in [RowSafe](#), this includes a section on Safety Culture. This is our primary source of information on safety and is in the public domain on the British Rowing website. RowSafe contains advice and guidance. We do have some rules on safety in the [Regulations of British Rowing](#) (section 11) but we never need to use them. We find that clubs, and their members, are happy (usually) to work with our advice and guidance.

RowSafe defines the standards that clubs are expected to achieve, in some cases in great detail.

Risk Assessment is the basis of our approach to Rowing Safety. Each club is expected to complete a risk assessment at the place where it rows and base its rules and practices on that assessment. We have training material on how to conduct a risk assessment but this is available only to members. RowSafe contains a wealth of information to support risk assessment.

We ask clubs to complete an annual self-audit and provide us with their risk assessments and safety plans, These are reviewed by our Regional Rowing Safety Advisers (RRSAs). Clubs are not allowed to enter competitions until their RRSA has accepted their audit. We monitor how many clubs do this and the vast majority complete the audit each year with no problems. We help those that need help.

We ask each club to report incidents by completing an [Incident Report](#). The learning from some of these incidents is reported in an anonymised form in each monthly report. Each year the reports are analysed to identify causes and trends, the most recent analysis for incidents in 2022 is available [here](#).

Each year we receive over 2000 incident reports. We take great care to treat each report as a positive contribution to rowing safety. We give prizes to the clubs that report the most incidents.

The following information was provided in response to a further request. The questions and their responses are summarised below:-

The main question is why British Rowing has chosen this approach?

I am not sure that this is a positive decision or it just developed in that way. The blunt and simple logic is that there are about 500 rowing clubs in British Rowing and they operate in a variety of different types of venues. Some row on inland canals, some on rivers (of various sizes), some on lakes, some in estuaries and some row on the sea. One size does not fit all. We would have great difficulty in defining a set of rules that would be applicable for all clubs. However, we do have some rules but we do not need to enforce them (more on that later). If we did have rules, rather than guidance, then we would have great difficulty enforcing them. We are not the police and we do not want to become the police.

Our "rules" on Rowing Safety can be found in Section 11 of the [Regulations of British Rowing](#). I occasionally refer to them but we do not enforce them because we do not need to. At work, I run training for Managers on Safety Leadership. We have adapted this training so that it is relevant in a rowing context. This training explains that if you want somebody to do something then you need to educate them so that they understand what

they have to do, or not do, and **why**. Issuing orders and instructions, known as managing by edict, does not work because people will find ways to comply with the words in the instruction rather than understanding what they need to do and doing it. This is explained in section 4, entitled "Leaders Promote Ownership and Personal Responsibility", of the attached presentation.

Leadership is a complex subject, please review the presentation and let me know if you have any questions.

We know that our approach works and suspect that making rules and trying to enforce them would not.

I presume it is part of the policy, but is it also driven by legal obligations in the UK? Are there specific legal responsibilities for sports associations and clubs?

The law on rowing safety in the UK is clear, there are very few legal requirements. If we think first of criminal law (this is law, regulations, etc. made by the Government), then rowing clubs are not impacted by any laws except to the extent of their control of premises (buildings, and the surrounding land) and to the extent of the safety of their employees. Most rowing clubs do not have employees. The laws relating to the safety of buildings are relatively simple and easy to comply with. I have issued guidance on this, it can be found [here](#).

There are almost no national legal requirements on clubs in relation to their activities on the water. The only one that I can think of is that it is illegal to be in charge of a boat when inebriated. Some navigation authorities have local requirements but these vary from place to place.

We also have Civil Law. This deals with claims for compensation if rowers or their equipment are injured or damaged. Rowers and their Clubs have insurance that deals with compensation in the event of loss so there is no need for legal proceedings. It simply does not happen.

Next to providing information to clubs there is also control by means of the obligation for clubs completing the annual self-audit and providing their risk assessments and safety plans. Is this based on a legal obligation or is it the policy of British Rowing? Is it effective?

The annual audit is a requirement. Clubs cannot enter competitions if they have not completed it. It is really a self-audit so that the clubs can look again at what they do and identify opportunities for improvement. Our Regional Rowing Safety Advisers review the responses from their clubs and provide feedback when needed. The vast majority of clubs act responsibly and ensure that their members are safe.

Is there staff (professional?) working (daily?) on the subject?

It is easy to become confused when you mix the words "professional" and "staff". There are no safety professionals on the staff of British Rowing but the staff do support the volunteer safety professionals. The role of Honorary Rowing Safety Adviser is an unpaid, volunteer role. This job is to provide support and advise on Rowing Safety to everyone in British Rowing. We also have about 12 Regional Rowing Safety Advisers who each support the clubs in their region. They are also unpaid.

Wellies at sea

There was a request from a gig rower about the use of wellies at sea. The response was:-

The issue of wellies afloat is not easy. The simple answer is that they should be banned. It is not just the weight but also the "valve" effect. When treading water, if the foot is raised then the leg part of the boot tends to move outward and catch the water so that the body is dragged down. When the foot is moved downward then the leg of the boot tends to collapse against the leg of the wearer. This results in a high downward force for part of the "stroke" and a lower upward force for the other part of the stroke. The body then moves downwards in the water. The casualty will then panic, work harder, and move downward even faster.

The more complex response is that there are some boots that have drawstrings at the top, like these

Also boots that are so loose that they are easy to kick off and neoprene boots if they fit tightly to the legs, may be OK.



Work with British Canoeing

British Canoeing has recently issued the following Safety Alerts.

- Lessons learned from the MAIB Investigation into the Paddleboarding accident at Haverfordwest, available [here](#). This will be of particular interest to anyone who organises tours or rowing camps.
- Unregistered Personal Locator Beacons, available [here](#). This will be of interest to anyone who rows at sea.

Several incident reports involving canoes was shared with British Canoeing and assistance has been provided on joint guidance on Sharing the Water.

Rowing in Floods

There was a reference in a World Rowing media post to the fun that can be had by rowing in floods. I explained the dangers and included a link to the relevant Safety Alert that can be found [here](#)

Yellow Flags on the Tideway

There was a further request for information on the meaning of Yellow Flags used on the Tideway. The response was that on page 15 of the Tideway Code the PLA specifies that:-

All small boats using the Upper Tideway should monitor this system and use the advice provided to judge if their boat choices are suitable and crews are sufficiently experienced for the prevailing ebb tide conditions.

The PLA provides advice, it is not an instruction or a requirement. It is up to clubs to decide what is, and is not, safe for each of their crews.

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

Safety Boats and Rescue boats at a large competition

There was a request for information on the positions of marshal launches and safety launches at a large competition. The response was:-

We train scullers to climb on top of their inverted boats if they capsize. If they do this then their bodies will be out of the (cold) water and they will be well positioned to climb into any boat, even a tin fish. If the marshals are also briefed to assist anyone in the water (as all launch drivers are trained to do) then they will be well positioned to assist rowers on their way to the start.

The RIBS are well positioned to assist anyone who has started to race, even when they are some distance from the start. Having the RIBS assist scullers on their way to the start would mean that they would not be available to assist racing crews.

We also train scullers to perform buddy rescue. If there are many scullers in a small area waiting to start then if anyone does capsize there should be plenty of boats in the vicinity able to assist them. Scullers will not be close together during the race so expecting them to perform Buddy Rescue then may be a big ask.

There is further information in the [BR Capsize and Recovery video](#), especially the recovery section, and the [online Capsize Drill training in RowHow](#).

Bum-bag Lifejackets

There was a request for information about lifejackets that fit into a waist and, when actuated, inflate into a lifejacket that can be pulled over the head. They would be useful in gigs and other sea rowing boats. Examples can be found [here](#), [here](#), [here](#), and [here](#).

How long do lifejackets last

I was asked how long lifejackets should be kept before replacing. The response was that they should last up to 10 years if it is well looked after. You will find references to that effect [here](#) and [here](#).

It is also important to check your lifejacket frequently. See the Safety Alert [here](#).

A book on starting a Coastal Rowing Club

A colleague in Australia has drafted a book based on their club's experiences in starting a coastal rowing club. This draft has been reviewed and comments have been provided. These were gratefully received.

The club very much values its association with British Rowing. They "*compared what was available through their national rowing body for training as well as what training was available through other national bodies. The best English speaking online training they found was that of British Rowing. British Rowing's risk management and safety offerings were also superlative, leading us to our subsequent affiliation with British Rowing*".

Take care exercising if recovering from an infection

There are lots of infections going around. Many people have had colds, flu, covid or gastrointestinal upsets. If you have recently had any of these, then please take care. Strenuous exercise when recovering from a viral or bacteriological illness can have serious consequences. It can cause [Myocarditis](#) this is inflammation of the heart muscle. It can affect anyone at any age and is usually related to recent viral infection. The virus may have gone but the immune system over-reacts causing inflammation that can persist in the heart. Other causes include bacterial infections, certain medications, toxins and autoimmune disorders. Symptoms are diverse and include chest pain, mimicking a heart attack, difficulty breathing due to weakened heart muscle, palpitation due to electrical rhythm disturbances, fever and abnormal fatigue.

Try to make a graduated return to fitness, like this:-

1. Light exercise with no exertion. It could also include flexibility exercises and technique exercises in a boat.
2. Gentle, aerobic exercise, such as walking or slow jogging or slow paddling, providing the heart rate is not elevated.
3. Moderate intensity aerobic and strength & conditioning exercises. This could be two intervals of 5-minute aerobic exercise followed by rest.
4. Somewhat hard intensity aerobic and strength & conditioning exercise. Only progress to the next stage when fatigue levels are normal at the end of the exercise.
5. Baseline exercise returning to the normal exercise pattern. Only attempt any degree of exertion if you feel comfortable doing so.

If you do not recover completely in a reasonable time, then go back one phase. If it feels uncomfortable then stop. Each phase should take about one week, possibly more. There is more information in a Safety Alert [here](#).

Remember, if you are ill, then training will not make you better, but it could make you much worse.

Appendix 1 - A well written Incident Report

Brief description of the incident: Proceeding downstream in masters coxless pair (>20 years rowing together in pairs, so "tolerably competent" in the gentleman rowers chariot of choice) when approaching the moored houseboat MV Till, I judged that my bow side blade (mine) would be at least 1m clear of the hull of the floating AirBNB that has , over the years been painted a myriad of garish colours (currently it is blue with a black hull, I think).

We were not going particularly fast (the GPS showed 2.10 split, which in hindsight I am rather happy with as I was not really feeling "it" this morning.

Just before passing the aquatic hen party accommodation, we abruptly ceased forward motion as a mighty tree trunk that was wedged across the bows of the MV Till hit my bow rigger back stay. The tree was probably around 7 metres long and was mainly submerged, with the thick end sticking out of the river and handily at rigger height. I did not see it, mainly as the thing was partly submerged and the boat hull was black.

The impact turned the backstay into a "back banana" and simple trigonometry from the remains reveals that the stopping distance to zero was around 20cm.

We stayed dry. Yay!!!

Paddled back 1000m to rowing club finishing at hands away with rather disturbing stern pitch as the bent bit interfered with the finish and had twisted the pin backwards.

The hull was undamaged, likely due to its flexibility, as were the crew (definitely not due to our flexibility), and on releasing the bent item, the hull breathed a sigh of relief and the pin popped back up to zero degrees as the makers intended.

Measures taken: Reported to other river users to avoid it.

Were there any consequences?: Backstay bent beyond repair and replaced- £10 nominal value but we have loads of them.

Shame

Disgrace

Embarrassment of steersman with 25 years experience



On a serious point, obviously this pair would never be rowed without backstays, but had it been so, the impact would have been significantly worse as the backstay acted as a crumple zone and pushed us away from the tree. Anyone concerned about why backstays are now mandated should look at the photo of what 210kg of boat plus crew stopping suddenly in collision with a fixed object does to a backstay and extrapolate their thinking to what would have happened without one present.