

MEDICAL RISK ASSESSMENT TYNEDALE 10 MILE ROAD RACE

1. Background

Tynedale Harriers have organised a 10 mile road race since 1992, for many years through quiet lanes from Hexham to Ovingham. In an attempt to avoid the busy roads of Corbridge a route was tried from Hexham racecourse for two years. This was too hilly for popularity and was not attracting enough runners to make it viable. This is therefore a new course, starting and finishing at Ovingham Middle School and out and back along the last 5 miles of the original Jelly Tea route. Tynedale Harriers have permission from Northumberland County Council to close roads along the route, as advised by the Tynedale Safety Advisory Group. Northumbria Police have been written to and they have not objected to the race.

At its height of popularity the event was used as a warm-up for the Great North Run and attracted around 600 entries, with approximately 500 finishers. We expect around 400 entries in 2019. Pre-entries are by through the Run Britain website and entries will also be taken on race day.

The race has been traditionally popular with more experienced and competitive local club runners many but it also attracts a number of entries from unattached and recreational runners. The race is staged on open carriageways (with partial road closures), with marshals at junctions and crossings.

Bottled drinking water is provided at mile 3 on the way out and mile 7 on the way back, and at the finish. No sponge stations are provided. Changing & toilet facilities are provided at the Race HQ at Ovingham Old School (where hot and cold drinks, Jelly and sandwich are provided).

Communication between marshals is by mobile phone, with reliable network coverage over the whole route.

First Aid services will be provided St Johns Ambulance. Accident and emergency departments are approximately 10 miles by road to Hexham and 12 miles to Newcastle, and there is a reliable service from the local NHS Ambulance service. In the past

five years there has only been a couple of cases of heat exhaustion. There have been no fatalities, resuscitations, or hospital transfers.

The race finish will be chip timed using a single finishing funnel in the car park at Ovingham Middle School. Ambulance access is available at all points on the course.

Volunteer marshals etc. are from the organising club plus their family and friends.

2. Recommended Provision – Matrix Table 3 UKA Road Race Medical Services 2013

Based on 'standard criteria' for:

Race distance 11 to 25km (10mile race) and 150 -500 runners. The course is compact in that it is an out and back route along the same roads. We anticipate less than 400 runners on the day

Recommended minimum provision as set out in Matrix Table 3:

2 first aiders per 125 runners, which is 6.4 for 400 competitors. As the course is an 'out and back' then first aiders stationed or mobile along the course provide coverage for both directions. Therefore, we will have 6 first aiders from a CQC registered medical provider, including two mobile AED units on bicycles.

- No paramedic, doctor, nurse, or dedicated medical control required
- First aid manager required

A 10 mile race has been staged the current organisers for many years. Casualty rates at previous races have been low. This is a new course but should have lower risks than the previous routes; it is much less hilly than the Racecourse route and has lower traffic levels than the original Corbridge route. Unattached and recreational runners and novices provide a higher risk than more experienced club runners as they have with lower and untested fitness levels. A higher proportion of older 'veteran' club runners also reduces the risk of sudden cardiac failure (often associated with younger competitors) but increases the risk

of cardiac arrest due to cardio/vesicular disease (often associated with older people) which often responds well to swift intervention by CPR and AED.

3. Tynedale 10m Medical Risk Assessment

1. What are the hazards	2. Who may be harmed and how	3a. What are you already doing (i.e. pre event controls)	3b. What further action is required (event day controls)	4a. Action by who	4b. Action by when	4c. When completed
GENERALLY		SEE NOTES ABOVE				
MEDICAL						
Assessment of appropriate medical cover	Competitors spectators and volunteers	Provide first aid and medical services in accordance with the UKA Good Practice Guide to Medical Services	See medical plan	Race committee	Before start of race	
Event arrangements and profile unchanged from previous years		Low casualty rate experienced in previous years is a good indicator of likely demand		Race committee	Before race day	
Anticipated		Competitor		Race	Before race day	

competitor numbers		numbers last year were less than 200. Expecting 300 - 400 this year		committee		
Use of event team volunteer first aiders		St Johns ambulance to be engaged as CQC registered medical provider with 6 first aiders.		Race committee	Before race day	
Check ability of local A&E hospital to receive casualties from event		Hospital within 15 miles capable to receive any serious casualties.		Race committee	Before race day	
Check ability of local NHS ambulance trust to attend and evacuate critical casualties		Ambulance service trust capable of attending and evacuate casualties on 999 call if required.		Race committee	Before race day	
Ensure capability to deliver BLS (minimum) response within 8 minutes of receipt of report of injury		No collapses reported in previous years. See below for reporting procedures.	Two mobile bicycle first aiders, two at mile 2.3, two stationed at the start/finish. All equipped with AED. Mobile units to follow the last runners back	Race committee	On race day	

by the event or medical team			to the finish.			
Procedures to ensure first aid in place before race start		Contact phone numbers in exchange in event of problems.	St Johns ambulance to report to Lewis Balfour (race director) on arrival 45 mins before race start. Race will be cancelled if first aid team do not attend.	Race Director	Before start of race	
Ensure effective reporting of casualties by marshals etc.			Marshalls will be deployed at regular intervals around the course . All marshals to be briefed on reporting of casualties to the race organiser.	Race committee	Before and during race	
Ensure medical team can access & extract any casualties occurring at inaccessible locations			Ambulance access will be available on the whole of the course	Race committee	Before and during race	
Layout & management of finish area to provide easy access for medical team to			Ambulance access will be available at the finish. Experienced marshals to be provided in finish	Race committee	Before and during race	

identify, treat & evacuate casualties'			area. Co-ordination of activities to be agreed in advance with medical team.			
Use public address system to communicate race day instructions to competitors			Pre-start briefing with race day final safety instructions to be provided by start director to assemble competitors. Sprint finishes will be discouraged. If we have hot weather runners to be advised to take care and slow down.	Race committee	Before race	
Transport of exhausted runners		Blankets and cold drinks and mobile phone provided.	Follow up bicycle at back of race. Note adult competitors only so child protection issues.	Race committee	Before and during race	
Monitor			First aid manager to report any serious injuries or hospital transfer to the race committee as soon as possible on race day, followed by formal written summary of casualties – based on UKA post-race return	Race committee	During and after race	

			form.			
De-brief & review			Race committee to arrange post-event medical team de-brief meeting and review.	Race committee	After race	
Review date			1 week after race date			

Medical Plan

- 6 first aiders from CQC registered medical provider (St Johns ambulance), including two bicycle units each with AED both bicycles to follow the last runner back to the finish. 2 first aiders to be stationed at the start/finish. 2 stationed at Marshal point 5 after approximately 2.3 miles. First aiders to be contactable by mobile and will have the race organisers number.
- Marshals to be briefed on reporting casualties, including meeting emergency ambulance.