



SAFETY CODE
ANNEXES

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North Berwick Rowing Club

Description of Incident

This form should be passed on to the Health & Safety Officer within 72 hours of the incident or, if he/she is unavailable, another member of the Committee. If injury or damage has occurred within the fairway or harbour area, it will be necessary to inform the Harbour Master and record in the North Berwick Harbour Trust's Accident Book.



Safety Code Annex 2 Non-Member Form

The Competent Cox must obtain details of an emergency contact and any relevant medical disclosures prior to taking a non-member out in a club boat. For under-18s, permission from a child / young person's responsible adult must also be obtained.

CONFIDENTIAL WHEN COMPLETE

This form is intended to be held by the Competent Cox for reference during an outing. It should be securely disposed of when no longer required.

Part A: To be completed by the non-member participant

Name (please print): _____ Date: ___ / ___ / ___

Emergency contact details: Name: _____

Phone number: _____

Address: _____

Can you swim 25 metres unaided? Yes No

Your Competent Cox will be responsible for your safety during the outing, so it is important that you make him/her aware of any relevant medical information or specific needs you may have.

Medical disclosures: _____

Part B: To be completed by responsible adult if participant is aged under 18 years

Name (please print): _____

I hereby give permission for the child named in Part A to participate in NBRC activities.

Signature: _____

Date: ___ / ___ / ___

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Safety Code Annex 3

Passage Planning Template

This document is intended to provide a template for planning short passages in NBRC vessels. The production of a passage plan before heading to sea is a legal requirement under Rule 34 of the SOLAS V regulations; in the UK, this is implemented into national law by The Merchant Shipping (Safety of Navigation) Regulations 2002.

It will be the responsibility of the Competent Cox to ensure that an appropriate passage plan is prepared and, as required, amended. The exact level of planning will be at his/her discretion, and will depend on the type of journey being undertaken. This template highlights some of the key areas that need to be considered; it is not necessarily comprehensive, and will usually be accompanied, as a minimum, with a course plotted on a paper chart.

Vessel Name: _____ **Competent Cox:** _____

Passage from _____ **to** _____ **Date:** ___ / ___ / ___

Expected duration of passage: _____ **ETA:** _____

Crew: _____

1. Planned Waypoints

Give details of planned waypoints (intermediate points in the route), starting from departure point.

| Waypoint (Name / Description) | Time (Waypoint ETA) | Position (Lat-Long / Landmark-Bearing-Range) | Course to Next Waypoint (Made Good Over Ground) |
|----------------------------------|------------------------|---|--|
| 1. | | | |
| 2. | | | |
| 3. | | | |
| 4. | | | |
| 5. | | | |
| 6. | | | |
| 7. | | | |

2. Navigational Dangers

Identify hazards (rocks, shipping lanes, tidal eddies, etc) and how they are to be handled/avoided.

| Hazard | Notes on Mitigation |
|--------|---------------------|
| | |

3. Means of Navigation

Provide details of the tools and methods to be used for navigation on the passage.

| | | | | |
|-------------------------|---|--------------------------------------|--|---------------------------------|
| Position Fixing: | <input type="checkbox"/> GPS fix | <input type="checkbox"/> compass fix | <input type="checkbox"/> pilotage only | <input type="checkbox"/> other: |
| References: | <input type="checkbox"/> electronic chart | <input type="checkbox"/> paper chart | <input type="checkbox"/> sketches | <input type="checkbox"/> other: |
| Notes: | | | | |

4. Key Times

Identify key times significant to navigation or safety (e.g. high/low water, sunset, scheduled ferries).

| |
|--|
| |
|--|

5. Tidal Streams

Address impact of tidal stream. For longer passages, consider multiple times / locations.

| Time(s) | Location(s) | Tide Strength (knots) | Tidal Direction (deg) |
|-------------------|-------------|-----------------------|-----------------------|
| | | | |
| Impact Assessment | | | |

6. Pilotage Plan

Describe plan for visually navigating in/out of harbours/landings. Provide a sketch for reference.



7. Limits

Describe the limits of the boat (with regard to its design) and crew (with regard to experience, physical fitness, etc). Detail the environmental conditions at which safety starts to become marginal. Consider how much shelter the boat would offer if it became necessary to anchor.



8. Safety Equipment

Note all items of safety equipment that are to be carried.

- towline/painter bailer(s) flares anchor knife
- radio first aid kit horn/whistle spare clothing lights
- other, list: _____

9. Water and Consumables

Explain how much food and water must be carried, planning for possible delays in arrival.

| |
|--|
| |
|--|

10. Crew Clothing and Personal Buoyancy

Detail the clothing / equipment requirements for the crew, planning for possible delays in arrival.

| |
|--|
| |
|--|

11. Contingency Planning

Identify possible havens in case conditions deteriorate, things go wrong, or there is a need to head to shore. Pilotage must be considered for these refuge options.

| Refuge Options | Pilotage Notes / Sketches |
|----------------|---------------------------|
| | |

12. Conditions and Forecast

To be completed as close to departure as practicable. Record departure conditions and predicted changes.

| | Wind | | Seastate | Visibility | Weather |
|---------------------------|-------|-----------|----------|------------|---------|
| | Speed | Direction | | | |
| Departure Conditions | | | | | |
| Forecast (for time _____) | | | | | |
| Impact Assessment | | | | | |

Pre-Departure Checklist

- Has the crew been briefed on the content of the passage plan?
- Are any required electronics operating correctly? Including:
 - has a radio check been conducted?
 - are batteries sufficiently charged?
- Is all the required safety equipment aboard, secured and accessible?
- Are the crew appropriately equipped and fit for the journey? Including:
 - are they appropriately dressed?
 - are lifejackets fitted correctly and, if applicable, within service date?
 - do they have any necessary medication with them (asthma inhalers, etc)?
 - have they brought adequate food and water?
 - are they sufficiently fit, able and experienced for the passage?
- Has a designated person ashore been made aware of you plans? Does he/she know:
 - who is aboard
 - where you're going
 - when you expect to arrive
 - what to do if you don't arrive
- Are all parties comfortable to proceed?

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Safety Code Annex 4

Risk Assessment Template

This template has been created to assist in the creation of bespoke risk assessments when required by the Safety Code. It uses the Risk Matrix approach – the same method that is used in the club’s Generic Risk Assessment, which can be used for reference. Populate the table overleaf, using multiple sheets if required. The approach is summarised below.

- 1) Create a list of events or occurrences that could have harmful outcomes and record these in the Hazardous Event column
- 2) For each Hazardous Event:
 - a) assess the Likelihood of the event occurring on a scale of 1-5
 - b) assess the Severity of the event if it does occur, on a scale of 1-5
 - c) multiply the Likelihood and Severity together to obtain the Risk
- 3) If the risk is not already at a tolerable level, apply mitigations or control measures to reduce the likelihood, the severity, or both.
- 4) Calculate the Residual Risk which remains after the mitigations have been applied using the same scoring system.
- 5) If the residual risk has been reduced to an acceptable level, the control measures can be considered sufficient. If not, you will need to apply additional control measures to lower the risk further.

| | | Severity | | | | |
|------------|------------------------|-------------------|-----------|--------------|-----------|------------------|
| | | 1 - Insignificant | 2 - Minor | 3 - Moderate | 4 - Major | 5 - Catastrophic |
| Likelihood | 5 - Highly Likely | 5 | 10 | 15 | 20 | 25 |
| | 4 - Likely | 4 | 8 | 12 | 16 | 20 |
| | 3 - Possible | 3 | 6 | 9 | 12 | 15 |
| | 2 - Unlikely | 2 | 4 | 6 | 8 | 10 |
| | 1 - Extremely Unlikely | 1 | 2 | 3 | 4 | 5 |

| | |
|--|--|
| | Tolerable |
| | Tolerable if risk cannot reasonably be lowered further |
| | Intolerable |

North Berwick Rowing Club

Risk Assessment for _____

Author: _____ Date: ___ / ___ / ___ Sheet ___ of ___

| Residual Risk | Risk | | | | | | | |
|--|------------|--|--|--|--|--|--|--|
| | Severity | | | | | | | |
| | Likelihood | | | | | | | |
| Mitigations or Control Measures | | | | | | | | |
| Unmitigated Risk | Risk | | | | | | | |
| | Severity | | | | | | | |
| | Likelihood | | | | | | | |
| Hazardous Event | | | | | | | | |



Safety Code Annex 5 Lifejacket Service Log

This template has been aligned with the manufacturer's servicing instructions contained in the User Information Booklet for NBRC's Bluewave manual lifejackets. Additional checks are included as part of the club's servicing regime. The manufacturer's servicing requirements/instructions may differ for other models.

| | |
|----------------------------|--------------------------|
| Model | <i>Bluewave (Manual)</i> |
| Serial Number | |
| Date of Manufacture | |

| 1. | General Inspection | Pass | Fail | Comment |
|-----|---|------|------|---------|
| 1.1 | Check for soiling. Rinse if required. | | | |
| 1.2 | Check for signs of excessive wear or abrasion. | | | |
| 1.3 | Check retroreflective tape, lifting beckett and whistle are all fitted. | | | |
| 1.4 | Check operation of buckle. | | | |
| 1.5 | Check straps are free of tangle and easily adjusted. | | | |

| 2. | Inspection of Lung | Pass | Fail | Comment |
|-----|--|------|------|---------|
| 2.1 | Check for abrasion or wear. | | | |
| 2.2 | Inflate using foot or hand pump; check air is retained for 12 hours. | | | |

If the lung leaks or is otherwise damaged, the lifejacket must be removed from service and disposed of.

| 3. | Inspection of Cylinder | Pass | Fail | Comment |
|-----|--|------|------|---------|
| 3.1 | Check for corrosion or damage. | | | |
| 3.2 | Check for evidence of puncture or marking from firing needle. | | | |
| 3.3 | Weigh cylinder. Check within ± 2 gram of stamped gross weight. | | | |

If the cylinder fails any of the above checks, it must be replaced and reassessed accordingly.

| 4. | Inspection of Inflator | Pass | Fail | Comment |
|-----|--------------------------------|------|------|---------|
| 4.1 | Check firing indicator fitted. | | | |
| 4.2 | Check toggle is free. | | | |

| | | |
|-----------|---------------------------|--|
| 5. | Refit CO2 Cylinder | |
|-----------|---------------------------|--|

| | | |
|-----------|--------------------------|--|
| 6. | Repack Lifejacket | |
|-----------|--------------------------|--|

7. I hereby confirm that this lifejacket has been serviced in accordance with the checklist above.

Name: _____ Signature: _____ Date: _____

The next inspection must be no later than 1 year after the date above. If this date is missed, the lifejacket should be quarantined until the next inspection is completed.

Next inspection due:

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Safety Code Annex 6

Safety Equipment Service Log

This template should be used to record the full inspection of the club's safety equipment (excluding lifejackets). This should be conducted at least annually by the Health & Safety Officer.

(StB: St Baldred JB: Skiff John B BA: Blackadder)

| 1. | Permanent Fit | StB | JB | BA | Comment |
|-----|---|-----|----|----|---------|
| 1.1 | Towline (Painter) | | | | |
| i | 8m long, 14mm towline (min) fitted | | | | |
| ii | checked for damage | | | | |
| iii | eyebolt confirmed secure | | | | |
| 1.2 | Bailers | | | | |
| i | 2x hand bailers present | | | | |
| ii | bailers secured to boat | | | | |
| 1.3 | Drogue | | | | |
| i | unpacked | | | | |
| ii | line checked for damage | | | | |
| iii | drogue checked for damage | | | | |
| iv | eyebolt confirmed secure | | | | |
| v | repacked | | | | |
| 1.3 | Rudder-Freeing Tool | | | | |
| i | fitted (under port gunwale within reach of cox) | | | | |

| 2. | Safety Boxes | 1 | 2 | 3 | Comment |
|-----|---|---|---|---|---------|
| 2.1 | Flares | | | | |
| i | 2x red smoke flares legible, undamaged and in date | | | | |
| ii | 2x red hand flares legible, undamaged and in date | | | | |
| 2.2 | Throwing Line | | | | |
| i | line unpacked and checked for damage | | | | |
| ii | security of line attachment to inside of back checked | | | | |
| iii | line repacked | | | | |
| 2.3 | Torch | | | | |
| i | batteries checked for damage/leakage and charge | | | | |
| ii | torch confirmed working | | | | |
| 2.4 | Knife | | | | |
| i | opens/closes freely | | | | |
| ii | blade inspected for damage | | | | |
| 2.5 | Whistle | | | | |
| i | functioning correctly | | | | |
| 2.6 | Compass | | | | |
| i | functioning correctly | | | | |
| 2.7 | Rescue Bag | | | | |
| i | undamaged and unopened | | | | |
| 2.8 | First Aid Kit | | | | |
| i | contents checked for damage or depletion | | | | |
| 2.9 | Safety Box | | | | |
| i | lanyard & shackle fitted and checked for damage | | | | |
| ii | inside of box confirmed dry | | | | |
| iii | lubricate seal with Vaseline | | | | |
| iv | check lid opens/closes freely | | | | |
| v | repack | | | | |

North Berwick Rowing Club

| 3. | Anchors and Rode (Chain & Rope) | 1 | 2 | 3 | Comment |
|-----|--|---|---|---|---------|
| i | anchor and rode weigh minimum 7kg | | | | |
| ii | minimum 30m rode fitted | | | | |
| iii | chain checked for wear | | | | |
| iv | rope checked for damage | | | | |
| v | joining knots/splices/shackles inspected | | | | |
| vi | anchor bucket checked | | | | |

| 4. | General | Number Carried | Comment |
|-----|--|----------------|---------|
| 4.1 | First Aid Kit (Store) | | |
| i | contents checked for damage or depletion | | |
| 4.2 | Fenders | | |
| i | checked and inflated | | |
| 4.3 | Paddles | | |
| i | checked for damage | | |

| 5. | Summary of Outstanding Actions |
|--|--------------------------------|
| <p>Any non-conformances that cannot be immediately rectified must be recorded below and brought to the attention of the Committee immediately.</p> | |

| 5. | I hereby confirm that a full inspection of the above safety equipment has been conducted. |
|--|---|
| <p>Name: _____ Signature: _____ Date: _____</p> <p>The next full inspection must be no later than 1 year after the date above.</p> | |
| Next inspection due: | |