



TARRTHÁIL LIFESAVING

THE OFFICIAL MAGAZINE OF IRISH WATER SAFETY

€4.00

2014 ISSUE NO. 2

Irish Water Safety Awards 2014
World Lifesaving Championships
Drowning - Chain of Survival
Hypothermia
WHO Global Report on Drowning
Eating Before Swimming Update



WINTER 2014 ISSUE 2

Cover Photograph:
IWS National Beach Rescue
Championships.

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Dear Members,

I am delighted to present you with the next edition of *Lifesaving* magazine. It touches on just some of our activities, both nationally and locally, and I am conscious that there are so many more activities of a wide variety, so please submit written contributions so that your activities are highlighted in future editions. You'll also note some interesting developments at international level, one of which is related to eating before swimming and impacts on our popular "14 steps to Safe Swimming" poster.

As we cast our eyes back on 2014, it is pleasing to see that we have had one of our busiest years to date. We have had lots of local projects and lots of National courses, not

to mention two building and storage projects going ahead in Waterford and Clare.

We presented certificates to 50 new Examiners at our National Examiner Conference and now have the largest body of examiners in the history of the organisation.

We had the largest Annual Awards ceremony to date in Dublin Castle which drew much media attention to our recognition of volunteers and those who come to the assistance of persons in danger of drowning.

We had a wonderful Life Governors day on board the LE Samuel Beckett.

We had the greatest amount of competitors competing in our National and International Lifesaving competitions.

We had the largest media campaign across a broad range of platforms this year.

I have used the word "we" a lot which simply reflects the importance of your voluntary assistance to promote drowning prevention initiatives in your community. All this is only possible because of the foundation of work at local level, which operates through the commitment of all our volunteers.

We couldn't do it without you.

As always....thank you.

Breda Collins

Chairman, Irish Water Safety

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Triennial Life Governor's meeting 2014

John Leech CEO, IWS

The Award of Life Governor is the highest award which can be bestowed on one of our own members or somebody from outside the organisation. Our Patron is President Michael D. Higgins, who is the person of highest standing in our organisation for which we are very proud and grateful to. Our own members may qualify with fifty years uninterrupted service and be approved by our Council to be awarded this prestigious award subject to their consideration, verification and scrutiny. There are a number of people who have received this award from outside of the organisation who have demonstrated substantial commitment and involvement in water safety. Have made a significant contribution to the prevention of drowning and or water-related accidents. Have promoted and or worked in the development of water related activities that encourage activities that promote aquatics and safety in water through sport at a high standard over a prolonged period of time. Is an organisation or individual that has supported, promoted and advocated the aims and objectives of Irish Water Safety (IWS), safety in water and has made a significant contribution to the ethos and aims that IWS promote in this field. There are 58 Life governors who all in their own individual ways have made a significant contribution to IWS and have helped to progress it in to the strong and vibrant organisation it is today which is saving lives mainly through preventative strategies.

In 2008 the Council of IWS decided that there should be a triennial meeting for the Life Governors and so the first meeting was held in the State Rooms in Dublin Castle. In 2011 the meeting was held in the Westbury Hotel in Dublin.

The idea of the meeting is to honour these members and provide a forum to this august group of people and to receive feedback from them in relation to the progress of IWS in accordance with its Strategic Development Plan. This year it was held onboard Long Éirenach Samuel Beckett, which is the latest edition to the Naval Services fleet. It was built in Appledore in Devon and she was commissioned on the 17th of May 2014 by a niece of Samuel Beckett, Caroline Murphy, only yards from the bridge named after him. The Taoiseach and Minister for Defence Enda Kenny attended the event. The LÉ Samuel Beckett is the first of its class, an offshore patrol vessel. It is 90 metres long, weighs over 1,900 tonnes, and has a maximum speed of 23 knots. It cost €54m, it is equipped with two large Rigid Inflatable Boats for fishery protection duties and drugs interdiction.

The Commanding Officer Lt. Cdr. Anthony Geraghty and his crew entertained us onboard and gave us an interesting presentation about the ship and her duties. A week previously another ship of the fleet arrested a yacht containing a consignment of cocaine worth over €80 million. So no doubt it won't take her long to pay for herself! We had Life Governor's who had travelled as far away as Hong Kong to be with us, as well as our founding Minister Robert Molloy and his wife Phyllis. It made for a very memorable meeting of our Life Governors who enjoyed the meeting and found it very interesting and different! We now look forward to the next meeting which will take place in 2017. Where could the next novel venue be?





Irish Water Safety

IWS Annual Awards at Dublin Castle on Tuesday 18th November 2014

1. Dean Treacy and Paul Dolan who rescued a man at the Tolka River, Clontarf on 6th October 2012 received Seiko 'Just In Time Award'.

2. Garda Colin Davidson who rescued a man from drowning in the River Liffey on 11th February 2008 received a Seiko 'Just In Time Award'.

3. Breda Collins, Chairman of Irish Water Safety with Noel Wall of Timemark (right) presenting Garda Trevor Keating and Garda Shaun Sweeney with Seiko 'Just In Time Award' for the rescue from drowning of a boy at Neds Point, Buncrana, Co. Donegal on 18th September 2014.

4. James Bould & Raven Genson who rescued their cousin, after he got into difficulty at Spencer Harbour, Drumkeerin, Co. Leitrim on 6th July. Both received their Seiko 'Just in Time Award'.



National Awards 2014

5. Ian Jackman who rescued a man from drowning at Wexford Harbour on 3rd October 2014 received a Seiko 'Just In Time Award'.

6. Sargent Fachtna O'Donovan who nominated Garda Dave Fenton with Garda Caroline Guest and RNLI lifeboat mechanic Martin O'Donoghue who performed a rescue at The Pier, Castletownbere on the 4th May 2014. Also with Barry Murphy of Ballincollig, who rescued a person at Coolmain Beach, West Cork in 1983, pictured with his wife Mary amongst those who were honoured at the annual Irish Water Safety Awards.

7. Garda Dave Fenton with Garda Caroline Guest and RNLI lifeboat mechanic Martin O'Donoghue who performed a rescue at The Pier, Castletownbere on the 4th May 2014

8. Breda Collins, Chairman of Irish Water Safety presenting Paul Dolan, Dean Treacy along with Dylan and Cathy Treacy on behalf of Michael Treacy with Seiko 'Just In Time Award' for the rescue from drowning of a man at the Tolka River, Dublin on 6th October 2012.

(Photo: David Branigan/Oceansport)



5



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7



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Irish Water Safety

IWS Annual Awards at Dublin Castle on Tuesday 18th November 2014

1. Breda Collins, Chairman of Irish Water Safety presenting Annie Laffan, Kieran Laffan and Pat Nolan with Seiko 'Just In Time Award' for the rescue from drowning of two swimmers at Bunmahon Beach on 18th June 2014.

2. Breda Collins, Chairman of Irish Water Safety presenting the Community & Social Responsibility Award to 'Wise Buoys' of Thurles CBS and James Stapleton, James O'Sullivan and Paul Hennessy.

3. Breda Collins, Chairman of Irish Water Safety with Noel Wall of Timemark (right) presenting Clare MacMahon, on behalf of her brother Brian, with a Seiko 'Just In Time Award' for the rescue from drowning of a man at Skerries, Co. Dublin on 16th June 2014.

4 St. Paul's National School representatives with Assistant Garda Commissioner John O'Mahoney.



National Awards 2014

5. Breda Collins, Chairman of Irish Water Safety presenting Dylan Rogers, Jack Hoey, Paul Ivan Maguire and Justin McKenna with their Seiko 'Just In Time Award' for the rescue of a boy from drowning at the River Borne on the evening of 28th December 2013.

6. Breda Collins, Chairman of Irish Water Safety with Noel Wall of Timemark (right) presenting Garda Colin Davidson with a Seiko 'Just In Time Award' for the rescue of a man in the River Liffey, Dublin on 11th February 2008.

7. Breda Collins, Chairman of Irish Water Safety presenting Elmar Nolan of Union Hall, West Cork with a Life Governor medal.

8. Breda Collins, Chairman of Irish Water Safety presenting Garda Ciaran Sweeney with a Seiko 'Just In Time Award' for the rescue from drowning of a man at Ballsbridge on 17th August 2013.

(Photo: David Branigan/Oceansport)



DROWNING CHAIN OF SURVIVAL



INTERNATIONAL LIFE
SAVING FEDERATION

MEDICAL POSITION STATEMENT - MPS 19
(Reproduced with the kind permission of ILSF)

BACKGROUND

All nations would benefit from a simple, clear Drowning Chain of Survival. In high income nations this tool will refine prevention and the call for action. In low and middle income nations this tool is a guide for policy making, resource allocation and priority setting in drowning prevention. A best evidence approach was utilised to create a universal Drowning Chain of Survival. Education on how to prevent drowning and how to react when a drowning incident occurs has not always been guided by good levels of evidence, or high levels of specialised training in the recognition and management of the drowning process. The Drowning Chain of Survival refers to a series of steps that when enacted, attempts to reduce mortality associated with drowning and attempted aquatic rescue. The term "chain of survival" has provided a useful metaphor for the elements of the emergency cardiac care system for sudden cardiac arrest, however, interventions and patient management in drowning involves principles and actions that are specific to these situations. The result is a unique and universal Drowning Chain of Survival comprised of five links guiding the important life-saving steps for lay and professional rescuers. This may significantly improve chances of prevention, survival and recovery from drowning. The steps of the chain are: Prevent drowning, Recognise distress, Provide flotation, Remove from water, and Provide care as needed.

STATEMENT

The International Lifesaving Federation recommends that the Drowning Chain of Survival be used for general guidance to all involved in preventing or taking action in a drowning incident.

LEVEL OF EVIDENCE

This statement is based on expert consensus.

DISCUSSION

The term "Chain of Survival" has provided a useful metaphor for the elements of the emergency cardiac care system for sudden cardiac arrest, however, interventions in drowning involves principles and actions that are specific to these situations. A unique and universal Drowning Chain of Survival can guide the important life-saving steps for lay and professional rescuers. This may significantly improve chances of prevention, survival and recovery for people in potential danger in water.

Prevention is the most important contributor to reduce drowning mortality and morbidity. In low and medium income countries (LMIC) where more than 90% of the global drowning occurs, guidance to accelerate culturally appropriate prevention, rescue and resuscitation strategies are most urgently needed. ¹ High income countries (HIC) have seen dramatic reductions in drowning mortality as a result of reduced risks and effective strategic interventions. Further mortality reduction can be facilitated with the introduction of effective approaches to prevention, rescue and resuscitation in LMIC settings. ²

When preventative measures fail, responders need to be able to perform the necessary steps to interrupt the drowning process. The first challenge is to recognise someone in distress and the need to activate rescue and emergency medical services (EMS) appropriately when possible. It is critical that rescuers take precautions not to become another victim by engaging in dangerous behaviors. ³ Early rescue may prevent initial and subsequent

Drowning - Chain of Survival

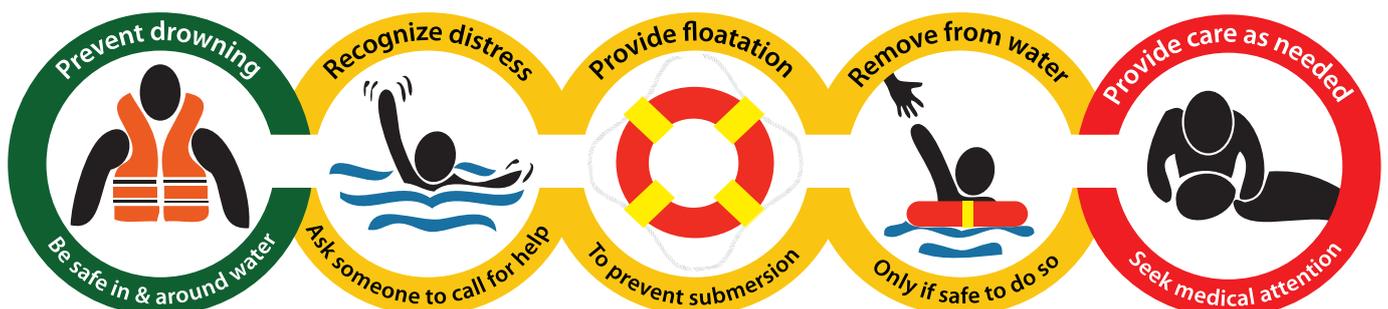


Figure 1: Pictogram of the new Drowning Chain of Survival.

water aspiration, respiratory distress and medical complications.

The entire drowning process, from submersion/immersion to cardiac arrest usually occurs in a very short space of time.⁴ If the person is rescued alive, the clinical picture is determined predominantly by the amount of water that has been aspirated. In some cases, even an early and effective rescue will not prevent the medical consequences and in these cases basic and advanced life support interventions may be required.⁵

An effective educational strategy on drowning can assist both LMIC and HIC responders to recall important preventative measures as well as critical response steps. One such strategy has involved promoting icons in the form of a Drowning Chain of Survival.^{6,7}

The purpose of this concept is to describe the development of a new and universal Drowning Chain of Survival for the prevention and effective response to drowning incidents based on conceptual, practical, and educational value.

REVIEWING CONCEPTS AND MODELS

In 2013, a group of experts reviewed the need to update the existing Drowning Chain of Survival by examining all elements of current and similar models. The four major elements of the European Resuscitation Council (ERC) and five major elements of the American Heart Association (AHA) chains of survival were evaluated from an applicability to drowning perspective.⁸

The first⁶ *Drowning Chain of Survival* developed in 2002 resulted from a realisation that drowning prevention and first aid education had several unique characteristics not captured in the emergency cardiovascular care (ECC) chains of survival. Basic and advanced life support in the aquatic environment requires specific skills and knowledge that were not taught in regular first aid and cardiopulmonary resuscitation (CPR) education.⁹ The result was an original Drowning Chain composed of icons that formed 6 links.⁶

The 2012 *“Drowning Response”* adopted by the American Red Cross (ARC) was reviewed.¹⁰ The ARC Drowning Response chain did not include prevention; instead it addressed the key evidence-based effective drowning prevention strategies by developing a specific Circle of Prevention.¹⁰

The *“Call to Action”* system used by Surf Life Saving New Zealand was also reviewed. It includes a “provide flotation” link as a priority intervention, emphasises the importance of rescuer safety, and omits links that duplicate information already contained in the ECC Chain of Survival.^{8,11}

A Delphi-like process among experts was performed by email previously to the workshop at the World Conference on Drowning Prevention in 2013 (WCDP-2013) where conceptual, practical, and educational values were examined supported by medical, pedagogical and lifeguarding science. A facilitated discussion identified ways to evaluate whether the proposed

model would meet the needs of all layers of prevention and response, as well as complying with International Organisation for Standardisation (ISO) requirements. In closing the session at the WCDP-2013 a final summary including all the relevant ideas, identifying key areas of agreement and unresolved issues was presented. After the workshop, input from the participants continued to be collated and refined.

RESULT

A new concept of a Universal Drowning Chain of Survival containing 5 links is described.

PREVENT DROWNING

- Be safe in & around the water

It has been estimated that most drownings are preventable.¹² The ability to avoid a drowning contrasts with the high rates of poor outcomes following these type of incidents. Drowning requires multiple layers of protection. To be effective, drowning prevention must be used by individuals near, on or around the water, and those who supervise or care for others in water settings.

MAJOR ADVICE ACTIONS

- Stay within arm’s reach of children when in or near the water
- Swim in water-safe areas where there are lifeguards
- Fence pools, spas and other aquatic locations with 4-sided fencing
- Always wear a lifejacket when using watercraft (eg. boat, kayak etc.)
- Learn how to swim and water-safety survival skills.

RECOGNISE DISTRESS

- Call for help

The first challenge is to recognise a person in distress in the water and know how to act safely, and to activate the lifeguard, rescue and emergency medical services (EMS) if possible and available. Frank Pia contradicted the prevailing notions that most victims struggle at the water’s surface, call or wave for help, and actively attack rescuers. He showed that a person struggling and about to drown cannot usually call for help.⁴

In 1995, Langendorfer & Bruya identified key developmental components of aquatic readiness and water competency and a Drowning Risk Assessment was created.¹³ **Identified recognisable elements of a person at high risk of drowning include: Near vertical body position, ineffective downward arm movements, ineffective pedalling or kicking leg actions, and little or no forward progress in water.**¹⁴

Sending someone to call for help upon recognising a person in distress is a key element in the drowning response chain. Delays in activating EMS/rescue services increases the risk of fatal drowning.³

MAJOR ADVICE ACTIONS

- Recognise early drowning victim's distress signs. Victims may not wave or call for help.
- Tell someone to call for help while staying on-scene to provide assistance.
- Watch where the victim is in the water, or ask a bystander to keep constant watch.

PROVIDE FLOTATION

- To prevent submersion

After recognising a victim is in distress and asking someone to call for help, the next priority is to interrupt the drowning process by providing flotation to the victim. Providing flotation is a strategy not widely employed despite buying valuable time for emergency services to arrive, or for those on-scenes to plan rescue efforts. Most rescuers tend to focus on the strategic goal of getting the victim out of the water even if there is a high threat to life/rescuer safety.¹⁵ Devices such as ring-buoys (life-buoys) are purpose-designed to provide flotation. However, they are not always available at the scene of a drowning incident. Therefore, improvised buoyancy aids such as empty plastic bottles/containers, body-boards, surfboards, driftwood, ice-chests, football etc. should be used. It is critical that lay persons take precautions not to become another victim by engaging in inappropriate/dangerous behaviours.³ Given the number of bystanders who drown while attempting to rescue others, reaching out with, throwing, or dropping the buoyancy aid without entering the water is the safest course of action.¹⁶

MAJOR ADVICE ACTIONS

While helping others:

- Stay out of the water to reduce rescuer risk.
- Throw something that floats to the victim.

To help yourself:

- If you are in difficulty, don't panic; stay with any flotation you may have.
- Signal for help as soon as and if possible, and float.

REMOVE FROM WATER

- Only if safe to do so

Removing the victim from the water is essential in order to provide a definitive end to the drowning process. Several strategies for removal can be used: Assist the victim to get out of the water by giving directions, i.e. pointing out to the closest and safest place to get out. Attempt to remove the victim without fully entering the water by utilising rescue techniques such as, reaching, throwing and wading out with equipment; If all else fails, the lay rescuer may then consider entering the water if it is safe to do so. The entry of an untrained person into the water to rescue someone is extremely dangerous and is not recommended.^{3,16} In order to mitigate the risk during a rescue, a rescuer must bring a source of flotation as to assist the victim.

MAJOR ADVICE ACTIONS

- Assist the victim on how to self-rescue by giving them directions for getting out of the water
- Try to remove the victim without entering the water
- Only if safe to do so, rescue the victim using any flotation available.

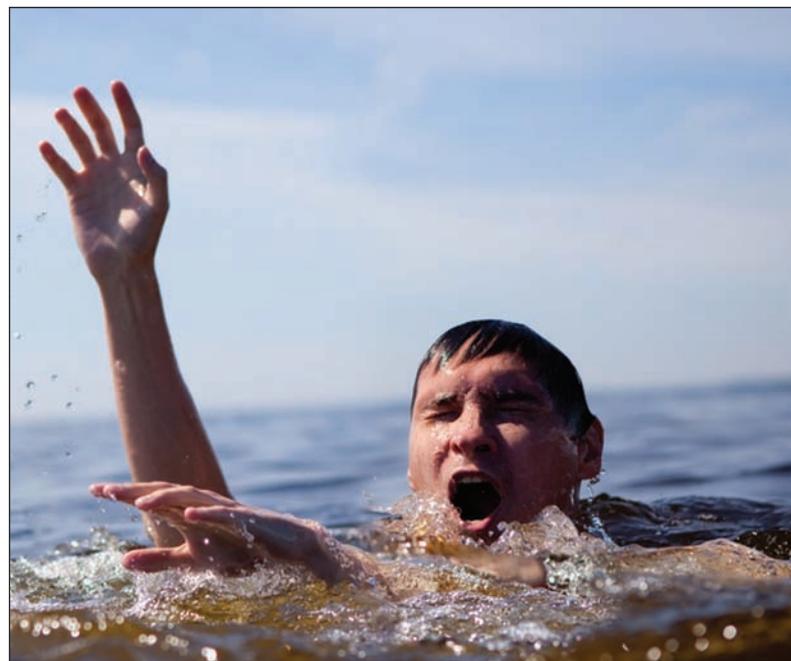
PROVIDE CARE AS NEEDED

- Seek medical attention

Basic life support for drowning patients is unique due to the dangerous environment which may pose some difficulties in providing care before, during or after the rescue process. The need for, and initiation of basic life support may occur while the victim is still in water if the rescuer is trained and can provide in-water resuscitation safely.⁵ If not interrupted, the drowning process leads to apnoea followed by cardiac arrest within minutes. Any attempt to immobilise the spine will impede rescue, and more importantly delay resuscitation. Therefore, attempts to immobilise the spine should only be made where there is strong evidence of cervical spine injury.¹⁷ Transporting and positioning drowning victims also requires specialised adaptations.¹⁸

CPR is needed when the heart stops following a period of apnea.⁵ It is imperative that CPR follows the traditional Airway–Breathing–Circulation (ABC) approach in this setting of hypoxic induced cardiac arrest.¹⁹ Initial ventilations may be ineffective in drowning due to the presence of water in the upper airway.⁵ Airway management is always challenging due to vomiting/regurgitation and the fluid that is commonly present in the upper airway. Also unique to drowning is that the most common rhythm in cardiac arrest following drowning is asystole.

As soon as the victim is removed from the water, rescuers must recognise the drowning severity especially if there is a life-threatening situation so immediate care can be provided.²⁰ As the majority of people with mild distress may not actually aspirate water it is important to educate responders when to call the ambulance or seek medical assistance/hospital care.²⁰



MAJOR ADVICE ACTIONS

- If not breathing, start CPR (ventilations and compressions) immediately.²⁰
- Consider the use of oxygen and an automated external defibrillator as soon as possible if available.
- If breathing, stay with victim until help arrives.²⁰
- Seek medical aid/hospital if any symptoms are present, and for all victims who require resuscitation.²⁰

SUMMARY

Education on how to prevent and to how act when a drowning incident occurs has not been guided by high-level evidence. The concept of having a suggested course of action for drowning is not new, but has never had worldwide acceptance, and never been adopted as a standard of care, instruction or communication.

During the process of establishing a new and universal Drowning Chain of Survival the authors faced many challenges. The major issues were: the diversity of how drowning is perceived around the world, the heterogeneity of knowledge, existing drowning response models, how best to reconfigure the chain and the evaluation of compliance with international signage standards so “one shoe could fit all”. As work on the model progressed, it became evident that the simpler the message the more acceptable and widely used it would be for different scenarios and levels of rescuer-experience.

The resultant new Drowning Chain of Survival does not prescribe specific advice but rather gives general guidance to all involved in preventing or taking action in a drowning incident.

Although a consensus on a new Drowning Chain of Survival has resulted from this process, the model still needs to be accepted, used, and validity-tested in different aquatic scenarios and with groups of professionals to lay persons, in HIC and LMIC settings, that may be called upon to respond in an aquatic emergency.

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Community Rescue Boats

Colm Dempsey, IWS Wicklow

As a result of a tragic accident off the beach in Tramore in 1962 in which three youths lost their lives, a Committee was established under the auspices of the Irish Red Cross "Water Safety Service" to investigate the possibility of placing a Community Inshore Rescue Boat in Tramore.

At that time, the R.N.L.I. was researching a new prototype lifeboat for inshore rescue purposes. This was in fact, the forerunner to the well-known "RNLI D Class" Inshore lifeboat. These fast inflatable boats proved very successful and the first one to be stationed in Ireland as a Community Inshore Rescue Boat was stationed at Tramore in 1963.



L-R: Terry Sillery (Wicklow), Eamon Mongey (Tramore) & Liam McMahon (Skerries)

This was followed by the establishment of an R.N.L.I. Inshore Lifeboat Service in Tramore one-year later in 1964, which was the very first RNLI inshore station in Ireland.

aided by the generosity of the Royal National Lifeboat Institution & Irish Coast Guard.

It was not until the establishment of the Irish Marine Emergency Service in 1990 (now the Irish Coast Guard) that a formal group was put in place to give advice and assistance to Community Inshore Rescue Services nationwide. The group is called the "Community Inshore Rescue Service Advisory Group (CIRSAG) and is chaired by the Chief of Operations of the Irish Coast Guard. The other members of the group are representatives of the Rescue Commission of Irish Water Safety and the Royal National Lifeboat Institution.

Training & Standards

Under the powers issued to IWS Value Added Tax (Refund of Tax) (No 18) Order 1985, the Rescue Commission is allowed to set the minimum standards of operation and training and inspection standards for the Community Rescue Boat Stations. During 2010 the Rescue Commission undertook a review of developing changes in international best practice for rescue boats under 15 meters... >>

Tramore is the only town in the British Isles that has both an R.N.L.I. and a Community Inshore Rescue Boat, with the same class of boat on station.

In the following years, with the help of IWS & Tramore Sea Rescue, several Community Inshore Rescue Services were established, particularly along the west coast of Ireland.

In order to assist these services the Government agreed that value added taxation (vat) relief could be granted through the Department of Finance. Relief was granted on condition that the Service met an acceptable standard set by Irish Water Safety.

Irish Water Safety administers this Statutory Instrument

In 1972, a Committee of the Irish Water Safety Association, albeit on an ad hoc bases, looked after the interests of the Community Inshore Rescue Services in Ireland. This Committee assisted in training and the provision of surplus equipment for those who needed help,



Crews from the following community rescue boat station: Waterford City River Rescue, Banna Sea Rescue, Ballybunion Rescue & Ballyheigue Rescue.

Tarrtháil

Marcas Ó Siadhail, IWS Meath

Thosaigh mise ag déanamh tarrthála nuair a chuaigh mé go dtí an mheánscoil. Bhí mé 13 nó 14 bliana d'aois. Rinne mo theaghlach ar fad romham é agus de bharr sin bhí fhios agam go mbeadh mise á dhéanamh chomh maith. Bhíodh siad ar fad ag obair sa seanpholl an tsnáma i mBaile Átha Troim. Bhíodh éad orm agus mé níos óige ach bhí fhios agam go mbeadh mo sheans agamsa. Rinne mé tarrtháil ar feadh na tréimhse ar an meánscoil. Bhí mé ag súil leis an Luan agus tarrtháil ag an deireadh seachtaine agus chuir sé go mór le mo thráthnóna Domhnaigh, in áit a bheith díreach in ísle brí faoi scoil ar an Luan. Bhí rud éigin agam le bheith ag súil leis agus chuir seo go mór le mo sheachtain.

Bhí an tarrtháil féin fiorthábhachtach i mo shaolsa. Rinne mé cairde buan i mo rang tarrthála. Meascann tú le buachaillí agus le cailíní do d'aois féin i suíomh neamhfhoirmiúil taobh amuigh den scoil. Rinne seo forbairt ar mo chumas sóisialta agus thug sé misneach dom ionam féin. Chomh maith leis na buntáistí sin, d'fhoghlaim mé scileanna tarrthála. Téann tú ón aimsir chaite anseo go dtí an aimsir láithreach san abairt ina dhiaidh, is fiú mír nua a dhéanamh.

Foghlaimíonn tú scileanna a chuidíonn leat féin agus b'fhéidir níos tábhachtaí, a d'fheadfadh cuidiú i mbeatha agus saol na ndaoine thart ort. Dúirt cara tarrthála liom uair amháin gur dóchála gur ar na daoine a chaitheann tú an méid is mó ama in éindí leo a bheidh ort athbheochan chardascamhógach a

dhéanamh, ná ar stráinséar. Ar ndóigh, sin do theaghlach agus do chlann. Foghlaimíonn tú cén chaoi a thioctadh leat cuidiú le do ghaolta. An bhfuil rud ar bith níos tábhachtaí ná sin? D'fheabhsaigh an tarrtháil mo chumas snámha agus aclaíocht mhaith a bhí ann anuas ar sin. D'fhoghlaim mé faoin fharraige, faoi locha, aibhneacha agus eolas ginearálta ar shábháilteacht uisce chomh maith.

I mo chás féin, thosaigh mé ag múineadh tarrthála agus na scrúduithe tarrthála uilig bainte amach agam. Arís, chuidigh seo liom go mór i mo fhorbairt phearsanta mar dhuine. Thug seo taithí mhaith dom agus muinín go háirithe nuair a thosaigh mé ag múnadh ranganna snámha. Fuair mé mo chead phost sa pholl snámha nua i mBaile Átha Troim. D'oibrigh mé mar mhaoirsnámha agus mar mhúinteoir snámha. Ní bheadh an post sin agam gan tarrtháil. Ansin chomh luath agus ar bhain mé an ollscoil amach bhí mé in ann post a fháil sa pholl snámha ansin. D'oibrigh mé ar na tránna chomh maith i rith an tsamhraidh. Choinnigh na scileanna tarrthála mo theaghlach san airgead agus iad ina scoláirí ollscoile chomh maith agus choinnigh na scileanna sin mé san airgead agus mise ar an ollscoil. Ach cé go raibh buntáistí airgeadais le baint as tarrtháil agam, caithfidh mé a admháil go raibh tionchar mór dearfach ag tarrtháil ar mo shaolsa. Chuir sé go mór le mo fhorbairt mar dhuine agus táim fíorbhuíoch go raibh tarrtháil agam mar chuid do mo shaol.

>> From this review the Rescue Commission has revised the document "Guidelines for the Establishment of a Community Rescue Boat Service" and the inspection process carried out by IWS.

After many years of campaigning by IWS to the Revenue Commissioners a new VAT order was published in 2013 by the Minister of Finance, which allows Community Rescue Boat Services that are based on inland waterways to reclaim VAT on their purchases.

VAT inspections are carried out on a yearly basis at each station by a team of 2 inspectors who assess the operational management of the station and its equipment and carry out an at sea inspection of the crew on board the boat. The afloat inspection is carried out by one of the training tutors, who have received training in the inspection process.

Training is provided by the rescue commission at regional location for a number of units or at the station for a single unit, usually 3 to 4 courses are run each year. Training is provided by a volunteer panel of 9 highly experienced tutors, who are current & former RNLI Lifeboat Helmsmen.

Community Rescue Boat Services do more than provide a rescue service in their locality. They actively promote the

Water Safety Message in their area, by carrying out open days, arrange for groups to visit their station, crew visit schools and youth groups, providing water safety information on safe swimming, boating and other water activities to the public.

Former community stations that now operate under the Royal National Lifeboat Institution: Bundoran, Courtown Harbour & Wexford.

Kilkee is now a Irish Coast Guard Station.

The number of services nationwide that have Vat relief status as 01/2014 is now 16:

- Ballinskelligs
- Ballybunion
- Ballyheigue
- Banna
- Bantry
- Bonmahon
- Cahore
- Carnna
- Corib / Mask Rescue
- Derrynane
- Limerick Marine Search & Rescue
- Mallow Search & Rescue
- Schull
- Tramore
- Waterford City River Rescue
- Waterford Marine Search & Rescue

Report

CORK Surf Life Saving

Justin Crowley & Alice Crowley, IWS Cork

2014 has been a busy, challenging but highly successful year for Cork Surf Life Saving. Our major development has been to start surf life saving at a second location, namely on Red Barn Beach in Youghal, Co. Cork. In our current society where time is our most valuable commodity, we are very thankful to all our Volunteer Water Safety Instructors, Assistant Instructors and Parents who give their time to us in abundance. Without their support, there is no way we could function!!

Cork Nippers

Firstly in Indoor competition at Easter, Cork finished fourth overall with some fantastic Individual and Team Performances. Enrolment took place for the new outdoor season at the end of May with lots of familiar faces returning and newcomers from all parts of West and East Cork. We were blessed with ideal conditions for Nipper training throughout the summer and in particular for our two Carnivals which took place on Red Barn Beach in Youghal against Tramore Surf Life Saving and on the Warren Beach in Rosscarbery. Cork hosted the Munster Nipper Championships on Inchydoney Beach in August. With an army of parents and other volunteers, the event ran off smoothly despite the threatening rain. Every nipper tried their hardest, which sometimes ended in tears of disappointment but mostly a sense of achievement. Cork Nippers won the Munster title for the first time and went on to win the All Ireland title in Kilkee later in the month.

Cork Juniors / Youths

Training for Indoor Competition began on frosty Sunday mornings in January at the 20m pool in Clonakilty Park Leisure Centre. There was always enthusiasm and a large turn out of Juniors, Seniors and Masters for these sessions. Cork sent our largest team ever to compete at the Indoor Nationals in February. We also sent teams to the Wexford Annual International Life Saving Competition in April as well as the National Openwater

Championships in Kilkee at the end of August. In September eight young Juniors travelled to France to compete at the World Championship Interclub Competition. They represented Cork and Ireland in an exemplary manner. As well as making it through to many finals, the group finished fourteenth in the SERC (Simulated Emergency Response Competition), Alan Butler and Caimin Crowley won Bronze in the Rope Throw Event and Alannah Crowley won Gold in the Sprint Relay.

Cork Seniors

Watch this space - Our "older Nippers" are now just coming through to Senior Level and the base we are building will hopefully reap benefits at this level in the future.

Cork Masters

Not to be outdone, Cork Masters also had a very successful season and great friendships were formed through training and competition. Masters competed at the Indoor Competition in February, they won the Masters Trophy at the National Openwater Life Saving Championships in Wicklow for the second time and eleven masters went on to represent Cork and Ireland at the World Championships in Montpellier. No medals were won but vows were made to continue training and to do better at the World Championships in the Netherlands in 2016.

Irish Squad

In 2014, Cork had three representatives on the Irish Squads. Brodie Edmead on the Irish Junior Squad, Alex McLoughlin and Alannah Crowley on the Irish Senior Squad. Both Brodie and Alex went on to represent Ireland at the World Championships. Brodie won a Bronze Medal in the Sprint Relay and finished up fourth in the World in the Surf Swim.



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While it is always easy to emphasise success in water events, we should acknowledge the work done by our Instructors in preparing the children for exams at the end of the summer. Once again examiners came from Cork Water Safety to put the children through their paces in Surf and Nipper exams. Well Done to all!!

Finally all club members who represented Cork throughout the season did so with distinction. At a time when the Sports Commission is placing more and more focus on the elite and high performance end of the sport, in 2015 we hope to increase participation in all disciplines, all events and all age groups and build on our success in 2014.

Photographs

1. Cork Team of Alan Butler, Erika McCarthy, Bebhinn Crowley & Alannah Crowley (captain) who finished 14th in the World Championship S.E.R.C. (Simulated Emergency Response Competition).

- World Championship Gold Medal Winners in the Beach Sprint Relay - Alannah Crowley, Lisa Bolger, Denise Bolger and Georgina Steele.
- Young Nippers carrying up their boards from the beach at the end of a fantastic competition - Munster Nipper Final - Inchydoney, Co. Cork.
- Picture of Alan Butler and Caimin Crowley who won Bronze World Championship Medals in the Rope Throw.
- Conor Daly - Cork Surf Life Saving - Diving for Flag in Age 11 Beach Flags at Munster Final on Inchydoney Beach.
- Surf Swim Munster Nipper Final - Inchydoney Beach.
- Liam Crowley, Cork Surf Life Saving holds onto his board at the end of a Board Race.
- The moment when it was announced that Cork had won the All Ireland Nipper Trophy - Kilkee, Co Clare.



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THE NATIONAL FIRST RESPONDER NETWORK

www.cfr.ie

CFR Ireland was launched Nationally on the 8th December with the support of the National Ambulance Service (NAS) & The Pre Hospital Emergency Care Council (PHECC) following 9 months of work by a volunteer committee formed at the Respond 2014 conference held last March.

Respond 2015 is taking place on the 7th March 2015 in the Tullamore Court Hotel.

What is CFR Ireland?

Cardiac First Responders Ireland is the National umbrella Organisation for Community First Responder Groups in Ireland. CFR is run by volunteers living in communities across Ireland. Our aims are to affiliate all community first responder groups in Ireland, to help grow community responder schemes, to communicate best practice for treatment of cardiac arrest in the communities.

CFRIreland is supported by the:

- National Ambulance Service
- Pre Hospital Emergency Care Council
- Centre of Emergency Medical Science UCD

Where did CFRIreland Start?

CFRI was formed at the Respond 2014 conference held on the 1st March 2014. Respond 2014 was the first time that a national conference took place that brought together all the Community Responder Groups operating in Ireland at a national conference.

Role of CFRIreland

CFRIreland was set up to promote and assist CFR groups that provide first response to people living in their communities who suffer Cardiac Arrest, Choking, Chest Pain and Stroke.

CFRI do this by providing assistance & information on:

- Group formation
- Operation procedures
- Training
- Lobbying

Who are CFRIreland?

CFRIreland or Community First Responder Ireland is a national organisation for first responders groups in Ireland. It is currently in "set up mode" and is run by an executive committee of 8 volunteers from different Community First Responder groups based in County Wicklow. They are the

same committee that planned and organised Respond 2014. They are tasked with getting CFRI up and running. It is planned to hold our inaugural AGM in 2015 where elections will be held and a national executive will be put in place.

Is their funding available to CFR Groups?

Community First Responder Schemes are completely voluntary groups. They receive no central funding. There may be local grants available from local funding originations like the leader program or local authority.

All the commitment, training, fund raising etc. is carried out by the volunteers, ordinary people, living in communities, in their own time and at their own expense.

There are many innovated methods been used to fund raise from CFR groups. Your fund raising efforts can also be used as an opportunity to create awareness of heart disease, stroke and to learn CPR.

What practical support will the National Ambulance Service provide?

NAS will provide the following supports to integrated First Responder Schemes:

- Effective Liaison
- Recognition
- Provision of expert advice and support
- Clinical Guidance
- Clinical Indemnity
- Replacement of Consumables
- Access to Critical Incident Stress Management Support
- Management of Clinical Waste

A Cardiac First Responder is:

A person who has successfully completed a Pre Hospital Emergency Care Council (PHECC) approved Cardiac First Responder course – Community level, within the last two years. The Cardiac First Responder Course is designed to allow participants attain a basic understanding of Basic Life Support situations and their treatment. This course is Level 1 on the PHECC (Pre-Hospital Emergency Care Council) Training Standards.

The covers the "Chain of Survival", what to do in the event of a Cardiac Arrest, Adult, Child & Infant CPR, how to use an AED (Defibrillator) Adult Chest Pain Management (suspected Heart Attack), Aspirin Therapy, Stroke recognition using F.A.S.T., and Choking (FBAO).

What does a Community First Responder do?

A person trained, as a minimum in basic life support and the use of an Automated External Defibrillator (AED), who attends a potentially life threatening emergency in their area. A Community First Responder is a member of the public who volunteers to help their community by responding to medical emergencies while the ambulance is on its way.

You are then able to provide an early intervention in situations such as a heart attack or cardiac arrest or choking or stroke before the National Ambulance Service crew arrives. The Responders role is to deliver an emergency and urgent care response for their communities.

We know that in responses to certain emergency situation, every second counts: e.g. cardiac arrest, stroke and heart attack. International evidence is clear, equipping communities with equipment and basic life-saving skills will save lives.

The objective is to be on the scene of a suspected Heart Attack or Cardiac Arrest within 10 minutes of receiving the Emergency SMS from Ambulance Control. After arriving at the scene our First Responders will be:

- Clearing and controlling the airway of an unconscious patient.
- Providing resuscitation and defibrillation.
- Making them feel more comfortable and at ease.
- Taking basic observations.
- Reassuring worried relatives and taking charge of the situation.
- Using local knowledge to ensure that the Ambulance can find the location quickly.
- The responder completes the CFR Patient Report Form and hands over top copy to National Ambulance Service crew.

How many responders do you need to form a CFR Group?

There are no set numbers for any one CFR group; you should try to start with about 20 people for training. If you consider that each responder would do 12 hours a week, you would need a minimum of 14 responders to cover a full week. However you must always remember that the responders are volunteers giving up their time to serve their community and some may only have a few hours a week to give. Remember too, that at holiday time group may not be able to provide 24/7 cover. You can only do your best.

Types of First Responder Schemes

1. Linked Community First Responders

A linked Community First Responder Scheme operates whereby the ambulance service upon receiving the 112 or 999 call, in addition to the usual ambulance/EMS personnel, simultaneously dispatches a rostered on-call community based first responder. Linked Community First Responders are dispatched by the National Ambulance Service (NAS) to life threatening emergencies such as cardiac arrest, adult chest pain (suspected heart attack), choking and stroke only.

In Ireland, Community First Responders groups can opt to be dispatched to either of 2 levels of emergencies.

Community First Responder Scheme-Basic

Community First Responder Schemes-Basic are dispatched to Cardiac Arrest (9-ECHO) and Choking (11-ECHO) calls only.

Community First Responder Scheme-Enhance

Community First Responder Schemes-Enhanced are dispatched to Cardiac Arrest (9-ECHO), Choking (11-ECHO), Chest Pain (10-CHARLIE and 10-DELTA) and Stroke (28-CHARLIE) calls only.

2. Public Assess Defibrillator Schemes (PADS)

Public Assess Defibrillator (PAD) Schemes place defibrillators (AEDs) in public/or private places within a community that are easily accessible for use. Ideally trained people should use these AEDs but untrained people in the community can also access them.

3. Site Specific

This is similar to a community programme but is site specific in a defined area/facility, such as, workplace, sports club, airport



or shopping centre where employees are trained to perform CPR and use an AED. Dublin Airport is an example of a site specific scheme.

4. GP First Responders

A GP first responder programme is one whereby GPs are equipped and trained to use an AED to respond to an acute cardiac event. In rural Ireland in particular, GPs are often the first to arrive at the scene of an acute cardiac event. The UCDs MERIT Project (Medical Emergency Responders: Integration & Training) is an example.

5. NAS – Off Duty Scheme

Off duty NAS staff members volunteer to act in a First Responder role in their local community alerted by NAS SMS Text.

6. Fire Service Scheme

This type of scheme provides the NAS with First Responders who are mobile in an emergency vehicle and able to respond to an area of the NAS's operational area.

7. Garda Responders

Garda scheme are where on duty Garda, on patrol carry an AED in the Garda vehicle and respond to cardiac arrests.

Do I need special motor insurance?

No, you do not need special motor insurance. However, all Community First Responder schemes linked to National Ambulance Service must comply with the National Ambulance Service Community First Responders "Policies & Procedures". One requirement of the NAS policy is that all Community First Responder group members must inform their Motor Insurance provider that they are a Community First Responder and they must receive confirmation that they have done this either by letter, email or stated on the Motor Insurance Policy.

There is no charge for this. The easiest time to get this confirmation is when CFRs are renewing their motor insurance policy. However sometimes when Community First Responders try to enter the details after the policy has been issued, the Insurance Company may try to charge for this service at this time, as they see it as an amendment, it is not an amendment. There is no need to amend anything, CFRs only require a confirmation notice.

If you are having any difficulty getting motor insurance confirmation letters, please contact info@cfr.ie.

Do I need Clinical Indemnity Insurance?

All Community First Responders, dispatched by the National Ambulance Service to emergencies are covered by the National Ambulance Service Clinical Indemnity.

Please note, the National Ambulance Service Community First Responders states that the minimum level of training required to be a Community First Responder and be dispatched by NAS, to an emergency, is a PHECC Cardiac First Responder. There are Clinical Practise Guidelines (CPGs) laid down for the Cardiac First Responder training standard. As long as the Community First Responder does not exceed this standard maximum level that we are supposed to operate to, the Responder will be covered under the NAS Clinical Indemnity.

If Community First Responders operate outside our Cardiac First Responder, Clinical Practise Guidelines they are operating outside the Clinical Indemnity.

So, once you are a Community First Responder with at least Cardiac First Responder training and are dispatched by the National Ambulance Service and you stay within the Cardiac First Responder Clinical Practise Guidelines you are covered by the National Ambulance Service Clinical Indemnity.

Do I need Garda Clearance?

No, under the current NAS Community First Responder policy does not require CFRs to have Garda Clearance. However, CFRIreland recommend that Community First Responder attain Garda Clearance. One way of attaining Garda Clearance is through your local Volunteer Centre (Volunteer Ireland). For more details please see www.volunteer.ie.

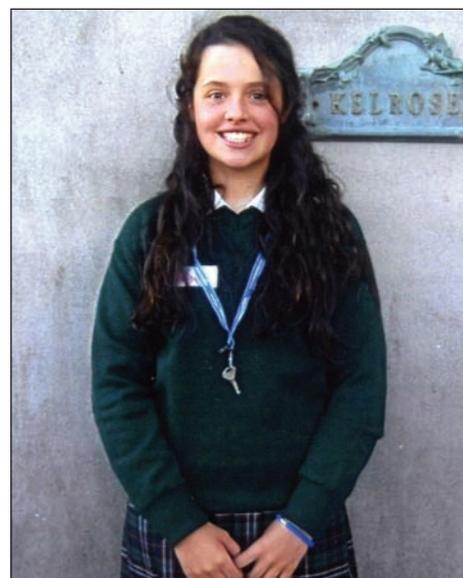
Salou

by Kelsey O'Mahony

I was in Spain with my dad and sister and we went on a banana boat. The man who was driving didn't speak much English. We were a good way out to sea when I fell off. The man didn't see that I had fallen off. I was shouting a bit to see if they could hear me, but in a few seconds, I couldn't see them and I didn't think they were coming back for me.

I started to swim into shore because if I stayed where I was I would get too cold to move. If I hadn't have done Water Safety, I don't think I would have been able to swim back to shore, or at least where I could stand in the water.

The main thing is that I am so glad I do Water Safety, because I was in a serious situation, and I was able to use all my Water Safety skills to help save my life."



Childsplay Surf Gear

Hurricane M-Tech Boards

Constructed using the latest EPS/VAC Mould Epoxy Technology the M-Tech Racing Board is the ultimate all round performance lifesaving paddle board. The advanced M-Tech construction means it is built to last. The board has a fine polish which offers minimal hydro resistance and extremely comfortable knee pads and handles.

Features

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Hurricane S-Tech Boards

The S-Tech range of boards are designed by Hurricane Surf and are made to an excellent standard.

The stringer-less core has an inner glass layer for strength & rigidity, covered with a soft EVA layer followed by a slick bottom.

Features:

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GLOBAL REPORT ON DROWNING

Reproduced with the kind permission of Dr. David Meddings, WHO

Drowning is a serious and neglected public health threat claiming the lives of 372 000 people a year worldwide. More than 90% of these deaths occur in low- and middle-income countries. This death toll is almost two thirds that of malnutrition and well over half that of malaria - but unlike these public health challenges, there are no broad prevention efforts that target drowning.

While this report addresses drowning across all countries and ages, the particularly high incidence of drowning in low and middle income countries and among children and young people makes these countries and groups a central focus.

Our message: prevention is vital

Once someone starts to drown, the outcome is often fatal. Unlike other injuries, survival is determined almost exclusively at the scene of the incident, and depends on two highly variable factors: how quickly the person is removed from the water, and how swiftly proper resuscitation is performed.

Prevention, therefore, is vital.

Section 1 Drowning - a neglected public health issue

Global burden

Alarming, drowning is among the 10 leading causes of death of children and young people in every region of the world, with children aged under 5 years disproportionately at risk and males twice as likely to drown as females. Over half of casualties are aged under 25 years. Income levels also have an impact – the overwhelming majority of drownings happen in low- and middle-income countries where people have close daily contact with water for work, transport and agriculture.

Limitations of data

Data collection in many low- and middle-income countries is limited, hampering the planning, implementation and monitoring of drowning prevention measures. In addition, the way deaths are classified means the full extent of the world's drowning problem is under-represented – statistics currently exclude intentional drowning (for example, suicide and homicide), as well as drowning deaths resulting from flood disasters and water transport incidents. ¹ Data on non-fatal drownings, which could reveal something about the burden of serious injury and lifelong disability, are not routinely collected.

Key risk factors

Lack of barriers controlling exposure to water bodies and lack of adequate, close supervision for infants and young children are a drowning risk, as are poor swim skills and low awareness of water dangers. In addition, high-risk behaviour, including consuming alcohol while engaging with water, is a risk among young people and adults. Other risk factors are transport on water and water crossings, lack of safe water supply, and flood disasters.

Section 2 TEN actions to prevent drowning

High-income countries have reduced their drowning burden and some of the strategies used have been successfully adapted in low- and middle-income settings. Based on available evidence, Section 2 sets out 10 actions that can help prevent drowning.

Community-based action

1. Install barriers controlling access to water.
2. Provide safe places (for example, a crèche²) away from water for pre-school children, with capable child care.
3. Teach school-age children basic swimming, water safety and safe rescue skills.
4. Train bystanders in safe rescue and resuscitation.
5. Strengthen public awareness of drowning and highlight the vulnerability of children.

Effective policies and legislation

6. Set and enforce safe boating, shipping and ferry regulations.
7. Build resilience and manage flood risks and other hazards locally and nationally.
8. Coordinate drowning prevention efforts with those of other sectors and agendas.
9. Develop a national water safety plan.

Section 3 Conclusion and recommendations

Drowning is an important public health issue with major impacts on children and youth. Drowning is preventable. Proven strategies implemented at household, community and national level range from teaching basic swim skills and installing barriers that control exposure to water hazards, to providing safe spaces for children such as crèches and learning

about safe rescue. Tailored to individual settings and risk groups, countries should take steps to improve data on drowning mortality and morbidity, and establish a national water safety plan.

Drowning is a multisectoral issue. Drowning prevention strategies have much in common with other public health agendas including safe water supply, rural development, disaster risk management and child health. More must be done to

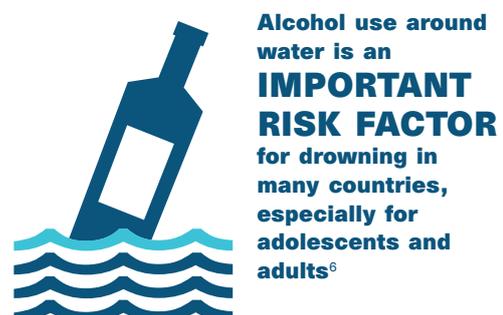
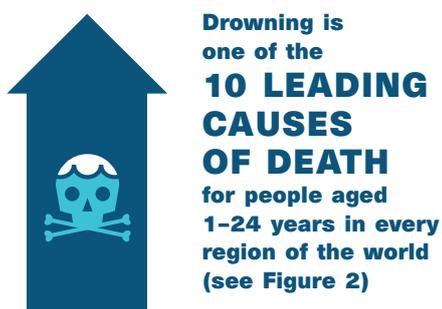
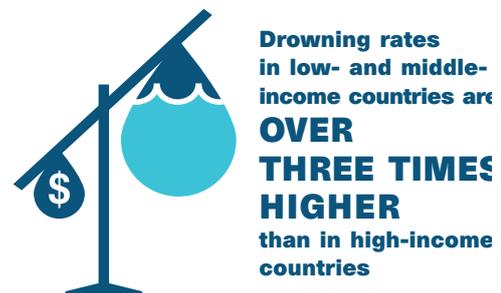
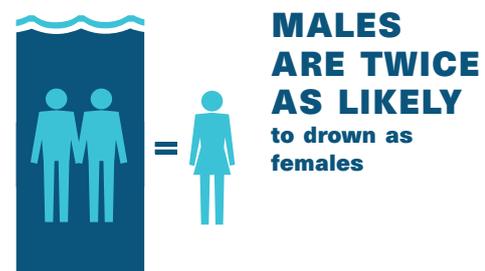
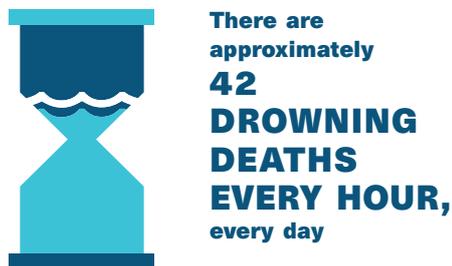
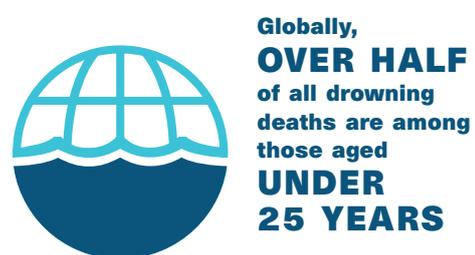
maximize these synergies – for example, village-based day care for pre-school children not only provides the early child development benefits associated with day care, it also prevents drowning and provides employment. Likewise, drowning risks could become a more clearly stated consideration of disaster risk management efforts in settings where flood disasters occur.

Given the multisectoral nature of drowning, a global partnership for

drowning prevention should be established in order to serve as a policy and implementation leadership community for the issue of drowning prevention.

In summary, donors and governments must prioritize drowning prevention, and its integration with other public health agendas.

DROWNING KEY FACTS



Report

National Beach Rescue

DONEGAL Surf Life Saving

1. Neil Shanley (left) from Ballyshannon with Ryan Haughey from Donegal carry Leon Vaughan from Letterkenny in the Tube Rescue event at the Irish Water Safety National Beach Rescue Championships at Brittas Bay, Co. Wicklow
2. The winning Donegal team with IWS Chairman Breda Collins.
3. Patrick McBride from Creeslough, Co. Donegal competing in the Board Race event.
4. Triona McMenamin from Letterkenny competing in the Board Race.



Championships

Brittas Bay, Co Wicklow.
(Saturday 6th September 2014)

WATERFORD Surf Life Saving

1. Tramore's James Hassey (left) and Jai Tuohy competing.
2. The Tramore lifeguard team with IWS Chairman Breda Collins. Second Row - Alana Power, Megan Walsh, Shaunie Colman, Anna Jacques, Ciara Duffy, Kevin Grimes. Third Row - Lochlann Carney, Aibhne Breathnach, Breda Collins, James Hassey, Kai Willmott. Back Row - Jeremy MCGowen, Matthew Sills, Fionn Slattery, Jai Tuohy, Warren Roche, Kevin Willmott.
3. Tramore's Megan Walsh competing.
4. Tramore's Kevin Grimes and Fionn Slattery carry Warren Roche from team-mate Matthew Sills in the Tube Rescue event.

(Photo: David Branigan/Oceansport)



Report

National Beach Rescue

CORK Surf Life Saving

1. Cork Seniors Alan Butler and Alex McLoughlin competing in the Board Rescue event.
2. Cork Masters Thomas Neville and Justin Crowley with Breda Collins, IWS Chairman.
3. Cork Senior Alan Butler.
4. Cork Senior Alannah Crowley competing in the Board Race.



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Championships

Brittas Bay, Co Wicklow.
(Saturday 6th September 2014)

MAYO Surf Life Saving

1. Killian Dervan from Breaffy, Co. Mayo competing in the Board Rescue event.
2. Patrick Livingstone (left) and Killian Dervan from Breaffy, Co. Mayo competing in the Board Rescue event.

WICKLOW Surf Life Saving

3. Scott Morton from Wicklow competing in the Board Race.
4. Wicklow's John McCaul (left) and Scott Morton carry Thomas Keogh in the Rescue Tube event.

(Photo: David Branigan/Oceansport)



EATING BEFORE SWIMMING



INTERNATIONAL LIFE
SAVING FEDERATION

MEDICAL POSITION STATEMENT - MPS 18
(Reproduced with the kind permission of ILSF)

Background

There is a long standing advice that one should wait after eating before swimming. Often an hour of wait is recommended. This review is conducted to evaluate the evidence that eating is a risk factor for drowning and that waiting to swim after eating will decrease this risk.

Question

Is there evidence that persons who have eaten recently have increased risk (over that of the general population) to participate in bathing, recreation, instruction and competition on and in-water activity?

Statement

There is no evidence that eating before swimming increases risk for drowning. While eating has been associated with nausea, vomiting, and abdominal pain, the causal relationship between these phenomena and drowning risk has not been reported nor well studied. Therefore, recommendations on amounts, timing, and food type when eating prior to swimming or water activities cannot be based on scientific evidence

Literary Review

Conducted by Dr Linda Quan MD December 2013 Databases searched included: PubMed, Ovid Medline and OldMedline, CINAHL, Cochrane Database of Systematic Reviews, UpToDate, MDConsult, JSTOR, Academic Search Complete, Google Scholar, Google Books, Google Web Search, ERIC, SPORTDiscus, and Physical Education Index. Dates searched for publications from 1960 to the present (October, 2013)

Keywords used included:

Drowning, Drown, Drowned,
Near drowning,
Swim, swimming, swam
Eat, eating, ate
Meal, nutrients, nutrition,
Digest, digested, digestion
Gut, gut action
Exercise
Water, aquatics
Human studies, in English

References

Published, refereed journal articles

<http://www.mayoclinic.com/health/childrens-health/CC00003>.

Children's swimming: Keep health risks at bay. "It's OK to swim immediately after a light meal or snack. If your child feels lethargic after eating a heavy meal, encourage him or her to take a break before swimming."

Summary

There is little published scientific literature or even general information on the effects of eating before swimming. The two swim studies, both conducted in the 1960's, showed no effect on swimming performance and minimal side effects at several different time intervals after a meal. No reported cases of eating before swimming causing or contributing to fatal or nonfatal drowning are reported in any of the literature searched.

Research generally shows that food consumption prior and during athletic endeavors improves performance. However, there is a small body of research on a condition called ETAP, exercise related transient abdominal pain which is mostly reported among runners and is not debilitating nor severe. Evaluation of liquid and food intake shows that the condition may occur more frequently in runners who consumed high carbohydrate drinks. No significant symptoms were reported in any of the studies.

No research, major medical or water safety organizations make any recommendations to wait before swimming after eating.

For the complete article, please logon to: <http://www.ilsf.org/about/position-statements>

Boyne Swim 2014 Brendan Devlin, IWS Louth

Louth Water Safety trainee Dearbhla Mc Groder pictured with her Boyne swim medal at the Aura Drogheda Leisure Centre.

Water safety trainee Dearbhla Mc Groder competed in the inaugural Aura River Boyne Swim held earlier this year. This challenging 2.7 Kilometre open water swim attracted over 150 swimmers from around the country. Dearbhla showed great determination to complete the swim in a time of 48.25 to win a medal in her age group. Dearbhla from Dunleer Co Louth attends Scoil Ui mhuiiri in Dunleer and is in her 4th year of her senior school cycle. Dearbhla is currently preparing for her IWS Rescue 3 Award and attends IWS life saving classes held in Aura swimming pool Drogheda.

Dearbhla intends to complete the Boyne swim for charity in 2015 and complete her IWS Rescue 4 awards in the same year. It looks like another busy year for Dearbhla.



Tramore Life Saving Centre

Michael "Buddy" Cuddihy , IWS Waterford

Our Vision

To provide the Tramore community with a safer environment at Tramore Beach.

Our Mission

The Tramore Surf Lifesaving Club is committed to being a volunteer community based provider of emergency services, recreation, sport and family involvement at Tramore Beach.

Background

Tramore Surf Lifesaving was established in 1984. Throughout its history it has routinely been regarded as one of the strongest and most competitive lifesaving clubs in the country. Surf Lifesaving is a sport that originated in Australia over one hundred years ago, its primary aim being to offer education and training to the public to reduce drowning accidents and fatalities.

It has evolved into one of the largest growth sports in the world, and involves various disciplines from swimming, kayaking, running, boating and paddle boarding. Ireland is ranked as one of the best teams in Europe in the sport, having only recently finished sixth at the European Championships. Tramore and Waterford was proudly represented by three local athletes, showing the success our lifesaving club has achieved. Currently our club has over 160 members, of all ages from 8 upwards.

The largest contingent of members is our "Nippers" who fall into the 8 to 14 year old age bracket. Such a large number of young and upcoming members are an extremely positive development for our club, as it ensures the long term future for our project and facilitates the training of the next generation of Ireland's lifesavers and lifeguards. Our club is run on an entirely voluntary basis; there is a fantastic sense of community and cohesiveness within Tramore Surf Lifesaving with parents, coaches, and safety personnel all giving up their time in a voluntary capacity for training several times each week.



HYPOTHERMIA

For people not used to cold water (temperature under 15 °C), sudden immersion is associated with two problems, either of which may result in death from drowning.

On initial immersion, the shock of the cold water coming in contact with the skin ("Cold Shock") can result in incapacitation and drowning in the first 2-3 minutes. For those who survive this and are unable to get out of the water quickly, progressive body cooling leading to hypothermia will follow in time. The rate of onset will depend on water temperature and the protective measures you have taken to reduce body cooling.

This article gives advice on how to prevent these conditions in the first instance and what to do if you do find yourself a victim of either.

COLD SHOCK

The term used to describe the initial response of a victim, not use to cold water after sudden immersion.

Signs and Symptoms:

- Initial deep gasping
- Uncontrollable rapid breathing, with possible dizziness and pins and needles
- Panic
- A large increase in both heart rate and blood pressure

Dangers:

- Inhalation on Shock
- Drowning
- Stroke or heart attack

Prevention:

- Use recognized 'man overboard' prevention equipment
- Wear approved lifejackets
- Wear clothing with good insulating and waterproofing properties
- Wear Immersion Suits (dry/wet)
- Hold on to some support and do not attempt to swim until symptoms have subsided (approx. 2-3 min)
- Exit the water as soon as possible

Follow up:

- Monitor airway, breathing and circulation
- Prevent further loss of heat
- Protect from wind
- Get medical help

HYPOTHERMIA

Following immersion, first, the skin and limbs cool rapidly; then the heart, brain, and other deeper parts of the body cool. Hypothermia occurs when deep body temperature drops by at least 2°C. Body build, body fat, fitness level and types of clothing worn, all affect its rate of onset.

Signs and Symptoms:

- Early dulling of sensation in hands and impaired muscle function
- Violent shivering with blueness around the lips
- Armpits very cold
- Muscles stiffness
- Lethargy and disorientation
- Slow and laboured breathing
- Pulse weakens but difficult to feel in any case because of cold

Dangers:

- Impaired sensation & muscle coordination may impair some early vital lifesaving actions involving hands
- Loss of consciousness
- Drowning
- Cardiac arrest
- Death

Note: Do not assume a person is dead; they may only be in hibernation.

Prevention:

- Wear approved lifejackets
- Wear Immersion Suits over warm clothing
- Learn cold-water survival techniques (stay still with arms by sides and legs together - "HELP" position)
- Get out of water as soon as possible (life raft; upturned hull, or any other refuge in air)

Follow up:

- Prevent further heat loss (enclose in plastic bag)
- Monitor airway, breathing and circulation
- Move victim to shelter and lie flat
- Insulate body and specially the head
- Remove wet clothing if dry replacements are available.
- If not:
 - Enclose body - except face - in large polythene bag or other waterproof material
 - Give warm sweet drinks if conscious, DO NOT give alcohol
 - Avoid rubbing the victims body

FACTS

- It takes only 15 to 20 minutes in cold water before the temperature of the heart, brain and internal organs begin to drop but skin and muscle temperatures cool far quicker, which may impair some essential early lifesaving actions.
- Children cool much faster than adults because they are smaller and have less fat. Boys usually cool faster than girls.
- Swimming may give a feeling of warmth but it accelerates muscle cooling. The body may produce more heat when swimming but it is also more quickly lost from the arm and leg muscles. Once these muscles cool, swimming becomes more difficult or impossible.

d) Normal clothes will not produce much insulation against cold water, but they will slow down the rate of loss of vital body heat.

e) Wearing approved Lifeguards, Immersion Suits and properly fitting Wet suits will decrease the likelihood of hypothermia for all water sports enthusiasts.

CONVERSATION OF HEAT IN WATER

Retention of heat in water:

- 1) Avoid swimming if possible; floating or treading water increase the chances of survival. Remain still by using trapped air in clothes as a buoyancy aid. Better still wear a lifejacket.
- 2) Clothes will slow down the rate of loss of vital body heat.
- 3) H.E.L.P (Heat, Escape, Lessening, Position) - This position (legs together elbows to sides), may be adopted if wearing a buoyancy aid and help slows body heat loss in calmer water.
- 4) Immersion Suits: Wet suits provide extra buoyancy and reduce heat loss for considerable time, but dry suits are better for long-term survival.
- 5) Use of floating objects (e.g. Swamped or capsized boats) to get as much of the body as possible out of the water, even if the air feels colder you will always cool faster in water.



2014 Examiner Conference - oldest & the youngest

Our oldest examiner, Nicky Corish (90 years) and the youngest examiner, Peadar Ó Lamhna (23 years) at 2014 Examiner Conference.



Newly weds in Water Safety

IWS Examiner Sean O'Keefe presents his new bride Anne Curtin with her IWS Examiner's Certificate on their wedding day which coincided with the IWS Examiner conference on the 18 October 2014.

WORLD Lifesaving Championships

IWS Sports Commission

Irish Water Safety was well represented at the World Lifesaving Championships held in Montpellier France in September 2014 and came back with a record 51 World Lifesaving Medals. There was over 5000 competitors competing over the two weeks of competition on both the Ocean and in the Pool Ireland had an Irish Junior Team and Senior Team competing in the National Teams Competitions, Cork and Hibernian in the Masters Competition and also Cork and Wexford in the Interclubs.

The Irish Junior Team, competing against the best in the World finished in a fantastic 9th place overall and showed everyone on the beach they are serious contenders on a world stage. Denise Bolger, Wexford teamed up with Emma O'Brien, Wicklow to win gold in the line throw and Denise also picked up a fantastic individual bronze medal in the 90m sprint. Denise and Emma were joined by Lily Barrett, Clare and Brodie Edmead, Cork to pick up bronze in the 4.90m sprint relay. Lily Barrett and Roisin Cahill both from County Clare picked up world silver medals in the board rescue in what was one of the most exciting races of the entire competition. Roisin had a fantastic swim out and was picked up by Lily, the girls paddled their way onto a wave with the Aussies and were in contention for gold and were pipped at the line. It was a fantastic performance by the team with every athlete on the team competing in an A final during the competition and overall making 15 Irish Records in the Pool Competition. The Senior Team had also a fantastic competition finishing 18th out of 34 teams from around the World with lots of A & B finals being made which is an outstanding achievement on the World Stage.

The Irish Masters were well represented with two teams competing from Cork and the combined Hibernian Team. Norma Cahill became world champion with a World Record Breaking swim in the 200m obstacle and the 100m manikin. Triona Mc Menamin, Donegal, Sinead Mortell, Clare and Trish Brennan Mayo also can away with individual medals on the beach and the girls teamed up with Sarah Meehan of Donegal to pick up relay

medals in both the pool and ocean. For the men Oisín Mc Grath and Colm Fitzgerald won a silver in the board rescue and the 2km run.

In the Interclubs Wexford and Cork competed with Denise and Lisa Bolger were joined by Alannah Crowley and Georgina Steel to secure a gold medal in the 4.90m sprint in the Interclub Youth Teams. Caimhín Crowley and Alan Butler, Cork won a fantastic bronze medal in the line throw in the Interclub Youth competition.

Irish Junior Team

Lily Barrett, Roisin Cahill, Brodie Edmead, Denise Bolger, Katie Shannon, Emma O'Brien, Hugh Mc Mahon, Ryan Shannon, Rory Mc Evoy, Eoghan O Grady, Cameron Steel, Joe Mooney.

Irish Senior Team

Triona Mc Menamin, Sarah Patton, Lisa Bolger, Ruth O Gara, Ciara Sexton, Oisín Mc Grath, Bernard Cahill, Adam Mc Evoy, Dylan Barrett, Alex Mc Loughlin

Massive thank you goes out to the support squad who accompanied the teams- Seamus O'Neill, Charlie Kennedy (equipment), Clare Mc Grath, Daniel Wrafter (Referees), Brendan Mc Grath, David Edwards, James Hassey, Colm Fitzgerald, Catriona Mc Mahon, Maggie Purcell (Team Management and Coaches), Karl Smith (Pro)

This year the Irish Squad will be targeting the European Junior and Senior Championships and training and squad camps will be kicking off in January 2015.





1

Photographs

1. The Hibernian Irish Masters Team: Paddy Bond, Jimmy, Oisin Mc Grath, Matthew Mc Garrigle , Daniel Wrafter, Norma Cahill, Triona Mc Menamin, Trish Brennan, Colm Fitzgerald, Sinead Mortell and Sarah Meehan.
2. Bronze in Junior Sprint Relay: Emma O'Brien, Brodie Edmead, Denise Bolger, Lily Barrett.
3. Masters Relay Team; Sinead Mortell, Sarah Meehan, Triona Mc Menamin, Norma Cahill.
4. Breda Collins, Chairman of Irish Water Safety presenting Triona McMenamin with the Sports Person of the Year Award.
5. Denise Bolger and Emma O'Brien - Gold in Junior Rope Throw at World Championships.
6. Irish Junior and Senior Teams.

Event	Date	Venue
National Junior & Senior Still Water	14/02/2015	Limerick
Regional Nipper Stillwater	14/03/15 or 15/03/15	Venues TBC
Wexford Pool Comp	28/03/15	Wexford
National Nipper Stillwater	11/04/15	Venues TBC
European Seniors & Interclubs	01/08/15	Wales
Regional Nippers & Juniors	22 or 23/08/15	Venues TBC
National Nippers & Juniors	5 & 6/09/15	Waterford
National Senior & Masters	12/09/15	Clare
European Juniors & Masters	23/09/15	Spain



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ILSE European Championships in 2015

In the year between the World Championships of ILS 'Rescue' several European Championships will take place:

1 - 7 AUGUST 2015

European Championships for National Teams in Swansea/Wales

7 - 15 AUGUST 2015

European Championships for Interclubs in Swansea/Wales

23 - 27 SEPTEMBER 2015

European Championships for Juniors in Alicante/Spain

23 - 27 SEPTEMBER 2015

European Championships for Masters in Alicante/Spain

MAY or SEPTEMBER 2015

European Championships for IRBs in Noordwijk/The Netherlands

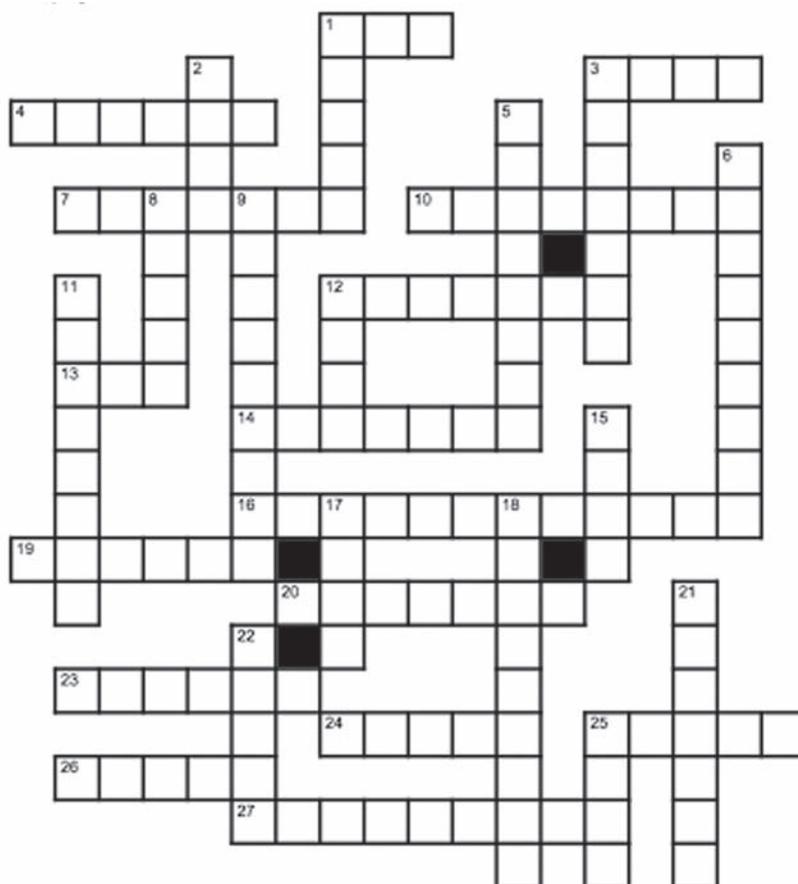
Winter Crossword

Down

1. A fun thing you can do on ice.
2. A large animal that hibernates.
3. These keep your hands warm in winter.
Hint: No fingers.
5. The last month of the year.
6. A piece of snow.
8. Large birds that migrate.
9. Snow crashing down a mountain.
11. A snowstorm.
12. White fluffy stuff that covers the ground.
15. If you are not careful, you might catch a _____.
17. The opposite of freeze.
18. Merry _____!
21. A warm article of clothing.
22. Wet, partly melted, snow.
25. Something you sit on as you ride down a hill.

Across

- | | | |
|--|--|--|
| 1. A fun thing you can do on snow. | 12. A winter person? | 24. This covers windows in winter. |
| 3. Change ice to water. | 13. Frozen water. | 25. Something you wear to keep your neck warm. |
| 4. Something you wear to keep your hands warm. | 14. Happy _____! | 26. These keep your feet dry in winter. |
| 7. Head south for the winter like birds do. | 16. A drink that warms you up in winter. | 27. Sleep through the winter. |
| 10. A long break from school. | 19. Change water to ice. | |
| | 20. The first month of the year. | |
| | 23. Ice hanging from your roof. | |



Uisce Bear necessities... ...strange facts about ice...

Density?

If you punch the surface of a lake, and then a block of ice, you're probably crazy!. You also might be tempted to think that ice is far denser than water. While there is no disputing that ice is harder than water, you would have misunderstood the scientific property of density.

One curious property of ice is that as it freezes, it expands (this is why standing water in your pipes will cause them to burst if they freeze). Put another way, as water freezes, it retains the same mass while taking up more space- about 9% more. This means that ice is actually quite a bit less dense- its molecules are spaced farther apart- than water, which reaches its maximum density at about 4 degrees Celsius just above freezing.

This is why ice floats in water- and why a can of soda will burst when frozen.

Why is ice slippery?

The real reason has to do with ice being less dense than liquid water. Scientists within the last decade have come to believe that because of this difference in density, surface molecules of ice - those in contact with air - cannot bond properly to the mass of molecules beneath. These surface molecules essentially retain liquid properties while being solid ice, and even I couldn't make up an explanation that cool for ice being slippery...



« Crossword Competition !

Send you IWS entries to
IWS Magazine Competition, c/o Irish Water
Safety , The Long Walk, Galway.

5 IWS Beanies to be won !!!

Winning names will be printed in the next
editon of Tarrháil / Lifesaving.

To advertise in
'Tarrháil / Lifesaving'
contact

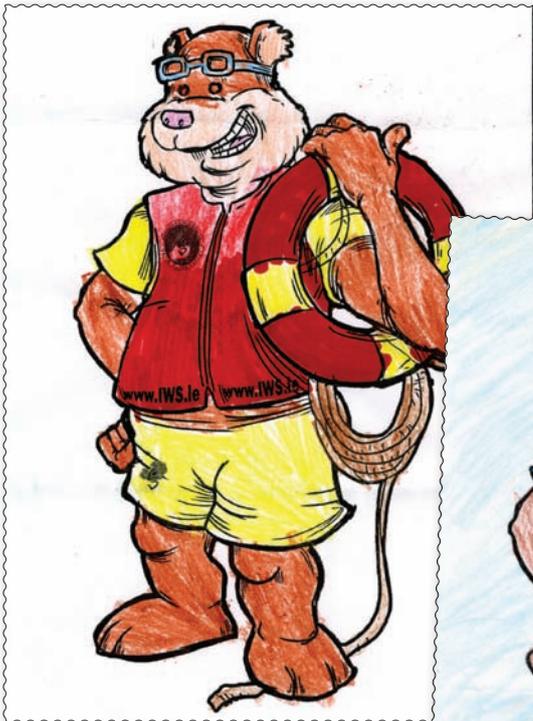
Roger Sweeney, IWS

Tel. 091 564400

Email. info@iws.ie

Uisce Bear

The winners of the last issue's Colouring Competition are...



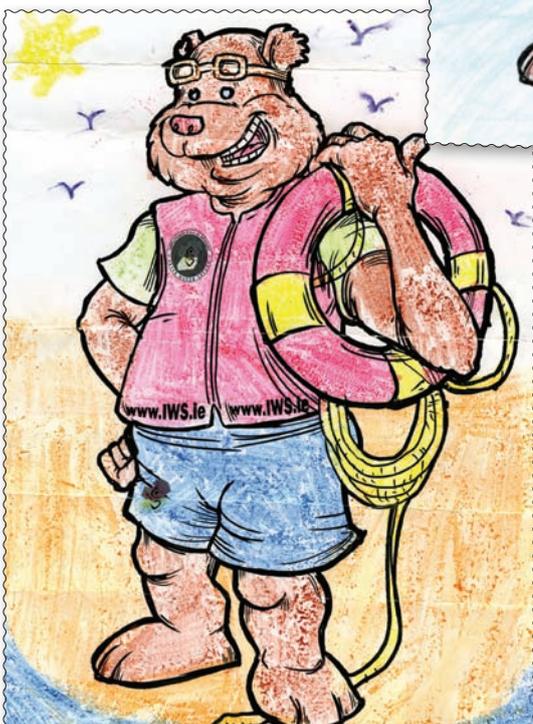
Yasminh Moore (9 yrs)



Victory Omorodion (11 yrs)



Khadijat Taiwo (9 yrs)



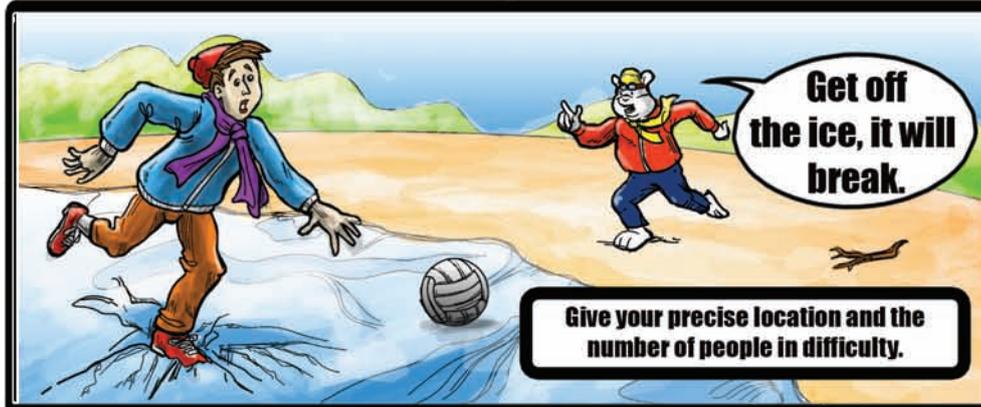
Yvonne Creavin (9 yrs)



Damilola Amoo (5 yrs)

Uisce Bear RESCUE ON ICE

1. Voice - Call for Help call **999** or **112** and ask for the Emergency Services



2. Reach - Check if you can reach the person using something nearby, lie down and extend it to the person.



3. Warm - Keep the person as dry as possible & wrap them up warm.



**Rescuing a person from ice can be dangerous.
The safest way to perform a rescue is from the shore.**

KEY FACTS

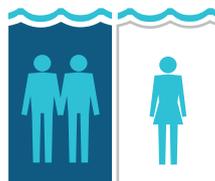
372 000
people die
from drowning
EVERY YEAR



OVER HALF
of all drowning
deaths are among
those aged
UNDER 25
YEARS



MALES
ARE TWICE
AS LIKELY
to drown
as females



Drowning is
one of the
10 LEADING
CAUSES OF
DEATH
for people aged
1-24 years



World Health
Organization

GLOBAL REPORT ON DROWNING

PREVENTIVE ACTIONS

Install
BARRIERS
controlling access to water



Provide
SAFE PLACES
(for example, a crèche) away
from water for pre-school children,
with capable child care



TEACH
school-age children basic
SWIMMING, WATER
SAFETY AND SAFE
RESCUE SKILLS



TRAIN
bystanders in
SAFE RESCUE AND
RESUSCITATION



Set and enforce safe
BOATING, SHIPPING
AND FERRY
REGULATIONS



IMPROVE FLOOD
RISK MANAGEMENT
locally and nationally

