**Head 4 Heights Ltd

Cotswold Country Park & Beach

Safety Policy
&
Safe Working Practices July 2018**

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# 1. INTRODUCTION

The purpose of this document is to ensure the safe operation and management of the Head 4 Heights Operation at Cotswold Country Park & beach. This list is not exhaustive and other activities may also be covered by this document.

This document is intended to clarify safe working practices for all activities taking place and the principles and ethos that surround them. These activities are covered by the following definition taken from EN: 15567: “constructed facility consisting of one or more activity systems, support systems and, if needed, belay and / or safety systems. A ropes course is distinct from playground equipment in that it has restricted access and requires supervision’’.

This Safety Policy complies with working at height regulations 2005 (amended

2007). To comply with these regulations we have followed the guidance of the Adventure Activity Industry Advisory Committees (AAIAC) UK Ropes Course Guide 2015.

**Review and Amendments:** This document has been written by Rod Baber of Head 4 Heights and RCD Ltd. Changes to this document may only be made by Rod Baber and Head Instructor.

**Regulations & Standards:** When and where relevant the following regulations and standards will be adhered to by the policy and those operating under the policy.

The Working at Height Regulations 2005 (amended 2007)

LOLER 1998

PUWER 1998

PPE Regulations

European Standard EN: 15567 for Ropes Courses Parts 1 and 2

AAIAC UK Ropes Course Guide

The European Ropes Course Association Standards

# 2. TERMINOLOGY

**HEAD 4 HEIGHTS Core Team:** Describes permanently employed Head 4 Heights staff, directors, and all senior instructors with relevant ERCA qualifications including Head and deputy instructors.

**HEAD 4 HEIGHTS:** For the purpose of this document, any reference made to Head 4 Heights is used as a general term and refers to the policy of Head 4 Heights.

**Ropes Course Developments (RCD)** This is the company that build and designed the high ropes course

**Programme:** Any course run by Head 4 Heights.

**Senior Instructor:** Individual assigned to manage and co-ordinate an event (inc. staff, delivery and logistics).

**Head Instructor and Deputy:** A senior instructor who has completed a minimum of 2 years work as a senior instructor and has shown exceptionally high levels of safety awareness and management skills.

**Elements:** Particular RCD constructed task or activity. To include all High Level tasks (activities done at height with the use of dynamic ropes, safety systems and Personal Protective Equipment (PPE).

**3. CODE OF CONDUCT**

##  3.1 Challenge by Choice

The ethos of Challenge by Choice is operated by HEAD 4 HEIGHTS at all times, irrespective of what activity is taking place. This is to ensure that no inappropriate pressure or persuasion is placed upon a group or any individuals during any part of any activity. This principle must be explained by instructors at the beginning of each programme.

##  3.2 Roles and Responsibilities

HEAD 4 HEIGHTS Core Staff will ensure that all information and administration is organised and available prior to and during an event.

The appointed Senior Instructor is responsible for the overall event delivery, and managing and coordinating the employed staff and logistics.

The safe running of any session is the responsibility of all qualified persons during the session under the guidance of senior instructors

To this end it is expected that all clients will conform to any rules and regulations set by HEAD 4 HEIGHTS.

**3.3 HEAD 4 HEIGHTS Rights**

HEAD 4 HEIGHTS reserves the right to exclude any individual or client whose behaviour or actions are believed to be endangering themselves, others or both. This includes any behaviour which undermines the role of HEAD 4 HEIGHTS staff and/or Challenge by Choice. In such an event a full explanation will be given both verbally and in writing when appropriate.

##  3.4 The Environment

HEAD 4 HEIGHTS staff and clients will all behave in an environmentally sensitive nature, observing proper codes with particular reference to litter and fire risks.

It is important that HEAD 4 HEIGHTS staff ensure that the site has been properly cleaned after each event, equipment has been accounted for and stored correctly, and all measures have been made to continue to protect the environment.

##  3.5 Signage

Clear warning signs to be placed around the course in clear view of the public eye. Additionally clear signage at front gate identifying location of Head 4 Heights.

# 4. EMPLOYMENT POLICY

Any company or associate that HEAD 4 HEIGHTS employ, or sub-contract to supply, or support the delivery of a programme must:

1. Read and agree to abide by this document.
2. Have been trained by a qualified person and assessed by an approved ERCA instructor trainer.
3. Any person working independently with participants must have a current First Aid Certificate inclusive of CPR, and if working on ropes course elements, a HEAD 4 HEIGHTS site specific or ERCA approved Instructors Certificate. If a facilitator does not have the required HSE First Aid and Ropes Course Certificate, HEAD 4 HEIGHTS will provide an instructor to support the facilitator. Although the learning will be the responsibility of the facilitator, the safety and well-being of participants’ will be the responsibility of the instructor.
4. Ensure that HEAD 4 HEIGHTS ERCA Instructor certificate and HSE First Aid certificate are valid and inform HEAD 4 HEIGHTS immediately if they are not. To this end HEAD 4 HEIGHTS requires copies of all individuals’ relevant qualifications/certificates. A minimum of 2 references from former employers may also be required.
5. Ensure all required Accident forms and/or RIDDOR forms or Near Miss reports are completed as soon as is practically possible (see appendices for examples).
6. Any observations relevant to the risk assessment procedure, or indeed any other working practice, should be reported to the Senior Instructor, or if not available, another member of the HEAD 4 HEIGHTS Core Team.
7. Upon successful completion of ERCA assessment each instructor to be closely monitored by Head or Deputy Instructor for a minimum of 2 shifts and thereafter dependant on observations will be able to work with Senior instructor once agreed by 2 members of core team.

##  4.1 Sequence of introduction of new associates

All associates introduction, competence and qualifications are verified by:

An introductory meeting at HEAD 4 HEIGHTS site to be conducted by Rod Baber or Head Instructor

Appropriate certificates being observed and copied

The new associate observing a programme

The new associate working with HEAD 4 HEIGHTS Core Team while delivering a programme

HEAD 4 HEIGHTS Core Team observing the associate while working with a group

The associate supervising a group

Minimum of current ERCA generic rescue certificate required

### 4.1.1 Sequence of reassessing qualified instructors and associates

On expiry of existing instructors qualifications instructors will be reassessed and trained by qualified training body or person within 3 years of qualification.

##  4.2 Records

For Ropes Course activities, all staff involved in instruction and/or supervision will hold the appropriate qualification. For almost all activities the relevant qualifications will be those awarded by either HEAD 4 HEIGHTS ERCA onsite training and assessment programmes or by another ERCA instructor trainer.

An integral part of any of the aforementioned qualifications is a valid H.S.E. approved First Aid Certificate to include C.P.R

The HEAD 4 HEIGHTS office must have relevant copies of the following records (where applicable), for staff working on HEAD 4 HEIGHTS Programmes:

First Aid Certificate with CPR

ERCA certificate

HEAD 4 HEIGHTS ERCA site specific Instructors Certificate

Any specific element Certificates

Self-employed declaration form

Student declaration form (if appropriate) signed

Safety policy read and signed

Medical Form

2 x References

##  4.3 Safety and Child Policy

HEAD 4 HEIGHTS, as an organisation that works extensively with young people, recognises the need for a policy that not only provides a safe environment, which young people can enjoy, but also protects staff working with young people. The following conditions are a mandatory part of employment when the company recruits.

* All new applicants will be interviewed and assessed working with groups and individuals.
* All applicants must provide at least two references, either from their previous school or work related posts.
* All applicants without appropriate references will be CRB (DBS) checked
* All applicants must be prepared to sign the rehabilitation of offenders document if required.

Staff will be expected to adhere to the following, not only for their safety, but also for that of the young person:

* Staff must ensure that all under 8yrs old participants are accompanied at all times by parents or registered guardians over 18yrs.
* Staff will not use offensive, racist, or sexist behaviour whilst on duty. Staff, whilst checking equipment which a young person is wearing, will only check the equipment when other people are present.
* Staff will never be alone with a young person at any time out of the public eye. Staff will report any contact from a young person that he/she considers places that staff member at risk from complaint.
* Staff have a duty to pass on information to higher authority if they suspect abuse, either sexual or emotional, or neglect of the young person by any person; or if the young person has or is in the process of committing an offence.
* Other than the above, if the young person confides in staff, they will keep the conversation confidential. If the above applies, the young person MUST be warned that the disclosure will be passed on. The appropriate person to pass information to will be the senior instructor, who will take appropriate action, either contacting Social Services or the Probation Services.
* Any staff that suspects that other staff are not adhering to the policy must report the matter to the senior instructor.

All staff should adopt the following methods of working:

* Demonstrate, at all times integrity and respect for all.
* Display high standards of behaviour.
* Make sure all participants are aware of the necessary rules, organisation and safety relevant to the activity.
* Be aware of the emotional, physical and intellectual development of young people.
* Promote fair play and the positive aspects of sport and physical activity. Inform all participants, parents or guardians whom to approach if they have a complaint or other concern relating to the organisation.

# 5. Emergency Procedures

Note: Head 4 Heights additionally have access to park emergency procedure document titled Emergency Action Plan KCP.

##  5.1 Sequence of Communication

In the event of any emergency, accident, injury or incident, one of the persons listed below must be informed:

Deputy Head Instructor - If applicable.

Head Instructor-Tom Foley MB:07986629107
EM: tom@head4heights.net

Managing Director-Rod Baber TL: 01285 770007
EM: info@head4heights.net

At Head 4 Heights Ltd,
Cotswolds Country Park & Beach,
Spratsgate Lane,

Cirencester,
Gloucestershire,
GL7 6DF

EM: info@head4heights.net

##  5.2 Medical Forms (copy in appendices)

All participants will be asked to inform HEAD 4 HEIGHTS Core Team of any relevant medical conditions that may affect performance.

##  5.3 First Aid Box

The senior instructor onsite will always have immediate access to First Aid box.

Any materials or equipment used must be reported to a member of HEAD 4 HEIGHTS Core Team to ensure the item(s) are replaced. The Head Instructor is responsible for the First Aid boxes. First Aid box will be checked as part of each monthly inspection.

##  5.4 Accident Procedure

Ensure your individual safety.

Immediately ensure participants’ safety.

Make an assessment of the situation and choose the appropriate course of action based upon First Aid training. Do not move the injured person until you are sure it is OK to do so.

### 5.4.1 If the individual is mobile and wishes to continue

Check medical form

Ensure that person is able to carry on. If in any doubt, follow guidelines below

Ensure that the accident book is correctly completed (see appendix)

Continue with the activity

### 5.4.2 If casualty remains mobile but requires First Aid attention

Bring injured individual to sheltered environment for treatment; ensure remaining individuals are safe and supervised

Examine medical form

Treat casualty appropriately. If in any doubt regarding the injury or the treatment, seek professional medical attention

Ensure that the accident book and/or RIDDOR forms are completed (see appendix)

Continue with the activity.

### 5.4.3 If casualty remains mobile, but requires hospital treatment or consultation

Bring individual to the nearest first aid room located at Waterland and inform a member of HEAD 4

HEIGHTS Core Team immediately

Examine medical form

Treat casualty with appropriate First Aid

If required, call ambulance (if in any doubt – call ambulance)

If an ambulance is not required, a parent or a colleague of the delegate or a taxi should transport the injured individual to the hospital

Ensure that the accident book and/or RIDDOR forms are completed (see appendix).

*Note: No HEAD 4 HEIGHTS staff are permitted to transport the individual, however you may be required to travel with that person if required under exceptional circumstance reasons of which need to be documented.*

### 5.4.4 If the person is immobilised and is on the ground

If casualty is immobilised, ensure appropriate immediate First Aid and ensure action to prevent deterioration.

Call ambulance and inform a member of HEAD 4 HEIGHTS Core Team.

Examine medical form

Treat casualty with appropriate First Aid

Ensure that the accident book and/or RIDDOR forms are completed. (see appendix).

NOTE: Grid references for emergency services and codes for all gates are clearly signed in PPE shed onsite.

### 5.4.5 If the person is immobilised and is at height

If ABD or Freefall lock then rescue according to training must be carried out.

If on a Bottom/Top Rope system and is dangling then lower gently to ground If on cow tails and dangling affect a rescue according to training. If immobilised at height and on a platform then it may be more appropriate to treat them in the first place in situ. Remember we are in a controlled environment – not the mountains.

Call ambulance and/or inform a member of HEAD 4 HEIGHTS Core Team, if on site.

Examine Medical Form.

Treat casualty with appropriate First Aid.

Ensure that the accident book and/or RIDDOR forms are completed (see appendix).

##  5.5 Accident Book (see appendix)

A recording and entry must be made and fully completed for ALL accidents or injuries (however slight you may feel it is). The accident book is kept by the Head Instructor. If Head Instructor is not on site the Senior Instructor will contact HEAD 4 HEIGHTS core team to update accident book.

Any accident that happens during a HEAD 4 HEIGHTS programme, on or off the site, must be recorded with all possible detail in accordance to the requirements stated on the form.

Once this form is completed please pass on to the Head Instructor for checking and assessment (he/she must decide whether it’s sufficiently serious to be notified to our insurers) together with a copy of the injured party’s completed medical form.

##  5.6 RIDDOR (see appendix)

The incident will have to be reported under the RIDDOR 2013Regulations if there is work-related accident resulting in death of, or serious injury to, an employee or a self-employed person working on site; or if a member of the public is killed or taken to hospital.

The RIDDOR book is located onsite in PPE shed.

RIDDOR forms will be completed by the Head Instructor from the Accident Book reports so it is imperative that these are accurate and complete.

##  5.7 Near-Miss Book (see appendix)

ANY incident taking place which could have led to a dangerous occurrence, accident or injury, MUST be reported in the near miss book.

The near miss-book is located onsite in PPE Shed

Incidents must be discussed with the Head Instructor so that the appropriate action can be taken to prevent the same, or similar situation arising again.

 **6. ACTIVITY PROCEDURES**

The site will be inspected prior to use every day and any damage or required maintenance reported immediately to the Head Instructor.

The Senior Instructor has the right to change, alter or cancel the session in the interest of the safety or the well being of the participants.

Any changes made to a programme must fall within the parameters of the qualification held by the Instructor/Facilitator.

If any member of staff believes that an element is unsuitable for use due to a safety issue, then that person is to identify the element as ‘out of use’ and remove any relevant equipment from the equipment store and take it to the office. Any actions and/or observations should be reported to the Senior Instructor and/or HEAD 4 HEIGHTS Core staff. That element may not be used again until the Head Instructor has cleared the element for safe use.

An element that is new or changed should not be used until the instructor has received the appropriate training and only after any relevant risk assessments are carried out.

The aims and objectives of the group must be clarified and understood prior to the programme commencing. The group numbers, medical forms and duration of the programme will be checked upon the groups arrival.

###  6.1 Conducting the Activity Session

Briefing and Safety points to be emphasised to the group will include:

* No smoking on the course.
* Challenge by Choice and Group Support is always in operation.
* Fire Procedure
* Toilets and Refreshments
* Helmets to be worn at all times on the course for high elements this includes spectators within activity zone.
* Participants to walk around outside of activity zone at all times unless instructed by instructor.
* All participants and instructors on Low Ropes will wear helmets. Exception for those doing low ropes under 1m do not need helmet on provision ground area is deemed safe by senior instructor.
* Elements not to be used unless a Head 4 Heights instructor is onsite.
* No eating or chewing gum during the activities.
* Possible hazards of jewellery, watches and sharp objects in pockets. These should be removed to protect the item, and the person wearing it from injury. Any item that cannot be removed, if possible, should be covered with tape found in the medical kits.
* Climbing calls, or a similar form of clear communication, must be used to ensure climbers and belayers are working together.

Additionally:

* All Senior Instructors must wear full accessing equipment throughout the session.

* The Emergency Procedures must be followed.

* Correct rescue procedures must be followed in case of an emergency.

* Harnesses and helmets must be fitted in accordance with manufacturers recommendations and individually inspected by a qualified instructor.

* The Health and Safety aim is to conduct a session, free from emotional and physical harm.

* Any special needs of groups and individuals will be respected.

###  6.2 Belaying

Before participants belay, a qualified instructor must give them an accurate demonstration. The instructor holds ultimate responsibility. A participant will never be allowed to belay without supervision.

A belayer MUST have a second person holding the inactive rope at all times. If it is not possible to have a participant assume this role, then the instructor must assume that position and if necessary “tie off” according to training given. Once the instructor sees the participant is able to belay independently they will be permitted to belay on their own

NO group member may lower other participants on high activities at any time unsupervised. Only HEAD 4 HEIGHTS staff may lower participants, or must have control of the rope by holding and controlling the inactive rope. Participants may only be able to lower independently once approved by instructor.

Where another training company is involved in the programme (particularly in ‘use of facility’ situations) no employee or representative of that company is to be permitted to belay, or assist belaying.

### 6.3 Fan Descender

1. The recommended maximum weight limit of participants is 16 stone however this presupposes that participants are in good physical condition and feel confident in their ability to “carry” their own weight. Wherever possible participants should not be carrying excess weight for their size. HEAD 4 HEIGHTS have chosen to limit weight for all participants to 16 stone even though manufacturer recommends 18 stone as maximum limit.
2. Demonstration of landings should be carried out on the ground prior to participation in this activity.
3. Operation test from 2m or less to be carried out by all participants prior to Free Fall from top platforms.
4. Instructors to check that the cable remain taut at all times during the ascent and ensure all ascents and descents are controlled
5. Once on the platform participants must check with the instructor that it is ok to step off before doing so.
6. Participants must step out away from the platform towards the lake
7. Legs must be together and knees slightly bent for landing.
8. Landing zone gravel must be raked to a depth of 15cm before each start of day.

*(Detailed Appendix on Fan Operation provided 12.11)*

**6.3.1 Jacobs Ladder**

1. Participants must not come in contact with any of the cables.

2. Participants must not hold onto or pull on each other’s ropes

3. Participants can cross each other’s rope to help but must cross back again before moving up to the next level.

4. Due to the low nature of falls, the rope should be kept tight.

5. Participants need to be aware of each other to minimise injury to each other.

When lowering the ladder can be pushed away from the descending climbers.

6. Instructor to support belayers and control ascent and descent

7. Participants to be told how to lift participants safely when climbing

**6.3.2 High All Aboard**

1.Participants who are diagonally opposite from each other can climb the pole at the same time if competent at belaying.

2. Participants must not hold onto ropes. They can hold their own once on top platform and tied off.

3. Participants must avoid crossing each other’s ropes. Tell them to stand on the corner underneath their SRB (Shear Reduction Block).

4. Ensure when ascending participants are at least 4m apart

5. To be aware of treading on hands /feet when climbing onto top

**6.3.3 Crate Stack Challenge**

 1. Participants must not hold onto each other’s ropes.

2. Participants must avoid crossing each other’s ropes.

3. Due to the low nature of falls, the rope should be kept tight.

4. Care needs to be taken passing crates up to the participants on the tower and no throwing of crates permitted.

5. If possible the tower should be toppled in a direction away from the belayers.

The belayers must have a redundant safety measure included in the belay system. This can be an extra person with their hands on the dead rope or a slippery hitch that gets moved up the rope as the climber gets higher.

6. Participants to be aware of possibility of foot and hand entrapment under crates

**6.3.4 Leap of Faith**

1. Trapeze adjustment rope must be secured in position with the shunt in accordance to training by before participant leaves the ground. It must not be adjusted after a participant has started climbing.

2. The climber must wait until the Instructor has told them it is safe to jump.

3. The instructor must ensure that there is no slack in the rope before the climber jumps.

4. Instructor only permitted to belay

5. Participant to be tied off when knees on top platform

6. Participant to only climb on side of pole nearest trapeze bar

7. Participant note to hold onto rope.

**6.3.5 Double Leap of Faith**

1. Trapeze adjustment rope must be secured in position with the shunt in accordance to training by before participant leaves the ground. It must not be adjusted after a participant has started climbing.

2. The climber must wait until the Instructor has told them it is safe to jump.

3. The instructor must ensure that there is no slack in the rope before the climber jumps.

4. Instructor only permitted to belay

5. Participant to be tied off when knees on top platform

6. Participant to only climb on side of pole nearest trapeze bar

7. Participants must not hold onto each other’s ropes

8. If only one person jumps leaving the other on the platform then they must be lowered to the ground before the other jumps.

9. Both participants must let go of the bar at the same time.

10. Both participants must be lowered slowly at the same time.

11. If one participant misses the bar they must still both be lowered at the same time.

**6.3.6 Pole Climbing**

1. Instructor only permitted to connect and disconnect participant

2. Participant only permitted to touch top of pole and climb no further

3. Participant to be instructed to use holds for climbing and not wood

4. When participant descends to put arms out to prevent going into poles fast

### 6.4 Instructor: Participant Ratios

For belayed events each instructor at any one time can work with groups up to and not extending 12 participants.

No more than 4 participants in each group will be off the ground at any one time.

### 6.5 Conclusion of the Activity Session

All equipment must be accounted for and taken and placed in secure storage.

Any loss or damage of equipment must be reported to the Head Instructor.

An appropriate feedback/review session between the Instructors, Facilitators and

Consultants will be conducted at the discretion of the Head Instructor

**6.6 Introduction of New PPE and its associated training.**

1. For all new PPE and Training methods introduced to H4H an appropriate ERCA qualified Instructor trainer will need to carry out appropriate risk assessment and/or test run prior to use under observation with at least one other senior instructor

1. Risk assessments to be recorded if needed and once approved all other instructors will be trained on method of use.

1. Training of use to only be carried out by ERCA qualified instructor trainer or ERCA site specific rescue instructor.

1. Dates of training recorded and signed off by appropriately qualified instructor.

### 7. INSPECTIONS7.1 Daily Inspections

Prior to daily opening Senior Instructor will carry out full inspection on all elements in operation. Inspection will be fully assessed and recorded inclusive of all PPE. (see appendices)

### 7.2 Monthly Inspections

Head Instructor will be responsible for carrying out full monthly inspection. Inspection will be fully assessed and recorded inclusive of all PPE. Monthly inspection to include advanced inspection of Fan Descender.

### 7.3 Annual Inspections

Annual Inspection inclusive if all PPE to only be carried out by ERCA (European Ropes Course Association) for Type C inspections and appropriately trained PPE inspector.

## 8. PRE-ACTIVITY BRIEFING

(Pre-activity brief incorporates part of conducting activity session as per 6.1)

Listed below are full details of the briefing made by HEAD 4 HEIGHTS qualified high ropes instructors at each stage of all group and general public activity sessions.

Before entering Active Zone:

* All participants are informed of Challenge by Choice.
* All participants will sign relevant Disclaimer/Medical forms and confirm they have read safety advisory notes including medical information details, which will be inspected by Senior Instructors. Senior Instructor will ascertain feasibility of all participants taking part in all activities by reading medical forms and by further questioning and weighing if deemed necessary.
* All participants are asked to remove chewing gum, all other non-edible and edible items from their mouths and placed in bin on site.
* All participants will be asked to remove jewellery including ear rings, nose rings, bracelets, watches and necklaces. For items that cannot be removed the instructor will ask the participant to put tape on or around the respective items. If necklaces or bracelets cannot be removed the participant will not be allowed on ropes course.
* All participants will be told how to put on helmets and instructed not to remove them at any time once they enter the Active Zone.
* All participants will be shown how to put on remaining Personal Protective Equipment (PPE) and instructed to wear them as directed.
* All participants will be told they are not permitted to smoke at any time while wearing PPE.
* All participants will be instructed where to go in the Activity Zone and how to approach each activity.
* All participants will be told that they should not make any adjustment to their PPE once it is on but if they do then they must have it re-checked before further participation in any activity.
* All participants will then be asked, if they have any further questions before entering Active Zone.

* Activity briefing will cover all activity procedures which are part of programme.

## 9. WEIGHT LIMITATION AND CONTROL MEASURE PROCEDURE

Hazard - Exceeding maximum viable descent rate to cause personal injury.

Who may be harmed - Authorised members of the public.

**Risk Level** (remaining with existing control measures).

Low.

### 9.1 Existing control measures / comments for Fan Descender

1. All adults (18yrs plus) to specify their weight and medical conditions on medical forms. Medical forms to be handed over to senior instructor prior to commencement of all programmes.
2. No adults to be permitted to use Fan Descender if 16 stone (224lbs or 102kg) or over. Manufacturer’s recommendations, list maximum limitations for Fan Descender are 18 stone however, HEAD 4 HEIGHTS have chosen to operate maximum weight restrictions at 16 stone.
3. Should the senior instructor have concerns about the validity of a customer’s weight as claimed on the medical form then they shall ask them directly. This questioning will be done privately away from earshot of the group.
4. All customers who have listed that they are over 15 stone or over on their medical form will be weighed with scales onsite.
5. The only exception to point number 3 is if a customer directly asks an instructor what the weight limitations are in front of a group. If this occurs then the senior instructor will inform the group on weight restrictions.
6. The senior instructor on site is fully responsible for reviewing all medical forms and enforcing weight restriction limitations.
7. All under 18yr olds will only be permitted onto Fan Descender if senior instructor visually ascertains that they are under 16 stone. If senior instructor believes the child is 15 stone or over they will be weighed.
8. If the child is deemed overweight by the senior instructor but has been informed by either their parents, guardian or independently that they are under 16 stone they will still not be permitted to use the Fan Descender.

### 9.2 Existing control measures / comments for Auto Belay Devices

1. All adults (18yrs plus) to specify their weight and medical conditions on medical forms. Medical forms to be handed over to senior instructor prior to commencement of all programmes.
2. No adults to be permitted to use system if 22 stone (310lbs or 140kg) or over as per manufactures recommendations.
3. Should the senior instructor have concerns about the validity of a customers weight as listed on the medical form then they shall ask them directly. This questioning will be done privately away from earshot of the group.
4. All customers who have listed that they are over 18 stone or over on the medical form will be weighed with scales onsite.
5. The only exception is if a customer directly asks an instructor what the weight limitations are in front of a group. If this occurs then the senior instructor will inform the group on weight restrictions.
6. The senior instructor on site is fully responsible for reviewing all medical forms and enforcing weight restriction limitations.
7. All under 18yr olds will only be permitted onto auto belay devices if senior instructor visually ascertains that they are under 18 stone. If senior instructor believes the child is 18 stone or over they will be weighed on site.
8. If the child is deemed over weight by the senior instructor but has been informed by either their parents, guardian or independently that they are under 18 stone they will be weighed on site.

###  9.3 Human Error Accidents

Human error is the leading cause of accidents and may be more difficult to identify than mechanical failure and therefore more difficult to prevent. Measures to limit the opportunity of human error include:

* Ensure instructor competence. Competence is gained though appropriate instructor training provided at all Head 4 Heights sites

* Staff deployment and limiting periods of repetitive tasks. All H4H instructors are limited to maximum of 60mins of instructing on each element and normally rotated every 30mins.

* Multi-element training. All H4H instructors are trained to operate all elements at all H4H operations to ensure they can be rotated amongst each element. During general public activities instructors will rotate over elements. During group events each instructor will move with their group from element to element

* Mental check list. During training instructors will need to demonstrate function tests of key PPE components are carried out when all participants are on the ground prior to commencing activity. Check list is a series of steps with some options including stop, look listen or Tug Look Check.

* When attaching participants to activities to ensure they have clear view of instructor when making attachments and its associated PPE and activity system.

* Instructor to explain basic principles and functions of how activity keeps participants safe.

* One instructor to operate one group activity only at any one time ensuring a maximum of 4 people are off the ground at any one time. Group activities include Jaccobs Ladder, High All Aboard, Crate Challenge. Pole Climbs and Freefalls can be run as both individual group activities or both can be run at same time as one group activity.
* Senior instructor to ensure they and all instructors retain high levels of focus at all times.

* All core team members to be rotated to monitor all instructors. Additionally team working onsite to be changed when possible to every instructors will work with senior instructors.

* Poor instructor practice to be dealt with immediately by Senior instructor onsite. Instructor to be closely monitored by Core team members. Should no immediate improvement be shown then instructor will not be reemployed by Head 4 Heights.

* All staff during training to identify core values of Head 4 Heights team work and to be welcomed to address all situations they are not happy with. This information can be managed in confidence with Core team members to ensure staff member does not feel alienated within the company.

## 10. EMPLOYEE INFORMATION AND QUALIFICATIONS

Employee Information

Name.....................................................................................………………………

Date of Birth..........................................................................………………………...

Tel Day.................................................................................…………………………

Mobile.................................................................................………………………….

E-mail..................................................................................………………………….

Fax.......................................................................................…………………………

Any Relevant Medical Information

………………………………………………………………………………………………

………………………………………………………………………………………………

………………………………………………………………………………………………

………………………………………………………………………………………………

………………………………………………………………………………………………

………………………………………………………………………………………………

Next of Kin.............................................................................………………………..

Relationship...........................................................................………………………..

Address

………………………………………………………………………………………………

………………………………………………………………………………………………

………………………………………………………………………………………………

………………………………………………………………………………………………

Contact number…………………………………………………………………………...

## Personal Qualifications

|  |  |
| --- | --- |
| List of relevant Qualifications  | Expiry Date  |
|   |   |
|   |   |
|   |   |
|   |   |
|   |   |
|   |   |
|   |   |
|   |   |
|   |   |

On completion please hand signed copies of qualification certificates to Head Instructor together with completed copy of The Safety Policy and Safe Working Practices document.

1.3 Employee Declaration

I,……………………………………………………………. have read and understood the Safety Policy and Safe Working Practices of Head 4 Heights Adventures Ltd.

I Hereby agree to comply with all of the above conditions and safe working practices of Head 4 Heights Adventures Ltd whilst employed by the aforementioned Company.

Signed:

Date:

**Voluntary Opt Out Agreement**

This Agreement is made between:

Head 4 Heights Limited registered in England and Wales under company number

04733597 whose registered office is at Dennis and Turnbull, Swatton Barn,

Badbury, Swindon, Wilts, SN4 OEU and

Name of

Employee……………………………………………………………………………….

Address Of

Employee………………………………………………………………..................

And hereby states as follows:

The Working Time Regulations 1998 provide that an employer is required to take all reasonable steps to ensure that workers do not work more than an average of 48 hours a week over a 17-week period. However, a worker may voluntarily agree to work more than the 48-hour average weekly limit.

The Company and the Employee hereby agree that the 48-hour average weekly limit shall not apply to the Employee. This Agreement will remain in force (for a period of one year/ indefinitely). The Employee or the Company may terminate this Agreement at any time by either giving not less than (three months’) written notice to the other.

Where a worker has agreed to work in excess of the 48-hour weekly working limit, the employer is required to keep a record of the workers who have opted out.

The Employee to accept a zero hour contract and The Company to be entitled to select hours of work for each Employee.

Signed:

…………………………………….

 For and on behalf of the Company

Signed:

…………………………………….

(Name of employee)

Date: ……………………………………….

 **11. RISK ASSESSMENTS**

Risk Assessments are a living and working document to be updated via HSE guidelines when new operations, new industry and new national guidance is issued. Risk Assessments to me kept via www.head4heights.net for easy access to all clients. Any significant changes to be documented.

## 12. APPENDICES

**12.1 For Groups Over 18yrs**

# HEAD 4 HEIGHTS Confidential Personal and Medical Information

This form is to be completed by any adult taking part in a Head 4 Heights activity session. The medical information on this form will not be kept once the event has finished. Unless an accident has occurred when the information will be filed

|  |  |  |  |
| --- | --- | --- | --- |
| **Full Name**:  |   | **Job Title**:  |   |
| **Organisation:**  |   |
| **Address:**  |   |
| **Telephone**:  |   | **Mobile No:**  |   |
| **Email :**  |   |
| **Date of Birth:**  |   | **Sex:**  |   |
| **Weight : [St/Kg]**  |   |  |   |

DOCTOR AND EMERGENCY CONTACT

|  |  |  |  |
| --- | --- | --- | --- |
| **Doctor’s Name:**  |   | **Dr’s Phone No:**  |   |
| **Contact Name in** **case of emergency**  |   | **Contact No. in case of emergency**  |   |
| **Relationship to Contact**  |   |

**Please state any medical conditions/illnesses/allergic reactions that you have (e.g. asthma, heart conditions, pregnancy, back problems).**

|  |
| --- |
|   |

**Please state any medication that is used to control these conditions (e.g. inhaler, adrenalin etc):**

|  |
| --- |
|   |

If you have an existing medical condition, we recommend that you take advice from your GP to establish what sort of activity it is safe for you to take part in.

I confirm that:

> I have read and understood this form and declared all of my existing medical conditions.

> I will not take part in any activity that I know may aggravate an existing medical condition.

**ACCEPTANCE OF RISK**

There will always be some risk involved in any type of adventurous activity, and indeed the benefits of the activity would probably be nullified if these risks were completely removed. The type of risk is generally confined to the same sort of risks that a normal adult involved in normal active recreation may experience. We consider the level of risk to be low and reasonable. However, you must decide if you also consider it reasonable. Our ‘challenge by choice’ approach endeavours to ensure that participation in any activity is always at your own discretion. The above declaration does not absolve Head 4 Heights of its “Duty of Care” and other legal responsibilities.

|  |  |  |  |
| --- | --- | --- | --- |
| **Signature of Participant** :  |   | **Date:**  |   |
| **Please Print Name** :  |   | **Instructors use:**  |   |

 **12.2 For Groups Under 18yrs**

# Head 4 Heights Guardian Disclaimer And Medical Form

To be filled out by guardian or group leader and returned prior to the event.

The HEAD 4 HEIGHTS High Ropes course conforms to the European Standard:

15567 (1) for High Ropes Structures.

All staff are well-qualified and very friendly and all activities are presented on a "Challenge by Choice" basis. This means that the HEAD 4 HEIGHTS staff are there to make sure that you are safe, have a great time and give you the encouragement you need to do as much or as little as you want to.

Personal accidental and loss/damage of belongings are not insured. Participants are covered by the company’s insurance in the highly unlikely event of negligence by one of the employees.

Parent/Guardian/Senior Teacher Disclaimer:

I have read and understood the above information. The person/s named below have my consent to participate in HEAD 4 HEIGHTS activities. I am aware that there are minor risks of injury associated with participating in adventurous activities but I am also aware that this person will be under qualified supervision and attached at all times, whilst they are at height, to tested and approved safety systems. I consent to any treatment being given in an emergency. **Medical Disclosure**: By completing this form I also confirm that I will make HEAD 4 HEIGHTS staff aware of any medical condition that any of the participants may have that may affect their involvement with the activities offered. The group and the parents of the above give permission for HEAD 4 HEIGHTS staff to administer First Aid to any injured person and authorise the company to take any person to hospital if required

Name: ……………………………………. Relationship to Participant/s: …………

Signed: ……….……….……………………Date: ……………………………………

1. – Name/Age/Sex: …………………………………………………………………….

1. – Name/Age/Sex: …………………………………………………………………….

1. – Name/Age/Sex: …………………………………………………………………….

1. – Name/Age/Sex: …………………………………………………………………….

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1. – Name/Age/Sex: …………………………………………………………………….

1. – Name/Age/Sex: …………………………………………………………………….

1. – Name/Age/Sex: ……………………………………………………………………

## 12.3 For General Public Participants

HEAD 4 HEIGHTS PUBLIC TICKET

To be completed by office:

Ticket Number: ………… Date: ……………… Total Paid: £………….

Activities/Ticket Info: ……………………………………………………….

…………………………………………………………………………………...

To be completed by all over 18yr participants:

Participant Name: ……………………………..……………………………. Participant Address: ……………………………..…………………………

……………………………..………………………………. Weight……

Participant Email: ……………………………………………………………

Medical Disclosure:

By completing this form I also confirm that I will make Head 4 Heights Adventures staff aware of any medical condition that I may have that may affect my involvement with the activities offered.

To be completed by Parents/Guardians if participant is under 18:

I have read and understood the safety information. The person/s named above has my consent to participate in Head 4 Heights Adventures activities. I am aware that there are minor risks of injury associated with participating in adventurous activities but I am also aware that this person will be given safety instructions to ensure that they are attached at all times, whilst they are at height, to tested and approved safety systems. I consent to any treatment being given in an emergency.

Participants Name/s: …………………………...…………………………...

Parent/Guardian Name……………………………………………………

Signed: ……….……….……………………….. Date: ……………..……...

Relationship to Participant: ………………………………………………..

Contact telephone in case of emergency: ………………………………

Insurance:

Participants are covered by the company’s insurance in the highly unlikely event of negligence by one of the employees. Personal accident and loss/damage of belongings are not insured.

 **12.4 NEAR MISS REPORT**

# Near Miss Report

Date of Incident........../.......... /...........….

Time......................................................…

Client/group.......................................……. Client contact name ............................

Weather conditions...........................................................................................……

………………………………………………………………………………………………

Reported by (instructor)...........................................................................................

………………………………………………………………………………………………

Location of incident

(activity/element)..............................................................……………………………

Person(s) involved (participant’s names)

....................................................................................………….…………………….

Description of incident

................................................................................................................................. .................................................................................................................................

.................................................................................................................................

..........................................................……………………………………………...

.................................................................................................................................

..................……………….

Notes on appropriate equipment/clothing

.................................................................................................................................

................................................................................................................................. .................................................................................................................................

..........................................................……………………………………………...

.................................................................................................................................

..................……………….

Action taken at time

.................................................................................................................................

.................................................................................................................................

.................................................................................................................................

.................................................................................................................................

.................................................................................................................................

.................................................................................................................................

Action taken as a result of this incident to avoid future occurrences

................................................................................................................................. ................................................................................................................................. .................................................................................................................................

.................................................................................................................................

..............................................................................……………………………………

………………………..

Witnesses of incident ……………………..

Name ........................................................

Signature ...................................................

Name ........................................................

Signature ...................................................

 Senior Instructor signature .....................................................

 Client Manager signature .....................................................

**12.5 Accident and RIDDOR form**

# Accident and RIDDOR form

Any accident taking place on a programme on or off site MUST BE RECORDED

HERE IN THE GREATEST POSSIBLE DETAIL. Failure to do so may result in

HEAD 4 HEIGHTS not having sufficient information to fight a potential claim, no matter how ridiculously trivial the accident may appear at the time.

(The incident will have to be reported under the RIDDOR Regulations if there is a work-related accident resulting in death of, or serious injury to, an employee or a self-employed person working on site; or if a member of the public is killed or taken to hospital. Further information on RIDDOR is inside this file.)

Once this form is completed please pass on to the Head Instructor for checking and assessment (he has to decide whether it’s sufficiently serious to be notified to our insurers) together with a copy of the injured party’s completed medical form.

About the person who had the accident:

Full name:

…………………………………………………………………………………………….

Age: …………………. Sex: ………………….

Occupation:

…………………………………………………………………………………………….

Full home address:

………………………………………………………………………………………………

………………………………………………………………………………………………

………………………………………………………………………………………………

………………………………………………………………………………………………

………………………………

Current address if different from above:

………………………………………………………………………………………………

………………………………………………………………………………………………

………………………………………………………………………………………………

………………………………………………………………………………………………

………………………………

Home Tel: ………………………………………

Work Tel: ……………………………………….

Mobile: …………………………………………. email address: ……………………………….

Clothing/footwear at the time of the accident:

………………………………………………………………………………………………

………………………………………………………………………………………………

………………………………………………………………………………………………

………………………………………………………………………………………………

………………………………

About the accident:

 Date:…………………………….. Time:……………………………..

Location:………………………………………………………………………………….

What happened:

………………………………………………………………………………………………

………………………………………………………………………………………………

………………………………………………………………………………………………

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Weather conditions at the time:

……………………………………………………………………………………………… ……………………………………………………………………………………………… ………………………………………………………………………………………………

………………………………………………………………………………………………

Conditions of apparatus/ground e.g. wet or dry, slippery?

………………………………………………………………………………………………

………………………………………………………………………………………………

……………………………………………………………………………………………… ………………………………………………………………………………………………

What action was taken (emergency procedures, first aid measures, advice sought, removal to hospital, subsequent diagnosis and treatment)?

………………………………………………………………………………………………

……………………………………………………………………………………………… ……………………………………………………………………………………………… ………………………………………………………………………………………………

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………………………………………………………………………………………………

Names and addresses of witnesses to accident (at least 4 persons if possible, mix of staff and student):

|  |  |
| --- | --- |
| 1      | 2  |
| 3  | 4      |
| 5     | 6   |

Any other details?

………………………………………………………………………………………………

………………………………………………………………………………………………

………………………………………………………………………………………………

………………………………………………………………………………………………

………………………………

Name & Address of writer:

……………………………………………………………………………………………… ……………………………………………………………………………………………… ………………………………………………………………………………………………

………………………………………………………………………………………………

………………………………

## 12.6 Daily Operation Form – Head 4 Heights

|  |  |  |  |
| --- | --- | --- | --- |
| Date  |   | Rescues  |   |
| Course used times  | Opening  |   | Closing  |   |
| Name of Senior Instructor  |   |
| Names of staff operating the course  |   |   |
|   |   |
|   |   |
| Primary Concerns  | Outcome  | Comments  |
| Surrounding area  |   |   |
| Supporting guy wires  |   |   |
| Poles  |   |   |
| Belay Points  |   |   |
| Freefall 1 & 2 Load Test  |   |   |
| Freefall Landing Zones  |   |   |
| Auto Belay 1 & 2 Load Test  |   |   |
| Individual Elements  |   |   |
| PPE  |   |   |
| Auto Belay Rescue Bag  |   |   |
| Daily Inspection Instructors Signature (to be performed by a Senior Instructor)  |   | Daily Inspection Instructors Name  |   |
|  Key for inspection: **G**-good condition, **TBM**-to be monitored, to be passed onto ATSM immediately, **OOS**-out of service, to be passed onto ATSM immediately, **WR**-work required, add comments into comments column   |
| General Public: [inc Adults, Children Early Birds etc.]  | Pre-Booked Groups:  |
| Total Number of participants:  |

|  |
| --- |
| SPECIAL EVENTS (ACCIDENT, INCIDENT, OTHER)  |
|   |

##

**12. Monthly Inspection Check - Head 4 Heights**

(Note: Also listed as operational inspection log. Details and equipment of this log may change as need equipment if bought in)

Date:

 Course inspector’s Signature: Name:

|  |  |  |
| --- | --- | --- |
| Primary Concerns  | Outcome  | Comments  |
| Supporting guy wires  |   |   |
| Internal guy Wires  |   |   |
| Bottle screws  |   |   |
| Bottle screw redundancy  |   |   |
| Poles  |   |   |
| Fan Descenders & Cables  |   |   |
| Auto Belay Devices  |   |   |
| Cabloc Access cable  |   |   |
| Shear Reduction Blocks  |   |   |
| Mallion Rapides & connectors  |   |   |
| Fixings for heavy objects  |   |   |
| All nuts and bolts  |   |   |
| PPE  |   |   |
| Secondary Concerns  | Outcome  | Comments  |
| Surrounding Area  |   |   |
| Perimeter Fence  |   |   |
| Platforms & Woodwork  |   |   |
| Activity Systems  |   |   |
| Staples  |   |   |
| Freefall Landing Area  |   |   |
| First Aid Box  |   |   |

Key for inspection outcomes:

**G**-good condition, **TBM**-to be monitored, to be passed onto ATSM immediately, **OOS**-out of service, to be passed onto ATSM immediately, **M**-work required, add comments into comments column

 Comments

 **12.8 Monthly PPE Inspection Form**

##  Harness Log

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Date  |   | Inspectors Name  |  |   | Signature  |
| OUISTITI  | Serial No.  |  | Date of Purchase  | Condition G=Good, TBM=tobe monitored R= Retire |  | Date Inspected  |
|   |   |  |   |   |  |   |
|   |  |   |   |  |   |
|   |  |   |   |  |   |
|   |  |   |   |  |   |
|   |  |   |   |  |   |
|   |  |   |   |  |   |
|   |  |   |   |  |   |
| Size 0  | Serial No.  |  | Date of Purchase  | Condition G=Good, TBM=tobe monitored R= Retire |  | Date Inspected  |
|   |   |  |   |   |  |   |
|   |  |   |   |  |   |
|   |  |   |   |  |   |
|   |  |   |   |  |   |
|   |  |   |   |  |   |
|   |  |   |   |  |   |
|   |  |   |   |  |   |
| Size 1  | Serial No.  |  | Date of Purchase  | Condition G=Good, TBM=tobe monitored R= Retire |  | Date Inspected  |
|   |   |  |   |   |  |   |
|   |  |   |   |  |   |
|   |  |   |   |  |   |
|   |  |   |   |  |   |
|   |  |   |   |  |   |
|   |  |   |   |  |   |
| Size 2  | Serial No.  |  | Date of  | Condition  |  | Date  |
|  |  | Purchase  | G=Good, TBM=tobe monitored R= Retire | Inspected  |
|   |   |   |   |   |
|   |   |   |   |
|   |   |   |   |
|   |   |   |   |
|   |   |   |   |
|   |   |   |   |
|   |   |   |   |
|   |   |   |   |
|   |   |   |   |
|   |   |   |   |

## PPE – Crab/GriGri Log - Head 4 Heights

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Date  |   | Inspectors Name  |  |   | Signature  |
| GRI GRI  | Serial No.  |  | Date of Purchase  | Condition G=Good, TBM=to be monitored R= Retire |  | Date Inspected  |
|   |   |  |   |   |  |   |
|   |  |   |   |  |   |
|   |  |   |   |  |   |
|   |  |   |   |  |   |
|   |  |   |   |  |   |
| HMS Crab  | Serial No.  |  | Date of Purchase  | Condition G=Good, TBM=to be monitored R= Retire  |  | Date Inspected  |
|   |   |  |   |   |  |   |
|   |  |   |   |  |   |
|   |  |   |   |  |   |
|   |  |   |   |  |   |
|   |  |   |   |  |   |
| D-Shape Crab  | Serial No.  |  | Date of Purchase  | Condition G=Good, TBM=to be monitored R= Retire  |  | Date Inspected  |
|   |   |  |   |   |  |   |
|   |  |   |   |  |   |
|   |  |   |   |  |   |
|  |   |   |   |   |
|   |   |   |   |
| Lift  | Serial No.  | Date of Purchase  | Condition G=Good, TBM=to be monitored R= Retire  | Date Inspected  |
|   |   |   |   |   |
|   |   |   |   |
|   |   |   |   |
|   |   |   |   |
|   |   |   |   |
| Absorbica  | Serial No.  | Date of Purchase  | Condition G=Good, TBM=to be monitored R= Retire  | Date Inspected  |
|   |   |   |   |   |
|   |   |   |   |
|   |   |   |   |
|   |   |   |   |
| CabLoc  | Serial No.  | Date of Purchase  | Condition G=Good, TBM=to be monitored R= Retire  | Date Inspected  |
|   |   |   |   |   |
|   |   |   |   |
|   |   |   |   |
|   |   |   |   |
|   |   |   |   |
|   |   |   |   |

### 12.9 TRU BLUE INSPECTION LOG



Weekly Service/Inspection Log

Model No: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Inspector:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Serial No: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Inspection Date:\_\_\_\_\_\_\_\_\_\_\_\_

Date Made: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Disposition: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Inspection Procedure Point   | Description  | Pass  | Fail  | Comments   |
| 1  | Visually inspect the casing, mounting holes and plastic covers for wear, impact damage, cracking, deformation and corrosion. Replace any damaged items or remove Auto Belay from service.  |   |   |   |
| 2  | Check all safety labels are in place and in good condition.  |   |   |   |
| 3  | Check date on Certification Label is current.  |   |   |   |
| 4  | Inspect the condition of the carabiner, checking for:  Wear and damage.  Correct operation of the locking mechanism.  Smooth operation of the carabiner swivel.   |   |   |   |
| 5  | Slowly pull out the webbing from the unit. As webbing is withdrawn inspect for:  Damage to stitching.  Cuts, wear and fraying.  Discoloration.  |   |   |   |
|  |  Any other signs of damage or contamination. Replace webbing if any signs of wear or damage are present. Replacement webbing can be ordered at www.climbtru.com   |  |  |  |
| 6  | Allow the webbing to slowly retract into the casing – checking the retraction action is strong and smooth.   |   |   |   |

INSPECTION REMINDER

Before each use, visually inspect the device, line and attachment hardware for damage, wear, missing parts, incorrect operation or any unserviceable conditions in accordance with the Manufacturer’s instructions.

Fully extend and return the line by hand, ensuring it extends and returns in a smooth and continuous action with adequate resistance. During this operation, inspect the line for signs of excessive wear.

DO NOT USE THE DEVICE IF IT SHOWS ANY SIGNS OF DAMAGE, WEAR OR INCORRECT OPERATION.

If any sign of damage, wear or incorrect function exists, remove the device from duty and contact an authorized service centre for servicing options.



## Six Month Inspection Log

Model No: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Inspector: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Serial No: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Inspection Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date Made: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Disposition: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Inspection Procedure Point   | Description  | Pass  | Fail  | Comments   |
| 1  | Dismount the Auto Belay (refer to ‘Installation’)  |   |   |   |
| 2  | Carry out Steps 1 through 6 of the ‘Weekly Service’. |   |   |   |
| 3  | Remove the Nozzle – Refer to ‘Nozzle Removal’ |   |   |   |
| 4  | Inspect Nozzle Assembly for:  Excessive wear to slot.  Splitting, cracking and deformation around slot and mounting flanges.  Correct fitment in housing.  |   |   |   |
| 5  | With Nozzle assembly removed, pull out the webbing the complete webbing line, including approx. 100 mm (4 in) of the drum lead.  |   |   |   |
| 6  | Place a suitable pin through the loop in the drum lead, above the joining link to prevent it retracting back into the unit.  |   |   |   |
| 7  | Inspect the complete webbing line for:  Damage to stitching.  Cut, wear and fraying.  Discoloration and contamination.  |   |   |   |
|  |  Any other signs of damage.  |  |  |  |
| 8  | Inspect the webbing joining shackle. Ensuring that:  The shackle pin is secure and straight – do not attempt to tighten. (NOTE - The shackle pin is secured with thread locking compound and any attempt to turn will compromise its security.)  The shackle is undamaged and in the correct orientation.  The webbing around the link is not worn or damaged.   |   |   |   |
| 9  | Remove the pin and allow the upper line to slowly retract into the casing. Inspecting the webbing as it retracts   |   |   |   |
| 10 | Refit the nozzle assembly.   |   |   |   |

 **12.10 Fan Descender Monthly Inspection FREEFALL ONE**

# (Tower adjacent to Leap of Faith)

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Date**  | **Cable Condition**  | **Fan Paddle Condition**  | **Fans** **Lubricated**  | **Instructors Signature**  | **Instructors** **Name**  | **Comments**  |
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**12.11 Operational Procedures for Fan Descenders**

 **RECOMMENDED OPERATIONAL PROCEDURES FOR FAN DESCENDER AT HEAD 4 HEIGHTS**

1. **General procedures**
* **Qualifications**: All instructors must be specifically qualified, trained and monitored by senior instructor before operating independently to use the Fan Descender. (Note original this was Vertex and then ERCA from 2010)
* **Ratios**: The Instructor: participant ratios for the ropes course must never exceed 1:12. There must always be a fully qualified instructor onsite who has been trained in accessing and rescues.
* **PPE**: All participants must wear a climbing helmet and fall-arrest full body harness in accordance with the manufactures recommendations at all times.
* **Staples**: When staples are used to gain access to the activity in use,
* **Before climbing**: All participants will be checked before each climb to ensure that the harness and helmet are fitted correctly.
* all pockets are empty and all jewellery is removed. Medical forms provided prior to access.
* Weight provided to ensure client is under 16 stone. All clients over 15 stone to be weighed to check weight.
* they are attached to the wire correctly and all connections double checked visually and by function test
* **Cancellation due to weather**: All sessions must be cancelled if there is a threat of lightening strike or high winds.
* **End of session**: If the site is to be left unattended or the session is finished then all equipment/rope/tracer cords must be removed or secured to the ropes course out of reach. All elements must be made safe in accordance with the training given by ERCA. Ladders must be removed from the site.
* **Emergency Equipment**: There must always be a first aid kit, rescue equipment and mobile phone or radio onsite at all times.

**2 OPERATIONAL PROCEDURES**

**Fan Descender**

* The recommended maximum weight limit of participants is 16 stone however this presupposes that participants are in good physical condition and feel confident in their ability to “carry” their own weight Maximum weight recommendations for the fan descender are 18 stone however H4H have reduced this to 16 stone for all participants.
* Practice landings demonstration should be carried out on the ground prior to participation in this activity
* connections secured and visually and physically double checked on ground
* Instructors to regularly check cable remain taut at all times during the ascent. (To note from over 500,000 uses cables have remained taut
* Warm up 2m jump to be carried out on ground to give participant confident in system.
* Participants must do their best to climb the pole slowly and smoothly
* Once on the platform participants must check with the instructor that it is clear to step off before doing so
* Participants must step out away from the platform (if present) but **not** jump
* Legs must be together and knees slightly bent for landing.

**3 Accessing & Inspection**

Instructors, who have been appropriately trained and qualified for this task by ERCA Instructor trainer, may carry out these checks.

**RESPONSIBILITY**

It is the responsibility of the Employer to ensure that only appropriately trained staff undertake this task.   If staff have not been appropriately trained then the safety checks cannot be deemed to have been completed.

**FAN DESCENDER H4H**

**OPERATIONAL PROCEDURES**

**RECORDING**

All safety checks, including items checked, any faults discovered or any practical work undertaken must be recorded, dated and signed for at the time that the check is completed.

Unless there are signs, which indicate that an immediate check is required, the following checks would be regarded as representing reasonable care:

**Daily Inspection Before use:**

Each day, before use a qualified instructor should check for the following.

Vandalism / malicious damage: Any signs that the ropes course (or part of) has been vandalised, damaged or tampered with.

Storm Damage: Any signs that the ropes course (or part of) has been damaged by high winds or struck by lightning.

Ground cover: sharp objects such as broken glass, large stones or any other object that may cause injury or harm to participants must be removed.

Landing Zone to have minimum of 8cm gravel on ground.

Fan Descender: A thorough visual check of all the cable and all associated fittings must be carried out. This is best achieved by fully extending the cable and allowing it to retract through one's hands (wearing gloves) carefully examining it during the process. If there is more than one broken wire (not strand) in any 30cm section then the apparatus must be placed out of use immediately.

PPE: All PPE must be inspected in accordance with the relevant manufacturer's recommendations.

#### Monthly

Each Month a full logged inspection must be carried out by a qualified Instructor. All components and parts of the structure will be checked for signs of damage and wear.

This inspection must be done in accordance with the safety training from ERCA Instructor trainer.

#### Annual

#### FULL STRUCTURE PERIODICAL INSPECTION BY EXTERNAL TYPE C INSPECTION BODY

The complete structure must be inspected once a year. This frequency has been determined ERCA standards and UK ropes course guide

#### ACTION TO BE TAKEN IF IN DOUBT

If at any time there is any doubt about the safety of the equipment, and therefore the safety of participants, then the equipment must be taken out of use immediately.