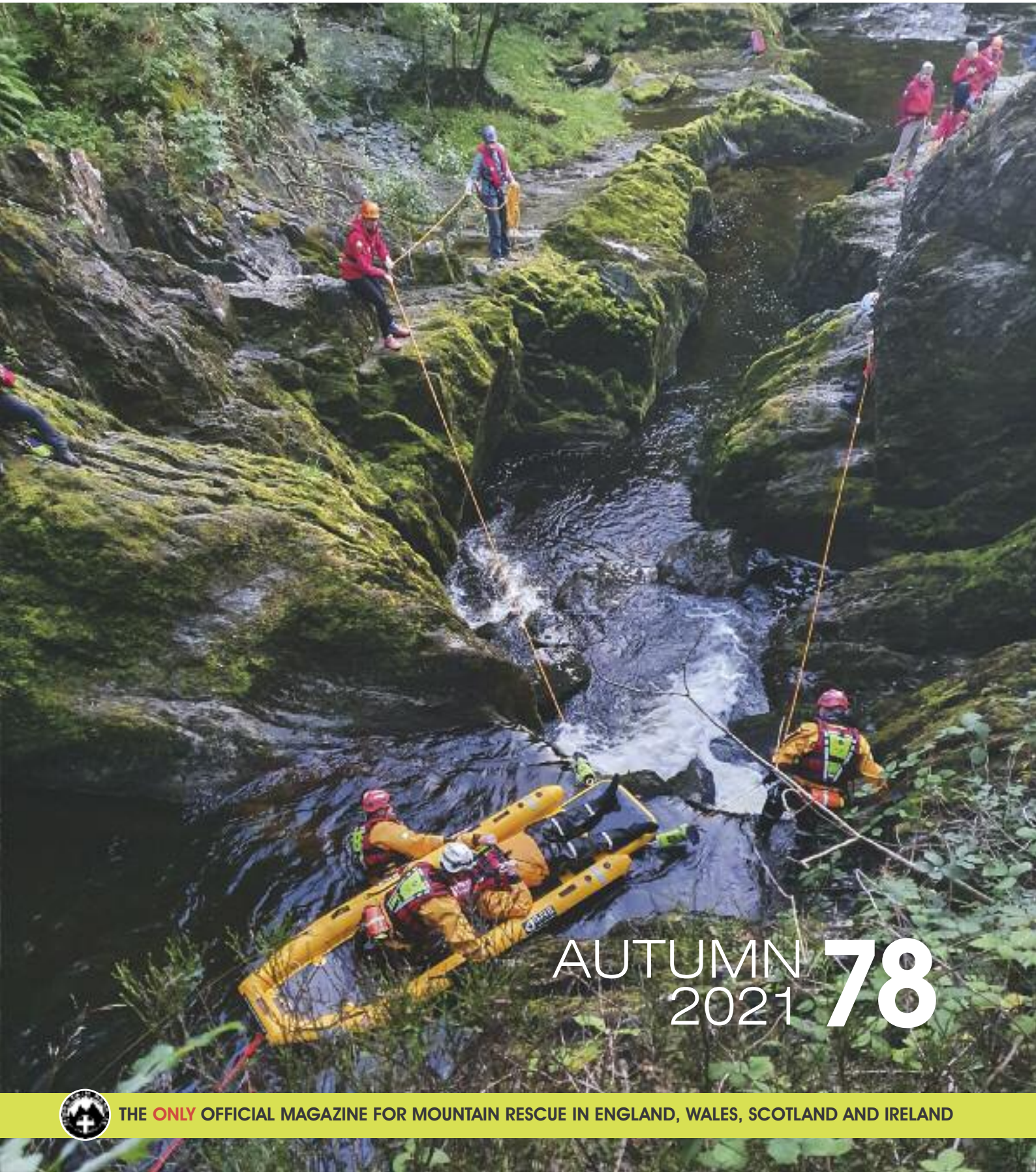


# mountain rescue

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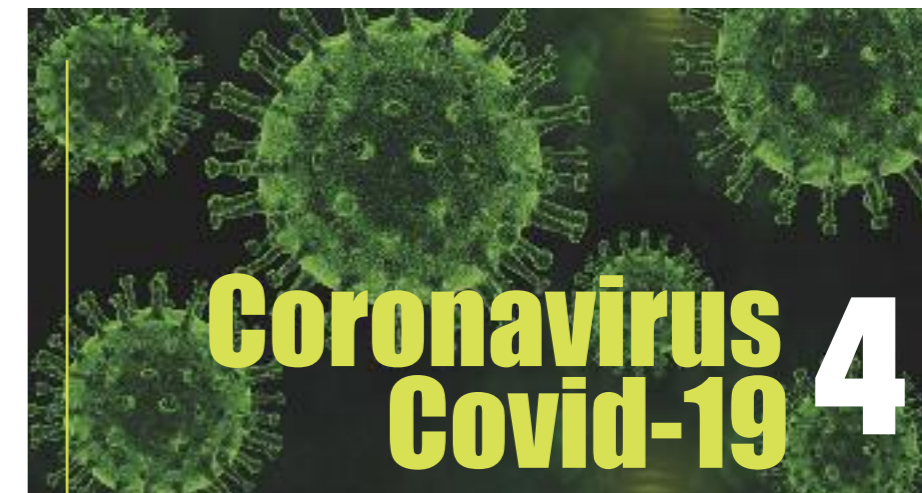
Cave Rescue Organisation (CRO) team members on exercise at Snow Falls, a regular accident blackspot © Howard Limbert.



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# inthisissue



A collection of guidelines and information for teams and team members

**Wellbeing: How the Rescue Benevolent Fund can help support you:** Judy Whiteside explains recent developments with this dedicated fund, set up specifically to look after mountain and cave rescue team members and their families



**30 The things we do:** Bill Whitehouse reports on the Guinness Book of Records-worthy period between one particular caving incident and subsequent rescue

**Wellbeing: How home growing could benefit your mental health and wellbeing:** Roger Saxby from The Fire Fighters Charity extols the benefits of 'growing your own'



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# MOUNTAIN RESCUE ENGLAND AND WALES, BRITISH CAVE RESCUE COUNCIL AND SCOTTISH MOUNTAIN RESCUE

## COVID-19 PPE GUIDANCE FOR RESCUERS (REVISED JULY 2021)

- Whilst there is a relaxation of rules around face covering and distancing this does not apply to healthcare settings. It is likely there will be an increase in cases particularly in the younger population and therefore the probability of encountering a casualty with the virus is once again increased.
- It is important that team members remain safe and that teams maintain operational capacity.
- The purpose of the PPE guidance for MREW team members is to prevent individuals from contracting the virus themselves or passing it on to their families/loved ones.
- This document only deals with the rescue situation and not other team business eg. training/travelling in vehicles/meetings etc.
- The most recent updates (CDC May 2021) indicate that the main routes of transmission are:
  1. Inhalation of the virus
  2. Deposition of virus particles onto mucous membranes (eyes, nose, mouth)
  3. Touching mucous membranes with contaminated hands.
- Whilst vaccines do reduce transmission (to some degree) and severe disease (to a greater degree) they do not fully protect the individual or contacts because:
  - Different vaccines have variable performance around transmission and milder disease and their efficacy is waning over time
  - There is potential for new variants to become increasingly vaccine-resistant.
- The main principles to prevent transmission are:
  - Good ventilation and social distancing
  - Masks on casualty and on rescuers and eye protection (on rescuers) when social distancing cannot be maintained)
  - Good hand hygiene both using gloves and decontaminating.
- Masks and eye protection have a double benefit of reducing inhalation and deposition of the virus but also reduce the individual touching their eyes, nose and mouth.
- It is recognised in the mountain rescue environment that the weather may render the wearing of particular items of PPE of a greater risk to the individual than the risk of contracting coronavirus:
  - Masks in heavy rain impairing breathing
  - Waterproofs in hot weather impacting thermal regulation
  - Eye protection misting impairing vision.
- Therefore, whilst we do not advocate a wholesale relaxation of PPE, in certain circumstances the individual and/or team may perform a dynamic risk assessment and choose alternative protection options. This should be an active decision at the time and discussed with others.
- Due to personal circumstances individuals may choose to maintain a high level of PPE when others choose to look to alternatives.

### HIGH RISK SITUATION

Need to be within 2 metres of the casualty

AND any one of:

- Covid test positive casualty
- Symptomatic casualty
  - ....• Fever
  - ....• Cough
  - ....• Loss of smell
- Casualty has had contact with a test positive person and should be isolating
- Casualty is unconscious or unable to communicate.

### PPE FOR CASUALTY

- Mask (Type IIR or higher)

### PPE FOR RESCUERS

- Mask (Type IIR or ideally higher)
- Eye protection: Goggles / Wrap around glasses / Helmet visor
- Gloves
- Removable outer clothing layer.

If possible, double vaccinated cas carers/rescuers\*

Threshold to change from this should be high, although we recognise that there may be circumstances where risk of injury due to PPE is even higher. This should be the exception.

**\* In the high-risk casualty situation, full PPE should be worn regardless of vaccination status of rescuer. Double vaccination does NOT fully stop mild disease or onward transmission to family/team. It adds a layer of protection from contracting severe disease needing hospitalisation. It should NOT be seen as a replacement for PPE.**

### MEDIUM RISK SITUATION

Need to be within 2 metres of the casualty

AND NONE of:

- Covid test positive casualty
- Symptomatic casualty
  - ....• Fever
  - ....• Cough
  - ....• Loss of smell
- Casualty has had contact with a test positive person and should be isolating
- Casualty is unconscious or unable to communicate
- Casualty is from an area of high prevalence or new variant of Covid.

### PPE FOR CASUALTY

- Mask (Type IIR or higher)

### PPE FOR RESCUERS

IDEALLY AS ABOVE, BUT FOLLOWING DYNAMIC RISK ASSESSMENT OPTIONS INCLUDE:

- Masks in very wet weather
  - ....• Frequent changes
  - ....• Use of other face covering
  - ....• OR removal.
- \* Ensure replaced once indoors or conditions change and good hand hygiene and ventilation
- Eye protection misting
  - ....• Use of tape on top of mask to prevent fogging
  - ....• Use of anti-fogging solutions
  - ....• Glasses and visors mist less than goggles
  - ....• OR removal.
- \* Ensure replaced once conditions change and good hand hygiene and ventilation
- Gloves
  - ....• Use of normal stretcher-carrying gloves over medical gloves (wash outer gloves after job)
  - ....• Removal, maintaining enhanced hand hygiene.
- Outer clothing layer
  - ....• Wear shorts and T-shirt underneath waterproof
  - ....• Change to windproofs
  - ....• Wear normal clothes and change once back at RV. Carry spare set in case of follow on call-out. Decontaminate self. Isolate and wash clothes at home.

### LOW RISK SITUATION

NOT within 2 metres of the casualty or others

eg. walking in, search activities or undertaking other parts of rescue

### PPE FOR RESCUERS

- Mask if risk of coming within 2 metres of others
- Eye protection if in risk of coming within 2 metres of others
- Hand hygiene.

Carry PPE (mask, gloves, eye protection, waterproofs) so you can use if situation changes/casualty located.

### THROUGHOUT THE RESCUE:

- Minimise total team to safe operation number
- Team to maintain social distancing
- Kit dump away from immediate casualty site
- Casualty care delivered by minimal number of team members
- Advise aircrew or ambulance of Covid-19 status and risk.
- Avoid the use of a bivi shelter unless there is an environmental and clinical need
- Consider use of blizzard bag and/or alternative methods of insulation
- Minimise transporting casualties in vehicles and, if you have to, minimise team members in vehicle and ensure good ventilation
- Dispose of kit or isolate, wash and decontaminate.

MREW Covid-19 PPE Guidance for Rescuers: Updated July 2021.  
Dr Alistair Morris, MREW Medical Director; Dr Brendan Sloan, BCRC Medical Director; Dr Alastair Glennie, SMR Medical Officer.



# MOUNTAIN RESCUE ENGLAND AND WALES, BRITISH CAVE RESCUE COUNCIL AND SCOTTISH MOUNTAIN RESCUE

## EQUIPMENT DECONTAMINATION GUIDANCE (REVISED 2 APRIL 2021)

### GENERAL PRINCIPLES

Whilst increased equipment decontamination and quarantine procedures were commenced with the Covid-19 pandemic, the general principles are best practice for all patients going forward. There are a wide number of infectious diseases that team members and casualties should be routinely protected from.

There has been no change in national guidance at present over Covid-19 although there is a paucity of evidence of transmission via surfaces. What evidence exists shows a low risk of transmission. The viral DNA lasts less time on soft than hard surfaces but presence of DNA does not necessarily mean the virus is transmissible.

With an anticipated increase in activity, the medical and equipment subgroups have developed a pragmatic approach to equipment decontamination following a call-out.

Patient Care Equipment should be single-use items where practicable.

#### Reusable equipment must be cleaned and decontaminated:

- After patient contact
- After blood/body fluid contamination
- At regular intervals as part of routine cleaning.

#### Decontamination of equipment involves:

- Washing off any physical dirt/debris, including blood. Followed by:
  - A combined detergent/disinfectant solution at a dilution of 1000 parts per million available chlorine OR
  - General purpose neutral detergent in a solution of warm water followed by a disinfectant solution of 1000 ppm chlorine\*.

*\* If disinfection cannot take place due to manufacturer's advice a quarantine period of 72 hours should be observed.*

#### Contamination risk stratification

- **High risk:** Equipment within 2 metres of casualty/individual
- **Low risk:** Equipment beyond 2 metres of casualty/individual.

#### LOW RISK

Equipment >2 metres from the casualty

Clean equipment with suitable detergent\* (if possible) and dry.

Equipment can then be reused immediately.

#### HIGH RISK

Equipment in close proximity to the casualty <2 metres

Decontaminate\*\* or quarantine\*\*\* all equipment.

\*always follow the manufacturer's recommendations

\*\*if equipment can be decontaminated (wiped with hot wash, detergent, alcohol wipes or chlorine-based disinfection) then does not need quarantine

\*\*\*quarantine time = 72 hours.

MREW Equipment Decontamination Guidance: Updated 2 April 2021.

Paul Smith, MREW Equipment Officer; Dr Alistair Morris, MREW Medical Director; Dr Brendan Sloan, BCRC Medical Director; Dr Alastair Glennie, SMR Medical Officer.

# Coronavirus Covid-19

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## UPDATE FROM ALISTAIR MORRIS MREW MEDICAL DIRECTOR

Since taking over formally as MREW Medical Director, I have managed to meet over half of our teams and I'd like to say thank you to all for taking the time to meet me. It has been good to hear your views from an operational and medical perspective. There are lots of ideas to develop and I am sure more to come from other teams, so I'm not rushing to make any changes as yet. I will continue my visits over the winter so will be in touch with areas soon.

## COVID-19 UPDATE

Everyone in the health sector can see the effects of relaxation of lockdown and waning vaccine effectiveness (particularly for mild and asymptomatic disease). We are seeing increased admissions of those unvaccinated and some who have been vaccinated and/or had the disease previously. We are also for the first time starting to see children admitted at younger ages with the same Covid lung picture of adults.

Therefore, it is important for all teams and team members to not relax on the excellent adherence to PPE guidelines that have been issued previously and, in particular, not to be relaxed if you are double-vaccinated. View vaccination as protection of yourself from severe disease, rather than preventing transmission of the virus at present. The guidelines are there to not only protect ourselves and our families but also maintain the operational capacity of the teams.

During the year, in response to feedback from teams, I have worked with the medical officers from BCRC and SMR as well as Paul, our Equipment Officer, to develop two new guidelines (see previous pages).

**1. Equipment decontamination risk stratification:** The evidence for surface transmission of the virus is weaker than previously. Therefore, to maintain operational reserves of equipment in teams' exposure has been stratified into High and Low risk requiring different levels of decontamination.

**2. PPE for rescues:** There is a point where the risk from injury due to the PPE is greater than the risk of catching the virus, particularly in very hot or wet conditions. Therefore, a new guideline looks at risk assessing the situation and allows teams to make decisions in the best interests of the rescuers. I am sure the picture for Covid will change over time and guidance will be updated accordingly and circulated to teams, via Moodle and here in the magazine.

## CASUALTY CARE

The extensions previously made to qualifications due to Covid expired in September. Many exams have been running over the summer but if you have not retaken your exam and want to, you should speak to your medical officer as you are no longer able to deliver casualty care.

## DRUGS

There is an ongoing alert over Diamorphine supplies and all of the NHS has been advised to move to other forms of analgesia. Teams using intranasal Diamorphine have been advised of this. To support this there is a proposal at the MSC to move Fentanyl from group 3 to group 2 in the formulary from 1 January 2022. This will make it available to all cas carers to use and will be part of the examination in 2022 for those teams carrying it. Current cas carers will need an update before starting to use. ☘

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## JUDY WHITESIDE EDITOR

For the last couple of years, member resources and documents have been housed in the Moodle VLE. It's easy to access and a growing resource for medical, training and insurance information in particular. So, if you haven't got round to registering yet, here's a quick tour of the key areas to see what you're missing...

Sign in and you'll be greeted with a Home page, with access to your personal Dashboard, Calendar, Files and Courses. Centre stage, the key disciplines listed include **Medical, Search, Water, Safety, Technical Rescue, Leadership and Incident Management, ICT, Insurance and GDPR** and a few other categories yet to be fully populated. Perhaps most relevant at the moment is **Medical** which, from the start of Covid-19, has been regularly updated with information and resources relevant to the virus, added to periodically, as the government updates its own guidance and our own understanding builds. The Medical group addresses the many legal and medical requirements teams need to be aware of as they undertake training and operations,

and there's a sheaf of resources to download. Also in the Medical folder, you'll find information relating to the Casualty Care Certificate (Essential Documents, Medical Terms, CPR and AED, General Principles of Care, Patient Assessment, Patient Management, Trauma, Medical Illness, Environmental Medicine, Medications, Special Considerations and Clinical Skills Video Resources). There's a free-to-download PDF of Casualty Care for Mountain Rescue Edition 2, plus an electronic version of Revision Notes for Casualty Care, and a section on Anatomy and Physiology containing materials to explain how the human body works and WHY we do what we do, rather than just WHAT we do. There's also a section devoted to Recognition of Life Extinct in

Mountain Rescue from David Whitmore, and you'll find subcommittee minutes stored here too.

The **Insurance** category is also worth a check. Here, you will find all the policies and schedules applicable to mountain rescue, and a list of frequently asked questions. ☘

### To register...

go to <http://tiny.cc/Moodle4MR> using a team email address (not role-specific). You'll get an automated email within 30 minutes confirming receipt and, once you're approved, you'll be given a temporary password, which you can change at first log in. Easy peasy. Any issues, email [moodlesupport@mountain.rescue.org.uk](mailto:moodlesupport@mountain.rescue.org.uk).



## Preventative maintenance

**PAUL SMITH** MREW EQUIPMENT OFFICER



A quick search online defines preventative maintenance as 'the regular and routine maintenance of equipment and assets to keep them running and prevent any costly unplanned down time from unexpected failure. A successful maintenance strategy requires planning and scheduling maintenance of equipment before a problem occurs'. You may also have a legal obligation to carry out preventative maintenance and keep concise records.

But what does this mean for mountain rescue teams? We don't legally have to keep maintenance records so why should we carry out preventative maintenance? What we do have is a responsibility and duty of care to our team members and the people we look after, so all teams should carry out preventative maintenance as 'best practice'.

If a serious incident were to occur, because of equipment failure or not, you would be asked to provide concise maintenance records of all your team equipment, and although we don't legally have to do this you would need a good excuse as to why you haven't, leaving you open to legal proceedings and insurance claims.

Preventative maintenance has the added benefit of familiarising team members where equipment is stored and its use. Best practice would be to follow the manufacturer's recommendations as a minimum, a visual check before use, a full check after use before storing away, and periodic checking (ie. once a quarter).

Attaching tags to checked equipment can easily show that kit has been checked and is ready for use. Different-coloured tags can show when an item is out of service awaiting repair or replacement.

There are a lot of ways to record preventative maintenance — paper sheet, files, spreadsheets and online specific software programs. In my

opinion, specific software programs would be the best option. In addition, all your information would be stored in secure cloud storage, so in theory you can't lose your data.

I have spoken with three software providers, D4H, Papertrail and Gearlog; all offer discounted rates to voluntary organisations and in some cases, they even offer free versions. I am aware through the equipment subgroup that there are many more systems available and some still in development. All the software providers are happy to offer free trial periods and online training.

If you do choose to use a software system, it's worth noting that there will be some work in setting all your equipment up in the system. If you have this information on spreadsheets, you should be able to have it uploaded into the software system which will save a lot of time.

Recording what and when equipment has been checked is only part of your preventative maintenance strategy. Team members must be competent and trained in checking the equipment and MREW does support this with regular FPE checking courses. For further information on FPE training courses, speak to your regional training officer. ☺



Damage and hindrances to kit usage can come in many forms! Images supplied by Lyon Equipment.



## Implications of the new UKCA quality mark

As many readers will be aware – and especially team equipment officers – MREW has been one of many organisations lobbying HM Government to reconsider the timetable for the introduction of a UK equivalent of the CE mark, known as UKCA. On behalf of MREW, **Sally Seed** looks at what this means for mountain rescue.

On 25 August 2021, the government announced plans to introduce revisions to the timetable that will enable CE-marked goods to continue being placed on the market until 1 January 2023, an extension of a full year over the original plans.

'It's great news that there is an additional year for businesses to adapt to UKCA requirements,' said Paul Smith, MREW Equipment Officer. 'The legislation affects all distributors and manufacturing companies and many of the organisations buying their products. The extension means that all outdoor recreation product sectors now have until 1 January 2023 to implement the UKCA marking. This is the final deadline and all sectors have been clearly told there will be no further extension.'

The news came after a lot of work from members of the outdoor industry, including the Outdoor Industries Association (OIA), BMC, MLTA and Mike Margeson for MREW.

'This is the sort of area where MREW officers can make a difference for teams across the country,' said Mike. 'Paul and I have been involved in all sorts of discussions and meetings to support others in the field. An extra year is going to be a big help for manufacturers in essential areas such as PPE and climbing equipment where the existing CE mark is a foundation for safe working.'

### A FEW KEY QUESTIONS AND ANSWERS

#### Are there going to be differences between the CE norms and the new UKCA standards?

No. The standards will be the same but they will need to go through a UK-approved body for testing.

#### How will the changes affect access to new PPE, water and mountain equipment THROUGH 2022?

They shouldn't affect things in 2022 at all. The extension gives significant additional time for manufacturers and distributors to make the necessary changes.

#### How will the changes affect access to new PPE, water and mountain equipment AFTER the new date in 2023?

Depending on how distributors and manufacturers anticipate the changes, there may be some supply issues early in the new regime. This is because the capacity of the UKCA-approved bodies specialising in PPE and outdoor equipment is limited and so not all applications may be processed and granted UKCA registration in time for 1 January 2023.



#### Is it likely that some equipment or brands will disappear from the UK market?

This is a possibility as the UKCA mark will be an additional approval for manufacturers to manage. Mountain rescue's strong relationships with the bigger manufacturers put them in a good position as these tend to be the companies that are already taking steps to respond to the new requirements. There is a risk that some smaller companies may limit the range of products available in the UK in future as the costs of achieving UKCA registration may not be justifiable in all cases.

#### Will the change to UKCA affect existing kit owned by teams?

No. The regulations only affect equipment put on to the market from 1 January 2023. ☺

Top: The new CE marking © Lyon Equipment.



### INTRODUCING WILL OLIVER NEW MREW WATER OFFICER

Hi everyone. I'm Will Oliver, deputy team leader and currently water rescue officer for Western Beacons MRT and regional water rep for South Wales Search and Rescue Association. Originally from North Wales, I have been living in South Wales for over 20 years.

Following a recent selection process, I have been appointed MREW Water Officer (pending ratification in November) and I look forward to working with the MREW management team, operations group, regional water leads, and all teams in the water search and rescue space. I have no doubt there are a variety of views held on water rescue in mountain rescue. Whatever your thoughts, it is a vital part of our capability, as we are regularly tasked to search in or near inland water, rivers and waterways, in addition to more technical water rescue requirements. That means regardless of your level of water rescue training or awareness, we all have a duty to ensure the safety of ourselves and our teams when working in this environment.

I very much recognise the work that has taken place previously in the water context and officer role and I wanted to thank the previous water officer and other team members for their input, effort and hard work to progress many areas of water rescue. I also hope we will soon see an end to the pandemic and that we can continue to focus on the things that Covid has stopped us from progressing over the last eighteen months.

I'm starting to pull together priorities for water search and rescue and as part of this I want to ensure we reflect what teams and team members have already put forward but also to ensure we listen to the regional water reps and others on what we need to include and consider over the next year and beyond. Water rescue training, utilising the Moodle site for water, working with and influencing other agencies and continuing to improve and maintain the highest standards in everything we do, will be key to making a difference for those we serve and go out to help or rescue when called upon. I look forward to speaking with and hearing from as many teams and team members as I can, to jointly progress this important area of MREW. Working together is always better than working alone. If there is anything you want to discuss, share or would like support with, please feel free to contact me at [waterofficer@mountain.rescue.org.uk](mailto:waterofficer@mountain.rescue.org.uk). Diolch yn fawr. Thanks very much.



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## Update from **Mike Margeson** on operational matters for teams in England and Wales

The well signposted and anticipated significant strain on teams, and a busier than normal summer period, certainly materialised. Most teams have seen higher than normal activity. Llanberis team, I believe, responded to over 50 call-outs in August alone.

Although team members are mostly double vaccinated and have regular lateral flow testing regimes in place, we have seen positive cases amongst team members, and particularly as infection rates begin to grow again. The MREW medical subcommittee guidance on best practice PPE and protection has not changed. Indoor and confined spaces still remain a significant risk of transmission and the potential knock-on effect on team members' health and our operational numbers.

I have referred before to the ISAR training log and the importance, in the absence of physical SAR training at present, of ensuring the '1a' is kept up to date by members. The SAR-H group, led by Nigel Harling, met recently with Bristol Helicopters and the Maritime Coastguard Agency and discussions are ongoing around our future training provision. At present '1b' and '1c' training is not possible.

Likewise, we have a meeting planned with What3Words to discuss how they can help mountain rescue. They have developed a new training package for tasking agencies and control room staff. MREW and Scottish Mountain Rescue continue to work together collecting and analysing the accuracy of the various locations given to teams by the calling authorities. This analysis isn't restricted to What3Words, as we wish to look at the bigger picture. Mark Lewis put out an email requesting information in June but, while the requested data — both good and bad examples from incidents — has been very helpful, we are missing a large percentage which would make it even more helpful. Please continue to supply this information as you have it.

Paul Smith, the MREW Equipment Officer, reports that service and load testing with Lyon is getting back on stream. I would remind teams to book into the system well in advance of a load test certificate expiry date.

It has been circulated to all teams that, after extensive lobbying, the government has extended the UKAC new certification transition period to the end of 2022. It is expected that in the middle of the year there could be some equipment shortages and requirements. The advice is perhaps to order well in advance of need for any critical items. (See page 11 for more about the implications of the new UKAC quality mark).

The Ops group met to discuss the issues around vehicle key boxes. We are aware of the problems and issues this insurance problem causes on the ground. Officers are doing everything possible with our insurers to find a workable solution.

Training is now happening in a more normal manner with some regional courses being safely delivered. Also, Tim Cain has undertaken the first peer review since the beginning of the pandemic with a visit to our newest team within the MREW fold, West Cornwall SRT. The calendar is now open for next year for any team that thinks this might be a timely point to take part.

Lastly, we can report that Will Oliver, from Western Beacons MRT, has been selected as our new national water officer subject to team ratification at the November main meeting. I am delighted to say that this brings our specialist national officers back up to full strength. (Read Will's introduction of himself on page 11).

## IN CASE YOU MISSED IT LAST TIME:

### Julian Walden on how to access the teams-only area of the MREW shop

Over the last few months, we have been working on updating the MREW shop to allow better access for all teams to purchase selected merchandise at a reduced cost as well as team member-specific items such as car stickers. We have also taken this opportunity to incorporate the Covid-specific PPE items that are currently available to all MREW member teams upon request.

These items can now be ordered/requested free of charge through the online shop and we would like to ask that all future PPE requests are submitted this way. As part of this process, we are updating team accounts to ensure that all teams have access to this area and that we have the correct shipping information.

To register your team, please email [office@mountain.rescue.org.uk](mailto:office@mountain.rescue.org.uk) and include the details listed below for your team's designated purchaser, using an official team email address. An account will then be created for your team and any further information regarding the setting up of this account sent directly to the shop user. Information we will need is as follows:

- Full name of proposed team purchaser + Team name
- Email (must be a team-specific address)
- Postal address (must be able to receive post/parcels during the normal working day).

ANY QUERIES OR HELP REQUIRED, EMAIL [OFFICE@MOUNTAIN.RESCUE.ORG.UK](mailto:OFFICE@MOUNTAIN.RESCUE.ORG.UK) OR CALL 0330 043 9101 BETWEEN 08.30-17.30, MONDAY TO FRIDAY (PLEASE LEAVE A MESSAGE IF CALLING OUT OF THESE HOURS).



# mrew





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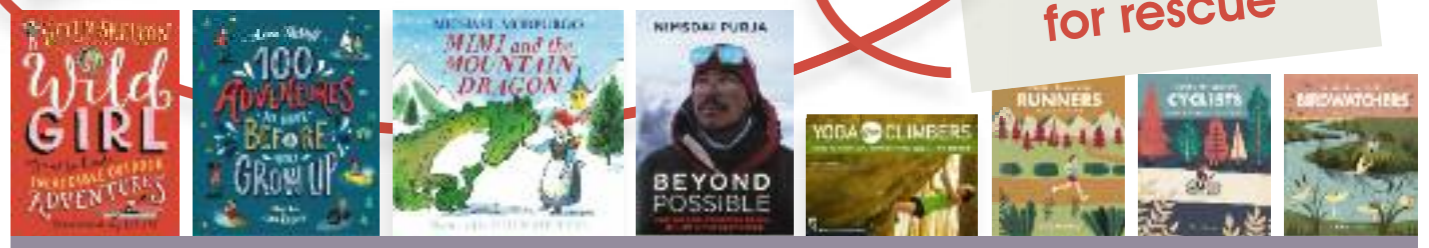
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## CHRISTMAS IS COMING...

...it'll be here before we know it so why not plan ahead and support mountain rescue at the same time? No doubt we'll have even more stock in before Christmas but here are just a few of the titles we currently have available in our bookshop. With each purchase you'll be making a donation of around 30-40% of the cover price. We promise. Or choose from our small but perfectly formed gift collection — from the hugely practical Adventure Medical kits, Sol Emergency Bivvy Shelters, Ledco torches and Silva compasses, through the fun-to-have useful additions to the rucksack like the Zoku Pocket Straw and the handy microfibre cloths for cleaning those glasses or goggles, to our favourite Fudge Bear. And we have gift card donations too. Go to [shop.mountain.rescue.org.uk](http://shop.mountain.rescue.org.uk)

Raising funds  
for rescue



## BCRC Medical weekend

The second BCRC Medical Weekend, originally planned for December 2020, but delayed due to the pandemic, was hosted by Gloucester Cave Rescue Group (GCRG) on 17-18 July. **Brendan Sloan**, BCRC Medical Officer, reports.

The weekend was well attended, with representatives from ten of the cave rescue teams, as well as several members of SARA, who often work with GCRG, and we were blessed with glorious weather. The Saturday was based at the GCRG depot, with a selection of talks covering topics from the new casualty bag and jacket, through to the history of first aid training for cave rescue.

We were delighted to be joined by Alistair Morris, MREW Medical Officer and member of the CRO Extended Cavers list, who gave an update on the controlled drugs regulations. This then led into a series of practical sessions and demonstrations, with teams encouraged to share practice and showcase specific equipment.

On the Sunday, GCRG laid on some fantastic underground medical scenarios in a nearby mine, with groups made up of members of multiple different teams. These gave rise to some excellent discussion, and the feedback from those attending was universally positive.

My thanks to GCRG for hosting, in particular Paul Taylor for the organisation and Nicky Bailey for designing and running the scenarios.



Above: Getting to grips with the new casualty bag on the new Six stretchers. Left: Casualty simulations underground on Sunday. Images © Paul Taylor, GCRG.



# Getting to know our Scottish Mountain Rescue colleagues...



Left: Dundonnell team members at the Dingwall base opening © Alan Barrow.

injuries. This selfless act by Tom earned him a Queen's Commendation for brave conduct. The tragedy was later made into a film in 1985 by Hamish MacInnes called *Duel with An Teallach*. It would be another five years before an official mountain rescue team would be formed.

The team, comprising 36 volunteers, five trainees and two SARDA dogs, is led by Iain Nesbitt. Having joined the team in 2003, Iain took up the gauntlet as leader in December 2019. Geographically the team is well represented in all corners of its territory, with members living and working in Inverness and Dingwall in the east and Ullapool and Gairloch in the west.

Iain said, 'It stands the testament of time that for the last fifty years volunteers from all walks of life have come together to give their time freely, regardless of weather or time of day to make someone's bad day a little better. I feel extremely proud to have been a small part of the Dundonnell story so far.'

Over the years, Dundonnell MRT has been called out on many dramatic rescues. One of the biggest searches was looking for the Stornoway to Inverness aircraft in 2006. The plane came down on the south side of Seana Bhraigh and the search involved Dundonnell MRT, two RAF rescue teams, Kintail MRT and Torridon MRT. In all, around 100 rescue personnel were involved, supported by two helicopters, one coastguard and one RAF Sea King.

Given that the average annual call-outs number in the mid-30s, summer 2021 has been a busy one, with eighteen call-outs in the period June to the end of August, ranging from medical emergencies to full team call-outs for missing walkers.

The team has been involved in 29 call-outs so far this year, already surpassing last year's total of 27.

**FIND DUNDONNELL MRT ON FACEBOOK AT [FACEBOOK.COM/DUNDONNELLMRT](https://www.facebook.com/dundonnellmrt) OR VIA THEIR WEBSITE AT [DMRT.ORG.UK](https://www.dmr.org.uk)**

## Dundonnell MRT

The territory Dundonnell MRT covers is vast, approximately 2,600 square miles in the North West Highlands of Scotland. The remote, rugged terrain is home to no fewer than 39 Munros and 75 other great mountains, such as Coigach, An Teallach, the Fannichs and Ben Wyvis. With such an extensive area, the team has their main base at Dingwall (north of Inverness) with smaller bases at Dundonnell and Ullapool, and vehicles stationed at Cannich and Mellon Charles.

The new Dingwall base opened in 2017, after raising an amazing £175,000 with help from various donors, including sportsScotland, and houses the command vehicle and a 4x4 pickup. It also contains a training/briefing room, stores and drying room, along with shower and toilet facilities.

Having supported the local police for a number of years, the team was founded 1971, so this year they celebrate their 50th anniversary. Dundonnell MRT took its name from the village/area at the foot of An Teallach, right at the north of the area commonly known as the 'Great Wilderness'

in Wester Ross — a popular mountaineering destination, given that it has ten summits over 700m and three over 1000m.

The origins of the team go back to a tragedy on 17 April 1966 when three friends set out to climb An Teallach. Two of the friends fell and what ensued was an amazing attempt to save their lives by Iain Ogilvie, their companion, a rescue effort which earned him an MBE. When Iain finally managed to raise the alarm, Dr Tom Patey was first on scene and covered five miles in under an hour to reach the two casualties. Unfortunately, they had succumbed to their

## ACTION MEN TO THE RESCUE...

Scottish Mountain Rescue got some additional support recently when a group of Action Men sprang into action to come to the rescue of an injured climber. Alex Warren, the son of a Scottish Cave Rescue Organisation (SCRO) team member, created a short story using the action figures. His hobby is filming Action Man scenarios, so Dave and Ivan from SCRO painstakingly put together the scenes for him. Great job everyone! For the full story and great images, check out the SMR website news page.

Alex, thank you for sharing your fantastic story and we believe there is work underway to create a new cave rescue team. Watch this space for further rescues!

Right: Action Men in action © Alex Warren.



## SUPPORTER STORIES

### THE MAMORES IN MEMORY OF LENNY...

Michelle Haining is a keen hillwalker and enjoyed heading out into the hills with her walking partner Lenny. Last year they completed the nine Fannichs, which they breezed. This was only three months after Lenny had a heart attack and had a stent fitted. This year they planned to challenge themselves to complete the Mamores. On a Friday night on the way up to Glen Affric, the night before Lenny passed away, he had said to Michelle that he was going to set up a JustGiving page to raise money for Scottish Mountain Rescue when they completed the ten Mamores because in his words 'you never know when you might need them'. So on 20 June this year Michelle took on the challenge of the 'big ten' in his memory as they had planned, with his friends and family joining in and meeting up along the way at different points of the day. The Mamores is a big hill day by anyone's standards: 21 miles, 3,400m of ascent. Michelle expected to complete it in around 12-14 hours of walking. A very long day.

'My next challenge is finish off my second round of Munros. I have 33 left. Myself and Lenny were both on our second rounds, with roughly the same amount left and both had planned to finish them this year. So I'll go finish mine off and then go and do the ones he would have had left on round 2 and finish his off for him.'

Chair of SMR, Damon Powell, said 'Everyone at Scottish Mountain Rescue is really touched that Michelle decided to support Scottish Mountain Rescue in memory of Lenny. It is a lovely way to celebrate his life and love of the hills. She managed to raise an incredible £3,585 to help us support our 25 member teams. Well done on your big ten Mamores challenge and a very big thank you for your support Michelle.'



### RAISING CASH FROM MASKS

Since their launch in June 2020, Fernweh UK has raised over £1000 for SMR from the sale of hand-crafted face masks. Based in Aberdeenshire, founder Laura designed and manufactured the collection of masks in nature-inspired prints at the start of the pandemic, donating £5 from the sale of each mask sold.

'Partnering with mountain rescue has been so meaningful,' says Laura. 'It's been a great feeling to be able to support a charity I believe in through my work, even as a one-person team. It's a great feeling to be able to have helped in some small way. From a small business perspective, it has also connected my work and business with like-minded people who care and appreciate Scotland's beautiful wilderness.'

'We are delighted that Laura was able to support us by donating £5 from each mask produced during the pandemic,' says SMR's Elsie Riley. 'A big thank you to her and everyone who supported us by buying a mask from her — we are incredibly grateful for your support and it shows that small businesses can really make a big difference.'

Top left: Image © Michelle Haining. Above: Masks © Laura Sherriffs.

## LONG-SERVING TEAM MEMBERS RETIRE

Scottish Mountain Rescue has seen two notable retirements from teams this year with Joe Burns leaving Moffat MRT after 32 years' service and founder member of Oban MRT, Roger Parry, stepping down after 20 years.

Joe Burns joined Moffat MRT in 1989, having previously been in Galloway MRT, and he served the team in various positions: deputy team leader, chairman and most recently as transport officer. He has an enviable knowledge of Land Rovers and 4x4 driving, running the team's 4x4 courses for many years and, recently, he was a leading member of a group of team members dealing with the major refurbishment of the team Land Rover and the purchase and fitting out of a new control vehicle. At an outlay of £110,000 this was a daunting task that Joe took in his stride. Over his service to the team he has attended many call-outs where mountain rescue skills, as well as his knowledge of local hills, has been of huge value to the team. 'We could not have asked for a better person with the skills and personality to operate so effectively within our team,' says Moffat secretary, Colin Mitchell. Joe has made a very significant contribution to the operation of the Moffat team over the last 32 years and we will miss him.'

Roger Parry made a highly significant contribution to the team and was instrumental in getting the team to where it is today. Chairman, Gordon Binnie, said 'When we formed Oban MRT back in 2000, we were starting with a blank canvas. While all involved were active hill goers, climbers and mountaineers, we mostly knew very little about mountain rescue or setting up an organisation and charity. In those early days, Roger's experience and knowledge of charities, funding and contacts were key and came to the fore in guiding us on developing a sound governance structure and financial stability.'

'He was an active team member who contributed greatly to all operations on the hill whatever the weather and circumstances. He continues his personal mountaineering and has completed his Munros, taking up ice climbing late in life. Roger continued in active service until 2015 when he turned 70, but he continued to be a board member for many more years, until his retirement in February 2021. Roger always contributed his wise counsel and judgement to help steer the team through difficult decisions on resources and governance and there is no doubt that Oban MRT is in such healthy shape today because of Roger's guiding hand and sage advice. It is true to say that Roger has left a lasting legacy in the form of a strong, well-resourced and resilient team.'

Above right: Joe Burns courtesy of Moffat MRT. Left: Roger Parry courtesy of Oban MRT.







**Hinkes  
thinks**

## Treading carefully round the Ingleton Waterfalls Walk

This classic waterfall walk has been a tourist favourite since Victorian times, but what might appear an 'easy' walk for its many visitors accounts for a number of CRO's rescue hours. **Alan Hinkes** went along to investigate.

It is a bumble, an innocuous stroll along made-up paths, five miles, eight kilometres, only a couple of hours — although it can take four. It has been a tourist favourite since Victorian times in the 1800s. On Good Friday, 11 April 1885, a path was opened and the Ingleton Waterfalls Walk has been a popular walk ever since. Nowadays, there's a more substantial made-up path with steps and guard rails and bridges with high sides and warning signs. It still has its dangers but, fortunately for any casualties, the team's base is only four miles away in Clapham.

It costs £8 to enter the Ingleton Waterfalls Walk, most of it is on private access land, parts of it are on CROW Access land. There is a basic map, but it would be difficult to get lost, following other people — and even crowds at busy holiday periods. Thornton Force, the biggest waterfall on the route has a big pool below it, often full of bathers. With care it is possible to scramble behind the

water curtain along rocky ledges, often slippery and wet.

There are plenty of signs on the one-way clockwise route. But just how difficult and dangerous can it be? Like any outdoor activity, walking accidents do happen and it's one of the team's busiest hotspots alongside Malham and the Three Peaks. So far this year it has generated twelve incidents, a quarter of the 48 incidents logged as people who were 'walking'. Injuries included five ankles, one knee, one head, one leg and head, one dizziness and dehydration, one fitting, one child stranded on a rock and one fall with complications.

To put it all in perspective there must be tens of thousands walk this route each year. It was particularly 'mobbed' last summer and also this year, as lockdown was lifted and holidaymakers stayed in Britain: the so-called 'staycation' phenomenon. Quite a few have underestimated the effort required and there are quite a few traps for the unwary

along the rocky path. In the trees the limestone can get very greasy and slippery — not good for smooth-soled shoes. Ankle injuries are probably the most common, requiring a tricky, arduous stretcher carry along the narrow path. Luckily, there are not many fatalities, now the more exposed, dangerous sections with big drops to the beck have been fenced off. Previously, people had sometimes got too close to the edge, slipped into the gorge and were seriously injured or killed.

CRO practice gorge rescues twice a year, abseiling into the waterfall areas and collecting litter on their 'extreme litter pick day' — good practice of roped descents and security on steep ground, as well as fundraising. The Waterfall Walk business, the Ingleton Scenery Company, supports the day with a generous donation and the high visibility presence of the team attracts donations from the tourists. Litter-picking in the inaccessible areas which require abseil rope skills and swiftwater experience is a win-win for CRO: team training, fundraising AND a clean-up. Essentially, descending into the gorge is akin to open-air potholing.

The route might sometimes be mobbed with tourists, but I would recommend this bumble. It is a classic scenic waterfall walk. The clockwise route starting from Ingleton follows the river Twiss upstream past three main waterfalls and several smaller cataracts, to the halfway point where there is often an ice cream van and magnificent views of Ingleborough, before heading back down to Ingleton along the river Doe and three more fine waterfalls. ☺

**'8000 METRES: CLIMBING THE WORLD'S HIGHEST MOUNTAINS', ABOUT ALAN'S EXPERIENCE IN THE MOST CHALLENGING OF COLD CLIMATES, IS AVAILABLE TO BUY FROM THE MREW ONLINE SHOP: [MOUNTAIN.RESCUE.ORG.UK/SHOP/BOOKS](https://MOUNTAIN.RESCUE.ORG.UK/SHOP/BOOKS)**



**Above:** Team members during their Extreme Litter Pick day © CRO. **Opposite page:** Clockwise from top right: Team members on exercise at Snow Falls © Howard Limbert; overlooking the steep edge © CRO; walkers negotiate the rocky path; behind the waterfall curtain at Thornton Force; bathers in the pool beneath one of the falls. **Inset:** Danger sign along the way; CRO on exercise at Snow Falls © Jake Stapleton. Unless otherwise stated, images © Alan Hinkes.





# How can the Rescue Benevolent Fund help support you?

## JUDY WHITESIDE BENEVOLENT FUND SECRETARY

It's been six months since my last update on behalf of the Rescue Benevolent Fund, in the April magazine and, rather than just rearranging the same old words into a slightly fresher version of themselves – about what the fund can do for you, how to apply for support and how to donate (although you know I'll be doing that too) – this time I have news about additional support we are able to offer, including online and telephone counselling.

Those of you familiar with the workings of the fund (and there are more of you than might appear to be the case, flying under the wire of confidentiality), will know that from the start we have had a working agreement with the Fire Fighters Charity (FFC) thanks to the efforts of one of our regional reps, Laura Connolly, who just happens to work at one of their centres as a physiotherapist. It's been a fruitful relationship and a number of you have benefited from the physical rehabilitation they can offer after injury, fully supported by the fund.

Well, this July we renewed that contract but, more importantly perhaps, they have extended the offering of what they can do to support us. Prompted by last year's lockdowns and the ongoing limitations of the pandemic, with people no longer able to travel to, and take advantage of, their residential services (which were closed to us for a long period), they began to look at how they could offer their services online. And we

think this new way of working more flexibly will be something that team members and their families will be able to access more easily, meaning they get the help they need sooner.

And there is still the option to spend four days at one of their residential centres, ideal for anyone needing physical rehabilitation treatment and care to get them literally back on their feet and active again.

### BLENDED PHYSICAL HEALTH AND WELLBEING SUPPORT

Their so-called 'blended health and wellbeing support' is tailored to the individual with a number of different options, depending on need. Both physical and psychological conditions are provided for through a 'blended' approach using their residential centres and/or their new digital platforms, personalised to help enhance recovery.

There are three residential centres around the country, where the charity invites clients to focus on their health and wellbeing. Clients who have a predominantly physical health need will be invited to either Marine Court in Littlehampton, West Sussex or

This support might come in a series of digital (either online or by telephone) counselling sessions between the client and a member of the Fire Fighters Charity clinical team, again following an initial consultation to assess need and identify a suitable

place), to secure the best possible treatment for you. If this involves you seeing someone more local to you, we will liaise with the therapists and clinicians in question and ask that their bills come direct to us for payment.

Our philosophy is all about getting you back to activity and a better sense of wellbeing and making that process as pain free as we possibly can for you.

### WHAT OTHER SUPPORT CAN WE OFFER?

Of course, it may be that you don't require physical or mental health rehab and care. So, for the record, over our eight years or so 'in business', we've also helped support team members through temporary financial hardship and offered immediate grant financial help to bridge the gap between insurance claim and pay-out, and we've also supported families with their funeral costs for a team member's death 'in duty'. Following the Patterdale incident, we looked at how we could help in future, should a similar incident occur where an individual team member and their family requires more sustained intensive care and support. Whilst the fund itself ticks along, able to support the claims we have thus far received, we don't hold the sort of money that sort of claim might require. But that

*...if you or your family need help due to physical or emotional injury or financial hardship resulting from a mountain or cave rescue-related activity, then we are here for you.*

Jubilee House in Penrith, Cumbria, which also houses a dedicated nursing team. Delivery of the physical programme is usually in a group setting with additional one-to-one interventions which may include physiotherapy, exercise prescription, gym, swimming pool or hydrotherapy pool sessions and health and wellbeing workshops.

Meanwhile, the third centre, at Harcombe House, in Chudleigh, Devon is able to deal with clients with psychological health referrals or long-term or chronic physical health issues. Delivery of the programme here is also in a group setting with individual specifics including psychoeducational workshops, mindfulness-based activities, physiotherapy, exercise prescription, gym, swimming pool and hydrotherapy pool sessions.

Please don't be put off applying for support at one of these centres, however, by the prospect of a long, long journey to the opposite end of the country. If the fund agrees to support your care and you live outside a fifty-mile radius, we are currently offering to support your travel expenses too.

The major change to the 'blended' package offered by the Fire Fighters Charity is in their additional online support. Anyone who refer to them for their physical or psychological health and wellbeing can also expect to access their online 'digital physical health and wellbeing'.

Following an initial consultation to assess need and identify a treatment programme, for up to 60 minutes, this support might include a series of digital online or telephone physiotherapy sessions between the client and a member of the clinical team with up to three follow-up sessions. Each follow-up session will be between 30-60 minutes. Exercises may be prescribed using a digital exercise programme.

### ONLINE AND TELEPHONE PSYCHOLOGICAL CARE

Separate to this, they are also offering the opportunity for online psychological health and wellbeing. So, if there is a need for psychological counselling and you feel unable to access this with a therapist local to you — for whatever reason — this might just offer a way forward.

treatment programme. This initial consultation would be for up to 60 minutes. Up to five follow-up sessions will then be agreed between the clinician and the client, up to 60 minutes each.

The process for all this is that first you apply to the Rescue Benevolent Fund for our support then, once we've agreed to support your treatment financially, we refer you to the FFC. Once they have your details, one of their clinicians calls you for that initial assessment, agrees a course of treatment, lets us know you're in the system and then it's over to you — with us keeping a watchful eye on your progress.

So what happens if, for some reason they



Opposite: Physical rehabilitation and counselling are both on the 'shopping list' for the Rescue Benevolent Fund. Images via Pixabay. Above: The hydrotherapy pool at Harcombe House, the Fire Fighters Charity centre in Devon © FFC.

can't help you — for example, if you need more immediate specialist psychological care? Well, once we've agreed to support you, we will work with you and your team or your loved ones (whoever sponsored or encouraged your application in the first

doesn't preclude our support. Our constitution allows us to fundraise for particular circumstances and causes, within the parameters of our declared support for mountain and cave rescuers and their families, and we would be happy to do so.





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Policy details for all covers can be found on the 2021 MREW Tysers Flyer which can be accessed in the MREW Moodle.

Should you have any policy enquiries please contact the team on [mountainrescue@tysers.com](mailto:mountainrescue@tysers.com).

[www.tysers.com](http://www.tysers.com)

So please don't discount our ability to help on a larger scale without talking to us first to discuss the possibilities.

WHERE DO OUR OPERATIONAL BOUNDARIES LIE?

Similarly, another interesting query came in to me, only recently: would we be prepared to support a team member claiming from outwith England and Wales? Again, our constitution/declaration of trust is worded such that we are not defined by geographical area so, in theory, yes. (Just as, incidentally, we'd be happy to accept donations from outwith England and Wales!)

And, in theory, as we grew from a collaboration between MREW and BCRC (which incorporates both Scottish and Irish cave rescue teams) we already cover a far wider area than MREW territory alone. There's also the consideration that many teams in both England and Wales often work on incidents and train with teams both north of the Border in Scotland and across the Irish Sea.

Essentially, the process would be the same and the claim assessed on the same criteria as any other. One question we always ask is whether there are any other claims in place to cover the same injury or issue, be that insurance claims or other benevolent fund claims — and the responses would inevitably factor in to our eventual decision.

HOW DO YOU CLAIM?

Okay here comes the 'rearranging the same words into a not so different way of saying the same thing' bit.

In the first instance, email me at [secretary@rescuebenevolent.fund](mailto:secretary@rescuebenevolent.fund) and ask for an application form. (We are looking into creating an online form to make this easier for applicants). We can't do anything until we receive that and know what we're dealing with. I'm always happy to hear from you via my [editor@mountain.rescue.org.uk](mailto:editor@mountain.rescue.org.uk) address, but be aware that this is then addressed to me wearing a very different hat and potentially accessible to eyes other than mine (in perpetuity), so I will transfer subsequent correspondence to the Rescue Benevolent Fund address for the purposes of retaining a confidential email thread.

Once a claim comes in, we aim to respond within a couple of days to acknowledge receipt and call a meeting of the trustees at the earliest opportunity. Depending on the complexity of the claim, sometimes we are able to make a decision within the week. Often, we involve the fund's regional reps, but they are only ever privy to a redacted version of the details, with all papers collected in after any meeting (or a spoken summary if we meet online) — again, to preserve confidentiality. Although the final decision lies with the trustees, their knowledge and professional experience can be invaluable in the decision-making process. If the claim is particularly complex, we may ask for more details before making

a decision. Whatever happens, we aim to keep you informed every step of the way.

It's worth repeating again: if you or your family need help due to physical or emotional injury or financial hardship resulting from a mountain or cave rescue-related activity, then we are here for you.

DO EITHER MREW AND BCRC INFLUENCE THE FUND AND ITS DECISION-MAKING?

In a word, no. While those two organisations provided the drive for a dedicated benevolent fund, and remain supportive of its development and progress, any decisions are made solely by the fund's trustees and regional reps, as described.

WILL DETAILS OF MY CLAIM EVER BE SHARED WITH MREW OR BCRC, OR MADE PUBLIC?

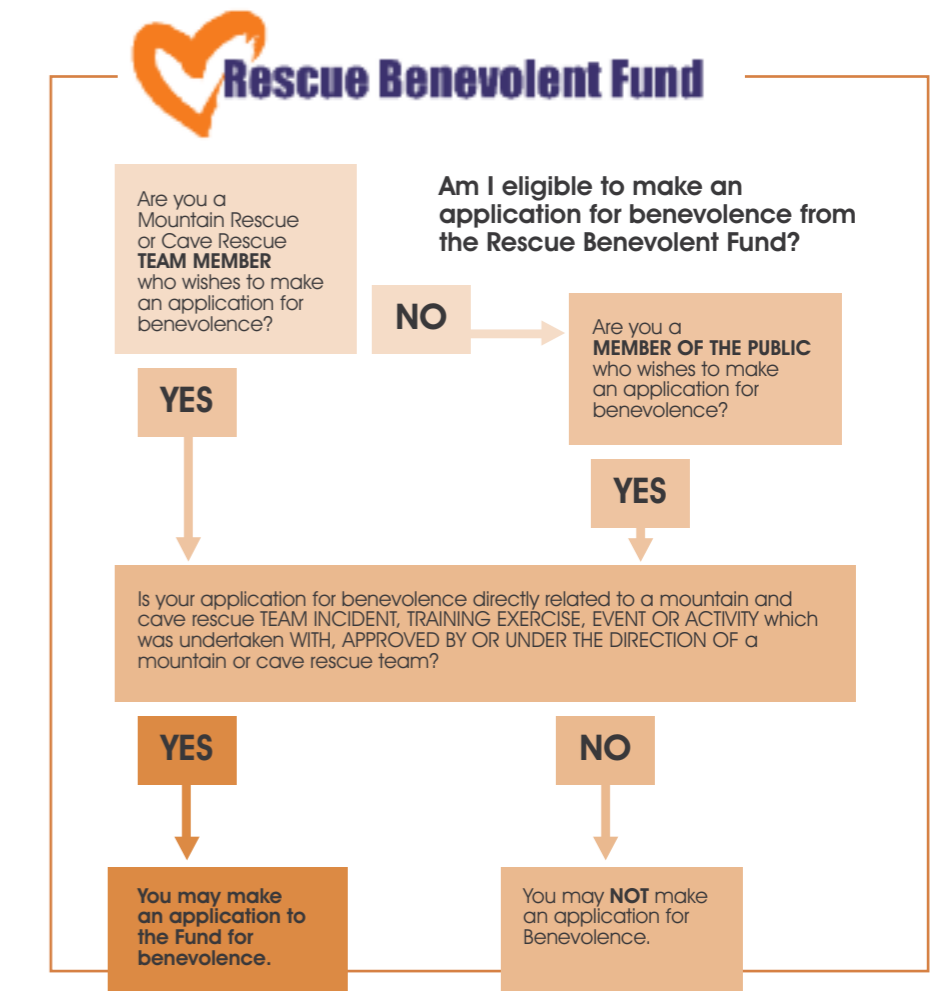
Again, no. The fund is an entirely independent charity, neither governed by nor answerable to MREW and BCRC and therefore not obliged to share any information. All claims are treated with the utmost confidentiality, according to our confidentiality policy and the fund trustees and regional reps are required to sign a confidentiality agreement.

Where an incident is high profile and details of any related claim already in the public domain, the trustees will apply the same rules of confidentiality as far as possible. From time to time, we may ask a claimant to share their story for the benefit of future claimants and/or to help fundraising initiatives but would first secure their written agreement. Indeed, stories of previous beneficiaries (of both physical and psychological therapy) have already appeared in this very magazine, with their permission.

So it's worth repeating again: if you or your family need help due to physical or emotional injury or financial hardship resulting from a mountain or cave rescue-related activity, then we are here for you.

HOW DO I DONATE?

And finally, if you would like to donate to the fund, or raise money on our behalf, again just drop me an email at [secretary@rescuebenevolent.fund](mailto:secretary@rescuebenevolent.fund) and I will supply the bank details. A huge thank you to all who have donated already, either through single donation or regular standing order. Every penny is appreciated and put to good use. We couldn't continue without you, that's for sure, but we hope that our being here can help you continue too. ☺





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PR consultant and media trainer, **Sally Seed**, looks at an aspect of publicity and PR and suggests ideas to build on for the future. This time: **Grabbing opportunities to reach beyond the usual suspects.**

One thing I've learnt about media opportunities for mountain rescue is how easy it is to spend a lot of time 'preaching to the choir'. Outdoors magazines are keen to quote MR sources on everything from kit to safety advice and there is a plethora of TV production companies putting together proposals for variations on the *Emergency 999* format.

It's absolutely right that MR makes the most of these opportunities, but it's highly likely that most of those reading or watching will already know that MR teams are volunteers and that MR is made up of lots of small charities, dependent on donations. There's a big challenge in reaching a wider audience and readership but we need to find routes to those who have no clue about what MR is and how it works, never mind the issues of safety on high ground.

#### 1. Using social media

There is one medium that most teams have at their disposal and building up a social media following is vital these days. There's no doubt that there's been a lot of MR success in attracting Followers and Likes.

The next step is to use those audiences to reach their friends and families and to ensure that those broader audiences have basic facts about your team. It's all very well them seeing your posts about incidents and fundraising but you might need to spell out a few key messages every so often and recruit your Followers into sharing more broadly.

Several teams have put a lot of effort into video content that does this well so it's worth having a browse of the MREW Facebook channel and see what other teams are doing. And the Lego® Little Mountain Rescue Team

(courtesy of Derby MRT) keeps generating good coverage too!

#### 2. Radio and local TV

Never forget the power of radio and your local TV news as well as the production companies that create the local magazine-style programmes and documentaries. Make sure someone on the team has the right contacts and keeps in touch with them, maybe sending them your annual report, tagging them occasionally in relevant social media posts and inviting them along if you have specific events at base. That regular contact may not have immediate returns but gets your name into the contact book and could result in useful requests in future.

#### 3. National news media

Getting from a piece in your local paper to coverage on a national news website or weekend paper is a challenge and it needs careful consideration too.

Thinking about images that tell your story is one priority and acting fast when there's a topical angle is also important. Peak District teams worked well with Helen Pidd, the Northern Editor of *The Guardian*, last year to get coverage of the 'Instagram sightseers' needing rescuing from wartime aircraft crash sites on the Dark Peak and there are several strong examples of MR teams being featured in flood rescue stories that hit the national headlines.

It also pays to make the most of the media that the media themselves read — and, for MR in the UK, that's *Grough*. Any journalist interested in outdoors stories is going to watch *Grough.co.uk* and pick up on MR stories that way. If any teams out there aren't already

sending their press releases to Bob Smith and the team via [editor@grough.co.uk](mailto:editor@grough.co.uk) and [editorial@grough.co.uk](mailto:editorial@grough.co.uk) then that's one action from reading this column — get them on to your media lists as soon as you can.

#### 4. Dramatic TV opportunities

A couple of teams have been involved in dramatic opportunities on national TV, from Calder Valley MRT and search dogs on *Emmerdale* a few years ago to the latest series of *Vera* that features North of Tyne MRT. Add to that the BBC1 ident featuring Central Beacons (back in regular use until the end of the year) and MR teams have used unusual opportunities to reach a different TV audience.

Helena Sansum is secretary at North of Tyne and the new series is her second *Vera* appearance — she was a body in season 7!

'When we were asked to take part in a day's filming, I thought it would be a good publicity opportunity,' says Helena. 'We had to get a minimum number of team members along, provide vehicle registration numbers and other details in advance and we were told that logos might not be visible on screen. We tried to make the most of it, getting photographs of team members and search dogs with cast and crew while making sure we kept close to the brief and following instructions.'

'I was also very conscious that, as soon as the programme was broadcast, our colleagues in MR would scrutinise how we looked and what we did so we had to get it right. We filmed back in the spring and don't yet have a broadcast date for the programme so we're having to wait a bit longer to make anything of the story on social media and in local press, but we're ready as soon as the production company gives us the go ahead.'

#### 5. DIY media

Finally, as a lot of teams in tourist areas look back on a busy summer, what could you have done differently? Where could you promote the team and your safety messages to reach those visitors if they return in 2022?

One idea is an A5 flyer or poster to be displayed on campsite noticeboards or in B&B hallways, perhaps with the #BeAdventureSmart questions, Five Facts about the local MR team and a strong image. It doesn't need to be glossy and expensive as long as it looks professional and clear and a member can distribute it while out and about — even if it is only to the campsites and B&Bs that have your collection boxes, it is at least building a bit more awareness and knowledge with people who may be completely new to this weird MR thing! 🐾

Email Sally with your thoughts and ideas on this column and for the future via PR@mountain.rescue.org.uk or social media.



Above: Calder Valley team members, MRSDE handlers Wayne (with Dodge), and Ellie (with Pepper), outside The Woolpack pub, in ITV's *Emmerdale*, with characters Zak Dingle (Steve Halliwell), David Metcalfe (Matthew Wolfenden), Justin Gallagher (Andrew Langtree), Declan Macey (Jason Merrels) and Hazel Rhodes (Pauline Quirke). First published in MR Magazine January 2011.



# NEWS ROUND

## JULY > SEPTEMBER

### SEPTEMBER: PATERDALE MRT WELCOMES THEIR NEW DEFENDER

The latest addition to the fleet was delivered by Colin Todd of Lakeland Land Rover. The vehicle is the first of the new Defender 110 model to be adapted for mountain rescue and the purchase and conversion was made possible by the success of an Appeal that started in July 2020 to raise £85,000.

'We're now back to full strength with four team vehicles,' says Mike Childs, the team's vehicle officer, 'and we're looking forward to seeing the New Defender deal with the terrain around Ullswater and the demands of rescue. Colin and his team have worked with us for many years and understand our requirements down to the fine details so the new Mobile 4 should be a great addition to our small fleet.'

'This vehicle is a brilliant example of the support the public has given Patterdale MRT in the past 18 months,' adds team leader Mike Rippon. 'We know things have been tough for many people and the generosity that has enabled us to buy and adapt this vehicle is amazing. I'd like to say a huge thank you to everyone who donated or raised funds for us – it is really appreciated. The summer months have been busy for the team and it's good to be back to four vehicles in time for what is looking like a busy autumn too.'

**Top right:** Left to right: Mike Childs, Colin Todd and Mike Rippon. **Right:** Team members outside their Glenridding base with their new Defender © Patterdale MRT.



### Raising funds for rescue



### SEPTEMBER: GEMMA GOES FAR AND AWAY, ABOVE AND BEYOND FOR MOUNTAIN RESCUE

Daredevil Gemma Siddle has quite literally gone above and beyond by performing a 'wing walk' to raise money for Teesdale & Weardale SRT.

Gemma, from Egglestone in Teesdale, decided to do a charity event for the team after seeing at first hand the work the team does as her husband, James recently became a full team member. She saw how much it costs to run the team and the fact that fundraising was severely affected by the pandemic and this, combined with the fact that she'd recently lost weight and the promise that her workplace, Eldon Financial Planning, would match-fund anything she raised, made it seem like the perfect opportunity.

In the past, Gemma has done an abseil, a bungee jump and a skydive, so the only way was up! She, and her friend Jenny, who recently turned 60, both did their wing walk at Brighton airfield, on a 1940 Boeing Stearman biplane. Together they have so far raised over £4,000 and, with Gemma's employer match-funding up to £5,000 so she is hoping the final total could be an incredible £8,000!

There's still plenty of time to support their efforts with a donation via [justgiving.com/fundraising/Gemmasiddle](http://justgiving.com/fundraising/Gemmasiddle) or through the team's Facebook page at [facebook.com/twsmt](https://www.facebook.com/twsmt).

**Above:** Daredevil Gemma in flight. **Inset:** Gemma and her pal Jenny. Images supplied by TWSRT.

### LIVING HERITAGE PROJECT UPDATE

For those of you with an interest in the archiving of our history, **Mike Margeson** reports that the project group is still awaiting new guidance requirements from the Heritage Lottery before submission of our bid.



This, however, has not stopped progress and we can report that we have accessed a training course for the regional champions, provided by the Oral History Society. This training will take

place in October and will hopefully provide them with skills and confidence to start the process of recording and interviewing within the regions.

Meanwhile, there have also been some changes at the Mountain Heritage Trust (MHT), with Chris Martin taking over from Terry Tasker as chairman. Terry will remain a trustee and is fully committed to the Heritage project and the link between MREW and MHT.



### September: The best laid plans: thoughts on a Peer Review assessment

**Andy Brelsford** chairman of West Cornwall SRT, talks us through his and the team's lessons learned from their recent peer review process. As the newest team to join the MREW fold, some might say this was quite brave of them but, he says, the experience was hugely rewarding, and 'emphatically' very much worth it.

As I write this, we have literally just waved goodbye to Tim, Jon and Vicky, our Peer Review team, following a busy weekend of activities. I wanted to reflect on my thoughts whilst they are still fresh in my mind as there is (unusually, some might say!) quite a lot going on in there at the moment.

As one of the newest teams in MREW, West Cornwall took the decision to put ourselves forward for the Peer Review process to help us get an honest assessment of where we stand as a team and to identify the things we should be focused on to support our development over the coming years. I have assembled my thoughts into the three pieces of advice I would give to any other team considering undertaking a Peer Review.

**Don't be afraid of it – it's not a painful process!** It is, however, hard work to plan and prepare the logistics. We struggled with finding suitable accommodation for our reviewers but luckily, an appeal on Facebook came up trumps. You will need to 'host' the reviewers over a weekend so think about where you will put them up and feed them. But this can also present an opportunity to involve the wider team. We, for example, planned a team BBQ and social event to coincide with their visit so they had a chance to meet team members in an informal setting. However, in the end, things didn't quite play out like that, which brings me to my next point...

#### Plan carefully – but expect the unexpected!

We had a plan for the weekend, from arrival on Friday evening to departure on Sunday afternoon. But midway through the session on Saturday, the pagers went off and a job came in. Tim and his colleagues, being MR members themselves, understand that this is always a possibility and so we paused the review, they kitted up and came out with us. Helpfully, Tim is also a dog handler and had his dog, Cassie, with him, Jon is a doctor and Vicky is an experienced team member from nearby DSRT Plymouth – so all three were a valuable addition to our own members who were able to jump straight in the team vehicles (as we were already at base) and hit the road.

In the end, the search ran on for two days and we had to rethink our approach. The

Saturday night BBQ had to be postponed as members were still out searching and we had planned a SAREX for the Sunday so the review team could observe us in action but having been on a live call-out with us, we agreed it wasn't really necessary to run the exercise as well. So instead, on Sunday, half the team returned to our base to complete the remaining sections of the review whilst half continued the search, joined by some of our colleagues from East Cornwall. We tagged the postponed BBQ on to the end of the Sunday afternoon instead.

**Involve as many of your team, trustees and stakeholders as you can.** There's no right or wrong way of preparing for Peer Review but we set up working groups for each of the seven outcome goals. We worked through the questions with the team at our weekly training sessions in the run-up. When you sit down with the review team, it takes the form of a guided discussion and we found this to be a lot less intimidating than we had perhaps imagined. It is not like being cross-examined in court and the reviewers are not trying to catch you out. The more people are present for those discussions, and the more diverse their backgrounds and roles, the more revealing those discussions will be.

No matter how carefully you plan your dates, there will inevitably be members who cannot make it and in our case, several of our officers were unavailable due to other commitments. But although that worried me at first, in the event I found it actually helped to identify where we were over-reliant on a single person vs where things are so well embedded within our team that anyone/everyone could give an appropriate answer.

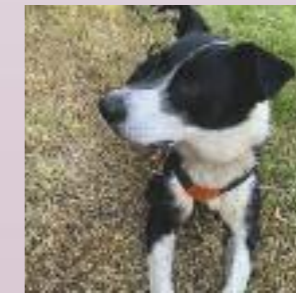
So as we await our feedback report down here in deepest, darkest Cornwall, we would definitely encourage any team thinking about requesting a Peer Review Assessment to go for it! And we would like to thank Tim, Helen (and Search Dog Cassie), Jon and Vicky for making it such an enjoyable process. ☺

Although the formal feedback will not be with us for several weeks, we have pages of flip-chart with ideas, notes, suggestions and reminders. Peer Review will not tell you whether you are doing something right or wrong! But it will help you to identify for yourselves the areas in which you are stronger and the areas where you might want to review and strengthen what you do.

The big question I suppose is, 'Was it worth it?' And the answer is emphatically 'Yes!'

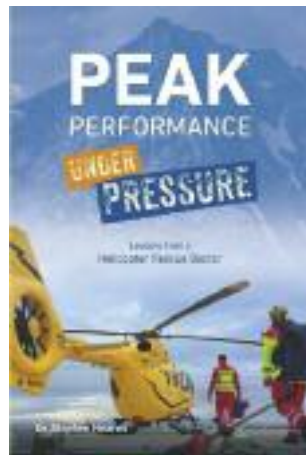
It has given us a lot of food for thought and identified many areas in which we could do better. But it has also given us confidence that much of what we already do is good practice. It's not often that you get the chance to talk about your team for seven solid hours – at least not to an audience that stays awake beyond the first 30 minutes when I do it – but the act of talking through in depth what you do, how you do it and why, with a small group of experienced team members, is undoubtedly a great way of having what our deputy team leader described as 'an out-of-body' experience. We are all so closely involved in our teams that it can be difficult to look objectively at what we do. Peer review is, to my mind, all about taking a step back and critically but constructively challenging ourselves to ask some searching questions (if you'll forgive the pun).

So as we await our feedback report down here in deepest, darkest Cornwall, we would definitely encourage any team thinking about requesting a Peer Review Assessment to go for it! And we would like to thank Tim, Helen (and Search Dog Cassie), Jon and Vicky for making it such an enjoyable process. ☺



**Top:** Team vehicles. **Above:** Search Dog Cassie (a vital member of the peer review crew); Team member surveys the rolling Cornish landscape. Images © West Cornwall SRT.





## MREW HUMAN FACTORS + PERFORMANCE UNDER PRESSURE ONLINE COURSE

**PLEASE NOTE:** This course is available to ALL TEAM MEMBERS, not just those with leadership or officer roles.

We've secured a number of places on the Core Cognition online course, Performance Under Pressure with Dr Stephen Hearn. All participants will receive a copy of Dr Hearn's book, 'Peak Performance Under Pressure' and an option to attend a live-streamed session that will include the opportunity for Q & A (these will be booked on a first-come, first-served basis).

The course aims to develop participants' awareness of, and skills to deal with, some of the human factors that affect mountain rescue operations and to develop participants' ability to perform at their best under the pressures experienced in mountain rescue training and rescues. Topics covered will include the beneficial and harmful effects of pressure on personal and team performance, and how cognitive overload can affect performance; the nature of the pressures in mountain rescue and how to own it; making decisions in high pressure situations and regaining composure and situational control; training for rescue — drilling, deliberate practice, mental rehearsal, simulation, coaching, stress inoculation and cognitive aids in both mountain rescue and casualty care such as checklists, action cards and guidelines; the challenges and techniques of communication under pressure; how to deal with fatigue and the environment on performance; debriefing, significant event management; reflective practice and operational leadership during rescues.

The cost of this course to teams is £15 per attendee.

If you have further questions, email [humanfactors@mountain.rescue.org.uk](mailto:humanfactors@mountain.rescue.org.uk). To book onto the course, please complete the Google form for each attendee at <https://forms.gle/M2x9CbNVLsdTabbu6> using the email address you are registered with on Moodle. If you aren't yet registered with Moodle, go to <http://tiny.cc/Moodle4MR> and use a team email address to register, but NOT a role-specific one! Any queries regarding registration, please email [moodlesupport@mountain.rescue.org.uk](mailto:moodlesupport@mountain.rescue.org.uk).

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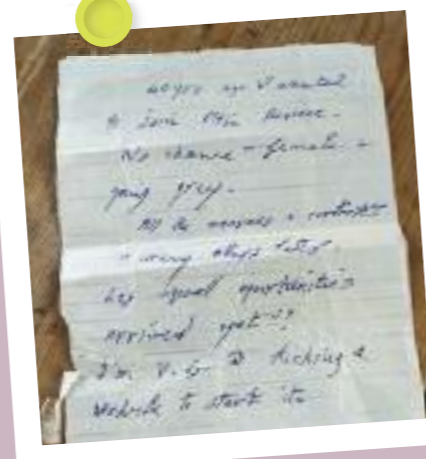


## AUGUST: MISSING STICK PROMPTS MOOR SEARCH

An unusual request went out from the Calder Valley team when a much-valued stick went missing during search dog training one Thursday evening.

The stick had great sentimental value as it had been hand-crafted by the late, much-loved Nev Sharp for the team's chairman so it was of huge sentimental value. We are happy to report that the missing stick was located a couple of days later, with some relief, by a team member and has by now been reunited with Dave! Thank you to all who shared the stick on social media and even went out looking for it!

Top: The missing stick; Dave Warden, Calder Valley SRT, with Search Dog Wynn, courtesy of MRSDE Facebook page.



## SEPTEMBER: MOFFAT TEAM LAUNCHES APPEAL OVER MYSTERY LETTER

The letter was placed in the collection box at Ardwall car park, the start of the walk for #Criffel. Moffat MRT would very much like to find the lady who wrote the letter and get 'one of the ladies in the team to give her a tour of their base'.

The letter reads (sic): '40 yrs ago I wanted to join mtn rescue. No chance - female and going grey. All the Munros & Corbetts & many others later, has equal opportunities arrived yet!? I'm V. G @ kicking a vehicle to start it'.

The team appealed through their Facebook page for people to like, share, tag and do whatever they could to find the lady and arrange for her to contact the team. Let's hope they found her.



Above: Eliza with her dad and Ollie Benson with Bryn © Cleveland MRT.



## AUGUST: FIVE-YEAR-OLD RAISES FUNDS FOR TEAM

One of Cleveland team's youngest fans raised £52 for the team by selling homemade lemonade from a stall in her village.

Five-year-old Eliza loves going up onto the hills with her dad and often sees the team's vehicles going past her house whenever somebody needs help. Afterwards team members Ollie Henson and Mike Lincoln (and Ollie's dog Bryn) popped by Eliza's home to say 'Thank you' and dropped off a goodie bag for her containing some team-branded items: a water bottle, notepad, window sticker and a T-shirt as well as a team buff for her dad, Andy.

In their first two years of publishing a calendar Cleveland MRT has raised over £3,500, largely thanks to the help of some very generous local sponsors who have covered the costs of printing and publication.

The calendar is a great vehicle for information about the team's work and general hill safety advice, providing guidance on the kit to carry, checking weather forecasts, charging mobile phones, using OS Locate and so on. In the first year, the photographs were supplied by members of the public via a competition but for 2021 and 2022 they have been supplied by team members.

Sponsors pay £60 to have the wording of their choice published on 'their month' with their logo and contact details and have included a farmer, sheep-shearer, plumber, first aid trainer and dog groomer plus many businesses — all local to the team's area. Sponsors receive a free calendar and their names are listed on the team's website and social media, and their individual details are republished at the start of each relevant month, together with that month's photograph.

The 2022 version is now on sale via local shops and at events for £7.50 and via the team's website for £9 (including postage).



## SEPTEMBER: ABERDYFI RECEIVES SIGNIFICANT DONATION TOWARDS NEW RADIO COMMS



Walking and activity company HF Holidays donated £16,582 from their Pathways Fund to help replace the team's existing analogue radio system. As a cooperative society with over 900 volunteer walk leaders itself, HF Holidays recognises the commitment and dedication of volunteer-led services and know the funds will be greatly welcomed.

'The replacement of radio systems has been progressing around England and Wales over the last couple of years and, as a region, we have been following developments keenly, hoping to learn from the experiences of other areas,' says Graham O'Hanlon. 'In North Wales, the system was trialled by Llanberis MRT, one of the busiest in the country, and with a positive response from them, we decided it was time to get the ball rolling.'

'While analogue systems work over a limited range and on line-of-sight, the digital system and the associated repeater network will allow communications to move via the internet over greater distances and across access areas that are historically blackspots with no coverage. This donation will enable us to build such a network.'

'We have a long-standing association with our local HF Hotel, Dolserau Hall, but this donation was still completely unexpected. It has been a fantastic boost to our project at a time when fundraising opportunities have been severely restricted and money is tight all around. We know there are lots of deserving causes out there and are grateful that HF chose to support us.'

Above: Ian Pilcher, along with other team volunteers, say a big socially-distanced thank you to HF Hotel Dolserau Hall manager Wayne Leslie and his team © Aberdyfi MRT.

# NEWS ROUND

JULY > SEPTEMBER

## Raising funds for rescue



Eldon Hole, one of the 'Seven Wonders of the Peak' is an impressive sixty-metre deep natural pothole in the hillside above Peak Forest in Derbyshire. For centuries it has been a place of wonder, myth and a good many dead sheep.

In the mid-1500s, the Earl of Leicester, one time favourite of Queen Elizabeth I, heard about Eldon whilst he was taking the waters in the nearby spa town of Buxton. He thought it would be interesting to find out what lay at the bottom — if, indeed, there was a bottom.

He prevailed upon a local man, George Bradley, to allow himself to be lowered down in a basket. George's feelings on the subject aren't recorded but he had little choice, of course, as earls could prevail quite strongly in those days. On the appointed day the earl's team split into two groups. One to lower George down and the other to drop rocks around him during his descent to frighten off the devils suspected to lurk there.

It is recorded that they lowered him two hundred 'ells', an ell being an ancient measurement of Viking origin equating in George's case to a descent of about ninety metres. They then hauled him back up. When he reached the surface he was said to have 'a faltering tongue and wild staring look' and was diagnosed as suffering from a 'distempered brain'. Unfortunately, he died a couple of days later without saying what he had seen, which must have vexed the earl no end after having gone to so much trouble.

George's misadventure has long been considered the earliest recorded Derbyshire caving accident and cave rescue.

Since the early twentieth century Eldon has attracted the attention of several generations of cavers and the Derbyshire Cave Rescue Organisation has been called there on numerous occasions since the team was formed in 1952. Sometimes it has been to recover people who had discovered that sliding down a rope on the way in was merely the easy bit, sometimes it was to recover the body of someone who had fallen all the way down, sometimes to rescue an adventurous dog from a ledge and once to dig out a party who had become trapped beyond a rock fall in the bottom.

About five years ago, a group of cavers started to sink a shaft in the boulder floor of a chamber at the bottom hoping to break into further passages. They might have been encouraged to do so by the legend of a goose that a local woman lost

down the hole only to have it emerge several days later from Peak Cavern (two and a half miles away) 'with its feathers singed from passing through the fires of Hell'. I suspect, however, that their reasoning was rather more scientifically based.

As they dug their shaft they discovered many animal bones. Then at over fifteen metres down they found some bones that turned out to be human. As a result, digging the shaft had to stop and the bones were sent to be examined. They turned out to be the partial remains of three individuals from the late Iron Age who must have fallen or been pushed into the hole in about 200 BC.

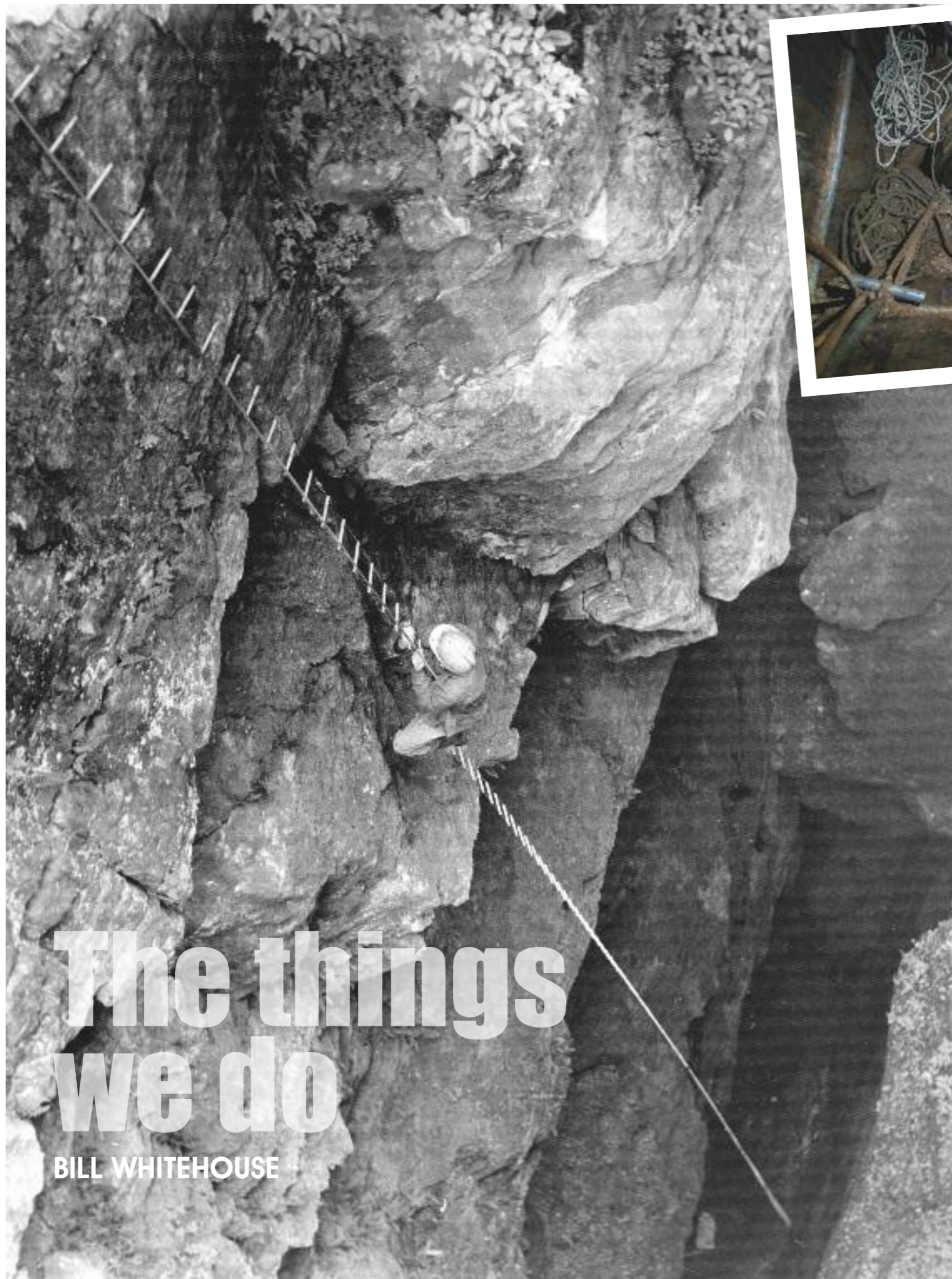
Discussions then continued between cavers and archaeologists for some years. The cavers naturally wanted to continue digging and the archaeologists were naturally concerned about the fate of any remains still in situ. Eventually it was agreed that the site needed inspecting by archaeologists before any decision could be made on what should happen.

So that's where DCRO came in. Could we lower down a couple of archaeological professors and then retrieve them safely without a repeat of the George Bradley incident? We said we could and we did. Whilst down there the archaeologists found and retrieved more Iron Age bones so we hauled them out as well.



So, dear Guinness Book of Records — at 2,200 years or so we claim the longest period between accident and 'rescue'. Unless, of course, you know different! ☘

**Opposite:** Eldon Hole, 1960s' descent © Jerry Wooldridge.  
**Inset & left:** This year's descent © Phil Wolstenholme.  
**Above & centre:** Team members at work; Eldon Hole during a Derby CRO exercise © Bill Whitehouse.



# The things we do

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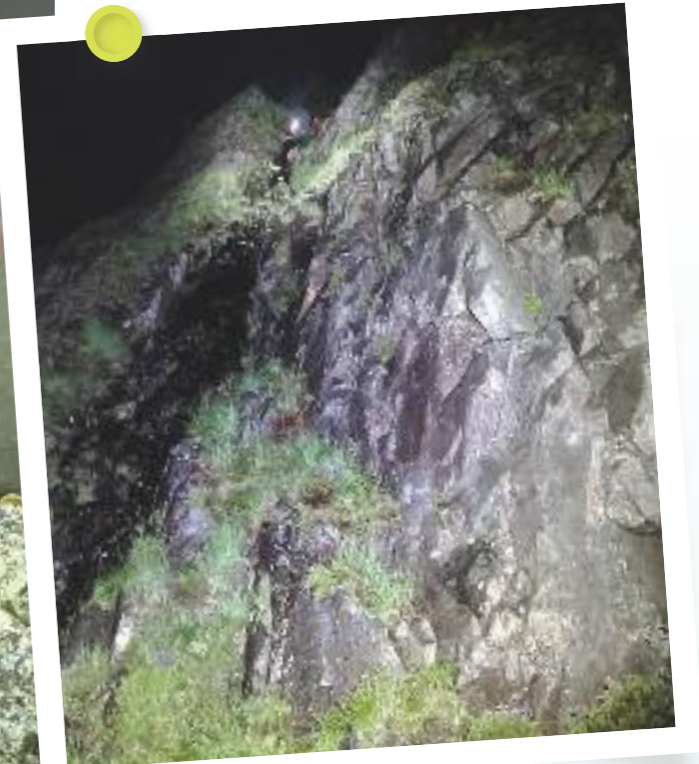
Call-outs  
in the time of  
COVID



This image: Rescuers rigged up a rope rescue system to bring the cragfast couple to safety © RAF MRS.  
Right: The walkers had strayed into steep, dangerous terrain © OVMRO.

# NEWS ROUND

JULY > SEPTEMBER



## AUGUST: COUPLE RESCUED FROM CLIFFS IN COMPLEX EIGHT-HOUR OPERATION

Members of OVMRO and RAF Valley MRT worked late into the night to recover the pair, in their early-20s, from their precarious position at the rear of Cwm Idwal in the Ogwen Valley. The Coastguard helicopter was also requested but unable to assist. Chris Lloyd, from OVMRO, said the pair had a very lucky escape. The team was alerted by police shortly before 7.00pm, after a man walking on the path at the rear of the cwm heard shouts for help high up on the cliffs of the headwall.

'He had shouted back so as to confirm that the shouts were human and not — as is frequently reported — bleats from goats. We contacted the informant, but he was in an area of very poor telephone reception. By 7.30pm, an advance party of five team members was deployed to locate the pair, reported as an 'adult and child'. By 8.00pm, the advanced party had met with the informant and realised the complexity of the situation.

'Two Ogwen team members climbed up and were able to secure the casualties, but the location was unsuitable for conducting a rescue due to poor rock conditions. By shortly after midnight, the main rescue party had scrambled to the top of the cliff, established a secure rope system and lowered two rescuers down. The cragfast pair were fitted with harnesses and attached to the rescuers and rope systems, then lowered to safe ground below by about 1 o'clock in the morning.

'A couple of team members walked the casualties to their car in the Ogwen Valley, while other rescuers recovered rescue kit. Ogwen team members arrived back at base around 3.00am, those from RAF MRT probably after 4.00am. Meanwhile, the two young people had pause to perhaps consider the purchase of more suitable kit for walking on the mountains and the skills required. This was a good example of two rescue teams working together on a difficult technical rescue at night. Ogwen members thank the RAF Valley MRT for their valuable and expert support.'

## AUGUST: SEARCH DOG CLEARS CAR PARK IN JUST 30 SECONDS...

Having driven 7.5 hours down to Devon from Manchester, a call-out for dogs came in from Devon & Cornwall Police. Search Dog Orion and his handler, Gary Smith, quickly pitched the tent and wolfed down some fish and chips whilst awaiting details.

He then had a one-hour drive back in the direction they'd come from. Thankfully, just as the pair turned onto the driveway of the caravan site the young person was missing from, they saw four firemen walking her back safe and sound. Search Dog Orion then kindly dropped an 'I've been in the car all day' bombshell and cleared 20 cops out of the car park in 30 seconds!! Dogs eh?

Left: Butter wouldn't melt... Search Dog Orion, described on the MRSDE website by Gary as 'Bonkers and cheeky (no idea where he gets that from) but damn good fun (certainly not my grumpy influence)' courtesy of MRSDE Facebook page.







wellbeing

Images via Pixabay.

# HOW HOME GROWING COULD BENEFIT YOUR MENTAL WELLBEING

## THE FIRE FIGHTERS CHARITY

Growing your own food can have huge benefits for your mental wellbeing. Here, the Charity's Wellness and Behaviour Change Coach, **Roger Saxby**, explains how it's helped him and how it could help you too.

We all know gardening can have huge health benefits — both physical and mental — and growing your own organic fruit and veg is no different.

Seeking inspiration to write this article, I instinctively found myself wandering outside to my back garden and was instantly snapped out of my ruminating thoughts when I saw the tomatoes growing up our garden fence. I was shocked at how fast they'd ripened in the sun and it immediately led me on a sensory, nature-based, mindful experience.

I began by looking at them in more detail, before touching them and engaging my

sense of smell. That inevitably led to me tasting them too and after a few minutes I'd picked a colander full.

The whole practice got me imagining how I would make the most of them and the possibilities seemed endless... I could make a salad that night or a soup or even a pasta sauce at the very least the following day. Within a short period of time, I had come out of my overactive mind and come into a sensory body-felt experience of being outside and I now felt more relaxed and motivated.

I merely share this story to help highlight the wellbeing experience replicated by

countless individuals, families and communities across the world who are growing fruit and vegetables for themselves or their wider community.

It may be anything from growing a single tomato or salad plant on a window ledge or the balcony of a flat, to the more spacious environments of gardens and allotments that require greater effort, but bring the possibilities of growing a range of diverse edible plants in an outdoor, natural setting.

Put simply, you step outside and something changes. Then if we add into the mix the sense of achievement and reward, having harvested our own food, it can leave

us feeling relaxed, restored and revitalised. It is well recognised, as described by the biophilia hypothesis, that as human beings we have an innate instinct to connect emotionally with nature.

And there is now a growing body of evidence-based research showing exposure to a range of natural environments can have mental health and wellbeing benefits, including reductions in stress, fatigue, anxiety and depression.

We know that mental illness can lead to isolation and social withdrawal, yet conversely, time in nature could improve social functioning and social inclusion. This can be achieved through growing our own food, whether that be with our family or within a community allotment where we can share our experiences and ideas.

Meanwhile, by eating a diverse range of plant-based foods, we are contributing to a healthy gut microbiome and therefore improving our immunity. Not to mention the potential for reducing our monthly food costs if we have a supply of our own veg through the growing season!

Growing our own vegetables can be applied to the 'Five Ways to Wellbeing', identified by The New Economics Foundation as being daily routines to enhance our wellbeing:

**1 Connect:** Gardening and growing our own vegetables offers a real opportunity to create social interaction and connection with other people and create relationships, whether that be with our family or other growers. This in turn could boost our mental health. We can develop a sense of belonging and self-worth and it gives us an opportunity to share positive experiences, whilst providing emotional support to others.

**2 Be active:** The health benefits of engaging in physical activity are well documented for mental wellbeing, leading to improvements in self-esteem, mood and quality of life, as well as a reduction in anxiety and depression. Depending on the size of your growing space, it can provide a real workout that may save on the cost of a gym membership!

**3 Take notice:** Being aware of the world around you, savouring the moment and noticing nature by connecting through our senses can give the opportunity to be present and practise mindfulness. Our senses are heightened outside as we take in the sights, smells, sounds and contact of the natural world.

**4 Keep learning:** Growing our own vegetables is invariably a learning experience and provides the opportunity to learn new skills and knowledge, both about what we are growing and cooking and about the natural world in general, as each year brings different challenges and rewards.

**5 Give:** Take part in community life, do something for a friend, do something for nature. Research suggests that acts of kindness by volunteering, joining a community garden or helping a friend or stranger can help improve mental wellbeing.

It can create positive feelings and a sense of reward, purpose and self-worth through social cooperation.

The evidence is overwhelmingly in support of spending time outside to benefit overall mental health and these benefits can be replicated when we grow our own vegetables.

My own experience of growing our own vegetables as a family has not always been easy, as weather and availability of time has invariably influenced the outcome of the produce as well as the presence of other plants that might be referred to as weeds! But what I do know is that during the first six months of lockdown in 2020, having access to a growing space was fundamental to our family's mental wellbeing and our daughter's education, for which I have much gratitude.

So, why not give it a go? My advice would be to start small and simple and choose plants that you like to eat, plus ones that grow quickly and easily like lettuces or radishes. Good luck! 🍅



TO FIND OUT MORE ABOUT THE CHARITY, GO TO [FIREFIGHTERSCHARITY.ORG.UK](https://firefighterscharity.org.uk)

Both in-house and online, physical and psychological, rehabilitation programmes with **The Fire Fighters Charity** are accessible to mountain and cave rescue team members and their families, via the **Rescue Benevolent Fund**. Email Judy Whiteside: [secretary@rescuebenevolent.fund](mailto:secretary@rescuebenevolent.fund) for details and a confidential chat.





# NEWS ROUND

## JULY > SEPTEMBER

### JULY: BRECON TEAM RESCUE TWO BOYS STUCK ABOVE WATERFALL

Team members were called to a waterfall in the New Radnor area, after the adventurous youngsters became stuck on very steep loose ground next to the waterfall. Once they'd reached the top, they quickly realised they couldn't get back down and their parents rightly called for help.

First on scene was a member of Dyfed-Powys Police, who had gone up and reassured the boys. He was followed by a member of the Welsh Ambulance Services NHS Trust (who is also a Brecon team member), who made the boys sit safely on a ledge until help had arrived. When team members arrived on scene, Mid & West Wales Fire and Rescue were already in attendance and had passed on vital information about the boys' whereabouts and the type of terrain involved. The boys were assisted down, safely secured in harnesses and helmets, and very pleased to be back with their parents.

A successful joint effort which could have ended a lot differently if they hadn't called for help!

Right: Rescue of two young boys from above a waterfall in the New Radnor area © Brecon MRT.



### SEPTEMBER: FIFTY-FOOT FALL AT AIRA FORCE

Patterdale team were called out by the North West Ambulance Service (NWAS) regarding a walker who had fallen about 50 foot in the water. The Great North Air Ambulance and land ambulance had been called out at the same time.

The female walker had been pulled off a steep cliff by her dog and landed in the shallow water below sustaining some serious injuries to her lower leg and a great deal of pain. The casualty was treated on scene by the medics and she was then transferred onto a stretcher and evacuated by the Patterdale team to the Helimed which had landed in a field some distance away for flight to the RVI in Newcastle. The team would like to thank the NWAS and GNAAS crews for some great teamwork which resulted in a quick and efficient rescue.

### AUGUST: HIGH SHERIFF VISITS CLEVELAND TEAM BASE AT GREAT AYTON

The High Sheriff of North Yorkshire, Venetia Wrigley DL, visited Cleveland MRT in August. Accompanied by her husband Nicholas and the team's president, Peter Scope DL, she was introduced to members at their Great Ayton base.

Chairman Gari Finch, team leader Peter Smith and team members Mike and Carolyn Gallagher demonstrated the vehicles and equipment whilst discussing the team's search and rescue role and their support members' work. Needless to say, the impact of Covid was never far from the conversation in terms of the difficulties caused by limiting fundraising opportunities and the operational implications, such as enhanced safety procedures and the wearing of PPE.

Before leaving, the High Sheriff kindly presented an award 'in recognition of great and valuable services to the community' to Mike Gallagher for his work on behalf of the team over many years. Mike is a deputy team leader, with responsibility for water and flood rescue planning and takes the lead role in the team's efforts to raise funds via cash awards and grants. As base manager he has led efforts to transform the buildings from their origins as a run-down former council depot to what is now a modern, well-equipped mountain rescue facility.

Top right: Left to right: Carolyn Gallagher, Peter Smith, the High Sheriff of Yorkshire Venetia Wrigley DL, Mike Gallagher and Gari Finch. Bottom right: Mike receives his award. Images © Cleveland MT



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**Raising funds for rescue**



# Gilby's big day out

**Martin Thornton**, team leader of the North Dartmoor SRT, introduces us to two truly remarkable people: Jane and Gilby. In the past, both were very keen walkers and Gilby a long-distance cyclist. When he was living in the Guildford area, Gilby would drive down to Cornwall to meet up with Jane who was then studying at Camborne School of Mines. They'd spend a lot of time walking, particularly on Bodmin Moor. Gilby was then working for BAE Systems, in the high-tech defence area as a software engineer.



They bought a camper van and used it as their base for walking. Once they parked it in Belstone (where they live now) and walked on Dartmoor but did not go to the top of Belstone Tor. They spent their time in the Brecon Beacons, the Peak District and visits to Scotland.

Jane gained her PhD and became an environmental scientist and Gilby was offered a plum job in America, still working for BAE, but based in Baltimore. Gilby told them he would only take on that role if he could take his fiancée with him. BAE agreed and Jane's proviso was that she would obtain a work permit so that she wasn't idle whilst they were living in the USA.

In America, they spent their free time walking in wild and remote places such as Guadeloupe, Yellowstone, Yosemite, the Grand Canyon and the Florida Everglades.



**Opposite, main image:** Gilby and his trusty TerrainHopper in front of the team vehicles. **Opposite, left:** Team members and supporters celebrate a successful 'walk' with Gilby and Jane. **Above left & centre:** Gilby 'in transit'. Images © Chris Godfrey. **Above right:** Gilby and Jane pre-diagnosis, image supplied by Gilby & Jane.

In 2003, they came back to the UK to get married. Two years later, they were walking in the Trossachs and Gilby felt his leg go. He was unable to lift it high enough to continue downhill. Jane sat him down and went to bring their car to the nearest point to Gilby that she could. She then helped him back down the hill to their vehicle.

There followed four years of tests before the doctors confirmed that Gilby had multiple sclerosis, which is a lifelong condition that affects the brain and nerves. It cannot be cured, but medicines and other treatments can help ease some of the symptoms. The condition is caused by the immune system mistakenly attacking the brain and nerves but it's not clear why this happens.

So, after diagnosis was confirmed in 2009, by 2011 Gilby was confined to a wheelchair. Determined not to let this affect their love of the great outdoors, Jane and Gilby started researching four-wheel-drive mobility vehicles which Gilby could drive and settled on a TerrainHopper off-road mobility scooter. They bought one in 2013 and were able to access a lot of the New Forest in Hampshire, where they were living at the time. They moved to Belstone in 2018, knowing they could use the TerrainHopper to access the north moor. From their garden, they have a superb view of Belstone Tor and looking at it, Gilby often reflected on the fact that he had never seen the view from the summit.

Frequently they made their way together to Nine Maidens at the foot of Belstone, but driving the TerrainHopper demands concentration from Gilby in picking the correct route ahead amongst the clutter. With the concentration and the multiple sclerosis Gilby found himself easily tired. It can be very tiring for Jane as well because as she walks she is constantly on the look-out for Gilby's welfare and concerned whether he may be becoming over-tired.

This was the situation when, in 2021, Jane was in conversation with the previous landlord (Kevin) of their local, The Tors Inn, Belstone. This excellent hostelry has often been the refuge of the North Dartmoor team after training in the vicinity, especially after wet, cold and foggy nights in the winter. Gilby told me that he had rather wistfully spoken to Jane about having the perfect view of Belstone Tor from their garden but had never seen the view from the top and now would never do so.

She spoke to Kevin knowing he knew some of the rescue team, particularly

Robbie Taylor, our chairman, to see if there was anything anyone could do to help. Kevin arranged to meet with Robbie for a drink at the pub to ask if he could help out. Robbie rang me as team leader. It only took us seconds to agree that this was something we wanted to be involved in and that we were the right people to help Gilby and Jane achieve their dream. Our fundraising officer Gavin Grimsey was very keen to get involved and was a key player in organising the event. We set a date of 4 September and Jane and Gilby decided to set up a JustGiving page to raise funds for the team. At the time of publication, they have raised over £6,200 for us.

I was dreading getting a call-out during the night of the 3rd/4th as it would have prevented us from getting Gilby to the top. As it turned out, there was no call that night and I had emailed the Tavistock, Ashburton and Exmoor SAR teams to cover for us if anything occurred on the Saturday, so many thanks to them for the cover.

slight haze over the tops but Gilby and Jane's home was clearly visible from the summit, which was one of the objectives of the day.

At 10.00am, Gilby drove his TerrainHopper up to The Tors Inn to meet many of the villagers who intended to meet him on top and also the rescue team drivers who were to transport him part of the way. Gilby and Jane made their own way to Nine Maidens followed by family, friends (many from their Exeter University days) and neighbours, the three Land Rovers and team members. Medical supervision was provided by a team doctor and a team clinical practitioner.

At Nine Maidens, Gilby was transferred from the TerrainHopper to the Matford Land Rover and the three vehicles set off for the south side of Higher Tor. Gilby said that the ride in the new Land Rover was extremely comfortable. Meanwhile, the villagers set off to the summit from the north of the tor and the team members on foot were already en route for Higher Tor. At Higher Tor, Gilby was



**Above:** Map capture of the area covered. **Right:** Gilby and Jane after the walk, his old walking boots affectionately slung round his neck.

Gavin had the idea of approaching Matford Land Rover in Exeter and asking for the loan of a brand-new Land Rover for the day. The plan involved a drive on tracks not normally open for vehicular traffic and the new Land Rover would provide a more comfortable ride than that of our team Defenders. Our press officer Clive Darke, contacted BBC Radio Devon, BBC Spotlight, The Moorlander magazine, the Okehampton Times and Devon Live.

The day dawned bright and clear with a

transferred to our stretcher in a sitting position for the trip to the summit. We used the vacmat to achieve the most comfort we could. Our team doctor asked him how comfortable it was and Gilby informed him that it was pretty good and he certainly would have endured much more than that to get to the top.

As the stretcher was approaching the summit, the landlord had brought up six bottles of Prosecco and set up a mini-bar on the top. The final approach to the spot height





### 39 GILBY'S BIG DAY OUT CONTINUED

was tricky as it is all clutter, but the team acted in concert with all that stretcher-hauling practice in the past showing to good effect. Gilby said that one of the most enjoyable aspects of the stretcher ride was joining in the usual team banter and having a good laugh at some of the jokes.

Jane said to me the day after that she had not realised how free she would feel. Normally their trips on the moor meant that she had to watch out for Gilby, but having consigned him to our care, she was free to walk up the Tor without any worries. Initially Gilby rested on the stretcher, enjoying a cuddle with Jane whilst we clustered round getting our photographs. We let off some red smoke which was a signal to those back in Belstone that Gilby had arrived on the summit. It had been part of our plan to then withdraw from them and allow them some time together on the summit. They had expected they would want some privacy on the summit but found that they were loving being surrounded by friends and family. Two team members raised Gilby into a standing position and it was a very emotional moment for everyone as Gilby stood on the summit of Belstone Tor, gazing at the view. Jane had carried up his old walking boots and now hung them around his neck. I have to say that I think there was a tear in everybody's eye at this point.

We then moved Gilby over to a rock where we sat him down and Jane sat next to him supporting him. It was only the day after, when I was interviewing them at their home, that I came to realise the significance to them, of this moment. When they walked together in the past, they would always find a rock to sit on together, with a view. Then they would always share a flask of cocoa and they burst out laughing in the interview, remembering when they tried to get a can of squeeze cream to add a topping to their cocoa and it always blew away in the wind! Everyone had a glass of Prosecco and drank a toast to Gilby and Jane.

They described it to me the day after as 'a cherry on the cake moment' and 'absolutely magic'. Jane said that she and Gilby had said, 'Oh God, let's just stay here all day!'

The team were able to point out to them all the various tors which could be seen from Belstone and other landmarks that Gilby knew from the map but was now seeing from the summit. The return trip was very

straightforward and Gilby and Jane were hosting a party in their back garden on their return. We were really blessed with the weather and it was a blazing hot sunny day, just perfect for them. The rescue team members headed to The Tors Inn for a well-deserved pint (which Gilby and Jane had paid for by putting some money behind the bar for our drinks) and we sat outside. One of team members, Tim Garrett was moving away and was consequently leaving the team and had picked this as his last day because as he said, 'I want to leave on a high'. A high it certainly was, I find it very difficult to describe the sheer level of emotion and joy we all experienced and I was very proud to be a member of a team that valued such an event.

I need to thank The Tors Inn, Matford Land Rover and Adrian Flux Insurance Services for their contributions to make the day possible and also my fellow team members who contributed so much to the success of the day.

When I interviewed them both at their lovely home in Belstone on Sunday 5th, it was clear that they were deeply in love then and still are today. One can see it in their eyes when they look at each other and the whole team wish them well in the future. We will keep in touch. ☺

*Gilby said that one of the most enjoyable aspects of the stretcher ride was joining in the usual team banter and having a good laugh at some of the jokes*

## JULY: DOUBLE AWARD FOR RICHARD THORNE MBE

Richard Thorne MBE receiving his MREW 50 year Certificate and Dartmoor Rescue Group Life Membership from Steve Rose, chairman of Dartmoor SRT Plymouth. **Clare Godfrey** reports.

Fifty years ago Richard joined the Plymouth Section of Dartmoor Rescue Group, now Dartmoor Search and Rescue Team Plymouth. His first training night with the section was a walk from Higher White Tor to Lower White Tor and back along the wall! In those early days we were lucky to have ten to twelve members in the team. Equipment was minimal, radios the size of concrete blocks and as much use as two tins and some string in many areas of the moor. Fleeces were called polar jackets and GoreTex was not even thought of.

Now we have a team of over fifty with casualty carers, swiftwater technicians, rope teams with all the equipment the team needs. Originally, there were only three sections – Plymouth, Tavistock and Okehampton – with Ashburton formed several years later. Our first control vehicle was the sort of vehicle that Montgomery would have used and was used by both Tavistock and Plymouth sections. A crew bus, that was bright yellow and given to us by Blue Circle, was used to transport our section about. Now we have two fully-equipped Land Rovers, a control vehicle and a Rapid Response Vehicle. The funding activities have enabled us to purchase a factory unit on a Plymouth industrial estate and fit it out as a garage, stores area and a mezzanine area for indoor training. Call-outs were almost all moorland rescues whereas now we have water, urban as well as moorland searches and all of the team are well trained in their chosen disciplines.

During this time Richard has been team treasurer twice, Dartmoor Rescue Group treasurer on three separate occasions and has only recently relinquished that post. He was made a Life Member of the team in 2004 and went on the search managers course at Bangor in 2010. He considers that being elected as team chairman and team leader from 2005-2008 was an honour, which along with his MBE in 2012 are the highest accolades that he was fortunate to receive, as they were nominated and bestowed by his team colleagues and friends. Richard also considers it to have been an honour and a privilege to be a member of the group and team and trusts they will continue 'long after he has been on God's final call-out' – but not just yet!



**Above:** Richard Thorne received his 50-Year Long Service Award from Steve Rose © DSRT Plymouth.



## SEPTEMBER: OVER 200 YEARS OF SERVICE RECOGNISED FOR PENRITH TEAM MEMBERS

The Lord Lieutenant of Cumbria, Claire Hensman visited Penrith in early September to present members of Penrith team with Long Service Awards. The cumulative total of years represented by the ten awards was over 200 years – with some team members also giving years of service with COMRU (Cumbria Ore Mines Rescue Unit) – and six of the ten were presented personally at the ceremony. Other members of the team and their families were there to celebrate the occasion too.

Team leader, Peter King, a team member since he was eighteen, was one of those receiving an award. 'Their Long Service is made up of hundreds of incidents, many, many hours of training and practice, meetings, gear packing and unpacking, and the all-important fundraising needed to support the team. It was good that the commitment was recognised in this way with certificates from Mountain Rescue England and Wales and it was excellent that Mrs Hensman, in her role as Lord Lieutenant, was able to visit our base and make these presentations.'

The ten members are: Peter King (25 years), Harry Harrison (25 years), Trevor Milton (23 years), former team leader, Rob Holden (22 years), Matt Nightingale (18 years) and Vic Seed (11 years), plus Paul Witheridge (31 years), Ian Soulsby (16 years), Alasdair Brock (20 years) and Gerry Rusbridge (11 years) who were not present on the day.

In addition, flowers were presented to the partners of those receiving Awards in recognition of the support that they and their families have given to allow them to provide this voluntary service. Making the presentations, Claire Hensman said, 'Mountain rescue is a massive commitment and 200 years of service is a lot of mileage! These volunteers make themselves available to help others, putting themselves at risk all the time and they have remarkable expertise. Thank you to all of them, and to their families and support networks too.'

'This level of commitment is fantastic in any organisation, and even more so as everyone is a volunteer,' says David Houldridge, team chairman. 'The rest of the team are hugely proud and grateful for the efforts by these people. The huge experience over hundreds of call-outs and months of training in all conditions ensures the team are able to rescue the public safely and efficiently time and time again. It is also important to recognise the support and sacrifices of their partners and families over these years, coping with the disruption and commitment needed to be a successful member of a mountain rescue team.'

**Top:** Team members assemble outside their base in Penrith with Claire Hensman. **Inset:** Peter King and family © Penrith MRT.

# NEWS ROUND

## JULY > SEPTEMBER

## SEPTEMBER: LAKES TEAM MEMBERS RECEIVE LONG-AWAITED QAVS AWARDS

The twelve Lake District teams were jointly nominated for the Queen's Award for Voluntary Service (QAVS) by Superintendent Matthew Kennerley back in 2019.

It was the following April when the teams were notified and permitted to use the coveted QAVS logo, however, due to the pandemic it was only in September that the opportunity arose for the Lord Lieutenant of Cumbria, Claire Hensman to formally present the signed certificate. Following the presentation, Richard Warren, chairman of LDSAMRA, handed the items to Chief Constable Michelle Skeer for permanent display at Carlton Hall Police Headquarters. Individual team members have each received a personal QAVS pin badge and each of the teams received a replica crystal and framed certificate for display within their own rescue base.



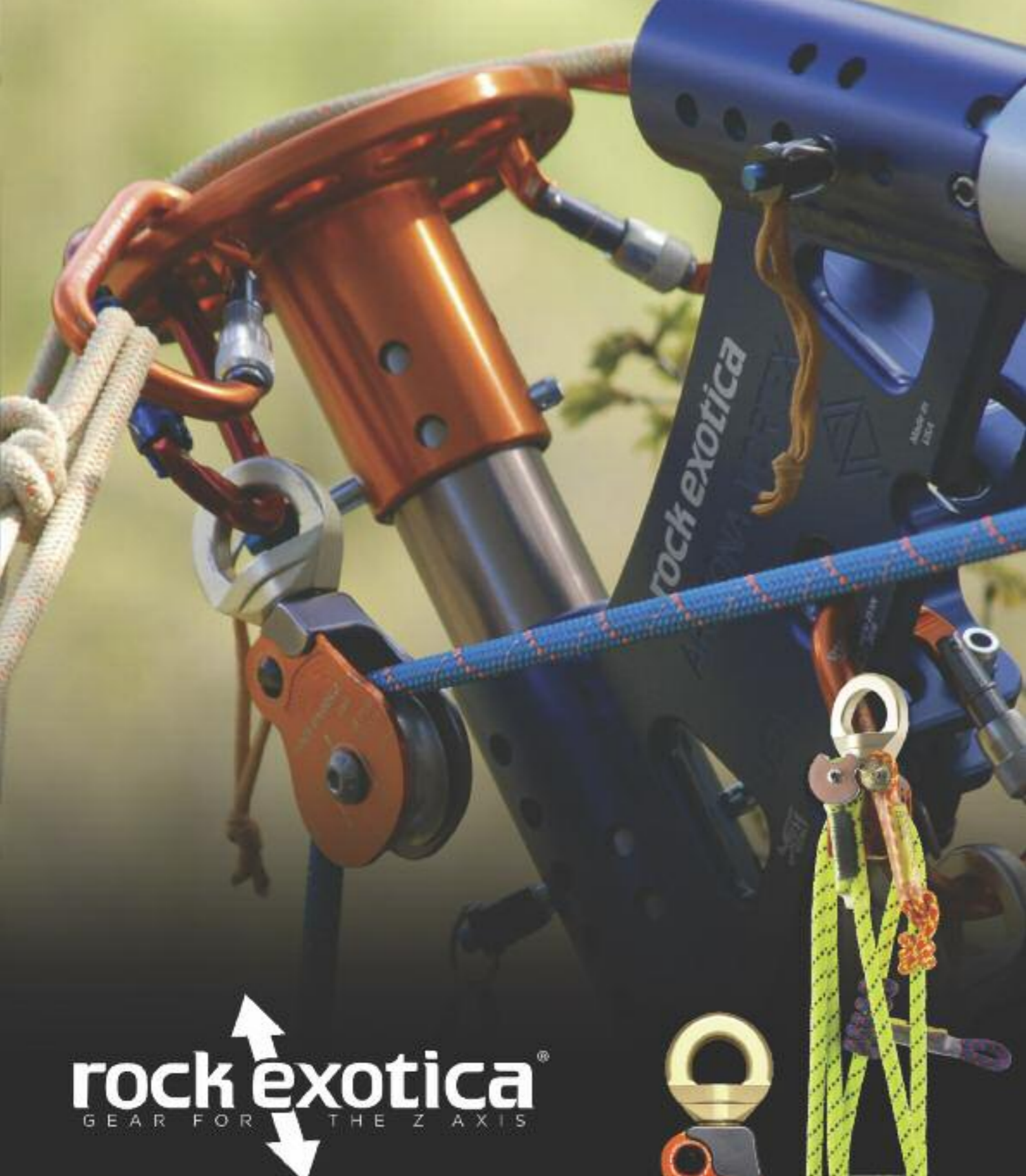
**Above:** Front to back, Ms Claire Hensman, Richard Warren, Search Dog Jess with Penny Kirby (Wasdale MRT), Michelle Skeer QPM (Chief Constable, Cumbria), Acting Chief Superintendent Matthew Kennerley, John Bamforth (Treasurer LDSAMRA), Dr Jim Cox OBE (Deputy Lord Lieutenant of Cumbria) and John Carlin (Secretary LDSAMRA).



## AUGUST: 'OPERATION CLEARWATER' LAUNCHES

Ogwen team members spent a training day clearing rubbish and debris from Llyn Ogwen in order to familiarise themselves with their new rescue raft, bought with a donation from Clwb Rygbi Pesda/Bethesda Rugby Club. Meanwhile, members of The Snowdonia Society set about clearing up along the banks.





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# NEWS ROUND

## JULY > SEPTEMBER

### SEPTEMBER: NO TIME FOR PICNICS AS SADDLEWORTH TEDDIES TAKE TO THE SKIES

Led by resident team teddy bear Lee Allport, Oldham team members were delighted to support Saddleworth St Chad Church and St Chad Primary School with a teddy bear zipline to raise funds for a new accessibility ramp for the church. Much fun was had by all and teddy bear injuries were kept to a minimum!

The event raised over £1,000, with teddies of all shapes, sizes and colours queueing with their owners who were able to watch the teddies zipwire down Saddleworth Parish Church tower in Uppermill. Every teddy (and its owner) earned a 'teddy superstar' certificate for their bravery in completing the flight. The appeal was officially opened by English Rugby Union player, Kevin Sinfield, supported by the Bishop of Middleton, Mark Davies.

Left: Oldham team members with just two of the flying teddies © Oldham MRT.

### SEPTEMBER: MULTIPLE CASUALTIES IN A SINGLE EVENING FOR EDALE TEAM

... and some of them were a little challenging, to say the least. Twenty skydivers had landed off their original course onto Big Moor, fourteen of them suffering a whole range of injuries ranging from 'hurty legs' to impalement!

Rapid searching from the initial team members on scene identified two main areas of casualties. Triage was rapidly implemented to determine the serious to the least serious injured. It is worth saying at this point that the team also had to contend with what they describe as 'a midgefest of biblical proportions'.

Some casualties were walking wounded, others needed stretchering back to the awaiting ambulance crews for transportation to local hospitals. Some of those involved sadly didn't make it.

Thankfully this was just another training exercise and the casualties were all volunteers from the various medical faculties within Edale's operational area. The only ones that didn't make it, they assure us, were several thousand midges. The team said a huge 'Facebook thank you' to all the volunteers that evening 'for enduring the conditions and coming out to help make it realistic', demonstrating that it isn't just the volunteer rescue team members who make mountain rescue what it is, but the volunteers who support them too.



Images © Edale MRT.



**Raising funds for rescue**

### AUGUST: JANET AND PAUL DO YORKSHIRE THREE PEAKS FOR MREW


Janet Walkey and Paul Pearson left Horton-in-Ribblesdale at 5.20am on an overcast, grey morning – perfect weather for a challenge walk! An hour later, Pen y Ghent, at 694 metres was still in the clouds, then it was a seven-mile hike along the valley to Ribblesdale for food, drink and a little first aid on the feet, before the long climb past the Ribblesdale Viaduct and Blea Moor tunnel to the summit of Whernside, the highest of the three peaks at 736 metres. By now the sun had started to show, giving views back to Pen y Ghent and on towards Ingleborough, on the other side of Chapel-le-Dale. The descent of Whernside is harsh, with very steep and large steps, it was getting warm and sunny, and it was sixteen miles in over two hills, so Ingleborough was a challenge in itself but they made it to the summit at 724 metres, and were done – save for the five mile slog back to Horton-in-Ribblesdale, and the final near-jog to make sure they got in under ten hours! In the end, they recorded 9 hours and 51 minutes of almost non-stop effort. For all the hard work, they say it was an enjoyable day, and might even consider doing it again one day! The couple raised £690 for MREW for their efforts.

Above: Janet Walkey and Paul Pearson at the summit of Ingleborough. Image supplied by Janet and Paul.



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## JULY: BUXTON TEAM MEMBERS HELP BRING WHEELCHAIR ACCESSIBILITY TO THE PEAK DISTRICT COUNTRYSIDE

When a Buxton team member got to talking to a member of staff at the Hollowford Centre in Castleton, the conversation turned to the new all-terrain wheelchair purchased by the centre and the Lindley Educational Trust to allow access to the countryside for those with limited mobility. And it just so happened that the team member's neighbour had been injured some time ago in a serious accident involving a paraglider and was no longer able to get out and about into the countryside he had spent so many years enjoying.

Working closely with the family, a plan was developed to push the wheelchair, along with an excellent food hamper, to the top of Mam Tor. Here the family were able to enjoy a picnic in the sunshine overlooking the countryside where both father and son had flown their paragliders – a great example of the outdoor community working closely together to give opportunities to those with limited access to the countryside. The family were extremely grateful to the team, the Hollowford Centre and Lindley Educational Trust, plus Alpkit Foundation for their funding, and the amazing piece of kit supplied by GM4X Outdoor Access for All which made the ascent so easy to achieve.

Top: Buxton team members with the all-terrain wheelchair and passenger © Buxton MRT.



## SEPTEMBER: WINTER IS COMING...

...and Trainee Search Dogs TegOrs and Mac of East Cornwall SRT will be toasty warm thanks to a generous donation from the Liskeard Lions Club for new winter jackets. Here they are looking smart to collect the cheque from the Liskeard Lions' president.

Photo courtesy of Mountain Rescue Search Dogs England Facebook page.

# NEWS ROUND

JULY > SEPTEMBER



Call-outs in the time of COVID

## SEPTEMBER: OGWEN THANK YOU

Over a two-week period in late-summer, Ogwen team attended fifteen call-outs, numbers 85 through to 99, busy by any standards.

Some, they said, were really simple, searching for 'lost' casualties while others were complex rescues involving multi-agency responses. Some of their casualties had 'really hurt themselves' and they wished them 'a speedy recovery and return to the hills'.

However, they wanted to make special mention of 'those members of the public who stopped to help their fellow hill goers. We have had help from passersby who have picked up some of our lost and lonely casualties and helped them down or until they were met by the team. We have also had members of the public attend to our injured casualties until they could be reached by trained responders and they should all feel proud of the help they gave. As ever, we have had help from our partners from HM Coastguard at Caernarfon Airport and the RAF MRS at RAF Valley so a big thank you to them as well.'



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# NEWS ROUND

JULY > SEPTEMBER

## SEPTEMBER: TWEED VALLEY ATTENDS MOUNTAIN BIKER WITH SERIOUS CHEST INJURIES

The casualty had potentially serious chest injuries following a fall from his mountain bike and, although team vehicles were able to reach the incident site, the bumpy off-road drive back to tarmac would have risked making the injuries worse or, at the very least, been incredibly uncomfortable for the casualty.

That left two options – either a three-kilometre, two-hour stretcher carry-off or a fifteen-minute helicopter transfer to hospital. Initially, no helicopter resources were available due to other taskings and bad weather elsewhere in Scotland but, thankfully, HMCG Rescue 199 became available and travelled to the incident just as team members were beginning to evacuate the casualty on foot.

Thanks also to Scotland's Charity Air Ambulance (SCAA), who were part of planning discussions as they may also have been able to attend had R199 not been available.

Left: Team members and paramedic attend the casualty with R199 in the background © Tweed Valley MRT.



## SEPTEMBER: LONG CARRY-OFF IN POOR WEATHER FOR WESTERN BEACONS TEAM

When Western Beacons team was called at 7.00pm in the evening, to rescue a male with a lower leg injury on the Carmarthen Fans by Carreg Yr Ogof, Coastguard helicopter R187 was unable to get to the casualty due to poor weather conditions, which meant a long carry-off by stretcher for the casualty. And team members!

They offered a special thanks to the family at Gellygron farm, who assisted team members by transporting personnel and equipment to and from the casualty site and supplying much needed tea when they got off the hill. Vehicles finally returned to base just before 2.00am.



© Western Beacons MRT.

## SEPTEMBER: TEAM ASSISTS WITH OFF-ROAD VEHICLE ACCIDENT

Coniston team members were at base for a casualty care training session when North West Ambulance Service called for assistance with an off-road vehicle accident on a permitted trail in Grizedale Forest.

The team's three Land Rovers arrived on scene to find two seriously injured young men who appeared to have been ejected from their rolling vehicle. Assessment and treatment was commenced for both casualties' multiple injuries. Helimed 58 from Langwathby landed nearby and its advanced medical team joined team members, land ambulances and paramedics, arriving via a smoother forest track. The helicopter had to depart due to nightfall and weather issues. Both casualties were stabilised, packaged and taken by the two land ambulances to the Major Trauma Centre at the Royal Preston Hospital for further treatment.



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## SEPTEMBER: TEAM MEMBERS HELP EXTRICATE CASUALTIES FOLLOWING RTC

In a developing theme in this issue, Edale team members were finishing an online water safety training session when the duty team leader received a call from a work colleague who'd witnessed and responded to a road traffic incident below Higgarr Tor. A car had left the road and rolled a considerable distance towards the valley bottom.

Due to the potentially serious nature of the accident, Derbyshire Constabulary, East Midlands Ambulance Service, Derbyshire Fire & Rescue Service, HART teams, an EMICS doctor and the Maritime and Coastguard Agency SAR helicopter were also dispatched to locations above and below the crashed vehicle. The first team members on scene (including an Edale team doctor), found the patient to have a substantially reduced conscious level and a number of potential injuries. Fortunately, they were not trapped in the vehicle so rapid extrication was possible, onto an MR stretcher and down to a waiting ambulance for onward transport to hospital. It was incredibly fortunate the incident was witnessed by a member of the public as the location and time could have resulted in a far more serious outcome. A fantastic example of multiple agencies working together, including local retained fire and rescue teams from Hathersage and Bradwell.

# NEWS ROUND

JULY > SEPTEMBER



Photos: facebook.com/edalemountainrescue.



## SEPTEMBER: KEEPING COVID-SAFE BENEATH GROUND

COMRU team members undertook their regular practice in the south of Cumbria, in a slightly more airy underground venue than usual. These big slate closeheads with good airflow meant team members could practise their casualty care and rigging techniques whilst still following the Covid protocols. A tricky stretcher transit over stacked slate involved releasable deviations, multi-linked anchors and plenty of planning!



## AUGUST: YOUNG WOMAN INJURED IN 80-FOOT FALL

South Snowdonia team members were called when a young woman fell at Pistyll Cain in Coed y Brenin, sustaining multiple serious injuries.

Team members set up a rope system for safe access into the gorge to lower both personnel and kit and, luckily, a passing doctor was on the scene immediately to assist. Multiple teams were involved in the evacuation which also needed three teams to set up a high line for winching into the helicopter. Huge thanks to the attending doctor, Welsh Air Ambulance, the HM Coastguard helicopter, North Wales Police and Aberdyfi SRT.

## SEPTEMBER: MISSING MAN FOUND AFTER 80-FOOT FALL, ALSO IN COED Y BRENNIN

After a brief search by South Snowdonia team members, the missing man was spotted in the gorge below Pistyll Cain, with multiple injuries.

Due to the difficult winching and weather conditions, a rope system was applied to bring the casualty back up the gorge in a stretcher. He was then taken in the team vehicle to meet HM Coastguard Rescue AW189 at a safe location for transport to hospital. Huge thanks once again to Aberdyfi team members for their assistance.

Images from facebook.com/SSSARTeam







## 'Life after lockdown' for one reader meant the Great Glencoe Challenge

SEAN MCBRIDE

As expected, the scenery was utterly breathtaking as our coaches wound their way from Event HQ at the foot of Ben Nevis into the massive half pipe of Glencoe. They had needed double the allocation of coaches to ferry us to the start line this year. This allowed us to keep empty seats around us and maintain the socially-distanced tradition of these unique times.

With 26.2 miles of hard walking ahead of us, you might expect the mood to be tense. No chance of that, however, as we filed out of the bus past a piper playing us in to the start line. As soon as our feet hit the ground, a marshal said, 'Go!' expecting us to rush ahead. Instead, in more of a party mood than one of dread, most of the participants turned round and took selfies with the piper and the start line behind them. So it was that the great Glencoe Challenge 2020 kicked off. Like so many other events of this year, it actually took place in 2021.

It was interesting talking to the participants, some of them nervously taking their first steps back into freedom after a long time in lockdown. Training had been affected as people had been forced to stay at home. Others were forced into new jobs working nights. Some were facing open spaces and large crowds for the first time in over a year with the fear of infection of Covid-19 still ever-present. The challenge was to complete a marathon across mountainous terrain in under twelve hours. If that wasn't enough however, there was far more than just that at play in the dynamics of this event during what remain unique and challenging times.

The fact that the Great Glencoe Challenge 2020 went ahead at all is testimony to the hard work and determination of its organisers, Jim and Andrea. They had many Covid-19 difficulties to overcome. Having started Ptarmigan Events in 1999 to support charity events on Ben Nevis, The West Highland Way and the Great Glen, they launched the Great Glencoe Challenge in 2015. The intention was to host an event that they could manage end to end in order to deliver the best experience for contestants. People could make their own choices related to raising money for charity or even simply attend a unique endurance event that welcomed ordinary, everyday people as well as elite athletes.

From a modest start with just 32 participants in 2015, attendance at the event grew steadily year after year. 2020 was set to become a record year with around 700 participants registered to take part. And then

the global pandemic spread across the world. With the event originally scheduled for July 2020, Jim and Andrea were forced to make the difficult call to reschedule. They decided to push the event out to July 2021 in the hopes that we would be well clear of the grip of Covid by then. With this event already at capacity, they opened up a second event in 2021 so new participants would still have an event to enter.

Though this would have been a big disappointment to a lot of people who had entered the event, Jim said most were understanding and supportive about the changes. As a registered participant myself, those were very much my sentiments. Unfortunately, as we all know, the virus and the ever-changing rules required to keep us all safe extended well into 2021 and are with us still. This simply increased the problems and uncertainty for Jim and Andrea and created communications problems. Without clear information or stable rules available to them, there was very little they could pass on to participants.

Sadly, the changes and uncertainty lead to a high level of cancellations for the 2020 event. A small number pulled out when the date changes were initially notified. A much larger number pulled out in the run up to the event. Some were fearful of their lack of training because of lockdown, and some were unable to get accommodation at a reasonable price as hotels and B&Bs started to re-establish their businesses after lockdown. In the end, there were around 350 participants for the 2020 event and under 200 for the 2021 event the following week.

The indicators of Covid were still very much apparent as we turned up at the start of the event. Hand sanitisers, social distancing, and the wearing of masks. I was pleased to see that none of this did anything to dampen the usual high spirits, banter and welcoming atmosphere I had come to associate with the Great Glencoe Challenge since first taking part in 2016 (the worst year ever for the notorious 'swamp' section.)

I was interested to know how contestants might be feeling as we waited for the buses

to ferry us from event HQ to the start line, so I had a quick chat to the couple standing next to me. John and Kirstie of team 'Your Pace Or Mine' from Edinburgh seemed positive and upbeat. With a smile, John told me he was feeling hungover.

A few short hours later we found ourselves in party mood being entertained by Red Bull who had laid on a DJ at Checkpoint 1, around five miles into the event. What else would you expect first thing in the morning on the edge of a swamp in the middle of Glencoe? I took some time to chat to Julie,



Top: The author with fellow walkers Kathryn and Julia. Above: The piper and the start line. Images supplied by Sean McBride.



## SEPTEMBER: COVID-DELAYED CLEVELAND HIKE GOES AHEAD

The annual Cleveland Hike involves teams using a map and compass to navigate between a series of checkpoints on the North York Moors over two days. Points are awarded on arrival at each checkpoint – more if they are ahead of schedule.

Vanda, Linda, and Karen from team Palletways Edinburgh. I had first come across them as they powered into the checkpoint, and they certainly seemed to be soaking up the party atmosphere.

The challenge ended for my team a few miles later at the foot of the Devil's Staircase on the far edge of a swamp that was much drier than I remembered it. As much as anything the mental rigours of emerging from lockdown had taken their toll and the best option was to call it a day, return to safety and be proud of the arduous seven miles we had covered. After a quick call to Andrea on the help number that is given to every participant, we quickly got to see a very effective safety infrastructure kick into action. Within minutes, an ambulance was at the foot of the mountain below us, and a medic was on foot making their way up towards us.

After a thorough medical check, we were transported first to lunch at the halfway checkpoint at Kinlochleven and then safely back to Event HQ at Glen Nevis. What stood out most for me was how nice everybody that helped us was. I could see that everyone was extremely busy marshalling 350 people along the 26.2 remote and mountainous miles of the route. Despite this, however, everyone we came into contact with went out of their way to be kind, sympathetic and helpful as they moved us back to the safety of Event HQ. They also made sure that we got our medals and celebrated what we had achieved.

Despite such a long and arduous challenge for participants, there's more than enough food and drink provided to keep you energised and hydrated for the full duration of the course. Kingboar Catering provide Breakfast Rolls before the start, a hearty pasta lunch at the halfway point and a full Hog Roast at the finish. Chocolate, fruit,

energy drinks and water are provided at the checkpoints in between and there's even an Irn Bru stand just two miles from the finish.

All 274 finishers of the 2020 event crossed the finish line within thirteen hours. Fastest on the day with an incredible finishing time of just 6 hours and 21 minutes (06:21:03) was Kirsty Horne. The 2021 event saw 172 finishers cross the line in under fourteen and a half hours. Fastest on the day was Steve Meldrum who powered over the line in just under 6 hours and 9 minutes (06:08:52). For having the courage to take on such a challenge and the determination to see it through, every single contestant, regardless of where and when the event ended for them, should be hugely proud of their achievement.

I had a chat with Steve shortly after he crossed the finish. Steve, a Munro Bagger who has summited 218 of the 282 Munros described the challenge as 'a long day'. Like so many others, travel restrictions imposed by the lockdowns had affected his training. He was still able to get out into the Campsie and Kilpatrick hills however, which were within his local area.

Maree, who finished within seven and a half hours (07:21:22) took some time to chat with me on the finish line while she waited for her husband Callum to finish. With 26.2 miles being the longest distance she has done, a delighted Maree said she was enjoying a 'finishers buzz' but that she would most likely be tired soon. Her and Callum had camped out in their car the night before the event which makes their achievement all the more amazing.

Earlier in the day I had the pleasure of meeting key workers Allison and Heather of team 'Feel The Burn'. They were muddy but smiling as they emerged from the swamp section of the course onto the Devil's Staircase. 'We're nurses, we're hardy,' was

At each checkpoint there is an 'incident' to deal with, a type of challenge where they can win more points. At the end of the Saturday (normally after 20-25 miles) they pitch tents for the night before following a similar format on the Sunday, over a further ten miles or so. Traditionally, Cleveland team members help out by conducting kit-checks before the start and generally support those involved if called upon. The event normally takes place in June but was cancelled in 2020 and then delayed this year – yes Covid again! The Hike has been running for over 50 years with the aim of promoting friendship and fellowship between people through teamwork and leadership, involving tests of stamina and the application of initiative. Importantly, everyone is encouraged just to have a bit of fun! It is open to anyone over twelve, with people coming from across the UK. This year's event included teams from the military (including the Gurkhas), the Boys Brigade and groups of families and friends. Cleveland MRT themselves are hoping to enter a team next year and any other MRTs would be most welcome! The provisional date is 18-19 June 2022.

the reply to my questions around how they were feeling and how their training had gone.

Still smiling, they plodded on up the steep path climbing into the mountains above us. I couldn't help but admire the courage which they had brought from the amazing job that they do working in a hospital, here into the mountains. Spending the day in friendly chat among everyday heroes in such challenging terrain and beautiful surroundings is everything about The Great Glencoe Challenge to me. It's why I do it and keep coming back to do it again.

With the two events successfully completed this year, Jim and Andrea feel an overriding sense of relief that they were able to go ahead and that they were as safe and enjoyable for everyone as they had been in previous years. They would like to offer their sincere thanks to all the staff, supporters, sponsors, and participants who continue to make the event a success every year. This includes Tunnocks, Red Bull, Event Scotland, Highland Council, Kingboar Catering, Shiel Coaches, National Trust for Scotland, Jahama Estates, Forestry Scotland, the staff at the Leven Centre, Kinlochleven, David Ogg at Bright Productions, Honeywagon, Bear Scotland and Blackwater Estates.

When asked about their hopes for future events, Andrea said, 'Our main hopes are to continue running this popular event for many years to come. We are constantly looking to develop, improve and invest in the Challenge where possible to ensure everyone taking part has the best experience possible on the day.'

The great Glencoe Challenge 2022 is set to take place on 2 July 2022. To find out more about this event or The Three Lochs Ultra, taking place in September 2021, visit the Great Glencoe Challenge online at ptarmiganevents.co.uk. 🍷





## The Alphin and Alpine stretchers: History and development

We've often focused on stretcher development and history here in the magazine but not so much on the Alphin and Alpine stretchers. **Dr Andy Taylor** talks us through the history of a stretcher that continues to be adopted and popular with many rescue teams around the UK and the wider world.

There was a feeling in UK Mountain Rescue in the 1970s that a new stretcher was required to supplement the Thomas and MacInnes models, even though the latter was designed to split for portage and the former had been adapted by several teams to split into halves. Peter Bell in the Lakes developed a steel splittable stretcher and Sutherland in the Peak District designed a simpler structure. (The Sutherland stretcher, was basically a development/copy of the Thomas, produced locally in Saddleworth in square section mild steel when the Thomas went out of manufacture. In fact very few were ever made).

At this time Dave Allport, an engineer and member of the Oldham team, was struck by the problems associated with moorland searches — namely that fixed-unit stretchers were so heavy that they were left in 'gear-dumps' during searches and called in only when the casualty was located (with a consequent time delay), and that the split stretchers currently available were both heavy and awkward. More importantly, occasions had occurred where the two halves of the split stretcher became separated during the search or the trek to the casualty location, resulting in unwarranted delay in evacuation. The concept of a single unit capable of folding for one-man delivery to site — and light enough for carrying around on a search — was born.

Lightness of weight was essential for prolonged searching. This resulted in Dave's design dispensing with the large rectangular outline in favour of an outline restricted to the shape of the casualty. Less metal used for the same strength meant a lighter stretcher. Stiffness of structure was equally important, and a sturdy hinge was required. Dave came up with preliminary drawings but could find no-one interested in advancing the design or considering production of a prototype.

The Sutherland was being developed by a local firm who, in their words, were inundated at the time by young hopefuls with stretcher designs.

Dave discussed this with me, as someone with a lifelong interest in practical engineering and design, and the owner of a lathe, metalwork tools and welding plant in my garage. Between us we decided to make a prototype, bought the material and cut and welded the first Alphin stretcher in

1981. (At the same time we designed and made the first Alp descenders).

The concept of folding, not bed to bed but underside to underside, allowed the design of inter-folding skis to reduce the folded depth to a similar dimension to that of the open stretcher. The length was set at 6'6" (198cm) to cope with demographic increase in casualty height, and the shape was as economical in the use material as possible. This naturally led to a casualty-shaped (or coffin-shaped, if you must!) outline. An alloy plate was attached between the skis of the upper half for added protection to the casualty; the design resulted in a unit that could be controllably skied downhill by a single skier.

The integrity of the structure was not impaired by the foldability, and the whole was subjected to stress analysis by my

father — a retired Lancaster air frame designer from the stress office at AVRO — and it passed easily. It was a feature of the stretcher that the handles were removable as this reduced the carrying weight if required and, if astray, were not the serious problem that a missing half stretcher presented. Later design thoughts improved the format so it could be split if necessary by implementing two removable hinge pins instead of a single central axle.

Attached folding handles were considered and rejected on the grounds of weight and complexity, and fixed projecting handles were considered to be a hindrance in backpacking and storage. Removable handles remain the option to this day.

The original bed was a wire mesh but proved difficult to anchor without the usual ridge at the fold line causing pressure and



**Opposite:** Alpine stretcher in use on a cableway (showing a prototype of the Alpine stretcher). **Inset:** The Alphin lite in the late-1980s, lifted off Marsden Cliffs, South Shields during training with Tyne & Wear Fire Service and RAF Bullmar. **Above:** Archive photos of the Thomas stretcher. **Above, left:** Alphin MR stretcher and handles from Troll, now replaced by the Alpine from SAR. **Right:** Helicopter winching with the Sea King. Images supplied by Dave Allport/Oldham MRT.





discomfort to the casualty. This was replaced by a polycarbonate sheet. The use of a radical new material raised many an eyebrow but confounded all criticism except blind conservatism. In later models the material was changed to polypropylene as more resistant to splitting and to low temperature.

The total weight of the stretcher was less than one half of any of the existing stretchers. The casualty fixation straps included a chest harness which doubled as the back-packing carrying straps, which with the low unit weight allowed the stretcher to be carried as a pack frame along with personal gear. The small form-factor permitted climbing and abseiling whilst backpacking a complete stretcher. The frame shape had no protruding corners or handles to catch in overhangs, trees etc.

Ironically, it was the development of the horizontal lower stretcher evacuation system in association with RAF MR that led to the realisation that the Alphin is a 'good crag stretcher' and few accept that it started life as a lightweight spearhead moorland search tool. Not only was it designed for minimum weight and maximum portability, but its reduced width and inboard skis permit easier path following. With handles fitted it permits carrying by two to ten men, although the Oldham team's preferred crew is seven men.

In the preferred seven-man mode, one man carries at the front, two (or more if you wish) on each side, with two at the back, which avoids the problems that the single back man always has with any stretcher — that of poor visibility of his path. Even extended handles do not fully obviate this problem for a single back man. For many years the helicopter lifting straps were used to create a shoulder harness for a single end-carrier. Recently, a more dedicated harness system has been designed.

The helicopter winching straps were initially advised to be used criss-crossed between the handles and laid over the shoulders to provide a very comfortable carry at the handle ends especially when a narrow track forces a two-man carry. Recently a dedicated carry harness has been developed with greater comfort and adjustability. An eight-foot sling 'larks-footed' onto the frame was recommended for each side man, allowing him or her to reduce the strain on the carrying arm and to cope with very uneven ground by passing the sling over the shoulders into the other hand. This concept too has been modified with four dedicated side-carrier straps now available.

Early models of the Alphin stretcher impressed helicopter crews with the lack of corners and handles. The RAF officially expressed an interest in the Alphin and requested in 1986 that the hinge mechanism be 'tucked away' to allow the winchman to load it solo, without any ground support, by tipping the stretcher sideways and rolling the casualty onto the bed. This led to the design of the Alphin Lite, which is a very similar product but met the RAF requirements, and was presented without handles or the back protecting skid pan.

This model was supplied to many fire brigades. It was also the chosen stretcher of the UK Coastguard. In 1989, Westland helicopters requested a special order of the Alphin Lite, but asked if it could be produced as a basket version for their Scout Helicopters; this was achieved by forming the bed into the stretcher frame and fastening it to the inner walls. Only six were produced for this order, two in each aircraft.

A number of users commented that the casualty felt somehow 'exposed' during a carry. This was unsurprisingly not a problem during a rock-face lower. The problem was identified as due to a lack of perceived supporting material surrounding the casualty, in comparison to the sensation on the sagging bed of a stretcher which is two feet wide from top to toe. The lowering straps in a rock lower provided the enclosed feeling which gives comfort, but these are not there in the stretcher carry. Another feeling of instability came surprisingly from the very stiffness of the bed considered by all as necessary for adequate care of a spinal injury and superior to the support given by wire mesh. As in a high narrow vehicle such as an old Land Rover, any rotation in the long axis causes a sideways movement of anything which is above the axis of rotation. This is perceived by the casualty as instability when the stretcher rolls slightly during carrying — a feeling of teetering on the top of something. This was addressed by a simple suggestion in 1989 from Dr. Peter Curry from the Peak District — the handles were cranked which put the axis of rotation above the casualty, converting any sensation of rotation into a comfortable 'swinging below' sensation and the simple solution was well received.

It was later that it was found that it is possible to ski with the Alphin MR stretcher, foot-end first down the slope. The rescue skier attaches a short rope, or preferably extension poles, to the handles at the foot end of the stretcher. When the skier pulls forward, this lifts the foot end out of the snow and the casualty's weight is then mainly on the protective sheet between the head-end

skis. If the skier slows down the foot-end skis of the stretcher bite into the snow to act as a brake. The protective sheet was originally made in aluminium but is now made in 3 mm polypropylene. The stretcher slides easily on this 'sledge pan' on all types of snow, grass, gravel etc, whilst protecting the casualty's back from rocks.

If the skier slows, the foot end of the stretcher loses its lift and the foot-end skis dig in progressively into the snow. If the skier stops, the foot-end handle rest digs firmly in as an anchor. A forward pull on the short rope — more recently replaced by dedicated poles — restarts the descent with little effort.

The Alphin stretcher in the RAF SAR evacuations of old, and now those of the HM Coastguard presents the winchman of the helicopter with the least possible obstruction to swinging the stretcher into the aircraft after winching up.

In 2003, a redesign of the Alphin was produced by Dave who now has his own company, SAR Products Limited, and was renamed as the Alpine Stretcher range. The latest change in materials took place in 2005, following which the stretcher is now welded from high aluminium grade alloy — making it even lighter and easier to operate and carry. Oldham team carry one of these stretchers on all their vehicles.

Over the years the progressing designs of the Alphin and Alpine stretchers have been taken on board by HM Coastguard UK-wide, by many mountain rescue teams around the world, as well as by Military Mountain Forces, Fire and Rescue Services and Civil Rescue in many countries.

The Alpine MR Stretcher as supplied to UK mountain rescue teams is complete with all lifting slings and handles. Side straps, carry harnesses and protective cases, lightweight wheel assembly that splits down into a flat pack for easy carrying on a rucksack are all available as extras. ❁

**Opposite:** Alpine stretcher, steep ground traverse carry; stretcher carry in snow with the Mourne MRT.

**Inset:** Stretcher with wheel in use. Images supplied by Dave Allport/Oldham MRT.

**DR ANDY TAYLOR JOINED OLDHAM MRT AS TEAM DOCTOR IN 1975 AND WAS IMMEDIATELY CO-OPTED ON TO THE MEDICAL SIDE OF THE PDMRO AND, A YEAR OR SO LATER, ON TO THE MEDICAL SUBCOMMITTEE OF THE THEN MRC.**

With Neville Marsden, he co-wrote the MRC CasCare syllabus and, with Peter Andrew and others, decided that the MRC could stand alone as a provider of a Mountain Rescue Casualty Care Course, negotiations having broken down with St John and the Red Cross. He was the first chief examiner for the CasCare exam, for over fifteen years and wrote (and marked) all the MCQ papers as well as being secretary of the Medical Subcommittee.

'Sadly,' he says, 'pretty well all of my colleagues of the 1970s and '80s have passed on, but I still manage to be front-line operational in OMR\*, attend PDMRO and MREW Medical subcommittees, and have been a PDMRO Incident Controller since the early 1980s (the longest standing one).

The design of the Alphin stretcher and Alp descender (actually making the first 90-odd of them in my garage) completed the circle of my interests in MR and engineering. Dave and I remain proud of what we created and what is still widely used around the world by many armies, fire services and mountain organisations.

\*As seen on Helicopter ER on 31 August 2021!



# Eponymous medical terms: Part 3: Eustachian Tube to the Angle of Louis

In February 2012, we began a review of the many eponymous terms knocking around in the world of medicine, casualty care and mountain rescue. So, for those who may not have been in mountain rescue at the time, here's **David Allan** with a recap...

## EUSTACHIAN TUBE

This is the canal which connects the middle ear to the naso-pharynx and permits equalisation pressure within the middle ear. (Figure 1: Eustachian Tube). Normally the tube is closed but opens when a pressure difference is detected. This produces the 'popping' sensation with change of altitude. Swallowing and yawning can open the tube to help with pressure equalisation. Without the facility to equal pressure, the middle ear would be damaged and hearing and balance impaired.

The tube also drains mucus from the middle ear into the throat. In upper respiratory infections and allergies the tube becomes blocked with resultant impaired hearing etc. In children the tube is narrow

and more horizontal hence the higher incidence of ear infections in childhood.

Bartolomeo Eustachius lived from 1500 to 1574 in Italy. He produced the first account of the anatomy of the ear. He was also the first to identify the adrenal glands. He published a work of ground-breaking anatomical illustrations and engravings following which he lived in fear of ex-communication from the Roman Catholic church!

## FOLEY CATHETER

The Foley catheter was first introduced in 1930. Its primary purpose was as a bladder drainage catheter. The development of a double lumen tube enables a balloon to be inflated at the end of the tube and thus retaining the catheter in place (Figure 2: Foley Catheter).

The catheter is now produced in a wide range of sizes of tube diameter and balloon volume, the latter running from 5ml to 30ml.

It soon became apparent that the device has many more applications than as a simple bladder drainage device. It can be effectively used as a chest drain with the balloon serving to anchor it in place. The balloon can also be employed to exert pressure and thus to control bleeding in confined spaces. The small-sized catheters have been deployed to control severe nasal bleeding and can be inflated within a large blood vessel to act as a safe 'tourniquet'.

The concept of using a balloon device has

been widely extended to the removal of blood clots, stones etc from various organs.

Dr Frederick Foley worked as a general surgeon at Boston Massachusetts Hospital.

## GAMGEE

Gamgee was the first absorbent surgical dressing to be produced. It took its name from Dr Joseph Samson Gamgee who described the dressing in the *Lancet* in 1880. Two layers of absorbent gauze were used to surround a centre of cotton wool. This was an enormous step forwards in the management of wounds leaking fluids as well as in the treatment of bleeding wounds.

The term 'gamgee' became a trademark in 1911. During the First World War, the cotton wool was replaced with dried sphagnum moss as an absorbent because of the shortage of cotton. The dressing has effectively been in use with little modification for well over 100 years.

An interesting link with *Lord of the Rings* exists. Sam Gamgee was taken from the dressing and, of course, Sam's wife is Rose Cotton!

Dr Gamgee was born in 1824 in Italy but practised his medicine as a surgeon in Birmingham. He shared lodgings with Joseph Lister, the first proponent of aseptic surgery. Joseph Gamgee also founded the Birmingham Hospital Saturday Fund. This collected the Saturday overtime earnings of various groups of workers to ensure medical care was available when needed.

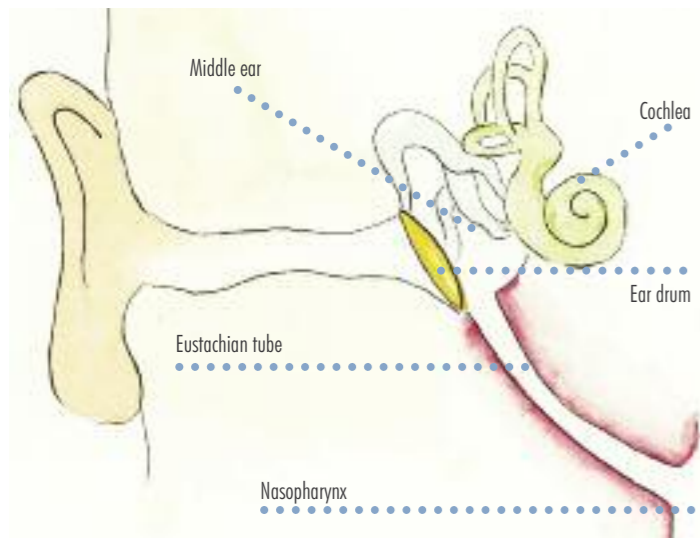


Figure 1: The Eustachian Tube. Figure 2: Foley's Catheter. Illustrations © David Allan.

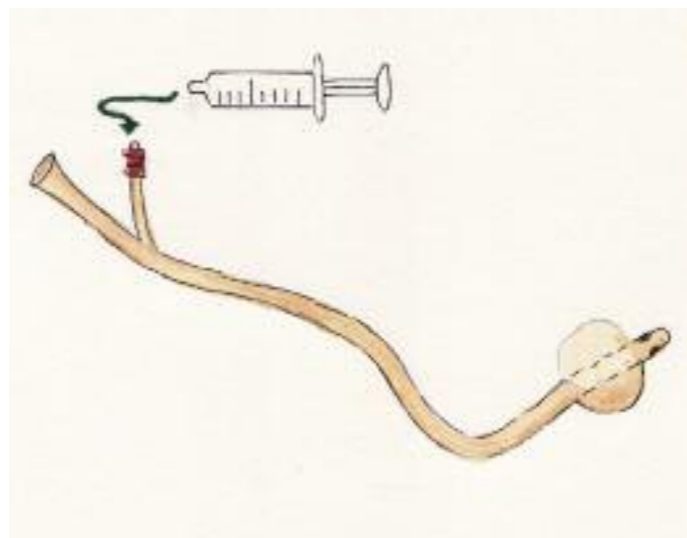


Figure 3: Heimlich Manoeuvre. Figure 4: The Hippocratic Method.

This was very clearly a talented medical family. One of his brothers was Professor of Anatomy and Physiology at the Royal Institute in London and the other was Professor of Anatomy and Physiology at the Dick College of Veterinary Medicine in Edinburgh.

## GEUDAL AIRWAY

This is another breakthrough piece of medical equipment that has stood the test of time. It was introduced by Dr Arthur Geudel in 1933. It is a simple airway allowing control, especially of the tongue, in unconscious patients.

Apart from refinement of the materials used in its manufacture, the design is effectively unchanged. In use, it is important to match the size of airway to the patient and to insert it at 90 degrees to its working position.

Dr Geudel was a United States anaesthetist who also first recognised and described the stages of anaesthesia using ether whilst serving with the US expeditionary force in France in WW1. He went on to publish the stages of anaesthesia in 1937:

- Stage 1: Analgesia
- Stage 2: Excitement
- Stage 3: Surgical anaesthesia in 1-4 planes
- Stage 4: Respiratory arrest and death.

## HEIMLICH MANOEUVRE

Alternatively known as 'abdominal thrusts', the Heimlich Manoeuvre has become well established as the method of choice for treating airway obstruction due to inhaled foreign bodies in adults (Figure 3: Heimlich Manoeuvre).

Prior to 1980, the advice for this clinical situation was to begin with 'back blows' and then to resort to abdominal compression if

the back blows failed. In 1974, Dr Henry Jay Heimlich wrote an article in *Emergency Medicine* called 'Pop goes the café coronary' in which he asserted that abdominal thrusts were superior to back blows. He subsequently convinced the American Red Cross of this and renamed the abdominal thrust as the Heimlich Manoeuvre.

In recent years, a fascinating story has emerged. Firstly the American Red Cross have reviewed the evidence provided by Heimlich and queried its veracity. In 2006, the term 'Heimlich' was removed and 'abdominal thrust' reintroduced. In addition, the advice reverted to the earlier guidelines of five back blows to be followed by abdominal thrusts if the back blows failed to resolve the problem. There is also ongoing work comparing the efficacy of chest thrusts against abdominal thrusts.

Peter Heimlich, the son of Henry Jay, meanwhile ran a campaign alleging that his father's work has been fraudulent and not original. There is certainly some evidence that the whole idea of abdominal thrusts was introduced by a Dr Ed Patrick, a one-time colleague of Dr Heimlich.

At one stage Heimlich advocated the use of his manoeuvre for the treatment of drowning but this was quite rapidly shown to be wrong. He also achieved a certain amount of notoriety for advocating infection with malaria as a means of treating HIV infection. Investigation revealed little or no scientific basis for this approach.

In 1963, Heimlich also described the Heimlich valve as a means of producing one-way drainage on a chest drain. Although this remains in use there have been questions about the originality of his idea.

Dr Henry Jay Heimlich was born in 1920 in Delaware. He attended Cornell University where his claim to fame was as the drum major in the marching band! Perhaps an early indicator of his liking for the limelight. He practised as a surgeon for a number of years but gave this up when he was no

longer able to obtain medico-legal insurance following a number of 'incidents'. He then appeared to embark on a career of 'medical discovery'.

## HIPPOCRATES

It might be justified to include this name purely in his capacity as 'the father of modern medicine' but it is in fact his attachment to reduction of the dislocated shoulder that brings him in.

The Hippocratic technique is the forerunner of the method currently advocated in mountain rescue. The difference is that the Hippocratic method (Figure 4: The Hippocratic Method) is a single operative technique and involves using the foot in the axilla as counter traction. Although out of favour now I have, over the years, found this to be a very effective procedure even on the east face of Pavey Arc. It should not be necessary to add that removal of footwear is important.

Hippocrates of Cos lived from 460BC to 370BC and travelled widely throughout Greece teaching medicine. He was the first person to describe illness as a natural phenomenon rather than divine intervention and established the idea of diagnosis and prognosis. He attempted to establish medicine upon a backdrop of anatomy and physiology although the concept of four humours as the basis of physiology imposed some limits on his success.

He did make significant advances in the management of trauma and was the first to advocate rest and immobilisation along with traction for the reduction of fractures.

## LANGERHANS

The Islets of Langerhans in the pancreas were described in 1869, long before the existence of insulin was confirmed. Indeed the word insulin is taken from the Latin 'insula' meaning island. The islets form



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## 57 EPONYMOUS TERMS CONTINUED



Figure 5: Le Fort facial fractures, I, II & III.

some 1-2% of the total mass of the pancreas and are found mostly in the tail of the organ (Islets of Langerhans).

Initially thought only to produce insulin, the cells of the islets are now known to be of five different types. Alpha cells produce glucagon and beta cells produce insulin. The destruction of the latter by auto-immune processes is responsible for Type 1 diabetes, and the possibility of transplanting these cells may radically change the treatment of this type of diabetes.

Paul Langerhans lived and worked in Berlin. He combined the roles of pathologist, physiologist and biologist. He served in an ambulance unit in the Franco-Prussian war and later became Professor of Pathology in the University of Frieling.

In 1874 he contracted tuberculosis and, in 1875, retired to Madeira in search of warmer air. He made a partial recovery and made a study of marine worms and wrote reports on the weather in Madeira. He died of renal failure in Funchal in 1887.

## LE FORT FACIAL FRACTURES

Le Fort was the first to recognise and describe the three patterns of facial fracture listed as Le Fort I, II and III (Figure 5: Le Fort). Published in 1901 the descriptions have proved accurate and, although the advent of CT scans and 3-D images have rendered the descriptions less important, they are still of value in clinical assessment. His experimental work was carried out using cadavers and dropping weights onto the faces from different heights.

He also recognised the frequency with which brain injury accompanied facial fractures (50%), probably the most important thing to remember about these injuries.

Rene Le Fort lived from 1869 to 1951. He was born in Lille and worked for most of his career as a French army surgeon.

## ANGLE OF LOUIS

The Angle of Louis is also known as the manubrio-sternal angle. It is an angle of 140

degrees, formed between the manubrium and the body of the sternum, and is at the level of the second rib. This is a very useful reference point in locating the second rib and is a surface marker for the bifurcation of the trachea and the beginning of the aortic arch. It is at the same level as the disc between the 4th and 5th thoracic vertebrae.

Antoine Louis lived from 1723 to 1792. He was a French surgeon and physiologist and became Professor of Physiology at the Salpetriere in Paris in 1750.

He almost achieved much greater fame by inventing a prototype guillotine, the Louisette, but this was superseded by the superior model of Joseph Guillotine! ☘

**NEXT ISSUE: EPONYMOUS TERMS TO BE CONTINUED, STARTING WITH MONTEGGIA FRACTURE.**

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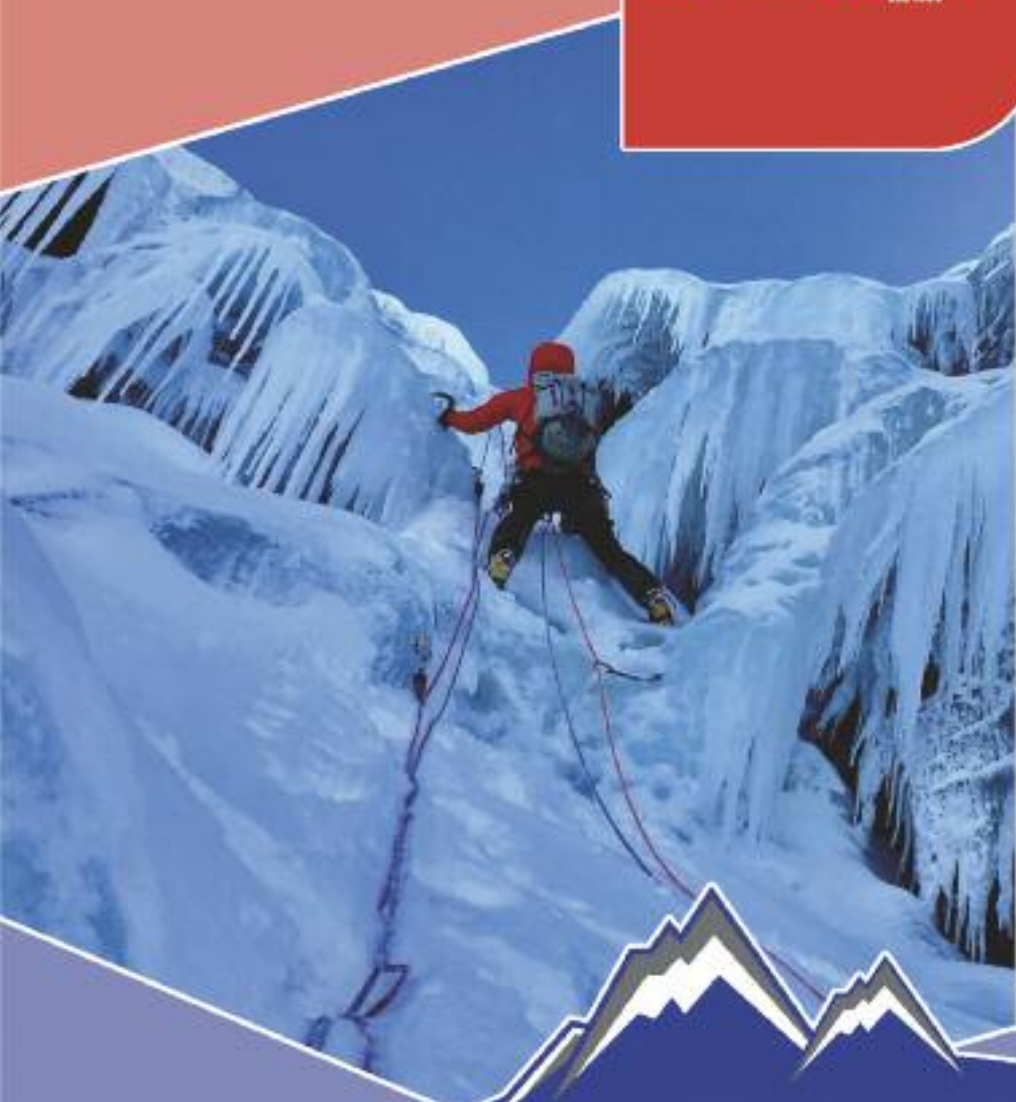
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