RESCUE POLICY FOR WORKING AT HEIGHTS

Date of Policy: 06/01/2017

(1) Introduction.

A rescue procedure is necessary for people working at heights who are in difficulty, subject to the Working at Heights Regulations 2005. Self-rescue may be viable for uninjured fallen technicians. Using lifelines on the truss, shock-absorbing lanyards and suitable full body harness, fallen technicians may be able to make their way back to safety such as a truss, beam or catwalk.

The rescue system documented outlines methods to respond to a scenario where a fallen technician is unable to self-rescue. These methods are to enable a safe system of rescue, either to assist the fallen technician to return to the truss or to lower him/her to the floor.

Rescue equipment such as MEWPs (Mobile Elevated Work Platforms) are made available by the venue. Responsibility for rescue remains with the venue.

(2) Methods of Rescue.

- MEWP (Mobile Elevated Work Platform)
  A MEWP should always be the first implemented method for a rescue
- Lowering of Truss
  If a MEWP is not available, then the lowering of the truss should be implemented.

(3) Rescue Procedures – Roles & Responsibilities.

(3.1) First on scene: (person who identifies the fall)

- Get Help – Radio / shout to notify people in immediate surrounding area of a fall. Notify the crew chief, stage / production and venue staff
- Do not delay
- Take note of the time of fall, a timeline will be crucial in the well being of the casualty.

(3.2) Rescue Co-Ordinator: (usually the Crew Chief)

- Identify the form of rescue to be implemented, MEWP or lowering of truss
- Identify the rescuer and delegate an assistant to him/her
- Identify a ground rigger to keep continuous communication with casualty
- Ensure the system technician is present at motor controller should the truss be lowered and to turn electrical fixtures off that are on the truss
- Contact the on site first aiders or paramedics
- Instruct Production team to contact the emergency services and include directions to nearest entrance to site
- Ensure all people below are clear from danger
- Liaise with all departments to ensure a suitable environment for rescue, ie- house lights on, sound system turned off, all other activities creating noise are stopped
- Keep a time log of the rescue procedure, with particular attention to the length of time the casualty is suspended
- Record the rescue in an incident report
(3.3) Rescuer
- Identify the method of rescue to be implemented, MEWP or lowering of truss
- Oversee the rescue procedure
- Take control of implemented method of rescue
- Locate house rigger or production rigger to release any secondary safeties if lowering the truss

(3.4) Ground Rigger
- Take responsibility to keep the area below clear for rescue
- Manage rescue area at ground level
- Liaise with Rescue Co-ordinator and Production Team to direct emergency services to a safe area whilst rescue is in operation

(3.5) System Technician
- Ensure you have clear line of sight with the rescue procedure
- Liaise with Rescue Co-ordinator
- Cut power to any fixtures on the truss
- Lower the truss if requested by the rescuer

(4) Rescue Procedures – Scenarios.

(4.1) MEWP Rescue
- MEWP to be used only by certified operator
- The MEWP Basket should be placed directly under the casualty and then raised up until the persons full weight is in the basket
- Release the casualties PPE from their anchor point and re-attached to the basket
- Work with Ground Rigger and any first aiders / paramedics to get the casualty to safety

(4.2) Lowering of Truss
- Rescuer to locate house or production riggers to release any secondary safeties that may be attached.
- Ensure there are no objects below the fall that could obstruct the lowering of the truss i.e. Set pieces, backline.
- Ensure clear communication at all times between all people involved in the rescue
- System technician to ensure he/she has control of hoists being lowered
- Truss to be lowered upon the rescuers verbal instruction

(5) Treatment.

In the event of a rescue, treatment should always be undertaken upon completion of the rescue. A fully qualified medical examiner should always administer treatment. The casualty should not return to work if the medical examiner deplicts it is unsafe to do so.

Treatment of a casualty should follow the HSE Government guidelines as detailed on the last page of this policy.
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(6) Recording the Incident.

Any rescue, under Health & Safety Guidelines, needs to be logged. Details should include:

- Date, Time and Location of the incident
- Name and Role of the casualty
- Details of how the fall was incurred
- Timeline of events
- Details of injuries incurred and what first aid measurements were applied
- Details of the activities of the casualty immediately after the rescue i.e. Back to work, Transferred to Hospital

The Rescue Co-ordinator should report any incidents that include a fall followed by a rescue back to Lite Alternative Ltd immediately after the event.

Lite Alternative Ltd will then evaluate the incident along with the Health and Safety Executive and report the incident under the RIDDOR Regulation 2013 if necessary.
Advice for first-aiders responding to harness suspension incidents

September 2008

Following completion of an evidence based review of published medical literature, HSE has clarified guidance on the first aid management of a person falling into suspension in a harness who may develop ‘suspension trauma’.

The key recommendations are:

- No change should be made to the standard first aid guidance for the post recovery of a semi-conscious or unconscious person in a horizontal position, even if the subject of prior harness suspension.
- No change should be made to the standard UK first aid guidance of ABC management, even if the subject of prior harness suspension.
- A casualty who is experiencing pre-syncopal symptoms or who is unconscious whilst suspended in a harness should be rescued as soon as is safely possible.
- If the rescuer is unable to immediately release a conscious casualty from a suspended position, elevation of the legs by the casualty or rescuer where safely possible may prolong tolerance of suspension.
- First responders to persons in harness suspension should be able to recognise the symptoms of pre-syncope. These include light headedness; nausea; sensations of flushing; tingling or numbness of the arms or legs; anxiety; visual disturbance; or a feeling they are about to faint. (Motionless head up suspension can lead to pre-syncope in most normal subjects within 1 hour and in a fifth within 10 minutes.)

Resource taken from HSE Government website.

http://www.hse.gov.uk/firstaid/whats-new/harness.htm