

## **British Mountain Guides Confidential Report Analysis Group**

The following reports (2013-14) have been produced by the British Association of Mountain Guides following accidents or incidents reported to the Professional Standards Committee (PSC).

The Confidential Report Analysis Group (CRAG) is an informal panel of experienced Guides. In their analysis of accident or incident reports they are impartial.

The purpose of the CRAG reports is to highlight and report significant incidents to BMG members and to offer some observations arising from their analysis of events leading up to, during and following accidents.

It is important to realise that the CRAG reports are separate to the BMG PSC process and are non-judgemental.

They are produced solely for distribution to BMG members and must be treated as confidential.

The BMG thanks members for contributing constructively to CRAG reports.

Iain Peter  
Chair, PSC  
10.1.15.

## **APPROACHING an ALPINE ROCKCLIMB**

### **Incident summary**

The guide had two clients for a week-long, summer alpine programme. Both clients were well known to the guide and had good mountaineering experience.

On the last day of the week the group were approaching a rock route that required crossing mixed terrain of snow slopes and scree. The average angle of the approach route was estimated by the guide to be no more than 20 degrees.

Both clients started out equipped with harness, helmet and crampons. The guide was carrying an ice axe and one client had a ski pole. The guide had prepared a rope in case of the need for short-roping, but each time the clients were asked if they wanted the rope they declined.

On reaching a large scree slope, the party removed their crampons. In the last part of the approach the scree was broken by two further snow patches of 6-7m across. The first snow patch was crossed without incident, but on the second snow patch the client using the ski pole slipped and fell. The client was unable to halt the descent, and slid off the snow patch, across a grass slope and stopped in some scree after approximately 10m.

The client was found to have sustained a cut to the hand, and complained of a bruised coccyx and feeling faint. The client was able to return on foot to the start point and refused medical evaluation on return to the valley.

### **Observations from CRAG (Confidential Report Analysis Group)**

- When working with long-term clients, it is important that the guide retains control of risk management and decision making - it is for the Guide (not the clients) to decide when the rope is required.
- Clients operating on snow whilst not wearing crampons and not carrying ice axes is not "normal practice" and so extra care is required.

## **CLIENT SUSTAINED INJURY FROM FALL WHILST LEADING A ROCK CLIMB**

The client, an experienced E1 climber 20 years ago, had lost touch with climbing during a military career. He hired the guide to re-introduce him to climbing and to try to get back to his old leading standard. Resilient, self-reliant and responsible for making decisions about his own safety he embraced the ethics of adventure climbing.

The client led the pitches he felt appropriate and the guide led the harder pitches. There was an understanding that when the client led a pitch he was responsible for his safety and the guide was acting as a competent belayer.

The client hired the guide for two weeks last year and repeated the booking this summer. On the last day the client started up a pitch, but unable to arrange a good runner and feeling tired climbed down to hand over to the guide. During the climb down the client slipped and fell a short distance to the ground and landed badly on an ankle. Immediate swelling suggested soft tissue injury or fracture.

The client declined assistance and slowly walked down to the road. After treatment with ice the client felt able to drive home and consult his own medical provision.

### **Observations from CRAG (Confidential Report Analysis Group)**

- If a client/guide relationship is varied from the “norm” (i.e. with the Guide in the lead), it may be useful to be able to provide evidence of the discussion and decision making that lead up to the new arrangement
- Guides may wish to supply a competent belayer (freeing up the Guide to practically supervise) when clients want to lead
- When a client declines to follow normal first aid advice, and opts to makes their own medical decisions, it is useful to have this formally acknowledged by the client.
- The BMG may wish to consider the provision of CPD for Guides who want to teach lead climbing.

## **FALLING DEBRIS ON CASCADE ICEFALL**

### **Incident summary**

The guide and one regular client approached a cascade icefall by snowshoe leaving their equipment stowed near the top of the route. The guide and client abseiled two pitches of the route using fixed anchors to establish themselves on a bolt belay, a pitch above the valley floor.

Whilst leading the pitch above, a block of ice was dislodged by the guide. The block bounced down hitting the client on the side of the body. The client was knocked over by the block and complained of feeling dizzy. The guide immediately stopped climbing and took an intermediate belay. The guide and client discussed the possible injury and the best method of retreat. It was agreed that reaching the top of the route would provide the safest and quickest way out if they could climb up.

The guide led the route and the client carefully climbed both pitches to the top of the climb. The guide and client slowly walked out to the road. The guide carried all the kit and they travelled slowly and carefully. They visited hospital where suspected broken ribs and internal injuries were given x-ray and ultrasound examinations. The examination revealed bruising but no broken bones.

### **Observations from CRAG (Confidential Report Analysis Group)**

- You must expect ice to fall when you cascade climb; plan the route, runners and belays accordingly.
- In-situ belays may not always be always in the best place.
- When a client has been hurt (and potentially seriously injured) the guide should alert the rescue services.
- If you cannot guarantee that the client can be positioned out of the fall line of any debris think carefully about your choice of route.

## **SKI CLIENT OUT FRONT IN POOR VISIBILITY**

### **Incident summary**

The guide had 6 very experienced students for a 3-day leader-training course in a ski resort in Italy.

The guide had frequently used the slope in question for these courses and was aware of the existence on the slope (though not its exact location) of a 3m high wind lip.

In thick mist, the two students who were the best skiers were selected by the guide to lead the section involving the wind lip. They were out front on a compass bearing choosing the line with the guide following 20m behind with the rest of the group.

The students on lead were told to snowplough slowly and roll snowballs in front of them to anticipate the terrain ahead. One student skied off the lip in the poor visibility and broke his lower arm on landing in the wind scoop below.

The subsequent rescue by the ski patrol was complicated by the poor visibility.

### **Observations from CRAG (Confidential Report Analysis Group)**

- The guide needs to have a range of strategies for managing the group - and needs to ensure that the chosen strategy is being properly implemented.
- Don't delegate responsibility to others - the guide is in charge.
- When clients are being trained to lead on skis, the guide should be in very close proximity to the leader so as to be able to take control of decision making and hazard evaluation if required.
- Poor visibility is a contributory factor to incidents, even in familiar terrain.

## **CONFUSED CLIENTS, UNQUALIFIED ASSISTANT AND INAPPROPRIATE RATIO ON STEEP SKI TERRAIN**

### **Incident Summary**

A guide had a group of 6 intermediate clients for an off piste day, and briefed the clients the day before that they were to ski a long itinerary style descent. The evening beforehand, 3 additional clients (who were at an advanced level) joined the group. The guide decided in the morning to ski a steep (40°) south facing couloir before doing the easier itinerary in the afternoon. There was confusion as to which members of the group, now numbering 9 plus the guide, would ski which lines. In the event, all 9 clients ended up at the top of the steep couloir.

They were protected on the entry to the couloir by a top rope. The guide managed the upper end of the rope, and designated one of the advanced clients to manage the disengagement of the clients from the rope at the end of the lower. The first client to descend made a very good job of skiing the pitch.

Following this, one of the intermediate clients fell while attempting the first turn, slid more than 100m and broke a leg.

### **Observations from CRAG (Confidential Report Analysis Group)**

- Objectives need to be set at an appropriate level, and special care needs to be taken in groups with mixed ability levels
- Clients should be clearly briefed on the plans for the day and be in position to give informed consent to the risks involved
- Guiding ratios are critical to providing the right level of care. In steep ski terrain, the ratio needs to be lower. Locally accepted ratios generally reflect this and these should be adhered to.
- Using experienced but unqualified clients in positions where they have responsibility for client management needs careful planning, briefing and execution.
- Clients need to understand that on steep terrain there is little that the Guide can do to safeguard them when they are skiing. Consequently, Guide and client must both think carefully before undertaking such objectives and must make “positive” decisions rather than allow situations to develop.

## **DIFFERENCE BETWEEN FORECAST AND REALITY**

Two guides were working with another mountain professional on a ski touring course with 12 competent clients. Conditions were challenging, necessitating numerous changes of plan, itinerary (and even country) in the run-up to the week. The plan was further changed during the course to adapt to the weather and snow conditions. On the 4<sup>th</sup> day the avalanche hazard was forecast to be category 3 below 2000m and category 2 above, with a specific reference to “wet slides in the afternoon”.

The group left the road head on skins at noon for an easy 2-hour approach to the hut. The route took them along a well trodden track in a steep sided valley. Temperatures were considerably warmer than forecast, 5 degrees C at road head level compared to the -2 degrees C forecast. They were travelling in three different groups, each group about 500m apart.

Twenty minutes and 1km into the approach, a spontaneous wet snow avalanche released above the second team and swept one of the Guides into a terrain trap, resulting in very serious injuries.

Several more spontaneous wet snow slides occurred nearby shortly after the one that resulted in the accident.

### **Observations from CRAG (Confidential Report Analysis Group)**

- If the avalanche forecast warns of specific hazards, then guides should attach appropriate levels of significance to those warnings.
- Avalanche and weather conditions are not always as predicted in the forecasts, and guides should make allowances for any differences observed in-situ. The plan must be based on the prevailing conditions rather than the forecast on which the plan was based.
- In spring ski touring conditions, an early start is highly advisable.
- Before embarking on an itinerary, particularly following a lengthy vehicle transit or when arriving in an area for the first time, Guides need to make time to assess the conditions and evaluate the prevailing temperatures.

## **WINTER ASSESSMENT, BAD WEATHER, STEEP TERRAIN**

A guide (with an observer/assistant) had a group of four candidates for a mountain leader winter assessment. On the last day of the course, after an overnight expedition, the group was returning in bad weather back to base. The wind was strong and gusty, and visibility was difficult due to fresh and wind blown snow. Some members of the group were wearing goggles.

Because the weather forecast was for stronger winds later in the day the guide elected to take a more direct, but steeper descent into a sheltered valley, rather than traverse around the tops. The candidates were briefed that on the descent they would be asked to demonstrate their ability to deal with steep ground, picking a route and using snow anchors and ropes.

After about 45 minutes with the candidates unable to decide on a plan, the guide took over control of the group. The candidates were moved about 30m down from the steepest part of the slope and established on snow ledges. The exercise was then handed back to the candidates, and the guide and assistant moved about another 15m down the slope to observe.

At this point one of the candidates lost his balance when struck by a strong gust of wind. He fell from the platform and slid several hundred meters down the slope. Because of the poor visibility the fall was not seen by the guide, but the other candidates raised the alarm by shouting down.

The guide and assistant then descended and attended to the casualty who had sustained a soft tissue injury to the lower right leg that required stretcher evacuation.

### **Observations from CRAG (Confidential Report Analysis Group)**

- The guide is responsible for the clients even in an assessment situation
- Guides need to think very carefully before subjecting those in their care to situations where unprotected falls can have serious consequences
- Guides need to consider the potential consequences resulting from errors made by those under their supervision.

Mountain Training Scotland offers the following guidance to assessors:

“Trainers who strive for realism should always consider the outcome of an unguarded moment or a lapse of concentration”