The Weaver's way ultramarathon is a brand new running event that is taking place in October 2023. It is a 50 mile endurance race starting at Acle Memorial Hall (starting venue has been agreed) and finishing in Cromer (exact finish line yet to be finalised but hopefully on the promenade near the Pier).

The route starts at Acle Memorial Hall at 0730 and stays to the West of the A1064 via the public footpaths at Fishley to Upton Green and then along the West bank of the River Bure to reach Acle bridge, this is so that none of the athletes will need to cross the busy A1064. The route then follows the Weaver's way along the East bank of the river Bure to Potter Heigham, crossing the river at Potter Heigham to run along the north bank of the river Thurne to Candle Dyke and then up to Hickling. From there the Weaver's way follows quiet country roads to Stalham. From Stalham to Bengate is totally traffic free on a good quality footpath surface, then quiet country roads via Meeting Hill to North Walsham.

From North Walsham the route crosses under the A149 and the railway to rejoin a good quality footpath that runs all the way to the A140 just north of Aylsham. Here the athletes will need to cross the A140 under the supervision of marshals (wearing hi-viz)who will remain at this crossing until the last athlete and the sweeper vehicle have gone past and the race director has confirmed that there are no more runners to come.

From Aylsham the runners follow quiet country roads to Blickling and then into the grounds of Blickling hall on the public footpaths that run through the estate to the West of the lake and then around the top of the lake to exit the estate and onto quiet country roads to Erpingham and Thwaite. They will then cross Thwaite common across fields up to Alby Hill and then rejoining quiet roads and footpaths across fields to Aldborough. Turning right after the pub at Aldborough on the way to Hanworth for a short mile section of country road before rejoining the trail just through Hanworth near Meadow farm. After this there is a combination of quiet country lanes and traffic free footpaths via Sustead to the woods just south of Felbrigg Hall.

The course then follows through the beautiful grounds of Felbrigg Hall and exits just next to the bend in the road at Felbrigg. The runners then head to the right and cross the road at another marshalled junction (using the same precautions as the A140 crossing described earlier). From here the runners follow a traffic free path to reach the road near Amazonia where they follow the pavement past the campsite and then take the footpath through Meadow Road car park and will then be directed by marshals away from the busy main road down Garden street and turning left at the end to run down the slope to the Pier and then the finish.

Terrain:

The terrain is a mixture of grassy riverside paths, muddy woodland paths, muddy riverside paths, quiet country roads, pavements, gravel tracks and town centre footpaths/ pavements in Stalham, North Walsham and Cromer. The race is taking place in October so athletes will be advised to wear trail shoes to ensure as good a footing as possible whilst acknowledging that the quality of some of the paths will depend on the amount of rainfall in the days preceding the race.

## Weather

Athletes will be advised to prepare for all the worst that British weather can throw at them and the fact that some of the athletes at the back of the field will be running in the dark. A mandatory kit list will be issued and there will be a mandatory kit inspection at registration. Those athletes who do not have the mandatory kit issued will not be allowed to start the race and will not be issued with a starting number. This information/ advice will be relayed several times on pre-race communication in the months and weeks before the race to all athletes. This is non negotiable.

The mandatory kit will be as follows: spare long sleeve base layer (not to be worn unless in emergency), waterproof jacket with taped seams, minimum of 10,000 hydrostatic head, hat, gloves, high vizibility jacket/ running vest, rear red light to be switched on at dusk, headtorch $\times 2$ with spare batteries, whistle for alerting help, fully charged mobile phone with race medic number and race director numbers installed, foil blanket, nutrition and fluids to last 13 miles.

This is a minimum requirement and athletes will be encouraged to take more kit if they feel it necessary.

## Trackers

All athletes will be issued with a GPS Tracker (Property of GB Race Tracker) at registration. This will enable the exact location of athletes to be identified at all times by the race director and race medics. The trackers also have an emergency SOS button that can be pressed in the case of an emergency. This alerts both the race directors and also the race medics instantly.

Risks identified

For more detailed information please see the attached risk assessment.

In summary:

## MEDICAL RISKS

1. COVID-19: Coming into contact with virus droplets (air-bourn, surface contact or personal physical contact) from a participant or Event Team member who has symptoms or who is infected with the virus. Runners will be advised not to attend the event if they have any symptoms of Covid-19 or have tested positive in the days before the event.
2. Dehydration. Athletes should drink to thirst. Make sure you train with drinks that you find palatable to avoid nausea.
3. Effects of Cold/Hypothermia: With wet conditions and/or moderate to high winds, coupled with hours of running, particularly when a runner is tired/injured, Hypothermia can be a RISK. Initial warning signs include disorientation, confusion and extreme tiredness. Staying well prepared for conditions, i.e. suitable clothing, along with being well-nourished and adequately hydrated, will help avoid hypothermia. Carry Emergency Supplies on the day, look at the forecast and carry additional clothing if necessary, along with the mandatory kit for the race.
4. Use of Drugs: No drugs of any kind should be taken unless prescribed by the Doctor (please be aware of possible side effects, i.e. thinning of the blood, etc).
5. Injuries: Careful with your footing. Overuse injuries/wear and tear, along with sprains and strains, etc, are a risk.
6. Common Fatigue: Leading to confusion. Checkpoints are evenly spread so help is close at hand.

## WITHDRAWAL

During the event - If runners need to drop out of the race for whatever reason they will be advised that they MUST inform a Race Marshal at one of the checkpoints or by calling Race HQ on the phone numbers provided.
This will ensure all participants who are registered and pull out of the race are accounted for, allowing for the accurate and safe running of the event. If a participant withdraws, they must do so at a checkpoint. At a checkpoint they must hand over their 'Race number \& GPS Tracker' to race staff to signal their retirement. The tracker will then be disinfected, switched off and updated online. Marshals will inform the race organiser and each of the remaining checkpoints can also update their event records.
Although ultimately decisions to continue are in the hands of the runner, Marshals and race medics, upon discussion with the race directors, reserve the right to pull any participant out of the race on health grounds. This decision is final. Overall cut off is 14 hours for the 50 mile race and 9 hours for the 50 km race.

- Please note that cut-offs will be enforced. To avoid being disqualified, runners must arrive at the checkpoint before the cut-off and exit the checkpoint no later than 20 minutes after the cut-off time.
- If we believe the safety of participants or members of the public is being compromised in any way, we reserve the right to stop a runner from competing in this event at any time.
- Upon withdrawal from the race, it is the responsibility of the individual to get themselves home (or to the event finish if required). Where possible, runners withdrawing may be able to be transported by marshals or the sweeper vehicle from a checkpoint back to Race HQ however this cannot be guaranteed and priority will be given to runners still participating in the race. Event support transport may therefore only be available after a checkpoint closes before transport back to the finish is possible and may involve intermediate stops at other checkpoints on route.


## EMERGENCY INSTRUCTIONS GIVEN TO EACH ENTRANT

If minor injury, seek advice from the Event team at a Checkpoint or by calling Race HQ.
Only in an Emergency (a threat to life, limb or immobilised)

1. Use foil/thermal blanket and use spare clothing
2. Trigger SOS button on tracker. Gently press the button underneath the Race Tracker logo on the front of the tracker for approximately 3 seconds
3. Phone 999, ask for Ambulance
4. Call the Race Director/Race HQ. Speak to Race HQ, leaving a message may NOT be sufficient.
5. Attract attention from fellow runners and those nearby by shouting, using whistle, using torch.
If you are not well, or need assistance, please make this known to the marshals at one of the checkpoints. Checkpoint staff will duly inform further Checkpoints. If you or another runner feel unwell or require assistance between checkpoints, call Race HQ and activate the SOS Button on the Live Online GPS Tracker.
In the event of a 'Medical Emergency', you should dial 999 first, and then contact Race HQ on the numbers above. We will inform our Medical team in an emergency.

## OTHER RISKS

Uneven and muddy terrain in sections, slippery surfaces, but at no stage does the course run too close to the edge of the river to make falling in a risk. There are sections of running along some country roads and inevitably occasional road crossings. Athletes will be advised to wear hi Viz and also have a rear flashing red light at night and 2 headtorches. Marshals will be at major road crossings which have been kept to a bare minimum by route planning.

Getting lost - should athletes get lost and have already asked for directions back onto the trail and are still unsure, we would suggest they use the live tracking to check their position and attempt to navigate back to the course. If unsure then calling Race HQ may rectify the issue. All athletes will be issued with a highly detailed gpx of the course prior to race day and the course as well as being marked by the Weaver's way signs will also be marked with biodegradable tape.
Athletes will also be encouraged to download the what 3 words app as this can be used as a very useful adjunct to locate a runner if all else has failed.

## Medical cover:

## MEDICAL ASSISTANCE \& SUPPORT

Members of our medical team will be on hand throughout the event. Although largely a trail event, due to the nature of the event runners will be passing through some urban areas and there are inevitably some road crossings where it will be necessary to slow and to stop. Particular attention should be given at these points. As always, runners will be advised that if they see a runner experiencing difficulty to inform Checkpoint Marshals at the next checkpoint. The event safety team will always endeavour to reach any participant but in some parts of the trail this can take time. Participants who lose time helping another fallen participant, struggling against the cut off time due to this reason, can claim this time back, subject to Race Directors discretion and availability of Event and Medical staff, and under the proviso of completing within their new, extended cut off period.

## MEDICAL PERSONNEL

There will be a team of race medics available throughout the duration of the race. These have already been identified and agreed to cover this race. Details available on request.

There will be a minimum of 2 first aiders both mobile and with full kits including defibrillators who will be in attendance from when registration opens to when the last runner is back safe.

They will have uniform so are easily identifiable and will be introduced to all runners at the race brief. They will mark their vehicles with magnetic signage and each first aider will have the ability to walk out onto the course if needs be. All their kit is in rucksacks and they are all capable outdoors runners and instructors.

The medics that we will employ are all very experienced race medics and have covered numerous ultramarathons in the past. They will record all interactions and write a risk assessment and policy for the event which can be shared if needed for event planning purposes.

There will also be a static medical aid station at the finish point.

Runners will be advised in the weeks leading up to the race to take note of medical information and advised that if they suffer an injury or accident that warrants direct medical attention and are not able to get to an aid station to contact the race medic on the number provided to them in the information that will be sent out before race day.

Due to the nature of the course some of the portions of the course are off road and so in some areas the medics may take some time to reach a casualty, or potentially be out of contact for some time tending to other runners. This is a rare occurrence but one that needs to be planned for. So in an emergency runners will be advised to call both our medics AND 999. If they are injured but able to walk, they will be advised to make their way to the nearest aid station where there will either be a medic, or the aid station captain will immediately get in touch with medical care.

If they suffer a severe injury, encounter someone in serious difficulty or are in any doubt at all runners will be advised to call 999 for emergency ambulance services.

Pre-existing medical conditions

Ultrarunning is a strenuous activity. All athletes will be asked to declare any pre-existing medical conditions on their race entry. They will be informed that there are risks to ultrarunning as described above. The risk assessment will be visible on our website.
On the reverse of the race numbers that athletes will wear pinned to their front there will be space to write down emergency contact details, phone number of next of kin/ emergency contact, existing medical conditions, existing medication and any allergies. This will assist medical teams in case of emergency care being required.

