

# TECHNICAL DELEGATE REPORT

#### **IMPORTANT**

The purpose of this report is to give the FEI an overall view of the organisation and running of the Event. Please send this report by e-mail to FEI HQ within 10 days of the Event's conclusion at eventingreports@fei.org.

NEW: As of January 2024, kindly note that you are also responsible for filling in and submitting your Key Event Requirements responses on the KER platform.

The first four pages of this report will be sent to the Organiser of the Event by the FEI to help improve future Events.

#### 1. EVENT DETAILS

Event name / Co	untry
Levels / Categor	ies
Date	
Numbers of Dres	ssage starters per level
Event Director /	Email address
Technical Deleg	ate

#### 2. OFFICIALS

Please confirm the Officials present during the Event by stating a name for each function below, if applicable. Kindly note that in case of discrepancies with the original schedule, the information provided below will prevail.

FUNCTION			
	LEVEL:	LEVEL:	LEVEL:
<b>Ground Jury President</b>			
Member			
Member			
Jumping Judge			
Technical Delegate			
Assistant TD			
Course Designer			
Assistant Course Designer			
Course Advisor			
Jumping Course Designer			
Chief Steward			
Veterinary Delegate			
Additional Veterinary Delegate			
Veterinary Service Manager (VSM)			
Chief Medical Officer			
Athlete Representative(s)			
Cross-Country Controller			
Scorer / Results Manager	PENING HUSSEIN DUNGING CT	41 21 310 47 47	



# **OFFICIALS** continued (in case of more than 3 competitions)

FUNCTION			
	LEVEL:	LEVEL:	LEVEL:
Ground Jury President			
Member			
Member			
Jumping Judge			
Technical Delegate			
Assistant TD			
Course Designer			
Assistant Course Designer			
Course Advisor			
Jumping Course Designer			
Athlete Representative(s)			

## 3. EVALUATION OF EVENT (to be shared with OC)

Please rate the following areas of organisation and provide as much details as possible, particularly concerning areas in need of improvement. Please include confidential remarks on separate page(s).

#### This form will be sent to the OC/NF by the FEI after the Event with additional comments.

Please provide an evaluation for each category on a scale of 1 to 5 (1=Unsatisfactory / 2=Must Improve / 3=Needs Some Improvement / 4=Successful / 5=Excellent)

AREA	DIRECTIVED	SCORE 1TO 5	COMMENTS
Horse Inspection(s)	Ground, separation from public, collecting & holding areas, direction signs, documents		
Dressage	Ground, arena, marking, judges facilities, separation from public, documents, inspection of tack		
Training & Exercising	General exercise, galloping, Dressage & Jumping warm up areas		
Cross-Country Warm Up/ Finish Area Facilities	Area, ground, fences (number and type) separation from public, facilities for horses (water, farrier, ice), PA system		



Cross-Country	Course, ground, obstacles, marking,
•	separation from public,
	measurement, plan
Cross-Country	Officials, documents, timing,
Administrative	maintenance of footing & obstacles
	maintenance of recalling a decidence
Organisation	
C	Dadia appropriation along definition
Cross-Country	Radio communication, clear definition
Control Centre	of responsibilities, facilities, fence
	judges education
	7
Jumping	Standard of Course building,
oupg	maintenance of footing, standard of
	Jumps, starting order (publication
	and adherence to FEI rules), plan
	**
Prize giving / Priz	
<b>Money Distributio</b>	n clear definition of the Stewards
	directives, report of any issues
	directives, report of diff issues
General	Event Layout and Event Preparations
General	Event Layout and Event Freparations
Event Office	Personnel, facility, competitor/public
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Event Office	info, Timetabling
Event Office	
Event Office	
Event Office	
	info, Timetabling
SIMP	info, Timetabling  Serious Incident Management Plan,
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Veterinary Services	Daily services, emergency response
Press (If applicable)	Press & media centre, press officer, Wifi access
Public (If applicable)	Traffic, parking, facilities, attractions, announcing, programme, information, catering

#### **EVENT DEBRIEF**

When, how, and with whom was the Event debrief conducted?

What were the main raised subjects?

**GENERAL IMPRESSION OF EVENT** 

**RECOMMENDATIONS FOR FUTURE EVENTS** 



# 4. OFFICIALS EVALUATION (for internal use only)

Please provide an evaluation for each category on a scale of 1 to 5 1=Unsatisfactory / 2=Must Improve / 3=Needs Some Improvement / 4=Successful / 5=Excellent

POSITION	SCORE 1 TO 5	COMMENTS ON ASPECTS THAT NEED IMPROVING
Ground Jury		
Assistant TD		
Cross Country Course Designer		
Cross Country Builders / repair team		
Show Jumping Course Designer		
Chief Steward		
Veterinary Delegate		
VSM		
OC/General Event Personnel		
Results manager		
Press Officer		
Medical Services		
Stable Manager		



# 5. ADDITIONAL FEEDBACK (for internal use only)

Do you have any additional information/feedback you wish to share with FEI HQ concerning this Event?

## **Medical Information**

If **NO** at any of the below, please comment.

	УES	NO	COMMENTS	
Was the Athletes' valid contact information (next-of-kin) collected by the OC? (Art. 523.1 a)?				
Were Athletes with a medical condition reminded that they needed to wear either a medical data carrier or medical armband? (Art. 523.1 b)?				
Medical Services were recommendations followed (Eventing Rules annex D)?	?			

# **Veterinary Information**

If **NO** at any of the below, please comment.

	YES	NO	COMMENTS
Were all Horses stabled on site?			
If Horses were not stabled on site, how was stewarding organised?			
Please provide additional information in regard to a	ny veter	rinary incide	ents, injuries or other.



### **6. SANCTIONS**

To be Completed and signed by the President of the Ground Jury or by the Chief Steward and returned to the Technical Delegate. Please list below

- Eventing Recorded Warnings (FEI Eventing Rules Art. 523.3 and 527, Dangerous riding, minor cases of abuse of horse, leaving the venue without Medical or Vet check)
- Yellow Warning Cards (FEI Eventing Rules Art. 526 Abuse of Horse, incorrect behaviour, Non-compliance with applicable sport rules)
- Other Complaints, Appeals, Objections, Incorrect behaviour, Non-compliance with applicable sport rules

NF	Horse	Name of athlete	Type of sanction	Description of incident or type of abuse	Outcome	DSQ (Y/N)	25 penalties (Y/N)
Were th	e Athletes made aware o	of the above irregularities	before leaving the show	ground? YES	NO		
Na	ame						
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/ .	CK	<b>U</b> 3	3-C	U	ואואוי			KJE

Level	_		
X-C Lenç	th of course		
X-C Spee	d (m/min.)		
X-C Opti	num time		
Total nur	nber of Jumping efforts		

	УES	NO	COMMENTS
Was/were the course(s) up to FEI standard?			
If different level of competition were held on the same venue, please confirm that all courses were significantly different?			
Did the Ground Jury inspect the Cross Country course in due time prior to the start of the competition? (Art. 515.2.2)?			
Was the Cross Country course finished at time of inspection?			
Was any fence removed on course? If YES, please send us a picture of the fence.			

### **Course designer feedback** (to be filled with the Course Designer)

Were you happy with the way the course(s) rode? YES NO If no, why not?

Were there any particular fences which did not ride as expected? YES NO

If so, what were they, and in what way did they not ride as expected? This includes fences, which may not have incurred any penalties yet did not ride well. Please include photos of any such fences.

How would you (CD and TD) rate the degree of difficulty for the level - too soft, just right, too difficult – for what reasons?

What will/might you do differently going forward as a consequence of what you have seen?

Any lessons learned regarding frangible devices?

#### 8. MAJOR INCIDENTS

Please list in the below table and provide pictures of:

- Obstacles causing a rotational fall
- Obstacles causing Horse falls (Art. 549.5.2)
- Obstacles causing a serious accident to Athlete and/or Horse
- Obstacles moving: please describe why the obstacle moved, which system was used to anchor the fence to the ground and send pictures of the obstacle before and after it moved (showing the anchoring system whenever possible).

Fence n°	Height	Drop	Top spread	Base spread	Jumpable width	Distance to the next fence
COMMENTS:						

### HORSE FALL INTERVIEW(S)

Did you conduct any interview/discussion with an Athlete following a Horse Fall on Cross Country? YES NO If yes, please provide the name of the Athlete and Horse, along with the level they competed at.

## 9. FRANGIBLE/DEFORMABLE DEVICES

If any of the devices were activated, please fill the following table. If 2 or more activations occurred at the same fence, please send us a picture of the fence and the fence dimensions.

If a frangible / deformable device was broken and 11 penalties were not given, please indicate the reasons why.

Course	Fence n°	Horse name	Athlete fall (y/n)	Horse fall (y/n)	11 penalties (y/n)
COMMENTS					
COMMENTS:					

#### FALLS/INJURIES LIST OF ATHLETES 10.

To be filled out by the Chief Medical Officer. Please make sure injured or fallen Athletes have been checked by the CMO before leaving the Venue. (FEI Eventing Rules Art. 523.3)

INTRUCTIONS: injuries are recorded by categories based on their severity, except concussion which is considered as a category in itself.

- 1 Injuries by categories of severity:
- No injury: no recorded injuries
- Minor: one or more of the following injuries: sprains, bruises, and cuts judged not to be severe, treated on site
- Serious: transferred to hospital for one or more of the following injuries: major fractures, (including all compound fractures, but excluding simple fractures of clavicle and wrist), crush injuries with suspicion of pneumothorax, ruptured spleen etc.
- Fatal (NB: serious or fatal injuries should be immediately reported to the Eventing Department of the FEI (contact Catrin Norinder +41 78 750 61 39) by the Technical Delegate for appropriate follow up with the Athlete's National Federation).
- 2 Concussion

Please indicate below the Athletes checked by the CMO WITH recorded injuries

Incident location (e.g. fence n°)	Athlete (name and FEI ID)	Horse (name and FEI ID)	Provisional diagnosis	Athlete NF to be notified (tick if follow up Is required)i	Minor injury	Serious injury	Concussion (diagnosed using crt)	Fatality

Please indicate below the Athletes checked by the CMO with NO recorded injuries

Incident location (e.g. fence n°)	Athlete (name and FEI ID)	Horse (name and FEI ID)

Were there any accidents involving others (grooms, volunteers, officials, spectators, other)? YES NO If so, please provide a separate report stating the name, involvement (groom, volunteer, official, spectator, other), location of accident, type of injury, action taken.

**Chief Medical Officer** 

Phone number and Email

**Signature** 

# 11. FALLS/INJURIES LIST OF HORSES

To be filled out by the Veterinary Delegate. Please make sure injured or fallen Horses have been checked by the Veterinary Delegate before leaving the Venue. (FEI Eventing Rules Art. 523.3)

INTRUCTIONS: injuries are recorded by categories based on their severity, except concussion which is considered as a category in itself.

- 1- Injuries by categories of severity:
- No injury: no recorded injuries
- Minor: one or more of the following injuries: sprains, bruises, and cuts judged not to be severe, treated on site
- Serious: fractures, severe soft tissue injuries, severe cuts or lacerations, etc.
- Fatal (NB: serious or fatal injuries should be immediately reported to the Eventing Department of the FEI (contact Catrin Norinder +41 78 750 61 39) by the Technical Delegate for appropriate follow up with the Athlete's National Federation).

Please indicate below the Horses checked by the Veterinary Delegate WITH recorded injuries

Incident location (e.g. fence n <sup>°</sup> )	Athlete (name and FEI ID)	Horse (name and FEI ID)	Provisional diagnosis	Athlete NF to be notified (tick if follow up Is required)i	Minor injury	Serious injury	Concussion (diagnosed using crt)	Fatality

Please indicate below the Horses checked by the Veterinary Delegate with NO recorded injuries

Incident location (e.g. fence n°)	Athlete (name and FEI ID)	Horse (name and FEI ID)

**Veterinary Delegate** 

Phone number and Email

**Signature**