

**Riverside School**  
**Hydrotherapy Pool Policy**

**Policy approved at Governors' Board Meeting No 6:**

**30 March, 2023**

***(Policy to be reviewed biennially)***

***Next review date – Spring Term, 2025***

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## INTRODUCTION

The guidance contained in this Hydrotherapy Pool Policy is based on The HSE document "Managing Health and Safety in Swimming Pools". It also takes into account as a pool operator, The Management of Health and Safety at Work Regulations 1999 (MHSWR)3, which lays out that an assessment of the risks which may affect employees, and others, as a result of the activity, must be carried out.

Everyone involved in the provision of hydrotherapy at Riverside is made aware of all guidelines and procedures to ensure the safe and effective use of pool facilities at all times. It is a requirement, that all staff and service users in the school, who use the hydrotherapy pool, must read a copy of this policy before using it and adhering to its content.

The Hydrotherapy Pool Policy provides:

- guidance on the control of pool health and safety risks and maintaining a safe plant and the required equipment
- guidance on safe handling and use of pool substances
- information, instruction and supervision for employees and records the need to ensure all have adequate training
- maintain safe and healthy working conditions and to review and revise this policy at regular intervals

HYDROTHERAPY POOL DIMENSIONS	
DIMENSIONS	5,950MM X 3,800MM
WATER VOLUME	25,00 LITRES
POOL DEPTH	1,000MM X1,20MM
TURNOVER RATE	20m3 HOUR
CIRCULATION FLOW RATE	1.25 HOUR
FILTER BACKWASH FLOWRATE	7.07 LITRES/SECOND
UNDERWATER LIGHTING	50W HALOGEN
FINISHES	GLASS MOSAIC TILES
TEMPERATURE	36C
PURIFICATION SYSTEMS	SIEMENS-STRANTOL SYSTEM 3

*Designed and built by :Rainbow Pools London Limited, The Tannery, Queen St, Gomshall, Surrey, GU5 9L*

## **LEAD STAFF**

Headteacher	Martin Doyle
Training Leads	Kelly Whiting/Oona Bradley
Pool Maintenance	Derek Martin

## **RATIONALE FOR HYDROTHERAPY**

The pool is used where access to a public swimming pool is deemed inappropriate due to size temperature, changing facilities, environment and children and young people's needs. The pool is used to meet all students' therapeutic needs and maintain their wellbeing. We aim to provide:

- opportunities for students to explore their environment and develop confidence in the water
- opportunities for freedom of movement, balance, weight-bearing and coordination
- physiotherapy routines, circulation, exercises and toleration of touch
- the development of communication skills and a safe environment for fun and relaxation
- access to learning through sensory programmes in the pool
- post-operative support when required

## **ACCESS TO HYDROTHERAPY**

The students' health/medical/behavioural suitability for hydrotherapy must be thoroughly assessed before consideration of any hydrotherapy programmes. Any moving and handling issues must be risk-assessed by the Manual Handling Coordinator and classteacher and an appropriate programme made available to all staff involved.

The students' confidence should be taken into account and their Sensory, Behaviour and Communication Profiles should be shared as appropriate.

The session lead must have full knowledge and understanding of the pool use, safety and evacuation procedures and will be responsible for the health and safety of the session. They will also ensure there is an appropriate staffing level, depending on the ability and safety requirements of the group. Staff should be aware of the social, psychological and cultural implications for the students and staff involved in the session.

All staff will attend relevant pool training pertinent to working within the pool, in the pool area and they must read the policy. Training must include pool management

and safety, pool evacuation, emergency/fire evacuation, health and safety and manual handling.

## **FACTORS AFFECTING ACCESS TO HYDROTHERAPY**

For advice on all these areas please consult with MDT professionals in the school, including the school nurse, prior to including students in hydrotherapy sessions.

- Poor respiratory competence or medical instability.
- Infections such as fungal, bacterial or viral.
- Where moving and handling equipment or facilities are not safe for access [e.g. no hoist].
- Allergies to chlorine, eczema, asthma attack, prior to the session seizure. Invasive tubes which cannot be covered.

## **STAFF RESPONSIBILITIES**

All staff have a duty of care that operates for any activity in which students are involved; staff cannot transfer that duty of care to anyone else. In relation to swimming, this means that classteachers will ensure the appropriate planning and risk assessments are in place to ensure:

- There is a correct ratio of staff to students.
- Students are appropriately supervised when changing, and the schools' intimate care policy is followed.
- Students are under control at all times.
- Normal and emergency procedures are understood.
- They have an overview of all students while in the pool.
- They set objectives and know what progress their students are making with their swimming or other skills while in the pool.
- Ensure that no glass is brought into the pool area.
- Ensure that where possible no jewellery is worn in the water.
- Ensure students and staff have access to water or suitable liquids after their session.
- Ensure only trained staff use the hoists. Ensure risk assessments are read and understood by all staff.
- Ensure entry and exit to the pool is safely carried out.
- Report any faulty equipment or hazards to the appropriate personnel.

## **HEALTH & SAFETY**

Overall responsibility for the safe use of the pool rests with the Headteacher, who must ensure procedures are in place for:

- The plant room, testing water and chemical treatment.
- Cleaning the pool and pool area and access to the pool.

- Regular maintenance and servicing of specialist equipment
- Emergency procedures including evacuation in the event of fire.
- Risk assessment of the pool
- Supply of appropriate First Aid Kit
- Access to appropriate training for staff who use the pool.

There must be a minimum of one member of staff trained in First Aid on the premises, and at least one staff member trained in Basic Life Support or holding a nationally recognised award such as The Aquatic Therapy Shallow Pool Rescue Award [ATSPRA] within the pool area during all periods of use.

In the event of an accident occurring which requires first aid, this must be recorded on the accident form. Accidents where a student is hospitalised should be reported under the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1995 (RIDDOR).

Risk Assessments must ensure that each session is staffed by competent people able to make productive decisions in any eventuality. Those involved in the sessions must ensure that they have read and understood the risk assessments. Risk assessments will always be submitted to the Team Leader or member of the Leadership Team for approval. Staffing levels may need to be increased if appropriate, or session times changed in order to respond to the situation on the day.

## **MEDICAL GUIDANCE**

Specific medical guidelines are to be available for students who have medical conditions such as diabetes, epilepsy, require suction, etc. and these must be incorporated into their Risk Assessments.

If a student has a seizure whilst in the water they should be supported safely, away from the edge of the pool, and removed from the water once it is over. Then the student can be removed to the poolside by e.g. staff transfer, hoist (as deemed safe and appropriate on each individual occasion) and the student placed in the recovery position on a mat or changing bed.

If a student is prescribed emergency medication e.g. Buccal Midazolam, suction, this must be accessible to them during the session.

This medication can only be administered by a member of staff trained in its administration and following the Care Plan for each individual student. In accordance with medical advice, students who have gastrostomy tubes or catheters must have them covered, by a trained member of staff, before entering the pool.

Judgments on the length of time students and staff spend in the pool should be made taking into account the water temperature, air temperature, students' medical conditions and effects of increased temperature on the circulatory system. However there is specifically recognised advice which states that no student should be in the water longer than 30 minutes during any session.

No staff in the pool area for longer than 1.5 hours without a 15 minute break. Also no one should spend more than 3 hours (in total) in the water on any one day. Staff should make a decision on very hot days, as to whether it is safe to use the pool, bearing in mind the air temperature within the pool area.

Two Ann-yann Pool Evacuation Sheets are kept at the side of the pool for emergency evacuations, if its use is appropriate, (e.g. epileptic seizures, hoist failure etc.). The sheets are tested to loading of at least 262.5 kg for extended periods. Staff who use the pool are given training/instruction in the use of the sheets.

Otherwise emergency evacuation is via pool hoist and sling only are undertaken by trained staff. Risk assessments are carried out for pool exit procedures and are available to be implemented in case of hoist failure.

Infectious skin complaints – should be treated/ covered before swimming can take place. The school may ask that a GP is consulted prior to swimming, in order to safeguard all users. The school reserves the right not to allow a student to have hydrotherapy e.g. if they have newly returned from an absence due to illness/surgery. No student or member of staff can swim for a period of 2 days following an episode of diarrhoea.

Staff should seek initial advice from the schools' physiotherapist for hydrotherapy sessions, for every student that is seen by the physiotherapist. Further advice must be sought if the students' physical needs change.

There should be appropriate safe storage of floatation devices, sensory water resources at the end of each session Daily storage and laundering of student swim wear and towels belonging to the school to be laundered by class staff. Other personal swimwear will be sent home with the student at the end of the day

## **EMERGENCY EVACUATION + PROCEDURES**

A key role of all staff using the pool is to remove or reduce the chances of students getting into difficulty whilst in the water. This requires staff using their training to avoid incidents by early intervention to any given situation. However when an incident does occur it is important that all staff know how to proceed.

### On hearing the fire alarm:

- Students/pool-users will be immediately hoisted into their wheelchairs and wrapped in survival blankets and dry towelling robes. Survival blankets need to be provided in the pool area.
- Ambulant students will exit the pool in a calm and supervised manner following their individual moving and handling risk assessment, they must also be wrapped in survival blankets/towelling robes
- The Spotter will sweep the zone and assist in evacuating the students from the pool area. Staff will follow the emergency evacuation route leading them to the exit doors, through the opposite classroom and out into the playground area

- They will only return to the pool area when instructed to by the chief fire marshals.
- If informed of a fire drill by a member of the leadership team, swimmers may remain in the pool

#### Lighting Failure.

- The pool should be cleared immediately and all staff and students move to a safely lit area.

#### Lack of Water Clarity.

- If the water is cloudy or milky, it cannot be used and will be out of order until tests are completed and balance restored. The campus Facilities Manager will need informing

#### Chemical Leak.

- In the event of a chemical leak or suspected leak staff need to follow procedures as for fire evacuation.

#### Minor Incident.

- A minor incident is one that can be managed and is not life threatening.
- However it may result in an amendment of a risk assessment. All such incidents must be reported by completing the appropriate accident/incident forms and informing a member of the leadership team.

#### Serious Incident

If a student or member of staff in the water requires medical attention a member of staff in the water will ensure the safety of that person. If there is a suspicion of a spinal injury they will not be moved unless they are face down.

- If a student is conscious and safe the hoist may be used to exit the water. If the student is unconscious then they must be removed from the pool the safest way, a minimum of two staff would need to be in the water and staff available on the side. One adult must give the instructions using 1, 2, 3, or '*ready, steady, move*'.
- If a student is having a seizure they must be monitored carefully and once over removed from the pool by staff transfer or hoist if deemed safe. The student should then be placed in the recovery position. If prescribed Buccal Midazolam this must be accessible during the session and administered if needed, as stated in their care plan, by qualified staff.
- Carry out first aid procedures until help arrives.
- Breathing and airways need to be monitored carefully in the event of any incident.

- The Spotter will take charge of the evacuation of the pool as necessary and raise the alarm.
- The emergency service will be called by the office if needed.
- In the event of a serious incident a report to Reporting of Incidents, Diseases and Dangerous Occurrences Regulations 1995 [RIDDOR ] should be made.

#### Procedures for Dealing with other Incidents.

There may be occasions where staff have to deal with vomit, diarrhoea or faeces. In the case of any of the above the pool should be evacuated and all students and staff shower thoroughly. Inform the site officer & Head Teacher immediately.

### **GUIDELINES FOR SESSIONS**

- All students require parental permission to use the hydrotherapy pool. All forms will be kept in the student's personal details file and also in the main hydrotherapy file kept by Kelly Whiting/Oona Bradley.
- Where possible students should bring their own swimming kit from home. However school can provide kit if it is not sent in. All students requiring specialised swim wear e.g. swim pants will have them provided by the school.
- If costumes are modified for religious or cultural reasons, e.g., covering arms and legs, they must be tight-fitting to prevent becoming water-logged.
- Students should be encouraged to use the toilet before entering the pool.
- All staff should wear disposable overshoes while in the pool area.
- No student should enter the water unless specifically instructed to do so.
- An appropriately trained member of staff must remain poolside. This person must hold a first aid / resuscitation / life saver certificate. They are the 'Spotter' and must not have responsibility for supervising students on the side. If other students need supervision then more adults will need to be poolside.
- They must carry out a visual inspection of life saving resources/devices and ensure the safe use of floats. Students must not jump on or stand on floats or swim underneath them.
- The Spotter should be aware of the risk assessments in place for the group. They should report any faults seen to their Team Leader and note in the site management team hazards/damage book.
- All accidents, incidents and near misses are to be recorded in the accident/incident book. The book is kept in the meeting room.

- The Spotter must not leave the poolside until all students have left the water and must also ensure the pool area is vacated correctly before the door is closed and fob locked.
- Training and updates will be identified, arranged and monitored by the Deputy Head who also keeps training records. Attending training sessions/refreshers is a requirement.
- Staff are responsible for recording behavioural incidents during pool session following the schools policy.

## **RISK ASSESSMENTS**

- Students using the pool must have an individual risk assessment as appropriate, or be part of a group risk assessment.
- This would include looking at hazards, pool competency, behaviour, medical needs; level of support in the water and pool manual handling risks. A copy of the risk assessment should be laminated and taken to pool sessions.
- Staffing levels must be appropriate for the needs of the group.
- Those with complex needs and epilepsy may need 1:1 in the water and must be stated in the risk assessment.
- Students following The Halliwick Programme are not required to wear flotation aids [because it does not advocate aids] However they should be supported fully.
- Students not following Halliwick may need flotation.
- Any pregnant staff should have a Risk Assessment to take into account their changed circumstances. A pool with a temperature of 31° C is to be avoided during pregnancy.
- Any damaged, broken or malfunctioned equipment i.e. Hoist, sling, changing bed, lighting is to be reported immediately to the site officer and Headteacher.

## **CLEANING AND MAINTENANCE**

- Following the session, the Spotter must ensure that all service-users have vacated the pool and associated rooms by sweeping the area, lights are turned off and ensure that the pool entrance doors are closed off via the fob system before vacating the area.
- The pool cover is replaced at the end of the school day by the Premises and Cleaning team.

- The Premises Team are responsible for all heating, cleaning and maintenance. The pool room must be kept closed at all times; areas are accessed by key and a fob system. They are also responsible for the heating of the pool water and the ambient air temperature.
- The Premises Team check functioning of the poolside alarm daily (first thing in the mornings – rings in main office).
- Chemical balance and safe storage and use of the chemicals needs to be as per instructions and is the responsibility of the trained site staff. The above mentioned procedures can be viewed in the hydrotherapy pool log book and pool maintenance risk assessments.

## **MONITORING & RECORDING**

The Headteacher is responsible for maintaining the following records.

- Appropriate risk assessments.
- Pool safety operation procedures.
- Records of incidents and accidents.
- Records of pool tests.
- Records of pool use.
- Qualifications and training of staff.
- Policies and Procedures.
- Hire arrangements.

## **POOL MANAGEMENT**

### Access

The entrance to the pool must be locked at all times. There must be adequate signage for exits to ensure safety in an emergency evacuation.

### Flooring

All flooring must be slip resistant. The pool areas must be cleaned on a regular basis with appropriate cleaning materials. All users must wear protective footwear over shoes [disposable plastic shoes].

### Equipment

There should be adequate safe storage both poolside and in all changing areas. All flotation aids must be checked by session staff to ensure they are fit for purpose.. Pool beds and changing beds to be wiped down by session staff. All equipment e.g. hoists, should be serviced and maintained through the schools' service level agreement/maintenance contract.

### Chemicals

All chemicals and water treatments must be stored away from the pool. There must be adequate disposal facilities for incontinence wear.

### Electrical

Appropriate lighting needs to be inset and any faults reported immediately. The alarm system must be checked regularly. All electrical standards must be met as for installations and electrical fixtures. BS: 7671 Regulations.

### Signage

Ensure there is clear signage for emergency exits and pool depth as appropriate. Also the emergency alarm [ if available] and storage. There should be a clock on the wall visible from pool to ensure session times or timing of a seizure.

### Pool Users

Every precaution should be taken to avoid water contamination. Students at risk of incontinence during a pool session should wear protective swimwear. Pool contamination will result in the area being out of action for at least 24 hours. Where possible encourage all students to use the toilet before the session.

Students with epilepsy should only attend if they are well and their epilepsy well controlled. Those with emergency medication should have it with them at the pool.

Wounds should have waterproof dressings. Students with gastrostomy sites must have them taped before entering the pool.

## **STAFF ROLES**

### The Session Leader

The Session Leader has overall responsibility for the session. They will compile hydrotherapy plans for the group and share with all staff. They will allocate staff to their role for the session. The leader will be aware of water quality and temperature, moving and handling procedures, risk assessments, equipment needed, hygiene, incident procedure and who the Spotter is.

### The Spotter

One Spotter per session is required. The Spotter must have access to relevant training and updates including basic first aid.

The Spotter is required to observe the session from the pool side. and be aware of any situation which might compromise the session or cause any risk. This then needs to be reported to the session lead.

They should be there as the first student enters the water and remain poolside until the last student leaves.

The Spotter needs to be able to move around the poolside to view from every angle.

If an emergency occurs the Spotter needs to be vigilant and alert the session lead.

The Spotter then follows instructions from the lead. The Spotter has the evacuation plan and will organise poolside equipment to support the emergency e.g. towel, medication, Keifer board.

The Spotter should be aware of all risk assessments and behaviour plans.

If there is a casualty, it is the responsibility of the lead to ensure they are lifted from the pool safely and for other staff to ensure safety of the others. If necessary a member of the Leadership Team will inform parents, and call for an ambulance if required.

The Session Leader will ensure the correct reporting forms are completed as soon as possible. There will be a debrief with a member of the Leadership Team.

## **STAFF AWARENESS**

- Be aware of wet floors and hot pipes.
- Be aware of exits and alarms.
- Be aware of equipment in the pool area.
- No outdoor shoes to be worn in the pool area.
- No wheelchairs at the pool side.
- Please shower before entering pool.
- No student is to approach the pool side without an adult.
- Students must wear flotation aids as appropriate.
- All entry to and exit from the pool must be via steps or hoists.
- If a student starts to soil or vomit remove them from the pool as soon as possible. Then clear pool and inform site team.
- No jewellery to be worn in the pool unless it cannot be removed.
- No glass should be brought into the pool area.
- The pool door must be closed during all sessions and after groups leave.
- Staff must be vigilant at all times.

**Appendix 1 Riverside Blank Risk Assessment – Hydrotherapy Pool**

HAZARD	RISK	INDIVIDUALS AT RISK	RISK RATING LOW MEDIUM HIGH	CONTROL MEASURES: CURRENT	CONTROL MEASURES: PROPOSED	RESIDUAL RISK	SIGNATURE
MEDICAL/BEH AVIOURAL	WHAT HARM	NAME		WHAT HAS BEEN DONE	WHAT NEEDS TO BE DONE	AFTER NEW CONTROLS IN PLACE	

**Appendix 2 –Riverside Risk Assessment Example – Hydrotherapy Pool**

HAZARD	RISK	INDIVIDUALS AT RISK	RISK RATING LOW MEDIUM HIGH	CONTROL MEASURES: CURRENT	CONTROL MEASURES: PROPOSED	RESIDUAL RISK
Moving Student	Back Injury	Staff	High	No student to be lifted.  Hoist to be used	Drag sheets for emergency	Low
Water Quality	Inability to see student /staff clearly	All	High	Regular water checks by site officer	No entry to water if not clear.  Laminated check sheet on wall	Low
Equipment	Falling In	Students	Low	All equipment to be stored after each session.	Adequate storage available.	Low

HAZARD	RISK	INDIVIDUALS AT RISK	RISK RATING LOW MEDIUM HIGH	CONTROL MEASURES: CURRENT	CONTROL MEASURES: PROPOSED	RESIDUAL RISK
Slipping on steps	Various injuries	Students	Medium	Handrail in place, students enter with staff support	Highlight steps with coloured non slip tape	Low
Seizure	Loss of consciousness/injury	Students	High	1:1 in water. Individual risk assessment known to staff	Policy known. Emergency procedures in place and emergency medication available.	Low

### Appendix 3 –Riverside Risk Assessment Record – Hydrotherapy Pool

<b>RISK ASSESSMENT RECORD</b> Riverside School, Wood Green Inclusive Learning Centre, White Hart Lane, London N22 5QJ		<b>AREA ASSESSED:</b>	Pool Entrance, Changing Rooms, Pool Area	<b>Date:</b>	16.10.20	
<b>Hazards</b>	<b>People at risk</b>	<b>Existing Control Measures</b>	<b>Risk Rating</b>			<b>Risk Reduction Plan</b>
			<b>High</b>	<b>Medium</b>	<b>Low</b>	
Poolside Floor – potential slip/trip hazard and resultant injury, especially when wet.	All users	All users are advised to walk slowly on poolside and take care Poolside surface is non-slip in design and is also sloping thus allowing excess water to drain back into pool.			Low	n/a
Changing rooms - students, tripping or falling in Changing Rooms, especially when wet.	Students	Students are carefully supervised by staff from their class. These staff are familiar to students. They are vigilant while taking care to uphold the students’ dignity.			Low	n/a
Pool water – risk of injury or death by drowning	All users, especially those with physical disabilities	Thorough class risk assessment is completed by class teacher before students commence hydrotherapy sessions. All staff members working in that class’ hydrotherapy session read risk assessment and discuss with class teacher if any queries before sessions commence.			Low	Leadership team to ensure that staff are completing risk assessments and to sample for quality.
Pool steps– risk of	All users	There is strong supervision of			Low	n/a

slip/trip hazard and resultant injury		students at all times. Where students have physical disabilities which mean that the steps would not be safe for them, alternate methods of entering the pool are used.				
Pool cover – risk of trip hazard and resultant injury / risk of drowning if caught underneath cover.	All users	Students are supervised carefully and reminded to avoid the area where the pool cover is stored when not in use. Pool cover is only used to cover pool at the end of the school day. Only staff have access to hydrotherapy pool via an electronic lock, which is activated by their staff identity card.			Low	Ensure pool cover is used and stored neatly and correctly when not in use.
Duration of time in warm water. Too long in warm water can lead to overheating and potentially illness.	All users.	Clear guidelines that students should spend no more than thirty minutes in the hydrotherapy pool. Staff should spend no more than one and a half hours in the water before they have at least a fifteen minute break and no more than three hours total in a school day. Pregnant members of staff should have an individual risk assessment conducted before continuing usage of the hydrotherapy pool.			Low	Ensure all staff are aware of usage guidelines.
Accessibility equipment, e.g. The	Students that have physical disabilities	Site manager regularly checks the Oxford Dipper and other			Low	Ensure checks are recorded for ease of reference.

Oxford Dipper - malfunction	and require the Oxford Dipper for access to the pool / emergency evacuation.	pool accessibility equipment to ensure that it is functioning correctly.				
Accessibility equipment, e.g. The Oxford Dipper – trip hazard	All users	Users reminder to be vigilant of trip hazards when using the pool. Staff who are guiding students with limited mobility to ensure they do not go too close to accessibility equipment.			Low	Ensure all equipment that can be stored away is not left poolside.
Jumping into pool – risk of jumping into water and sustaining injury due to shallow water in pool.	All users	Teachers instil a high degree of discipline. It is not permitted for staff or students to jump into the pool on account of its depth. Where students are not able to understand verbal instructions, non verbal communication is used and staff closely supervise students to prevent jumping.			Low	n/a
Operational systems/access to pool – risk of non-swimmers falling into water and drowning .	Students	Pool is locked daily after use and access to pool is by electronic pass.			Low	n/a

<p>Medical Emergency (eg. seizure, asthma attack, choking, cardiac event, stroke, head injury, neck injury, respiratory arrest).</p>	<p>Students</p>	<p>Class teachers do a thorough assessment of risk before students swim. They ensure that they have adequate staffing for an emergency scenario and adequate student supervision. At least one member of staff in each session must have up to date pool safety training and there must be at least one first aider on site when the hydrotherapy pool is in use.</p>			<p>Low</p>	<p>n/a</p>
<p>Pool water chemical imbalance – risk of injury or death by chemical poisoning (i.e. toxic gas emission) and risk of contracting infection due to inadequate disinfection levels .</p>	<p>All users</p>	<p>Pool water testing is carried out daily. If the pool water is unsafe, pool is closed.</p>			<p>Low</p>	<p>n/a</p>
<p><b>Any Additional Comments:</b></p>		<p><b>Signed:</b></p>				<p><b>Review Date:</b></p>

# Emergency Action Plan



<b>Section</b>	<b>Index</b>	<b>Issue Date</b>
<b>1.0</b>	<b>Overcrowding</b>	<b>October 2020</b>
<b>2.0</b>	<b>Disorderly Behaviour</b>	<b>October 2020</b>
<b>3.0</b>	<b>Lack of water Clarity</b>	<b>October 2020</b>
<b>4.0</b>	<b>Outbreak of Fire</b>	<b>October 2020</b>
<b>5.0</b>	<b>Lighting / Power Failure</b>	<b>October 2020</b>
<b>6.0</b>	<b>Structural Failure</b>	<b>October 2020</b>
<b>7.0</b>	<b>Emission of toxic gases</b>	<b>October 2020</b>
<b>8.0</b>	<b>Serious injuries</b>	<b>October 2020</b>
<b>9.0</b>	<b>Minor injuries</b>	<b>October 2020</b>

## 1.0 Overcrowding

- Action for pool-side teachers
- Teachers and support staff must be aware of the number of pupils in the pool at all times.
- The amount of pupils permitted in the pool is decided by the class risk assessment that must be completed before the hydrotherapy pool is used. Careful consideration of pupils' needs should be given. The lowest ratio permissible is 1 staff member with 3 students but with the majority of classes, there will be a higher staffing ratio due to more severe needs.
- Pool capacity =  $(5.95\text{m} \times 3.8\text{m}) \div 3 = 7$
- Never more than 7 bodies (pupils, assistants and teachers) may be in the water at any time.

## 2.0 Disorderly Behaviour

- Action for pool-side teachers
- Class teachers should take into account the behaviour support plans of the students in their class when completing their risk assessments for using the hydrotherapy pool.
- If a pupil is acting in such a manner that may lead to endangering the safety of themselves or others, then warning steps should be taken.
- Advise other staff of situation.
- Try to defuse and deescalate the situation.
- If you consider support is necessary, call a red alert and remove the student from the water, if possible.
- If it is not possible to call the red alert phone, there is a red emergency button by the steps into the pool.
- If the situation has escalated, it may be necessary to remove other students from the pool and the poolside area while the situation is brought under control. If this occurs, a red alert should be called.
- In the very unlikely event that the hydrotherapy pool regularly triggers disorderly behaviour for a particular student, they may not be permitted to take part in hydrotherapy pool sessions
- Any behaviour incidents that occur while in the hydrotherapy pool area should be recorded using the school's systems.

- Disorderly behaviour outside the pool or in the changing room
- Pupils will be supervised by the classroom staff during throughout the time they are in the hydrotherapy area, including during changing.
- The usual behaviour management approaches will be used during the class' time in the hydrotherapy area.

### 3.0 Lack of water Clarity

- If the water is cloudy or milky, it cannot be used and will be out of order until tests are completed and balance restored.
- A member of staff should inform a member of Senior Leadership Team and the office if it has been necessary to close the pool.
- The office and/or Senior Leadership team will inform the site manager about the closure of the pool and they will investigate the situation.
- If the pool is being closed place a notice on the door of the pool and keep pool doors locked. A notice will also be placed on the school noticeboard and any classes timetabled to use the hydrotherapy pool will be informed of its closure.
- 3.5 The Site Manager will investigate the conditions and the plant room.
- They will correct the malfunction if possible.
- They should report to Senior Leadership Team on the nature, extent, likely duration etc of the problem.
- Pool clarity also includes vomit and faecal matters.
- The Site Manager should do regular checks of the pool.

### Vomit in the pool

- Evacuate pool immediately.
- Remove vomit, carry out pool test to ensure chemicals are operating within normal parameters and allow pollutant to be dispersed and neutralized.
- Inform Site Manager, Senior Leadership Team and the Office.

#### Faeces/Excrement in the pool

- If faeces are solid, carry out same procedure as above for vomit.
- Inform Site Manager, Senior Leadership Team and the Office.

#### Diarrhoea in the pool

- Evacuate pool immediately.
- All staff who have been in the water and students should immediately shower thoroughly.
- Inform Site Manager, Senior Leadership Team and the Office.

### 4.0 Outbreak of Fire

#### General

- Before using the hydrotherapy pool, the class teacher should complete a risk assessment. The risk assessment will include information about evacuation plans from the hydrotherapy pool.
- The fire alarm will sound in the pool. As fire alarms are sometimes triggered unnecessarily, staff in the pool will listen for a whistle signifying a false alarm.
- If no whistle is heard, they will begin evacuation.
- If extra staff are required by the risk assessment for moving and handling, those staff will attend the pool area.
- Students/pool-users will be immediately hoisted into their wheelchairs and wrapped in survival blankets and dry towelling robes. Survival blankets need to be provided in the pool area.
- Ambulant students will exit the pool in a calm and supervised manner following their individual moving and handling risk assessment, they must also be wrapped in survival blankets/towelling robes
- Staff will follow the emergency evacuation route leading them to the exit doors, through the opposite classroom and out into the playground area
- They will only return to the pool area when instructed to by the chief fire marshal.
- If informed of a fire drill by a member of the leadership team, swimmers may remain in the pool.

## General Evacuation Procedures

Do not collect personal belongings.

Do not run or panic.

Proceed in a calm but commanding manner, to ensure a speedy evacuation.

## 5.0 Lighting / Power Failure

- Hydrotherapy Pool Light Failure
- Teachers are to inform the Office and a member of Senior Leadership Team.
- The site manager will then be informed.
- The pool should be cleared immediately and all staff and students move to a safely lit area.

## 6.0 Structural Failure

- Structural Failure
- In the event of any structural failure that is a danger to the pupils, any member of staff can initiate the building evacuation procedure (as per fire).
- Teachers will then prevent access to the affected area.
- If the structural failure is minor and does not compromise the safety of pupils or staff the affected area should be sealed off to prevent unauthorised access.
- Contact fire service if serious structural failure occurs.
- Inform the Office and a member of Senior Leadership Team.
- The Site Manager will then be informed.

## 7.0 Emission of toxic gases

- In the event of a chemical leak, suspected leak or emission of toxic gases, staff need to follow procedures as for fire evacuation.

## 8.0 Serious injuries

- This is a serious life-threatening situation which may involve more than one member of staff and could, in certain circumstances, require additional assistance from staff outside of the class group.

### Action for class teacher

- If any pupil or member of staff is seriously injured immediately alert all other present members of staff.
- Great care must be taken by staff in supervising the recovery of an injured bather.
- Members of staff not directly involved should clear all bathers from the pool.
- Assess the situation and co-ordinate the situation.
- If possible, a member of Leadership Team should be made aware of the situation.
- If they are on site and there is a staff member available to fetch them, the school nurse should attend.
- A decision must be made whether to call an ambulance
- If an ambulance is required send a team member to meet the ambulance and to take them to the incident.
- Carry out first aid procedures until help arrives.
- Breathing and airways need to be monitored carefully in the event of any incident.
- If there is a suspicion of a spinal injury they will not be moved unless they are face down.
- If a student is conscious and safe the hoist may be used to exit the water. If the student is unconscious then they must be removed from the pool the safest way, a minimum of two staff would need to be in the water and staff available on the side. One adult must give the instructions using 1, 2, 3, or 'ready, steady, move'.
- If a student is having a seizure they must be monitored carefully and once over removed from the pool by staff transfer or hoist if deemed safe. The student should then be placed in the recovery position. If prescribed Buccal Midazolam this must be accessible during the session and administered if needed, as stated in their care plan, by qualified staff

- As a result of a serious incident a report to Reporting of Incidents, Diseases and Dangerous Occurrences Regulations 1995 [RIDDOR ] will be made.

#### 9.0 Minor injuries

- A minor emergency is hereby defined as an incident which, if managed effectively, would not normally result in a life-threatening situation.
- Teacher actions for minor emergencies.
- Teacher becomes aware of an incident.
- Teacher raises awareness of incident and alerts other staff.
- Teacher takes appropriate action and administers first aid when appropriate.
- The school nurse may need to attend or the student be brought to the school nurse, if they are on site.
- A minor injury or incident may result in an amendment of a risk assessment.
- All such incidents must be reported by completing the appropriate accident/incident forms and informing a member of the Leadership Team.

# Hydro Pool Normal Operating Procedure



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## 1.0 Details Of The Pool

- Dimensions

<b>HYDROTHERAPY POOL DIMENSIONS</b>	
<b>DIMENSIONS</b>	5,950MM X 3,800MM
<b>WATER VOLUME</b>	25,00 LITRES
<b>POOL DEPTH</b>	1,000MM X1,20MM
<b>TURNOVER RATE</b>	20m <sup>3</sup> HOUR
<b>CIRCULATION FLOW RATE</b>	1.25 HOUR
<b>FILTER BACKWASH FLOWRATE</b>	7.07 LITRES/SECOND
<b>UNDERWATER LIGHTING</b>	50W HALOGEN
<b>FINISHES</b>	GLASS MOSAIC TILES
<b>TEMPERATURE</b>	36C
<b>PURIFICATION SYSTEMS</b>	SIEMENS-STRANTOL SYSTEM 3

- Changing Rooms
  - Access to the changing rooms is from poolside.
  
- Access to Poolside
  - Access to poolside is via the door from the corridor. The entrance to the pool is locked with an electronic lock requiring card access by a member of Riverside School Staff.
  - The pool plant room is situated in a separate room from the pool, accessed via the front of the school building. The door is kept locked and members of the Site Team have access to this room.
  
- Pool Contamination
  - Bathers: sweat, urine, cosmetics, hair lotions, face powder, creams, lipsticks, aftershave, talc, etc.
  - Biological: Disease, bacteria from eyes, ears, nose, throat, bowels, bladder, sores, skin infections, etc.
  - Physical: Dust, grit, hair, costume fluff, sticking plasters, hair clips, etc.

- **2.0 Potential Risk Factors**

- People Hazards
  - Students with PMLD and complex physical disabilities
  - Nervous and timid swimmers
  - Illness
  - Weak/Non Swimmer
  - Unauthorised access to Pool
  - Staff or students overheating
  
- Activity Hazard
  - Misuse of Equipment
  - Running
  - Pushing
  - Aggressive behavior

- Shouting
- Diving
- Ducking
- Jumping
  
- Physical Hazards
  - Glare in water
  - Steps
  - Lighting
  - Water clarity
  - Chemicals
  - Poolside floor
  - Structural failure
  - Hoist failure
  - Entrance/exit to poolside
  - Benches and chairs
  - Storage box/lockers
  - Pool cover
  
- Poolside Staff Hazards
  - Absence of or inadequate response of staff in an emergency
  - Tiredness
  - Talking
  - Lack of training

### **3.0 Staff Responsibilities**

- Before any student uses the hydrotherapy pool, their parents will sign a permission form. These are stored in the office and sent to parents with the starter packs as part of the enrollment process.
- Before any class uses the hydrotherapy pool, the class teacher will complete a risk assessment.
- For each swimming session, the appropriate number of staff will be determined by the risk assessment from the class teacher. From those staff at least one member of staff must have received pool safety training.

- For any session to take place, there must be a minimum of two staff, one poolside and one in the pool. At least one of these staff must have current pool safety training.
- General Responsibilities
  - Students are appropriately supervised when changing, and the schools' intimate care policy is followed.
  - Students are under control at all times.
  - Normal and emergency procedures are understood.
  - They have an overview of all students while in the pool.
  - They set objectives and know what progress their students are making with their hydrotherapy or other skills while in the pool.
  - Ensure that where possible, no jewellery is worn in the water.
  - Ensure students and staff have access to water or suitable liquids after their session.
  - Ensure only trained staff use the hoists. Ensure risk assessments are read and understood by all staff.
  - Ensure entry and exit to the pool is safely carried out.
  - Report any faulty equipment or hazards to the appropriate personnel.
  - Staff should consider the air temperature in the hydrotherapy pool area and whether it is appropriate for students to use the pool when it is a very hot day.
  - No students should be in the hydrotherapy pool for longer than 30 minutes.
- Pool Guidelines
  - Diving is not permitted in the hydrotherapy pool.
  - No pupil/classroom staff member may enter the plant room at any time.
  - Teaching aids, toys and rafts should be put away after use.
  - Ensure that no glass is brought into the pool area.
  - No chewing gum is allowed in the swimming area.
  - No smoking anywhere on the property.
  - Where possible students should bring their own swimming kit from home. However school can provide kit if it is not sent in. All students requiring specialised swim wear e.g. swim pants will have them provided by the school.
  - If costumes are modified for religious or cultural reasons, e.g., covering arms and legs, they must be tight-fitting to prevent becoming water-logged.
  - Students should be encouraged to use the toilet before entering the pool.
  - All staff should wear disposable overshoes while in the pool area.
  - No student should enter the water unless specifically instructed to do so.

- In the interest of safety, pupils should be prevented from the following:
  - Running
  - Pushing
  - Ducking
  - Back dives
  - Bombing
  - Diving
  
- **4.0 Maximum Bather Loads**
  
- Maximum Bather Loads
  - Swimming pool = 7
  
- Considerations
  - Swimming ability
  - Type of swimmer
  - Age of swimmer
  - Number of pupils per teacher
  - Behavior – effect on other users
  - Level of disability
  - Staffing required in the event of emergency evacuation
  - Staffing required in the event of medical emergency
  
- Monitoring responsibility
  - Teachers should always know the number of pupils in the pool.
  - Teachers should be aware of all students' needs, including all disabilities and allergies.
  - Teachers are responsible for ensuring that any medication that is required in an emergency is available.

- **5.0 First Aid**

- First aid box

- On a wall bracket on the wall opposite the window.

- Contents of first aid box (minimum).

- First aid guidance leaflet x 1
- Sterile dressing (12x12cm) x 4
- Sterile dressing (18x18cm) x 1
- Triangular bandage x 1
- Safety pins x 6
- Eye pad dressing x 2
- Assorted waterproof plasters x 40
- Alcohol free cleansing wipes x 20
- Microporous tape (2.5cm x 5m) x 1
- Powder free nitrile gloves (pair) x 6
- Finger dressing pad x 2
- Resuscitation face shield x 1
- Foil blanket x 1
- Burn gel dressing (10x10cm) x 1
- Tough cut scissors x 1
- Conforming bandage x 1

- Telephones

- At least one staff mobile phone is kept poolside during lessons.
- In an emergency you need to dial 999 to contact emergency services.

- Responsibilities

- The site manager is responsible for ensuring that the first aid boxes are checked by a competent member of staff. Also, that all supplies in the first aid box are restocked after use.

- Handling Accidents
  - Staff on poolside duty should not leave the poolside to administer first aid, unless there are sufficient qualified staff on poolside or if the poolside is empty of pupils.
  - Provide, immediate first aid at the poolside if applicable, prior to summoning additional help. The aim is to deal with the incident without leaving the pool inadequately supervised.
  - In the event of serious illness or injury it is important not to move the casualty unless this puts the person and/or yourself in greater danger – in which case obtain qualified help immediately.
  - An ambulance will be called when necessary and will be met (if possible) by a member of staff who will direct the ambulance persons to the injured party.
  
- Accident Book
  - The accident book is kept in the meeting room. Any details of an accident where first aid needed to be administered should be entered here.  
Details be filled out in full and follow up action should be taken if necessary.
  
- Serious Incident
  - As a result of a serious incident a report to Reporting of Incidents, Diseases and Dangerous Occurrences Regulations 1995 [RIDDOR will be made.
  
- First aid training
  - There must be a minimum of one member of staff trained in First Aid on the premises, and at least one staff member trained in Basic Life Support or holding a nationally recognised award such as The Aquatic Therapy Shallow Pool Rescue Award [ATSPRA] within the pool area during all periods of use.
  
- **6.0 Classroom Staff**
  
- Dress Code
  - Staff should adhere to the Riverside dress code as per the Staff Code of Conduct if they are remaining poolside. If staff are entering the water, they should wear appropriate swimming attire. i.e.- two layers covering swimming trunks area (swimming trunks and swimming shorts, wetsuits, swimming costume with swimming shorts).

- Time keeping
  - All classroom staff should be present at least 5 minutes before the hydrotherapy session commences. This includes staff who do not normally work in the classroom but who are provided as extra support for the hydrotherapy activities.
  
- Risk Awareness
  - Staff should be aware of the warning signs that a potentially dangerous situation is developing e.g.
    - Worried expression on the face of a pupil
    - Cries for help
    - Deliberate waving of an arm
    - Sudden submerging
    - Two or more swimmers in very close contact
    - Hair over the eyes or mouth
  - By remaining constantly vigilant and continuously scanning the water, staff can detect a problem in its earliest stages and thus take the appropriate action. Do not just look at the surface of the pool, look through the water at all levels.
  
- Duties
  - Poolside staff are required to:
    - Be alert, look alert.
    - Read the class risk assessment before commencement of the first hydrotherapy session.
    - The class teacher is responsible for creating the hydrotherapy risk assessment before sessions commence.
    - Report promptly all faults, repairs and maintenance jobs to the Leadership Team and to the Office.
    - Staff must always be fully conversant with all emergency/first aid equipment and ensure its correct operational positioning.
    - Never leave the poolside unattended with pupils in the water.
    - Always use common sense and discretion.
    - All poolside staff have a responsibility to provide a safe and enjoyable environment in which the pupils can swim. In the event of any incident YOU MAY be held responsible.
    - If no one is in the hydrotherapy pool area, then all doors should be shut and it should be checked that the electronic door lock is operational.

- NOP and EAP
  - All staff must be fully conversant with the Normal Operating Procedures (NOP) and Emergency Action Plan (EAP) and act accordingly in the event of an emergency.
  - NOP and EAP to be updated regularly (annually or when changes occur).
  
- Responsibilities of teachers
  - Oversee the hydrotherapy session to the best of your ability.
  - Prevent accidents and preserve life.
  - Carry out rescues and initiate other emergency action, as and when necessary.
  - Administer immediate first aid in the event of an emergency.
  - All classroom staff hold a current Enhanced Disclosure and barring service certificate (DBS).
  - There should always be at least two staff members present when the hydrotherapy pool is in use.
  - Within each hydrotherapy session, there must be a minimum of one member of staff trained in First Aid on the premises, and at least one staff member trained in Basic Life Support or holding a nationally recognised award such as The Aquatic Therapy Shallow Pool Rescue Award [ATSPRA] within the pool area during all periods of use.
  - Where a student has a diagnosis of epilepsy, they must have at least 1:1 support in the water as well as a further staff member poolside. The 1:1 support will only work with the epileptic student and be responsible for their safety. Therefore, if other students are in the water, further staff will be required.
  
- Length of time in pool
  - Staff should not be in the hydrotherapy pool for longer than one and a half hours without at least a fifteen minute break.
  - Staff should not spend longer than three hours in the hydrotherapy pool in one day.

## **7.0 Systems of Work**

- Minimum staff requirements
  - At least two staff in the hydrotherapy pool session with one of the staff members holding an up to date pool safety qualification.
  - A qualified first aider on site in the school building.
  - Enough staff as identified on the risk assessment to ensure safe use of the hydropool for all.
  - Where necessary, additional staff identified to ensure an emergency exit from the hydropool area is safe and effective.
  - Additional dedicated 1:1 support for an epileptic student in the water.

- Communication Practice
    - General communication at the pool is predominantly verbal. However communication with some of the students will be through a variety of communication methods dependent on needs.
    - Therefore it is important that all staff are particularly vigilant as it will not always be possible to clearly communicate pool rules to students.
  
  - **8.0 Child protection policy**
  - - Classroom staff in the hydrotherapy pool should be mindful of maintaining the dignity of the students they interact with when conducting personal care, assisting with changing and supporting students in the water.
    - Classroom staff should never be 1:1 with the students in the hydrotherapy pool area. If one student is using the hydrotherapy pool, two members of staff should be present.
  - All classroom staff must abide by the school's safeguarding policy and follow the procedures within this policy.
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