

Hydrotherapy Pool Normal Operating Procedures (NOP) and Emergency Action Plan (EAP)

Date Agreed: 10th March 2025

Chair of Committee: Peter Cade

Next Review Date: 10th March 2026

Section One Normal Operating Procedure

Section Two Emergency Action Plan

Section Three Documents relating to the Hydrotherapy Pool

- Hydrotherapy for Children policy
- Attendance Management Policy
- Smoking Policy
- Heatwave Plan
- Respiratory Infection pseudomonas
- Basic Properties of water related to hydro
- Physiological Effects of hydro
- Prevention Policy

REVISIONS TO THE NORMAL OPERATING PLAN

This sheet will be replaced whenever there is a change to your plan, and the date and nature of the revision will be noted on the revision sheet. It will be up to the Pool Manager and Headteacher to replace this sheet with the new one, and to note the changes in the NOP. Clearly if there are significant changes, they will be supported by training

Date of Revision	Section Revised	Reason for Revision	Page No(s)
13 June 2016	8.9	Added Chemical Spillage	71
13 June 2016	3.5	Added Lone Worker	22
July 2016	3.7	Revised Safe Use of Ladders	24
July 2016	5.1	Amended Pool Covers	36
July 2016	6.4	E-Cigarettes Added	41
July 2016	8.8	Bomb Threat Amended	61
August 2016	8.4	Laedral Pocket Mask Amended	55
August 2016	8.5	Epilepsy Amended	56
August 2016	8.6a	Evacuation of Pool Amended	57
August 2016	8.18	Power Failure Amended	76
September 2016	8.34	Blood Spillage Amended	84
23 April 2018	2.0	Weight Limit of hoists added	14
23 April 2018	2.0	Added Fixed to Tracking Hoist	14
25 April 2018	3.2	Updated NLPQ Award	20
23 April 2018	8.4	Depth of Compressions	55
25 April 2018	8.5	Seizures in the pool amended	56
27 April 2018	8.6b	Added Evacuation of pool (out of hours)	57
30 April 2018	8.8	Added in Critical Incident Policy	61 - 71
02 May 2018	Section 3	Prevention Policy	N/A
02 May 2018	3.7b	Changed to Visual Inspection of lad- ders	24
09 May 2018	2.0	Sara Steady Weight Limit	14
10 May 2018	8.29	Action to clean up	82
10 May 2018	8.30	Bather trapped amended	83
10 May 2018	N/A	Headings put in Section 3	2
10 May 2018		New page put in	87
05 October 2018	7.4	Internal Numbers Amended	47
08 November 2019	Throughout	Derby City Council removed from en- tirety of document and replaced with Academy Trust	
08 November 2019	2.2	1 Pool Attendant in building during open hours	14
08 November 2019	2.2	Addition of emergency call button	14
08 November 2019	2.2	Addition of 'closed' for out of hours	14
08 November 2019	2.4	Addition of emergency call button	16
08 November 2019	3.5	Addition of emergency call button and SLT	22

08 November 2019	4.2	Addition of SLT and training require- ments	33
08 November 2019	4.5	Addition of 1 Pool Attendant being unable to support moving and han- dling	34
08 November 2019	4.6	Addition of SLT training	35
08 November 2019	6.1	DCC jewellery policy removed	40
08 November 2019	6.3	Added leaving message on school an- swerphone, not text message	40

REVISIONS TO THE NORMAL OPERATING PLAN Continued

Date of Revision	Section Revised	Reason for Revision	Page No(s)
08 November 2019	6.5	Removed "no customers no jobs"	41
08 November 2019	7.8	Addition of reference to school's social media policy	49
08 November 2019	8.2	Removal of Physio call point and addi- tion of Senior Management pager noti- fication	53
08 November 2019	8.5	Addition of Buccal Midazolam and pre- scribed drugs	55
08 November 2019	8.5	Location of call point and addition of Senior Management to nursing call	55
08 November 2019	8.6a	Addition of 'fire warden'	56
08 November 2019	8.8 – Section 3	Addition of Critical Incident Plan and Procedures	61
08 November 2019	8.8 – Section 4		
08 November 2019	8.18 – Section 5	Batteries are kept in the Pastoral Lead's Office	74
08 November 2019	8.32	Removed DCC and added Site Man- ager	81
08 November 2019	8.33	Addition of reporting to Site Manager	81
08 November 2019	8.35	Removal of "outside pool ar- ea/reception" and addition of N.B	82
21 October 2022	Throughout	Lifeguard removed and replaced with Pool Attendant	
21 October 2022	Description of facilities	Spinal board has been re- moved	14
21 October 2022	Section 4	Remove Spinal board rescue	
21 October 2022	8.7	Add Lone Swimming Teacher Out of hours Fire Procedure	60
19 September 23	Section 1 1.1	Hydrotherapy pool reception	10
19 September 23	Section 6 6.3	Protocol for sickness	40
19 September 23	Section 7 7.4	Internal telephone calls	47
19 September 23	Section 8 8.5	5 Epilepsy 55	
19 September 23	Section 8 8.1	All Emergency services	

			52
19 September 23	section 8 8.7a	Safety Gas shut off	58
19 September 23	Section 8 8.6a 8.6 b	Evacuation of the pool during of school hours Evacuation of the pool out of school hours	56
19 September 23	Section 8 8.1a	Lockdown procedures	52
5 September 2024	Section 4.2	Trained staff H W S A team will have the pager for backup	33

1	Introduction And Philosophy
1.1	Control of NOP/EAP
1.2	Introduction by Pool Manager
1.3	Objectives of Procedures
2	The Aquatic Therapy Pool
2.1	Mission Statement
2.2	Description of facility
2.3	Staff Ratio Plan
2.4	Floor Plan
3	Health & Safety Management
3.1	Safety Policy
3.2	NRASTC Qualifications
3.3	Safe Use and Handling of Chemicals
3.4	Protective Clothing and COSHH
3.5	Lone Working
3.6	Risk Assessments
3.7	Code of practice for the safe use of ladders
3.8	Electrical Safety
3.9	First Aid
3.10	Reporting Accidents
3.11	Accidents involving the public
3.12	Accidents involving staff

3.14	First Aid Supplies
3.15	Disposal of Clinical Waste
3.16	Disposal of Sharps
3.17	First Aid Aftercare
3.18	Pregnant Employees
3.19	Manual Handling
4	The NRASTC Qualification Skills and Responsibilities
4.1	The NRASTC Award
4.2	Teamwork
4.3	NRASTC Skills
4.4	Pool Supervision
4.5	Staff Training
5	Normal Operation of Swimming Pools
5.1	Pool Covers
5.2	Supervision of Disabled swimmers
5.3	Water Clarity
5.4	Pool Inlet & Outlet Grilles
6	General Centre Information
6.1	Staff Uniform & Appearance
6.2	Punctuality
6.3	Attendance Monitoring Procedure
6.4	Non-Smoking Policy
6.5	Customer Care
6.6	Lost Property
6.7	Equipment
6.8	Access to the Plant Rooms
6.9	Splash Party Ratios
6.10	Induction policy
6.11	Essential Training Needs Table
7	Communication
7.1	Communication General Statements
7.2	Communication General Public Verbal
7.3	Information and Signs
7.4	Internal Telephone Calls and Numbers
7.5	Pool Diary
7.6	Dealing with Complaints
7.7	Radios

Emergency Action Plans

8.1	Fatality
8.2	Major Injury Accidents
8.3	Reporting Fatalities/Major Injury Accidents
8.4	Use of the Laerdal Pocket Mask
8.5	Epilepsy
8.6a	Evacuation of the Pool (In school hours)
8.6b	Evacuation of the Pool (Out of school hours)
8.7	Evacuation of the Building/Fire Procedures
8.8	Critical Incidents
8.9	Chemical Spillage
8.10	Chemical Gas
8.11	Gassing by Chlorine
8.12	Pool Covers
8.13	Falling on the Cover
8.14	Becoming Submerged Under the Pool Cover
8.15	Electrocution Whilst Operating Pool Cover
8.16	Electrocution General
8.17	Treatment for Electric Shock
8.18	Power Failure
8.19	Emergency Lighting
8.20	Structural Failure
8.21	Assault and Harassment
8.22	Indecency
8.23	Child Protection
8.24	Theft
8.25	Disturbance
8.26	Chemical Poisoning
8.27	Pool Water Clarity
8.28	Unsafe Equipment
8.29	Soiling of Pools
8.30	Bather Trapped in or on Pool Outlet
8.31	Failure of Telephone System
8.32	Control of Pests
8.33	Stainless Steel
8.34	Blood & Vomit Spillages
8.35	Nurse Call Out
8.36	Defibrillation
8.37	Dehydration

8



Normal Operating Procedures (NOP)

1	INTRODUCTION AND PHILOSOPHY		
1.1	Control of NOP/EAP		
1.2	Introduction by Pool Manager		
1.3	Objectives of Procedures		

1 INTRODUCTION AND PHILOSOPHY

1.1 Control of NOP/EAP

The Manager of the Hydrotherapy pool and the headteacher will control revisions to the NOP/EAP and ensure all participants are informed of changes. There will be 2 hard copies of the NOP/EAP kept in the following places, which will allow all staff using the pool unrestricted access.

- * Hydrotherapy pool hall / Kenny Jax office
- * Headteachers Office

An electronic master copy will also be stored on the hard drive and the school's website (<u>www.ivyhouse.derby.sch.uk/policies</u>).

This manual will become out of date if not regularly checked to take into account any changes in legislation or changes to the facilities.

Both documents will need to be reviewed on an annual basis and updated as and when required.

Any changes will be detailed in the sheet at the front of the plan.

The manual contains valuable information on the day to day running of the pool, and what to do in an emergency.

All staff should be conversant with the manual which will be used in training staff

1.2 Introduction by Pool Manager

Physical activity improves quality of life for individuals and communities. In promoting health and personal development, we encourage people to take part in a range of activities that can be offered in the Hydrotherapy pool.

Safety is fundamental when using a Hydrotherapy pool. It is a priority that we proved safe working practices and a safe environment for staff, students and any outside organisations using the facilities.

Both the employers and employees have an important role to play in safety and we must all strive to ensure that the highest standards of information, instruction, training, supervision, safe practices, and procedures are maintained.

1.3 OBJECTIVE OF PROCEDURES

The concept behind producing Normal Operating Procedures is to ensure that it is an easy to read, guidance document provided for members of staff to use as not only part of the induction procedure, but also to assist in on-going training and service development.

Ultimately, each member of staff should be suitably equipped to make a valuable contribution in providing a quality service in a safe clean environment for the benefit of all users.

2.0 The Hydrotherapy Pool

- 2.1 Mission Statement
- 2.2 Description of Facility
- 2.3 Pool Ratio's
- 2.4 Floor Plan

2.1 Mission Statement: We understand users' expectations and plan to meet and exceed them in all areas of our service delivery.

All persons using the Hydrotherapy pool should feel safe and should have full use of the pool and equipment, which should be kept to the highest standards of cleanliness and repair.

For Example:

Floors should be free of litter, dust, etc.

There should be enough litter bins to accommodate the usage, have bin-liners and be no more than two thirds full.

Changing and shower rooms should be clean and free of debris and excess water.

A yellow and grey bin is provided opposite disabled toilet for clinical waste. All pads and nappies must be placed in a bag then into the yellow bin.

Drains and grids should be free of debris.

Toilets should be clean and have supplies of paper, soap, etc.

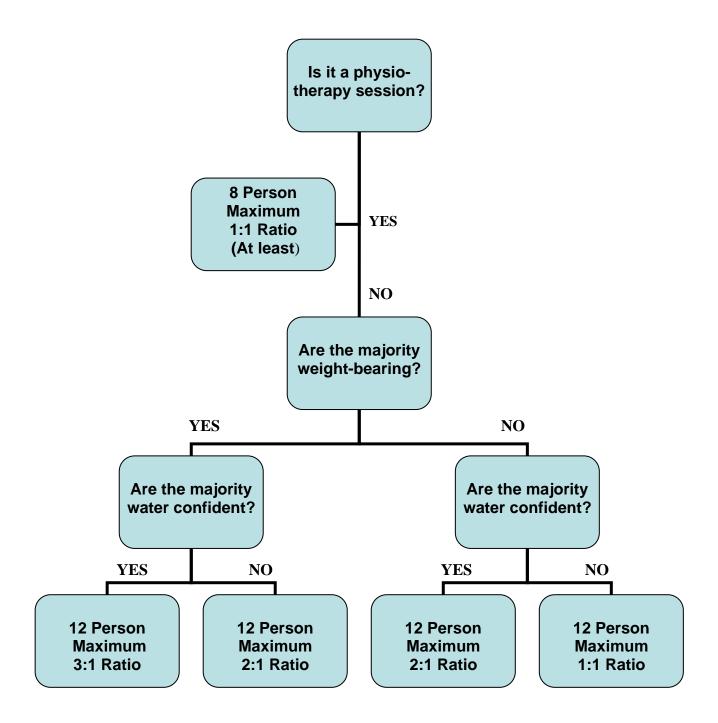
Entrances must be litter free.

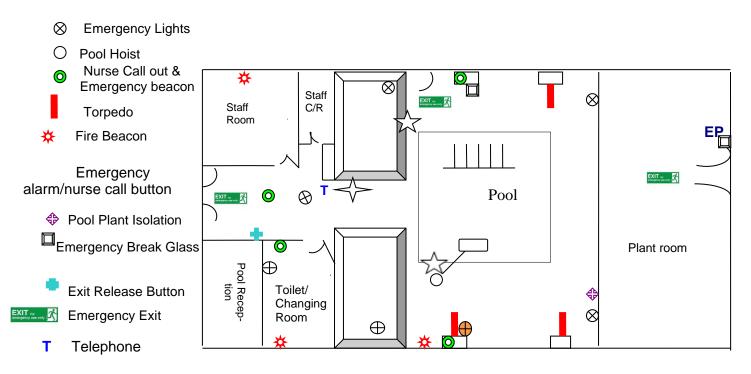
Uniforms should be clean and tidy; staff should be professional, approachable, and easily understood.

	Depth	1.0m > 1.2m
Physical	Dimensions	D Shaped – 6.8m long – 6.8m wide
Factors	Environmental conditions.	High Humidity
	Hazards	High humidity level, Excess temperature, trips,
		slips, falls, manual handling, water,
	Maximum occupancy	Refer to chart (page 13)
Pool	No of Pool Attendants required	1 NRASTC in the building during opening
Supervision		hours
Arrangements	Swimmer to NRASTC ratios	Refer to chart
	Pool Attendant position	Poolside
	Rescue equipment	3 x Torpedoes
	Alarm call-points	Nurse / Office call controls by phone
		adjacent to staff changing room
		Out of hours use – telephone adjacent to
		staff changing room dial 9 for an outside line
		Emergency call button on poolside to page a
		senior staff member if needed and when a
		pool attendant is on their own.
	Opening times during school time	Mon-Fri 09:30am – 3:30pm
Service	Opening times during out of	Monday & Thursday 4:00pm – 6:30pm
Delivery	school	
	Holidays	Monday to Thursday 09:00am – 3:00pm
	Pool plant emergency off control	Red / Yellow button
Other		Back wall, next to underwater lights button
Features	Tracking and Fixed Hoist *	Yes
	Stretcher / Chair access	Yes
	Pool cover	Yes
	Emergency exits	Main Entrance on to poolside,
		Exit on left hand side of pool
	Pocket masks	Situated on the Pool Attendant chair and next to the First Aid Kit on the wall

* Maximum lifting weight for the hoists are:

Ceiling tracking hoist	- 600lb	(272kgs or 42 stone)
Fixed Hoist for chair and Stretcher	- 353lb	(160kgs or 25 stone)
Sara Steady	- 400 lb	(182kgs or 28.5 stone)





Pool Alarm Remote

EP Fire Extinguisher Powder

Emergency alarm and nurse reset button.

Key Points

Pool Area

- 1. Emergency Exits
- 2. Break Points
- 3. Changing Rooms

- <u>Plant Room</u>
- 1. Emergency Exit
- 2. Fire Extinguishers
- a. Powder

2.4





Safety Policy

3 Health & Safety Management

- 3.1 Safety Policy
- 3.2 NRASTC Qualifications
- 3.3 Safe Use and Handling of Chemicals
- 3.4 Protective Clothing / COSHH
- 3.5 Lone Working
- 3.6 Risk Assessments
- 3.7 Code of practice for the safe use of ladders
- 3.8 Electrical Safety
- 3.9 First Aid
- 3.10 Reporting Accidents
- 3.11 Accidents involving the public
- 3.12 Accidents involving staff
- 3.13 First Aid Boxes
- 3.14 First Aid Supplies
- 3.15 Disposal of Clinical Waste
- 3.16 Disposal of Sharps
- 3.17 First Aid Aftercare
- 3.18 Pregnant Employees
- 3.19 Manual Handling

3.1 IVY HOUSE SAFETY POLICY

1. INTRODUCTION

The Health and Safety at Work Act 1974 requires the Academy Trust to prepare and, as often as may be required, revise a written statement of its general policy with regard to health and safety.

- a) The Academy Trust acknowledges its duty to provide and maintain safe and healthy working conditions for all employees and other people using its building and facilities.
- b) The Academy Trust will take all reasonable steps to comply with relevant legislation, regulations, and codes of practice. It will provide necessary resources to secure safe working conditions and practices for all employees.
 It will ensure a safe environment for others, where it has these responsibilities, throughout the Academy Trust.
- c) The Academy Trust will take all reasonable steps to make sure:
 - It provides relevant information, instruction, training, supervision, equipment, and facilities needed to achieve the safety standards.
 - Its activities do not put the staff, students, or outside organisations in danger.
 - It consults with recognised trade unions and safety representatives on all health, safety, and welfare at work issues.
- d) The employees all have a duty to observe all safety rules relating to the job, practices, and procedures.
- e) The Academy Trust will review this policy when there are any changes to its organisation or if changes in legislation require a review.

3.2 National Rescue and Swimming Teachers Award

Ivy House School and the Academy Trust recognise the Royal Life Saving Society as the specialist organisation governing the qualifications of those who are in a position of supervising bathers using swimming pools.

The following award, although not exhaustive, has been formulated by the Royal Life Saving Society and approved by Ivy House and the Academy Trust as the standard which must be achieved by employees responsible for the safety of clients using their pool:

Award

National Rescue and Swimming Teachers Award (NRASTC).

Topics covered during the course include:

- The teacher, swimming pool, and class management
- Intervention rescue
- Emergency action
- CPR and First Aid

The Assessment

To achieve the NRASTC certificate, candidates must pass a formal assessment at the end of the course, where trainees demonstrate the skills and knowledge learned in the form of a theory and practical test.

3.3 Safe Use and Handling of Chemicals

All employees whilst at work have an obligation under the Health and Safety at Work Act 1974 & COSHH 2002 Regulations to take reasonable care for the health and safety of himself/herself and others who may be affected by his/her acts and omissions at work.

- a) Obtain chemical required from Management Team.
- b) Read the label carefully and always comply with the manufacturer's instructions.
- c) Dilute the chemical carefully in accordance with the manufacturer's instructions.
- d) Always wear protective clothing and use the correct equipment whilst using chemicals
- e) Wash down area thoroughly after using harsh chemicals.
- f) Never transfer or retain chemicals in receptacles other than those supplied by the manufacturer.
- g) Always return the chemical to the authorised chemical store and ensure the store is then locked.
- h) Never leave any chemicals unattended in unauthorised areas, (all areas are unauthorised other than the pool staff room).
- i) Never mix chemicals. Always ensure that during cleaning processes not more than one chemical is used at any single time due to possible reaction.
- j) Always wash containers (buckets, etc) before and after use.
- k) If a chemical is diluted, ensure that the word DILUTED, and the dilution rate is displayed on the container.

Strict observance of safety advice will ensure that chemicals are used correctly therefore, avoiding any serious accidents and injuries.

NOTE: IF IN DOUBT CONSULT A MEMBER OF THE MANAGEMENT TEAM

Any person issued with **ANY CHEMICAL** they are not familiar with should check the COSHH sheets that are situated in the chemical store. Do not use unless given full training.

The COSHH Regulations are always available from the Pool Manager or Site Manager.

3.4 Protective Clothing / COSHH

The wearing of protective clothing when using chemicals is essential in terms of Health and Safety.

This is documented in the safe handling of chemicals section of the staff handbook available to all staff from the Pool Manager or Headteacher. Every chemical has COSHH regulations, which identify the safety requirements. These regulations must be adhered to.

Copies of COSHH regulations are circulated to all pool staff who are involved in their use. If staff who handle chemicals are unsure, a copy is available from the Site Manager or Pool Manager.

Protective clothing must also be worn to prevent injury and transmission of disease. Cleaning drains out, picking up plasters etc, treating cuts are a few examples when protective clothing is necessary, i.e., rubber gloves.

Never put yourself at risk. Always wear the correct protective clothing. Do not undertake any task without protective clothing where it is necessary.

3.5 Lone Working

Generally, working alone is not a risk or dangerous activity. There are however occasions when working alone could be hazardous.

You may be required to carry out a task which involves working alone, particularly in an isolated area. You must inform the Headteacher, Pool Manager or Site Manager before starting work in your location and the task you are undertaking.

If you are in the building alone, do not carry out any duties that require two people. It is always important for you to take measures to safeguard yourself.

- One Pool Attendant must be on duty whenever the pool is in use.
- There must be always an emergency call button on pool side.
- The emergency button and pager will need to be checked daily and signed off to say they are working before pool the is opened.
- If the emergency button is not working, then the pool staff will not run the session
- The senior management team will need to always carry a pager with them, so they can respond to an emergency call and will have ongoing training so they can support the Pool Attendant when an emergency occurs.

Any person working on the poolside should have radio contact with the Pool Manager and Site Manager.

Any person working in isolation in the pool area - during half term – summer holidays, must inform the Site Manager of their time of entry into the pool, the approximate duration they will be in the pool area and again when they have left the area. If you require further specific advice, contact the Headteacher or Pool Manager.

3.6 Risk Assessment

It is necessary to identify any hazards associated with the Hydrotherapy pool. The element of risk associated with that hazard must be assessed.

Risk assessments have been carried out for the Hydrotherapy Pool, and these are available for all employees to read.

A copy of the document is available in the Pool Manager's office and the Headteachers Office.

It is updated yearly or as necessary. It is the responsibility of every employee to identify any risks and bring them to the attention of the Management.

See also:

- Medical Checklist
- Contraindications
- Manual handling policy
- Pregnant worker risk assessments

3.7 The Safe Use of Ladders and Step Ladders

A) Introduction.

Before using any ladders ensure that they have been inspected thoroughly and they are the right ladder or steps for the task you want to undertake.

B) Visual Inspection

The inspection will include:

Examination for defects, cracks, shakes, splits, gouges, cuts, and decay. Broken or damaged stiles. Wear on rungs or treads. Loose, missing, or decayed rungs or treads. Security of rungs or treads, in particular illegal repairs. Wear to head and feet of stiles. Insecure tie rods. Corrosion. Lack of rigidity or excessive play.

Any such equipment condemned must be promptly repaired or destroyed. Unsafe ladders, step ladders or trestles must not go back into use or be left where others may take them and use them.

C) Use of Access Equipment

Only ladders and step ladders of sound construction and in good repair are to be used. Damaged, defective, or poorly repaired equipment must not be used.

Any employee using access equipment must visually inspect it before using it. Defective equipment must be reported immediately.

All ladders over 3 metres in length must be secured, where practicable, near to the resting place. If ladders cannot be secured at the upper end, then they should be secured at the lower end. Vertical ladders must always be secured at the upper end.

Where ladders over 3 metres in length cannot be secured at all then someone must stand with one foot on the ladder and hold the stiles of the ladder while it is being used.

Ladders and step ladders should have an even base and be equally support on all points of contract with the ground; ladders must have equal support on each side at the top as well as an even base.

Loose packing should never be used under ladders, step ladder or a trestle, a firm footing is essential. No person working from a ladder or step ladders should attempt to overreach in such a way the ladder may move sideways at the top. Always move the ladder.

Step ladders should be fully opened to their greatest angle or ensure that their stays remain under tension while they are used.

3.8 Electrical Safety

Accidents involving electricity are rare but, unfortunately, accidents involving electricity can often be fatal. The chances of an accident of this nature being fatal are increased by several factors.

These include:

- a) Ignoring safety advice and recommendations.
- b) Working in wet areas, i.e., changing rooms, pool sides.
- c) Working outdoors.
- d) Lack of care and maintenance of equipment, cables, flexes, plugs and sockets.

Only approved and tested wet area equipment is to be used in the pool area. The following information is provided with the purpose of eliminating or significantly reducing the risks of electrocution and accidents with electrical appliances.

1) Safety

a) When using hosepipes, water or any liquid substance, do not spray electrical sockets, switches or other equipment.

- b) There is a legal requirement for all portable equipment to be appliance tested at regular intervals. When tested the appliance is 'tagged' certified for safe use. If the appliance is considered unsafe, it must be removed from use and given to the Site Manager to be repaired or destroyed, if destroyed then the item must be removed from the inventory. Once repaired the appliance must be re-tested before being used. Always check that the portable equipment you are required to use has been tested and is safe to use.
- c) Two sockets are available on the pool side. They are protected by their own RCD. Whenever possible, equipment used on the pool side should be battery operated.

2) Fuses

a) Never attempt to change a fuse in an appliance or fuse box. This may only be carried out by a suitably qualified person.

3) Plugs and Sockets

- a) Never use an appliance with a cracked or damaged plug. Inspect before use.
- b) Never plug an appliance into a cracked or damaged socket.
- c) Never try to change a plug or socket unless you are suitably qualified.
- d) Some appliances have moulded plugs on. If the plug is damaged, it should be cut off the cable and disposed of. Do not leave it where a child or anyone can plug it into a socket.
- e) Never use a pre-moulded plug without a fuse holder.
- f) Inspect the plug and socket for damage, loose fitting or connection before use.
- g) During or after use if any cable, plug or socket feels warm or shows signs of burning, report the matter to the supervisor immediately.
- h) Ensure that the plug and your hands are dry before connecting /disconnecting to the electrical supply, e.g., sockets.

4) Cables and Flexes

- a) Before using any appliances inspect the cable/flex.
- b) An appliance must not be used if any defect in the cable/flex is found.
- c) Look for wear, damage, cracked outer cable and loose connections.
- d) Never use a cable with a joint in it. There must be one continuous length of cable from the appliance to the plug.
- e) Do not trail cables through water.
- f) The shorter the cable the better, as there is less to trip over. Be careful where you lay cables.

5) Adaptors

- a) Do not use adapters of any sort in the pool area.
- b) If you require additional sockets report this to the Site Manager.

6) Extension Leads

a) Extension leads should be purchased ready assembled or made by a qualified person.

- b) Wherever possible, the extension lead should incorporate protection by a residual current device.
- c) Be careful where you lay leads, think of who could trip over them.

7) **Protection Built into Electrical Circuits/Plugs/Sockets**

Electrical regulations demand that electrical circuits have levels of protection built into them.

- a) The prongs of a three-pin plug should be insulated on the lower two prongs, live and neutral. It is illegal to use an un-insulated plug with an un-switched socket.
- b) Switched sockets must not be turned on until the plug has been secured in the socket. It must be switched off before removing the plug.
- c) All sockets at Ivy House are protected either by an RCD. For cleaning wet areas, there is a specifically designated socket located outside the shower room.

Note: Any electrical equipment or tools used for outdoor purposes must be operated on a circuit protected by RCD.

8) **Reporting of Faults**

If an electrical appliance circuit or equipment fault is found, it must be reported immediately to a member of the management team or Site Manager. Never use equipment you consider to be defective.

9) Employees and visitors using Electrical Appliances

Employees and visitors are **not allowed** to use their own electrical appliances.

10) Contractors using Electrical Appliances

Any portable appliance used by any contractors must be appliance tested and correctly 'tagged' before it can be used in the building.

3.9 First Aid

Due to the nature of activities, accidents will occur. It is essential that you are aware of the procedures for dealing with both minor and major accidents.

Minor Injury

a) In most minor injury incidents, the injured party will seek the assistance of a member of staff.

- b) In all instances, a first aid person must attend and treat the casualty in accordance with first aid training techniques.
- c) All members of the pool team are First Aid qualified.
- d) When the accident has been dealt with, the appropriate form must be completed.
- e) For major injuries see E.A.P.

3.10 Reporting of Accidents

All accidents must be reported.

Minor injuries should be reported in the school's accident book. Completed forms must be given to a member of the Senior Leadership Team. In all instances the treatment of the casualty takes priority.

3.11 Accidents Involving the Public

After treatment, an accident form must be completed. These are available from the Pool Manager or from a member of the School Leadership Team. All sections must be completed as close to the time of the accident as possible.

On completion, the form must be photocopied, and one copy sent to the Pool Manager. The original will be sent to the Headteacher with the copy remaining at the pool for reference to identify trends in accidents.

3.12 Accidents Involving Staff

After treatment, school procedures for the reporting of accidents must be followed. The Staff member involved must complete the accident book regardless of the nature of the injury.

3.13 Portable First Aid Boxes

This is situated: next to the phone at the pool side.

3.14 First Aid Supplies

Stocks for the first aid box are available from the Pool Manager. The box should be checked monthly to ensure that they contain stock to the level identified in the list attached to the first aid box and to replace any out-of-date stock.

3.15 Disposal of Clinical Waste

When treating an injured person all items used, e.g., disposable gloves, plasters, bandages, wipes etc, must be disposed of in a safe manner. This is to prevent any cross contamination, and to comply with the law on disposal of clinical waste. For this purpose, the yellow and grey clinical waste bin is situated on the right-hand side of the pool corridor. All items for disposal must be placed in a bag before placing it in the bin.

The disposal of clinical waste is carried out by a licensed operator.

3.16 Disposal – Sharps

These usually take the form of syringes. The safe disposal of such items is critical. A bin is specifically for sharps and is in the nurses' office.

The sharps bin is transportable and should be taken to the area where the sharp item is; the bin is then returned to its central location.

The sharps can be disposed of when the bin is full. The Site Manager will be able to lead on this.

3.17 First Aid Aftercare

Following any type of incident, aftercare is an issue that must be addressed.

In the case of a major incident, e.g., pool rescue, broken limb, etc., the need is obvious. It may not appear so in other cases. No matter how minor the incident may appear to a member of staff, aftercare is essential.

A simple, "How are you, is everything OK?" can often be sufficient. Depending on the response first aid or more intense aftercare may be necessary.

Failure to carry out such a seemingly minor aspect of aftercare can have disastrous repercussions.

Unless the injury is of an extremely mild nature, medical assistance must be sought.

An ambulance must be called immediately in the following instances.

- a) The casualty has been / is unconscious.
- b) Resuscitation has been necessary.
- c) The casualty has been totally submerged under water and may have taken water into their lungs, i.e., near drowning, secondary drowning.
- d) Any signs of shock. e.g., distress, change of breathing, change of colour, rapid weak pulse, shaking, vomiting etc

These rules apply no matter how well the casualty appears to have recovered.

First aid measures must be carried out while waiting for medical assistance.

A qualified first aider must attend all reported accidents.

Aftercare may also be needed if a person has been involved in an incident but is not the actual casualty, e.g., a member of the public involved in a rescue or children witnessing an incident.

3.18 Pregnant Employees

To safeguard the interests of employees who become pregnant and their unborn child / children it is essential that the procedure detailed below is always followed.

- 1. You should notify the Headteacher or the Pool Manager as soon as you know you are pregnant.
- 2. You should make your doctor aware of your working environment and the nature of your duties and responsibilities.
- 3. If your doctor has any concerns or wishes to impose any limitations, ask him/her to provide a note identifying them. Advise the Headteacher or Pool Manager immediately.
- 4. Your duties will be discussed with you and any reasonable adjustments be considered.
- 5. In the interests of yourself and your unborn child / children, it is essential that you do not carry out any tasks that may be harmful.
- 6. A pregnant woman must not enter the hydrotherapy pool where the water temperature is 35° or above.

3.19 Manual Handling

- Get help in lifting and carrying large or heavy objects.
- Feel the weight of the load and whether it has a heavier side before moving or lifting it.
- See if there are scoop boards available before carrying a difficult load.
- Make sure that the way you are going is clear open doors and move things out of the way.
- Check that the load is secure before you move it make sure boxes won't give way or items fall off a pile.
- Make sure you can comfortably hold the load. Do you need gloves to protect your hands or an apron or overall?
- Always try to carry a load between knuckle and shoulder height and keep it close to your body.

- Make sure you can see where you are going with a load especially down slopes or steps.
- Do not snatch or grab at a load even if it is falling sudden movements and changing in muscle loading can cause severe injury.
- Carry the heaviest side of a load closest to your body.
- Try to handle loads in an area where there is room to move freely.
- Maintain the natural curves of your back but do not bend or stoop.
- If carrying something a long way, pick a place where you can stop and rest the load move the load in stages.
- Instead of lifting buckets up to fill and empty them, use a short length of hose to run from the tap to the bucket and tip buckets into outside drains.
- Order any supplied or equipment in manageable packages get small easy to handle containers or bulk products which require very little handling at all. Where possible, have items delivered.
- Load shelves and cupboards sensibly light things at the top and very bottom, heaviest, and most difficult to handle things in the middle, the shoulder to knuckle zone.
- Ensure that you are familiar with the individual pupils' risk assessment.
- Use mechanical aids and or hoist to lift pupils in and out of the water following their individual assessment advice.
- See Ivy House School Manual Handling Policy.
- Avoid, assess, plan, prepare, execute, and evaluate before assisting any person to move.
- Use a mobile stable base.
- Keep spine in line.
- Suitable footwear must be worn by staff moving wheeled equipment. Staff must not move wheeled equipment with bare feet.

4 THE NATIONAL RESCUE and SWIMMING TEACHERS CERTIFICATE

- 4.1 The Pool Attendant
- 4.2 Teamwork
- 4.3 Pool Attendant Skills
- 4.4 Pool Supervision
- 4.5 Eight Key Rules
- 4.6 Staff Training

4 NRASTC SKILLS AND RESPONSIBILITIES

4.1 The Pool Attendant

The Pool Attendant is a member of a team and trained in accident prevention, aquatic rescue and basic first aid who undertakes responsibility for the supervision and safety of those using the hydrotherapy pool. The Pool Attendant ensures the directing of behaviour to prevent accidents and when necessary, taking appropriate emergency action.

The Pool Attendant is a member of a trained and competent team and places a high priority on the safety of the casualty. This in the knowledge that their own safety can be assured by other members of the team who will act in support.

Additionally, the Pool Attendant will have received specialist training in the procedures which have been designed to deal with incidents that may arise in the environment for which they have responsibility.

4.2 Teamwork

When a Pool Attendant is on the poolside on their own, they will be backed up by H W S A Team in School, who will always carry an emergency pager with them. They will be water confident, CPR trained, Defibrillator trained, basic first aid trained and attend some pool training sessions. This means, in an emergency, the Pool Attendant would work as a team with the H W S A in attendance.

If an emergency arises, particularly one that is aquatic or medical in nature, a very rapid response is necessary. The Pool team/ $H \le S$ A Team must be able to respond with speed and efficiency. This 'automatic' response will only develop because of regular training.

4.3 Pool Attendant Skills

There are several skills which Pool Attendants must possess in order to be able to help prevent accidents occurring and to affect a rescue, if necessary. Their physical abilities should be such as to enable the following objective to be met, either acting alone or as part of a team.

The Pool Attendant should:

- Be aware of the environment within which he or she is working and have a knowledge of the physical conditions in and near the pool and the potential effect these might have on the safety of a pool user;
- Be aware of the likely behavioural characteristics of the pool user and the effect this may have on their safety in or near the pool.
- Provide where necessary immediate first aid at the poolside, summoning additional help.

The aim here should be one of containment so that the Pool Attendant can deal quickly with minor emergencies without leaving the pool inadequately supervised.

- Maintain observation of the pool and the pool users in and near it, in such a way that he or she can recognise a change in the situation and the indications which show that a pool user may be in difficulty in the water. While some pool users in difficulty may shout and splash, others may give little or no indication of a problem and may simply sink beneath the surface of the water.
- Promptly apply resuscitation where necessary.
- Be aware of and carry out as necessary the planned emergency procedures for the pool, including those for summoning assistance from other staff and emergency services.

4.4 Pool Supervision

To ensure that the pool is effectively supervised to provide a high standard of pool user safety.

4.5 Eight Key Rules

- The Pool Attendant **must** be vigilant as to what is going on in the pool; remember even when two of you are moving pupils / clients to and from the changing rooms the pool must be under supervision.
- When one Pool Attendant is present, they will be unable to support with the movement of clients or pupils on the poolside or hoist them in and out of the pool or in changing areas.
- Be aware that some of our pupils / clients have behavioural problems, which may escalate quickly, be ready to follow the instructions from their carer as they will usually know what the best action to take is. If the situation cannot be calmed down, remove any other bathers from the pool.
- **DO NOT** prop the fire doors open under any circumstances because of the danger of unauthorized persons gaining access to the pool without supervision.
- Whilst attending the pool, you are responsible for the safety of people using the pool as well as anyone on the pool surround and should take a preventative approach to their safety. Remember, under Section 7 of the Health and Safety at Work Act 1974, you have a duty of care to look after not only yourself, but other persons who may be affected by your acts or omissions.
- If attending the pool alone, ensure you have a walkie-talkie and know your emergency and resuscitation drill.
- In an emergency activate the nurses' alarm, which will also page the Senior Management Team.

4.6 Staff Training

All staff working on poolside will be required to attend pool training sessions; these will be held every six weeks for two hours.

Senior Leaders who carry a pager will also need to attend pool training sessions to gain a better understanding of what is required in an emergency. .

Staff will be expected to inform a member of the Pool Management team of any further areas of training they consider would assist them in carrying out their duties effectively and safely.

Staff should not use any equipment unless they have been trained in the correct method of use.

Training must be requested if you are unsure of any aspect of the Pool, **EVEN IF THIS IS REFRESHER TRAINING.**

All training records must be kept up to date and will be available with the Deputy Headteacher in the CPDL Folder.

- DO NOT PANIC IN AN EMERGENCY. THINK BEFORE YOU ACT.
- **NEVER LEAVE A POOL UNATTENDED.** If the pool is not in use, then it must be secured to prevent unauthorised access. Fob access is in place to support this.

We aim to make everyone's visit to the Hydrotherapy pool a safe and pleasant one.

KNOW THE NORMAL OPERATING PROCEDURES AND EMERGENCY ACTION PLAN

5.0 Normal Operating Procedure for Hydrotherapy Pools

- 5.1 Pool Covers
- 5.2 Supervision of Disabled swimmers
- 5.3 Water Clarity
- 5.4 Pool Inlet & Outlet Covers

5.1 Pool Covers

Pool covers at Ivy House Hydrotherapy Pool are electrically operated but require manual guidance when drawing them on to the pool.

The pool must be completely empty of users before beginning to put the pool cover on.

N.B Pool users may be using changing areas while pool cover is being put on, but the pool side should be empty.

Wherever possible, allow a period of 15 minutes, before putting the pool cover on. This allows for the pool surface water draw off, removing any surface contaminants which may otherwise stick to the underside of the cover. The guiding rope must be of sufficient length, to avoid the Pool Attendant reaching over the pool whilst guiding the cover onto the water surface. When the pool cover is on, the automatic locking system on the door must be on so access is restricted to authorised personnel only.

Removal

When the pool cover is removed, it is stored in a safe manner on its own reel. The guide rope is wrapped up neatly and hung over the pool cover switch.

Only one Pool Attendant is required to take the pool cover off. During this operation access to the pool must be restricted to authorised personnel only.

5.2 Supervision of Disabled People

It is vital that groups of users with disabilities have a high helper to user ratio. Ideally, this should be one-to-one, especially clients who are severely affected by their condition.

Many of the pupils have problems with verbal communication, but this does not mean they cannot understand. Some have partial or complete loss of sight; others may experience difficulty with body balance and some may have multiple disabilities. Everybody requires courtesy and respect. All Pool Attendants must be very observant for signs of fatigue and the effects of temperature, particularly with users.

Ivy House Hydrotherapy pool has specialist equipment, wheelchairs, hoists, shower trolleys etc. All staff with poolside duties must be fully trained in the use of the equipment and be aware of any potential dangers. Wheelchairs are stored away from poolside in the sluice/staff changing room when not in use.

All users and staff must read the NHS pre-session checklist and inform the Pool Management team of any changes in theirs or their client's condition.

5.3 Water Clarity

Water clarity does not only indicate the quality of the water. Unclear water is a safety hazard.

The bottom of the pool must be always clearly visible and therefore it is essential that the clarity is constantly monitored by the Pool Manager and Pool Attendant.

Pool tests will be carried out a minimum of three times a day and additional tests will be done as and when required. The dosing and filtration system in the Plantroom are checked Monday - Friday following the first pool test at 8:30am. All tests must be recorded.

5.4 Pool Inlet and Outlet Grilles

- 1. All inlet and outlet grills must be inspected weekly to ensure secure fixing of the grills and their condition.
- 2. To safeguard the Pool Attendant involved, a second Pool Attendant must be present. Ideally the water flow should be turned off, but this may not be practical.
- 3. If the Pool Attendant carrying out the checks becomes trapped, the second Pool Attendant **must** put the Emergency Action Plan in to place.
- 4. The findings of each check will be recorded along with the date and the signature of the person that carried out the inspection.
- 5. In the event of any faults being found, the Pool Manager and Site Manager must be informed immediately.

6 General Information

- 6.1 Staff Uniform & Appearance
- 6.2 Punctuality
- 6.3 Attendance Management
- 6.4 Non-Smoking Policy
- 6.5 Customer Care
- 6.6 Lost Property
- 6.7 Equipment
- 6.8 Access to Plant Rooms
- 6.9 Splash Party Ratios
- 6.10 Staff Induction Training Policy
- 6.11 Essential Training Needs Table

6.1 Staff Uniform and Appearance

All Pool Attendants must wear the uniform provided. It is your responsibility to ensure you only go on duty wearing the correct uniform and that it is clean and tidy.

All long hair should be tied back.

Flat enclosed nonslip shoes must be worn at all times whilst on duty.

6.2 Punctuality

As part of a team, it is important that you are ready for duty at the start of your shift. This nurtures reliability and trust within the team.

It is realised, however, that illness or a personal situation etc. may develop which results in you being unavailable for work. In such circumstances, you should inform the Pool Manager immediately in order that the pool team can still function both safely and effectively. You must also leave a message on the school's answerphone so that the School's Leadership can make a note of the absence.

The pool should be fully ready and available for use.

6.3 Attendance Monitoring Procedures

- 1.1 The Academy trust in consultation with recognised trade unions, has agreed this procedure to monitor and control attendance levels.
- 1.2 To be effective, it is essential that all departments apply this Attendance Monitoring Procedure fairly, consistently, and uniformly. Managers must pay particular attention to the provisions for disabled people.
- 1.3 All employees involved in attendance monitoring procedures, in whatever capacity, must maintain confidentiality throughout.
- 1.4 This procedure will make sure that:
 - Attendance is recorded and monitored
 - Employees are interviewed about absences when appropriate
 - Problems are identified at an early stage and action and support agreed
 - Employees are supported and encouraged to attend work regularly
 - The cost and disruption of absence to services is kept to a minimum.
- 1.7 Staff attendance Protocol for sickness or absence notification. There may be times when you have a legitimate reason for not attending work, including illness and emergency situations. In such circumstances it is expected that you ring or text the school absence mobile on 07912295331 and leave a message before 7:30am on the first day of absence. A member of staff may contact you to discuss the absence and clarify the information provided. If

you are genuinely unable to call yourself then you may elect someone on your behalf to contact the school. The following information should be provided:

- Your full name and class group or area of school if not in a class
- Your reason for absence

• If possible, give an estimate of when you hope to return. If you are due to be off for a set period (e.g. you have a Fit Note) please inform us of this.

• If you are absent and are still unwell and you are not able to come into work the next day you must ring and let us know by 3:00pm at the latest so we can organise cover. This isn't aimed to pressure staff, it is solely to organise adequate cover so that the students receive a good offer of education.

• If you are aware of any specific meetings or plans for the school day, then it would be useful to pass these on in order for cover to be arranged

6.4 Non-Smoking Policy

The school operates a **No Smoking** policy in all areas.

- This also includes E-Cigarettes.
- The policy applies to staff visitors and contract workers.
- Anyone wishing to smoke must go completely off site.
- Smoking in vehicles while on the school premises is also strictly prohibited.

6.5 Customer Care

To help us achieve our mission statement, please follow these 9 basic golden rules:

- 1. Be polite and helpful
- 2. Be smart and efficient
- 3. Be confident and cheerful
- 4. Be safety aware
- 5. Work as a team
- 6. Communicate and be informed
- 7. Take pride in yourself and in your environment
- 8. Users' problems are our problem
- 9. Smile and enjoy it!!!

6.6 Lost Property

From time to time there maybe items left on the poolside after a swimming session, where the users have forgotten to take it with them.

The procedure for dealing with lost property is:

- 1. Try to identify who the item belongs to
- 2. Put it in to the sluice office for collection on their next visit.

The person claiming the item will need to give a description of the item and when it was left.

N.B Any items of value *must* be locked in the school safe

Items of clothing will be kept for 4 weeks then disposed of. Any item of value will be kept for 6 months then taken to the Police Station.

6.7 Equipment

A wide variety of equipment is used in the hydrotherapy pool. It is essential that all the equipment is in safe condition and is fit for the purpose it is intended for,

An equipment inspection is carried out and recorded regularly. In the event of any equipment being unsafe or cause for concern; it must be taken out of use immediately and reported to the Pool Manager and Site Manager.

When laying out, using, or putting away equipment, you must check it for any damage or faults.

Once the equipment is finished being used it must be cleaned down thoroughly (as per the ISRM guidelines) and stored correctly once it has dried off. **Do not** store any equipment away wet as this will encourage mould growth and increase bacteria to form.

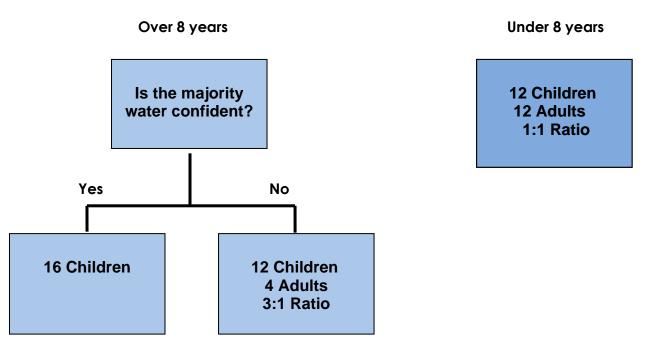
6.8 Access to Plant Rooms

Contractors access to Plant Rooms must be carefully controlled - keys should not be issued without Pool Manager or Site Manager's approval and safe procedures must be employed, always preventing public access. Safety of electrical tools and equipment and the non-mixing of improper chemical and substances must be assured.

6.9 Splash Party Ratios

The following figures are recommended numbers for pool parties, these may vary but that is at the discretion of the Pool Manager.

A Guide to Ratios for Splash Party's (External Use)



6.10 Staff Induction and Training Policy – Ivy House Hydrotherapy Pool

Training Categories

Training is divided into four categories:

- Induction.
- Essential.
- Desirable.
- On the job training.

Induction Training

All new employees must undergo an induction before beginning work at the school. A copy of the Pool Procedures Induction Sheet is available. The Pool Manager is responsible for ensuring that new employees understand the purpose of the Induction and that they are familiar with the items identified in the Induction process. Once the Induction is complete, the form must be signed by the individual and the person conducting the Induction training. This form should then be placed on the person's training file in the Deputy Headteacher's office. The Headteacher or a member of the Pool Manager team conducting the Induction should not sign to say that the Induction has been completed, unless he or she is confident that the new employee understands the information given.

The employee should not sign the Induction sheet unless they understand the information they have been given.

Essential Training

Essential Training is considered as training that is necessary to enable Pool Attendants to carry out the specific duties required for their post to a high standard and in a safe manner.

Recording of Training

All training must be recorded on the Training Record and where possible, copies of qualifications included in the records.

An Attendance Register must be completed for each training session. This is the responsibility of the Pool Manager. After training is completed the Pool Attendants sign the training sheet and the TA will sign the competency section. From the training record the TA and Pool Manager can see where additional training maybe required.

	Pool Manag- er	Pool staff	Therapy staff	Pupil Support Staff
Basic Health & Safety	√	~	✓	✓
Basic First Aid	✓	~	\checkmark	
СОЅҤН	✓	~		
Racial Awareness	✓	~	\checkmark	✓
Disability Awareness	✓	~	✓	✓
Operating Procedures/ NOP/EAP	✓	~	✓	
Child Protection	✓	~	✓	✓
Risk Assessment	✓	~	✓	✓
Moving and Handling	√	✓	\checkmark	✓

7 COMMUNICATION

- 7.1 Communication General Statements
- 7.2 Communication General Public Verbal
- 7.3 Information and Signs
- 7.4 Internal Telephone Calls and Numbers
- 7.5 Pool Diary
- 7.6 Dealing with complaints
- 7.7 Radios
- 7.8 Use of social media

7.1 Communication - General Statement

Effective communication is essential if the pool is to operate in a safe and professional manner and provide a high-quality service.

There are various forms of communication, and all should be utilised to the fullest effect. All communication must be clear and concise. Remember that you know what you mean. The person that receives your message may need further clarification. The message you give is only of use if it has been received and understood correctly.

7.2 Communications - General Verbal

- Calm and clearly spoken messages are most important in an emergency.
- Talking can be a distraction when on poolside observation duties. Only carry out **ESSENTIAL** communication.
- Direct the level of your communication to the person you are dealing with, i.e. don't use big words when talking to children don't patronise adults.
- If discussing specific individual users, i.e. 'keep your eye on...", do it discreetly. In such instances try to avoid pointing.
- If using a two-way radio, remember that you may be alone when transmitting the message but there are several other radios receiving that message and they will undoubtedly be in public areas. If a private message is to be sent, use a telephone if possible.

7.3 Information and Signs

- Various signs and information points are positioned throughout the hydrotherapy pool area.
- All signs and information displayed are advisory.

7.4 Internal Telephone Calls

The internal telephone system is only for communication between sections of the building. It must not be used for general conversation.

Telephone calls must be short, clear, and concise.

- Staff are not allowed to receive private telephone calls whilst on duty.
- If friends and family wish to contact staff at work, this should be kept to a minimum.
- In an emergency, the member of staff will be notified immediately.
- Staff may make outgoing private calls only in their designated break time.

Remember: The internal telephone system is essential in an emergency; abuse of this system could endanger a life.

NOTE: Mobile phones are not allowed to be carried around with you when on duty.

Name	Extension No.		
Office Manager	6002		
Admin Assistant	6001/6003		
Head	6006		
Deputy Head	6007		
Assistant Head	6009		
Pastoral Liaison Officer	6008		
Therapy Room	6014		
Kenny / Jax	6005		
Tara Gaskin	6010		
Medical Room	6020		
Pool	6012		

Internal Telephone Numbers

7.5 Poolside Diary

This is to be used for recording day to day information and messages. Booking holiday hours, Family Swims etc.

7.6 Dealing with Complaints

Staff will undoubtedly receive various complaints from time to time.

Some of these complaints will be trivial, some more serious, but in either case it is important to deal with people politely, despite their possible provocative attitude and behaviour.

You do not know who might be watching or listening.

A member of staff who can deal politely with a complaint and who can ignore aggravation is more likely to gain the respect of the complainant and anyone who might be watching.

The complainant must be dealt with promptly and with courtesy preferably by the person receiving the complaint.

Complaints should not be looked upon as a nuisance nor taken personally but as a form of feedback on the service we are providing.

Complaints should be resolved at the source and, where possible, verbally.

Situations may arise however, where the appropriate course of action will be to enable the complainant to disclose the details of the incident/occurrence in writing, in which case the complaint should be forwarded to the Headteacher. When dealing with complaints it is important to allow the complainant to witness the corrective action you are taking, if required. For example, if the complaint involved litter in the shower area, the action to take would be to remove immediately. Having witnessed their complaint being attended to, the complainant will leave the pool feeling assured of the personal service afforded to them.

NB: Be apologetic, be polite, deal with complaints as soon as possible, and accept the blame if this was an error on behalf of the school.

7.7 Radios

Do not use the two-way radios for private messages. Other members of the staff or public may be able to hear your message.

Radios should be put on charge at the end of each shift and not left uncharged.

7.8 Personal Use of social media

The school cannot and does not want to prevent or restrict your use of social media in your own time and for your own purposes.

However, the school needs to make all users aware that if their personal use of social media conflicts with the duties for the school, or their obligations as an employee, as contracted suppliers, or a volunteer/student, then the school has the right to take appropriate action. No information that you have as a representative of the school should be copied, published, or commented upon when using social media for personal use.

The school's standards and codes of behaviour extend beyond the workplace in respect of any actions or communications you may engage in that could bring the school into disrepute.

Individuals must not publish personal data or information about others (including staff and pupils at the school) without their explicit written permission. If you are unsure about this, then you must seek advice from the Headteacher before publication.

Staff must stay within the legal framework and be aware that defamation, copyright, and data protection laws apply. There are also legal restrictions on using School facilities for certain types of publicity, such as for political or campaigning purposes.

Staff must ensure that they **do not accept** personal 'friend requests' and/or 'follow' students or their families on social media when using a personal account outside of work. Staff should use the correct channels within school and in working hours to contact parents, as needed.

There may be occasions whereby the school and staff would wish to contact families using social media, such as following the bereavement of a child who had historically been on roll at school. If this is the case, staff must seek permission from the Headteacher before engaging in any communication. Staff must be aware that this will be for a limited period, as directed by the Headteacher.

Additional information can be found in the school's social media Policy.



Emergency Action Plan (EAP)

8 EMERGENCY ACTION PLANS

- 8.1 Fatality
- 8.1a Lockdown procedures
- 8.2 Major Injury Accidents
- 8.3 Reporting Fatalities/Major Injury Accidents
- 8.4 Use of the Laerdal Pocket Mask
- 8.5 Epilepsy
- 8.6a Evacuation of the Pool (In School Hours)
- 8.6b Evacuation of the Pool (Out of School Hours)
- 8.7 Evacuation of the Building/Fire Procedures
- 8.8 Critical Incidents
- 8.9 Chemical Spillage
- 8.10 Chemical Gas
- 8.11 Gassing by Chlorine
- 8.12 Pool Covers
- 8.13 Falling on the Cover
- 8.14 Becoming Submerged Under the Pool Cover
- 8.15 Electrocution Whilst Operating Pool Cover
- 8.16 Electrocution General
- 8.17 Treatment for Electric Shock
- 8.18 Power Failure
- 8.19 Emergency Lighting
- 8.20 Structural Failure
- 8.21 Assault and Harassment
- 8.22 Indecency
- 8.23 Child Protection
- 8.24 Theft
- 8.25 Disturbance
- 8.26 Chemical Poisoning
- 8.27 Pool Water Clarity
- 8.28 Unsafe Equipment
- 8.29 Soiling of Pools
- 8.30 Bather Trapped in or on Pool Outlet
- 8.31 Failure of Telephone System
- 8.32 Control of Pests
- 8.33 Stainless Steel
- 8.34 Blood & Vomit Spillages
- 8.35 Nurse Call Out
- 8.36 Defibrillation
- 8.37 Dehydration

8.0 EMERGENCY ACTION PLAN

The purpose of the Emergency Action Plan is to ensure that if an emergency arises, there are procedures available for you to follow. The procedures have been developed in an effort to minimise injury, suffering, or loss of life.

The importance of complying with these procedures cannot be overstated. Read them and read them again. Your life, or the lives of others, may depend on your action in the event of an emergency.

8.1 Fatality

This may occur to anyone at any time. It is essential that in the event of such an occurrence, effective teamwork, calmness, and discretion is to be shown. Assistance must be sought and the Pool Manager and Headteacher are notified as soon as possible.

ALL EMERGENCY SERVICES CAN BE CONTACTED BY DIALLING 999 / 112

The person may be accompanied at the time of the incident and therefore a severe state of shock may develop in the carer / guardian.

- The immediate area must be cleared.
- Every effort must be made to revive the person.
- Efforts must continue until professional help arrives.
- If possible, try to obtain details of the deceased, i.e. name, address, medical history, etc. to pass on to the Emergency Services.
- Whilst other members of staff may be asked for information, the Headteacher or Pool Manager would be responsible for relaying information to the Emergency Services about the incident.
- Under the Data Protection Act no comments must be made to other members of staff, friends, family etc. or any contact with the PRESS or other forms of MEDIA.
- Comfort and consideration must be shown to any carers / guardians.

Lockdown Procedures

- In the event of a lockdown all blinds to be lowered.
- Lights and sound system to be turned off
- Move occupants to pool corners adjacent to the cubicles



8.2 Major Accidents

• If such an incident occurs, it must be reported to a member of the Pool Management Team immediately. (See EAP 8.3)

They will: -

- Assess the situation and direct the handling of the incident.
- Ensure the appropriate emergency services are contacted. More than one may be needed.
- Ensure first aid is given in accordance with training by a qualified first aider; **providing it is safe to do so.**

Obtain as much information as possible about the injured party i.e. name, address, medical history, etc. and how the incident occurred. This can then be relayed to the Emergency Services.

- Ensure any bystanders are treated for shock if necessary
- Complete the appropriate forms after the casualty has been handed over to the Emergency Services.

Should the situation arise that the casualty is the Pool Attendant themselves then the protocol to follow is:

- A. Emergency alarm activated by nearest person to alarm point (located by chair hoist pod and changing area next to fire exit)
- B. Senior management team and nurses will be paged for assistance
- C. Await further instruction and support from First Aiders and Emergency Services.

8.3 Reporting Fatalities / Major Injury / Accidents

The Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (RIDDOR) 1995 makes it the responsibility of the Academy Trust to report certain specified incidents to the Health and Safety Executive i.e.

1. Fatal Accidents

The death of any person because of an accident arising out of or in connection with work.

Major Injury Accidents

A major emergency is one where an accident occurs resulting in a serious injury or life-threatening situation. In most cases, it will involve more than one member of the Pool Attendant / staff team and may in extreme situations involve all members of the team.

These are defined as follows:

- Any fracture, except fingers, thumbs, or toes;
- An amputation of any part of the body;
- Loss of sight in an eye, chemical or hot metal burn to an eye;
- Burns (including chemical or electrical burns) to the body. All burns require immediate medical attention, in the case of burns due to an electric shock from any electrical circuit or equipment, whether or not due to direct contact; treatment is still the same as any other burn.

N.B If the casualty is in contact with the power source ensure you isolate the power before attending to the casualty.

Any incident covered by RIDDOR must be reported immediately to:

The Pool Manager

The Headteacher

The Academy Trust's Health and Safety Officer

8.4 Use of the Laerdal Pocket Mask and Resuscitation Equipment

Introduction:

The Laerdal Pocket Mask is designed primarily for mouth-to-mouth ventilation of a non-breathing adult, child or infant. It eliminates direct contact between the rescuer and casualty and, with the addition of the one-way valve, avoids re-breathing of the casualty's expired air by the rescuer.

Two sizes of mask are available adult and young child.

The mask may be used to provide inhalation of oxygen-rich air by casualties who are breathing spontaneously. When used for this purpose, the mask may be kept in place by the elastic head strap.

- 1) Apply the rim of the mask between the casualty's lower lip and chin, this helps to keep the mouth open under the mask.
- Commence with 30 chest compressions
 (5 6 cm Adult, 1/3 of body size Junior and Infant)

- 3) Apply pressure to the mask with a 'C' grip; place your thumbs on either side of the mask, halfway between the inlet port and rim. Use your fingers to lift the lower jaw upwards by grasping behind the angle of the jaw, just in front of the earlobes.
- 4) Open the airway further by tilting the head backwards (head tilt / chin lift).
- 5) Take a breath, apply your lips to the one-way valve and blow gently into the mask. The casualty's chest takes approximately 1 second to inflate and 2 seconds to deflate. Watch for the casualty's chest to rise, showing that air has reached the lungs.
- 6) Watch for the chest to fall and repeat the sequence. Maintain head tilt chin lift.
- 7) If you must carry out combining chest compression (CPR) and inflations, use the mask from the casualty's side to be able to switch quickly between compressions and inflations.

Cleaning

The mask is reusable and may be cleaned as noted below. The one-way valve **must** be discarded after a single use on a casualty.

Cleaning Instructions

- a) Wash and scrub mask and valve in warm, soapy water.
- b) Rinse in clean water.
- c) Submerge for 10 minutes in a solution of sterilising fluid. For dilution rates read bottle label.

N.B The solution must be made up freshly and discarded after use.

e) Rinse thoroughly and allow the mask to air dry.

8.5 Epilepsy

All the pupils at Ivy House School who suffer from epilepsy have a care plan and protocol in place. In the event of a seizure in the pool the nurses and Senior Management must be alerted via the nurse call system located above the yellow bin outside of the changing cubicles. The nurses will then assess the situation and carry out the necessary treatments e.g. rescue medication etc.

NB: Pressing the **red** pendant calls the nurses and Senior Management. The **blue** pendant turns the alarm off (by the yellow bin).

Poolside seizures:

Follow pupils' usual protocol

Seizures in the water:

- Alert the Pool Attendant and other staff members in the pool
- During a convulsive seizure or absence, support the client to keep their face out of the water
- Take care their head doesn't hit the pool side or you
- If possible, support them in the shallow water until the seizure is over.
- Monitor their breathing and circulation
- (If their breathing has stopped, they must be removed from the pool as quickly and safely as possible)
- Get medical help for anyone who has had a seizure in the pool as they may have inhaled water, which could result in secondary drowning.
- Once the seizure has finished, an assessment will need to be made by the Pool Attendant and supporting staff on the safest way to assist the client out of the pool.

8.6a Evacuation of the Pool – during school hours

This would normally be carried out following a serious incident, including fire.

In the event of an incident the within school hours:

- Pool Manager will take control of the situation and prepare to evacuate the building
- Instruct the pool users as to what they need to do.
- Pool Manager will ask pool users to vacate the pool water and await further instructions.

Remember it may take a few minutes to clear the pool if the hoist is required.

- Everyone should remain together and move to the changing cubicles.
- Do not allow them to re-enter the pool until the situation has been cleared.
- Pool Manger to await instructions from a Fire Warden or Fire Brigade.

Evacuation of the Pool – out of school hours

In the event of an incident happening out of school hours:

- Pool Manager will alert pool users and then take control of the situation.
- In the unlikely event the Fire Alarm is activated, Pool Manager will leave the pool area via the fire exit and attend to the Fire panel to determine area of activation
- The clients will be asked to leave the pool or to stay where they are, depending on the incident.

Remember it may take a few minutes to clear the pool if the hoists are required.

- Parents/Cares will start to clear their clients from the pool, moving them to the changing cubicles.
- If a female carer is helping to change a male client (or vice versa) then they will be able to use the staff changing area.
- Do not allow anyone to re-enter the pool until the situation has been cleared.
- If the casualty is unconscious check their Airway and Breathing, if not breathing get them out the quickest and safest way possible – commence CPR
- Ensure that someone has called Emergency Services, using the portable telephone in the pool reception.
- If casualty is conscious remove them from the pool and treat accordingly

8.6

Out of hours pool use,

 Pool Manager to notify Site Manager of arrival and departure. If emergency assistance is required during the session to ring Emergency Services and Site Manager/Senior Management Team

Thermal blankets are available from the pool sluice room. These must be issued to bathers if the poolside is being evacuated.

8.7 Evacuation of the Building / Fire Procedures

The evacuation of the building is covered in the School's Fire Procedures and must be followed accordingly. As with all evacuations, calmness, clear directions, and a confident manner are essential.

CODE OF PRACTICE FOR THE SAFE EVACUATION OF IVY HOUSE IF THERE IS A FIRE ALERT

1) Introduction

This Code of Practice is designed to protect everyone in Ivy House if there is a fire alert. It covers visitors and the public to whom we have a responsibility.

READ IT CAREFULLY AND, IF THERE IS A FIRE ALERT, KEEP TO IT

2) Fire Doors - General Advice

All external doors will automatically unlock. The fire doors will close automatically when the alarm system is activated. You may still pass through the doors and each compartment gives you 30 minutes' protection from fire.

A horizontal evacuation will take place slowly and methodically.

3) Fire Alert Procedure

HEADTEACHER AND FIRE WARDENS – RESPONSIBILITIES

Selected staff are trained fire wardens, and these will act as the Emergency Wardens for the School. These staff will be identified by fluorescent jackets.

In the first instance, the fire alarm is a two-tone intermittent whirring siren. When it sounds the red beacons in the building will also flash. If a fire detector is triggered in school, the fire alarm will sound on an intermittent basis for a period of 6 minutes.

This is a signal that we may need to evacuate. During this time any pupils in the water should be slowly and systematically hoisted out of the water, towelled off, and positioned into their chairs. Space blankets are available to cover pupils. Pupils being changed should be re-positioned in their chairs and covered to retain dignity and heat.

THERE IS NO NEED TO RUSH OR PANIC AS THE SCHOOL IS BUILT TO THE HIGHEST STANDARDS OF FIRE PROTECTION WITH MANY FIRE COMPARTMENTS (SAFE HAVENS) AND A SPRINKLER SYSTEM.

• Safety gas shut off

You will be told which direction to evacuate to if necessary.

If a fire is discovered, the alarm signal will become continuous. A fire warden will direct you to the evacuation point farthest away from the fire. This will either be the school hall or the classrooms in blue zone. A roll call will be taken at the evacuation point. The Pool Attendant and pool staff will be responsible to account for the people in their session.

Do **not** attempt to fight a fire unless you are familiar with the firefighting equipment and are trained in its use and it is safe to do so.

Do not return to an area to collect any items – evacuate immediately but carefully.

Out of hours users should evacuate slowly and methodically via the pool door fire exit to assemble in the car park.

The Pool Attendant will issue foil blankets to all users (these are in the staff office, in the bottom drawer or the black and white storage unit).

The Pool Attendant will instruct you on what to do.

STAFF RESPONSIBILITIES

(B) If you discover a fire - break the glass of the nearest fire alarm button to activate the alarm. The break glass point is next to the pool external exit door.

Evacuate the area of all persons to the nearest available safe compartment. Close any open windows and doors if it is safe to do so.

Do **not** attempt to fight a fire unless you are familiar with the firefighting equipment and are trained in its use and it is safe to do so.

Stop anybody from trying to enter/re-enter the area.

If you hear the alarm:

Prepare to evacuate the pool. Close all doors and windows in your area. Clear the pool slowly and safely using the appropriate methods and techniques for each person in the water.

If the alarm is a false activation a fire warden will tell you.

If a fire is discovered, the fire alarm system will go into full emergency evacuation status.

A fire warden will instruct you on what to do. Evacuate the area you are in of all visitors and the users ensuring they leave in a safe, orderly manner and **DO NOT PANIC**.

The assembly points are: -

- (a) School hall
- (b) **Blue** zone classrooms

YOU WILL BE INSTRUCTED AS TO WHICH AREA TO USE

Out of hours:

(a) Far Side of the Car Park at the front of the school

Use the nearest available safe route and exit. If the route is blocked by fire or is smoke logged use another safe exit.

(b) The fire wardens will co-ordinate a search of the building.

DO NOT LOCK ANY INTERNAL DOOR

DO NOT COLLECT PERSONAL BELONGINGS

DO NOT RE-ENTER THE BUILDING UNTIL TOLD TO DO SO BY THE PERSOT CHARGE (FIRE WARDENS) OR FIRE OFFICER

DO NOT PANIC

Out of school hours the Pool Manager / Swimming Teacher

The pool is supervised by the Swimming Teacher / Pool Manager

- The Pool Manager will go to the Fire Panel to find out where the fire is.
- They will then go to the area displayed on the panel to investigate.
- If there is a fire than the Pool Manager will hit a second alarm
- The Pool Manager will return to the pool area and will start to evacuate if required to an assembly point that will be determined on the day.

If the fire alarm is activated during swimming lessons/Hydro session, and there is only a Pool Manager in the building, then they will get the children out of the pool and hand them over to their parents, the parents will take full responsibility of their children whilst the Pool Manager will go down to the alarm panel to investigate the cause.

If there is a fire, then the full evacuation procedure will be put in to action.

8.8 Critical Incident Management

To make appropriate response to any critical incident, a plan has been drawn up.

It contains:

- 1. Preventative measures
- 2. Definitions: how to define a critical incident and appropriate intervention
- 3. Roles of Support Agencies
- 4. Role clarification for all staff, who will do what, where and when
- 5. Handling the reactions of people affected
- 6. Review and training

1. Preventative Measures

Whilst we cannot prepare for every eventuality, there are steps we can take to smooth responses to any given incident. Therefore, we have:

- Identified a Critical Incident Team (CIT) who, collectively or individually, could take a lead in an emergency. Key roles to those involved have been identified.
- Ensured basic information, contact lists, communication, procedures etc., are in places, known to all key staff and kept up to date (including references to changes in legislation and guidelines).
- Ensured that Academy Councilors and all key staff in the school community are aware of the plans developed.
- Ensured timescales for review and updating are securely in place.
- A list of any students out from school on visits or placements on any day should be kept in the school office.

The Academy Trust has undertaken to maintain such a sequence for itself and will assist schools, where possible, in their planning.

2. Definitions

A 'Critical Incident' can be defined as......

'An event or sequence of events affecting students and/or staff which created significant personal distress to a level which potentially overwhelms normal responses, procedures and coping strategies and which is likely to have serious emotional and organizational consequences (adapted from Norfolk Education Service)'.

Additionally, a Critical Incident may

- Happen inside or outside school.
- Involve severe injury or deaths to students, staff, parents or members of the local community.
- Involve no physical injury but emotional trauma.
- Involve one student, one member of staff, or, at the other end of the scale, hundreds;
- Involve the school site being used as REST CENTRE by the Local Authority in the event of a local disaster or community critical incident.

A Critical Incident will almost inevitably disrupt school functioning.

Critical Incidents will be categorized into two levels, Level 1 and Level 2

The following **Level 1** incidents could be seen as high priority in that they would require a detailed action plan including all or most of the elements summarized on page 5.

Level 1: High Priority Action Plan immediately put into operation

Past examples:

- A shooting.
- A stabbing.
- A school minibus crash
- The school trip accident
- The hostage taking
- The unexpected death of pupils due to an accident
- Community critical incidents or a civil disturbance including bombs.
- A fire

The following **Level 2** incidents may be seen as lower priority but may nevertheless severely disrupt school organisation and functioning may result in severe distress to students and/or staff and may require some elements of the action plan such as the involvement of support agencies.

- The death of a student or adult on the school premises
- A road traffic accident involving a student or member of staff
- The murder or severe injury of a student, parent or member of staff outside school
- The death of a student following an accident or illness outside school

3. Role of Support Agencies

In any major critical incident, the involvement of the Emergency Services is crucial and their role of paramount importance. Police, fire, ambulance, and coastguard have priority over all other outside agencies.

N.B.

In the event of a major incident occurring which affects a proportion of the city, Derby Moor Academy is a designated REST CENTRE; this may cause disruption to Ivy House School access.

Ivy House School has adopted the Academy Trusts Critical Incident Plan and Procedures, which are available from the Headteacher and Site Manager.

4. Role Clarification: Critical Incident Team (CIT)

Role Clarification for School Staff

In our experience, distress occurs both to individuals involved in any traumatic incidents and to those involved in a helping capacity, whether school staff or outside agencies. For the best humanitarian reasons people often rush to situations where they feel they are needed but working within a traumatic situation is not easy and should be treated with caution. Ideally, it should be carried out by those who are personally robust enough to cope with the pressures and who have received further training. Access to professional colleagues for 'debriefing' purposes is essential if further 'casualties' are to be avoided. The Headteacher and managers of support services will take responsibility for ensuring this is provided. All teaching staff should not be expected to work within a traumatic situation with training; rather they should be given the choice and further options as the critical incident plan is formulated.

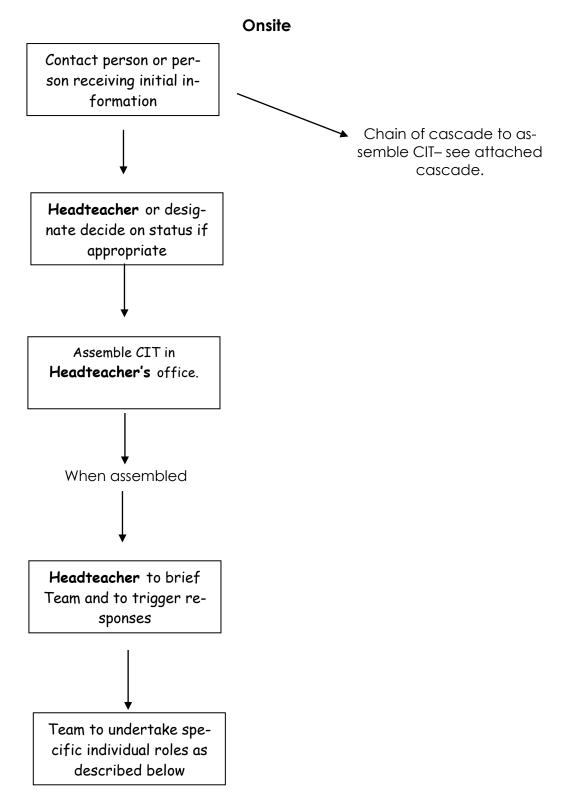
The Headteacher or designated lead will ensure that a Critical Incident Plan is put into operation, including:

- Commence the log immediately of details and actions
- The Chair of Academy Council to be notified
- Inform the Health & Safety Lead for Shaw Education Trust
- Other staff are informed that the action plan is being carried out
- Contacting involved parents
- Informing other parents by letter
- Liaising with support agencies

- Handling enquires
- Liaising with Academy Trust Communications Lead
- Talking to the media, if necessary
- Organising meetings with other staff
- Ensuring safety and security of school building
- Establishing priorities for counselling
- Management system for recording who has been seen and in what order

It may well be that normal management structures are not appropriate during this process. Competence, reliability and availability may determine membership rather than school structure or status.





Critical Incident Team (CIT) – Roles

'Contact Person' (**Or** the available person nominated by the Headteacher or the first and most senior person in receipt of the information)

- Gather initial information
- Keep written record including time information received
- Fill in Critical Incident log (see below)
- Inform Headteacher and Deputy Headteacher
- Cascade information from Critical Incident log
- Establish/maintain communication links

Headteacher

- Decide status of incident
- If necessary, alert emergency services or confirm that this has been done
- Initiate cascade to assemble CIT
- Trigger contacts and Support Services
- Brief CIT
- Receive and pass on information as and when received

Headteacher and SLT

- Prepare factual statement including reassurance of actions being taken by school and avoiding speculation
- Liaise AJW support to prepare Community Room as base including telephone access if appropriate
- Be available to take enquiries from press
- Organise press conference if appropriate with Academy Trust advice
- Update Press as and when necessary
- Prepare statements for rest of school/school office etc.

Site Manager and Office Staff

- Facilities access or non-access to resources on the school site/liaise shift
- Co-ordinate use of land phones/mobiles phones/radios, plus dedicated in and outgoing lines
- Contact other services if required, e.g., catering/extra office staff/transport
- Prepare Reception Area for receiving parents/visitors/students
- Co-ordinate car parking

- Liaise with their agencies (Adult Education/Sports Centre etc.)
- Provide access to school site
- Assist with Health & Safety issues
- Provide heating/lighting where appropriate
- Assist with sign erection

SLT

- Assemble appropriate contact lists
- Communicate consistent information to all parents directly involved, avoiding speculation
- Record those parents contacted, where possible
- Receive parents on arrival at school
- Update parents as and when appropriate

Deputy Headteacher / Senior Leadership Team

- Deliver prepared factual statement to other staff and students (maybe via special staff meeting or assemblies)
- Oversee the rest of school
- Liaise with colleagues, as appropriate
- Make preparation for rest of day/next day via staff cover/room changes, school closure etc.

Office Manager (MJP)

- Assist in providing access to information held on RM Integris
- Assist in receiving telephone enquires
- Assist in liaising external agencies.

5. Handling the reaction of people affected

Experience from affected schools, and from research, provides a wealth of evidence about the range of reactions and needs generated by critical incidents. People can react very differently; some will readily give vent to their feelings; others find it more difficult. Student's ages and development will, of course, affect their understanding and feelings. The nature of the incident itself has a major bearing on the feelings. The nature of the incident itself has a major bearing on the feelings generated. The most common reactions include denial, distress, guilt, anger, and helplessness.

There are, however, some common needs that should be recognized and addressed:

Action within hours

- Inform all staff, give guidance on how to support and talk to children
- Confront the 'truth' and take care with the form of words in announcements
- Outline the measures in place to provide help for distressed children
- Provide information for families on the kind of help available

Explicit acknowledgement of the incident

- Acknowledge the emotional state of staff, students, allow time and space
- Some staff may not wish or be able to directly support children
- The burden may fall disproportionately on a small number
- Establish boundaries avoid 'milling'. Designate areas for parents, supporters, the press, etc.
- Be sensitive to the effect on staff and students

Opportunity to talk through or otherwise express personal reactions

- While attempting to ensure continuity and normality, staff should encourage children to talk about their feelings and be prepared to listen to them
- Groups of children may be offered support from outside professionals who can debrief them to help them understand their reactions and developing coping strategies. Parental permission should be sought in this instance.
- Staff closely associated with the children involved should be offered opportunities for debriefing and counseling
- Exceptionally, some children and staff may need therapeutic help for a considerable time, or at some time after the event

Those providing support will also need support

• Be aware of the possible delayed reactions for those actively involved in responding into a critical incident. Staff who are coordinating the school's

response should be supported and scheduled for relief periods.

• Teachers are vital in supporting pupils through a critical incident, but teachers facing this, need and deserve information guidance and emotional support themselves The needs of the Headteacher and Senior Staff have not always been fully acknowledged. The strain of leading a school through a critical incident can obscure the Headteacher's personal feelings. Be aware of own welfare needs.

Formal and informal recognition and rituals

- Arrangements may be made to express sympathy to the families directly affected by the incident.
- Injured children can be visited in hospital.
- Children can be encouraged to send cards and letters.
- Plan to attend a funeral if welcome. (School closure is possible at the discretion of the Academy Council).
- Discuss the desirability of holding special assemblies and memorial services
- Anniversaries are key times, and the school should ensure such times are handled with sensitivity and support.

Continuing or quickly re-establishing normal routines

- Every attempt should be made to provide as much continuity as possible for children.
- Maintain the normal school day so that children are unsettled as little as Possible.

Return to school by students and staff directly affected

- Some may not be attending school after an incident and will need assistance on re-entry
- Some may have been injured or distressed and will need significant support to reintegrate back into school

6. Training

We may need to consider appropriate training for staff who have expressed a wish to be involved in this type of work, such training could include full First Aid courses, aspects of bereavement, group debriefing etc.

Plans to be updated annually – each year for inclusion in annual Staff Handbook.

CRITICAL INCIDENT LOG

Staff Initial ______ Time Information received ______

Date_____

What has happened?

Where and when?

Name and contact number of adults at incident site

Extent of injuries, numbers, and names

Location of injured, name and contact of adult present

Location of uninjured, name and contact of adult present

Is help required from School?

 Who else has been informed?

 e.g.

 Police:
 Time:

 Station:

 Any other service?

 What has been said?

8.9 Cleaning Chemical Spillages

In the event of a chemical spillage, it is important that the area is isolated immediately and the cleaning up process started. When dealing with any chemical

spillages, please consult the COSHH sheets before you start the clean up.

1. Procedure for spillage of diluted Cleaning Chemicals

The chemicals used in the spray bottles have already been diluted to a safe level. If there is a spillage from one of the bottles, then please follow the procedure below:

- Caution the area off and put up the cleaning signs
- Continue to dilute the chemical with large amounts of water from the hose.
- Swill the diluted chemical down the drain; ensure that it does not go into the pool drains.
 - 2. Procedure for spillage of **undiluted** Cleaning Chemicals

The cleaning chemicals are stored in the bottom steel cabinet in the sluice room. These are used to top up the spray bottles as and when necessary. N.B this should **only** be done in the sluice room, over the sink and not in the changing

area.

If a spillage does occur, then please follow the procedure set out below;

- Caution the area off to stop anyone walking through.
- Clean up the excess chemical with paper towels (make sure you are wearing gloves)
- Get a **RED** mop and bucket from the cleaning cupboard (next to the laundry room)
- Mop up the residual chemical, using fresh water only.

3. Pool Chemicals

The pool chemicals are secured in the plantroom, which is only accessed by authorized, trained members of staff.

All the chemicals in the plantroom are extremely hazardous and it is very important that any spillage is dealt with as soon as possible – **if it is safe to do so.**

Chlorine Spillage

The chlorine solution is stored in a large bulk tank, which sits in a large overflow tub. The overflow tub is designed to hold all the solution from the bulk tank should the system fail. The chlorine is diluted in the tank, but it still is extremely dangerous and can cause respiratory problems and severe burns to the skin, it will also burn holes through your clothing. There is specific **PPE** that **MUST** be worn when dealing with any plant room chemicals. The PPE comprises of: Yellow Chemical Suit, Respiratory Mask, Wellingtons, Gloves and Eye Protectors.

> If a large amount of chlorine spills on to the plantroom floor there is a yellow chemical spillage system which will need to be put down on the floor to contain the liquid. This consists of a mat to put on top of the spillage and noodles to contain the liquid in that area

Steps to be taken.

- Alert the pool team that there is a chlorine spillage
- Isolate the area
- Put the PPE on that has been provided
- If possible, try to isolate the leaking from the tank
- Sprinkle Thiosulphate on to the spillage (this is to neutralize the chlorine)
- Using the vacuum on the floor scrubbing machine, clean up the spillage
- When the machine is full, take it outside.
- Open the drainage plug on the machine and let the neutralized solution go down the drain, rinse down with large amounts of water.
- Once everything is cleaned ensure to rinse out the machine thoroughly inside and out.

8.10 Chemical Gas

There have been several cases of gas emissions in swimming pools but usually these have been confined to plant rooms. The public use of premises has not been affected.

In those instances, in which it has been necessary to evacuate parts of the building gas emissions have been caused by the mixing of chemicals.

In the event of a Co2 leak an alarm will sound and the panel adjacent to the plant room door will be change colour from green to amber or red. **DO NOT ENTER IF THE PANEL IS RED.**

- 1) If it is not necessary to enter the affected area and it is known that no one is isolated in the area, door should be closed to prevent gas spreading and anyone gaining access.
- 2) If it is necessary to enter the affected area, put on an approved canister respirator but do not enter until another person is stationed outside the area.
- 3) If the gas leak is adjacent to any intake fans, they must be isolated immediately.
- 4) If the emission of gas cannot be safely controlled, obtain assistance from the Fire Brigade and Police.
- 5) Warn people in the vicinity by either activating the emergency alarm, using the two-way radio or internal telephone. It is essential that the Headteacher and Site Manager are contacted immediately.

The order of taking the above precautions and whether some of them should be taken at all, will of course depend on the nature and scale of the emergency.

It is essential, however, that all areas which are affected by the gas emission are evacuated as quickly as possible and further access prevented.

8.11 Gassing by Chlorine

Chlorine gas is not the same as other gases, it travels down not up. All persons who have been gassed by chlorine should be sent to hospital for examination as serious symptoms may develop at a later stage. Until the patient is receiving treatment from a qualified medical practitioner, the following can be administered by a qualified First Aider:

- Immediately remove the clothing which has been contaminated with chlorine.
- Carry the patient into an uncontaminated warm atmosphere free from draughts and loosen clothing at the neck and waist.
- Keep the patient at rest with head and chest raised, reassure the patient.
- If breathing has ceased, start CPR.

8.12 Pool Covers

Accidents can happen when putting pool covers on or taking covers off the pools.

These may take the form of: -

- 1) Falling onto the pool cover.
- 2) Becoming trapped between the pool cover and the side of the pool tank.
- 3) Becoming submerged under the pool cover.
- 4) Electrocution whilst operating the electrical supply.
- 5) Power failure.
- 6) Falling into the pool.

The emergency procedures detailed below, are instructions on the action to be taken in the event of such an incident occurring.

8.13 Falling on to the Cover

The power supply must be turned off immediately. This is done using a key, to the right of the pool cover reel. The Pool Attendant in control of the power supply should then assist the other Pool Attendant off the cover. This must be done safely and without risk to either person. This may be done with reach rescue techniques. If necessary, activate the pool alarm or nurse' call alarm to summon help.

8.14 Casualty becoming submerged under the Pool Cover

- Sound the pool alarm.
- Remove the pool cover off the pool
- Enter the water to collect the submerged person.

N.B If the Pool Attendant is going into the water with the covers still on, or partially on, then this must only be done when another person arrives on the pool side and is aware of what is happening.

8.15 Electrocution whilst operating the Pool Cover

Whilst the chances of someone getting electrocuted during the operation of the pool cover are minimal, the following steps should be taken, should the event occur. This equipment is 415 volts. In the event of a person receiving an electric shock, the supply must be isolated immediately. If the person is electrocuted by the equipment, the following procedure must be adopted.

Isolate equipment immediately.

(NOTE: ALL CIRCUITS ARE PROTECTED BY RESIDUAL CIRCUIT BREAKERS)

Isolation Point is located as follows: - key inserted into isolation point under pool cover at all times is being moved.

8.16 Electrocution (General)

Circuit breakers within the electrical circuits should isolate the current within thirty milli seconds of contact, if this fails and it is not possible to isolate the current, i.e. switch a socket off, remove a plug or isolate the current.

You should: -

Stand on some dry material such as a rubber mat. Use a long piece of wood, such as a plastic or wooden broom handle or other non-conducting material such as rubber to push the casualty out of contact with the electrical source.

If this is not possible, use a piece of rope or dry clothing to loop round the casualty's feet or arms to drag him/her away.

At no time, touch the casualty with bare hands until the current is disconnected.

NEVER PUT YOUR OWN LIFE AT RISK.

8.17 Treatment for Electric Shock

Call 999/112 immediately and keep everyone away from the area.

If cardiac arrest has occurred or breathing stopped, carry out resuscitation proce dures immediately.

If the casualty is unconscious, but breathing normally, place him/her in the recovery position.

Look for burns and treat in the usual way. If they are present, the casualty should receive medical attention as soon as possible, as there may be considerable damage to deeper tissues, even if the surface skin only appears slightly affected. Carry out the appropriate actions for the prevention and treatment of shock. If there is any suggestion that the casualty may have lost consciousness, or he/she appears "shaken", medical attention should be sought.

8.18 Power Failure

In the event of a power failure or incident which eliminates the lighting system, the following procedure should be adopted.

- 1. Users within the area where the primary source has failed should be asked to evacuate the area.
- 2. If the above area is the pool, then it should be cleared, and the clients/pupils directed back to the changing cubicles. There are 4 sets of emergency lights on poolside, which will run for approximately 3 hours. A Pool Attendant must remain on the pool side until the primary supply is reactivated or the area is secured, ensuring the clients/pupils cannot regain entry to the pool.
- 3. The Pool Attendant will visually check the pool bottom prior to securing the area.
- 4. When the primary source of lighting returns to the area and it is once gain safe to use' clients/pupils may be allowed re-entry the pool. On occasions when the primary source of lighting may only be momentarily impaired, on these occasions the same procedure as above must be carried out, until such a time as the source is re-established.
- 5. All the hoists will continue to work as they are all battery powered. Spare batteries for the stretcher / chair and fixed hoist are kept in the Pastoral Lead's Office, on the left-hand side as you walk through the door. The overhead tracking hoist pod must be returned to its charging point to maintain battery levels.

8.19 Emergency Lighting

Should the lighting system fail, the secondary lighting system will be automatically activated ensuring a satisfactory standard of lighting is available to evacuate areas in a suitable safe manner. Principal escape routes will be through the main entry doors.

8.20 Structural Failures

The above procedure should be adopted in the event of a structural failure occurring but subject to the seriousness of the failure, the walkie-talkie system may be used to obtain further assistance.

The Site Manager or Senior Leadership Team will assess the situation to establish whether the Emergency Services are required (Fire, Ambulance and Police).

8.21 Assault and Harassment

Academy Trust has a Code of Practice to cover these issues. A copy will be made available to you by the Headteacher. Extracts of the Code of Practice are detailed below:

Guidelines

All employees are asked to read and note the following advice which may enable some of the distressing circumstances to be avoided.

The advice is not meant to be an exhaustive list of dos and don'ts since the response to awkward situations can vary enormously depending upon the circumstances of the particular occurrence. It is essential, therefore, that you use your common sense and judgement to avoid such difficulties occurring, for instance: -

Be perceptive and 'read situations' i.e.: -

- 1. Avoid argumentative situations developing.
- 2. Exercise care in what you say and how you say it;
- 3. Do not be provocative; and
- 4. Do not swear.

Ignore Provocation: -

Try to ignore all provocation, since responding to it may lead to physical assault.

Physical Assault

Whilst a reasonable amount of force to restrain an attacker may be sometimes necessary, retaliation by way of physical assault is unacceptable and will not be tolerated. Such action could be regarded as misconduct on your part, and this could lead to disciplinary action being taken against you.

Employees Action

When an employee is assaulted or harassed, then the following action should be taken: -

- a) Report the incident to the local Police Station and Pool Manager immediately.
- b) Make a record of the incident and obtain the names and addresses of witnesses.
- c) Consult your doctor or report to the A&E department at Royal Derby Hospital for medical advice if the assault is of a serious nature and you think you have been injured.
- d) Complete 'Assault, Aggression and Violence' incident report with School management, indicating all supporting information, e.g., names and addresses of witnesses, and submit to your Chief Officer as soon as possible

8.22 Indecency

Dealing with issues of indecency can be embarrassing for all concerned. In the event of a serious incident of indecency or sexual assault the Headteacher and the Police must be notified immediately the report is received.

Treat victims with sympathy whilst trying to obtain facts related to the incident, i.e., times, witnesses, names, identification, accent, height, hair, colour, etc. Give this information to the Police.

If an act of indecency is reported, i.e., indecent exposure or bodily contact which has concerned a person sufficiently for them to make a complaint, the following course of action should be taken.

- 1. Inform the Pool Manager and the Headteacher.
- 2. The Headteacher will ask the victim if they want the Police called and act in accordance with their request.
- 3. Try to gain information which may lead to the identification of the suspect.
- 4. Obtain details of what took place, times, date, location, witnesses, etc.

- 5. If the offender is known and/or identified by the victim, attempt by delaying tactics to keep the offender on the premises until the Police arrive.
 - If the Headteacher has ascertained that the victim states they do not want the Police involved and you are satisfied that some sort of incident has taken place, try to identify the offender.
 - If he/she is still on the premises, the Headteacher will tactfully inform them that a complaint has been made about their behaviour and explain generally without making any accusations, the nature of the complaint
 - NEVER INFER THAT THE ALLEGED OFFENDER IS GUILTY
 - Explain that you are trying to deal with the issue fairly.
 - If details of the alleged offender can be obtained, try to obtain them in an informal friendly manner.
 - Record all details available as these maybe required at a later date.

8.23 Child Protection and Safeguarding

Every employee has a responsibility to ensure that children and vulnerable adults visiting the site are safe.

You should have received a copy of the following:

- 1) The school's Child Protection & Safeguarding Policy
- 2) Signposting to Derby's Safeguarding Processes

If you have not or have lost/mislaid your copy, contact the Headteacher for a replacement.

Read the guidelines thoroughly as they detail the action to take in the event of suspected child abuse.

DO NOT TAKE CHANCES

8.24 Theft

Incidents occur occasionally where a theft of property belonging to a member of the public or staff takes place. Academy Trust property or that belonging to a Contractor may also be the subject of theft.

It is important in all instances to initially determine if a theft has taken place or an article(s) has been mislaid.

If a theft has taken place and the suspect is still on the premises the incident must be reported to a member of the Management Team who, after assessing the situation, will contact the Police.

Every effort should be made, without raising suspicion and without the use of force, to delay the suspect leaving the premises.

If a theft is discovered and no suspect is immediately obvious the Headteacher must be informed who will then take the appropriate action based on the information at hand.

In all cases, accurate reporting of facts related to the issue will assist in determining the action to be taken. It may also assist in the apprehension of the thief.

The following details should be recorded on an incident log.

Date of incident Time of incident Specific details of area theft from. Name(s) and addresses of victim(s) Name(s) and addresses of witness(es) Any information which may be of assistance

Note: Staff property is **NOT** covered by Ivy House or the Academy Trust insurance and, therefore, the retention of personal belongings or valuables on site is not recommended. Any staff valuables that are brought on site are done so at the owners' risk.

8.25 Disturbance

A disturbance may be described as any incident which disrupts the normal operation of the facility. The majority of these are minor and will be covered within the operating procedures. Occasionally, incidents of disturbance may occur of a more serious nature. This may include rowdy, threatening or violent behaviour. It is important that anyone dealing with such a disturbance remains calm, seeks assistance, and notifies a member of the Management Team. Every effort must be made to defuse the situation.

The Pool Manager will assess the situation and take responsibility for control. Any further action taken will be based on their assessment.

In all such instances, an Incident log must be completed and as much factual information, i.e. dates, times, names, details of disturbance etc, must be recorded.

8.26 Chemical Poisoning/Burns

Correct use and safe storage of chemicals together with use of protective clothing will prevent chemical poisoning.

COSHH regulations are available for each chemical used at Ivy House. COSHH regulations state the correct action to take in the event of an accident.

Copies are available from the Pool Manager. In the event of an extreme emergency, telephone numbers of the chemical suppliers are also available. Remember never use a chemical unless you are aware of the COSHH regulations associated with that product.

8.27 Pool Water Clarity

Pool water clarity should be such that the pool bottom should be always visible. If you are unable to see the pool bottom, notify the Pool Manager immediately. They will decide on closing the pool. External users may be offered additional sessions when it is safe to do so.

8.28 Unsafe Equipment

Any equipment which is reported as defective must be taken out of operation immediately. It must not be returned to service until a repair has been actioned.

Any temporary repairs carried out must be safe, under no circumstances must any equipment be used which could cause injury.

Any equipment not returnable to service because of it being beyond viable repair must be taken off the inventory.

If there are problems with any of the hoists risk assessments should be carried out to define if users can continue to enter the pool by alternative means.

8.29 Soiling of Pool

Problems can exist following faecal soiling in the pool from two types of organism, these being cryptosporidium and giardia. Cryptosporidium and giardia cannot reproduce outside the gut of several living creatures including human beings. The organisms cause diarrhoea after the cysts have been swallowed. The ensuing illness is not usually serious if the immune defences of the subject concerned are functioning normally however many of our pool users may be vulnerable to infections.

Filtration of swimming pool is the main defence against cryptosporidium and giardia. Cryptosporidium cysts are not destroyed by free chlorine levels far more than those normally used in swimming pools and the cysts of giardia are comparatively slowly destroyed, kill time 5 - 10 minutes by a free chlorine residual of 2 parts per million.

The following recommendations should ensure the safety of pool users should soiling of the pool take place.

1. Inform the Pool Manager immediately.

2. Solid Stools

Solid stools should simply be retrieved immediately they are seen; if the pool is in other respects operating properly, no further action is necessary, but the incident must be recorded along with the water condition readings.

3. Diarrhoea

If a substantial amount of loose, runny stool (diarrhoea) is introduced into the water – especially if illness is admitted or strongly suspected:

- Clear the pool immediately
- Maintain disinfectant levels at 1.5ppm
- Vacuum and sweep the pool.
- Add the coagulant; filter for **six turnover cycles** (The Pool Manager will determine the required time the pool will be closed).
- Once the six turnover cycles are complete the backwashing of the filter is necessary.
- Carry out the necessary pH and chlorine tests to ensure the pool is operating within the recommended guidelines.
- Only then reopen the pool.

Some pupils / clients may be incontinent, so they have constant bowel movements, they will not be excluded from using the pool, but the following action will need to be taken beforehand:

- 1) Inform the Pool Manager of the situation
- 2) The Parents / Carers will need to be asked to provide the appropriate swimwear those that have an integral waterproof lining, elasticated at the waist and top of the legs to contain both
- 3) **loose and solids stools**. (Several companies can provide the specialist swimwear required, companies such as Hi Line and Fledglings).
- 4) If it's a pupil, their class Teacher / TA will liaise with the parent or guardian.

If it's an external client, then their support work will be the one to speak to.

Action to take if the Poolside or toilet floor is soiled

Solid Stools

- Cordon of the area with the floor signs
- Wearing gloves, get some toilet paper and pick up the stools, place into a nappy bag and place it in the Nappy bin.
- Scrub the floor thoroughly using the Lemon Bio-Shield chemical

Loose Stools or Diarrhoea

• Any spillage on poolside must not be washed into the pool or poolside drains.

- The diarrhoea should be covered with Absorbency Powder, found in the Yellow Bio-Hazard Spillage Kit in the sluice room; this will soak up the liquid and turn it in to a sloid mass.
- Sweep up the mass and place it in a yellow bag, then place it in the yellow bio-hazard bin.
- The area should then be cleaned with a strong disinfectant (1 HTH Chlorine tablet to 10lts of water, this may be used as the disinfectant) leave for at least 2 minutes before it is cleared away.
- The person clearing up the spillage will need to wear gloves, once finished dispose of the gloves in the yellow nappy bin.

8.30 Bather trapped on or in Pool Outlet

To remove a person trapped on or in a pool outlet, it will be necessary to turn off the outlet water flow by stopping the circulation pump before the person can be rescued.

If a person is trapped:

- Stop pool pump using the emergency stop button (yellow and red button on the wall to the right-hand side of the pool cover). If this fails, enter the plantroom, and turn off pumps 1 and pump 2 (yellow and red). The Pool Manager and Site Manager will have a key to the plant room. (Spare plant room key in reception).
- 2) Remove person from grill and administer first aid as appropriate (be prepared to carryout CPR).
- 3) Call Emergency Services
- 4) Complete accident and incident forms

8.31 Failure of the Telephone System

In the event of the pool telephone system failing, use telephone in the pool reception area or therapy room. **Report fault to site manager via walkie-talkie system**

8.32 Control of Pests

Environmental Health must be contacted if evidence of pest infestation is discovered. You must inform site manager, who will pass this information on to the relevant agencies and the Academy Trust.

8.33 Stainless Steel

Any defects must be checked by a suitably qualified person. Any area's where you are concerned about failure of the stainless steel must be isolated and technical advice sought. This may be available from either Contractor Services or Development Services.

You must inform site manager, who will pass this information on to the relevant agencies and the Academy Trust.

8.34 Blood & Vomit

If substantial amounts of blood or vomit are spilled into the pool the following action must be taken.

- The pool should be temporally cleared of people to allow the pollution to disperse (any infected particles should be neutralised by the disinfectant in the water).
- A pool water test must then be carried out; if disinfectant and PH levels are within recommended ranges the pool may reopen. The incident must be recorded along with the water condition readings.

Any blood spillage on poolside or any other dry side area must be dealt with in the following way:

- Any blood spillage on poolside must not be washed into the pool or poolside drains.
- The blood should be covered with Absorbency Powder, found in the Yellow Bio-Hazard Spillage Kit in the sluice room; this will soak up any excess blood and turn it in to a sloid mass.
- Sweep up the mass and place it in a yellow bag, then place it in the yellow bio-hazard bin.
- The area should then be cleaned with a strong disinfectant (1 HTH Chlorine tablet to 10lts of water, this may be used as the disinfectant) leave for at least 2 minutes before it is cleared away.
- The person clearing up the spillage will need to wear gloves, once finished dispose of the gloves in the yellow nappy bin.

8.35 Nurse Call Out and Senior Management Emergency Call

To alert the nurses you will need to activate the **RED** remote by pulling or pressing the button (pulling will release the pin out of the remote), the remote will send a signal to the pager, which the nurses will carry. The remotes can be found situated next to the telephone.

To de-activate the signal, point the **BLUE** remote towards the beacon you originally activated and then press the button.

N.B The remotes will only work when in direct line of the beacons on poolside.

8.36 Defibrillation

The Hydrotherapy pool has a defibrillator located on the wall in the pool reception area, to the left of the coloured window. All the pool staff are defibrillator trained.

In the event of someone going into a cardiac arrest the following procedure will be followed:

- a. Raise the alarm ask for the defib to be brought to you.
- b. Ask someone to start the evacuation the of the pool.
- c. Ensure someone calls the emergency services 999 / 112
- d. Commence CPR (do not stop until instructed to do so).
- e. When the defib arrives, the pads will be attached and the instructions from the machine will then be followed.
- f. Once the paramedics take over complete the relevant documentation.

8.37 Dehydration

Due to the high temperatures and humidity of the hydro pool it is essential that you keep yourselves hydrated throughout the session. The danger of **NOT** keeping hydrated is increasing the risk of heat exhaustion.

In order to prevent the risk of dehydration for an adult it is important to drink:

150 – 200ml every 15 – 20 minutes or 1litre every hour

The children are at a greater risk of dehydration because they cannot regulate their body temperature.

There is a protocol in place at Ivy House School where the Community Paediatric Consultant will assess each child on a regular basis. The doctor will assess the child's weight and height and then give a recommendation of how much fluid they need in a 24-hour period, including prior to a swimming session.