

SWIMMING POOL SAFETY POLICY

It is the aim of the policy to ensure that all necessary measures are taken to provide safety for those using the school swimming pool. In pursuit of this aim, the following procedures will be carried out.

SAFETY TRAINING: All members of the PE Department will take part in swimming pool safety training. The Head of Physical Education Department will ensure that members of the Department receive adequate training.

SWIMMING POOL REGULATIONS, INFORMATION AND OPERATING PROCEDURES:

General School Organisation:

Maintenance of the pool is the responsibility of the caretaking staff and the chlorine levels, PH and temperature should be monitored and recorded at least twice daily. They, in consultation with other staff members, will decide whether the condition of the pool allows use.

Safety Information:

Report Accidents: All school injuries, however minor, must be reported to the nurse and a note must be made in the Incident Book

Lifeguard/teacher:

- Must carry a whistle at all times and be suitably dressed.
- Must always be on the poolside whilst supervising swimmers. Must not enter the water unless in an emergency.
- Must know the Emergency action plan
- Must ensure that he/she can see all areas of the pool at all times, including the bottom of the pool. Ensure that an adequate variety and amount of rescue equipment is in the pool before starting each lesson/session.
- Person in charge must not leave the pool area at any time, unless another qualified person remains on the poolside with a group.
- Ensure that the safety equipment is positioned at intervals along the pool surround. Ensure that the tasks set are appropriate for the groups being taught.
- Ensure that the equipment does not obstruct the pool surround, thus preventing accidents.
- Must regularly practice their lifesaving techniques to ensure their effectiveness has not deteriorated.

Access:

At no time may any students/swimmers be in the pool without a qualified member of staff being present. Students/swimmers should stay in the changing rooms and only be admitted by the member of staff taking the lesson. The doors to the pool must be locked at all times when the pool is not in use. The teacher taking the lesson/session is responsible for this being carried out after each lesson has finished.

Potential Risk Factors:

1. Width of surrounds may make use of rescue aids or landing a swimmer difficult.
2. The long design makes some areas of the pool blind spots to a single teacher, who may not remain centrally positioned throughout a teaching session.
3. Metal rails in pool could trap a small child's wrist.
4. Metal rails stand proud and students could bang heads when coming up from underwater.

Other Important Points:

- All swimmers must be made aware of the following rules:
- No one is permitted in the pool area without a lifeguard/qualified teacher being present.
- No one must swim unless in a group of three or more, one of whom must be qualified and stay on the side.
- No running.
- No diving (including racing and surface dives) in non-diving area. Diving area from deep end edge only.
- No dangerous or irresponsible behaviour in changing rooms or pool area.
- All swimmers should be encouraged to use the toilets before entering the pool.
- All swimmers must know the pool evacuation procedure and get out of the water when instructed to do so.
- No outdoor footwear allowed in pool area.
- Must be dressed appropriately.
- Must not enter the pool with any infectious diseases or skin complaints
- No Smoking in the pool area
- No alcoholic drinks in the pool area
- No food in the pool area
- No glass in the pool area
- No loose jewellery should be worn
- No face masks or snorkels to be worn
- No diving bricks to be used
- T-shirts are not allowed whilst swimming.
- No flippers to be worn
- No excessive underwater swimming or hyperventilation (continuous lengths under water):
- The prevention of unofficial access to a premise should receive priority attention because of the extra dangers associated with swimming pools. This should receive a higher priority in the case of outdoor pools. Surrounding walls or railings should be of adequate height where the latter type of pool facility is concerned.
 - Pool covers may be used to support the prevention of unofficial access. These should not be considered safety features unless they are installed in such a way that no one can get underneath the cover.
 - Access on to the poolside should be nearer the shallow end and include a barrier between pool entrance and pool edge.
 - Entries at or near the deep end should be prevented at all times. A warning notice and/or a guard rail should be provided.
 - The pool floor gradient should also receive attention. Sudden drops and/or steep inclines can present particular dangers for users. A slip resistant and non-abrasive finish should be provided on the end walls of the pool.

- Changes in depths should be clearly identified by the use of colour contrasted materials e.g. tiles or patterned finishes. The colours used should not reduce the ability to see a body on the pool bottom.
- The pool tank edge should be colour contrasted with the pool water to ensure it is visible to those in and out of the water.
- All pools should be designed with adequate storage space to ensure equipment that is not in use can be kept in a safe place. This will ensure that pool equipment will not create obstacles in and around the pool area and will prevent unsupervised use.
- Pool floors and the surrounds should be surfaced with non-slip materials and there should be appropriate signs in place to discourage running.
- Steps/ladders should be provided at the deep and shallow ends of the pool to ensure safe entry and exit. These can be permanent or removable. Attention should be paid to their design and location, to ensure they are safe, accessible and do not present an obstacle to safe supervision by the lifeguards. They should be fitted with handrails on both sides and these should protrude 750-950 mm above the pool surface. Steps should be flat and not tubular.
- Steps, handrails and ladders must be of sufficient strength and be firmly fixed to the poolside and should have treads which are slip resistant and have no sharp edges.
- Disability access should also be included in all pool designs e.g. ramps, officially recommended hoists.
- All ramps should have a slip resistant surface and handrails on both sides.
- Where it is intended to offer diving as an activity or as part of an activity, particular attention must be paid to water depths, height of the diving platform and forward clearance.
- Lighting should ensure that the bottom of the pool is clearly visible and that all signs can always be seen and read.
- Underwater lighting will help decrease the surface glare effects of other facility roof lights.
- Emergency lighting should be provided and regularly checked. A lighting failure can lead to panic. Emergency power back up should be available.
- Emergency exits from the poolside should be included in all pool designs.

First Aid Provision:

A specifically defined first aid station should be adjacent to the swimming pool area of the facility which is easily reached by the nurse and the staff. Its location should be clearly shown.

First aid equipment should include the following:

- A removable screen or curtain to protect the privacy of the casualty.
- A medical examination couch with blankets and pillows.
- Hot and cold water.
- Good ventilation.
- A nearby toilet.
- Stretcher.
- Chairs.
- Spinal Board.
- AED (Automatic External Defibrillator), Oxygen and Suction Equipment, if staff have been properly trained.

- A fully stocked First Aid kit, with clearly defined restocking levels.
- As stated earlier, lifeguards are not required to have a full Occupational First Aid qualification, but they should have a good foundation in First Aid Awareness

Safety Signs

Signs fall under the following three categories and should follow the colour scheme recommended by the International Standards Organisation:

- **Prohibition** – indicate activities which are not allowed or show areas where a particular activity will present a danger e.g. diving. Such signs should be on a white circle with red edging and should contain a black pictogram indicating the danger.
- **Warning** – indicate where there may be a danger if some caution is not exercised e.g. changes in depth, slippery surfaces. This type of sign should be on a yellow triangle with a black edge and black symbol.
- **Mandatory** – outline procedures that must be followed in order to ensure customer safety and satisfaction e.g. safe practices when swimming. These should be on a blue circle with white outlined symbols.

Using pictograms will ensure that non-readers understand relevant messages. Pool operators can choose suitable pictograms which will help maintain a safe pool environment in accordance with the International Standards Organisation.

It is essential that all signs are easily seen and suitably placed in relation to the message being displayed. Pool operators and lifeguards must ensure that all signs remain free from obstruction e.g. towels, clothing etc. It is also essential that the information displayed on any sign is up to date and accurate. For example changes to the pool layout may affect the accuracy of information on any particular sign.

All signs should be subject to regular inspections as part of the facility's ongoing risk assessments, with necessary follow up maintenance and updating as required.

Common signs currently in use include the following:

- Water depth.
 - Deep end/shallow end.
 - Hygiene rules.
 - Prohibited activities.
 - Use of equipment e.g. fins, buoyancy aids.
 - Prohibiting the use of photographic equipment e.g. cameras, camera phones. Signs prohibiting the use of such equipment without proper authorisation should be placed at the entrance to all pools and at other suitable locations throughout the facility.
- Regulations for the swimming pool should be placed beside the entrance and must be easily read by visitors. They should also be displayed at other central areas around the pool facility.

Rules and regulations will be facility specific and should be influenced by the facility's written Risk Assessments. A list of standards and common regulations that should be considered for display to the public will include the following:

- Opening and closing times.
- Hygiene rules.
- Use of changing rooms.
- The supervision of young children.

- Use of glass bottles.
- Swimming ability required for specific activities e.g. entry into deep end.
- Use of equipment.
- Chewing gum.
- Use of swimming hats.
- Use of any type of photographic equipment, in line with child protection policy.

Camera/computer surveillance:

The use of surveillance cameras and sensors, are useful to assist the lifeguard with pool supervision, but are not acceptable as a replacement for the presence and supervision of properly qualified personnel. It is important to note that these should be placed in open public areas excluding changing rooms. Use of surveillance cameras must be advised to facility users.

Mobile Phones

A new addition to the Safety Guidelines is that in all cases mobile phones and their use should be banned/prohibited from defined areas within the facility .

Lack of Water Clarity/Poor Visibility

Pool not to be used

Faecal incidents: Solid Faeces

1. Evacuate the pool, following the evacuation procedure.
2. Remove the stool immediately using a scoop or fine mesh net and flush down the toilet.
3. If there is any doubt whether all faeces has been removed then the procedures for dealing with runny faeces must be carried out (see below)
4. All equipment that has been used in this process should be disinfected using 1% solution of hypochlorite.
5. Water tests should be carried out to establish that chlorine and Ph levels are correct
6. Re open the pool after a minimum of 2 hours.
7. Faeces that is smeared on tiling or other surfaces in contact with the pool should be cleaned off and the surface disinfected with 1% hypochlorite. The procedures described below for runny faeces should then be followed.

Runny Faeces:

1. Close the pool (20-24 hours)
2. Hold the disinfectant residual at 2.0 mg/l free chlorine and the
3. pH value at the bottom of its range (eg pH 7.2-7.4).
4. Ensure that the coagulant dose is at least 0.1mg/l (as aluminium)
5. Filter for six turnover cycles (9 Hours)
6. Monitor disinfection residuals throughout this period
7. Vacuum and sweep the pool.
8. Make sure the pool treatment plant is operating as it should (filters, circulation, disinfection)
9. After six turnovers, backwash the filters.
10. Allow the filter media to settle by running water to drain for a few minutes before reconnecting the filter to the pool.
11. Circulate the water for 9 hours. This will remove any oocyst contamination of the pool caused by imperfect back washing. It is optional, depending on the pool operator's

confidence in backwashing procedures. It is certainly necessary if the filter does not have a drain facility.

12. Check disinfection levels and pH. If they are satisfactory re-open the pool.

Blood, Small amount of (within the pool)

- Clear the immediate area while the blood disperses. There should be no risk from infection if the chlorine levels are correct.

Blood, Significant quantity of (within the pool) :

- Clear the pool to allow the blood to disperse.
- Check that the Chlorine and Ph levels are within recommended range.
- Bathing can then be resumed.

Blood spillages (poolside)

- Using disposable latex gloves, cover the blood with paper towels, gently flood with disinfectant and leave for at least 2 minute before it is cleared away. On the pool side, the affected area can then be washed with water and detergent and allow to dry.

Vomit (Within the pool) –

- This should be treated in the same way as blood (see above) in most cases. Where there is solid material, this should be removed. The pool should be cleared for a minimum of 30 minutes.

Vomit (Poolside)

- Using disposable latex gloves, cover the vomit with paper towels, gently flood with disinfectant and leave for at least 2 minute before it is cleared away. On the pool side, the affected area can then be washed with water and detergent and allow to dry.

SERIOUS INJURY TO SWIMMER:

1. One long blast of whistle, swimmers instructed to get out and move away from the edge of the pool.
2. One swimmer or available student or adult to phone office, or Nurse, or Emergency services depending on the injury or situation.
3. Another swimmer or available student or adult is instructed to send any adult on hand into the pool area and then go and find the School Nurse to inform her of the situation and ask for her assistance.
4. The Lifeguard then assesses situation and rescues subject.
5. Lifeguard to administer E.A.R. (Expired Air Resuscitation) and E.C.C. (External Cardiac Compression) if necessary until specialised help arrives to take over.
6. If breathing has restarted leave subject in recovery position, keeping watch at all times.
7. Adult or Lifeguard to evacuate all other swimmers.

Head Injuries:

- An ambulance should be called by the most senior person on shift
- Under no circumstances should the casualty be permitted to return to the pool even if they appear well. Any casualty who has needed assistance from the water may have inhaled a small amount of water placing them at risk from secondary drowning for up to 72 hours after the incident

Secondary Drowning:

- It is impossible for pool staff to assess whether a casualty is likely to suffer from this potentially fatal condition and therefore all such casualties must be transferred to hospital immediately as much assistance as possible should be given to the casualty and persons accompanying them.
- This may include use of the telephone and assistance with looking after children Staff have the responsibility to treat casualties prior to the arrival of an ambulance crew arriving The ambulance crew have full responsibility to transport unaccompanied children to hospital and it should not be necessary for a member of staff to accompany the casualty in the ambulance.

Aquatic Spinal Cord Injury Management (SCIM):

- The serious consequences of damage to the central nervous system means that careful handling, lifting and moving are crucial when dealing with spinal injuries.

Incident management priorities:

- Save a life – airway, breathing, circulation (ABC)
- Stabilise the casualty's head
- Maintain their horizontal position In the event of a suspected spinal cord injury, all activities must be stopped immediately and the pool cleared
- Casualties who have been immobilised in the water are likely to suffer from onset of hypothermia; injuries to the cervical spine frequently lead to a failure of the body's temperature regulation system which will speed up this onset

Aftercare

- Once on the poolside casualties with spinal injury should be wrapped in dry, heat retaining material / space blanket to prevent heat loss
- Unnecessary movement should be avoided; there is no need to recover a casualty to a first aid room unless the poolside presents further risk.

General Points:**Lifeguard must try to:**

- Remain calm at all times
- Ensure the safety of all class members at all times. Do not turn your back – keep students in sight.
- If possible, perform any rescue from the poolside.
- Ensure that help is sent for immediately.
- Inform students of safety procedures and practice regularly.
- The pool must be left in a tidy state after each lesson/session. All equipment must be taken out of the water and returned to the proper place. This includes:
 - Safety Aids
 - Bricks
 - Floats
 - Lane Ropes
 - Balls.