

Introduction

The purpose of this procedure is to outline the action to be taken and how to respond effectively in the event of an accident or an emergency within the pool and poolside areas. Plans should be proportionate to the level of risk and the potential extent and severity of the incident. In schools or services where certain features or activities present specific risks requiring action differing from that outlined in this procedure, the School Leader or Service Manager will include the process for dealing with emergency action in the HS Risk Assessment - generic swimming pool (Appendix A), and Appendix 1 in the Normal Operating Procedure (NOP).

Responsibilities

The School Leader or Service Manager will ensure all employees and others are aware of their responsibilities in respect of this procedure and arrangements are in place for training in the duties they will be expected to perform. Employees and others must understand and be competent in what to do in an emergency e.g. how to raise the alarm, contacting emergency services, evacuation, emergency equipment, and informing local authorities. The Emergency Action Plan should be tested to ensure competence is maintained.

Pool Operators must have procedures in place to respond to emergencies. The responsibility for carrying out emergency action rests with swimming teachers, Swimming Pool Technical Operator/Onsite Designated Supervisor, therapists, teachers, adults other than a teacher and other KCC staff. The swimming teacher is responsible for controlling the incident/accident and for taking the decision to evacuate the pool.

Pool users may require protection from the weather (cold/sun) if evacuated outdoors.

Process

3.1 Raising Alarms

Before entry into the pool pupils, young persons and service users should be made aware of the method of communication of raising the alarm when using a whistle:

- 1 Whistle blast - attracts the attention of the pool users.
- 2 Whistle blasts - attracts the attention of other pool staff.
- 3 Whistle blasts - indicates that the lifeguard is about to take emergency action.
- 1 Long whistle blast - attracts the attention of the pool users to prepare for an evacuation.

Whistles will be used sparingly and are followed by relevant verbal or visual instruction e.g. hand signals. Consideration will be given, where possible, to the timeliness of the whistle in relation to the activities being carried out to ensure users e.g. divers are not unduly distracted.

3.2 Minor or major emergencies

Minor incidents or emergencies, if managed properly, will not result in a life-threatening situation. Examples of incidents of this nature include a bather slipping on poolside, a minor cut or bruise and a simple reaching rescue. Whilst these may be routine, they may result in increased risk of a more serious incident if proper processes are not followed. To ensure an appropriate response, the teacher, on becoming aware of the incident will follow the process below:

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- Notify other pool staff that they must respond to an incident by blowing three whistles.
- Other pool staff will move to cover area or request additional assistance if necessary.
- A first aider will administer aid or provide appropriate assistance.
- Casualty will be referred to appropriate location.
- KCC's online accident, incident reporting form (HS157) will be completed.

A major emergency is where an incident occurs resulting in a serious injury or life-threatening situation. In most cases, more than one member of staff will be involved and in extreme situations, all members of the team will be required to provide support. The process for dealing with major emergencies is as follows:

- The swimming teacher, therapist, adult other than a teacher and other KCC staff will raise the alarm by using the pool alarm, blowing three whistles and/or use of hand signals.
- The teacher will initiate a rescue/first aid and remove casualty from the area.
- The support team members will cover the area vacated, assist the teacher, and evacuate the pool if necessary.
- The teacher will ensure an ambulance is requested, supply specialist equipment and take control of the situation including managing and assisting other bathers.
- A member of staff will be assigned to meet the ambulance crew to brief them and escort them to the scene of the incident.
- Responsibility is assigned to the ambulance crew once they start to treat the casualty.
- The teacher will ensure that safe levels of supervision are maintained for the duration of the incident and subsequent action.
- The teacher will ensure that all Accident / Incident Reports are completed and the necessary follow up action is taken.

3.3 Fire Evacuation

Arrangements for raising the alarm must be in place:

- The location of break glass units.
- Define who does what in an evacuation on hearing the alarm – this should be detailed in the swimming pool risk assessment.
- If a school has an outside swimming pool.

Once the alarm has been raised those on poolside should blow their whistles as per the normal operating procedure and clear the pool as quickly as possible. Everyone should be directed to the nearest emergency exit. Thermal blankets will need to be issued if necessary and should be taken to the assembly point.

Once at the assembly point the person responsible for the pool will check all employees and others are present against the register and or signing in book.

3.4 Discovery of a casualty in the water

The first response to a casualty in the water will be to consider performing a rescue by reaching with a pole or rope. Whenever possible, hand to hand contact will be avoided until the casualty is under control and the possibility of being pulled into the water is reduced. The pool will only be evacuated if necessary and the teacher will only enter the water to affect a rescue if other alternatives will not work. If entry into the pool is necessary, the following process should be followed:

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- Attract the attention of another teacher, assistant therapist, adult other than a teacher or other KCC staff and additional support by using the pool alarm and/or blowing the whistle loudly three times.
- If the teacher is carrying a radio, it will be placed on poolside prior to entry if possible.
- The teacher will enter the water in a safe manner, recover the casualty and bring them to the nearest suitable landing point where they can safely be taken out of the water.
- The teacher(s) will follow resuscitation protocols in accordance with the National Pool Lifeguard Qualification (NPLQ) and/or first aid training. These will be followed until the ambulance crew take over.

3.5 Serious injury to a bather

The process for dealing with major emergencies as detailed in Section 3.3 will be followed if a member of the pool staff notices a bather with a serious injury. The teacher(s) will follow first aid/resuscitation protocols in accordance with NPLQ or first aid training. These will be followed until the ambulance crew takes over. In cases of serious injury, unconsciousness or suspected broken bones, patients will not be moved until first aid has been given.

Head injuries - all head injuries will be treated as serious injuries and teachers will follow first aid and resuscitation protocols in accordance with their NPLQ or first aid training. In addition to following the major emergency process outlined in Section 3.3 the following action will be taken:

- Casualties with face and/or head injuries will not be allowed to return to the pool.
- An ambulance will be called if the injury appears serious. If the injury appears less serious, the casualty will be made to dress and will be supervised by a responsible person whilst doing so.
- If there is any doubt as to the severity of the injury an ambulance will be called as there is possibility of delayed concussion/loss of consciousness occurring.

Aquatic spinal injury - all suspected spinal injuries will be treated as serious injuries and teachers will follow rescue and resuscitation protocols in accordance with their training. In addition to following the major emergency process outlined in Section 3.3 the following action will be taken:

- All other pool users will be carefully directed away from the casualty in order not to disturb the water or the casualty. Once away from the casualty all bathers must clear the pool and will be directed away from the incident.
- A minimum of 4 trained staff will be required to assist a casualty using a spinal board.
- A relative of the casualty will be informed of the incident (by a nominated member of staff).

3.6 Disorderly behaviour

It should be noted that incidents of this nature within the pool or around poolside may detract the attention of pool staff away from their primary duties of pool supervision and teaching. Assistance from other staff will be requested as soon as the teacher feels their attention is being drawn away from their primary duties by another event.

3.7 Lack of water clarity

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It is vital that all teachers and assistants can clearly see the bottom of the pool in order that a bather can be seen in the event of an emergency. The following process will be followed in the event of poor water clarity:

- If the pool water becomes cloudy, the member of staff or company responsible for swimming pool maintenance will be informed immediately.
- A water test will be undertaken, and plant will be checked for correct functioning and appropriate remedial action will be undertaken.
- The remedial action is not possible or is not effective soon enough; the member of staff or company responsible for swimming pool maintenance and the swimming teacher will determine if it is safe for the pool to remain open.
- Bathers will only be allowed back in the pool once the water quality has improved sufficiently to enable staff to clearly view the pool bottom and a satisfactory chemical balance has been confirmed.

3.8 Dealing with blood, vomit, and faeces

If blood, vomit, or faeces are discovered in the pool or on poolside, a single-use biohazard spill kit for the safe cleaning, disposal and containment of infectious micro-organisms contained in blood, vomit, urine, mucus, faeces should be used. For infection control pool users should shower before entering the pool. The following procedures should also be applied:

Blood

- If substantial amounts of blood are spilled into the pool, it will be temporarily cleared of people to allow the pollution to disperse and any infectious particles within it to be neutralised by the disinfectant in the water.
- When clearing blood, the correct personal protective equipment (PPE) must be worn e.g. disposable gloves, aprons.
- Blood must not be washed into the pool or poolside drains.

Vomit

- If substantial amounts of vomit are spilled into the pool the affected pool will be closed to bathers to allow for its removal. The vomit can be removed from the water using a scoop and placed in a bucket, the contents of which will be flushed down the toilet.
- Minimum of 'three turnover periods' of the affected pool will elapse to ensure the removal of any bacteria.
- Prior to the pool re-opening a water quality test will be undertaken to ensure that chlorine, and total dissolved solids (TDS) levels are within the agreed parameters and a visual inspection will be carried out.
- When clearing vomit, the correct PPE must be worn.
- Vomit must not be washed into the pool or poolside drains.
- Any equipment that has been used to scoop up the vomit must be thoroughly disinfected before it is stored away.

Diarrhoea

- If diarrhoea is discovered in the pool, the affected pool will be closed immediately, to allow for its removal.

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- The procedure for removing diarrhoea will be the same as for removing vomit. However, a minimum of 'six turnover periods' to the affected pool will elapse to ensure the removal of bacteria.
- Prior to the pool re-opening a water quality test will be undertaken to ensure that chlorine, and TDS levels are within the agreed parameters and a visual inspection will be carried out.

Solid stools

- If a solid stool is reported to be in the pool, it must be immediately retrieved from the pool using a scoop. The stool will be placed into a bucket and flushed down the toilet.
- The decision to close the pool for a short period will allow a careful visual check to be undertaken to ensure that no particles remain, and a water test carried out to ensure that the quality of water is within defined parameters.
- Any equipment that has been used to scoop up the stool must be thoroughly disinfected before it is stored away.

Toxic chemical spillages

In any emergency a quick and calm reaction is necessary, only persons with knowledge of the product and have been trained to handle spills are allowed in the area. Ventilate area well and wear appropriate PPE when dealing with a spill.

The Pool Water Treatment Advisory Group provide the following procedure: if the spillage is under 45 litres, it can be diluted with large quantities of water and then if local regulations allow, run to drain with copious amounts of water. Otherwise, absorb and dispose of as below. For a spillage over 45 litres: absorb spillages with dry sand, soil or spill kits and collect the absorbed material in containers and seal securely, disposal is according to local regulations or see the product's safety data sheet for information. Wash spillage site well with water and detergent and be aware surfaces may become slippery. Continue to ventilate the site of the spillage. Any spillages or uncontrolled discharges into the watercourse, drains or sewers must be notified immediately to the appropriate regulatory body.

Appendices

See Normal Operating Procedures (Appendix B) and Appendix 1: description of pool(s) - includes procedures to follow in the event of an emergency that falls outside of the scope of this document.

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