

# **Hydrotherapy Pool Policy**

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#### INTRODUCTION

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

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

The Hydrotherapy Pool Policy provides:

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

### RATIONALE FOR HYDROTHERAPY

The pool is used where access to a public swimming pool is deemed inappropriate due to its size, temperature, changing facilities, and environment. The pool is used to meet all pupils' therapeutic and sensory needs and to maintain their well-being.

The use of the pool aims to provide:

- opportunities for pupils to explore their environment and develop their confidence in the water.
- opportunities for freedom of movement, balance, weight-bearing, and coordination.
- physiotherapy routines, circulation, exercises, and toleration of touch
- The development of communication skills and a safe environment for fun and relaxation. Access to learning through sensory programmes in the pool.

### ACCESS TO HYDROTHERAPY

The pupils' health/medical/behavioural suitability for hydrotherapy must be **thoroughly risk assessed individually** before consideration of any hydrotherapy programmes. Any moving and handling issues must be risk-assessed by the Moving and Handling Coordinator, class teacher and any other relevant professional, such as Occupational therapists. An appropriate programme should be made available to all staff. The pupils' confidence should be considered, and if applicable, a Behaviour Programme should be written with the support of a class teacher, teaching assistants and any other relevant professional.

The session lead person must fully understand the pool use, safety, and evacuation procedures and be responsible for the health and safety of the session. Depending on the group's ability and safety requirements, they will also ensure an appropriate staffing level. Staff should be aware of the social, psychological, and cultural implications of the pupils and staff involved in the session.

All spotters will attend relevant pool training to support swimming lessons. Training must include pool management and safety, pool evacuation, emergency/fire evacuation, health and safety, and manual handling. All staff, including agency staff, must read the hydro pool policy.

### FACTORS AFFECTING ACCESS TO HYDROTHERAPY

Please consult with multi-professionals in the school before including pupils in hydrotherapy sessions for advice on all these areas.

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

### STAFF RESPONSIBILITIES

All staff has a duty of care that operates for any activity in which pupils are involved; staff cannot transfer that duty of care to anyone else. About swimming, this means that Class Teachers will ensure the appropriate planning and risk assessments are in place to ensure:

- There is a correct ratio of staff to pupils
- Pupils are appropriately supervised when changing
- Routine and emergency procedures are understood.
- > They have an overview of pupils while in the pool
- > They set objectives and know their pupils' progress with their swimming or other skills while in the pool.
- ➤ Ensure no glass is brought into the pool area and no jewellery is worn in the water.
- > Ensure pupils and staff access water or suitable liquids after their session.
- ➤ Ensure only trained staff use the hoists. Ensure risk assessments are read and understood by all staff
- > Ensure entry and exit to the pool are safely carried out.
- > Report any faulty equipment or hazards to the appropriate personnel.

### **HEALTH & SAFETY**

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

- > The plant room, testing water and chemical treatment,
- Cleaning the pool and pool area and access to the pool.
- Regular maintenance and servicing of specialist equipment
- Emergency procedures, including evacuation in the event of fire.
- > Risk assessment of the pool
- Supply of appropriate First Aid Kit
- > Access to proper training for staff who are spotters.

All staff members and volunteers must have an enhanced CRB (or equivalent via the Disclosure and Barring Service as of December 2012).

At least one staff member must be trained as a spotter during swimming lessons. All staff must carry a walkie-talkie into the pool area in an emergency.

An accident requiring first aid must be recorded on the accident and incident safeguard online platform. (BW)

The leadership safeguarding team also needs to be notified as soon as possible. Accidents where a pupil is hospitalised should be reported under the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1995 (RIDDOR).

Risk Assessments must ensure that each session is staffed by competent people who can make productive decisions. Those involved in the sessions must ensure they read and understand the individual risk assessments. Risk assessments will always be submitted to members of the Leadership Team for approval and will

always be available digitally. Staffing levels may need to be increased if appropriate, or session times may need to be changed to respond to the situation on the day.

### **MEDICAL GUIDANCE**

Specific medical guidelines are to be available for pupils with medical conditions such as diabetes, epilepsy, or the need for suction, and these must be incorporated into their Risk Assessments.

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

If a pupil is prescribed emergency medication, e.g., Buccal Midazolam or suction, it must always be accessible to them during the session. Once a staff member activates the emergency call button, a Senior leadership team member will bring the emergency medication. A trained member of staff should administer emergency medication and follow the individual child's medical care plan. In case of any other emergency, staff should follow emergency protocol.

As advised by medical advice, pupils with gastrostomy tubes or catheters must have them covered by a trained staff member before entering the pool.

Judgments on the length of time pupils and staff spend in the pool should be made considering the water temperature, air temperature, pupils' medical condition, and the effects of increased temperature on the circulatory system. However, specifically recognised advice states that no pupil should be in the water for 30 minutes during any session.

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

Emergency evacuation is via pool hoist and sling only, and it is only undertaken by trained staff; risk assessments are carried out for pool exit procedures and are available to be implemented in case of hoist failure.

Infectious skin complaints should be treated/ covered before swimming can take place. To safeguard all users, the school may ask that a GP be consulted before swimming. The school reserves the right not to allow a pupil to have hydrotherapy, e.g., if they have recently returned from an absence due to illness or surgery. No pupil or staff member can swim for two days after a diarrhoea episode.

Teachers should seek initial advice from the school's physiotherapist for hydrotherapy sessions for every pupil the physiotherapist sees. Further advice must be sought if the pupils' physical needs change.

Appropriate safe storage of floatation devices and sensory water resources should be at the end of each session. Daily storage and laundering of pupil swimwear and towels belonging to the school are to be laundered by class staff. **Other personal swimwear will be sent home with the pupil at the end of the day.** 

### **EMERGENCY EVACUATION + PROCEDURES**

All staff members' crucial role in using the pool is to remove or reduce pupils' chances of difficulty getting in the water. This requires staff to use their training to avoid incidents by early intervention in any given situation. However, when an incident does occur, all staff must know how to proceed.

# On hearing the fire alarm:

- Pupils and pool users will be immediately hoisted into wheelchairs and wrapped in dry towels. Survival blankets need to be provided in the pool area.
- Ambulant pupils will exit the pool calmly and supervised, following their individual moving and handling risk assessment. They must also be wrapped in a survival dry towel.
- ➤ The Spotter will sweep the zone and assist in evacuating the pupils from the pool area. Staff will follow the emergency evacuation route leading them to the exit doors.
- They will only return to the pool area when instructed to by the chief fire marshal.

# Lighting Failure.

- ➤ The pool should be cleared immediately, and all staff and pupils move to a safely lit area.
- Lack of Water Clarity.
- ➤ If the water is cloudy or milky, it cannot be used and will be out of order until tests are completed and balance restored. The site officer will need to inform
- Chemical Leak.
- In the event of a chemical leak or suspected leak, staff must follow fire evacuation procedures.
- Minor Incident.
- A minor incident can be managed and is not life-threatening.
- However, it may result in an amendment of a risk assessment. All such incidents must be reported by completing the appropriate accident/incident forms and informing a leadership team member.

#### Serious Incident

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

- ➤ If a pupil is conscious and safe, the hoist may be used to exit the water. If the pupil is unconscious, they must safely be removed from the pool. At least two staff members would need to be in the water and available on the side. One adult must give the instructions. The lead adult should be the person who knows the injured party best.
- ➤ If a pupil is having a seizure, they must be monitored carefully and once over removed from the pool by staff transfer or hoist if deemed safe. The pupil should then be placed in the recovery position. If Buccal Midazolam is prescribed, it must be accessible during the session and administered if needed, as stated in their care plan, by qualified staff.
- Carry out first aid procedures until help arrives.
- > Breathing and airways need to be monitored carefully during any incident.
- > The Spotter will evacuate the pool as necessary and raise the alarm.
- The office will call the emergency service if needed.
- ➤ As a result of a severe incident, a report to the Reporting of Incidents, Diseases and Dangerous Occurrences Regulations 1995 [RIDDOR]

### **Procedures for Dealing with Other Incidents.**

Staff may occasionally encounter vomit, diarrhoea, or feces. In the case of any of the above, the pool should be evacuated, and all pupils and staff should shower thoroughly. Inform the site officer and head Teacher immediately.

### **GUIDELINES FOR SESSIONS**

- ➤ All pupils require parental permission to use the hydrotherapy pool. All forms will be kept in the pupil's details in an online secure, shared folder at school, and a paper form will be kept in the back of the main office.
- ➤ Pupils should bring their swimming kit from home. Parents must provide all pupils requiring specialised swimwear, e.g., swim pants.
- ➤ If costumes are modified for religious or cultural reasons, e.g., covering arms and legs, they must be tight-fitting to prevent water-logging.

- > Pupils should be encouraged to use the toilet before entering the pool.
- > All staff should wear disposable overshoes while in the pool area.
- ➤ They must visually inspect life-saving resources/devices and ensure the safe use of floats. Pupils must not jump on, stand, or swim underneath floats.
- > The spotter should be aware of the individual risk assessments in place for the group. They should report any faults seen to their Team Leader and note in the site management team hazards/damage book.
- All accidents, incidents and near misses are to be recorded in Behaviour Watch.
- ➤ The Spotter must not leave the poolside until all pupils have left the water and must also ensure the pool area is vacated correctly before the door is closed and the fob locked.
- Training and updates will be identified, arranged, and monitored by the leadership team, which keeps training records. Attending training sessions/refreshers is a requirement.
- > Staff is responsible for recording behavioural incidents during pool sessions following the school's policy.

### **RISK ASSESSMENTS**

- Pupils using the pool must have an individual risk assessment as appropriate or be part of a group risk assessment.
- This would include looking at hazards, pool competency, behaviour, medical needs, level of support in the water and pool manual handling risks. A copy of the risk assessment should be laminated and taken to pool sessions.
- > Staffing levels must be appropriate for the needs of the group.
- ➤ Those with complex needs and epilepsy may need 1:1 in the water, and this must be stated in the risk assessment.
- ➤ Any pregnant staff should have a Risk Assessment to consider their changed circumstances. A pool with a temperature of 31 C is to be avoided during pregnancy.
- Any damaged, broken, or malfunctioned equipment, i.e. Hoist, sling, changing bed, lighting, is to be reported immediately to the site officer and Headteacher.

### **CLEANING AND MAINTENANCE**

- ➤ Following the session, the Spotter must ensure that all service users have vacated the pool and associated rooms by sweeping the area, lights are turned off, and the pool entrance doors are closed off via the fob system before vacating the area.
- > The Premises and Cleaning team replaces the pool cover at the end of the school day.
- The Premises Team are responsible for all heating, cleaning, and maintenance. The pool room must permanently be closed; a critical system accesses areas. They are also responsible for heating the pool water and the ambient air temperature.

- The Premises Team checks the poolside alarm's functioning daily (first thing in the morning-rings in the main office).
- Chemical balance and safe storage and use of the chemicals must be as per instructions and are the responsibility of the trained site staff. The abovementioned procedures are in the hydrotherapy pool logbook and maintenance risk assessments.

#### **MONITORING & RECORDING**

The senior leadership team is responsible for maintaining the following records.

- 1. Appropriate risk assessments.
- 2. Pool safety operation procedures.
- 3. Records of incidents and accidents.
- 4. Records of pool tests.
- 5. Records of pool use.
- 6. Qualifications and training of staff.
- 7. Policies and Procedures.
- 8. Hire arrangements.

# **POOL MANAGEMENT**

#### Access

The pool entrance must always be locked, and exits must have adequate signage to ensure safety in an emergency evacuation.

# **Flooring**

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

# **Equipment**

Adequate safe storage should be provided both poolside and in all changing areas. Session staff must check all flotation aids to ensure they are fit for purpose. If not, please report to the team leader. The pool cover should be risk-assessed regularly. Session staff should wipe down pool beds and change beds. All equipment, e.g., hoists, should be serviced and maintained through the schools' service level agreement/maintenance contract.

### **Chemicals**

All chemicals and water treatments must be stored away from the pool. Adequate disposal facilities or incontinence wear must be provided.

#### **Electrical**

Appropriate lighting must be installed, and any faults should be reported immediately. The alarm system must be checked regularly. According to BS 7671

Regulations, all electrical standards must be met for installations and electrical fixtures.

# Signage

Ensure clear signage for emergency exits and pool depth as appropriate. Also, the walkie-talkie should always be taken into the pool when used. A clock on the wall visible from the pool should ensure session times or seizure timing.

### **Pool Users**

Every precaution should be taken to avoid water contamination. Pupils at risk of incontinence during a pool session should wear protective swimwear [readily available]. Pool contamination will result in the area being out of action for at least 24 hours. Where possible, encourage all pupils to use the toilet before the session. Pupils with epilepsy should only attend if they are well and their epilepsy is well controlled. Those with individual medical equipment and emergency medication should have access to it in an emergency. Wounds should have waterproof dressing such as On-site available on Amazon]

## **STAFF ROLES**

### The Session Leader

The session leader (usually the class teacher) is responsible for the session. They compile hydrotherapy plans for the group and share them with all staff. They allocate staff to their roles for the session. The leader knows water quality and temperature, moving and handling procedures, risk assessments, equipment needed, hygiene, incident procedure, and who the Spotter is.

### **Supervisory Personnel**

Swimming lessons will be supported by several supervising staff, many of whom will be qualified teaching assistants. The lead teacher will deploy or direct them as required to maximise the safety of the pool environment. They will not be required to support the lesson from the poolside or in the pool itself.

All teaching assistants are expected to be willing to support lessons in the water unless they have agreed with the Head Teacher to be exempt from this responsibility.

#### STAFF AWARENESS

- 1. Be aware of wet floors and hot pipes.
- 2. Be aware of exits and alarms. Be aware of equipment in the pool area.
- 3. No outdoor shoes to be worn in the pool area.
- 4. Wheelchairs are not allowed at the poolside except for specific pupils or staff who require them. A special mat for the wheelchair should be used to and from the pool area.

- 5. Please shower before entering the pool.
- 6. No pupil is to approach the poolside without an adult.
- 7. Pupils must wear flotation aids as appropriate.
- 8. All entry to and exit from the pool must be via steps or hoists.
- 9. remove them from the pool as soon as possible if a pupil starts to soil or vomit. Then, clear the pool and inform the site team.
- 10. No jewellery is to be worn in the pool unless it cannot be removed.
- 11. No glass should be brought into the pool area/
- 12. The pool door must be closed during all sessions and after groups leave.
- 13. Staff must always be vigilant

### **The Spotter**

# One Spotter per session is required.

# **Duties and Expectations of the Spotters**

- > To ensure the safety of the pupils and staff during the lesson.
- > To dress appropriately and be ready to support any emergency in the water.
- > To ensure the safety of all visitors when in the pool and changing area.
- ➤ To effect a rescue and call for assistance in the event of any incident occurring and report any such incident to Senior Management as soon as possible after the incident, filling in appropriate paperwork/procedures set by Heron Academy.
- ➤ To write a report, no matter how trivial, ensure all details have been recorded and alert Senior Management.
- ➤ To ensure all incidents are avoided by early intervention in potential risk situations.
- > NEVER leave the pool unattended under any circumstances. Accidents happen when least expected.
- ➤ Be aware of the position of all safety equipment, and check every day for damage. If used, check the equipment is in working order after use.
- ➤ Be aware of all emergency exits. To set out and put away equipment at the start and end of a lesson.
- ➤ Be able to work as part of a team and to communicate well with other members of staff/professionals
- ➤ If any faeces are released into the pool or if there are any rashes, inform the site manager and senior leadership team.
- ➤ To co-operate with other staff members during lesson times to be neat and have a professional appearance whilst on duty.
- ➤ The staff at The Heron Academy are trained regularly to keep up to date with any changes to spotting and using the hoist.
- > The designated spotter must always watch the pupils and staff in the water
- The spotter must not look through the window, read or use a mobile phone on the poolside
- ➤ The spotter is to watch for any signs of the pupil in distress, unwell, loss of aids or signs of a seizure.

- The spotter is to watch for incidents that could endanger the pupils or staff.
- > The spotter is always to scan the surface and the bottom of the pool
- > All queries must be referred to the swimming lead, Isaiah Morgan-Robinson.
- Always ensure the safety of all pupils/staff within the class
- Ensure each pupil is given appropriate support and close supervision
- During a seizure, the spotter uses the walkie-talkie to alert medical staff/senior leadership that help is needed when a seizure starts.
- ➤ The swimming teacher will deal with the seizure appropriately until medical help arrives. The spotter and other staff members will calmly remove any other pupils from the water and poolside.
- > The swimming pool is to be permanently locked when not in use.

# Appendix A

# Procedure in the event of a secure in the poo!

Considerations should include:

- the person's epilepsy
- their age
- their abilities
- any other disabilities
- the swimming/activity location support person to help supervise/assist in an emergency

### Supervision ensures safety!

Supervision ensures all pupils with epilepsy can participate safely in water activities. **Even those with well-controlled epilepsy should NEVER swim alone.** 

Important things to consider about supervision include:

- Children with controlled/ uncontrolled epilepsy should have two people accompany them. One should remain in the pool and one as a spotter outside the pool:
- Spotter should maintain constant supervision, make eye contact and always stay within arm's reach of the person with epilepsy:
- Spotters should be aware of the person's seizure types

# First aid for seizures occurring in water

A seizure in water is a life-threatening situation. In certain situations, a loss of consciousness is hazardous, and emergency care must go beyond the routine procedures

If someone is having a seizure in water (swimming pool),

### DO!!

- ✓ Support the person in the water with the head tilted so the face and head stay above the surface.
- ✓ Remove the person from the water as soon as the active movements of the seizure have ceased.
- ✓ Check to see whether the person is breathing and whether they have a pulse.
- ✓ If they are not breathing but have a pulse, start mouth-to-mouth resuscitation and immediately call 999,
- ✓ Even if the person is fully recovered, call an ambulance. The person should have a complete medical check, as inhaling water can cause lung or heart damage.