



Making the difference

Hydrotherapy Pool Policy



HYDROTHERAPY POOL POLICY

Contra-indications to a User with the advice of a Doctor, the School Nurse and/or Physiotherapist:

- Infectious skin disease
- Infectious upper respiratory tract infection
- Open Wounds/skin infection
- Fear of water
- Faecal incontinence
- Gastrointestinal problems/viruses
- During a course of radiotherapy

Considerations prior to admission into the pool:

- Epilepsy
- Poor blood pressure control
- Respiratory compromise
- Open wounds or any lines/tubes in situ covered by Opsite, e.g., gastrostomy
- Hearing aids and grommets
- Sensitivity to chlorine
- Contact lenses

Each user should be screened for above for health and safety prior to admission to the hydrotherapy pool by the physiotherapist or assistant, school team lead in charge of each session.

NB incontinent users may swim if the following precautions have been taken:

- The patient has been toileted before entering the pool and
- The patient wears incontinent pads or nappy in the pool

Supervision

- All therapy sessions must be supervised by a designated physiotherapist or trained group leader who has satisfactorily completed annual resuscitation and pool evacuation training updates.
- In most circumstances all users in the water should have a helper on a one-to-one basis. In some circumstances this ratio may be altered with more able users.
- There must be at least one free adult either in the pool or on the poolside at all times throughout the pool session, in order to summon for help and aid in any emergencies.
- All users are advised to shower before entering the pool.
- A risk assessment should be carried out for each user.

Pool Maintenance

- Cleaning maintenance of the surrounding area of the pool is the responsibility of Vbranch House.
- All staff present at each session are responsible for general tidying of the changing cubicles, removal of nappies and swimming towels etc.
- For safety reasons, all users must test the pH levels and the chlorine content of the pool water before the start of each session and record the results in the log, along with the bathing load and the time. Training will be given to all users on how to conduct the tests. If the values recorded are not within the guideline ranges listed in the logbook file, the Pool Manager or Vbranch House Reception should be informed.
- The Pool Manager will normally test the water chemistry on each weekday the pool is in use and record the results in the log. If this test has been conducted less than 60 minutes before the start of the user session, the normal pre-session checks may be skipped. A water sample



will also be taken once per week (in accordance with PWTAG guidelines for hydrotherapy pools) for microbiological analysis.

Outside Door

All doors must be shut at the end of the period of use.

Electrical Equipment

Only approved electrical equipment authorised by the pool committee may be used within the pool area. Unapproved equipment strictly forbidden.

Wheelchairs

- Powered wheelchairs must not be driven in the pool area, except under close supervision by staff at all times. These should be left in the disengaged position and left outside the changing rooms under cover when possible.
- Manual wheelchairs and pushchairs should only be brought into the pool area when absolutely necessary e.g., to minimise the need to manually handle the user.
- Children sitting in their manual wheelchairs must be supervised at all times whilst in the pool area.
- Water hose for washing wheelchairs available outside pool area. All wheelchairs should be wheeled over the mat to remove excess moisture and dirt.

Hoist

- The hoist/hoist chair and stretcher and slings must be checked regularly by Vbranch House.
- All hoists should be returned to the appropriate docking station at the end of the session.

Footwear

Pool users and staff should remove their shoes on entering the changing area or wear protective covers over their shoes. Some users may need to keep their shoes on to enable them to walk safely.

Running in the Pool Area is not Permitted

Hazards and Potential Hazards

These should be reported to the Resident Engineer on 01392 463816. The hazard should be marked unsafe until action has been taken.

Faeces or Vomit

If the pool is contaminated by loose faeces or vomit, staff should try to remove contamination and notify Vbranch House as soon as possible and record the incident in the log book.

Use of Sensory Lights

The sensory lights should be used in conjunction with clear objectives. The switches should be put back in the cabinet at the end of the session and all lights turned off.

The lead of the session should ensure that 1 member of staff has the pendant which turns off the lights in case of a medical emergency.



Accidents

Any major accidents should be recorded in the Incident Book and in the log provided in the pool area.

Moving and Handling

- Moving and handling risk assessments should be carried out on all manual handling tasks within the pool area.
- Staff should follow the recommendations made in the patients' handling plans.
- It is the duty of all staff to alert their line managers of any difficulties encountered in the moving and handling of patients within the pool area.

Emergency Procedures

- TELEPHONE – staff must be aware of the site of the telephone by the entrance door. Staff to phone Vranck House Nurse or Reception (instructions by telephone), in the event of an emergency, accident or serious illness. Dial (9) 999 or 112 if necessary.
- EMERGENCY RESUSCITATION BOX AND FIRST AID EQUIPMENT – Staff must be aware of location of resuscitation and first aid equipment in end cupboard nearest the pool cover. Vranck House is responsible for checking and maintaining this equipment.
- EPILEPTIC FIT – in the event of a user suffering an epileptic fit whilst in the water, staff should hold the user in a safe breathing position until the seizure subsides and then help the user out of the pool and care for accordingly. If the seizure is prolonged staff should use the hoist or resuscitation board to evacuate the user onto the pool side and put in the recovery position.
- INCIDENT IN THE POOL – following an emergency evacuation of a user, they must be checked over by medical staff on site or if no doctor is present the senior nurse must make arrangements to send the user to RD&E Emergency Department and they should be informed in advance. In addition, it is the responsibility of the supervisor of the session to ensure an Incident Form is completed and given to the Nurse at Vranck House.
- LIFE SAVING AIDS – staff must be aware of the location of life saving aids, for example, poles, inflatable rings, etc.
- FIRE – staff must be aware of the location of fire extinguishers and alarm.

In the event of a fire at the pool

1. Evacuate the area immediately by the nearest available exit and assemble in Vranck House hall/car park, ensuring a member of staff has the evacuation box. Staff should not attempt to recover clothing, etc.
2. The person on the side of the pool should run to Vranck House who will call the fire brigade.

In the event of a fire at Vranck House or Honeylands

Users of the pool should leave the water immediately and dress. The party should then go to the grassed area outside the pool and await further instructions.

Addendum (overleaf):



POOL CLOSURE (Bacterial Contamination) POLICY

Response to hydrotherapy microbiological test results.

National recommended standards for pool water quality (microbiology):

The recognised authority for standards and operating practice for hydrotherapy pools is the *Pool Water Treatment Advisory Group* (PWTAG hereafter). They state that the following results in a 100ml sample should be considered 'unsatisfactory':

1. More than 10 coliforms or more than zero in two consecutive samples.
2. More than zero E. coli.
3. Total viable bacteria count (TVC) [37C/24hours] in excess of 10.
4. More than zero Pseudomonas aeruginosa.

They also define the following as 'Gross contamination':

1. E. coli over 10 plus either TVC over 10 or P aeruginosa over 10.
2. P aeruginosa over 50 plus TVC over 100.

They recommend the following:

1. Pool closure in case of gross contamination, or if P aeruginosa is over 50.
2. Considering pool closure if three consecutive unsatisfactory results are returned.

Vranch House acceptable limits for microbiology pool water test samples:

As the microbiology test standards used by our testing laboratories are slightly different to the ones outlined by PWTAG, and in recognition of the fact that some of our users may have reduced resistance to infection; Vranch House will use the following limits for 100 ml water sample:

1. Coliforms - acceptable limit: 0.
2. E Coli - acceptable limit: 0.
3. TVC @22°C for 3 days - acceptable limit: 20. *
4. TVC @37°C for 2 days - acceptable limit: 10.
5. Pseudomonas aeruginosa - acceptable limit: 0.

* South West Water recommended limit is 100



Response to test results exceeding the acceptable limit

Pool Closure:

The pool will be closed to swimmers and undergo remedial treatment under the following conditions:

1. Gross contamination (as defined by PWTAG).
2. Two separate test results above the acceptable limit in one sample.
3. Two consecutive test results above the acceptable limit in the same category.

Any isolated result above the acceptable limit will not necessarily result in pool closure, but will trigger a treatment procedure that will include the following:

1. Increase filter backwash frequency from 2 to 4 per week.
2. Increase free chlorine levels by 1 ppm (mg/l).
3. Investigation of potential causes of the infection.
4. Additional cleaning of filters, skimmers and any other potential areas for bacterial colonisation.
5. Increased frequency of pool cleaning/brushing/vacuuming.