

Metheringham Swimming Pool

AN OUTDOOR, COMMUNITY POOL, RUN ENTIRELY BY VOLUNTEERS

ESTABLISHED 1975





www.facebook.com/megpool.org.uk/

EMERGENCY ACTION PLAN

Metheringham Swimming Pool Prince's Street, Metheringham Lincoln LN4 3BX

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INTRODUCTION

The EAP at Metheringham Pool is written to provide guidance on how to act during an emergency at Metheringham Pool. It is primarily aimed at *Lifeguards* & *Volunteers* working at the pool but is relevant for all METHERINGHAM SWIMMING POOL users.

A swimming pool should be a place of leisure & enjoyment, where children and adults can swim and play safely. Our primary aim must be the prevention of accidents by education, by warning and by vigilance. There are a number of hazards at any pool. Make yourself aware of them so you can anticipate potential problems.

If an emergency does arise, this EAP will give you guidance on how to react, but don't wait for an emergency before you read it. If you work at our pool, you need to know the EAP, so read it regularly.

Don't allow an emergency to become a tragedy.

EMERGENCY CONTACTS

In the case of a serious emergency first phone the EMERGENCY SERVICES on 999

Defibrillator located at Great Barrier Reef Fish & Chip shop, Princess Margret Avenue. Outside the gate swimming pool green gates & over to the left of the car park.

Doctor's surgery 01526 320522

HAZARDS

There are a number of hazards to be considered while working at the pool:

ENVIRONMENTAL HAZARDS

The pool is open air, so being aware of the weather is particularly important.

Electrical Storms – Swimming is not permitted during an electrical storm. If lightning is seen, call all swimmers from the water and ask them to wait in the changing rooms. If the session has not begun, postpone the start until the storm is over, allowing customers to wait in the changing rooms. If the session is near to the end, close the session and ask the customers to change for their own safety. Avoid using metal tools such as the net, rescue pole or vacuum cleaner during an electrical storm. Turn off and disconnect any electrical equipment.

Working parties should be abandoned and people should take shelter during a storm. The concrete shed is also safe during an electrical storm.

Sun — During a swimming session, even weak sun can burn a fair skin and extended exposure to sunlight can cause skin cancer. Anyone working at the pool should protect themselves with an appropriate factor sun cream and wear a hat if the sun is strong. Sunlight can cause excessive glare — sunglasses may help. Look out for swimmers suffering from sunburn, as them to leave the pool and stay in the shade. Advise people to wear sun cream on sunny days.

Rain — If rain makes life guarding so uncomfortable that it affects your concentration, halt the session and resume it when the rain stops.

STRUCTURAL HAZARDS

Most of these are fixed features of the pool and buildings.

Skimmer covers – 3 at the deep end. Make sure they are in place.

Lights – check they work before an evening session.

Slippery floors – do not allow running.

Pool covers — the rollers are not designed to carry people. Do not allow climbing or leaning on the covers.

Water depth – The water deepens suddenly towards the deep end. Be aware of this: look out for poor swimmers getting out or their depth.

Boiler room — It's out of bounds unless you are fully trained or had permission from the Site Manager or Pool Plant Engineer. It contains specialist equipment and chemicals and must be kept locked at all times.

PEOPLE HAZARDS

Almost everyone can pose a hazard!

Vandals — As an open-air pool, we are prone to vandalism. Check for signs of damage when opening, particularly broken glass or debris in the pool. Report anything to one of the Trustees.

Under 8's – Possibly poor swimmers can tire easily. Should be accompanied, at all times. Do not believe their claims of swimming ability. Watch them.

8 - 12's — May be overconfident & can tire easily. Boisterous. Intervene early to calm them down.

The hormone years – Prone to showing off, not inclined to listen to authority. Handle with care, ask nicely rather than shouting at them.

Drunks — Ask them nicely to leave; try to keep them out of the pool. Phone one of the Trustees for help.

Elderly – May overestimate their ability. Watch them.

Disabled – Talk to them, assess their needs. If you think they may not be safe in a public session, we can always arrange a session for them or invite them to a quieter session.

LIFEGUARD HAZARDS

Do not forget yourselves.

Sun – see environmental.

Dehydration – bring a drink or ask the volunteer in the tuck shop to get you something.

Loss of attention – Do not let yourself be distracted. Move around the pool, talk to swimmers, but keep scanning.

Frustration & anger – Keep your cool, do not be drawn into an argument. Be polite but firm; refer the customer to a Trustee if that helps.

Tiredness – Do not take a Lifeguard shift unless you have had at least 11 hours of rest/sleep

ACTIVITIES

Play safely at all times

Diving - Simple - NO DIVING!!!

Excitement – Do not allow it to get out of hand.

Numbers – Do not allow the inflatables in the pool if there are more than 25 swimmers unless you are happy to do so. Use your judgment. If you think it may be unsafe, don't allow it.

Slide – Do not allow the slide to be used if there are more than 25 swimmers unless you are happy to do so. Use your judgement. If you think it may be unsafe, do not allow it to be used.

FIRST AID

DEALING WITH FIRST AID INCIDENTS

Not all lifeguards or volunteers will be capable of administering first aid. These guidelines should not be treated as license to administer treatment for which you have not been trained. They are included as a reminder to those with appropriate training.

BLEEDING

Treatment

- Apply direct pressure, using clean dressing or fingers/palm of hand.
- If bleeding is extensive or a foreign object is present, press together the edges of the wound.
- Sit/lay the casualty down, raise the injured part and support.

Treat for shock and summon medical assistance.

NOSEBLEED

Treatment

• Sit the casualty down with head forward and pinch the soft part of the nose.

DO NOT LET THE CASUALTY TIP THEIR HEAD BACKWARDS. ALWAYS WEAR NITRILE FREE PROTECTIVE GLOVES PROVIDED

BURNS

Treatment

- Immerse the area in cold running water.
- Remove any jewellery, but leave clothing.
- Cover the burn with clean, dry dressing and hold this in place with a light bandage.
- Treat for shock and seek medical assistance.
- Do not burst blisters.
- Do not apply any creams.

CHOKING

Symptoms

- May have been chewing/eating.
- May be clutching at the throat.
- Partial * Distressed and coughing, noisy breathing.
- **Total *** Unable to speak or breathe, face may be blue.

Treatment

- *If the casualty is breathing then encourage them to cough.
- If breathing stops then carry out back slapping.
- If back slapping fails try chest thrusts on a child, abdominal thrusts on an adult.

HEART ATTACK

Symptoms

• Severe crushing or tight pains in the chest which may spread to arms, throat and Back.

• Looks pale and sweaty.

Treatment

- Place the casualty in a half sitting position and loosen neck and waist clothing.
- Reassure and check breathing and pulse regularly.
- Seek medical assistance urgently.

Defibrillators (All Publicly Accessible and in order of distance):

Barrier Reef Fish and Chip Shop

Princess Margaret Ave, Metheringham, Lincoln LN4 3DA

Parish Council Offices

High Street, Metheringham, Lincoln LN4 3DZ

• Maharaaj Restaurant

High St, Metheringham, Lincoln LN4 3DZ

EPILEPSY

Symptoms

 Severity can vary from appearing to be day-dreaming and twitching, to completely unconscious and muscle spasms.

Treatment

If on Dry land

• Do not restrain unless in danger and allow the casualty to rest quietly.

If in the water

- Keep the casualty's face above the water, remove from the water when the movement has
- Seek medical assistance if the sufferer does not regain consciousness, has been submerged, has inhaled water or has required resuscitation.

DIABETES

Symptoms

Hypoglycaemia – too much/ too little sugar. Dry skin, rapid pulse, deep breathing.

Treatment

- If conscious give sweetened drink, chocolate etc.
- If unconscious place in the recovery position phone 999 and arrange urgent transfer to Hospital.

ASTHMA

Symptoms

- Casualty may be anxious.
- Breathing may become noisy and difficult.
- Re-assure the casualty, sit them down and lean them forward.
- If they have medication encourage them to use it.
- If the attack is mild and you are satisfied that it has subsided, the casualty may return to the water.
- If the attack is severe, medical assistance should be summoned.

CRAMP

Symptoms

- Casualty complains of pain in the muscle.
- Stretch the muscle by straightening.
- Gently rub the area and reassure the casualty.

ELECTRICAL SHOCK

Symptoms

• Unconsciousness, muscle spasm, cardiac arrest, burns.

Rescue

- Switch off the power.
- Remove the plug.
- If this is not possible, use a non-conducting material to push away the source.

Treatment

- If cardiac arrest occurred commence EAV or CPR.
- Send someone to collect the DEFIBRILLATOR from the

Great Barrier Reef fish & chip shop.

- If the casualty is unconscious and breathing, place in the recovery position and summon help.
- Treat any burns.

- Treat for shock.
- Seek medical assistance.

FRACTURES

Symptoms

- Cracking sound.
- Severe pain.
- Limb is swollen with limited movement.

Treatment

- Keep the casualty in position you found him /her in.
- Support an upper limb with a sling.
- Immobilise a lower limb.
- Raise a supported limb.
- Treat for shock.
- Do not move an injured limb unless absolutely necessary.

SHOCK remember shock can be fatal

Symptoms

- Casualty may feel faint.
- Skin may be pale and cold to touch.
- Pulse and breathing are rapid but shallow.
- Casualty may be sweating.

Treatment

- Treat the cause and reassure.
- Lay the casualty down with the feet elevated.
- Keep the casualty warm and DO NOT give anything to eat or drink.
- Seek medical advice.

UNCONSCIOUS BREATHING CASUALTY

Symptoms

- Various from drowsiness to a coma.
- Distinction between consciousness and unconsciousness can only be made by speaking to the casualty: (Gently shake the casualty and call "Are you awake, can you hear me?")

Treatment

- Remove or treat the cause.
- Ensure there is a clear airway.
- Treat any injuries.
- Place in the recovery position and cover the casualty.
- Seek urgent medical advice.

SPINAL INJURY

Symptoms

- Pain in the neck.
- Numbness or tingling.
- Lack of movement or feeling.

Rescuer

- Raise the alarm and signal SUSPECTED SPINAL INJURY
- Enter the water carefully and perform the spinal manoeuvre. (Vice Grip, Turn and Trawl)
- Trawl to shallow water and enlist the assistance of the back up team.
- Use the spinal board if trained and if you have enough volunteers to follow your instructions.

Back up team

- Clear the pool and summon the emergency services.
- Enter the water and assist with the stabilisation and recovery of the casualty.

In the event of a suspected spinal injury occurring **when there is only one lifeguard.** Help can be drawn from known, reliable members of the public in order to stabilise the casualty and general assist prior to the arrival of the emergency services.

EVACUATION

There may be occasions when evacuation of the site is necessary, such as a fire or toxic gas release.

Before signalling an evacuation, make sure that the privacy & entrance gates are open and instruct everyone on site to assemble on the playing field.

First, signal for the swimmers to clear the pool, with three loud blasts on the whistle.

Working together with the Volunteer on duty, guide the swimmers and spectators to the playing fields by voice and signals; **don't allow any swimmers to return to the changing rooms**. You may have to shepherd them to the entrance. If necessary, enlist the aid of any adults present.

Assuming the reason for evacuation to be serious, alert the emergency services by phone.

If it is safe to do so, check the changing rooms for stragglers. If it is unsafe wait for the emergency services.

Wait with the customers, contact the Trustees to bring towels, blankets etc. You cannot detain customers, so if they wish to go don't try to stop them. In the case of any unaccompanied children on site contact their parents by phone.

Do not allow anyone back on site.

FIRE

As a lifeguard, your main responsibility is the safety of the customers. Do not tackle a fire if it takes you away from the pool. Do not tackle a fire at all unless you catch it its very early stages. Life is far more important than property.

Any fire on site is likely to be in ether the buildings, or the surrounding hedge and fence, so there will be plenty of fuel to support a substantial blaze.

In the event of a fire:

Clear the pool.

- Give three loud blasts on the whistle.
- Follow the evacuation procedure (above)

ELECTRICAL STORM

In the event of an electrical storm:

Clear the pool.

- Give three loud blasts on the whistle.
- Tell the swimmers to wait in the changing rooms.
- Allow swimming to resume when the storm has passed.
- If the storm occurs prior to a session, postpone the opening, but allow any waiting customers to shelter in the changing rooms.
- During a storm, stay in shelter under the poolside shelters or in the changing rooms
- Avoid using metal tools such as the rescue pole, net or pool brush.

BOMB THREAT

In the event of a bomb threat:

Clear the pool.

- Give three loud blasts on the whistle.
- Follow the evacuation procedure (Page 11)
- Alert the school, if the school is open.

GAS LEAK

There is a supply of natural gas to the boiler house. There are two "cut-off" valves in the Boiler Room

If you suspect a gas leak:

Clear the pool

- Give three loud blasts on the whistle.
- Follow the evacuation procedure (Page 11)
- Alert the school, if the school is open.

TOXIC GAS EMISSION

Toxic gases such as chlorine may be released when pool chemicals are mixed wrongly. Chlorine has a sharp, pungent smell, which causes coughing and choking.

If you suspect a toxic gas emission:

Clear the pool

- Give three loud blasts on the whistle.
- Follow the evacuation procedure (Page 11)
- Alert the school, if the school is open.

CHEMICAL SPILLAGE

In the event of a chemical spillage, the pool plant engineer will clean and make safe anything they use for the pool before any session can open.

If the spillage is of cleaning chemicals such as bleach:

Ensure the spillage is covered with an orange cone (if one is available). If it is not possible to mop up the spillage and swill down with water **away from the swimming pool** please call one of the Trustees for help. If chemicals enter the water you must get the lifeguard to clear the pool.

You must use protective clothing, nitrile powder-free protective gloves & eye protection.

DISORDERLY BEHAVIOUR

Swimming pools have always been the focal point for the congregation of people of all ages and it is possible that either disorderly behaviour or damage will occur. The following notes are intended only as a guideline as each incident will present its own individual set of problems.

In any incident, your first duty is to the swimmers. If adequate lifeguard cover cannot be maintained whilst an incident is dealt with, clear the pool.

- Try to spot trouble in its early stages before it becomes a serious incident.
- Always approach offenders in a calm manner and treat them in a way you would expect to be treated yourself.
- Try to avoid getting into arguments by giving a calm, factual explanation of the rules.
- If more than one person is involved, try to separate the parties to prevent a reoccurrence.
- Do not take sides.
- If a person or persons refuse to leave, then a Trustees should be called.
- Record all of the details on an incident sheet, where possible with witness statements.

ASSAULT ON STAFF / VOLUNTEERS

- Report and record the incident.
- In all cases call the Police immediately.
- Render first aid as appropriate.
- Encourage the offenders to remain until the Police have arrived. Try not to provoke further incidents.

OVERCROWDING

The maximum safe bather load is **35** with one lifeguard & **50** with two lifeguards. Under no circumstances must this be exceeded. Control of bather numbers is monitored via the computer system and by issue of coloured wrist bands. This is designed to stop us from going over the maximum number of bathers. If more people turn up who have not booked the volunteer or lifeguard will explain they will have to wait for the next session.

The computer system records the number of swimmers booked in and the number of spaces left. DO NOT EXCEED THIS NUMBER.

Swimmers booked into a session cannot extend their booking to the next hour unless there is capacity in the pool, and no-one is waiting in the queue.

In the event of any complaints remain calm. Remind them that we try to do the best for everyone involved.

RESCUE SITUATIONS (Lifeguard)

At some stage you may find it necessary to carry out a rescue. This is intended as a reminder, not a comprehensive guide to rescue.

Where a bather appears to be in genuine difficulty:

- Assess the situation; try to effect a rescue whilst remaining on the poolside, give assistance by carrying out a **reaching rescue** from the poolside.
- Throw the person a buoyancy aid to support themselves then recover the bather from the water.
- After the rescue, ensure that sufficient and necessary after care is given to the casualty.

In some cases, it will be swifter to effect a rescue by entering the water.

THIS SHOULD ONLY BE DONE AS A LAST RESORT, AFTER RAISING THE ALARM.

When it is not possible to effect a rescue from poolside:

- Raise the alarm or instruct a colleague/volunteer on duty to do so.
- Enter the water to effect the rescue and commence treatment if necessary.
- Any remaining lifeguards/ volunteers should clear the pool and keep onlookers at bay.
- Solo lifeguards should give priority to the rescue and leave pool control to the volunteer on duty.
- The lifeguard should decide if the casualty needs an ambulance/doctor. The volunteer or a responsible adult should be designated to meet them in the car park when they arrive.

Once the incident has been dealt with the lifeguard will need to decide if it is necessary to close that session or the pool for cleaning. Report this immediately to one of the Trustees who will contact the Pool Engineer.

ACCIDENT & INCIDENT REPORTING

All accidents & incidents must be reported in the accident report book as soon as the incident is over, by the lifeguard, one of the Trustees or the volunteer involved. All relevant sections of the form must be completed. If the incident is anything other than minor, call one of the Trustees as soon as possible.

The accident reports book will be kept in the lifeguard hut in the cupboard.

Reports will be made available to the police or any other official body investigating an incident by the METHERINGHAM SWIMMING POOL Secretary or Chairperson.

Communication with the Press over any accident or incident at the pool will be coordinated by the METHERINGHAM SWIMMING POOL Chairperson or Secretary. Please refer all enquiries via this route.

Definitions

An **accident** is any occurrence in which a person is injured or requires treatment, anything from cuts & bruises to CPR.

An **incident** is any occurrence out of the ordinary, for instance a rescue, even helping a struggling swimmer from the water, regardless of the need for treatment, any disorderly behaviour or vandalism, any warning of eviction of people from the pool.

If in doubt, report it.