



INGLETON RURAL COMMUNITY ASSOCIATION
Charitable Incorporated Organisation - No 1171743

Swimming Pool

Emergency Action Plan

version 1.3

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Review History

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1. Introduction

The Health and Safety Executive (*HSG179 – Managing health and safety in swimming pools*) recommends that every pool operator should prepare a written operating procedure setting out the organisation and arrangements for ensuring user safety. This document will be a reference for all staff, both paid and volunteer.

Individual members of staff and volunteers have a responsibility to know and fully understand the contents of this document and all documents referred to within, in addition each member of staff and volunteer has a duty of care to customers, to other staff and volunteers and to themselves.

This document is essential reading for all staff and volunteers.

As this document is continually evolving then any request for change to this document, or any documentation should be passed to the Pool Supervisor or a member of the committee. All input is gladly received as we strive to produce correct and accurate documentation and process.

1.1 Major Caveat

As Ingleton Swimming Pool is an open air facility, it is only open for 3 months of the calendar year which is generally throughout the months of June, July and August. As a direct result of this, it operates within the constraints of a greatly reduced operating budget and available resource pool when compared to other swimming pool facilities around the UK. Whilst every effort is made by the Ingleton Swimming Pool Management Committee, staff and volunteers to meet, and where possible exceed, the regulation, policy and processes that are required to operate a swimming pool facility it is inevitable that there are certain areas and situations where it is financially impossible to provide everything to everybody. Ingleton Swimming Pool takes a pragmatic approach where this is necessary to ensure that this facility remains available for continued generations of local and visitors to enjoy while meeting all legal and regulatory requirements and providing a safe and enjoyable local facility.

1.2 Minor Caveat

The Swimming Pool Management Committee have produced, reviewed and agreed this document and the processes and procedures outlined within it. However, given that we are only open for 3 months of the calendar year and there is often no continuity of staff from one year to the next, we are aware that at a local operation day to day level there may be some slight deviations from the defined within this document. These deviations may only be temporary (for one season or less) or permanent (in which case this document will be updated) but providing any deviations have been discussed and agreed by the necessary Swimming Pool Committee and they do not degrade the service provided to the general public or increase the safety risk of the pool operations then Ingleton Swimming Pool Management Committee has no objection. We are continually striving to improve the level of service and operational efficiency of the swimming pool. The Ingleton Swimming Pool Management Committee are not always best placed to see where improvements can be found which is why we rely on the professionalism and dedication of our staff and volunteers to help us delivery and improve the services we provide.

2. Pool Objectives and Scope

The objectives of Ingleton Swimming Pool Management Committee are to:

- Ensure that swimming pool activities are controlled to minimise risk and maintain a safe, clean, enjoyable, beneficial and friendly service
- Establish and maintain good relationships with other clubs, schools and other pool users
- Ensure that the swimming pool runs efficiently within defined financial restraints
- Maximise usage of the swimming pools facilities in order that they may reach optimum levels and increase revenue, without prejudicing the balance of the recreational programme and the needs of the community
- Maintain optimum levels of trained, motivated and flexible staff at all times when the swimming pool is open
- Develop swimming lessons for all ages and abilities

3. Essential Reading

The **Pool Safety Operating Procedures (PSOP)** for Ingleton Swimming Pool consists of the following documents:

- **Normal Operating Procedures (NOP)**
- **Emergency Action Plan (EAP)**

Other essential reading:

- **Risk Assessment Plan (RAP)**
- **Child and Vulnerable Adults Protection Policy (CAVPP)**

In the best interest of making the pool documentation applicable and readable to its intended audience we have separated all activities related to the Water Plant Management, the Plant Room and Cleaning and placed them in the following document. This document is only essential reading for staff and volunteers who operate the plant:

- **Plant Operators Procedures (POP)**

This **Emergency Action Plan (EAP)** details the action to be taken in the event of a foreseeable event or emergency.

To ensure that the information in this document remains accurate to the way in which the facility is used, it is important to ensure that this document is regularly reviewed, and where necessary, revised. The details of this process are outlined in the **Master Document Index (MDI)**.

It is the overall responsibility of the Ingleton Swimming Pool Management Committee to ensure the safe operation of the pool facility. In practice, on a day to day operational basis when the pool is open during the season then this responsibility falls on the Pool Supervisor, Pool Assistants and Lifeguards.

4. Emergency Action Plan Golden Rules

Please remember the following which should help you in the event of a situation:

- Stay calm at all times – do not shout
- Always instruct the customers politely but firmly
- Continue to reassure customers in the event of an emergency
- Work as a team and ‘Save a Life’
- Remember – if in doubt, get them out (of the pool or the premises)

5. Recording of Information

We try to employ a simple and straight forward approach to recording information. The following are the main forms of day to day reporting and recording of information:

- **Accident Book** – used for the recording of any accidents that occur
- **Disciplinary Book** – used for the recording of any disciplinary issues that occur
- **Plant Operator Diary** – used by the Plant Operators to record notes or handover information
- **Water Quality Log** – log of all water testing
- **Plant Room Log** – log of all plant procedures and chemicals record
- **Pool Cleaning Log** – log of all cleaning procedures
- **Caretaking Log** – log of all caretaking procedures
- **Pool Office Diary** – for general staff communication such as handover notes
- **Membership Book** – records membership details – full membership in the front and temporary in the rear
- **Lifeguard Training Book** – records details of Lifeguard training
- **Close Season Checks Log** – log of all checks undertaken during the close season (insurance requirement)
- **Staff Weekly Time Sheet** – record of staff hours for a particular week
- **Staff Weekly Rota** – record of staff working for a particular week

6. Accidents Recording

All accidents whether minor or major must be recorded in the **Accident Book** which is located in the Pool Office/Pay Kiosk.

For all accidents record the following:

- Complete the header section above the main Accident Report Form section
- Complete the Accident Report Form section
- Sign and date the Accident Report Form section

In the event of a major accident then a complete and accurate record must be made as soon as possible after the accident has happened. You may wish to record additional information on a separate sheet of paper to enhance the information recorded in the **Accident Book**. This additional information may include the following:

- A Complete statement from all person(s) involved
- A diagram with the position of the accident clearly marked
- If possible, include on the diagram staffing positions and names
- Statements from all staff involved
- Any other detail which may be relevant to the accident

For a major accident, the Health and Safety Executive (HSE) must be advised by the Pool Supervisor, or a suitable delegate, at their earliest convenience, and the official accident (RIDDOR) form completed.

In the case of a serious accident to a member of the public or staff or major incident involving the building or plant the Environmental Health Department of the Craven District Council should be notified.

7. First Aid Kit

This is located in the Pool Office/Pay Kiosk along with the ***Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (RIDDOR)*** forms.

The Pool Supervisor and Pool Assistants will regularly check the First Aid Kit is kept fully stocked and that all items have not exceeded their expiry date.

8. Raising the Alarm

The swimming pool does not have a fire alarm. Communication across the entire facility is easily achieved by voice or through use of a lifeguards whistle.

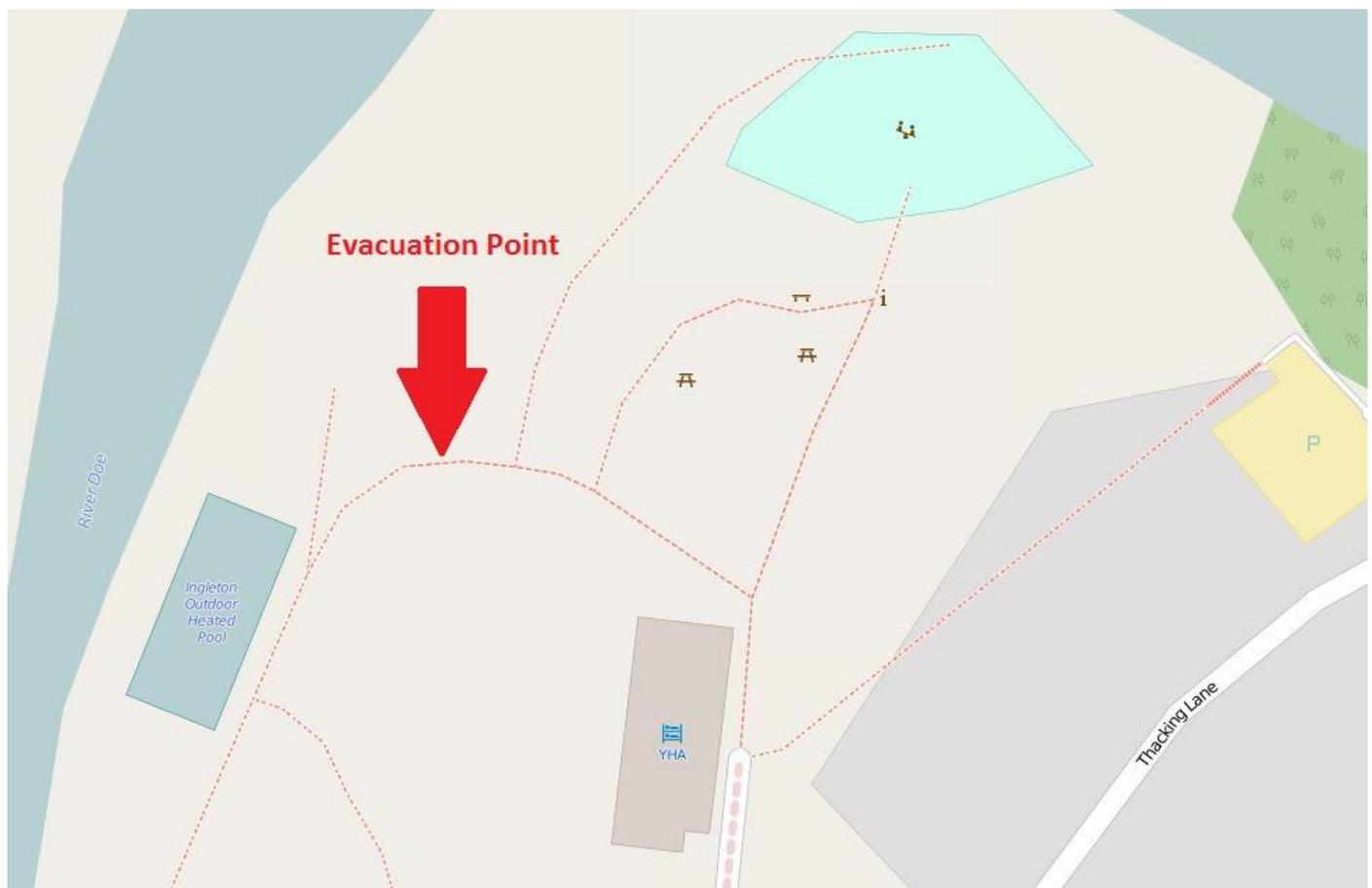
There is a public address system located in the Pool Office / Pay Kiosk which can also be used to raise an alarm and inform the general public.

Lifeguard Whistle Blasts

Sound	Action
One Short Blast	Used to attract the attention of pool users
Two Short Blast	Used to attract the attention of other pool members of staff
Three Short Blast	Used to signal to other members of staff that an emergency is taking place and that a lifeguard is about to take emergency action, immediate support action must be taken
One Long Blast	Used to signal to all swimmers that they must clear the pool, this could be because an emergency is taking place significant enough for the lifeguards to clear the water

9. Pool Evacuation

The Evacuation Assembly point is the Picnic Area above the swimming pool.



An evacuation is required for a number of reasons, some of these are:

- **Fire evacuation**
- **Bomb Alert**
- **Chlorine Gas generation**
- **Structural failure**

Note: If you need to evacuate the pool then follow the same process as outlined in the Bomb Threat section below. If it is not a Bomb Threat then Step 1 can be ignored. Only contact the Emergency Services as highlighted in Step 2 if they are required.

The primary point for departure is by the **Main Entrance**. If this is not available, then use the **Emergency Exit** gate located at the top of the central steps of the spectator viewing/seating area.

The key for the **Emergency Exit** gate is held in a labelled box in the Pool Office/Pay Kiosk. A spare key for the **Emergency Exit** gate is located in an Emergency Key Box with hammer on a chain which is located on the side of the Disabled Changing room. This is identified by a suitable sign.

Before leaving the site, if possible, staff should check the following areas to ensure everybody has evacuated the premises:

- Check the male and female changing facilities
- Check the Plant room
- Check the bottom of the pool
- Check the disabled changing facilities
- Check the Store room
- Check the Washing room
- Check the Pool Office/Pay Kiosk

On leaving the premises, take the landline handset with you. Landline reception may be possible from outside of the premises where a mobile signal may not be available.

On leaving the premises, the staff should decide whether to lock/secure all entry points to prevent unauthorised access to the swimming pool until the necessary professional services arrive.

10. Injury to a Customer (Minor)

If only one lifeguard is on duty then they must observe the pool at all times. Any other staff on site must assist the Lifeguard and the customer.

A minor emergency is one that does not result in a life threatening situation. It will normally be dealt with by the nearest lifeguard, who will follow this basic procedure:

- Lifeguard becomes aware of situation
- Lifeguard alerts other staff that they have responded to an situation using the correct whistle procedure
- The person in the office must offer assistance, and administer any necessary first aid as long as they feel confident to do this
- The **Accident Book** should be completed by the person in the kiosk or by the Lifeguard when they are off pool side
- The **Accident Book** entry is checked by the Pool Supervisor

11. Injury to a Customer (Major)

If only one lifeguard is on duty then they must observe the pool at all times. All other staff on site must assist the Lifeguard and the customer.

A major emergency is one, which results in a serious or life threatening situation. The response follows a basic procedure:

- Lifeguard identifies situation
- Lifeguard alerts other staff that they have responded to an situation using the correct whistle procedure (either **two loud blasts** to attract attention or **three loud blasts** if an emergency is occurring)
- All other staff respond to the alert, and report to the poolside
- Admission to the pool should cease until safe conditions are regained
- Clear the pool immediately
- Lifeguard(s) initiate rescue/first aid procedures and remove casualty from the danger area- unless circumstances dictate otherwise
- Other staff will cover vacated patrol areas and clear the pool if necessary
- If required, contact the Emergency Services. It is not permitted to take any casualty to a doctor or hospital by private (staff) car

- If required, contact a relative of the customer
- Lifeguard completes the **Accident Book** entry and returns to duty
- The **Accident Book** entry is checked by the Pool Supervisor
- The Pool Supervisor will send a report to the Health and Safety Executive in respect of any breaches of the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (RIDDOR) within 7 days

Note: Paper RIDDOR forms can be filled in by a Lifeguard but the full RIDDOR form must be filled in online by the Pool Supervisor

Note: Only a registered medical practitioner can pronounce a person dead.

12. Casualty in the Water

Follow the process outlined in the **Injury to a Customer (Major)** detailed above.

Upon discovery of a casualty in difficulty whilst patrolling the poolside try and attract the attention of any other member of staff with **two loud blasts** on your whistle.

If you can conduct a non-contact non-entry rescue then you can commence with the rescue. Use all available lifeguard aids where appropriate.

If you take the decision that a rescue is not possible without entering the water, then give **three loud blasts** on your whistle and enter the water immediately. Enter the water in a safe manner, recover the casualty and land them at the nearest suitable landing point.

Any available staff should go to the poolside immediately to assist in the rescue.

The first member of staff on the scene will take over any pool supervision or go to the aid of the member of staff performing the rescue. The pool should only be evacuated if absolutely necessary, by giving **one long loud blast** of the whistle.

By default, the pool will be evacuated if the casualty has stopped breathing or a spinal injury is suspected. In all other cases, it is up to the staff present to decide whether the pool should be evacuated.

For a suspected spinal injury where the injury is in the water, contact the fire brigade and inform them that they will be required to enter the water to perform a rescue. They will be required to perform a vice grip and stay with the casualty in the water in that position. Where it is considered safe, pool staff should go into the water to assist.

If required, the lifeguard will follow resuscitation protocols in accordance with NPLQ and/or first aid training. The First Aid kit includes a resuscitation mask.

In the event of full cardio-pulmonary resuscitation (CPR) being required the rescuer will commence CPR.

From the 2018 season there is a portable defibrillator located at Ingleton Pool. This is kept in the office but can be brought out onto the poolside during public sessions.

It is very important that the defibrillator is not delayed and successful setup of the defibrillator can ensure a 75% success rate if the first shock is delivered within the first minute. Training will be given to pool staff on use of the defibrillator. However, there are clear instructions to follow once the defibrillator is turned on.

No more pool admissions will be allowed until the Pool Supervisor or Pool Assistants give the all clear.

It is essential that the defibrillator is checked by the Pool Supervisor on a weekly basis and the log book filled in to ensure that the defibrillator's internal check has taken place and that the defibrillator is fully functional, including a check that all equipment required is present in case of an emergency. There should be adult pads and paediatric pads in the pack and these should be within their expiry date.

13. Overcrowding

The maximum bather numbers (people in the swimming pool) must never be exceeded and numbers must be monitored by staff in the Pool Office/Pay Kiosk and poolside staff.

For safety purposes, the maximum number of people allowed for General Public sessions in the pool at any one time is 50. To prevent overcrowding, Swimming Pool staff reserve the right to limit the length of customer time in the pool.

On occasions where only one lifeguard is on duty then the maximum number of people in the pool can be reduced to 25 (twenty five).

The pool does have the right to issue coloured wrist bands (Blue, Green, Red and Yellow) to customers on exceptionally busy periods such as Bank Holidays. This is the control mechanism that allows the lifeguard and Pool Staff the right to control the maximum number of bathers in the water at any time.

Lifeguards have the right to ask bathers to get out of the pool if they feel that it is overcrowded and there is a risk to customer safety.

Adult Members Sessions bathers load are limited to 12 swimmers per session as from the 2021 season to prevent overcrowding during lane swimming.

14. Disorderly Behaviour

The **Disciplinary Book** must be completed to document and occurrences of disorderly behaviour. It is through this reporting mechanism that further action can be taken, especially in the case of repeat offenders.

Any incidents of disorderly behaviour within the pool or around poolside that may detract the attention of pool staff away from their primary duties of pool supervision must be addressed. Assistance from other staff will be requested as soon as the member of staff feels that their attention is being drawn away from their primary duties.

All cases of assault on staff or volunteers are considered to be serious and offenders are normally prosecuted. In cases of assault staff should:

- Positively identify the offender and, if possible, obtain an independent witness.
- As soon as possible (bearing in mind the requirements of pool supervision) leave the poolside and return to the Pool Office/Pay Kiosk and write out a full report / account of the incident with names and addresses of any witnesses in the **Disciplinary Book**.
- The Pool Supervisor or Pool Assistant will contact the Police, obtain the name and address of the offender and obtain statements from any witnesses for the Police to deal with.

In cases of verbal abuse directed at staff or volunteers, staff should:

- Politely request the offender leaves the pool premises.
- Identify the offender.
- As soon as possible (bearing in mind the requirements of pool supervision) leave the poolside and return to the Pool Office/Pay Kiosk and write out a full report / account of the incident with names and addresses of any witnesses in the ***Disciplinary Book***.
- Report the incident to the Pool Supervisor.
- Consider any sanctions, including the right of the Pool Supervisor in conjunction with the Pool Management Committee to issue a written warning, to revoke any memberships, or refuse entry to the pool premises for the remainder of the season.

15. Body Fluids in the Pool

There are four body fluids dealt with in this procedure:

- Blood
- Vomit
- Solid Stool
- Diarrhoea

Note: Whilst dealing with any body fluids always wear the correct Personal Protective Equipment (PPE). All PPE must be cleaned and/or disinfected thoroughly after use.

Because of the health risks involved, a lifeguard or member of staff who sees that there is a pool contamination, must act in an appropriate manner as quickly as possible to restrict the effects of this contamination.

15.1 Blood

Blood releases are the lowest level of contaminant as hypochlorous acid (HClO – forms when chlorine dissolves in water) or chlorine (Cl) rapidly kills off any pathogenic (harmful) bacteria including Hepatitis and HIV.

If the amount of blood released into the pool is a large amount, clear the pool of bathers. Stop further admissions, increase the free chlorine level in the pool to 5.00 ppm or mg/litre, via the dosing unit (see separate procedure in the ***Plant Operating Procedures (POP)*** for adjusting free chlorine level).

Record the time and date of the contamination in the ***Pool Diary*** and the ***Plant Operator Diary***.

Once the free chlorine level is reached and the blood dispersed, the pool should be allowed to return to the normal parameters before re-opening.

Note: max. safe free chlorine of 4.00 ppm and a pH range of 7.2 – 7.6, ideally 7.3

15.2 Vomit

Vomit tends to be undigested foods from swimmers who have recently eaten. It is unsightly and as much as possible needs removing. As with blood, the proper chemical environment will destroy harmful germs.

Upon discovering or seeing someone vomit into the pool remove all bathers from the pool.

On most occasions vomit is introduced by babies or young children. If possible, speak to the customer responsible for the vomit, or any parent or supervising adult, and ask them if they or the child responsible for the vomit has had any gastro-intestinal infection (vomiting bugs or diarrhoea). If they have you must follow the same course of action for Diarrhoea in the pool.

If the amount is large, suspend swimming until the vomit is removed or dispersed and the free chlorine is raised up to 4.00ppm, via the dosing unit.

Using whatever is available, remove as much as possible from the pool. A toilet is the best place to dispose of the contaminant.

Inform all pool staff of the situation.

Record the time and date of the contamination in the ***Pool Office Diary*** and the ***Plant Operator Diary***.

Only return the pool to normal operating parameters when you are completely satisfied that the previous contamination has been dealt with and that it is no longer a health risk to the Staff and customers.

Disinfect whatever equipment was used to remove the contaminant.

15.3 Solid Stool

Solid stools are usually an accident by smaller children and only present a visual hazard, but should still be removed as soon as possible.

If a solid stool is identified the specific area should be vacated. Bathers should be moved to another area of the pool or requested to vacate the water whilst the problem is being attended to. Remove with a pool net and the contaminant disposed of down the toilet.

If the stool is runny, the pool should be cleared of bathers immediately and strongly advise all customers to properly clean themselves in the showers using shampoo and/or soap. If possible, using whatever is available, remove as much as possible from the pool before it disperses and disposed of down the toilet.

Turn the free chlorine to the top of its operating scale (5.00 ppm).

Record the time and date of the contamination in the ***Pool Office Diary*** and the ***Plant Operator Diary***.

Test the water and if the free chlorine and pH levels are within normal parameters, then this is sufficient.

Disinfect whatever equipment was used to remove the contaminant.

Note: max. safe free chlorine of 4.00 ppm and a pH range of 7.2 – 7.6, ideally 7.3

15.4 Diarrhoea

Diarrhoea is caused by a gastro-intestinal infection. The micro-organism which cause diarrhoea are usually killed by hypochlorous acid (free chlorine), however two organisms *Cryptosporidium* and *Giardia* are resistant to chlorine, therefore can only be removed by effective filtration and flocculation/coagulation.

With any diarrhoea release in a swimming you must clear the pool of bathers immediately. Strongly advise all customers to properly clean themselves in the showers using shampoo and/or soap.

The pool must be vacuumed and swept.

Turn the free chlorine to the top of its operating scale (5.00 ppm) and allow the pool to turn over 6 times (using a coagulant). This procedure could take up to 24 hours. Due to the limitations of the dosing system you will have to shock dose the pool. The coagulant is not automatically dosed, this is a manual process. Do not put the pool cover on; this will help any surface removal of any bacteria (if present).

Inform all pool staff of the situation.

Record the time and date of the contamination in the ***Pool Office Diary*** and the ***Plant Operator Diary***.

Regularly test the free chlorine levels of the pool to ensure efficient disinfection are maintained. The corner by the plant room door is the best place to test the water quality, to ascertain the chlorine levels of the pool (it should be at least 4.00ppm). It is unlikely to reach these levels within the first few hours of contamination. The important issue is to ensure good filtration for the period of contamination. Ensure the pool pumps are turned up to maximum.

After the pool water has been turned over 6 times, perform a full backwash on the filters, once the free chlorine is reduced below 4.00 ppm the pool can be re-opened. This includes cleaning out strainer baskets for the pumps.

Only return the pool to normal operating parameters when you are completely satisfied that the previous contamination has been dealt with and that it is no longer a health risk to the Staff and customers.

16. Lack of Water Clarity

It is vital that all lifeguards and staff 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, clear the pool immediately and close the facility
- The member of staff or volunteer responsible for swimming pool maintenance must be informed immediately and their presence on site requested
- A water test will be undertaken and the plant will be checked for correct functioning. If appropriate remedial action can be taken then it should be
- If appropriate remedial action is not possible or is not effective soon enough; the member of staff or volunteer responsible for swimming pool maintenance and staff present must keep the facility closed until the problem has been rectified

- The pool will only be reopened and bathers 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

17. Poolside Blood Spillages

Upon notification or discovery, assess the amount and the location. If necessary, instruct customers to avoid the area.

Blood spillages on poolside can be initially wiped up with cloths. Safely dispose of the contaminated cloths immediately after use. If preferred, using a diluted bleach solution in a mop bucket, use to mop clean the contaminated area.

Use copious amounts of pool water after initial cleaning to disperse any remaining contamination ensuring that the dispersed liquid does not enter the pool.

18. Poolside Chemical Spillage (Minor)

If you discover a chemical spillage, evaluate the situation. If the spillage is small and can be dealt with by staff, the following instruction should be carried out:

- Inform all pool staff of the situation.
- Try and ascertain what chemical it is and where it has come from.
- Once you have identified the chemical take the appropriate action – see the appropriate COSHH sheet.
- Collect and wear relevant PPE for the hazard:
 - Wellington Boot
 - Overalls/Apron
 - Gloves
 - Face Mask
 - Gas Mask
- Isolate the source to prevent escalation of the problem.
- Proceed with the clean up where appropriate.

Liquid	Powder
1. Sprinkle on absorbent granules and allow them to soak up the spillage.	1. Brush up the powder and using a shovel place into supplied bags.
2. Shovel granules up and place in supplied bags.	2. Attach a copy of the COSHH sheet of the chemical to the bags.
3. Attach a copy of the COSHH sheet of the chemical to the bag.	

Note: Copies of the COSHH sheets can be found in the Pool Office/Pay Kiosk.

Any remaining residue should be washed down with a hose pipe.

Note: All pool chemicals can be safely washed into the sump with copious amounts of water without any adverse effects.

Store the sealed bags in a convenient location ensuring they are completely away from any other chemicals.

If necessary, contact specialist chemical dumping contractors to remove the waste bags.

Note: As a result of the separation (acids and alkaline are kept in different physical locations) of chemicals onsite it is highly unlikely that a minor spill will create any chance of a cross contamination which may lead to the generation of Chlorine Gas.

19. Poolside Chemical Spillage (Major)

Major spillages are usually confined to Hypochlorite or Polyaluminium Chloride as these are pumped through feed lines via the plant room into the pool water system. Major spills are usually caused by the splitting of one of these lines or by the breakdown of an injection point. It is usually apparent straight away exactly what the spill is. Bad handling of chemical bags, which if dropped can split releasing the contents, usually causes major powder spillages. However the bags are constructed from strong paper with a plastic liner to prevent accidental spilling.

Note: If there is a likelihood that the chemical may mix with another chemical which could generate chlorine gas then evacuate the pool. Use the absorbent granules to prevent this happening if possible.

If you discover a chemical spillage, evaluate the situation. If the spillage is major but there is something that can be dealt with by staff, the following instruction should be carried out:

- Inform all pool staff of the situation.
- Try and ascertain what chemical it is and where it has come from.
- Once you have identified the chemical take the appropriate action – see the appropriate COSHH sheet.
- Collect and wear relevant PPE for the hazard:
 - Wellington Boot
 - Overalls/Apron
 - Gloves
 - Face Mask
 - Gas Mask
- Return to the spillage and try to isolate the cause to prevent further escape of the chemical (i.e. turn off supply pumps).
- If it is a liquid use the absorbent granules as a barrier to prevent the chemical spreading. Then pour on more to start soaking up the chemical.
- If you can contain the spillage, secure the area to allow the absorbent granules to soak up all the spillage.
- If the chemical has been soaked up shovel up all the granules and place in the supplied bags until collection is secured. Attach a copy of the COSHH sheet of the chemical to the bags.
- If you are satisfied that all the spillage has been cleared up hose down the area with copious amounts of water to neutralise any residue
- Contact the relevant chemical disposal company

Note: If the spillage enters the filter area in a large quantity, Yorkshire Water and the Environment Agency must be contacted immediately to alert them. If spillage enters the filter area in a large quantity then use the hose to try and dilute the spillage in the main drain by leaving it turned on in the filter area.

Note: If for whatever reason there is a requirement to empty large quantities of water from the pool then staff must contact Yorkshire Water to advise them that a large quantity of chlorinated water is being discharged. This does not include Backwash water.

20. Suspicious Package

For the majority of its time the pool opens for relatively short session with the longest being 2½ hours. At the start and end of each Public Swim session, staff inspect the changing facilities and the general pool area to ensure that there is nothing out of the ordinary. This reduces the likelihood that any item would be left lying around for a period of time.

However, there may be an occasion when a customer leaves an item(s) lying around. In the vast majority of cases this will be nothing more than an item or a bag that a customer has forgotten. In this case, take the item to the Pool Office/Pay Kiosk where the pool staff can investigate/assess the item and log any lost property in the Lost Property Log (LPL).

If a member of staff does suspect that there is a suspicious package and that it is not an innocent item then they must follow the Pool Evacuation process as detailed below and the Bomb Threat process from **Step 2** onwards.

21. Bomb Threat

If the pool has to be evacuated then follow the Pool Evacuation process detailed above.

If the threat is serious then evacuate the pool immediately regardless of any timescale for an explosion that the caller may have given.

Bomb Threat Procedure

Step	Action
1	<p>If you receive a bomb threat, treat it as genuine no matter how convincing or unconvincing the caller sounds.</p> <p>Listen and write:</p> <ul style="list-style-type: none">• Make a note of the code name if any is used• Write down the phone number if visible• Make a note of any accent• Write down exactly what is said including details of the device, time of expected explosion etc• Listen out for any noise in the background• Ask where the device is, when it will go off, where it is, did they plant it, why did they plant it etc
2	<p>Notify all staff immediately.</p>
3	<p>Contact the Emergency Services (999) immediately and be advised. Follow any instructions given.</p>
4	<p>If there are any concerns about public safety, evacuate the pool with the help of all available staff.</p> <p>Take the landline handset with you when you leave.</p> <p>Decide whether to secure the premises when you leave.</p>
5	<p>At the earliest opportunity, inform the Swimming Pool Chairman (Paul Weaire: 07956 09 10 19).</p> <p>If he is not available then contact any other member of the Management or Club Committees.</p>