

Northampton Leisure Trust

Cripps Recreation Centre

EMERGENCY ACTION PLAN



Section 1 – Dryside

Section 2 - Wetside

NLT 5.1b Emergency Action Plan Cripps Issue 1

Index

Section 1 - Dryside

1.0 Introduction	4
1.1 Training & Competency	4
Section A – to be trained to all staff	4
2.0 Responsibilities	4
3.0 Centre: Introduction & Background Information	5
4.0 People with Special Needs (PEEPs & GEEPs)	6
5.0 Fire and Evacuation - what you should do if you discover a fire	6
5.1 Fire Fighting Equipment	7
5.2 Manager on duty specific responsibilities	7
5.3 General staff specific responsibilities:	7
5.5 Admin & Customer Service Advisors specific responsibilities	8
5.6	8
5.7 Gym staff specific responsibilities:	8
5.8 Maintenance Staff specific responsibilities:	8
5.9 Fitness specific responsibilities:	8
5.10 Evacuation zones:	9
5.11 Restrictions and high risk areas:	9
5.12 Re-admission following emergency evacuation	9
5.13 Where readmission is not possible following emergency evacuation	9
5.14 Fire Alarm system out of service	10
6.0 Power & Lighting Failure	11
6.1 Manager on duty responsibilities	12
6.2 Staff Members' responsibilities:	12
6.3 :	12
6.4 Power failure to pool circulation pumps and dosing units	12
6.5 Passenger lift alarm during a power failure	12
6.6 Water and Gas Supply Failure	12
7.0 Flood, Storm or Structural Damage	13
	13
8.0 Emission of Toxic Gas	13
9.0 Emission of Gas	13
10.0 Personal Threats (Violence to Team Members)	15
11.0 Disorderly Behaviour	15
12.0 Robbery	16
13.0 Bomb Threat	16
13.1	16
13.2 Manager on duty specific responsibilities:	16
14.0 Act of Terrorism	17
14.1 Suspicious Behaviour/Possible Terrorist Activity	17
14.2 Terrorist Attack	18
15.0 Suspicious Mail or Packages	18
15.1 Receiving Suspicious Package	18
15.2 Discovery of a Suspicious Package/Device	19
16.0 Medical Emergencies	20
17.0 Missing or Found Child / Persons	19
18.0 Discovery of a Body/Fatality	21
19.0 Indecency	21
20.0 Dealing with Blood or Vomit Spillages	22
20.1 Dealing with Sharps / Needlestick Injuries	22

NLT 5.1b Emergency Action Plan Cripps Issue 1

SECTION B – to be trained to staff operating buildings (manager on duty)	23
21.0 Overcrowding	23
22.0 Reported Case of Legionella	23
23.0 Outbreak of Zoonotic Disease/s (i.e. E.coli)	24
24.0 Asbestos Fibres	24
25.0 Passenger Lift Failure	25
26.0 Out of Hours – Fire and Evacuation	25
27.0 Reporting & Review Process following an Emergency Incident	25

Section 2 - Westside

POOL EMERGENCY ACTION PLAN	25
1.0 Introduction	25
2.0 Minor Emergencies	25
3.0 Major Emergencies	25
4.0 Chemical Spill	26
5.0 Serious Injury to a Swimmer	26
6.0 Disabled User Evacuation	26
7.0 Aquatic Spinal Cord Injury Management	28
8.0 Secondary Drowning	27
8.0 Overcrowding	27
9.0	29
10.0 Lack of Water Clarity	29
11.0 Lighting Failure	30
12.0 Dealing with Blood, Vomit and Faecal Fouling	29
12.1 Blood and Vomit	30
12.2 Faecal Fouling	31
12.3 Solid Stools	32
12.4 Stools Which Break Up	32
12.5 Diarrhoea or Liquid Stool	32
13.0 Dealing with Broken Glass in the Pool	32

NLT 5.1b Emergency Action Plan Cripps Issue 1

Section 1 Dryside

1.0 Introduction

This procedure is in two sections:

Section A must be trained to ALL staff

Section B must be trained in addition to staff acting as 'manager on duty (MoD)

The Fitness Supervisor is deemed to be the MoD. In the event of the Fitness Supervisor being casual or a cover person from another centre, the Multi-Rec will be deemed the MoD

1.1 Training and Competency

All staff are to receive frequent training in the Emergency Action Plan, at least once every year. The training should focus on all areas of the Emergency Action Plan to ensure staff are aware of all possible eventualities.

Following training some form of competency assessment should be undertaken to confirm learning and understanding – i.e. quiz, task observation etc.

Other employers / non-NLT staff based on site should be included in appropriate training on the relevant sections within the EAP and be provided with an up to date copy.

Section A – to be trained to all staff

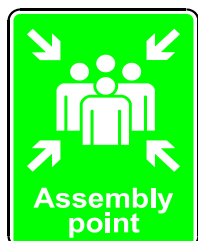
2.0 Responsibilities

It is the responsibility of the Northampton Leisure Trust (NLT) to ensure that emergency situations are dealt with in a manner which minimises the risk to customers and Staff.

It is the responsibility of the MoD, to make arrangements to deal with an event of serious or imminent danger to persons.

The main role and responsibilities of the MoD during a major emergency is to maintain essential services in order to respond promptly and efficiently to emergencies

It is the responsibility of all Staff Members to be aware of their key responsibilities.

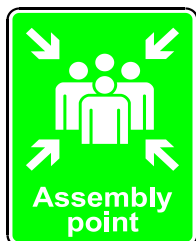


FIRE AND EVACUATION ASSEMBLY POINT LOCATION:

**At the front of the building on the grass – near the porta cabin
Pool users will use the rear car park**

NLT 5.1b Emergency Action Plan Cripps Issue 1

In the event smoke is being blown in the direction of the main assembly point, or the situation changes indicating a safer location is required, members of the public will be directed to the alternative location by the MoD.



FIRE AND EVACUATION ALTERNATIVE ASSEMBLY POINT LOCATION:

By Entrance barrier to Car Park Area J

3.0 Centre: Introduction & Background Information

The Centre consists of the following facilities and buildings:

- **Ground floor:** -
 - Main entrance and corridors
 - 3 x studios
 - Main gym with two additional rooms on higher levels
 - Calming gym
 - Function hall cellar
 - [Old] function Hall toilets
 - Kitchen
- **Basement:** -
 - Male changing room
 - Female changing room
 - Swimming pool
 - Plant room
 - [Old] gym female changing room
 - [Old] gym reception area
- **Lower basement**
 - [Old] health suite
- **First floor:** -
 - Stanley Hill toilets (male & female)
 - Church room
 - Snooker room
 - Stanley Hill function room
 - Cellar
 - [Old] Lounge Bar
 - Kitchen
 - Board room
 - Manager's office
 - Cleaning store
 - Function Hall

The Centre can accommodate **<Insert number of people here>**. There are a minimum of two staff working at the Centre.

NLT 5.1b Emergency Action Plan Cripps Issue 1

There are a number of fire extinguishers and fire points located around the centre and an Emergency Grab Bag is located at Central Hub, this includes:

- First Aid Box
- High Visibility Jacket(s)
- Torch(es)
- Space blankets
- Accident / Incident Forms
- Site plan showing utility cut off points
- Manager on duty Evacuation Cards check sheet
- COSHH Assessments of high risk chemicals
- Asbestos Register
- Serious Incident Management Plan (SIMP)
 - Phone & contact numbers
 - Relevant Forms

A plan of the building showing fire exit routes, location of fire extinguishers and emergency lighting is located within the Fire Log Book.

NLT 5.1b Emergency Action Plan Cripps Issue 1

4.0 People with Special Needs (PEEPs)

It is the responsibility of NLT to ensure the safe evacuation of all people with special needs. Where people with special needs use or work in the premises, their needs should be discussed with them. Following discussions, the following may be required:

- Changes to existing EAP
- Development of individual Personal Emergency Evacuation Plans (PEEPs) for disabled customers who frequently use the facility and disabled Staff

5.0 Fire and Evacuation - what you should do if you discover a fire

The fire alarm at Cripps is controlled and can only be accessed by Northampton General Hospital (NGH) staff. There is no requirement to investigate fires, all that is required is to evacuate the building.

- Activate the alarm by breaking a call point

In the event of the fire alarm being activated, all staff must:

- Warn the public (customers, visitors, contractors) in the immediate vicinity
- Report to the Fire Marshal at the Central Hub and wait instruction e.g. be issued with zone cards for areas of the building to evacuate / check
- Use the evacuation cards to evacuate the zone/s in which they have been issued with
- Escort the public from the centre to the Assembly Point
- Not allow members of the public to collect personal items other than the minimum required to preserve decency for example: towel, robe etc.
- If showering, changing or in the pool area, members of the public must not be allowed to return to the changing areas
- If anyone refuses to leave they must be asked to leave, then told to leave and then told they are being left and that this will be reported to the Fire Brigade on their arrival.
- If possible close all fire doors in the area of work
- Not re-enter the centre/ facilities until instructed by the Fire Service after the evacuation is complete and the emergency is over.
- Hand the Evacuation Zone Card to the Fire Marshal and be available to assist with other tasks which may be necessary e.g. meeting emergency services at the barrier etc.

5.1 Fire Fighting Equipment

Staff should be trained in the use of a fire blanket which can be used to extinguish microwave fires.

Fire extinguishers should only be used by specifically trained personnel or if the member of staff's own exit route is blocked by fire.

5.2 Fire Marshal's (i.e. the MoD) specific responsibilities:

- Upon the activation of the alarm, go to the Central Hub to issue zone cards between yourself and other members of staff if safe to do so
- Direct staff to carry out evacuation of the centre using zone cards
- Proceed to the assembly point and check that all staff are present
- Check that all staff and customers are calm and aware of the situation
- Mark up a master Centre plan showing all returned evacuation zones (at the assembly point)
- Upon the arrival of the fire service, report the following to the lead fire officer:

NLT 5.1b Emergency Action Plan Cripps Issue 1

- all zones cleared or all zones not cleared
- report any known persons not at the assembly point
- Issue further instructions if required
- The MoD may amend the format of proceedings at any stage should circumstances deem it necessary; all staff will be fully informed if this occurs

If someone is suspected to still be in the centre DO NOT attempt to re-enter the Centre but give full details of their suspected whereabouts to the fire service.

In the event of there not being fire: -

- Advise staff of the situation
- Ensure public have been advised to return to activities
- Proceed to the assembly point and check that all staff are present
- Ensure members and staff in rear car park have been advised

5.3 General staffs' responsibilities:

- Report to the Fire Marshal

5.6 Function / Bar Staff specific responsibilities:

- Switch off all electrical
- Lock till and remove keys

5.8 Maintenance staff

- Turn off any tools or equipment being used

5.10 Evacuation Zones

Cripps has been zoned into <Insert number of zones here> Evacuation Zones to ensure efficient evacuation. Evacuation Zone cards are as follows:

- Zone 1: <Insert zone here>
- Zone 2: <Insert zone here>
- Zone 3: <Insert zone here>
- Zone 4: <Insert zone here>
- Zone 5: <Insert zone here>
- Zone 6: <Insert zone here>
- Zone 7: <Insert zone here>
- Zone 8: <Insert zone here>
- Zone 9: <Insert zone here>
- Zone 10: <Insert zone here>
- Zone 11: <Insert zone here>
- Zone 12: <Insert zone here>

5.11 Restrictions and High Risk Areas

In the event of a fire, the following restrictions will apply:

- Lifts must not be used

5.12 Re-admission following Emergency Evacuation

- No person may be re-admitted until the Fire Marshal has been advised by the Fire Service and / or Police that it is safe to do so

NLT 5.1b Emergency Action Plan Cripps Issue 1

- On receiving confirmation from the relevant authority, the Fire Marshal will inform staff to begin the re-admission procedure by informing members of the public that they may re-enter the building to either resume their activity or collect their clothing / belongings and leave as appropriate
- A member of staff should be deployed to collect space blankets once customers no longer require them
- Inform Senior Managers as per the Serious Incident Procedure

5.13 Where Re-admission is not possible following Emergency Evacuation

- Once it has been established that re-admission will not be possible, the Fire Marshal will liaise with the emergency services and follow their instructions at all times
- Inform Senior Managers as per the Serious Incident Procedure
- Afford all possible assistance to enable people to leave the site and return safely home, this may include:
 - Arranging suitable transport and supervision of unaccompanied children
 - Not allowing children under the age of 14 years to leave the site unless the MoD is entirely confident of their safety
 - Consideration given to any person lacking adequate clothing
 - Consideration given to any disabled persons
 - Giving the telephone number listed below to members of the public who have lost clothing or personal belongings, and request that they phone in to check on arrangements for claiming back their belongings.

Tel No: 01604 838333

- In some cases, neither re-admission nor departure from the venue will be possible. Therefore members of the public will be taken to the location below whilst suitable arrangements for them are made:

NGH Cripps Building (or other building not affected nearby)

5.14 Alarm system out of service

It is essential that all occupants of a building can quickly be alerted should a fire occur, and that all occupants can evacuate the building effectively. Any delay in building users being alerted to a fire (e.g. fire alarm failure) could lead to the escape from a building taking longer and a risk of serious injury or death.

NGH operate and maintain the fire alarm.

A building's alarm system may be out of service for a range of reasons including planned maintenance or faults/failures.

In the event of an alarm failure contact NGH, who will send notices to be displayed at key points to ensure all are aware:

- Contact NGH on 01604 544000 as a matter of urgency
- Notify the MoD, Area Manager, John Howard
- The Area Manager will be responsible for making the decision on closure/occupancy of the alarm being out of service:

NLT 5.1b Emergency Action Plan Cripps Issue 1

Possible options include:

- a. Complete closure of the building to all occupants until it can be safely re-occupied
- b. Partial use or occupancy of the building with restrictions in place to limit use of certain areas or activities
- c. Keep the building in full use with appropriate precautions in place to ensure risks to building occupants are adequately controlled

If partial or full use of the building is chosen then the full range of circumstances affecting the building must be taken into consideration. These include:

- The extent and nature of the alarm system failure e.g. total failure, a particular area of the building, call point failure or detector failure
- How long it will take to restore the system to full operation
- What other suitable methods of detecting fire and raising the alarm are available
- Will evacuation in the event of a fire being discovered be effective
- The building's use and the activities carried out within the building, examples of which are:
 - a. Use of naked flames
 - b. Use as sleeping accommodation
 - c. Activities involving chemical reactions
 - d. Public event
 - e. Building opening hours
 - f. Noisy activities which could prevent building users being aware of the need to evacuate
- The number of people at risk in the building, this may include staff, customers, visitors, contractors, or event attendees. Lone working should also be considered.
- Individual's capabilities, for example building users with disabilities
- The size and complexity of the building, whether it is single or multi-storey and if it has a large and complex layout

Control measures to be implemented

To make a building safe whilst the fire alarm is out of service the following measures may need to be taken.

- **Fire search inspections of the affected area** at an appropriate frequency throughout the duration of the fire alarm failure, covering the whole of the affected area but in particular unoccupied areas and higher risk areas.
 - a. More than one search team may be required depending on the size/complexity of the building and the length of time taken to complete the search
 - b. Cover may need to be provided for individuals involved in the search to take rest breaks
 - c. Security may be able to provide assistance out of hours
 - d. Search teams must be equipped with a suitable means of raising the alarm or attracting people's attention e.g. whistles, bells, 2-way radios, klaxons or air horns
 - e. Individuals carrying out the inspections should be trained in using fire extinguishers
 - f. Keys may be required to gain entry to some areas or rooms
- **Make building users aware of the issues and temporary procedures**, this will include providing information on what to do if a fire is discovered, how to raise the alarm and the restrictions that are in place and warning notices around the building.

NLT 5.1b Emergency Action Plan Cripps Issue 1

- **Suspend non-essential activities likely to lead to a fire developing** until the alarm system is restored. Examples of this could be to suspend the use of a naked flame that may lead to a fire starting. The activity must be individually risk assessed and only allowed to continue if suitable additional controls are in place.
- **Restrict public access** during the failure.
- **Lone working**, especially out of hours or overnight must be reviewed and only permitted if absolutely necessary and if suitable control measures are put in place.
- **All non-essential electrical items** should be turned off when not in use.

6.0 Power, Lighting, Gas & Water Supplies Failure

- Should the lights fail; the emergency lighting will come on automatically
- The MoD must be notified in case they are unaware of the power or lighting failure
- Further admissions shall be stopped at Reception
- If the lighting failure is prolonged and on the MOD's instruction, customers will be organised into groups and led into the changing rooms to change
- The arrangements will alter depending on the availability of natural light and emergency lighting
-

NLT 5.1b Emergency Action Plan Cripps Issue 1

6.1 MoD responsibilities

- The Manager on duty will then contact NGH to ascertain the approximate time scales for reconnection
- If after contacting NGH they are advised that power will be down for longer than a couple of hours the MoD will contact the Assistant or Area Manager who will assess the situation and advise on what action to take

6.2 Staff Members' responsibilities:

- Customers need to be asked to wait in **an adequately lit area** until further information concerning the situation is available

6.3 Site Team's responsibilities:

- Ensure that the pool is cleared immediately
- Customers asked to wait on the poolside away from the pool edges until further information concerning the situation is available

6.4 Power failure to pool circulation pumps and dosing units

In the event of power failure to the pool circulation pumps and dosing units, the MoD will:

- Monitor the pool chemical readings
- Close the pool if the readings fall outside of recommended parameters
- Turn off the dosing equipment to prevent any risk of dosing commencing without circulation pumps starting resulting in potential dangerous build-up of concentrated chemicals in pool water within the pipework
- Carry out pool water test when power is restored and prior to allowing bathers back into the pool

6.5 Passenger lift alarm during a power failure

During a power failure, the passenger lift alarm may not sound. The Fire Marshal is responsible for checking if anyone is trapped within the lift car.

6.6 Water Supply Failure

Contact for Water is: - Anglian Water – Tel: 03457 145 145

NLT 5.1b Emergency Action Plan Cripps Issue 1

7.0 Flood, Storm or Structural Damage

- Upon a structural failure or flood, or if danger is suspected from any location structure, the MoD is notified who will assess the seriousness of the situation and make the surrounding areas safe. If necessary, an exclusion zone will implemented
- The MoD will contact the appropriate Emergency Services and / or NGH if deemed necessary
- Customers will be evacuated from any affected building or location and moved to a safe area

8.0 Emission of Toxic Gas

- If there is an emission from chemicals mixing, the immediate area shall be evacuated with haste, closing doors if possible to prevent the gases escaping to other areas
- The MoD must be informed of the situation immediately
- Any person who has been affected by the toxic gas must be taken to hospital as serious symptoms may develop at a later stage and appropriate first aid should be given
- If evacuation of the area is deemed necessary:
 - The fire and evacuation alarm must be activated
 - Customers and Staff Members must be lead away from the danger area via the Fire Exits
 - Do not allow any person to re-enter the premises or affected area until instructed by the MoD and only after the evacuation is complete and the emergency is over
 - Do not move people down-wind of the chemicals
 - The MoD must complete an Incident Report Form
 - The emission is reportable to the Health and Safety Executive under RIDDOR.

10.0 Personal Threats (Violence to Team Members)

- In the event of a personal threat, the Staff Member must:
 - Keep calm and do not argue
 - Keep reactions and hand movements to a minimum
 - Summon assistance if possible
 - Comply with any demands, make it clear you will co-operate
 - Keep a clear distance between yourself and the assailant
 - Try to stand side on to the assailant
 - Provide opportunities for the assailant to back down without losing face
 - Recognise if the situation is worsening and attempt to slowly back away
 - Try to remember as much as possible about the assailant.
- The Staff Member must not:
 - Be hostile, aggressive or patronising
 - Take abuse personally
 - Lose their temper
 - Not take any personal risks.
- The MoD must be alerted immediately after the assailant has left and contact the Police
- The Staff Member who is the victim must:
 - Be taken out of the customer's view straight away
 - Be offered immediate support, it may be necessary to send the Staff Member home
 - First Aid treatment may need to be administered

NLT 5.1b Emergency Action Plan Cripps Issue 1

- The Staff Member must not be left alone
- It is important to listen to the victim and not to ask any questions until the arrival of the police.
- Formal counselling for the Staff Member may be necessary
- The MoD must complete an Incident Report Form.
- Violence to Team Members is reportable to the Health and Safety Executive under RIDDOR if injury is caused

11.0 Disorderly Behaviour

- Any behaviour, which is likely to cause a nuisance or is dangerous to other customers, shall be stopped immediately
- Customers must be spoken to in an assertive manner indicating reasons why the behaviour is inappropriate:
- If the behaviour persists, further warnings must be given
- Arguments must be avoided
- If the warnings have no effect, or if the behaviour becomes serious, the MoD must be called to assess the situation and ask the offender to leave, if deemed necessary
- Continuation of the offence could lead to the MoD calling the Police
- The MoD must complete an Incident Report Form
- Violence to Team Members is reportable to the Health and Safety Executive under RIDDOR if injury is caused

NLT 5.1b Emergency Action Plan Cripps Issue 1

12.0 Robbery

If a robber demands money at the Centre and / or brandishes a weapon, the Staff Member shall:

- Keep calm and do not argue
- Keep reactions and hand movements to a minimum
- Summon assistance if possible
- Comply with any demands, make it clear you will co-operate
- Give the robber the cash
- Keep a clear distance between yourself and the robber
- Try to stand side on to the robber
- Do not take personal risks
- Try to remember as much as possible about the robber
- When the robber has left, the MoD shall be alerted.
- The MoD shall contact the Police
- Other Staff Members may inadvertently approach during the robbery. If this occurs, Staff Members must:
 - Be careful
 - Move slowly
 - Not startle the thief
 - Not take personal risks
 - Co-operate
- A reconciliation of income shall be carried out to ascertain the amount of money taken
- The Staff Members involved in the robbery shall (if necessary) be relieved from duty and dependent upon the situation, the Staff Member may need to be sent home to recover and/or be provided with Post Incident Support
- Notify Senior Managers as per the Serious Incident Procedure
- The MoD must complete an Incident Report Form and if anyone was injured report under RIDDOR to the HSE

13.0 Bomb Threat

Upon receiving a bomb warning, Staff Members must:

- Remain calm and do not panic
- Obtain as much information as possible and record this on an incident form
- Be friendly
- Inform the MoD / Fire Marshal immediately
- Under no circumstances circulate the warning on social media

13.1 Staff's specific responsibilities:

- Upon a telephone warning stating that a bomb is in a location, ascertain as much of the following information as possible:
 - Listen to the caller, do not interrupt
 - Write down the warning
 - Find out what time it will explode
 - Where it is located
 - What type of device is it
 - Note the tone of voice, accent and gender of the caller
 - Estimate the age of the caller, young or old

NLT 5.1b Emergency Action Plan Cripps Issue 1

- Any background noises that might identify the location of the caller/phone box etc.
- Inform the Fire Marshal – DO NOT use the radio

Upon instruction from the Manager on duty call the police by dialling 999, and giving the location's address and telephone number.

In the event of a bomb threat DO NOT use the radio or mobile phone for any reason.

13.2 MoD specific responsibilities:

- The MoD must advise staff of the situation and evacuate the building – DO NOT use the radio or mobile phone
- Instruct all Staff Members to:
 - Turn off their radios
 - Not to use mobile phones
 - Evacuate the location in accordance with the location's Fire and Evacuation procedure or follow instructions as advised by the Police
 - Direct the customers to leave the location by a route avoiding the suspect package / area
- Designate an alternative Assembly Point if the original location is near to the reported bomb
- Advise NGH urgently as the building is shared
- Prevent persons re-entering the location until given the all clear by the Police

14.0 Act of Terrorism

14.1 Suspicious Behaviour/Possible Terrorist Activity

All staff know their work areas or offices very well and staff should be alert to:

- unusual behaviour
- items out of place, for example: unusual packages, bags or other items in odd places
- carefully placed (rather than dropped) items in rubbish bins
- photography of security arrangements i.e. CCTV camera positions
- people showing unusual interest in sensitive, important or less accessible areas.

If staff see or hear anything that could be terrorist-related immediate report to the MoD who will call the Anti-Terrorist Hotline on **0800 789 321**.

The MoD will follow the Serious Incident Management Procedure at the earliest opportunity.

NLT 5.1b Emergency Action Plan Cripps Issue 1

14.2 Terrorist Attack

Terrorist attacks are very rare but staff should be prepared. Actions recommended by the National Police Chiefs' Council should be followed: When the police arrive they will be armed. The police may be unable to distinguish you from the attacker. They may treat you firmly, do everything they tell you to do. Do not make any sudden movements or gestures that may be perceived as a threat.

After the threat is over the MoD will follow the Serious Incident Management Procedure at the earliest opportunity and be guided by the police.

15.0 Suspicious Mail or Packages

15.1 Receiving suspicious packages

The probability of receiving a dangerous envelope or package is extremely remote. However the following characteristics could raise concerns:

- External packages / envelopes with excessive postage
- Hand-written or poorly typed addresses
- Incorrect titles
- Mis-spellings
- Oil stains

What makes it a Suspicious Package?



RUN



Run to a place of safety. This is a far better option than to surrender or negotiate. If there's nowhere to go, then...

HIDE



It's better to hide than to confront. Remember to turn your phone to silent and turn off vibrate. Barricade yourself in if you can. Then finally and only when it is safe to do so...

TELL



Tell the police by calling 999.

- Discoloration or odour (smell like marzipan or machine oil)
- Excessive use of security material such as parcel tape or sticky tape
- Lopsided, overweight envelopes or those marked personal or confidential should also be carefully treated.

How to handle suspicious packages:

- In all cases of opening envelopes / parcels, as a matter of good practice, a paper knife or package knife should be used as this creates least disturbance of the contents

NLT 5.1b Emergency Action Plan Cripps Issue 1

- Envelopes should be opened slit uppermost and the contents not tipped or shaken out
- If suspicious about the contents of an unopened envelope, place it in a plastic bag or cover it with anything to hand (clothing, paper, a wastebasket or anything else suitable to this task).

Isolate and inform:

- Do not move it or remove the covering
- Leave the room and close the door
- Avoid touching eyes
- Wash hands with soap and water and inform the MoD
- Do not allow anyone to enter the room until police advice has been sought
- Inform the MoD of the situation

Other precautions:

- Note the names (and if necessary contact details) of any other person who may have come into contact with the envelope / package or its contents.

15.2 Discovery of a Suspicious Package/Device

Should any member of staff discover a suspicious item:

- Do not touch it
- Move everyone away to a safe distance
- Staff are to prevent others from approaching the area
- Instruct all staff to evacuate everyone to a safe area away from the device's location out of the line of sight and behind hard cover
- Direct staff and members of the public to an alternative Assembly Point if the original Assembly Point locations are near to the reported suspicious item, via a route avoiding the suspect package / area
- Use hand-held radios or mobile phones away from the immediate vicinity of a suspect item, remaining out of line of sight and behind hard cover
- Notify the police immediately
- Ensure that whoever found the item or witnessed the incident remains on hand to brief the police
- No persons shall be allowed to re-enter the affected area until given the all clear by the Police
- At the earliest possible time after the incident, the MoD must complete an Incident Report Form.

NLT 5.1b Emergency Action Plan Cripps Issue 1

16.0 Medical Emergencies

If a member of the public requests attention for a 'minor' first aid issue, which may include but are not exclusive to, cuts and bruises, potential fractures, minor burns/scalds, the Duty First Aider must be informed.

After treatment an Accident Form must be completed.

If a 'major' medical emergency occurs then immediate first aid will be given by a First Aider to prevent further injury, or to assist the preservation of life.

The MoD will instruct a staff member to:

- Call the relevant emergency service by dialling 999 and inform them of the nature of the emergency
- Inform the emergency service which entrance to the premises they should arrive at and closest to the incident
- Collect the Automated External Defibrillator (AED) from the Central Hub

The MoD will then inform the relevant Senior Manager at the earliest opportunity.

17.0 Missing or Found Child / Persons

People who become lost fall into the following categories:

- Young Children
- The elderly
- The mentally impaired /physically disabled
- New visitors not acquainted to layout of the Centre.

The above will be 'reported' lost in two ways:

- The person 'lost' reporting directly to a staff member
- Someone reporting they have lost someone to a staff member.

Anyone reporting themselves 'lost' will be dealt with as follows:

- If not already at the Central Hub, take the child/ person there.
- Try to get from them the name(s) of the person/s they have been separated from, and which facility they are using.
- The Staff Member will then make an attempt to contact associate, either directly or via a third party
- Stay with and reassure the person until collected
- Do not put yourself in a position where you are in a private room with a child on your own
- If not collected within 5 minutes, repeat above procedure.
- If after half an hour parents / carers have not been located or contact been made, call the police on 111 and report. Complete an incident form.

Do not refer to children specifically or give personal details, descriptions or names.

The parent or guardian's signature and proof of identify must be obtained. A second opinion must be sought from the police if in any doubt or:

- If a child is reluctant to go with the collecting adult
- A family member other than the parent/guardian arrives to collect the child
- A neighbour or friend arrives to collect the child

NLT 5.1b Emergency Action Plan Cripps Issue 1

18.0 Discovery of a Body/Fatality

Following the discovery of a body:

- Ascertain any first aid needs
- Contact the MoD or activate emergency response pool alarm – if in the pool hall
- Move any persons in the vicinity away
- Maintain the integrity of the area for a police investigation

The MoD will:

- Contact Emergency Services
- Ensure emergency response and first aid procedures are implemented
- Arrange for the emergency services to be directed to point of entry and liaise with paramedics/police
- Prevent further access to the immediate area until the casualty has been taken from the area
- Note time of incident
- Notify the initial contact set out in the SIMP (see contact sequence flowchart)
- Notify Staff they must not speak or communicate with the media or anyone else (including posts on social media) about the incident
- Complete incident investigation to identify cause and prevent reoccurrence
- Liaise with the Coroners Officer as directed by the Police if required

19.0 Indecency

Should any staff member become aware that any type of indecent behaviour has occurred within the Location the matter should be treated seriously and dealt with as follows:

- Ask the complainant to accompany you into the office in a calm reassuring manner and contact the MoD immediately
- Before obtaining any further details of the incident, ask the complainant who they wish to speak to, for example a male or female staff member
- That staff member should try to obtain a brief description of what has occurred and where possible details or description of the persons responsible
- Ask the complainant if they wish the police to be informed and if so dial 999 immediately
- If possible the MoD should search the building/facilities and try to find the person responsible
- If the MoD suspects the person responsible is still in the location they must observe, but not approach, the person concerned until the police arrive
- Report the details to the police and allow them to take charge of the incident
- Complete an Incident Report Form.

NLT 5.1b Emergency Action Plan Cripps Issue 1

20.0 Dealing with Blood or Vomit Spillages

For all spillages – WEAR FIRST AID LATEX GLOVES

Firstly isolate the area, then using the powder in the 'Body Fluid Spill Kit' cover the affected area and sweep up the congealed mass into a dustpan.

If staff become in contact with blood or urine:

- Affected staff are to be removed from duty immediately
- Staff are encouraged to shower/wash and change their uniform if they come into contact with the spillage
- The contaminated uniform is then to be bagged ready to be washed on a hot wash or safely disposed of depending on the extent of contact
- Staff are also encouraged to book a GP appointment for advice.

20.1 Dealing with Sharps / Needlestick Injuries

A needlestick injury is a skin puncture caused by contaminated needle; 'sharps' are any sharp edged instruments, broken glassware, or any other item which may be contaminated in use by blood or body fluids and which may cause laceration or puncture wounds.

Any member of staff finding a used hypodermic syringe or razor blade must ensure that it is disposed of in the following manner:

- Take the yellow Sharps box located in the pool office, protective gloves and pincers/tongs to the location of the syringe or razor blade
- Wear protective gloves from the First Aid box, carefully pick up the syringe or razor blade with pincers/tongs
- Place in a yellow Sharps box and return the box to the pool office. If the yellow box is becoming full the MoD shall arrange for the box to be exchanged for a new one
- If you cut or prick yourself on something which may be contaminated with someone else's blood, **seek medical advice immediately**
- Refer to the First Aid procedure in the Health & Safety Manual
- Complete an Incident /Accident Report Form

NLT 5.1b Emergency Action Plan Cripps Issue 1

SECTION B –

to be trained to anyone who acts as 'Manager on duty' (MoD)

21.0 Overcrowding

All areas of the Centre have specific maximum attendances as required by the Fire Risk Assessment. It is the duty of all Staff members to inform the MoD of any potential breaches of these maximum figures.

In the event of such situations arising, the MoD must assess the risk of the potential overcrowding and instruct staff members in accordance with their decision.

If the maximum occupancy for an area has been reached the MoD will instruct staff members to allow no more admissions to that facility area, and if necessary ask an appropriate number of attendees to leave the particular area in order to maintain fire limits. Normally this will involve politely asking those who have been using the facilities the longest to leave.

Maximum Occupancy:

Area	Maximum Occupancy	Additional Comments
Studios		all three
Gym		including calming gym
Swimming pool		
Function Hall		
Stanley Hill		
Board Room		
Lounge Bar		
Offices		

22.0 Reported Case of Legionella

Action by MoD

- Note time the Incident was reported by Environmental Health Officer (EHO)/ Health Protection Agency (HPA) or the testing company.
- Comply with Local Authority Environmental Health Department or HPA demands. Make a list of EHO /HPA or testing company recommended improvements/ actions.
- Confirm with EHO /HPA whether Location/area operation can continue in the interim.
- Ensure copy of Legionella Risk Assessment is available at the Centre together with copies of Legionella test results.
- Notify the Area Manager or a Senior Manager of the Incident.
- Forward copies of enforcement notices (Prohibition or Improvement) to Area Manager.
- Notify all staff members that they must not speak to the media or anyone else including posting anything on social media, about the reported incident.

NLT 5.1b Emergency Action Plan Cripps Issue 1

- Identify any staff members directly involved who may have worked during the period of the reported outbreak or who may have used the Centre facilities during this period.
- Liaise with the Facilities & Maintenance Officer for specialist services required.
- Complete Incident Report Form and forward to the Area Manager.
- Complete F2508a and notify Incident Contact Centre (in consultation with EHO/HPA and company Health & Safety Advisors) as per the Accident, Incident and First Aid procedure.

23.0 Outbreak of Zoonotic Disease/s (i.e. E.coli)

A number of zoonotic diseases are notifiable under veterinary and/or human health legislation. However, not all zoonotic diseases in animals or humans are notifiable. An Incident or Outbreak Control Team (OCT) will be formed for significant outbreaks of zoonotic disease and depending on the individual situation and disease, membership of the OCT may include representatives from the following:

- HPA's local Health Protection Unit, for example the Consultant in Communicable Disease Control
- Local Authority (Environmental Health Officer)
- Primary Care Trust
- Local Acute Trust (Microbiologist or Virologist, Infection Control Nurse)
- Other agencies as necessary may also be included for example the Health & Safety Executive or the Food Standards Agency
- Veterinary involvement may be provided by the Animal Health Veterinary Laboratory Agency

The OCT will first contact the venue where the suspicion has been identified before visiting to conduct an investigation. Upon notification from any of the agencies, the MoD is to advise the Area Manager or a Senior Manager immediately.

24.0 Asbestos Fibres

If informed that there has been a structural disturbance in an area where it is known there to be asbestos, the MoD will immediately instruct the area to be isolated and inform the Facilities & Maintenance Manager and Health & Safety Advisors.

Location(s) of Asbestos:

Photograph of location(s) of asbestos (safe condition): *(insert photograph)*

In the event of anyone finding suspected asbestos (e.g. maintenance operative), the area will be cordoned off and the incident reported to the Area Manager or a Senior Manager immediately.

25.0 Passenger Lift Failure

On hearing the lift alarm or being made aware of person(s) trapped, contact the MoD will:

- Make contact with the trapped person(s) and assist them to remain calm.
- Contact NGH Estates immediately.

NLT 5.1b Emergency Action Plan Cripps Issue 1

- When the person has been released, complete an Incident Form
- Request that NGH undertake a full inspection before allowing the passenger lift to be brought back into service.

26.0 Out of Hours – Fire and Evacuation

If a fire is reported or discovered out of the location's normal opening hours 22:30pm – 06:30am the Manager on call will telephone 999 and travel to site. Do not enter building if evidence of any fire.

NGH / Estates will normally be aware of a fire in the first instance and will call the fire service.

27.0 Reporting & Review Process following an Emergency Incident

The MoD will:

- Follow the SIMP (Serious Incident Management Procedure)
- Where the incident has required any of the emergency services to be called, or there has been a major closure of public facilities, ensure the next available of the following Leadership Team are informed of the situation:
 - Area Manager
 - Director of Development & Performance
 - Finance Director
 - Managing Director
 - Marketing Team
- The Contact Centre must be contacted immediately if there are any closures
- At the earliest possible time after the incident, complete an Incident Report Form.
- At the earliest possible time after the incident, de-briefs with all relevant staff will be carried out by the MoD, or other appropriate managers available.
- Contact Environmental Health Officer if RIDDOR reportable
- Carry out required reviews of risk assessments, work instructions etc.
- Near misses which are potentially RIDDOR reportable also need to be brought to the Leadership Teams' notice
- For any Safeguarding issues please see the Safeguarding procedure (note the safeguarding incident form is different from the NLT Incident / Accident form)
- For serious near misses and any medical injuries preventing the casualty from returning to their activity / duties, or any trends highlighting repeat incidents / accidents; the Assistant Manager or Duty Supervisor will review the relevant risk assessment – noting whether any changes / additions were required, or not.

NLT 5.1b Emergency Action Plan Cripps Issue 1

Section 2

POOL EMERGENCY ACTION PLAN

1.0 Introduction

This section of the EAP relates only to pool specific emergencies, it covers types of emergencies which may affect pool uses and lifeguards. All centre staff must ensure they are familiar with all sections prior to working forming part of the Team i.e. work with one other person only.

2.0 Minor Emergencies

A minor emergency is an incident, which, if handled properly, does not result in a life-threatening situation. The member of staff will normally deal with it as follows:

- Lifeguard is made/becomes aware of an incident
- Lifeguard notifies others in the team that they have to respond to an incident by activation of the pool assistance alarm and/or three blasts of the whistle
- Pool alarm sounds via emergency alarms / beacons located in lower corridor and first floor corridor to alert support staff who promptly report to the poolside
- MoD is informed immediately via two-way radio as well
- On hearing the pool assistance alarm staff must stop any further admissions to the pool and await instructions from the MoD
- Lifeguard involved administers immediate first aid or provides appropriate assistance
- Lifeguard completes incident/accident reports
- Staff return to normal duties.

3.0 Major Emergencies

A major emergency is one where an incident occurs resulting in a serious injury or life-threatening situation. As with minor emergencies the response in most major emergencies follows a general pattern:

- Lifeguard is made/becomes aware of an incident
- Lifeguard notifies others in the team that they have to respond to an incident by activation of the pool assistance alarm or three blasts of the whistle
- Pool alarm sounds via emergency alarms to alert support staff who promptly report to the poolside
- On hearing the pool assistance alarm staff must stop any further admissions to the pool and await instructions from the MoD
- Lifeguard initiates rescue/first aid procedures and removes casualty from the danger area
- Support staff clear the pool and assist with rescue/first aid as necessary
- Support staff should ensure that a crowd does not gather around the casualty
- MoD will call an ambulance on the Centre's mobile phone and designate one member of staff to meet the ambulance / Crash-Team at the main entrance and take them directly to the scene of the incident
- As soon as possible after the incident all staff involved will complete an accident report form
- MoD will complete an incident report on the accident report form

NLT 5.1b Emergency Action Plan Cripps Issue 1

- MoD will inform the Assistant / Area Manager or other Senior Manager
- The Area Manager will determine when the pool will be re-opened
- No statements shall be made to the press or members of the public at the time of or immediately following the incident. Please refer to Serious Incident Management Procedure (SIMP).
- Staff will complete a personal Witness Note which will be used for the prompt and effective investigation of the incident.
- A counselling service is available to all staff involved in the incident via HR

4.0 Chemical Spill

All chemical spills must be reported to the MoD and controlled/cleaned up straight away as directed by the COSHH sheets for that chemical. The area will have to be isolated to prevent access and emergency services contacted immediately to remove spillage and make any further decisions on public safety.

5.0 Serious Injury to a Swimmer

All **head injuries** are to be treated as serious injuries; delayed compression injury may lead to unconsciousness. An ambulance should be called by the MoD. Under no circumstances should the casualty be permitted to return to the pool even if they appear well.

Any casualty who has needed assistance from the water may have inhaled a small amount of water placing them at risk from **secondary drowning** for up to 72 hours after the incident. It is impossible for staff to assess whether a casualty is likely to suffer from this potentially fatal condition and therefore all such casualties must be transferred to hospital immediately.

As much assistance as possible should be given to the casualty and persons accompanying them. This may include use of the telephone and assistance with looking after children.

Staff have the responsibility to treat casualties prior to the arrival of a Paramedic team only. The Paramedic team have full responsibility to transport unaccompanied children to hospital and it should not be necessary for a member of staff to accompany the casualty in the ambulance.

6.0 Disabled User Evacuation

Users who are either disabled or have impaired mobility, can be assisted by any member of staff who have received training to use the Evac Chairs/Disabled hoist in the event of a facility evacuation, when the lift is not available.

Please refer to Disabled Equipment of the Pool Normal Operating Procedures.

NLT 5.1b Emergency Action Plan Cripps Issue 1

7.0 Aquatic Spinal Cord Injury Management

The serious consequences of damage to the central nervous system means that careful handling, lifting and moving are crucial when dealing with spinal injuries.

Incident management priorities

- 1 - Save a life – airway, breathing, circulation
- 2 - Stabilise the casualty's head
- 3 - Maintain their horizontal position

In the event of a suspected spinal cord injury, the pool is cleared immediately. Lifeguards must manage the situation in accordance with their on-going training.

If a spinal board and a sufficient number of trained staff are available, the casualty should be recovered from the water using the spine board. This requires a minimum of two Lifeguards and two trained persons.

If a spine board is not available, or in the event of the urgent need to remove the casualty from the water, such as when the casualty does not have signs of normal breathing, the casualty should be removed using a horizontal lift. Removal cannot be carried out, except with very small casualties, unless there are at least two Lifeguards and two trained persons in the water and a further trained person on the poolside.

In a situation where urgent removal is necessary and there are an insufficient number of trained persons to perform a horizontal lift Lifeguards may have to use an assisted lift to quickly remove the casualty and commence CPR.

Aftercare

- Casualties who have been immobilised in the water are likely to suffer from onset of hypothermia; injuries to the cervical spine frequently lead to a failure of the body's temperature regulation system which will speed up this onset
- Once on the poolside casualties with spinal injury should be wrapped in dry, heat retaining material to prevent heat loss
- Unnecessary movement should be avoided; there is no need to move a casualty to a first aid room unless the poolside presents further risk.

8.0 Secondary Drowning

Just a small amount of water aspirated (breathed) in can cause secondary drowning. Symptoms can be coughing, but symptoms are not always apparent. Secondary drowning can be fatal. If there is a chance that water has entered the lungs immediate medical advice is required.

9.0 Overcrowding

Lifeguards must carry out half-hourly head counts of the number of swimmers in the water. If the number is approaching the maximum swimmer load the MoD must be informed immediately so that steps to prevent overcrowding may be taken.

If at any time the maximum number of swimmers has been reached, the MoD should be alerted so that further admissions can be halted.

After numbers have reduced the MoD will restart admitting customers.

NLT 5.1b Emergency Action Plan Cripps Issue 1

11.0 Lack of Water Clarity

A reduction in clarity prevents pool users from assessing the depth of the water and may prevent staff seeing a casualty below the surface of the water either from poolside or using CCTV.

The clarity of the pool water should be constantly monitored. If the pool water clarity begins to deteriorate, the MoD must be advised immediately.

The MoD shall carry out a water test, check the pool plant and initiate any corrective action.

If corrective action is not possible or effective quickly, the MoD will stop all further admissions and decide whether it is safe for the pool to remain open.

Clarity will be assessed by throwing a diving brick or 'Tango-Man' into the water and determining whether it is visible on the bottom in the deepest part of the pool and in the area of poorest visibility. If the brick cannot be seen staff shall clear the pool immediately. One long whistle blast supported by a message over the public address system is the most effective approach.

It may be that the shallow end is able to be used as long as the pool floor can be easily seen.

NLT 5.1b Emergency Action Plan Cripps Issue 1

12.0 Lighting Failure

In the unlikely event of a significant problem causing the lights to fail in the pool hall, but nowhere else, the MoD must assess whether there is sufficient light to see the deepest part of the pool clearly as detailed above. If the brick cannot be seen staff shall clear the pool immediately.

In the event of a power failure to the whole building, stop further admissions. The MoD will attempt to contact the Electricity Board and / or NGH Estates to ascertain how long the electrical supply will be off for.

- The MoD will carry out a check of the plant room and electrical cupboard to ensure the area is free from obvious problems, such as electrical fire
- The fire alarm may be activated
- Should the failure last more than a few minutes, users should be asked to evacuate the building, gathering their belongings and changing into their clothes before they leave. Emergency lights will activate, but will only last 3 hours OR if this is assessed by the MoD not to be safe to do, swimmers should be lined up next to the nearest fire exit and issued with space blankets.

The pool plant should be shut down as per the 'Backwash Work Instruction' in the main plant room. A backwash will need to be completed before re-opening the pool facilities.

Staff will need to be available to answer questions and queries from customers as they leave and the MoD will try to contact customers who have any bookings. They will remain in the building until either the power is returned to normal or until the emergency lighting fails, whichever is first.

13.0 Dealing with Blood, Vomit and Faecal Fouling

For all spillages- WEAR FIRST AID LATEX GLOVES

13.1 Blood and Vomit

If substantial amounts of blood (or vomit) are spilled into the pool, it should be temporarily cleared of people to allow the pollution to disperse and any infective particles within it to be neutralised by the disinfectant in the water.

After dispersion the MoD or staff will immediately carry out a pool test to establish that disinfectant residuals (free and combined chlorine), and pH are within recommended ranges. If these tests are satisfactory the pool can be reopened.

Large spillages will be cleared up by using 'Response Powder' by covering the affected area and sweeping up the congealed 'Response Powder' into a dustpan and brush. Dispose of in the yellow medical bin situated in the cleaning store.

For small spillages, wash down the affected area then scrub with disinfectant, repeat as necessary.

The disposal gloves should be disposed of in the yellow medical bin.

NLT 5.1b Emergency Action Plan Cripps Issue 1








If staff become in contact with Blood/Urine

- Affected staff are to be removed from Duty immediately
- Staff are encouraged to shower/wash and change their uniform (MoD to provide spare) if they come into contact with the spillage
- The uniform is then to be washed on a hot wash or safely disposed of depending on the extent of contact
- Staff are also encouraged to book a GP appointment for a blood test

13.2 Faecal Fouling

There are seven types of stools (faeces) according to the Bristol Stool Chart. The Bristol Stool Chart or Bristol Stool Scale is a medical aid designed to classify faeces into seven groups, and may assist Manager on Duty to decide the course of action to take when dealing with faecal fouling.

Bristol Stool Chart

Type 1		Separate hard lumps, like nuts (hard to pass)
Type 2		Sausage-shaped but lumpy
Type 3		Like a sausage but with cracks on its surface
Type 4		Like a sausage or snake, smooth and soft
Type 5		Soft blobs with clear-cut edges (passed easily)
Type 6		Fluffy pieces with ragged edges, a mushy stool
Type 7		Watery, no solid pieces. Entirely Liquid

NLT 5.1b Emergency Action Plan Cripps Issue 1

13.3 Solid Stools

It is essential that solid stools are retrieved quickly to prevent them breaking up and resulting in an extended pool closure.

- Clear the pool of swimmers immediately
- Using the scoop provided on poolside the staff identifying a possible stool must quickly retrieve the offending item
- The stool should be disposed of in the toilet and the scoop disinfected.
- After dispersion the MoD will immediately carry out a pool test to establish that disinfectant residuals (free and combined chlorine), and pH are within recommended ranges.
- If these tests are satisfactory the pool can be reopened

13.4 Stools Which Break Up

Normal pool disinfection will destroy the bacteria and viruses associated with stools, however if a stool has broken up it is difficult to ensure all of the bits have been removed:

- Clear the pool of swimmers immediately
- Using the scoop provided on poolside remove as much of the faecal material as possible
- The stool should be disposed of in the toilet and the scoop disinfected
- Advise swimmers to shower thoroughly
- Increase disinfectant levels to the top of the recommended range
- Vacuum and sweep the pool
- Backwash the filter(s)
- The MoD will immediately carry out a pool test to establish that disinfectant residuals (free and combined chlorine), and pH are within recommended ranges.
- If these tests are satisfactory the pool can be reopened.

13.5 Diarrhoea or Liquid Stool

The likeliest cause of diarrhoea is a virus or bacteria that are susceptible to the normal disinfection of the pool. These are inactivated within a matter of minutes. However, the other possibility is that the diarrhoea is from someone infected with Cryptosporidium or Giardia. The infectious stages of these parasites are resistant to chlorine disinfectants and therefore their removal relies on filtration, which will take a number of hours.

If a substantial amount of runny stool or diarrhoea enters the pool, the pool will be immediately cleared of all bathers and closed.

If the person responsible reports the incident, or can be identified, then as much history as to their health should be obtained, in particular asking if this has been a prolonged issue or was due to other known medical issues and record on an incident form.

Bathers should be advised to shower before drying and changing. Most viruses causing diarrhoea are susceptible to disinfectant, but giardia and cryptosporidium (a protozoan parasite) are more harmful and are not killed by chlorination. Any faecal contamination can lead to a significant number of people becoming ill. We will not know the cause of the diarrhoea and so the worst possible scenario should be considered.

The following action must be taken before the pool can be reopened:

NLT 5.1b Emergency Action Plan Cripps Issue 1

- Clear the pool of all customers advising them to shower thoroughly before drying and changing.
- Contact the MoD immediately
- Staff should remove as much matter as possible using the pool net/scoop and any solid matter is disposed of in the toilets - disposable gloves should be worn and staff must shower after completion of the task if they have come into contact with the pool water.
- If any clothing has become wet this must be placed into a plastic bag and taken for washing
- Any equipment should be washed in a solution of 5-10mg/l of free chlorine
- If the matter is on the poolside, clear the area using a disinfectant cleaning chemical thoroughly removing as much matter first and disposing as above. This must NOT BE washed into the pool and should be mopped up. The mop and any other cleaning equipment should be disposed off
- Immediately increase the chlorine levels to 2.0ppm for at least 26 hours. PWTAG recommend that a minimum of 6 turnovers, which would be approximately 18 hours are completed
- The MoD will ensure the pool continues to be dosed with a coagulant at the recommended rate
- A backwash of all of the primary filters for the pool will then be undertaken following the 6 turnovers and will then be left for a further 8 hours to allow the filter medium to settle and mature.
- The Facilities and Maintenance Manager must be contacted to inform them of the incident, as additional microbiological sampling may be required
- The pool can be reopened once the 6 turnovers, backwashing and 8 hours settling time has been completed
 - a total of 26 hours for the pool (do not put the pool cover out as this can become contaminated)

For specific details of filtration times, disinfectant levels, vacuuming and backwashing refer to the Pool Water Management and Testing Procedure.

14.0 Dealing with Broken Glass in the Pool

- The staff will contact the MoD immediately
- The MoD will instruct that bathers be cleared from the pool and stop admissions
- Remove glass from pool by referring to the Work Instructions for removing Broken Glass from the Pool

NLT 5.1b Emergency Action Plan Cripps Issue 1

Action Required:

- ✓ Ensure a risk assessment identifying significant hazards is carried out
- ✓ Persons who appear to be intoxicated by **alcohol or drugs** or not well enough to enter the water must be refused admission.
- ✓ Lifeguards must provide good customer care without compromising supervision of the pool
- ✓ Ensure that staff are trained in this procedure as part of the Health and Safety Induction Training for all new employees and a refresher training programme is in place, the training must be recorded on the member of staff ***Individual Training Record***

Associated Forms:

- Pool Water Testing Form
- Bather Headcount Form
- Manager on duty Checklist
- Fault Log
- Weekly Health & Safety Check-sheet

Associated Work Instructions:

- Cleaning
- Cleaning Standards
- Health and Safety Checks – Weekly
- Lights
- Radios
- Lane Ropes
- Pool Alarm
- Pool Cover
- Pool Vac
- Timing Devices
- Backwash Pool
- Chemical Spillage
- Pool Water Testing
- Plant Room Checks

Associated Risk Assessments:

- Emergency Evacuation
- CCTV and Photography
- Clubs
- Chemical Storage - Pool
- AED
- First Aid Provision and Equipment
- Pool Plant Equipment
- Pool Plant – General
- Fitness Classes – Pool
- Unsupervised Pool
- Lifeguard – Training
- Swimming Clubs
- Swimming Lessons – Site
- Swimming Pool – Environment

NLT 5.1b Emergency Action Plan Cripps Issue 1

- Swimming Pool Programme Sessions

Associated Guidance and Legislation:

- Booking Procedures
- Pool Water Management and Testing Procedure
- Lifeguard Training Procedure
- Swimming Lesson Procedure
- Facility Inspections and Monitoring
- Emergency Action Plan
- Cleaning and Housekeeping Procedure
- Accident, Incidents and First Aid Procedure
- Notices displaying Pool Rules and Child Supervision Policy
- Health & Safety Executive (HSE) 'Managing Health & Safety in Swimming Pools' 2003 HS (G)179
- RLSS 'The Lifeguard'
- Pool Water Treatment Advisory Group (PWTAG) 'Swimming Pool Water Treatment & Quality Standards' 1999.
- PAS 68 & 69

Date of Next Update:

This procedure is reviewed once a year or updated as and when necessary, the next review is October 2018

Updates of procedure:

Issue No	Description of Revision	Date	Action By
1	None - First Issue		Train designated staff & incorporate into QMS

Training on this procedure is required for the following Staff:

- All operational staff at Cripps

NLT 5.1b Emergency Action Plan Cripps Issue 1

Action Required:

- ✓ Ensure that staff are trained in this procedure as part of the Health and Safety Induction Training for all new employees and a refresher training programme is in place, the training must be recorded on the member of staff **Individual Training Record**
- ✓ Ensure all Staff Members are aware of their key responsibilities
- ✓ Ensure that following regular refresher training, all staff undertake a competency test
- ✓ Ensure that all hirers and sub-contractors are made aware of the EAP and their responsibilities
- ✓ This procedure should be printed out and available in key staff areas including Staff Room, Offices and Emergency Grab Bag for all staff to be able to access.

Associated Forms:

- Accident & Incidents Report Form
- Emergency Action Plan - Evacuation Cards
- External Emergency Contacts

Associated Risk Assessments:

- put in hyperlink

Associated Guidance and Legislation:

- Health & Safety at Work Act 1974
- Management of Health & Safety at Work Regulations 1999
- Regulatory Reform (Fire Safety) Order 2005
- Pool Water Treatment Advisory Group (PWTAG) 'Swimming Pool Water Treatment & Quality Standards' 1999
- Accident, Incidents & First Aid procedure

Date of Next Update:

This procedure is reviewed once a year or updated as and when necessary, the next review is October 2018.

Updates of procedure:

Issue No	Description of Revision	Date	Action By
1	None - First Issue	In draft	Train designated staff members

Training on this procedure is required for the following Staff Members:

Section1 – Dryside

Section A

Date: October 2017
Approved by: Ian Redfern

NLT 5.1b Emergency Action Plan Cripps Issue 1

- All Staff members

Section B

- All staff operating as MoD

Section 2 – Wetside

- All staff working within pool area – considered as part of the operations Team