



Montclair Swim Club Safety & Emergency Action Plan Manual

Purpose:

Safety in the workplace is the Montclair Swim Club's (the "Club") number one priority. You must inform your supervisor in the event of unsafe conditions, accident or injury, and use safe working methods at all times.

The purpose of this manual is to outline the action to be taken in the event of an emergency at Montclair Swim Club, its pool, and poolside areas.

Responsibilities:

In the event an employee becomes injured or witnesses an injury during working hours, they must report it immediately, to the nearest available supervisor or manager. Employees are to render any assistance requested by a supervisor or manager. Any questions asked by law enforcement or fire officials making an investigative report should be answered giving only factual information and avoiding speculation. Liability for personal injury or property damage should never be admitted in answering an investigatory question asked by law enforcement or fire officials. All staff should be familiar with the Crisis Management Policy and Montclair Swim Club Policies and Procedures and adhere to them. Additionally, employees should report all nonfunctioning, hazardous equipment to the nearest supervisor or manager.

Safety Processes & Procedures:

Safety Equipment-Prior to any shift, ensure the required safety equipment is at the correct location and in good working order, including:

- Rescue tube
- Spinal board with head immobilizer and head restraint
- Whistle
- Telephone
- Fire extinguisher
- First Aid kit
- Fanny pack with gloves and mask
- AED

Raising Alarms-

The method of communication using a whistle is as follows:

- 1 Whistle Blast-attracts attention of Club members
- 2 Whistle Blasts-attracts attention of other Club staff
- 3 Whistle Blasts-indicates the lifeguard is about to take emergency action
- 1 long Whistle Blast-attracts attention of pool members to prepare for an evacuation

Whistles should be used sparingly and be followed by relevant verbal or visual instruction (i.e. hand signals). If possible, consider the timing of using the whistle in relation to the activities being carried out to ensure members are not unduly distracted (i.e. jumping into the pool). Also be aware of those that may need additional assistance (members who are deaf or disabled, etc.).

Incident Reporting Procedures-

Incident reports must be completed before the next business day for minor and major emergencies by the manager on duty or head swim coach. Incident reports will be completed immediately after the victim is in the care of EMS personnel and the scene is safe for all life-threatening emergencies and after the Club Head Manager and Club President have been notified. A copy of all incident reports will be kept by the Board. It is recommended employees keep a copy of all incident reports for emergencies that occur while on duty.

Emergency Action Plans (EAP):

An emergency is defined as a sudden incident demanding immediate action. A condition where death or serious bodily injury may occur or a potentially hazardous condition where damage to property may result may be a life-threatening emergency.

In the event of an emergency, employees must notify the manager on duty by activating the EAP. The manager on duty or appointed employee will contact the Board President, or if unavailable, the Board Vice-President. In the event of an emergency requiring EMS, the manager on duty or appointed employee will call 911 first and then the Board President, or if unavailable, the Board Vice-President. For any of these that do not answer, leave a message, giving your name and the nature of the emergency.

Additionally, in the case of any emergency, managers should ensure that the main front exit is clear if possible and the back gate is unlocked.

Since each emergency is unique and requires staff members respond differently, emergency action plans are developed for each type of emergencies. You are responsible for knowing and following the appropriate EAP during any emergency. Each employee should be familiar with the EAPs.

Each EAP start immediately after an employee identifies an emergency, has surveyed the scene, and determined it is safe to enter an area. If it is unsafe to enter an area, consider the emergency life-threatening and activate the EMS (dial 911).

Always remember, you should identify any emergency within 10 seconds of the emergency beginning and respond/rescue within 20 seconds of the emergency beginning (10/20 rule).

Note: Never allow members of the media into the Club premises. Direct any media to the Club President or if unavailable, the Club Vice-President. Never release information about any incident to anyone

except EMS personnel or the Club President or Club Vice-President. Follow the Crisis Management Policy.

Disorderly Conduct/Behavior-

Incidents regarding disorderly conduct/behavior may detract the attention of the staff away from their primary duties of pool supervision and safety.

Adults:

- 1) Always be respectful
- 2) Avoid calling across the pool. Ask another employee for assistance if necessary. Do not get off the stand.
- 3) Be discreet as to not embarrass the member.
- 4) Politely explain the basis for the policy/rule
- 5) If an adult is uncooperative, direct the person to the Club Manager on Duty

Minors:

- 1) Whistle and/or gesture to inform member of policy/rule violation
- 2) Be polite, respectful, and positive, yet firm, and state the policy/rule violation. If the member is very young, inform the parent/guardian/chaperone.
- 3) Be sure to explain the basis behind any rule enforcement.

Progressive Penalty Policy for Minors:

1st Offense: Warning; Members should be advised of the policy/rule broken and any safety considerations as a result of the member's actions.

2nd Offense: If the member is unaccompanied by a parent/guardian/supervisor-The member shall be asked to sit 10-15 minutes in the penalty box and warned that continued breaking of the rules will result in expulsion from the facility. Refusal to sit out shall result in expulsion from the facility for the remainder of the day.

If the member is accompanied by a parent/guardian/supervisor-The member's parent/guardian/supervisor shall be warned that another violation will result in expulsion from the facility.

3rd Offense: The minor member will be expelled from the facility for the remainder of the day. The manager on duty is required to call the parents/guardians to explain the particulars of the expulsion.

Under no circumstances is a member 16 or under to be expelled from the facility without first notifying a parent/guardian and ensuring pick-up/supervision by an approved adult.

If a parent/guardian is unable to pick up a minor, said minors must be supervised by a staff member until a parent/guardian/supervisor is able to pick up said minor.

A report must be prepared in the case of any expulsion from the facility.

Behavior Constituting Immediate Expulsion (Without Previous Warnings/Offenses):

- Profanity or belligerence towards a staff member or Club member

- Any physical altercation with a staff member or Club member (Also requires notification to the Club President who will determine whether to notify local law enforcement authorities).
- Any use of or under the influence of alcohol or illegal drugs (Also requires notification to the Club President who will determine whether to notify local law enforcement authorities)

Lack of Water Clarity-

It is vital that all lifeguards can clearly see the bottom of the pool in order that a member 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, the employee responsible for pool maintenance should be informed immediately.
- A water test should be performed, along with appropriate remedial action.
- If remedial action is not possible or is not effective quickly enough, the Club President should be contacted to determine further actions and if it is safe for the pool to remain open.
- Members should only be 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.

Fire/Emergency Evacuation-

- Those staff poolside should blow their whistles using 1 long Whistle Blast and clear the pool and facility as quickly as possible.
- The Manager on duty or Coach should call 911, while other staff should direct everyone to the nearest exits
 - Exits are the main front exit and the back gate.
- Staff should assemble in the front parking lot or the Northwest grassy area right outside the back gate if the main entrance is inaccessible.
- The manager on duty/Coaches/Swim Lesson Instructors should check that all staff and swim team members, swim lesson members, etc are present. This is why it is essential that accurate attendance is being taken daily.
- Manager on duty and/or Head Coach should call the Head Club Manager and the Club President.

Bomb Threat-

- Do Not Panic!
- The person receiving the threat (most likely over the phone) must record as much info as possible
- Refer to the bomb threat checklist posted on the wall of the office; listen carefully and fill out as much information as you are able to.
- Do Not try to search for devices or change anything in the environment, such as turning water on or off, changing anything with gas/electricity, etc.
- Contact the Manager on Duty and call EMS (911).
- The Manager on Duty should call the Head Club Manager and the Club President who will decide whether an evacuation is necessary.

Bomb/Suspicious Device Detected-

- Do Not Panic!
- Do not attempt to inspect or remove the device.
- Call EMS (911)
- Evacuate the facility-Blow whistles using 1 long Whistle Blast and clear the pool and facility as quickly as possible.
- Staff should assembleand the Manager on Duty or Coach should check that all staff and swim team members, swim lesson members, etc. are present.
- Manager on duty or Coach should call the Head Club Manager and the Club President.

Active Shooter-

If there is an active shooter threat, use the following guidance:

- Take the following actions as appropriate/feasible using your best judgment
 - Run:
 - Have an escape route and plan in mind-be aware of all exits (Main front exit, back gate, over fence)
 - Leave your belongings behind
 - Keep your hands visible
 - Hide:
 - Hide in an area out of the shooter's view
 - Block entry to your hiding place and lock the doors
 - Silence cell phones and other electronic devices
 - Fight:
 - As a last resort and only when your life is in imminent danger,
 - Attempt to incapacitate the shooter
 - Act with physical aggression and throw items at the active shooter
- Call 911 only when it is safe to do so
 - When calling 911, provide the following:
 - Location of the active shooter
 - Number of shooters
 - Physical description of shooters
 - Number and type of weapons held by shooters
 - Number of potential victims at the location
- Call Club's Head Manager and Club President when you are somewhere safe and 911 has been called
- When law enforcement arrives,
 - Remain calm and follow directions
 - Empty your hands of any and all belongings
 - Raise hands and spread fingers
 - Always keep hands visible
 - Avoid quick movements towards officers such as holding onto them for safety
 - Avoid pointing and screaming
 - Do not stop to ask officers for help or direction when evacuating

Minor Incidents/Emergencies-

Minor incidents or emergencies if handled properly will not result in a life-threatening situation. Examples include a member slipping on the pool deck, a minor cut, and a simple reaching rescue. While these may be routine, they may result in increased risk of a more serious incident if proper processes are not followed.

Upon becoming aware of a minor incident/emergency:

- Notify other pool staff and use whistle when/as necessary
- Other staff should move to cover areas or request additional assistance if necessary
- Staff should administer first aid and provide appropriate assistance as necessary
- Accident/Incident Reports, as always, should be completed and the Head Manager should be notified, and if necessary the Club President.

Pool Closures-

Emergencies: After a 911 call, it is at the discretion of the Club's Head Manager or Head Coach whether or not to close the facility immediately. The ultimate decision will be made by the Club President.

Inclement Weather: The pool and pool area must be cleared immediately when lightning or thunder indicate that an impending storm is present. Staff is responsible to remove themselves from possible exposure after clearing the area. Generally, the pool should remain closed 30 minutes after the last sight of lightning and sound of thunder. Swimming may also be halted during heavy rains when lifeguards are unable to see the main drain of the pool. The Club Manager has full discretion as to when the pool will reopen. The Club may not close for the day until the Pool President authorizes the closure.

Blood:

- If substantial amounts of blood are spilled into the pool:
 - 1) Clear the pool.
 - 2) Wear disposable gloves.
 - 3) Cover spillages of blood on poolside in paper towels to allow the towels to soak up the blood and wipe up immediately. Do not wash blood into the pool or poolside drains. Dispose of the soiled paper towels properly. Disinfect the area and equipment before storing away.
 - 4) Notify the Club's Head Manager and the Club's President.

Defecation:

- In the event of well-formed stool contamination:
 - 1) Clear the pool.
 - 2) Remove contaminating material using a net or scoop, place into a bucket, and flush down the toilet.
 - 3) Raise the free chlorine residual to 2.0 ppm and adjust PH to 7.5 or less.
 - 4) Once chemical balance is restored, pool members are prohibited from entering the pool for a minimum of 1-2 hours.
 - 5) Any equipment that has been used must be thoroughly disinfected before it is stored away.
 - 6) Notify the Club's Head Manager and the Club's President.

- In the event of diarrhea contamination:
 - 1) Clear the pool.
 - 2) Remove contaminating material using a net or scoop, place into a bucket, and flush down the toilet.
 - 3) Raise free chlorine residual to 2.0 ppm and adjust PH to 7.5 or less.
 - 4) Once chemical balance is restored, pool members are prohibited from entering the pool for a minimum of 12 hours.
 - 5) Any equipment that has been used must be thoroughly disinfected before it is stored away.
 - 6) Notify the Club's Head Manager and the Club's President

Vomit:

- 1) Clear the pool.
- 2) Using disposable gloves, remove the contaminating material using a net or scoop, place into a bucket, and flush down the toilet.
- 3) Raise free chlorine to 2.0 ppm and adjust PH to 7.5 or less.
- 4) Once chemical balance is restored, pool members are prohibited from entering the pool for a minimum of 2-3 hours.
- 5) Any equipment that has been used must be thoroughly disinfected before it is stored away.
- 6) For spillages of vomit on poolside, cover in paper towels to allow the towels to soak up the vomit as much as possible before wiping up immediately. Do not wash the vomit into the pool or poolside drains. Dispose of soiled paper towels properly and then disinfect the area and equipment.
- 7) Notify the Club's Head Manager and the Club's President.

Pool Rules:

- Members that have had diarrhea in the past two weeks may not use the pool.
- Members are supposed to shower before entering the pool.
- Members who are not toilet trained must wear a swim diaper.
- Members using cloth or disposable diapers may not use the pool.

Concussions-

Any blow to the head, face or neck, or a blow to the body that jars the head could cause a concussion. Staff should be aware of the signs and symptoms of a concussion in order to help readily identify a concussion. If an individual has been bumped, hit, or otherwise shaken, a member of staff should ensure that the individual is not left alone and monitored for the following signs and symptoms. Parents of minors will be notified and a return to practice or other activity will only be permitted after cleared by a healthcare professional.

Signs and Symptoms of a Concussion:

- Physical:
 - Headache
 - Pressure in the Head
 - Dizziness, balance issues

- Nausea or Vomiting
- Blurred vision
- Sensitivity to light or sounds
- Ringing in the ears
- Feeling tired, low energy, sluggish, hazy, foggy, groggy
- Appears dazed or stunned
- Drowsiness
- Forgets instructions, is confused and unsure of surroundings
- Moves clumsily
- Answer questions slowly
- Shows mood/behavior personality changes
- Can't recall events prior to or after trauma
- Irregular breathing
- "Doesn't feel right"
- Cognitive:
 - Not thinking clearly
 - Feeling slowed down
 - Problems concentrating
 - Memory problems
- Emotional:
 - Easily upset or angered
 - Sadness
 - Nervous or anxious
 - Feeling more emotional
- Sleep-related
 - Sleeping more or less than usual
 - Having a hard time falling asleep

Protocol for suspected concussions:

- 1) In all suspected cases of concussion, (if individual is showing any signs or symptoms at all) the individual should stop the activity immediately.
- 2) The individual should be referred to a healthcare professional
- 3) Parents or guardians of minors should be contacted immediately

If the individual shows any of the following red flags, EMS should be contacted immediately:

- Neck pain/tenderness
- Double vision
- Weakness, tingling in arms or legs
- Severe or increasing headache
- Seizure or convulsion
- Loss of consciousness
- Deteriorating conscious state
- Vomiting more than once
- Increasingly restless, agitated, or combative

- Growing confusion

In the event an individual loses consciousness, the individual should not be moved unless absolutely necessary (i.e. underwater)

Life Threatening Medical Emergencies-

A major emergency where an incident occurs resulting in a serious injury or life-threatening will usually require more than one staff member. All staff members are required to provide support. Contacting EMS (911) during a life-threatening emergency is a vital part of the Emergency Action Plan. EMS must be contacted if the accident is life or limb threatening (major injuries). To limit the potential for disease transmission, universal precautions must always be taken. You should always wear gloves and adhere to bloodborne pathogen guidelines.

Always activate the EAP and EMS when:

- Victim is unconscious
- Victim has a head injury
- Victim is bleeding severely
- Victim has an obstructed airway
- Victim has a seizure in the water
- Victim has critical burns
- Victim has a suspected fracture
- Victim has a suspected spinal injury
- Near drowning victims or any victim who receives rescue breathing or CPR, regardless of how well they appear to have recovered
- Victim requests an ambulance
- You are unsure if victim needs further medical attention. If in doubt, call 911! If an ambulance is called and the victim is not transported, there is no charge. Do not let the victim dictate whether or not to call 911. Let EMS determine if the victim needs further medical attention.

Use the following protocol in the event of a life-threatening medical emergency in water:

Primary Rescuer:

- 1) The primary rescuer will initiate the EAP. They will identify the emergency and blow three emergency whistle blasts and using hand signals if necessary. If a backboard is needed the primary rescuer should add two additional blasts to alert the staff to bring the necessary equipment onto the scene.
- 2) Get out of the stand and make the appropriate water entry (stride, jump, or slide in entry) if the emergency is a head, neck, or back injury the rescuer should enter calmly and slowly into the water with the slide in entry only.
- 3) The primary rescuer should then use the appropriate approach and rescue. In the event of a spinal injury, the primary rescuer will perform in-line stabilization and move the victim to shallow water, while the secondary rescuer will bring all necessary equipment.
- 4) Once you have the victim in shallow water, continue to proceed with in-line stabilization, checking the victim for consciousness and breathing. A minimum of two trained staff is required

to remove a victim from the water using a backboard, one for the save and one for the extraction.

- a. If the victim is breathing, proceed with the spinal backboarding procedure.
 - b. If the victim is not breathing, quickly remove them from the water using a two person lift and provide resuscitative care. Do not delay removal. If a victim is not breathing, you do not need to strap them into the backboard.
- 5) If the victim is breathing, continue with strapping them in the backboard with the proper procedure. Make sure to always maintain in-line stabilization.
 - 6) Secure the victim on the backboard by using all five straps and the head immobilizer.
 - 7) Remove the victim from the water, re-assess the victim's condition by performing another initial assessment, and provide care.
 - 8) Complete an incident report to document the emergency and then call the Club Manager and Pool President (after EMS has arrived and the situation is secure)

Additional Staff:

- 1) After hearing the emergency blasts, the staff should provide support to the primary rescuer:
 - a. Assume responsibilities of guarding the pool.
 - b. Clear the area of bystanders and supervise any minors.
 - c. Bring necessary equipment and assist in backboarding procedures as necessary.
 - d. Remove any lane lines that may be in the way.
 - e. Call EMS and then the Club Manager and Club President.
 - f. Make sure someone is available to meet and direct EMS when they arrive.

Calling EMS: When placing emergency calls, speak slowly and clearly. Follow this procedure:

- State your name and the Club's name and address (401 Harvard Dr. Edwardsville, IL 62025)
- State the nature of the emergency
- State what first aid is being performed
- Give the nearest cross streets (Troy Rd and Cornell Ave)
- Let them know someone will be waiting outside (give designated area) to meet the ambulance
- Let them ask for the details
- Let them repeat the information back to you
- Do not leave the line first; let them hang up first
- Return and report to the primary rescuer

Use the following protocol in the event of a medical emergency on land:

- 1) The primary rescuer initiates the EAP. Identify the emergency by pointing to the victim and blow three sharp blasts. This will alert the rest of the staff.
- 2) Survey the scene for safety and perform the initial assessment to determine if the victim has any life-threatening conditions, checking for:
 - a. Responsiveness
 - b. Breathing
 - c. Pulse
 - d. Severe Bleeding
- 3) Call EMS if victim is unconscious or if otherwise necessary, following the procedure above.

- 4) If there are no life-threatening conditions, perform a secondary assessment using the SAMPLE method.
 - a. S-Signs and symptoms
 - b. A-Allergies
 - c. M-Medications they may be taking
 - d. P-Pertinent past medical history
 - e. L-Last oral intake
 - f. E-Events leading up to the incident
 - g. Complete an incident report for all injuries and call the manager and Pool President.

Chemical Emergencies-

A chemical emergency exists whenever a spill or mixture of chemicals can cause injury or damage to a person or property. Minor spills within the pump room that involve only one chemical are not typically considered emergencies; however, a minor problem can become a chemical emergency quickly if not acted upon properly. A chemical emergency may also become a medical emergency if someone is injured in the process.

Use the following protocol in the event of a chemical emergency:

- 1) Determine if the fire department needs to be notified. Call the Club Manager or Club President if you need assistance in making this determination.
- 2) Utilize the staff to clear the affected area where the mixture of incompatible chemicals occurred. It is important you bring the MSDS book located in the office with you to the scene and give it to the fire department when they arrive.
- 3) If you haven't already, notify the Club Manager and Club President.
- 4) Keep the phone line free after calling the fire department and necessary board members.
- 5) After the incident, determine whether the facility is fit to reopen. If not, post signs indicating closure.
- 6) Complete an incident report to document the emergency.

Chemical Safety:

Protective Equipment: Personal protective equipment (goggles, aprons, gloves, etc.) are supplied at the facility in the pump room. This equipment must be worn whenever handling chemicals.

Storing Chemicals: Always store chemicals in closed containers a safe distance from one another and in closed areas far out of reach of children.

Mixing Chemicals: Never directly mix chemicals together. Extreme caution must be taken when mixing chemicals with water. Always add the chemicals to water, not water to chemicals. Always dilute muriatic acid with water before use. If chemicals do get mixed, causing a reaction, contact 911 and Club Manager and Club President immediately and describe to them which chemicals were mixed.

Dry Chemical Fires: In case of a dry chemical fire (granular chlorine), do not attempt to extinguish the fire with the ABC extinguisher located at the pool. Secure the room or area where the emergency has occurred and immediately contact 911. Move members upwind and away from the incident.

Mechanical Emergencies-

A mechanical emergency exists when any part of the facility renders the pool non-operational or poses a risk for injury to a member or guest or damage to property.

Use the following protocol in the event of a mechanical emergency:

- 1) Contact the Head Club Manager immediately and be prepared to describe the nature of the problem with as much detail as possible. This may include noise, odor, fluid leakage, or any other conditions that are considered abnormal.
- 2) Make sure the phone line is free.
- 3) Utilize the staff to clear the affected area of the pool facility. Clear the pool facility if necessary.
- 4) After the incident has been stabilized, determine whether the facility is fit to reopen. If it is not able to reopen, post sign indicating closure.
- 5) Complete the incident report to document the emergency and notify the Club President.

Hazards of the Job/Work Area-

Hazards exist in all work areas and in all jobs. The ultimate responsibility for your safety rests with you. Follow the guidelines provided to help prevent work related injuries. Report any work-related injury to the Club's Head Manager and the Club's President as soon as possible, but not later than the next duty day. The injury or illness will be documented.

<u>Hazard</u>	<u>Corrective Action</u>
Exposure to Blood	Latex gloves and CPR masks should be kept in each fanny pack and are required to keep with them while on duty.
Chemical Burns	Only the Club's Head Manager or Assistant Manager should handle chemicals
Critical Incident Stress	Professional help will be provided if requested when employees are involved in life-threatening emergencies.
Dehydration	Employees must keep fluids with them while on duty, preferably water
Drowning	Employees should never be alone at a duty area, should never enter the water when alone and must follow ARC Lifeguarding procedures during water emergencies.

Heat Stroke/Exhaustion

Staff members must keep fluids close to duty areas, wear a hat or use shade when necessary, and report to the Head Manager or Assistant Manager to request a break, rotation, or assistance, if necessary

Sunburn

Sunscreen should be worn while on duty.

Slips/falls/trips

Flat, non-skid soled shoes should be worn; slippery areas must be reported to management immediately and corrective action taken.