



**Nottinghamshire
County Council**

School Swimming

— Guidance for Parents —



Updated 2018

Guidance For Parents

Dear Parent your child is due to start their School Swimming lessons, please take the time to read the guidance below to help ensure that they make the most of this opportunity.

The Schools' Swimming Service is dedicated to providing the opportunity for all children in Nottinghamshire to access swimming.

The Service endeavours to enrich all pupils' swimming experiences and offers participation in gala events.

The Schools' Swimming Service offers swimming lessons to approximately 125,000 pupils a year throughout Nottinghamshire. Swimming Instructors adhere to strict health and safety policies to make sure that your child has a safe environment for their swimming lessons.

We have created this information guide to explain some of the policies in place.

HEALTH AND SAFETY POLICIES in relation to your child's school swimming lessons.



Swimwear

Boys require tight fitting trunks or shorts with no pockets and which are no longer than mid-thigh length. Those pupils wearing “jammers” will be ok. Acceptable boys’ swimwear is shown below:



Girls require a snug-fitting one-piece swimsuit. Acceptable girls’ swimwear is shown below:



The following pictures show unacceptable swimwear.



Goggles

Goggles can be worn however, it is the responsibility of the parent/ carer to ensure that the child is able to adjust and fit the goggles correctly and to **sign and return the consent form to school.**

Occasionally children are asked to remove their goggles - for example when jumping in, learning to dive, and taking part in personal survival and water polo sessions. Exceptions may be made for those wearing prescription goggles.

Goggles must be of the correct size (for primary age children these will be the junior goggles) for the child to ensure a correct seal around the eyes and should not be of a "mask" design.

There must be no sharing of goggles.

Acceptable goggles



Unacceptable goggles



Jewellery

All jewellery must be removed. Swimming Instructors, school teachers and observers are not allowed to do this for your child.

Earrings cannot be taped over or covered by a hat, they must be removed.

Recent medical advice has shown that newly pierced ears (after a few weeks) can have the

studs removed for the duration of the lesson as long as they are replaced again immediately after the session.

New piercings should be done ideally at the start of the summer holidays. Children should be encouraged to move the piercing around to help with the removal.

Long Hair

Long hair has the tendency to fall forward, covering the eyes when wet and must be tied back (or up) or covered with a swimming cap. Hair covering the eyes can easily cause disorientation and panic.

Below are examples of ways to tie up your child's hair or to cover with a swim hat.



Hair which is longer than jaw length regardless of whether it will cover the eyes should also be tied back to prevent it getting tangled in lane ropes. Hair can be caught in filters and around ropes both of which are distressing to the individuals concerned and the onlookers alike.

It is unacceptable to leave the hair down or uncovered if it is of a similar length to those demonstrated below.



Medical Conditions and Medication

If your child has a medical condition which requires medication e.g. asthma, allergies, diabetes; then the medication must be brought to the pool and placed alongside your child's swimming group.

All medication must be clearly marked with your child's name and dosage. Ensure you check the shelf life of your child's medication, particularly the EpiPens and put a reminder date on your calendar to request your repeat prescription.



Medic alert bracelets may be worn in the water, however they must be covered by a coloured sweat band. Medic alert necklaces should be removed and dealt with in the same way or covered by wearing a rash vest or similar.



If your child is diagnosed as having epilepsy they should have a dedicated observer who knows the signs and symptoms of the condition relevant to your child. Your child must be easily identifiable by use of a coloured sweat band worn on the wrist.

All pupils who have an epileptic fit in the water will be taken to hospital as a matter of course unless the individual's care plan states otherwise and providing all lead professionals are in agreement that there is no possibility of secondary drowning.

It is not permissible to swim with any of the following marked with an asterisk (*)

Asthma

Your child must be able to self-administer their inhaler.

PLEASE NOTE THAT IF AN INHALER IS USED THAT THE CHILD SHOULD:

Exhale slowly to empty the lungs (this will prevent the medication from hitting the back of the throat and inducing coughing) **then inhale slowly counting to ten** (ensuring the medication is taken down directly into the lungs).

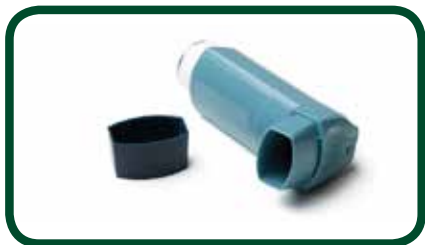
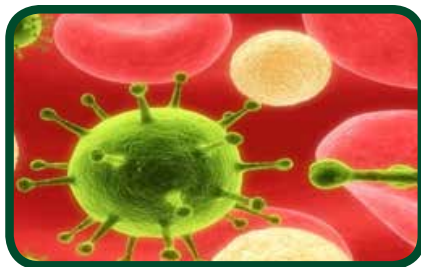
This procedure must be repeated as directed by the dosage.

Any child or adult requiring to use an inhaler, who for any reason has not got one with them, can share another child or adults inhaler providing it is of the same type and dosage.

Ear Infections*

Due to the increased risk of cross infection and potential damage to the ear canal, **children should not swim until the infection has completely cleared up.**

After suffering from ear infections caution should be taken when diving to depths greater than 1.5m due to the increased pressure on the ear drum. Please ensure the Swimming Instructors are made aware.



Ear Plugs

These can be worn if directed by your doctor, however care must be taken as they can make it difficult for your child to hear.



Grommets

Please ensure that you alert the Swimming Instructors if your child has grommets as they may need to adjust their teaching position to ensure your child can hear clearly.



Nose Clips

No-one enjoys getting water up their nose, however nose clips are not to be worn during school swimming lessons, unless directed by a doctor or consultant for medical purposes.

Instructors will teach children techniques to stop them getting water up their noses.

If your child needs a noseclip for medical reasons, they should know how to use the item correctly without help from school staff or Instructors.

It is your child's responsibility to ensure they keep any of the above medical items in a clean container to prevent cross infection and Instructors and School Staff can not be held responsible for loss or damage of these items.

Conjunctivitis*

Conjunctivitis is a common eye condition. It's not serious, but it can be uncomfortable and irritating. Inflammation is suspected if there's a reddish change in the periphery of the eye often accompanied by a pus-like discharge. It usually affects

both eyes at the same time – although it may start in one eye and spread to the other after a day or two. It may affect one eye more than the other. There are many causes and the treatment will depend upon the cause.



Verrucas

Pupils with verrucas can swim. Pupils should wear appropriate poolside footwear, i.e. flipflops, to walk from the changing rooms and then leave any footwear at the pool edge in readiness for exiting the pool.

Care must be taken during changing and there must be no sharing of towels.



Ring Worm

If you child has been treated for ring worm for 48 hours (72 hours if on the scalp) they are allowed to swim.



Head Lice

Your child can swim providing the lice have been treated for 24 hours. Please ensure your child does not share their towel, hair brush or comb.



Open Wounds

If your child has a small cut or graze then they can swim.

If your child has a large/deep cut or weeping wound then your child should not swim.

Coughs and Colds

If your child is well enough to be at school they should be allowed to swim, **unless advised not to by a doctor, or if they have a very runny nose.**



Impetigo*

A skin infection caused by the staphylococcus or, less often, by the streptococcus bacterium. The first sign of impetigo is a patch of red, itchy skin. it is contagious and easily contracted by persons who might touch the affected person.

Treatment involves the use of antibiotics.



Chickenpox*

Chickenpox (also called varicella) is a common and extremely infectious childhood disease that also affects adults on occasion. It produces an itchy, blistery rash that typically lasts about a week and is sometimes accompanied by a fever or other symptoms. chickenpox are easily recognised and in most cases merely unpleasant rather than dangerous, treatment can almost always be carried out at home.



Scabies*

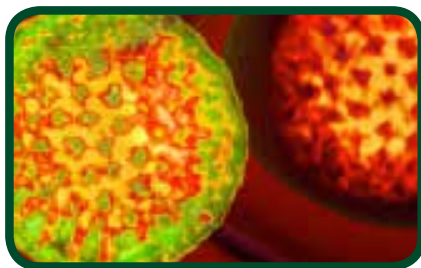
Scabies is a relatively contagious infection caused by a tiny mite (*Sarcoptes scabiei*). The intense itching almost always caused by scabies is due to a reaction within the skin to the faeces of the mite. The first time someone is infected with scabies, he or she may not notice any itching for a number of weeks (four to six weeks). With subsequent infections, the itchiness will begin within hours of picking up the first mite.



Gastroenteritis*

The most common **cause of gastroenteritis in children** is a virus called the rotavirus. This virus is passed out in the stools (faeces) of someone with the infection. It can be transferred to food, objects and surfaces if the infected person doesn't wash their hands after going to the toilet.

Gastroenteritis can also have a number of other causes, including a **norovirus** infection or **food poisoning**, although these are more common in adults.



Colostomy Bags

A reasonable adjustment to swimwear can be made for pupils with a colostomy bag.

Swimwear should be worn as tight fitting as possible, whilst still maintaining discretion for the pupil.

It may be necessary for the pupil to wear a tight fitting t-shirt as well to ensure they feel comfortable.



Disabilities

The Schools' Swimming Service is inclusive and works with many partners to ensure its provision is effective in supporting each individual's needs.

The service must be made aware of any conditions which may affect the teaching of swimming e.g. ADHD, learning and physical disabilities and behavioural problems, either before or at the first session. If there are specific teaching strategies that are known to work then these must be shared with the Swimming Instructors so that they can adapt their sessions accordingly.

Adequate supervision must be given in the changing rooms. **Prior notification is required for the use of flatbeds and hoists** to ensure that they are adequate and meet the needs of the individual.

The school will be required to carry out an Individual risk assessment, generic templates can be requested from the service. A preliminary visit can be arranged with all partners at the pool.

Where 1-1 support is given in the class room then that will also be required at the pool. Initially that support should be in the water however, the aim is to withdraw the support to allow the individual to become an independent learner.

If there is no support given in the class room then you may still be asked to come and support your child either from the pool side or in the water, under the guidance of the Instructors who will give teaching points. This is particularly helpful when the child's needs or behaviour is distracting the Instructor's focus from the group.

Additional support to SEN pupils through Bridging Clubs helps develop the specific needs of individuals, creating pathways and opportunities for development of skills within the limitations of their disability. Enquiries should be made to: **schoolsswimming@nottsc.gov.uk**

Your Child's School Swimming Instructors

The Instructors carry out a dual role they are responsible for both teaching and lifeguarding the swimming sessions.

They are highly qualified and undergo regular training. The sessions are monitored to ensure that all the relevant guidelines are adhered to.

INITIAL ASSESSMENTS TO DETERMINE THE GROUPS must be carried out by the School's Swimming Instructors.

On their first session pupils will be reminded of the above policies and also of emergency procedures before they go in the water.

Every pupil will be assessed in relation to their ability to ensure that they are placed in a suitable area of the pool.

Swimming Instructors and school teachers have strict guidelines in relation to the number of pupils they are allowed to teach at various levels of ability. As a result your child may not be placed in the same area of the pool they are used to swimming in for private lessons.

Swimming Instructors and school teachers working outside of their teaching ratios are not insured.

Your child will receive a lesson according to their ability regardless of where they are in the pool, as the majority of activities taught in the deep end can also been taught in the shallow water.

First Aid

If your child requires any treatment then this has to be recorded at the centre and reported to the service.

If hospitalisation is required then this will be communicated to you or the other nominated emergency contact at the earliest opportunity. All accidents/ incidents are monitored and if necessary new policies and procedures are drawn up to reflect the new risk assessment.

The School Swimming Instructors are all qualified lifesavers and are responsible for ensuring your child's safety at all times.

Occasionally accidents do happen and they have to make a quick decision as to the most appropriate action to be taken to give the best outcome for your child.

A child getting into difficulty will be encouraged to get back into the water to ensure that they have a positive end to the lesson.



Observers

Observers are required to undergo an enhanced DBS check if helping on a regular basis or supervising / assisting in the changing of the pupils

Observers are fundamental in the school swimming lessons. Schools are required to provide a minimum of two observers however, where there are large

groups of children or two pools then schools are requested to bring an observer for each group.

The role of the observer is very important as they are another pair of eyes. Most schools ask parents for help in this role. Without observers the session **cannot** take place.

A full list of responsibilities is available from the school. A sheet **must be** signed by observers stating that they understand their roles and responsibilities. Any parent who is unsure of their role must ask the Swimming Instructors on poolside for clarification.

As the pool environment can be very warm it is important to wear suitable clothing e.g. lightweight trousers / skirt / shorts, short sleeved top and indoor only footwear (flip flops may be worn).

If wearing outdoor footwear, overshoes must be worn and the shoes must not be stilettos or have large heels.



Identifying tabards (provided at the centre) must be worn.



Observers must ensure they are fit to undertake their responsibilities. It is advised that they drink water to prevent dehydration, this must be in a plastic bottle.

Observers are given a signal horn which is essential to their role, it must be blown if the Instructors has to enter the water to affect a rescue.

It must also be used to alert the Instructors and School staff of any child or person who may be in difficulty, this will ensure the quick evacuation of the pool.



Observers are advised to monitor different groups each week and must be aware of the danger of focusing just on their child.

The service is very appreciative of the support given by observers.

THE SCHOOLS' SWIMMING SERVICE PLEDGE

The Schools' Swimming Service is dedicated to providing the opportunity for all schools in Nottinghamshire to access a high quality swimming provision (in accordance with its health and safety guidance document), to ensure that pupils can strive to meet the National Curriculum statutory requirement in swimming during their Primary Education.

The Service welcomes feedback from all parties.

Below is a extract from a letter of appreciation sent in to the service.

"I wanted to let you know how proud we are of Cameron. Last Monday (Bank holiday) we were on a family bike ride along Chesterfield canal. Whilst cycling near to the lock keeper, Cameron lost his balance on the bike and hit a bollard where he fell head first into the canal (along with his bike).

Cameron was extremely brave, composed himself and swam to the side of the canal, where his dad lifted him to the grass verge. As you can imagine, Cameron was very upset after the incident. When I asked him was he scared in the water, Cameron said he felt scared, but was not going to listen to fear in his head and would be brave and swim.

Cameron's swimming has greatly improved, this is due to the swimming lessons he had had when in year three (with school).

I wanted to let you know of my appreciation of those swimming lessons, it does not bear thinking about the incident if Cameron could not have swam.

Cameron is amazing to have had the confidence to swim back to the side of the canal without panicking. Thankfully apart from a couple of bruises from falling off his bike and hitting the bollard Cameron is absolutely fine. "

Kind regards

*Worksop primary school parent
during year 3/4*