

SUBJECT: AQUATIC THERAPY	REFERENCE #8141
DEPARTMENT: REHABILITATION SERVICES	PAGE: 1 OF: 6
APPROVED BY:	EFFECTIVE: REVISED:

**PURPOSE:**

- Develop pain management strategies to allow increases in active range of motion with patients who have been unsuccessful with land-based exercise.
- Develop strengthening programs for patients who cannot tolerate land-based exercise due to weakness, pain or neurological impairments.
- Develop functional mobility programs.
- Progressive strengthening programs from the water to land.
- Patient and caregiver education/instruction in customized exercise programs for patients experiencing cognitive and/or physical challenges.

**POLICY:**

- Aquatic therapy is considered to be a physical therapy modality and is subject to all existing physical therapy guidelines.
- Aquatic therapy is performed under the direct supervision of a licensed physical therapist with a physician's order.
- The therapeutic interventions administered are directly related to a written treatment regimen that includes goals approved and signed by the patient's physician.
- The Physical Therapist reviews the patient's current medical condition before aquatic therapy begins.
- Infection prevention and control policies are followed at all times.
- Patients who have opened wound(s) or are incontinent of bowel and bladder are not permitted to use the pool.
- All patients shall shower prior to entering pool.

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- Medicated topical ointments are covered with a bioculsive dressing.
- Staff trained to assist in emergencies are present at all times when Physical Therapist is working on a one-to-one basis with a patient.
- Rehabilitation staff demonstrate the knowledge and skill to perform the following:
  - Risk awareness and safety training
  - First aid
  - CPR/ACLS
  - Oxygen administration
  - Automated external defibrillation
  - Standard Precautions
  - Patient safety:
    - Awareness of safe length of immersion time in an enclosed pool area:
      - ◆ Immersion time for Rehabilitation Services staff depends on the situation and the individual. The current recommendation is a maximum of four (4) continuous hours per day in an enclosed area.
    - Self-rescue skills:
      - ◆ Self-rescue includes basic water adjustment skills of breath holding and recovery-to-standing abilities, basic assists, rescues, and emergency extrication in and from the pool.
      - ◆ Deep-water protocols require swimming comfort without flotation to save self.
      - ◆ Rehabilitation Services staff in deep water should have a monitor or assistant on deck with ability to effect a rescue.

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- Appropriate attire for the environment includes, but is not limited to, heat retention attire and foot gear.
- Emergencies:
  - ◆ An Emergency Action Plan (EAP) contains emergency evacuation plans, and is posted \_\_\_\_\_.
  - ◆ Drills are held \_\_\_\_\_ per year and the EAP is updated as necessary.
  - ◆ Staff shall complete an Incident Reporting Form for all accidents/incidents. These incidents are then investigated according to policy and procedure.
  - ◆ Post-traumatic stress disorder (PTSD) counseling is available to staff as needed following emergencies.
  - ◆ Rehabilitation Services staff are knowledgeable of the signs of physiologic stress demanding immediate attention (including, but not limited to, hypothermia and hyperthermia, seizure, low blood sugar, skin, eye and respiratory distress, heart attack or sudden cardiac events, stroke, and general fatigue or fear leading to distress).
- The ability to perform aquatic assists and rescues appropriate to the water depth of the pool and as required by the current safety and rescue certification staff hold:
  - Transfer protocols, pool entry and exit, equipment use and positioning in water:
    - ◆ Transfers in and out of the pool are appropriate and safe for the patient and Rehabilitation Services staff.
    - ◆ Positional, equipment and support transfers within the pool are appropriate to the needs of the patients.

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- ◆ A position of safety should always be maintained by Rehabilitation Services staff when assisting patient pool entries. Transfer method should be appropriate to the pool, ability of Rehabilitation Services staff to assist and ability of patient.
- ◆ Equipment for pool entry and exit transfers are non-slip and in safe working condition.
- Patient Communication:
  - ◆ Rehabilitation Services staff shall be eye-to-eye with the patient, with clear voice instructions and appropriate gestures and/or demonstrations.
  - ◆ Allow patients with visual impairment to wear their glasses in the pool.
  - ◆ Patients may need their ears clear of the water.
  - ◆ Rehabilitation Services staff speak with an audible, distinct voice.
  - ◆ Keep noise distractions in pool areas to a minimum.
  - ◆ Tactile markings are used to show water depth and pool deviations.
  - ◆ Maintain visual contact with patients who have hearing impairments.
  - ◆ Predetermined emergency signals are arranged with all patients.
- Pool Recommendations:
  - Required level of chlorine for aquatic therapy pools is \_\_\_\_\_.
  - Water depth should be appropriate for treatment protocol, practitioner size and functioning, patient ability, and monitoring of the entire treatment environment.

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- Facility design is in compliance with ADA standards.
- Daily inspection of facility to determine safe usage of pool is performed by \_\_\_\_\_.
- Problems and corrective action needed are noted and referred immediately to appropriate staff.
- Rescue equipment and first aid supplies are checked for location, serviceability and complete supply. They are located \_\_\_\_\_.
- Signage stating pool rules and cautions is clearly posted.
- Any hazards are clearly marked.
- Water chemistry, including water-testing procedures, chemical accident procedures and general sanitizers is the responsibility of the pool operator:
  - Rehabilitation Services staff are responsible for reviewing current postings and testing when indicated to determine the safety of the water.
  - Rehabilitation Services staff are also responsible for immediately reporting any water quality problems and immediately clearing the pool for any infectious agent accident.
  - Rehabilitation Services staff are knowledgeable of optimum water and air temperatures and humidity levels to determine the appropriateness of pool usage.
- During severe weather and lightning storms, shall follow the Safety Standards for Therapy Pools that is based on recommendations by the National Weather Service and the National Lightning Safety Institute.

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**NOTES:**

- Check with your State or Local Health Department for guidelines.
- Check with state and local rules and regulations to see if a Life Guard is required.
- Operations for pools are regulated by your State, County and/or Local Health Department.
- Physical Therapist rendering aquatic therapy is governed by the State Practice Acts.

**REFERENCES:**

- Safety Standards for Aquatic Therapy and Rehabilitation Practitioners, Published by the Aquatic Therapy and Rehab Institute, Author, Dr. Mary Wykle, 2004, <http://www.atri.org/articles/Standards.pdf>
- American Physical Therapy Association (APTA), <http://www.apta.org/>