

2. MEDICAL INFORMATION *(needs to be completed by everyone entering the pool)*

Please give the names of medical conditions or problems, if any, that you suffer from:

The reason you wish to use hydrotherapy:

Is any of the following applicable to you?

HIGH RISK	Yes	No	If “Yes”, please elaborate
Do you suffer from low blood pressure [normal is 120/80 – 120/90]?			Controlled?: Y <input type="checkbox"/> N <input type="checkbox"/>
Do you have any known aneurysms (a bulge in the wall of a blood vessel)?			
Does your weight exceed the hoist allowance of 22 stone/140kg?			
Have you recently suffered any of the following:			
- A stroke?			Date: _____
- Had a blood clot?			Date: _____
- Had a heart attack?			Date: _____
- Had a severe asthma attack?			Date: _____
- Uncontrolled cardiac failure?			Date: _____
Are you allergic to chlorine?			
Do you get angina attacks at rest?			
Are you or may you be pregnant?			
Do you suffer from shortness of breath at rest?			
Do you have shortness of breath when lying flat or at night?			
Do you suffer from diabetes?			Controlled?: Y <input type="checkbox"/> N <input type="checkbox"/>
Do you suffer from epilepsy?			Controlled?: Y <input type="checkbox"/> N <input type="checkbox"/>
Do you have any open/infected wounds or invasive tubes?			
Do you suffer from faecal incontinence?			

If you have ticked “yes” to any of the conditions listed above, you will need to get this form authorised by your GP or nurse before using hydrotherapy

<p>*For GP/Nurse use only*</p> <p>Please sign below to verify that your patient is safe to use hydrotherapy:</p> <p>“I certify that _____ is safe to use hydrotherapy.”</p> <p>Signature: _____ Print Name: _____</p> <p>Practice/surgery: _____ Date: _____</p> <p>Contact number: _____</p>	<div style="border: 1px solid black; padding: 5px; background-color: #cccccc;">STAMP</div>
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Is any of the following applicable to you?

<u>LOW RISK</u>	Yes	No	If “Yes”, please elaborate
Have you had sickness, diarrhoea or a high temperatures in the last week?			
Have any contact lenses/impaired vision/sensation/hearing?			
Have any problems with swallowing ability/aspiration risks?			
Do you have a tracheostomy?			
Do you have an uncontrolled thyroid deficiency?			
Do you have neutropenia/a very low white blood cell count?			
Are you prone to blackouts?			
Have you had radiotherapy treatment in the last 6 months?			
Do you have any fear of water?			
Do you suffer from haemophilia?			
Do you have MRSA?			
Do you have any skin problems, or tubes such as a catheter?			
Do you have any ear or eye problems that you feel we should be aware of?			
Have you had renal failure?			
Do you use / need additional oxygen I.e from a cylinder or concentration machine?			
Have you ever had a condition that has severely affected your immune system?			

If you have ticked “yes” to any of the conditions listed above, you may be required to provide extra information before we ascertain whether it is safe for you to go into the pool.

Please use the box below if there is any additional information you feel it is important for us to know about – thank you.



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3. FOR GROUPS, CARERS, SCHOOLS ETC.

Please state which school, care home or organisation you are attending with:

If you are a carer, please provide the name(s) of the person/persons whom you are caring for:

4. DECLARATION

"I sign this form to say that I have read, understood, and agreed to the Terms and Conditions and that I have completed this form to the best of my knowledge."

"I give consent to share my medical information with the staff of St George's Community Hydrotherapy Pool and to be contacted by them"

Signed: _____

Please add your name here if you have completed this form on behalf of a service user:

Name: _____ Relationship: _____

Data Protection:

Vivacity will process your **personal data** lawfully and fairly. We will ensure that when you trust us with your **personal data** we will only process it for the reason it was collected for. For more information on our privacy policy please visit <https://vivacity.org/privacy-policy/>

Please send the referral form to the following address:

St George's Community Hydrotherapy Pool
367 Dogsthorpe Road Peterborough, PE1 3RE
01733 453 583
stgeorges@vivacity.org

Terms and Conditions for Individual Users

Welcome to St George's Community Hydrotherapy Pool. So that we can ensure all users enjoy this facility, it is mandatory that everyone understands and abides by these terms and conditions. Please take the time to read this document. We will then ask you to fill in the self-referral form.

Before entering the pool

1. All users must report to the reception desk on entering the facility.
2. A self-referral form must be completed by everyone who is using the pool before they enter.
3. **A GP note or signature on your self-referral form may be required if we believe your condition puts you at potential risk using hydrotherapy (this is compulsory if you have a "high risk" condition)**
4. If there is a change in your condition from the time you completed the self-referral form, you must advise us accordingly.
5. Sessions must be pre-booked, either by telephone or by booking in advance at reception.
6. Payment for your sessions must be received prior to entering the pool – we cannot accept retrospective payments.
7. We are only able to accept cash or card payments,
8. **Please do not enter the pool if you have:**
 - a. Any broken skin lesions
 - b. Any illness including colds and angina attacks within the preceding 48 hours
 - c. Any bladder or bowel instability
9. No persons under the age of 16 will be allowed to use the pool unless accompanied and supervised by a responsible guardian or adult.

In the pool and on poolside

10. Sessions last for 30 minutes in the water, and bookings are made for 1 hour, including changing times.
Do not exceed the recommended period of 30 minutes in the pool. This is for your own health and safety. Hydrotherapy is purposely for therapeutic aid, which differs from other pools. You are at potential risk of exhaustion and dizziness if you stay in for longer.
11. No more than 12 people may use the pool at any one time.
12. Pool users must provide their own towels and swimming costumes
13. Appropriate swimwear must be worn at all times when using the pool. Anyone wearing inappropriate attire will be asked to change or leave the premises.
 - a. Waterproof nappies are to be covered by appropriate swimwear
14. A shower **must** be taken prior to entering the pool, and after using the pool.
15. All equipment must be used appropriately having regard to the health and safety of you and others

Cancellations

16. We require 24 hours' notice if you wish to cancel or change your appointment. Availability is often limited, and this gives us sufficient time to offer your appointment to someone else who needs it.

General

17. Smoking is not permitted on any part of these premises.
18. Please take all clinical waste, nappies and pads home with you. Do not try and dispose of these at the pool.
19. **All accidents or incidents should be reported immediately to reception or to the lifeguard.**
20. Please refrain from running, jumping, or any behaviour that causes unnecessary disruption to other service users.
21. No valuable personal effects should be brought onto the premises.
22. St George's Community Hydrotherapy Pool does not accept liability for any loss, damage or injury on our premises. Customers enter the facility at their own risk.
23. Please respect our staff members and other service users. Abusive and intimidating behaviour will not be tolerated.
24. We reserve the right to refuse admission and users may be asked to leave if their behaviour is deemed inappropriate

Cancellation charges

1. Cancellations

- a. Customers need to give more than 24 hours' notice to cancel a session.
- b. All cancellations by customers less than 24 hours before their session will be charged at full price.
- c. A cancellation needs to have been provided either by phone or by e-mail with at least 24 hours' notice. All cancellations need to be received by a member of staff.
- d. Private hirers will need to give 1 weeks' notice to cancel a session. If less than 1 week is given the session will still be charged.

2. Failure to attend with no cancellation

A booked session at the pool which has not been cancelled in advance of the session and is not used will incur the full charge for that session, irrespective of the reason given for that non-use of the session

3. Pool closures/cancellations

- a. The pool has the rights to cancel sessions up to 1 hour in advance of a scheduled booking. All efforts will be made to contact the user / hirer. It is the users and hirer's responsibility to ensure the pool has up to date contact details.