



## ISR Safety Protocols

ISR Information Sheet/  
Protocol 01S

### Safety as an ISR Priority

**Registrations and Updates:** A medical questionnaire is completed online for all students prior to scheduling lessons and this information must be updated at least every 6 months while in ISR lessons. The Registration Evaluation Team (RET) will obtain additional information when necessary. The parent and the Instructor will be notified if additional safety protocols or modifications to the lesson plan are indicated based on the RET's assessment of the registration information. Medical Lesson Updates (MLUs) are required when a student has missed lessons, visited a doctor, is taking new medication or receives a new diagnosis. All registration forms, including updates and MLUs, are reviewed with parents prior to starting or resuming lessons. See ISP 13 for more detail about registration protocols.

**Lesson Structure:** ISR lessons are conducted with one Instructor and one student in the pool at a time. They are held 5 days a week, for no more than 10 minutes a day. While the average student becomes fully skilled in approximately 6 weeks, many factors influence the amount of time it takes, including: age, medical/developmental history, prior aquatic history, prior use of flotation devices, attendance, and illness. Since the actual time needed for skill attainment is variable, arrangements should be made to allow a child to remain in lessons until they have obtained developmentally appropriate ISR skills.

**BUDS Discussion:** BUDS stands for Bowels, Urine, Diet and Sleep. Individualized details are discussed daily before each ISR lesson to allow the Instructor to make modifications based on the information gathered. This information is recorded by the Instructor and signed by both the Instructor and parent/caregiver daily. See ISP 1B for more information.

**Head to Toe Assessment:** The Instructor will use the initial few seconds with the student for a head to toe assessment. This is when the Instructor will get baseline information for that child. The Instructor is taking note of things such as energy level, emotions, runny nose, congestion, skin redness, rashes, or bruising. This Constant Eyes On (CEO) assessment is ongoing throughout the lesson and this data is used to determine lesson pace, length, and approach.

#### The Registration Evaluation Team (RET)

The RET is responsible for the review, collection, evaluation, and decision making for all participants in the ISR program. The RET advises Instructors of specific protocols and processes to ensure a safe lesson experience for every child who goes through the ISR program.

#### Registration Console

The Instructor's registration console contains information about registration status and any assigned safety protocols. This data must be verified by the Instructor prior to starting any student in lessons.



**Vasoconstriction Checks:** Vasoconstriction testing is used to determine temperature fatigue. Because temperature fatigue occurs prior to physical fatigue, these checks are critical in determining a safe and effective endpoint to the ISR lesson. Vasoconstriction checks can occur on the back (VCB), the foot (VCF) or the hand (VCH). Instructors will get a baseline vasoconstriction test at the beginning of each lesson and will continue to monitor regularly throughout the lesson, about every 1-2 minutes. A VCB of 3 seconds or a VCH or VCF of 5 seconds will indicate the end of the lesson. Additional details can be found in ISP 23.

**Prompts and Procedures:** ISR Prompts and Procedures (P/Ps) are performed safely and gently, giving adequate support to the head and neck without allowing gravity to take over. ISR Instructors present various controlled P/Ps to students which include scenarios that a child may experience if they were to fall into a body of water. These safe presentations are the only ones approved within our safety protocols. No child is ever dropped, pushed or thrown in the water during ISR lessons.

**Abdominal Distention Management:** Students learning aquatic skills may be prone to swallowing air, small amounts of water, or crying during the lesson. These factors, along with dietary considerations, can all lead to a distended abdomen. Any level of abdominal distention can interfere with safe and effective lessons and will be managed with frequent burping. Students are burped utilizing gentle massage up the spine with the child facing away from the Instructor, while seated on the knee or supported across the chest to avoid adding any abdominal pressure. Visible abdominal distention that can not be relieved with burping will signal the end of the lesson. More information can be found in ISP 22.

**Chin Protection:** The ISR Instructor will provide chin/mouth protection for the student at all hard surfaces in the pool. This includes all edges, swim bars, steps, and ladders.

**Seven Second Rule:** The 7 Second Rule exists because it is approximately 1/3 of the time period that defines apnea (or cessation of breathing) by the American Academy of Pediatrics. No student is to go longer than 7 seconds without an effective breath. The 7 Second Rule is always in effect, even when a child is not submerged. Instructors will make sure that adequate respiration is taking place at all times. See ISP 18 for further explanation of the 7 second rule.

**Ten Minute Lesson:** No ISR lesson should surpass 10 minutes in length due to the likelihood of physical fatigue, which can be dangerous physically and does not honor the principles of sensorimotor learning. The end of the lesson is signified by the best approximation of the skill that is being shaped, rather than a set amount of time. Additional information can be found in ISP 18.

**Handouts:** After lessons, students are handed out feet first onto two towels to rest on their left side to recover. The Instructor will keep their hands on the student until the parent has a secure hold on the child. The left-sided position is the optimal position for gas release while also allowing the student's heart and respiratory rates to return to normal. A total of three towels are used to eliminate the sharing of a common surface as the student rests on their side after each lesson. Two towels are layered on the surface of the deck and the third is used to cover and dry the student.