USSSA COVID-19 ACTION PLAN 2.1

“My course is set for an uncharted sea.”

DANTE ALIGHIERI
We have all been thrust into uncharted seas.

We have no choice; this has come upon us whether we want it or not. We have dealt with the initial shock of Covid19. Now is the time to plan what our next steps are and how to prepare ourselves.

For about the last week or so, we have been a part of a number of calls and wanted the association to be able share best practices and what we envision we should be doing to reopen safely. This is why we are assembling best practices and resources. We realize that individual situations will be different. These will be dictated by local authorities, your physical plant, your community norms and how you teach your lessons. We envision this to be a living document that will benefit as we all learn what is working and what is not.

We would also like to thank those that helped in creating this document. We wish to thank the Aqua-Tots Corona Task force and Ron Sciarro for sharing their document. It was created with the help of CEO’s from Goldfish, Emler, Hubbard and Cal Elite and others. Other input has been provided during zoom calls, research and phone calls. Miren Oca has also been a leader in trying to work through these ideas. Many others have contributed and if we missed you know that we appreciate every contribution. We are all smarter than any one of us. The task force chose the tagline of “Better together-Making a difference in our communities.” We would also like to thank Liz Claytor and Sara Biskie for helping with this project. A big thank you goes to Michele Hlavsa and Joe Laco from the CDC for taking time with us to review these recommendations and provide unofficial feedback for our update.

We also see there is a two prong approach to take. First, we need to communicate and lobby with our local authorities to make sure we are able to open at an appropriate time. Many city and county pools are not going to open this year. Some of this is due to budget, some is due to concern over crowds gathering. We should work vigorously to make sure we do not get lumped into this group as we operate in a controlled learning environment. We need to provide our local authorities with the steps we will use to safely open. In order to do this we are working on a letter to use to lobby your governor, state legislature, county bodies and health departments. Whoever will be making the decision if pools can open in some phase of their reopening plan. You will find in this document a letter which you can edit and personalize to your situation. I urge you to take this step now. Don’t wait. We would also urge you to band together with other swim groups and businesses in your area. Politicians are more likely to listen to a group. You may not have much luck initially but keep plugging away and eventually you will find a sympathetic ear. Enlist anyone who you think may be able to help you. Don’t forget all your swim families that believe in you and want to see you succeed.

Determine who will be making these decisions and start a dialogue. This is imperative so that you can open when allowed. If you are unsure where to start, your local Chamber of Commerce might be able to make some introductions or referrals for you. Realize also that you don’t have to open if you are not ready or do not feel comfortable to open. But having options is preferable to not being able to open because of conditions that do not apply to your business.
An important disclaimer, we are gathering information from many sources. You must use your own knowledge and best judgment. If in doubt consult your local professionals and authorities.

These best practices are being created April 26, 2020 and updated on July 8, 2020. You may or may not use them. Using these best practices in no way guarantees that communicable diseases, including but not limited to COVID–19 will not be present in a facility; that people actively infected with communicable diseases might be present in the facility nor does implementation of these best practices guarantee that a person or persons will not contract COVID–19 or other communicable diseases from persons or contact within such facility.

Before we get to the best practices we need to think about a few things. We need to make sure that our messaging to our families matches our actions. We need to make sure that these are actions we can do consistently and sustain for as long as needed.

As we talk about social distancing, realize that a 6ft radius circle has an area of 113 sq ft. This is one way to calculate how many people can be within your building. We need to calculate how many people we can have at a facility at a given time. Divide sq footage of the common area of the building by 113 if you chose to use that number. We don’t think we can have 2000 children in our facility in the near term. So we need to come up with what we think our program will look like and that may make some of our best practices easier to define. With fewer people in the building and the pool, it may mean that we have fewer concerns about social distancing.

We also recognize that for all us there will be phases of opening. Conditions that exist on day one will be different 3 months in. So defining our conditions by phase may be a good exercise. We are currently hearing that about 65% of families are replying to surveys that they will return when we open. The association is preparing a survey you can use with your families. This survey should help us all understand better what our families expect.

We already know that they will expect us to have clean

facilities and that we will keep their children safe. That has not changed but we must show the enhanced safety protocols and communicate what we are doing. We have to regain their trust as every business does.

The CDC does not consider properly maintained pool water to allow the spread of Covid-19. They are more concerned about proximity to people in our building; whether in lessons or in the lobby. It has been pointed out that this has not been proven. CDC acknowledged this. They are basing this on other coronaviruses such as SARS and MERS. The research is mostly being focused on testing and treatment. We may not see specific Covid-19 research for some time. So with a phased open plan with occupancy numbers in place now we can determine how to best open our businesses back up. As you look at this list, remember that not all these will apply to your business. Feel free to add or subtract to the list to make it work in an effective and sustainable way for your business.

Things to consider are if you can have separate entrance and exit doors, what are areas that are congested and how can we minimize that. How can we reduce the amount of things that have to be touched in our building. Some of these will be easy, some of these will take some time. But think about how to do this in phase 1 of your open and how it might be modified as you go through subsequent phases. These best practices are written in the affirmative because that is easier. Edit to what will work best for you and your company.

One of the first things to do is appoint someone to be your COVID–19 officer. This can be you but make sure someone is following government and health agency news so that you are up to date on the most recent information. It is important to take the recommendations in this document and choose how your facility will respond. This can be the basis of an infectious disease action plan to have in a folder in case anything like this happens again. Could be a more localized infectious disease but better if you are prepared.

It is imperative that our employees feel safe coming back to work. If we do not have their trust then we will have much bigger problems. Get input from staff and make sure everyone is aware of what is being done to protect them.
• Create your new operational manual. Make sure it is all in writing and set your policies and expectations including any adjustments you are making to your staff sick leave policy. As well as procedures if you find out you haven had a confirmed COVID-19 case on property. The CDC website has Resources for Businesses and Employers with this information.

• Make sure everyone is on the same page and consistent. Explain the how and why. Now is a good time to set up a group to work through how this will be implemented. Host the meeting virtually so that this can be in place.

• Make sure to assess the risks on an ongoing basis. This is a very fluid situation and we need to be nimble to keep moving forward.

• Once we have families back in our facility, How are things going? Are there any unintended consequences? Are there new threats?

• Host focus groups with your families to gauge their response to new steps.

• Create an implementation plan and educate your team members and families.

• Consider if you want to change your policies and waivers to include infectious diseases. Consult with your lawyer if you decide to add to your policies.

As far as customers, research is showing that they will endure a little inconvenience if they understand it is for their protection. So make sure you are telling your story and letting them know beforehand what has been changed and what it will look like for them to enter your business. Everyone does better with change if they are prepared for it.
Area 1
Entering the Building - Parking Lot, Front Door & Entry Area

Physical Considerations for Front Door and Customer Service Desk

- Signage in the parking lot to inform parents what to do.
- Minimize touch to enter the building. If you have powered doors, are you able to open without touching the actuator? You can add infrared to open the door but that could be a safety issue. If a child can cause the door to open without adult assistance, there would be a chance for the child to exit the building alone. You can add touchless actuators as well. Consider the option for a foot operated actuator or one that can be used with someone’s elbow as you see in hospitals. Option would be to have someone open the door, who will also administer temperature checks if you are going to perform those. Important to select a staff member that is NOT a high risk individual for COVID-19 as well as provide appropriate PPE for these people and proper training to work this position.

- Need to protect customer service members at the front desk. Consider minimizing the number of those working at this position as you may have fewer customers in building. Can you route calls to phones that are not customer facing or if fewer customers there may be fewer calls.

- Consider acrylic shields for team members in this role. We have seen those that were attached to the counter. We have also seen a sheet of plexiglass hung from the ceiling by chain and s hooks if you do not want to damage the counter. We have also seen free standing shields but they tend to be more expensive. Barriers should be large enough so that if anyone were to sneeze it would protect your customer service team member. An alternative is to place an additional table or chairs in front of your front desk so that customers are at least 6 feet away from your customer service team members.

- If you have space, mark doors as enter and exit or use a different set of doors for entry and exit. Post signage if you are going to ask that those who have shown symptoms do not enter your building. On this sign, have the screening questions you are using and have a space for maximum occupancy. Leave the actual number blank so you can change it over time. Could have verbiage “Following state and county guidance in regards to number of people allowed to gather.”

- Consider Cones or Tensa Barriers or chairs with ropes to demarcate inbound one way traffic and outbound one way traffic.

- Consider only allowing 1 parent per child into the building.

- Consider asking that families wait in their cars until just before time to enter for their lessons. Is there some sort of system that you can use to text them?

- Ask that students arrive in their swimsuits. May not be practical for babies but if we can reduce the amount of time that someone is in the building, the safer we will be.

- Need to mark 6 ft distance on the floor and in the parking lot if they are going to have to queue for getting temperature taken. Make sure markings have non-skid coating.

- Have arrows to guide them how to maintain safe distance and how to get into the pool if you have changed traffic patterns. If you decide to use stickers on the floor make sure they have a non skid coating.

- Consider requiring hand sanitizing for all parents and children entering the building.

- Need a touchless hand sanitizer dispenser at this location or a customer service member pumping sanitizer for customers.

- In every instance where hand sanitizers are mentioned, you can substitute hand washing. Hand sanitizer may be in short supply for sometime. There also may be a shortage of touchless sanitizer dispensers. If you use a local janitor supply, reach out to them. Cintas is a sponsor of the US Swim School Association and they also supply these items.

- Post signage about 20 second hand washing and proper technique near all lavatories and hand washing stations.
FOR INSTRUCTORS - ENTERING THE BUILDING

- Staff are asked to arrive to shift in uniform and with face masks that have been provided by swim school.
- Staff is asked to bring minimum personal items. If possible only a towel and water bottle. It is suggested that staff leave additional personal items in vehicles or better yet at home.
- Customer Service/Greeter will meet staff at the front door and open the door to decrease touch points.
- Customer service members will ask the following questions of each staff member: First team member in the building will start the process. (This could also be something they answer on their personal phone as a form and submit to the company.) It would be possible to cover those that cannot work with paid leave with the Families First Coronavirus Response Act.
  - Have you experienced any of the following symptoms in the past 48 hours:
    - fever or chills
    - cough
    - shortness of breath or difficulty breathing
    - fatigue
    - muscle or body aches
    - headache
    - new loss of taste or smell
    - sore throat
    - congestion or runny nose
    - nausea or vomiting
    - diarrhea
  - Within the past 14 days, have you been in close physical contact (6 feet or closer for at least 15 minutes) with a person who is known to have laboratory-confirmed COVID-19 or with anyone who has any symptoms consistent with COVID-19?
  - Are you isolating or quarantining because you may have been exposed to a person with COVID-19 or are worried that you may be sick with COVID-19?
  - Are you currently waiting on the results of a COVID-19 test?

If you answer yes to any of these questions go home and seek medical advice. Notify your supervisor that you will not be able to work.
- The reason behind this set of questions is being able to pre-screen people coming into our building. If we can eliminate those who are openly symptomatic or may have been exposed then we dramatically lessen the risk of infection in our building. This will lead to a better sense of safety for those inside the building. It will cut down on those who could carry the virus. It is not absolute. It is a further layer of protection.
- A customer service member will check staff’s temperature at the front door to ensure the safety of all families and staff in the facility. Ensure this the customer service member is not someone from the high risk group for getting COVID-19. If staff member’s temperature is at or above 100 degrees they will be asked to consider seeking immediate medical attention and not be allowed in the facility. You must consider next steps in order for them to return for work.
- A free-standing hand sanitizing station is at the front door for all staff entering the facility to utilize. If you cannot do this then you could also have someone dispense the hand sanitizer as they enter the building but ensure they are not from a high risk group as this position interacts with a number of people throughout the day.
- Clocking in for shift should be hands free. If not possible then sanitizing wipes should be provided to wipe down the time clock device or laptop. Wipe down the device, clock in and then wipe down the device again.
- Everyone entering the pool room should use hand sanitizer or wash their hands before teaching classes.
- If employees are using lockers they should be wiped down before and after use.
- Roster and class rolls will be posted and instructors should prepare for classes.
For Customer Service and Management - Entering the Building

- Staff are asked to arrive for their shift in uniform and with face masks provided by swim school.

- Staff is asked to bring minimum personal items. It is suggested staff only bring water bottles. It is suggested that staff leave additional items at home or in their vehicle.

- A customer service member will greet staff at the front door and open the door to decrease touch points. Ensure that individual is not in the high risk group.

- Customer service members will ask the following questions of each staff member: First team member in the building will start the process. (This could also be something they answer on their personal phone as a form and submit to the company.) It would be possible to cover those that cannot work with paid leave with the Families First Coronavirus Response Act.
  - Have you experienced any of the following symptoms in the past 48 hours:
    - fever or chills
    - cough
    - shortness of breath or difficulty breathing
    - fatigue
    - muscle or body aches
    - headache
    - new loss of taste or smell
    - sore throat
    - congestion or runny nose
    - nausea or vomiting
    - diarrhea
  - Within the past 14 days, have you been in close physical contact (6 feet or closer for at least 15 minutes) with a person who is known to have laboratory-confirmed COVID-19 or with anyone who has any symptoms consistent with COVID-19?
  - Are you isolating or quarantining because you may have been exposed to a person with COVID-19 or are worried that you may be sick with COVID-19?
  - Are you currently waiting on the results of a COVID-19 test?

If you answer yes to any of these questions, go home and seek medical advice. Notify your supervisor that you will not be able to work.

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- A customer service member will check staff’s temperature at the front door to ensure the safety of all families and staff in the facility. If their temperature is at or above 100 degrees they will be asked to consider seeking immediate medical attention and not be allowed in the facility. You must consider next steps in order for them to return for work.

- A free-standing hand sanitizing station is at the front door for all staff entering the facility to utilize. If you cannot do this then you could also have someone dispense the hand sanitizer as they enter the building.

- Clocking in for shift should be hands free. If not possible then sanitizing wipes should be provided to wipe down the time clock device or laptop. Wipe down the device, clock in and then wipe down the device again.

- Each customer service member is assigned a position to work during their shift. Once assigned the customer service member will use supplied wipes to clean all their equipment, including keyboards and phones, at the start of shift and at end of shift.

- Hand sanitizer will be provided for staff to utilize.
CUSTOMERS - ENTERING THE BUILDING

• A customer service representative may greet the customer at the front door and open the door for their family, to decrease touch points. Ensure this staff member is not someone at high risk for COVID-19, provide them with the proper PPE and training.

• A customer service representative may check the customer’s temperature (if you decide to do this or if dictated by local mandates) at the front door to ensure the safety of all families and staff in the facility. Ensure this staff member is not someone at high risk for COVID-19, provide them with the proper PPE and training. If customer’s temperature is over 100 degrees, suggest they seek medical care and do not allow them to enter the building. (Need to establish what next steps are for this and review your makeup policies as well as consider staggered start times to minimize lineups at the entry door).

• A free standing hand sanitizer station is at the front door for everyone who enters to use or customer service representative to dispense. Decide if you are going to require all to use or just place prominently.

• Request confirmation of correct/updated contact information for all customers entering the building so you are able to contact everyone in the event you need to notify them of a later confirmed case. Keep accurate records of who is in the building at what day/times. Ensure you are following all local tracking requirements.

• Signage before someone enters the building asking the following questions:
  ◦ Have you experienced any of the following symptoms in the past 48 hours:
    • fever or chills
    • cough
    • shortness of breath or difficulty breathing
    • fatigue
    • muscle or body aches
    • headache
    • new loss of taste or smell
    • sore throat
    • congestion or runny nose
    • nausea or vomiting
    • diarrhea
  ◦ Within the past 14 days, have you been in close physical contact (6 feet or closer for at least 15 minutes) with a person who is known to have laboratory-confirmed COVID-19 or with anyone who has any symptoms consistent with COVID-19?
  ◦ Are you isolating or quarantining because you may have been exposed to a person with COVID-19 or are worried that you may be sick with COVID-19?
  ◦ Are you currently waiting on the results of a COVID-19 test?

If you answer yes to any of these questions go home and seek medical advice.
AREA 2
LOBBY, AREA AFTER ENTRY
NOT INCLUDING ENTRY AREA, CHANGING ROOMS & POOL

PHYSICAL CONSIDERATIONS FOR LOBBY

• Markers denoting 6 ft social distancing should be placed on the floor in front of the front desk. A sign should be located at the end of the line communicating that if all the floor markers are occupied please wait in a chair in the lobby until there is a marker spot in line available.

• The marker directly on the floor in front of the front desk should be placed 6 feet back. Some of these considerations were covered in the last section. You may want to utilize an acrylic shield in front of your customer service team members. You can also utilize a table, chairs or similar in front of the front desk in order to create a physical barrier. The goal would be to create 6 feet of separation. Barring that then an acrylic or plexiglass barrier would provide protection for team members in this area.

• If you have chairs in this area consider reducing the number of them. Consider if you have diminished capacity due to social distancing then reducing chairs will be easy. Consider marking where chairs go by using tape on the floor to denote 6 feet. If your chairs do not move consider signage and tape on chairs to mark social distancing. If you have benches then perhaps one family per bench or a staggering so that no one is too close together. Allow parents to view their child’s lesson comfortably with safety precautions in place. You could also consider a service such as USSSA Sponsor, SpotTV to allow for remote viewing of lessons.

• Consider ways you might be able to increase introduction and circulation of outdoor air as much as possible by opening windows. Be cautious of open doors that could allow children to go in or out unattended by an adult.

• All shared items should be removed from the front desk. This would include pens, flyers, business cards etc. Every team member should have their own supply of these items. If pens must be used they should be wiped down before and after use. Remember especially anything we touch with our hands should be cleaned and then disinfected.

• Touchless hand sanitizer should be provided as much as possible. If we can have it available conspicuously then the perception will be that it is used frequently.

• Drinking fountains don’t have clear indications. We have seen them placed out of order in retail establishments. May need guidance from your local health department if they are requiring them in order to operate. The water itself is not the issue. The issues seem to be touching the button or bar to make water come out. The other issue is putting your face near a surface that could contain the virus. Could be overcome with disposable cups and wipes to use to operate drinking fountains. Be sure to provide a waste receptacle if you go this route.

• Consider getting rid of lost and found for the near term. Especially for clothing items. Do not shake any towels or clothing items as this could put virus in the air.

• Customers may be very sensitive to hygiene for some time and anything that even looks messy could translate to unclean in their minds. Now more than ever it is important that everyone’s’ dress, hair, nails as well as work areas that customers can see are tidy and spotless. In addition, if you have an outside cleaning service, be sure to remove any paperwork from area to ensure all surfaces are cleared and ready for cleaning.

CHAIRS AND TABLES IN LOBBY AREA

• All seating in the lobby will be adjusted to abide by the social distancing guidelines. They should be monitored. Family groups can sit together but enforce social distancing for all others.

• Chairs and tables should be cleaned and then disinfected on a regular basis. Customers should see these measures and be educated on them. Much like seeing tables at a restaurant being wiped down. Interval will depend on how many times new families are entering the space at least several times an hour. Provide sanitizing wipes and paper towels for those who want to wipe down their own chairs. Provide waste can for used wipes and towels and remove waste frequently.
AREA 2
LOBBY, AREA AFTER ENTRY
NOT INCLUDING
ENTRY AREA, CHANGING
ROOMS & POOL

PLAY AREAS

- Remove all small toys and close the play area.

RETAIL DISPLAY SNACK BARS AND DRINKS

- Retail displays should be moved off the sales floor or placed off limits. Consider creating an online store or only allow customer service team touch items.

- If you sell food, consider suspending sales for the near term. If you are going to continue selling food, check with local mandates, also check your expiration dates after being closed for a period of time as some foods may be past expiration date. Consider limiting food to only prepackaged foods and offering single use utensils.

- Decide how you will handle it if someone wants to try on a swimsuit.

- Touch areas of vending machines should be part of your cleaning process or consider removing your vending machine completely.

INSTRUCTORS - LOBBY

- Instructors should maintain 6 ft social distancing and hand washing/sanitizing regimen in this area. They should spend little time here. They should only transit as necessary and be wearing a cloth face mask.

FRONT DESK FOR CUSTOMER SERVICE TEAM AND MANAGERS - LOBBY/CUSTOMER INTERACTION

- Review physical considerations above. The goal is to protect everyone in our facilities. We can best do this by enforcing social distancing and wear cloth face masks at all times out of the water. Follow local directives concerning masks for children and other requirements.

- Consider only allowing credit/debit card transactions if your software will do this. Consider not allowing cash transactions in the near term. PINs are not required for most transactions any longer. The major credit card companies also do require signatures.

- Try to minimize paper forms. Try to convert to electronic and have them fill out on their own devices. Remember if you still have to use clipboards or pens those should be sanitized before and after each use.

- Consider offering a hygienic option for swimmers to store their masks while in lessons, for example a small paper bag with a sticker or an envelope.

- Make sure everyone is assigned a station and only works from that station. Clean the station before and after each shift. Wash hands at intervals throughout the shift.
CUSTOMER FLOW IN LOBBY

- Families are asked to only have one adult family member accompany each student to their swim lessons and for students to arrive dressed for lessons.

- Families will be asked not to arrive prior to 5 minutes before their scheduled class time. If families arrive early, they will be asked to wait in designated areas either inside the facility or outside the facility depending on physical layout of the facility. Wherever we are asking them to wait; there should be signage to denote 6 foot isolation. They could wait in chairs if you are able to maintain social distancing in your waiting area.

- Once they enter the facility, they will sit in the lobby or wait in line six feet apart with their parent until called by name to enter the pool room.

- Consider suspending use of necklaces, wristbands or cards used to identify which child is assigned to which class. In phase 1, with fewer students in the building we should be able to get them to proper class.

- Consider suspending use of any kiosks or other methods that require touch for customers to access classes.

- Students will be called to class by customer service team members who will hold doors for them and direct them to their classes. Consider ways to create 1 way traffic on your pool deck so that we don’t have students crossing each other’s path. Optionally, you could schedule a break between when classes end and when the next classes start.

- At the end of class, parents will return to the door that the child entered into the pool room to retrieve their child. There will be marking on the floor to indicate where they should stand to ensure they are 6 feet apart.

- No interaction between teacher and parents at this time. Need to determine how to manage communication with parents during this time.

- If it is necessary for a family to use a dressing room or bathroom they may do so at this time. Consider closing some changing rooms and bathrooms if you are unable to maintain social distancing. Consider a system used in some clothing stores of having a dressing room assigned and then cleaned before it can be used again. Some type of card could indicate a room is available for use. Card could be turned from green to red to indicate it needs to be cleaned before it can be used again.
AREA 3
POOL ROOM

PHYSICAL CONSIDERATIONS FOR POOL ROOM

- Remove all small toys that have holes or have a soft texture.
- Clean all hard toys, such as dive rings etc after each use. They should be cleaned and then sanitized. CDC solution (To make a bleach solution, mix 5 tablespoons (1/3rd cup) bleach per gallon of room temperature water OR 4 teaspoons bleach per quart of room temperature water. Bleach solutions will be effective for disinfection up to 24 hours. Be sure to check the bottle for concentration of bleach as not all are the same.) allowed to sit for 30 minutes and rinsed over drains that go to the sewer each time they are used. May mean purchasing additional toys so they can be rotated.
- Discontinue the loaning of goggles.
- Maintaining proper pool chemistry is more important than ever. Continue your daily water testing regiment and consider computer controllers if you do not already have one. Follow the CDC Model Aquatic Health Code: https://www.cdc.gov/mahc/pdf/2018-MAHC-Code-Clean-508.pdf (maintain minimum FAC concentration of 1.0 ppm when not using Cyanuric Acid and 2.0 ppm when using Cyanuric Acid).
- Face coverings are most essential in times when physical distancing is difficult. Require face coverings among all staff, as feasible. Cloth face coverings outside the pool and face shields while in the pool. (note cloth face coverings are not recommended in the water). Have additional clean dry cloth face coverings available poolside in a baggie for instructors.
- It is important to maintain 6 feet distancing from those you don't live with. Limit number of classes in the pool to allow for 6 feet distancing among students. Minimize face-to-face contact with the student and instructor, maintaining distance unless necessary to protect the physical safety of the student. Early phases may require you to reduce your class sizes from our average of four students down to one-on-one lessons. Children that share the same household would be able to be in the same class.
- You may consider the option to bring an adult care giver into the water to work with children at the direction of the instructor to maintain 6 foot distancing in the water. You would need to consider the care giver's comfort with water and their ability to swim, as well as the instructor's ability to work with adult instruction which would be a different approach than instructing a child.
- Older children who have more advanced skills could be with the instructor maintaining 6 ft distance in the water and students maintaining 6 ft distancing from each other. More of a squad type practice.
- Infant toddler with parents could be taught as a group if you have enough water to maintain social distancing among non-family members.
- For indoor swimming pools ensure your AIR/HVAC systems are in top shape. Consult with your HVAC manufacturer for guidance on the quickest air turnover rate you can set the system to maintain the best air quality and humidity levels.
PHYSICAL CONSIDERATIONS FOR POOL ROOM

- Protection for instructors:
  - According to the CDC: The primary and most important mode of transmission for COVID-19 is through close contact from person-to-person. Based on data from lab studies on COVID-19 and what we know about similar respiratory diseases, it may be possible that a person can get COVID-19 by touching a surface or object that has the virus on it and then touching their own mouth, nose, or possibly their eyes, but this isn’t thought to be the main way the virus spreads.
  - There are a number of strategies for protecting our instructors. Ultimately, you will have to choose what will work best for your team and based on local guidelines. Also consider what are local norms and expectations.
  - Here are some of the strategies to consider:
    - Use of a cloth mask or neck gaiters possibly adding clear adult swim goggles or a swim mask or a face shield. This would cover mouth, nose and eyes. These are 3 areas of concern for infection. It remains to be seen how effective these will be. There are manufacturers making these with water resistant coating. Need to make sure that this solution is comfortable for instructors. Instructors must be taught how to safely put them on and take them off. There are some manufacturers that are custom printing these. Also consider hygienic options for staff to store multiple masks in the event they get wet or need cleaning.
    - Use of clear face shields that go down past chin and around the face to create a barrier to protect from coughing and sneezing.
    - Use of a full face mask like the Cressi Duke. This would protect eyes, nose and mouth. Not sure how comfortable of an option. Instructor would be a bit muffled, maybe no more than with cloth over their mouth. Advantage of seeing the whole face. This would not require a cloth face mask.
    - Whatever eye protection is being used, the advice we are hearing is that you should cover the mouth and the nose with a barrier. Consult with your experts on this. You will need to work with your instructors to make sure they are on board with your choice and are trained on requirements you’ve put in place for staff. They have to be comfortable physically and emotionally. They need to learn how to wear the gear and how to put it on and take it off safely. You will also need to let your parents know what you have chosen and design strategy so that children know about changes and don’t have to see it the first time they come back to lessons.
  - Remove larger toys for now if not essential. If essential then devise cleaning procedures after each use.
  - Clean and then disinfect the pool deck on a regular schedule.

INSTRUCTORS - POOL ROOM

- Instructors will be assigned one zone in the pool to work in for their entire shift.
  - Curriculum should be adjusted to deter face to face contact and assist with distancing guidelines.
  - Breath control skills should be performed with students blowing to the side.
  - Curriculum should be adjusted so that the instructor is not face to face with the student but modified to the side.
  - Instructor student ratios should be modified to reflect how many people can be allowed in building at one time while maintaining 6 ft distancing.
  - Consider creating instructor teams that work the same shifts so if there is a possible infection that team can self quarantine without impacting other teams.

CUSTOMERS - POOL ROOM

- If parents are on the pool deck make sure to maintain social distancing.
  - If parents come on deck we recommend requiring they wear masks, but check your local government regulations and orders.
AREA 4
CHANGING ROOMS & BATHROOMS

- Swimsuit dryers, hair blow dryers and hand dryers based on current information from the WHO and CDC should be safe to use.
- If you only have paper towels for drying, consider touchless dispensers if possible.
- Consider touchless faucets as well.
- See earlier notes on Changing Rooms. Consider using every other one or assigning dressing rooms and cleaning dressing rooms after ever use. Consider having disinfectant available in each changing room with signage to encourage cleaning after each use.
- Clean and then disinfect every surface at least once per day. Clean and then disinfect high touch surfaces several times a day based on volume of use.
- Signage should be created to explain and support all social distancing efforts in the facility. The goal is to explain the why behind what you are doing.

AREA 5
OFFICE ENVIRONMENT

- Limit the number of people in the office area and maintain social distancing. Consider creating teams that work together so if one person in a team comes down with symptoms, another team can step in while exposed team members self quarantine.
- Assign workstations and make sure they are cleaned before and after a shift. If using an outside cleaning service, make sure all surfaces and clear and ready for cleaning.
- Sanitizer and wipes should be available in this area.
- We recommend requiring cloth face masks, however determine local guidance on whether masks are required.
- Make sure everyone in this area has observed protocol to enter the building, i.e. if you are going to do screening and take temperatures.
Good luck on implementing your own plan. Please reach out to us if we can help.

These are the main areas that we feel need to be addressed. We have tried to be thorough. You may feel like there are things that you think are not necessary for your community. That is fine. If you wish to add that is fine as well. We felt like we would like to provide too much information rather than not enough. Take what you want and most importantly be true to your school and your community. As we work our way through this, there will be differences throughout the country and even in the same cities. That is why you may have found things that don’t apply to your business. The main thing we have learned as we have educated ourselves about this is to maintain social distancing, wear face coverings and clean surfaces.
Dear ____________,

My name is Liz Claytor, and I am the owner of Splash Swim School, a learn to swim program with commercial facilities in San Ramon and Walnut Creek, California. We provide year-round, indoor swim lessons to children, ages six months and up, and we have taught thousands of children to swim since we opened for lessons in 2006.

I am writing regarding the re-opening of business and the community during the COVID-19 pandemic. I understand that discussions at various levels of State and local governments are underway, detailing when and how life may begin to return to some sense of normal, and I am asking you to consider the public health need for swim schools to reopen at the earliest possible time. Given the unique aspects of our operations as well as the essential community service we provide, I would appreciate the opportunity to participate in that dialogue.

Our industry has always and will forever continue to believe that swim lessons are an essential part of every child’s life, especially in California where there are swimming pools and bodies of water everywhere. Drowning is the number one cause of death for children ages 1-4, and a leading cause for kids up to 14 years old. In California alone, we average 51 deaths each year of children under four due to drowning, and the CDC believes that for every child who dies from drowning, another five receive emergency care for near drowning. The most tragic thing of all is that drowning is preventable. We know that swim lessons add an important layer of protection, and the NIH has found that formal swim lessons decrease the risk of drowning for young children by 88%. May is National Water Safety Month, and as the current order stands, this will be the first time in nearly 15 years that Splash will not be able to practice this message with our students. Water safety and drowning prevention is our passion and life's work, and we need to get back to it.

We believe this to be more true than ever in the face of the COVID-19 pandemic. This has been a very uncertain time for a number of reasons, but what is certain is that our children are more at risk than ever. Shelter in place orders mean that children now have an abundance of time to find bodies of water both in and out of the home, and we know that all it takes is a couple of inches. Compounding the problem, parents now have a whole host of added distractions, such as managing a full-time household, being forced into the role of a homeschool teacher, trying to telework and/or restructuring to survive in the face of unemployment. Any of these distractions alone is enough to create opportunity for a child to get to water unsupervised.

Given the life-saving nature of our business, Splash is anxious to get back to work at the earliest possible time. However, our business has some unique characteristics which will require consideration before we can resume operations of our water safety programs:

First, the very nature of our work makes social distancing requirements impracticable in most cases and a safety hazard for those children who need our lessons the most. To put it plainly, an instructor cannot be 6 feet away from a four year old who cannot swim.

Second, we are concerned with the application of mask requirements for our instructors, as wet fabric against the face will likely prove to be a safety hazard. We have begun investigating face shields as an alternative for instructor use and are willing to discuss that option further.

Lastly, guidance issued by the CDC suggests that chlorine kills the virus that causes COVID-19, and there is no evidence that the virus can be spread through pools. By working in properly chlorinated water, a swim school environment may be safer from COVID-19 than other business environments where critical work surfaces and equipment are not in constant contact with a disinfecting substance.

Continued on next page...
Notwithstanding, distance between instructor and child, as well as instructor face coverings, we understand that we will need to adopt various mitigation measures to protect our customers and staff. We are willing to engage in a science-based dialogue with health officials regarding which measures might be appropriate for our industry.

In closing, we believe there is currently a void in services crucial to the safety of the children in our communities, and we appreciate the opportunity to discuss how we may resume operations as shelter orders are loosened. I am available to discuss further at your convenience. Thank you in advance for your consideration.

Sincerely,
Liz Claytor
President & CFO
Splash Swim School, Inc.
liz@splashswimschool.com
510.610.1152 m

Dear Governor Newsom,

I am writing to you to ask you to consider swim schools and learn-to-swim programs as being part of the next phase of businesses to reopen. Learning to swim is a life or death skill. Drowning is the number one cause of death for children ages 1 to 4 and a leading cause for young people up to 14 years of age. We believe drowning to be at an even higher risk now as the schools, daycares and other children’s activities are currently closed giving the children more time to find a body of water such as a filled bathtub, backyard pool, neighbor’s pool, community pool, inflatable pool, sink, toilet, bucket, ditches filled with rain water, ocean, lakes, and rivers. A child can drown in less than 2 inches of water.

Meanwhile, parents have even more distractions than ever and are unable to supervise their children at all times. We understand that modifications will need to be put in place once our swim schools/learn to swim programs reopen. An instructor teaching a child that does not know how to swim will need to stay in a reachable distance from that child. We are committed and will take concrete steps to ensure social distancing within all other aspects of our facilities. We are willing to engage in a science-based dialog with health officials regarding which measures would be appropriate for our industry.

According to the CDC, the Chlorine/Bromine in our swimming pools should inactivate the virus in the water. Chlorine/Bromine is a disinfectant. There is no evidence that the virus that causes COVID-19 to be spread to people through the water in pools.

We feel teaching swimming is essential to keeping our children safe. If you have any questions, I would be more than happy to answer them. We look forward to working together to keep our children and communities safe and protected. Thank you for your time and consideration.

Sincerely,
Jon Alpert
Waterworks Aquatics
April 29, 2020

Dear Governor Newsom,

We are writing to ask you to consider the serious public health need to open swim schools and learn-to-swim programs in Phase 2 of businesses to reopen. As you know, learning to swim is a life-or-death skill, essential for every child. Formal swim lessons between ages 1 and 4 can help reduce the risk of drowning by 88% according to a study conducted in 2015.1 Drowning is the number one cause of death for children ages 1 to 4 and a leading cause for young people up to 14 years of age.2 We believe drowning to be at an even higher risk now as the schools, daycares and other children’s activities are currently closed. This gives children more time to find a body of water such as a backyard pool, neighbor’s pool, community pool, inflatable pool, sink, toilet, filled bathtub, bucket, ditches filled with rain water, ocean, lakes, and rivers. A young child can drown in less than 2 inches of water.3

Meanwhile, parents have even more distractions than ever, including remote working while children are home and are unable to supervise their children at all times. Even before this pandemic, 9 out of 10 child related drowning deaths happened when a caregiver was supervising.4 69% of children who drowned were not expected to be at or in the pool, yet they were found in the water and 77% of drowning victims had been out of sight for less than five minutes.5

Private swim schools in California educate over XXXX of children per week to learn to swim and unlike public pools, our programs are controlled learning environments. We understand that modifications will need to be put in place once swim schools/learn-to-swim programs reopen. While an instructor needs to stay within a reachable distance from a nonswimmer, we are committed to taking concrete steps to ensure social distancing within all other aspects of our facilities.

There is no way to teach water survival or swim skills remotely, and the health risk from COVID-19 in instructional settings should be very low. According to the CDC, the chlorine/bromine in our swimming pools should inactivate the virus in the water. Chlorine/bromine is a disinfectant. There is no evidence that the virus that causes COVID-19 can be spread to people through the water in pools. The industry is working to establish best practices, and we are willing to engage in a science-based dialogue with health officials regarding which measures would be appropriate for learn-to-swim programs.

As a fellow parent of young children, we hope you will agree that teaching swimming is essential to keeping our children safe. If you have any questions, we would be more than happy to answer them. We look forward to working together to reduce the risks to our children and communities. Thank you for your time and consideration.

Sincerely,

Lisa M. Zarda, CAE              Adam B. Katchmarchi, Ph.D., EMT-B          Sabeena Hickman, CAE
Executive Director              Executive Director                             President & CEO
United States Swim School Association National Drowning Prevention Alliance Pool & Hot Tub Alliance

Michelle Kavanaugh              Jim Spiers
Executive Director              President
California Pool & Spa Association Stop Drowning Now

1 Association Between Swimming Lessons and Drowning in Childhood, A Case-Control Study: Ruth Brenner, et al., 2015 https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4151293/
3 https://downloads.aap.org/DOPA/Drowning-Prevention/is_your_baby_crawling_english.pdf
Thank you very much for giving me the opportunity to share the safe teaching guidelines that the U.S. swim school industry has very recently developed in response to COVID. All this new content has been created based on detailed CDC guidance and a wide range of state recommendations (see attached).

The guidelines have already been approved and issued by the U.S. Swim School Association. Lisa Zarda, Executive Director of the USSSA, has confirmed she is very willing to answer any questions and also happy to provide direct and detailed support in developing any NJ specific guidelines. She is copied on this email.

The U.S. Swim School Association, represents the combined knowledge and experience of more than 400 swim schools nationwide, serving at least half a million students a week, who were taking vital water-survival and swim classes pre the COVID crisis.

Please allow me to give you a little more background on why we believe our services are so very essential right now, and explain how we can still accomplish our vital mission yet still keep everyone safe in these challenging times. We can prove that we are certainly not in Governor Murphy’s “Knuckleheads” category!

IMPORTANT BACKGROUND
Drowning is the leading cause of injury death in U.S. children ages 1-4 years, and the third leading cause of unintentional injury death in children and adolescents ages 5-19 years, according to the Centers for Disease Control. According to the CDC, drowning is the leading cause of child deaths. The data still shows that drowning is much more of a threat to children than COVID-19.

What is even more concerning is that, in 2020, the data is showing drownings are already higher than in previous years in at least 18 states. This statistic will only grow and see more deaths as the warmer weather approaches. Only two days ago The NYTimes warned that this summer will be especially deadly, precisely because swim schools are currently shut down: https://www.nytimes.com/2020/05/22/parenting/drowning-water-safety.html?referringSource=articleShare

But there is a solution - prevention is better than treatment - we can stop this: The professional swim lessons our industry provides can teach any child (and adult!) how to survive an accidental fall into the water and keep themselves safe. The National Institutes of Health studies has already shown that there is an 88% reduction in the risk of drowning for children enrolled in formal swim lessons.

TODAY’S PROBLEM: Most professional swim schools normally operate this vital service year-round using INDOOR POOLS, and are now currently NOT ABLE TO PROVIDE THEIR LIFE-SAVING SERVICE to the community.

We are baffled on how the Governor is being advised to allow lakefronts, beachfronts, and outdoor pools to open - in effect boosting the chance to drown, yet keeping closed virtually every year-round, professional water safety instructional program?

PROFESSIONAL SWIM SCHOOLS HAVE SAFETY AT THEIR CORE
Our business is all about safety. Providing safety instruction in a carefully managed and safe environment is all we do, and even outside of COVID-19, we do everything and anything we possibly can to keep the children in our care safe. We are stewards of safety; it is in our DNA.

We can illustrate this in the attached guidelines. Everything described in them has been put in place to keep both our staff and our customers safe.
SWIM INDUSTRY SAFETY STANDARDS – WHY AND HOW WE CAN DELIVER SAFER SERVICES BETTER THAN NAIL SALONS AND TATTOO STUDIOS

- Our classes are highly structured and organized.
- Most classes are held in small manageable disciplined groups, with an industry-standard 4:1 ratio. That means one instructor teaches only 4 students.
- Every student has a class schedule, so we know when they were present, and who every student was in contact with, in case we need to trace this.
- We also always know which other students were in each lesson and who the instructor was
- We know exactly where in the pool the student was, and which lane was used.
- We have details on everyone who entered the building and have all their contact information. We are able to communicate a potential exposure to all families who were present
- There are no open or unmanaged swim sessions, the pool is only used for organized swim lessons.
- Even though the CDC does not mandate masks, our instructors will always wear face coverings in the pool (shields work great for this)
- All parents, students and staff outside of the water will wear masks
- Due to the small class sizes, we are able to socially distance the students from each other in all classes
- Our industry practice is that children who are non-swimmers should never be more than arms length away from their instructor for safety reasons.
- We have planned to take temperature checks on everyone who enters the building
- Each pool is always highly organized, there is a clear flow of traffic to enable social distancing

Here’s an example of how this looks like in practice:
https://twitter.com/i/status/1275783452403601408

WE QUITE LITERALLY OPERATE IN A DISINFECTING SOLUTION
Participants and instructors are literally submerged in disinfecting (chlorinated water) for the duration of their instruction. Exhaling is done with faces in the water and inhaling when out of water. Many swim school pools go beyond standard pool hygiene code, adding extra UV light disinfection to pools for enhanced purity. There has been no evidence of transmission in a pool. (CDC)

We all understand the data shows that most COVID transmission happens when a person touches their face with an infected hand. During swim lessons, both the hands as well as the face are constantly being submerged in disinfecting solution, thus lowering any infection risk significantly.

Taking swim lessons is in essence like swimming in mild bleach. The CDC says the virus does not transmit in chlorinated water. https://www.cdc.gov/healthywater/swimming/safe-swimming-week/feature.html
WE CHECK THE WATER EVERY HOUR
We are required by NJ law to keep the chlorine level at a certain minimum to ensure correct disinfection. In order to make sure this is always the case, and that the level never drops, our staff must check and record the chlorine levels manually EVERY HOUR, to confirm the levels are ok.

OUR VENTILATION SYSTEMS ARE THE BEST
Our professional, year-round water safety instructional programs are housed in unique environments with the highest quality AIR/HVAC SYSTEMS. Indoor swimming pools need a higher level of circulation to protect the buildings they exist in. Pools that are dedicated to instruction (and training) have superb ventilation systems by necessity. If they didn’t, then the building the pools are housed in would be eaten up by the humidity.

Most pools turn over the air in a few hours, minimally, and a lot of pools can introduce up to 100% fresh air into the pool room by adjusting HVAC set points, drastically cutting down on the air turnover time. The air quality in an indoor pool is significantly better than the air quality of a hotel, supermarket or casino!

Example: A typical indoor swim school of 28000 cubic feet of air, has a 12.5 Ton HVAC Unit that can recirculate that air every 6 or 7 minutes or conservatively 8 times per hour. What other indoor business can match that circulation?

Fresh air is continually introduced into a pool room via the HVAC unit, unlike simply recycling air like in a hotel or supermarket.

SWIMMING LESSONS MATTER EVEN MORE FOR BLACK CHILDREN
Drowning, unfortunately, does discriminate and is disproportionately higher in African Americans. 5.5 times higher in blacks than whites and 10 times higher for 11-12-year-old African American boys in pools than whites. It is imperative that access is given to all, which is why group lessons are necessary. Private lessons are not an equitable solution and discriminate against lower socio-economic levels.

SPECIAL NEEDS CHILDREN NEED INDOOR LESSONS
Added to our missing common sense is shuttering the opportunity for Special Needs Children, especially students with Autism, to receive the warm water therapy that exists indoors but typically not outdoors. According to the National Autism Association, drowning is the leading cause of death among children in the autism spectrum. Most professional swim schools in NJ have special programs for Autistic Children at their indoor pools, which we are not able to offer right now.

WATER SAFETY STARTS VERY EARLY
The American Academy of Pediatrics (AAP) recommends swim lessons starting at 1 year old.
The EPA maintains a list of cleaners that are approved (List N). Here is the link to look up any EPA approved disinfectants:
https://www.epa.gov/pesticide-registration/list-n-disinfectants-use-against-sars-cov-2

Remember to read all labels and follow the uses and instructions on the label. The label is the law. Your local janitor supply company is also a good source of information.

One recommended option from a Cleaning and Restoration Industry professional: BotaniClean™ Disinfectant
https://www.legendbrandsrestoration.com/Products/BotaniClean-Disinfectant

Features a unique, nature-inspired thymol blend, the product is EPA registered as a Category IV low-toxicity disinfectant, requiring no warning labels and no PPE. BotaniClean has demonstrated effectiveness against viruses similar to SARS-CoV-2 (as the surrogate for COVID-19) under the current EPA Emerging Pathogens Standard, so is included on List N: Disinfectants for Use Against SARS-CoV-2 (listed under EPA no. 34810-25). Canadians: Refer to the Health Canada website for more information.

If you change any of the chemicals that you are using in your facility make sure that you update your MSDS binder. The supplier or the manufacturer will have an MSDS sheet for any of their products. Remember these have to be available for your employees and also OSHA will want to see if they come to your building.

Here is a list of chemicals that are best for combating the virus shared from USA Swimming. Cleaning-Best for combating virus:

- Clorox Commercial Solutions Disinfecting Bio Stain & Odor Remover
- Clorox Pet Solutions Advanced Disinfecting Stain & Odor Remover
- Lysol Hydrogen Peroxide Action Multi-Purpose Cleaner, Oxygen Splash
- Lysol Hydrogen Peroxide Bathroom Cleaner, Cool Spring Breeze
- Lysol Hydrogen Peroxide Multi-Purpose Cleaner, Citrus Sparkle Zest
- Lysol Hydrogen Peroxide Multi-Purpose Cleaning Wipes, Oxygen Splash
- Lysol Power Bathroom Cleaner, Island Breeze
- Purell Multi Surface Disinfectant, Fragrance Free
- Seventh Generation Disinfectant Spray, Eucalyptus, Spearmint & Thyme
- Seventh Generation Disinfectant Spray, Fresh Citrus & Thyme
- Seventh Generation Disinfectant Spray, Lavender Vanilla & Thyme
- Seventh Generation Disinfecting Bathroom Cleaner, Lemongrass Citrus Scent
- Seventh Generation Disinfecting Multi-Surface Cleaner, Lemongrass Citrus Scent
- Seventh Generation Disinfecting Wipes, Lemongrass Citrus Scent
- Windex Multi Surface Disinfectant Cleaner
- Windex Multi Surface Disinfectant Cleaner, Glade Rainshower

Safer active ingredients:
- Hydrogen peroxide
- Ethyl alcohol (ethanol)
- Citric acid
- L-lactic acid
- Caprylic acid (octanoic acid)
- Thymol

When considering a product, read the labels and be on the lookout for these ingredients that may be best to avoid.

Sodium hypochlorite: EWG notes that this is “linked to harm to the skin and respiratory system and the environment. When improperly mixed with other cleaners or acids, sodium hypochlorite can be fatally poisonous.” It is also found in chlorine bleach.

Quaternary ammonium compounds: Also known as quats, which, according to EWG, are linked to asthma and suspected of causing reproductive toxicity and birth defects in humans. They also take an environmental toll.

Hydrogen peroxide and vinegar mixed together: the combination forms caustic peracetic acid.

No cleaning products used in or around a pool should contain ammonia. This causes pool-water quality issues.