BEING PREPARED IN A TIME OF UNCERTAINTY:

Where we are now – where we will be when this subsides – what will be different going forward?

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Viruses and the diseases they cause in humans are each given distinct names and abbreviations, even when they're in the same family. For example, SARS coronavirus in 2003 was referred to as SARS-CoV, and the disease it caused was known simply as SARS.

The new virus is called SARS-CoV2—and COVID-19 is the name for the disease in humans caused by the new virus, (That's short for coronavirus disease 2019, the year it was first identified) CO stands for corona, VI is for virus, and D is for disease. Tedros Adhanom Ghebreyesus, PhD, director-general of the WHO, first announced the official name for the disease caused by the novel coronavirus—COVID-19—in early February 2020.

Chances are you’ve heard new coronavirus, novel coronavirus, and COVID-19 all used interchangeably lately—and it's honestly fine to use any of those in conversation, and your friends and fam will probably understand what you mean. But just remember: The novel/new coronavirus refers to the virus itself, while COVID-19 refers to the disease that it causes in humans.
Now - Facility

- Basic principles of water chemistry, RWI’s, and COVID19 in pools
  - *Pools have other viruses, including norovirus, that have always needed to be treated*
  - *COVID-2019 is one of a large family of other coronaviruses*
  - *COVID-2019 is not likely to be spread in swimming pool or spa water*

- Should we shut down or maintain our pool and how should we do it?
  - *Either is appropriate, but needs to be done right*
  - *Maintaining is better if you think you will re-open soon*
  - *Full shut-down will save money over a longer period of time (3 to 6 months or longer)*
CDC has updated guidance documents on closing and reopening aquatic facilities during the COVID-19 pandemic.

- **CDC guidance on closing hot tubs/spas for extended periods of time** has been updated to address aquatics sector feedback related to hot tubs/spas with a plastered finish, which could end up cracking if drained for a prolonged period of time.

- **CDC recommendations on reopening hot tubs/spas and other water systems** have been updated to clarify that not every public hot tub/spa needs to be tested for *Legionella* before reopening.
Federal protocols are generally guidelines. The Governor’s make the ultimate call for the State’s. Some states – like Florida – had their governor specifically list swimming for exercise as an essential service.

In those instances, they are ok to provide lap swimming. In addition, local governments can tighten the protocols even further. For example – Governor only mandating beach closures in certain Southern Florida counties; outside of those areas it was up to Local County and City governments to decide what to do about their beaches.

Many pools, both public and private, decided to close. However; those choices were only accountable to their local authorities. Initially that was not explained very well and many Aquatic facilities and providers made decisions based on Federal guidelines only.
There is no evidence that the virus that causes COVID-19 can be spread to people through the water in pools, hot tubs, spas, or water play areas. Proper operation and maintenance (including disinfection with chlorine and bromine) of these facilities should inactivate the virus in the water. [https://www.cdc.gov/coronavirus/2019-ncov/php/water.html](https://www.cdc.gov/coronavirus/2019-ncov/php/water.html)

While there is ongoing community spread of COVID-19 of the virus that causes COVID-19, it is important for individuals as well as owners and operators of these facilities to take steps to ensure health and safety:

- Everyone should follow local and state guidance that may determine when and how recreational water facilities may operate.
- Individuals should continue to protect themselves and others at recreational water venues both in and out of the water – for example, by practicing social distancing and good hand hygiene.
- In addition to ensuring water safety and quality, owners and operators of community pools, hot tubs, spas, and water play areas should follow the interim guidance for businesses and employers for cleaning and disinfecting their community facilities.
Identifying the ENEMY:

- **Cryptosporidiosis**: Parasite is resistant to germicides and bactericides and can live in the pool water for up to a week; highly contagious; transmitted by swallowing water and people contact; causes dehydration, weight loss, stomach cramps, fever nausea and vomiting; no treatment.

- **Escherichia coli (E.coli)**: Bacteria controlled by proper chlorination; transmitted by swallowing water; causes bloody diarrhea, abdominal cramps, and kidney failure; treated with antibiotics.

- **Giardiasis**: Parasite can last less than an hour in a properly chlorinated pool; the cooler the water the longer it can survive; transmitted by swallowing water; causes diarrhea, gas, stomach cramps, nausea and upset stomach; treated with prescription drugs.

- **Hepatitis A**: Virus is mildly resistant to germicides and bactericides and can live approximately 15 minutes in a properly chlorinated pool; transmitted by swallowing water; causes jaundice, fatigue, loss of appetite, diarrhea, fever, stomach pain; vaccine available but no treatment after the fact.

- **Legionnaires’ Disease / Pontiac Fever**: Bacteria killed in less than a minute in a properly chlorinated pool; transmitted by inhaling mist from hot tubs or spray features; not contagious; causes fever, chills, cough, aches, fatigue, diarrhea, kidney malfunction; treatable if diagnosed in time.

- **Naegleria Infection**: Microbe that enters through nose and affects brain and spinal nerves; (rare) this ameba lives less than a minute in a properly chlorinated pool; causes meningoencephalitis; prescription drugs available if immediately diagnosed.

- **Norovirus Gastroenteritis**: Virus that has a mild resistance to germicides and bactericides and can live approximately 30 minutes in a properly chlorinated pool; transmitted by swallowing water; causes nausea, vomiting, diarrhea, stomach cramps, flu like symptoms; no treatment specified; people usually recover on their own in 48 hours.

- **Pseudomonas Dermatitis**: Bacteria controlled by proper chlorination; hot tubs and pools; transmitted by direct skin contact with/in water; causes itching, rash, blisters; not contagious; clears up on it’s own in about 48 hours.

- **Salmonellosis**: Bacteria controlled by proper chlorination; transmitted by swallowing water; causes diarrhea, fever, cramps; antibiotics available for more serious cases.

- **Shigellosis**: bacteria controlled by proper chlorination; transmitted by swallowing water; causes diarrhea, fever, cramps; treated with antibiotics.
Maintain

- The pool recirculation pump(s) remain operational 24/7 in the event of a facility temporary closure. Where it is permissible per local/state code, the system may be turned down to 75% of the designed flow rate, should the system be able to accommodate such a reduction. Refer to the Model Aquatic Health Code, paragraph 4.7.1.10.5.

Ensure the minimum disinfectant residuals, per local/state code, are maintained within the pool during these periods when the pool is unoccupied. If the pool typically maintains a 2.0 or 3.0 ppm residual in the pool, it may be reduced to 1.0 or 1.5 ppm, if allowed per local/state code.

For indoor pools, the HVAC/DX system should remain operational to maintain the natatorium at a negative pressure relative to adjacent spaces.

A certified pool operator should inspect the pool and its related systems at least once per day. Chemical quantities should be inspected and procured, as needed. The filter may also require backwashing, especially if the pool is outdoors, depending on the loading and type of filter system.

The facility should be secured to prevent public access.

Prior to the pool being re-opened to the public, the certified pool operator will need to do a full inspection of the mechanical and chemical treatment systems as well as the water quality.
Now – Safety and Risk Management

- **Education**
  - Stay informed about COVID-19 recommendations and fact-based evidence
  - Obtain (or conduct) virtual training as much as possible for continuing educational and professional development
  - Update or obtain certifications

- **Establish a systematic risk management process: Eliminate, Control, Warn**

- **Plan and prepare**
  - Risk assessments: operating procedures, EAP’s through the airborne and contact transmission lens for PATRONS and STAFF and SELF
  - Review and update operating procedures, documents, manuals, contracts, etc.
  - Signage and informational documents (what you are doing, what is expected)
  - Equipment and supplies ordering – especially PPE and cleaning supplies

*New Signage* – “Per CDC recommendations, if you or anyone in your household is experiencing symptoms of COVID-19 (fever, cough, shortness of breath, chills, muscle pain, headache, sore throat, new loss of taste or smell), you should stay home until the CDC’s published isolation criteria are met.”
Now - Programming

- Keep on Moving
  - Worried about COVID-19? Exercise can help
  - Connect with your members/participants and build a new following

- Education
  - Opportunity to sharpen skills and learn new ones

- Plan for a Fresh Start
  - Registration and check-in procedures
  - Put new knowledge into action
  - Plan and prepare for safety/risk management
Later - Facility

- Pre-opening cleaning
  - Start-up equipment, give time to make sure things are working
  - Full facility cleaning and disinfection
  - Water management program for stagnant systems (bacteria testing)

- On-going cleaning protocols
  - New hourly or periodic disinfection checklists for ANY hard surface.
  - Tables, chairs, lounges, lifeguard stands, etc.
  - Frequent hand washing thoroughly with soap and water for at least 20 seconds or an alcohol-based hand sanitizer that contains at least 60 percent alcohol
  - Avoid touching eyes, nose and mouth
  - Cover sneezes or coughs with tissues, if possible, or else with a sleeve or shoulder
  - Avoid close contact with people who are sick
  - Stay home when sick
  - Clean and disinfect frequently touched surfaces and objects
  - Better documentation and transparency to public comfort

- User involvement
  - User provide personal training equipment
  - Clean general use equipment before and after use
Cleaning - Safer active ingredients

- Hydrogen peroxide
- Ethyl alcohol (ethanol)
- Citric acid
- L-lactic acid
- Caprylic acid (octanoic acid)
- Thymol

EPA-registered products

http://www.shieldustech.com/surface-cleaner/
http://nanoseptic.com/
Cleaning - Active ingredients to avoid

- 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.
  - **There should be no cleaning supplies that contain ammonia.** Even small amounts can track into pool water and deactivate good chlorine.
A HIGH-RISK ENVIRONMENT

Restrooms are not only the most challenging and costly areas in a facility to clean, they are also the most critical areas to clean properly. Biological waste and residue quickly lead to an explosion of odor and disease-causing bacteria. Customer loyalty and occupant health both hinge upon hygienic and fresh-smelling restrooms. Unfortunately, according to our research, most restrooms fall short.
Later – Safety and Risk Management

- Pre-opening site-specific training
  - New policy/procedure/expectations – in writing
  - Making sure everyone is on the same page and consistent
  - Virtual or live small groups

- On-going risk assessments
  - How are things going? Are there new risks? What are any unintended consequences and can these be reduced?

- Engagement
  - How can we continue to thrive and deliver?
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
Later – Programming

■ Pre-opening site-specific training
  - *What new skills do you have and how can you use them?*
  - *Implementation plan / re-educate clients/members*
  - *New members orientation / back to basics*

■ Be a Coach
  - *Monitor: Observe participant response*
  - *Evaluate: Ask for feedback*
  - *Adapt: Do more of what works and what people enjoy*
Different- Facility

- Business model – how do you sustain staff without government support?
  - *Plan for the unknown*
  - *Build cash reserves – long term goal*
  - *Offer alternate programming – adapt in phases*

- Sustainability – How do we handle smaller crowds but maintain revenue
  - *Private experiences need to have a higher value*
  - *Can we utilize historically underutilized times?*
  - *Do we need to offer smaller classes to spread people out?*
  - *Limit to crowds of 10? Or 50?*
Different- Safety and Risk Management

■ Renewed focus on risk assessment methods, implementation, documentation

■ Training and information delivery – online/virtual is here to stay
  – Plan for keeping up with technology and resources
  – Develop a way to cut through the clutter and poor-quality information
  – Share what you learn – reinforces confidence

■ Emergency care
  – How will CPR and first aid change?
  – Will the role of the lifeguard change due to exposure concerns? Will this be practical/manageable to keep facilities open?
  – Deciding the risk-reward for operating – being clear on who’s responsibility this is. Some decisions may be out of your hands. Accept and control what you can.
Different – Programming

- Program Delivery
  - Personal training, small group training
  - Educate clients/participants how to keep moving
  - Use of technology within the facility and out to keep members connected

- Continuing Education and Team Building
  - Plan for keeping up with technology and resources
  - Build a team that grows together and can adapt to new situations
Swim Schools Short Term - Consider a programming model that promotes “social distancing” lower ratio of students to instructor stager class start and end times so fewer people in shower rooms together e.g.

- Group A starts at 9AM in water
- Group B starts at 9:10AM,
- Group C starts at 9:20AM etc.

Shorten class times from 30 minutes to 20 or 15 minutes
- Divide pool up into zones using lane lines
- If your pool filter system can handle it; have students come in their swim suit and leave in their swim suit so they bypass most time in shower room. *This is temporary.*

If you have deck rinse stations, have students use those before getting in pool

Hand out educational flyers about what you are doing to ensure a safer environment:
- personal-distancing,
- class schedules and pool zones,
- disinfection procedures, etc.
- Pool signage is also suggested
Most of the information presented in this power-point is applicable to all pools. Each specific aquatic program may have additional operational protocols they need to consider.

There will be differences between a dedicated aquatic therapy practice and an aquatic therapy session that rents space at a public/private pool.

Always keep in mind that if the pool is properly maintained with 1.5ppm Chlorine and 7.4 pH then is is the safest place in the facility. We need to spend a major portion of our focus on the land areas that support the pool.
Therapy Pools – businesses – short term

- Outdoor facilities may have an advantage due to the Ultra Violet rays of the sun killing many bacteria and inactivating viruses that lurk on tables, chairs, decks, and many other places. That has some science behind it but nothing is foolproof. Indoor facilities also need to make sure their HVAC (air circulation) system is functioning at 100% with clean filters. Also introduce as much outside-fresh air as through the HVAC system settings.

- As in any aquatic situation we have to be extremely aware of the 3 groups that will be affected by the decisions we make:
  - The patient or member
  - The therapist or instructor
  - The supporting staff and other members using the facility

What follows are FAQ’s. These may help when conducting due diligence for developing short term health and safety procedures.
FAQ’s

- Will therapy and rehabilitation be 1 on 1, 1 to 2, or group? Using the “phasing approach” 1:1 sessions are much more likely capable of following the social distancing guidelines.

- What guidelines will each type of facility set for compliance to guidelines? This will be dependent on the facilities geographic location and types of pools they have. The facilities Policy & Procedures will have to be rewritten.

- What requirements for personal covering for therapists will be required? Since the pool itself is the safest place in the facility if the water quality is properly maintained, applies to all pools focus needs to be on protocols just like any social setting.
  - Will the 6-foot distancing from patient be required? Best practices say yes.
  - Will therapist be required to wear long tights, jacket or rash guard shirt – if gets wet, must they change to dry attire Long sleeve or extra apparel serves no purpose – remember 1.5 Chlorine pool water will deactivate the virus.
  - Expected that therapists be required to wear face masks. This will be a social distancing protocol and should be followed.
FAQ’s

- If therapist is in water, should face “goggles” (not swim) be required plus gloves? No goggles or face shields in water. The therapist may wear a mask if they chose but it needs to be water resistant.

- Will “hands on” techniques be permitted? If so, should therapist have face shield? Depends on the necessity of the modality. Suggest waiting until phase 2 in a few weeks for any patient/therapist direct contact.

- How often should therapist shower? Normal routine – pool water neutralizes the virus.

- Will therapist or lifeguard/water watcher be required to wipe down all exposed areas and check water quality between each patient? No. Checking water should be done on the normal schedule. With reduced bather loads the water chemistry should not change much so testing and recording 2 or 3 times a day should be fine. They already have virus disinfectants that last for weeks without re-spraying. See slides in the presentation.

- If facility equipment is used, what is the requirement for sanitizing? See slides in this presentation.
Suggested Standards for opening Public, Private, Therapy and Fitness Pools

I. Entering the facility
   a. Are there door handles to be wiped down after each person enters?
      i. Is there a staff person to do this job?
   b. Are there markers for social distancing?
      i. On the floor – colored 2” duct tape works well for temporary applications
      ii. Reminder signs
   c. Will they pay via credit card or cash, or punch card?
      i. Swipe their own card
      ii. Punch their own card
      iii. Is cash allowed?
   d. Are showers required?
      i. With or without soap? Rinsing for 30 seconds without soap is fine in phase 1.
      ii. Are there signs or markers for limited numbers in bathroom/locker rooms?
Not opening means.....

- Balance the water chemistry.
- Remove skimmer baskets, wall fittings, cleaners, ladders, and any other loose equipment from the pool.
- Clean the pool walls and surfaces
- Lower the water level in the pool
- Drain all pool equipment
- Lubricate the O-rings on equipment
- Winterize plumbing to and from the pool
- Add winterizing algaecide
- Cover the pool
- The facility should be secured to prevent public access.

Prior to the pool being re-opened to the public, the certified pool operator will need to do a full inspection of the mechanical and chemical treatment systems as well as the water quality.
Suggested Standards for opening Public, Private, Therapy and Fitness Pools

Entering the pool

a. All hard surfaces need to have an effective disinfectant applied according to manufacturers recommendations
b. Social Distancing required
   i. Benefits of UV – added protection if the pool water has a medium pressure UV unit on the indoor pool.
   ii. Benefits of chlorine – primary disinfectant. (Bromine is equal)

General rule: The pool is the safest place in the facility. Concentrate lots of effort on keeping the dry-land supporting areas in the facility safe. There is plenty of advice on that from the CDC and MAHC and your State Department of Public Health.
Social Distancing Practice Layout

25 yard – 6 Lane Pool (18 swimmers)
Social Distancing Practice Layout

25 yard – 6 Lane Pool (27 swimmers)
Social Distancing Practice Layout

50 meter – 8 Lane Pool (45 swimmers)
Social Distancing Practice Layout

50 meter– 8 Lane Pool (60 swimmers)
25 yard – On Deck sit down slide in sets in circles

- Swimmers maintain 6 feet apart – mark deck with 2” wide colored duct tape
- Sit down/Slide in to enter water
- End of set climb out and go to assigned spot
- The more “eyes” on deck the better
- Use cones or other barriers to help with separation – deck needs to be wide enough to comply with 6’ personal distancing
OTHER-

Regular maintenance on air handing systems and changing the filters regularly is important for peoples’ comfort. Current information is that the Covid19 virus is primarily spread by close contact. It is not is listed as an airborne virus, but conflicting information is starting to emerge. It is unlikely that the indoor pools HVAC systems would spread the virus, but this is not confirmed by research. Best practices would be to circulate as much fresh air from outside as possible.

Foot traffic and pool user numbers..... Social distancing will be with us for a while, and possibly with us from now on in some form or other. There are many areas in aquatic facilities that need to be monitored and have policy and procedure controls in place. Our policies for these areas will certainly need to be changed.

- Vending and public lobby areas
- Registration desk
- Hallways leading to exercise areas – possibly directional lanes like streets
- Shower rooms and rest rooms – signage for areas and limit numbers
- Pool lanes or specific exercise areas – control numbers and social distancing
- Hot tubs – one at a time
- Slide and diving board staging areas – social distancing
- Entry ways, conference rooms, etc.
- Concession areas
Some protocols:

- Pre-opening cleaning
- Start-up equipment, give time to make sure things are working
- Full facility cleaning and disinfection
- Water management program for stagnant systems (bacteria testing)
- On-going cleaning protocols
- New hourly or periodic disinfection checklists for ANY hard surface.
- Tables, chairs, lounges, lifeguard stands, etc.
- Frequent hand washing thoroughly with soap and water for at least 20 seconds or an alcohol-based hand sanitizer that contains at least 60 percent alcohol
- Avoid touching eyes, nose and mouth
- Cover sneezes or coughs with tissues, if possible, or else with a sleeve or shoulder
- Avoid close contact with people who are sick
- Stay home when sick
- Clean and disinfect frequently touched surfaces and objects
- Better documentation and transparency to public comfort
- User involvement
- User provide their own personal training equipment
- Clean general use equipment before and after use
MASK PROTECTION EFFICIENCY

**N95**
- **Strongest Protection**
  - Virus: 95%
  - Bacterial: 100%
  - Dust: 100%
  - Pollen: 100%

**Surgical Mask**
- **Medical Use**
  - Virus: 95%
  - Bacterial: 80%
  - Dust: 80%
  - Pollen: 80%

**FFP1 Mask**
- **Isolate Suspended Particles**
  - Virus: 95%
  - Bacterial: 80%
  - Dust: 80%
  - Pollen: 80%

**Activate Carbon**
- **Stop Odor**
  - Virus: 10%
  - Bacterial: 50%
  - Dust: 50%
  - Pollen: 50%

**Cloth Mask**
- **DIY**
  - Virus: 0%
  - Bacterial: 50%
  - Dust: 50%
  - Pollen: 50%

**Sponge Mask**
- **Fashion Use**
  - Virus: 0%
  - Bacterial: 05%
  - Dust: 05%
  - Pollen: 05%
Aquatic exercise equipment and team equipment needs special attention. The floats and belts and kick boards and noodles, and pull-buoys, etc. need to be disinfected after use. You will need a spray bottle with a solution of 1 part Clorox (Bleach) to 3 parts water. Spray equipment and let set for 30 minutes, Rinse over drain with hose.
We will spend a lot of time with the pool water chemistry as our first line of defense. We also need to be extra aware of the other part of safe water – filtration and circulation.

- If you have medium pressure UV, check your UV bulbs, wipers, and quartz chamber. Bulbs start losing their effectiveness after 10 to 12 months. UV units that are well maintained destroy many viruses. Make sure the unit is at maximum efficiency.
- Check pump hair strainer baskets more frequently.
- Is your filter operating at best efficiency? Sand needs to be cleaned yearly and replaced every 4-5 years. Cartridge filters need to be cleaned and replaced more frequently. DE filters need to be checked for “bag or sleeve” condition. All filters will need to be closely monitored and possibly cleaned more often.
- Chemical feeder system. Make sure all valves and lines are cleaned and flowing freely. Make sure all sensors are functioning properly. Do you have replacement parts for your equipment on hand?
- Check automatic pool vacuums and facility cleaning equipment. The equipment used to vacuum land areas of facility will need to be sanitized after each use.
One of the most important things pool-users can do. *Shower before entering pool*. If you have deck showers this is an advantage for social distancing. Shower stalls in dressing rooms will need to have signage. There is more to showering than virus considerations. We have Personal Care Product (PCP’s or PPCP’s) chemicals on our body. Many of these 70+ chemicals were not even invented 30 years ago. Most of them have an adverse effects on chlorines ability to be effective. They are contained in shampoo’s, conditioners, deodorants, perfumes, colognes, hair sprays, make-up, lotions, and many other products. A 30 second warm water shower rinse will remove over 70% of these from our body. If a disinfectant soap is used, the bacteria and viral issues can also be addressed. PCP’s in pool water can negate the disinfection ability of free chlorine.
Be aware! In times like this there are unscrupulous individuals and companies who will advertise they have new chemicals or systems that work better. This happens in any industry in a free-market situation. Buyer Beware. If it sounds too good to be true, double your due diligence efforts.

Any information presented here is subject to change and updating. Virus's don’t give advanced notices.

If you have questions about a specific product or method, please email mick@totalaquatic.llc

For specific aquatic programming questions email sue@totalaquatic.llc

www.totalaquatic.llc   www.usaswimming.org/buildapool