California Park and Recreation Society

Aquatics Section

General COVID-19 Guidelines

Aquatic Venues and Programs

Co-authors:

Matthew Galindo, City of Concord

Peter Beireis, City of Newark

Peter DeQuincy, East Bay Regional Park District

Contributors:

Chris Chamberlain, California State University, East Bay

Disclaimer: All of the guideline recommendations must be altered and changed to meet specific facility elements as not all facilities are equal and each and every aquatic facility should adjust for their specific operations. Additionally, these recommendations are presented with the best information available and restrictions in place as of the writing. These restrictions may change and thusly the guidelines listed should be altered to meet any state code or jurisdictional authority. Any use of these guidelines should be approved by your Agency and then be vetted by your LEMSA prior to putting them in place. These recommended practices were written in order to give a framework for aquatic facilities and programs to have a starting point in which to begin operations safely and to avoid or reduce the spread of COVID-19 to the greatest extent possible. They will not eliminate all risk but will guide to mitigate issues associated with it. The impetus lies not only on the operator but on the swimmers in adhering to safe practices.

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Aquatic Facilities

One of many challenges aquatic facilities will face when the current Shelter-in-Place order eases its restrictions will be how patrons maintain social distance and minimize contact with each other and staff while utilizing our facilities. We will also be faced with the challenge of needing to continually clean and disinfect high traffic, high use areas. We are providing a series of guidelines compiled from CDC and current State and County Health Service guidelines to help you navigate through some of these challenges.

Entrance to the Facility/Front Counter Space

Post a sign at the entrance of the facility informing all personnel and customers that they should avoid entering the facility if they have any COVID-19 symptoms; maintain a minimum 6ft distance from one another; sneeze and cough into one's elbow, not shake hands or engage in any unnecessary physical contact. Its recommend signs should include the follow:

- Individuals experiencing COVID0-19 like symptoms such as fevers, coughing, flu like symptoms should avoid entering the facility.
- Individuals entering the facility must be wearing face coverings; face coverings must remain in place until entering the pool water and put back on upon exiting the pool water.
- Maintain social distance of a minimum of 6Ft at all times. This includes in all indoor facility, restrooms, deck area and the swimming pool.
- Minimize all person to person contact.

Limit the number of people who can enter into the facility at any one time to ensure that people in the facility can easily maintain a minimum 6ft distance from another at all times, except as required to complete Essential Business activity.

Where lines may form at a facility, marking 6ft. increments at a minimum, establishing where individuals should stand to maintain adequate social distancing. Designate markers on the floor to assist with social distancing.

Require face coverings to be worn by persons entering the facility in compliance with the Face Covering Order.

Provide hand sanitizer, soap and water or effective disinfectant at or near the entrance of the facility and in other appropriate areas for use by the public and personnel and in locations where there is high frequency employee interaction with members of the public (e.g. Cashiers).

Provide for contactless payment systems or if not feasible to do so, the providing for disinfecting all payment portals, pens and styluses after each use.

Ensure counters have a shield or barrier installed to limit direct cashier/counter help to customer exposure.

Restrooms/Locker Rooms/Changing Areas

California Health Code Title 22 Section 3116B.1 requires shower and dressing facilities shall be provided for users of a pool. These facilities are not exempt from the current requirements of social distancing and will present many interesting challenges for facility operators.

On a side note as some of you consider ways to limit the number of patrons you have at your facility to help maintain social distancing one thing you will want to take into consideration is the health code requirements that specify the number of restroom amenities required per number of patrons:

3116B.2.1 **Showers.** One shower shall be provided for every 50 pool users.

3116B.2.2 **Toilets.** One toilet shall be provided for every 60 women or less and one toilet plus one urinal for every 75 men or less.

3116B.2.3 **Lavatories.** One lavatory shall be provided or every 80 pool users.

This doc will not cover maintaining social distance for facilities that have to access to single family changing rooms or restrooms as these facilities can be utilized using one at a time or family group at time approach.

Facilities with communal restrooms, showers and changing area will require more creativity in how users can maintain social distancing. This may require the closing or limiting access to amenities in these areas.

Sinks taped off and closed to allow for 6ft of spacing between hand washers. Sinks will also require a routine checking of soap dispenser to make they are fully stocked.

Urinals taped off and closed; even though these urinals have a wall in-between them it would not allow for 6Ft of spacing between users and not much protection for users side by side.

Stalls maybe individual units with their own walls but for social distancing proposes one must consider if folks can enter and exit the stalls maintaining the 6Ft social distancing. If 6 Ft distancing cannot be maintained you want to consider utilizing an every other stall approach.

If your facility has individual shower stalls you again want to consider the distance between the entrance/exit of the stall, not the stall itself for social distancing proposes. Can 2 folks enter or exit at the same time and remain 6 Ft. part. If not you may to utilize and every other stall approach.

If you have a communal shower utilizing and every other shower and diagonal approach can help meet the 6 Ft distance goal. You may also want to stagger how folks enter and exit the shower area.

A similar approach and be applied to changing areas and benches. Remember the goal is maintaining 6 Ft of social distancing between users.

Cleaning and Disinfecting Considerations

Cleaning and disinfecting high traffic and common use areas has always been a critical element of the safe operation of an aquatic facility and under the current set of circumstances this practice will take on an even bigger sense of urgency. The CDC recommends practicing routine cleaning of frequently touched surfaces. More frequent cleaning and disinfection may be required based on level of use. Surfaces and objects in public places should be cleaned and disinfected before each use. Examples of high touch surfaces include tables, doorknobs, light switches, countertops, handles, desks, phones, keyboards, toilet, faucets and sinks.

Clean

- Wear disposable gloves and gowns to clean and disinfect.
- Clean surfaces using soap and water, then use disinfectant. Cleaning with soap and water reduces the number of germs, dirt and impurities on the surface. Disinfecting kills germs on surfaces.

Disinfect

- The following Website includes recommended EPA-registered household disinfectants: https://www.epa.gov/pesticide-registration/list-n-disinfectants-use-against-sars-cov-2
- Diluted household bleach solutions may be used if appropriate for the surface.
  Check the label to see if your bleach is intended for disinfection and ensure the product is not past its expiration date.

  Unexpired household bleach will be effective against coronaviruses when properly diluted. **Follow manufacturer's instructions for application and proper ventilation**. Never mix household bleach with ammonia or nay other cleanser.

  To make a bleach solution, mix 5 tablespoons (1/3rd Cup) bleach per gallon of water or 4 teaspoons bleach per quart of water.

- Bleach solutions will be effective for disinfection up to 24 hours.
- Alcohol solutions with at least 70% alcohol may also be used.

Soft Surfaces

For soft surfaces such as carpeted floor, rugs and drapes

- Clean surfaces using soap and water or with cleaners appropriate for use on these surfaces.
- Launder items (if possible) according to the manufacturer's instruction. Use the warmest appropriate water setting and dry items completely. OR
- Disinfect with EPA-registered household disinfectant.

Electronics

For electronics, such as tablets, touch screens, keyboards

- Consider putting a wipeable cover on electronics.
- Follow manufacturer's instruction for cleaning and disinfecting. If no guidance, use alcohol-based wipes or spray containing at least 70% alcohol. Dry surface thoroughly.

Laundry

For clothing, towels, linens and other items

- Launder items according to the manufacturer's instructions. Use the warmest appropriate water setting and dry items completely.
- Wear disposable gloves when handling dirty laundry.
- Do not shake dirty laundry.
- Clean and disinfect clothes hampers.

Cleaning and disinfection outdoor areas

Outdoor areas generally require normal routine cleaning, but do not require disinfection.

- High touch surfaces made of plastic or metal, such as grab bars and railings should be cleaned routinely. FYI Pool water does not count for disinfecting items, they should be properly clean and disinfected.
- Cleaning and disinfection of wooden surfaces (benches, tables) is not recommended.

Pool Deck

- Spread of COVID-19 from concrete surfaces is very low and disinfection is not effective.

When cleaning

- Ensure cleaning staff is trained on appropriate use of cleaning and disinfection chemicals.
- Wear disposable gloves and gowns for all tasks in the cleaning process, including handling trash. Additional PPE might be required based on the cleaning/disinfectant products being used and whether there is a risk of splash.

Gloves and gowns should be removed carefully to avoid contamination of the wearer and the surrounding area.

Wash your hands often with soap and water for 20 seconds.

- Always wash immediately after removing gloves.
- Hand sanitizer, if soap and water are not available and hands are not visibly dirty, an alcohol-based hand sanitizer that contains at least 60% alcohol may be used. However if hands are visibly dirty, always wash hands with soap and water.

Taking off (Doffing) Personal Protective Equipment (PPE)

1 Gloves

A Grasp the outside edge of the glove near the wrist and peel away from the hand, turning the glove inside-out.

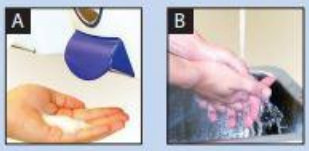
- Hold the glove in the opposite gloved hand.

B Slide an ungloved finger or thumb under the wrist of the remaining glove.

C Peel the glove off and over the first glove, making a bag for both gloves.

- Put the gloves in the garbage.

2 HAND HYGIENE



A Using an alcohol-based hand rub is the preferred way to clean your hands.

B If your hands look or feel dirty, soap and water must be used to wash your hands.

3 Gown

A Carefully unfasten ties.

B Grasp the outside of the gown at the back of the shoulders and pull the gown down over the arms.

C Turn the gown inside out during removal.

- Put in hamper or, if disposable, put in garbage.

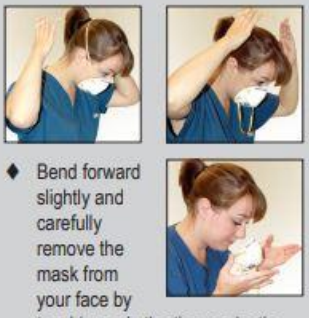
4 HAND HYGIENE

- Clean your hands. (See No. 2)
- Exit the patient room, close the door and clean your hands again.

5 Eye protection or face shield

- Handle only by headband or ear pieces.
- Carefully pull away from face.
- Put reusable items in appropriate area for cleaning.
- Put disposable items into garbage.

6 Mask or N95 respirator



- Bend forward slightly and carefully remove the mask from your face by touching only the ties or elastic bands.
- Start with the bottom tie, then remove the top tie.
- Throw the mask in the garbage.

There are different styles of N95 respirators but all styles have the same basic steps for doffing.

7 HAND HYGIENE

- Clean your hands. (See No. 2)

Additional Considerations for Employers

- Educate workers to recognize the symptoms of COVID-19
- Develop policies for worker protection and provide training to all cleaning staff on site prior to providing cleaning tasks. Training should include when to use PPE, what PPE is necessary, how properly don (put on), use and take off PPE and how to properly dispose of PPE.
- Ensure workers are trained on the hazards of the cleaning chemicals used in the workplace in accordance with OSHA's Hazard Communication standard (29 CFR 1910.1200)
- Comply with OSHA's standards on Bloodborne Pathogens (19 CFR 1910.1030), including disposal of regulated waste and PPE (29 CFR 1910.132).

LIFEGUARD OPERATIONS:

IMPORTANT: The priority of the lifeguard in chair/tower is surveillance. Enforcement/education of social distancing and cloth mask use should be done by other aquatic personnel.

Lifeguard Uniforms- face masks

The lifeguard uniform should remain the same, no changes. Additional uniform item should be the issuance of multiple face/cloth masks so one could be worn, one spare for work, and one could be laundered. Multiple sizes should be on hand and available so staff can determine what size provides the best fit and if staff fails to bring or lose mask prior or during work shift.

Considerations: the combination of face masks and sunscreen will require masks to laundered more frequently or cause the mask to degrade faster. It might be in the best interest to issue out additional masks as the need occurs.

Depending on the type of face/cloth mask being used, a lifeguard could have several strings/cords around their face: the ties from the face/cloth mask, the lanyard from their whistle, the synching cord from their hat, and the retention band from their sun glasses. You might consider doing a dry run to determine if any of the items or combination of items distracts, interferes with the lifeguard in providing surveillance, making preventative calls, or activating the EAP. NOTE: the combination of glasses/sunglasses and face/cloth mask will have a tendency to fog and diminish vision if not worn properly. Consider having this as a topic within your orientation. Consider also discussing the need to reduce touching of eyes, nose, mouth and face while in the chair/tower when providing surveillance.

Training will be required on how to make preventative calls and activate the EAP if whistle use with a face/cloth mask is the main or only form of communication the lifeguard uses to alert public and other lifeguards/aquatic staff. Consider voice guns, megaphone cones, or air horns if needed.

Training will be required on how to quickly remove face/cloth mask when entering the water for a rescue. This is so the lifeguard doesn't compromise their own airway with a wet face/cloth mask. Additional masks will need to be available if mask is lost or damaged during the emergency.

High temperatures and humidity combined with the face/cloth mask will possibly affect the lifeguard's ability to be in the tower and on surveillance. Recommend on-deck supervisor/manager increasing frequency of checking in with lifeguards that are on surveillance to monitor fatigue.

Hand Sanitizer

A small bottle of hand sanitizer should be issued out to each lifeguard. Encourage lifeguard to use when they feel the need to. Discourage the use while in the chair/tower during surveillance.

Hand sanitizer should be available within the lifeguard break room, group bathrooms, changing area, and kitchen.

Lifeguard Common Areas

Guidelines should be developed and incorporated on occupancy and use break areas, changing rooms, and kitchens when lifeguards are on break. Hand sanitizer should be available in all of these areas. Protocols should be established on use, cleaning, and disinfecting on areas of high touch (phone charging stations.) Consider encouraging staff to bring mini ice coolers for lunch in order to reduce usage of common area refrigerators, water bottles to reduce cup usage. Consider ways to streamline filling water bottles. Consider expanding break areas so social distancing can be practiced. Consider staggering staff start and end times to reduce strain on changing areas and bathrooms.

Sunscreen

Consider small bottles issued to each employee or having a no-touch dispenser for employees to use. Discourage staff assisting other staff in the application of sunscreen. Consider mandating the wearing of a rash guard/t-shirt and hat to reduce frequency of sunscreen application.

Uniforms, Hip packs, and Towels

Each lifeguard should have their own hip packs with PPE's that are solely utilized by them. Sharing of uniforms, hip packs and towels should not occur and be strongly discouraged. Sharing of lockers by lifeguards on the same shift should be discouraged. If lifeguards do share lockers but are on different shifts, disinfecting of the locker should occur before and after shift.

Chair Rotation

Incorporate disinfecting high touch areas of the chair/tower. Oncoming lifeguard will disinfect high touch areas and items, adjust equipment (umbrella), and position themselves in the chair/tower prior to the outgoing lifeguard leaving.

Walking patrol zones

Walking patrols should either be substituted with elevated chairs if possible. Due to the architecture of the facility, walking patrols might be necessary to provide effective surveillance. Cones and tape/fencing should be set up to designate the walking patrol zone to deter patrons from violating the 6-foot social distancing. NOTE: Cones and tape/fencing should not compromise the surveillance and the lifeguard's ability to make preventative actions and respond to emergencies.

Life Jacket Loaner stations

Life jacket loaner stations should continue to be utilized. Cleaning and disinfecting protocols should be established, and a reduction is how many can be lent should be considered. Example: if 300 life jackets are normally lent out, only lend out 100. Allowing the 100 life jackets that are used for the day to be cleaned, disinfected and return to service in two days. Hence, 100 life jackets will be rotated in each day for use. Must have adequate space for cleaning, drying, disinfecting, and staging.

RESCUES:

In order to maintain social distance, lifeguards should be trained or refreshed on reaching assists with a Shepherd's Crook and throwing assists with a ring buoy.

Open water facilities should incorporate the use of a throw bag. Throw bags can be used from shore, and in static open water, lifeguards could be in knee deep water and make effective assist to a victim that is farther out. NOTE: If the first throw is ineffective, there will be delay in retrieving the throw bag rope and setting it up for a second throw. Recommend multiple throw bags on site.

Lifeguards should also train in how to do an effective in-water reaching assist in deep water with a rescue tube. Prioritize approaching the victim, doing a quick-reverse to stop forward progress, take rescue tube and extend it out to the victim. Strongly encourage the victim to grab the rescue tube. Once the victim has hold of the rescue tube, reassure the victim, extend the rope rescue tube out, and tow the victim to the side.

Assists

Shallow water assists can be done. Encourage the lifeguard that once they make contact with the victim, reassure the victim, then turn their head to the side to avoid directly breathing on the victim.

Active and Passive Surface Rescues

If the rescue has to be made and the lifeguard needs to make physical contact with a victim for a water rescue, approach the victim from the rear, make contact with the victim, keep your head turned to the side as to avoid breathing directly on the victim.

Shallow Water Submerged Victim Rescue

MAKE THE RESCUE. This is a life-threatening situation and there is a good chance the victim has reduced or no breathing. Quickness in stopping the drowning process is imperative. Remember to activate your EAP so that additional help might be needed for the water extrication, extrication of water to the deck, and patient care. for additional help. Lifeguards fully donned in PPE will be providing the initial patient care on the deck.

Deep Water Submerged Victim Rescue

MAKE THE RESCUE. This is a life-threatening situation and there is a good chance the victim has reduced or no breathing. Quickness in stopping the drowning process is imperative. Remember to activate your EAP. Additional help will be needed for the water extrication, extrication of water to the deck, and patient care. for additional help. Lifeguards fully donned in PPE will be providing the initial patient care on the deck.

Possible injuries to the head, neck or back in shallow water

Secure the victim with the Head Splint or Head Chin splint. Once contact is made and the victim is secure in the splint hold, the rescuing lifeguard should try and keep their face turned away from the victim to avoid breathing directly on the victim. Once a backboard is available with additional lifeguards wearing face/cloth masks, trade out the rescuing lifeguard with a lifeguard wearing a face mask (Maintain in-line stabilization throughout this transition). Backboard the victim.

Possible injuries to the head, neck or back in deep water

Secure the victim with the Head Splint or Head Chin splint. Once contact is made and the victim is secure in the splint hold, the rescuing lifeguard should try and keep their face turned away from the victim to avoid breathing directly on the victim. Move the victim to shallow water if possible. Once the victim is in shallow water, begin the backboarding process listed above. If Once a backboard is available with additional lifeguards wearing face/cloth masks, trade out the rescuing lifeguard with a lifeguard wearing a face mask (Maintain in-line stabilization throughout this transition). Backboard the victim.

PATIENT CARE:

Ventilations

Use of a BVM by solo rescuer can be done. It requires additional training. Two-person ventilations with a BVM with HEPA filter should be prioritized over the use of a resuscitation mask. Rescuers should follow guidelines listed in CDC:

https://www.cdc.gov/coronavirus/2019-ncov/hcp/guidance-for-ems.html

CPR

Rescuers should follow guidelines listed in the CDC:

https://www.cdc.gov/coronavirus/2019-ncov/hcp/guidance-for-ems.html

Water rescue and extrication which leads to Ventilations, CPR and use of an AED

MAKE THE RESCUE. This is a life-threatening situation and there is a good chance the victim has reduced or no breathing. Quickness in stopping the drowning process is imperative. Develop a staggered rescue response: one or more rescuers make the water rescue and the in-water extrication, two dry rescuers are on deck to provide the extrication from the water to the deck with the backboard. The same two dry lifeguards are donned in proper PPE (per COVID-19 guidelines from the CDC) to initiate care or have two additional lifeguards to provide initial patient care.

First Aid

Assume that all patients, may have COVID-19, minimum PPE for all patient encounters is a surgical mask, eye protection and gloves. Try to perform initial assessment from at least 6-feet away if possible. Provide a surgical mask to the patient if needed. Utilize a single rescuer to provide if possible, and have back-up staff available if needed.

Summary of Lifeguard Safety Guidelines:

- Lifeguards are to wear appropriate facial coverings
- Employ Reach or Throw prior to Go response for rescues
- Remove mask prior to making an in water rescue
- Utilize flotation equipment for active victims with front, side, or rear approach
- Utilize rope on rescue equipment for physical distancing
- Rear approach and rescue for all unconscious victims
- After extraction additional rescuers would facial mask and normal PPE's as well as BVM for respiratory needs

Lifeguard In-service Training physical skills:

The following engineering controls strive at maintaining social distance and prioritizing lifeguard and patient safety. Some skills will require additional training. NOTE: These are all skills within the American Red Cross Lifeguarding material are covered. Full PPE will be defined as the rescuer using gloves, eye protection, N95 respirator, gown, face shield (if available). Currently, medical, Fire, and EMS personnel can have multiple rescuers working on an individual patient with the idea of starting initial with one rescuer and if needed adding additional rescuers. Some scenarios will always deem a multi-rescuer response. Cleaning and disinfecting will occur with all shared equipment before and after it is used.

Ventilations and use of a BVM as a solo rescuer (Initially taught in ARC EMR)

NOTE: LGT instructors must become proficient prior to holding an in-service on this specific skill. Infant BVM's with HEPA filter are not currently available, only adult and pediatric.

Initial training should address developing proficiency at providing ventilations with a BVM as a solo rescuer specifically at maintaining an adequate seal while keeping the victim's airway open. Training should be done on an adult, child and infant manikin.

Once proficiency is demonstrated, the lifeguard should demonstrate the skill while in full PPE with appropriate equipment: gloves, gown, eye protection, N95 respirator, face shield (if available), and BVM with HEPA filter.

Once proficiency is demonstrated, rescuer should include a primary assessment which leads to ventilations. Rescuer should be able to demonstrate Head-tilt/Chin-lift, Jaw-Thrust with head extension, and Jaw-Thrust without head extension.

Equipment: Adult and infant manikins, and Adult, Pedi, and Infant BVMs

Ventilations and use of a BVM with two rescuers

Initial training should address developing proficiency at providing ventilations with a BVM with two rescuers specifically at maintaining an adequate seal while keeping the victim's airway open with both rescuers in full PPE. Training should be done on an adult, child and infant manikin. Once proficiency is demonstrated, the lifeguard should demonstrate the skill as a solo rescuer with a secondary rescuer having a staggered arrival. The staggered arrival could simulate the secondary rescuer has a delayed response to the scene, is donning PPE or is drying off then donning PPE. Initial responding lifeguard is in full PPE.

Equipment: Adult and Infant manikins and Adult, Pedi, and Infant BVMs

V-vac, Suctioning:

Practice same guidelines as for ventilations, CPR and AED use.

Equipment: V-vac, Adult manikin, PPE

One-Rescuer CPR

Initial training should address developing proficiency while in full PPE. The focus should be on providing consistent compressions and ventilations with a BVM. Once the lifeguard demonstrates competency, focus on building endurance between 4-8 minutes of uninterrupted care due to a delayed arrival of secondary rescuer or a secondary rescuer is delayed due to donning PPE.

Equipment: Adult and Infant manikins, Adult, Pediatric, and Infant BVMs

Two-Rescuer CPR

Initial training should address developing proficiency while in full PPE. The focus should be on providing consistent compressions and ventilations with a BVM. Once the lifeguards demonstrate competency in both a simultaneous and staggered arrival, focus developing fluidity and uninterrupted care by rescuers when changing positions, changing out equipment due to equipment failure, and changing out damaged PPE. Building endurance between 4-8 minutes of uninterrupted care due to a delayed EMS arrival. Consider incorporating use of an AED.

Equipment: Adult and Infant manikins, and Adult, Pedi, and Infant BVMs

Use of an AED

Train on using AED in full PPE, as both a solo rescuer, two rescuers and multi-rescuer. Consider solo rescuer bringing AED and reviewing both witnessed and unwitnessed collapse scenarios. Consider solo rescuer performing CPR with secondary rescuer bringing AED. Consider two rescuers performing CPR, and a third rescuer arrives with the AED.

Equipment: Training AED, Adult and infant manikins, and Adult, Pedi, and Infant BVM's

CPR with Airway Obstruction

Initial training should address developing proficiency while in full PPE. The focus should be on providing consistent compressions and ventilations with a BVM. Once the lifeguard

demonstrates competency, focus on two rescuer response, a staggered two rescuer response, conscious choking transitioning to unconscious choking victim, clearing the airway and continuing CPR, clearing the airway and continuing ventilations only, clearing the airway continuing CPR with use of an AED, and lastly clearing the airway and placing the victim into a recovery position due to the victim being unconscious but breathing.

Equipment: Adult and Infant manikins, and Adult, Pedi, and Infant BVM's, and AED

Controlling External Bleeding

A number of scenarios within training should be utilized when practicing skills. Two would be a no direct contact approach (verbal and simulated on equipment). The verbal approach would have the lifeguard verbalize how to control bleeding to the victim and would specifically direct the victim on how to self-control the bleeding. This has good real world practical application but does take a lot of practice. In the use of simulated equipment, the lifeguard could practice controlling bleeding on either a manikin or on a pool noodle as they would on a real person. This approach maintains their ability to perform the skill appropriately. The last approach would be to work developing proficiency on providing care in Full PPE. Include a step where if the victim doesn't have a mask, the lifeguard provides a surgical mask for the victim. Victim should be in full PPE.

Equipment: Control bleeding gauzes and bandages, surgical mask, Adult and Infant manikins, pool noodle and/or victim in full PPE.

Reaching Assists from the Deck

Lifeguard should train in demonstrating proficiency in doing a reaching assist with the following pieces of equipment: Shepherd's Crook and Rescue tube. Rescue tube reaching assists can be done both from the deck and in shallow water. NOTE: Depending on the situation, a Shepherd's Crook can support multiple victims. Lifeguards should practice doing an in-water reaching assist with the rescue tube in deep water. This should include a safe entry, approaching the victim, a quick-reverse, followed with a reaching assist to the victim.

Equipment: Shepherd's Crook, Rescue Tube

Throwing Assist from the Deck

Lifeguards should train in demonstrating proficiency in doing a throwing assist with a Ring Buoy. Lifeguards should focus on good aim and accuracy, throwing the ring buoy over the victim

(avoid hitting the victim), a quick return and recoiling of the rope of the ring buoy if the first attempt is unsuccessful. If the agency uses throw bags, follow the same objectives.

Equipment: Ring Buoy, Throw Bag

Simple Assist

Lifeguards should practice making contact of the victim from the side and rear of the victim to avoid direct face-to-face exposure. Once proficient, incorporate a safe entry and a walking approach. Can be done with a submersible manikin.

Equipment: Rescue Tube, Submersible Manikin

Active Victim Front and Rear Rescues

Lifeguards should prioritize approaching the victim from the rear to avoid direct fact-to-face exposure. If necessary, the lifeguard could do a front approach but transition the rescue tube to provide an in-water reaching assist. If the rescue tube has the capability to clip the victim into the rescue tube, do so to extend the distant between the victim and the lifeguard during the tow. NOTE: If towing a victim, lifeguard must remain in control of the victim and keep their airway above the water. Once proficient, incorporate a safe entry and approach.

Equipment: Rescue Tube

Passive Victim Front and Rear Rescues

Lifeguards should prioritize approaching the victim from the rear to avoid direct fact-to-face exposure. If the rescue tube has the capability to clip the victim into the rescue tube, do so to extend the distant between the victim and the lifeguard during the tow. NOTE: If towing a victim, lifeguard must remain in control of the victim and keep their airway above the water. The lifeguard could do a front approach only if the victim is face down on the surface and not breathing. Once proficient, incorporate a safe entry and approach.

Equipment: Rescue Tube, Submersible Manikin

Towing a Victim

Towing a victim could be done with a submersible manikin to develop proficiency in securing the victim to the rescue tube and developing speed while towing.

Equipment: Rescue Tube, Submersible Manikin

Multiple Victim Rescue

Until restrictions are lifted, multiple victim rescue should be done with multiple rescuers (1 victim to 1 rescuer). Follow active victim rescue guidelines. If possible, due size of the victims and proximity to the side of the pool, a reaching assist with a Shepherd's Crook could be utilized to make the rescue.

Equipment: Rescue Tube, Shepherd's Crook

Passive Submerged Victim in Shallow Water

Practice using a submersible manikin for this skill. Focus on quick rescue and rapid extrication to the side of the pool. Once proficient, add a safe entry.

Equipment: Rescue Tube, Submersible Manikin

Submerged Victim in Deep Water

Practice using a submersible manikin for this skill. Focus on quick rescue and rapid extrication to the side of the pool. Once proficient at bringing the victim to the surface and securing them to the rescue tube, focus on safe entries, approaching the submersion point and feet-first and head-first surface dives before making the rescue.

Equipment: Rescue Tube, Submersible Manikin

Front and Rear Head-Hold Escapes

Until restrictions are lifted, hold off on performing this skill during in-service.

In-Water Ventilations, Shallow and Deep Water

This skill could be performed on a submersible manikin. Cleaning and disinfecting the manikin will be required in-between lifeguards. Focus on good placement of the rescue tube that allows the lifeguard to provide successful ventilations.

Equipment: Rescue Tube, Submersible Manikin

Extrication Using a Backboard at the Pool Edge

Extrication can be done with 1 lifeguard in the water, and 2 lifeguards on the deck. Deck lifeguards should be in full PPE (this will take additional time and water lifeguard needs to realize this). Start in shallow water, lifeguard in the water can have a cloth mask on as long as lifeguard doesn't submerge. Victim can be a submersible manikin. Wet and dry lifeguards will focus doing a smooth transition from water to land. Once proficient, work on developing proficiency in deep water extrication. Variation could include the water lifeguard entering water, which would trigger the 2 deck lifeguards begin to don PPE and get the extrication board ready.

Equipment: Rescue Tube, Extrication Board, PPE

Over-arm Head and Head Splint with Victim Face-up at the Surface in Shallow and Deep Water

Lifeguard in water could have N95 mask on during this skill as long they do not submerge in the water. Paper surgical mask could be placed on victim by a second lifeguard to reduce direct face-to-face exposure only if feasible. NOTE: Make sure paper surgical on the victim can easily be removed if it begins to hinder the victim's airway. Do not use surgical mask if hinders victim's airway.

Equipment: Rescue Tube, PPE

Spinal Backboarding Procedure (Shallow, High Edge, or Deep Water)

Lifeguards in water could have N95 masks on during this skill as long they do not submerge in the water. Paper surgical mask could be placed on victim by a second lifeguard to reduce direct face-to-face exposure only if feasible. NOTE: Make sure paper surgical on the victim can easily be removed if it begins to hinder the victim's airway. Do not use surgical mask if hinders victim's airway. If available, substitute victim with submersible manikin.

Equipment: Rescue Tubes, Backboard, PPE

Head Splint Face-down at the Surface or-Submerged in Deep Water

Until restrictions are lifted, hold off on performing this skill during in-service.

Scenario #1 (Dry)

NOTE: Scenario will change slightly due to the need to have a BVM with HEPA immediately when providing initial patient care.

Lifeguards should be in full PPE when providing primary assessment, two-rescuer CPR with BVM with a HEPA filter. After one full cycle, 2 additional lifeguards will arrive in full PPE and set up AED. Turn on the AED, go through analyzing the patient. Continue with 5 more cycles.

Equipment: Training AED, BVM with HEPA filter, Adult Manikin

Scenario #2 (Dry)

Lifeguards should be in full PPE when providing the primary assessment, CPR with obstructed airway, BVM assembly, and setting up the AED.

Equipment: Training AED, BVM with HEPA filter, Infant Manikin

Scenario #3 (Wet/Dry)

Lifeguard #1 will make the rescue on a submerged manikin. Lifeguard #2 will bring the extrication board and the BVM in full PPE. Lifeguard #1 and #2 will extricate the victim. Lifeguard #2 will provide the primary assessment and initial ventilations before providing compressions. Lifeguard #3 and #4 will arrive with the AED and in full PPE. Lifeguard #2, #3, and #4 will provide all the patient care. Lifeguard #1 will dry and then strive to participate once full PPE is donned.

Equipment: Training AED, BVM with HEPA filter, Extrication board, Submersible Manikin, Adult Manikin for CPR

Scenario #4 (Wet/Dry)

Lifeguard #1 will make the rescue on a submerged manikin. Lifeguard #2, #3, and #4 will bring the extrication board, AED and the BVM in full PPE. Lifeguard #2 and #3 will extricate the victim. Lifeguard #2 will provide the primary assessment and initial ventilations before providing compressions. Lifeguard #3 will assemble the BVM. Lifeguard #4 will set-up the AED. Lifeguard #1 will dry and then strive to participate once full PPE is donned.

Equipment: Training AED, Pedi BVM with HEPA filter, Extrication board, Submersible Manikin, Adult Manikin for CPR

Scenario #5 (Wet/Dry)

Lifeguard #1 will make the rescue on a submerged manikin. Lifeguard #1 and #2, #3 will bring the extrication board, AED and the BVM. Lifeguard #2 is in full PPE or begin to don full PPE.

Lifeguard #1 and #2 will extricate the victim. Lifeguard #2 will provide the primary assessment and initial ventilations with the BVM before providing compressions. Lifeguard #1 will dry and then strive to participate once full PPE is donned. Lifeguard #1 will set-up the AED.

Equipment: Training AED, Pedi BVM with HEPA filter, Extrication board, Submersible Manikin, Adult Manikin for CPR

Scenario #6 (Dry)

Lifeguard #1 will activate the EAP and perform the initial assessment in a cloth mask. Lifeguards #2 and #3 will bring AED and the BVM in full PPE and take over. Lifeguard #1 will leave and activate EMS. Lifeguard #2 will provide compressions. Lifeguard #3 will assemble the BVM and set-up the AED.

Equipment: Training AED, Adult BVM with HEPA filter, Adult Manikin for CPR

Final Skill Scenario #1 Submerged Passive Victim in Deep Water-Timed Response

Lifeguard #1 will make the rescue on a submerged manikin. Lifeguard #2 will bring the extrication board and the BVM in full PPE. Lifeguard #1 and #2 will extricate the victim. Lifeguard #2 will provide the primary assessment and initial ventilations within 1 minute and 30 seconds. Lifeguard #2 will provide 3-minutes of one-rescuer. Lifeguard #1 will activate EMS

Equipment: BVM with HEPA filter, Extrication board, Submersible Manikin, Adult Manikin for CPR

Final Skill Scenario #2 Multi-Rescuer Response

(See Scenario #3)

Lifeguard Certification:

ARC Blended learning curriculum will reduce classroom face-to-face exposure. Utilize the Lifeguard In-service guidelines for the participant progress log. Participants could bring a family member that can be used a “victim” for rescues, escapes and first aid.

Agency staff in full PPE could participate as the support rescuers for the Multiple-Rescuer Response Scenarios 1-6, and the Submerged Passive Victim-Timed Response.

Aquatic Programming:

In dealing with the COVID-19 virus and hopefully in subsequent unknown virus and bacteriologic elements these guidelines should give a general direction and working model to run various aquatic programs safely and effectively as health and safety order are delivered from the state, county, and local levels. Realizing that not all pools and aquatic venues are created equal the guidelines should be adjusted as needed to address any unique elements that may vary from what is prescribed herein.

This section will be broken down into the most common achievable programming with the most restrictive elements and then opened into a tiered programming that opens up more challenging and potentially riskier aspects as it relates to compromising some type of exposure to a viral or bacteriologic component.

As with any guideline these should be reviewed, analyzed and discussed prior to implementation. Each program will look at a reasonable restrictive component to reduce risk but still be able to conduct the program safely.

In the First or Initial Phase of programing the following programs should be able to operate successfully with appropriate guidelines that we suggest. A facility may not have all of these components and/or choose to start with only 1 or 2 and work through those prior to adding additional program components. This will be up to each agency to determine as to the necessary preparation and planning needed for each program to implement it safely and prevent and exposure risk to patrons. The programs listed in the recommended initial phase below may come into place as Phase 2 or 2b in the state of CA guidelines or may be Phase 3. With the Second Phase (Phase 2 as specified in this document) coming later.

Initial or Phase 1

Lap Swimming:

In order to conduct a safe lap swimming program a number of factors should be identified in each aquatic venue to remove, reduce, or warn swimmers to mitigate risk. The following items are elements to consider:

- Engineering components- what are they and why are they important?
- Contact or touch points, Pool equipment and usage – what are the areas of most contact that can be mitigated? How do you handle this?
- Distancing protocols and Movement to avoid guest to guest contact- How can you reasonably achieve them? How do you direct the flow of patrons for the program?

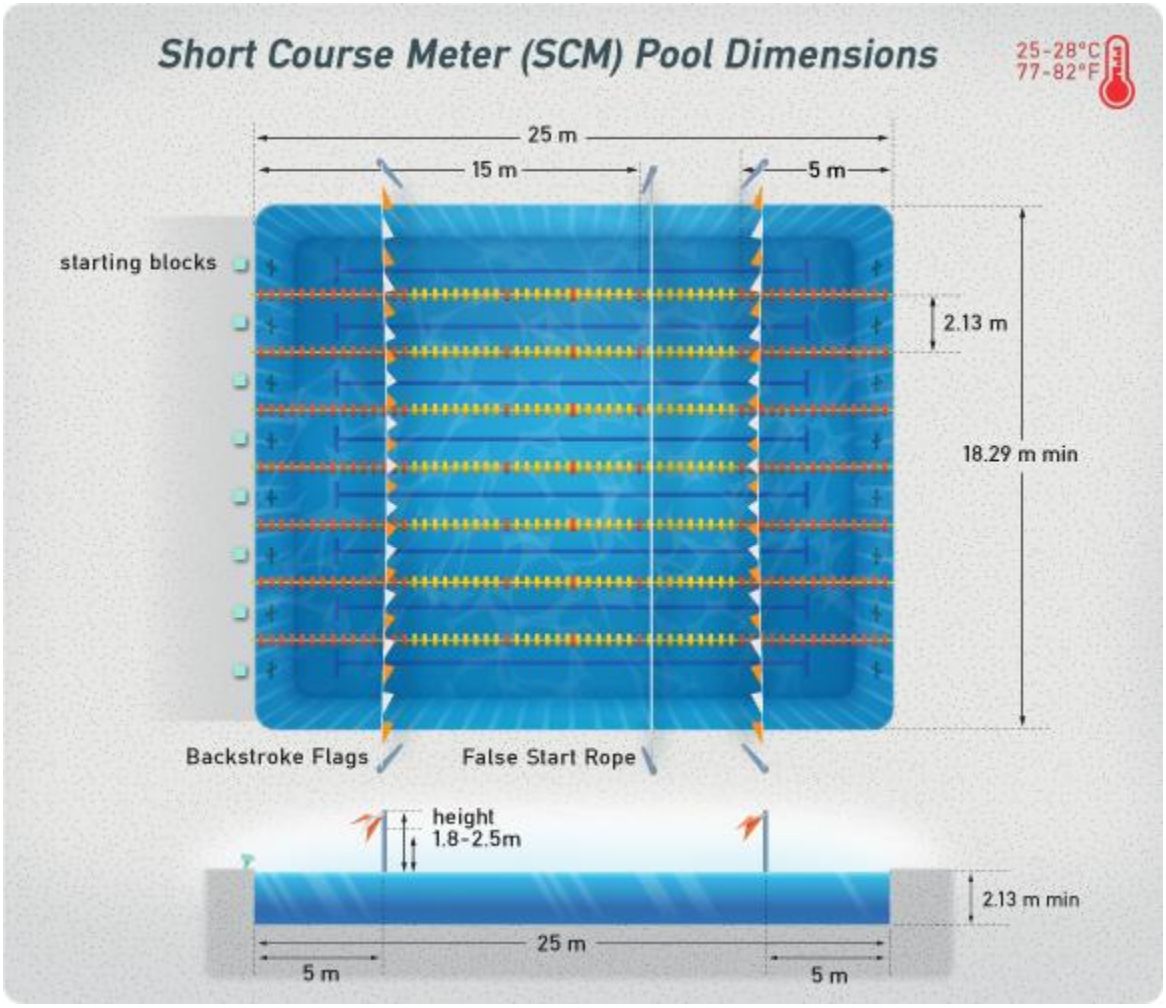
- Specific rules- What do you need to do to educate your patrons to changes?
- Lifeguard Safety staff- What do you need to do to maintain their safety?

Engineering Components:

-Pool size

Swimming pools come in various size components but for regulated lap swimming the variations for a competitive pool typically range in length from 20 meters, 25 yard, 25 meter and 50 meters and depending upon the number of lanes it was designed for will vary in width. The key in the control mechanism for lap swim purposes is in the width. Luckily the variance is typically 2 meters minimum (6.5 feet) between each lane with a fairly standard 2.13 meters (6.988 feet) minimum for competitive purposes or 2.5 meters (8.2 feet) for long course configuration and some more generous will exceed this. For physical distancing all of these pool widths are ideal for maintaining the current recommended distance guidelines for COVID-19.

Diagram A



-Lane lines

It is critical to have separation between each lane with the use of a lane line. The lane line differentiates the area for the swimmer and keeps them within a separation element with a safe swimming component. The lane lines should be fixed and attached which produce tension in the line with buoys affixed throughout or periodically so that the swimmer can maintain a visual focus to stay within their lane. A lap swim program should not be conducted if lane lines are not available or in use to maintain a division of the lanes.

-Lane Markings

In tandem with the lane lines are the lane markings on the pool floor and each wall. These markings are the center of the lane line and make the swimmer aware of where she/he may be anytime throughout the course of swimming a length. It is critical that these markings are in place and lap swim should not be conducted if the lane markings are absent. Additionally, the swimmer in the lap should center in the lane and follow the lane markings as they are swimming.

-Pool Sanitation/Filtration

By State and County code in order to operate a public swimming pool all pools must adhere to the code to have adequate Sanitation with a minimum/maximum chlorine residual range as well as a minimum/maximum range for PH. These ranges were instituted to have the most beneficial result in dealing with viral/bacterial pathogens and to kill the pathogens quickly and efficiently when exposed to the water in the aquatic environment. By adhering to these controls should be adequate to deal with COVID-19 or any subsequent pathogen that is introduced. Additionally, the filtration aids in trapping elements and by utilizing the prescribed turnover rates will also mitigate and trap pathogens. The suggestion is that as COVID-19 still has many unknowns that you go beyond the minimum required Chlorine residual of 1.0ppm to a 2.0ppm in order to reduce the CT (contact time) which will in turn reduce the kill time of the virus if it is exposed within the aquatic environment. No aquatic program should be permissible unless an aquatic venue meets or exceeds the minimum requirement or can maintain the prescribed variation indicated by state code.

Accessible pool lift

With the Americans with disability act all pools are required to have a fixed pool lift which is able to be controlled independently by the users to get in and out of a pool/swimming lane. The key in this for purposes of lap swimming is that it is independently operated so as not to have any potential exposure beyond the user.

Lifeguard stand/tower/elevated station:

Most pool designs have within them an elevated guard station for swimmer supervision. However not all do or do to safety reasons may have been eliminated. If there is an elevated

station it should be utilized. For the purposes for facilities that do not have an elevated station the following 2 recommendations are given. For the facility protocol that have walking or roaming guards the lifeguard should maintain a physical distancing of 7 feet. In order to ensure this the operator must have marking elements with tape or utilize cones to distinguish the distancing. The second option would be to make a portable stand that could easily be constructed so that the guard is elevated as long as it is placed in an area that can easily see the zone of coverage.

Summary of Engineering Guidelines:

- Each lane width is to be a minimum of 2 meters or 6.5 feet.
- Lane lines are to be affixed and used for lap swim for each lane a swimmer is in.
- Lane markings must be visible and usable and swimmers are to be in line with the markings while swimming.
- All current state codes in relation to safe pool operations from a chemical and filtration standpoint with a suggested slight elevation from the minimum standard must be adhered to in order to have a lap swimming program.
- Pool lift must be controlled independently unless a household member is in attendance to provide support
- Utilize lifeguard stations or make a portable tower in which the lifeguard can be elevated which maintains visual sightlines for zone of coverage or maintain a physical distancing of 7 feet when roaming for patron surveillance.

Contact or Touch Points:

Entry/Egress Doors or gates

Most facilities have doors or gates in order to enter the area. Some of these can be left open to go in and out of the area but others by code must be kept latched and closed. For those that can be left open the recommendation would be to do so to eliminate a potential touch point. For those that require it to be latched and then opened the recommendation would be to have disposable gloves at the gate/door for the first swimmer to open it and hold it open until the grouping of swimmers is in. As an alternative you could provide portable sanitizer available for the swimmer to sanitize their hands to reduce possible contact with a previous user. Either method is advisable and appropriate. An appropriate waste receptacle should be nearby to dispose of the glove if used.

Seating

Most aquatic venues have a variety of seating options from chairs to benches etc. All of these areas potentially have an exposure risk. The guideline would be to reduce the amount of

seating or eliminate entirely as most of it is utilized for swimmer gear (towel etc.). It is recommended that a single chair or crate be utilized that lines up with the center of the lane in the pool for each participant and sanitizing wipes be made readily available for each swimmer to wipe down any touch points and then dispose of the wipes in a proper receptacle.

Pool Equipment

Many lap swim programs provide training aids i.e kickboards, pull buoys, fins for lap swimmers to utilize for their workout. These shared elements provide a bit of a contact issue as they are often used from one person to another at various times. It is true that all of these elements will touch the water in some capacity but they also touch the swimmer and from a feasibility standpoint and sanitation standpoint it is probably a best practice for swimmers to provide their own swimming equipment so that you have one less element to sanitize and worry about. The recommended guidance is that you pull any of these elements that the facility currently utilizes and have a policy that until the situation is changed that any swim element must be a personal element and that the individual swimmer agrees that they have and will continue to sanitize it when brought into the facility.

Shower Handles

Facilities that utilize deck showers for swimmers prior to or after their swim will potentially expose the next user upon use if someone is infected. To mitigate this, you can employ a number of practices. These include, swimmer must wipe down handles after use with an approved sanitizing cloth that is nearby the shower or assign a “break guard” to do this or you can disallow use of deck showers and assign a shower in the locker room.

Pool Lifts

For pool lifts as mentioned in the engineering section they are to be self-use and as such the individual using it should be responsible for sanitizing it. However, as the individual utilizing it may not have the capacity to sanitize it appropriately this is better left for a staff member to do. Additionally, unless you have a large disabled population it is a cleaning element that should probably should not be much of a operational difficulty.

Stair rails

To get in and out of a pool stair rails are made available. Some people will utilize these and other will not. From a practical standpoint other than the first users the rails will be dry and the first users will be touching the surface and get into the water in which they will be in a sanitized water situation which should reduce and transmission elements. When they are getting out they have chlorinated water on their hands so at each touchpoint any potential pathogen is now put under a sanitized element. There is very minimal contact risk with the rails but nonetheless the recommendation would be periodic wipe down with an approved sanitizing agent.

Summary of contact point Guidelines:

- Utilize glove or hand sanitizer to open any necessary door
- Limit or eliminate seating and provide sanitizer for swimmer who utilize any available
- Only allow personal equipment to be used that has been sanitized appropriately prior to use.
- For shower handles either have sanitizing wipes to wipe down after use.
- For pool lifts have staff sanitize as appropriate.

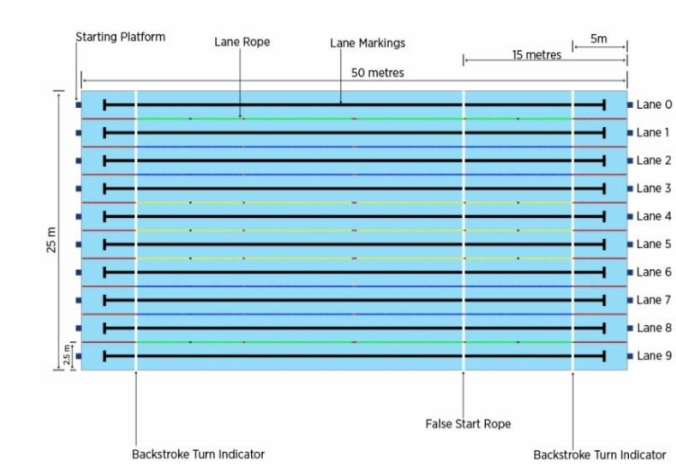
Distancing protocols and Movement to prevent Guest to Guest contact-

Currently for COVID19 there exist a standardized guideline of maintaining 6’ of distance between individuals of separate households. In order to maintain this guideline in the aquatic setting some engineering controls can be enacted. First of all, you will want to identify the distance utilizing a physical element i.e. tape, cones, an applied appliqué on the ground where you are queuing the swimmers prior to entering the facility or lap pool area. In order to maintain this distancing you will need to continue to mark the distance throughout the space all the way to the center of each lane. You may also want to designate a holding area as each set of swimmers comes for their swim time until it is time for them to swim while the current swimmers leave the pool. (See diagram below)

For entry and exit into the pool it is a good practice to have a rotating lifeguard to bring in the new swimmers in a single file line after the previous swimmers exit following directional arrows on the opposite side of the pool while proceeding either to the locker rooms or out of the facility. The lifeguard who was on duty for patron surveillance would ensure all users are out and that the pool is scanned prior to calling in the next set of swimmers. The incoming lifeguard would bring them in and do a bottom scan and then give the ok for the new swimmers to enter and begin their lap swim program.

Diagram B

Exiting swimmers



Exiting swimmers to locker rooms

Incoming Swimmers

By utilizing the queuing protocol as well as employing the rotation of swimmers and lifeguards within the guidelines you have essentially maintained distancing requirements as well as minimized and limited exposure risk to your swimmers.

One thing you need to be mindful of is the total number of swimmers utilizing the lap pool as this may create some challenges with 6 feet minimum distancing requirements between each person. If you have 10 individuals from the pool about that would mean you would need 60 feet of space if you had them in a straight linear configuration. However, if you implemented multiple rows you could reduce the linear space by ½ or more if you have the additional horizontal space to do so. This would be the ideal for your queuing area for your swimmers. You could then put numbers which would differentiate each person and their space as well as identify to them the order to go in and the lane in which they would swim. Your options would look like this:

Option 1: 60’ length X 6’ width with 6 feet between each person

-6 ft-

1 2 3 4 5 6 7 8 9 10

Option 2: 30’ length X 18’ width

-6 ft-

1 2 3 4 5

-6ft-

6 7 8 9 10

You could also have a staggered element in either of the above: 60’ length X 18’ width

1 3 5 7 9

2 4 6 8 10

This would provide additional spacing reducing exposure but would also require additional space. Each facility will need to determine what is the best option for them and their particular spacing limitations.

One last area for guest would be the requirement of all swimmers while queuing or entering into the queue from either the main entry point or locker rooms after taking a shower would be to put a facemask on until they are in the center of their lane assignment and then to remove it prior to getting into the lane. They will also put the face mask on after they have gotten out of the pool and are queuing back for exiting.

Summary of distancing and movement avoiding guest to guest contact guidelines:

- Keep all swimmers 6 feet away by using distance markings
- Keep swimmers 6 feet apart by setting up a holding/staging area for incoming swimmers
- Insure a plan for the queuing space needed and layout by marking appropriately
- Have current surveillance lifeguard direct exiting swimmers from the pool
- Current surveillance lifeguard will scan bottom prior to signaling in the incoming lifeguard who will take over surveillance.
- Incoming lifeguard will perform a bottom sweep of the pool and take over surveillance and direct the incoming swimmers to their lanes and begin the next cycle of lap swimming.
- Swimmers will wear face mask while queuing into lap swim and queuing out at the conclusion of their lap swim time.

Specific rules

It is critical that for reopening up any program that you educate your swimmers as to the new protocols and rules. This should be done using a tiered approach. Physical signage is the initial tier as you will need to establish the changes and have the signs in place prior to advertising your lap swim opening. The next phase is that you insure that all members of your aquatic team are well versed in the new protocol. You will need to provide them with specific and directed training as to how your operation will change and what will be the new standard. Thirdly you should engage a marketing and outreach strategy that contacts your previous swimmers directly via email or membership or registration software and/or website and send them the specific new rules as well as who to contact for questions. Additionally, engage in your social media platforms for broader reach.

One last area for specific rules should be the consideration of limiting lap swim time to 30 minutes at the maximum. 30 minutes allows most swimmers a decent workout time as well as limits exposure risk. Additionally, as known from attention studies that lifeguards will lose concentration and focus beginning at 20 minutes and then will diminish as time continues. At 30 minutes it would be sufficient for swimmers and lifeguards to rotate and maintain an appropriate level of safety throughout and would have the best opportunity to get more people in and out of the facility.

Summary of rules guidelines:

- Post new rules and protocol through the facility
- Educate and train staff on the new rules and protocol
- Engage and send the rules to current swimmers
- Circulate your rules, lap swim opening, and protocols on website and social media
- Limit lap swim times for patrons and guard rotation to 30 minutes

Water Exercise or Water Fitness:

There are a variety of classifications which fall under water exercise or water fitness frequently referred to as Water Aerobics. This element has many nuances from individual water exercise to group classes with a myriad of options from shallow water to deep water to SUP (stand up paddle board) to water walking and the list goes on. Most water exercise employs the use of water as a resistant element in concert with the body and or equipment to provide force to strengthen or tone the muscles in the body as well as repetition and speed to produce the aerobic element for cardiovascular health with low impact.

In order to break this down we will examine water exercise from two aspects: the individual unstructured user and the organized class component users. The general assumption of the engineering controls and the components listed in the Lap Swim area are applicable for water aerobics but modifications on the guidelines need to be made. So as not to repeat the aspects from the lap swimming area only the modifications will be presented with the assumption that the primer of lap swimming will be the guiding document to utilize as we move through the various programs. Additionally, for more specialized exercise components such as water walking or SUP or water bicycling/treadmill etc. those will be under a separate component.

Individual Unstructured user: Many individuals come to aquatic venues in concert with lap swimming in which an area is designated for their use. Many times this is within a lane line and other times in an entirely different area.

Concurrent programming with lap swim: For programs that allow unstructured water exercise by individuals with lap swimming this can still be accomplished with some additional guidelines that need to be followed. These include:

- specific lane allocation
- specific number of exercisers allowed within a lane
- positioning within a lane
- equipment use and limitation

Lane Allocation: For unstructured users the pool should allocate 1 or 2 if needed to the exterior lanes (lane 9 and or Lane 0 in Diagram B). By utilizing the outside 1 or 2 lanes you are limiting the risk to the lap swimmers and have the most opportunity of success to run multiple programming with an aquatic facility concurrently. The other reasons why you want to use the exterior lanes is that most exercisers utilize both the wall as well as the free water area to perform their exercises. Additionally, they employ a variety of equipment so that would need to be placed on the pool deck within their generalized area.

Specific number of water exercise participants: The overall length of the pool will determine the actual number of acceptable unstructured water exercise participants. For a 25 yard pool with is 75’ in length the maximum number of exercisers should be limited to 7. You should give 10’ minimum space between each participant. The general reasoning is that water exercisers have a range of movement in which they need to perform various exercises and with the movement of water the participant will likely not be able to maintain a central area so that you need the additional space to allow for the variance in order to maintain an acceptable range of physical distancing.

Positioning in the lane: Ideally as you are queuing exercisers in they would need to be in their own separate line and they would either be first or last coming into the pool environment. They would cycle in individually to their assigned area of the lane which should either be designated with cones and/or dividing ropes if possible in which the exerciser would take the dividing rope

which is on the lane line and affix to the pool wall or connection point which would be the most advantageous dividing of the space. Once the exerciser is in their area they should be directed to use the center portion of the lane and interior area by the wall and to reasonably stay within this framework of the lane. This is depicted in Diagram C.

Diagram C **-10 ft-**

Participant position within 10’ areas

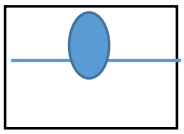
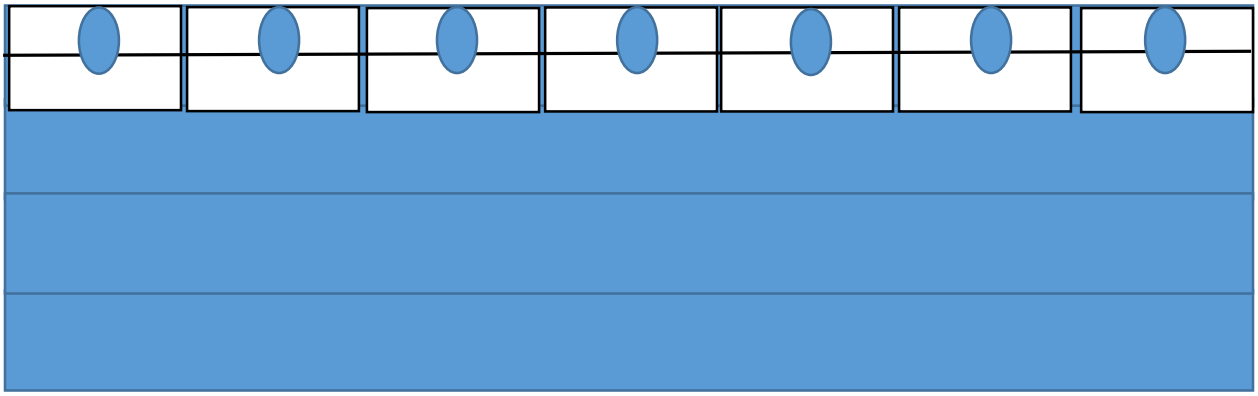


Diagram D

- **10’ -**



In a 4 lane pool with a multi program configuration you could have 3 lap swimmers and 7 water exercise participants for a total of 10 aquatic program participants as prescribed utilizing physical distancing guidelines.

Equipment Use and limitation

As indicated in the guidelines for lap swimming your unstructured water exercise participants should utilize their own equipment that is brought in by them that has been sanitized. Additionally, as students are waiting for their program they should have face mask when entering and staging in the queuing area.

There is a plethora of options for a participant to use from Styrofoam/plastic resistance dumbbells to Styrofoam noodles, to resistance gloves to paddles and kickboards etc. For the

purposes of programming and safety less is more. The recommended guideline would be to limit equipment to 3 or fewer pieces of equipment for each visit.

Summary of Guidelines for unstructured water exercise program:

- Maximum of 7 per lane utilizes end lanes in 75’ pool length
- Minimum of 10’ per individual per lane
- Utilize distancing controls of space via visual elements cones and or dividing lines
- Exerciser to utilize center of space and into the interior by the wall
- Maximum of 3 pieces of equipment that is provided by and sanitized by the participant

Structured Water Exercise classes:

In the structured environment for water exercise classes many elements from the unstructured individual can be employed. The difference typically in the structured versus unstructured is the number of participants. As many instructors have built a following it is not unusual for classes to have 20+ participants in which they utilize many lanes of a pool. This section will address the structured class that exceeds the 7 individuals shown in Diagram D. The Guidelines for the larger classes have the following consideration:

- Pool Space
- Number of allowable participants
- Equipment use and distribution to students
- Instructor Safety
- Class length

Pool Space:

For Structured classes with more than 7 participants you will need a minimum of 2 or more lanes. For smaller pools with 4 lanes you may need to eliminate concurrent programing with lap swimming during the water exercise class. For 6 lane pools or greater you may be able to run concurrent programming but still utilize enough distancing between program types. The suggestion would be to have a buffer lane that is empty between the two programs to avoid any potential risk.

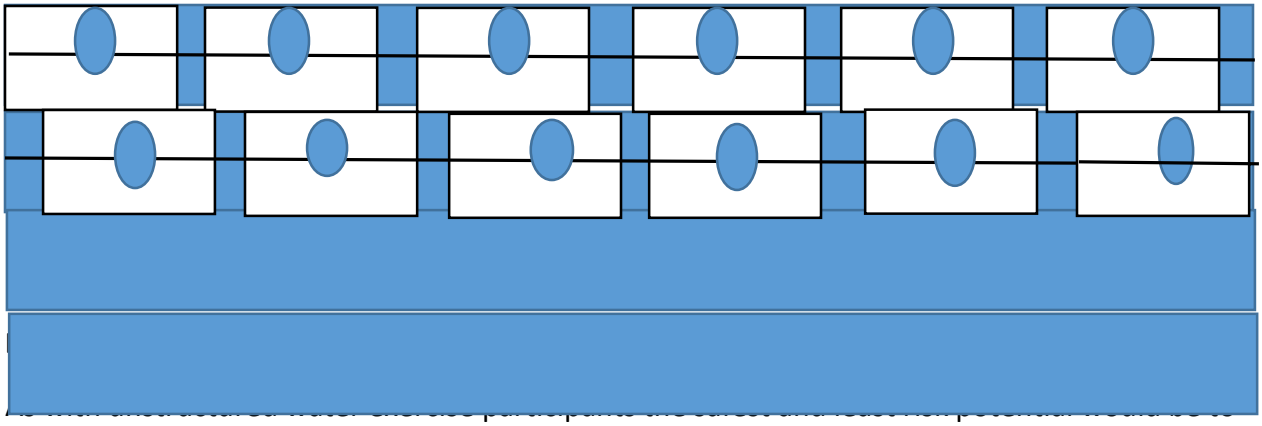
Allowable participants:

The reduction of class size will be necessary until current guidelines that have been specified for group programs are changed. The current guidance for a children’s daycare or summer camp is specified at 12. Thusly the recommendation for the largest water exercise would fall in line with that number to allow no more than 12 participants to each instructor in the same area. If you can divide a pool in ½ and have one instructor deal with 12 participants on one half with a buffer lane in the middle and another instructor on the other end with an instructor, you could

have 12 more participants. However, from a practical standpoint it would be difficult to do with noise and direction. The overall recommendation would be to only run 1 at a time.

For these classes it would then follow the spacing for Diagram E.

Diagram E



have students bring their own equipment and limit that equipment to 3 or fewer pieces of equipment. However, many operators will want to provide the equipment to participants. If this is the case, then the recommendations would be to utilize any equipment type to a set of exercises that use the equipment in succession so that there is no back and forth in/out of equipment or that equipment is given to each participant in a storage mesh bag that can be secured to a lane line or on the deck when having to access them. At the conclusion of the class the participants would put back in the bag and then put in an equipment area for sanitation after the class.

The ideal scenario for distribution of any needed equipment is that each equipment bag is placed on the participant number in the queuing area prior to the program and when the participants get to the queuing area they would take the equipment in with them to the pool area.

As with the unstructured exercisers the structured class participants should utilize face masks while entering into the pool area and queuing line and remove them with any personal items in specified bins/chairs that are safely distanced apart and place them there for retrieval to put back on after the class.

Instructor Safety:

The instructor should utilize a face mask while teaching the class. Utilization of a voice amplification system should also be utilized to broadcast exercise instructions to the

participants. The instructor should also physically distance themselves from the edge of the pool deck by a minimum of 7 feet. For better visualization by the students the instructor may also employ an elevated station such as a small platform for the students to see them better. If it is the job by the instructor to also sanitize the equipment the instructor should use additional PPE's with utilization of gloves and a face shield to sanitize the equipment. For overall sanitation the recommendation would be to submerse the equipment completely in an appropriate sanitizing solution for 15-20 minutes and then be left to air-dry and then be collected and put back into individual backs for use for the next class program.

Class length:

The overall length of any program should be limited to provide a fair amount of exercise but also reduce exposure risk. As with lap swim and practical queuing of participants into the area the overall recommendation would be to reduce the standard 1 hour of class time to a 30-minute session as this would provide the most seamless concurrent program queuing for water exercise participants and lap swimmers. However, if you do not have concurrent programming and you can ensure additional spacing within the swim area a one-hour time maximum may be permissible.

Summary of Guidelines for structured water exercise classes:

- Utilize 1 or more lanes for classes and if concurrent programming with lap swim have a one lane buffer between the two programs
- No more than 12 persons per class with 1 instructor
- Students should be appropriately spaced out and utilizing a queuing line to enter into the program area and exit and have mask on while entering and in queuing area
- Students to utilize center of lane and into the wall or lane line in the pool
- Students will either bring their own equipment or an equipment bag will be provided in the queuing line for participants that can be affixed to the lane line and/or pool deck
- No more than 3 pieces of equipment to utilize per person.
- Each piece of equipment should be utilized completely for all exercises for that type of equipment to minimize overall use and potential of exposure from floating away etc.
- All equipment to be sanitized after class utilizing PPE's and appropriate sanitizing process.
- Instructor to utilize face mask and stand 7 feet from pool edge and possibly elevated.
- Use of amplified system for instructions is also recommended.
- Limit class times to 30 minutes or no longer than 60 minutes if no concurrent programming and can maintain additional space for participants.

Specialized Water Exercise:

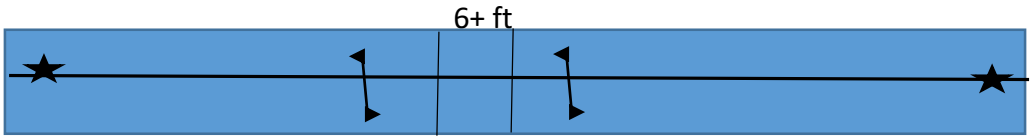
This area is for more of the non-traditional and emerging water exercise programs. Things that fall under this would be water walking (structured or non-structured), SUP yoga, water bicycling or water treadmill.

Water Walking:

Most of the guidelines indicated earlier should be employed and are easier for some of these elements versus others. For water walking the guidance would be that it is limited in order to maintain physical distancing. The issue that generally becomes problematic is that these programs may utilize a lazy river or lap pool and distancing can be a challenge with the variance of faster/slower individuals whether in a structured or non-structured program. The overall goal of maintaining physical distancing should be the guiding principal whether you can allow this activity or not. Certainly if you had a water walker in a lap lane they could follow the center of the lane and maintain all the standard distancing protocol of a lap swimmer. You could possibly divide a lane in half and have 1 walker utilize the center of each side so long as you provided a buffer area between the 2 sides so that distancing is maintained with a physical barrier. As you can't do this in a lazy river the recommendation would be to avoid this activity until physical distancing protocols change.

Diagram F: 1 lane water walking ★ indicates each water walker

Indicates coming to lane separator and turning



Stand Up Paddleboard (SUP):

There are programs that utilize SUP in a fixed position for yoga and stretching and exercise. This could be done safely and within the water exercise guidelines with 7 boards affixed in the pool. All guidelines as mentioned previously for structured water exercise would be utilized.

For SUP classes that are not affixed it would be problematic from a practical standpoint to run these currently in a pool setting. The recommendation would not be to allow these in a pool setting currently until last phase of statewide reopening with no restrictions.

Aerobic Equipment Based water exercise programs:

In water bicycles and treadmills are becoming a new trend. These elements may be able to be used and a program that allows for this may be permissible. The distancing protocols and class organization and limitations that have been mentioned must be maintained. The one difficult element to manage is the ability to put the equipment in place and then subsequently remove is the problematic aspects. If the pool has a zero depth entry in which the equipment can be put in place and allow for distancing, then either the instructor or equipment staff could affix to ensure proper distancing and then removed after the class. However, for those complexes that do not have this it is impractical to put the equipment in place and remove with only 1 person and thus would have a potential exposure component that could not maintain the physical distancing protocol. Thusly the program should not be run. If you can utilize a mechanical device such as a lift to circumvent the utilization of 2 people, then the program may be permitted.

Summary of special programming guidelines:

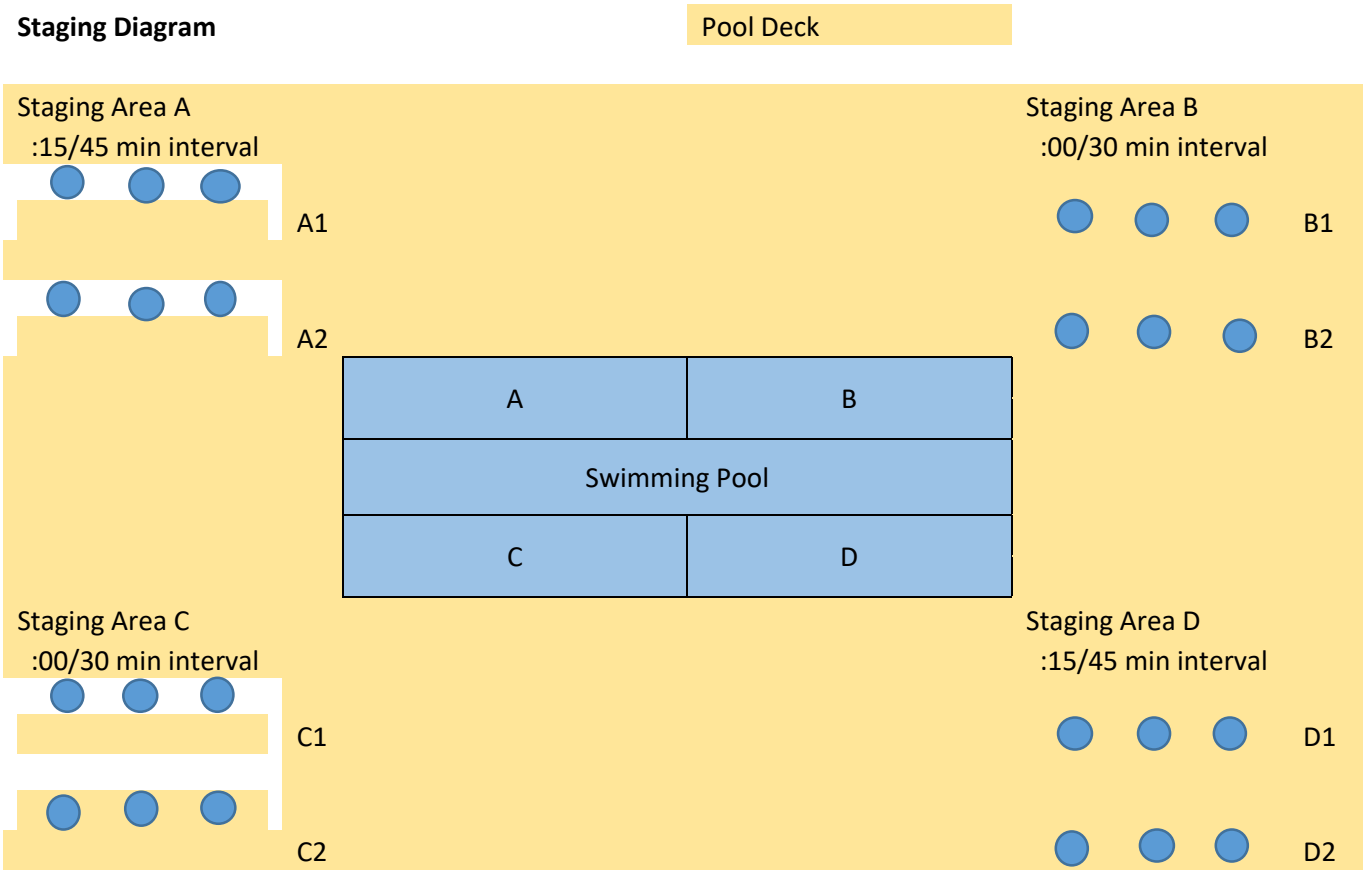
- Water walking is permissible if utilized in lap lane in the center of the lane either with 1 person or 2. If utilizing 2 then lane has a physical separation zone and each lane walker stays in their area in the center of the lane
- Water walking in lazy river is not currently permissible as it would be too difficult to control with different user abilities.
- SUP in fixed environment is permissible as long as physical distancing can be maintained
- SUP in untethered use is not permissible in fixed pool environment.
- Aerobic based equipment programs are permissible if the equipment can be placed individually that maintains physical distancing either through zero depth or other means.
- Aerobic based equipment programs are not permissible if need to utilize 2 or more people to input or take out equipment that cannot maintain appropriate physical distancing.

Swim Lesson Programming:

The swim lesson programming guideline will fully utilize the existing facility engineering controls. The goal is to provide the highest level of swim lesson programming while maintaining social distance, minimizing contact to high touch areas and objects, and to maintain a consistent routine of disinfecting swim equipment and facility features.

Social distancing will be adhered to when arriving to the facility, checking in and staging within a designated staging area prior to the swim lesson. Participants will store their belongs at their assigned spot within the staging area. (SEE STAGING DIAGRAM)

Staging Diagram



All staging will be on the deck. This is to reduce any unnecessary gathering within the bathroom and locker/changing rooms. There should be multiple tiers of staging within each staging site (Staging Group A1, A2, etc.) This is so participants can be ready for their upcoming swim lesson and safely avoid being within, on, or around the current participant's belongings. Example: Group A1 is currently in the water, while Group A2 is on the deck waiting for swim lesson in Staging Area A2. When Group A1 has finished their lesson, they will exit the pool and go directly to Staging Area A1. Once Group A1 is within their staging areas, Group A2 will enter the water, hence no contact with Group A1.

Swim groups should be staggered: Swim Groups A and D will be on the 15/45 of class rotation, and Swim Groups B and C will be on the 00/30 class rotation. This is to reduce the number of patrons on the deck and reduce the demands on the bathroom and locker/changing room(s).

Each staging area should establish a one-way entry and one-way exit corridor to the pool and back that doesn't cross into anybody else's staging areas. Each parent/child group should be wearing a cloth mask until entering the water. Before entering the water, parent/child will remove masks and place in zip-lock bag which will remain on the deck throughout the swim lesson.

Within each staging area, there should disinfectant wipes and a waist receptacle. There should also be a "Dirty" bucket for used swim lesson equipment. Swim lesson equipment will be disinfected at the end of each day.

Disinfectant wipes should be used on high touch points. Participants should be expected to wipe down areas they used during the swim lesson. Cleaning should be monitored and assisted in by a lifeguard on alternate rotation (non-surveillance position)

Swim lesson format should be developed around the idea that a parent/guardian will be in the water with the swim participant. This type of format should range from Parent Tot, Super Tot, and Learn-to-Swim levels 1-3. Parents will be in the water with their child to assist in providing support and guidance during the swim lesson. The swim instructor will be either on the deck or in the water at a designated spot to support the parent and child with corrective feedback and guidance.

Pre-swim lesson curriculum should be given to patrons to practice at home prior to swim lesson, specifically holds and what to look for during the skill practice. This can be via a link to a video or digital handout.

Water time should be maximized for skill development and stroke proficiency and endurance. Repetition is strongly encouraged.

Swim teaching/equipment aides should be limited to 2-3 per class. Participants can purchase their own teaching aides and bring to class. If participant use facility teaching aides, participants will drop used teaching aide into "dirty" bucket on deck to disinfected later.

A safe ratio of instructor to Parent/child should be 3-5 pairs.

Teaching configurations in the water (SEE DIAGRAMS 1-3)

Shallow Water pool

E location of teaching aids/equipment

ID indicates Instructor on deck rotates to each group

IW indicates instructor in water rotates to each group

indicates child

indicates parent/adult

indicates teaching platform

indicates divider rope

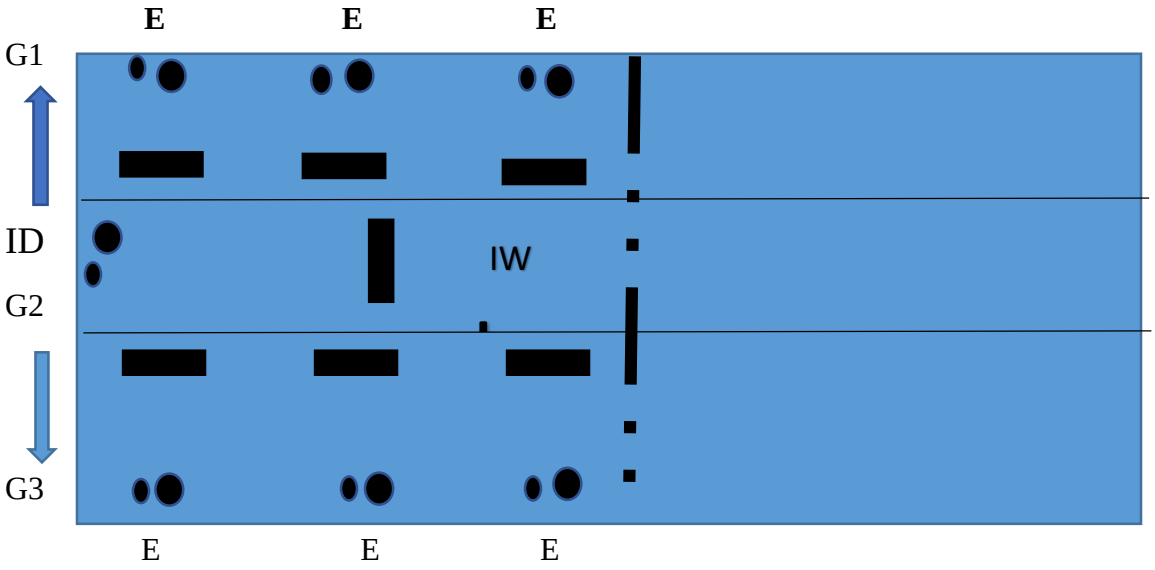


Diagram 1:

Could be utilized for a Parent Tot, Super Tot, or LTS Level 1 for a shallow portion of a 6-lane 25-yard pool. Large dot represents the Adult, small dot represents the child. The letter "E" represents where swim teaching aides should be located. This could be done with a hula hoop or similar teaching device. The "I" represents the instructor positions (ID one dry, IW one wet). The black rectangles represent teaching platforms as a possible option, not requirement. A dry erase board that lists the swimming drills and skills that will covered for the swim lesson should be on deck as a visual reminder of the day's itinerary. Parent Tot and Super Tot could run for 20-25 minutes, while LTS could run 25-30 minutes. NOTE: if possible, provide more buffering on either side of the middle participant to ensure social distancing. Lastly, provide an underwater dot for each swim group. This will be a visual reminder for participants to maintain social distance. Solid line down the center of the pool represents a boundary rope. Marked lines cutting across pool represent lane lines.

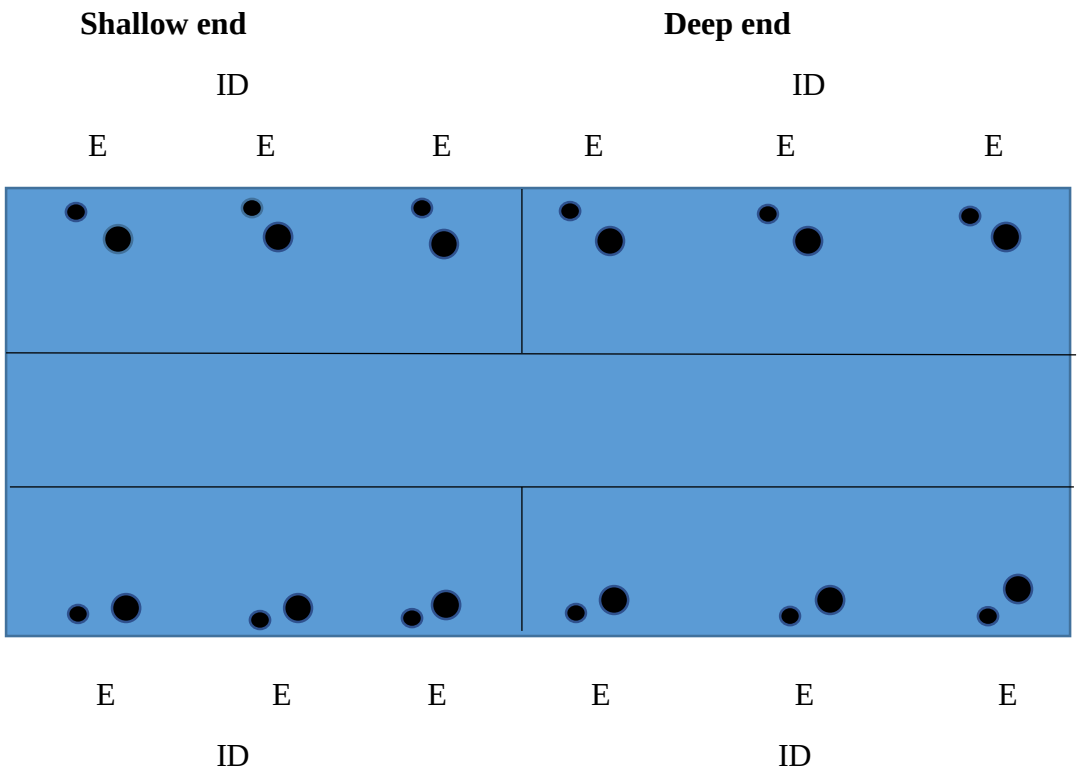


Diagram 2

Could be utilized for Super Tot, and LTS Level 1-4 for the shallow and deep portions of a 6-lane 25-yard pool. Large dot represents the adult, small dot represents the child. The letter "E" represents where swim teaching aides should be located. This could be done with a hula hoop or similar teaching device. The "I" represents the instructor positions on the deck. This configuration provides a demonstration lap lane between the teaching areas that can be utilized by any of the higher level LTS participants. A dry erase board that lists the swimming drills and skills that will covered for the swim lesson should be on deck as a visual reminder of the day's itinerary. NOTE: when using the demonstration/distance lane, swimmers must swim down the middle of the lane to maintain social distance. Solid lines splitting the teaching areas represent boundary ropes. Marked lines represent lane lines.

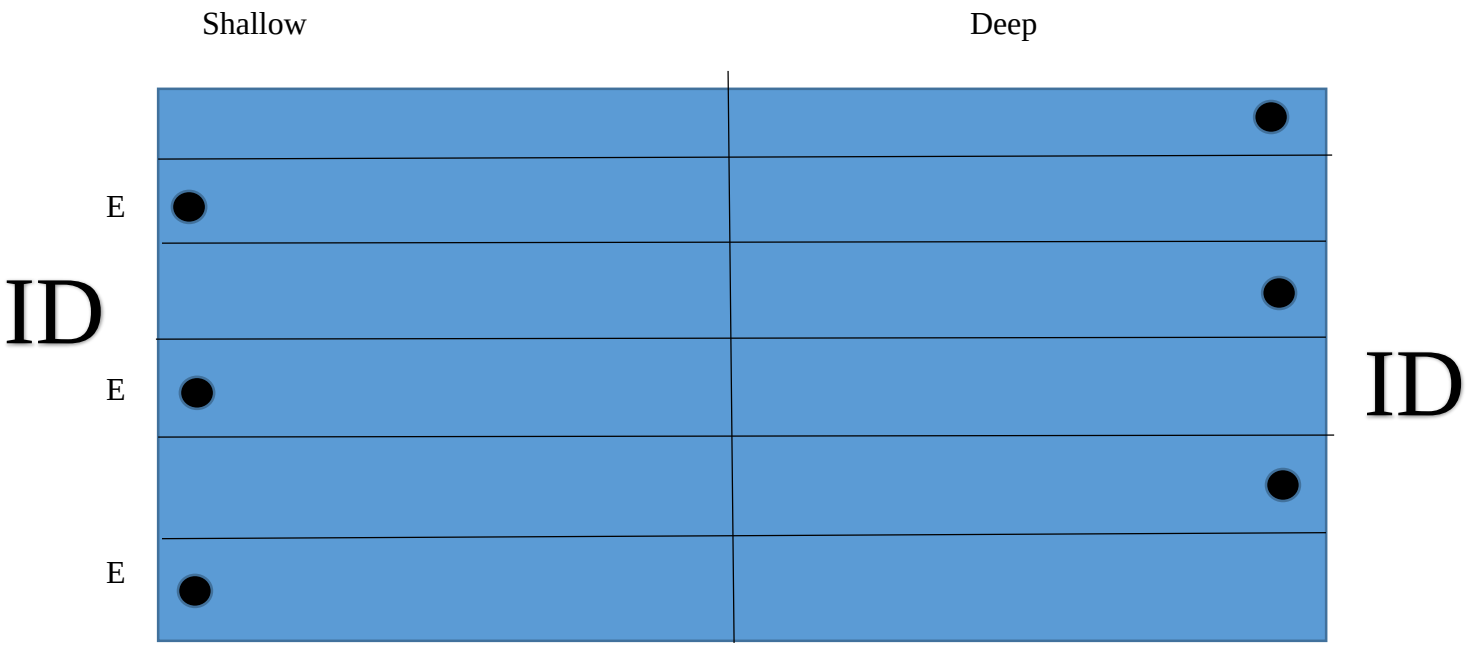


Diagram 3

Could be utilized for LTS Level 4-5, and Adult classes for the shallow and deep portions of a 6-lane 25-yard pool. The dot represents an advance swimmer or adult. The letter "E" represents where swim teaching aides should be located. This could be done with a hula hoop or similar teaching device. The "I" represents the instructor positions on the deck. This configuration provides distance/endurance training for advance swimmers. A dry erase board that lists the swimming drills and skills that will covered for the swim lesson should be on deck as a visual reminder of the day's itinerary. Solid line splitting the teaching areas represents a boundary rope. Marked lines represent lane lines.

Summary Swim Lesson Guidelines:

- Adhere to all physical distancing and engineering controls as indicated in previous program areas.
- Designate staging area for each pool/level and rotate from staging area to pool and stagger entry to pool/staging at the 15-minute delineation i.e 15/45 and 00/30
- Designate equipment area in each pool and limit equipment to as needed only
- Utilize adults/parents within lower level lessons and no more than 3 sets for each lesson
- Limit swim time to 30 minutes for each lesson
- Utilize lane lines/dividing ropes for separation and safety
- Preload instruction prior to students coming in by providing written digital instruction practice sheets or possibly video to show skills for upcoming lesson. By doing this you will focus less time in explaining and more time on actual skill practice.

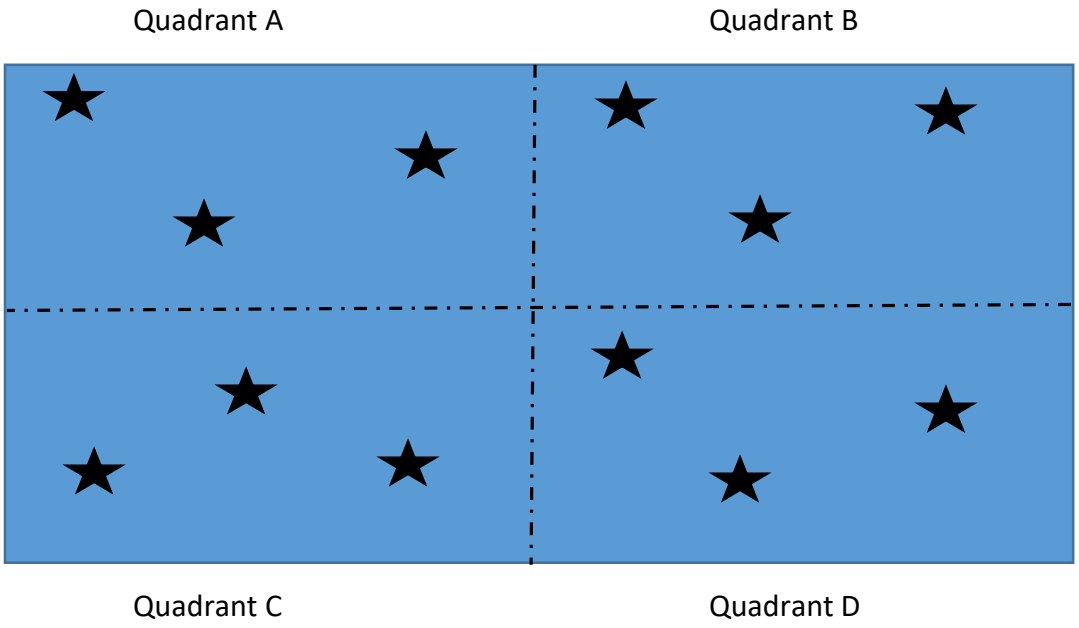
Aquatic Camps:

As with swim lessons an aquatic camp is a unique element which presents a mix of activities typically land based similar to traditional style camps that already are approved with up to 12 individuals. In most aquatic camps the water portion is limited to an instructional component (swim lessons) and a free play (recreation swim) component to round out the camp activities.

To entertain this type of program offering the following guidelines should be adhered to:

- Utilize the swim lesson guidelines as indicated above
- Utilize the current restrictive daycare/camp guidelines prescribed by the state of CA
- For open swim provide the up to 12 individuals an entire 6 lane lap pool and divide into quadrants with only 3 campers per quadrant to ensure minimized distancing risk (See diagram 4 below)
- Ensure that all campers have full lifeguard surveillance at all times for all water components.
- Physical distancing in locker rooms is maintained and frequent handwashing
- Camp leader must maintain mask on and supervision of all campers at all times

Diagram 4



★ **= swimmer**

Swim Team Practice:

This plan is currently based off USA Swimming guidelines and a current set of proposed guidelines that have been reviewed by Contra Costa County Environmental Health and utilized by the City of Mission Viejo. These guidelines are centered on USA Swimming Teams; Recreational Swim Teams generally fall into a grey area of competitive swimming but it has long been considered a best practice in California that at a minimum they follow USA Swimming guidelines for conducting safe swim team practices and competitions.

Arriving for Practice

Currently USA Swimming is recommending all swimmers arrive to practice in their swim suites ready to swim and avoid using the restrooms and shower areas. Swimmers and coaches should arrive wearing face coverings/masks. *If parents are allowed to remain at practice they should abide by the same guidelines as swimmers and coaches.

Each swimmer should be checked prior to entering the facility by a coach. Checks should include:

- Has the swimmer been ill or feel ill in anyway?
- Has the swimmer experienced any flu like symptoms such as fever, coughing, difficulty breathing, body aches, vomiting, and diarrhea?
- A fever check should be conducted.
- Swimmers should be encouraged and empowered to avoid practice if they are feeling ill.
- If a swimmer feels or expresses being ill, coughing or sneezing profusely, or has a fever they should be sent home immediately.
- If a swimmer or coach is sent home or misses practice due to illness they are required to receive a Doctor's clearance before returning to practice.
- If a swimmer or coach feels ill and tests positive for COVID-19 they must wait 14 days from the end of symptoms and receive a Doctor's clearance before they can return to practice.

While entering the facility swimmers should maintain a minimum of 6 ft. of social distancing or greater, not bunch together or congregate to socialize. If this cannot be maintained it is recommended swimmer start times be staggered to avoid gatherings.

Swimmers and coaches should have access to hand washing or hand sanitizer stations upon entering the facility and sanitize hands accordingly.

Social distancing will need to be maintained on the pool deck. Designating space for swimmers, swimmer bags, towels, clothes and equipment should be marked and labeled. Swim Equipment should not be shared between swimmers during the same practice time and cleaned and disinfected after each use.

It is recommended swimmers bring their own water bottles to avoid utilizing facility drinking fountains. Water bottles cannot be shared. No food should be allowed during practice.

Facial coverings/masks should be worn by the swimmer up to entering the pool.

*Currently USA Swimming guidelines allow parents to view all swim practices to help address a number of social issues swimming is attempting to resolve. If Parents are allowed to remain at practice they are required to follow of the same guidelines. Parents should:

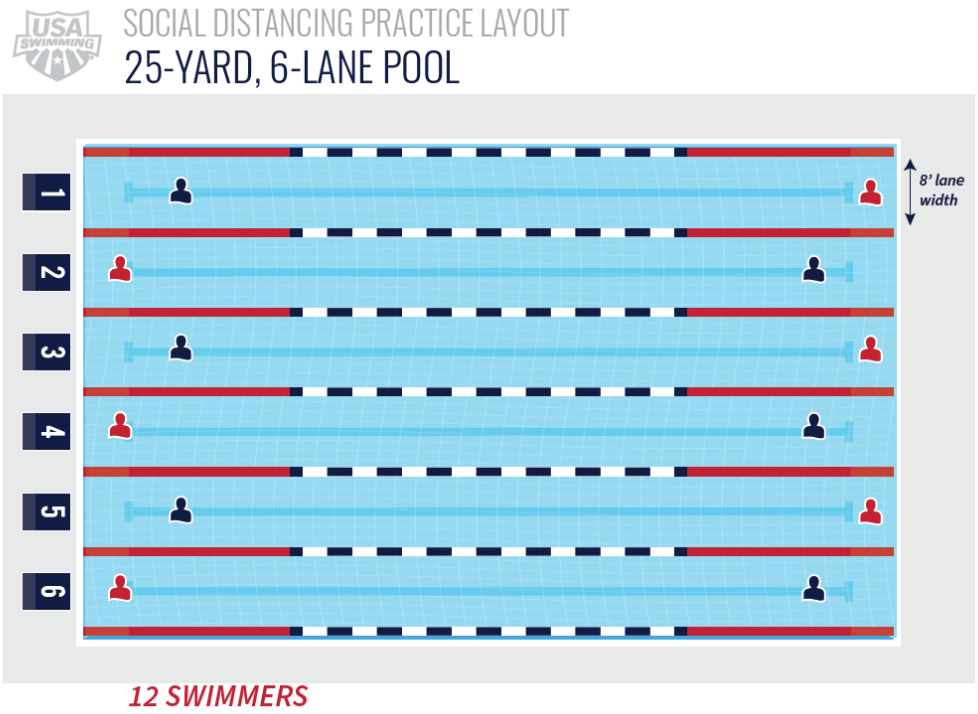
- Wear face coverings/masks.
- Have the same screening process as swimmers before entering the facility.
- Maintain 6ft or greater of social distancing. This can be achieved by designating observational places throughout your facility.
- Avoid using restrooms and drinking fountains.
- Sanitize hands upon entering and exiting your facility.
- Any deck furnishings, benches, chairs, etc. used will need to be cleaned and disinfected before the next use.

During Practice

Coaches must remain in facial covering/masks and maintain 6ft of social distancing from the edge of the pool when conducting practice. It is recommended coaches have workouts posted for athletes to minimize the need for coaching instruction during a workout.

Swimmers should not share equipment. Any equipment utilized should be clean and disinfected after each use.

The following example is for a 25-yard pool with 6 lanes. Each swimmer would start at the opposite ends of the pool. When swimmers pass each other they should breathe the opposite direction of each other.



We have provided a link to USA Swimming guidelines on how to run several pool configurations with more than 12 swimmers. At this time the 12 swimmer configuration is the only one approved by Contra Costa Environmental Health and City of Mission Viejo. However, ideally 1 swimmer per lane would provide the ideal scenario to minimize overall risk.

USA Swimming link: https://www.usaswimming.org/docs/default-source/coaching-resourcesdocuments/covid-19-team-resources/facility-reopening-plan-guidelines.pdf?sfvrsn=8a533a32_2

Leaving Practice

Swimmers should dry off, dawn masks upon exiting the pool. USA Swimming recommends they arrive and leave in swim suits, avoid using the bathrooms and shower at home.

Swimmers (and parents) should be encouraged to leave promptly.

Any and all equipment utilized during the practice should be cleaned and disinfected before the next use.

If restrooms or showers are needed or utilized, please refer back to the facility guidelines for cleaning and disinfection.

Open Water Swimming:

These guidelines will utilize existing engineering controls within an agency.

It is imperative that all open water swimming be done through a user group, and that each user group has established guidelines of how they will maintain county health orders. Each group has developed procedures on staggered entering and exiting of the water and passing swimmer protocols. Each user group has a designated staging area along the shoreline or waterfront along with specific times they can use the water. This is to reduce multiple user groups gathering on the shoreline.

Swim courses will be determined prior and posted digitally and on the shoreline to reduce confusion and gathering of members.

Spring Board Diving:

The area made available for spring board diving is usually about three lap lanes or 24 feet from the diving board side of the pool to the first lane line in a 25 or 50-meter pool. Given that most diving programs operate with the facility is open to other programs such as lap swimming, competitive swimming, recreation swim or swim lessons, physical distancing protocols already in place at the facility should be maintained.

If the facility has two 1-meter diving boards, the outside diving board, from the middle of the pool should be used with one diver allowed on the board, an on-deck diver at a marked spot behind the bottom steps of the board, 6 feet back from the diver on the board, and the rest of the divers either lined up from the outside diving board toward the middle of the pool or along the wall in the water, with deck or in-pool tile markings marked at 6 foot intervals.

If the facility has both 1-meter and 3-meter diving boards, the same protocols should be enforced for the 3-meter diving boards. For diving classes or competitive coaching, it is not recommended to have more than six (6) participants in the class at a time to make ample use of physical distancing protocols.

Class or competitive coached participants should have a designated area for their towel and any clothing they bring on deck, with marked drop areas at 6 foot intervals. Class instructors or coaches (with appropriate face coverings if required) should be stationed on the side of the pool deck adjacent to the diving board in clear view of the participants at all times or help enforce protocols.

Hot tubs, commonly used by competitive diving clubs to warm divers' in-between dives should be prohibited.

Phase 2 Programming:

The programs that follow are considered to be much more difficult to be able to run even with restrictions in place and would be permissible as indicated possibly in phase 1 but more so in a later phase of opening. When the Phase 1 programs have already proved successful with no noticeable increase in exposure to COVID-19 based on statistical data from your local health department then these programs should be possible to consider implementing.

Recreational or open Swimming (General):

It will be up to every individual family/household to be mindful and practice physical distancing to other families or individuals. The impetus is upon them and not lifeguard staff as the primary responsibility for the lifeguard is to prevent and respond to rescue situations. The undue burden to also try and police social distancing is beyond the capability of their primary duties. Additionally, as water is an uncontrollable force upon a person it is improbable to expect complete distancing within a body of water due to the action of the water and the various swimming and control ability of an individual person. The guidelines listed below will be up to each facility to try to manage to reduce risk exposure of COVID-19 or similar viral spread.

Recreational Swimming (Pool)

Determination of patron capacity

When determining patron capacity for your facility consider:

- Available amenities (toilets, showers, urinals, etc.) If amenities need to be reduced due to the inability of maintaining social distance (See Aquatic Facilities guidelines) this should assist in determining a smaller patron capacity.
- Physical area around the pool within the aquatic facility. Social distancing must be considered when allowing families in for recreational swimming. Example: if there is an accidental fecal release, can all patrons and family groups safely maintain social distance on the deck the AFR treatment is complete.
- Available parking spaces- can social distance be applied within the aquatic facility parking lot, so all patrons and family groups aren't passing within that 6-foot distance.
- Consider closing deep water to reduce the risk of lifeguards making deep water rescues and being exposed to high levels of risk. This would reduce available water and would adjust your overall capacity.
- Consider reducing or eliminating touch points such as chairs and loungers unless brought by patrons and removed by patrons as these will require cleaning and sanitation each and every time after a swim session.

Engineering controls each agency should consider is a prepay reservation system that could alleviate collecting cash payment to reduce face-to-face exposure and contact exposures.

Appropriate signage and routine announcements should be part of recreational swimming, along with no-touch hand sanitizing stations and frequent disinfecting of high touch areas.

Consider revising the length of recreational swimming so it supports multiple sessions of recreational swimming within the same day.

Recreational Swimming (Open water)

Determination of patron capacity

When determining patron capacity for your facility consider:

- Available amenities (toilets, showers, urinals, etc.) If amenities need to be reduced due to the inability of maintaining social distance (See Aquatic Facilities guidelines) this should assist in determining a smaller patron capacity.
- Available parking spaces- can social distance be applied within the aquatic facility parking lot, so all patrons and family groups aren't passing within that 6-foot distance.

- If open beach, consider constructing short term fencing to define the beach area. This could assist on determining the available spaces for patrons and family groups to safely maintain social distance.
- Consider closing deep water to reduce the risk of lifeguards making deep water rescues and being exposed to high levels of risk. This would reduce available water. From an operational perspective, an agency could add additional lifeguard on stationary water stations to reduce response times for deep water rescues.
- Consider reducing or eliminating touch points such as chairs and loungers unless brought by patrons and removed by patrons as these will require cleaning and sanitation each and every time after a swim session.

Engineering controls each agency should consider is a prepay reservation system that could alleviate collecting cash payment to reduce face-to-face exposure and contact exposures.

Consider developing engineering controls to effectively diverting traffic once capacity has been reached.

Appropriate signage and routine announcements should be part of recreational swimming, along with no-touch hand sanitizing stations and frequent disinfecting of high touch areas.

Consider revising the length of recreational swimming so it supports multiple sessions of recreational swimming within the same day.

Recreations Swimming Special Features (Wave pools, Lazy rivers, Slides)

Special features provide unique situations in which the conveyance of individuals is created by force that propels individuals. For those operations who choose to utilize these the general recommendation would be to stop the mechanism/pump that propels individuals (except for water slides as it would produce a safety risk).

- Wave pools should become static pools until the last phase of herd immunity can be achieved
- Lazy rivers should cease to engage their conveyance and remove rafts/tubes as the touch points are great and would be difficult to maintain from user to user. Additionally, even without flotations there is a great risk of individuals coming in contact with each other so special consideration to monitor and space individuals will be key.
- Water slides if used, create significant touch points in getting to the dispatch area and thusly would be difficult if not impossible to clean and sanitize. The overall recommendation would be to keep them closed until the last phase of herd immunity could be achieved. If used special consideration as to dispatcher exposure and how to effectively sanitize touch points must be resolved.

Water Polo:

The general guidelines that are suggested is to bring this program out into two phases. The first phase may be able to be integrated with phase 1 programs. In this scenario this program is primarily a conditioning and drills component in which players would be limited to specific amount of space to work on in water conditioning which may have a variety of dry land and water based training components. For specifically in the water spaced treading could be done and utilize equipment such as swim bricks to build up strength and endurance utilizing legs only. Basic swim sets with appropriate spacing as well as individualized drills to move through specified course and swim with a players own water polo ball and practice shooting on goal individually or spread out in pairs. As with the current guidelines for camps it would be suggested to keep the groupings for training in a space that allows for distancing as well as to keep the total number of participants to 12 or less.

As restrictions are lessened you could then look into offensive and defensive plays run through but only without contact as well as maintaining appropriate distancing in order to do so. Although this is not ideal it would give players an opportunity to work through general plays and strategy beyond conditioning.

We do not recommend any other element of water polo with close contact until all restrictions are lifted to allow close contact and play which would be in the final phase of the State Phase 4.

Synchronized Swimming:

The general guidelines would be similar to Water Polo in which this program is broken down into 2 phases. The first phase would include conditioning and drills component in which swimmers would be limited to specific amount of space to work on in water and dry land. As long as physical distancing is maintained then non-contact routines and drills would be permissible. The 2nd phase would be when herd immunity is in place in which swimmers could engage in pairs or groupings to perform their routines.

Private aquatic facility rentals:

A private rental may be permissible and allowable to those living in the same household as social distancing other than from the lifeguard staff and guest would not be in effect. Lifeguard distancing should be maintained at all times and utilization of fixed stations or roaming stations with appropriate distancing being adhered to. No other guest outside of an individual household would be allowed within the scope of the rental for this to be permitted.

When additional restrictions are lifted private rentals could expand to multiple family units in which multiple areas are divided up within an aquatic venue and families could rotate or

adequately space themselves out within the complex. Upon completion within this model all contact areas must be appropriately sanitized.

Private Cabanas or Family Cabanas or Group space rental:

The use of all of these exclusive spaces within an aquatic venue have advantages and disadvantages associated with them. Most of these elements have built in distancing with fabric or structural walls and dividers which are ideal. If utilized by the same household could be beneficial. However, if you use them the recommendation is that they are sanitized appropriately for all contact surfaces. If fabric surface this may be problematic to be able to do this other than from a hydrostatic sprayer so the time element between use may be significant. To reduce touch surfaces you may consider removing all seating within a cabana space and not provide it until fewer restrictions are in place. For Group rental space these should be eliminated unless the area is significant enough in size to divide guest to areas for individual households to space adequately enough apart utilizing current distancing guidelines of 6 feet or greater.