



Ms. Shoemaker and Ms. Madaus,

I am writing to you today as the General Chair of Missouri Valley Swimming, Inc., the governing body for competitive swimming in all of Kansas and about half of the state of Missouri including Lee's Summit, Kansas City, Columbia, and Springfield. Our organization falls under the direction of USA Swimming, which is itself an extension of the United States Olympic Committee, as established by the Amateur Sports Act of 1978. Missouri Valley Swimming is responsible for the support and governance of 63 teams and around 7,400 registered athletes (see Attachment 1), including numerous athletes competing at the national level and aspiring to pursue swimming at the collegiate level and beyond. On behalf of our club and individual members, I am writing to request that you allow the opening of at least some of the Lawrence pools as soon as the Kansas and Douglas County reopening plans allows such use. I do so because my fellow board members and I believe that organized swimming is essential to the physical, emotional, and economic well-being of a large number of citizens in our communities and that USA-Swimming member clubs can play a key role in reopening this area of the economy in a safe and responsible fashion. We understand the difficult decisions you are making right now, and we want to provide you with additional information with respect to the opening of pools in Lawrence.

According to the Center for Disease Control, there is "no evidence that the virus that causes COVID-19 can be spread to people through the water in pools, hot tubs, spas or water play areas," and that "proper operation and maintenance (including disinfection with chlorine and bromine) of these facilities should inactivate the virus in the water." The CDC goes on to recommend that patrons of recreational water venues protect themselves "by practicing social distancing and good hand hygiene" (see Attachment 2 and Attachment 7). Such statements are in line with the information we have received from USA Swimming, whose leaders have been working with experts across the country, including CDC and NIH personnel, to provide guidance to member clubs about how to return to the water safely (see Attachment 3). Swimming is also a non-contact sport. There is no physical contact between swimmers or between swimmers and their equipment such as in basketball, volleyball, softball, baseball, football, or many other sports. Based on the information we now have, we at Missouri Valley Swimming believe that a return to the water can be done safely, and we are prepared to implement strict guidelines in order to allow our athletes the opportunity to swim. (Also see Attachments 4, 5 and 6 for additional information on safe protocols for pool use.)

One might ask, why the urgency? The answer is twofold. First, we seek to meet the needs of our individual members. Missouri Valley Swimming's swimmers are outstanding athletes, many of whom have been training year-round for years. Unlike other sports, where cross training enables athletes to maintain a competitive level of fitness, competition readiness in swimming is not possible with prolonged periods out of the water. Most competitive swimmers take a week off around spring break at the end of the winter season (unless they are competing in the Kansas girls high school season in which case they skip that break), and take two to four weeks off at the

completion of the summer season and with the start of the school year (unless they are competing in the Missouri boys high school season in which case they skip that break). Most of our athletes have now been out of the water for nine weeks. As the weeks go by, conditioning they have worked so hard to attain is decreasing, and the length of time it will take them to get it back is increasing. Many of our athletes are doing their best to stay in shape. They are doing “dryland” workouts, attempting tethered swimming in backyard pools in cold temperatures and other subpar training. Continued restrictions on opening pools will be detrimental to the ability of these athletes to regain their form and perform at a high level. High school rising juniors and seniors in our area who have the goal of swimming in college need the opportunity to train for the meets that are scheduled to begin later this fall. Keeping them out of the water impedes their progress and puts them at a disadvantage in relation to swimmers in other states, where restrictions on pools have been less stringent. (Florida Governor DeSantis defined swimming as an essential activity last month in Executive Order 20-91, and swimmers in other states and nations are starting to be able to return to swimming).

There are also thousands of younger swimmers who have been out of school and had little opportunity to engage in structured physical activity. These young athletes need a constructive outlet as they continue to social distance, for as the CDC has noted, “staying physically active is one of the best ways to keep [the] mind and body healthy” in circumstances such as these. In short, we want to ensure that all our members have the opportunity reengage with the sport they love and are not unduly hindered in pursuit of their goals or the maintenance of their physical and mental health.

The other part of the equation is that our member clubs are small businesses that contribute to the economic well-being of the communities in which they are based. Most do not own their pools but rent space in private or government-owned facilities. Our coaches are professional coaches. Since the shutdown began, most have had employees file for unemployment, or have applied for support from the federal Paycheck Protection Program. While these clubs are financially solvent for the moment, this will not be the case if they are prevented from operation for much longer. Their owners will have to shut down operations and release staff, who in seeking employment, will likely take their skills and expertise to states where competitive swimming continues to function. If Missouri Valley swim clubs go out of business entirely, aquatics facilities will experience further budget shortfalls as the revenue stream from renting lanes to USA-Swimming registered teams dries up. Needless to say, if clubs go out of business the negative economic impact on our communities will be significant, but the fact that many of them also offer learn-to-swim programs suggests that the long-term outcome could be tragic. Drowning is entirely preventable, and it becomes a much greater future risk if we lose the people and organizations most invested in teaching swimming. Simply put, our communities need functioning swim clubs for the safety and well-being of our citizens.

Competitive swim training is being allowed at different levels in different areas. Wichita Swim Club owns its facility. It was able to obtain an essential use exemption from Sedgwick County. The exemption was based on the fire department’s use of the pool for training, but they have been allowed to use the pool for training and lap swimming using defined protocols (including online signups, limits on numbers of people in the building, no locker room use). They have been

using the facility for several weeks without incident. Kansas City is allowing youth sports when the stay-at-home order lifts on May 15th.

As you consider this request, rest assured that the safety and well-being of our members and our communities will be at the forefront of our efforts. The Missouri Valley Swimming Board of Directors and I believe that we in the competitive swimming community can help our states by being a model for responsible return to business.

Although our request is focused on pool use by Missouri Valley Swimming members for training, much of the guidance we have cited indicates that recreational swimming and learn-to-swim programming can also be permitted if facilities use specific practices (limited occupancy, timed shifts for pool use by different groups of people with facility cleaning in between, parents in the water with children taking swim lessons while maintaining six feet of distance between parent-child pairs and instructors, etc. see Attachment 7). Several area summer league teams plan to have their own swim team programming even if their leagues cancel competition for the summer to give their swimmers the opportunity to continue to progress as swimmers this year.

We touched on drowning prevention above, but it bears addressing again in the context of opening pools for uses beyond Missouri Valley Swimming training. Drowning prevention includes learn-to-swim programs as well as the pre-competitive and summer league swimming programs that help develop swimmers from being able to swim five yards to being able to swim distances of 25 yards or more. If pools do not open this summer, many children in our area will go without gaining water competency. Our states have lakes and backyard pools that will be open, and people will flock to them to get a break from the summer heat without the benefit of lifeguards and without the opportunity to enhance their swimming skills. These factors should be considered when assessing the costs and benefits of opening pools. (See for example, <https://www.msn.com/en-us/news/weather/child-drownings-are-spiking-during-covid-19-crisis-in-florida/vi-BB12D6zX>, Florida spike in drownings with distracted parents and lack of swim lessons.)

I invite you to reach out to me with any questions you might have. I would be happy to provide you with further information about Missouri Valley Swimming, USA Swimming, and the resources we have available related to aquatics.

Thank you for your time and consideration.

Sincerely,

Judith Deedy
General Chair, Missouri Valley Swimming, Inc.

Email: jgdeedy@gmail.com, cell: 816-896-0318

USA Swimming Clubs Missouri Valley

Code	Club Name	City, State Zip
RA	Riptide Aquatics	Kansas City, MO 64133-1912
RISS	Riss Lake Swim Team	Parkville, MO 64152-7403
SAC	Salina Aquatics Club	Salina, KS 67401-3519
TRB	Santa Fe Trail Blazers Parents	Mission, KS 66202-3637
BAND	Sedalia Bandits Swim Club	Sedalia, MO 65301-7974
NWSC	Swim Newton	Newton, KS 67114-8761
TD	Team Dolphins	Grain Valley, MO 64029-8417
TOST	Thousand Oaks Swim Team	Parkville, MO 64152-6216
TSA	Topeka Swim Association	Topeka, KS 66604-7755
WACT	Trident's Swim Team	Gravois Mills, MO 65037-6009
TRUM	Truman Aquatics	Kirksville, MO 63501-4200
TST	Tsunami Swim Team of K.C.	Liberty, MO 64068-2372
TRC	Twin River Club	Wichita, KS 67204-4122
UMIZ	U. of Missouri	Columbia, MO 65211-0001
VCSC	Valley Center Purple Wave	Valley Center, KS 67147-2637
WC	Walnut Creek Swim Team	Parkville, MO 64152-3349
WAR	Warrensburg Swim Team	Warrensburg, MO 64093-1561
WST	Waves Swim Team	Raymore, MO 64083-8168
WELL	Wellington Swim Team	Wellington, KS 67152-8039
WKSC	Western Kansas Swim Club	Hays, KS 67601-9314
WAS	Wichita Aqua Shocks	Derby, KS 67037-3418
WNYN	Wichita Northwest YMCA Neptunes	Wichita, KS 67235-9600
WSC	Wichita Swim Club	Wichita, KS 67207-1213
WIN	Winfield Swim Club	Winfield, KS 67156-0013
WFST	Woodneath Farms Swim Team	Kansas City, MO 64157-8641

Attachment 2

CDC Statement on COVID-19 Transmission and Pools



Coronavirus Disease 2019

Water and COVID-19 FAQs

Information about Drinking Water, Treated Recreational Water, and Wastewater

Updated April 23, 2020

Summary of Changes

- Updated guidance based on recent research findings for the following questions:
 - Is the virus that causes COVID-19 found in feces (stool)?
 - Can the virus that causes COVID-19 spread through sewerage systems?
 - Should wastewater workers take extra precautions to protect themselves from the virus that causes COVID-19?

Can the virus that causes COVID-19 spread through drinking water? +

The virus that causes COVID-19 has not been detected in drinking water. Conventional water treatment methods that use filtration and disinfection, such as those in most municipal drinking water systems, should remove or inactivate the virus that causes COVID-19.

Is the virus that causes COVID-19 found in feces (stool)? +

The virus that causes COVID-19 has been found in the feces of some patients diagnosed with COVID-19. However, it is unclear whether the virus found in feces may be capable of causing COVID-19. There has not been any confirmed report of the virus spreading from feces to a person. Scientists also do not know how much risk there is that the virus could be spread from the feces of an infected person to another person. However, they think this risk is low based on data from previous outbreaks of diseases caused by related coronaviruses, such as severe acute respiratory syndrome (SARS) and Middle East respiratory syndrome (MERS).

Can the virus that causes COVID-19 spread through pools, hot tubs, spas, and water play areas? –

There is no evidence that the virus that causes COVID-19 can be spread to people through the water in pools, hot tubs, spas, or water play areas. Proper operation and maintenance (including disinfection with chlorine and bromine) of these facilities should inactivate the virus in the water.

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

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

Can the COVID-19 virus spread through sewerage systems? +

The virus that causes COVID-19 has been found in untreated wastewater. Researchers do not know whether this

virus can cause disease if a person is exposed to untreated wastewater or sewerage systems. There is no evidence to date that this has occurred. At this time, the risk of transmission of the virus that causes COVID-19 through properly designed and maintained sewerage systems is thought to be low.

Researchers have analyzed the available information which suggest that standard municipal and [individual septic system](#) wastewater treatment practices should inactivate the virus that causes COVID-19. CDC is reviewing information on COVID-19 transmission as it becomes available. Guidance will be updated as new evidence is assessed.

Should wastewater workers take extra precautions to protect themselves from the virus that causes COVID-19? +

Recently, the virus that causes COVID-19 has been found in untreated wastewater. While data are limited, there is no information to date that anyone has become sick with COVID-19 because of exposure to wastewater.

Standard practices associated with wastewater treatment plant operations should be sufficient to protect wastewater workers from the virus that causes COVID-19. These standard practices can include engineering and administrative controls, hygiene precautions, specific safe work practices, and personal protective equipment (PPE) normally required when handling untreated wastewater. No additional COVID-19-specific protections are recommended for workers involved in wastewater management, including those at wastewater treatment facilities.

If my utility has issued a Boil Water Advisory, can I still use tap water to wash my hands? +

In most cases, it is safe to [wash your hands](#) with soap and tap water during a [Boil Water Advisory](#). Follow the guidance from your local public health officials. If soap and water are not available, use an alcohol-based hand sanitizer containing at least 60% alcohol.

For additional information:

[CDC: Guidance for reducing health risks to workers handling human waste or sewage](#)

[CDC: Healthcare professionals: Frequently asked questions and answers](#)

[CDC: Healthy Water](#)

[Occupational Safety and Health Administration: COVID-19 Control and Prevention: Solid waste and wastewater management workers and employers](#)

[World Health Organization: Water, sanitation, hygiene and waste management for COVID-19](#)

Page last reviewed: April 3, 2020

Attachment 3

USA Swimming Return to Practice Guidelines



FACILITY RE-OPENING MESSAGING AND PLANNING

The following is being provided to assist in the development of your 'Facility Use Plan', to be shared with local public health officials and facility operators. It is important to remember that all plans must comply with local, state and federal public health guidelines.

MESSAGING

We believe swimming, like walking, hiking, running, and cycling, is a critical healthy activity within our communities. Swimming does not require direct contact between teammates or coaches and social distancing can be maintained throughout practice. As with all exercise and activity at this time, swimming must comply with standards for social distancing and safety within aquatic facilities. We know, with collaboration between USA Swimming coaches, public health officials, and facility operators we can create safe plans for using aquatic facilities to promote physical and mental health opportunities compliant with public health directives. The CDC has indicated that there is no evidence the disease spreads through treated water. Proper operation and maintenance (including disinfection with chlorine and bromine) of these facilities should inactivate the virus in the water.

FACILITY, LOCAL, STATE, AND FEDERAL REQUIREMENTS

Recommendations:

- Each team/club should have a COVID-19 liaison responsible for staying up to date on community and state recommendations and any associated changes.

Plan building considerations:

1. What limits and phases has your state/municipality outlined for gatherings in the coming weeks/months?
 - a. Is the transmission rate in your region low to zero?

- b. Does your local health care system have capacity, or is it over-extended due to COVID-19 cases?
2. Who will make the decision about access to your facility?
 3. For a facility of your size, what is the capacity for that space within those guidelines?
 4. Have you reviewed/complied with the OSHA COVID-19 return to work guidelines? (attached)
 5. Have you reviewed/complied with the White House guidelines? (attached)

MITIGATING HAZARDS

Recommendations:

- Eliminate use of low ventilated spaces and rooms that prevent social distancing, such as locker rooms and small dryland rooms.
- Increase water sanitation level - As example keep chlorine closer to 2.0 PPM
- Create visible markers on the floor to indicate appropriate spacing on the pool deck, entrances, etc.

Plan building considerations:

1. How will you manage/sanitize bathroom use?
2. What is your plan/checklist for cleaning and disinfecting surfaces?
3. How will you control access/egress of the facility?
4. How will you limit contact points in the facility (e.g., open doors, water bottles, equipment, etc.)?
5. What is your plan should a coach, athlete, etc. become sick?

SAFE PRACTICES/ PPE

Recommendations:

- A coach or staff member should ask athletes, as they come into practice, if they feel ill in any way, specifically listing certain symptoms, and send home those athletes reporting feeling ill or experiencing symptoms.
 - o Symptoms include mild to severe respiratory illness with fever, cough and difficulty breathing, or other symptoms identified by the CDC.
- Athletes/coaches who begin to cough/sneeze for any reason, must move away from others until coughing/sneezing dissipates.
- Athletes should change clothes and shower at home.

Plan building considerations:

1. What is your staffing plan: coaching, lifeguards, a person to control flow of athletes in and out of the facility, and other programmatic considerations?
2. What will be the structure of your practice time, time between sessions, numbers of workouts per week for each group, dryland, etc.?
3. How will you maintain spacing in the pool during workouts?
 - a. Examples: staggered starts, opposite ends, numbers per lane, communication with athletes, stations, markers visible to athletes for start and stop points, (e.g., visible spacing marks on pool deck, on lane lines, etc.) coaches on both end of the pool?
4. What is your plan for staff/coaches protective measures?



FACILITY RE-OPENING MESSAGING AND PLANNING

- a. Personal Protective Equipment (PPE) such as masks
- b. Spacing
- c. Equipment to wear during cleaning
5. What is your plan for ensuring all standards for Safe Sport are maintained?
6. What is your plan for increasing air flow?
 - a. Open doors, outdoor pools, move dryland outside, increase air turnover rate

COMMUNICATION

Recommendations:

- Athletes must see a physician and be cleared for training after being diagnosed or suspected to have COVID-19.
- Make it clear that there is no penalty for missing practice and that if an athlete, or any member of their family does not feel well, they should stay home.

Plan building considerations:

1. Have you approached other user groups about how to best work together to return to the facility?
2. What is your communication plan for parents?
 - a. Include practice health and safety expectations, drop-off and pick-up patterns, lane groupings by family instead of age-groups, etc.
3. Have you produced visual aids to explain to parents and athletes spacing protocols? (samples attached)

PROGRAMMATIC CONSIDERATIONS

Recommendations:

- Be clear and consistent about expectations and enforce policies.
- Move dryland outside where possible.
- Utilize a staff member to help athletes move from one area of the facility to another.

Plan building considerations:

1. Have you created a financial model for different numbers of athletes allowed per/hour?
2. What is your plan for coaches with health vulnerabilities?
 - a. For example, keep them actively involved in your program by continuing remote dryland, zoom team meetings etc.
 - b. Anything that helps reduce load at pool, but keeps families engaged.
3. How will you model proper practice requirements?
 - a. As example, bring older swimmers back first, let them learn the system so they can serve to model behavior for younger athletes.

OTHER CONSIDERATIONS AND COMMUNICATION TO SHARE WITH STAFF, ATHLETES, PARENTS, ETC.:

Recommendations:

- Risk factors for consideration to participate include autoimmune disease, diabetes, asthma, cardiovascular disease, etc.
- Athletes and families who travel during phase one and two will need to self-isolate for 14 days before returning to practice.
- Make sure that your state and region satisfy the Federal government's gating criteria (as outlined in the "Opening Up America Again" guidelines) and have entered Phase One of the Phased Comeback.
- States and regions with no evidence of a rebound and satisfy the gating criteria a second time may proceed to Phase Two of the Phased Comeback, in which all individuals, when in public recreation areas, should maximize physical distance from others.
- Be aware that although restrictions are eased when your state and region move from Phase One to Phase Two or Phase Three of the Phased Comeback, safety precautions must remain in place in accordance with state requirements relative to availability of vaccinations or effective treatment for the coronavirus.
- make sure to communicate with all staff, athletes, parents and participants that they should not swim if they or anyone with whom they reside:
 - > Are exhibiting any symptoms of the coronavirus: mild to severe respiratory illness with fever, cough and difficulty breathing, or other symptoms identified by the CDC.
 - > Have been in contact with someone who has tested



FACILITY RE-OPENING MESSAGING AND PLANNING

positive for COVID-19 in the last 14 days.

- > Are a vulnerable individual and your state and region is in Phase One or Phase Two.
- > A vulnerable individual is a person with underlying conditions or considered to be at a higher risk demographic as outlined by jurisdictional, state or federal guidelines.

SWIMMING SAFELY

Recommendations:

PREPARING TO SWIM - Protect against infections:

- Wash your hands with a disinfectant soap and water (for 20 seconds or longer) or use a hand sanitizer if soap and water are not readily available, before going to the pool.
- Do not share equipment.
- Bring a full water bottle to avoid touching a tap or water fountain handle.
- If you need to sneeze or cough, do so into a tissue or upper sleeve/arm area.
- Arrive as close as possible to when activity begins.
- Avoid touching gates, fences, benches, etc. if you can.
- Do not attend practice if you, or a member of your household does not feel well.

WHEN SWIMMING

- Follow directions for spacing and stay at least six feet apart from others.
- Do not make physical contact with others, such as shaking hands or giving a high five.
- Avoid touching your face.
- Avoid sharing food, drinks, or towels.
- Maintain appropriate social distancing from other athletes when taking a break.
- Wear your suit to and from practice.

AFTER SWIMMING

- Leave the facility as soon as reasonably possible after practice.
- Wash your hands thoroughly or use a hand sanitizer after leaving the pool.
- Do not use the locker room or changing area.
 - > Shower at home, wear your suit to and from practice
- No extra-curricular or social activity should take place.
 - > No congregation after swimming.

EXPECTATIONS FOR TRAINING AND COMPETING

Recommendations:

- Children should still be active for at least 60 minutes per day, even though they can't gather.
- As we return to action, we must consider injury and progressive return.
- At-home workouts must be simple, low impact and low risk. Return to the pool should build off of the at home dryland workouts.

- Must emphasize movement quality, not the quantity of exercise; proper movement is key.
- Coaches should use downtime to ensure all safety skills are up to date: complete sport safety, concussion training, etc.
- Social distancing will need to be accounted for in practice planning.
- Limit group sizes and staggered sessions.
- Most injuries occur early in the season, so do not rush deconditioned athletes back to full practice, or competition.
- Increase activities by 10% each week when we return.
- Focus should be on a healthy environment, quality experience, progressive training, and safety.
- No expectations for competing.

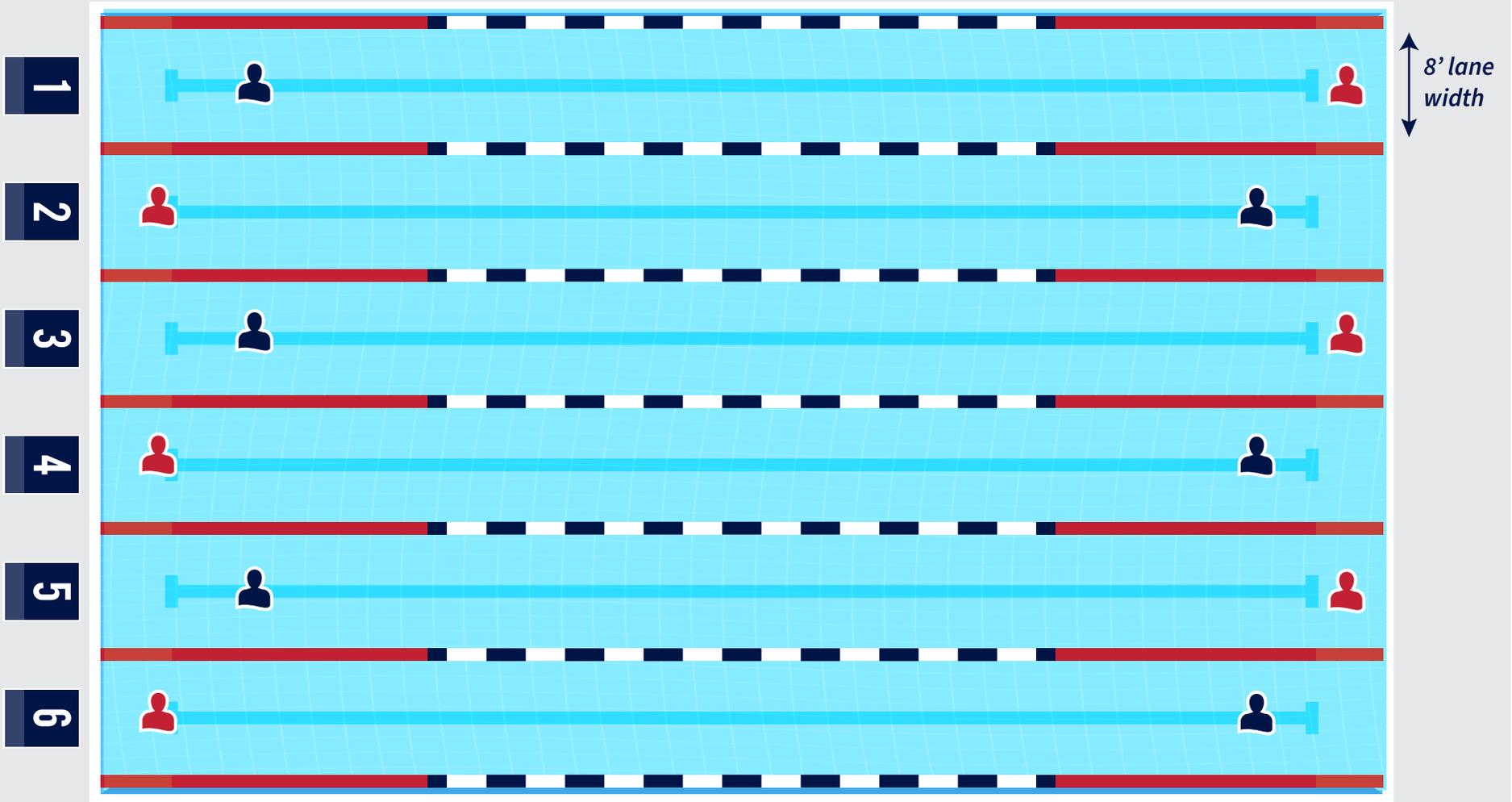
FACILITY SAMPLE DIAGRAMS

The following pages display programming model layouts that promote "social distancing".

Examples are set starting and ending places in pool and maintain spacing during rest intervals (assuming minimum eight-foot wide lanes).



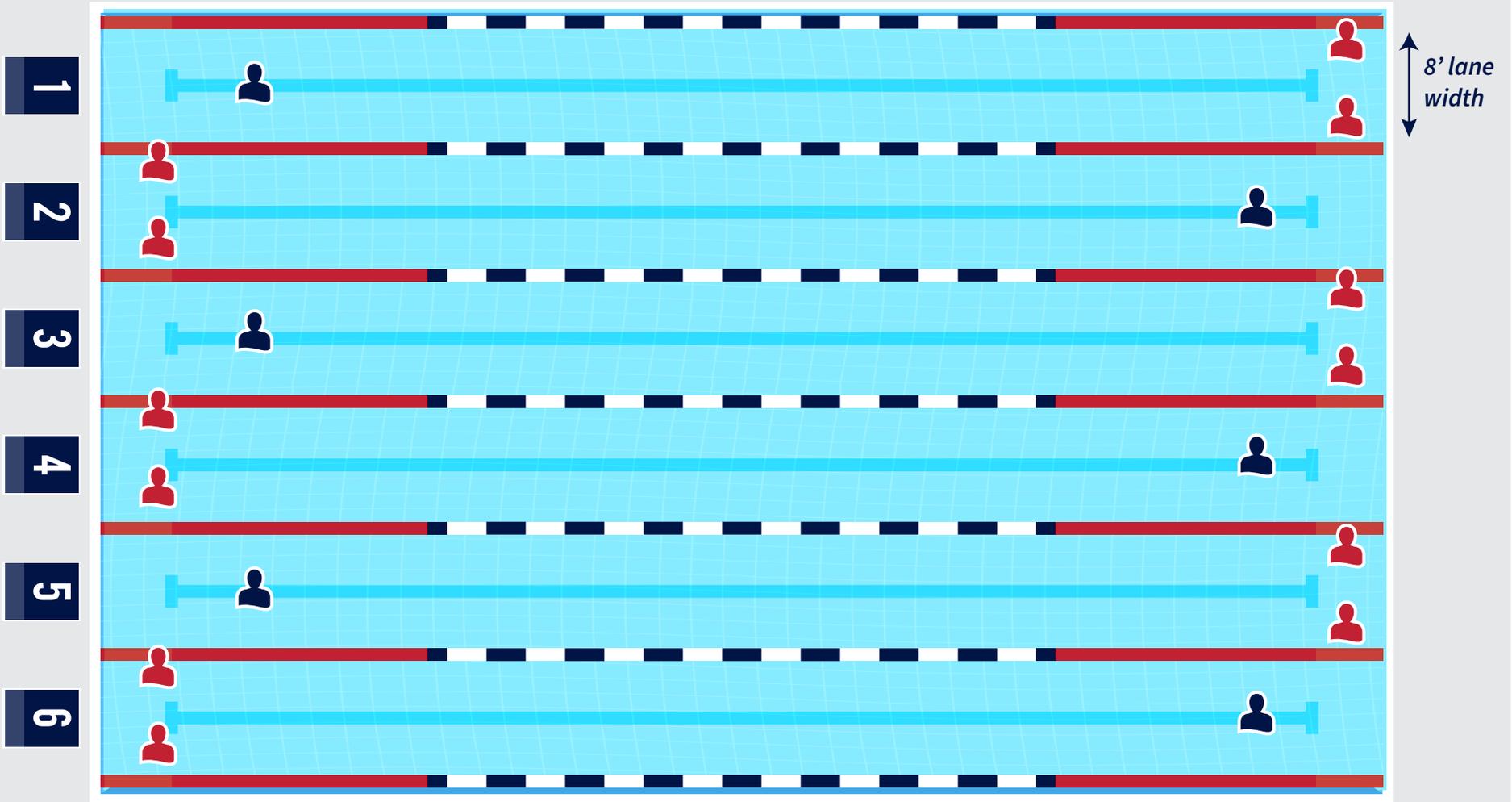
SOCIAL DISTANCING PRACTICE LAYOUT 25-YARD, 6-LANE POOL



12 SWIMMERS



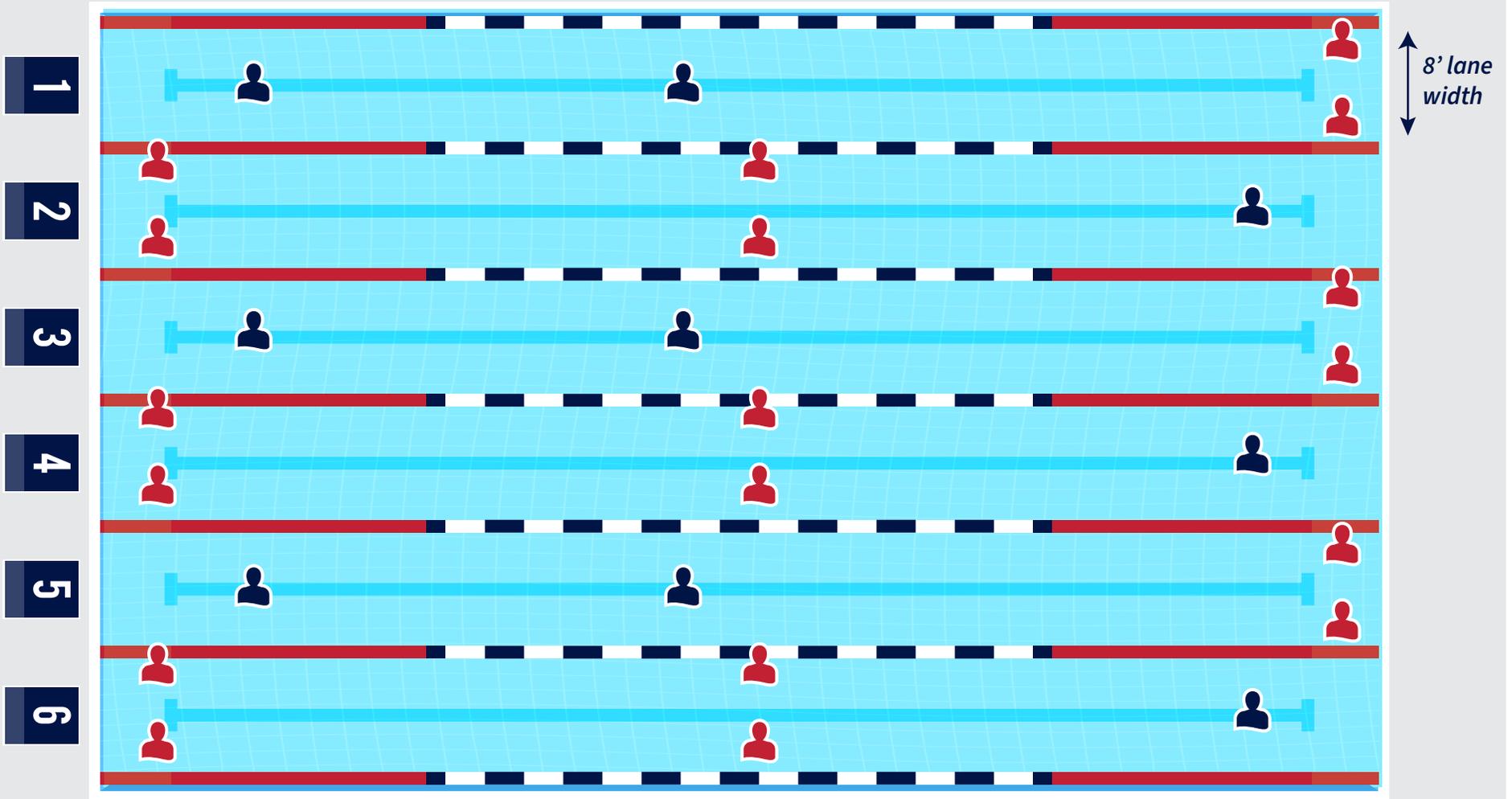
SOCIAL DISTANCING PRACTICE LAYOUT 25-YARD, 6-LANE POOL



18 SWIMMERS



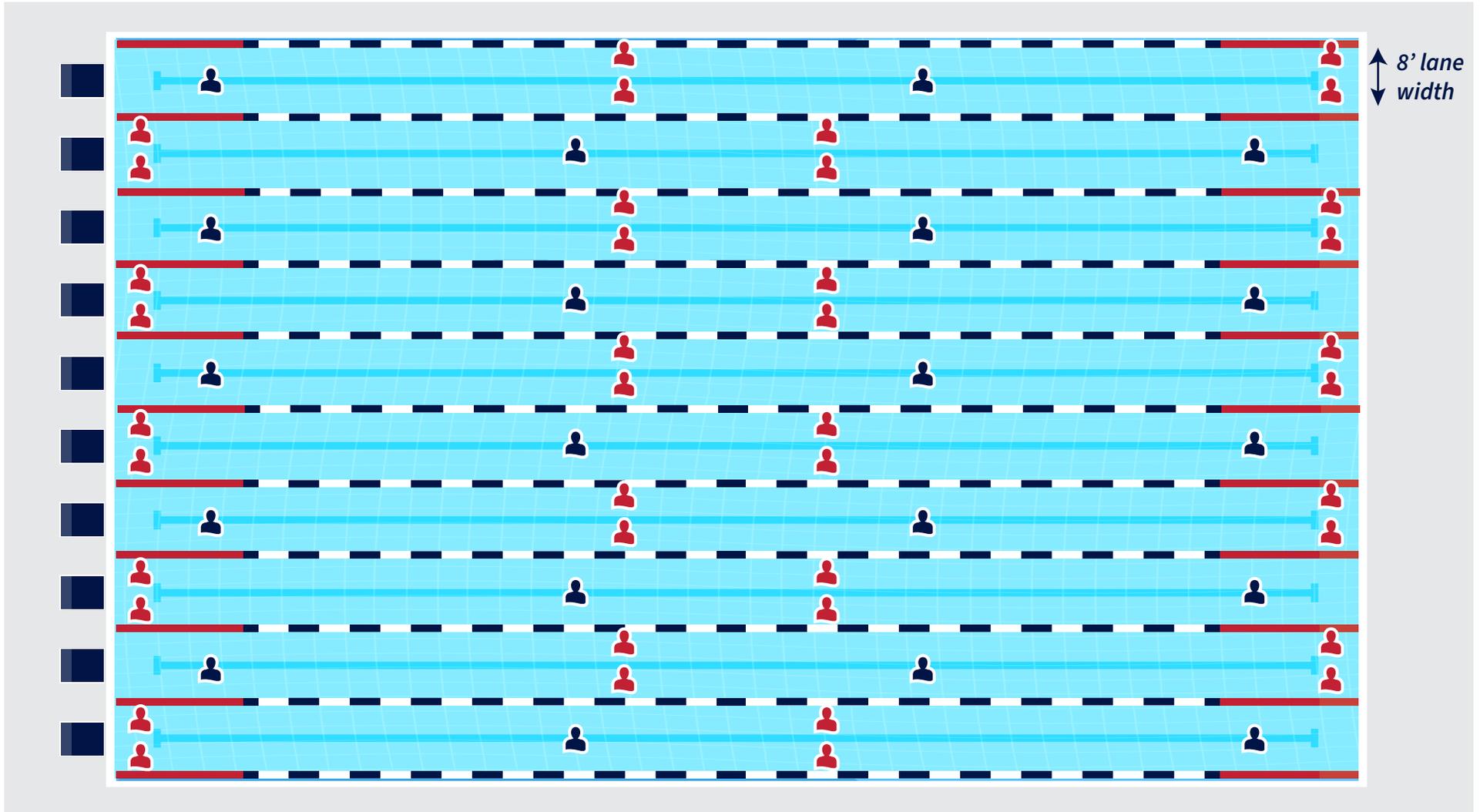
SOCIAL DISTANCING PRACTICE LAYOUT 25-YARD, 6-LANE POOL



27 SWIMMERS



SOCIAL DISTANCING PRACTICE LAYOUT 50-METER, 10-LANE POOL



60 SWIMMERS



SOCIAL DISTANCING PRACTICE LAYOUT

25-YARD, ON-DECK, SIT DOWN SLIDE SETS IN CIRCLES

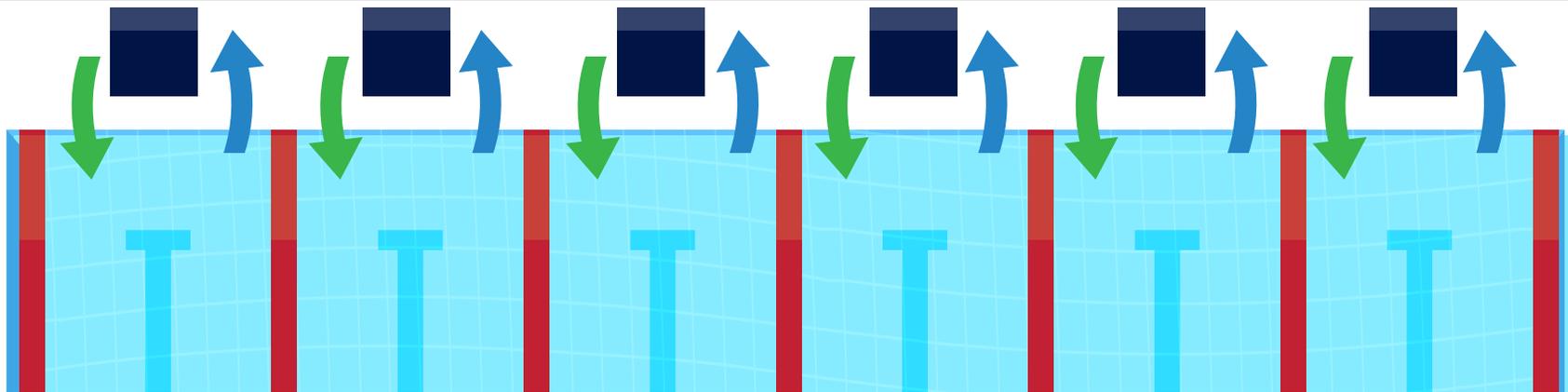
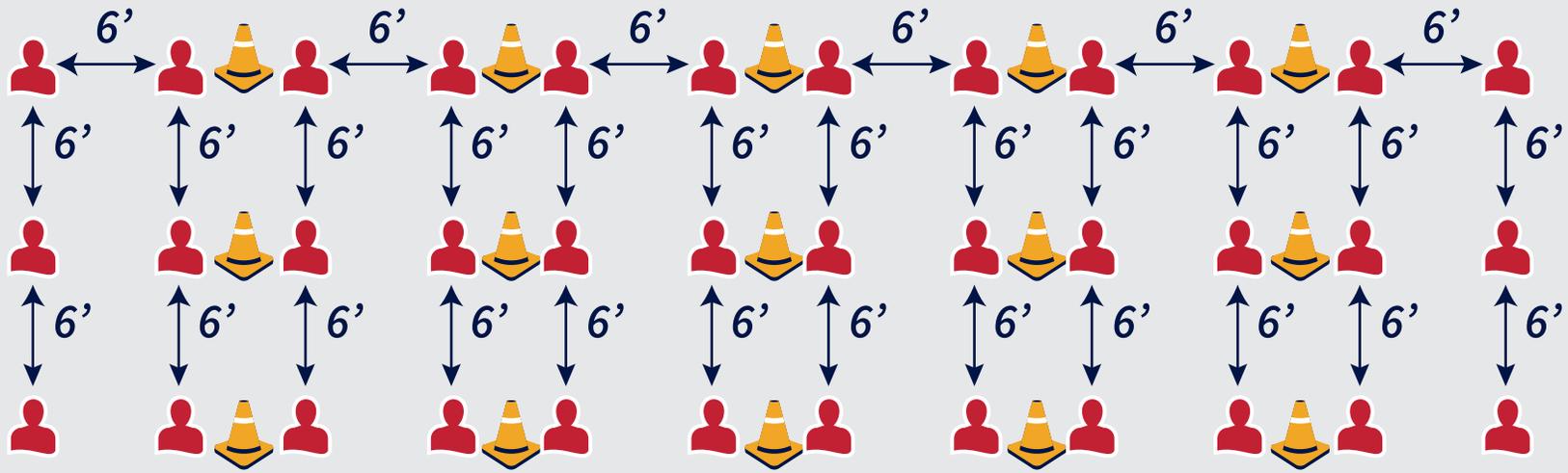
Swimmers maintain 6 feet apart. Mark deck with 2-inch wide colored duct tape.

Sit down/slide in to enter water.

End of set climb out and go to assigned spot.

The more "eyes" on deck the better.

Use cones or other barriers to help with separation – deck needs to be wide enough to accommodate 6' of social distance.



Attachment 4

USA Swimming Pool Operator Recommendations

BEING PREPARED IN A TIME OF UNCERTAINTY:

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

mick@totalaquatic.llc sue@totalaquatic.llc www.totalaquatic.llc www.usaswimming.org/facilities

COVID-19

- Viruses and the diseases they cause in humans are each given distinct names and abbreviations, even when they're in the same family. For example, SARS coronavirus in 2003 was referred to as SARS-CoV, and the disease it caused was known simply as SARS.
- The new virus is called SARS-CoV2—and COVID-19 is the name for the *disease* in humans caused by the new virus, (That's short for coronavirus disease 2019, the year it was first identified) CO stands for corona, VI is for virus, and D is for disease. Tedros Adhanom Ghebreyesus, PhD, director-general of the WHO, first announced the official name for the disease caused by the novel coronavirus—COVID-19—in early February 2020.
- Chances are you've heard new coronavirus, novel coronavirus, and COVID-19 all used interchangeably lately—and it's honestly fine to use any of those in conversation, and your friends and fam will probably understand what you mean. But just remember: The novel/new coronavirus refers to the virus itself, while COVID-19 refers to the disease that it causes in humans.

Now - Facility

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

- Should we shut down or maintain our pool and how should we do it?
 - *Either is appropriate, but needs to be done right*
 - *Maintaining is better if you think you will re-open soon*
 - *Full shut-down will save money over a longer period of time (3 to 6 months or longer)*

CDC has updated guidance documents on closing and reopening aquatic facilities during the COVID-19 pandemic.

- CDC [guidance on closing hot tubs/spas for extended periods of time](#) has been updated to address aquatics sector feedback related to hot tubs/spas with a plastered finish, which could end up cracking if drained for a prolonged period of time.
- CDC [recommendations on reopening hot tubs/spas and other water systems](#) have been updated to clarify that not every public hot tub/spa needs to be tested for *Legionella* before reopening.

- Federal protocols are generally guidelines. The Governor's make the ultimate call for the State's. Some states – like Florida – had their governor specifically list swimming for exercise as an essential service
- In those instances, they are ok to provide lap swimming. In addition, local governments can tighten the protocols even further. For example – Governor only mandating beach closures in certain Southern Florida counties; outside of those areas it was up to Local County and City governments to decide what to do about their beaches.
- Many pools, both public and private, decided to close. However; those choices were only accountable to their local authorities. Initially that was not explained very well and many Aquatic facilities and providers made decisions based on Federal guidelines only.

- There is no evidence that the virus that causes COVID-19 can be spread to people through the water in pools, hot tubs, spas, or water play areas. Proper operation and maintenance (including disinfection with chlorine and bromine) of these facilities should inactivate the virus in the water.
<https://www.cdc.gov/coronavirus/2019-ncov/php/water.html>
- While there is [ongoing community spread](#) of COVID-19 of the virus that causes COVID-19, it is important for individuals as well as owners and operators of these facilities to take steps to ensure health and safety:
- Everyone should follow local and state guidance that may determine when and how recreational water facilities may operate.
- Individuals should continue to [protect themselves and others](#) at recreational water venues both in and out of the water – for example, by practicing social distancing and good hand hygiene.
- In addition to ensuring water safety and quality, owners and operators of community pools, hot tubs, spas, and water play areas should follow the [interim guidance for businesses and employers](#) for cleaning and disinfecting their community facilities.

Identifying the ENEMY:

- Cryptosporidiosis: Parasite is resistant to germicides and bactericides and can live in the pool water for up to a week; highly contagious; transmitted by swallowing water and people contact; causes dehydration, weight loss, stomach cramps, fever nausea and vomiting; no treatment.
- Escherichia coli (E-coli): Bacteria controlled by proper chlorination; transmitted by swallowing water; causes bloody diarrhea, abdominal cramps, and kidney failure; treated with antibiotics.
- Giardiasis: Parasite can last less than an hour in a properly chlorinated pool; the cooler the water the longer it can survive; transmitted by swallowing water; causes diarrhea, gas, stomach cramps, nausea and upset stomach; treated with prescription drugs.
- Hepatitis A: Virus is mildly resistant to germicides and bactericides and can live approximately 15 minutes in a properly chlorinated pool; transmitted by swallowing water; causes jaundice, fatigue, loss of appetite, diarrhea, fever, stomach pain; vaccine available but no treatment after the fact.
- Legionnaires' Disease / Pontiac Fever: Bacteria killed in less than a minute in a properly chlorinated pool;
- transmitted by inhaling mist from hot tubs or spray features; not contagious; causes fever, chills, cough, aches, fatigue, diarrhea, kidney malfunction; treatable if diagnosed in time.
- Naegleria Infection: Microbe that enters through nose and affects brain and spinal nerves; (rare) this amoeba lives less than a minute in a properly chlorinated pool; causes meningoencephalitis; prescription drugs available if immediately diagnosed.
- Norovirus Gastroenteritis: Virus that has a mild resistance to germicides and bactericides and can live approximately 30 minutes in a properly chlorinated pool; transmitted by swallowing water; causes nausea, vomiting, diarrhea, stomach cramps, flu like symptoms; no treatment specified; people usually recover on their own in 48 hours.
- Pseudomonas Dermatitis: Bacteria controlled by proper chlorination; hot tubs and pools; transmitted by direct skin contact with/in water; causes itching, rash, blisters; not contagious; clears up on its own in about 48 hours.
- Salmonellosis: Bacteria controlled by proper chlorination; transmitted by swallowing water; causes diarrhea, fever, cramps; antibiotics available for more serious cases.
- Shigellosis: bacteria controlled by proper chlorination; transmitted by swallowing water; causes diarrhea, fever, cramps; treated with antibiotics.

Maintain

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

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

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

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

The facility should be secured to prevent public access.

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

Now – Safety and Risk Management

- Education
 - *Stay informed about COVID-19 recommendations and fact-based evidence*
 - *Obtain (or conduct) virtual training as much as possible for continuing educational and professional development*
 - *Update or obtain certifications*
- Establish a systematic risk management process: Eliminate, Control, Warn
- Plan and prepare
 - *Risk assessments: operating procedures, EAP's through the airborne and contact transmission lens for PATRONS and STAFF and SELF*
 - *Review and update operating procedures, documents, manuals, contracts, etc.*
 - *Signage and informational documents (what you are doing, what is expected)*
 - *Equipment and supplies ordering – especially PPE and cleaning supplies*

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

Now - Programming

- Keep on Moving
 - *Worried about COVID-19? Exercise can help*
 - *Connect with your members/participants and build a new following*
- Education
 - *Opportunity to sharpen skills and learn new ones*
- Plan for a Fresh Start
 - *Registration and check-in procedures*
 - *Put new knowledge into action*
 - *Plan and prepare for safety/risk management*

Later - Facility

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

Cleaning - Safer active ingredients

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

EPA-registered products

<http://www.shieldustech.com/surface-cleaner/>

<http://nanoseptic.com/>

Cleaning - Active ingredients to avoid

- When considering a product, read the labels and be on the lookout for these ingredients that may be best to avoid.
 - **Sodium hypochlorite:** EWG notes that this is "linked to harm to the skin and respiratory system and the environment. When improperly mixed with other cleaners or acids, sodium hypochlorite can be fatally poisonous." It is also found in chlorine bleach.
 - **Quaternary ammonium compounds:** Also known as quats, which, according to EWG, are linked to asthma and suspected of causing reproductive toxicity and birth defects in humans. They also take an environmental toll.
 - **Hydrogen peroxide and vinegar mixed together:** the combination forms a reactive peracetic acid.
 - There should be no cleaning supplies that contain ammonia. Even small amounts can track into pool water and deactivate good chlorine.



Later – Safety and Risk Management

- Pre-opening site-specific training
 - *New policy/procedure/expectations – in writing*
 - *Making sure everyone is on the same page and consistent*
 - *Virtual or live small groups*
- On-going risk assessments
 - *How are things going? Are there new risks? What are any unintended consequences and can these be reduced?*
- Engagement
 - *How can we continue to thrive and deliver?*

Cleaning - Best for combating virus

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

Later – Programming

- Pre-opening site-specific training
 - *What new skills do you have and how can you use them?*
 - *Implementation plan / re-educate clients/members*
 - *New members orientation / back to basics*
- Be a Coach
 - *Monitor: Observe participant response*
 - *Evaluate: Ask for feedback*
 - *Adapt: Do more of what works and what people enjoy*

Different- Facility

- Business model – how do you sustain staff without government support?
 - *Plan for the unknown*
 - *Build cash reserves – long term goal*
 - *Offer alternate programming – adapt in phases*
- Sustainability – How do we handle smaller crowds but maintain revenue
 - *Private experiences need to have a higher value*
 - *Can we utilize historically underutilized times?*
 - *Do we need to offer smaller classes to spread people out?*
 - *Limit to crowds of 10? Or 50?*

Different- Safety and Risk Management

- Renewed focus on risk assessment methods, implementation, documentation
- Training and information delivery – online/virtual is here to stay
 - *Plan for keeping up with technology and resources*
 - *Develop a way to cut through the clutter and poor-quality information*
 - *Share what you learn – reinforces confidence*
- Emergency care
 - *How will CPR and first aid change?*
 - *Will the role of the lifeguard change due to exposure concerns? Will this be practical/manageable to keep facilities open?*
 - *Deciding the risk-reward for operating – being clear on who's responsibility this is. Some decisions may be out of your hands. Accept and control what you can.*

Different – Programming

■ Program Delivery

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

■ Continuing Education and Team Building

- *Plan for keeping up with technology and resources*
- *Build a team that grows together and can adapt to new situations*

OTHER-

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

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

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

Some protocols:

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

MASK PROTECTION EFFICIENCY



N95

STRONGEST PROTECTION



SURGICAL MASK

MEDICAL USE



FFP1 MASK

ISOLATE SUSPENDED PARTICLES



ACTIVATED CARBON

STOP ODOR



CLOTH MASK

DIY



SPONGE MASK

FASHION USE



Aquatic exercise equipment and team equipment needs special attention. The floats and belts and kick boards and noodles, and pull-buoys, etc. need to be disinfected after use. You will need a spray bottle with a solution of 1 part Clorox (Bleach) to 3 parts water. Spray equipment and let set for 30 minutes, Rinse over drain with hose.



We will spend a lot of time with the pool water chemistry as our first line of defense. We also need to be extra aware of the other part of safe water – [filtration and circulation](#).

- If you have medium pressure UV, check your UV bulbs, wipers, and quartz chamber. Bulbs start losing their effectiveness after 10 to 12 months. UV units that are well maintained destroy many viruses. Make sure the unit is at maximum efficiency.
- Check pump hair strainer baskets more frequently
- Is your filter operating at best efficiency? Sand needs to be cleaned yearly and replaced every 4-5 years. Cartridge filters need to be cleaned and replaced more frequently. DE filters need to be checked for “bag or sleeve” condition. All filters will need to be closely monitored and possibly cleaned more often.
- Chemical feeder system. Make sure all valves and lines are cleaned and flowing freely. Make sure all sensors are functioning properly. Do you have replacement parts for your equipment on hand?
- Check automatic pool vacuums and facility cleaning equipment. The equipment used to vacuum land areas of facility will need to be sanitized after each use.

One of the most important things pool-users can do. Shower before entering pool. If you have deck showers this is an advantage for social distancing. Shower stalls in dressing rooms will need to have signage. There is more to showering than virus considerations. We have Personal Care Product (PCP's or PPCP's) chemicals on our body. Many of these 70+ chemicals were not even invented 30 years ago. Most of them have an adverse effects on chlorines ability to be effective. They are contained in shampoo's, conditioners, deodorants, perfumes, colognes, hair sprays, make-up, lotions, and many other products. A 30 second warm water shower rinse will remove over 70% of these from our body. If a disinfectant soap is used, the bacteria and viral issues can also be addressed. PCP's in pool water can negate the disinfection ability of free chlorine.





- Be aware! In times like this there are unscrupulous individuals and companies who will advertise they have new chemicals or systems that work better. This happens in any industry in a free-market situation. Buyer Beware. If it sounds too good to be true, double your due diligence efforts.
- Any information presented here is subject to change and updating. Virus's don't give advanced notices.
- If you have questions about a specific product or method, please email mick@totalaquatic.llc
- For specific aquatic programming questions email sue@totalaquatic.llc

www.totalaquatic.llc

www.usaswimming.org/buildapool

Attachment 5

Missouri Valley Swimming
Safe Practice Procedures

To: Missouri Valley Swimming Club Members

From: Missouri Valley Swimming Board of Directors, Judith Deedy, General Chair

Date: May 14, 2020

Subj: Return to Swimming Training Safe Practice Procedures

The impact of COVID-19 has presented our swimming community with many challenges. To support Missouri Valley Swimming club members, the Board of Directors has developed the following guidelines for a return to the pool and swim training to help clubs ensure the safety of their athletes, coaching staff, member families and community members.

These Missouri Valley Swimming guidelines should be considered additional guidance to supplement information provided by USA Swimming and the CDC.

Key Consideration: If any athlete or family member doesn't feel well or is exhibiting any symptoms of sickness, the athlete should stay home and not come to the facility for swim practice. Maintaining appropriate social distancing is critical.

Pre-Practice

- Coaches should ensure common area surfaces, door handles, water fountains, starting blocks, and bathrooms are thoroughly cleaned by staff with proper cleaning materials before athletes arrive at the pool.
- Staff should be mindful that sinks, soap, and paper towels are stocked, clean, and ready for use before each session.

Athlete Arrival at Practice

- Multiple-family carpooling to and from practice is not recommended as social distancing would be difficult to maintain.
- Parents should be advised to drop off athletes at the entrance and remain with their vehicles or leave the facility altogether.
- Athletes should arrive at the pool 'ready to swim' with suit on, goggles, caps, towel, water bottles full, and other equipment at the ready to get in the water.
- Locker rooms are not to be used for pre-practice preparation. Locker room showering before entering the pool will be suspended for the time being.
- Coaches should use social distancing practice protocols as outlined by USA Swimming in Facility Re-Opening Messaging and Planning (https://www.usaswimming.org/docs/default-source/coaching-resourcesdocuments/covid-19-team-resources/facility-reopening-plan-guidelines.pdf?sfvrsn=8a533a32_2)
- Athletes should keep to the center of their assigned lane between intervals/sets and maintain social distancing with adjacent lanes during that time.
- Restroom use during practice shall be one-at-a-time, and athletes should return to their assigned lane without delay.

Athlete Departure from Practice

- Athletes should exit the pool, towel off, gather their gear and leave the facility while maintaining appropriate social distancing throughout.
- Locker rooms are off limits for showering and changing into street clothes – athletes should do that at home.
- Parents should plan to be at the facility, lined up for pick-up at the entrance, five minutes before the end of scheduled end of practice.
- Drivers should remain inside of their vehicles and wait for their athlete at the entrance or in the parking lot.

Post Practice

- Coaches and staff should plan for fifteen to twenty minutes time from the end of one practice session to the beginning of the next practice session in order to clean and organize for the next group of athletes to train.
- Common area surfaces, door handles, water fountains, starting blocks, and bathrooms should be wiped down by staff with proper cleaning materials before athletes arrive at the pool.
- Staff should be mindful that sinks, soap, and paper towels are stocked, clean, and ready for use before each session.
- Parents are not to drop off nor are athletes in advance of scheduled practice start time.
- Athletes are to be prohibited from entering the facility before their scheduled practice start time to allow for proper cleaning
- Athletes and parents are not to congregate at entrances awaiting their scheduled practice start time. Maintaining appropriate social distancing is critical.
- Athletes and coaching staff must follow social distancing guidelines outside of practice. Club members should consider banning in-person practice participation by those who fail to do so.

All federal, state, local, and facility guidelines and instructions must be strictly followed during this time. Missouri Valley Swimming and USA Swimming guidance should never be regarded as permission to bypass regulatory or facility instructions.

If you have any questions related to the information within this document, we encourage you to reach out to Judith Deedy or Scott Bliss.

Attachment 6

Sample Team Re-entry Policy

Dear Swim Team Families:

After thorough and thoughtful consideration, we are planning to resume modified programming on [date to be determined] for our Senior Group swimmers only. In accordance with current state and local requirements, as well as USA Swimming guidelines, our leadership team has established an initial schedule and safety expectations for our return to the pool.

We also understand that not all families currently feel comfortable returning to swim practice. While your participation is welcome, we understand and support any decisions to postpone your return to the water. Each family should do what they feel is in their best interest.

We envision this to be a multi-phase process as we introduce our members back to the pool. The plan we are sharing today will be Phase 1 of our reentry procedures. We will not put a timeline on when we will proceed to Phase 2. Instead, we will evaluate the safety and effectiveness of Phase 1 accordingly and use this information to develop Phase 2.

As mentioned, our initial plans will include our Senior groups only. We have chosen this strategy for multiple reasons. First, Senior level swimmers are capable of socially distancing better than our Age Group athletes and safety is our primary goal. Second, we would like to keep total facility usage low as we all learn how best to manage operations where social distancing is key. Finally, the Age Group athlete(s) can return to peak training faster than their Senior teammates. It must be emphasized that there will be no exceptions made during Phase 1. Thank you in advance for your understanding and cooperation.

Our plan to reintroduce athletes to the water depends on everyone's (athletes, parents, and staff) cooperation and adherence to safety protocols. We expect everyone to practice social distancing both at and away from the pool. By doing this, it shows you respect your teammates, their families, and pool staff. Should we feel anyone is consistently not adhering to social distancing guidelines, they or their family's participation in team activities may be suspended. Our staff also reserves the right to discontinue practices at any time should they feel safety expectations are not being met.

Athletes will remain in the training group they were in prior to suspension of practices in March. The coaches will address group promotion at the appropriate time. In our professional opinion, we feel it is currently most important for the athletes to have familiarity with their group and surroundings. Introductions to new groups will only create unneeded stress and therefore we will deal with group promotions in time.

Please see below for our modified schedule for our Senior Team, as well as the safety precautions we will be taking.

SENIOR TEAM SCHEDULE

Week One

GROUP	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
National Team	2:00-3:00 pm		2:00-3:00 pm		2:00-3:00 pm	
Senior 1	3:30-4:30 pm		3:30-4:30 pm		3:30-4:30 pm	
Senior 2		2:00-3:00 pm		2:00-3:00 pm		7:00-8:00 am
Senior 3		3:30-4:30 pm		3:30-4:30 pm		8:30-9:30 am
High School A	5:00-6:00 pm		5:00-6:00 pm		5:00-6:00 pm	
High School B	6:30-7:30 pm		6:30-7:30 pm		6:30-7:30 pm	
High School C		5:00-6:00 pm		5:00-6:00 pm		10:00-11:00 am
Masters		6:30-7:30 pm		6:30-7:30 pm		11:30-12:30 pm

Week Two

GROUP	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
National Team	7:00-8:30 am		7:00-8:30 am		7:00-8:30 am	
Senior 1	9:00-10:30 am		9:00-10:30 am		9:00-10:30 am	
Senior 2		7:00-8:30 am		7:00-8:30 am		7:00-8:30 am
Senior 3		9:00-10:30 am		9:00-10:30 am		9:00-10:30 am
High School A	1:00-2:30 pm		1:00-2:30 pm		1:00-2:30 pm	
High School B	3:00-4:30 pm		3:00-4:30 pm		3:00-4:30 pm	
High School C		1:00-2:30 pm		1:00-2:30 pm		11:00-12:30 pm
Masters		3:00-4:30 pm		3:00-4:30 pm		1:00-2:30 pm

SAFETY EXPECTATIONS

- When parking at the facility, cars must leave a minimum of one space between each other. Cones will be used to mark spaces where vehicles MAY NOT park.
- Athletes will only be permitted to enter the building 5 minutes before their scheduled practice. If they arrive early, they must wait in their car until the appropriate time to enter the building.
- Athletes must leave the facility immediately at the completion of any practice.
- Please use the back gate for entrance. All doors/gates to the facility will be propped open to limit contact with surfaces.
- Athletes should be prepared to arrive and depart in their suits.
- Athletes will have their temperature checked upon arrival (outside at the gate) and will not be permitted to enter should they show signs of a fever of 100.4F or higher.
- Restroom breaks will be limited to the single use restrooms located in the balcony of the competition pool.
- There will be a grid area for athletes to leave their personal belongings to ensure social distancing on the deck. Once athletes enter the building, they will go immediately to their grid spot and await instructions from their coach.
- Athletes should bring their own water bottles (already filled). Use of the water fountains at the facility will be prohibited.

- Athletes will not be permitted to store their equipment bags at the facility. They must take them home after each practice. We will announce times where athletes can visit the facility to pick-up their equipment bags.
- Facility staff and coaches will be wearing PPE masks throughout Phase 1. We encourage anyone entering the building to do the same.
- Athletes will swim with a maximum of two (2) athletes per lane, starting from opposite ends of the pool. Please note that in most cases, we will be able to swim one (1) athlete per lane, also starting from opposite ends of the pool (please see the attached diagram)
- Any athlete or staff experiencing any symptoms of a fever (100.4°F or higher), recent cough, unusual fatigue, headache or has had any exposure to someone who has any symptoms, (which includes family and friends) should remain at home and seek medical treatment. If any athlete or staff does have a fever or symptoms of illnesses, they may not attend a practice until 14 days after the fever or symptoms has ceased. Athletes and staff must see a physician and be cleared for training after being diagnosed or suspected to have COVID-19.
- For us all to stay healthy and be able to keep swimming, we ask our athletes to please practice responsible social distancing when they are away from the pool as well.
- Athletes and families who travel by air, or to an area deemed high risk by the staff, will need to self-isolate for 14 days before returning to practice.
- Facility staff will be disinfecting the bathrooms throughout the day and we will provide disinfecting wipes inside the restrooms as well.

POSITIVE TEST PROCEDURE

Should someone test positive in our membership the following measures will take place:

1. The individual should let the coach know immediately.
2. The individual or individuals swimming on either side of that athlete will be expected to self-quarantine for 14 day and/or receive a negative COVID-19 Test [we will be assigning lanes for all practices so we are clear what athletes may be impacted by this].
3. The facility will be shut down for no less than 24 hours to deep clean.

Best Regards,

Swim Club Board of Directors

PLEASE ALSO REVIEW THE IMPORTANT INFORMATION AND RESOURCES BELOW REGARDING COVID-19 VIRUS:

<https://www.cdc.gov/coronavirus/2019-nCoV/index.html>



UNITED STATES
OLYMPIC & PARALYMPIC
COMMITTEE

INFECTION PREVENTION RECOMMENDATIONS



Stay more than 6 feet away from people who appear sick

Avoid touching your face



Frequently wash your hands for 20 seconds with soap and water or using alcohol-based hand sanitizer with a minimum of 60% alcohol if your hands aren't soiled



Cover your mouth and nose with tissue when coughing or sneezing, dispose of tissue in the trash, and wash your hands or use hand sanitizer after coughing or sneezing



Frequently clean commonly touched surfaces (ie: doorknobs, keyboards) with antiseptic cleanser



Wear a facemask when you are outside of your home or if you have symptoms of a respiratory illness such as a cough, runny nose, or shortness of breath



Stay home if you are sick and call your healthcare provider for further recommendations



UNITED STATES
OLYMPIC & PARALYMPIC
COMMITTEE

Signs and Symptoms of COVID-19

Most Common Symptoms



Fever
(> 100.4)



Cough



Shortness
of breath

Less Common Symptoms



Sore throat
Congestion



Headache
Chills



Muscle and
Joint Pain



Nausea or
Vomiting



Loss of sense
of Smell



Diarrhea



UNITED STATES
OLYMPIC & PARALYMPIC
COMMITTEE

SELF-MONITORING INSTRUCTIONS

Twice daily, check for the following signs or symptoms of respiratory infection:



Fever
(> 100.4)



Cough



Shortness of
breath

Other symptoms to pay attention to include:

Sore throat

Congestion

Headache

Muscle and Joint Pain

Chills

Nausea or Vomiting

Diarrhea

Loss of Sense of Smell



If you develop any of these symptoms, please contact your healthcare provider to discuss how to proceed.



UNITED STATES
OLYMPIC & PARALYMPIC
COMMITTEE

INFECTION PREVENTION RECOMMENDATIONS



Stay more than 6 feet away from people who appear sick



Avoid touching your face

Frequently wash your hands for 20 seconds with soap and water or using alcohol-based hand sanitizer with a minimum of 60% alcohol if your hands aren't soiled



Cover your mouth and nose with tissue when coughing or sneezing, dispose of tissue in the trash, and wash your hands or use hand sanitizer after coughing or sneezing



Frequently clean commonly touched surfaces (ie: doorknobs, keyboards) with antiseptic cleanser



Wear a facemask when you are outside of your home or if you have symptoms of a respiratory illness such as a cough, runny nose, or shortness of breath



Stay home if you are sick and call your healthcare provider for further recommendations



UNITED STATES
OLYMPIC & PARALYMPIC
COMMITTEE

Signs and Symptoms of COVID-19

Most Common Symptoms



Fever
(> 100.4)



Cough



Shortness
of breath

Less Common Symptoms



Sore throat
Congestion



Headache
Chills



Muscle and
Joint Pain



Nausea or
Vomiting



Loss of sense
of Smell



Diarrhea



UNITED STATES
OLYMPIC & PARALYMPIC
COMMITTEE

SELF-MONITORING INSTRUCTIONS

Twice daily, check for the following signs or symptoms of respiratory infection:



Fever
(> 100.4)



Cough



Shortness of
breath

Other symptoms to pay attention to include:

Sore throat

Congestion

Headache

Muscle and Joint Pain

Chills

Nausea or Vomiting

Diarrhea

Loss of Sense of Smell



If you develop any of these symptoms, please contact your healthcare provider to discuss how to proceed.

Attachment 7

Considerations for Public Pools,
Hot Tubs, and Water Playgrounds

Coronavirus Disease 2019 (COVID-19)

Considerations for Public Pools, Hot Tubs, and Water Playgrounds During COVID-19

As public aquatic venues open in some areas, CDC offers the following considerations for the safety of those who operate, manage, and use public pools, hot tubs, and water playgrounds. Public aquatic venues can be operated and managed by:

- city or county governments
- apartment complexes
- membership clubs (for example, gyms)
- schools
- waterparks
- homeowners' associations

All decisions about implementing these considerations should be made locally, in collaboration with [local health officials](#). Operators of public aquatic venues can consult with local officials to determine if and how to implement these considerations while adjusting them to meet the unique needs and circumstances of the local jurisdiction. Their implementation should also be informed by what is feasible, practical, and acceptable.

Promoting Behaviors that Prevent the Spread of COVID-19

Public aquatic venues can consider different strategies to encourage healthy hygiene, including:

- Hand Hygiene and Respiratory Etiquette
 - Encouraging all staff, patrons, and swimmers to [wash their hands](#) often and cover their coughs and sneezes.
- Cloth Face Coverings
 - Encouraging the use of [cloth face coverings](#) as feasible. Face coverings are **most** essential in times when physical distancing is difficult.
 - Advise those wearing face coverings to not wear them in the water. Cloth face coverings can be difficult to breathe through when they're wet.
- Staying Home
 - Educating staff, patrons, and swimmers about when to stay home (for example, if they have [symptoms](#) of COVID-19, have tested positive for COVID-19, or were exposed to someone with COVID-19 within the last 14 days) and when they can safely [end their home isolation](#).
- Adequate Supplies
 - Ensuring adequate supplies to support healthy hygiene. Supplies include soap, hand sanitizer with at least 60 percent alcohol (for staff and older children who can safely use hand sanitizer), paper towels, tissues, and no-touch trash cans.
- Signs and Messages
 - Posting [signs](#) about how to [stop the spread](#)  of COVID-19, [properly wash hands](#), [promote everyday protective measures](#) , and [properly use a cloth face covering](#)  in highly visible locations (for example, at deck entrances and at sinks).
 - Broadcasting [regular announcements about how to stop the spread on PA system](#).
 - Including messages about behaviors that prevent the spread of COVID-19 in contracts with individual patrons or households, in emails, on facility websites (for example, posting online [videos](#)), through facility's [social media accounts](#), and on entrance tickets).

Maintaining Healthy Environments

To maintain healthy environments, operators of public aquatic venues may consider:

- Cleaning and Disinfection
 - [Cleaning and disinfecting](#) frequently touched surfaces at least daily and shared objects each time they are used. For example:
 - Handrails, slides, and structures for climbing or playing
 - Lounge chairs, tabletops, pool noodles, and kickboards
 - Door handles and surfaces of restrooms, handwashing stations, diaper-changing stations, and showers
 - Consulting with the company or engineer that designed the aquatic venue to decide which [List N disinfectants approved by the U.S. Environmental Protection Agency](#) (EPA) are best for your aquatic venue.
 - Setting up a system so that furniture (for example, lounge chairs) that needs to be cleaned and disinfected is kept separate from already cleaned and disinfected furniture.
 - Labeling containers for used equipment that has not yet been cleaned and disinfected and containers for cleaned and disinfected equipment.
 - Laundering towels and clothing according to the manufacturer's instructions. Use the warmest appropriate water temperature and dry items completely.
 - Protecting shared furniture, equipment, towels, and clothing that has been cleaned and disinfected from becoming contaminated before use.
 - Ensuring [safe and correct use](#) and storage of disinfectants, including storing products securely away from children.
- Ventilation
 - Ensuring that ventilation systems of indoor spaces operate properly.
 - Increasing introduction and circulation of outdoor air as much as possible by opening windows and doors, using fans, or other methods. However, do not open windows and doors if doing so poses a safety risk to staff, patrons, or swimmers.
- Water Systems
 - [Taking steps](#) to ensure that all water systems (for example, drinking fountains, decorative fountains, hot tubs) are safe to use after a prolonged facility shutdown to minimize the risk of [Legionnaires' disease](#) and other diseases associated with water.
- Modified Layouts
 - Changing deck layouts to ensure that in the standing and seating areas, individuals can remain at least 6 feet apart from those they don't live with.
- Physical Barriers and Guides
 - Providing physical cues or guides (for example, lane lines in the water or chairs and tables on the deck) and visual cues (for example, tape on the decks, floors, or sidewalks) and signs to ensure that staff, patrons, and swimmers stay at least 6 feet apart from those they don't live with, both in and out of the water.
- Communal Spaces
 - Staggering use of communal spaces (for example, in the water or breakroom), if possible, and [cleaning and disinfecting](#) frequently touched surfaces at least daily and shared objects each time they are used.
- Shared Objects
 - Discouraging people from sharing items that are difficult to clean, sanitize, or disinfect or that are meant to come in contact with the face (for example, goggles, nose clips, and snorkels).
 - Discouraging the sharing of items such as food, equipment, toys, and supplies with those they don't live with.
 - Ensuring adequate equipment for patrons and swimmers, such as kick boards and pool noodles, to minimize sharing to the extent possible, or limiting use of equipment by one group of users at a time and cleaning and disinfecting between use.

Maintaining Healthy Operations

To maintain healthy operations, operators of public aquatic venues may consider:

- Protections for Vulnerable Staff
 - Offering options such as telework or modified job responsibilities that reduce their risk of getting infected.
 - Limiting aquatic venue use to only staff, patrons, and swimmers who live in the local area, if feasible.
- Lifeguards and Water Safety
 - Ensuring that lifeguards who are actively lifeguarding are not also expected to monitor handwashing, use of cloth face coverings, or social distancing of others. Assign this monitoring responsibility to another staff member.
- Alterations of Public Aquatic Venues
 - Consulting the company or engineer that designed the aquatic venue before altering aquatic features (for example, slides and structures designed for climbing or playing).
- Regulatory Awareness
 - Being aware of local or state regulatory agency policies on gathering requirements or recommendations to determine if events, such as aquatic fitness classes, swim lessons, swim team practice, swim meets, or pool parties can be held.
- Staggered or Rotated Shifts
 - Staggering or rotating shifts to limit the number of staff present at the aquatic venue at the same time.
- Designated COVID-19 Point of Contact
 - Designating a staff member to be responsible for responding to COVID-19 concerns. All staff should know who this person is and how to contact him or her.
- Gatherings
 - Avoiding group events, gatherings, or meetings both in and out of the water if social distancing of at least 6 feet between people who don't live together cannot be maintained. Exceptions to the social distancing guidance include:
 - Anyone rescuing a distressed swimmer, providing first aid, or performing cardiopulmonary resuscitation, with or without an automated external defibrillator.
 - Individuals in the process of evacuating an aquatic venue or entire facility due to an emergency.
 - If planned events must be conducted, staggering drop-off and pick-up times, as much as possible, to maintain distance of at least 6 feet between people who don't live together.
 - Asking parents to consider if their children are capable of staying at least 6 feet apart from people they don't live with before taking them to a public aquatic venue.
 - Limiting any nonessential visitors, volunteers, and activities involving external groups or organizations.
- Communication Systems
 - Putting systems in place for:
 - Having staff, patrons, and swimmers self-report if they have [symptoms](#) of COVID-19, a positive test for COVID-19, or were exposed to someone with COVID-19 within the last 14 days.
 - Notifying [local health authorities](#) of COVID-19 cases.
 - Notifying staff, patrons, and swimmers (as feasible) of potential COVID-19 exposures while maintaining confidentiality in accordance with the [Americans with Disabilities Act \(ADA\)](#) [🔗](#) .
 - Notifying staff, patrons, and swimmers of aquatic venue closures.
- Leave Policies
 - Implementing sick leave (time off) policies and practices for staff that are flexible and non-punitive.

- Developing return-to-work policies aligned with CDC's [criteria to discontinue home isolation](#).
- Back-Up Staffing Plan
 - Monitoring absenteeism of staff and creating a roster of trained back-up staff.
- Staff Training
 - Training staff on all safety protocols.
 - Conducting training virtually or ensuring that [social distancing](#) is maintained during in-person training.
- Recognize Signs and Symptoms
 - Conducting daily health checks (for example, temperature screening or [symptom checking](#)) of staff. Ensure safe and respectful implementation that is aligned with any applicable privacy laws and regulations.
 - Consider using examples of screening methods in CDC's [General Business FAQs](#) as a guide.

Preparing for When Someone Gets Sick

To prepare for when someone gets sick, operators of public aquatic venues may consider:

- Isolating and transporting those who are sick to their home or a healthcare provider.
 - Immediately separating staff, patrons, or swimmers with COVID-19 [symptoms](#) (for example, fever, cough, or shortness of breath).
 - Establishing procedures for safely transporting anyone sick to their home or to a healthcare provider.
- Notifying health officials and close contacts.
 - Immediately notifying [local health officials](#), staff, patrons, and swimmers of any case of COVID-19 while maintaining confidentiality in accordance with the [Americans with Disabilities Act \(ADA\)](#) [🔗](#) .
 - Informing those who have had [close contact](#) with a person diagnosed with COVID-19 to stay home and [self-monitor for symptoms](#), and follow [CDC guidance](#) if symptoms develop.
- Cleaning and Disinfection
 - Closing off areas used by a sick person and not using the areas until after cleaning and disinfecting them.
 - Waiting more than 24 hours before cleaning and disinfecting these areas. Ensuring [safe and correct](#) use and storage of [EPA-approved List N disinfectants](#) [🔗](#) , including storing products securely away from children.

Other Resources

- [Latest COVID-19 information](#)
- [Cleaning and Disinfection](#)
- [Guidance for Businesses and Employers](#)
- [CDC Healthy Swimming](#)
- [CDC Steps of Healthy Swimming](#)
- [COVID-19 Prevention](#)
- [Handwashing Information](#)
- [Face Coverings](#)
- [Social Distancing](#)
- [COVID-19 Frequently Asked Questions](#)
- [CDC communication resources](#)
- [Community Mitigation](#)