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MEMORANDUM

TO: The Honorable Mayor and Members of City Council

FROM: Stephen A. Haering, MD, MPH, FACPM, Director, Alexandria Health Department (AHD)
Rachel Stradling, BSc, JD, MCIEH, CP-FS, REHS, Environmental Health Manager, AHD

DATE: May 29, 2015

SUBJECT: Comment on the Proposed Amendment to the City of Alexandria Aquatic Health Ordinance:
Lifeguard and Operator Exemption Ordinance

This Memo is to provide the Alexandria Health Department's (AHD) perspective on the proposed amendment to the City of Alexandria Aquatic Health Ordinance that would provide exemptions to certain pools allowing them to operate without a lifeguard and pool operator in attendance.

AHD does not recommend amending the Alexandria Aquatic Health Ordinance to provide this exemption.

AHD has worked with the Aquatic Advisory Council to incorporate elements of the Center for Disease Control (CDC) Model Aquatic Health Code into the City's code with the single goal of improving swimmer safety without unreasonable burdens on pool owners. Since the adoption of the Ordinance in 2010, there have been no drownings at any City of Alexandria public pools. In 2011, AHD's Aquatic Health Program was awarded the prestigious Neil Lowry Award – an annual award that recognizes the singular best aquatic health program in North America. An important element of our reputation was the strength of the City's ordinance that reduces the risk of harm to the public.

AHD recently researched the issue of pool safety as it relates to pool size and presence of lifeguards. There are no studies that measure lifeguard presence and risk as it relates to the square footage of pools. We did, however, find relevant research. Douglas Sackett (New York Department of Health, 2005) conducted a comprehensive study of 20 years of drownings in New York; key findings were:

- Nearly half of drowning deaths occurred in water less than 5 feet deep
Thus lifeguards are required for shallow pools as well as deep pools
- 22% of all drownings occurred when there were 5 or fewer swimmers
Thus, a significant number of drownings occur even when there a small number of people present
- 42% of drowning victims were swimmers
Thus even people classified as swimmers are susceptible to drowning

Public health knows that drownings occur in all sizes and depths of pools. What may seem intuitive (e.g. <5 feet is safe; fewer swimmers is safer) is not supported and, in fact, is contravened, by public health evidence. Therefore, it is not safe to assume that given square footage (with/without bather load) is above or below a given risk level.

Our research reinforced the positive impact that the presence of a lifeguard has on pool safety and human health. In fact, the general theme of the public health research is that the presence of a lifeguard is an essential key to preventing drowning. We did not find any public health literature (including the CDC's model aquatic health code) that advocates for the removal of lifeguards from pools.

With regards to nearby jurisdictions, Fairfax and Arlington (Virginia) and Prince George's and Montgomery (Maryland) each require lifeguards at public pools.

AHD believes that Alexandria's Aquatic Health Ordinance can be strengthened. Specifically, it should be amended to:

- Allow new technologies and equipment to be used at public pools (as currently written, variances are required to utilize systems that were not available in 2010 when the Ordinance was adopted)
- Prohibit the use of chlorine gas as a disinfectant (chlorine gas can pose serious risks and is not required as a disinfectant)
- Eliminate the requirement that indoor pools, in appropriately grounded buildings, be closed during lightning storms (there is no public health evidence that demonstrates increased risk for such pools)
- Require "demonstration of knowledge" as a method to assess and strengthen certified pool operators (to assure continuous quality through the pool season)

AHD is scheduled to conduct meetings with the community, industry and stakeholders this summer to discuss these proposed changes and to incorporate their input. We anticipate submitting proposed amendments in fall 2015.

Thank you for the opportunity to provide our comments.