

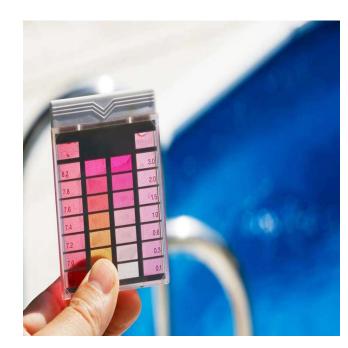
Georgia Department of Public Health, Environmental Health Section 200 Piedmont Ave SE / East Tower / Suite 486 / Atlanta. GA 30334

<u>EnvironmentalHealth@dph.ga.gov</u> *dph.ga.gov*

GUIDANCE FOR PUBLIC SWIMMING POOL OPERATORS

The Georgia Department of Public Health (DPH) and the local county boards of health regulate the operation, maintenance and construction of public swimming pools. To help ensure safe operations, all public swimming pools and spas covered by the Rules and Regulations for Public Swimming Pools, Chapter 511-3-5, shall be maintained under the supervision and direction of a properly trained operator. The owner or permittee is required to have a person, an employee or contract with a provider, to fulfill this responsibility. The trained operator provides supervision and oversight for the sanitation, safety, and proper maintenance of the pool and all related equipment, and for daily recordkeeping. The trained operator must:

- Possess a current certificate showing completion of an operator training course approved by the Department and;
- Perform a minimum of two visits weekly and
- Provide a written assessment of the pool conditions.
 The documents listed below will help operators and responsible persons in the management of a public swimming pool:
 - ✓ Daily Monitoring Record and Addendum
 - ✓ Public Pool Operator Assessment Record
 - ✓ Public Pool Operation Daily Self-Checks
 - √ Fecal Contamination Response Record



Please visit https://dph.georgia.gov/environmental-health/pools to access the forms and for more pool information.

| perform the required daily water monitoring and checks. |
|---|
| ☐ The responsible person is available to test the water chemistry as required by the chapter, conduct self- |
| checks and closes the pool when hazards warrant such action. |
| ☐ The responsible person receives training on basic pool operations and emergency procedures from the |
| trained operator, or from a local health department course if available. |
| (2) The responsible person or trained operator adheres to the water testing frequency. |
| ☐ For pools, free available chlorine or total bromine and pH is tested a minimum of two times daily during |
| the hours of operation. |
| ☐ Total alkalinity is tested weekly and calcium hardness is tested monthly. |
| ☐ If stabilized chlorine is used as the primary disinfectant, the operator test cyanuric acid every two weeks |
| Otherwise, cyanuric acid is tested monthly. Test twenty-four hours after addition to the water. |
| ☐ For spas and hot water venues, free available chlorine, total bromine, pH and water temperature are |
| tested prior to opening and recorded every four hours. |
| ☐ In-line oxidation reduction potential readings (if applicable) are recorded at the same time the free |
| available chlorine or total bromine and pH tests are performed. |
| ☐ If in-line electrolytic chlorinators are used, salt levels are tested at least weekly or per manufacturer's |
| instructions. |
| (3) The responsible person or trained operator follows the pool water collection procedures |
| outlined in the rule. |
| ☐ The pool operator or responsible person acquires the water sample for testing the chemical parameters |
| in the test cell or an appropriate water test bottle. |
| ☐ The sample is obtained from at least eighteen inches below the surface of the water and from a location |
| between the inlets. |
| |

| ☐ The sample is obtained from a section of the pool that has a water depth of between three to four feet |
|--|
| when available. |
| ☐ For each water test, sampling locations rotate around the shallower end of the pool. The pool operator |
| includes the deepest area of the pool in the water sampling rotation once per week. |
| ☐ If the water test results are not in compliance with DPH Rule 511-3-517, the operator closes the pool, |
| record findings, and makes the necessary adjustments to the water chemistry to comply with the chapter. |
| The chemicals used and amounts are recorded on the operator log. |
| ☐ A safety self-inspection is conducted daily by the trained operator or responsible person and |
| documented on a log sheet. |
| (4) The facility has an appropriate response plan and policy. |
| ☐ The facility has a written contamination response plan for responding to incidents of formed-stool, |
| diarrheal-stool, and vomitus contamination. The incidents are recorded and managed by the trained |
| operator. |
| ✓ A log is maintained to record each occurrence of contamination in the water or on the adjacent |
| deck area for formed or diarrheal fecal material, whole stomach discharge of vomitus, and blood. |
| ✓ After an incident, the pool is closed for the time required to achieve the correct contact |
| concentration and time (CT) value (CT, mg-min/L) for the hazard, in accordance with the most |
| recent recommendations published by the Centers for Disease Control and Prevention. |
| ☐ The theoretical peak occupancy limit is observed by the management. A sign stating the occupancy is |
| posted in a visible location near the entrance in four inch letters and numbers. |
| ☐ Management established an inclement weather policy for the safety of the bathers. |
| |

*Reference: 511-3-5-.22 Operation and Management

Public Swimming Pool Operator Record Facility Address: Facility Name: See Addendum for recording of: **Daily Water** Pressure corrections, Temperature Daily Self **Weekly Total** Flowmeter Current Gauge **Trained Operator or** chemicals & *Daily Disinfectant & pH Levels measured Spa Checks Alkalinity Reading **Occupancy Load** Reading backwashing **Responsible Person** FC/Br FC/Br (7.2-7.8)(7.2-7.8)(<104 F) Check (V) (60-180 ppm) (gpm) (inside barrier) Check (V) if used (signature) Day (psi) 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27

Cyanuric Acid: ____ppm

Calcium Hardness_

ppm

28 29 30

* The pH, disinfectant and temperature monitoring frequencies are different for heated spas and pools.

Trained Operator Name: ______ Phone #:______

| acility Name: Trained Operator Name: Date: ddress: City/State: Zi Day OPERATOR ACTIVITIES, OBSERVATIONS AND CORRECTIVE ACTIONS OPERATOR ACTIVITIES, OBSERVATIONS AND CORRECTIVE ACTIONS | City/State: Zip Code: |
|--|---|
| | |
| OPERATOR ACTIVITIES, OBSERVATIONS AND CORRECTIVE ACTIONS OPERATOR ACTIVITIES, OBSERVATIONS AND CORRECTIVE ACTIVITIES, OBSERVATIONS OPERATOR ACTIVITIES, OBSERVAT | TIVITIES, OBSERVATIONS AND CORRECTIVE ACTIONS |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |



| Facility Name: | Trained Operator Name: | | | | | | | | |
|---|---------------------------|--|--|--|--|--|--|--|--|
| Facility Address: | Trained Operator Address: | | | | | | | | |
| Pool Type and Volume (gallons) | Trained Operator Phone #: | | | | | | | | |
| EQUIPMI | EQUIPMENT MAKE AND MODEL | | | | | | | | |
| Circulation Pump(s): | Disinfection Equipment: | | | | | | | | |
| Filter(s): | Main Drain Covers: | | | | | | | | |
| MAINTENANCE A | ND OPERATIONAL CONDITIONS | | | | | | | | |
| Areas | Observations/Findings | | | | | | | | |
| ☐ Circulation System: The components connected by piping in a pool or spa in a closed circuit. Circulation equipment includes: hair and lint strainer, filters, valves, gauges, flow meter, chemical feeder, skimmers and inlets/suction outlets. | | | | | | | | | |
| ☐ Safety Equipment: The equipment is accessible, operational and in good repair. This includes the hard-wired phone, light pole and hook, ring buoy and rope, float line and signs in conspicuous locations. | | | | | | | | | |
| ☐ Pool Stairs and Deck Conditions: Decks areas immediately adjacent to pool or spa and ingress/egress from the pool. The deck area is unobstructed, pool coping and decking forms watertight joint and decking maintained. Stairs markings visible and ladders secure to decking. | | | | | | | | | |
| ☐ Disinfection Equipment and Feeders: Equipment such as flow-through chemical feeders, in-line electrolytic generators, mechanical chemical feeders, chemical feed pumps and automated controllers used are interlocked, operational, listed and delivering sufficient registered disinfectant. | | | | | | | | | |
| CORRECTIVE ACTIONS TAKEN AND COMMENTS | | | | | | | | | |
| | | | | | | | | | |



PUBLIC POOL OPERATION DAILY SELF-CHECKS

WATER QUALITY

- [] 1. Free chlorine residual maintained at:
- Pools with cyanuric acid: Minimum level of 2.0 ppm and maximum level of 10 ppm.
- Pools without cyanuric acid: Minimum level of 1.0 ppm and maximum level of 10 ppm. (Min. based on pool type.)
- Spas: Minimum level of 3.0 ppm and maximum level of 10 ppm.
- [] 2. Combined chlorine concentration maintained below 0.4 ppm.
- [] 3. pH maintained between 7.2 and 7.8.
- [] 4. Cyanuric acid maintained below 90 ppm.
- [] 5. Main drain(s) clearly visible from deck; water clear.
- [] 6. Pool/spa water test kit provided. DPD test kit or approved equivalent.
- [] 7. Properly secured VGB covers provided for main drains and equalizer lines. Vacuum line cover approved.

SAFETY SIGNS AND LIFE SAVING EQUIPMENT

- [] 1. Signs and Markings required:
- Peak Occupancy: 4 in. high numbers and letters.
- "NO DIVING": Required adjacent to depth markers in water 5 ft. or less. 4 in. high letters.
- "NO LIFEGUARD ON DUTY": 4 in. high letters
- "RISK OF DROWNING-SUPERVISE CHILDREN CLOSELY" 4 in. high letters.
- Emergency sign: "911", or phone # and name to the nearest police, fire, ambulance or rescue unit.
- "Pool Risks": 1 in, high letters.
- [] 2. All signs placed in clear view at or near the entrance and maintained in a legible manner.
- [] 3. Life ring with a minimum 15 in. outer diameter attached to a ¼ in. width rope. Rope length is 1.5 times the pool width or 50 ft. whichever is less.
- [] 4. Pole including body hook not less than 12 ft.
- [] 5. Depth markers clearly visible on deck and pool wall. Located at maximum and minimum depths; at the slope change; uniformly on both sides and at both ends of the pool.
- [] 6. Rope and float line located between shallow and deep ends. Water > 5 ft. is considered deep.

FENCING

- [] 1. Fencing minimum 4 ft. high. (Size of openings in fencing 1½" to 4" depend upon design.)
- [] 2. Gates are self-closing and self-latching.
- [] 3. Latching device located 54 in. above ground or placed inside the gate 3 in. down from the top of the gate. No openings $> \frac{1}{2}$ in. within 18 in. of the latch.

GENERAL REQUIREMENTS

- [] 1. Current Environmental Health inspection posted.
- [] 2. Pool monitored daily by a responsible person or trained operator.
- [] 3. Daily records of water testing, self-inspections, and trained operator visits available for review.
- [] 4. Pool lighting secure and in good operating condition.
- [] 5. Ladders and handrails secure and in good repair.
- [] 6. Pool deck and coping in good repair.
- [] 7. An unobstructed 4 ft. minimum width of decking around the entire pool.

THE POOL WILL BE CLOSED IF ANY OF THE FOLLOWING CONDITIONS EXIST:

- 1. Free chlorine residual < minimum.
- 2. pH <7.2 or >7.8
- 3. Recirculation system not in continuous operation
- 4. Water clarity: main drain cannot be seen clearly from the deck due to poor water conditions.
- 5. Broken glass on the deck or in the water.
- 6. Broken, unsecure, or missing main drain cover(s).
- 7. Fence/barrier broken; gate not self-closing or self-latching.
- 8. Absence of lifesaving equipment.
- 9. Fecal Incident reported in the pool water.
- 10. Any other condition which may be found to exist and cannot be immediately corrected which could or potentially threaten the public's health and safety (i.e.: unapproved water source, power outage and inclement weather conditions).

WHAT IF I HAVE A GENERAL QUESTION ABOUT THE REQUIREMENTS FOR MY POOL?

Contact the local health department in your area and ask to speak to an Environmental Health Specialist if you have questions on inspections and permitting. Also, prior to any repair, modification or replacement of any equipment such as a pump, heater, main drain cover, any recirculation component or deck material, please obtain a permit or approval from the local health department. This document serves as general pool guidance, refer to the chapter for specific requirements.



| Date (mm/dd/yyyy) incident reported | 1. | | | | | | |
|---|----------------|---------|-------|-----|-----|--------------------------------|--|
| 2. Time incident was reported | 2. | 2. | | | | | |
| Person responding to incident | 3. | 3. | | | | | |
| 4. Number of people in the pool water | 4. | 4. | | | | | |
| 5. Type of contamination reported | 5. | 5. | | | | | |
| 6. Type of pool and volume in gallons | 6. | | | | | | |
| 7. CYA present in water (Yes/No); If yes, record amount in ppm | the 7. | 7. | | | | | |
| 8. Time pool was closed | 8. | 8. | | | | | |
| Monitoring Interva | for pH and Ch | orine L | evels | | | | |
| 9. Monitoring intervals The measurements taken at different periods in the remediation process. The measurements are taken, overenly spaced intervals, throughout the required closurements and before reopening. | | 1st | 2nd | 3rd | 4th | End (Prior to Reopening) | |
| (a) Monitoring Time: | | | | | | | |
| (b) Free Residual Chlorine (ppm): | | | | | | | |
| (c) pH levels: | | | | | | | |
| 10. Time and Date (mm/dd/yyyy) pool was reope | ned: 10. | | | | | <u> </u> | |
| Total Contact Time: The time starts when the disinfectant reaches the design concentration and ends when the disinfectant concentration begins being reduced for reopening. | | | | | | | |
| Remediation Procedu | e(s) Reference | and Cor | nment | s: | | | |
| | | | | | | | |
| | | | | | | | |