

# City of Toronto: Community Recreation Post Pandemic Operational Guideline for Swim TO at Outdoor Pools

## Table of Contents

<b>Section 1 - Introduction .....</b>	<b>3</b>
Purpose of this guide.....	3
Background .....	3
COVID-19 – What is it and what are the symptoms? .....	3
<b>Section 2 – Health Controls.....</b>	<b>5</b>
Daily Screening/Health Checks and Sign-In Procedures: .....	5
Daily Health Check/Screening Procedures for All Staff .....	6
Staff thermometers .....	7
Participant/Staff Illness Occurring During Activity or at Health Check/Screening .....	7
If a Participant/Staff becomes Ill during an Activity or Program .....	8
Health and Safety Reporting Procedures for Staff who Become Ill at Work or Call in Sick .....	8
Respiratory Etiquette .....	9
Handwashing and Hand Hygiene .....	9
<b>Section 3 - Administrative Controls.....</b>	<b>11</b>
Emergency Contact Lists.....	11
Administrative Forms .....	11
Signage .....	11
Program Illness Outbreak, Tracking, and Notification Procedure .....	11
Booking Fees as of January 2020 .....	12
<b>Section 4 - Physical Distancing Requirements .....</b>	<b>14</b>
General .....	14
Leisure Swims .....	14
Lane Swim .....	14
Permit Groups .....	15
Facility Access.....	15
Swimming Pools.....	15
Changerooms/Washrooms .....	15
Office Areas (Pool Office) .....	16
Safety Education and Rule Enforcement .....	16
<b>Section 5 – Health Controls.....</b>	<b>17</b>
Personal Protective Equipment .....	17
Donning and Doffing of Personal Protective Equipment .....	19
Procedure for Removing PPE.....	20

Personal Items .....	20
<b>Section 6 – Cleaning and Disinfection Procedures .....</b>	<b>21</b>
Cleaning and Disinfection .....	21
Equipment .....	22
Food and Lunches.....	23
Safe Water Management.....	23
<b>Section 7 – Rescues and Emergency Care .....</b>	<b>25</b>
In-Water Rescues.....	25
Resuscitation (CPR) for a Drowning Victim .....	25
Resuscitation (CPR) for a Non-Drowning Victim.....	25
Other First Aid Interventions .....	26
Scene and Risk Assessment .....	26
Primary Assessment.....	26
Secondary Assessment.....	26
Respiratory Hygiene Measures for Victims .....	26
First Aid for Children and Minors .....	27
<b>Section 8 – Procedures, Forms and Signage.....</b>	<b>28</b>
Procedures.....	28
Forms.....	28
Signage .....	28

## Section 1 - Introduction

Community Recreation has prepared this planning guide to assist Community Recreation in implementing a safe and structured reopening plan, in consultation with Toronto Public Health.

This guide is intended to be used as a planning tool. All programs and services must use these tools alongside the specific advice provided by federal, provincial and local authorities. These guidelines were developed based on Ontario Regulation 565 – Public Pools and the recommendations outlined in the Lifesaving Society Guide to Reopening Pools and Waterfronts and Toronto Public Health COVID-19 Guidance for Recreational Water Facilities.

### Purpose of this guide

This planning guideline identifies critical health, administrative, engineering and safety controls required for reopening outdoor pools.

**Outdoor Pools** must have washroom facilities in close proximity for staff to utilize in the event that they need to wash their hands and practice safe hand hygiene. If that is not possible staff, must have access to hand sanitizer of a minimum of 60% alcohol. Hand washing is always the first line of defence and preferred option to eliminate contagious virus/diseases. Hand sanitizer does not replace hand washing.

**Public Health Principles of safe programming for Outdoor pools:** Physical distancing, enhanced cleaning, personal protective equipment (PPE), respiratory etiquette and signage that is posted that lists all symptoms with the addition of staff verbally telling all participants about potential symptoms.

**This guidance document for the reopening of outdoor pools** is an evolving document and as planning continues at the federal, provincial and local levels, information will be updated and added, as required.

Any requests for an exemption to the requirements of these guidelines must be forwarded by the Supervisor to the Manager, Quality Assurance.

### Background

Toronto Public Health (TPH), in collaboration with the Provincial and Federal governments, will keep the public informed by providing timely, clear and up-to-date information about the COVID-19 pandemic. This will be done as necessary through the media, [Toronto Public Health Website](#) and or through Toronto Health Connections at 416-338-7600.

Decisions regarding any closure of Community Centres, Community Programs, Pools or amenities and cancellation of social gatherings will be made by the Provincial government (Provincial orders), neighbouring jurisdictions and directly affected agencies. The Toronto Medical Officer of Health will advise the City of Toronto Senior Leadership and government on the city's recovery plan.

### COVID-19 – What is it and what are the symptoms?

COVID-19 is a disease caused by a novel coronavirus that can result in acute respiratory illness. In general, these viruses are spread when a person who is ill coughs or sneezes. It may also be possible for a person to contract COVID-19 by touching contaminated surfaces and then touching their own mouth, nose, or possibly their eyes. The majority of people with COVID-19

develop a mild illness, which may include fever, cough, aches of pain, running nose, shortness of breath, loss of smell or taste, sore throat, and/or headaches. Participants may have milder or asymptomatic infections of COVID-19. For more general information about COVID-19, visit [www.toronto.ca/COVID19](http://www.toronto.ca/COVID19).

## Exclusion Examples

Staff need to conduct a health check on participants. If a participant at an outdoor pool states they have one or more of the symptoms listed below, staff need to request that they leave the outdoor pool area. Health checks also need to be conducted on staff prior to the start of their shift.

Symptoms need to be "**greater than normal**". If a participant and/or staff has a runny nose/watery eyes consistent with allergies, and an additional symptom presents itself, such as lethargy or fever, they would be asked to leave program/work.

Symptoms can take up to 14 days after exposure to COVID-19 to appear, and include:

- Fever
- Cough
- Difficulty breathing
- Sore throat
- Runny nose
- Loss of taste or smell
- Nausea, vomiting, diarrhea
- Difficulty swallowing

Disease symptoms may be different, depending on age. Children and older adults with COVID-19, may also have non-specific symptoms, such as:

- Disorientation, confusion
- Sleeping more than usual or muscle aches
- Dizziness, weakness or falls
- Chills, headaches

## Inflammatory Condition

Rarely, children can get an inflammatory condition that impacts the blood vessels, called vasculitis. It can present with:

- Rashes
- Prolonged fever
- Red eyes and swelling in the hands and feet that need medical attention.

If staff notice these new symptoms, they must ask the parent to seek medical assistance and not return until a diagnosis is made and the participant has been cleared with a note.

[https://www.toronto.ca/wp-content/uploads/2020/02/8d59-Fact-Sheet\\_Novel-Coronavirus.pdf](https://www.toronto.ca/wp-content/uploads/2020/02/8d59-Fact-Sheet_Novel-Coronavirus.pdf)

[http://www.health.gov.on.ca/en/pro/programs/publichealth/coronavirus/docs/2019\\_reference\\_doc\\_symptoms.pdf](http://www.health.gov.on.ca/en/pro/programs/publichealth/coronavirus/docs/2019_reference_doc_symptoms.pdf)

## Section 2 – Health Controls

### Daily Screening/Health Checks and Sign-In Procedures:

All facility users, will require a health check/screening prior to entering the facility. Physical distancing and screening information will be posted at the entrances. The signage will inform visitors that if they answer yes to any of these questions, they cannot enter the area.

1. Signage will be posted at each entrance, outlining the COVID-19 symptoms and informing participants that personal information will be collected for Toronto Public Health (TPH) contact tracing.
2. On the table will also be a sign that states the Notice of Collection statement so that staff do not need to read it to each individual.
3. Staff placed at the entrance of a program or community centre will greet participants in a welcoming and friendly manner. Physical barriers, such as two tables placed side by side, will need to be in place to ensure physical distancing is able to be maintained between staff and facility users. If physical distancing is not possible, staff may consider wearing PPE (e.g. face mask).
4. Staff will point to the sign and ask if the participants/facility user/parent has any of the symptoms or if yes to questions.
5. **Staff do not need to read off the list of symptoms, just get a verbal yes or no after person reads sign**
6. **Participant must be wearing a mask as per the bylaw to gain access to the changerooms**
7. Signage should be placed where it is easily read by multiple people at one time to ensure line up goes as quickly as possible.
8. Staff will educate and encourage participants to wear a face covering/mask at all times while in the Community Centre (if applicable) and indoor spaces.
9. Should a participant present at the entrance without one, staff will encourage them to obtain one and return, unless there is a medical reason why they cannot wear a mask.
10. Staff will direct participants to look at the posted signage.

Sign includes the following:  
Do you have any of these symptoms?

<ul style="list-style-type: none"><li>• Fever</li><li>• Cough</li><li>• Difficulty breathing</li><li>• Sore throat</li><li>• Runny nose</li></ul>	<ul style="list-style-type: none"><li>• Loss of taste or smell</li><li>• Diarrhea</li><li>• Inflammatory vasculitis (abnormal swelling in the hands and feet)</li></ul>	<ul style="list-style-type: none"><li>• Not feeling well</li><li>• Nausea, vomiting</li></ul>
---	---	---

- a. Has the participant travelled outside of Canada within the last 14 days?
  - b. Have you been in close contact with someone who is sick or has confirmed COVID-19 without wearing PPE in the past 14 days?
11. If a participant answers YES to any of the screening questions, they will be turned away and referred to a COVID-19 assessment centre for testing. They are asked not to return until they have received a negative COVID-19 test, and are symptom free for 24 hours and not be required to self-isolate for other reasons.

12. Staff will record the participant's first name, telephone number (preferred) or email address and number of participants in the group, and if they answered yes or no to the person reading the signage. This is recorded on the Program Sign-In Sheet for Contact Tracing.
13. For families or groups:
  - a. Staff will only need to record the contact information of the caregiver. Staff will record the total number of family members with them in the column titled "Group Total".
  - b. If a caregiver is responsible for a participant that is not a member of their own family, contact information for those participants will need to be recorded separately.
14. Staff will make Alcohol-based Hand Sanitizer (60-90%) available to participants at the screening station prior to entering the facility.
15. To protect participant's privacy, staff will record the personal information of the participants on the sign-in sheet.
16. If the sign in must be done by hand, to avoid the sharing of pens and clipboards and to protect privacy, staff must complete the form. The sign-in sheet must be kept with the staff, at the entrance, at all times and should not be left out in the open.
17. At the end of each lane/leisure time slot, staff will file the sign-in sheet in a locked file cabinet or electronically scan the file and save it in a secure location on the G drive. All sign-in sheets will need to be saved in case TPH requires them for contact tracing.
18. It is the responsibility of the Recreation Programmer to set up a secure electronic filing system if a locked cabinet is not available on site. To protect the privacy of participants, the Recreation Programmer will be required to ensure that the sign-in sheets have been completed and secured (as noted in #10above), each day.
19. Program Sign-In Sheets for Contact Tracing must be retained for a minimum period of one year after use or as identified in the Parks, Forestry and Recreation's retention schedule.

### **Entrance Restrictions**

- Screening Posters will be prominently displayed at the pool entrance(s)
- Participants who are exhibiting symptoms of COVID-19 or have had close contact with a confirmed case of COVID-19 cannot use an outdoor pool.
- Spectators are not permitted in the pool area. Parents will be admitted into the pool area as required by the Admittance Policy.
- There is a higher risk for severe illness in people over the age of 60, and those with weakened immunity or underlying health conditions. These participants are encouraged to remain home.
- All activities must always comply with the physical distancing measures and recommendations issued by federal, provincial, and municipal government authorities.

### **Daily Health Check/Screening Procedures for All Staff**

- A daily health check/screening, including temperature, is required for all staff prior to being permitted to attend a work location. Staff will conduct a self-assessment upon to arrival at work using the [Daily Staff Health Check Screening - Daily Version](#) or the [Daily Staff Health Check Screening - Weekly Version](#)
- If staff answer yes to any of the COVID-19 screening questions they are to contact their supervisor or designate to enable appropriate coverage provision. Staff are not to come

in to work and are asked to go to their nearest screening centre for testing see below for procedures if Staff Arrive to Work and Become Ill or Staff Call In Sick.

### **Staff thermometers**

It has been determined that each site can purchase one thermometer for Part time and Full Time staff to use when they get to work – it is the CRP responsibility to purchase with P-Card one thermometer up to \$100.00 and single-use protective covers can be purchased as needed. For Facilities, please have supervisors or superintendents that have PCards ensure that if they are not at the same facility that they purchase for facility staff. If facility staff are in the same building they can use the one the CRP purchases.

The thermometer needs to be in a specific area in a container so that all staff know where it is at all times. Staff need to take their OWN temperature using the thermometer to complete their daily health check.

Thermometers must not be used between individuals without disinfecting between use, including infra-red thermometer. In the case of ear thermometers, in addition to disinfecting between use, single-use protective covers must be used and replaced after each use.

No PPE is required as each staff will take their own temperature, disinfect it and then place it back into the container for the next staff to pick up and use.

**The thermometers are for staff use only, not for participants.**

### **Participant/Staff Illness Occurring During Activity or at Health Check/Screening**

Any confirmed cases of COVID-19 in a participant must be reported to Toronto Public Health.

Participants/staff that show any symptoms or answer yes to any screening questions must not be allowed to enter the pool area.

Participant/staff who are experiencing symptoms consistent with COVID-19, but have had no exposure to a confirmed case of COVID-19, and receive a negative test result, may return to work 24 hours after their symptoms have resolved.

If a participant/staff answers YES to any of the screening questions, they will be turned away and referred to a COVID-19 assessment centre for testing. They are asked not to return until they have received a negative COVID-19 test, and are symptom free for 24 hours and not be required to self-isolate for other reasons.

Any participants or staff who receive a confirmed diagnosis of COVID-19 or have been exposed to a confirmed case of COVID-19 without the use of PPE, will be excluded from the program/work for 14 days and be symptom free for 24 hours, prior to returning to program/work.



### **If a Participant/Staff becomes Ill during an Activity or Program**

1. Any individuals (staff or facility users) showing symptoms of illness must be sent home immediately
2. If individual with illness is a participant, staff will record details on a [Minor Injury/Incident Form](#) documenting all symptoms
3. In the event of serious illness (e.g. individual is disoriented or slips into unconsciousness), call 911 and follow appropriate emergency procedures. Refer to the [Emergency Response Plan Policy](#) and Binder, and follow the appropriate reporting procedures
4. In the event of a staff illness, staff will contact their immediate Recreation Programmer or Supervisor as soon as a staff have displayed any symptoms of the virus. The Health & Safety Reporting Procedures listed in the next section will be followed
5. Any participant or staff who are experiencing symptoms consistent with COVID-19, but have had no exposure to a confirmed case of COVID-19, and receive a negative test result, may return to work 24 hours after their symptoms have resolved.
6. Any facility users or staff who receive a confirmed diagnosis of COVID-19 or have been exposed to a confirmed case of COVID-19 without the use of PPE, will be excluded from the program for 14 days and be symptom free for 24 hours after the 14 days, prior to returning to program
7. Any staff who receives a confirmed diagnosis of COVID-19 must notify their Supervisor immediately. Supervisor will notify Manager, Quality Assurance and Director's Office Policy and Project Advisor (PPA)
8. Environmental cleaning/disinfection of the facility user's/participant's or staff's activity space, including washrooms and change rooms and equipment must be conducted once the individual has left. Items that cannot be cleaned and disinfected, should be removed and stored in a sealed container for a minimum of 7 days

### **Health and Safety Reporting Procedures for Staff who Become Ill at Work or Call in Sick**

1. Recreation Programmer and/or Supervisor will need to establish whether the illness is related to a workplace exposure. Based on the answers provided by the staff to the questions below, the Recreation Programmer with the assistance of their Supervisor should determine if the exposure to COVID-19 is presumed to be work related
2. To confirm if an illness is due to a COVID-19 work related exposure, the Recreation Programmer should ask the staff the following questions:
  - a. Has a *contact source* to COVID-19 in the workplace been identified?
    - i. If yes, is it *known* or *suspected*?
    - ii. If yes, has an outbreak been declared by Toronto Public Health?
    - iii. If the answer is no, then why does the worker believe its work related?
  - b. Does the nature and location of employment activities place the worker at risk for exposure to infected person(s) or infectious substance(s)?
  - c. What is the date(s) of the known or suspected exposure?
  - d. When did the worker first experience an onset of illness/symptoms?
  - e. Is the worker's onset of illness/symptoms clinically compatible with COVID-19 that has been established to exist in the workplace?
  - f. Has a medical diagnosis been confirmed?

- i. If not, is a medical diagnosis pending?

If the exposure **IS** presumed to be work related, the Supervisor will ensure the following steps take place:

3. All [Supervisor's Report of Injury/Incident Forms](#) are reported in the [Health and Safety, Quatro Safety System](#) referring to **COVID-19 Work Related Exposures – Decision Making Tree for Community Recreation in the Appendix**, for instructions in completing Supervisors Report of Injury/Incident Forms and to ensure that each scenario is coded appropriately.
4. If the staff and Recreation Programmer/Supervisor are unsure about whether the exposure took place in the workplace, contact Maureen Easby: [Maureen.Easby@toronto.ca](mailto:Maureen.Easby@toronto.ca) or Art Ng: [Art.Ng@toronto.ca](mailto:Art.Ng@toronto.ca) for guidance

Refer to the Decision Tree for Community Recreation flow chart on how to pay staff along with link to the [Sick Leave Policy](#)

### **Respiratory Etiquette**

To prevent the spread of respiratory infections, proper respiratory etiquette needs to be regularly practiced by staff.

- [Poster: Cover Your Cough](#)
- [Poster: Hand Hygiene](#)

Respiratory etiquette posters need to be posted in the staff office and in the changerooms to remind staff and participants to practice proper respiratory etiquette.

Respiratory etiquette includes:

- Covering your nose and mouth during coughing and sneezing with a tissue or sneezing or coughing into your sleeve or elbow.
- Disposing of used tissues into the garbage immediately after use.
- Practicing proper hand hygiene immediately after coughing or sneezing.

Tissues should be provided to participants to support proper respiratory etiquette, when required.

### **Handwashing and Hand Hygiene**

Signs need to be posted on how to hand wash at all sinks [Poster: Hand Washing](#)

Hand washing with soap and water is the preferred method of hand hygiene, where possible. All sinks need soap and need to be checked on a regular basis to ensure that soap dispensers are full.

Encourage participants (i.e. bathers) to practice hand hygiene prior, during and after use of the recreational water facility.

Staff and participants should be reminded to avoid touching their face, nose and mouth with unwashed hands.

Staff are asked to wash their hands:

- Before and after shifts and breaks
- Prior to entering and exiting the staff office
- Following washroom breaks
- Following any physical interactions with another staff member or member of the public
- Following the use of any shared equipment
- Following the cleaning of equipment
- After completing administrative tasks that require touching forms, pens, etc.
- Before and after eating
- Before and after blowing one's nose, coughing or sneezing

## Section 3 - Administrative Controls

### Emergency Contact Lists

Each outdoor pool needs to prepare and keep an updated list of contact information for staff for Toronto Public Health officials, should they be required to do contact tracing.

### Administrative Forms

When completing forms (e.g. Incident Report Forms, Logbook, etc.), staff should try not to share pens or clipboards. If individual clipboards or pens are not available for each staff, these supplies must be disinfected before they are re-used.

### Signage

Post signs in a visible location at the entrance and other appropriate areas in the facility/pool area to raise awareness about health and safety measures that can help prevent the spread of COVID-19, such as:

- [Physical Distancing](#)
- [Protect Yourself](#)
- [Information about COVID-19](#)
- [Wash your Hands](#)
- [Cover your Cough](#)
- Poster for Entrances (i.e. symptoms)

### Program Illness Outbreak, Tracking, and Notification Procedure

All potential or suspected cases of COVID-19 must be reported to Toronto Public Health as noted in Section 3, If Staff Arrive at Work or Become Ill.

TPH will require names, sign in sheets, daily health checks and other documentation. All documentation must be kept and locked in a secure location on a daily basis or electronically saved on securely G drive.

The following reporting procedures must be followed daily:

1. Staff Illness Tracking Form will be completed to record details staff who present with symptoms of COVID-19
2. At the end of the day, Community Recreation Programmers or designate will forward the Staff Illness Tracking Form to their Supervisor
3. Supervisor will forward one form for their cluster to the designated District Supervisor lead.
4. District Supervisor Lead will roll up the information onto one form and submit to Director's Office Policy and Project Advisor (PPA) and Manager, Quality Assurance by 5pm.
5. District Supervisor Lead will note any issues requiring attention in the body of the email.
6. If there are no cases to report, Supervisor Lead will send an email to Director's Office Policy and Project Advisor (PPA) and Manager, Quality Assurance by 5pm, noting that the District does not have anything to report
7. If Toronto Public Health attends a location to investigate a confirmed or suspect case of COVID-19 staff will immediately notify Supervisor. Supervisor will notify Manager, Quality Assurance and Director's Office Policy and Project Advisor (PPA)

8. If staff become aware of a laboratory confirmed diagnosis of COVID-19, staff will immediately notify Supervisor. Supervisor will notify Manager, Quality Assurance and Director's Office Policy and Project Advisor (PPA)

Toronto Public Health will be responsible for declaring an outbreak and will determine and do contact tracing, where necessary. Toronto Public Health may conduct an investigation and will determine if the location needs to be closed, whether staff or participants require testing or if additional enhanced precautions are required (e.g. further cleaning and disinfection)

Staff must notify their Recreation Programmer or Supervisor if they receive a confirmed diagnosis of COVID-19.

If TPH receives a positive test from a staff, they will call senior management at the City of Toronto, Parks Forestry and Recreation Division, however this may take time.

### Permit Groups

See below for details on Booking Guidelines

- Each permit group/meeting/general rental, will be issued a new permit along with the [General Declaration for Permit Holders during COVID](#). The declarations adhere to Provincial Guidelines, Toronto Public Health Guidelines and City Guidance. They will help to mitigate risk to the City as a result of COVID-19
- Staff need to reference the following documents:
  - [FINAL Memo - Managers Facility Booking Report Review 01-08-2020](#)
  - [PFR Facility Bookings and Program Registration Accounts Overdue Guidelines](#)
  - [How to Print a Permit with New COVID Terms](#)
  - [Important Information on Facility Bookings](#)
- The permit holder needs to sign off on the General Declaration and it needs to be attached to the permit in CLASS
- The Business and Client Services unit will ensure Exclusive use of Spaces leases receive and sign off on the General Declaration
- Staff will ensure that pens are not shared or are disinfected between users to avoid cross contamination

### Booking Fees as of January 2020

#### **NO TENTATIVE AGREEMENTS ARE ALLOWED**

Staff responsible for facility bookings and program registration are responsible for the collection of, and appropriate allocation of, user fees, in accordance with Council approved policy. **Most fees for facility bookings are due immediately**, such as indoor/outdoor ice, rooms/gyms in community centres, indoor/outdoor pools, social gatherings and weddings.

**The following are the only approved payment schedules:**

- **7 days after firm up** - This payment schedule is used for one-time bookings where a quote or contract is required by an organization to make a payment. This includes bookings such as rooms/gyms in community centres, indoor/outdoor

pools and social gatherings. This payment schedule cannot be used for individual clients.

- **30 days prior to first booking** - This payment schedule is for sports fields, garden allotments and seasonal bookings for indoor/outdoor pools, rooms/gyms in community centres, indoor/outdoor dry pads, indoor/outdoor ice rinks, stadiums and turf that are less than 16 weeks in duration and less than a total value of \$5,000.
- **14 days prior to first booking** – This payment schedule is used only for booking of special event permits (see definition above).
- **Last day of previous month** – This payment schedule is used for seasonal bookings for indoor/outdoor pools, rooms/gyms in community centres, indoor/outdoor dry pads, indoor/outdoor ice rinks, stadiums and turf that are booked for a minimum of 16 weeks and have a greater than or equal to a total value of \$5,000.
- **Approved charged billing group** – This payment schedule is used exclusively for the Toronto District School Board by Client Services and allows payment for use at the end of the month or season for use during the month. This payment schedule must be pre-approved by a Manager.

## Section 4 - Physical Distancing Requirements

### General

- Staff must make every effort to maintain at least 2 meters away from participants (i.e. bathers) and other staff. When a physical distance of 2 meters cannot be maintained, medical (i.e. surgical) mask must be worn by staff.
- Signage (i.e. Do you part, stay apart) will be posted at the entrance and around the pool area to remind participants that a physical distance of 2 meters must be maintained from other participants and staff.
- Visual markers will be placed on the floor (e.g. lines) that indicate appropriate 2 meter spacing distance for participants waiting in line.
- If possible, a system will be put in place that will allow participants to reserve a time slot to swim, to avoid crowds gathering or long wait times.
- Signs will be visibly posted to indicate the revised capacity of the pool area and changerooms/shower area.
- In accordance with Ontario Regulation 565 – Public Pools, participants will be required to shower prior to entering the pool. At locations with on-deck showers, participants will be encouraged to shower on deck rather than access the changeroom.
- Participants should be encouraged to shower at home after swimming.
- Access to diving boards, platforms, waterslides, spas, etc. will not be permitted. These high-contact aquatic features will be taped off to discourage participants from using them.
- Use other engineering controls such as plexiglass, tables or barriers where physical distancing is difficult to maintain, where possible.
- Staff and participants (i.e. bathers) are not to share items, including food, water bottles, equipment, toys, and supplies and encourage everyone to keep their distance as best as possible.

### Leisure Swims

- Outdoor pools will operate at a maximum of 25% of their normal capacity limit (i.e. bather load). For example, if the capacity of Pool A is 100 bathers, 25 bathers will be allowed into the pool area at one time. However, the pool capacity may decrease if those 25 bathers are non-swimmers and the shallow end of the pool will not allow physical distancing to be maintained.
- Participants will be allotted a 45-minute time interval to swim. After each 45-minute swim, staff will have 15 minutes to clean high touch surfaces prior to allowing the next group of swimmers into the pool area. If there is no line, staff do not need to clear the pool and any off-deck staff can clean high touch surfaces while the group of swimmers remains in the pool.
- Wristbands will need to be self-applied or applied by a parent/guardian.
- Equipment/toys are not to be distributed during leisure swims. Participants may bring their own Ministry Approved flotation devices to wear while using the pool.

### Lane Swim

- Outdoor pools will allow one (1) swimmer per lane.
- Participants will be allotted a 30-minute time interval to swim.
- Participants are permitted to bring their own personal equipment for use during lane swim. Sharing of equipment is not permitted.

- Participants are encourage to wipe down and clean their personal equipment upon returning home.

### **Permit Groups**

- Permit groups should adhere to the guidelines outlined by [Swimming Canada](#) and Swim Ontario.
- The group size will also be limited by the number of available lanes, how they are configured and the available deck space in order to maintain physical distancing.
- If a pool is set up with traditional single lanes, only one swimmer would be capable of swimming in each lane while maintaining physical distancing.
- If a pool is set up with double-lanes, it is possible for multiple swimmers to swim in each double-lane while maintaining physical distancing.

### **Facility Access**

The following measures are recommended prior to entering the facility:

- Where possible, there will be one entry point for facility access and a separate exit point.
- Staff will be assigned to supervise entry and exits.
- Participants should be encouraged to wear a non-medical mask until they enter the pool.
- Masks should not be worn in the water, placed on young children under age 2, anyone who has trouble breathing, or is otherwise unable to remove the mask without assistance.
- Where possible, participants should enter the pool area without going through the building or changerooms (i.e. emergency gate).
- The occupancy rate of changerooms will be reduced to allow for physical distancing. Occupancy limits will be posted on the changeroom door.
- Where possible, a procedure will be put in place to ensure one-way traffic flow around the pool and changeroom areas.
- The occupancy rate of the staff office will be reduced to allow for physical distancing. Occupancy limits will be posted on the door of the staff office.

### **Swimming Pools**

The following measures are recommended in the pool and pool deck area:

- Seating (e.g. chairs, benches, etc.) in the swimming pool will be removed or taped off.
- Small pools with limited space may need to be taken out of operation if there is insufficient space to guarantee physical distancing (e.g. mushroom, splash pad, wading pool).
- Only drop-off buoy lines should be used during leisure swim. No additional lane lines should be used.

### **Changerooms/Washrooms**

The following measures are recommended in the changeroom/washroom:

- There needs to be one washroom for male and female participants with a minimum of 2 stalls that allows for physical distancing of 2 meters distance between participants.
- Signs will be placed on the changeroom doors to indicate the maximum number of participants/staff that can access the changeroom at a time.



- In shower areas without individual shower stalls, showers immediately adjacent to each other showers will be temporarily decommissioned.
- Locker availability will be limited by blocking certain lockers from use.

### **Office Areas (Pool Office)**

Physical distancing should always be maintained by staff. Staff will set the example for the public who attend our swimming pools. As many of our pool office are very small, staff need to ensure that they are maintaining physical distancing while in this space.

The following measures are recommended in the office areas (pool office):

- Staff should bring minimal personal belongings with them to work.
- Staff should eat lunch separately and not in groups.
- Staff should wash their hands thoroughly before eating and after using common facilities.
- Staff should disinfect tables and counters after each use.

### **Safety Education and Rule Enforcement**

It is important to remember that not all participants will be initially accepting of the new protocols put in place. The following measures are recommended to assist staff in educating the public on the new protocols and enforcing pool rules safely:

- Staff should inform and educate participants on all new admission requirements prior to them entering the facility.
- Staff should inform and educate participants on the one-way traffic measures around the facility, if applicable.
- Staff should inform and educate participants on the measures put in place to avoid crowds gathering and to encourage physical distancing in waiting lines.
- Staff should inform and educate participants about not sharing personal equipment such as water bottles, towels, goggles, etc.
- Wherever possible, staff should maintain physical distancing while providing rule enforcement, accident prevention and information to other team members.

## Section 5 – Health Controls

### Personal Protective Equipment

- Each staff will be directed where to find cleaning supplies, masks, gloves, eye protection and any other PPE as a part of an On-site Orientation.
- If there is any change to PPE standards or where to find it in the building, staff will be informed immediately.
- Where possible, a staff will be designated as a first aid responder that will be equipped with more robust PPE equipment (e.g. face shield, medical mask and gloves) to prevent undue delays in responding to first aid or resuscitation requirements caused by donning appropriate PPE.
- When wearing gloves, avoid touching the face.

### Masks or Face Coverings in Indoor Spaces at Outdoor Pools

As per <http://app.toronto.ca/tmmis/viewAgendaItemHistory.do?item=2020.CC22.3>, to protect the health and safety of our communities, on July 2, 2020, Toronto City Council voted unanimously in favour of requiring masks or face coverings in all enclosed public places as of July 7, to help stop the spread of COVID-19.

Face coverings/masks are ONLY needed:

- When a Community Centres (CC) is open to the public and staff and/or swimmers access this space
- Staff or swimmers access the changeroom or washroom areas

Face coverings/masks are NOT needed:

- When swimmers access shower areas
- In the pool
- In staff-only spaces, if a 2 meter distance from other staff can be maintained
- In outdoor spaces

Information for staff:

- The purpose of having staff and participants wear a mask is to further mitigate any risk of virus transmission and to further protect everyone, as it may be difficult to physical distance at all times, especially indoors.
- Physical distancing of 2 meters must still be maintained even while using a mask or a face covering.
- The role of the employee is to educate the public and provide awareness regarding the use of masks.
- Staff will educate and encourage participants and facility users to wear a face covering/mask at all times while indoors in the spaces listed above.
- Should a participant present at the entrance without one, staff will encourage them to obtain one and return, unless there is a medical reason why they cannot wear a mask.
- If they refuse, the employee will not get in a confrontation with the individual.
- Staff will inform their direct supervisor if an individual becomes upset or if you find a large number of individuals are refusing to wear masks.
- Staff will contact direct supervisor or management staff if issues arise.

#### Exemptions:

- Children under the age of two. These very young children must not wear a face covering because of the risk of suffocation.
- Individuals with a medical condition that makes it difficult to wear a mask. This can include but is not limited to:
  - Medical condition, mental health condition, cognitive condition or disability that prevents wearing a mask or face covering.
  - Medical condition that makes it difficult to breathe or someone who is unconscious or incapacitated.
  - People who are hearing impaired, or are communicating with a person who is hearing impaired, and where the ability to see the mouth is essential for communication.
  - Individuals, who are unable to put on or remove a mask without assistance.

#### Medical Masks

Occupational Health and Safety recommends the use of medical (i.e. surgical) masks when physical distancing cannot be maintained. Medical masks must be replaced if the mask gets wet. Staff will be required to wear a medical mask in the following situations:

- While lifeguarding if physical distancing cannot be maintained (masks may not be required while lifeguarding from a stand)
- While resuscitating (i.e. performing CRP) a victim, a mask should not be worn while ventilating a victim
- Performing first aid
- At in-service training where physical distancing cannot be maintained

#### Gloves

Staff are not required to wear gloves while lifeguarding. Staff will be required to wear gloves (i.e. nitrile or vinyl) in the following situations:

- While performing first aid or resuscitation

#### Face Shields/Protective Eyewear

Staff will be required to wear a face shield in the following situations:

- While performing first aid and/or resuscitation
- In wet conditions while wearing a medical face mask

**NOTE:** Face shields must be assembled prior to use to avoid delays in a rescue situation, if applicable.

Staff will be required to wear protective eyewear (i.e. goggles) in the following situations:

- While performing first aid and/or ventilations on a victim during resuscitation

#### Pocket Mask with Viral Filter

Staff will be required to use a pocket mask with viral filter (e.g. HEPA) in the following situation:

- While ventilating a victim

**NOTE:** The HEPA filter inserts directly into the one-way valve on the pocket mask. When using a pocket mask, the head strap must be used and a continuous seal must be maintained, where possible (i.e. 2-person CPR). If a HEPA filter is not available, staff will perform compression-only CPR.

## Donning and Doffing of Personal Protective Equipment

Protective Equipment	Donning (Put on)	Doffing (take off)
Disposable Gloves (i.e. nitrile or vinyl)	<ol style="list-style-type: none"> <li>1. Don disposal gloves after hand washing or hand sanitizing as per procedures noted above</li> <li>2. Take the hand you write with and grasp the glove for your other hand at the folded edge of the cuff</li> <li>3. Pick up the glove by the folded edge</li> <li>4. Put your hand inside the glove</li> <li>5. Pull the glove on</li> <li>6. Be careful not to touch the outside of the glove</li> <li>7. Leave the cuff on the glove folded</li> </ol>	<ol style="list-style-type: none"> <li>1. Pinch and hold the outside of the glove near the wrist area</li> <li>2. Peel downwards, away from the wrist, turning the glove inside out</li> <li>3. Pull the glove away until it is removed from the hand and hold the inside-out glove with the gloved hand</li> <li>4. Used disposable gloves are to be disposed of in a designated centralized disposal bin within facility</li> <li>5. Complete hand washing</li> </ol>
Medical (i.e. Surgical) Mask	<ol style="list-style-type: none"> <li>1. Perform hand hygiene and don gloves</li> <li>2. Grasp used mask: Pinch procedure mask at the ear loops</li> <li>3. Place over face</li> <li>4. Secure ear loops behind the ears. Secure mask.</li> <li>5. Perform hand hygiene</li> </ol>	<ol style="list-style-type: none"> <li>1. Perform hand hygiene</li> <li>2. Remove mask: a. Remove medical mask by holding the ear loops. The front is contaminated, so remove slowly and carefully. Do not let loops touch your face</li> <li>3. After removing facemask, visually inspect for contamination, distortion in shape/form. If soiled, torn, or saturated the mask should be discarded.</li> <li>4. If the facemask is NOT visibly soiled, torn, or saturated, carefully fold so that the outer surface is held inward and against itself. The folded mask can be stored between uses in a clean sealable paper bag or breathable container.</li> <li>5. Perform hand hygiene</li> </ol>
Protective Eyewear (i.e. goggles)	<ol style="list-style-type: none"> <li>1. Perform hand hygiene</li> <li>2. Grasp goggles by elastic band only</li> <li>3. Place on face and fit to adjust.</li> </ol>	<ol style="list-style-type: none"> <li>1. Perform hand hygiene</li> <li>2. Grasp goggles by elastic band only</li> <li>3. Remove from face. Do not touch lens</li> </ol>

### **Procedure for Removing PPE**

1. Remove gloves and roll inside-out
2. Perform hand hygiene
3. Remove face protection, remove face shield or goggles (from behind the head)
4. Remove mask from behind the head
5. Perform hand hygiene

### **Personal Items**

Each staff must have their own water bottle and bottle of sunscreen labelled with their name to prevent accidental sharing or contamination.

Personal items and clothing brought in by staff members should be kept to a minimum. Where staff must bring items in, they should be stored separately, with adequate space between where each staff member's items are stored.

Staff should change clothes before and after their shift. Staff should remove uniforms and bathing suits at the end of their shift and place these items in a bag until cleaned. Uniforms should be laundered on a regular basis using laundry soap and hot water. Uniforms must be laundered immediately after a rescue, if visibly soiled or contaminated.

## **Section 6 – Cleaning and Disinfection Procedures**

### **Cleaning and Disinfection**

Part of the cleaning and disinfection guidelines is to understand the difference between the two in a cleaning environment.

#### **Cleaning refers to:**

- Cleaning physically removes dirt, soil or contaminants from toys, equipment or surfaces. Cleaning does not reduce the number of harmful microorganisms.

#### **Disinfection refers to:**

- Disinfection reduces the number of harmful microorganisms on toys, equipment or surfaces to safe levels as defined by Toronto Public Health.

Staff will be given the necessary PPE to wear when cleaning. The required PPE must be worn for each of the cleaning tasks listed below and proper hand hygiene must be followed.

### **Frequency and Cleaning Schedules**

High touch traffic areas will be cleaned and disinfected following each 45 minute leisure swim time interval. These areas include but are not limited to:

- Entrances (door handles, knobs)
- Interior doors and handles
- Elevator (doors and walls, call and indicator buttons, hand rails and mirrors)
- Stairs (handrails and bannisters)
- Changeroom/washrooms (sink faucets, toilet flusher)
- Pool Area (guard chair, stair railings, ladder railings, lifts, safety equipment, first aid kit)

In addition, to some of the basic high touch surfaces areas, there are also high touch personal areas that will need to be cleaned and disinfected before and after each shift and regularly throughout the day. These surfaces include but are not limited to:

- Desks, computer keyboards and mouse
- Phones (Buttons and receiver)
- Chair arms
- Cabinet and file drawer handles
- Office meal areas (faucets, taps, countertops and cupboard handle and surfaces, microwave, refrigerator)

Any non-essential items (i.e. magazines, newspapers, trinkets) should be removed the pool offices.

At locations with no facility (i.e. 416) staff, staff will conduct a deep clean of the facility on a daily basis. At the end of each night, staff will be required to do a thorough wash down with cleaner and disinfectant of the changerooms and common areas (i.e. hallways, entrances, stairs, etc.).

## Equipment

- All rescue equipment and/or reusable PPE used during the program need to be cleaned and disinfected at the end of each shift/day, during an exchange between lifeguards or when soiled or contaminated. Proper cleaning and disinfecting standards must be followed.
- Staff should avoid sharing equipment and supplies, where possible, or disinfect shared equipment before re-use, including lifeguard stands.
- A disinfectant spray will be used for disinfecting equipment and supplies. Depending on product availability, multiple products may be received. Staff should read the SDS sheet prior to use and determine the necessary PPE required.
- In addition, the contact time for each disinfectant is different. Staff should read the directions on the disinfectant spray prior to using.
- Before handling equipment, staff should practice proper hand hygiene.

## Lifeguard Chair/Stand

PPE Required: Refer to the SDS

Supplies Required: Disinfectant Spray

Frequency: Between lifeguard rotations, when used

Instructions:

1. Spray all surfaces of the lifeguard chair/stand (i.e. chair, railings, ladder) with disinfectant, ensure the surface remains wet for the time interval indicated on the label.
2. If necessary, wipe down any wet surfaces with paper towel.

## Rescue/Safety Equipment (i.e. rescue can, flutter boards)

PPE Required: Refer to the SDS

Supplies Required: Disinfectant Spray, tarp (if clean area is not available)

Frequency: Daily or between uses if shared

Instructions:

1. Rinse rescue/safety equipment with clean water to remove any visible dirt/debris.
2. Place the rescue/safety equipment on a clean tarp or in a clean area away from the pool and public. Spray one side of the equipment with disinfectant, ensure the surface remains wet for the time interval indicated on the label.
3. Turn the equipment over and repeat Step 2.

## Reusable Personal Protective Equipment (i.e. goggles, face shields)

PPE Required: Refer to the SDS

Supplies Required: Neutral detergent, Clean Cloth, Disinfectant Spray

Frequency: Between uses, if shared or when visibly dirty or contaminated

Instructions:

1. Wash hands with soap and water (if not in the vicinity then hand sanitizer).

2. Carefully wipe the inside, followed by the outside of the face shield or goggles using a clean cloth saturated with neutral detergent solution or cleaner wipe.
3. Carefully wipe the outside of the face shield or goggles using a wipe or clean cloth saturated with disinfectant solution. Please follow directions on contact time required as noted on the disinfectant label. If gloves are required for the disinfectant then ensure the procedure of donning and doffing is followed. SprayNGo disinfectant presently used does not require gloves.
4. Wipe the outside of face shield or goggles with clean water to remove residue. This will help to prevent fogging.
5. Fully dry (air dry or use clean absorbent towels).
6. Wash hands again with soap and water.

### **Food and Lunches**

- Staff must bring their own lunch to work, if it is forgotten, to avoid the risk of cross contamination, staff can have food delivered via a contactless delivery system or go to a drive thru food provider. Staff must always practice proper hand hygiene procedures upon returning to the facility.
- Staff must not congregate during lunch or break hours. In locations where the pool office does not allow for physical distancing to be maintained, an alternative area should be identified for staff to eat their lunch.
- Each staff should carry their own personal reusable water bottle that is clearly labelled with their name.

### **Safe Water Management**

Based on information from the United States Centres for Disease Control and Prevention, there is no evidence that COVID-19 can be spread to humans through water. Proper operation, maintenance, and disinfection (with chlorine) of pools should kill COVID-19.

To ensure the disease is killed in swimming pool water, staff will perform water testing every 2 hours as required by regulation or more frequently if required. To enhance disinfection levels, the Lifesaving Society's Guide to Reopening Pools and Waterfronts, recommends raising levels above minimum levels until the COVID-19 virus is no longer present in the community. This recommendation includes:

- Free available chlorine levels: 3.0-5.0 mg/l
- pH: 7.4 - 7.6
- Total alkalinity: 90 – 120 mg/l
- Calcium hardness: 200 - 400 ppm
- Cyanuric acid: 25 – 40 ppm, if applicable

However, if levels fall outside of this recommendation the pool should NOT be closed. If the pH falls within the range outlined in Regulation 565 – Public Pools, 7.2 – 7.8, this is acceptable. Please refer to the chart for chlorine levels.



LEVEL	STATUS	ACTION
< 1.5 ppm	CLOSED	Increase chlorine levels*
1.5 – 3 ppm	OPEN	N/A
3 – 5 ppm (Recommended)	OPEN	N/A
5 – 10 ppm (high)	OPEN	Correction required
>10 ppm (too high)	CLOSED	Return levels to ideal of <5**

\* may reopen pool when levels are above 1.5ppm with corrective measures continuing until ideal levels are met

\*\* may reopen pool when levels are below 10ppm with corrective measures continuing until ideal levels are met

## **Section 7 – Rescues and Emergency Care**

Information in this section was adopted from the Lifesaving Society Guide to Reopening Pools and Waterfronts

### **In-Water Rescues**

These guidelines should be used for any water-related incident, for example, spinals, DNS, seizures, submerged victims.

Rescuers should consider the use of a non-contact rescue where appropriate. If a non-contact rescue is not appropriate, the following steps must be followed:

1. Prior to entering the water, rescuers should remove their mask/face covering, if worn.
2. Approach the victim in a manner to avoid or limit face-to-face proximity.
3. Minimize the number of rescuers that have direct contact with victims.
4. Where multiple staff are required to assist with rescues (such as removing a victim) and physical distancing cannot be maintained, all staff should be wearing mask/face coverings and must ensure they are in water no deeper than chest level to keep their mask/face coverings dry.
5. Designate a staff member to take the lead during first aid and resuscitation, where possible. This allows in-water rescuers time to dry off and don PPE before they continue victim care.
6. After each rescue, all rescuers, victims and bystanders should practice hand hygiene, shower with soap (if possible), change their clothes, bag clothes worn during the rescue, and launder all used clothes.
7. Follow the disinfection protocols listed in this document for all rescues and equipment used by staff when providing care.

### **Resuscitation (CPR) for a Drowning Victim**

Rescuers should follow the current established protocols for responding to an unconscious, non-breathing drowning victim with the following expectations:

- In-water ventilations should not be performed.
- Mouth-to-mouth ventilations should not be performed.
- CPR with ventilations will be performed using a one-way valve mask (pocket mask) with viral filter (viral filters (i.e. HEPA filters should reduce the risk of contamination).
- The viral filter inserts directly into the one-way valve on the pocket mask.
- If a viral filter is not available, staff should perform compression-only CRP and place a cloth over the victim's mouth.
- The head strap on the pocket mask must be used and a continuous seal must be maintained, where possible (i.e. 2-person CPR).
- Staff ventilating the victim are required to wear protective eyewear (i.e. goggles) and gloves and remove their medical mask.
- Other staff assisting in the rescue are required to wear a medical mask, gloves and protective eyewear.

### **Resuscitation (CPR) for a Non-Drowning Victim**

- If the cause of the victim's cardiac arrest is not drowning, rescuers/staff can perform compression-only CRP for adults with early AED use where possible.
- If the victim is a child, rescuers/staff should use CRP with ventilations and should use the same precautions as for a drowning victim.

## Other First Aid Interventions

- Rescuers/staff should adhere to general precautions and wear the PPE outlined in this document.
- Rescuers/staff should practice good hand washing following all first aid interventions
- If victims can tolerate a mask, they should be encouraged to wear a mask

The following guidelines are COVID-19 adaptations of assessment and treatment actions to be performed in conjunction with specific interventions required by a victim's condition. In addition, these guidelines provide supplemental considerations for use throughout the process to assist in mitigating risk.

## Scene and Risk Assessment

- Ensure scene is safe.
- Minimize the number of rescuer contacts with victim, maintain physical distancing (2m), where possible.
- Don appropriate PPE (i.e. medical mask, protective eyewear and gloves).
- Manage/mitigate any hazards/risks (e.g. crowd control).
- Victim health history – COVID-19
  - Ask COVID-19 related screening questions, where possible.
  - It is important to pass on this information to EMS.
  - Information may be obtained from the victim, victim's caregiver, bystanders, etc.
- Mechanism of Injury.
- Request additional resources as required.
- Continuous and dynamic scene assessment,

## Primary Assessment

- Maintain physical distancing (2m), where possible
- Determine if the victim's condition requires the lifeguard to make direct contact with the victim.
  - Alternative options may include a victim's caregiver or family member administering first aid with lifeguard direction.
  - Don the required PPE as described in this document and where possible the victim should don their own personal face covering (if available).

## Secondary Assessment

- Maintain physical distancing (2m), where possible.
- Promote self-treatment or treatment by a family member.
- If self-treatment or treatment by a family member is not possible, only take vital signs that can be observed from a distance (i.e. skin colour, visual breathing check) or are required for victim treatment decisions.
- Victims who can walk to the ambulance or access point should be encouraged to do so to reduce the risk of COVID-19 transmission.

## Respiratory Hygiene Measures for Victims

- Encourage victims to wear their own personal face coverings, if available.
- Ensure that all victims cover their nose and mouth with a tissue or elbow when coughing or sneezing.

### **First Aid for Children and Minors**

- Wherever possible initiate first aid for children and minors by asking parents or caregivers to provide aid.

## **Section 8 – Procedures, Forms and Signage**

### **Procedures**

[Emergency Response Plan Policy](#)

[Exclusion of Sick Participants & Staff Procedures](#)

[Hand Hygiene Procedures](#)

[Health Screening Procedures](#)

[Sick Leave Policy](#)

[Toy and Equipment Cleaning Procedures](#)

### **Forms**

[Minor Injury/Incident Form](#)

[Staff Accident/Incident Forms](#)

### **Signage**

<http://insideto.toronto.ca/coronavirus/index.htm>