



New Jersey COVID-19 Pools and Aquatic Recreation Facility Standards

July 4, 2021

This document presents best practices for pools and aquatic recreation facilities that have opened their premises to the public.

The Centers for Disease Control and Prevention (CDC) has issued [guidance on operating and managing public pools and hot tubs during the COVID-19 pandemic](#). SARS-CoV-2, the virus that causes COVID-19, most commonly spreads from person to person by respiratory droplets during close physical contact (within 6' both in and out of the water) ([CDC, 2021](#)). The New Jersey Department of Health recommends that all pool facilities review the CDC guidance to assist with making decisions prior to opening.

Aquatic Recreation Facilities (ARF), as defined at N.J.A.C. 8:26-1.3, which includes water parks, must follow the requirements set forth in the Health and Safety Standards for High-Touch Amusement and Recreation Activities issued pursuant to Executive Order No. 181 in addition to these standards.

All pool facilities must comply with existing sanitation and safety regulatory requirements for recreational bathing facilities to preserve public health set forth in the New Jersey State Sanitary Code regulations. Facilities that are subject to the Public Recreational Bathing (PRB) rule, N.J.A.C. 8:26-1 et seq., must continue to abide by the requirements of those regulations, including but not limited to the creation of an Aquatics Facility Plan and the preoperational assessment checklist (N.J.A.C. 8:26-Appendix E). The LHA may utilize the [Appendix E-Checklist for Public Recreational Bathing Facilities](#) in lieu of an on-site inspection.

These facilities are now permitted to operate at full capacity, per Executive Orders No. 239 and 242, without regards to social distancing.

Executive Orders No. 241 and 242 also amended masking requirements. Individuals are no longer required to wear masks in these public settings, though unvaccinated individuals are strongly encouraged to do so.

COVID-19 Pool Operation Prevention Plan (CPOPP)

Facilities are encouraged to develop and implement a COVID-19 Pool Operation Prevent Plan (CPOPP) that complies with the protocols outlined in this document.

Facilities that were previously required to create a CPOPP are strongly encouraged to continue following the terms of the Plan to protect their staff and guests.

I. Staffing and Pool Facility Operations

Pool facilities should designate adequate staff for the roles outlined below:



- A. Train and equip the following personnel on COVID-19 awareness, routine cleaning and disinfecting to perform their assigned duties in a manner that promotes the safety of public and staff.
 - 1. Pool Director (where required by N.J.A.C. 8:26)
 - 2. Lifeguard (where required by N.J.A.C. 8:26; note that Special Exempt Facilities are not required to staff a lifeguard)
 - An active on duty guard shall perform only the role of lifeguard and may not simultaneously serve in any additional roles while performing as an active lifeguard. This does not prohibit a lifeguard, who is not active in the role of lifeguard, to perform other roles.
 - Lifeguards who are actively lifeguarding should not be expected to monitor social distancing, use of face masks, handwashing or similar duties.
- B. Additional Role Designation
 - 1. COVID Point of Contact - a role within the PRB facility which should be knowledgeable on COVID-19 response, communication, and awareness activities. The designee should serve as the point of contact for staff, patrons and the local health authority in contact tracing efforts. The role may be performed by existing employees, unless that employee is on active lifeguard duty, and/or residents or owners of the facility, as applicable.
 - 2. Document COVID awareness training and risk reduction strategies for any personnel
- C. Develop a police notification policy and reporting procedures in the event of non-compliance with any activities required by Executive Order.

II. **Masks/ Face Covering and Social Distancing Strategies**

A. **Mask/Face Covering**

Unvaccinated patrons and spectators should be encouraged to wear a masks/face coverings while on the pool deck and when social distancing of 6 feet

from non-household contacts cannot be maintained.

- 1. Masks/face coverings should **NOT** be worn while in the water and/or put on children under age two.
- 2. Lifeguards
 - Lifeguards performing lifesaving activities and actively monitoring bathers from the lifeguard stand are **NOT** encouraged to wear a masks/face covering.
 - Unvaccinated lifeguards transitioning from post to post and walking amongst patrons while on duty should be masked.



B. Social Distancing

Pool facilities should encourage unvaccinated individuals to continue social distancing. Additionally, pool facilities are encouraged to consider practices that support social distancing throughout the facility, including by:

1. Encouraging 6 feet social distancing among staff and patrons, away from non-household contacts, in and out of the water.
2. Where applicable, cordoning off the area around the lifeguard stand to allow for social distancing between the unmasked lifeguard (LG) and patrons below the elevated LG chair.
3. Stagger the use of shared spaces such as restrooms, showers locker rooms, breakrooms etc.
4. Control crowd flow using visible markings, postings or signage; and
5. Demarcating and post signs that denote 6 feet of spacing in all commonly used and other applicable areas or where people may form a line.

III. Admittance and Access to the Facility

- A.** Create a communication system for self-reporting of symptoms and notification of exposures and closures. [Executive Order 192 Protect New Jersey's Workforce](#) should be followed.
- B.** Require staff and patrons who are sick or have recently had a close contact with a person with COVID-19 to stay home.
- C.** Consider taking the following actions:
 1. If possible, assign separate entry and exit points to encourage everyone to move in one direction and avoid crowds.
 2. Post [signs](#), in highly visible locations (such as at entrances and restrooms), to promote steps that prevent the spread of the virus such as staying home when ill, masking and social distancing.
 3. Offer touchless payment methods where possible to limit physical interactions.
 4. Use of reservation, sign in, advanced ticket sales and/or cancellation apps/systems where possible (e.g., advance purchase online or by phone, or no-sign credit card payment) to manage and monitor patron attendance and flow throughout the day.
- D.** In the event of illness staff and/or patrons shall cooperate with the LHD contact tracing personnel during a public health investigation of COVID-19.

IV. Infection Control Strategies

All pool facilities are encouraged to implement the following prevention and mitigation strategies to slow and limit COVID-19 exposure and spread:

- A.** Designate COVID-19 Emergency Care Space/Area



1. Facilities should identify and designate an COVID-19 emergency care area/space for the care of those who become ill while on-site.
 2. Document emergency care space cleaning procedures and consider using disinfectants from [EPA's List N: Disinfectants for Use Against SARS-CoV-2\(COVID-19\)](#). Consult with the manufacturers to decide which EPA- approved disinfectants are best for shared objects and surfaces within the aquatic environment.
 3. Establish procedures for safely isolating and transporting anyone showing signs and symptoms of COVID-19 consistent with CDC guidance.
- B. Develop and implement cleaning and disinfection procedures for surfaces to be cleaned at least daily.
1. The facility should consider using [EPA's List N: Disinfectants for Use Against SARS-CoV-2\(COVID-19\)](#) of approved cleaners and should consider discussing with a pool professional the use of such chemicals.
 2. Provide sanitizer stations throughout the pool facility.
 - Ensure a sufficient quantity of cleaning supplies (Ex: soap and water, hand drying device (paper towels or air dryer) hand sanitizer at least 60% alcohol, surface disinfectant) are available.
- C. Discourage staff and patrons from sharing items that are meant to come in contact with the face (e.g.goggles, snorkels, nose clips)
- D. Indoor Pool and all Aquatic Recreation Facilities should evaluate their ventilation systems and improve, wherenecessary, ventilation by increasing circulation of outdoor air as much as possible. Consider using high efficiency particulate air (HEPA) filtration systems to enhance air quality. (see Indoor Ventilation section below)

V. Indoor Ventilation

Facilities should consider implementing the following practices to improve indoor ventilation:

- A. Conduct routine maintenance as recommended by the manufacturer or HVAC professional.
- B. Within the design specification of the HVAC unit:
 1. Increase the volume of outdoor air to the maximum capacity while the facility is occupied.
 2. Reduce the volume of recirculated air being returned to the indoor spaces
 3. Increase the volume of air being delivered to the indoor spaces to the maximum capacity
 4. Select maximum filtration levels for the HVAC unit.
 5. Run the HVAC unit continuously while the facility is occupied.
 6. Run the HVAC unit for at least two hours before and two hours after the facility is occupied.
- C. Consider installing portable air cleaners in enclosed spaces equipped with



a high efficiency particulate air (HEPA) filter to increase the amount of clean air within the facility.

- D. Keep doors and windows open where possible and utilize fans to improve ventilation.

VI. Restrooms, Shower and Changing Rooms

- A. Consider installing barriers/partitions in communal showers.
- B. Encourage patrons and staff to come dressed to swim.
- C. Ensure restroom exhaust fans are functional and operating at full capacity when the building is occupied.
- D. Consider staggering the use of shared spaces such as restrooms, showers and locker rooms. The number of patrons inside these spaces is encouraged to be monitored to ensure separation within the enclosed space.

VII. Communication Plan

Pool facilities should develop and implement an outreach plan as part of their CPOP that includes, but is not limited to, at minimum:

- A. Educating staff about when they should stay home (if exposed to COVID-19) or isolate (if ill or infected with the virus that causes COVID-19) and when they can return to the venue.
- B. Methods to ensure staff and patrons are aware of expectations for behavior at the pool facility and communicating to the pool facility if they become ill.
- C. Pool facilities are strongly encouraged post signage indicating that face coverings should **NOT** be worn in the water (increases the risk of drowning). Facilities are encouraged to post signage regarding infection control best practices, including that:
 1. Hands should be washed frequently with soap and water.
 2. Hand sanitizer that is at least 60% alcohol should be used if soap and water are not available.
 3. Individuals must stay home if they are sick.

VIII. Aquatic Recreational Facilities (ARF)

- A. It is recommended that Aquatic Recreation Facilities (ARF) including waterparks, water play equipment, and playgrounds at pool facilities also follow the protocols outlined in the current version of the High Touch [Amusement guidance](#).
 1. Aquatic Recreation Facilities (ARF) should designate staff adequate in number and trained as referenced above at I.A Training Staff to achieve the intent outlined within the COVID Standards
 2. A roster of patrons must be documented. Records may be electronic and are required to facilitate contact tracing.



IX. EMPLOYEES

It is recommended that ARF follow the health and safety protocols outlined below, to protect their employees, customers, and other visitors at the worksite:

1. Provide sanitization materials, such as hand sanitizer that contains at least 60% alcohol and sanitizing wipes that are approved by the United States Environmental Protection Agency for SARS-CoV-2 virus to employees, customers, and visitors at no cost to those individuals;
2. Ensure that employees practice regular hand hygiene, particularly when such employees are interacting with the public, and provide employees break time for repeated handwashing throughout the workday and access to adequate hand washing facilities. Employers may adopt policies that require employees to wear gloves in addition to regular hand hygiene. Where an employer requires its employees to wear gloves while at the worksite, the employer must provide such gloves to employees;
3. Routinely clean and disinfect all high-touch areas in accordance with DOH and CDC guidelines, particularly in spaces that are accessible to employees, customers, or other individuals, including, but not limited to, restrooms, hand rails, door knobs, other common surfaces, safety equipment, and other frequently touched surfaces including employee used equipment, and ensure cleaning procedures following a known or potential exposure are in compliance with CDC recommendations;
4. Prior to each shift, conduct daily health checks of employees, such as temperature screenings, visual symptom checking, self- assessment checklists, and/or health questionnaires, consistent with CDC guidance, including latest CDC guidance regarding COVID-19 symptoms, consistent with the confidentiality requirements of the ADA, NJLAD and any other applicable laws, and consistent with any guidance from the Equal Employment Opportunity Commission (“EEOC”) and the New Jersey Division on Civil Rights;
5. Immediately separate and send home employees who appear to have symptoms, as defined by the CDC, consistent with COVID-19 illness upon arrival at work or who become sick during the day. Employers subject to the New Jersey Earned Sick Leave Law, New Jersey Family Leave Act, N.J.S.A. 34:11D-12 and/or federal leave laws must continue to follow the requirements of the law, including by allowing individuals to use accrued leave in the manner permitted by law and employer policy, when requiring employees to leave the workplace in accordance with the provisions of this subparagraph;
6. Promptly notify all employees of any known exposure to COVID-19 at the worksite, consistent with the confidentiality requirements of the ADA and any other applicable



laws, and consistent with guidance from the EEOC;

7. Clean and disinfect the worksite in accordance with CDC guidelines when an employee at the site has been diagnosed with COVID-19 illness; and
8. Continue to follow guidelines and directives issued by the New Jersey DOH, the CDC and the Occupational Safety and Health Administration, as applicable, for maintaining a clean, safe and healthy work environment.