Swimming Pools and Hot Tubs

In accordance with information provided by the Department of Public Health (DPH), any (non-public) swimming or wading pool serving a child care facility is considered a semi-public pool, and therefore must be licensed by the local board of health, in accordance with DPH regulations, 102 CMR 435.000: Minimum Sanitation for Swimming Pools (State Sanitary Code Chapter V). DPH regulations address the construction of the pool (materials, dimensions, slopes, markings), filtration systems, walkways, bath or changing facilities, ladders and steps, water sources, pool supervision, safety equipment, fencing, postings, restrictions regarding use of the pool, etc. The license or permit will indicate the method of water treatment, the number of trained lifeguards required, if any, and the maximum number of people allowed in the water at any time. The permit must be posted in a conspicuous location near the swimming or wading pool. Permits are valid for a maximum of one year.

Hot tubs may not be used by children and must be made inaccessible to children at all times. The use of new and innovative equipment not described in DPH regulations, including semi-permanent inflatable pools with filtration systems, is prohibited unless licensed or approved in writing by DPH.

Safety and Accessibility.

The steps necessary to make swimming and wading pools and hot tubs inaccessible to children depend on the type and location of the equipment and the ages of the children in care. In all cases, programs must comply with local codes and laws regarding fencing and accessibility.

Infection Control

No child suffering from a fever, cough, cold symptoms or any communicable disease, including skin rashes, should be allowed to use the swimming or wading pool. No person wearing a bandage or medical covering of any kind should be allowed to use the swimming or wading pool. Further, children who are not toilet trained should wear “swim diapers” specifically designed to prevent contamination of the pool.

Other Swimming Areas

Programs using ponds, lakes and ocean beaches for swimming activities must ensure that the area is safe, sanitary and free from hazards before children participate in these activities. Children should never be allowed to swim or play in water where public access
has been prohibited by the Department of Public Health, a local Board of Health, or any other public
authority because of unsafe or unsanitary conditions. In choosing a swimming area, providers
should consider the following: whether or not there will be a life guard on duty; whether a defined
swimming area has been marked for children’s use; whether the beach or shore area is properly and
regularly maintained; the depth of the water and the force of the tide or undertow, if any; and how
crowded the area will be with other visitors.

**Supervision**

Staff must be especially vigilant when supervising children during swimming activities. It is
important to remember that a child can drown in as little as a few inches of water.
While the potential for drowning in young children may be obvious, older children – even those who
are capable swimmers – may be tempted to exceed their own abilities, and may succumb to fatigue,
cramps, unexpected waves, or other hazards. Programs should develop a supervision plan for use at
the lake or beach that places some staff in the water and some staff on shore, and should require
children to stay between staff and shore while swimming. At least one staff accompanying children
off-site must be currently certified in first aid and CPR. In addition, staff should bring a cellular
telephone or another means of communicating with emergency personnel while off-site if the need
arises. Children must never be left unattended around water hazards – not even for a minute. Appropriate supervision and safety systems can help to keep children safe.

In addition to having sufficient numbers of attentive staff to provide supervision, there are other
measures that can be taken to help minimize the risks to children during swimming activities. Unless
older children have been tested to determine their swimming ability, they should be assumed to be
incapable of self-preservation in the water. A buddy system should be in place among school age
children so that they help to watch out for one another. Frequent, formal head-counts should be
taken to ensure that all children are safe and accounted for. If a child appears to be missing, all
children should be removed from the water and taken to a “safe area” while the water is checked for
the missing child. In preventing permanent brain damage and/or death from drowning, every second
counts.
Check the water first, then search the surrounding area for the missing child.

Proper supervision is also necessary while children are using bath houses, changing rooms and rest
rooms, and while they are moving from transportation vehicles to the activity area or from one area
to another (from beach to bath house or rest room, for example).
Programs must have sufficient staff available to ensure that children are not left unsupervised in any
public space during a program activity. All providers should have a supervision plan in place for
these types of field trips.

**Other Water Hazards**

Providers must ensure that their child care environments are free of any water hazards that may pose
a risk to children. Large buckets used for cleaning or other purposes become drowning hazards if
they are left containing water and accessible to small children. Any outdoor equipment that can hold
rain water or water from a lawn sprinkler can present a drowning hazard to a child who climbs or
falls into it. Proper supervision and frequent inspection of the indoor and outdoor premises will help
keep children safe and ensure that activities are fun for all.