

2021 BCRD Aquatic Center COVID-19 Specific Protocols

Pursue the Active Life

www.bcrd.org (208) 578-2273

BCRD's 2021 Aquatic Center COVID-19 Specific Protocols have been developed to comply with federal, state, and local guidelines and utilizing guidance from Idaho's South-Central Health District, Ellis and Associates, Center of Disease Control, and the City of Hailey. The BCRD Aquatic programs will operate under these specific safety protocols utilizing Blaine County's COVID-19 Risk Assessment Scale as the metric to inform our operational decisions. The Risk Assessment Scale, which ranges from green (minimal risk) to red (critical risk), considers factors like the number of cases per 100,000, local outbreaks, testing positivity rate, and hospital capacity.

1. Personal behavior to reduce spread

I. Face coverings

Aquatic Center guests will be required to wear face masks any time they are inside the bathhouse and cannot maintain 6 feet of distance from another guest or staff member unless they are exempt for medical reasons.

II. Self-health screening

- All guests will be asked to be on the alert for signs of illness in their children and/or themselves to stay home when sick.
- Guests should inform staff if they don't feel well and then go home immediately.
- Guest entering the facility are required to use the self-screening questionnaire prior to entering. Guests will confirm that they **do not have/has not had** a fever (100.4⁰ or above), shortness of breath, cough, chills, headache, repeated shaking with chills, new loss of taste or smell, sore throat, gastrointestinal issues or muscle pain for at least 72 hours OR come in contact in the last 14 days with anyone who has tested positive for COVID-19.

III. Hand hygiene

- Hand hygiene supplies (hand sanitizer with at least 60% alcohol) will be provided throughout the Aquatic Center.

2. Maintain a healthy environment

I. Cleaning & disinfecting equipment

- All cleaning products supplied for use in BCRD programs are EPA-approved for use against the virus that causes COVID-19 and will be used according to the directions on the label.

- All supplies will be sprayed with disinfectant provided by the BCRD at the end of each use.
- Minimize shared equipment
- No water fountains will be available at the facility. Guests will be required to bring their own clean, labeled water bottle each day.

3. Maintain a healthy operation

- Each guest will enter the Aquatic Center in their swim attire and ready to swim.
- Only the outside showers will be available for use to rinse before entering a pool. Guests may use bathhouse showers briefly before exiting the facility.
- Locker rooms will be open for restroom use and for quickly changing if needed before exiting facility.
- Locker use will be available for the season.
- All guests will be required to wear a mask while indoors and when they are not able to maintain 6ft of distance between other guests or staff.
- Guests and staff may remove face coverings if they are in the water or outside.

4. Response plan for managing COVID-19 case(s) in our program

- In the event we are notified of a positive or probable case or direct contact with a positive or probable case in our program, the BCRD will follow its COVID-19 Response Plan (CRP) which calls for collaboration with Idaho's South Central Health District to assist in contact tracing (while maintaining mandated confidentiality) and to develop the most appropriate closure or suspension period and scope.
- All guests and staff will self-screen daily for COVID-19 symptoms following CDC guidance. If a guest or staff member demonstrates COVID-19 related symptoms prior to entering the facility, that individual should stay home and not participate until they have been 72 hours symptom free without the aid of medication.
- In the event of direct exposure to a positive or probable case in a BCRD program, the BCRD will initiate a communication plan to parents outlining any associated decisions relative to closures of the facility or suspension of services.
- In the event of closure due to COVID-19 related illness, the registration fee will not be refunded.

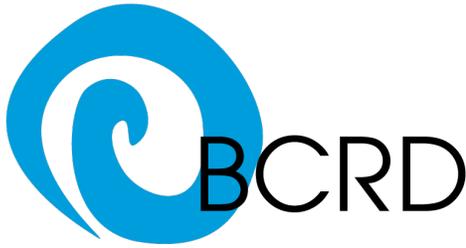
Mark Davidson, Executive Director, or Dominic Finazzo, Aquatics Manager, will be the designated staff persons responsible for responding to COVID-19 concerns. Guests are encouraged to reach out to staff with concerns regarding COVID-19.

1. Mark Davidson, mdavidson@bcrd.org; (208) 578-5451 (office); (208) 720-2475 (cell)
2. Dominic Finazzo, dfinazzo@bcrd.org; (208)578-5459 (office); 425-757-6047 (cell)

Supporting Documents

Sources and References for Plan Development

1. Idaho Rebounds Plan Stage 4
2. City of Hailey Public Health Emergency Order NO. 2021-03
3. E&A Lifeguard Guidance During COVID-19
4. CDC Guidance for Public Pools, Hot Tubs and Water Playgrounds



2021 BCRD Aquatic Center Additional COVID-19 Specific Protocols

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As a guest, parent and/or guardian of guests participating in BCRD 2021 Aquatic programming, I agree to abide by and follow these additional BCRD COVID-19 specific protocols as outlined below to help decrease the spread of virus transmission including the following:

- I will be alert for signs of illness and I will keep them home when they are sick.
- Prior to attending aquatic programming, I will screen myself and/or child using the following questionnaire. If I

answer **YES** to any of the following questions, I will stay home from Aquatic Center until I can answer **NO** to all of the questions.

- I will notify the BCRD if there is reason to believe I and/ or my child may have been exposed to a positive or probable case of COVID-19.
- I will provide a clean face covering for myself and/ or child for all programming at the Aquatic Center.
- If I am attending the BCRD Aquatic Center and not in a pool, I will try to maintain a 6-foot distance from others who are not in my household. When I cannot maintain a 6-foot distance, I will wear a face covering.
- I will provide a clean and filled water bottle (minimum of 12 ounces) each day for myself and/or child.
- I will try to have the same parent or designated person doing drop-off and pick-up for my child every day.

1. Now, or in the past 24 hours, have you and/or your child experienced either of these symptoms:

Yes

Shortness of breath or difficulty breathing

Yes

Fever (100.4° F+)

2. Or two or more of the following symptoms:

Yes

Cough

Yes

Chills

Yes

Muscle pain

Yes

Sore throat

Yes

**New loss
of taste or
smell**

Yes

**Gastrointestinal
issues
(diarrhea,
nausea, etc.)**

Yes

Headache

3. In the last 14 days, have you and/or your child been in contact with anyone who is confirmed COVID-19 positive?

Yes

Yes