



ADDENDUM: POOL USAGE AND ASSESSMENT

Club GA Therapeutic Pool Policy and Usage Agreement

This document serves as the pool policy for Club GA - Guardian Angels Wellness Center, Riverview Landing, Otsego, MN. The information contained herein serves as the governance for pool usage, and must be followed by all members and guests at all times. The purpose of this policy is to address health and safety considerations for members and their guests. Each member should take "ownership" of the pool and see that restrictions and rules are to be followed at all times. The pool is here for the enjoyment of all Club GA members.

General Pool Information

Our warm water therapeutic pool is available to enhance the well-being and enjoyment for all individuals using the pool during wellness hours. **We do not have a lifeguard on duty.**

Pool Specifications:

- 88 to 92 Degree Water Temperature and Air Temperature controlled for comfort
- 3'6" to 4'6" pool depth
- Spectrum chair lift available
- Propulsion jets available
- Cushioned, slip resistant pool floor
- Private changing and shower rooms
- *Suitmate* swimsuit water extractor

Pool Rules and Guidelines:

- All participants must check-in at the Member Services desk.
- Pool assessment and Release of Liability is required for pool usage.
- Guests must be at least 18 years of age to use the pool unless otherwise indicated for special events and must be approved for pool use by Wellness Staff.
- We enforce the "buddy system" and do not allow individuals to use the pool alone.
- Street shoes are permitted in the entry area to the pool. Please change your shoes near the bench by the pool door.
- There are lockers available to use while in the pool area.
- Emergency procedures will be reviewed during every new member orientation.
- The pool deck is equipped with a red "HELP" button and emergency phone. There are emergency pull cords in each changing room and bathroom. These should be used for emergencies only.
- A maximum of 1 hour in the pool is recommended due to the heat and humidity.
- Please bring your own towel.
- Glass of any kind is prohibited in the pool area and changing rooms.
- Food and drinks are not permitted in the pool area, with the exception of a plastic or steel bottle filled with water.
- In severe weather, exit the pool immediately and take shelter.
- During water fitness classes, class participants have priority in the pool.

_____ Initial for understanding

Pool Sanitation – Please Initial for Understanding

- _____ Showering: Individuals must take a cleansing shower to remove lotions, perfumes and hair products prior to entering the pool. A person leaving the pool to use the toilet must take a second cleansing shower before returning to the pool.

- _____ Bowel Incontinence: Pool users must be continent of bowel at all times to avoid health risks for other individuals. Any person who has been ill or is experiencing bowel upset/diarrhea is not permitted in the pool until one week has passed with no symptoms of illness or occurrences.

- _____ Special Reusable Containment Briefs are allowed on a case-by-case basis for urinary incontinence. We carry a limited number of our approved brand on hand, *SOSecure Containment Brief*, and can provide users with the ordering information. This will be a confidential discussion with the Wellness Staff during the assessment.

- _____ Individuals with open skin lesions or communicable disease aren't permitted in the pool.

- _____ Please notify staff of significant health changes or need for reassessment.

- _____ Any unsanitary condition in the pool may require immediate, temporary closure. Please exit the pool and notify staff at once.

- _____ Water shoes or aquatic "socks" are allowed to and from the changing rooms to the pool. All areas surrounding the pool could be slippery when wet. Pool shoes should not be used outside of the pool area or to walk to/from apartments.



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Pool Skills Assessment – (to be completed by Wellness Staff)

All individuals must meet and demonstrate the following independent swimmer criteria to be granted access to the pool area. **We do not have a lifeguard on duty.**

Name: _____ Birth Date: _____

- _____ Enter and Exit the Pool Independently via stairs or lift (Self-Efficacy)
- _____ Walk or swim two lengths of the pool without stopping (Physical Endurance)
- _____ Move a submerged floatation device through the water for one pool length (Strength)
- _____ Locate and demonstrate how to initiate the use of the red help button, emergency phone or pull cord (Cognitive Ability)
- _____ Locate and demonstrate how to use pool safety devices (ring or hook) (Environmental Awareness)
- _____ Does not present physical or cognitive limitations that prevent following safe practices.

Pool Use Determination by Wellness Staff

- _____ **Approved:** Participant successfully completed all assessment skills above, and meets all criteria for independent pool usage.
- _____ **Not Yet Approved:** Participant did not demonstrate all required skills and does not meet the criteria for independent pool usage at this time. May reassess in 60 days.
- _____ **Conditionally Approved:** Participant is unable to meet all criteria above without assistance, but demonstrates ability to meet all criteria with the assistance of _____ (*Responsible Party).

**Responsible Party must sign Club GA Liability Waiver.*

Wellness Staff Signature _____ Date _____