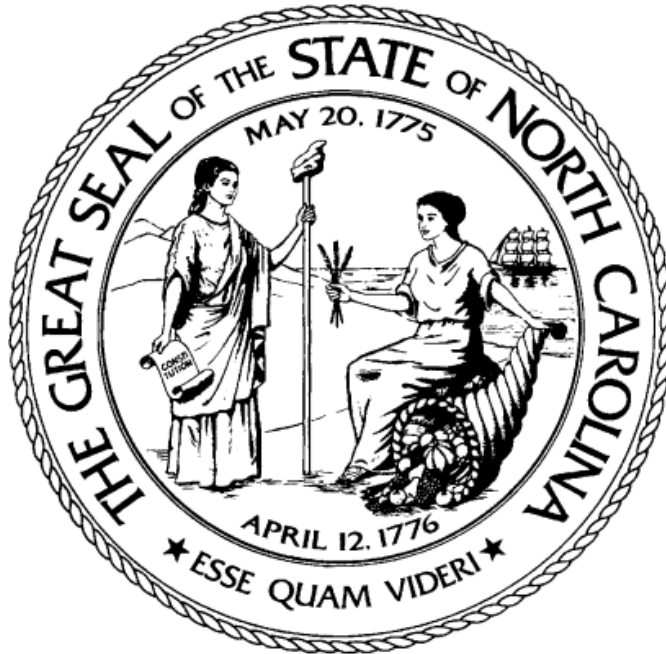


Report on Phone Study for Public Pool Phones

Session Law 2019-88, Section 3



Report to

**The Joint Legislative Oversight Committee on Health and
Human Services**

by

NC Department of Health and Human Services

on Behalf of the Commission for Public Health

February 28, 2020

LEGISLATIVE REPORTING REQUIREMENT

Session Law (S.L.) 2019-88, Section 3, directs the Commission for Public Health (Commission) to study the requirements of 15A NCAC 18A .2530(f), which requires: (1) All swimming pools must have a telephone capable of directly dialing 911 or other emergency notification system, and (2) the telephone must be permanently affixed to a location inside or within 75 feet of the pool enclosure and be accessible to all pool users (**Part 1 of the report**).

S.L. 2019-88 also requires the Commission to examine the need for a dedicated permanently affixed telephone in light of widespread cellular telephone availability, and, at a minimum, to examine the need for and advisability of requiring closure of pools where a dedicated permanently affixed telephone is temporarily out of service due to technical issues (**Part 2 of the report**).

The Commission shall submit a report of the study's findings and recommendations to the Joint Legislative Oversight Committee on Health and Human Services no later than March 1, 2020.

This report is submitted by the Department of Health and Human Services' (DHHS) Division of Public Health (DPH) on behalf of the Commission for Public Health.

PART 1: The Commission for Public Health shall study the requirements of 15A NCAC 18A .2530(f), which requires that all swimming pools have a telephone capable of directly dialing 911 or other emergency notification system, which telephone is permanently affixed to a location inside or within 75 feet of the pool enclosure and is accessible to all pool users.

BACKGROUND AND DISCUSSION

15A NCAC 18A .2530(f) currently reads as follows:

A telephone capable of directly dialing 911 or other emergency notification system shall be provided and accessible to all pool users. Effective April 1, 2005 the telephone shall be permanently affixed to a location inside the pool enclosure or outside the enclosure within 75 feet of a bather entrance. The telephone shall be visible from within the pool enclosure or a sign shall be posted indicating the location of the emergency telephone. A sign with legible letters shall be posted at the telephone providing dialing instructions, address of the pool location and the telephone number. Where the telephone does not directly access 911, the emergency notification system shall:

- (1) Provide 24-hour monitoring of all incoming calls by a telecommunicator who answers only emergency calls;*
- (2) Be capable of routing calls to the local 911 telecommunicator via the 911 dedicated emergency trunk line; and*
- (3) Electronically transfer Automatic Number Identification and Automatic Locator Identification for the emergency telephone at the pool to the Enhanced 911 system for all calls routed to 911.*

Emergencies at aquatic venues can be severe and time-sensitive and may include in drowning, electrocution, or head injuries from slips and falls on concrete decks. The amount of time which

elapses between injury and emergency medical treatment has a direct bearing on the survival and recovery of the victim.

The Model Aquatic Health Code (MAHC) is a national guidance document based on science and is considered the best practice reference document for aquatic venues. Section 4.8.5.2.1 of the MAHC (3rd Edition, July 2018) addresses *Emergency Communication Equipment* and states:

The AQUATIC FACILITY or each AQUATIC VENUE, as necessary, shall have a functional telephone or other communication device that is hard wired and capable of directly dialing 911 or function as the emergency notification system.

Further, the 2018 Annex to the MAHC states:

Having a reliable phone during an emergency is important. Frequently cellular telephones, cordless telephones, and other self-powered devices are not ready for use. Having a hard-wired telephone provides that reliability.

Other North Carolina rule-making bodies, such as the Child Care Commission, have addressed the need for emergency notification systems. For example, the DHHS Division of Child Development and Early Education requires childcare operators to have a plan which provides the location of a telephone on the premises, and the phone must be available for use in case of emergency. A phone located in an office or an area which is locked when children are present cannot be designated for use in an emergency. Additionally, when children are transported, staff in each vehicle must have a functioning cellular telephone or other two-way voice communication device in case of emergency.

Most other states require a phone for emergencies at public pools. In the United States, 48 states and Washington, D.C. regulate public pools. Because of specific rule language, it is difficult to determine exactly what would be approved in each jurisdiction. Based on the current language of the rules 42 jurisdictions require phones specifically, and one requires a method to contact Emergency Medical Services. Seven states (including North Carolina) require permanently attached or hard-wired phones and Ohio requires the phone to be permanently attached to a power supply. Further, of the South Atlantic states (Delaware, Florida, Georgia, Maryland, North Carolina, South Carolina, Virginia and West Virginia), seven require a phone at public pools, two jurisdictions specify hardwired and five do not specify the type of phone.

RECOMMENDATION

To protect public health and provide for an adequate and reliable means of emergency response, the Commission for Public Health recommends maintaining the current rule “as is”, which requires a permanently attached telephone or emergency notification system. However, the Commission plans to review 15A NCAC 18A .2511 and update the rule to be more consistent with current technology. In that update, the Commission will consider communication device options available to pool owners, especially since new subdivisions are typically not installing conventional phone lines.

The Commission for Public Health has existing statutory authority to make amendments to 15A NCAC 18A .2511 as described above.

PART 2: The Commission shall examine the need for a dedicated permanently affixed telephone in light of widespread cellular telephone availability, and, at a minimum, the Commission shall examine the need for and advisability of requiring closure of pools where a dedicated permanently affixed telephone is temporarily out of service due to technical issues.

BACKGROUND AND DISCUSSION

The North Carolina *Rules Governing Public Swimming Pools* consider a phone an important safety item and one which warrants permit denial or immediate suspension of a valid permit in accordance with North Carolina General Statute (G.S.) 130A-23(d), which states, in part, that:

An operation permit issued pursuant to G.S. 130A-281 shall be immediately suspended for failure of a public swimming pool to maintain minimum water quality or safety standards or design and construction standards pertaining to the abatement of suction hazards which result in an unsafe condition.

Although not addressing closure of a pool, Section 4.8.5.2.1.1 of the MAHC considers the phone as safety equipment and requires it to be conspicuous and accessible:

The telephone or communication system or device shall be conspicuously provided and accessible to AQUATIC VENUE users such that it can be reached immediately.

RECOMMENDATION

To protect public health and maintain minimum safety standards, the Commission for Public Health recommends closure of pools where a dedicated permanently affixed telephone is temporarily out of service due to technical issues. However, the Commission plans to review 15A NCAC 18A .2511 and update the rule to be more consistent with current technology. In that update, the Commission plans to review the feasibility of allowing a temporary emergency phone plan which may include an employee or other adult with a cellular phone and charging method on site.

The Commission for Public Health has existing statutory authority to make amendments to 15A NCAC 18A .2511 as described above.