

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

Review of Comments on February 2017 Draft of COMAR 10.17.01

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Electrical & Bonding

Comment ID: 2017-051

Comment ID: 2017-077

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Center for Healthy Homes and Community Services**

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Comment ID: 2017-001

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Comment

.04 Documents Incorporated by Reference

Model Aquatic Health Code

We object to the inclusion of MAHC, as amended, with exceptions

Comment Submitted By

Susan L. Jones, Executive Director, Hotel-Motel-Restaurant Association of Ocean City, Maryland

John Jarvis, Atlantic Aquatech

Melanie Pursel, Executive Director, Greater Ocean City, MD Chamber of Commerce

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

Review of Comments on February 2017 Draft of COMAR 10.17.01

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Comment

.04 Definitions

(5) “Aquatic Venue Category”, both (a) and (b)

Very Strong Objection. This appears to be a creation of a new means to identify and subsequently regulate all pools strictly on the time of their construction. Throughout this document, this is referenced and note our objection to each and every mention of it. There are legal questions of different standards for pools when addressing risk, liability and insurance. On the practical side, it would seem to be a huge task for anyone attempting to monitor these facilities, including the Health Department.

Comment Submitted By

Susan L. Jones, Executive Director, Hotel-Motel-Restaurant Association of Ocean City, Maryland

John Jarvis, Atlantic Aquatech

Melanie Pursel, Executive Director, Greater Ocean City, MD Chamber of Commerce

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

Review of Comments on February 2017 Draft of COMAR 10.17.01

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Comment

.04 Definitions

(12) “Critical Violations”

(a) Object to Category

(b) Object to Category

Given that these items listed as critical violations require immediate closure, we would ask for the justification of each item as “critical” and a full description of the risk involved and precisely how that risk involves safety.

Comment Submitted By

Susan L. Jones, Executive Director, Hotel-Motel-Restaurant Association of Ocean City, Maryland

John Jarvis, Atlantic Aquatech

Melanie Pursel, Executive Director, Greater Ocean City, MD Chamber of Commerce

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

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Comment

.04 Definitions

(23) “Major Violations”

(a) Object to Category

(b) Object to Category

Same objection as listed above in critical violations, except for 24 hour time frame to correct violation. This would seem to be the place to consider precisely what the objective of the Health Department is regarding closures. Specifically, what is the Health Department’s duty here, practically and legally? We feel that noting a deficiency is certainly their prime job. Is it possible that a response from the Owner (or CPO) at the time and date of the correction would be reasonable? The Health Department would have a written document, giving the Health Department the ability to be timelier for purposes of accuracy, and would in effect cut their inspections in half. Certainly a penalty could be created for the person who falsifies any document of compliance.

Comment Submitted By

Susan L. Jones, Executive Director, Hotel-Motel-Restaurant Association of Ocean City, Maryland
John Jarvis, Atlantic Aquatech
Melanie Pursel, Executive Director, Greater Ocean City, MD Chamber of Commerce

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

Review of Comments on February 2017 Draft of COMAR 10.17.01

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Current Regulation

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Comment

.04 Definitions

(35) "Repair"

We endorse all proposed changes to this category

Comment Submitted By

Susan L. Jones, Executive Director, Hotel-Motel-Restaurant Association of Ocean City, Maryland

John Jarvis, Atlantic Aquatech

Melanie Pursel, Executive Director, Greater Ocean City, MD Chamber of Commerce

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

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Current Regulation

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Comment

.04 Definitions

(36) "Replacement"

Endorse (a) and (b)

(c) Object to use of category

Comment Submitted By

Susan L. Jones, Executive Director, Hotel-Motel-Restaurant Association of Ocean City, Maryland

John Jarvis, Atlantic Aquatech

Melanie Pursel, Executive Director, Greater Ocean City, MD Chamber of Commerce

DHMH Response

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**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

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.04 Definitions

(58) “Water Replacement Interval”

Object to concept as to ability to accurately count and keep track of bathers at unattended facilities.

Comment Submitted By

Susan L. Jones, Executive Director, Hotel-Motel-Restaurant Association of Ocean City, Maryland

John Jarvis, Atlantic Aquatech

Melanie Pursel, Executive Director, Greater Ocean City, MD Chamber of Commerce

DHMH Response

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**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

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Comment

.05 “Previously Constructed Aquatic Facilities and Venues”

Object to any difference in date of construction as a factor to compliance

E. Object to Category

F. Single biggest objection to creation of categories

Comment Submitted By

Susan L. Jones, Executive Director, Hotel-Motel-Restaurant Association of Ocean City, Maryland

John Jarvis, Atlantic Aquatech

Melanie Pursel, Executive Director, Greater Ocean City, MD Chamber of Commerce

DHMH Response

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**Maryland Department of Health and Mental Hygiene
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Comment

.06 “Construction, Non-Substantial Alteration, and Substantial Alteration Permits”

Rather than address line by line, we feel the permit process is cumbersome, full of duplicity, and difficult for us because we cannot easily apply in person as all construction is handled in Baltimore. The payment system is extremely antiquated without any means of digital payment (PayPal for example), so we must mail a check and wait for the check to process and clear before a review even begins. With a digital payment method, the paperwork could be e-mail to Baltimore and save time and money we have to spend in postage. Several packages have been lost in Baltimore between the payment and paperwork getting to inspectors, leading to even further delays. The vast amount of detail required is simply reiterating the code, it is not at all specific to any particular job. The current process of application and formal approval can take over a year to perform a task which takes a fraction of the time to perform.

Comment Submitted By

Susan L. Jones, Executive Director, Hotel-Motel-Restaurant Association of Ocean City, Maryland

John Jarvis, Atlantic Aquatech

Melanie Pursel, Executive Director, Greater Ocean City, MD Chamber of Commerce

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

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Current Regulation

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Comment

.07 “Replacements” (page 33)

We endorse all proposed changes to this section

Comment Submitted By

Susan L. Jones, Executive Director, Hotel-Motel-Restaurant Association of Ocean City, Maryland

John Jarvis, Atlantic Aquatech

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DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

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Current Regulation

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Comment

.08 “Repairs” (page 35)

We endorse all proposed changes to this section

Comment Submitted By

Susan L. Jones, Executive Director, Hotel-Motel-Restaurant Association of Ocean City, Maryland

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DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

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Comment

.09 “Approval after Construction, Non-Substantial Alteration, or Substantial Alteration”
We feel this process could be made much simpler and timelier and would suggest this be examined.

Comment Submitted By

Susan L. Jones, Executive Director, Hotel-Motel-Restaurant Association of Ocean City, Maryland
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Melanie Pursel, Executive Director, Greater Ocean City, MD Chamber of Commerce

DHMH Response

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**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

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Comment

.10 “Operating Permit”

D. Object to posting of Operating Permit – perhaps a sign which says “Operating Permit Available at
”

_____ (9) Object to Category

(13) Object to Category and Theoretical Peak Occupancy

(14) Object to Category

Comment Submitted By

Susan L. Jones, Executive Director, Hotel-Motel-Restaurant Association of Ocean City, Maryland

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DHMH Response

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**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

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Comment

.11 **“Suspension of Revocation of Operating Permit”**

A., (2) object to list of “Critical Violations”

(3) Object as Worded

The Health Department is not available in 24 hours to do their re-inspection unless they work weekends and holidays.

(4) (b) Object to Fee – The justification given to us for this fee was the cost incurred by the Health Department to come back and re-inspect. If this code could be done by the process previously outlined, there is no need as the extra expense would not be incurred.

Comment Submitted By

Susan L. Jones, Executive Director, Hotel-Motel-Restaurant Association of Ocean City, Maryland

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DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

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Comment

.11 B. “Revocation”

(1) (a) Object to wording – A Clear, uniform definition of what constitutes “repeat violations”

(b) Object to wording – such a severe punishment should only be allowed when equally severe violations are noted – as written, your permit can be revoked for anything, such as an inoperable water fountain or stuck flowmeter “repeated”

Comment Submitted By

Susan L. Jones, Executive Director, Hotel-Motel-Restaurant Association of Ocean City, Maryland

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DHMH Response

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**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

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D. "Hearing"
Endorse entire section

Comment Submitted By

Susan L. Jones, Executive Director, Hotel-Motel-Restaurant Association of Ocean City, Maryland
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DHMH Response

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**Maryland Department of Health and Mental Hygiene
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Comment

.12 “Inspections and Right of Entry”

(2) Object to Use of Model Aquatic Health Code

C. (2) Object to Use of “At Least”, frequency of inspections must be uniform throughout the State.

(3) Object to items listed as critical violations

(4) Object to “at least”, frequency of inspections must be uniform throughout the State

(5) Object to use of Model Aquatic Health Code

D. Object to posting of inspection form and use of Model Aquatic Health Code

Comment Submitted By

Susan L. Jones, Executive Director, Hotel-Motel-Restaurant Association of Ocean City, Maryland

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DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
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Comment

.14“Standards for Recreational and Semi-Recreational Pools”

Object to Use of Category

Object to Use of Category

Comment Submitted By

Susan L. Jones, Executive Director, Hotel-Motel-Restaurant Association of Ocean City, Maryland

John Jarvis, Atlantic Aquatech

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DHMH Response

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**Maryland Department of Health and Mental Hygiene
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Comment

.17 “Standards for Water Recreational Attractions”

Object to Use of Category

Object to Use of Model Aquatic Health Code

Object to Use of Category

Comment Submitted By

Susan L. Jones, Executive Director, Hotel-Motel-Restaurant Association of Ocean City, Maryland

John Jarvis, Atlantic Aquatech

Melanie Pursel, Executive Director, Greater Ocean City, MD Chamber of Commerce

DHMH Response

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**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

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Comment

.18 “Standards for Public Wading Pool”

Object to Use of Category

Object to use of Model Aquatic Health Code

Comment Submitted By

Susan L. Jones, Executive Director, Hotel-Motel-Restaurant Association of Ocean City, Maryland

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Melanie Pursel, Executive Director, Greater Ocean City, MD Chamber of Commerce

DHMH Response

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**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

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Comment

.19 “Standards for Public Therapy Pools”

Object to Use of Category

Object to Use of Model Aquatic Health Code

Comment Submitted By

Susan L. Jones, Executive Director, Hotel-Motel-Restaurant Association of Ocean City, Maryland

John Jarvis, Atlantic Aquatech

Melanie Pursel, Executive Director, Greater Ocean City, MD Chamber of Commerce

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

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Comment

.20 “Standards for Spray Grounds”

Object to Use of Category

Object to Use of Model Aquatic Health Code

Comment Submitted By

Susan L. Jones, Executive Director, Hotel-Motel-Restaurant Association of Ocean City, Maryland

John Jarvis, Atlantic Aquatech

Melanie Pursel, Executive Director, Greater Ocean City, MD Chamber of Commerce

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

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Comment

.21 “User Load and Theoretical Peak Occupancy”

Object to Use of Category

(a), (i) – Object to Entire use of Theoretical Peak Occupancy and Model Aquatic Health Code

(2) - Object to Use of Category

Comment Submitted By

Susan L. Jones, Executive Director, Hotel-Motel-Restaurant Association of Ocean City, Maryland

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DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

Review of Comments on February 2017 Draft of COMAR 10.17.01

Comment ID: 2017-024

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Current Regulation

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Comment

.22 “[Aquatic Venue Site](#)”

Object to Use of Category and Model Aquatic Health Code

Comment Submitted By

Susan L. Jones, Executive Director, Hotel-Motel-Restaurant Association of Ocean City, Maryland

John Jarvis, Atlantic Aquatech

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DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

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Comment

.23 “Barriers”
Object to Use of Category
Object to Use of Category

Comment Submitted By

Susan L. Jones, Executive Director, Hotel-Motel-Restaurant Association of Ocean City, Maryland
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DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

Review of Comments on February 2017 Draft of COMAR 10.17.01

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Comment

.27 “Equipment Rooms”

Object to Use of Category

Object to Use of Category

2 (e) We endorse for new construction but object to any idea that all existing pools must conform as it is not possible to comply.

2 (h) We endorse for new construction but object to any idea that all existing pools must conform as it is not possible to comply.

Comment Submitted By

Susan L. Jones, Executive Director, Hotel-Motel-Restaurant Association of Ocean City, Maryland

John Jarvis, Atlantic Aquatech

Melanie Pursel, Executive Director, Greater Ocean City, MD Chamber of Commerce

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

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Current Regulation

Draft Regulation

Comment

.28 “Pipe Material and Identification”

Object to reference to Model Aquatic Health Code

Comment Submitted By

Susan L. Jones, Executive Director, Hotel-Motel-Restaurant Association of Ocean City, Maryland

John Jarvis, Atlantic Aquatech

Melanie Pursel, Executive Director, Greater Ocean City, MD Chamber of Commerce

DHMH Response

DHMH Rational

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Current Regulation

Draft Regulation

Comment

.29 “Circulations Systems”

Object to Use of Category

Object to Use of Category – this is one of the most serious issues, flow rate, which would make retro-fitting to achieve compliance impossible in most cases

Comment Submitted By

Susan L. Jones, Executive Director, Hotel-Motel-Restaurant Association of Ocean City, Maryland

John Jarvis, Atlantic Aquatech

Melanie Pursel, Executive Director, Greater Ocean City, MD Chamber of Commerce

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

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Current Regulation

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Comment

.30 “Circulation System Components”

Object to the use of category throughout this chapter

D. (1) (a) – Object to Use of Model Aquatic Health Code

 (1) (c) (i) – Object to signage which no one will understand

 (1) (c) (ii) – Object to limiting time of exposure for lifeguard for 30 minutes – basically doubles cost of labor to operate

E. Object to use of Category and Model Aquatic Health Code

I. Object to use of Category

Comment Submitted By

Susan L. Jones, Executive Director, Hotel-Motel-Restaurant Association of Ocean City, Maryland

John Jarvis, Atlantic Aquatech

Melanie Pursel, Executive Director, Greater Ocean City, MD Chamber of Commerce

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

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Current Regulation

Draft Regulation

Comment

.31 “Diving Area and Equipment”
Object to the Use of Category

Comment Submitted By

Susan L. Jones, Executive Director, Hotel-Motel-Restaurant Association of Ocean City, Maryland
John Jarvis, Atlantic Aquatech
Melanie Pursel, Executive Director, Greater Ocean City, MD Chamber of Commerce

DHMH Response

DHMH Rational

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Current Regulation

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Comment

.33 “Chemical Storage Area”

Object to Use of Category

We see no need to change the existing code for this.

Comment Submitted By

Susan L. Jones, Executive Director, Hotel-Motel-Restaurant Association of Ocean City, Maryland

John Jarvis, Atlantic Aquatech

Melanie Pursel, Executive Director, Greater Ocean City, MD Chamber of Commerce

DHMH Response

DHMH Rational

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Current Regulation

Draft Regulation

Comment

.34 “Hydrostatic Relief Valves”

We endorse the use of Hydrostatic Relief Valves where required
Object to the Use of Category

Comment Submitted By

Susan L. Jones, Executive Director, Hotel-Motel-Restaurant Association of Ocean City, Maryland
John Jarvis, Atlantic Aquatech
Melanie Pursel, Executive Director, Greater Ocean City, MD Chamber of Commerce

DHMH Response

DHMH Rational

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Current Regulation

Draft Regulation

Comment

.35 “Filter Backwash Water”
Object to the Use of Category

Comment Submitted By

Susan L. Jones, Executive Director, Hotel-Motel-Restaurant Association of Ocean City, Maryland
John Jarvis, Atlantic Aquatech
Melanie Pursel, Executive Director, Greater Ocean City, MD Chamber of Commerce

DHMH Response

DHMH Rational

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Current Regulation

Draft Regulation

Comment

.36 “Illumination of Water, Deck, and Walkway”
Object to the Use of Category

Comment Submitted By

Susan L. Jones, Executive Director, Hotel-Motel-Restaurant Association of Ocean City, Maryland
John Jarvis, Atlantic Aquatech
Melanie Pursel, Executive Director, Greater Ocean City, MD Chamber of Commerce

DHMH Response

DHMH Rational

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Comment

.37 “Ventilation of an Indoor Aquatic Venue”

Object to the Use of Category

We feel these requirements need much more study and should be decided on a case by case basis as this is entirely too broad and therefore impossible to comply

Comment Submitted By

Susan L. Jones, Executive Director, Hotel-Motel-Restaurant Association of Ocean City, Maryland

John Jarvis, Atlantic Aquatech

Melanie Pursel, Executive Director, Greater Ocean City, MD Chamber of Commerce

DHMH Response

DHMH Rational

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Center for Healthy Homes and Community Services**

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Current Regulation

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Comment

.38 “Plumbing”

Object to Use of Category and Model Aquatic Health Code

Comment Submitted By

Susan L. Jones, Executive Director, Hotel-Motel-Restaurant Association of Ocean City, Maryland

John Jarvis, Atlantic Aquatech

Melanie Pursel, Executive Director, Greater Ocean City, MD Chamber of Commerce

DHMH Response

DHMH Rational

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Current Regulation

Draft Regulation

Comment

.39 “Toilet, Hand Sink, and Shower Facilities”

Object to Use of Category

We feel the existing regulations should be kept unless it can be shown that there is any need to change.

Comment Submitted By

Susan L. Jones, Executive Director, Hotel-Motel-Restaurant Association of Ocean City, Maryland

John Jarvis, Atlantic Aquatech

Melanie Pursel, Executive Director, Greater Ocean City, MD Chamber of Commerce

DHMH Response

DHMH Rational

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Center for Healthy Homes and Community Services**

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Current Regulation

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Comment

.41 “Accommodations for Disabled Individuals”

We support providing accommodations for disabled individuals
Object to Use of Category and Model Aquatic Health Code

Comment Submitted By

Susan L. Jones, Executive Director, Hotel-Motel-Restaurant Association of Ocean City, Maryland
John Jarvis, Atlantic Aquatech
Melanie Pursel, Executive Director, Greater Ocean City, MD Chamber of Commerce

DHMH Response

DHMH Rational

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Center for Healthy Homes and Community Services**

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Draft Regulation

Comment

.42 “Equipment Installation”
Object to Use of Category

Comment Submitted By

Susan L. Jones, Executive Director, Hotel-Motel-Restaurant Association of Ocean City, Maryland
John Jarvis, Atlantic Aquatech
Melanie Pursel, Executive Director, Greater Ocean City, MD Chamber of Commerce

DHMH Response

DHMH Rational

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Current Regulation

Draft Regulation

Comment

.43 “Maintenance”

We object to Use of Category

Comment Submitted By

Susan L. Jones, Executive Director, Hotel-Motel-Restaurant Association of Ocean City, Maryland

John Jarvis, Atlantic Aquatech

Melanie Pursel, Executive Director, Greater Ocean City, MD Chamber of Commerce

DHMH Response

DHMH Rational

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Current Regulation

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Comment

.44 “Aquatic Facility and Venue Safety”

Object to Use of Category and Model Aquatic Health Code

(A) (2) (a) We feel the existing first aid supplies are adequate and see no need to change them

B. Telephone

Object to use of Category and Model Aquatic Health Code

It is proposed that an inoperable phone be a critical violation subject to immediate closure. While we support having 911 access, we cannot control most failures, phone service being an example. Also, it would require daily testing to ensure functionality resulting in thousands of “test calls” to 911 services per day. In the case of Worcester County, we have over 500 semi-public and recreational pools. Our 911 call center in Snow Hill could not handle over 500 test calls each day and could overload them to the point that a true emergency could be missed.

Comment Submitted By

Susan L. Jones, Executive Director, Hotel-Motel-Restaurant Association of Ocean City, Maryland

John Jarvis, Atlantic Aquatech

Melanie Pursel, Executive Director, Greater Ocean City, MD Chamber of Commerce

DHMH Response

DHMH Rational

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Current Regulation

Draft Regulation

Comment

.45 “Aquatic Venue Qualified Operator”

Object to Section C which references Model Aquatic Health Code

Comment Submitted By

Susan L. Jones, Executive Director, Hotel-Motel-Restaurant Association of Ocean City, Maryland

John Jarvis, Atlantic Aquatech

Melanie Pursel, Executive Director, Greater Ocean City, MD Chamber of Commerce

DHMH Response

DHMH Rational

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Center for Healthy Homes and Community Services**

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Comment

.45 “Aquatic Venue Operation”

Object to Use of Category

Sternly object to having operator on site at all times. At an unattended pool, this becomes impossible to comply short of full time staffing. The cost of this would absolutely cause many facilities to close. Also, because the testing is still required to be done every four hours (for semipublic/recreational), what is the benefit of this to measure against the cost?

Comment Submitted By

Susan L. Jones, Executive Director, Hotel-Motel-Restaurant Association of Ocean City, Maryland

John Jarvis, Atlantic Aquatech

Melanie Pursel, Executive Director, Greater Ocean City, MD Chamber of Commerce

DHMH Response

DHMH Rational

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Comment

.48 “Disinfection of an Aquatic Venue”

Object to Use of Category

(i) We object to having a free chlorine level of below 1.5 ppm being grounds for closure, especially if it can be an onsite correction.

(d) We object to a bromine level of 3 ppm – 8 ppm. That is equivalent of keeping chlorine between 1.5 ppm – 4 ppm. We suggest Bromine level should be 3 ppm – 15 ppm, allowing a more realistic window. This was discussed in previous Aquatic Committee meetings and we thought this was one of the items we agreed on in raising the top level.

Comment Submitted By

Susan L. Jones, Executive Director, Hotel-Motel-Restaurant Association of Ocean City, Maryland

John Jarvis, Atlantic Aquatech

Melanie Pursel, Executive Director, Greater Ocean City, MD Chamber of Commerce

DHMH Response

DHMH Rational

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Center for Healthy Homes and Community Services**

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Comment

.49 “Water Chemistry of an Aquatic Venue”

Object to the Use of Category

It is noted that many items in this chapter are listed as “critical violations” and are subject to immediate closure. The requirement for testing many of these items is weekly and would therefore need to change to being tested many times per day. We view this as unnecessary, costly, and is not related to any safety issue.

Comment Submitted By

Susan L. Jones, Executive Director, Hotel-Motel-Restaurant Association of Ocean City, Maryland

John Jarvis, Atlantic Aquatech

Melanie Pursel, Executive Director, Greater Ocean City, MD Chamber of Commerce

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
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Current Regulation

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Comment

.50 “Operating Records”

Object to Use of Category

(i) water replacement interval – This is based on counting bathers for which there is not method to accurately do this presently.

Comment Submitted By

Susan L. Jones, Executive Director, Hotel-Motel-Restaurant Association of Ocean City, Maryland

John Jarvis, Atlantic Aquatech

Melanie Pursel, Executive Director, Greater Ocean City, MD Chamber of Commerce

DHMH Response

DHMH Rational

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Center for Healthy Homes and Community Services**

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Current Regulation

Draft Regulation

Comment

.52 “Sanitary Quality of Water”

This entire section is a closable offense, yet the operator has no means or requirement to test it. This entire section must be removed.

Comment Submitted By

Susan L. Jones, Executive Director, Hotel-Motel-Restaurant Association of Ocean City, Maryland
John Jarvis, Atlantic Aquatech
Melanie Pursel, Executive Director, Greater Ocean City, MD Chamber of Commerce

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

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Comment

.53 “Fecal, Vomit, and Blood Incident Response at an Aquatic Venue”

Object to the Use of Category and Model Aquatic Health Code

We feel the policies in place now are adequate unless it can be shown that these changes are necessary because of incidences in the State causing this.

Comment Submitted By

Susan L. Jones, Executive Director, Hotel-Motel-Restaurant Association of Ocean City, Maryland

John Jarvis, Atlantic Aquatech

Melanie Pursel, Executive Director, Greater Ocean City, MD Chamber of Commerce

DHMH Response

DHMH Rational

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Current Regulation

Draft Regulation

Comment

.54 “Water Replacement”

Object to Use of Category and Model Aquatic Health Code

Same objection as “Operating Records” category with water replacement interval

Comment Submitted By

Susan L. Jones, Executive Director, Hotel-Motel-Restaurant Association of Ocean City, Maryland

John Jarvis, Atlantic Aquatech

Melanie Pursel, Executive Director, Greater Ocean City, MD Chamber of Commerce

DHMH Response

DHMH Rational

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Current Regulation

Draft Regulation

Comment

.55 “Chemical Handling and Storage”

Object to Use of Category and Model Aquatic Health Code

We feel existing code is sufficient and no need to change it

Comment Submitted By

Susan L. Jones, Executive Director, Hotel-Motel-Restaurant Association of Ocean City, Maryland

John Jarvis, Atlantic Aquatech

Melanie Pursel, Executive Director, Greater Ocean City, MD Chamber of Commerce

DHMH Response

DHMH Rational

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Comment

.58 “Electrical Systems and Bonding”

Object to Category and Model Aquatic Health Code

We agree that bonding is imperative, but these requirements are not easily met. This testing is very expensive to do and does not address the real issue which is a change in status of bonding when some component is changed or a piece of equipment that relies on bonding is added. This must be rewritten.

Comment Submitted By

Susan L. Jones, Executive Director, Hotel-Motel-Restaurant Association of Ocean City, Maryland

John Jarvis, Atlantic Aquatech

Melanie Pursel, Executive Director, Greater Ocean City, MD Chamber of Commerce

DHMH Response

DHMH Rational

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Comment

.59 “Standardization and Audits”

This section needs clarity and a better procedure for enforcement as it would seem the local standardization officer would be the one interpreting the code. As you are aware, we in Worcester County are subjected to the strictest and most punitive interpretation of the code presently and would therefore request section be much more specific regarding standardization across the State.

Comment Submitted By

Susan L. Jones, Executive Director, Hotel-Motel-Restaurant Association of Ocean City, Maryland
John Jarvis, Atlantic Aquatech
Melanie Pursel, Executive Director, Greater Ocean City, MD Chamber of Commerce

DHMH Response

DHMH Rational

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Comment

To have a CPO on duty when our pool is open will severely effect our hours of operation. I'm ask that consideration be given to venues such as ours that have a pool open seven days a week and is run by volunteers. We will have to pay enough people to cover our hours of operation but most likely limit the hours of operation or close the pool. I'm requesting that this reg. be canceled or at least held off for another year. The Wicomico Yacht Club is asking you to work with us this year on this and our temporary restroom shower facilities.

Comment Submitted By

John Kencec, CPO, Wicomico Yacht Club

DHMH Response

DHMH Rational

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Center for Healthy Homes and Community Services**

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Comment

Infinity Edges are not defined in the regs. They may want to incorporate that into the "definitions" section since they have devoted an entire section of new regulations to it. I assume it was just an omission error. I also assume they would use the MAHC definition:

“Infinity Edge” means a pool wall structure and adjacent perimeter deck that is designed in such a way where the top of the pool wall and adjacent deck are not visible from certain vantage points in the pool or from the opposite side of the pool. Water from the pool flows over the edge and is captured and treated for reuse through the normal pool filtration system. They are often also referred to as “vanishing edges,” “negative edges,” or “zero edges.”

Comment Submitted By

Jim Swauger, Environmental Health Director, Allegany County Health Department

DHMH Response

DHMH Rational

Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services

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Draft Regulation

Comment

.27 The **Equipment Rooms** section (page 87) regarding exhaust vent intakes reads as follows:

(h) *An exhaust vent intake placed at a height less than or equal to 3 feet from the floor of the equipment room, discharged to limit exposure to the public;*

There is a comment stating "*Split in two parts. Exempt from intake placement.*" Does that mean you plans to remove the "3 ft from the floor" requirement? If not, would a door vent near the floor qualify as an exhaust vent intake?

Comment Submitted By

Jim Swauger, Environmental Health Director, Allegany County Health Department

DHMH Response

DHMH Rational

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Center for Healthy Homes and Community Services**

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Comment

Chemical Feeders has a section that presents a bit of a concern.

(2) Category B aquatic venue, an owner shall ensure that all chemical feeders that operate independently of the circulation pump are provided with:

b) **A visible and audible alarm located so as to be visible by an on-duty lifeguard or attendant** which, when activated, will immediately cause the operator to close the aquatic venue until such time that the problem is corrected and if applicable, the corrective action is verified by the Secretary.

Many facilities only have a visible alarm, which is how they were made and approved. *Can the wording of the regulation be changed to visible and/or audible alarm? Like Constitution Park, we have an AK 110 controller that doesn't have an audible alarm. This is an expensive repair/correction. Point is, if the pump room is any distance from the pool the lifeguard will not hear it or see it anyway.*

Comment Submitted By

Jim Swauger, Environmental Health Director, Allegany County Health Department

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

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Current Regulation

Draft Regulation

Comment

Fecal Contamination Response

The new regulations require any pool using stabilizer to double the wait time that is currently used. I can understand the change since stabilizer (cyanuric acid) reduces the disinfecting capability of chlorine.

**The reason for raising chlorine levels is to achieve 3 log reduction. But, what about outdoor pools that are using stabilizer and have a secondary/supplemental disinfection system (UV or Ozone)? If the secondary disinfection system is capable of 3 log reduction, why do they have to double our wait time and why do they have to raise the chlorine levels? It makes no sense and discourages anyone from even considering a secondary disinfection system. These pools have invested, in some cases, \$35,000 of the State's money in a UV system specifically for this purpose. The MAHC Annex addresses that issue and makes recommendations but the proposed regs do not.*

Taken Directly from MAHC Annex 6.5.3.2.1 Pools Containing Chlorine Stabilizers

AQUATIC VENUES with SECONDARY DISINFECTION SYSTEMS could be closed and allowed to circulate for the length of time calculated in MAHC 4.7.3.3.2 to reduce the level of Cryptosporidium below one OOCYST/100mL. Other AQUATIC VENUES without SECONDARY DISINFECTION SYSTEMS may choose to completely drain the water from the AQUATIC VENUE and replace with fresh water if they are unable to reduce the stabilizer level or hyperchlorinate.

**Note the first sentence of the MAHC code above states that they could simply close and just allow the pool to circulate. That is because the secondary disinfection systems eliminate the need for hyperchlorination in the event of a fecal contamination. They can achieve 3 log reduction just like hyperchlorination does.*

Taken Directly from MAHC

4.7.3.3.2A 3-log Inactivation and Oocyst

4.7.3.3.2.4A Minimum Flow Rate Calculation

The flow rate (Q) through the SECONDARY DISINFECTION SYSTEM shall be determined based upon the total volume of the AQUATIC VENUE or AQUATIC FEATURE (V) and a prescribed dilution time (T) for theoretically reducing the number of assumed infective Cryptosporidium OOCYSTS from an initial total number of 100 million (10^8) OOCYSTS to a concentration of one

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OOCYST/100 mL.

4.7.3.3.2.5A Equation

Accounting for a 3 log (99.9%) reduction of infective *Cryptosporidium* OOCYSTS through the SECONDARY DISINFECTION SYSTEM with each pass, the SECONDARY DISINFECTION SYSTEM flow rate (Q) shall be:

1) $Q = V \times \{ [14.8 - \ln(V)] / (60 \times T) \}$, where:

Q = SECONDARY DISINFECTION SYSTEM flow rate (gpm)

V = Total water volume of the AQUATIC VENUE or AQUATIC FEATURE, including surge tanks, piping, equipment, etc. (gals)

T = Dilution time (hrs.)

This will be a lot of down/closed time for pools using stabilizer and may not be necessary for the few pools using a UV light.

“pools using stabilizer and/or also using a secondary disinfection system capable of 3 log reduction must close immediately, maintain chlorine and pH levels within normal operating ranges established by COMAR 10.17.48, and meet the minimum total circulation time through the secondary disinfection system as determined by the calculations established in MAHC 4.7.3.3.2 before reopening.”

**This should apply to indoor pools as well that aren't using stabilizer.*

I also have a question regarding the bacteriological samples following a fecal contamination incident. The proposed regulations have reporting requirements to include:

(6) Date bacteriological samples were taken; and

(7) The four locations where the bacteriological samples were taken from within the aquatic venue. Who is responsible for collecting the samples? Especially if it's a weekend and also does the pool have to stay closed until the samples clear which will be all weekend if it occurs on a Friday evening. This could be a 4 or 5 day closure.

The point is the potential sampling piece seem a bit vague and to say the least confusing to me.

Comment Submitted By

Jim Swauger, Environmental Health Director, Allegany County Health Department

DHMH Response

DHMH Rational

Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services

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Current Regulation

Draft Regulation

Comment

.38 Plumbing

E. Fill Spouts and Automatic Water Level Controllers.

(2) For a Category B aquatic venue, an owner shall ensure that a fill spout is installed at an aquatic venue, that the fill spout is:

(a) Installed in front of a lifeguard stand whose supports are immediately adjacent to the aquatic venue coping or within 10 inches of a ladder or handrail, so that the fill spout does not present a tripping or puncture hazard;

The question is if the fill is not in anyway a trip hazard does the pool need to re position it by the adoption of this reg because this is potentially a very expensive fix. Especially if its not a hazard but its also not in the new listed location?

Comment Submitted By

Jim Swauger, Environmental Health Director, Allegany County Health Department

DHMH Response

DHMH Rational

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Center for Healthy Homes and Community Services

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Current Regulation

Draft Regulation

Comment

Compliances

.54 Water Replacement

B. An owner of a Category B aquatic venue *shall ensure that a qualified operator of a public spa replaces the entire volume of water within the public spa when the difference between the interval since the last water change and the WRI, as calculated according to §C of this regulation, is less than or equal to zero.*

* C. Water Replacement Interval

WRI (days rounded to the nearest whole number) = $(1/3) \times (\text{spa volume in gallons}) / (\text{number of bathers since last water change})$.

*How is an owner supposed to know the number of bathers since the last water change?

*This is a bit confusing. I assume the "interval since the last water change" is in days? Can they give an actual formula for the "*difference between the interval since the last water change and the WRI*"? Because, it does make a difference as to whether the number is less than or equal to zero.

Does the "*difference*" = Interval – WRI
or does the "*difference*" = WRI – Interval

Comment Submitted By

Jim Swauger, Environmental Health Director, Allegany County Health Department

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

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Current Regulation

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Comment

“Regarding the Approval of Qualified Operator Course Section”

Item 1. What is meant by “expertise in the operational aspects? This is very unclear. It doesn’t specify what the operational aspects are.

Item E. An online course for operators seems totally unrealistic. How does one gain any hands on pump operations and water testing experience? This seems like a real future issue with students and instructors.

Comment Submitted By

Jim Swauger, Environmental Health Director, Allegany County Health Department

DHMH Response

DHMH Rational

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Current Regulation

Draft Regulation

Comment

Ø Previously Constructed Aquatic Facilities and Venues:

Columbia Association supports the application of the Model Aquatic Health Code (MACH) 2016 4.0: Aquatics Facility Design Standards and Construction to new pool construction beginning October, 2017. Columbia Association, however, does not support any requirement that existing aquatic venues be brought into compliance with the MAHC 2016 guidelines or MAHC operational standards. Instead, COMAR regulations should continue to govern existing Category A and Category B aquatic venues.

The MAHC was designed to be an ideal operating standard for swimming pools throughout the country based on best practices to help make swimming activities safer. It was never intended to force expensive renovations or operating changes on previously constructed aquatic venues. Requiring Columbia Association's swimming pools to meet these MACH 2016 standards would result in significant expenditures that ultimately would be borne by the Columbia community and likely would require the closing of some pools, leading to reduced access to aquatic venues.

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

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Columbia Association would also ask that the following language shown in italics be included in the quoted regulations with respect to renovations and alterations to Category B aquatic venues:

“Alterations intended to bring a facility into compliance with the Americans with Disabilities Act (ADA) are exempt from any new proposed regulations provided that such alterations are compliant with the regulations that were in effect at the time applicable permits for the facility were originally issued by the State/County. For example, making ADA improvements to a bathhouse would not also result in a requirement that an owner increase the number of fixtures that might otherwise be necessary under the new proposed regulations.”

“Construction alterations that benefit public safety are exempt from any new proposed regulations provided that such alterations are compliant with the regulations that were in effect at the time that applicable permits for the facility were originally issued by the State/County. For example, upgrading the suction side of a flume piping system or adding a lifeguard stand would not trigger application of new turnover rates. Likewise, adding deck drains that improve safety would not result in a requirement that the owner comply with new minimums for deck area that are not readily achievable.”

Comment Submitted By

Marty Oltmans, Aquatics Director, Columbia Association

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

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Current Regulation

Draft Regulation

Comment

Ø User Load and Theoretical Peak Occupancy: .21B

Columbia Association would like clarification on User Load versus Theoretical Peak Occupancy (TPO). Our calculations of user load and TPO for various Columbia Association facilities result in different usage numbers. Moreover, the proposed regulations do not explain the use of the TPO. If its purpose is to limit the number of people inside an aquatics venue, this could be completely disruptive to special event programming such as swim meets when there are only 8 swimmers in the pool at one time, but there may be 400 guests viewing the event from the deck, grass and area around the pool. Columbia Association and many other venues have successfully run safe events in excess of the TPO for 45 years, and it would impose a burden on the community to deprive Columbia residents and property owners of these types of events or limit the size of the community teams and turn swimmers away due to the new TPO rules. Columbia Association recommends that this issue be reviewed by a committee of industry professionals and the Secretary and that corrections and clarifications be made prior to approval of this regulation.

Comment Submitted By

Marty Oltmans, Aquatics Director, Columbia Association

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

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Current Regulation

Draft Regulation

Comment

Ø Circulation System Components: .(D)(i and ii)

As to (i), the committee had discussed the proposed requirement that an indoor pool be maintained below 0.4ppm combined chlorine, agreed that it is next to impossible to meet that requirement, especially during activities like swim team practice when the water is agitated, and observed that facilities would be closed more than they were open if such requirement were in effect. During the public meetings, the committee reached a good compromise with the State, where the combined chlorine at indoor pools would be allowed up to 1.0ppm, but pool owners/operators would have to post the combined chlorine figures in the pool area to make the public aware of the combined chlorine levels. Columbia Association continues to support this option.

Columbia Association does not support (ii), which limits guards exposed to a combined chlorine level between 0.5ppm and 1ppm to 30 minutes per hour. If it's safe for swimmers to be in a pool without time limitations, it should be no different for lifeguards. Requiring that the down guard or guards leave the pool area prevents quick assistance to the lifeguard on duty in the event of a guest in distress. Columbia Association recommends that this issue be reviewed by a committee of industry professionals and the Secretary, and that corrections and clarifications be made prior to approval of this regulation.

Comment Submitted By

Marty Oltmans, Aquatics Director, Columbia Association

DHMH Response

DHMH Rational

Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services

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Current Regulation

Draft Regulation

Comment

Ø Accommodation for Disabled Individuals: .37

Columbia Association supports the requirements of Title III of the Americans with Disabilities Act (ADA) and 2010 Design Standards in their application to new construction after March 15, 2012.

However, the law does not require that every aquatic venue comply with those standards. In the case of existing facilities, the scope of CA's obligations is somewhat different than in the case of new construction and renovations. With respect to existing facilities, CA has an ongoing obligation to remove architectural barriers whenever that is readily achievable. The 1991 ADA regulations provide that businesses "shall remove architectural barriers in existing facilities...where such removal is readily achievable, i.e. easily accomplishable and able to be carried out without much difficulty or expense." Whether a particular corrective action is "readily achievable" for CA is measured by factors that include the nature and cost of the action needed and CA's financial resources.

Columbia Association (CA) acknowledges its responsibility to comply with the Americans with Disabilities Act of 1990, and is committed to providing reasonable modifications for individuals living with a disability. CA will continue the evaluation of its facilities, programs and services to remove existing barriers whenever readily achievable and to ensure accessibility in new and modified facilities.

A full Accessibility Report & Plan for Columbia Association can be found at:
https://drive.google.com/file/d/0B84Q_1k4eE6eLXdXdUJNamJ5VmM/view

Comment Submitted By

Marty Oltmans, Aquatics Director, Columbia Association

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

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Current Regulation

Draft Regulation

Comment

Ø Aquatic Venue Qualified Operator Certification: .45

Columbia Association believes that the minimum age requirement for the level 2 Aquatic Venue Qualified Operator Certification should be 16 rather than 18 years old. A 16 or 17 year old is just as capable of meeting the certification requirements as an 18 year old. Limiting the pool of applicants for this certification to those at least 18 years of age would negatively impact end-of-summer operations for most aquatic venues in Maryland. Most Maryland (and out of state) colleges start classes in early to mid August, which means that most lifeguards who are over 18 must leave their jobs at that time to return to school. High school students, however, do not start classes until after Labor Day, so they are able to remain on the job and fill in for the departed college students. They would be unable to do so if the requisite age for the operator certification is 18. Consequently, most pools would be forced to close for the season in mid-August rather than after Labor Day because of a lack of qualified operators due only to age and not skill.

Columbia Association also feels the length of the certification should be based on the organization's certification standard(1 year, 3 years or 5 years). In the COMAR section .40 Public Pool & Spa Safety regulating lifeguards, each program sets its own certification time limits and the same should be true in the Aquatic Venue Qualified Operator section.

Comment Submitted By

Marty Oltmans, Aquatics Director, Columbia Association

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

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Current Regulation

Draft Regulation

Comment

Ø Electrical Systems and Bonding: .58

Columbia Association would like the text changed to “bonding and grounding inspection”, along with clarification as to the specific items to be inspected. The current wording is too vague and open to interpretation. Additionally Columbia Association ask that frequency of the bonding inspection be reviewed. A bonding inspection every six months is not inexpensive and the interval should be set to a more reasonable time frame based on industry best practices of two to three years.

Comment Submitted By

Marty Oltmans, Aquatics Director, Columbia Association

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

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Current Regulation

Draft Regulation

Comment

.04B(30) "Private aquatic venue," means an aquatic venue that is:

- (i) Not open to the public;**
- (ii) On a property on which not more than four private residences are located;**

This was discussed at the previous COMAR revision meetings, and a change was put into the previous proposed revision. It does not appear in this proposal. The number of private residences was increased to 10, I believe. This should be added back into the current proposal.

Comment Submitted By

Lucy Goszkowski, Bureau of Environmental Health, Anne Arundel County Department of Health

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

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Current Regulation

Draft Regulation

Comment

.04B(34) “Recreational aquatic venue” means a pool or spa that:

(f) Is provided by, or used by:

(v) An apartment complex, housing subdivision, or mobile home park with more than ten units, except as provided in §B(36)(a)(v) of this regulation;

The wrong number is cited here; (36) is the definition of Replacement.

Comment Submitted By

Lucy Goszkowski, Bureau of Environmental Health, Anne Arundel County Department of Health

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

Review of Comments on February 2017 Draft of COMAR 10.17.01

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Current Regulation

Draft Regulation

Comment

.04B(37) “Routine inspection” means an inspection that includes but is not limited to verifying the aquatic venue does not have any critical or major violations.

The definitions of critical and major violations are so broad that there seems to be no difference at all between the periodic (30 or 90 day interval) routine inspection and the annual Full Compliance inspection. And the “reward” for the facility (and the inspector) for having no critical violations for three consecutive inspections—only seeing the Health Department at an annual Full Compliance inspection—is meaningless. The requirements are so detailed that having no criticals or majors is impossible even at the best-managed pool. There is nothing to be gained in terms of public health by doing more detailed, “better” inspections if the inspectors cannot inspect every facility in the time frame required because each inspection is so time-consuming.

This too-broad concept of the routine inspection was discussed at the last meeting about the previous COMAR revision, before it was submitted for approval. Those recommendations to slim the routine inspection down seem to have gone nowhere.

This definition of routine inspection needs to be narrowed, probably to include only critical violations or a short list of criticals and majors.

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A larger problem is that the definition of critical violation is different for A and B pools. A critical violation for category A pools is: 1) any violation of the MAHC 6.3.3., 2) disinfectant over the maximum in MAHC, and 3) violation of MAHC bonding requirements. This seems to be a reasonable approach. In contrast, category B pools have to be checked for compliance with all or most of .23, .29, .30, .32, .36, .44, .47, .48, .49, .52, and .58. This is simply unreasonable and unworkable as part of a “routine” inspection. For example, **.30 Circulation System Components** is over five pages of requirements for pumps, skimmers, chemical feeders, UV, ozone, vacuum systems, signage, feeder-controller interlocks, ozone and carbon dioxide storage and ventilation . . . Most of this is covered in plan review, and is not verifiable by observation in the field for “routine” inspection purposes. **.36 Illumination of Water, Deck, and Walkway** is also included in the definition of critical violation and therefore would be included in a “routine” inspection. Compliance with this section is covered in plan review, and again is not verifiable in the field by the inspector, unless we are all going to carry light meters with us. Eliminating .36 from the critical list would not negatively impact health or safety: If, upon visual inspection, the inspector determines that the facility has inadequate lighting for safe operation, it can be closed until the problem is corrected. This is addressed under summary permit suspension.

The definition of critical violation needs to be narrowed, **for all facilities**, to a version of what is in MAHC 6.3.3. I am not recommending that the identical language be used. I sent specific recommendations for what to include in this definition in my last set of comments in 2016. I will submit specific revised language again if it is requested.

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Center for Healthy Homes and Community Services**

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Category A and B pools are treated differently in many sections of the proposed regulation. Category A pools are to comply with MAHC, and B pools are to comply with what is usually the old COMAR. This occurs over and over again. Different standards should not be used for operational parameters, except for minimum flow rates. Chapters **.47 Operation, .48 Disinfection, .49 Water Chemistry** and **.50 Operating Records** use the MAHC for A pools and COMAR for B pools. This does not make sense. It is needlessly complicated, even if the required parameters are the same. What are we to refer to when we go to a particular facility? When a facility renovates one of its pools, that venue will have to meet MAHC but the other(s) will not. The proposal needs to be examined to see where two different standards are really necessary. Keep COMAR, or make modifications to it if MAHC specs seem to be an improvement.

Use of the MAHC to update and improve COMAR is a good idea in general. However, the MAHC was never intended to be adopted in its entirety except possibly by jurisdictions that have no existing public pool code. Maryland has a code. It is useful but outdated. The MAHC has recommended best practices but it is not necessary to throw out COMAR and replace it with MAHC, which often seems aimed at large heavily used facilities like water parks. Many of its recommendations are not useful for most pools in Anne Arundel County.

Comment Submitted By

Lucy Goszkowski, Bureau of Environmental Health, Anne Arundel County Department of Health

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

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Current Regulation

Draft Regulation

Comment

.04B(12) “Critical violation” means for a:

(b) Category B venue, failure to comply with:

(ix) Except for Regulation .49A(1), Regulation .49, Water Chemistry of an Aquatic Venue, of this chapter;

There is no .49A(1). I believe this should be .49B(1), which requires the pH to be maintained between 7.2 and 7.8. Category A pools are governed by the MAHC, which has limits of 6.5 and 8.0. COMAR makes more sense in that it is enforceable, as shown by long experience, and it does a better job of protecting public health. Widely used pool test kits do not read pH below 7.0 using phenol red reagent. And since only about 25% of what shows on a test kit as Free Chlorine is actually hypochlorous acid at a pH of 8.0, I am not in favor of expanding upward the allowable range of pH values for pool water. Particularly if it applies to some pools and not others. This would make enforcement *problematic*, to use the mildest possible term.

Comment Submitted By

Lucy Goszkowski, Bureau of Environmental Health, Anne Arundel County Department of Health

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

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Current Regulation

Draft Regulation

Comment

.04B(23) “Major Violation” means, for a:

(b) Category B venue, failure to comply with:

(vii) Regulation .49A(1), pH, of this chapter;

There is no .49A(1). I believe this should be .49B(1).

Comment Submitted By

Lucy Goszkowski, Bureau of Environmental Health, Anne Arundel County Department of Health

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

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Current Regulation

Draft Regulation

Comment

.04B(40) "Semi-recreational aquatic venue" mean a pool or spa at a facility that:

Revise *mean* to *means*.

This is the existing semi-public definition. Existing COMAR specifies a bed & breakfast having nine or more guest rooms. The new proposal removes the size limit, so that even very small B&Bs would be subject to regulation. The size limit should be restored.

(b) Has a pool or spa that is not:

(i) Open for admission to the general public, except as provided in §B(36)(a)(v) of this regulation;

The wrong number is cited here; (36) is the definition of Replacement.

Comment Submitted By

Lucy Goszkowski, Bureau of Environmental Health, Anne Arundel County Department of Health

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

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Current Regulation

Draft Regulation

Comment

.05 E-F. A Category B aquatic venue shall become a Category A aquatic venue upon change of ownership or on January 1, 2030 and the owner shall ensure that the aquatic venue complies fully with the requirements of this chapter pertaining to a Category A aquatic venue.

Requiring every pool to comply with MAHC by 2030, or upon change of ownership, seems intended to reduce the number of public pools in the state. As I read the proposal, there are no exceptions. Among other things, the shorter turnover times and specific requirements for placement of filtered water returns in the MAHC will be quite problematic for every older pool. They will be unable to comply without essentially demolishing and rebuilding the venue. Was closing pools the intent of the proposal, or have I interpreted it incorrectly? It seems a needless exercise to have every single facility built before October 2017 apply for a variance. This will be an enormous burden on the regulators.

Use of the MAHC to update and improve COMAR is a good idea in general. However, the MAHC was never intended to be adopted in its entirety except possibly by jurisdictions that have no existing public pool code. Maryland has a code. It is useful but outdated. The MAHC has recommended best practices but it is not necessary to throw out COMAR and replace it with MAHC, which often seems aimed at large heavily used facilities like water parks. Many of its recommendations are not useful for most pools in Anne Arundel County.

Comment Submitted By

Lucy Goszkowski, Bureau of Environmental Health, Anne Arundel County Department of Health

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

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Current Regulation

Draft Regulation

Comment

.20 Standards for Spray Grounds.

- A. For a Category A aquatic venue, an owner shall ensure that a spray ground is in compliance with: (1) This chapter; (2) Applicable State and local codes; and (3) The Model Aquatic Health Code.**

The term spray ground does not appear in the MAHC. A search for splash pad leads to Interactive Water Play Aquatic Venue.

A Google search reveals that splash pad is the more commonly used term. It is used far more often than spray ground, and unlike spray ground, means only one thing. Since COMAR is going to use the MAHC for these facilities, a term that can be found in the MAHC should be used. I recommend that all references to spray ground be changed to splash pad.

Comment Submitted By

Lucy Goszkowski, Bureau of Environmental Health, Anne Arundel County Department of Health

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

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Current Regulation

Draft Regulation

Comment

.53 Fecal, Vomit, and Blood Incident Response at an Aquatic Venue

Category A pools must comply with the MAHC; category B pools have a detailed COMAR regulation to follow. Having two different procedures is unnecessarily confusing to both the regulated industry and the regulators. There must be a uniform regulation for us all to refer to.

I believe that the latest CDC recommendations should be referred to for these incidents. MAHC is revised every two years; COMAR revisions can take 20 years. Putting a specific procedure in the code virtually guarantees that it will become outdated when new knowledge and technologies come into use. Using *the current CDC* will allow COMAR to stay up to date and will ensure that we are using the recommendations of a trusted federal health agency to protect public health. The MAHC and CDC recommendations appear to be the same at this time.

Comment Submitted By

Lucy Goszkowski, Bureau of Environmental Health, Anne Arundel County Department of Health

DHMH Response

DHMH Rational

Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services

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Current Regulation

Draft Regulation

Comment

.50 Operating Records Required.

The section needs to be renumbered. .50B(B) refers twice to C(1)-(3) and C(4)-(10). There is no C in this chapter. It appears that C may mean **B(3) Record the following information...**

.50(3)(h) has the wrong units. Pump vacuum should be mm of Hg, not PSI.

Renumbering is needed throughout. **.09** appears twice, as **Repairs** and as **Approval After Construction** on pages 35 and 36.

Comment Submitted By

Lucy Goszkowski, Bureau of Environmental Health, Anne Arundel County Department of Health

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

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Current Regulation

Draft Regulation

Comment

.58 Electrical Systems and Bonding.

Different requirements for category A and B pools should be made as uniform as possible. MAHC does not require a licensed electrician for the bonding inspection, or an affidavit. It simply says a check of bonding conductors, where accessible, is needed every six months and shall be part of scheduled preventive maintenance. The six-month interval does not even make sense for seasonal pools, and this should be addressed if COMAR adopts MAHC procedures. Getting an affidavit twice a year will potentially be a significant expense for pool facilities. It also increases significantly the amount of documentation that the Health Department must maintain for each facility. The substantial difference in time interval, six months for A pools and two years for B pools, also calls into question the real safety improvement stemming from the new regulation. Electrocutions associated with swimming pools are very rare events. Bonding inspections are not a bad idea, but the potential costs associated with them should be considered against the benefits. Other jurisdictions, such as the state of New Jersey, require these inspections every two or three years. We should follow suit, unless there is evidence that this interval is somehow inadequate.

Comment Submitted By

Lucy Goszkowski, Bureau of Environmental Health, Anne Arundel County Department of Health

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

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Current Regulation

Draft Regulation

Comment

.44 Aquatic Facility and Venue Safety.

.44F(2)(f) refers to chlorine gas warning signs. Delete since chlorine gas is now prohibited elsewhere in the regulation.

This entire chapter is included in the definition of critical violation. This was discussed at a previous COMAR revision meeting. This is entirely too much detail to include in a “routine” inspection. Personnel requirements belong in the Critical definition but most of the equipment should be inspected at the annual full compliance inspection.

Comment Submitted By

Lucy Goszkowski, Bureau of Environmental Health, Anne Arundel County Department of Health

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

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Current Regulation

Draft Regulation

Comment

.45 Aquatic Venue Qualified Operator Certification.

This requires the development of three different training courses and three more refresher courses. I believe limited-content courses have been tried before, possibly for operators of limited-public use pools, and there was not sufficient demand for them to be continued. Again this seems needlessly complicated, unless some demonstrable benefit can be shown. I believe there should be two levels of certification at the most.

I am concerned that employment is necessary for issuance of an initial Level 1 card, and for renewal of the card. How is this to be verified? Will a person who takes a training class in anticipation of looking for a job in the future (say, the following summer) not get the certification card upon completion of the training? If a renewal class is taken in the off-season, does the person not get the card when they finish the class because they are not currently employed by a Level 3 operator?

Level 1 cards expire after only one year. Training is already a daunting expense for some teenagers. An additional class or exam requirement may cause some to look for a job in another field. In the interest of simplicity and the advantages of retaining experienced operators, expiration should be three years for Levels 1 and 2.

Comment Submitted By

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

Review of Comments on February 2017 Draft of COMAR 10.17.01

Lucy Goszkowski, Bureau of Environmental Health, Anne Arundel County Department of Health

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

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Current Regulation

Draft Regulation

Comment

The draft provides very little grace to existing pools which are currently Code-compliant and “safe”. They will need to comply with the minutiae of the MAHC at any change of ownership, or by the year 2030. The mandate to update to every criteria of the MAHC will be, in many cases, impossible and in all cases, an unnecessary practical difficulty and financial hardship. This will require extensive and expensive renovations to the physical aquatic venues, equipment, and equipment rooms, as well as increased costs for personnel training and on-site staffing. Our years ahead will be filled with applications for compliance schedules, variances, exemptions and/or facility closures.

Comment Submitted By

Paul Botzler, Lothorian Pools

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

Review of Comments on February 2017 Draft of COMAR 10.17.01

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Current Regulation

Draft Regulation

Comment

.03A The Operator portion of the MAHC is in direct contrast with .47A which states a Class 1 must be on site at all times; suggest that MAHC 6.3.1 be added to 03.A

Comment Submitted By

Worcester County Health Department

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

Review of Comments on February 2017 Draft of COMAR 10.17.01

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Current Regulation

Draft Regulation

Comment

.03B(12) and (23) Suggest a specific time frame requirement for level 3 operator arrival be added for both category A and B pools. This will prevent inspectors from being stuck on a pool deck indefinitely waiting for a level 3 operator to arrive and sign the inspection form.

Comment Submitted By

Worcester County Health Department

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

Review of Comments on February 2017 Draft of COMAR 10.17.01

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Current Regulation

Draft Regulation

Comment

.04B(12)a(i) How can you enforce emergency lighting as a critical violation? This would require the inspector to know how to activate this lighting and conduct night inspections to ensure compliance. Believe this would be better served as a fire code requirement.

.04B(12)b(i) What about all the fences that have been approved by DHMH that don't comply with the code (barrier entrance gates that are not 4 foot wide, horizontal members that aren't 45 inches apart, entry gates that don't open away from pool, fencing that don't meet the 5 or 6 foot height.) ?

.04B(12)b(ii) too broad, needs better clarification

.04B(12)b(iii) too broad, needs better clarification

.04B(12)b(iv) too broad, needs better clarification

.04B(12)b(v) remove, there is no way an inspector can determine compliance since we don't work after dark or have a way to determine lumens of under water lighting.

.04B(12)b(vi) too broad, needs better clarification

.04B(12)b(ix) There is no .49A(1); should reference .49B(1), also this is too broad, needs clarification

.04B(12)c Many test kits cannot measure down this low, so there should be a caveat much like the MAHC.

.04B(21) If you look at .44D(2)? contradicts with .44D(2)? because a class B pool does not need to comply with 6.2.1

.04B(23) Why is there a separation between and A and B venue, Just make all venues comply with everything listed under .04B(23)b

.04B(23)a(i) and (ii) and (iii) and .04B(23)b(i) and (ii) and (iii) How will DHMH provide information to local health departments in a timely manner?

.04B(23)b(viii) How will recorded violations be corrected in 24 hours?

.04B(26) Need to define "legal interest"

.04B(34)f(v) there is no regulation at B(36)a(v) this falls under .04B(40)a(v)

.04B(40)b(i) there is no regulation at B(36)a(v) this falls under .04B(40)a(v)

.04B(43)b How will the State treat existing interactive fountains that were not required by their Office to be permitted prior to this new regulation?

Comment Submitted By

Worcester County Health Department

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

Review of Comments on February 2017 Draft of COMAR 10.17.01

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

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Current Regulation

Draft Regulation

Comment

.05A(2)a,05A(3) Need clarity on this; a pool built pre 97 does not have to come into compliance with any section of the new regulations concerning construction until 2030.

Comment Submitted By

Worcester County Health Department

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

Review of Comments on February 2017 Draft of COMAR 10.17.01

Comment ID: 2017-085

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Current Regulation

Draft Regulation

Comment

.05C change 10-1-18 to 10-1-17

.05D change 10-1-18 to 10-1-17

Comment Submitted By

Worcester County Health Department

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

Review of Comments on February 2017 Draft of COMAR 10.17.01

Comment ID: 2017-086

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Current Regulation

Draft Regulation

Comment

.05E This will require many facilities to demolish their old pools and pump rooms to bring into compliance and will create an undue financial burden while allowing other facilities until 2030 to comply.

Comment Submitted By

Worcester County Health Department

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

Review of Comments on February 2017 Draft of COMAR 10.17.01

Comment ID: 2017-087

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Current Regulation

Draft Regulation

Comment

.10E(12), (13),(14) Will the state provide these numbers because we do not have them in our system or they may not be accurate if they come from the Pool Operators.

Comment Submitted By

Worcester County Health Department

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

Review of Comments on February 2017 Draft of COMAR 10.17.01

Comment ID: 2017-088

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Current Regulation

Draft Regulation

Comment

.11 Under .04(B)12 MAHC 6.6.3 says you shall close for these critical violation but under .11 it says you may summarily suspend, this language needs to be consistent. If there is a critical violation of either the MAHC or 10.17.01 then you shall close an aquatic facility.

Comment Submitted By

Worcester County Health Department

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

Review of Comments on February 2017 Draft of COMAR 10.17.01

Comment ID: 2017-089

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Current Regulation

Draft Regulation

Comment

.11C This is in violation of the delegated agreement between DHMH and the county.

Comment Submitted By

Worcester County Health Department

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

Review of Comments on February 2017 Draft of COMAR 10.17.01

Comment ID: 2017-090

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Current Regulation

Draft Regulation

Comment

.12C(3) Add any major violation should also require an inspection at least every 30 days.

Comment Submitted By

Worcester County Health Department

DHMH Response

DHMH Rational

Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services

Review of Comments on February 2017 Draft of COMAR 10.17.01

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Current Regulation

Draft Regulation

Comment

.17(B) is repeated twice.

Comment Submitted By

Worcester County Health Department

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

Review of Comments on February 2017 Draft of COMAR 10.17.01

Comment ID: 2017-092

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Current Regulation

Draft Regulation

Comment

.17G How will existing lazy rivers that do not meet this requirement be treated? (ie, egress every 150 ft, jet propulsion that protrude and so on)

.17G(5) Worcester has two lazy rivers that were constructed and approved without the use of tubes

Comment Submitted By

Worcester County Health Department

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

Review of Comments on February 2017 Draft of COMAR 10.17.01

Comment ID: 2017-093

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Current Regulation

Draft Regulation

Comment

.20 Since interactive fountains now are classified as spray grounds once they become permitted will they fall under Class A or Class B.

Comment Submitted By

Worcester County Health Department

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

Review of Comments on February 2017 Draft of COMAR 10.17.01

Comment ID: 2017-094

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Current Regulation

Draft Regulation

Comment

.21 Will need these numbers from DHMH

.21A(3)a Need to define therapy station, depending on this definition this may heavily effect our therapy pools.

Comment Submitted By

Worcester County Health Department

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

Review of Comments on February 2017 Draft of COMAR 10.17.01

Comment ID: 2017-095

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Current Regulation

Draft Regulation

Comment

.22 Need to include or stipulate regulations for a Class B facility

Comment Submitted By

Worcester County Health Department

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

Review of Comments on February 2017 Draft of COMAR 10.17.01

Comment ID: 2017-096

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Current Regulation

Draft Regulation

Comment

.23B What do we do about facilities that were approved that don't comply and how long do they have to comply (many facilities have been approved where latch is not at 54 inches because it is a key or fob system.

.23B(2)c Change this to requirements in B(1)b-(1)

.23B(4) Timeframe for compliance with this as DHMH has approved multiple spray grounds that will have a hard time with this compliance and meeting the deck rules

.23B(7) What is the definition of an obstructed path

.23B(8)b We have a couple club houses that open to the pool deck in case of a fire but the pool deck is inescapable; DHMH has approved these facilities. (ex. Decatur farms, Glen Riddle, Tideland Hotel...)

Comment Submitted By

Worcester County Health Department

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

Review of Comments on February 2017 Draft of COMAR 10.17.01

Comment ID: 2017-097

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Current Regulation

Draft Regulation

Comment

.24B(c) This doesn't make sense as there is no (a) or (b)
.24B(c) We have a couple wood decks that are post 97
.24B(8) If the pool can't have a wood deck, why have this rule?

Comment Submitted By

Worcester County Health Department

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

Review of Comments on February 2017 Draft of COMAR 10.17.01

Comment ID: 2017-098

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Current Regulation

Draft Regulation

Comment

.25 We have 2 facilities that DHMH has approved that will not meet this requirement.

Comment Submitted By

Worcester County Health Department

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

Review of Comments on February 2017 Draft of COMAR 10.17.01

Comment ID: 2017-099

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Current Regulation

Draft Regulation

Comment

.27 There are multiple pump rooms in Worcester that cannot come into compliance with this rule and there is no time period for compliance

.27B(k) Add to data sheet make and model and expiration date of suction outlet covers

Comment Submitted By

Worcester County Health Department

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

Review of Comments on February 2017 Draft of COMAR 10.17.01

Comment ID: 2017-100

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Current Regulation

Draft Regulation

Comment

.28 Pre 1997 venues should only be exempt from (A), especially since you say they must comply with the labeling and instructional use under .42

Comment Submitted By

Worcester County Health Department

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

Review of Comments on February 2017 Draft of COMAR 10.17.01

Comment ID: 2017-101

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Current Regulation

Draft Regulation

Comment

.29D(1)c(i) Some of the pools where the main drains have been removed or cut out of the system don't comply with this.

Comment Submitted By

Worcester County Health Department

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

Review of Comments on February 2017 Draft of COMAR 10.17.01

Comment ID: 2017-102

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Current Regulation

Draft Regulation

Comment

.30E(3) What do we do with existing pools that have 4 skimmers and no vacuum port?

Comment Submitted By

Worcester County Health Department

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

Review of Comments on February 2017 Draft of COMAR 10.17.01

Comment ID: 2017-103

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Current Regulation

Draft Regulation

Comment

.30F(2)b We have several facilities that do not house the CO2 tanks in the equipment or chemical storage area room.

Comment Submitted By

Worcester County Health Department

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

Review of Comments on February 2017 Draft of COMAR 10.17.01

Comment ID: 2017-104

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Current Regulation

Draft Regulation

Comment

.30H(1) We have multiple single skimmer pools, wading pools and spas that do not tie into a main drain or a skimmer and were approved as part of the VGB requirements.

.30H(1)e Why limit the flow through since it is a single source of suction.

.30H(2)b Many pools, spas and wading pools exist with single skimmers and there is no exemption from this regulation, How to bring them into compliance?

Comment Submitted By

Worcester County Health Department

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

Review of Comments on February 2017 Draft of COMAR 10.17.01

Comment ID: 2017-105

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Current Regulation

Draft Regulation

Comment

.30I(2)a How does DHMH complete all of the inspections for interlock systems before the effective date?

.30I(2)b Need clarity on this, does it need to be visible and audible for the whole property to hear? There is no guarantee that the operator will be near the pool at all times. Also change “attendant” to a “Level 1 Aquatic Venue Operator” since they must be on site at all times.

Comment Submitted By

Worcester County Health Department

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

Review of Comments on February 2017 Draft of COMAR 10.17.01

Comment ID: 2017-106

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Current Regulation

Draft Regulation

Comment

.32B(2) There are approved spray grounds with suction outlet covers that do not comply with 15U.S.C.

Comment Submitted By

Worcester County Health Department

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

Review of Comments on February 2017 Draft of COMAR 10.17.01

Comment ID: 2017-107

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Current Regulation

Draft Regulation

Comment

.32G(6) This has been granted a variance previously; what will happen to the variance upon enactment of the regulations?

Comment Submitted By

Worcester County Health Department

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

Review of Comments on February 2017 Draft of COMAR 10.17.01

Comment ID: 2017-108

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Current Regulation

Draft Regulation

Comment

.33B(2)a Many pump rooms are too small to install an eyewash station

Comment Submitted By

Worcester County Health Department

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

Review of Comments on February 2017 Draft of COMAR 10.17.01

Comment ID: 2017-109

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Current Regulation

Draft Regulation

Comment

.36 How does an inspector determine lumens while conducting an inspection especially since we inspect during the day and light meters won't work?

Comment Submitted By

Worcester County Health Department

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

Review of Comments on February 2017 Draft of COMAR 10.17.01

Comment ID: 2017-110

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Current Regulation

Draft Regulation

Comment

.37B This will require facilities to add a dehumidification system because the old regs stated either a ventilation system OR a dehumidification system.

.37B(2) “has a ventilation system equipped with” makes no sense

Comment Submitted By

Worcester County Health Department

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

Review of Comments on February 2017 Draft of COMAR 10.17.01

Comment ID: 2017-111

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Current Regulation

Draft Regulation

Comment

.38C What is the health significance of it being located within 100 feet of the entrance?

Comment Submitted By

Worcester County Health Department

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

Review of Comments on February 2017 Draft of COMAR 10.17.01

Comment ID: 2017-112

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Current Regulation

Draft Regulation

Comment

.38G(2)b(iii) This will be an issue for many pools located in municipalities; many times during the summer, Ocean City Municipal water has a CC level above the .04 threshold.

Comment Submitted By

Worcester County Health Department

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

Review of Comments on February 2017 Draft of COMAR 10.17.01

Comment ID: 2017-113

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Current Regulation

Draft Regulation

Comment

.39 Pools built before 10-1-17 need to be exempt from this requirement; many DHMH approved facilities do not meet this standard (specifically the shower requirement). In the previous regulations, the facilities could be located within 500 ft and it is now 100ft.

Comment Submitted By

Worcester County Health Department

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

Review of Comments on February 2017 Draft of COMAR 10.17.01

Comment ID: 2017-114

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Current Regulation

Draft Regulation

Comment

.44A(2)b Many of the kits sold online do not have all the components listed; do operators need to mix and match to create the proper kit?

.44A(3) and .44A(4) there is no A(1)a-c should be A(2)a-c

Comment Submitted By

Worcester County Health Department

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

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Comment ID: 2017-115

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Current Regulation

Draft Regulation

Comment

.44B Just make all pools regardless of category, comply with .44B(1) especially since it is required to comply in .44B(2)b(ii)

.44B There are many pools that cannot be hard wired as the telephone company will not run copper wire anymore.

Comment Submitted By

Worcester County Health Department

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

Review of Comments on February 2017 Draft of COMAR 10.17.01

Comment ID: 2017-116

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Current Regulation

Draft Regulation

Comment

.44D Make all lifeguards have to comply with MAHC, no reason to have two separate requirements, especially since the definition of a lifeguard now states "Lifeguard" means an individual who is 15 years old or older and who meets the requirements of Chapter 6.2.1 of the MAHC".

.44D(6)e DHMH needs to keep a listing of approved lifeguard courses, this should not be left up to the LHD because we don't have the ability to audit a course and many times they will just tell us that it is equivalent to the Red Cross course. DHMH used to do this in the past and for some reason stopped.

Comment Submitted By

Worcester County Health Department

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

Review of Comments on February 2017 Draft of COMAR 10.17.01

Comment ID: 2017-117

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Current Regulation

Draft Regulation

Comment

.44E Previously therapy pools did not need CPR and First Aid but do under the new regs, Spray Grounds needed CPR and First Aid but don't under the new regs.

.44E(2)b(iii) Remove, this is just a restatement of .44E(2)b

Comment Submitted By

Worcester County Health Department

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

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Current Regulation

Draft Regulation

Comment

.44F Make all signage comply with MAHC, especially since the MAHC does not use the same verbiage as COMAR, this could cause a big conflict in court. The MAHC says children 14 and younger do not need adult supervision at non guarded pools as example of just one conflict.

.44F(2)j The MAHC does not require this sign; it will cause a conflict between Category A and B pools

Comment Submitted By

Worcester County Health Department

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

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Comment ID: 2017-119

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Current Regulation

Draft Regulation

Comment

.45D(1)d How do we verify employment? Also these guys change jobs so much, how do we verify they are still employed by the same employer? If a new card must be issued each time they change jobs that puts an undue burden on the LHD and the Level 1 operator who will need to pay for a new card each time.

.45D It states a challenge exam will be offered by the Secretary. Who creates this exam?

Comment Submitted By

Worcester County Health Department

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

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Current Regulation

Draft Regulation

Comment

.45G Is the operator only suspended in a particular county or throughout the state especially if we must recognize Certification is valid throughout the state? Since it is valid throughout the state, then DHMH should be responsible for card issuance instead of the LHD.

Comment Submitted By

Worcester County Health Department

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

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Current Regulation

Draft Regulation

Comment

.46 Since there are new classifications I hope that all current instructors must have to resubmit their course outlines and get a new certification from the State.

.46 How will this be rolled out, what will happen to current operators and how will they be classified?

Comment Submitted By

Worcester County Health Department

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

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Current Regulation

Draft Regulation

Comment

.47A Undue burden for condo's or places without onsite maintenance, especially if they can't adjust chemicals.

Comment Submitted By

Worcester County Health Department

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

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Comment ID: 2017-123

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Current Regulation

Draft Regulation

Comment

.48 The chemical ranges should model the MAHC; it is unreasonable to expect operators and inspectors to remember two to three different sets of chemical ranges depending on the pool they are at, may also create a legal conflict. Make it simple.

Comment Submitted By

Worcester County Health Department

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

Review of Comments on February 2017 Draft of COMAR 10.17.01

Comment ID: 2017-124

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Current Regulation

Draft Regulation

Comment

.49 The chemical ranges should model the MAHC, it is unreasonable to expect operators and inspectors to remember two to three different sets of chemical ranges depending on the pool they are at, may also create a legal conflict. Make is simple.

Comment Submitted By

Worcester County Health Department

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

Review of Comments on February 2017 Draft of COMAR 10.17.01

Comment ID: 2017-125

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Current Regulation

Draft Regulation

Comment

.50 The records should mirror the MAHC; it is unreasonable to expect operators and inspectors to remember two to three different sets of chemical ranges depending on the pool they are at. Make is simple. If the MAHC doesn't address how many times specific records must be taken, overwrite them in COMAR.

Comment Submitted By

Worcester County Health Department

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

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Comment ID: 2017-126

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Current Regulation

Draft Regulation

Comment

.50B(1)a There is no C in this section

.50B(1)b There is no C in this section

.50B(2) There is no C in this section

.50B(4)e What does the “text unchanged” mean or reference?

.50B(1)B Suggest that readings be required at least 2 hours before closing to ensure proper disinfectant levels

Comment Submitted By

Worcester County Health Department

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

Review of Comments on February 2017 Draft of COMAR 10.17.01

Comment ID: 2017-127

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Current Regulation

Draft Regulation

Comment

.51 Need to add “a test kit that is able to measure at a minimum 0.5 ppm of combined chlorine”; the generic Taylor kit that most operators use cannot measure combined chlorine at that low of a level. This would cause an issue with a venue putting up the CC sign or keeping a lifeguard safe, if the CC level is above 0.5 ppm

.51 All test kits should be required to measure pH from 6.5 to 8.0

Comment Submitted By

Worcester County Health Department

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

Review of Comments on February 2017 Draft of COMAR 10.17.01

Comment ID: 2017-128

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Current Regulation

Draft Regulation

Comment

.53 This should model the MAHC; it is unreasonable and potentially liable to have two different ways to handle and record an incident.

Comment Submitted By

Worcester County Health Department

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

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Comment ID: 2017-129

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Current Regulation

Draft Regulation

Comment

.53 This does not mention how a facility using bromine should respond; current science suggests that all bromine facilities should have secondary disinfection or drain the facility when a fecal occurs regardless of if it is solid or loose.

Comment Submitted By

Worcester County Health Department

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

Review of Comments on February 2017 Draft of COMAR 10.17.01

Comment ID: 2017-130

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Current Regulation

Draft Regulation

Comment

.53 How will they measure chlorine levels above 20 ppm when the generic Taylor kit will not allow this?

Comment Submitted By

Worcester County Health Department

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

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Comment ID: 2017-131

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Current Regulation

Draft Regulation

Comment

.54A Remove and just make all spas replace water according to .54C since they say the same thing

Comment Submitted By

Worcester County Health Department

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

Review of Comments on February 2017 Draft of COMAR 10.17.01

Comment ID: 2017-132

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Current Regulation

Draft Regulation

Comment

.58 Will need a standard/definition for corrosion, how can an inspector prove that a wire that is corroded is not able to properly bond?

Comment Submitted By

Worcester County Health Department

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

Review of Comments on February 2017 Draft of COMAR 10.17.01

Comment ID: 2017-133

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Current Regulation

Draft Regulation

Comment

.61A(1) and B(1) There is no 10.17.03; what will happen to facilities that are constructed before the regulations are adopted.

Comment Submitted By

Worcester County Health Department

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

Review of Comments on February 2017 Draft of COMAR 10.17.01

Comment ID: 2017-134

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Current Regulation

Draft Regulation

Comment

.62 and .63 Are previously approved compliances and variances still applicable or do they need to be rewritten?

Comment Submitted By

Worcester County Health Department

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

Review of Comments on February 2017 Draft of COMAR 10.17.01

Comment ID: 2017-135

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Current Regulation

Draft Regulation

Comment

Also located multiple uses of semi public pool throughout the code that needs to be changed to semi public recreational pool and semi public spas that need to be changed to semi public recreational spas

Comment Submitted By

Worcester County Health Department

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

Review of Comments on February 2017 Draft of COMAR 10.17.01

Comment ID: 2017-136

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Current Regulation

Draft Regulation

Comment

Section .02 Exclusions.

(B, 1) An aquatic venue that is: (1) Completely emptied of water;

Comment: I believe you mean to say, completely emptied of water after each use. However the way it is worded most of the existing recreational and semi-public outdoor pools are completely drained of water in the spring of the year. Most spas are drained completely of water when they are doing a water change. Are you intending that they are exempt from these regulations? There is no time listed that complies with the exclusion.

Comment Submitted By

Frank H. Goldstein, President, Chesapeake Aquatic Consultants, LLC.

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

Review of Comments on February 2017 Draft of COMAR 10.17.01

Comment ID: 2017-137

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Current Regulation

Draft Regulation

Comment

Section .03 Documents Incorporated by Reference.

(A)Model Aquatic Health Code (MAHC), as amended except for Chapters 4.7.4, 6.3.1.1 and 6.3.1.2.

Comment: In this section you do not state that this is the 2016 revision to the MAHC. This is important as the MAHC is amended ever two years, so unless you are including all future revisions, sight unseen, it is important to know which version we are to refer to.

Comment Submitted By

Frank H. Goldstein, President, Chesapeake Aquatic Consultants, LLC.

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

Review of Comments on February 2017 Draft of COMAR 10.17.01

Comment ID: 2017-138

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Current Regulation

Draft Regulation

Comment

Section .04 Definitions.

In (33) you refer to “Public Aquatic Venue”. In (34) you refer to “Recreational aquatic venue” but in (40) you change the wording to “Semi-Recreational Aquatic Venue”

Comment: I would like to suggest changing the name in (40) to “Semi-Public Aquatic Venue” or “Semi-Public Recreational Aquatic Venue”.

Comment Submitted By

Frank H. Goldstein, President, Chesapeake Aquatic Consultants, LLC.

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

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Comment

Section .04 Definitions

In (53a) you reference ANSI/APSP-16

Comment Submitted By

Frank H. Goldstein, President, Chesapeake Aquatic Consultants, LLC.

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
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Comment

In Section .04 Definitions

In (56b, i) you state that a Water Recreational attraction includes but is not limited to “a piece of water play equipment”.

Comment: What is included and what is not included in your definition is unclear. Is a swimming pool sliding board included or excluded based on this definition? What items were you thinking about that would be included or excluded based on this definition?

Comment Submitted By

Frank H. Goldstein, President, Chesapeake Aquatic Consultants, LLC.

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

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Comment

Section .05.A-D. Previously Constructed Aquatic Facilities and Venues

Comment: Why the separation of aquatic facilities and venues constructed before February 10, 1997 and those built or received approval between February 10, 1997 and October 1, 2018? It seems that the requirements are the same. If not please explain how they differ.

In Section .05 A.1. You say the facility is exempt from bringing the facility fully up to these regulations. But in subsection F you say they must bring the facility fully up to the regulations by 2030. Why if the facility is functioning properly and being properly maintained, why would it need to spend hundreds of thousands of dollars to do that?

Comment Submitted By

Frank H. Goldstein, President, Chesapeake Aquatic Consultants, LLC.

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

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Comment

Section .05.E Previously Constructed Aquatic Facilities and Venues

Comment: Many hotel/motel pools have changes of ownership every so many years. So, the aquatic venue hasn't changed but all of a sudden the new owners need to bring the aquatic venue up to the current regulations for a Category A pool. This could cost the owner of the facility the sale of the property, if hundreds of thousands of dollars will immediately need to be put into the aquatic venue which is not a profit center but an amenity for the guests staying at the hotel. Again, if the facility is properly operating and properly equipped, why?

Comment Submitted By

Frank H. Goldstein, President, Chesapeake Aquatic Consultants, LLC.

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
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Comment

Section .24 Decks (subsection B) (1) (c).

Comment: First, I don't think this is the correct letter or number for this subsection, as there is no prior subsection a or b. That withstanding there appears to be an issue with wood decks in this section. In B(c)(i) it states for a Category B aquatic venue: If it is a public pool or spray ground the deck cannot be constructed of wood. In B(c)(2)(b) It states that for a public spa the deck cannot be constructed of wood. However in B(8) It states that a wood deck has a gravel and plastic ground barrier or a concrete subdeck. If you can't install a wood deck the why is there criteria for the subdeck?

Comment Submitted By

Frank H. Goldstein, President, Chesapeake Aquatic Consultants, LLC.

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
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Comment

Section .30 Circulation System Components

In subsection E.(2) (c) (Aquatic Facility Cleaning, for a Category B aquatic venue, It states: When a vacuum fitting is provided within an aquatic venue, the fitting is: (in subsection (ii)) “Provided with a flush removable cap or a spring loaded safety cover either of which shall be in place at all times except when in use ...”

In ANSI/APSP/ICC-1, 2014, It States. “11.10 Accessibility. When provided, vacuum cleaner fitting(s) shall be located in an accessible position(s) at least 6 in. (152 mm) and no greater than 18 in. (457 mm) below the water level, or as an attachment to the skimmer(s). They shall be installed in accordance with the latest published edition of ANSI/APSP/ICC-7.”

In ANSI/APSP/ICC-7, 2013, it states: “4.6 Wall vacuum fitting(s). When used, vacuum cleaner fitting(s) shall be located in an accessible position(s) no greater than 12 inches (305 mm) below the water level and the self closing, self latching fitting shall comply with IAPMO SPS 4. In addition, the vacuum piping shall be equipped with a valve to remain in the closed position when not in use.

NOTICE: SPS-4 requires tools to remove, but due to incompatible components, there have been multiple cases of removal upon each usage, sometimes resulting in loss of components, and the essential safety feature.

Make sure that the attachment of a vacuum hose in normal usage never leads to removal of the self-closing self-latching feature.

Comment: Based on the above you could not use the flush removable cap as it is not a self-closing, self-latching fitting. Additionally it does not require a tool for opening creating a condition where the facility user might accidentally remove the cover and become entrapped. The flush mounted cap is not compatible with the criteria in ANSI/APSP/ICC-1, 2014, or ANSI/APSP/ICC-7, 2013. I suggest that you remove the flush mounted cap and replace it with wording like “A spring loaded or other approved safety cover” or use the wording from the referenced standards.

Comment Submitted By

Frank H. Goldstein, President, Chesapeake Aquatic Consultants, LLC.

**Maryland Department of Health and Mental Hygiene
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DHMH Response

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Comment

Section .32 Entrapment Prevention

In subsection F “An owner shall ensure that a submerged suction outlet: (1) Is provided with a cover that complies with the American National Standard for Public Swimming Pools;”

Comment: The only wording on this subject within the ANSI/APSP/ICC-1, 2014 all refers to other ANSI Standards. It states:

“11.1 Entrapment avoidance. The submerged suction piping and fittings shall comply with the latest published edition of ANSI/APSP/ICC-7.

11.2 Testing and certification. All suction outlet(s) (other than skimmers) shall be provided with covers that have been tested by an ILAC (International Laboratory Accreditation Cooperation) as required by the latest published edition of ANSI/APSP-16.

11.3 Outlets per pump. Outlets per pump shall be in accordance with the latest published edition of ANSI/APSP/ICC-7.”

Is this what you are referencing as you don’t indicate where in the standard to find what you are referencing?

Comment Submitted By

Frank H. Goldstein, President, Chesapeake Aquatic Consultants, LLC.

DHMH Response

DHMH Rational

Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services

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Comment

Section .32 Entrapment Prevention

In subsection G. 2-4 it states:

- (2) Except as provided in §G(4), the maximum velocity in the design of the drain piping does not exceed 6 feet per second when 20 percent of the circulation system maximum flow is drawn through the drain piping of any single drain;
- (3) The maximum velocity in the design of the skimmer piping does not exceed 6 feet per second when 80 percent of the circulation system maximum flow is drawn through the skimmer piping;
- (4) For an aquatic venue utilizing a gutter system, the maximum velocity in the design of the drain piping does not exceed 6 feet per second when 50 percent of the circulation system maximum flow is drawn through the drain piping of any single drain;

However in ANSI/APSP/ICC-1 Section 12.3 It states:

12.3 Where automatic surface skimmers are used as the sole overflow system, at least one surface skimmer shall be provided for each 500 sq. ft. (46 m²) or fraction thereof of the water surface area. Recessed areas such as stairs, swimouts, and spas shall not be considered in the calculation. When skimmers are used, they shall be located to maintain effective skimming action.

12.3.1 A single pump circulation system shall be designed to handle a minimum of 100% of the pool turnover rate through skimmers.

12.3.2 A multiple pump circulation system shall be designed to handle a minimum 100% of the pool turnover rate through the skimmers.

12.3.3 When an equalizer line is used, the opening at the pool wall shall be protected with a suction outlet cover/grate in accordance with the latest published edition of ANSI/APSP-16.

12.4 When a perimeter-type surface skimming system is used as the sole surface skimming system, it shall extend around a minimum of 50% of the pool (see Section 12.3).

12.4.1 When perimeter surface skimming systems are used, they shall be connected to the circulation system with a system surge capacity of not less than 1 gallon for each sq. ft. (40.7 liters per square meter) of pool surface. The capacity of the perimeter overflow system is permitted to be considered as a portion of the surge capacity.

12.5 The hydraulic capacity of the surface skimming overflow system shall be capable of handling 100% percent of the circulation flow.

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Comment: So based on the ANSI/APSP/ICC-1 stating that the skimmers must be capable of 100% of the flow for design. How can the State allow the flow rate calculation be anything less than 100%? If the skimmer line is closed and the main drain line is open the main drain line is capable of carrying greater than 20% of the design flow or the entire system. If the main drain line is closed and all the flow is going through the skimmer line more than the designed 80% of the flow is now going through the skimmer line. In both scenarios you will probably be exceeding the flow rating of the fixture and its cover. This is why the wording from the VGB was 100% of flow.

In ANSI/APSP/ICC-7, 2013 it states:

“Maximum system flow rate: For purposes of this suction entrapment avoidance standard, maximum system flow rate is defined as the maximum potential flow when all available system flow is directed through the submerged suction outlet(s). See Section 4.4.9 for specific procedures required to determine the system specific, maximum system flow rate.

4.4.9.1 Maximum system flow rate—unsecured control systems. The maximum system flow rate is the pump’s flow rate at the highest user selectable speed while the system is configured to operate at the lowest achievable system TDH when all flow is from the submerged suction system (skimmers off), the filter(s) is clean (when included), and all pressure-side valves are in the open (maximum flow) position. This operating point is determined by one of the following:

- Measuring with flow meter accurate to $\pm 10\%$ and installed according to the manufacturers specification, or
- Computing using complete system TDH calculations and then looking up the flow rate using the manufacturers certified pump curve, or
- Measuring system TDH at the pump’s drain plugs and then looking up the flow rate using the manufacturer’s certified pump curve.

Additionally, there are two typos in your Section .32 Entrapment Prevention, subsection G. 2-4:

(4) For an aquatic venue utilizing a gutter system, the maximum velocity in the designe of the drain piping does not exceed 6 feet per second when 50 percent of the ciruculation system maximum flow is drawn through the drain piping of any single drain;

Comment Submitted By

Frank H. Goldstein, President, Chesapeake Aquatic Consultants, LLC.

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
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Comment

Section .45 Aquatic Venue Qualified Operator Certification

Comment: Three levels of operator certification, Level 1, Level 2 and Level 3.

This is going to create problems for your inspectors to determine who should have what certification and who is on duty and is a Level 1 Operator employed by a Level 3 operator. It will require dividing one level of training program into three levels of training program.

Previously, we technically had two levels of operator training if you included the offering for the limited public pool operator and then the one for everyone else. What we found in the last 18 years of offering pool operator training was that not enough people signed up for the limited public pool operator class so they ended up going into the full program.

Comment Submitted By

Frank H. Goldstein, President, Chesapeake Aquatic Consultants, LLC.

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

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Comment

Section .48 Disinfection of an Aquatic Venue

Subsection (2)(a)(ii) “Silver ions at or below 0.05 ppm;”

Comment: Silver ions at this level cannot be field tested so how are the inspectors and/or the operators to comply with this requirement?

Comment Submitted By

Frank H. Goldstein, President, Chesapeake Aquatic Consultants, LLC.

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

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Comment

Section .49 Water Chemistry of an Aquatic Venue

In Subsection (B)(7) You use the wording for salt generator facility: "... the amount of total dissolved solids is maintained so that it does not exceed 1,500 ppm above the starting value of the total dissolved solids as documented on the aquatic venue's data sheet for the aquatic venue when balanced;" But you use different wording for a non-salt generator facility to: "the amount of total dissolved solids is maintained so that it does not exceed 1,500 ppm;"

Comment: I would like to recommend that the wording be the same "not exceed 1,500 ppm above the starting value of the total dissolved solids as documented on the aquatic venue's data sheet for the aquatic venue when balanced."

Additionally I would recommend you add wording to Subsection (B) (7) as indicated below:

"... the amount of total dissolved solids is maintained so that it does not exceed 1,500 ppm above the starting value of the total dissolved solids as documented on the aquatic venue's data sheet for the aquatic venue when balanced and the salt for operation has been added;"

Without this additional wording we fall back on the same problem we had in the previous version of the standard where the equipment manufacturers wanted 3500 – 4200 ppm of salt in the water in addition to the water balance chemicals and the standard said, "for a salt water pool ... the total dissolved solids may not exceed 3000 ppm." Which was less than the level of salt added to the venues. And your answer to me was "Then they will have to file for a variance."

Comment Submitted By

Frank H. Goldstein, President, Chesapeake Aquatic Consultants, LLC.

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

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Comment

Section .49 Water Chemistry of an Aquatic Venue

In Subsection (C)(D) and (E) it states; “An owner shall ensure that a qualified operator” shall do several things.

Comment: It does not state what Level of Certification this person is; Level 1 2 or 3. If it is a level 1 operator they are not trained in supplemental chemicals such as water additives nor are they trained in sanitizers.

Comment Submitted By

Frank H. Goldstein, President, Chesapeake Aquatic Consultants, LLC.

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

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Comment

Section .50 Operating Records Required

In subsection (B)(7)(e) it states: “If an aquatic venue is equipped with a suction vacuum release system, that the suction vacuum release system releases suction when tested;”

Comment: By what test method? Closing the suction valves to the pump until the unit kicks the system off is not a valid test that the system will cut off in less than a complete blockage of the suction outlets. It will not tell the operator if it will shut off with hair entrapment, limb entrapment or possibly evisceration. You need to provide direction on this so every facility that utilizes SVRS know what is expected of them for this test.

Comment Submitted By

Frank H. Goldstein, President, Chesapeake Aquatic Consultants, LLC.

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

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Comment

Section .50 Operating Records Required

In subsection (B)(7)(h) it states: “The certified qualified operator has verified compliance and signed or initialed the checklist.”

Comment: Again I ask which of the three levels of certification this applies to, Level 1, 2, 3 or all?

Comment Submitted By

Frank H. Goldstein, President, Chesapeake Aquatic Consultants, LLC.

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

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Comment

Section .51 Test Kits

In subsection (A) again it states: “In order to comply with the requirements of Regulation .50 of this chapter, an owner shall ensure that a qualified operator uses:”

Comment: Again I ask to clarify which of the three levels of certification?

Comment Submitted By

Frank H. Goldstein, President, Chesapeake Aquatic Consultants, LLC.

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

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Comment

Section .51 Test Kits

In subsection (A)(5) it states: “(5) A cyanuric acid test kit with an indicator range from 0 to 100 ppm, if cyanuric acid is used in the aquatic venue.”

Comment: I am not aware of any CYA test kit that reads down to 0 ppm for cyanuric acid. The lowest number of the majority of kits I have used only go down to 30 ppm.

Comment Submitted By

Frank H. Goldstein, President, Chesapeake Aquatic Consultants, LLC.

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

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Comment

Section .52 Sanitary Quality of Water

In subsection (A) you state that routine testing is not required for microorganism testing. In Subsection (C) you state that should the Secretary determine that there are microorganisms in the water in sufficient quantity to close the venue:

- “(1) Shall immediately close the aquatic venue and perform the requirements in Regulation .53A of this chapter; and
- (2) May not operate the aquatic venue until compliance with §A(1)—(2) of this regulation is achieved.”

Comment: I understand what the subsections state my question is how does the operator know that they have achieved subsection (2)? Or is it presumed that if they followed and performed the requirements of Regulation .52A that they have met this compliance? In other words how will the operator know the venue is free of pathogenic organisms?

Comment Submitted By

Frank H. Goldstein, President, Chesapeake Aquatic Consultants, LLC.

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

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Comment

Section .54 Water Replacement

In subsection (A), you state:

“A. An owner of a Category A aquatic venue shall ensure that a qualified operator replaces the entire volume of water within the aquatic venue according to the requirements of the Model Aquatic Health Code.”

Comment: I did not find a reference in the MAHC to replacing the entire volume of water within the aquatic venue. Would you please provide the Section and subsection numbers.

I did find:

5.6.7.4A Water Replenishment

5.6.7.4.1 Volume

Removal of water from the POOL and replacement with make-up water shall be performed as needed to maintain water quality.

5.6.7.4.2 Discharged

A volume of water totaling at least four gallons (15 L) per BATHER per day per AQUATIC VENUE shall be either: 1) Discharged from the system, or 2) Treated with an alternate system meeting the requirements of MAHC 4.7.4 and reused.

There is no mention of this 5.6.7.4.2 for either the Category A or Category B aquatic venues which should be very important to both since it will reduce contaminants both microorganisms and combined chlorine (in particular, CBPs). You do include the Water Replacement Interval for spas but seem to have ignored the one for other aquatic venues.

Comment Submitted By

Frank H. Goldstein, President, Chesapeake Aquatic Consultants, LLC.

DHMH Response

DHMH Rational

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Comment

Section .57 Aquatic Venue Incident Reports

In subsection (A), you state:

“A. An owner of an aquatic venue shall ensure that a qualified operator is reporting:

(1) An incident occurring at an aquatic venue to the Secretary within 24 hours of the incident on an Aquatic Venue Incident Report Form, which complies with §B of this regulation, when the incident:

(a) Results in:

(i) Death; or

(ii) Transportation of patron to a medical facility; or

(b) Requires resuscitation, including CPR, oxygen, or AED;”

Comment: First, this is an Owner’s report, more than an operator’s report, as there are items that will require an investigation to properly complete the form, there are questions that the operator will be incapable of knowing. There will be questions that the operator will know that the owner will have to find out. All of this while the media and others will be in their face. Second, if one of the conditions that would kick in this form occur at an aquatic venue the insurer of the owner will have to be contacted to do an investigation. This takes time. Third, the staff may need to go through bereavement therapy to deal with the incident.

Rushing the completion of this form could result in winning or losing a lawsuit based on the information provided that will eventually get to the public.

I understand the Secretary’s need to know there was an incident within the 24 hour period, but having the paperwork completed within that time may not be possible even if you say so in the Regulations.

I thought we had resolved this previously by saying the Secretary was to be informed of a listed incident within 24 hours, but the paperwork would not need to be sent to the Secretary for up to 5 days after the incident. I am not sure that this is enough time to get all 32 of the items you list you want included on the report. But it at least gives the facility some time to deal with all that will be going on.

Comment Submitted By

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

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Frank H. Goldstein, President, Chesapeake Aquatic Consultants, LLC.

DHMH Response

DHMH Rational

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Comment

Section .58 Electrical Systems and Bonding

In subsection (A)(2 & 3), you state:

- (2) All metal and electrical equipment is tested according to the frequency specified in the Model Aquatic Health Code by a licensed electrician; and
- (3) A licensed electrician:
 - (a) Signs a bonding certification affidavit; and
 - (b) Submits the bonding certification affidavit to the Department before the previous bonding certification affidavit expires.

Comment: I have been unable to find the reference in the MAHC that provides me that frequency. Please provide the referenced section. Is there going to be a form coming from the Secretary for the affidavit so it is standardized?

In subsection (C)(1) you state:

- “A bonding certification affidavit:
 - (1) For a Category A aquatic venue shall be valid for 6 months from the date signed by the licensed electrician; ...”

Comment: This is not inexpensive to have a licensed electrician coming out every 6 months and doing this testing. This will add several hundred dollars to a facilities operating costs. Have there been bonding issues that have injured anyone in this State that is prompting this excessive frequency? Most states that require bonding electrical inspections only require them every 2–3 years.

Comment Submitted By

Frank H. Goldstein, President, Chesapeake Aquatic Consultants, LLC.

DHMH Response

DHMH Rational

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Comment

If there have been no health risks or safety problems with this group of smaller, country club, apartment, condominium and hotel/motel facilities then why are we trying to classify them with the larger, more populated facilities that face different operational problems? While they all face many common potential problems, as we all know, the majority of problems are a direct effect of the bather load. The lower the bather load the less likely we are going to see significant health and safety problems.

Perhaps there should be two sets of standards, one for the lower usage facilities and one for municipal, collegiate and water parks and/or pay for play venues. This second group would be more in line with the intent of the MAHC. I know because I was on one of the development committees.

This division into two standards could be done either using your current semi-public vs. recreational public pool designation or it could be done based on your proposed Category A and Category B venues in the current draft you have asked us to review.

This division into two standards could be done either using your current semi-public vs. recreational public pool designation or it could be done based on your proposed Category A and Category B venues in the current draft you have asked us to review.

Comment Submitted By

Frank H. Goldstein, President, Chesapeake Aquatic Consultants, LLC.

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

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Comment

As you are aware the MAHC is a set of voluntary guidelines that the CDC created based on peer reviewed best practices and in some cases science. There is no mandate that you accept these guidelines. There was no expectation when the MAHC was being developed, that every health department would enact every guideline without thinking how they fit into the needs of the communities they served. No one who was on the MAHC committees thought that health departments around the country would use them all. Depending on the type of the facility and its classification many of these guidelines could be considered overkill in their scope. Nowhere within the MAHC guidelines does it state or recommend that existing pools brought up to these standards. They knew that the cost of compliance in most cases would be greater than the ability of the facilities to pay for.

The MAHC is reviewed and modified every two years. It is not an ANSI approved set of guidelines, why is that? Why has the CDC not gone through this process? The answer is that they are guidelines rather than standards, and as such should not supersede ANSI approved Standards.

The MAHC will be reviewed and modified six times before the requirement for the Category B pools must come in full compliance with the MAHC according to your proposed regulations. Which really means that until 2028s revisions, which won't be made public until early in 2029 the Category B pools won't have a full understanding of what will need to be done to be in compliance in 2030 until ten to eleven months prior to the State mandated deadline. If they start planning in 2020, what they are planning on could change radically by 2028 and may cost them even more money to comply with.

Comment Submitted By

Frank H. Goldstein, President, Chesapeake Aquatic Consultants, LLC.

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
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Comment

First and foremost is, what health risk or safety problem has DHMH confronted with the existing aquatic venues that would warrant the need for these facilities to spend hundreds of thousands of dollars to comply with the Model Aquatic Health Code (MAHC), that could not have been handled based on the previous recommendations of the Aquatic Advisory Committee which you have totally left out of the process for the last year or two.

If there has not been any significant health or safety problems then this proposed regulation is nothing more than forcing all aquatic venues to one standard.

Comment Submitted By

Frank H. Goldstein, President, Chesapeake Aquatic Consultants, LLC.

DHMH Response

DHMH Rational

Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services

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Comment

Section .02: Exclusions

This chapter does not apply to:

B. An aquatic venue that is:

(3) Refilled with water between each use; and

Inquiry on whether or not this should say, “Completely drained and refilled between each use.”

Comment Submitted By

Michael H. Slattery, Citizens Services Specialist, Prince George’s County Health Department

DHMH Response

DHMH Rational

Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services

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Comment

.03 Previously Constructed Pools and Spas.

Documents Incorporated By Reference

B. American National Standard for Public Swimming Pools (ANSI/APSP/ICC-1 2014) except Articles 6.8, 6.9.1, 6.9.3, 7.1.6, 7.1.7, 7.1.7.1, 8.1.1, 12.3, 12.3.1, 12.3.2, 13.2.1.2, 13.2.3, 15.3, 17.4, 17.5.1, 18.1, 18.1.2, 18.1.2.1, 18.1.2.2, 18.1.2.3, 18.6, and 22.2.1;

Indication that several of these are duplicated, such as 12.3, which would [include] 12.3.1 and 12.3.2, etc.

Comment Submitted By

Michael H. Slattery, Citizens Services Specialist, Prince George's County Health Department

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

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Comment

.03 Previously Constructed Pools and Spas.

Documents Incorporated By Reference

(E) American National Standard for Residential Inground Swimming Pools (ANSI/APSP/ICC-5 2011);

Inquiry on what situation this would apply, should commercial standards apply to all public facilities.

Comment Submitted By

Michael H. Slattery, Citizens Services Specialist, Prince George's County Health Department

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

Review of Comments on February 2017 Draft of COMAR 10.17.01

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Comment

.04 Documents Incorporated by Reference

Definitions

(2) “AF” means alkalinity factor.

Indication that the Prince George’s County permitting system is not set up for this presently, and it is unclear whether or not the system would be able to be changed to show this information.

Comment Submitted By

Michael H. Slattery, Citizens Services Specialist, Prince George’s County Health Department

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

Review of Comments on February 2017 Draft of COMAR 10.17.01

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Comment

.04 Documents Incorporated by Reference

Definitions

(7) *“Aquatic venue type” means standard pool, spa, spray ground, therapy pool, wading pool, or water recreational attraction.*

Inquiry on whether or not there is a need to create a venue type when there is already a category and a classification.

Comment Submitted By

Michael H. Slattery, Citizens Services Specialist, Prince George’s County Health Department

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

Review of Comments on February 2017 Draft of COMAR 10.17.01

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Comment

.04 Documents Incorporated by Reference

Definitions

(12) “Critical violation” means for a:

(c) Category A or Category B venue, a PH level:

Inquiry on why the violation value is now lower than 7.2 and higher than 7.8 and inquiring on where the 6.5 and 8.0 value comes from, when later in the regulations 7.2-7.8 is used.

Comment Submitted By

Michael H. Slattery, Citizens Services Specialist, Prince George’s County Health Department

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

Review of Comments on February 2017 Draft of COMAR 10.17.01

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Comment

.04 Documents Incorporated by Reference

Definitions

(13) “*Department*” means the *Department of Health and Mental Hygiene*.

Inquiry on whether this would also include the local health department in a Home Rule situation.

Comment Submitted By

Michael H. Slattery, Citizens Services Specialist, Prince George’s County Health Department

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

Review of Comments on February 2017 Draft of COMAR 10.17.01

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Comment

.04 Documents Incorporated by Reference

Definitions

(17) *“Full compliance inspection” means an inspection that verifies compliance with this chapter.*

Inquiry because “guard station” is used later for wave pools with no definition listed.

Comment Submitted By

Michael H. Slattery, Citizens Services Specialist, Prince George’s County Health Department

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

Review of Comments on February 2017 Draft of COMAR 10.17.01

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Comment

.04 Documents Incorporated by Reference

Definitions

(22) Limited Public-Use Pool

(b) “Limited public-use pool” does not include a pool that is emptied of water, disinfected, and refilled with water between each use.

Clarification that all pools are disinfected so by this statement, no pool is of limited public use.

Comment Submitted By

Michael H. Slattery, Citizens Services Specialist, Prince George’s County Health Department

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

Review of Comments on February 2017 Draft of COMAR 10.17.01

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Comment

.04 Documents Incorporated by Reference

Definitions

(23) “Major Violation” means, for a:

(a) Category A venue, failure to comply with:

(i) Regulation .06, Construction and Alteration Permits, of this chapter;

(ii) Regulation .07, Replacements, of this chapter;

(iii) Regulation .09, Approval After Construction of Alteration, of this chapter; or

Inquiry on why none of the items in Category B venues are listed such as iv-ix.

Comment Submitted By

Michael H. Slattery, Citizens Services Specialist, Prince George’s County Health Department

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

Review of Comments on February 2017 Draft of COMAR 10.17.01

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Comment

.04 Documents Incorporated by Reference

Definitions

(23) “Major Violation” means, for a:
(b) Category B venue, failure to comply with:
(ix) Regulation .51, Test Kits, of this chapter.

Indication that this should be a critical violation because there is no test for individuals to ensure pH and disinfectant are within proper limits.

Comment Submitted By

Michael H. Slattery, Citizens Services Specialist, Prince George’s County Health Department

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

Review of Comments on February 2017 Draft of COMAR 10.17.01

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Comment

.04 Documents Incorporated by Reference

Definitions

(25) Non-substantial Alteration

(a) “Non-substantial alteration” means to:

(i) Change or modify an equipment room, a bathhouse, a component, or the configuration of an aquatic venue where the total cost of the work does not exceed 50% of the replacement cost of the aquatic venue or indoor aquatic facility;

Indication stating that there needs to be more information to define specificities. The passage states the existence of an equipment room, but not what equipment should be in the room. Additionally, a request that restrooms should be reviewed to ensure that proper fixtures are installed.

Comment Submitted By

Michael H. Slattery, Citizens Services Specialist, Prince George’s County Health Department

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

Review of Comments on February 2017 Draft of COMAR 10.17.01

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Comment

.04 Documents Incorporated by Reference

Definitions

(30) “Private aquatic venue,” means an aquatic venue that is:

(b) “Private aquatic venue” includes an aquatic venue at a private residence used for short-term rentals including weekly, monthly, or seasonal rentals.

Request stating that this might need to be expanded to cover exclusions for house parties including a large number of paid guests.

Comment Submitted By

Michael H. Slattery, Citizens Services Specialist, Prince George’s County Health Department

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

Review of Comments on February 2017 Draft of COMAR 10.17.01

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Comment

.04 Documents Incorporated by Reference

Definitions

(31) *“Protective Barrier” means an obstruction or partition at the transition area between a shallow and deep area of a therapy pool.*

Indication that this should not be limited to therapy pools.

Comment Submitted By

Michael H. Slattery, Citizens Services Specialist, Prince George’s County Health Department

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

Review of Comments on February 2017 Draft of COMAR 10.17.01

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Current Regulation

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Comment

.04 Documents Incorporated by Reference

Definitions

(34) “Recreational aquatic venue” means a pool or spa that:

(e) Is equipped with a swimming pool sliding board, diving platform, water slide, water flume, or water recreational play equipment that is built into or attached to the aquatic venue structure;

Indication that some smaller recreational clubs have larger pool slides.

Comment Submitted By

Michael H. Slattery, Citizens Services Specialist, Prince George’s County Health Department

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

Review of Comments on February 2017 Draft of COMAR 10.17.01

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Current Regulation

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Comment

.04 Documents Incorporated by Reference

Definitions

(34) “Recreational aquatic venue” means a pool or spa that:

(e) Is equipped with a swimming pool sliding board, diving platform, water slide, water flume, or water recreational play equipment that is built into or attached to the aquatic venue structure;

(v) An apartment complex, housing subdivision, or mobile home park with more than ten units, except as provided in §B(36)(a)(v) of this regulation; or

Indication that some swim clubs have larger slides as well, and may be larger than most apartment complex pools.

Comment Submitted By

Michael H. Slattery, Citizens Services Specialist, Prince George’s County Health Department

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

Review of Comments on February 2017 Draft of COMAR 10.17.01

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Current Regulation

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Comment

.04 Documents Incorporated by Reference

Definitions

(34) “Recreational aquatic venue” means a pool or spa that:

(g) Is used more than 4 times a week for swimming lessons, water safety instruction, or swimming competition.

Indication that some swimming clubs have larger slides and these may be larger than most apartment complexes.

Comment Submitted By

Michael H. Slattery, Citizens Services Specialist, Prince George’s County Health Department

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

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Comment

.04 Documents Incorporated by Reference

Definitions

(40) *“Semi-recreational aquatic venue” mean a pool or spa at a facility that:*

(a) Has use restricted to an individual:

(ii) Holding membership at the facility, where the facility is an adult health club, retirement community, marina, condominium, or similar facility;

Request that swimming clubs be added instead of similar facility, as this term is too broad and non-descriptive.

Comment Submitted By

Michael H. Slattery, Citizens Services Specialist, Prince George’s County Health Department

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

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Comment

.04 Documents Incorporated by Reference

Definitions

(40) *“Semi-recreational aquatic venue” mean a pool or spa at a facility that:*

(b) Has a pool or that is not:

(ii) Available to an individual upon the payment of a fee for the use of the pool and spa;

Inquiry about whether or not this fee is a one-time daily use fee or a club membership fee.

Comment Submitted By

Michael H. Slattery, Citizens Services Specialist, Prince George’s County Health Department

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

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Comment

.04 Documents Incorporated by Reference

Definitions

(52) *“Tube ride” means a pool designed to move an individual on a tube, raft, or other floating support along a channel filled with water.*

Inquiry on whether or not this refers to river type or slides that use tubes.

Comment Submitted By

Michael H. Slattery, Citizens Services Specialist, Prince George’s County Health Department

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

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Comment

.04 Documents Incorporated by Reference

Definitions

(56) Water Recreation Attraction

(b) “Water recreational attraction” includes but is not limited to a:

(i) Piece of water play equipment;

Inquiry on what type of equipment is indicated here, such as lily pads, rock walls, or floating objects.

Comment Submitted By

Michael H. Slattery, Citizens Services Specialist, Prince George’s County Health Department

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

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Comment

.05 Definitions

Previously Constructed Aquatic Facilities Venues.

(C) The owner of an aquatic facility or venue that was constructed before February 10, 1997 or that received construction approval from the Secretary between February 10, 1997 and October 1, 2018 shall maintain the following minimum turnover times based on the aquatic venue type:

<i>Type of Aquatic Venue</i>	<i>Minimum Turnover Time (t)</i>
<i>Any Aquatic Venue Not Specifically Listed</i>	<i>480 minutes</i>
<i>Limited Public-Use Pool</i>	<i>720 minutes</i>
<i>Spa</i>	<i>30 minutes</i>
<i>Spray Ground</i>	<i>120 minutes</i>
<i>Therapy Pool</i>	<i>360 minutes</i>
<i>Wading Pool</i>	<i>120 minutes</i>
<i>Water Recreational Attraction</i>	<i>360 minutes</i>

Indication that this information should be rechecked, as facilities such as Six Flags may have trouble with this.

Comment Submitted By

Michael H. Slattery, Citizens Services Specialist, Prince George's County Health Department

DHMH Response

DHMH Rational

Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services

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Comment

.05 Definitions

Previously Constructed Aquatic Facilities Venues.

(E) At the time of change in ownership, the aquatic venue shall become a Category A aquatic venue and the new owner shall ensure that the aquatic venue complies fully with the requirements of this chapter pertaining to a Category A aquatic venue.

Inquiry if, for change of ownership, there should be a time frame to come into compliance, as currently, this would not give owners much time or notice.

Comment Submitted By

Michael H. Slattery, Citizens Services Specialist, Prince George's County Health Department

DHMH Response

DHMH Rational

Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services

Review of Comments on February 2017 Draft of COMAR 10.17.01

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Current Regulation

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Comment

.06 Construction, Alteration, and Replacement Permits for Recreational Pools, Semipublic Pools, and Public Spas.

Construction, Non-Substantial Alteration, and Substantial Alteration Permits.

(C) To obtain a permit, an owner of a Category A aquatic venue shall submit to the Secretary:

(2) The application review fee required by COMAR 10.01.17.02; and

Request to add any local health department fees here as well.

Comment Submitted By

Michael H. Slattery, Citizens Services Specialist, Prince George's County Health Department

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

Review of Comments on February 2017 Draft of COMAR 10.17.01

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Comment

.06 Construction, Alteration, and Replacement Permits for Recreational Pools, Semipublic Pools, and Public Spas.

Construction, Non-Substantial Alteration, and Substantial Alteration Permits.

H. The local health department may not approve a local building permit for or that includes construction, non-substantial alteration, or substantial alteration of an aquatic facility or venue until the plans and specifications for construction, non-substantial alteration, or substantial alteration of an aquatic facility or venue have been approved by the Secretary.

Inquiry on whether or not this should have language accounting for home rule counties.

Comment Submitted By

Michael H. Slattery, Citizens Services Specialist, Prince George's County Health Department

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

Review of Comments on February 2017 Draft of COMAR 10.17.01

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Comment

.06 Construction, Alteration, and Replacement Permits for Recreational Pools, Semipublic Pools, and Public Spas.

Construction, Non-Substantial Alteration, and Substantial Alteration Permits.

I. The Secretary shall review the plans and application for a permit within 30 business days of receipt of the application.

Indication that this timeframe may be unachievable in Prince George's County.

Comment Submitted By

Michael H. Slattery, Citizens Services Specialist, Prince George's County Health Department

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

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Comment

.07 Permit for Construction of Part of a Recreational Pool, Semipublic Pool, or Public Spa Replacements.

C. The local health department may approve a local building permit for or that includes replacement of a component at an aquatic facility or venue before the replacement application is approved by the Secretary.

Inquiry on what would happen if the State denied a replacement application but the local health department had already approved the same application. This would create conflict, and there is no protocol on how this may get resolved. Should the State have to approve all replacements prior to installation?

Comment Submitted By

Michael H. Slattery, Citizens Services Specialist, Prince George's County Health Department

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

Review of Comments on February 2017 Draft of COMAR 10.17.01

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Comment

**.10 Suspension or Revocation of an Operating Permit
Operating Permit.**

A. A person may not operate an aquatic venue without an annual operating permit, issued by the Secretary, except that in the case of an aquatic venue that has received a conditional approval pursuant to Regulation .09D of this chapter, the Secretary may issue a nontransferable 30 calendar day permit for the temporary operation of the aquatic venue.

Inquiry on the important of issuing conditional permits. Instead, if the facility is not ready, then it is not ready.

Comment Submitted By

Michael H. Slattery, Citizens Services Specialist, Prince George's County Health Department

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

Review of Comments on February 2017 Draft of COMAR 10.17.01

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Comment

.10 Suspension or Revocation of an Operating Permit

Operating Permit.

(E) An operating permit shall contain the following information:

(9) The category of the aquatic venue;

(10) The classification of the aquatic venue;

(11) The type of aquatic venue;

(12) The volume of the aquatic venue in gallons;

(13) For a Category A aquatic venue, the theoretical peak occupancy;

(14) For a Category B aquatic venue, the user load;

(15) The status of night swimming; and

Indication that Prince George's County will likely be unable to have this information printed on the distributed permits, as the County is in the process of replacing the permit system, and therefore are not in the position to make change in the existing system.

Comment Submitted By

Michael H. Slattery, Citizens Services Specialist, Prince George's County Health Department

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

Review of Comments on February 2017 Draft of COMAR 10.17.01

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Comment

.12 Conflicts of Regulations

Inspections and Right of Entry.

(1) Enter, at a reasonable time, public or private property for the purpose of inspecting and investigating conditions relative to the enforcement of this chapter; and

Inquiry on who is responsible for determining the definition of what a reasonable time is.

Comment Submitted By

Michael H. Slattery, Citizens Services Specialist, Prince George's County Health Department

DHMH Response

DHMH Rational

Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services

Review of Comments on February 2017 Draft of COMAR 10.17.01

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Comment

**.12 Conflicts of Regulations
Inspections and Right of Entry.**

(2) Publish inspections form according to Chapter 6.6.2 of the Model Aquatic Health Code.

Inquiry on a discrepancy where MAHC states reports may be posted and the State makes it mandatory.
Why does the State want these to be mandatory?

Comment Submitted By

Michael H. Slattery, Citizens Services Specialist, Prince George's County Health Department

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

Review of Comments on February 2017 Draft of COMAR 10.17.01

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Comment

.12 Conflicts of Regulations

Inspections and Right of Entry.

B. A person may not deny or interfere with the Secretary's entry onto public or private property to inspect or to take enforcement action pursuant to this chapter.

Argument that prevention of inspection should constitute an immediate suspension.

Comment Submitted By

Michael H. Slattery, Citizens Services Specialist, Prince George's County Health Department

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

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Comment

.12 Conflicts of Regulations

Inspections and Right of Entry.

*(6) An inspection of the aquatic venue within 2 business days of receiving a complaint; and
(7) An inspection of the aquatic venue within 24 hours of being aware of a drowning, near drowning, or other incident.*

Indication that Prince George's County currently uses 3 business days as the standard. Additionally, an inquiry on how this maintenance might affect off-work hours, such as weekends or holidays.

Comment Submitted By

Michael H. Slattery, Citizens Services Specialist, Prince George's County Health Department

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

Review of Comments on February 2017 Draft of COMAR 10.17.01

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Comment

.12 Conflicts of Regulations

Inspections and Right of Entry.

E. All inspection shall be concluded using a form prescribed by the Secretary.

What about the Home Rule counties and the use of electronic forms?

Comment Submitted By

Michael H. Slattery, Citizens Services Specialist, Prince George's County Health Department

DHMH Response

DHMH Rational

Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services

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Comment

**.14 Standards for Public Spas
Standards for Recreational and Semi-recreational Pools.**

- (1) This chapter;*
- (2) The Model Aquatic Health Code; and*
- (3) Applicable State and local codes.*

Indication that these statements should be uniform throughout this chapter. Additionally, the second statement adopts the entire MAHC and there is an inquiry on if this statement is applicable to sections of the MAHC.

Comment Submitted By

Michael H. Slattery, Citizens Services Specialist, Prince George's County Health Department

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

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Comment

**.16 Standards for Water Recreational Attractions
Standards for Limited Public-Use Pools**

Inquiry on how the State currently treats Home Day Care facilities. Does the State currently track all Day Care facilities to check and permit their pools?

Comment Submitted By

Michael H. Slattery, Citizens Services Specialist, Prince George's County Health Department

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

Review of Comments on February 2017 Draft of COMAR 10.17.01

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Comment

.16 Standards for Water Recreational Attractions

Standards for Limited Public-Use Pools

(C) An organized group, agency, or other person using a limited public-use pool for swimming lessons or water safety training shall ensure that water safety supervision is provided as follows:

(1) An individual certified as an American Red Cross Water Safety Instructor, or with an equivalent certification that has been approved by the Secretary, is on site to conduct swimming lessons or water safety training; and

(2) Aquatic rescue staff is on site as follows:

(a) An individual certified in American Red Cross Basic Water Rescue, or with equivalent certification as approved by the Secretary, for each ten bathers, or fraction of ten bathers, if the pool:

Request that CPR and First Aid should also be required.

Comment Submitted By

Michael H. Slattery, Citizens Services Specialist, Prince George's County Health Department

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

Review of Comments on February 2017 Draft of COMAR 10.17.01

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Current Regulation

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Comment

.16 Standards for Water Recreational Attractions

Standards for Limited Public-Use Pools

(C) An organized group, agency, or other person using a limited public-use pool for swimming lessons or water safety training shall ensure that water safety supervision is provided as follows:

(1) An individual certified as an American Red Cross Water Safety Instructor, or with an equivalent certification that has been approved by the Secretary, is on site to conduct swimming lessons or water safety training; and

(2) Aquatic rescue staff is on site as follows:

(b) An individual certified in American Red Cross Lifeguarding, or with an equivalent certification as approved by the Secretary, for each 25 bathers, or fraction of 25 bathers, if the pool:

(iii) Does not have a rescue pole that can be practically used to reach beyond the midpoint of the pool, or an obstruction, such as a wall or tall fencing, exists within the pool enclosure that restricts the use of the pole; or

Inquiry on if there should be a requirement to have some sort of other reach assist device such as a rescue tube.

Comment Submitted By

Michael H. Slattery, Citizens Services Specialist, Prince George's County Health Department

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

Review of Comments on February 2017 Draft of COMAR 10.17.01

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Current Regulation

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Comment

.17 Standards for Public Wading Pools

Standards for Water Recreational Attractions.

An owner shall ensure that:

B. Plans for supervision, attendants, and lifeguards are submitted as part of the construction, non-substantial alteration or substantial alteration plans and include safety personnel at all potentially hazardous activity areas;

Indication that this is not required for other venue types, however, should it be considered?

Comment Submitted By

Michael H. Slattery, Citizens Services Specialist, Prince George's County Health Department

DHMH Response

DHMH Rational

Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services

Review of Comments on February 2017 Draft of COMAR 10.17.01

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Comment

.17 Standards for Public Wading Pools

Standards for Water Recreational Attractions.

An owner shall ensure that:

E. A wave pool is provided with an emergency shut-off switch at each guard station;

Indication that at Six Flags, not every station has an emergency shut-off switch, but the facility has rescue procedures, which are initiated to result in the stoppage of the wave pool. Having a procedure similar would be just as successful as a button at every station, therefore suggesting that this may not be the only solution. There are several central towers that do not have stop buttons, however, all outside edge chairs do. Additionally, there is no definition of “guard station.”

Comment Submitted By

Michael H. Slattery, Citizens Services Specialist, Prince George’s County Health Department

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

Review of Comments on February 2017 Draft of COMAR 10.17.01

Comment ID: 2017-202

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Current Regulation

Draft Regulation

Comment

.17 Standards for Public Wading Pools

Standards for Water Recreational Attractions.

An owner shall ensure that:

G. A lazy river:

(1) Does not have:

(b) Obstructions around the perimeter of the lazy river, such as bridges or landscaping, that impact lifeguarding, sight lines, or rescue operations;

(2) Has:

(a) A means of access and egress provided at 150 foot intervals around the lazy river;

(b) A handhold, meeting the requirements of Regulation .25 of this chapter, on at least one side of the lazy river for the entire perimeter of the river; and

(iv) Plumbed to pumps connected to audible and visual alarms which when activated will cause the ~~operate~~ operator to close the lazy river until corrective action is taken;

Unless obstructions are corrected through overlapping zones of coverage to mitigate such obstructions, a lazy river may not have any obstructions.

The lazy river at Six Flags may not include what is listed in the requirements for a lazy river.

Inquiry on the purpose of the alarm activation, as not enough information is given. Additionally, there should be a technical change here from the operate to the operator.

Comment Submitted By

Michael H. Slattery, Citizens Services Specialist, Prince George's County Health Department

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

Review of Comments on February 2017 Draft of COMAR 10.17.01

Comment ID: 2017-203

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Current Regulation

Draft Regulation

Comment

.17 Standards for Public Wading Pools

Standards for Water Recreational Attractions.

An owner shall ensure that:

H. A decorative fountain or waterfall connected to a pool or spa circulation system does not create a health or safety hazard;

What does this mean? What is the State trying to protect against?

Comment Submitted By

Michael H. Slattery, Citizens Services Specialist, Prince George's County Health Department

DHMH Response

DHMH Rational

Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services

Review of Comments on February 2017 Draft of COMAR 10.17.01

Comment ID: 2017-204

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Current Regulation

Draft Regulation

Comment

.17 Standards for Public Wading Pools

Standards for Water Recreational Attractions.

An owner shall ensure that:

I. A spray fixture, fountain, piece of play equipment, bridge, ramp, stair, float, swing, or other recreational equipment located within a pool or spa:

(2) Is limited to a shallow water area;

(4) Has pipes or support columns that are at least 6 inches in diameter;

Indication that rock climb walls are designed to be installed in deep water.

Additionally, inquiry about the installation of pipes or support columns by manufacturer instructions, rather than instructions listed by the State.

Comment Submitted By

Michael H. Slattery, Citizens Services Specialist, Prince George's County Health Department

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

Review of Comments on February 2017 Draft of COMAR 10.17.01

Comment ID: 2017-205

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Current Regulation

Draft Regulation

Comment

.17 Standards for Public Wading Pools

Standards for Water Recreational Attractions.

An owner shall ensure that:

L. A pump reservoir or surge tank is provided for a swimming pool slide, water feature, or water slide circulation pump intake and:

(1) Is made of concrete or other impervious material with a smooth slip-resistant finish;

(2) Has inlets through a weir or a gravity-fed drain with a secure grate;

(3) Has a volume equal to 2 minutes of the combined flow of all pumps connected to the reservoir or tank;

Inquiry on the pump reservoir or surge tank, as some water is drawn directly from the pool.

Additionally, the inclusion of a smooth surface on the interior of the tank would not ensure an easier clean; slip-resistant finishes may make the tanks harder to clean. Is this detail necessary to include?

Comment Submitted By

Michael H. Slattery, Citizens Services Specialist, Prince George's County Health Department

DHMH Response

DHMH Rational

Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services

Review of Comments on February 2017 Draft of COMAR 10.17.01

Comment ID: 2017-206

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Current Regulation

Draft Regulation

Comment

.17 Standards for Public Wading Pools

Standards for Water Recreational Attractions.

An owner shall ensure that:

N. A return from a filtration system is placed to provide even and positive circulation and to eliminate any dead spots.

Technical edit to remove the “and.”

Comment Submitted By

Michael H. Slattery, Citizens Services Specialist, Prince George’s County Health Department

DHMH Response

DHMH Rational

Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services

Review of Comments on February 2017 Draft of COMAR 10.17.01

Comment ID: 2017-207

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Current Regulation

Draft Regulation

Comment

.19 User Load

Standards for Therapy Pools

A. For a Category A aquatic venue, an owner shall ensure that a therapy pool:

(1) Is in compliance with:

(a) This chapter;

(b) Applicable State and local codes;

(c) The Model Aquatic Health Code; and

(d) Sections B(2)—(3) of this regulation;

This is a technical edit, where it is requested that the order of these items should be the same for every chapter, as this order changes throughout the chapter.

Comment Submitted By

Michael H. Slattery, Citizens Services Specialist, Prince George's County Health Department

DHMH Response

DHMH Rational

Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services

Review of Comments on February 2017 Draft of COMAR 10.17.01

Comment ID: 2017-208

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Current Regulation

Draft Regulation

Comment

.21 Barriers

User Load and Theoretical Peak Occupancy

A. The Secretary shall determine the user load, as defined in Regulation .04B of this chapter, for each aquatic venue based on the following criteria:

Technical edit, where it is requested that the phrase, “for each aquatic venue,” be moved forward in the sentence.

Comment Submitted By

Michael H. Slattery, Citizens Services Specialist, Prince George’s County Health Department

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

Review of Comments on February 2017 Draft of COMAR 10.17.01

Comment ID: 2017-209

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Current Regulation

Draft Regulation

Comment

.21 Barriers

User Load and Theoretical Peak Occupancy

A. The Secretary shall determine the user load, as defined in Regulation .04B of this chapter, for each aquatic venue based on the following criteria:

(4) For a spray ground, one individual is allowed for every 10 square feet of splash zone.

C. An owner shall ensure that:

Technical edit, where this section is missing a section lettered B, before C.

Comment Submitted By

Michael H. Slattery, Citizens Services Specialist, Prince George's County Health Department

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

Review of Comments on February 2017 Draft of COMAR 10.17.01

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Current Regulation

Draft Regulation

Comment

.22 Decks

Aquatic Venue Site

C. Has a walkway between an aquatic venue and appurtenant buildings such as a bathhouse or equipment room;

Inquiry in the difference between venue and facility, as there is confusion because no definition exists differentiating the two. As well, the walkway is vague as there is no description on what it can be made of, (i.e. pavement, grass, etc.)

Comment Submitted By

Michael H. Slattery, Citizens Services Specialist, Prince George's County Health Department

DHMH Response

DHMH Rational

Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services

Review of Comments on February 2017 Draft of COMAR 10.17.01

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Current Regulation

Draft Regulation

Comment

.23 Equipment Rooms

Barriers

B. For a Category B aquatic venue:

(1) Except as set forth in §§B(2)—(7) of this regulation, an owner shall ensure that an aquatic venue, including the required deck area, is completely surrounded by a barrier that complies with the following requirements:

(i) Is located toward the shallow end of the aquatic venue;

(v) Has a minimum width of 4 feet;

If the purpose of this is to provide a second access gate, then it should be stated. If this is a safety means of egress, then the location should not be near the main access gate. The only problem would be the limiting access to an unsecured gate, where if an emergency were to occur, an uncontrolled amount of people could come in.

Comment Submitted By

Michael H. Slattery, Citizens Services Specialist, Prince George's County Health Department

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

Review of Comments on February 2017 Draft of COMAR 10.17.01

Comment ID: 2017-212

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Current Regulation

Draft Regulation

Comment

.23 Equipment Rooms

Barriers

B. For a Category B aquatic venue:

(2) An owner shall ensure that a barrier at a semi-recreational aquatic venue:

(a) Has a minimum height of 60 inches;

Inquiry as to why this height is not 72 inches like all others.

Comment Submitted By

Michael H. Slattery, Citizens Services Specialist, Prince George's County Health Department

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

Review of Comments on February 2017 Draft of COMAR 10.17.01

Comment ID: 2017-213

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Current Regulation

Draft Regulation

Comment

.23 Equipment Rooms

Barriers

B. For a Category B aquatic venue:

(4) Except as provided by §§B(5)—(8) of this regulation, an owner shall ensure that a wading pool or a spray ground is separated from all other bodies of water by a barrier that:

(a) Has:

(iv) Entrance gates that are self-closing, self-latching and hung to open toward the wading pool or spray ground; and

Inquiry as to why this gate opens inward if there is an ADA patron, then 4feet of deck. A 36-inch gate does not leave much space to maneuver. All egress doors open out so in the case of an emergency it will not slow people seeking help down. The gate should swing out, or both ways.

Comment Submitted By

Michael H. Slattery, Citizens Services Specialist, Prince George's County Health Department

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

Review of Comments on February 2017 Draft of COMAR 10.17.01

Comment ID: 2017-214

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Current Regulation

Draft Regulation

Comment

.23 Equipment Rooms

Barriers.

A. For a Category A aquatic venue, an owner shall ensure that an aquatic venue, including the required deck area, is completely surrounded by a barrier that complies with Chapter 4.8.6 of the Model Aquatic Health Code.

B. For a Category B aquatic venue:

(8) An owner shall ensure that:

(b) Except when the gates to the aquatic venue are equipped with panic hardware that would allow patrons to exit the deck area even when the aquatic venue is closed, fire exits do not exit onto an aquatic venue deck.

Indication that multi-use buildings such as recreational centers, condominium activity areas, and HOA meeting rooms typically have doors that open to the deck. Most of these structures are one-story structures and the deck would be a safe place to be as individuals could be far enough away from any fire. This should default to fire code instead, and if they do not have an issue with it, this should not be included as a regulation by the State.

Comment Submitted By

Michael H. Slattery, Citizens Services Specialist, Prince George's County Health Department

DHMH Response

DHMH Rational

Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services

Review of Comments on February 2017 Draft of COMAR 10.17.01

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Current Regulation

Draft Regulation

Comment

.24 [Pipe Material.

An owner shall ensure that pipe material for a public pool or spa conforms to COMAR 09.20.01.]

Decks.

A. For a Category A aquatic venue, an owner shall ensure that all decks comply with Chapter 4.8 of the Model Aquatic Health Code.

Is this the correct section of MAHC?

4.12.1.5 spa deck

4.12.2.6 slide deck

4.12.8.7 play venue deck

5.6.9 Decks

5.8 decks and equipment

Comment Submitted By

Michael H. Slattery, Citizens Services Specialist, Prince George's County Health Department

DHMH Response

DHMH Rational

Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services

Review of Comments on February 2017 Draft of COMAR 10.17.01

Comment ID: 2017-216

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Current Regulation

Draft Regulation

Comment

.24 [Pipe Material.

An owner shall ensure that pipe material for a public pool or spa conforms to COMAR 09.20.01.]
Decks.

(c) Is not:

Technical edit to remove parenthesis around the letter C and capitalize the letter.

Comment Submitted By

Michael H. Slattery, Citizens Services Specialist, Prince George's County Health Department

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

Review of Comments on February 2017 Draft of COMAR 10.17.01

Comment ID: 2017-217

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Current Regulation

Draft Regulation

Comment

.24 [Pipe Material.

An owner shall ensure that pipe material for a public pool or spa conforms to COMAR 09.20.01.]
Decks.

C. Except as provided in §B(2) of this regulation, an owner may not have light poles, structural supports, decorative fountains, waterfalls, and other obstacles or obstructions within 4 feet of a pool or within the required deck area of a spa or spray ground.

What about structural supports for play equipment? This should be more specific to building structural supports.

Comment Submitted By

Michael H. Slattery, Citizens Services Specialist, Prince George's County Health Department

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

Review of Comments on February 2017 Draft of COMAR 10.17.01

Comment ID: 2017-218

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Current Regulation

Draft Regulation

Comment

.25 Circulation Systems.

Handholds.

An owner shall ensure that a handhold that complies with Chapter 4.5.14 of the Model Aquatic Health Code is installed anytime the water depth of the aquatic venue exceeds 24 inches.

ANSI has a broader definition and description of handhold; the inquiry is why this would become more restricted now, as regulated by the State. Can language be added to clarify that ANSI cannot exclude pools that have previously been approved? Should this also have a Category A/B designation to allow for pools that need to be altered time to save for it?

Comment Submitted By

Michael H. Slattery, Citizens Services Specialist, Prince George's County Health Department

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

Review of Comments on February 2017 Draft of COMAR 10.17.01

Comment ID: 2017-219

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Current Regulation

Draft Regulation

Comment

.26 Circulation System Components

Infinity Edges.

B. For a Category B aquatic venue, an owner shall ensure that:

(6) The perimeter deck of an infinity edge pool must surround a minimum of 50 percent of the pool;

This should be item (5) or moved down to item (8) to group the other of similar topics.

Comment Submitted By

Michael H. Slattery, Citizens Services Specialist, Prince George's County Health Department

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

Review of Comments on February 2017 Draft of COMAR 10.17.01

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Current Regulation

Draft Regulation

Comment

.27 Diving Area and Equipment

Equipment Rooms

(d) A floor:

(ii) Is equipped with an automatic closer;

(iii) Is equipped with an automatic lock; and

(v) Is installed and maintained to ensure that the door closes completely and latches without human assistance;

Concern that not a safe mode of operation for operators. When in the equipment room, the door should be able to be left open in case of accident or emergency. If there is only one employee at the pool and the door closes and locks, it is possible no one could hear the problem arise. People working in these rooms should have an unobstructed means of egress, and in the event of an emergency people should be able to help. If the only key is being used by the person in the equipment room how is help going to gain access? The door should remain open when anyone is in the room. Ultimately, this is not safe and could be fatal.

Additionally, current code requires the door be lockable. If the problem of people not locking the door, this could be an enforcement issue; the door should not lock automatically.

Comment Submitted By

Michael H. Slattery, Citizens Services Specialist, Prince George's County Health Department

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

Review of Comments on February 2017 Draft of COMAR 10.17.01

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Draft Regulation

Comment

.27 Diving Area and Equipment

Equipment Rooms

(h) An exhaust vent intake placed at a height less than or equal to 3 feet from the floor of the equipment room, discharged to limit exposure to the public;

If we dictate the placement of the intake then we also must dictate the placement of the makeup as they should not both be at the same level and should not both be on the same wall. Not all materials that are used or produced in an equipment room are heavier than air and if intake and make up are both low then all the air space above the vent could be toxic. If they are both at the same level then you do not proved the mixing of the air in a manner to properly provide clean air.

This should require makeup air low and exhaust high to draw in fresh air. If you do it the other way then with the natural heating of a building as heat rises you will create resistance reducing your overall air flow. You should have them on opposite walls to force the air to move across the room to help exhaust more foul air.

Comment Submitted By

Michael H. Slattery, Citizens Services Specialist, Prince George's County Health Department

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

Review of Comments on February 2017 Draft of COMAR 10.17.01

Comment ID: 2017-222

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Draft Regulation

Comment

.28 Suction Entrapment Prevention

Pipe Material and Identification.

C. All piping is marked with directional arrows to indicate flow direction during filtration according to the Model Aquatic Health Code; and

D. All valves are:

(2) Described as to their function in an operating instruction manual kept in the equipment room.

This should use the wording from MAHC “where needed.”

Indication that the expectation is that if an individual has completed an operator’s course, then you would know how to operate a filter system. This is not needed.

Comment Submitted By

Michael H. Slattery, Citizens Services Specialist, Prince George’s County Health Department

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

Review of Comments on February 2017 Draft of COMAR 10.17.01

Comment ID: 2017-223

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Current Regulation

Draft Regulation

Comment

.29 Chemical Storage Area.

Circulation Systems.

A. Gauges and Release Valves.

(2) For a Category B aquatic venue, an owner shall ensure that the circulation system for an aquatic venue includes the following, a:

(c) Vacuum or compound gauge on the influent side of a pump;

(d) Flow meter that:

(i) Indicates the rate of flow through the circulation system;

(ii) Has a permanent scale readable in gpm;

(iii) Is accurate to within 10 percent of the actual flow; and

Can this compound gauge be used at all locations? Digital flow meters do not have permanent scales on them. How would we test this?

Comment Submitted By

Michael H. Slattery, Citizens Services Specialist, Prince George's County Health Department

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

Review of Comments on February 2017 Draft of COMAR 10.17.01

Comment ID: 2017-224

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Current Regulation

Draft Regulation

Comment

.29 Chemical Storage Area.

Circulation Systems.

B. Turnover Rate

(1) For a Category A aquatic venue, an owner shall ensure that an aquatic venue is constructed to produce a minimum turnover rate compliant with the Model Aquatic Health Code.

Indication that these times are rather quick. Six Flags wave pool is 800,000+ gallons that would require them to run almost 7,000 gallons per minute overtime.

Comment Submitted By

Michael H. Slattery, Citizens Services Specialist, Prince George's County Health Department

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

Review of Comments on February 2017 Draft of COMAR 10.17.01

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Current Regulation

Draft Regulation

Comment

.29 Chemical Storage Area.

Circulation Systems.

D. Surface to Bottom Flow Ration and Water Circulation

(1) An owner of an aquatic venue constructed with:

(a) Both surface and bottom outlets shall ensure that piping for:

(i) Surface outlets is designed to accommodate 80 percent of the maximum flow; and

(ii) Bottom outlets is designed to accommodate 20 percent of the maximum flow;

(b) A gutter surface overflow system shall ensure that piping for:

(i) Surface outlets is designed to accommodate 50 percent of the maximum flow; and

(ii) Bottom outlets is designed to accommodate 50 percent of the maximum flow; and

(c) Only surface outlets shall ensure that:

(i) Where the width of the aquatic venue exceeds 30 feet, return inlets are installed on both the wall and floor of the aquatic venue; and

Indication that putting this information here allows for greater than 80/20 during normal operation, as long as it is met during the maximum. Inquiry on why the return inlets cannot be installed on the floor. The restriction should be that, "if wider than 30 feet, individuals may not only use the wall."

Comment Submitted By

Michael H. Slattery, Citizens Services Specialist, Prince George's County Health Department

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

Review of Comments on February 2017 Draft of COMAR 10.17.01

Comment ID: 2017-226

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Current Regulation

Draft Regulation

Comment

.30 Hydrostatic Relief Valves

An owner shall ensure that an in-ground recreational pool, semipublic pool, or public spa has hydrostatic relief valves as needed to relieve the hydrostatic pressure from ground water when the pool or spa is empty.

Circulation System Components.

A. Except as provided in §§B and H(1) of this regulation, an owner of an aquatic venue shall ensure that circulation system components, including skimmers, pumps, filters, multiport valves, adjustable output rate chemical feeders, flow-through chemical feeders, chemical process equipment, chlorine generators, ion generators, and other aquatic venue equipment comply with Equipment for Swimming Pools, Spas, Hot Tubs and Other Recreational Water Facilities.

B. The Secretary shall accept aquatic venue circulation system components as meeting the requirements set forth in §A of this regulation if these items are in:

*(1) The current, published NSF listing of swimming pool, spa, or hot tub circulation system components;
or*

(2) A listing from an organization accredited by the American National Standards Institute (ANSI) for the certification of circulation system components.

Inquiry that it may be better to only say products certified by certain organizations will be allowed.

Comment Submitted By

Michael H. Slattery, Citizens Services Specialist, Prince George's County Health Department

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

Review of Comments on February 2017 Draft of COMAR 10.17.01

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Current Regulation

Draft Regulation

Comment

.30 Hydrostatic Relief Valves

An owner shall ensure that an in-ground recreational pool, semipublic pool, or public spa has hydrostatic relief valves as needed to relieve the hydrostatic pressure from ground water when the pool or spa is empty.

Circulation System Components.

D. Chemical Feeder and Process Equipment

(c) If combined chlorine is between 0.5 ppm and 1 ppm:

(i) A sign is posted at the entrance to the aquatic venue notifying patrons that the combined chlorine level is between 0.5 ppm and 1 ppm and that individuals with respiratory conditions which may be exacerbated by these levels should limit use of the aquatic venue; and

(ii) For a guarded aquatic venue, guard exposure to the aquatic venue with combined chlorine levels between 0.5 ppm and 1 ppm is limited to 30 minutes per hour; and

(d) If combined chlorine is at or above 1 ppm the aquatic venue is closed, superchlorinated to reach breakpoint, and the combined chlorine level is brought below 1 ppm prior to reopening.

(2) For a Category B aquatic venue, an owner shall ensure that:

(b) If combined chlorine is between 0.5 ppm and 1 ppm:

(i) (i) A sign is posted at the entrance to the aquatic venue notifying patrons that the combined chlorine level is between 0.5 ppm and 1 ppm and that individuals with respiratory conditions which may be exacerbated by these levels should limit use of the aquatic venue; and

Indication that with no restriction to the air flow for an outdoor pool, this may be too extreme. If it is required, signs should be posted outside of the pool as a warning to passersby to notify them of such danger. What training should be provided to allow guards to inform patrons?

Comment Submitted By

Michael H. Slattery, Citizens Services Specialist, Prince George's County Health Department

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

Review of Comments on February 2017 Draft of COMAR 10.17.01

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

Review of Comments on February 2017 Draft of COMAR 10.17.01

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Current Regulation

Draft Regulation

Comment

.30 Hydrostatic Relief Valves

An owner shall ensure that an in-ground recreational pool, semipublic pool, or public spa has hydrostatic relief valves as needed to relieve the hydrostatic pressure from ground water when the pool or spa is empty.

Circulation System Components.

E. Aquatic Facility Cleaning

(3) For a Category B aquatic venue, an owner may use skimmer outlet pipes for vacuum purposes for a circulation system with four or fewer skimmers.

Why is there a limit if individuals have more than four, and they have good suction - is this important?

Comment Submitted By

Michael H. Slattery, Citizens Services Specialist, Prince George's County Health Department

DHMH Response

DHMH Rational

Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services

Review of Comments on February 2017 Draft of COMAR 10.17.01

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Current Regulation

Draft Regulation

Comment

.30 Hydrostatic Relief Valves

An owner shall ensure that an in-ground recreational pool, semipublic pool, or public spa has hydrostatic relief valves as needed to relieve the hydrostatic pressure from ground water when the pool or spa is empty.

Circulation System Components.

I. For a:

(2) Category B aquatic venue, an owner shall ensure that all chemical feeders that operate independently of the circulation pump are provided with:

(b) A visible and audible alarm located so as to be visible by an on-duty lifeguard or attendant which, when activated, will immediately cause the operator to close the aquatic venue until such time that the problem is corrected and if applicable, the corrective action is verified by the Secretary.

What is the purpose of this alarm? What is it meant to notify patrons of?

Comment Submitted By

Michael H. Slattery, Citizens Services Specialist, Prince George's County Health Department

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

Review of Comments on February 2017 Draft of COMAR 10.17.01

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Current Regulation

Draft Regulation

Comment

.32 Illumination of Water, Deck, and Walkaway

An owner shall ensure that an indoor recreational pool, semipublic pool, or public spa, or one used during nighttime, is provided with:

Entrapment Prevention

G. An owner shall ensure that:

(5) A comprehensive written maintenance program is prepared and implemented that includes procedures for the qualified operator to:

(e) Close the aquatic venue if the circulation pump is off for longer than 15 minutes; and

If the water chemistry is within compliance, then could it be longer – up until such a point that the levels are out of compliance?

Comment Submitted By

Michael H. Slattery, Citizens Services Specialist, Prince George's County Health Department

DHMH Response

DHMH Rational

Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services

Review of Comments on February 2017 Draft of COMAR 10.17.01

Comment ID: 2017-231

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Current Regulation

Draft Regulation

Comment

.32 Illumination of Water, Deck, and Walkaway

An owner shall ensure that an indoor recreational pool, semipublic pool, or public spa, or one used during nighttime, is provided with:

Entrapment Prevention

G. An owner shall ensure that:

(7) For a Category A aquatic venue, entrapment prevention complies with the Model Aquatic Health Code.

Should there be code for Category B venues?

Comment Submitted By

Michael H. Slattery, Citizens Services Specialist, Prince George's County Health Department

DHMH Response

DHMH Rational

Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services

Review of Comments on February 2017 Draft of COMAR 10.17.01

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Current Regulation

Draft Regulation

Comment

.33 Ventilation of an Indoor Recreational Pool, Semipublic Pool, or Public Spa

An owner shall ensure that an indoor recreational pool, semipublic pool, or public spa has:

Chemical Storage Arena.

B. For a Category B aquatic venue, an owner shall ensure that a chemical storage area is provided that is:

(2) Equipped with:

- (a) An emergency eyewash station that complies with Regulation .60 of this chapter;*
- (b) A floor or deck that is protected against substantial chemical damage by the application of a coating or sealant capable of resisting attack by the chemicals to be stored; and*
- (c) Corrosion-resistant permanent signage that includes:*
 - (i) A warning sign against unauthorized entry;*
 - (ii) A sign specifying the expected hazards;*
 - (iii) A sign specifying the location of the associated Safety Data Sheets; and*
 - (iv) A product chemical hazard National Fire Protection Association chart;*
- (3) Constructed and operated to minimize the transfer of chemical fumes into any interior space of a building intended for occupation; and*

If this is not a MOSH requirement, it may be a OSHA requirement.

How would we test whether or not a floor or deck is protected against substantial chemical damage?

Where is (c) going to be required?

Entrapment

Comment Submitted By

Michael H. Slattery, Citizens Services Specialist, Prince George's County Health Department

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

Review of Comments on February 2017 Draft of COMAR 10.17.01

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Current Regulation

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Comment

.33 Ventilation of an Indoor Recreational Pool, Semipublic Pool, or Public Spa

An owner shall ensure that an indoor recreational pool, semipublic pool, or public spa has:

Chemical Storage Arena.

C. Category B aquatic venue where the chemical storage area is indoors, an owner shall ensure that the chemical storage area has:

(1) Walls, floors, doors, ceilings, and other building surfaces joined to each other tightly;

(iii) Hinges, tracks, or other supports;

(d) Are installed and maintained to ensure that the doors close completely and latch without human assistance; and

(e) Are designed and installed to be opened by one hand from the inside of the room under all circumstances, without the use of a key or tool;

Some structures do not have sealed with. If sealed, then these should be conditioned to prevent mold growth.

Again, automatic locks and any details surrounding this would be unsafe and may be fatal.

Comment Submitted By

Michael H. Slattery, Citizens Services Specialist, Prince George's County Health Department

DHMH Response

DHMH Rational

Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services

Review of Comments on February 2017 Draft of COMAR 10.17.01

Comment ID: 2017-234

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Current Regulation

Draft Regulation

Comment

.33 Ventilation of an Indoor Recreational Pool, Semipublic Pool, or Public Spa

An owner shall ensure that an indoor recreational pool, semipublic pool, or public spa has:

Chemical Storage Arena.

D. For a Category B aquatic venue where the chemical storage area is outdoors, an owner shall ensure that the chemical storage area:

Many pool chemicals do not react well to rain or moisture; should they be protected from the elements?

Comment Submitted By

Michael H. Slattery, Citizens Services Specialist, Prince George's County Health Department

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

Review of Comments on February 2017 Draft of COMAR 10.17.01

Comment ID: 2017-235

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Comment

.36 Anticald Protection for Showers.

An owner of a recreational pool, semipublic pool, or public spa shall ensure that each shower has an approved pressure-balanced, antiscald device that limits the delivered water temperature to below 115°F.

Illumination of Water, Deck, and Walkway.

(2) Lighting for the required deck area provides at least 20 lumens per square foot of required deck area that is directed onto the deck and the water surface so that the bottom of the entire aquatic venue is clearly visible;

Technical edit: (2) is repeated from above.

Is this where there is no underwater lighting?

Comment Submitted By

Michael H. Slattery, Citizens Services Specialist, Prince George's County Health Department

DHMH Response

DHMH Rational

Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services

Review of Comments on February 2017 Draft of COMAR 10.17.01

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Comment

.37 Accommodations for Disabled Individuals.

An owner shall ensure that a public pool or spa is in compliance with all applicable, federal, State, and local codes governing facilities for disabled individuals, including COMAR 0.5.02.02.

Ventilation of an Indoor Aquatic Venue.

B. For a Category B aquatic venue, an owner shall ensure that an indoor aquatic venue has:

(1) A ventilation system capable of:

(a) Exhausting 1 1/2 cfm of air per square foot of enclosed area; and

(b) Dehumidifying the recirculated air from the enclosed area; and

(2) Make-up air equal to the volume of exhausted air or as required by the ventilation system specifications, has a ventilation system equipped with.

Dehumidifying recirculated air means nothing, unless a number is put on this. To get a number, International Building Codes should be referenced.

What does a ventilation system need to be equipped with?

Technical edit: no bold.

Comment Submitted By

Michael H. Slattery, Citizens Services Specialist, Prince George's County Health Department

DHMH Response

DHMH Rational

Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services

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Comment

.39 Maintenance

An owner of a public pool or spa shall ensure that:

Toilet, Hand Sink, and Shower Facilities.

C. For a Category B aquatic venue, an owner is not required to provide toilets, hand sinks, and shower facilities at an aquatic venue when bathers have access to equivalent facilities in:

Owners should be required to have toilets and sinks.

Comment Submitted By

Michael H. Slattery, Citizens Services Specialist, Prince George's County Health Department

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

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Comment

.40 Public Pool and Spa Safety

Anti-scald Protection for Showers.

An owner of an aquatic venue shall ensure that each shower has an approved pressure-balance, anti-scald device that limits the delivered water temperature to below 115°F.

Should it be added that it should meet the building and plumbing codes?

Comment Submitted By

Michael H. Slattery, Citizens Services Specialist, Prince George's County Health Department

DHMH Response

DHMH Rational

Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services

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Comment

.41 Pool and Spa Operator Certification.

Accommodations for Disabled Individuals.

*A. For a Category A aquatic venue, an owner shall ensure that an aquatic venue is in compliance with:
(1) The Model Aquatic Health Code; and*

There is no need to reference MAHC. It refers to Americans with Disabilities Act and intended to say to meet ADA requirements to make pools accessible.

Comment Submitted By

Michael H. Slattery, Citizens Services Specialist, Prince George's County Health Department

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

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Comment

.43 Pool and Spa Operation.

An owner shall ensure that a certified pool and spa operator.

Maintenance

(4) An aquatic facility and venue are left in a safe condition when closed for the season according to the Model Aquatic Health Code.

MAHC 5.4.1 “the water shall be drained” mostly or completely? Large pools are hard to cover and water should be kept in them to prevent heave damage.

Comment Submitted By

Michael H. Slattery, Citizens Services Specialist, Prince George’s County Health Department

DHMH Response

DHMH Rational

Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services

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Comment

**.44 Disinfection of a Pool and Spa.
Aquatic Facility and Venue Safety.**

C. Lifeguard Chair

(2) For a Category B aquatic venue:

(b) An owner may use a deck-level lifeguard chair in a designated area on the deck adjacent to shallow water instead of an elevated lifeguard chair.

D. Lifeguards

(1) For a Category A aquatic venue, an owner shall comply with the lifeguard requirements of the Model Aquatic Health Code.

What if the entire pool is shallow? What about the number of patrons?

MAHC 4.8.5.3 requires permanent lifeguard stands. Not all stands are permanent.

Comment Submitted By

Michael H. Slattery, Citizens Services Specialist, Prince George's County Health Department

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

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Comment

**.44 Disinfection of a Pool and Spa.
Aquatic Facility and Venue Safety.**

C. Lifeguard Chair

(4) For a Category B aquatic venue, an owner may use a lifeguard on the deck of a swimming pool to monitor an adjacent wading pool, but if a wading pool is the only pool at a facility or if the wading pool cannot be observed from the deck of the swimming pool, the owner shall ensure that lifeguards are provided at the wading pool in accordance with §D(2) and (3) of this regulation.

Some/most wade pools are positioned so that they are out of the normal scanning area of a lifeguard at the main pool. By this reasoning, all wade pools will need lifeguards?

Comment Submitted By

Michael H. Slattery, Citizens Services Specialist, Prince George's County Health Department

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

Review of Comments on February 2017 Draft of COMAR 10.17.01

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Current Regulation

Draft Regulation

Comment

.45 Water Chemistry of a Pool and Spa.

Aquatic Venue Qualified Operator Certification.

A. An individual may not act as or perform the duties of an aquatic venue qualified operator if the individual does not possess a valid Aquatic Venue Qualified Operator Certification Card issued by the Secretary as required by §C of this regulation.

If they are not certified to test water and make adjustments then they are not allowed to do them. The levels become unnecessary.

Comment Submitted By

Michael H. Slattery, Citizens Services Specialist, Prince George's County Health Department

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

Review of Comments on February 2017 Draft of COMAR 10.17.01

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Current Regulation

Draft Regulation

Comment

.45 Water Chemistry of a Pool and Spa.

Aquatic Venue Qualified Operator Certification.

C. Initial Aquatic Venue Qualified Operator Certification Card. The Secretary shall issue an initial Aquatic Venue Qualified Operator Certification Card:

(1) Level 1 to an individual who:

(a) Is 16 years old or older;

(b) Has completed an 8 hour Level 1 Aquatic Venue Qualified Operator course approved by the Secretary and passed, with a minimum grade of 75 percent, a written exam approved by the Secretary; and

(c) Is employed by a person with a valid Aquatic Venue Qualified Operator Certification Card Level 3.

(2) Level 2 to an individual who:

(a) Is 18 years old or older; and

(b) Has completed a 14 hour Level 2 Aquatic Venue Qualified Operator course approved by the Secretary and passed, with a minimum grade of 75 percent, a written exam approved by the Secretary; and

(3) Level 3 to an individual who:

There are no classes for these levels; nationally, how do summer workers outside the area become trained?

There are no classes for level 2, so how does this become implemented?

Is level 3 the same as listed above? Do you have to be a level 2 before you can be a level 3?

Comment Submitted By

Michael H. Slattery, Citizens Services Specialist, Prince George's County Health Department

DHMH Response

DHMH Rational

Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services

Review of Comments on February 2017 Draft of COMAR 10.17.01

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Current Regulation

Draft Regulation

Comment

.46 Operating Records Required

Approval of Qualified Operator Course.

F. The Secretary may audit an Aquatic Venue Qualified Operator Course, the course materials, or the instructor's credentials at any time.

What steps are going to be in place to revoke chronic bad operators or instructors?

Comment Submitted By

Michael H. Slattery, Citizens Services Specialist, Prince George's County Health Department

DHMH Response

DHMH Rational

Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services

Review of Comments on February 2017 Draft of COMAR 10.17.01

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Current Regulation

Draft Regulation

Comment

.47 Test Kits

Aquatic Venue Operation.

A. Except for a recreational pool, an owner shall ensure that an individual holding an Aquatic Venue Qualified Operator Certification Card Level 1 or higher is on site at all times when an aquatic venue is open.

This will pose a challenge, as there are no classes currently and there are thousands of pools in Maryland that would require operators.

Comment Submitted By

Michael H. Slattery, Citizens Services Specialist, Prince George's County Health Department

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

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Current Regulation

Draft Regulation

Comment

.47 Test Kits

Aquatic Venue Operation.

E. An Aquatic Venue Qualified Operator Level 2 may not, under the scope of this certification, hire an individual holding an Aquatic Venue Qualified Operator Certification Card Level 1.

F. An Aquatic Venue Qualified Operator Level 3 may under the scope of this certification:

(1) Hire an individual holding an Aquatic Venue Qualified Operator Certification Card Level 1;

Do the people doing the hiring with pool companies have to be certified operators?

Does this also mean that a level 2 cannot hire a level 1 as just a lifeguard? This is unclear.

Who hired a level 2? Who can hire a level 3? Again, pool companies have human resources departments who are responsible for all hiring.

Comment Submitted By

Michael H. Slattery, Citizens Services Specialist, Prince George's County Health Department

DHMH Response

DHMH Rational

Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services

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Comment

.50 Control of Infectious and Contagious Diseases.

Operating Records Required.

B. An owner of a Category B aquatic venue shall ensure that a qualified operator maintains operating records on a form provided by the Secretary or an equivalent form and shall:

(2) For an aquatic venue where an approved automatic controller is used, record the information required by §C of this regulation:

(b) More frequently if required by the Secretary due to conditions such as high bather load, high temperatures, bright sunlight, or inadequate water quality;

What are the thresholds for more frequently and who determines when they have been met?

Comment Submitted By

Michael H. Slattery, Citizens Services Specialist, Prince George's County Health Department

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

Review of Comments on February 2017 Draft of COMAR 10.17.01

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Current Regulation

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Comment

.52 Disinfection of Swimsuits and Towels.

An owner shall ensure that a swimsuit or towel furnished to an individual by the owner or operator of a public pool or spa is:

Sanitary Quality of Water.

A. Although routine testing is not required, an owner of an aquatic venue shall ensure that a qualified operator maintains the water in an aquatic venue so that it:

If this is put in and a facility does not test, but a patron does, and finds the levels to be allowable, then they can sue, which may cause trouble.

Comment Submitted By

Michael H. Slattery, Citizens Services Specialist, Prince George's County Health Department

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

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Current Regulation

Draft Regulation

Comment

.53 Variances.

Fecal, Vomit, and Blood Incident Response at an Aquatic Venue

B. An owner of a Category B aquatic venues shall ensure that a qualified operator at aquatic venue where:

(1) A fecal or vomit incident has occurred:

(h) For a diarrheal fecal incident, maintains the free chlorine level at:

(i) 10 ppm for 25.5 hours;

(ii) 15 ppm for 17 hours;

(iii) 20 ppm for 13 hours;

(iv) 25 ppm for 10.5 hours;

(v) 30 ppm for 8.5 hours;

(vi) 35 ppm for 7.5 hours;

(vii) 40 ppm for 6.5 hours;

(viii) 45 ppm for 6 hours;

(ix) 50 ppm for 5.5 hours; or

(x) 55 ppm for 5 hours; and

Are these high levels safe for indoor pools?

Comment Submitted By

Michael H. Slattery, Citizens Services Specialist, Prince George's County Health Department

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

Review of Comments on February 2017 Draft of COMAR 10.17.01

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Comment

.54 Compliance Schedules

Water Replacement.

A. An owner of a Category A aquatic venue shall ensure that a qualified operator replaces the entire volume of water within the aquatic venue according to the requirements of the Model Aquatic Health Code.

D. Water loss due to evaporation may not be counted as water drained and replaced to meet the requirements of §B or C of this regulation.

MAHC 5.6.7.4 does not say entire? What section is this referring to?

What about water due to splashing?

Comment Submitted By

Michael H. Slattery, Citizens Services Specialist, Prince George's County Health Department

DHMH Response

DHMH Rational

Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services

Review of Comments on February 2017 Draft of COMAR 10.17.01

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Comment

.57 Aquatic Venue Incident Reports.

E. All fecal, vomit or blood incidents that occur at an aquatic venue are recorded in the Fecal, Vomit, Blood Incident Response log which shall include:

(4) Levels for the following at the halfway point for treating the water at the aquatic venue:

What is the halfway point for treating the water? How do you test 50 PPM?

Comment Submitted By

Michael H. Slattery, Citizens Services Specialist, Prince George's County Health Department

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

Review of Comments on February 2017 Draft of COMAR 10.17.01

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Draft Regulation

Comment

.58 Electrical Systems and Bonding.

A. An owner of a Category A aquatic venue shall ensure that:

(3) A licensed electrician:

(b) Submits the bonding certification affidavit to the Department before the previous bonding certification affidavit expires.

This may become difficult to track.

Comment Submitted By

Michael H. Slattery, Citizens Services Specialist, Prince George's County Health Department

DHMH Response

DHMH Rational

**Maryland Department of Health and Mental Hygiene
Center for Healthy Homes and Community Services**

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Comment

.59 Standardization and Audits of Local Health Departments.

A. The Department shall:

(1) Standardize one local standardization officer related to the enforcement of this chapter for each local health department;

(2) Audit local health department aquatic venue programs related to the enforcement of this chapter once every four years according to the current audit protocols; and

(3) Provide to the local health department an aquatic venue program review final report.

B. Local health departments shall submit to the Department responses to any deficiencies within the aquatic venue program as identified within the aquatic venue program review final report within 30 business days of receipt of the report.

Will pools become a part of CORE funding from DHMH?

Prince George's County requires 45 days.

Comment Submitted By

Michael H. Slattery, Citizens Services Specialist, Prince George's County Health Department

DHMH Response

DHMH Rational