

Cryptosporidium risk management

Aquatic facility assessment
Water Unit, January 2018

Facility's name	
Facility's address	
Council officer's name	
Facility staff member's name	
Assessment date	
Last effective hyperchlorination date*	

Policies and procedures

1. Does the facility have an adequate faecal accident policy in place?**

Sighted: Yes No

Observations:

2. Does the facility have a pre-swim shower policy?

Sighted: Yes No

Observations:

3. Does the facility have a swim nappy policy?

Sighted: Yes No

Observations:

4. Is there an ill-swimmer exclusion policy for staff and patrons?

Sighted: Yes No

Observations:

5. Does the facility provide children's swimming lessons?

Yes No

If yes, are make-up lessons available for ill children?

Yes No

Observations:

Staff awareness and training

6. Check with at least two frontline staff regarding the following:

Are you aware of the facility's faecal accident policy?

Staff 1: Aware and have read Aware but have not read Not aware of policy

Staff 2: Aware and have read Aware but have not read Not aware of policy

What actions would you take if there was a liquid faecal accident (diarrhoea) in the pool?***

Staff 1: Sufficient Insufficient

Staff 2: Sufficient Insufficient

Observations:

Healthy Swimming messages

7. Are the current 'Healthy Swimming' promotional materials clearly visible?
(at/near entrance *and* in change rooms)

Yes No

Observations:

8. Is soap available at all basins *and* showers to encourage good hygiene and showering with soap and water before entering the pool?

Yes No

Observations:

9. Are dedicated nappy changing areas available, away from the pool deck?

Yes No

Observations:

* An effective hyperchlorination for cryptosporidium contamination must have achieved CT 15,300 mg-min/L, verified by records/documentation. Refer to <https://www2.health.vic.gov.au/public-health/water/aquatic-facilities/superchlorination-procedure>

** An adequate policy should recognise a liquid faecal incident as being a potentially high-risk *Cryptosporidium* contamination event and include hyperchlorination to CT 15,300 mg-min/L in response. Refer to <https://www2.health.vic.gov.au/public-health/water/aquatic-facilities/faecal-incident-response>

*** Staff awareness is judged 'sufficient' if they can identify that a policy is in place and say they would immediately refer to and apply that policy, or immediately notify management to apply the policy, or if their response fits with actions identified in the faecal accident response recommendations at <https://www2.health.vic.gov.au/public-health/water/aquatic-facilities/faecal-incident-response>

Treatment barriers

10. Description of pools and treatment system

Pool #	Description (example: main 50 m pool)	Volume (litres)	Filter media and depth (mm)	Filter flow rate (m/hour)	Coagulant (Y/N)	Primary disinfectant	Secondary disinfectant
Do any pools share a treatment plant? If so, specify.							

11. How often are the filters backwashed? At what time of day?

12. Is backwash water sent to waste? If not, what is it used for?

13. If secondary treatment is used (such as UV or ozone), is it full-stream or side-stream?

14. Is the frequency of treatment plant maintenance in accordance with supplier recommendations (including UV/ozone system)?
