

1999 SENATE POLITICAL SUBDIVISIONS

SB 2200

1999 SENATE STANDING COMMITTEE MINUTES

BILL/RESOLUTION NO. SB2200

Senate Political Subdivisions Committee

Conference Committee

Hearing Date January 15, 1999

Tape Number	Side A	Side B	Meter #
1	x		2731 to 6036
1		x	0 to 3383
2	x		2618 to 4129
Committee Clerk Signature 			

Minutes:

SENATOR LEE: MEETING CALLED TO ORDER ON SENATE BILL 2200 AND 2201

WHICH WILL BE HEARD A JOINT BILLS

CLERK: Roll call taken, all Senator present

SENATOR WATNE: introduce 2200 and 2201, see attached testimony

SENATOR LEE: ANY QUESTIONS IN FAVOR OF 2200 OR 2201

DEBRA ANDERSON: FISCAL NOTE WAS BROUGHT IN BY HER, see testimony on 2200 and 2201

SENATOR LEE: interesting knowledge

LEO BRUNNER: objections to 2200 as far as objections in swimming pool objections.

Insurance companies should be inspecting pools and not health department. Problems deal with water quality. This portion is monitored by state health department. Health department takes

three weeks to respond. Swimming pool seminar held every year. Needs to be addressed, such as water quality standards should be done ASAP, this is an insurance issue

SENATOR LEE: what is the recommendation for those communities or pools that don't have the good set up that you do.

Leo Brunner: Implement minimum standards. Small town pools cannot afford to pay to have the health department inspect pools

Senator Lee: Name of course, POOL OPERATORS

SENATOR LYSON: Do you still send your records to the health department

LEO BRUNNER: We keep records for three years and some records are still kept

SENATOR LYSON: Do you exercise your other life saving equipment, and how often

MR. BRUNNER: Yes, we still do and every two weeks beginning at each year. We bring down the EMT'S from Minot Some equipment maintained by the really trained professional, buddy system and other techniques not learned from an inspector

SENATOR LYSON: Do you keep track of your training records and do they also go to the health department?

MR BRUNNER: No, those are pool records

SENATOR LYSON: Would you have a problem doing that

MR BRUNNER: I don't know what they would use them for

SENATOR WATNE: Should establish minimum standards and Mr. Brunner you don't object to minimum standards set by the committee.

MR BRUNNER: No I don't object

SENATOR WATNE: Red Cross had come to me with objections regarding "Nationally accredited standards"

MR BRUNNER: American Red Cross or some other entity to train pool guards and inspect pools, I am fine with the Red Cross.

SENATOR LEE: Any further testimony

KIETH JOHNSON: See testimony

SENATOR LEE: Any questions

MEL FISCHER: See attached testimony

SENATOR LEE: Shock monitoring in water testing and water samples sent to the Health department for examination. Would the health department have to inspect pools or could there be some sort of self testing by smaller pools

MEL FISHER: All pool operators must attend this instruction for the city of Bismarck, important to provide inspection of pools. Inspection of pools weekly and water samples three times a day. \$300.00 a year for health department inspections plus fee

SENATOR KELSH: What is a semi - public pool

MEL FISHER: a pool such as a hotel and condominium pools

END OF SIDE A

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SENATOR LYSON: Chlorine burned at pool

SENATOR FLAKOLL: Waterslides also. Besides chlorine, what else do you check for?

MEL FISCHER; Chlorine residual in public pools and effected requirements. Chlorine should rid pool of organisms. Bill doesn't address water quality looks more at safety concerns.

SENATOR WATNE: Matters should be addressed in Minimum standards set don't you think?

MEL FISCHER: Yes, I think that they should be, some kind of minimum standards throughout the state.

SANDI TALKINGTON: See addressed testimony

SENATOR LEE: Two separate issues being addressed here

SANDI TALKINGTON: How to address these issues besides being a mandiate

SENATOR NELSON: keep copy of lifeguard certificates for six years, why?

SANDI TALKINGTON: this is just a legal record thing, not quite sure why

SENATOR LYSON: Same as law enforcement

SENATOR FLAKOLL: Protect against a lawsuite

CONNIE SPRYNCZYNATYLC: Feeling on 2200 and 2201 about getting a subcommittee together to discuss safety and water quality issues

SENATOR LEE: Delighted to have a task force convience

SENATOR NELSON: Training for younger life guards

ANN KEMPF: 25 year life guard and life saving techniques for lifeguards. Support of 2200 and 2201. Park board rules and regulations and what they consist of. Park boards whom have budgets cut on the pools

SENATOR LYSON: Fiscal impact of this bill on small towns

ANN KEMPF: small towns would not appreciate fiscal impact of bill but the lifeguards would because it is their job to save the people and they need the standards

SENATOR LYSON: So what do you charge the city for training

ANN KEMPF: Between \$100.00 and \$150.00

SENATOR LYSON: Do most small pools have lifesaving equipment?

ANN KEMPF: yes, most do but the equipment is outdated and minimums need to be set

SENATOR WATNE: Cost of first aid kit is \$100.00

ANN KEMPF: You can make spin boards and some small towns have, so yes

SENATOR WATNE: 2-300 should cover this cost

ANN KEMPF: rescue tube is part of package but not required for some smaller pools which means some pools do and some don't

SENATOR LEE: Liability issue

CONNIE SPRYNCZATYK- world wide web for Mott pool and renovation issues for pools in need of desperate repair. Education component as part of pool safety.

SENATOR LEE: state health department being called upon

SENATOR NELSON: Certification for boats and required safety equipment for boats and licensing.

MEL FISCHER: required licensing for pools and equipment rooms and chemical installations this is part of the licensing fee

SENATOR NELSON: Closing of unsafe pools because of safety concerns

SENATOR LEE: West Fargo's closing of the pool and the VFW proceeds

ROB GRAFF: reading of 2201 and minimum lifeguard qualifications and what prepares a lifeguard for emergencies.

SENATOR LEE: participate in the task force

SENATOR FLAKOLL: man made verses natural guidelines for these bodies of water

ROB GRAFF: Pool chemistry and how circulation effects the content of manmade pools verses a chemical enviroment

SENATOR FLAKOLL: How long does Chlorine last:

ROB GRAFF: Lasting of chlorie and it's santiation effect with evaporation

SENATOR LEE: Chlorine effects to be residual

MEL FISCHER: Super chlorination of pools and the bounding of chlorine effects on water and when it should be added and what organisms it takes care of. Water quality all the time

SENATOR FLAKOLL: Evaportation of Chlorine

MEL FISCHER: Either or.

PAT LENO: drowning in pools and the following of standards by lifeguards, and welcomes public comment on bills

SENATOR FLAKOLL: Type of background in drownings per year

PAT LENO : Will check on this.

SENATOR WATNE: Motel pool safety

MEL FISCHER: Motel pools are the unsafest because of lack of a lifeguard and maintenance people

ANN KEMPF: Some one watching from hotel

SENATOR LYSON: Capacity of pools

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KEITH JOHNSON: Standards that are available and 15 feet per person

MEL FISCHER: National standards for pool design

SENATOR FLAKOLL: SENATOR Watne, inspection of substandard pools and when a pool should be closed down

SENATOR WATNE: Minimum standards for lifeguard training and pool safety for the entire state.

SENATOR LEE: CLOSED HEARING AND SETTING UP OF TASK FORCE

SENATOR LYSON: WILL COCHAIR

SENATOR LEE: sign up sheet and lets act on task force

SENATOR WATNE: Connie to set up and catching her at the league of cities.

Motion: None taken

January 28, 1999

SENATOR LEE: Committee back to order

COMMITTEE DISCUSSION ON 2200 AND 2201

MOTION: DO NOT PASS ON 2201

MOTION: DO PASS AS AMENDED ON 2200

SENATOR LEE: BOTH BILLS HEARD ON THE FLOOR AT SAME TIME

HEARING CLOSED ON 2200 AND 2201

1999 SENATE STANDING COMMITTEE MINUTES

BILL/RESOLUTION NO. SB2200

Senate Political Subdivisions Committee

Conference Committee

Hearing Date January 25, 1999

Tape Number	Side A	Side B	Meter #
1	x		0 to end
1		x	0 to 840
Committee Clerk Signature			

Minutes:

CONNIE SPRYNZNATYK- Director for the League of Cities, reintroduces SB2200 and SB2201 to the Subcommittee.

NO FORMAL ROLL CALL WAS TAKEN

SENATOR WATNE: ONLY SENATOR PRESENT

CONNIE SPRYNCZYNATYK: Reintroduce Senate Bill 2200 and 2201

SENATOR WATNE: Introduction of all people who are present at this committee hearing

CONNIE SPRYNCZYNATYK: opens meeting on 2200 and 2201, member Ann Weston missing, and questions about the bills and the need for or against legislation

DOUG GRIFFIN: Insurance reserve fund, vast majority are lifeguards that are certified, Safety and the open ended bill (SB2200) Certification of pool operators and most are correct, smaller pools hiring of pool lifeguards

SENATOR WATNE: testing of pools by insurance companies and inspection thereof.

SENATOR WATNE: testing of pools by insurance companies and inspection thereof.

DOUG GRIFFIN: updating of standards in pools, and recommendation's to pools about safety

SENATOR WATNE: water testing of pools by insurance companies

DOUG GRIFFIN: We don't do water testing. state dep. of health used to get involved until 1991

CONNIE SPRYNCZYNATYK: safety as a functional area - structure of pool, water quality, any physical object belonging to the pool then their is an equipment question and lifeguard training and water quality issue. Missing any major categories

DOUG GRIFFIN: Training

CONNIE SPRYNCZYNATYK: training is a hot topic

STEVE MEER: addressing difference between public and private pool

CONNIE SPRYNCZYNATYK: no definition of a public pool

STEVE MEER: nothing in the state but local health units have the differences between them

DOUG GRIFFIN: Semi public is also included in health department rulings.

SENATOR WATNE: Not to take other pools into consideration, just the public pools. Diane Chilston with Minot Red Cross.

DIANE CHILSTON: SEE ATTACHED TESTIMONY MINOTS POOL REQUIREMENTS

CONNIE SPRYNCZYNATYK: health units are broader than this legislation which is just for public pools So is the YMCA considered a public or private pool

DIANE CHILSTON: Semi public

STEVE MEER: safety rules in public pools vs. private and semi public pools

CONNIE SPRYNCZYNATYK: leaving semi public out of bill language and semi public comes under local health units

GARY TURNIS: definition between public, private and semi private in different towns

DOUG GRIFFIN: different set of pool standards for each pool

DEBRA ANDERSON: redefining of public and nonpublic swimming pools

STEVE MEER: where colleges and universities fall into, semi public

CONNIE SPRYNCZYNATYK: what else could be determined public and semi public

STEVE MEER: hotel and motel

SENATOR WATNE: That would be private

STEVE MEER: no, depends on the definition and which pools that we are going to address

CONNIE SPRYNCZYNATYK: City ordinances and how to they apply to the laws

SENATOR WATNE: No mandates for smaller cities or burdens

STEVE MEER: necessity for someone on the property who understands pools and how they work.

GARY TURNIS: How other states are effected by their standards and courses that are BEING given and we need to look for standardization

CONNIE SPRYNCZYNATYK: adopting national standards to the pools

GARY TURNIS: effect of playground industry standards vs. having national standards for swimming pools

SENATOR WATNE: Are there any standards for National Swimming Pools

GARY TURNIS: I think that we are coming really close, and seasons for pools and why the operating budgets effect risk management

CONNIE SPRYNCZYNATYK: in terms of certified pool operator pool courses are there other pool trainee programs

GARY TURNIS: see booklet on associations that have pool operator courses

AL FISC HER: Saving costs in smaller counties and how it affects pool operation and water quality. training vs. accident (see handout on certified pool operators)

GARY TURNIS: State standards and the insurance reserves and pools relying on these codes to adopt a state standards

CONNIE SPRYNCZYNATYK: Does the idea of statewide pool standards give anyone heartburn.

DISCUSSION ON QUESTION ASKED

SENATOR WATNE: Every local health district shall establish standards for safety including lifeguard training and shall monitor facility safety

AL FISC HER: Some areas of the state that don't have local health offices

SENATOR WATNE: Local health departments to do inspections

CONNIE SPRYNCZYNATYK: Health council establishing minimum standards and rule making process that would accept input

DEBRA ANDERSON: health department makeup

CONNIE SPRYNCZYNATYK: any problems

AL FISC HER: health department would set up standards

SENATOR WATNE: shall establish minimum standards

AL FISC HER: Positive way to go and provide vehicle for minimum standards for pools around the state

LEO BRUNNER: Simple to look at just the public pools

CONNIE SPRYNCZYNATYK: establish broad based legislation for the state
and questions that apply to the health authority

DOUG GRIFFIN: standards playground safety vs. pool safety
and separate standards for everyone in the state.

SENATOR WATNE: establishment of rules by the health council, meetings are always open to
the public

CONNIE SPRYNCZYNATYK: It would be helpful to have the standard that the health
department would use to create a statewide pool board

DEBRA ANDERSON: committee work and health council work

DIANE SHUTZON: committee recommendation's

CONNIE SPRYNCZYNATYK: delegation of authority and changing of the health rules

DEBRA ANDERSON: go back to the health council and it's not that hard

STEVE MEER: Adoption of playground standards and adopting these standards and how they
are implemented by education

DISCUSSION

DOUG GRIFFIN: national standards and what is accepted and what is liable to a lawsuit on is
there are three standards set for pool safety

CONNIE SPRYNCZYNATYK: no accepted set of National standards and I said one set
and health council's recommendations to the rule making process as the national standards
change

STEVE MEER: No set of rules regarding liabilities and what could be said in litigation

DISCUSSION

JANE BOYAGER: Guidelines when it comes to how pools are regulated and who is going to do that and why in three months and training costs

SENATOR WATNE: teenagers and pool rats and some danger by kids to the pool

AL FISC HER: setting some kind of standards for the city of Bismarck

STEVE MEER: Replacement of problem parts and putting the responsibility for the pool in the hands of someone young and not responsible for guarding the pool.

PAT LENO: people whom operate the pools and who hires the lifeguards and when lifeguards should attend a training class and this bill should address the pool operators and the pool managers

SENATOR WATNE: lifeguard issues and where the second bill comes in

PAT LENO: is there a way to determine how much of a problems are in smaller communities and having a broader scope

GARY TUNN: seasonal employees and the certification of

CONNIE SPRYNCZYNATYK: risky situation to put non qualified people into risky environments

GARY TUNN: taking care of dangerous situations by people who are not fully trained to do the job

SENATOR WATNE: If we had these standards, would insurance rates go down

DISCUSSION

DOUG GRIFFIN: chemical problems and disaster plans for pools. chlorine spills and what unqualified people should do.

CONNIE SPRYNCZYNATYK: listing, disaster planning, and 2200 being the bill to carry these issues that we are discussing

GARY TUNN: disaster planning should be part of list

SENATOR WATNE: do you insure public school pools

CONNIE DICTONAN: inspection of semi public pools by the public health department

SENATOR WATNE: can start with public pools and test this over a session of the legislature

PAT LENO: What is the ratio of lifeguards to people in the pool and what are the national standards for this

.DISCUSSION

JANE BOYAGER: every pool is different but the ratio as it stands now is 1 lifeguard for every 20 kids

DISCUSSION

CONNIE SPRYNCZYNATYK: Legislation to common law verses legislation to bills by the Senate, how much time this process takes, anyone who is uncomfortable with this legislation

CONNIE DICTNON: question of health care authority having the ability to test water quality

AL FISC HER: we feel comfortable with this action

SENATOR WATNE: specialized fields and setting up of these standards by a health board

DISCUSSION

ROBB GRAFF: people could start the process for the committee

CONNIE SPRYNCZYNATYK: this is the process to start for any committee

end of side A

CONNIE SPRYNCZYNATYK: question about the two pieces of legislation and taking 2200 and amending this bill and waiting on 2201

SENATOR WATNE: will withdraw 2201

CONNIE SPRYNCZYNATYK: give 2200 to the committee to vote upon

JANE BOYAGER: When would we look at this again

CONNIE SPRYNCZYNATYK: legislation that gets into state law and to make changes

JANE BOYAGER: All areas covered

SENATOR WATNE: one simple bill is the goal and what amendments to make to this bill

CONNIE SPRYNCZYNATYK: missing some pieces from this bill

GARY TUNNIS: additions to the list

CONNIE SPRYNCZYNATYK: discussion on the bill and it's amendments

SENATOR WATNE: public swimming pools and the safety

the health council shall establish minimum operating standards for public swimming pools.

CONNIE SPRYNCZYNATYK: ask Debra if this bill will provide the means to make this bill to work.

DISCUSSION

MOTION TO AMEND BILL BY SUBCOMMITTEE

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Senate Political Subdivisions Committee

Bill/Resolution Number SB2200

Hearing Date January 25, 1999

SENATOR WATNE KEEPING BOOKS AS PART OF THE RECORD

LARRY WEBBER: lifeguard safety and waiting for the EMT's

DISCUSSION BY COMMITTEE WITH THE EMT ISSUE

SENATOR WATNE EMT's as part of the standardization

DEBRA ANDERSON: EMT and what is covered as standard pool issue

CONNIE SPRYNCZYNATYK: rules for EMT's as part of training

DISCUSSION

END OF TESTIMONY

FISCAL NOTE

(Return original and 10 copies)

Bill/Resolution No.: _____ Amendment to: Revised SB 2200

Requested by Legislative Council _____ Date of Request: 3-1-99

1. Please estimate the fiscal impact (in dollar amounts) of the above measure for state general or special funds, counties, cities, and school districts.

Narrative:

This fiscal note will amend a fiscal note prepared on 2-3-99. Clarification of the intent of SB 2200 indicates minimal biennial costs to the Department. Consistent with the attached testimony of the State Health Officer to the House Human Services on 3-1-99, we believe that this bill should have a fiscal impact of \$5,000 or less.

2. **State** fiscal effect in dollar amounts:

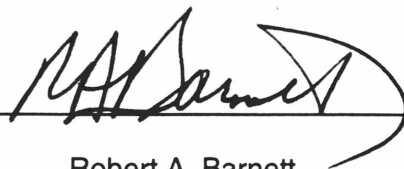
	1997-99 Biennium		1999-2001 Biennium		2001-03 Biennium	
	General Fund	Special Funds	General Fund	Special Funds	General Fund	Special Funds
Revenues:	-0-	-0-	-0-	-0-	-0-	-0-
Expenditures:	-0-	-0-	< 5,000	-0-	< 5,000	-0-

3. What, if any, is the effect of this measure on the appropriation for your agency or department:
 - a. For rest of 1997-99 biennium: None
 - b. For the 1999-2001 biennium: < 5,000
 - c. For the 2001-03 biennium: < 5,000

4. **County, City, and School District** fiscal effect in dollar amounts:

1997-99 Biennium			1999-2001 Biennium			2001-03 Biennium		
Counties	Cities	School Districts	Counties	Cities	School Districts	Counties	Cities	School Districts

If additional space is needed, attach a supplemental sheet.

Signed 
 Typed Name Robert A. Barnett
 Department State Department of Health
 Phone Number 328-2392

Date Prepared: 3-2-99

**Testimony on Senate Bill 2200
before the
House Human Services Committee**

Murray G. Sagsveen, State Health Officer

March 1, 1999

Senate Bill 2200 states that “[t]he health council shall establish minimum operating standards for public swimming pools.” The Health Council has not met since the bill was amended in the Senate, so I am providing neutral testimony to this committee.

The Health Council has adopted rules governing the quality of water in public pools (Article 33-29, North Dakota Administrative Code). A copy of that article is attached to my testimony.

If Senate Bill 2200 is enacted, I would be pleased to work with the Health Council and all interested parties to define and “establish minimum operating standards” for the public swimming pools in the state. The interested parties would include at least the North Dakota Insurance Reserve Fund, the North Dakota League of Cities, the administrators of local public health units, and the North Dakota Parks and Recreation Association.

Even if Senate Bill 2200 is not enacted, I believe the interested parties should – and easily could – work together to establish minimum operating standards for public swimming pools.

ARTICLE 33-29

POOL FACILITIES

Chapter
33-29-01 Pool Facilities in North Dakota

CHAPTER 33-29-01
POOL FACILITIES IN NORTH DAKOTA

Section	
33-29-01-01	Definitions
33-29-01-02	Designated Responsible Individuals [Repealed]
33-29-01-03	Certified Laboratories and Analytical Procedures [Repealed]
33-29-01-04	Maximum Contaminant Level
33-29-01-05	Microbiological Contaminant Sampling Frequency and Analysis [Repealed]
33-29-01-06	Turbidity/Clarity Requirements
33-29-01-07	Disinfectant Residual
33-29-01-08	Record Maintenance
33-29-01-09	Reporting Requirements [Repealed]
33-29-01-10	Right of Onsite Inspection [Repealed]
33-29-01-11	Right of Closure [Repealed]
33-29-01-12	Observance of Local Rules
33-29-01-13	Administrative Procedure and Judicial Review [Repealed]
33-29-01-14	Injunction Proceedings [Repealed]
33-29-01-15	Enforcement [Repealed]

33-29-01-01. Definitions. The following definitions apply as used in this chapter:

1. "Appurtenances" means all filtration systems, chlorination systems, pumps, valves, meters, bathhouses or other devices, walkways, or buildings utilized for the proper supervision, operation, and maintenance of a pool facility.
2. "Bather" means any person using the pool and adjoining deck areas for the purpose of water sports or related activities.
3. "Maximum contaminant level" means the maximum permissible number of organisms as indicated on the standard plate count, membrane filter, or in the fermentation tube test.

4. "Pool facility" means a public, semipublic, special use pool, or spa.
5. "Premises" means the area enclosed by a barrier and any adjacent support facilities such as bathhouses, clubhouses, shower rooms, equipment rooms, etc., including the office of operational and maintenance personnel.
6. "Private" means a pool or spa which is located on private property under the control of the homeowner, the use of which is limited to swimming or bathing by members of the owner's family or their invited guests.
7. "Public" means a pool or spa intended to be used collectively by the general public for swimming or bathing, regardless of whether a fee is charged for such use.
8. "Semipublic" means a pool or spa on the premises of, or part of, a motel, mobile home park, apartment, condominium, subdivision, club, camp, institution, school, or similar establishments where the primary business of the establishment is not the operation of a pool or spa and where admission to the use of the pool or spa is included in the fee, or consideration paid or given for the primary use of the premises to such groups and their invited guests.
9. "Spa" means a pool used exclusively in conjunction with high velocity air or high velocity water recirculation systems utilizing hot, cold, or ambient temperature water including all appurtenances used in connection with the spa.
10. "Special use" means a pool or spa used exclusively for a particular purpose, including but not limited to treatment pools, therapeutic pools, and special pools for water therapy.
11. "Swimming pool" means any indoor or outdoor structure, basin, chamber, or tank containing an artificial body of water for swimming, diving, wading, or recreative bathing including all appurtenances used in connection with the swimming pool.

story: Effective January 1, 1985; amended effective April 1, 1993.
 General Authority: NDCC 23-01-03
 Law Implemented: NDCC 23-01-03

33-29-01-02. Designated responsible individuals. Repealed effective April 1, 1993.

33-29-01-03. Certified laboratories and analytical procedures. Repealed effective April 1, 1993.

33-29-01-04. Maximum contaminant level. The maximum contaminant level for pool facility water may not exceed two hundred bacteria colonies per one milliliter of sample on a standard plate count or show the presence of organisms of the coliform group in a fermentation tube test or membrane filter test.

History: Effective January 1, 1985.
General Authority: NDCC 23-01-03
Law Implemented: NDCC 23-01-03

33-29-01-05. Microbiological contaminant sampling frequency and analysis. Repealed effective April 1, 1993.

33-29-01-06. Turbidity/clarity requirements. Swimming pool water must have sufficient clarity at all times such that the main drain or drains located at the deep end of the pool are clearly visible from the pool decking or a black and white disk, six inches [15.24 centimeters] in diameter, is clearly visible from the pool decking when placed at the deep end of the pool.

History: Effective January 1, 1985.
General Authority: NDCC 23-01-03
Law Implemented: NDCC 23-01-03

33-29-01-07. Disinfectant residual. All pool facilities shall disinfect the pool water by continuous chlorination or other means or methods of equal bactericidal efficiency. A minimum free chlorine residual of one milligram per liter (mg/l) or a halogen, or compounds of them, imparting an equivalent disinfecting residual must be maintained in the pool facility water at all times. All disinfectants utilized in a pool facility may not be detrimental to the health or safety of the general public.

History: Effective January 1, 1985; amended effective April 1, 1993.
General Authority: NDCC 23-01-03
Law Implemented: NDCC 23-01-03

33-29-01-08. Record maintenance. The owner or operator of a pool facility shall retain on the premises or at a convenient location near the premises, the following records:

1. Microbiological analyses. Records of microbiological analyses must be kept for not less than three years.

2. Operation and maintenance records. All pool facilities shall maintain records of operation and maintenance to be kept for not less than three years. Daily records shall be kept of pH, disinfectant residual and temperature, together with other pertinent operational and maintenance data.

History: Effective January 1, 1985; amended effective April 1, 1993.
General Authority: NDCC 23-01-03
Law Implemented: NDCC 23-01-03

33-29-01-09. Reporting requirements. Repealed effective April 1, 1993.

33-29-01-10. Right of onsite inspection. Repealed effective April 1, 1993.

33-29-01-11. Right of closure. Repealed effective April 1, 1993.

33-29-01-12. Observance of local rules. In the event of any conflict between the provisions of these rules and the provisions of any other ordinance, the provision imposing the higher standard or more stringent requirement is controlling.

History: Effective January 1, 1985; amended effective April 1, 1993.
General Authority: NDCC 23-01-03
Law Implemented: NDCC 23-01-03

33-29-01-13. Administrative procedure and judicial review. Repealed effective April 1, 1993.

33-29-01-14. Injunction proceedings. Repealed effective April 1, 1993.

33-29-01-15. Enforcement. Repealed effective April 1, 1993.

FISCAL NOTE

(Return original and 10 copies)

Bill/Resolution No.: _____ Amendment to: SB 2200

Requested by Legislative Council _____ Date of Request: 2-1-99

1. Please estimate the fiscal impact (in dollar amounts) of the above measure for state general or special funds, counties, cities, and school districts.

Narrative:

Prior to the referral of 1989, the State Department of Health operated a swimming pool program that established and maintained operating standards for swimming pools. Reestablishment of this program would require two FTE's for the first year. Once the program has been established it will require 1½ FTE's to monitor. The department would need two additional FTE's and associated costs identified below to carryout this program.

2. **State** fiscal effect in dollar amounts:

	1997-99 Biennium		1999-2001 Biennium		2001-03 Biennium	
	General Fund	Special Funds	General Fund	Special Funds	General Fund	Special Funds
Revenues:	-0-	-0-	-0-	-0-	-0-	-0-
Expenditures:	-0-	-0-	145,000	-0-	125,000	-0-

3. What, if any, is the effect of this measure on the appropriation for your agency or department:

- a. For rest of 1997-99 biennium: None
- b. For the 1999-2001 biennium: 145,000
- c. For the 2001-03 biennium: 125,000

4. **County, City, and School District** fiscal effect in dollar amounts:

1997-99 Biennium			1999-2001 Biennium			2001-03 Biennium		
Counties	Cities	School Districts	Counties	Cities	School Districts	Counties	Cities	School Districts

If additional space is needed, attach a supplemental sheet.

Signed 

Typed Name Robert A. Barnett

Department State Department of Health

Phone Number 328-2392

Date Prepared: 2-3-99

FISCAL NOTE

(Return original and 10 copies)

Bill/Resolution No.: SB 2200 Amendment to: _____

Requested by Legislative Council Date of Request: 1-12-99

1. Please estimate the fiscal impact (in dollar amounts) of the above measure for state general or special funds, counties, cities, and school districts.

Narrative:

Option A: The estimated cost of monitoring a swimming facility as defined in SB 2200 is \$155 per pool per summer season. An estimated 50 such pools in the state are not already inspected, for a total estimated cost of \$7,750.

Option B: However, if the local public health unit would charge the facility owner, there would be no fiscal impact to the health unit.

2. **State** fiscal effect in dollar amounts:

	1997-99 Biennium		1999-2001 Biennium		2001-03 Biennium	
	General Fund	Special Funds	General Fund	Special Funds	General Fund	Special Funds
Revenues:	-0-	-0-	-0-	-0-	-0-	-0-
Expenditures:	-0-	-0-	-0-	-0-	-0-	-0-

3. What, if any, is the effect of this measure on the appropriation for your agency or department:

- a. For rest of 1997-99 biennium: _____ -0-
 b. For the 1999-2001 biennium: _____ -0-
 c. For the 2001-03 biennium: _____ -0-

4. **County, City, and School District** fiscal effect in dollar amounts:

	1997-99 Biennium			1999-2001 Biennium			2001-03 Biennium		
	Counties	Cities	School Districts	Counties	Cities	School Districts	Counties	Cities	School Districts
Option A		-0-			7,750			7,750	
Option B		-0-			-0-			-0-	

If additional space is needed, attach a supplemental sheet.

Signed 

Typed Name Robert A. Barnett

Date Prepared: 1-14-99

Department ND Department of Health

Phone Number 328-2392

PROPOSED AMENDMENTS TO SENATE BILL NO. 2200

Page 1, line 1, replace "public health units" with "the health council" and replace "facility" with "pool"

Page 1, line 3, replace "**facility**" with "**pool**" and replace "Every local public health department and" with "The health council"

Page 1, line 4, remove "public health district", after "minimum" insert "operating", after "for" insert "public", and replace "facility safety, including" with "pools."

Page 1, remove lines 5 and 6

Renumber accordingly

Date: 1-28-99
Roll Call Vote #: |

*Both on
Floor at
same time*

1999 SENATE STANDING COMMITTEE ROLL CALL VOTES
BILL/RESOLUTION NO. Amendments
SB 2200

Senate Political Subdivisions Committee Committee

Subcommittee on _____
or
 Conference Committee

Legislative Council Amendment Number 90324.0101

Action Taken To pass as amend.

Motion Made By Senator Watne Seconded By sen Nelson

Senators	Yes	No	Senators	Yes	No
Senator Lee (Chairman)	/				
Senator Lyson (Vice-Chaiman)	/				
Senator Flakoll	/				
Senator Watne	/				
Senator Kelsh					
Senator Nelson	/				

Total (Yes) 5 No 0

Absent Senator Kelsh

Floor Assignment Sen Watne

If the vote is on an amendment, briefly indicate intent:

SR 181391

Date: 1-28-99
Roll Call Vote #: 2

1999 SENATE STANDING COMMITTEE ROLL CALL VOTES
BILL/RESOLUTION NO. 2200-~~2001~~

Senate Political Subdivisions Committee Committee

Subcommittee on _____
or
 Conference Committee

Legislative Council Amendment Number _____

Action Taken To pass an amend

Motion Made By SW Seconded By Sen Lyson

Senators	Yes	No	Senators	Yes	No
Senator Lee (Chairman)	/				
Senator Lyson (Vice-Chaiman)	/				
Senator Flakoll	/				
Senator Watne	/				
Senator Kelsh					
Senator Nelson	/				

Total (Yes) 5 No 0

Absent Senator Kelsh

Floor Assignment Watne

If the vote is on an amendment, briefly indicate intent:

REPORT OF STANDING COMMITTEE

SB 2200: Political Subdivisions Committee (Sen. Lee, Chairman) recommends **AMENDMENTS AS FOLLOWS** and when so amended, recommends **DO PASS** (5 YEAS, 0 NAYS, 1 ABSENT AND NOT VOTING). SB 2200 was placed on the Sixth order on the calendar.

Page 1, line 1, replace "public health units" with "the health council" and replace "facility" with "pool"

Page 1, line 3, replace "**facility**" with "**pool**" and replace "Every local public health department and" with "The health council"

Page 1, line 4, remove "public health district", after "minimum" insert "operating", after "for" insert "public", and replace "facility safety, including" with "pools."

Page 1, remove lines 5 and 6

Renumber accordingly

1999 HOUSE HUMAN SERVICES

SB 2200

1999 HOUSE STANDING COMMITTEE MINUTES

BILL/RESOLUTION NO. SB 2200

House Human Services Committee

Conference Committee

Hearing Date March 1, 1999

Tape Number	Side A	Side B	Meter #
1	x		43.0 - end
1		x	0.0 - 24.5
2		x	39.4 - end
Committee Clerk Signature <i>Wayne B. Frank</i>			

Minutes:

Senator DARLENE WATNE, 5th District, Minot testified. (Testimony Attached.)

Rep. BRUCE ECKRE asked of the 4 types of pool classification is mandated by law. Senator DARLENE WATNE replied that there is nothing mandated. These classifications are just the ones generally used.

Rep. ROBIN WEISZ said that since SB2201 has been defeated aren't the standards lost. Senator DARLENE WATNE replied that SB2201 related only to training standards and equipment over which there are differences of opinion. A "Do Not Pass" was requested on the bill to clear the way for passage of SB2200.

Rep. CAROL NIEMEIER noted that there was no language in the bill that indicated it applied only to public pools. Senator DARLENE WATNE indicated this was on the engrossed bill.

Rep. CLARA SUE PRICE asked if any consideration had been given to letting public health monitor compliance instead of state health. Senator DARLENE WATNE replied that four areas in North Dakota don't have environmental specialists. These areas would have to pay for this service from another health agency.

Rep. CLARA SUE PRICE asked how many public pools are in North Dakota. Senator DARLENE WATNE replied about 126.

Rep. CLARA SUE PRICE pointed out that the fiscal note on the bill indicated \$145,000 per year for two FTEs for the Department of Health. Senator DARLENE WATNE stated that after the loss of SB2201 the fiscal note should have been changed to indicate no impact. SB2200 is only asking that the standards be established. Rep. CLARA SUE PRICE noted, however, that someone has to enforce the standards. Senator DARLENE WATNE responded that once the standards are established bills will be introduced at the next legislature to cover enforcement. MEL FISCHER, Department of Fire and Inspections, Bismarck, ND testified. (Testimony attached.)

Rep. TODD PORTER asked how much Bismarck charges for the inspections. MEL FISCHER replied \$100 per year for license fee and \$7 per water quality sample.

Rep. TODD PORTER : Are Bismarck standards higher than insurance reserve standards? MEL FISCHER: Not sure, Bismarck may be more stringent in the number of samples required.

Rep. BRUCE ECKRE : Did the former pool program have a FTE who sampled pools? MEL

FISCHER: Yes, there was an FTE at the Department of Health who worked with local environmental health. These officials can do the testing. There are some areas of the state that do not have environmental specialist to do the sampling.

Rep. TODD PORTER :Does the definition of public pools include public spas and hot tubs found in motels? MEL FISCHER: Pools in motels are defined as semi-public so would not fall under this bill. Public pools are administrated by local government agencies.

Rep. CAROL NIEMEIER : Did the state eliminate the pool program because they felt it was no longer necessary and the responsibilites could be taken over by local authorities. MEL

FISCHER: I don't know. I think it was a matter of priorities and budget issues. I think this is important. The Public expects safety in the public pools.

CONNIE SPRYNCZYNATYK, North Dakota League of Cities tesitfied: We have been involved with SB 2200 and SB2201. Whether or not you pass this bill it has been noted that there are problems with public pools that would be governed by this piece of legislation. It does not address private pools. Whether or not you pass this bill we are determined to involve the State Health Department, local health departments, ND Insurance reserve, Red Cross, YMCA in moving this process forward. We will address this issue. There is not a total lack of minimum standards currently in place in many locations.

SANDI TALKINGTON, Executive Director, Burleigh-Morton Chapter of the American Red Cross testified. (Testimony attached.)

JENNY HOLWEGER, Pool Manager and certified lifeguard trainer testified. (Testimony attached.)

OPPOSITION

KEITH JOHNSON, North Dakota Public Health Association testified: I'm nuetral on the bill and am here to answer some questions that have been raised before on the bill. On the enforcement relating to the fiscal note it was contemplated from the beginning that this would be

enforced by the local health units. That concerns me because many counties around the state don't have the health practitioners services. Environmental health are not available in all counties. The larger counties in the eastern part of the state are not alarmed by this bill. They will maintain environmental health services. Another question relative to why the state eliminated the pool program. Every position in the state Health Department that was state funded was cut in the early 1990s because of budget problems. There are some state standards still in effect enforced by local health authorities.

DEBRA ANDERSON, North Dakota Department of Health testifies for Murray Sagsveen, State Health Officer. (Testimony attached). Additional comments: The fiscal note was attached with the assumption that the State Health Council would assign monitoring responsibility to the state.

I have also attached article 33-29 definitions to the testimony.

Rep. TODD PORTER : Why is this bill being proposed if we already have minimum guideline and standards in the administrative code. DEBRA ANDERSON: I believe this is meant to build on those minimums.

Hearing closed on SB 2200

1999 HOUSE STANDING COMMITTEE MINUTES

BILL/RESOLUTION NO. SB2200

House Human Services Committee

Conference Committee

Hearing Date March 8, 1999

Tape Number	Side A	Side B	Meter #
2		x	19.0-22.9
Committee Clerk Signature <i>Ways B. Humber</i>			

Minutes:

Rep. TODD PORTER, noting that rules are already in place and insurance companies are seeing that they are followed moved 'NO NOT PASS' of SB2200. Rep. WILLIAM DEVLIN seconded. Motion passed 15-0-0.

Date: 3/8/99
 Roll Call Vote #: 1

1999 HOUSE STANDING COMMITTEE ROLL CALL VOTES
 BILL/RESOLUTION NO. SB2200

House Human Services Committee

Subcommittee on _____
 or
 Conference Committee

Legislative Council Amendment Number ~~SB2200~~

Action Taken Do Not Pass

Motion Made By Porter Seconded By Devlin

Representatives	Yes	No	Representatives	Yes	No
Clara Sue Price - Chairwoman	✓		Bruce A. Eckre	✓	
Robin Weisz - Vice Chairman	✓		Ralph Metcalf	✓	
William R. Devlin	✓		Carol A. Niemeier	✓	
Pat Galvin	✓		Wanda Rose	✓	
Dale L. Henegar	✓		Sally M. Sandvig	✓	
Roxanne Jensen	✓				
Amy N. Kliniske	✓				
Chet Pollert	✓				
Todd Porter	✓				
Blair Thoreson	✓				

Total Yes 15 No 0
 Absent 0

Floor Assignment Kliniske

If the vote is on an amendment, briefly indicate intent:

REPORT OF STANDING COMMITTEE (410)
March 9, 1999 7:22 a.m.

Module No: HR-42-4292
Carrier: Kliniske
Insert LC: . Title: .

REPORT OF STANDING COMMITTEE

SB 2200, as engrossed: Human Services Committee (Rep. Price, Chairman)
recommends **DO NOT PASS** (15 YEAS, 0 NAYS, 0 ABSENT AND NOT VOTING).
Engrossed SB 2200 was placed on the Fourteenth order on the calendar.

1999 TESTIMONY

SB 2200

REGULATIONS OF FIRST DISTRICT HEALTH UNIT

This rule and regulation regulates the inspection, operation, and monitoring requirements of the public and semi-public pool and spa facilities within the boundaries of the First District Health Unit.

SECTION 1.

This rule and regulation requires that all public and semi-public swimming pool and spa facilities be annually inspected by the District Health Officer, or his designate, and provides regulations and standards necessary to make these swimming pools and spas safe and healthful.

SECTION 2.

During its months of operation, each public and semi-public swimming pool and spa facility shall submit a water sample from the swimming pool or spa, to a laboratory certified by the North Dakota State Department of Health, for a bacteriological analysis. A minimum of one sample per month must be submitted for each pool and/or spa located at that facility. Samples must be submitted for each month that the pool and/or spa is open for use by the public. If a water sample tests unsatisfactory, the facility must then submit recheck water samples from the same pool/spa for bacteriological analysis until a satisfactory test is achieved for that month.

SECTION 3.

The District Health Officer, or his designate, may temporarily close any facility that has been determined to be a health or safety hazard or in the event of a failure to comply with any of the requirements of this chapter, the department may abate or cause suspension of the use of such a facility until such time as the pool/spa facility is no longer deemed a health or safety hazard.

This rule and regulation made by the First District Health Unit Board of Health is necessary and proper for the preservation of public health and safety.



Associated Supply Company, Inc.

1500 Industrial Drive
P.O. Box 2318
Bismarck, North Dakota 58502-2318
701-258-7302
FAX 701-224-9729



Certified Pool/Spa Operator (CPO)

Wednesday, September 30 and Thursday October 1, 1998

Instructor: Jerel (Jerry) Ternes

The CPO course is designed to provide the skills and knowledge necessary to safely and efficiently manage and operate swimming pools and spas. This course fulfills the City of Bismarck's mandated requirement that pool operators be certified by a nationally recognized training agency.

This two-day course will cover water chemistry, water testing, chemicals, safety, pool/spa management, regulations, pool/spa equipment, and other pool/spa related subjects. Each student will receive a "Pool/Spa Operator's Handbook" and upon successfully completing the open book examination (scoring 70% or greater) will receive a nationally recognized "Certified Pool Operator" Certificate from the National Swimming Pool Foundation.

The demand for Certified Pool/Spa Operators (CPO's) continues to grow. The CPO represents a profession that is important to the growth of swimming and the benefits gained from it. The CPO is responsible, not only for the function and operations of the facility, but also for its acceptance by the community in which it is located and by its patrons, present and potential.

**DATE: WEDNESDAY & THURSDAY
SEPT. 30 & OCT. 1, 1998**

**LOCATION: COMFORT INN
1030 INTERSTATE AVE.
BISMARCK, ND 58501**

**TIME: 8:00 A.M. - 5:00 P.M.
WEDNESDAY & THURSDAY**

**COST: \$200.00
Includes Lunch**

Each participant **MUST** bring their own pocket calculator for the course.

All students must be registered by **September 15, 1998**. Registration is completed only after payment is received. Please complete the attached registration form and return ASAP, as class size is limited.

A block of rooms has been reserved at the Comfort Inn. For room reservations, call Comfort Inn at 701-223-1911 by **September 15, 1998**. Please mention you will be attending the CPO class provided by Associated Supply Company, Inc.

Lunch on both days will be provided compliments of Associated Supply Company, Inc., Bismarck, ND.

IF YOU HAVE ANY QUESTIONS OR CONCERNS, PLEASE CALL 701-258-7302.

Chairman Lee and Members of the Political Subdivisions Committee:

Senate bills 2200 and 2201 are interrelated. Senate Bill 2200 requires the public health units to monitor swimming facility safety at the local level; and Senate Bill 2201 provides minimum lifeguard qualifications and lifeguard equipment standards. Violation of these minimums and standards would be an infraction.

I was amazed to learn that our state does not already have such standards. I assumed when my children and grandchildren were at a public pool swimming that the lifeguards were trained in the area of cardiopulmonary resuscitation, first aid, or life guarding, and that there was adequate equipment on hand to handle an emergency. I was wrong; this bill will make it right. This bill sets out the basic equipment needed. No pool should be without this equipment. Some localities do already have procedures in place and are monitored

Similar legislation came before us during the last session, but it was not as expansive. Objection was based on the exclusivity of entities recognized as trainers. This bill expands such training entities to "any nationally accredited organization" with a lifeguard training course. There was also objection that it was a mandate to local pools to buy a lot of equipment. This bill has shortened that list to just the basics needed and is not costly. If a pool is charging an entry fee, that fee certainly assumes you are buying safety and protection - - and these are the minimums of protection. Senate Bills 2200 and 2201 meet and overcome the objections that came forth with the old bill, and I urge its passage.

I have visited with the Health Department and Health District officials about this bill and they have already formulated a plan for its implementation, which they will share with you. The need is there and they are willing to fill this need. And at all times we all agree it should be kept at a local level control wherever possible.

I urge a do pass recommendation on these two bills. Thank you.

Respectfully,



Darlene Watne
Senator, Fifth District

Name...

Representing...

Phone/Fax

Name...	Representing...	Phone/Fax
STEVEN M. NEU	Bismarck Park District	(P) 222-6455
Doug GRIFFIN	No. Dak. Research, Packer Assoc.	(F) 221-6838
Jenny Ternee	ND Insurance Reserve Fund.	224-4998
Mel Fischer	Associated Supply Co. (CPO Instructor)	224-0604 (FX)
Jane Erickson	Sanitation Coordinator - City of Bismarck	258-2070
Jenny Holweger	City of Killdeer	764-5295
Rob Graff	Missouri Valley Family YMCA	(W) 255-3601 (H) 258-8957
Pat Lono	Missouri Valley Family YMCA	255-1525
Sonja Zeitler	Missouri Valley Family Y	255-1525
Diane Chilson	American Red Cross	852-2828
Debra Anderson	ND DoH	328-4619
Larry Weber	ND DoH	328-2388
Leo Brunner	minst park Dist of ND RPH	857-4136

*Had
Fiscal
Note*

Testimony
on
SB 2200, Requiring Public Health Units to Monitor Swimming Facility Safety
before the
Senate Political Subdivisions Committee
by
Debra Anderson, Local Health Coordinator

January 15, 1999

Madam Chair, members of the Senate Political Subdivisions Committee, thank you for the opportunity to provide an overview of the impact of SB 2200 on our state's local public health units. I'm Debra Anderson, Local Health Coordinator for the North Dakota Department of Health, and I am a liaison between the state health department and the 24 local public health administrators in the state. As a link between the state and local public health system, I was assigned the task of completing the fiscal note for SB 2200.

Because the sponsors of this bill, Senator Watne and Representative Wentz, both represent Ward County, I began my research into the potential implementation and cost of the bill by contacting Lisa Clute, executive officer of First District Health Unit, a seven-county health district with its main office in Minot. Lisa wasn't able to be here today, but she has voiced support of the information I now will present.

Establishment of minimum standards for swimming facility safety should not be a difficult task. In fact, since receiving this bill late Tuesday afternoon, several administrators and environmental health practitioners from local public health units in North Dakota's larger cities have told me they currently have pool inspection programs

and would be willing to make their inspection standards available to health units that do not have them.

Following the definition of swimming facility included in SB 2201, Lisa and I used First District Health Unit's seven-county area as a model for estimating the time and travel involved in providing swimming facility inspections. We limited our calculations to pools accessible to the public that provide lifeguard services, thus eliminating hotel/motel pools and privately owned pools. Because we were not sure what would be included in the SB 2200 requirement to "monitor swimming pool safety," we chose two pool inspections per summer as a starting point for this discussion. The "ballpark" calculation for providing this service is \$155 per pool per summer.

The next step was to determine the number of pools in North Dakota that would be affected by SB 2200. With input from North Dakota Parks and Recreation, we estimated that there are about 125 pools in the state which meet the SB 2201 definition. Then, working with Keith Johnson, administrator of Custer District Health Unit and an experienced environmental health practitioner, we estimated that about 60 percent of these pools already are being inspected by local public health units.

We used 40 percent of 125 pools – or 50 pools – times a cost of \$155 per pool to arrive at the estimated yearly cost of \$7,750 to monitor the safety of pools not currently being inspected. If the committee allows the local public health units to pass this cost along to the pool owners as a licensing fee, the dollar amount of the fiscal note attached to

SB2200 will be zero. (In most cases, however, the cost would be passed on to another local government entity.)

An explanation of the potential impact of this law on local public health units in our state provides a prime example of their diversity. For example, Fargo-Cass Public Health has a swimming pool licensing and inspection program, including an established fee schedule. First District Health Unit also has an inspection and licensing program, but does not charge for this service. In both cases, pool inspections are performed by the units' environmental health practitioners.

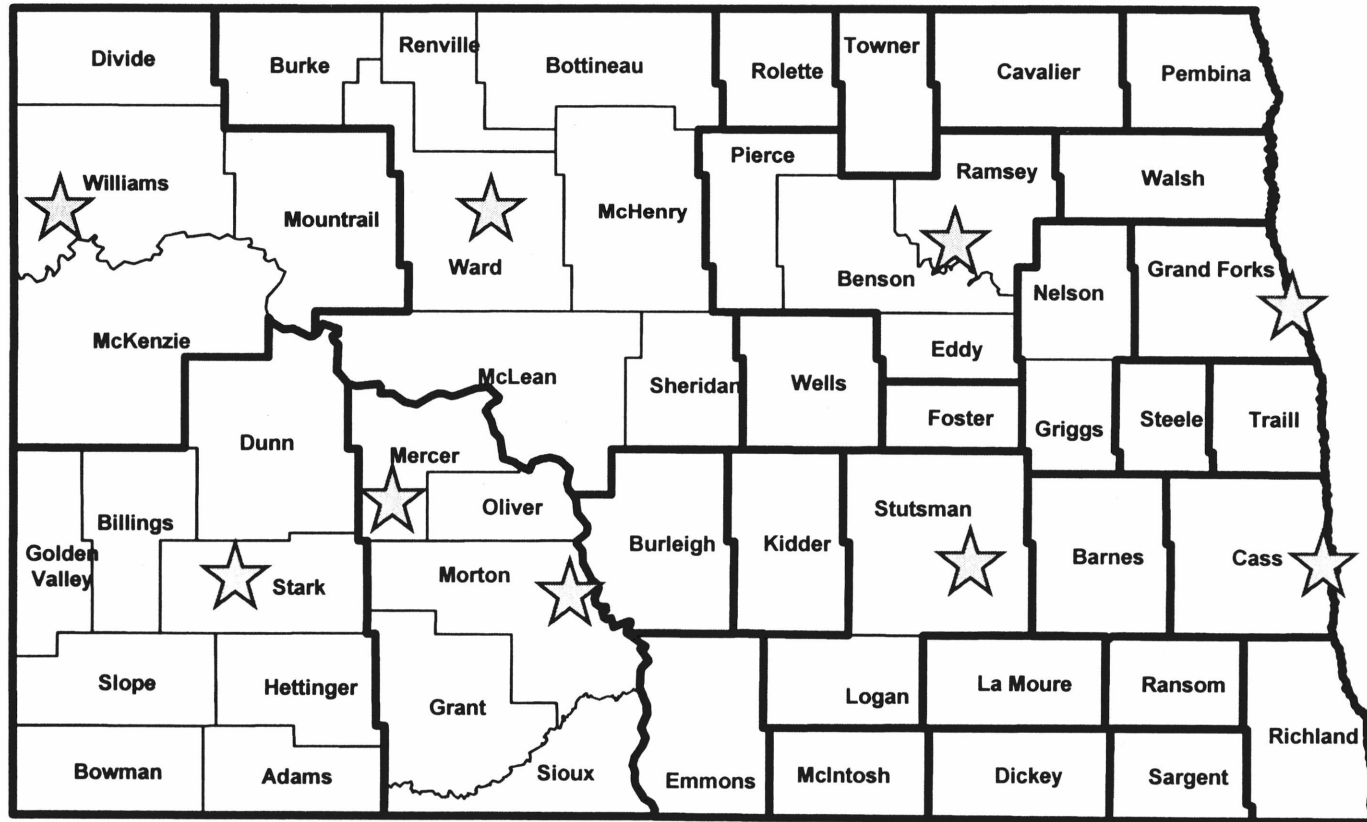
As the attached map illustrates, eight of the 24 local public health units in the state employ full-time environmental health practitioners. However, the remaining 16 health units (and most likely local governments in the four counties that do not have public health units) do not have environmental health practitioners on staff. Pool inspections in these health units would either have to be completed by public health nurses or through contractual arrangements with the eight larger units.

Both scenarios have their weaknesses. Public health nurses are not trained to provide environmental health services. Contracting for these services may greatly increase the cost of inspections because of the added time and travel expenses for the contracted environmental health practitioners. The intent of sharing this information with you is not to discourage you from recommending a "do pass" to the Senate. Rather, it is to request

that you carefully consider the potential impact of SB 2200 on our state's diverse public health system.

This completes my summary. As you can see, this information is based on estimates gathered in a short time period. I would be happy to obtain more specific information at the committee's request and to respond to any questions at this time.

LPHU EHPs in North Dakota*



*Local Public Health Unit Environmental Health Practitioners in North Dakota

January 1999

Testimony for SB 2200 and SB 2201

I have a concern with SB 2200 and SB 2201 requiring public health departments to monitor swimming facility safety and creating a definition of a lifeguard. This suggests that public health departments be available anytime the swimming facility is open to the public to insure safety. This also suggests that the public health department is responsible for public safety. This raises the question of liability to communities, such as Bismarck, for individuals harmed in a pool facility. It also creates an issue of staffing and related costs. While I support the concept of swimming pool safety, I cannot support this in its present form. Many communities, such as Bismarck, already address public safety in swimming pools in addition to safe, sanitary pool requirements. We currently administer a very stringent ordinance governing the operation of semi ~~public~~ ^{public} and public swimming pools. We have done so since 1973. My recommendation would be to develop minimum operating standards for of semi-public and public swimming pools. This should include safety, as well as, safe, sanitary water standards. In regard to SB 2201, I would suggest the following language that indicates that lifeguards must be qualified in lifeguard training, CPR and first aid if they hold an appropriate Red Cross, YMCA or equivalent certificate. SB 2201 is too confusing as it is presently stated and I do not believe it is necessary to develop another standard, when a good national standard is available.

I would offer the suggestion that this be directed to the State Health Council for implementation of minimum operating regulations of ~~public~~ ^{public} and semi-public pools so communities that do not have this service, ^{public} are provided with the authority to implement safety regulations for pool operations.

mel fischer
testimony

4880
Tape

Testimony in support of and about SB2200 and SB2201.

Before the Senate Political Subdivisions Committee.

Keith Johnson, R.S., Administrator and EHP

Custer District Health Unit, Mandan, ND Ph. 667-3370

For the ND Environmental Health Assn. and the ND Public Health Assn.

I stand in support of this bill, though I am a little puzzled as to how we will implement its provisions. After the State Health Dept. stepped out of this program in 1991, pool regulation has been a patchwork affair where the local departments have filled the gap left by the State's departure as best they could. Pools can be dangerous, and need to be inspected. The staff needs to be educated and credentialed in lifesaving. In those respects, the Environmental Health Association and the Public Health Association recognize the importance of these bills and supports their intent.

Currently, all the major cities and the rural health districts have swimming pool programs in place. This is because these agencies have environmental health practitioners on staff. Most of the single county districts and departments in the eastern half of the state do not have environmental health practitioners, and so have no swimming pool program. Some of these pools are already inspected by an EHP contracted from an adjacent agency, but most are probably not inspected or sampled. These areas would have a choice of contracting for an EHP if they can find one, or putting an EHP on staff, in cooperation with other public health agencies in the area. Recommended staffing for an EHP has historically been one EHP per 15,000 population, so the economy of scale achieved by cooperation among agencies is obvious. Either way, it will cost some money. That money could be recouped by inspection fees, supported by the public health agency budget, or by a combination. Public health agencies statewide are starting to recognize the fact that they need to provide environmental health services. The only thing holding them back is the question of how to pay for them.

The second question that must be answered is whether we want twenty four different sets of swimming pool regulations passed by twenty four different health agencies. The cities and districts already have regulations in place, and all are reasonably uniform at this point. I suggest that the State Health Council pass minimum pool regulations upon which a local public health agency can build. This would provide some degree of uniformity.

With these changes, I support the bill.



American Red Cross

January 15, 1999

This letter is written in support of the lifeguarding bill that is being introduced in the North Dakota Senate today. As Health and Safety Lead Unit for the American Red Cross the support given with this letter will encompass all Red Cross entities in North Dakota.

The American Red Cross began its leadership role in water safety when its lifeguarding program was introduced in 1914. Since the days of Commodore Longfellow (founder of the Red Cross water programs) statistics indicate a dramatic decrease in the number of deaths caused by drowning. This can be traced to the efforts of many individuals, agencies, and organizations.

Over the decades lifeguarding roles, responsibilities, and environments have become more demanding and complex. As a result, organizations like the American Red Cross have trained lifeguards to an ever-increasing level of preparedness and professionalism. With ongoing cooperation, the field of lifeguarding can continue to evolve and more injuries and deaths can be prevented.

The passage of this bill will allow trained individuals to have the proper equipment and materials available to utilize in the event of an accident. This bill will also insure that the staff hired to man the pools will be properly trained to respond effectively should an accident occur.

The American Red Cross does support passage for the lifeguarding bills and will continue to support the individuals that have been trained to offer a safe environment to the patrons of North Dakota swimming facilities.

Sincerely,

Diane Chilson
Health & Safety Director
Mid Dakota Chapter
State Lead Unit

**Testimony on Senate Bill 2200
before the
House Human Services Committee**

Murray G. Sagsveen, State Health Officer

March 1, 1999

Senate Bill 2200 states that “[t]he health council shall establish minimum operating standards for public swimming pools.” The Health Council has not met since the bill was amended in the Senate, so I am providing neutral testimony to this committee.

The Health Council has adopted rules governing the quality of water in public pools (Article 33-29, North Dakota Administrative Code). A copy of that article is attached to my testimony.

If Senate Bill 2200 is enacted, I would be pleased to work with the Health Council and all interested parties to define and “establish minimum operating standards” for the public swimming pools in the state. The interested parties would include at least the North Dakota Insurance Reserve Fund, the North Dakota League of Cities, the administrators of local public health units, and the North Dakota Parks and Recreation Association.

Even if Senate Bill 2200 is not enacted, I believe the interested parties should – and easily could – work together to establish minimum operating standards for public swimming pools.

TESTIMONY SB 2200
HOUSE HUMAN SERVICES COMMITTEE

Chairperson and member of the House Human Services Committee, I am Mel Fischer with the Department of Fire and Inspections, Bismarck, North Dakota. I am responsible for the administration of the environmental health programs for the City of Bismarck. One of those duties includes the licensing, inspection and sampling of semi-public and public swimming pools.

SB 2200, as amended, provides the vehicle to develop minimum standards for public swimming pools operating in North Dakota. This grants the authority to the North Dakota Health Council to develop and adopt uniform minimum standards for implementation throughout the state. The standards should address both life safety measures as well as water quality standards.

The City of Bismarck has been involved in the regulation of semi-public and public swimming pools since 1973. We have noted many problems with water quality every year. The user of the pool must feel confident that the pool is maintained in a clean sanitary, safe operating condition. We require pool operators to be certified as "Certified Pool Operator" to give them the understanding of proper pool operation and maintenance of swimming pools. This course is offered by the National Swimming Pool Foundation and is very in-depth. In addition to water quality and pool safety, life saving standards are also referenced during the course.

There are good national standards that are available to states to develop minimum standards necessary to address both water quality and life safety standards. We can make these available to the health council for their deliberation.

I encourage your support of SB 2200. This type of legislation is long overdue. There has been no regulation of public pools since the State of North Dakota eliminated their pool program in 1991.



American Red Cross

Madam Chair and committee members,

I am Sandi Talkington, Executive Director of the Burleigh-Morton Chapter of the American Red Cross. I am here today to support Senate Bill 2200 as a representative of all North Dakota Red Cross Chapters.

As an organization that helps people prevent, prepare for and respond to emergencies, the Red Cross has been a leader in providing CPR, first aid and water safety training for more than 85 years. In this tradition, Red Cross chapters across the state are working with local swimming facilities to offer lifeguard training that meets national guidelines for quality and consistency. Our goal is public safety. The passage of this bill is the first step in ensuring the citizens of North Dakota that uniform minimum safety standards will be met at local swimming facilities across the state.

I encourage you to support Senate Bill 2200.

Ms. Chairman and committee members,

I am Jenny Holweger. Thank you for allowing me to testify and ask for your support on Senate Bill No. 2200. I am a certified Lifeguard Trainer. I have 12 years of experience in managing swimming pools. I have seen first hand the management and operation of pools around the state of North Dakota. I feel it is extremely important to put into place a set of regulations on a state-wide basis for pool management and staffing.

The management of swimming pools has become a complex task. Many pool facilities have gone to hiring full-time professionals for management responsibilities. But still in many places, college students are managing pools for summer jobs. Not that a college student isn't a responsible person. But the jump from lifeguard to pool manager is a stretch. The pool manager is responsible for all daily operations including mechanics and chemicals, staffing issues, equipment decisions, and establishing safety standards.

For the state of North Dakota to have a standard set of regulations would strengthen public safety. Currently, each city has regulations in the city code, some very vague and other more complex. To have a standard that all swimming pools would operate under would strengthen the management and staffing at the local swimming pool. Codes could be introduced at the lifeguard training level, beginning the education of future pool managers. Park boards and aquatic committees would know where to look to find the regulations and strive to make their pool the safest it can be.

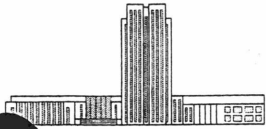
I encourage you to support Senate Bill No. 2200. With this legislation, the State Health Council can provide the guidance needed to make North Dakota a safe place to swim. Thank you for your attention. I would be happy to answer any questions you may have.

NORTH DAKOTA SENATE

STATE CAPITOL
600 EAST BOULEVARD
BISMARCK, ND 58505-0360



COMMITTEES:
Judiciary,
Vice Chairman
Political Subdivisions



Senator Darlene Watne
District 5
20 28th Avenue SW
Minot, ND 58701-7065

Chairman Price and members of the House Human Services Committee:

I am Darlene Watne, Senator for the 5th District, Minot. Fifth District is the only inner-city district in Minot. It is all of southwest and part of southeast Minot. All other districts encompass some of the inner-city and then reach out and embrace rural areas.

SB 2200 comes before you and simply reads, "*The Health Council shall establish minimum operating standards for public swimming pools.*"

The brevity is deceptive because this is a powerful bill, and only by sharing the background of the formation of the bill will you appreciate the depth of importance. So, let me tell you what has happened.

Until 1991 the Health Department oversaw the pools in our great state. Because of budget restrictions, the Health Department removed this responsibility from their portfolio. Problems, serious safety problems, arose at the public pools around the state. Every session since then we have seen bills to try to eliminate the problems, all to no avail because they would cost the political subdivisions money, seen as a mandate, and no one could agree on the type of equipment that should be in place at their pools - - every list was considered another mandate - - and no one could agree on the best training method. Singling out one or two entities, such as the Red Cross or YMCA seemed to show favoritism, was seen as fence building, or seemed discriminatory to other entities with such classes.

In our state there are four types of pools: (1) Public, (2) Private, (3) Nonprofit, and (4) Semipublic, which would include the colleges and universities, YMCA, hotels and motels. The bill before you deals only with the public pools. I was amazed to learn these pools have no standards. I presumed when my children or grandchildren were at a public pool swimming that the lifeguards were trained in the area of cardiopulmonary resuscitation, first aid, or life guarding, and I assumed there would be adequate equipment on hand to meet an emergency. I felt if I paid a fee for them to swim, they would be safe. I was wrong and this bill will make it right.

There are basically four areas of concern when you look at swimming pool safety. They are structure (the pool itself), equipment, personnel training, and water quality.

I sit on our Red Cross Board in Minot and one of our devoted staff came to me with the problem. I remembered Grant Brown's bill from last session, which was heard in Political Subdivisions of which I am a member in the Senate, and I remembered our

objections such as I just described. When the persistent safety problems were outlined to me, and they had gotten even more prevalent since our last session, I was determined to try to do something, even though I had voted against the bill last session.

At that point I talked to Grant and Legislative Council. We drafted two bills, SB 2200 and SB 2201. SB 2200 before you today asked that the local public health department and public health districts establish these minimums on training and equipment and monitoring; SB 2201 specified the types of training courses and opened up the training courses to "any nationally accredited organization." The equipment list was pared to the bone so there was little expense to the political subdivisions. We hoped we had met the objections to prior bills.

Hearing time came. The room was packed with people.

Representatives of the Red Cross and YMCA, including young people who teach some of these swimming classes, told us of some serious problems. A few examples were going to swimming pools where the lifeguards are fully dressed, including shoes, walking around the pools, no safety equipment in sight. They told of young people already hired for the summer, the teenagers of the year in a small city, who come for training and don't know how to even swim.

A Park Board manager from Minot said their insurance company has strict rules that covers all this, including testing of the water, so such rules would be redundant.

A representative of the Health Department indicated it might be a problem for them to oversee in areas where they don't have environmental health programs set up. She indicated it would probably cost \$100 to \$150 a visit for testing. The bill called for testing twice a year, so we thought about a change to once a year. They were more than willing to implement such a program, but how could we control the costs, both to the state and the political subdivisions? Political subdivisions impacted could be the park districts or the cities, however the pools are owned across the state.

We learned there have been deaths of our youth in our pools.

We learned it is extremely important to have good testing because the communicable diseases out there are more deadly than ever.

We learned that the hotel and private pools are probably more dangerous than our public pools, so shouldn't we include them in our bill?

That is just a smattering of some of the testimony. The longer it went, the more obvious it was to me that we had a serious problem on our hands and there were lots of approaches and lots of entities involved.

So the Senate Political Subdivisions Committee formed a Task Force of which I was chairman, and we set a date for discussion. We had 19 people show up, each representing an integral part of the question. Many were people who testified at the hearing representing the YMCA, Red Cross, Health Department, cities, park boards, United Way, and others. Since the insurance companies were involved, Connie Spryznatic invited Doug Griffin from the ND Insurance Reserve Fund. That company

insures 90% of the pools in the state and they already have strict guidelines they follow, as the Park Board manager from Minot indicated.

A statement had been made during the testimony when a young person was asked what they would do in their local pool if there was a pool accident. The witness said they wouldn't remove the injured person, they would wait for the EMS unit. Our Health Department representative brought a EMS worker to our Task Force meeting to tell us that it might be hours before they could respond, so that showed another area of lack of training, lack of guidelines, that are sorely needed. Mr. Griffin and the EMS representative were the only two who had not been at the previous hearing, they were invited to participate so we had their expertise. I asked Connie to help guide this Task Force with me and she did a beautiful job. The result of the Task Force discussions is now before you:

"The Health Council shall establish minimum operating standards for public swimming pools."

. . . and SB 2201 then came to the floor with a "do not pass" recommendation. The items in that bill - - recognizing any nationally accredited training course and the minimum equipment needed - - can be addressed when the Health Council establishes these minimum standards.

The Health Council consists of 11 members appointed by the Governor with 4 people from the health care field, 5 representing consumer interests, 1 from the energy industry, and 1 from manufacturing and processing. Everyone in the Task Force felt this was a good vehicle for establishing minimum standards.

All of the members of our Task Force felt they would attend the public hearings which the Health Council will hold to establish these standards because each of them have special interests, special concerns, and expertise in the various standards needed. This was an excellent Task Force and their assistance to the Senate Political Subdivisions Committee was deeply appreciated. And Connie deserves a crown for her participation and guidance.

As I said at the beginning, the brevity of this bill is deceptive because it is a powerful bill. It will be very interesting to follow the progress of the formation of minimum standards that will finally insure safety to our public swimming pools. I will feel much more at ease taking my grandchildren swimming.

Thank you for your attention and the children in the State of North Dakota thank you.

Respectfully,

Darlene Watne
Senator, Fifth District