



The National Environmental Health Association (NEHA) represents more than 7,000 governmental, private, academic, and uniformed services sector environmental health professionals in the U.S., its territories, and internationally. NEHA is the profession’s strongest advocate for excellence in the practice of environmental health as it delivers on its mission to build, sustain, and empower an effective environmental health workforce.

Policy Statement on Recreational Waters: Model Aquatic Health Code

Adopted: October 2020

Policy Sunset: October 2023

NEHA’s Policy Statement

NEHA supports national, state, and local policies, regulations, research, and resources that will enhance the abilities of environmental health professionals to ensure aquatic venue safety and to protect public health. NEHA recommends the following for state, local, tribal, and territorial government agencies:

- xx &é) \$ †-â n p 5 l e r i s p e c t i o n s t h a t b a s e d o n t h e M A H C t o e n s u r e s a f e t y a n d p r o t e c t p u b l i c h e a l t h , a n d p r o v i d e u n i f o r m d a t a o n a q u a t i c h e a l t h .

- x Encouragement of the public to engage in safe and hygienic swimming

The MAHC draws on the experience of all sectors involved and presents a set of guidelines using
s and promote healthy
recreational water experiences” (CDC, 2014). Jurisdictions can choose to adopt the MAHC in its

pool chemical practices such as disinfectant chemicals being improperly labeled or stored (Hlavsa et al., 2016).

Aquatic facilities that do not meet health codes or follow codes that do not reflect the latest science and best practices might not minimize the risk of recreational water illness and injury and protect public health. Pool water might be contaminated by human and environmental sources and could become a vehicle for transmission of pathogens once they are introduced into the water. One of the ways swimmers can introduce potentially infectious microorganisms into pool water is from contaminants washing off their skin. For this reason, bather hygiene is particularly important for protecting public health. By analyzing shower water samples, one study demonstrated that most contaminants can be removed from the skin by a shower (Keuten, Schets, Schijven, Verberk, & Van Dijk, 2012).

Reported disease outbreaks associated with aquatic facilities have increased over recent decades. From 1978–2012, 650 disease outbreaks associated with aquatic facilities were reported to the Centers for Disease Control and Prevention (Hlavsa et al., 2016). A study that looked at only 2011–2012 data documented 69 waterborne outbreaks in treated U.S. waters, resulting in 1,309 cases of illness and one death (Hlavsa et al., 2015). The increase in the number of outbreaks of pathogen *Cryptosporidium*, beginning in the early 1990s,

annually. *Cryptosporidium*

in 2012 and accounted for 52% of outbreaks from 2011–2012, infecting as many as 144 people in a single outbreak (Hlavsa et al., 2015, 2016). While chlorine does not effectively treat

Cryptosporidium at levels normally maintained for disinfection and bather comfort, it does inactivate many other pathogens at these levels. Outbreaks of chlorine-susceptible pathogens

illustrate the cost of treatment for

disinfection byproducts. In 2007, 665 reports of respiratory and eye irritation were documented

Retrieved from

http://www.cdc.gov/healthywater/swimming/swimmers/health_benefits_water_exercise.html

Centers for Disease

World Health Organization. (2006). Drowning and injury prevention. In Guidelines for safe recreational water environments. Volume 2: Swimming pools and similar environments (pp. 12 – 25). Geneva, [Switzerland: Author. Retrieved from https://www.2/en/](#)

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