CMAHC 2016 Member Progress Report
Building a Strong Foundation for the Future

Annual Update April 2017

Driven by your expertise.

The Model Aquatic Health Code (MAHC)
Thanks to Our Sponsors

Founding

Gold

Bronze
In just 3 years (2014-2016), members helped CMAHC:

- Build a national network of ~660 public health/aquatics experts
- Develop a process for these experts to suggest MAHC changes, technically review them, and vote on passage
- Convene 2 national conferences and build a robust website
- Lead a national discussion resulting in >30 jurisdictions reviewing the MAHC; initial adoptions have already occurred
- Raise awareness of the MAHC so it drives aquatics sector use and public health waivers prior to adoption
- Engage members to create bylaws, advance aquatics through technical innovation, and get involved in CMAHC operations
- Assist CDC with release of the 2016 MAHC 2nd Edition; 84 CMAHC-suggested changes incorporated just 2 years after release of the 1st Edition
CMAHC VISION, GOALS, AND AQUATICS
What is the Vision for Aquatics? Why Are Here?

- Public pools/waterparks/spas in every community
  - Well operated and they remain open on inspection
- Everyone knows how to swim
- All age groups enjoy the health, social, and family benefits
- Healthy and safe experiences for everyone
  - Improving swimmer ability, knowledge, and hygiene
  - Reducing drowning
  - Reducing chemical and other injuries
  - Limiting disease outbreaks
- The MAHC can achieve the long range vision using incremental change to move aquatics towards the vision
  - Examples: Improved shell designs, filtration systems, water and air quality, bather supervision
2015 CMAHC Outcome “Wish List”

- First state/local adoption(s)
- 2015 (first) Biennial Conference successfully convened
  - Process from change request submission to voting put in place
- Research plan funding initiated
- 2017 Ad Hoc Technical Committee(s) in place for key discussions pre-2017
- Outreach support systems for health departments and other partners more robust
- Sustainability improving: membership/sponsorship up
CMAHC Board Strategic Planning

- Defined Goals
  1. Sustainable Financial Model by 2018
  2. Define, Document, Improve, and Publish CR Approval Process
  3. Balanced and Active Membership Representation
2016 MAHC 2nd Edition

- CMAHC delivered member recommendations January, 2017 based on 2015 Conference vote
- CDC incorporated most changes and released the MAHC 2nd Edition July 15, 2016
  - CMAHC passed 92/159 (58%) change requests. CDC accepted 84/92 (91%)
  - Underscores CDC’s CMAHC partnership commitment
- MAHC use (CDC site)
  - >50,000 page views since July 15, 2016
  - >4000 downloads of 2nd Edition Code
  - ~2000 downloads of the Annex
- CMAHC website use
  - 94,000 page views over past year despite being a non-conference year
MAHC ADOPTION
MAHC Adoption Status

Key considerations
- States must review and fit into regulatory process and timeframe: adoption can take ≥ 2 years; Food Code sped up after 3-6 years

Endorsements
- NACCHO 2015; NEHA imminent; CSTE 2017?

Adoption
- Full adoption: NM (08/01/2016 after 2+ years prep); Nova Scotia, Canada
- Partial adoption: DE, PWTAG/UK
- In review for potential adoption: almost 30 jurisdictions such as CO; IA; IN; MD; NY; OH; Southern Nevada/Las Vegas, Ontario, Canada; Colombia

Clear role for aquatics sector advocacy to speed adoption
Visible Groundswell Following MAHC Release: Becoming a Standard While Waiting for Adoption

- Operational adoption: Use in operations, MAHC-compliant operational materials, and operational assistance
  - e.g., YMCA operations manual, Great Wolf Lodge operational guidance, Jeff Ellis & Assoc. guarding materials
- Variances granted: MAHC-based variances/waivers given liberally to requestors while discussing adoption (e.g., FL, NY, CT)
- Surrogate pool code: States without a pool code pointing to MAHC for design, operation, management guidance (e.g., MS)
- Acceptance of design requirements: MAHC design features becoming accepted and not immediately removed from designs due to cost
  - Clients signing liability waivers if they require removal (e.g., secondary disinfection on increased risk venues)
- Being referred to as standard of care
COMMUNICATION WITH MEMBERS
Website and Communications

- Website re-organized, refreshed, and updated for 2017 biennial conference. CMAHC process pages built out.
  - On-line services being built before move to responsive design
  - CMAHC database search function updated to 2nd Edition including Annex linkage
  - Conference registration system built and launched April 3. Links to NSPF/WAHC
- Initiated regular member updates
- Presentations: Sponsor updates; WAHC listening post, Int. Pool Spa Expo, IAAPA, GA Recs/Parks, Neptune-Benson Partner Summit
MAHC Network

- Started by NACCHO 03/15/2016
- Network is a community for MAHC users, subject matter experts, and those hoping to learn about the code
  - Members receive code updates, bi-monthly webinars
    - NM and CO adoption process; MAHC model inspection forms and inspection tracking system
    - Industry perspective on the MAHC; Ron George, Neptune Benson; Dewey Case, YMCA; Cody Butcher, Great Wolf Lodge on “why industry supports adoption of the MAHC”
    - Learning lessons from mass chlorine exposure; approaches to float tank regulation

CMAHC ORGANIZATION AND BIENNIAL CONFERENCE PREPARATION
Board of Directors

- Revised CMAHC Bylaws developed by Ad Hoc Committee passed by Board
  - Increases the size of the Board to 14 members (adds 4 persons)
  - Sets term limits of 6 years (not for CDC Director’s)
  - Sets voting for Director's at the Biennial Conference
Improving CR Review and Member Comment Changes

- TRC to serve like MAHC development steering committee
  - Balanced public health/industry representation

- TRC to be backed up by 7 technical committees modeled after MAHC development process
  - Design and Construction; Disinfection and Water Quality, Injury Prevention, Risk Management, and Safety; Lifeguarding and Bather Supervision; Operation and Maintenance; Recirculation and Filtration; Ventilation and Air Quality
  - TRC to reach out to technical committees for assistance with reviews

- TRC reviews to be open for members to hear discussion
  - Conference calls open for member listening but not two way conversation
  - Members can then submit comments as needed
MAHC Process and Conference Preparation

- Over 90 members volunteered to be on technical committees
- Enrolled TRC, revised guidance materials, and conducted member orientation call
- Enrolled TSC members for 7 committees and had orientation calls
- CR submission and comment process fully on-line
  - 180 Change requests submitted
  - ~90 member comments already submitted
- Director reviewed all CRs for completeness and released to Technical Review Committee
Technical Review Committee

- Carl Nylander, Chair: Counsilman-Hunsaker
- Amanda Tarrier, Vice-Chair; New York State Department of Health
- Dewey Case, YMCA of Southeast Mississippi
- Steven Chevalier, Tri-County Health Department, CO
- Michele Hlavsa, CDC
- Josh Jacobs, UL
- Eugene Knight, New Mexico Environment Department
- David Lawrence, Fairfax County Health Department, VA
- Ellen Meyer, Lonza
- Joe Stefanyak, Jeff Ellis & Associates, Inc.
- Laura Suppes, University of Wisconsin-Eau Claire, WI
Ad Hoc and Standing Committees

- CMAHC Bylaws
  - Product delivered, Board finalized, posted on website

- Stabilizer Review: product publication being drafted

- Acoustics: product submitted as Change Request

- Chlorinator sizing: product submitted as Change Request

- Float Tank Design and Operation: formed, CR submitted

- Solicited volunteers for CMAHC Standing Committees
VOTING
Voting: The CMAHC Board Listened!

- Many comments from members about vote weighting. Request to eliminate weighting within aquatic's sector (10% manufacturers, 20% designers, 20% operators)
  - Board discussed, gathered feedback, and eliminated
- Other discussion on PH and aquatics 50:50 weighting
  - 51.5% (34/66) public health; 55.7% (44/79) of aquatics CRs passed
- Of 159 Change Requests, weighting impacted 8% (13/159); 12 Yes by straight vote changed to No, 1 tie on popular vote changed to No
  - All 13 had a TRC recommendation of No
  - Biggest indicator of passage was TRC recommendation. Of TRC recommendations, members only disagreed with 2% (3/150)
- CDC doesn’t want to overrule CMAHC vote if possible
Weighting of CMAHC Member Votes

**Public Health/Regulatory Sector**
- Federal, State, and Local Public/Environmental Health Staff
- Pool Regulatory Programs

**Aquatics Sector: Operators & Providers**
- Manufacturers/Suppliers
- Designers/Builders
- Consumer/Aquatic Management/Staff
SUSTAINABILITY
Sustainability

- **Membership**
  - 662 members; will likely increase as biennial conference year moves forward
  - Membership renewal to occur post-2017 conference

- **Sponsorship**
  - 3 Founding, 3 Gold, 5 Bronze

- Revised all sponsor and Member recruitment information

- CDC Division, Center, and Director levels still firm in its support of MAHC dissemination and voluntary adoption
MONITORING AND EVALUATION
MAHC Monitoring and Evaluation

- May 2016: Published first Network for Aquatic Facility Inspection Surveillance (NAFIS) System data analysis
  - Baseline data for 2013
- System will routinely evaluate pool inspection scores from five counties in top five pool states (AZ, CA, FL, NY, TX)
  - State of operation, trends, data for pool program decision making
  - Track impact of MAHC adoption in longer term
- Baseline Summary
  - >84,000 inspections from >48,000 aquatic venues (~15-16% of all public venues in U.S.)
  - 12.3% (8,118) of routine inspections resulted in immediate closure; 11.8% for pools; 15.1% for spas
- CDC moving to publish additional years of data for 2017
PLANNING FOR THE FUTURE
2017 CMAHC Outcome “Wish List”

- Continued state/local review and adoption of MAHC
- Vigorous discussion and commenting by members on 2017 Change Requests
  - Improved Biennial Conference
- Engagement of members through new committees to build sustainability and impact
- Improved business model; core funding secured
- Outreach support systems for health departments and other partners increasingly robust
- Raised awareness with members about the MAHC being a transformational model code