

**Environmental Health and Safety  
 Policy #MAN13  
 Public Health Program Manual**

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Approved and issued by order of:



Wendy Ash Graves  
 Director, Environmental Health and Safety

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FLORIDA ATLANTIC  
UNIVERSITY

ENVIRONMENTAL HEALTH AND SAFETY

# Public Health Manual

Florida Atlantic University

Office of Environmental Health and Safety

May 2023

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## **1. Introduction**

Florida Atlantic University (FAU) is committed to providing a safe and healthy working and learning environments for all its employees, students and visitors. As such, public health is an important concern to the university community. This manual provides information to the university community regarding the scope, methods, responsibilities, and legal authority for evaluating and protecting the public health of the campus.

## **2. Administration and Responsibilities**

Public Health is a cooperative effort between Florida Atlantic University, its employees, students, volunteers, and affiliate organizations. All must work in concert to ensure the Public Health of the university community.

### **2.1. Environmental Health and Safety (EH&S)**

EH&S administers the Public Health Program at FAU according to guidance from the Florida Department of Health (DOH) and the Centers for Disease Control.

### **2.2. Florida Department of Health**

The state health department has oversight of all aspects of public health. It works to protect, promote, and improve the health of all people in Florida through integrated state, county and community efforts. The DOH programs are administered on a county basis; thus, FAU falls under the purview of Palm Beach, Broward and St. Lucie counties.

### **2.3. FAU Public Health Officer**

The FAU Public Health Officer (PHO) is responsible for:

- A. Oversight of the Public Health Program at the university.
- B. Reviewing activities and facilities for public health concerns.
- C. Advising committees about public health concerns.
- D. Reporting public health issues to the DOH
- E. Conducting inspections of food service venues.

### **2.4. Employees, Students, Faculty**

Employees, students, and faculty are responsible for:

- A. Their own safety—practicing appropriate personal hygiene.
- B. Notifying EH&S about any public health concerns.
- C. Complying with any public health directives from the DOH and/or the university.

### 3. Animal Policy

FAU has a variety of animal species which live in our campus community. In order to keep students, faculty, staff and visitors safe, FAU follows the rules and regulations outlined in county animal ordinances. Animals are not allowed in any campus building except for those authorized through the Institutional Animal Care and Use Committee for educational or research projects, service animals or emotional support animals used in accordance with Federal and State law, or animals approved for use at special events. FAU has specific policy guidelines for [Service Animals](#) and for [Emotional Support Animals](#), which should be reviewed prior to bringing one of these types of animals to campus. Pets are discouraged due to health-related problems such as allergies, possible disease transmission or animal bites. Information regarding animals commonly found in our area includes:

#### 3.1 Domestic Animals

- A. Domestic animals must be under positive control (i.e. leash, cage, voice, signal, etc.) of the owner/handler. All dogs on campus must be on a leash at all times except during approved sponsored events. While on campus, and to the extent required or permitted by law, proof of required registrations and vaccinations must be displayed by domestic animals or in the possession of the owner/handler. Animals, which bite, attack or threaten to bite human beings constitute a public nuisance and the proper authorities will be notified.
- B. Fecal matter deposited by animals on campus must be removed immediately by the owner.
- C. The presence of any animal, wild or domestic, in any unattended motor vehicle without proper food, water, or ventilation, or subjected to extreme temperatures that could affect its health or safety, will be reported to EH&S and the proper authorities.
- D. Emotional Support Animals. Emotional support animals can be approved for students through Student Accessibility Services. A student is limited to one (1) animal, and the animal is limited in access to the residence halls. More information can be found on the [Student Accessibility Services website](#).
- E. Service Animals. FAU permits the use of service animals as defined by the Americans with Disabilities Act and Florida Statute. The animal must be trained to do work or perform tasks for the benefit of an individual with a disability, including a physical, sensory, psychiatric, intellectual or other mental disability.

FAU reserves the right to exclude or remove any animal from the premises, including a service animal, if the animal's behavior is not under the positive control of the owner or poses a direct threat to the health and safety of others. Allergies and fear of animals are not valid reasons for denying access or refusing service to an individual with a service animal. If an animal is properly excluded we must give the individual with a disability the opportunity or participate in the service, program, or activity without having the service animal on the premises.

Please see the [FAU Guidelines for Service Animals on Campus](#) policy for more information.

### 3.2. Wildlife and Stray Animals

- A. Sighting of injured or sick wild animals (e.g., racoons, skunks) on campus should be reported to the Environmental Health & Safety Department at 7-3129.
- B. Feral cats are any cats that have no apparent owner or identification and are apparently wild, untamed, and unmanageable and should not be approached or handled. These cats can be a public health and safety concern due to rabies, toxoplasmosis, other zoonotic diseases. If you notice any feral cats or cat colonies that have become a nuisance, please contact EH&S at 7-3129..
- C. Do not feed or approach wild or stray animals on campus.
- D. Recreational fishing is not permitted on FAU campuses.
- E. For removal of animal carcasses found on university property, contact EH&S. A work order can also be placed in FAMIS for this service. For additional information on reporting dead birds read West Nile Virus Encephalitis under Communicable Diseases.
- F. Please do not harbor, feed, or keep stray animals on the campus of FAU. Notify Environmental Health and Safety and the Grounds Department to humanely remove the animal or animals.

### 3.3. Animal Bites

If you experience a bite from an animal (wild or domesticated), immediately wash the affected area with soap and water and seek medical attention if necessary. Students should seek medical attention at Student Health Services. If employees are bitten during work hours and required medical treatment, either the supervisor or injured employee must call AmeriSys at 1-800-455-2079 immediately and prior to obtaining medical treatment. Please report all animal bites to EH&S at 7-3129.

### 3.4. Rabies

Rabies is a viral disease that causes acute encephalitis in warm-blooded animals. Rabies in raccoons and other wildlife is considered endemic throughout the state of Florida. All wildlife contact should be avoided, particularly raccoons. Animals exhibiting signs of sickness and aggressive behavior should be reported to EH&S at 7-3129. The owner of a dog or cat on campus shall have such animal vaccinated against rabies with a vaccine approved by the United States Department of Agriculture when recommended by a veterinarian, but by no later than four (4) months of age. Animals must be re-

vaccinated 12 months after the initial vaccination. Thereafter, the interval between vaccinations shall conform to the vaccine manufacturer's directions.

### 3.5 Burrowing Owls

The Burrowing Owls are an important part of the Florida Atlantic University community. They reside in the surrounding areas around the Boca Raton Campus. Do not disrupt the owl nests or habitats. If an owl is spotted, do not bother or try to capture it. If you observe an owl or owl's nest being disturbed, contact EH&S at 7-3129 and Florida Fish and Wildlife at 1-888-404-3922 to report the incident. Please contact EH&S for conservation efforts on campus. <http://fau.edu/student/handbook/burrowing-owl.php>

### 3.6 Alligators

If you encounter an alligator that is a potential threat, immediately call EH&S. EH&S will then contact the Florida Fish and Wildlife Conservation Commission. Further information on alligators can be found at <https://myfwc.com/conservation/you- conserve/wildlife/gators/>.

### 3.7 Wild Hogs

Wild hogs are not a native species, but exist in all 67 counties of Florida, but, within the FAU campuses, are most prevalent at HBOI. These animals can carry parasites and diseases including, but not limited to, pseudorabies virus and swine brucellosis. The former is primarily transmitted to livestock, but humans can be infected with the latter. If you see a wild hog, do not approach; slowly move away and do not provoke the animal.

### 3.8 Pest Control on FAU Campuses

Pests, including insects, rodents and other vermin, are not only a nuisance, but a health hazard to the campus. All FAU campuses have a pest control service in place. If you see evidence of pests in your area, you can request assistance from facilities by placing a work order request through the [FAMIS system](#).

### 3.9 Special Events Involving Animals

Animals that are used in special events held on FAU campus must get approval three weeks before the event. The following items must be submitted to the appropriate Departments before approval is issued:

- A. Event Management Office will need to be notified of the event.
- B. Space Utilization and Analysis would need to approve the Facilities Use Application.
- C. Risk Management will review and approve the liability insurance.



- D. Veterinary Services will review and approve the vet/health status report on the animals.
- E. EH&S requires assurance that the event will take place in a sanitary manner, which may include waste bags, trash receptacles, and hand washing for participants.

### 3.8 Iguanas

Green iguanas are plentiful on and around the FAU campuses. These animals are not native to Florida and are considered an invasive species due to their impacts on native wildlife. Like all nonnative reptile species, green iguanas are not protected in Florida, except by anti-cruelty law. Iguanas are large animals, reaching five feet in length and weighing up to 17 pounds.

Hazards associated with iguanas:

- Iguanas are venomous, but the venom is weak and harmless to humans.
- The bite from an iguana can cause severe injury and be quite painful.
- Iguanas have long, sharp claws that can cause significant scratches.
- Iguanas are known to carry Salmonella bacteria and you can become infected through bites and scratches.
- Iguanas have long tails, which they can whip rapidly, potentially causing bruising and injury.

## 4. Childcare Facility

Florida Atlantic University follows Florida Administrative Code “Child Care Standards” (FA 65C-22). This document can be found at: <https://www.flrules.org/gateway/ChapterHome.asp?Chapter=65c-22>. Environmental Health and Safety monitors the health and safety of these facilities on campus through routine inspections and assisting the Department of Health. EH&S will perform follow-up inspections on any facility with unsatisfactory inspection reports until compliance is met.

### 4.1 Employees

- A. All employees, excluding the Director, must be eighteen (18) years of age or over. The Director of the facility must be 21 years of age or older. All employees must be free from alcohol, drug abuse or any mental illness which may be injurious to children. They must be of good moral character as determined by screening, fingerprinting and background checks.
- B. All medical forms and immunizations must be up to date.
- C. All employees must have read or have been read to them the “Child Abuse and Neglect in Florida, A Guide for Professionals”. A statement must be on file that they have read this guide.

- D. All employees must complete Department and Children and Families 40-hour introductory course on childcare. Exemptions can be made for certain employees.
- E. All employees must also complete the 5-hour continuing education unit of training in early literacy and language development of children from birth to five-years of age.
- F. All employees, including the Director, must have a current first aid and CPR certification and OSHA Bloodborne Pathogens training.

#### 4.2 Facilities

- A. Premises located at or near any water hazards such as pools, lakes, canals or ditches, etc. must be fenced for the protection of the children.
- B. All facilities must have adequate potable water supply and toilet facilities.
- C. In the area where food is served, there must be adequate cooking facilities and refrigeration as well as sanitary washing of dishes and utensils.
- D. Premises must be kept clean and free from mice, rats, roaches, debris and insects.
- E. Outdoor play area shall be fenced in accordance with applicable rules and regulations.
- F. Tempered glass is required where there are glass sliding doors.
- G. Emergency numbers must be posted at all telephones - 911, Poison Control and Abuse Hotline.
- H. First Aid kits with manual must be available and stocked as mandated in Florida Administrative Code 65C-22.
- I. Thirty-five (35) square feet of usable space per child is required.
- J. Employees must keep all poisons, detergents, cleaning materials, medicines and other items dangerous to children under lock and key. They must obtain and maintain a lock box to refrigerate medication. Kiddy locks, chains with locks and privacy locks are not acceptable.
- K. Enrollment information, emergency authorization, physical examinations, field trip permission, and immunization records are required of all children in the facility.

For complete rules and regulations governing childcare facilities in Florida:  
<https://www.myflfamilies.com/service-programs/child-care/docs/statutes.pdf>.

#### 4.3 Infection Control/Disease Prevention in Childcare Facilities

##### A. The Flu and Other Upper Respiratory Diseases

###### A.1. Routes of Transmission

The main way that illnesses, like influenza (flu), colds, and Respiratory Syncytial Virus (RSV) are spread is from person to person through coughs and sneezes. Droplets from the cough or sneeze of an infected person can travel through the air and reach the mouth or nose of people nearby. Sometimes these viruses can also be spread when a person touches droplets, nose drainage or saliva from an infected person, or a soiled object, and then touches one's own (or someone else's) nose or mouth before washing hands.

## A.2. Prevention in Childcare Settings

Vaccination against the flu each influenza season remains the primary way to prevent this disease. Vaccination, along with other measures, also may help to decrease the spread of influenza among children in the childcare setting and among care providers. Other ways to prevent these illnesses:

- **Encourage parents of sick children to keep the children home and away from the childcare setting until the children have been without fever for 24 hours, to prevent spreading illness to others. Similarly, encourage sick care providers to stay home.**
- Encourage care providers and children to use proper personal hygiene including: soap and water to wash hands when hands are visibly soiled; or an alcohol-based hand rub when soap and water are not available, and hands are not visibly soiled; and to cover up a cough or a sneeze with the crook of their elbow rather than the hand.
- Encourage care providers to wash their hands to the extent possible between contacts with infants and children, such as before meals or feedings, after wiping the child's nose or mouth, after touching objects such as tissues or surfaces soiled with saliva or nose drainage, after diaper changes, and after assisting a child with toileting.
- Observe closely, all infants and children for symptoms of respiratory illness. Notify the parent if a child develops a fever (100°F. or higher under the arm), chills, cough, sore throat, headache, or muscle aches.
- If an infant or child does show signs/symptoms of respiratory illness and the parents are coming to pick up the child, keep the sick child separated from the rest of the children to prevent spread of the illness. Send the child home, if possible, and advise the parent to contact the child's doctor.

## B. Strep Throat

Group A streptococcus (GAS) is a bacterium often found in the throat and on the skin. People may carry group A streptococci in the throat or on the skin and have no symptoms of illness. Most GAS infections are relatively mild illnesses such as "**strep throat**," or impetigo. On rare occasions, these bacteria can cause other severe and even life-threatening diseases.

### B.1. Routes of Transmission

These bacteria are spread through direct contact with mucus from the nose or throat of persons who are infected or through contact with infected wounds or sores on the skin. The bacteria can also be spread by respiratory droplets, similar to flu. Ill persons, such as those who have strep throat or skin infections, are most likely to spread the infection.

### B.3. Prevention

The spread of all types of GAS infection can be reduced by good hand washing, especially after coughing and sneezing and before preparing foods or eating. Persons with sore throats should be seen by a doctor who can perform tests to find out whether the illness is strep throat and receive the appropriate medical attention.

### C. Hepatitis A Infection

Hepatitis A is a viral infection of the liver caused by the Hepatitis A virus (HAV). It is one of the most common vaccine-preventable diseases in the United States.

#### C.1. Routes of Transmission

HAV reproduces in the liver and is then shed in the stool of infected people. Virus can also be found in the blood. Infection by HAV occurs primarily through the fecal-oral route by either personal contact or by ingestion of contaminated food or water. Symptoms often include fever, malaise, nausea, and abdominal discomfort followed by jaundice. Young children infected with the virus are often asymptomatic and spread the illness unknowingly to older children and adults.

#### C.2. Prevention

Hepatitis A vaccine is the best protection. Short-term protection against hepatitis A is available from immune globulin. It can be given before and within 2 weeks after coming in contact with HAV. Always wash hands with soap and water after using the bathroom, and before preparing and eating food. Childcare workers are especially encouraged to practice good hygiene when handling and changing diapers.

## 5 Communicable Diseases on Campus

Communicable diseases, also known as infectious diseases or transmissible diseases, are illnesses that result from the infection, presence, and growth of pathogenic (capable of causing disease) biologic agents in an individual human or other animal host. Infections may range in severity from asymptomatic (without symptoms) to severe and fatal. Disease causing biologic agents include viruses, bacteria, fungi, protozoa, multicellular parasites, and aberrant proteins known as prions. Transmission of these biologic agents can occur in a variety of ways, including direct physical contact with an infectious person, consuming contaminated foods, or beverages, contact with contaminated body fluids, contact with contaminated inanimate objects, airborne (inhalation), or being bitten by an infected insect or tick. Some disease agents can be transmitted from animals to humans, and some of these agents can be transmitted in more than one way. Practice of good personal hygiene can go a long way to prevent communicable diseases from spreading. Listed below are some communicable diseases of note.

### 5.1 Athlete's Foot Fungus

Athlete's foot is a skin infection caused by the *Trichophyton* fungus. When the feet, or other areas of the body, stay moist, warm, and irritated, this fungus can thrive and infect the outer layer of the skin. Athlete foot is also called *tinea pedis*. The fungus can be found on floors (such as the floors of the showers in locker rooms) and in socks and clothing. The fungus can be spread from person to person by contact with these objects, however, without proper growing conditions (a warm, moist environment), the fungus will not infect the skin. Up to 70% of the population will have athlete's foot at some time during their lives. Proper maintenance of locker rooms and foot protection will reduce transmission. Signs and symptoms of athlete's foot include scaly, peeling or cracked skin between the toes; itchiness, especially right after taking off shoes and socks; inflamed skin that may appear reddish, purplish, or grayish; and burning or stinging. Practices to reduce your chances of contracting athlete's foot include keeping feet cool and dry; and wearing sandals when using communal shower facilities.

## 5.2. Colds and Flu

Respiratory infections, like the common cold and flu are caused by viruses that are transmitted primarily through aerosols or droplets in the air. Close proximity to infected people can help facilitate the transmission of these viruses. There is an annual vaccine for the flu, but there are currently no vaccines for the common cold viruses. Practices that can reduce your chances of contracting these viruses include good personal hygiene (washing hands frequently), covering your mouth and nose when you cough or sneeze (but not with your hands), and avoiding crowded indoor spaces.

## 5.3 Foodborne Disease

Foodborne disease is caused by consuming contaminated foods or beverages. Many different disease-causing microbes, or pathogens, can contaminate foods, including bacteria, viruses, and parasites. Researchers have identified more than 250 foodborne diseases. Additionally, poisonous chemicals, or other harmful substances can cause food-borne illnesses if they are present in food. The most commonly recognized foodborne infections are caused by the bacteria *Campylobacter*, *Salmonella*, *Clostridium perfringens* and *Staphylococcus aureus*, and by a group of viruses called Noroviruses.

### A. Routes of Transmission

Raw foods of animal origin are the most likely food to be contaminated. Examples of these include raw meat and poultry, raw eggs, unpasteurized milk, and raw shellfish.

### B. Prevalence

An estimated 48 million cases of foodborne disease occur each year in the United States. The great majority of these cases are mild and cause symptoms for only a day or two. Some cases are more serious, and CDC estimates that there are 128,000 hospitalizations and 3,000 deaths related to foodborne diseases each year.

### C. **Symptoms**

More than 250 different foodborne diseases have been described. These different diseases have many different symptoms, so there is no one "syndrome" that is foodborne illness. However, the microbe or toxin enters the body through the gastrointestinal tract, and often causes the first symptoms there, so nausea, vomiting, abdominal cramps, and diarrhea are common symptoms in many foodborne diseases.

### D. **Treatment**

There are many different kinds of foodborne diseases, and they may require different treatments, depending on the symptoms they cause.

### E. **Prevention**

On all Florida Atlantic University campuses, staff and students must follow the guidelines outlined by the [Florida Administrative Code \(FAC\) 64E-11](#) and all other applicable regulations to prevent food-borne illnesses. Please contact EH&S if you suspect food-borne illness has occurred at 561-297-3129.

- For more information on food-borne disease, go to: <https://www.cdc.gov/foodsafety/foodborne-germs.html>
- For information on food safety: <https://www.cdc.gov/foodsafety/>.
- For more information on the Florida Atlantic University's Food Safety Program, go to: <https://www.fau.edu/ehs/safety/food-safety-program/index.php>.

## 5.4 SARS

Severe acute respiratory syndrome (SARS) is a viral respiratory illness caused by a coronavirus, called SARS-associated coronavirus (SARS-CoV).

### A. **Outbreak in 2003**

SARS was first reported in Asia in February 2003. Over the next few months, the illness spread to more than two dozen countries in North America, South America, Europe, and Asia before the SARS global outbreak of 2003 was contained. According to the World Health Organization (WHO), a total of 8,098 people worldwide became sick with SARS during the 2003 outbreak. Of these, 774 died. In the United States, only eight people had laboratory evidence of SARS-CoV infection. All of these people had traveled to other parts of the world with SARS.

### B. **Route of Transmission**

The main way that SARS seems to spread is by close person-to-person contact. The virus that causes SARS is thought to be transmitted most readily by respiratory droplets (droplet spread) produced when an infected person coughs or sneezes.

### C. **Prevention**

CDC continues to work with other federal agencies, state and local health departments, and healthcare organizations to plan for rapid recognition and response if person-to-person transmission of SARS-CoV recurs. CDC has

developed recommendations and guidelines to help public health and healthcare officials plan for and respond quickly to the reappearance of SARS in a healthcare facility or community. These are available at:

<http://www.cdc.gov/sars/guidance/index.html>.

## 5.5. COVID-19

COVID-19 (Coronavirus Disease 2019) is caused by SARS-CoV2 (severe acute respiratory syndrome coronavirus 2). The virus emerged in late 2019 and quickly spread around the world, resulting in a pandemic that has lasted nearly three years (as of the writing of this manual).

### A. Routes of Transmission

The SARS-CoV2 virus spreads in several different ways. Current evidence suggests that the virus spreads primarily between people who are in close contact with each other. The virus can spread from an infected person's mouth or nose in small liquid particles when they cough, sneeze, speak, sing, or breathe. Another person can then contract the virus when infectious particles are inhaled at short range, or if infectious particles come into contact with the eyes, nose or mouth. The virus can also spread in poorly ventilated and/or crowded indoor settings where people tend to spend longer periods of time. This is because aerosols can remain suspended in the air or travel farther than conversational distance. Finally, people may also become infected when touching their eyes, nose or mouth after touching surfaces or objects that have been contaminated by the virus. However, this mode of transmission is very low level compared to the airborne route.

### B. Prevention

There are many things you can do to keep yourself and others safe from COVID-19:

- Follow local guidance—check to see what national, regional, and local authorities are advising so you have the most relevant information.
- Keep your distance: stay at least 3 feet away from others, even if they don't appear to be sick.
- Wear a mask: A well-fitting three-layer mask is advised, especially when you can't physically distance.
- Avoid crowded and poorly ventilated places.
- Wash your hands frequently with soap and water or use an alcohol-based hand sanitizer.
- Get vaccinated.

### C. Treatment

Several treatments are available for COVID-19 including:

- Antiviral therapy (must start within 5-7 days of symptom onset)
- Convalescent plasmas (if you are immunocompromised)

- Monoclonal antibody preventive treatment (if you are immunocompromised; this is for preventing COVID and should be taken every 6 months)

## 5.6. Mpox Disease

Mpox disease (formerly Monkeypox) is caused by a poxvirus called Mpox (formerly monkeypox virus). Infection with the virus can induce symptoms similar to those seen with smallpox, but less severe. Symptoms include: a rash that may be located on hands, feet, chest, face, or mouth, or near the genitals. The incubation period is from 3-17 days and persons may not exhibit symptoms until after this period. Other symptoms can include fever, chills, and muscle aches. Until recently, this virus has been contained to outbreaks in central and west Africa. This disease is a zoonosis, a disease primarily transmitted from animals to humans. Evidence of mpox has been found in animals including squirrels, dormice and different species of monkeys.

### A. Routes of Transmission

The disease can be transmitted from humans to humans through contact with bodily fluids, lesions on the skin or on internal mucosal surfaces, such as in the mouth and throat, respiratory droplets and contaminated objects.

### B. Prevention

- Avoid close, skin-to-skin contact with people who have a rash that looks like mpox.
- Avoid contact with objects and materials that a person with mpox has used.
- Wash your hands often.
- Get vaccinated.

### C. Treatment

There are no treatments specifically for mpox. However, because the viruses that cause mpox and smallpox are similar, antiviral drugs developed against smallpox may be used to treat mpox effectively. The antiviral drug tecovirimat (TPOXX) has been approved by the Food and Drug Administration to treat smallpox in adults and children. TPOXX may be prescribed as an investigational drug for treatment of mpox. TPOXX is currently only for people with severe mpox disease or who are at high risk of disease, such as those with weakened immune systems.

There are two vaccines that have been approved for mpox: JYNNEOS and ACAM2000. These vaccines are intended for those adults and children who are at high risk for mpox. There are limitations in the knowledge around the effectiveness of the vaccines, so those who are vaccinated should continue to protect themselves.

## 5.7. Measles

Measles is a highly contagious disease caused by the measles virus. The virus grows and reproduces within the nose and throat mucous of an infected person. It is one of the most contagious diseases in humans—so much so that if one person has it, up to 90% of the people close to that person who are not immune will also become infected. Signs and symptoms of measles include fever, cough, runny nose and watery eyes, which appear



7-14 days after contact with the virus. The measles rash appears 3-5 days after first symptoms. Infected persons are contagious from 4 days before symptoms appear to 4 days after the rash appears.

**A. Routes of Transmission**

Measles is spread when an infected person sneezes or coughs. If people breathe the air or touch a contaminated surface, then touch their eyes, nose, or mouth, they can become infected. The virus can live for up to two hours in an airspace after an infected person leaves the room.

**B. Prevention**

The most important thing to do to protect yourself against measles is to get vaccinated. Personal hygiene also helps to some degree. However, avoiding contact with a person infected with measles is key. There is no specific treatment for measles.

## 5.8. Staph Infection

Staph infection is caused by the bacteria *Staphylococcus aureus* and is commonly found on the skin or in the nose of healthy people. It is the most common cause of skin infections in the United States. Most of these skin infections are minor (such as pimples and boils) and can be treated without antibiotics. However, staph bacteria also can cause serious infections (such as surgical wound infections, bloodstream infections, and pneumonia) and some staph bacteria are resistant to antibiotics. Methicillin-Resistant *Staphylococcus Aureus* (MRSA) is a type of staph that is resistant to antibiotics and is a serious public health concern in the US.

**A. Routes of Transmission**

Factors that have been associated with the spread of staph or MRSA skin infections include close skin-to-skin contact, openings in the skin such as cuts or abrasions, contaminated items and surfaces, crowded living conditions, and poor hygiene. Staph infection is most often found in hospitals. In the community, Staph infections are common in locker rooms and among athletes who come in close personal contact during activities such as wrestling and football. It is spread through direct physical contact and not through the air.

**B. Prevention**

- Hand washing
- Shower with soap after physical exertion
- Keep cuts/wounds clean and covered.
- All athletic equipment must be cleaned thoroughly
- Wear foot coverings in locker rooms and other commonly used areas

**C. Prevention Measures for Coaches**

- An inspection of athlete's skin for potential skin infections should be done prior to practice or competition.

- Restrict all persons with open or draining wounds/sores from participating
- Persons that have wounds that are closed, dry, healing, and covered with a clean dressing for the duration of the sporting activity, may participate in the sport at the discretion of the physician involved in the player's care and the coach.
- Players should be educated on first aid management of wounds, which includes immediate washing of wounds with soap and water and covering with a sterile bandage
- Promote hand washing by urging athletes to wash their hands before and after practice and competition.

#### D. Prevention Measures for Athletic Trainers

- Receive proper first aid and bloodborne pathogens training.
- Use specified disinfectant on all training equipment twice daily.
- Ensure that athletes wipe down exercise/training equipment after use with a disinfectant.
- Check to make sure custodian staff clean and disinfect locker rooms on a daily basis.
- Ensure that soap dispensers and paper towels are available for hand washing and encourage their use.

### 5.9. Parasitic Diseases

Parasitic diseases are most often associated with tropical areas; however, a number of these infections occur within the United States. CDC has prioritized six specific parasitic infections that are public health concerns within the US. These infections include Chagas disease, cyclosporiasis, cysticercosis, toxocariasis, toxoplasmosis and trichomoniasis.

#### A. Chagas disease

Chagas disease is caused by the parasite *Trypanosoma cruzi*, which is transmitted to animals and people by insect vectors and is found only in the Americas. These infections are primarily found in the southern hemisphere, but recently, there have been some instances of domestically acquired infections in southern parts of the US. Symptoms include swelling at the infection site, fever, fatigue, rash, body aches eyelid swelling and loss of appetite.

#### B. Cyclosporiasis

Cyclosporiasis is an intestinal illness caused by the microscopic parasite, *Cyclospora cayetanensis*. People can become infected with *Cyclospora* by consuming food or water contaminated with the parasite. There have been roughly 4,600 reported domestically acquired cases of cyclosporiasis over the last three years. Cases usually peak in spring and summer. Symptoms include watery diarrhea, loss of appetite, weight loss, cramping, bloating, nausea, and fatigue. Outbreaks are usually linked to various types of imported fresh produce.

#### C. Cysticercosis

Cysticercosis is a parasitic tissue infection caused by larval cysts of the tapeworm *Taenia solium*. People can become infected with *Taenia* by eating food or drinking water contaminated with tapeworm eggs, or by putting contaminated fingers in their mouth. The parasite can infect brain, muscle, or other tissue. Symptoms include seizures and headaches, confusion, and difficulty with balance.

D. Toxocariasis

Toxocariasis is a parasitic disease caused by the larvae of two species of *Toxocara* roundworms: *Toxocara canis* from dogs and *Toxocara cati* from cats. People can become infected by accidentally swallowing dirt that has been contaminated with dog or cat feces that contain *Toxocara* eggs. The disease is not spread from person to person. Most people infected with *Toxocara* do not have any symptoms. In a few people who are infected with high numbers of *Toxocara* larvae, the larvae can travel through parts of the body such as the liver, lungs or central nervous system and cause symptoms such as fever, coughing, enlarged liver or pneumonia.

E. Toxoplasmosis

Toxoplasmosis is caused by a single-celled parasite called *Toxoplasma gondii*. The parasite is found throughout the world and is considered to be a leading cause of death attributed to foodborne illness in the US. More than 40 million men, women and children in the US carry the *Toxoplasma* parasite, but very few have symptoms because the immune system keeps the parasite from causing illness. A *Toxoplasma* infection occurs by: 1) eating undercooked contaminated meat (especially pork, lamb and venison) or shellfish (i.e., oysters, clams or mussels); 2) accidental ingestion of undercooked, contaminated meat or shellfish after handling them and not washing hands thoroughly; 3) eating food that was contaminated by knives, utensils, cutting boards and other foods that have had contact with raw, contaminated meat or shellfish; 4) drinking water contaminated with *Toxoplasma gondii*; and 5) accidentally swallowing the parasite through contact with cat feces that contain *Toxoplasma*. As mentioned above, most people who become infected are not aware of it because they have no symptoms at all.

F. Trichomoniasis

Trichomoniasis is a very common sexually transmitted disease caused by infection with *Trichomonas vaginalis*, a protozoan parasite. CDC estimates that there were more than two million trichomoniasis infections in 2018. However, only about 30% develop any symptoms of disease. Symptoms can range from mild irritation to severe inflammation in the genital area. Medication from a healthcare provider can cure trichomoniasis, but you can still contract the disease again.

## 5.10. Vector-Borne Diseases

Vectors are living organisms (primarily insects) that can transmit infectious pathogens between humans, or from animals to humans. Vector-borne diseases are human illnesses caused by parasites, viruses and bacteria that are transmitted by vectors. Within the US, predominant vector borne diseases of concern include:

A. Lyme Disease

The most common vector-borne disease in the US. Lyme disease is caused by the bacterium *Borrelia burgdorferi*. It is transmitted to humans through the bite of blacklegged ticks. Symptoms include fever, headache, fatigue and a characteristic skin rash called erythema migrans. Most cases can be treated successfully with a few weeks of antibiotics. Steps to prevent Lyme disease include using insect repellent, removing ticks promptly, applying pesticides and reducing tick habitat.

B. Rocky Mountain Spotted Fever

One of the deadliest tick-borne diseases in the Americas, Rocky Mountain Spotted Fever (RMSF) is caused by *Rickettsia rickettsia*, a type of bacterium that is primarily spread to humans by American dog ticks, Rocky Mountain wood ticks and brown dog ticks. Symptoms typically begin with fever and headache, followed a few days later with the development of a rash. The rash is made up of small spots of bleeding and generally starts on the wrists and ankles. Treatment of RMSF is with the antibiotic doxycycline. There is no vaccine to prevent RMSF. Illness is prevented by using insect repellent, removing ticks promptly and preventing ticks in your yard.

C. West Nile

The leading cause of mosquito-borne disease in the continental US. West Nile virus is spread to humans by the bite of an infected mosquito. Most people infected with West Nile virus do not develop symptoms. Those persons that do exhibit symptoms will have fever, headache, body aches, joint pains, vomiting and diarrhea. About 1 in 150 people can develop encephalitis or meningitis. There is no specific treatment for West Nile—in severe cases, patients often need to be hospitalized to receive supportive treatment. Prevention includes avoiding mosquito bites and using insect repellent.

D. Dengue

Dengue viruses (four types) are spread to humans through the bite of an infected *Aedes* species mosquito. About 1 in 4 people infected with dengue will get sick. Symptoms can be mild or severe. Mild symptoms of dengue can be confused with other illnesses that cause fever and aches and pains. Severe dengue can be life-threatening. There is no specific treatment for dengue, however there is an approved vaccine for those who were previously infected and is not recommended for travelers as it can increase the severity of disease.

E. Zika

Zika virus is spread to humans by the bite of an infected *Aedes* species mosquito. Zika can also be passed during sex and from a pregnant woman to her fetus, which can lead to certain birth defects. Many people infected with Zika virus won't have symptoms or will only have mild symptoms. The most common symptoms include fever, rash, headache, joint pain, red eyes and muscle pain. Symptoms can last for several days up to a week. There is no treatment or vaccine for Zika virus. Prevention of disease is to protect yourself by wearing long sleeved shirts and long pants, using insect repellent and to control mosquitos where you live.

## 6 Food Safety

FAU Environmental Health and Safety has a [Food Safety Program](#) that is designed to prevent food-associated illnesses on campus and to comply with applicable regulations. Food served in a university setting presents safety concerns because people of different ages and health status attend classes, work and utilize the campus facilities. Improper handling, cooking, serving and storage of purchased and/or prepared foods can result in food-borne illness.

### A. New Food Establishments

Construction of new food facilities on any of the FAU campuses should comply with the County Department of Health (DOH) Food Establishment Plan Review as well as local building codes. Contact the local DOH for specifics on Plan submission (Palm Beach County, Broward County or St. Lucie County). It is always a good idea to discuss your planned business with the local county office.

### B. Food Service Facilities

All food service facilities on campus are inspected on a regular basis by the DOH for health and safety concerns. Personnel who work in these facilities are required to complete appropriate training as mandated by the county DOH. EH&S will also conduct inspections of these facilities for health and safety.

### C. Temporary Food Service Events

All FAU events/services that involve food must comply with the [Florida Administrative Code \(FAC\) 64E-11](#) and all other applicable regulations. Additionally the process for securing approval for temporary food service events is detailed on the [FAU Food Safety Program website](#) and in the [FAU Food Safety Program Manual](#). The Florida DOH frequently inspects FAU to ensure food safety at food service locations. Additionally, the FAU Public Health Officer may inspect food service locations.

## 7. Water Quality

Water quality refers to the chemical, physical and biological characteristics of water based on the standards of its usage. It is most frequently used by reference to a set of standards against which compliance, generally achieved through treatment of the water, can be assessed. It is the goal of FAU to provide excellent quality water for its campus facilities.

### 7.1 Factors influencing water quality.

Water quality varies naturally with location and time. Factors that affect water quality include local geology; temperature; acidity (pH); dissolved solids; particulate matter; dissolved oxygen; hardness; and suspended sediment. Contaminants that may be in untreated water include microorganisms; inorganic contaminants such as salts and metals; organic chemical contaminants from industrial process and petroleum use; pesticides and herbicides; and radioactive contaminants. The United States Environmental Protection Agency (EPA) limits

the amounts of certain contaminants in tap water provided by US public water systems. The Safe Drinking Water Act authorizes the EPA to issue two types of standards:

- Primary Standards regulate substances that potentially affect human health.
- Secondary Standards prescribe aesthetic qualities—those that affect taste, odor or appearance.

## 7.2 FAU Water

FAU's Boca campus water supplier is the City of Boca Raton. The city provides an [annual report](#) on the local drinking water quality, including the water's source, the contaminants found in the water. Once the water reaches the main distribution center on campus, FAU is responsible for water quality distributed to the various buildings, water fountains and bathrooms.

Common complaints regarding water quality include: strange taste/smell; discolored water; and cloudy water. Many of these complaints are due to minimal excess of lead, iron and vegetation. Although these may be nuisances, they typically do not pose a threat to health or safety

For the prevention of bacteria development, hot water heaters will be set to 120 degrees F or higher, not to exceed 140 degrees.

For concerns about **water quality**, please contact the FAU Public Health Officer ([bs0@fau.edu](mailto:bs0@fau.edu); 561-213-0488).

For issues about **water service disruption**, please complete a [work order](#) through facilities.

## 7.3 Construction

FAU is responsible for ensuring the safety of our drinking water on campus. FAU complies with FAC 62-555, Permitting and Construction of Public Water Systems. These are state rules regarding construction, operation and maintenance standards for public water systems, general permits, construction permits, and treatment/monitoring requirements. Specifically, all new water mains shall be installed, cleaned, disinfected and bacteriologically cleared for service in accordance with the EPA Safe Water Drinking Act. Contractors must comply with county/state guidelines when installing a new water system, complete the applicable forms and adhere to appropriate procedures when there is a break in the system. Please contact the FAU Engineering and Utilities department for additional information (<https://www.fau.edu/facilities/eu/>).

# 8 Sanitation and Waste Disposal

Florida Atlantic University is proud of our beautiful, clean campuses and strives to keep them this way. EH&S monitors sanitation issues to make sure our campuses remain clean and

safe for all. FAU follows the rules and regulations outlined in the [Florida Sanitary Nuisances Statute, Chapter 386](#). EH&S along with the FL DOH regularly inspects campuses for compliance with the Florida Statute.

- a. Unsanitary conditions that must be reported to EH&S include, but are not limited to:
  - A. Standing water, which may promote the breeding of mosquitoes
  - B. Failed drain fields, which may result in raw sewage on the ground
  - C. Illegal dumping or accumulation of garbage, which often becomes an attractant for rodents and other pests
  - D. Untreated or improperly treated human waste, which can lead to infection in humans
  - E. Large numbers of ants, rodents, cockroaches, flies or other type of insect
- b. Trash and Garbage Materials  
To keep FAU beautiful and to minimize sanitary nuisances, trash and garbage must be placed into appropriate containers found throughout the campus grounds and buildings. FAU Facilities Management, Building and Grounds manages campus trash collection and disposal. If you notice an issue with accumulating trash and garbage, please submit a work order to Facilities—Buildings and Grounds: <https://www.fau.edu/facilities/bg/>.
- c. Special Items Disposal/Recycling  
Items such as aerosol cans, light bulbs, used batteries (excluding alkaline batteries), used oils, paint and electronic devices are considered special items and must be disposed of as hazardous waste according to state and local regulations. If you have any of these special items that are ready to be disposed of, please contact EH&S for pickup.
- d. Hazardous Materials Disposal  
All hazardous materials items for disposal must be managed by EH&S. This includes, but is not limited to: chemicals, biohazardous waste and radioactive materials. Laboratories involved in using these materials should be registered in SciShield (formerly BioRaft) (<https://fau.bioraft.com>). Through SciShield, labs can request disposal pick-ups for these items. Please refer to the [Laboratory Safety Manual](#), the [Biological Safety Manual](#) (along with the [Biomedical Waste Program Manual](#)) and the [Radiation Safety Manual](#) for more information about storage of these materials prior to disposal.

## 9 Indoor Air Quality

Proper indoor air quality is important for health and appropriate working/living conditions. EH&S investigates reports of air quality issues including: foul odors and mold/mildew growth in all university buildings. If you have an issue with air quality, please fill out a work order through the FAU Facilities website: <https://www.fau.edu/facilities/bg/work-control/>.

## 10 Swimming Pools

Florida Atlantic University has swimming pools located on the Boca Raton and Jupiter campuses. These pools are used by FAU swim/dive teams, outside swim teams from Boca Raton, and faculty, staff, and students. Regulation and proper care must be taken in order to provide a safe and clean environment for the users. The CHD inspects the pools on a regular basis. If a follow-up inspection is deemed necessary by the CHD due to failure to comply with CHD rules and regulations, EH&S will perform their own inspection prior to the follow-up inspection by the CHD.

## 10.1 General

- A. Regulation of public swimming pools is significant in the prevention of disease, sanitary nuisances and accidents by which the health or safety of an individual(s) may be threatened or impaired.
- B. Any modification resulting in the operation of the pool in a manner unsanitary or dangerous to public health or safety shall subject the state operating permit to suspension or revocation.
- C. Where adequate standards do not exist and these rules do not provide sufficient guidance for consideration of innovations in design, construction, and operation of proposed swimming pools, FAU will establish requirements necessary to protect the health and safety of the pool patrons.

## 10.2 Operational Requirements

- A. Water quality - The water supply for all pools shall be an approved potable water system or shall meet the requirements for potable water systems by the submission from the operator of bacteriological and chemical laboratory reports to the county health department:
  - 1) Bacteriological Quality - The pool water shall be free of coliform bacterial contamination.
  - 2) Clarity – The pool water shall be 0.5 or less NTU and the main drain grate must be readily visible from the pool deck.
  - 3) Chemical Quality – Chemicals used in controlling the quality of the pool water shall be tested and approved using the National Sanitation Foundation (NSF) Standard 60, 2021, which is incorporated by reference in these rules and shall be compatible with other accepted chemicals used in pools. The following parameters shall be adhered to for the pool water treatment:
    - a) pH – 7.2 to 7.8 (Required to be measured at least once every 24 hours).
    - b) Disinfection – Free active chlorine residual shall be between 2 mg/L to 10 mg/L in spa type pools and 1 mg/L to 5 mg/L in all other pools. Bromine residual shall be between 3 mg/L to 10 mg/L in spa type pools and between 1.5 mg/L to 6 mg/L in all other pools (Required to be measured at least once every 24 hours).
    - c) When oxidation-reduction potential controllers are required, the water potential shall be kept between 700 and 850 millivolts.
    - d) Cyanuric acid – 100 mg/L maximum
    - e) Quaternary ammonium – 5 mg/L maximum
    - f) Copper – 1 mg/L maximum
    - g) Silver – 0.1 mg/L maximum



- 4) Cleanliness – The pool and pool deck shall be kept free of sediment, floating debris, visible dirt and algae. Pools shall be refinished when pool surfaces cannot be maintained in a safe and sanitary condition.
- 5) The pool water level must be maintained at an elevation suitable for continuous skimming without flooding during periods of non-use.
- 6) All equipment shall be kept in good repair.
- 7) Sanitary facilities shall be maintained in a clean and sanitary condition and sanitary supplies such as toilet paper, paper towels (or blow dryer), soap and waste baskets shall be provided.
- 8) The keeping of a daily record of information regarding pool operation using the Monthly Swimming Pool Report (DH 921 3/98) from the Florida Department of Health shall be the responsibility of the pool operator. The form can be obtained here: [https://miamidade.floridahealth.gov/programs-and-services/environmental-health/documents/Pool\\_Maintenance\\_Log\\_Sheet\\_dh921.pdf](https://miamidade.floridahealth.gov/programs-and-services/environmental-health/documents/Pool_Maintenance_Log_Sheet_dh921.pdf). Customized report forms may be substituted provided they contain the appropriate information and are approved by EH&S. The completed report shall reflect pool water tests at least once every 24 hours and shall be retained at the pool or submitted monthly as required by the local health department.
- 9) Should a fecal accident occur, the pool operator shall consider the Florida Department of Health’s “Fecal Accident Response Recommendations for Pool Staff” publication, found at the following website: [https://www.floridahealth.gov/environmental-health/swimming-pools/documents/fecal\\_accident\\_response\\_reco.pdf](https://www.floridahealth.gov/environmental-health/swimming-pools/documents/fecal_accident_response_reco.pdf). Document each fecal accident by recording date and time of the event, noting whether formed stool or diarrhea, and noting free chlorine levels and pH at the time of observation of the event. Before reopening the pool, record the free chlorine levels, pH, the procedures followed in response to the fecal accident (including process to increase chlorine levels, if necessary) and the contact time.
- 10) Test kits are required at all pools to determine free chlorine and total chlorine using N,N-Diethyl-p-phenylenediamine (DPD), or bromine level, total alkalinity, calcium hardness and pH.

### 10.3 Supervision and Safety

- A. All managers, lifeguards and swimming instructors in charge of, or working at the swimming pools shall be responsible for the supervision and safety of the pool.
- B. Lifeguards or swimming instructors shall be in full charge of persons using the pool and shall have authority to enforce all rules. Lifeguards and swimming instructors shall be certified in lifeguarding or swimming instruction, respectively, by the American Red Cross, the YMCA or other equivalent national aquatic training agencies which meet the established standards, objectives and standards of care provided in the American Red Cross or YMCA programs.
- C. Lifeguards and swimming instructors shall also be currently certified in first aid and in adult, child and infant cardiopulmonary resuscitation through the American Red Cross, American Heart Association or other safety organizations.
- D. Swim coaches are exempted from the swimming instructor certification requirement when training advanced level swimmers for competition.
- E. Diving and Boating Safety Officers are exempted from the swimming instructor certification requirement when training Scientific Divers.

- F. Lifeguard, swimming instructor, cardiopulmonary resuscitation and first aid certificates or photocopies thereof shall be maintained at the pool location and be available for inspection.
- G. Safety Equipment – All swimming pools shall be provided with a shepard’s hook securely attached to a one-piece pole not less than 16 feet in length, and a least one 18-inch diameter lifesaving ring with sufficient rope attached to reach all parts of the pool from the pool deck. Safety equipment shall be mounted in a conspicuous place and be readily available for use.
- H. Pool Drains -- All pool drains must be compliant with the Virginia Graeme Baker Pool Spa and Safety Act. See: <https://www.poolsafely.gov/wp-content/uploads/2016/04/pssa.pdf>.
- I. Chemical storage – Chemicals shall be labeled and stored in a cool, dry and well-ventilated area under a roof and the area shall be inaccessible to the public. Empty chemical containers shall be stored and disposed of in such a manner that they are not accessible to the public.

#### 10.4 Rules and Regulations

- A. No person may use the pool unless it is officially open.
- B. Only swimming apparel may be worn in the pool area.
- C. Those persons with open cuts, sores, poison ivy or chicken pox shall be prohibited from entering the water.
- D. All persons, before entering the swimming pool, must take a shower.
- E. Swimmers who leave the pool area for any reason are required to shower before returning to the pool.
- F. Running, rough play and personal conduct endangering the safety of self and others in any portion of the pool establishment shall be prohibited.
- G. Persons unable to demonstrate to the guards their ability to swim are not permitted in deep water areas.
- H. Food, drink and glass containers are prohibited in the pool and on the pool wet deck area. Food and drinks must be kept in grassy areas.
- I. All refuse must be placed in the provided trash containers.
- J. Spitting, spouting of water, blowing the nose, etc are not permitted in the pool.
- K. No towel snapping allowed.
- L. Only one person at a time is allowed on a diving board. Persons waiting to use the board must wait on the deck, not on the ladder. The landing area in front of a diving board must be completely cleared before the next user begins their dive.
- M. No swimmers will be allowed in the pool during electrical storms or during inclement weather.
- N. Absolutely no smoking is allowed within 25 feet of the pool entrance or any other pool areas.
- O. Loitering or horseplay will not be tolerated in pool areas or locker rooms.
- P. Radios are allowed on the outer deck only and should be kept at a level as not to disturb other pool users. It is at the discretion of pool staff to determine use and volume level, if necessary.
- Q. All patrons must follow the directions of the pool staff.
- R. Swim aides, floatable objects and pool toys are permitted only with the authorization of the Pool Manager.

- S. The pool is not responsible for any valuables or personal property brought into the facility.
- T. Night swimming – Pools shall not be open for swimming at night. Night swimming shall be considered one half hour before sunset to one half hour after sunrise.

For additional information regarding pool regulations and specifications, please see:  
<https://www.floridahealth.gov/environmental-health/swimming-pools/index.html>.