## Bathing Beach Safety Plan Addendum for Ocean Surf Beaches

Name of Facility:		
Site Address:		
Telephone: _		
Prepared by:	Title: Date:	
Signature: _		
a written safety plan and approval. The reacting to emerger Please review and o completed, it will se	Litary Code 6-2 requires that beach operators develop, update and implement in this plan must be submitted to your local health department for their review plan must include procedures for daily bather supervision, injury prevention, cies, injuries and other incidents, providing first aid and summoning help.  Somplete this addendum. Include any attachments, as necessary. Once rive as part of your facility's written safety plan.	
with an ind	urf beaches, the safety plan shall be developed in consultation ividual having adequate ocean surf lifeguarding experience.	
	nsulted:	
Crederillais.		
Please send a	copy to:	
And, please re	tain a copy of this document for your use.	
For LHD use only		
Reviewer:	Approved: Yes No	
Title:	Date:	

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## **Supervision Level I Aquatic Supervisory Staff**

- ➤ All ocean surf beaches, including those owned and operated by homeowner associations, are required to have at least one Supervision Level I aquatic supervisory staff, who is trained and certified in the operation and use of an automated external defibrillator (AED) by a nationally recognized organization or the state emergency medical services council.

<ul> <li>This certified Supervision Level I staff must be present and available at all times the beach is open for use.</li> <li>The training and certification records must be available for review during inspections.</li> </ul>			
1. How many Supervision Level I st	aff do you have who are certific	ed in using AEDs?	
Number of staff	All staff are trained and	certified in the use of AEDs.	
2. Is at least one Supervision Level I staff who is certified in using AEDs on-site and available at all			
times when the beach is open for	or use?	Yes	
<b>Emergency Equipment - AEI</b>	<u>)</u>		
At ocean surf beaches, at leas site.	t one AED must be provided by	y the operator and maintained on-	
The beach operator must implement a Public Access Defibrillator (PAD) program as defined in 6-2.2(i) of Subpart 6-2.			
The following must be maintain		view during inspections: rgency health care provider and the	
ocean surf beach open	rator;		
<ul> <li>A copy of the notification to the regional emergency medical services council of the existence, location, and type of automated external defibrillator;</li> </ul>			
	aintenance and testing specified		
3. How many AEDs do you have on-site?			
4. Where are the AEDs located?	At lifeguard chairs	At the first aid station	
Other (specify)			
7. Indicate the procedure used to summon the AED certified staff and the AED to an emergency:			
All lifeguards are o	certified in AED use and have o	one with them at their station.	
Other			

Please attach a copy of the signed Collaborative Agreement with the appropriate Regional Emergency Medical Services Council (REMSCO) as defined in the PAD program requirements.

1 - 3 minutes

8. What is the emergency response time for getting the AED and AED certified staff to the

Within 1 minute

emergency site?

Other (specify)