

SUBMISSION TO THE INDEPENDENT REVIEW OF SWIMMING POOL BARRIER REQUIREMENTS IN NSW

1. The role of the NSW Child Death Review Team

The NSW Child Death Review Team (the Team/CDRT) is established under Part 5A of the *Community Services (Complaints, Reviews and Monitoring) Act 1993.* The purpose of the Team is to prevent and reduce the deaths of children in NSW. The functions of the Team include:

- maintaining a register of child deaths and identifying trends in relation to those deaths
- undertaking research that aims to prevent or reduce the likelihood of child deaths, and
- making recommendations as to legislation, policies, practices and services to prevent or reduce the likelihood of child deaths.

The NSW Ombudsman is the Team's convenor and Ombudsman staff support and assist the Team in its work.

In the 15 years from 2000 to 2014, the CDRT registered the drowning deaths of 107 children in backyard swimming pools in NSW. More than three-quarters (78%, 83) of these children were aged between 12 months and three years when they died.

Drawing on the Team's work over many years in relation to swimming pool drowning deaths, this submission raises a number of factors that represent increased drowning risks to children and points to prevention strategies. In summary, these include:

- The inextricable link between adequate supervision and effective child-resistant pool barriers. While the inherent dangers of water to young children is such that the level of supervision required in or around swimming pools must be constant and active, despite every effort and given the combination of factors that contribute to human error, there may be times at which this level of supervision is not provided. The integrity of child resistant pool barriers is critical to the safety of children in these circumstances.
- The Team has consistently found that pools which present the most risk to young children are located on properties where children live or regularly visit. This indicates a need to explore strategies for better identifying such properties, and for targeting mandatory council inspection programs accordingly.

- Between 2007 and 2014, almost one third of the pools in which children drowned were eligible for exemption from certain barrier requirements. This lends support for the revocation of the remaining grounds for automatic exemption from compliance with current barrier requirements.
- Almost one-fifth of the pools in which children drowned between 2007 and 2014 were portable, indicating the need for targeted education and awareness strategies that highlight the particular risks associated with these types of pools and associated barrier requirements.
- Gate and latch mechanisms are the most common barrier defect identified in pools in which children drowned, indicating a need to:
 - examine design features of self-closing latch mechanisms,
 - vary the current standard for pool gate and latch mechanisms to require that they are effective against soil movement, and
 - target safety messages to pool owners that specifically draw attention to the importance of regular maintenance.

2. Analysis of drowning deaths of children in private swimming pools 2007-2014

In order to inform this submission, and to provide information to the review, we re-examined the circumstances of 54 drowning deaths of children in 53 private swimming pools that occurred in the eight years from 2007 to 2014.

The information below is drawn from the NSW register of child deaths, which is maintained by the CDRT. It is primarily sourced from police and coronial records, including briefs of evidence.

Age and gender

The majority of children who drowned (33) were male; 21 were female.

Most of the children who drowned in private swimming pools (46) were under five years of age; the majority (39) were aged two years or less.

Age (years)	Number
1	21
2	18
3	6
4	1
5-9	7
10-14	1
Total	54

The swimming pools

Type of pool

The most common pool types were pools were in ground (35); 15 were above ground.

Type of swimming poo	Number (pools)	
In ground		35
Above ground	Portable – soft-sided, metal or plastic frame	7
	Permanent installation/ fixed structure	2
	Inflatable / wading	4
	Unknown	2
Partially in ground / above ground		2
Unknown		1

Ten of the 15 above ground pools could be identified from records as 'portable' pools. Six were soft sided pools supported by metal or plastic frames; four were inflatable pools. Records identified the depth for nine of the ten portable pools. All nine met the *Swimming Pools Act* definition of swimming pool, as they were capable of being filled with water to a depth greater than 300 millimetres.¹

Location of the pool

Most of the 54 children (38) drowned in a swimming pool at their own home, including four children who were in statutory care.

Sixteen children drowned in a pool that was not at their own home. In at least five cases, young children lived at the residence.² In some others, particularly the homes of grandparents, children were regular visitors.

location	Number (pools)
Child's home	38
Relatives home:	10
(7) grandparent	
(3) other relative	
Family friends	5
Neighbour	1

Location of the pool (remoteness)

More than two-thirds (37) of the 53 pools were located in areas designated as 'Major cities'; followed by inner regional areas (11):³

¹ Information on depth was not available for one inflatable pool, described in the records as a small blow-up wading pool.

² Records do not consistently state whether children were resident at the home.

³ Categories of remoteness as defined by the Australian Bureau of Statistics. Pool locations were geo-coded using the 2011 Australian Statistical Geography Standard (ASGS).

Remoteness	Number (ASGS 2011)			
Major Cities	37			
Inner Regional	11			
Outer Regional	3			
Remote	2			
Very Remote	0			
Total	53			

Ownership of the property

Records identified the ownership of the property for 31 of the 38 pools that were located at the child's own home. In most cases (21) the property was owned by the family. Ten were private or social housing rental properties.

Property ownership	Number
	(pools)
Child's family owner/occupier	21
Rental property – Social housing	4
Rental property - Private rental	6

Status of the pools under the Swimming Pools Act 1992

The status of the swimming pool in relation to exemption from the child resistant barrier provisions of the *Swimming Pools Act* was documented for 44 of the 53 pools. Of these, around one third (15) were exempt. Ten were exempt because they were built prior to 1990, and five were on a large property and built prior to 2010. Of the 15 exempt swimming pools, 13 were fenced.

Reason for exemption	Fenced	Unfenced	Number (pools)
Pool constructed prior to 1990	10	-	10
Large property	3	2	5

Information on barrier compliance was available for 12 of the 13 fenced pools. Only one pool did not have any defects identified. Eleven pools were non-compliant and had access points where a young child could enter the pool area - either through defective gates / latch mechanisms, or breaches to the pool fence.

The two unfenced pools were on large properties. In both cases, the pool was not compliant with the Act, as there were no child-safe barriers in place to restrict access to the swimming pool from the residence.

Existence and condition of child resistant barriers

Pool and child safety barrier assessments by police crime scene investigators, and/or local council inspectors were available for 52 of the 53 pools. In the large majority of cases (45; 87%), there was either no barrier installed, or the existing barrier was defective /non-compliant.

Unfenced pools

Thirteen of the 52 swimming pools were unfenced. Two pools were exempt from pool fencing requirements.

Pool type	Number of pools	Number exempt
In-ground	3	1
Soft sided metal frame (likely portable)	6	1
Portable: large inflatable	3	-
Portable: wading	1	unknown ⁴

Ten of the 13 unfenced pools were above ground portable style pools. One portable style pool was set up as a permanent structure, with landscaping, lighting and seating. Information relating to pool depth was known for nine of the 10 pools; all of these were capable of being filled to a depth greater than 300 millimetres and required a compliant child safety barrier under the provisions of the *Swimming Pools Act* 1992.

Of the three unfenced in-ground swimming pools, one was on a large property and exempt; one was newly constructed and had been filled with water prior to a barrier being erected; and one was constructed without a council application or approval.

Twelve children drowned in unfenced pools at their own home. The majority (9) accessed the pool from the house without the knowledge of supervising adults. Eight were under three years of age. Of the three children who were known to be in or around the pool, two were left in the yard unsupervised and another - an older child – was intermittently supervised. One child drowned in an unfenced pool at a family friend's home during a social gathering.

Child resistant barrier faults

Records indicated that 40 pools were fenced. Information on barrier faults was available for 39 pools. The majority (28) of fences were four-sided. Nine pools had three-sided fencing, where the house or another building (e.g. garage) formed the fourth side of the barrier. In two cases, records did not identify the type of fence.

Of the 39 pools, over three-quarters (32) had one or more faults that could potentially allow a child to access the pool area. Coronial and police investigations found that 26 children were likely to have accessed the pool via the barrier fault(s). Although there were faults identified in the child-safety barrier for another five pools, in three cases, the child accessed the pool through a gate that had been propped open. In two cases information was not available to know whether the fault contributed to the child accessing the pool.

The table at Appendix 1 shows the main barrier fault(s) identified in each case. The majority of pools (26) had two more defects.

Almost all (30) of the pools had reported faults with the pool gate or latch mechanism which, in most cases, meant that gate did not self close. Issues included no self-closing mechanism, damaged latch mechanisms and faulty spring mechanisms. A faulty gate or latch mechanism was identified as the child's likely access point to the pool area in 21 cases.

⁴ Depth of the wading pool is unknown

Other faults reported mainly related to the poor condition of the fencing (13) - such as holes, broken rails or palings, or too-large gaps in the fence or gate (10). Four pools had windows or doors leading directly to the pool area that were not child-safe. Objects within the non-climbable zone that a child could use to access the pool were reported in 13 cases. Several pools had barriers with footholds or handholds (4) or a fence that was too low (4).

Seven pools had no reported barrier faults. Five were pools in which older children drowned. The children had either been allowed into the pool area by supervising adults or were capable of opening the gate themselves. Two pools were accessible via a propped gate.

Carer supervision: children under five years of age

All children who drowned did so in the absence of adult supervision. In some cases, supervision was clearly inadequate for the age and developmental status of the child. In others, lack of supervision most commonly occurred in the context of carer distraction with everyday household chores, a misunderstanding of the whereabouts of the child, or unclear responsibility for supervision.

Key aspects of supervision for 46 children under 5 years of age who drowned in private swimming pools between 2007 and 2014 is described below. The information demonstrates the nexus between lack of direct supervision, even for very short periods of time, and inadequate (faulty or absent) child resistant barriers.

Time unsupervised

Details of the length of time children under five were reportedly left unsupervised was available for 40 children.

The majority of the children (26) were reportedly unsupervised for 10 minutes or less, with half (11) reportedly out of sight for five minutes or less. Seven children were unsupervised for an estimated time of over 10 minutes and up to 20 minutes. Typically, carers were otherwise engaged in day to day activities, such as attending to another child, going to the toilet, cleaning or cooking. The child was often believed to be in a safe place at the time, and/or under the supervision of other adults or older siblings. Where the child was in the pool area, the issue was lack of arms-length supervision, with the child entering the water unseen, or having open access to the pool.

Seven children were not sighted by carers for over 30 minutes, and up to a number of hours. Most typically, this was in the context of the child having woken from sleep at some stage and left the house unseen.

Circumstances relevant to supervision

Most often, the fatal incident occurred following a chain of events – a faulty pool gate left unsecured, carer distraction with household chores or attending to other children, unclear delegation for supervision and the child able to leave the house unseen.

Just under one third (13) of the children drowned in pools located at the homes of friends or relatives. Half of these (6) occurred in the context of social gatherings of family or friends,

often around the pool, which led to situations where responsibility for supervision was shared among a group, or assumed to be with another.

In over half of the cases (22), supervision for the child was unclear or spread between a number of adults and / or older siblings, with assumptions being made about who was caring for the child. This was often in the context of everyday life, where household members were going about usual activities in different areas.

In over half of the cases (24) carer/s reported that the child was last seen inside the house. In some cases, the child accessed the yard through open or unlocked doors. In a small number of cases, it appears that the child may have recently reached a developmental milestone and acquired the skill to open doors or access areas previously out of reach.

Supervisor capacity

Police and Coronial reports made note of the use of alcohol by supervising adults at the time of the incident in some cases, including at social gatherings. There was no indication in records that alcohol use resulted in impaired capacity to supervise. In two cases, records indicate the carer was unwell and had left the child with an older sibling.

Carer supervision: children over five years of age

The eight children aged six to 12 years who drowned were all unsupervised. Five children were reportedly unsupervised for ten minutes or less and one child was unsupervised for 20 minutes.⁵

In four cases, the supervising adult knew that the child was using the pool. Three children accessed the pool without the knowledge of a supervisor and in one case, this information is unknown.

Four of the 8 children were known to be able to swim. Two of the children experienced an injury or fall that contributed to their inability to manage themselves in the water. Two children with a disability were unable to swim and required direct adult supervision in water. An additional two children had a medical history which may have compromised their safety in the water (history of seizures).

3. Position on proposed changes

In the context of the above analysis, and the broader work of the CDRT in relation to the prevention of child deaths, the Team agrees with the need for simple, targeted and effective regulation of swimming pools in NSW. In this regard, the Team supports the efforts of the NSW Government to strengthen provisions of the *Swimming Pools Act 1992* (the Act) and in continuing to promote community and industry understanding of swimming pool safety.

Swimming pool safety standards

1. Do you support the following possible approaches to a pool barrier standard?

⁵ Information is not available for two children.

(a) Control of when and if the State adopts a revised national standard

☑Yes (see below for comments)□No□Unsure

(b) Provide ready access to pool professionals to the standard

☑Yes (see below for comments)□No□Unsure

(c) Provide an easy to understand explanation for the general public

☑Yes (see below for comments)□No□Unsure

2. Do you believe the benefits of having a single pool barrier standard outweigh the costs of upgrading existing pools and should be proceeded with?

☑Yes (see below for comments)□No□Unsure

3. Do you support the need for an interpretation service to answer queries about the swimming pool barrier standard and how it should be applied?

☑Yes (see below for comments)□No□Unsure

In relation to 1-3 above, The Team strongly supports measures designed to simplify and provide greater clarity for pool owners, carers of young children and industry stakeholders regarding barrier requirements under the Act.

Over a number of years, the Team has made recommendations focused on the promotion of clear, simple and consistent messages to assist pool owners and other relevant stakeholders understand their obligations under the Act, including ensuring that pool barriers fully comply with safety requirements.

The current restrictions on access to the relevant Australian standards create difficulties for pool owners, certifiers and the general public to understand the specific barrier requirements imposed by the Act. The Team strongly agrees with the proposals above for introducing, and progressively phasing in compliance with, a single and readily accessible standard.

The Team further believes that there is merit in adopting a similar approach to Queensland, whereby the legislated standard reflects the Australian standard, but provides flexibility for

Government to update or otherwise amend the standard as necessary, and to develop guidelines and factsheets designed to clarify and explain the standard.

Temporary pool fencing

4. Do you believe it is necessary to establish an explicit standard or requirement for temporary pool fencing?

ØYes □No □Unsure

Noting that there have been instances of children drowning in pools where construction was underway, the Team supports the proposal in the discussion paper for introducing clear requirements for temporary pool fencing into the Act.

Pool barrier materials

5. Do you support requiring pool barrier material being required to be tested and subject to an identification system as a product meeting the required standard?

ØYes □No □Unsure

The Team strongly supports the introduction of any measures designed to achieve greater clarity for pool owners in relation to whether or not child resistant barriers meet the requisite standards under the Act.

Exemptions from pool barrier requirements

6. Do you support the withdrawal of current exemptions from the pool barrier safety standards, with a phase in period for pool owners to comply and allow councils to assess exemptions and alternative suitable safety arrangements on a case by case basis subject to guidelines?

\square Yes (see below for comments)
□No
□Unsure

7. Do you believe there is sufficient guidance available at present to enable councils to assess applications for exemptions from the pool barrier standards?

□Yes ☑No (see below for comments) □Unsure

As noted in the 8-year review above, the status of the swimming pool in relation to exemption from the child resistant barrier provisions of the Act was documented for 44 of the 53 pools. Of these, around one third (15) were exempt. Ten were exempt because they were built prior

to 1990, and five were on a large property and built prior to 2010. Of the 15 exempt swimming pools, 13 were fenced.

Information on barrier compliance was available for 12 of the 13 fenced pools. Only one pool did not have any defects identified. Eleven pools were non-compliant and had access points where a young child could enter the pool area - either through defective gates / latch mechanisms, or breaches to the pool fence.

Given the proportion of drowning deaths that occurred in pools that were eligible for exemption, the Team strongly supports the reviewer's proposal to phase in the removal of any remaining automatic exemptions from compliance with swimming pool barrier requirements.

Portable pools and spas

- 8. Do you support requiring additional controls on the sale and use of portable pools and spas such as provision of information on safety requirements and registration at point of sale, inspection of the pool once installed as well as greater consumer education?
 - ØYes □No □Unsure

Our reviews of drowning deaths that occur in portable pools reflect the observations set out in the discussion paper in relation to features associated with higher risk to children in these types of pools, compared to permanent, in-ground pool structures.

The Team's 8-year review identified that almost one-fifth the 54 pools were considered 'portable' (10, 19%). This indicates the need for targeted strategies to ensure property owners and occupiers of premises with pools are fully informed about the need for compliant pool barrier fencing for above ground and portable pools.

Swimming pools register

9. Please provide any suggestions on how the register could be improved and made more useful.

The Team has consistently found that the most at-risk age group for drowning in swimming pools are children under five years of age, and pools that present the most risk are located at properties where children live or regularly visit. For example, as indicated above in data from the Team's 8-year analysis, the large majority of children drowned in pools at their own home (38, 70%). In at least five other cases, children drowned in pools at homes where other children lived.

As such, the Team has repeatedly emphasised the importance of identifying, and prioritising for inspection, those properties where young children reside or frequently visit. In order for councils to access information that would assist them understand the level of risk to children, and to target prevention efforts effectively, the Team has previously recommended that the prescribed information to be provided in the registration of a pool include details about:

- whether children are resident at the property, and if so, the age of those children at the time of registration, and
- if children are not resident at the property, whether children are regular visitors.⁶

The Team understands that councils currently rely on a range of demographic data (such as Australian Bureau of Statistics and council planning data) to help inform which properties to target for inspection, including those in areas with a high proportion of young children.

However, the Team considers that there may be merit in exploring further options for strengthening data capture and linkages - including through the swimming pool register - to facilitate improved identification of properties with pools and young children.⁷

The Team also strongly supports the reviewer's proposals for significantly enhancing the capacity of the register, in particular to enable public reporting on: the number of inspections carried out; level of compliance with the Act; orders issued by councils to rectify non-compliance; and whether or not owners rectify defects within a reasonable period of time.⁸

Certification

10. Do you believe there is merit in accredited pool certifiers being able to undertake minor repairs where there are non-compliant matters that can be rectified relatively easily?

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☑Yes (See below for comments)□No□Unsure
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11. Do you support council inspectors and accredited pool certifiers being required to fully document each pool inspection, including photographs and supporting notes?

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☑Yes (See below for comments)□No□Unsure
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12. Do you support persons undertaking pool barrier installation work being required to have suitable training in pool barrier standards and being accountable for constructing in line with those standards?

☑Yes (See below for comments)□No□Unsure

Our review work underscores that in some cases, it is minor defects, such as faulty gate latch mechanisms, that pose the greatest risk to young children, including allowing them to access the pool area undetected.

⁶ See NSW Child Death Review Team (2012), Annual Report 2011, NSW Ombudsman: Sydney.

⁷ See NSW Child Death Review Team (2014), Annual Report 2013, NSW Ombudsman: Sydney.

⁸ Note that this is the subject of a current CDRT recommendation directed at the Office of Local Government – see NSW Child Death Review Team (2014), *Annual Report 2013*, NSW Ombudsman: Sydney.

As the discussion paper identifies, gate latches are a common weak point in pool barriers as they comprise moveable parts with a restricted area in which to align for effective operation. In addition, the wetness of the ground surrounding pool areas can lead to ongoing movement in gate posts, resulting in misalignment of latch mechanisms.

The Team strongly supports the reviewer's proposal to vary the standard for gate footing and latch mechanisms to ensure they are effective against soil movement and that there is reasonable tolerance for alignment of the gate latching operation.

The Team also supports the proposal to permit accredited pool certifiers to undertake minor repairs, and similar to the approach adopted in Queensland, for the scope of what constitutes a 'minor' repair to be defined in the Act. If this change is implemented, then the Team agrees that it is critical for certifiers to be suitably trained and accountable for any repair work undertaken.

Commencement of sale and lease provisions

13. Which to you believe is the most appropriate course of action for commencing the sale and lease provisions:

Defer commencement six months to a quieter period of the property year

 \square Commence the lease provision as planned and the sale provision six months later

□Commence sale and lease provisions as planned, with or without flexibility in timing of the compliance certificate

 \Box Other (please specify)

14. Is there merit in allowing the purchaser of a property to take responsibility for ensuring a non-compliant pool is made compliant in a reasonable time after settlement and with the council to have an enforcement role to ensure this occurs?

ØYes □No □Unsure

As the analysis above demonstrates, just under one-fifth of drowning deaths occurred in pools on rental properties during the 8-year reporting period (10, 19%)

For a number of years, the Team has advocated for, and made recommendations directed at, ensuring that pool compliance inspections are appropriately and effectively targeted, including at trigger points such as the sale or lease of properties with pools.⁹ In proposing that rental properties are targeted as part of council pool inspection programs, the Team has drawn attention to the particular risks associated with rental properties, given that lessees have less control than property owners in ensuring that the pool is compliant.

The Team acknowledges the constraints set out in the discussion paper in relation to the commencement of the sale provisions in April 2016, and therefore support a further 6-month deferment.

⁹ See NSW Child Death Review Team (2012), Annual Report 2011, NSW Ombudsman: Sydney.

The Team further considers that there may be merit in providing scope for transferring the obligation to obtain a compliance certificate to the purchaser in circumstances such as those outlined in the discussion paper, provided that councils are accountable for meeting corresponding statutory obligations to ensure that purchasers discharge responsibilities in this regard.

Compliance and enforcement

15. Would you support an expanded pool inspection system that involves providing a more effective way to achieve compliance than the current sale and lease compliance arrangements?

☑Yes (see comments below)□No□Unsure

16. Which approach would you believe is the most appropriate way to inspect pools?

- □ inspecting all pools over a defined period (for example annually for high risk pools and every four years for pools in general as is the case in Western Australia (see comments below)
- \blacksquare an expanded and more consistent risk based inspection program undertaken by councils
- \Box other
- 17. Where a pool is assessed as non-compliant, do you believe there is a need for both accredited pool certifiers and council pool inspectors to give a clearer explanation of why it is non-compliant and provide options for how the problems could be rectified, but noting that there could be multiple ways to achieve rectification?

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☑Yes (see comments below)□No□Unsure
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18. Do you believe there needs to be a broad consistency in the approach taken by local government councils to the design and operation of swimming pool compliance programs?

☑Yes (see comments below)□No□Unsure

In relation to points 15 - 18 above, the Team makes the following comments.

Since April 2013, councils have been required to have a program in place for the inspection of swimming pools in their area to ensure compliance with the Act. Given that this amendment to the Act was made with the intent to reduce the drowning deaths and near-drowning of young children in swimming pools, the Team's recommendations in recent years have

focused on measures to support councils to effectively identify premises with swimming pools and young children, and to target their inspection programs accordingly.

Data from the NSW child death register clearly shows that the pools most likely to present a drowning risk to young children are those located at their own home. It is also notable that in some cases, the defects identified in pool barriers were long standing, with the nature of defects being such that they had never been compliant with the Act.

In addition to the requirement for owners to obtain a compliance certificate at the point of sale or lease of a property with a pool, the Team strongly supports an approach of mandatory, risk-based periodic inspections. The Team's view is that any such inspection programs should be supported by model policies that provide for a broadly consistent approach to inspections across NSW.¹⁰

While accommodating for differences in council size and local demographics, model policies would detail the basic requirements for a program of periodic inspection, and would include but not necessarily be limited to mandatory inspection triggers including complaints and properties that are being newly leased or sold, as well as properties at which young children are recorded on the register, or otherwise identified, as residing.

Supervision and education of pool owners/users

19. What more needs to be done in the area of educating the community in both the importance and the approach to pool safety?

The Team has been clear that child resistant pool barriers should never be seen as a substitute for adequate supervision. The inherent dangers of water to young children is such that the level of supervision required in or around swimming pools must be active, and for young children, arms-length. However, despite every effort, and for different reasons, there may be times at which this level of supervision is not provided. The integrity of pool safety barriers is critical to the safety of children in these circumstances.

Information from the Team's 8-year review demonstrates the inextricable link between lack of direct supervision, even for very short periods of time, and inadequate (faulty or absent) child resistant barriers. As noted in the data above, the majority of the children under five years who drowned (26) were reportedly unsupervised for 10 minutes or less, with half (11) reportedly out of sight for five minutes or less.

Lack of supervision most commonly occurred in the context of carer distraction with everyday household chores, a misunderstanding of the whereabouts of the child, or unclear responsibility for supervision. Most often, the fatal incident occurred following a chain of events – a faulty pool gate left unsecured, carer distraction with household chores or attending to other children, unclear delegation for supervision and the child able to leave the house unseen.

For over half of the children under five (24) carer/s reported that the child was last seen inside the house, indicating that the level of supervision in this context may have been appropriate were it not for the fact that the child had unknowingly gained access to the pool area. In other

¹⁰ See NSW Child Death Review Team (2012) Annual Report 2011, NSW Ombudsman: Sydney.

cases, it appears that the child may have recently reached a developmental milestone and acquired the skill to open doors or access areas previously out of reach.

In the Team's view, the confluence of factors that contribute to human error and the seriousness of the potential consequences arising from a failure in supervision reinforce how critical it is for pool barrier protection to be effective.

In terms of prevention measures, through its work, the Team has urged that key safety messages targeting parents/carers, pool owners and the general community must simply, clearly and consistently reinforce that where children have access to swimming pools:

- adult supervision must be constant, active, clearly delegated and in the case of very young children, within arms-reach; and
- if safety barriers are not effectively child resistant, even momentary lapses in supervision or diverted attention, including carrying out everyday tasks, can result in a drowning death.

In particular, and as demonstrated in the 8-year review above, faulty self-closing or automatic gate latch mechanisms have been the predominant defect in pool safety barriers, indicating a need to ensure that safety messages targeting pool owners specifically draw attention to the need for regular maintenance of gates and latches. Similarly, given the higher risks to children associated with portable pools, safety messages including those targeted at rental property owners and tenants (including social housing) should specifically address safety requirements for these types of pools.

The Team also acknowledges and supports the work of a range of organisations that deliver education and awareness programs targeting water safety, including through the development and distribution of resources such as fact sheets, checklists and electronic apps.

The Team has previously emphasised the importance of ensuring that the promotion and delivery of water safety education and awareness strategies is coordinated so that key messages are consistent and well targeted. This requires ongoing analysis of relevant information, including data sourced from the swimming pool register, to help determine the areas and/or groups that may benefit from a targeted education campaign. As noted above, the Team is supportive of the proposed enhancements to the swimming pool register and notes that this should assist the Office of Local Government, councils and other key stakeholders target prevention efforts - including education campaigns - effectively.

APPENDIX 1

Table: identified swimming pool barrier faults (fenced pools) ¹

Issue/s contributory to child accessing pool	Gate not self- latching / latch broken	Fence in poor state of repair – e.g. holes, broken or rails or palings	Climbable objects within the non-climbable zone	Gaps in fence or gate too great	Handholds or footholds present	Where house forms part of barrier, doors or windows not secure	Fence too low	Type of fence
Yes	\checkmark			✓				4-sided
Yes	✓	\checkmark	✓					4-sided
Yes	\checkmark		\checkmark	✓				4-sided
No - gate propped	\checkmark		\checkmark					4-sided
Yes	✓			\checkmark				3-sided
Yes	✓	✓			✓			4-sided
Yes	✓	✓						4-sided
Yes	✓							3-sided
No - gate tied	✓			✓				4-sided
Yes	✓		✓					4-sided
Yes	✓							4-sided
Yes	✓		✓	✓				4-sided
Yes	✓							4-sided
Yes	✓	\checkmark						3-sided
Yes						✓ pool access door		3-sided
Unknown	✓		\checkmark					4-sided
Yes	✓			✓	\checkmark		✓	4-sided
Yes	✓							4-sided
Yes	\checkmark	✓						4-sided
Yes	✓						✓	4-sided
Unknown	\checkmark	\checkmark						4-sided
Yes	✓		\checkmark		\checkmark			4-sided
No - gate propped	\checkmark			✓		✓		3-sided
Yes	✓	✓	✓		✓	✓		3 sided
Yes	✓	\checkmark					\checkmark	3-sided
Unknown	1							Unknown
Yes	√	\checkmark		✓			\checkmark	4-sided
Yes	√	\checkmark	\checkmark	 ✓ 	\checkmark			4-sided

Yes	✓	\checkmark	\checkmark					3-sided
Yes	✓		\checkmark			\checkmark		3- sided
Yes		✓	\checkmark					4-sided
Yes	✓	\checkmark	\checkmark	✓				4-sided
	30	13	13	10	5	4	4	

¹ Includes 32 fenced pools only. Shaded area denotes the most likely point at which the child accessed the pool (Police and Coronial records)