

STATE OF FLORIDA

DEPARTMENT OF ENVIRONMENTAL
PROTECTION



SNORKELING POLICY

MAY 22, 2002

Skin Diving (Snorkeling)

A “**Skin Diver**” is defined as any person who is partially or completely submerged in water, is equipped with a facemask, with or without a snorkel, and is not breathing compressed gases. The terms “free diving”, “snorkeling”, and “breath-hold diving” are synonymous with skin diving for the purposes of this policy.

Supervisors of employees or volunteers planning to engage in snorkeling operations as part of a Department of Environmental Protection (DEP) work assignment should contact their DEP Unit Dive Safety Officer (UDSO), or their Division representative to the DEP Dive Control Board, where appropriate, for guidelines and safety procedures relevant to their specific operation. (See DEP Diving Safety Manual for UDSO information).

Note: for the purposes of this document, a regular service volunteer is an individual who has completed the necessary DEP forms that approve them for volunteer status, provides on-going service as a volunteer, and who has the approval of appropriate Department staff to assist with the project by snorkeling.

A. Training and Medical Requirements

Any DEP regular service volunteer or employee who will be skin diving as part of their regular duties, as described in their position description, shall meet the following minimum training and medical requirements.

1. Training Requirements: Skin divers shall complete a professionally certified or DEP approved skin diving training course and shall obtain approval to snorkel. Competency in skin diving skills, as demonstrated to the UDSO or during Dive Control Board (DCB) Safety workshops, may substitute for formal training (see Attachment A). The training will include academic and water training as described below.

- a). The academic training will consist of information on equipment, skin diving science, the environment, problem management, and safe practices of skin diving.
- b). The water training will cover the techniques of donning equipment, entering the water, checking buoyancy, surface swimming, snorkel clearing and performing surface dives.

A skin diver that holds a current scuba certification obtained within the previous two years from a nationally recognized training organization, or has a scuba certification and a current dive log that shows adequate diving over the last two years is considered to have met the skin diving training requirement. “Adequate” means experience similar to what might be encountered while snorkeling (e.g., visibility, temperature, current, etc.) A copy of the scuba certification card and the most recent five logged dives from their dive log is acceptable proof for this requirement.

Employees and regular service volunteers must obtain written approval to snorkel from their supervisor or UDSO. (See Attachment A).

2. Medical Requirements: A skin diver who will be skin diving as a part of their duties shall complete a Statement of Fitness to Skin Dive (Attachment B), and shall be in good health, tolerant of moderate to strenuous exercise and free of any physical or medical condition which could interfere with safe snorkeling activities. The individual snorkeler must be aware that he/she is responsible for his/her safety and health and must make their supervisor aware of any known impairment that precludes safe snorkeling.

Occasional Service Volunteers who participate in one-time or infrequent volunteer service

involving skin diving must comply with the following:

1. Must participate in a brief demonstration of safe snorkeling practices conducted by a DEP Skin Diver approved by the UDSO. A current scuba certification and logbook may substitute as outlined in Training Requirements (A.1. above).
2. Read and sign a Statement of Fitness to Skin Dive (Attachment B).

The DEP unit sponsoring the activity shall arrange for an appropriate number of observers to monitor skin diving activities.

B. Equipment

Skin divers should be properly equipped to carry out assigned duties safely. If skin diving is a part of the employee's regular duties, the Department will pay for the equipment. A skin diver may use their personal equipment to skin dive. The equipment must be in good working order and be maintained according to the manufacturer's recommendations.

As necessary to perform duties, skin diving equipment shall include, but not be limited to: mask, fins, snorkel, buoyancy compensator or snorkeling vest, protective foot wear, protective clothing (e.g. gloves, wet suit, or skin suit), weight belt and dive flag.

C. Procedures

- 1) The snorkeler shall obtain approval to snorkel (Attachment A).
- 2) Skin diving shall be planned in writing and should be conducted according to that plan (see Attachment C). All plans must be approved by the skin diver's supervisor prior to the activity taking place.
- 3) An approved "Diver Down" flag will be displayed while skin diving, in accordance with applicable state and federal regulations.
- 4) Each employee and regular service volunteer shall maintain a log of all work-related skin diving activities (see Appendix D for example). The logs shall be submitted to the employee's supervisor/UDSO periodically as defined by the unit, but at least annually.
- 5) The decision to skin dive is that of the skin diver. A person may refuse to skin dive without fear of penalty whenever they feel it is unsafe for them to skin dive.
- 6) No employee or volunteer shall skin dive alone. At a minimum there will be an observer standing by, ready and able to render immediate assistance if necessary.

D. Emergencies: In an emergency situation, any person may deviate from these policies and procedures to the extent necessary to prevent or minimize a situation that is likely to cause death, serious physical harm, or major environmental damage. Before any such deviation, the employee should assess potential risk or harm to themselves or others. Sworn law enforcement officers may be exempt from these standards when responding to emergency situations

Explanation of Revisions: This policy incorporates revisions by

Responsible Office: Safety Program Office, Administrative Services

Attachment B

Statement of Understanding and Fitness to Skin Dive

Date: _____

Name: _____
(Individual Completing Statement - Please Print)

(Location: headquarters/working)

TO: Employee or Volunteer Supervisor

I, the undersigned, understand that snorkeling is an activity that may require strenuous physical exertion for an extended period of time. I am tolerant of such conditions and in good health.

I understand that certain risks cannot be totally eliminated by training and planning. These include, but are not limited to: drowning, ruptured eardrums, or sinuses; organisms in the water that might bite, sting, or inject toxic substances into the body and environmental hardships including rough seas, strong currents, cold or warm temperatures.

I understand that I, the individual snorkeler, must be aware that I am ultimately responsible for my health and safety and that it is my responsibility to inform my supervisor and/or refuse to snorkel if conditions are unsafe, or other factors such as health, equipment failure, or danger from boat traffic precludes safe snorkeling.

Other comments:

For Occasional Service Volunteers, this excerpt below applies for this activity. (A copy of the entire Snorkeling Policy is available to read upon request):

Occasional Service Volunteers who participate in one-time or infrequent volunteer service involving skin diving must comply with the following:

1. Must participate in a brief demonstration of safe snorkeling practices conducted by a DEP Skin Diver approved by the Unit Diving Safety Officer. A current scuba certification and logbook may substitute as outlined in Training Requirements (section A.1.).
2. Read and sign a Statement of Understanding and Fitness to Skin Dive (this form).

The DEP unit sponsoring the activity shall arrange for an appropriate number of observers to monitor skin diving activities.

I have read, understand, and will comply with the DEP Snorkeling Policy.

For this activity, I am an ___ employee or regular service volunteer, OR
___ occasional service volunteer

Signature: _____ Date: _____
(Individual completing statement)

