



HOME SWIMMING POOLS BARRIER

2011-2016 REPORT



Royal Life Saving
THE ROYAL LIFE SAVING SOCIETY - WESTERN AUSTRALIA INC.





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EXECUTIVE SUMMARY

Home swimming pools are an integral part of Australian culture and utilised frequently as a method of tolerating the hot climate. There are an estimated 170,000 home swimming pools in Western Australia (WA) and there are 6,000-8,000 new swimming pools constructed each year. These structures are also prevalent in residences with children. With the majority of drowning incidents involving young children aged 0-4 years occurring at locations in and around the home environment, it is essential that pools are secured by appropriate barriers to limit access by children and prevent unintentional immersions.

Western Australian legislation mandates the maintenance of home swimming pool barriers according to set regulation focusing on construction, design, upkeep and security. The Royal Life Saving Society of WA (RLSSWA) is contracted by a number of Perth Local Government Authorities (LGAs) in the Perth metropolitan area to undertake barrier inspections for home swimming pools in their area and determine areas of non-compliance. If identified problems are not resolved by the third inspection pools are referred to the LGA for appropriate action.

This report analyses the results of 44,832 inspections conducted across 28,143 pools in 14 LGAs between 1 July 2011 and 30 June 2016. The aim of this study was to identify the most common areas for pool barrier assessment failures during this period to determine overall rates of compliance, inform future RLSSWA endeavours and provide evidence-based feedback to involved LGAs. An analysis of home swimming pool drownings over the past five years was also undertaken.

A pool could undergo three inspections before being referred to the council if barriers failed to comply with regulations within a given period of time. Pass and fail rates at the first, second and third inspections were calculated across the sample as a whole and for each of the individual LGAs. Pools that were unable to be accessed were removed from the sample and pass/fail results are reflective only of those actually inspected. The number of pools referred to the LGAs (primarily after failing a third inspection) is presented proportionally over the sample of pools in total.

Average cumulative pass rate at inspections 1, 2 and 3 was 64.6, 84.5 and 92.3% respectively. Of the sample, 7.7% failed the third inspection and 12.5% were referred to the council. The presence of climbable objects/structures, gates not self-closing or latching and inadequate window childproofing were the most common reasons for inspection failure.

During the same period, 19 drowning deaths were recorded among 0-4 year olds in WA. Of these 68.4% (n=13) occurred in a home swimming pool and in all cases children gained access through an inadequate or unsecure pool barrier. These statistics highlight the need for sustained inspections combined with home pool owner education to ensure young children are adequately supervised and that well maintained barriers are in place to restrict entry to the home pool environment.

This report provides a number of recommendations that should be undertaken by RLSSWA and respective LGAs to further the safety of home swimming pools and increase rates of compliance.

INTRODUCTION

As a nation with a warm climate and home to a population with an affinity for water, it is not surprising that many Australians look to a home swimming pool for accessible relief from summer temperatures. It is estimated that 12% of those living in private residences have some form of above or below ground swimming pool, while temporary inflatables unaccounted for in these statistics are also common.

The Perth metropolitan area has the highest proportion of home pools of any Australian capital (18%)¹ equating to over 170,000 pools.² While both income and climate are strongly associated with home pool ownership, research has also acknowledged the presence of children in the household to increase the probability of a home pool. Despite pools being enjoyable sources of recreation and temperature relief, they are also frequent locations of unintentional drownings in children and adults. However, their benefits for social, health and emotional wellbeing, safer alternatives to other waterways and facilitators of swimming skill development should not be ignored.

In assessing drownings of 0-4 year olds, RLSSWA has identified factors frequently contributing to accidental home pool drownings among this age group. These included inadequate parent/carer supervision, the use of older children to observe the safety of younger children, limited strength and coordination, the inability of infants and toddlers to gain appropriate swimming skills at this life stage, the inquisitive nature of children and child disobedience.³ There also appears to be an excessive dependence on home pool barriers as a singular method of impeding access to water and not, as they should be, a secondary layer of protection behind supervision, regular barrier maintenance and restrictive access to the barrier environment. In encouraging parental awareness of these factors, the RLSSWA Keep Watch program focuses on infant and toddler water safety in the community, with an emphasis on home and swimming pool safety. Through parent and child presentations, community event promotions and media campaigns, pool barriers are emphasised as part of a combination of strategies necessary to restrict children's access to water.

Pool barriers are required to be virtually impenetrable by young children. To achieve this, legislation requires all pools to be adequately secured to limit unintentional access. Each jurisdiction has slightly varied methods by which this requirement is upheld. In WA the legislative frameworks mandating home pool and spa barriers are the Building Act 2011⁴ and the Building Regulations 2012.⁵ These legislations are upheld and amended by the WA Department of Mines, Industry Regulation and Safety Building Commission with regulations pertaining to barrier design, location, height, climbable objects, latch function, window and door accessibility and other elements specific to home pools. A full description of these regulations can be seen in the 2016 Rules for Pools and Spas.⁶

Ensuring home pool barrier compliance is the responsibility of Local Government Authorities (LGAs). The Building Regulations 2012 Act requires councils to inspect the security of private swimming pools and barriers at least once every four years. Barriers must meet the requirements of the relevant standards and pool owners that continue to fail to meet regulations can face a fine. While many councils organise inspections internally, RLSSWA is contracted by a number of Perth metropolitan LGAs to undertake barrier assessments, with results provided back to the relevant council. RLSSWA has offered this service for over 15 years, with inspections following legislation applicable at the time of assessment. However, it is important to regularly quantify the collective findings of these inspections and determine areas for improvement, with reports produced every five years by the RLSSWA retrospectively assessing results. As a result, the aim of this study was to identify the most common areas for pool barrier assessment failures between 2011 and 2016 to determine overall rates of compliance, inform future RLSSWA endeavours and provide evidence-based feedback to involved LGAs. An analysis of home swimming pool drownings over the past five years was also undertaken.

METHODS

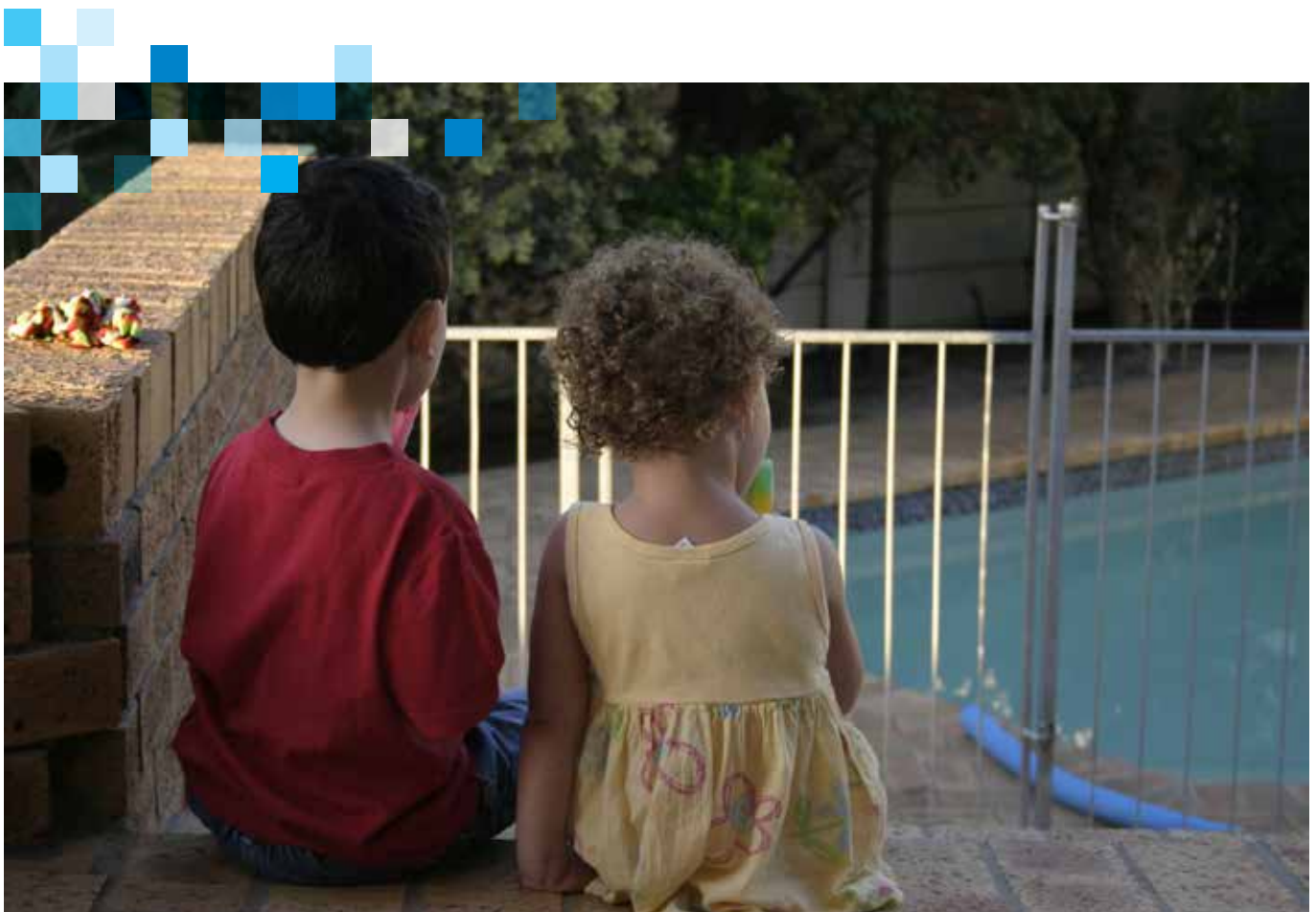
The results from RLSSWA conducted home pool barrier inspections between 1 July 2011 and 30 June 2016 were collated. This sample included a total of 28,143 pools and 44,832 inspections across 14 LGAs in the Perth metropolitan area.

A pool could undergo three inspections before being referred to the council if barriers failed to comply with regulations within a given period of time. Pass and fail rates at the first, second and third inspections were calculated across the sample as a whole and for each of the individual LGAs. Pools that were unable to be accessed were removed from the sample and pass/fail results are reflective only of those actually inspected.

The number of pools referred to the LGAs (primarily after failing a third inspection) is presented proportionally over the sample of pools in total.

Partway through the period under analysis, RLSSWA moved from undertaking hardcopy assessments to centralising inspections on an online application. In this manner, RLSSWA has been able to better evaluate LGA barrier adherence in a quick and timely manner, while providing professional and quick feedback to pool owners and councils. In transitioning to this new method of assessment, additional reasons for failure were included to ensure clarity between the inspector and the pool owner. This increased the categories needed to pass from 15 to 28. To ensure consistency across the period of inspection, failure reasons from the app were aligned with previously utilised categories, and data presented reflects the failure reasons aligned with hardcopy inspections.

An additional six categories from the app were excluded from the analysis for ease of reporting; however these failure reasons were rarely observed. LGAs were de-identified and coded numerically to ensure council anonymity.



RESULTS

The results of home pool barrier compliance/non-compliance and Western Australian home pool drowning deaths between 1 July 2011 and 30 June 2016 are presented below.

HOME POOL BARRIER COMPLIANCE

Across the 14 analysed LGAs and 28,134 pools assessed, the cumulative pass rate at inspections 1, 2 and 3 was 64.6, 84.5 and 92.3% respectively. The proportion of the sample to pass at each inspection phase is presented in Figure 1.

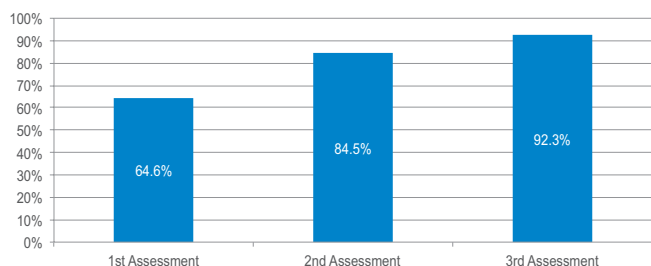


Figure 1: Barrier compliance rate

Pass rates for the first inspection vary slightly from the results observed across the past 25 years representing a slight downward trend, as can be seen in Figure 2. The data for this Figure is a combination of research completed by RLSSWA⁷ and Stevenson et al.⁸

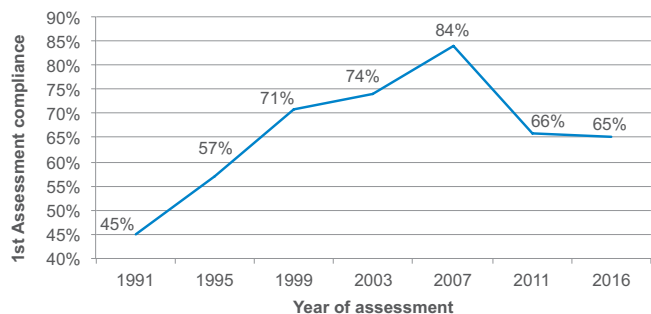


Figure 2: Long term trend of barrier compliance at first assessment [%]

The decline in barrier compliance after 2007 is hypothesised to be as a result of changes to pool inspections, more thorough inspection requirements and an increase in the proportion of ageing pools included within the sample which were more likely to be non-compliant at first inspection.

In total, 7.7% of pools assessed failed to pass the third inspection. Failure rates at the third inspection by LGA can be seen in Figure 3.

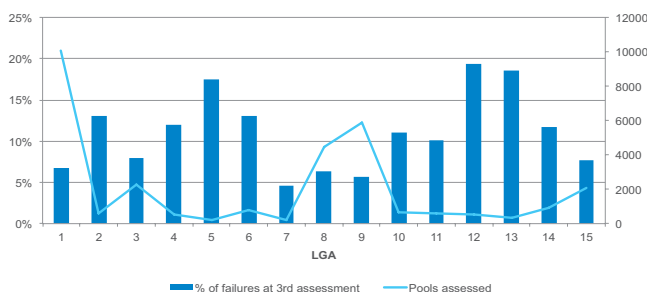


Figure 3: Failure rates at third inspection by LGA

Generally, compliance was greater in LGAs that had been working with RLSSWA to conduct inspections of swimming pools over a longer period of time.

Overall, 12.5% of the sample was referred to the relevant LGA. The disparity between referrals to LGAs and overall failure rates can be accounted by pools with no access for three consecutive inspections (preventing the assessment being conducted), home owners requesting to be referred to the council during the first or second inspection after disputing findings, inconsistencies between LGA and RLSSWA advice and additional factors not identified through this study. Decommissioned pools and those under construction also contribute to the referred cohort.

There were significant differences between the pass, fail and referral rates across each LGA. These results are provided in Table 1.

Table 1: Barrier inspection results by LGA

LGA	Number of pools	Compliant first assessment		Compliant second assessment		Compliant third assessment		Failed at 3rd assessment		Referred to LGA	
		n	%	n*	%†	n*	%†	n	%	n	%§
1	10099	6497	71.1	1752	88.2	656	93.3	654	6.7	1206	11.9
2	604	169	38.0	163	75.8	74	87.0	63	13.0	179	29.6
3	2289	1170	64.4	443	82.8	173	92.1	171	7.9	450	19.7
4	538	251	54.3	98	78.6	72	88.0	60	12.0	119	22.1
5	215	61	38.1	35	69.1	15	82.5	27	17.5	92	42.8
6	804	287	52.3	124	77.5	59	87.0	79	13.0	311	38.7
7	201	125	69.1	41	94.4	7	95.4	9	4.6	22	10.9
8	4461	2979	69.6	713	83.9	307	93.6	282	6.4	286	6.4
9	5898	3443	60.8	1304	84.3	577	94.3	335	5.7	453	7.7
10	687	393	61.8	98	78.2	70	88.9	75	11.1	77	11.2
11	621	348	59.3	121	80.6	56	89.9	62	10.1	62	10.1
12	526	237	50.0	97	71.8	42	80.7	98	19.3	99	18.8
13	313	154	55.0	64	79.1	6	81.5	56	18.5	56	18.5
14	887	344	51.2	194	82.3	96	88.3	98	11.7	105	11.8
Total	28143	16458	64.9	5247	84.5	2210	92.3	2069	7.7	3517	12.5

* Additional barriers in the sample that passed between inspection 1-2 and 2-3

† Cumulative proportion of passes

§ Proportional to the sample of pools

Reasons for inspection failure

Almost 4,600 available hardcopy and 5,000 database records were used to assess reasons for pool barrier inspection non-compliance. As discussed previously, reasons for failure were adjusted for recording purposes to allow for consistency in results across the two inspection methods. These adjusted non-compliance categories are as follows;

- Climbable objects/structures
- Door latch height
- Doors self-close/latch
- Fence/gate condition
- Fence/gate height
- Fence/gate structure
- Gaps between uprights
- Gaps under fence/gate
- Gate opening direction
- Gates self-close/latch
- Ground stability
- Latch height/shielding
- Seal or shield doors
- Spa/above ground pool fault
- Window child proofing

In total, 13,052 barrier problems were identified in the analysed sample. The proportion of each fault can be seen in Figure 4.

Data from hardcopy reports shows that on average, pools had between one and two barrier issues upon failing an inspection. Overall, 24% of pools had three or more issues while 7% had four or more. Assessing hardcopy data allows an analysis of the number of inspections with a particular fault, compared to assessing faults across the sample as a whole (out of 100%). Figure 5 below shows the proportion of these inspections with an identified fault. These figures represent the percentage of cases a fault may be present in, and as more than one fault may be present at each inspection, the numbers exceed 100%.

While the data is slightly re-ordered when comparing these two graphs, the most common faults recorded were climbable objects/structures, gates not self-closing/latching and/or faulty window childproofing, with these faults observed in half of inspection failures.

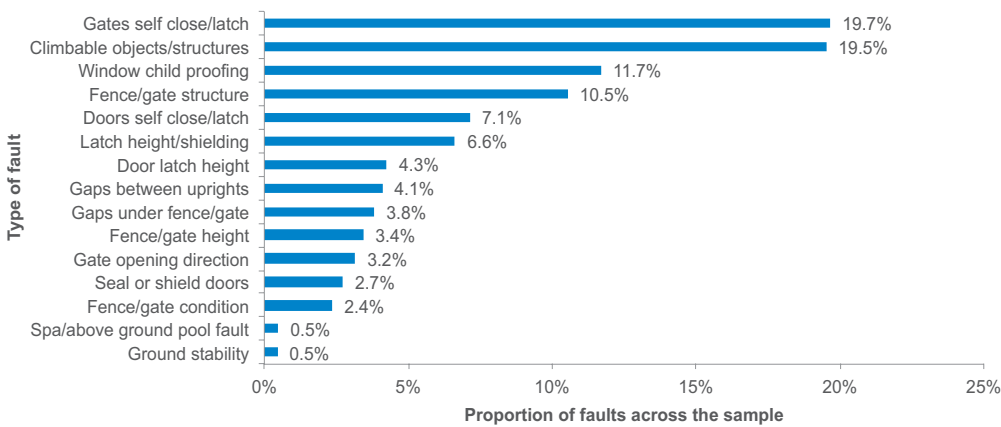


Figure 4: Proportion of barrier faults across the analysed sample

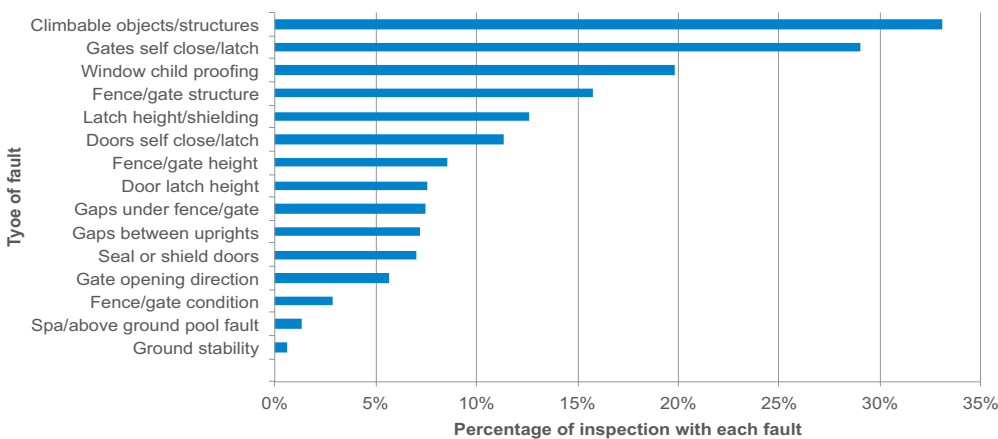


Figure 5: Percentage of inspections with one or more faults

UNINTENTIONAL IMMERSIONS IN HOME SWIMMING POOLS

While the aim of the home pool barrier inspection program is to prevent unintentional immersion of children in swimming pools, these events unfortunately still occur, with the age group most at-risk being children aged 0-4 years.

Fatal Drowning – Toddlers aged 0-4 years

During the study period, 19 children aged 0-4 years drowned in WA, 68.4% of which (N=13) occurred in home swimming pools. All but two events occurred in the Perth metropolitan area with the mean victim age being 21 months. Only three of the drowning deaths occurred in an LGA regularly assessed by RLSSWA. In each instance, a lack of adult supervision was a contributing factor and all pools had either a barrier fault allowing access or were unsecure at the time of the incident.

Confirmed factors associated with those deaths occurring in home swimming pools are summarised below.

1. Lapse in supervision, gate open (unintentionally) and young age (just started walking and still unsteady on feet).
2. Lapse in supervision, objects near pool fence, young age.
3. Lapse in supervision (15 minutes), no pool fence, uncompliant barriers (doors and windows).
4. Lapse in supervision (15 minutes), no pool fence, and uncompliant barriers (doors and windows).
5. Lapse in supervision (15 minutes), removal of security door and malfunction of door/failure to fix by owners
6. Lapse in supervision, uncompliant barrier (doors).
7. Lapse in supervision (2-3 minutes), pool gate propped open.
8. Lapse in supervision (1.5-2 hours), pool gate propped open.
9. Lapse in supervision (10 minutes), unlocked gate, water left in inflatable pool (not emptied after use).
10. Lapse in supervision (15 minutes), unfenced pool.
11. Lapse in supervision (5 minutes), propped open pool gate.
12. Lapse in supervision (20 minutes), access door propped open, non-compliant barrier.
13. Lapse in supervision (5-10 minutes), no pool barrier.

Non-fatal drowning – Toddlers 0-4 years

It is important to note that all non-fatal drownings are fatal. During the period under assessment, an average of 40 children aged 0-4 years were hospitalised annually following an unintentional immersion, with 73% of events occurring in or around the home (inclusive of swimming pools but not excluding other bodies of water). These events can lead to severe and permanent deficits consequential of a hypoxic brain injury in affected children, leading to a severely restricted quality of life.⁹

KEEP WATCH CASE STUDY

The Keep Watch toddler drowning prevention program has been running in Western Australia since 1996 and aims to educate parents and carers of young children about aquatic risks and dangers in and around the home. Since 1996, there has been a dramatic 85% reduction in the rate of toddler drowning deaths here in Western Australia. And while the home swimming pool remains the most common location for drowning amongst toddlers aged 1-3 years (the bathtub remains the most common site for drowning in infants 0-1 year of age), the rate of home pool drowning amongst toddlers 0-4 years has decreased by 30.0% (from 2.37 deaths/100,000 population in 1992 to 1.66 deaths/100,000 population in 2015). This is despite the increase in home pool ownership over the same time period.

Despite these improvements, non-fatal drowning amongst toddlers has continued to increase over the past decade highlighting the need for ongoing education. Michelle Ostler, Keep Watch Ambassador, knows too well the impact that non-fatal drowning can have on a family. When her daughter Jewel was nearly three years old she was involved in a non-fatal drowning incident in a home pool, while being cared for by a relative. Her drowning resulted in a lengthy hospital stay, and while Jewel survived her family continues to deal with the ongoing health issues and effects of the incident. Michelle has become a Keep Watch parent ambassador to help parents keep their children safe around water so they don't have to go through the same experience she did. Her message for parents is simple "always be vigilant. Never think you can leave the pool gate open because your children have had swimming lessons and you think they will be OK. You need to always be supervising your kids - that's the number one message I would give."



DISCUSSION

This report presents the results of home pool barrier inspections between 1 July 2011 and 30 June 2016, during which 44,832 inspections were conducted at 28,143 pools across 14 LGAs in the Perth metropolitan area. At the third inspection, 92.3% of pools were found to be compliant, with 7.7% remaining with faults and 12.5% warranting referral to the council. The most common reasons for inspection failure were the presence of climbable objects/structures, gates not self-closing/latching and/or inadequate window childproofing.

Rates of compliance have decreased very slightly (1%) since the last home pool barrier compliance report was completed five years ago. While a number of improvements are evident in councils where RLSSWA has worked with for a long period, this slight decline can be attributed to increased proportions of ageing swimming pools which are more likely to have non-compliant barriers at first inspection and the inclusion of a number of newer LGAs inexperienced with RLSSWA assessment standards. It is expected that these rates of compliance will increase as involvement is sustained, as councils become more aware of requirements.

There was significant variation of the pass/fail rates between different LGAs, however a notable finding was an association between the number of inspections performed in an LGA and the overall fail rate. LGAs with a higher number of inspections had a high proportion of pools pass the first inspection and lower numbers of pools fail the third inspection. This could be as inspections have been carried out in these areas over a greater period of time, permitting each pool more than one assessment, or the presence of more pools in the LGA allowing for a more systematic approach to ensuring compliance. Additionally, strong relationships between RLSSWA and the relevant LGAs may have facilitated this greater compliance rate. As more LGAs contract RLSSWA to complete their pool inspections and sustained assessments take place, it is likely an improvement in overall compliance rates will be observed as time progresses.

It is important to acknowledge a stable rate of first compliance across the past five years. This suggests that barriers have been well maintained between inspections and while the percentage of 65% is high, it will continue to be necessary to work with LGAs and home pool owners to increase first compliance rates. Furthermore many faults identified during inspections only require simple adjustments that can occur in a timely manner without an expense to the homeowner. Encouraging pool owners to undertake alterations quickly through the provision of necessary information and instructions will encourage a higher pass rate at the second inspection.

Home spas do not require registration with the LGA. The presence of spa non-compliance is only determined circumstantially during a pool barrier assessment, meaning that home spas in residences discrete from pools are unable to be inspected and may be functioning without a suitable barrier. This is an issue also relevant to inflatable pools. It may therefore be that metropolitan wide community education is required to encourage all spa and inflatable pool owners to implement relevant safety measures and methods of access restriction if holding water.

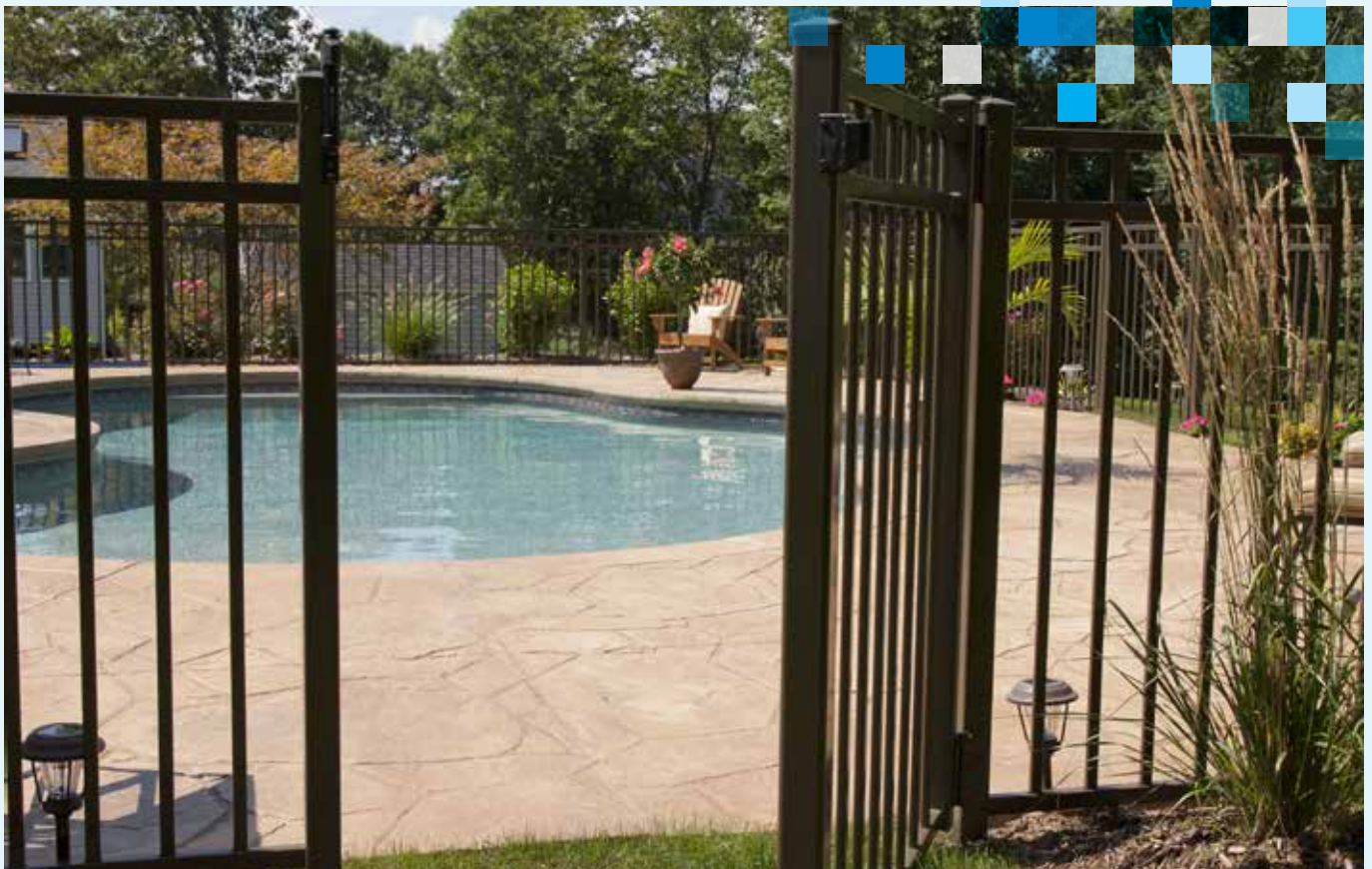
Within the sample period, 13 drowning deaths involving children aged 0-4 years occurred in home pools. Each drowning was attributable to a both a lapse of guardian supervision and unsecure barriers. While these statistics reiterate the importance of ensuring home pool barriers are maintained to a high standard, they also highlight the necessity of using a combination of methods to prevent children accessing home swimming pools. Further, given that in the majority of cases a parent or family member is the first to respond in an emergency situation, it is essential that first aid and rescue skills of resident adults are sufficient to improve the survival of immersed children if an incident does occur.

This is the first home pool barrier inspection report to use data from the new app which allows for inspections to be undertaken on iPads instead of via hardcopy forms. With this change has come the integration of additional categories for failure. While the combination of two different collection methods may have affected the reliability of the data presented in this report, rigorous strategies towards ensuring accuracy have allowed for confidence in the results. Future reports using data solely from the app will not only be easier to collate, but will allow for consistency and the opportunity for regular reporting to LGAs and RLSSWA.

RECOMMENDATIONS

The following recommendations have been made in reference to report findings.

1. Regular inspections of home swimming pool barriers is essential to ensuring they remain safe and effective in restricting access to the water body. This report highlights that pools with greater number of inspections have higher overall compliance.
2. Overall compliance rates at final inspection are high. However, strategies to improve barrier compliance at first inspection should be investigated and promoted to improve the likelihood that the barrier remains in good working order between inspections. This includes the dissemination of relevant information and the effective use of databases to contact pool owners regularly.
3. Implement strategies to improve consistency and reduce variation in rates of compliance amongst LGAs
4. Education strategies to target home pool owners should focus on common non-compliance issues, the importance of conducting regular barrier maintenance between inspections and the barrier requirements for spas and portable swimming pools. This can be achieved by using databases available to RLSSWA and Swimming Pool and Spa Association of WA (SPASAWA) to effectively translate information to homeowners and those constructing home pools.
5. Home pool owners should be encouraged to complete a personal assessment of their barriers at least before and after summer, guided by checklists provided by RLSSWA.
6. LGA specific data should be produced annually and supplied to the relevant council to allow for regular assessment of pool barrier compliance and reasons for failure, with information possibly translated to home pool owners.
7. Every home pool owner should be a lifesaver by having up to date resuscitation, first aid and home pool rescue skills.
8. Home pool barriers should continue to be promoted as one of many methods necessary to prevent children accessing pools, and not a first and last method of limiting access.



CONCLUSION

The slight decline in overall pool compliance between years can be attributed to the inclusion of a number of newer LGAs inexperienced with RLSSWA assessment standards. Comparing LGAs with greater involvement demonstrates that results will improve over time, and sustained partnerships are essential to achieving this goal.

Home pool barriers must be promoted as one of many strategies to prevent child access to swimming pools. While home pool barrier compliance remains high, more work is needed to not only maintain these high rates but also to educate home pool owners on how to ensure the barrier remains compliant between inspections. Greater work is also needed to encourage the compliance of spas and inflatables. However, the social and health benefits of home pools must not be ignored.

We encourage these facilities to continue to be enjoyed by the WA public but advocate for use to be undertaken safely.

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