



Hourly Guard Observation Report

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Model Guard Hourly Observation Report

Strong Lifeguard management is essential to establishing a safe aquatic environment. The primary purpose of this report is to take a “snap shot” of the Lifeguard on duty. The report takes less than 2 minutes to complete and directly impacts the overall safety of the YMCA.

The report should be completed at a minimum of at least once an hour, whenever the pool is open. The basic information below helps the aquatic manager identify areas needing improvement in their absence and keeps the guards attentive.

Please make any additional comments, always pointing out positive activities. If there is a violation of a major safety concern, please rectify it immediately. Your assistance will prove valuable in operating a safe and professional facility.

**LIFEGUARDS WILL BE FORMALLY RECOGNIZED
FOR CONSISTENT GOOD PERFORMANCE**

Date: _____ **Time:** _____ **Name:** _____ **Guard:** _____

	<i>Circle “Yes” or “No”</i>	
Is the guard on duty immediately recognizable?	YES	NO
Is the guard on duty at the pool’s edge, actively scanning?	YES	NO *
Is the guard Rescue Ready? With whistle, and carrying the Rescue Tube with the strap over the shoulder.	YES	NO
Is the guard distracted by prolonged discussion?	YES *	NO
Is the guard displaying a professional demeanor?	YES	NO

* = *Immediate correction needed*

Additional comments:

Date: _____ **Time:** _____ **Name:** _____ **Guard:** _____

Circle "Yes" or "No"

- | | | |
|---|-------|------|
| Is the guard on duty immediately recognizable? | YES | NO |
| Is the guard on duty at the pool's edge, actively scanning? | YES | NO * |
| Is the guard Rescue Ready? With whistle, and carrying the Rescue Tube with the strap over the shoulder. | YES | NO |
| Is the guard distracted by prolonged discussion? | YES * | NO |
| Is the guard displaying a professional demeanor? | YES | NO |

** = Immediate correction needed*

Additional comments:

Date: _____ **Time:** _____ **Name:** _____ **Guard:** _____

Circle "Yes" or "No"

- | | | |
|---|-------|------|
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| Is the guard distracted by prolonged discussion? | YES * | NO |
| Is the guard displaying a professional demeanor? | YES | NO |

** = Immediate correction needed*

Additional comments:

Date: _____ **Time:** _____ **Name:** _____ **Guard:** _____

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Additional comments:
