

Public Health pack for Mass Events

This guidance has been co-produced between UK Health Security Agency (UKHSA) Hampshire and the Isle of Wight Health Protection Team (HIOW HPT) and Hampshire County Council and Isle of Wight Council Public Health Team, utilising UKHSA's national guidance for individual infectious diseases which can be found here - [Infectious diseases: detailed information - GOV.UK](#) and [Communicable disease outbreak management guidance - GOV.UK](#)

This guidance is designed to help event organisers plan for and manage an outbreak of key infectious diseases in a mass gathering environment. It can also be used as to satisfy the Safety Advisory Group that this has been considered.

The management principles outlined in the document can be effective at limiting the spread of viral and bacterial infections if implemented.



Contents

Summary for Gastrointestinal Outbreaks.....	3
Recommendations for actions	3
Summary for Rash Presentations – Measles.....	5
Recommendations for action	5
Summary for Bacterial Meningitis Case	6
Recommendations for action	6
Medical Centre Facilities	7
Things to consider.....	7
Contacting UKHSA	9
General Public Health - Pre-arrival communication & messaging options	11
General hygiene and toiletry products.....	11
Vaccinations.....	11
Sexual health.....	12
Extreme Weather.....	12
Questionnaire for investigation of reports of food poisoning/gastro-enteritis/rashes	13

Summary for Gastrointestinal Outbreaks

During the event period (i.e. set up, event period or breakdown) if there is an increase in the number of cases of diarrhoea and /or vomiting who are all linked (same group/tent/toilet facility area, catering provision etc) this should be notified to the Organiser and the local Health Protection Team.

The likely cause of the potential symptoms should be considered and notified if it is thought to be an infectious agent (food, water or person-to person transmission).

Transmission Route:	Person to person by the faecal oral route, from contaminated food, aerosols of projectile vomit and from environmental contamination, including contaminated water and soil	
Incubation Period: (length of time from acquiring the infection to developing symptoms)	Salmonella	12- 48 hours
	Cryptosporidiosis	2 - 10 days
	Campylobacter	2 - 5 days
	E-Coli	2 - 4 days
	Norovirus	12 - 48 hours
Exclusion:	<p>Isolation of cases would be preferable whilst unwell. Organisers should consider how best to facilitate this and may include restriction to their accommodation and removal from site/send home as soon as able.</p> <p>It is critical that festival staff (especially those that handle food) do not return to work until 48 hours after symptoms have stopped.</p>	

Recommendations for actions during all stages of festival when people are on site (to prevent outbreaks)

Hand Hygiene:	<ul style="list-style-type: none"> • Festival goers and staff should be encouraged to wash their hands before eating and drinking and after going to the toilet • Physical “Wash Your Hands” signage and consideration to digital messaging. • Hand washing with liquid soap and running water wherever possible. • Paper towels should be used for drying hands and a wastepaper bin provided for disposal. • Alcohol gel is not effective against norovirus, but it can be used in addition to soap and water • UKHSA handwashing advice
Cleaning and disinfection:	<ul style="list-style-type: none"> • All eating surfaces should be thoroughly cleaned with hot water and a detergent and then disinfected using a hypochlorite / bleach (e.g. Milton) solution, (dilution rate of 1,000 parts per million) after every use. • It is recommended that toilets are cleaned and disinfected frequently (using same process and agents as above). Their condition must be monitored during the day with a view to an extra clean if required. • Always wear appropriate Personal Protective Equipment when cleaning such as disposable gloves and aprons, and thoroughly wash hands on completion. • The areas that should be cleaned and then disinfected should include: <ul style="list-style-type: none"> ➤ All areas of the toilet including frequently touched surfaces. ➤ Wash basins, taps and drinking water taps ➤ Frequently handled and shared staff items such as radios, telephones and computer equipment, vehicle keys, steering wheels etc. <p>Organisers should be confident that the cleaning agents used in toilet blocks are suitable for reducing the bacteria and viruses to a non-infectious level.</p>

Public spillage incident:	<p>Vomit or diarrhoea:</p> <ul style="list-style-type: none"> • Cover the excreta/vomit spillages immediately with appropriate material, (paper towel or sand). • Always wear appropriate PPE e.g. gloves when disposing of faeces/vomit. Consider mask if there is a concern about splash contamination to the face. • After removing the spillage, clean the surrounding area with warm soapy water, followed by disinfection with a hypochlorite solution of 1000 parts per million. Always clean a wider area than is visibly contaminated. (including walls and door of toilet) • The area where the incident has occurred should be cleared and ventilated as soon as possible. • Organisers may want to consider provision of spillage kits in strategic areas.
Food Safety:	<ul style="list-style-type: none"> • Food handlers who are taken unwell during an outbreak should NOT continue working to avoid contamination of the catering areas or food. Exclusion from work at least 48 hours after symptoms have stopped. • Food Traders MUST have their own designated area for cleaning equipment, toilets and hand washing facilities. • Food handlers must ensure they are fully compliant with food hygiene procedures
Information and Communication:	<ul style="list-style-type: none"> • Utilise Health and safety inductions with crew to pass any messages • Pre-event information to all attendees – tickets and website • Use of social media platforms linked to event to pass information • Utilisation of signage, LED boards, during event • Utilisation of onsite communications with crew e.g., radio messaging timed just before mealtime • Provision of information for coach companies bringing festival goers to event • STEC-O157-information-leaflet.docx • Stop norovirus spreading poster
Business Continuity:	<ul style="list-style-type: none"> • Priority should be given to Crew Catering, Event Control, Site Security and back of house communal areas. • If possible have separate crew catering areas.

Summary for Rash Presentations – Measles

An outbreak is defined as two or more epidemiologically linked cases that occur within one incubation period of each other (i.e. the second case occurs between 7 and 21 days of the first case) NB: A single case of suspected measles would be investigated by the Health Protection Team

Transmission Route:	Via respiratory route, airborne droplet spread and with direct contact with nasal or throat secretions
Incubation Period:	7-21 days. Infectious 4 days before onset of rash and 4 days after
Exclusion:	If measles is suspected advise that individual needs to go home, preferably not on public transport
Signs and Symptoms:	Runny nose, cough, conjunctivitis, fever and Koplik Spots inside cheeks (white spots). Rash can appear as flat red or brown blotches beginning on the face and spreading over the body.

Recommendations for action

Pre-Event	<ul style="list-style-type: none"> Please use event website and information pages to give message of importance of MMR vaccine prior to attending event. Festival Banner 1, Festival Banner 2, Festival Banner 3 Medical Centre staff should be appropriately vaccinated, and other staff members should be encouraged to check their status prior to attendance.
During Event	<ul style="list-style-type: none"> Individuals with suspected measles infection should be isolated as quickly as possible to prevent further spread, not left in waiting area or communal area of medical centre. In addition, if case is transferred to hospital ensure that receiving medical facility is made aware of possible diagnosis to minimise transmission risk. Individuals should be advised to leave event and go home as soon as possible. This may require someone coming to pick them up as they should not go on public transport, as measles is highly infectious. Ask them to contact a friend to get their personal belongings, keep them in an isolated area of medical centre to avoid them going back into event environment. Ensure disposal of tissues and other items used by the case in appropriate waste bins. Make a list of contacts and provide them with advice regarding signs and symptoms of measles as incubation period typically around 10 – 12 days from exposure to onset of symptoms (so they may become unwell after festival has finished) The Health Protection Team would investigate cases of measles and support organisers regarding advice or appropriate messaging/use of social media / website for the wider population of the event. Clinicians are reminded that Measles is a notifiable disease and as such should be informing the local Health Protection Team. Oral Fluid Test Kits can be available in some instances. Liaise with local Health Protection Team with regards to arranging couriering of kits and testing at local lab.
Post Event	<ul style="list-style-type: none"> In event of case or outbreak: Due to prolonged incubation period event organisers may want to consider posting warn and inform style messages on their social media or website regarding signs and symptoms to be alert to.
Information	Measles - NHS NHS vaccinations and when to have them - NHS

Summary for Bacterial Meningitis Case

Transmission Route:	Person to person through respiratory droplets and direct contact with nose and throat secretions – sneezing, coughing. Close prolonged contact, i.e., sharing a tent at an event, intimate kissing.
Incubation Period:	3-5 days
Exclusion:	Individual should be isolated and transferred to the closest Emergency Department, preferably by ambulance with paramedic support as soon as possible.
Signs and Symptoms	<ul style="list-style-type: none"> • sudden onset of a high temperature (fever) • a severe headache • dislike of bright lights (photophobia) • vomiting and/or severe diarrhoea or stomach pains • painful joints/ stiff neck • pale and blotchy skin • very cold hands and feet • fitting • drowsiness that can deteriorate into a coma • In some cases, a characteristic rash develops and may start as a cluster of pinprick blood spots under the skin, spreading to form bruises under the skin. <ul style="list-style-type: none"> ◦ The rash can appear anywhere on the body. It does not fade when pressed under the bottom of a glass (the tumbler test). • symptoms can appear in any order and not all may occur

Recommendations for action

Pre-Event	<ul style="list-style-type: none"> • Event attendees and staff should be encouraged to have vaccinations as per UK schedule. • Awareness training should be given to all staff regarding signs and symptoms of Meningococcal disease and sepsis.
During Event	<ul style="list-style-type: none"> • Anyone with suspected bacterial meningitis should be transferred urgently to hospital. • Ensure the attending clinician notifies the local Health Protection Team • Complete event Questionnaire in as much detail as possible as close contact details are important. They may require urgent chemoprophylaxis in addition to written information regarding signs and symptoms. • Staff to follow all infection control measures
Post Event	<ul style="list-style-type: none"> • The Health Protection Team will be involved in the management of a case and will support the organisers if case is confirmed. The use of warn and inform style messages on event social media and event website to alert the wider population of the event will be considered.
Information	Meningitis - NHS NHS vaccinations and when to have them - NHS

Medical Centre Facilities

An outbreak would be declared when:

Two or more people experiencing a similar illness are linked in time or place

Or

A greater than expected rate of infection occurs, compared with the usual background rate for the place and time

Event organisers should be satisfied that Medical Facilities are run with assurances of policies and procedures in place.

There should be specific guidance on the reporting of an outbreak in place at the event, in terms of who to report to in the first instance. It is important to have these criteria in place and that everyone working in the medical centre is aware of the procedure.

Please follow specific Event Guidance and report any outbreaks to local Health Protection Team as soon as possible.

Preventing the spread of any infectious agent is important and the table below details some of the recommendations to consider within the medical centre.

Things to consider	What	When
Toilet Facilities	<ul style="list-style-type: none"> Should have separate for staff and event goers 	Throughout event
Cleaning of facility	<ul style="list-style-type: none"> Consider effective handling and disposal of used and soiled items (double bagging for offsite laundering, clinical waste facilities) All hard surfaces should be thoroughly cleaned with hot water and a detergent and then disinfected using a hypochlorite / bleach (e.g., Milton) solution, (dilution rate of 1,000 parts per million) after every use e.g., desks, IT equipment, phones and radios. Staff should use appropriate PPE (gloves and aprons) 	Throughout event, but cleaning carried out on a more regular basis during outbreak situation.
Isolation	<ul style="list-style-type: none"> Consider allocation of staff duties to minimise cross infection e.g., cohorting staff to care for infected person. Isolation area for affected individuals. (This could be a different area away from the main medical centre) 	In an outbreak situation where there are multiple affected individuals with same symptoms.
Additional Staff	<ul style="list-style-type: none"> Consideration to rotas and availability of extra staff should the need arise 	Additional staff may be required in an outbreak situation / If there is increased staff sickness affecting the running of medical centre / If an isolation area has been set up requiring staffing.

Faecal pots and forms availability	<ul style="list-style-type: none"> • Medical centre could consider holding a supply of faecal pots and forms, (usually from onsite EH colleagues.) • Ensure labelling of samples is done correctly, to facilitate tests being completed promptly. • Ensure plan in place to transport samples to local lab. Health Protection team may be able to support this if required. 	<p>In an outbreak situation where able to obtain samples to identify organism.</p>
Monitoring and surveillance	<ul style="list-style-type: none"> • Having pre-printed/ designed event questionnaires in medical centre. • Consider having a large map of site with grid references to enable the quick identification of any sources of infection 	<p>See pages 13 & 14</p> <p>These should be available all way through event for medical staff to use to inform event management team, EH onsite and UKHSA.</p>

Contacting UKHSA

Title	Reporting to UKHSA by telephone.
Description	This card gives you the contact number for UKHSA and details of the information the Health Protection team will require to help you manage your outbreak.
Who	Those members of staff that are responsible for informing UKHSA of an outbreak i.e., EHO, Event Management team, Medical Centre

When to report: An increase in the number of sickness cases reported due to diarrhoea and/or vomiting or single cases of suspected measles, meningitis etc.

Phone: 0344 225 3861, South East Health Protection Team

What UKHSA or Environmental Health will ask for:

- Name and address of the event, including the postcode
- Contact person's name and phone number
- Number of attendees at event
- Number of individuals affected, split between staff and attendees
- Date of first illness (onset date)
- Duration of symptoms with details of symptoms
- Details of any episodes of public vomiting
- Details of food outlets/ food handlers affected
- Are there any common factors around the affected individuals e.g.
 - Location of campsite / tent
 - Any specific venue within the festival
 - Food outlets used
 - Other shared facilities used e.g., toilets, drinking water stand pipe, showers
- Use the questionnaire at medical centre and grid referenced map to highlight areas of possible transmission.

CONTACTS

Title	Contacts and further information
Description	This card provides details of the main contacts who can help you during an outbreak.
Who	Those members of staff that are responsible for informing UKHSA of an outbreak.

UKHSA South East Centre Health Protection Team	Monday – Friday 09.00 – 17.00 0344 225 3861	Out of Hours: 0344 225 3861
Southampton General Hospital	02380777222	Lab: 02381 206408
Queen Alexander Hospital	02392 286000	Lab: 02392 286201
Winchester Hospital	01962 863535	Lab: 01256 313312
Basingstoke Hospital	01256 473202	Lab: 01256 313312
St Marys Isle of Wight Hospital	01983 822099	Lab: 01983534815
Event Management Onsite		
Health and Safety Onsite		
EH office Onsite		
Security Onsite		

General Public Health - Pre-arrival communication & messaging options

Description The information on this page has been compiled to support organisers consider the public health aspects around event-planning. The sections below include information for event planners, as well as information event planners may want to provide to attendees.

As part of event communications, we strongly encourage event organisers include public health messaging as relevant. The information and links in this document are useful to inform and support this. The Council's communications team can provide support with this, working with the Public Health team.

There are a number of useful links embedded into this page, and we strongly recommend reviewing the information on these links regularly as information may change from time to time.

General hygiene and toiletry products	<p>While there will be some washing facilities these will be limited. Event organisers can recommend attendees should remember to bring these useful skin care products, to the event to enable them to keep themselves safe.</p> <p>Alcohol gel, baby wipes, sunscreen etc</p>
Vaccinations	<p>Event organisers can help raise awareness of vaccine programmes that protect against infections such as measles and meningitis, by prompting staff and attendees to check their vaccination status with their GP before they go to festivals and large events.</p> <p>Since Oct 2023 there has been a significant increase in cases of measles in England. In January 2024 the UK Health Security Agency declared a National Incident.</p> <p>Measles is highly infectious and transmitted through the respiratory route. Measles can be severe, particularly in immunosuppressed individuals and young infants. It is also more severe in pregnancy.</p> <p>The most effective way to control measles is by achieving high uptake of 2 doses of measles, mumps, and rubella (MMR) vaccine.</p> <p>The Measles, Mumps and Rubella (MMR) vaccine is currently offered routinely in childhood at age 1 year and 3 years, 4 months. However any one can catch up at any age.</p> <p>Meningitis can be prevented by the MenACWY vaccine currently offered at school to pupils in year 9.</p> <p>Anyone who has not had both does of the MMR vaccine and/ or are over 16 years old and has not had the MenACWY vaccine, should ask their GP surgery for an appointment to discuss how these can be given.</p>

	<p>Vaccination remains the best defence we have against many infectious diseases. They provide good protection against hospitalisation and death. They also reduce the risk of long-term symptoms. Vaccines are safe and effective and vaccine programmes are continuously monitored.</p> <p>If the event is in the autumn or winter months, then those eligible should also be encouraged to get the COVID-19 and/or flu vaccine.</p>
Sexual health	<p>Event organisers should advise their attendees to consider their sexual health and well-being before they arrive at an event and bring condoms with them.</p> <p>Information and local resources for event attendees</p> <p>Event organisers can help raise awareness of information available to attendees to help them stay safe at events. Information can be found on the following pages:</p> <p>Home - Let's Talk about It (letstalkaboutit.nhs.uk) Guide to sexual health services - NHS (www.nhs.uk)</p>
Extreme Weather	<p>Adverse weather can put the health of event attendees and staff at risk, so it is important that event organisers monitor weather forecasts and put in place the appropriate risk assessment and risk management processes to deal with this eventuality.</p> <p>A new Adverse Weather and Health Plan (AWHP) was published by UKHSA in 2023 and replaces previous separate plans for hot and cold weather. Flooding has now also been included in this plan as there are recognised public health implications. The next iteration of the Plan will also include thunderstorm asthma, drought and storms.</p> <p>Alongside the AWHP are supporting documents</p> <p>Hot weather and health: guidance and advice Hot weather advice: planning events and mass gatherings Cold weather and health: guidance and advice Flooding: health guidance and advice</p> <p>Events are less likely to take place over the winter months and are more likely to be indoors. Nevertheless, event organisers should consider the safety of staff and attendees as they make their journey to and from the event and provide appropriate communications and updated information to warn of any possible risks.</p> <p>All of the above should be used in conjunction with other more detailed planning advice (for example, Health and Safety Executive's 'Events Safety Guide').</p>



UK Health
Security
Agency

Questionnaire for investigation of reports of food poisoning/gastro-enteritis/rashes

PATIENT DETAILS

First name:		Surname/family name:	
Date of birth:		Age:	
Sex:	Male / Female (Please circle)	Home tel no:	
Home address:		Mobile tel no:	
Postcode:		E-mail address:	
Accommodation Location and Type:			
Name / contact details of parent/guardian if appropriate:			
Are you working at Event? (including voluntary)	Where: What: Food Handler: Date and time of last work shift:		

Please give details of the people (including children) who you have been sharing accommodation with

Name	Date of Birth	Contact details if known

ILLNESS DETAILS					
Date of first symptoms:				Time symptoms started:	
What symptoms do you have? (Please ✓ all that apply and provide dates)					
	Y/N	Date		Y/N	Date
Diarrhoea			Stomach pain		
Nausea			Blood in stool		
Vomiting			Headache		
Cough or cold			Fever e.g. >38°C		
Rash, indicate where on body and description					
Have you been in contact with anyone with a rash in last 7 days (details in box)					
Anything Else of Note					
Did you submit any stool samples		Yes / No	If yes, where to and when		

FOOD AND WATER HISTORY					
4.1 Please list as far as you are able, all the food, water and drink you consumed in the 5 days before your illness. Please give details of where you bought/ obtained the food.					
Days before onset	Date	Breakfast	Lunch	Evening meal	Snacks
1					
2					
3					
4					
5					