



SCOTT COUNTY BOARD OF HEALTH

MINIMUM PUBLIC HEALTH REQUIREMENTS FOR MASS GATHERINGS ATTENDED BY MORE THAN 1,000 PEOPLE FOR A PERIOD OF MORE THAN FOUR HOURS, BUT NOT MORE THAN TWELVE HOURS.

The following shall be provided and in operation at least four hours before the mass gathering is scheduled to begin:

1. WATER SUPPLY. All water shall be from a source approved by the Health Department. If water is not available from a pressure system, transportation vehicles shall be approved by the Health Department.
 - a. For each six hour period, at least 250 gallons of water shall be available for each 1,000 attendants. Water shall be continuously available with at least two outlets provided for each 1,000 attendants.
 - b. No common drinking cup shall be provided or allowed to be used.
2. HANDWASHING FACILITIES. Handwashing facilities shall be provided. For use of food handlers, these facilities shall be located in each food concession and in each kitchen. Handwashing facilities shall include running water, hand cleanser, and paper towels.
3. TOILET FACILITIES. The method of toilet waste disposal shall be approved by the Health Department.
 - a. All toilet facilities shall be enclosed and separate facilities shall be provided for each sex.
 - b. At least one toilet facility for each sex shall be provided for each 1,000 attendants. If beer is sold on the site, at least two toilet facilities for each sex shall be provided for each 1,000 attendants.
 - c. Toilet facilities shall be conveniently located, supplied with toilet tissue and be accessible for servicing.
 - d. Each toilet facility shall be identified as to which sex it serves and toilets for each sex shall be at least 20 feet apart.
4. SOLID WASTE. Receptacles for the collection of solid waste shall be located at convenient locations. The receptacles shall be readily accessible to collection vehicles. All solid waste generated at the site shall be collected within twelve hours of closing time of the event and deposited at a site approved by the Health Department.
5. MEDICAL FACILITIES AND PERSONNEL. The number of facilities shall be based upon the maximum number of attendants at any one time.

First Aid Station shall be clearly identified and shall consist of a tent, shelter or other appropriate enclosure or designated area.

STAFF

A minimum of two (2) persons who hold a current R.N. License, EMT Certificate, or are Instructor Level Red Cross First Aid Certified or accepted equivalent, shall be present. All shall have current CPR certification.

EQUIPMENT

A minimum of two (2) cots shall be provided. One Johnson and Johnson Industrial Medical Kit 25 or the equivalent shall be provided, (except that ammonia inhalants, first aid spray or cream, eye irrigating solution and tourniquets are not required). Adequate lighting (fixed or portable) shall be provided.

COMMUNICATIONS

A telephone which is readily accessible or radio communications to contact the ambulance service or hospital shall be provided.

OTHER

Written confirmation from the ambulance service within the area in which the event is located that they are aware of the event and know the location of the first aid station, shall be provided.

1,000 – 2,000 ATTENDANTS-

All basic first aid station requirements shall be met.

2,000 – 5,000 ATTENDANTS-

All basic first aid station requirements shall be met and the following additional staff and equipment shall be provided.

STAFF

One additional person who holds a current R.N. License, EMT Certificate, or are Instructor Level Red Cross First Aid Certified or accepted equivalent shall be provided for each additional 2,000 attendants or fraction thereof, above the 2,000 level. All shall have current CPR certification.

EQUIPMENT

One additional cot for each additional 2,000 attendants or fraction thereof shall be provided. One additional Johnson and Johnson Industrial Medical Kit 25 or the equivalent, (except that ammonia inhalants, first aid spray or cream, eye irrigating solution and tourniquets are not required) shall be provided for each additional 2,000 attendants or fraction thereof.

5,000 OR MORE ATTENDANTS-

All basic first aid station requirements shall be met and the following additional staff and equipment shall be provided.

AMBULANCE

An ambulance shall be on site. Said ambulance shall be staffed and equipped in accordance with Scott County Board of Health Rules and Regulations #107. Arrangements for a backup ambulance unit shall be made.

STAFF

One medical practitioner shall be on site. One additional person who holds a current R.N. License, EMT Certificate, or are Instructor Level Red Cross First Aid Certified or accepted equivalent shall be provided for each additional 2,000 attendants or fraction thereof, above the 2,000 level. All shall have current CPR certification.

NOTE: In those events which have previously demonstrated substance abuse (alcohol and/or drugs) additional facilities and staff trained in treating these types of emergencies shall be required.

EQUIPMENT

One additional cot shall be provided for each additional 2,000 attendants or fraction thereof.

A first aid kit equivalent to a Johnson and Johnson Industrial Medical Kit 25 (except that ammonia inhalants, first aid spray or cream, eye irrigating solution and tourniquets are not required) shall be provided for each additional 2,000 attendants or fraction thereof.

6. FOOD SERVICE FACILITIES. All food service facilities shall be inspected and have (where applicable) received a license from the Scott County Health Department prior to serving food and/or drink.
7. NOTICE AND PLAN. Any person planning to sponsor, promote, operate, maintain or conduct a mass gathering that falls within these requirements shall notify the Health Department at least 15 days before the date the event is scheduled to begin. The notice shall include the plan for compliance with the provisions of these requirements. A drawing or schematic of the area including the location of all required facilities, equipment, etc., shall be provided.



Please complete the following application and send it the above address.

APPLICATION TO HOLD A MASS GATHERING

NAME OF ORGANIZATION _____

ADDRESS OF ORGANIZATION _____

NAME OF PERSONS IN CHARGE 1. _____ PHONE # _____

2. _____ PHONE # _____

LOCATION OF GATHERING _____

DATE (s) OF GATHERING _____

NUMBER OF EVENTS _____

HOURS OF EACH EVENT _____

NUMBER PLANNED TO ATTEND _____

SERVICES TO BE PROVIDED FOOD YES NO

TYPE FOOD _____

WHERE PREPARED _____

WHERE PURCHASED _____

FACILITIES TO STORE/ SERVE / PREPARE FOOD _____

DRINK: BEER YES NO

HOW TO BE SERVED _____

FACILITIES TOILETS MEN WOMEN

WATER FOUNTAINS

MEDICAL

SOLID WASTES STORAGE & DISPOSAL

SIGNATURE OF PERSON MAKING APPLICATION _____

HEALTH DEPARTMENT APPROVAL YES NO

COMMENTS _____

DATE _____ SIGNATURE _____

MGR2 _____ TITLE _____