

Los Angeles County Department of Health Services
Emergency Medical Services (EMS) Agency
Medical Response Subcommittee

LOS ANGELES COUNTY TASK FORCE ON RAVES AND ELECTRONIC MUSIC FESTIVALS

2010 Health Related Recommendations:

1. To minimize health issues related to weather conditions and possible drug use/misuse, ensure working water fountains and/or free water distribution sites in close proximity to each stage, and require that water and electrolyte beverages/sports drinks are widely available and their locations clearly identified. Use roaming vendors to make water and electrolyte beverages/sports drinks more easily accessible throughout the venue and especially at crowded stages.

Action by DHS/EMS: Both weather and hydration recommendations have been incorporated in the Prehospital Care Policy Ref. No. 842.1, Minimum EMS Resource Guidelines for Mass Gatherings and Special Events [Policy items 1 (page 2) and 8 (pages 3-4)].

2. Require key event staff, vendors and servers to be briefed on signs and symptoms of drug overdose and heat related problems.

Action by DHS/EMS: Fire and EMS providers receive a pre-event briefing for every event as part of their operational brief that includes issues to be aware of such as drug/alcohol use and weather related injuries.

3. Recommend that earplugs are available at entrances and/or first aid stations at no-cost.

Action by DHS/EMS: While not directly in policy, this item is always available at events.

2010 Emergency Medical Services Related Recommendations:

1. Require clearly marked signage in multiple key locations regarding location of easily accessible medical services on site.

Action by DHS/EMS: This recommendation is being incorporated into the Prehospital Care Policy Ref. No. 842.1, Minimum EMS Resource Guidelines for Mass Gatherings and Special Events (Policy item number 2, page 2).

2. Deploy additional (and easily identifiable) roaming medical teams of paramedics or EMTs throughout the venue as determined by the threat assessment.

Action by DHS/EMS: This has been a common practice at these events and is formally being added to Prehospital Care Policy Ref. No. 842.1, Minimum EMS Resource

Guidelines for Mass Gatherings and Special Events (Policy item number 7 with staffing recommendations, pages 2-3).

3. Recommend an additional first aid station and/or on-site physician and nurse (to coordinate with the fire department and private ambulance provider in the planning process and during the event), in addition to appropriate event medical support (so that problems not requiring hospital emergency care are attended to and participants are provided appropriate treatment/support) as determined by the threat assessment.

Action by DHS/EMS: This has been a common practice at these events and has been formally in place since May 2011 in the Prehospital Care Policy Ref. No. 842, Mass Gatherings Interface with Emergency Medical Services. Additionally, this item is being reviewed and expanded on in Prehospital Care Policy Ref. No. 842.1, Minimum EMS Resource Guidelines for Mass Gatherings and Special Events (Policy item number 7 with staffing recommendations, page 2-3).

4. Ensure early notification of events to the Emergency Medical Services (EMS) Agency, Medical Alert Center (MAC), and local hospitals.

Action by DHS/EMS: This has been a common practice at these events and has been formally in place since May 2011 in the Prehospital Care Policy Ref. No. 842, Mass Gatherings Interface with Emergency Medical Services. Timeline for notification is now being formalized in the updated Prehospital Care Policy Ref. No. 842, Mass Gatherings Interface with Emergency Medical Services (Policy III.D and Policy IV.B.1, pages 2- 3).

5. The Department of Health Services will develop a pre-hospital policy addressing electronic music festivals and the interface with Emergency Medical Services.

Action by DHS/EMS: This policy was drafted and tested in 2010 during the Rave Task Force and formally adopted into policy May 2011. In September of 2014, the EMS Agency in cooperation with LA City and LA County Fire started to review and revise this policy based on lessons learned. This updated draft has been a work in progress for approximately one year and is near completion with additions of the following:

- Ref. No. 842.1, Minimum EMS Resource Guidelines for Mass Gatherings and Special Events
- Ref. No. 842.2, Mass Gathering and Special Events Medical Action Plan
- Ref. No. 842.3, Mass Gathering and Special Events Event Roster
- Ref. No. 842.4, Mass Gathering and Special Events Patient Care Log

2015 Medical Response Recommendations

1. Expand the footprint of the event venue to include the parking lot when developing the Medical Action Plan. Patients in the parking lot that are a part of the event could be transported to the on-site medical aid station when a physician is present to reduce the impact to the EMS system and surrounding hospitals.
2. Extend the hours of service for the on-site medical station with physician for up to four hours post event. This will ensure appropriate care is provided to patients, will reduce transports to hospitals post-event, and will allow participants to leave the event safely.

SUBJECT: **MASS GATHERING AND SPECIAL
EVENTS INTERFACE WITH
EMERGENCY MEDICAL SERVICES**

EMT, PARAMEDIC, HOSPITALS
REFERENCE NO. 842

PURPOSE: To establish minimum guidelines for Emergency Medical Services (EMS) interface with event planners during mass gatherings and any Electronic Music Festival events so that participants have access to the appropriate level of care and to minimize the impact of these events on the local EMS system.

~~To ensure that participants of mass gathering and other special events have access to the appropriate level of care and to minimize the impact of mass gathering these events on the local EMS system.~~

AUTHORITY: Health & Safety Code, Sections 1797.202, 1797.204, 1797.220, 1798
Health Insurance portability and Accountability Act 164.501
California Code of Regulations, Title 22, Sections 100063, 100144, 100167(a),
100169
Los Angeles County Code Title 7, Business Licenses, Chapter 7.16,
Ambulances

DEFINITIONS:

Build in/build out plan:

Electronic Music Festival: A dance party, also known as a Rave that features fast-paced, repetitive electronic music with accompanying light shows. Generally, attendees are a youth oriented subculture that blends art, music, and social ideas.

Jurisdictional Provider Agency: The local fire department is the jurisdictional provider agency.

Mass Gathering: For the purpose of this policy, a mass gathering is an organized congregation or assembly of 5,000 or more people brought together for a specific event that is not of a recurring nature for the venue.

Participant: Any person attending or working at the event who requests medical personnel to assist them or provide an initial evaluation of their condition or situation.

Recurring Events: Venue management that is used on a daily, weekly, monthly, or annual basis to manage the medical care of the attendees and has experience with the attendee demographics; for example, professional sporting events, church services, etc., and the historical Medical Usage Rate is established and less than two transported patients per 1,000 participants.

EFFECTIVE: XX-XX-XX
REVISED:
SUPERSEDES: 5-31-11

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APPROVED: _____

Director, EMS Agency

Medical Director, EMS Agency

Special Event: For the purpose of this policy, a special event is a program that occurs during a particular interval of time that may or may not be in a fixed facility or venue. Special events may include parades, music festivals, marathons, etc.

PRINCIPLE:

1. A Medical Action Plan (MAP) ~~should~~ shall be created for participants of every mass gathering, special event, and Electronic Music Festival or at the request/discretion of the jurisdictional ~~fire department~~ provider agency.

POLICY:

- I. The Medical Action Plan (MAP) shall include, but not be limited to, the following considerations:
 - A. Event description, including event name and expected number of attendees
 - B. Participant safety (may include the parking lot or an extended footprint)
 - C. Non-participant (spectator, bystander, etc.) safety
 - D. Communications, including event leader or point of contact with provisions for emergency communications for events that are anticipated to overwhelm cell phone capacity (e.g. two-way radios)
 - E. Resources/Level of Services that will be provided during the event that is appropriate to the number of attendees
 - F. Weather related plans
 - G. Evacuation plan
 - H. Build in/build out plan
- II. Responsibility of the Event Venue/Promoter
 - A. Notify the jurisdictional ~~fire department~~ provider agency, participate in the permitting process, and develop and review the event MAP with the event medical staff and the jurisdictional provider agency. A MAP must be submitted for approval to the jurisdictional provider agency at a minimum of twenty-one (21) calendar days prior to the event.
 - B. Utilize Los Angeles County licensed ambulance companies that have, at minimum, approval as and EMT Automated External Defibrillator (AED) service provider in the State of California and Los Angeles County.
 - C. Any changes to a previously approved MAP must be submitted for approval at a minimum of seventy-two (72) hours prior to the event.
 - D. Event Venue/Promoter will participate in an after action review upon the request of the jurisdictional provider agency or the Los Angeles County Emergency Medical Services Agency.

III. Responsibility of the Jurisdictional Provider Agency

- A. Per the jurisdictional provider agency's procedure, review and approve the event permitting process, and the Event Action Plan and the Medical Action Plan within fourteen (14) calendar days prior to the event.
- B. The jurisdictional provider agency, at their discretion, may require additional or more stringent requirements than listed in this policy (i.e., medical staffing requirements).
- C. Educate the event venue/promoter regarding licensed ambulance company capabilities and hospital resources.
- D. Notify the Los Angeles County Emergency Medical Services (EMS) Agency Medical Alert Center (MAC) at 866-940-4401 of the event as soon as possible, if there is an anticipated impact to the EMS system.
- E. Assist with the coordination of the After Action Review/Report (AAR) for any event that meets the definition of Multiple Casualty Incident (MCI) as outlined in Reference No. 519, Management of Multiple Casualty Incidents.
- F. Verify emergency medical services personnel utilized in the event are appropriately licensed, accredited and/or certified in Los Angeles County.

IV. Responsibility of the Emergency Medical Services (EMS) Agency

- A. Upon request of the jurisdictional provider, the Prehospital Care Section will review the MAP prior to the event and respond to both the event medical provider and the jurisdictional provider agency with any recommendations, if needed. Reference No. 842.2, Mass Gathering and Special Events Medical Action Plan
- B. Responsibility of the Medical Alert Center
 - 1. Notify the hospitals surrounding the event ~~as soon as possible~~ within seven (7) calendar days prior to the event.
 - 2. Assign personnel to staff the event command center upon request of the jurisdictional provider agency.
 - 3. Poll area hospitals for emergency department capacity as needed.
 - 4. Monitor the number of patient transports during the event.
 - 5. Open an MCI on the ReddiNet when the number of patients and types of illnesses/injuries are expected to exceed the capability of the nearest hospitals.
 - a. Provide patient destination.

- b. Institute the use of Reference No. 806.1, Procedures Prior to Base Contact.
- c. Notify the Medical Officer and Administrator on Duty.
- d. Provide a summary of incident with final disposition of all patients.

6. In accordance with Reference No. 519, Management of Multiple Casualty Incidents, the MAC will ~~develop~~ assist with an AAR summarizing the incident and final disposition of all patients., as needed or requested.

V. Responsibility of the Event Medical Provider

- A. Provide adequate equipment and supplies to provide care based on level of service and number of participants.
- B. Submit a list of event personnel to include name of person, type of license or certification (EMT, Paramedic, Nurse, or Physician), and license or certification number to the jurisdictional provider agency at least twenty-one (21) calendar days prior to the event. Reference No. 842.3, Mass Gathering and Special Events Event Roster
- C. Any changes to a previously approved event personnel must be submitted to the jurisdictional provider agency seventy-two (72) hours prior to the event.
- D. Maintain a patient care log, which includes patient information or patient identifier, age, chief complaint, treatment, disposition (and diagnosis if a physician is on site) or if transported, the name of the hospital. Reference No. 842.4, Mass Gathering and Special Event Patient Care Log
- E. Submit the patient care log to the EMS Agency and the jurisdictional provider within 72 hours of the end of the event.
- F. Provide patient care records (PCRs) for review by the EMS Agency or jurisdictional provider agency when requested.

VI. Responsibility of the Paramedic and Emergency Medical Technician (EMT)

- A. Paramedics shall be licensed by the State of California and accredited by Los Angeles County.
- B. EMTs shall be certified by the State of California and have successfully completed Los Angeles County Scope of Practice.
- C. Paramedics and EMTs may assess participants and escort them to the first aid station, as appropriate, and per the event's Medical Action Plan. ~~This may include participants without evidence of head trauma or history of recent seizure and whose Glasgow Coma Scale (GCS) is 14 or greater.~~ Following assessment, the participant ~~may shall be transferred~~ referred to the event physician on scene, if applicable. If medical staffing levels do not include a physician, providers will follow Reference No. 808. Participants must be medically appropriate to be transported to the medical aid station that is staffed with a physician. Medically

appropriate patients may include Altered Level of Consciousness (ALOC) without evidence of head trauma or history of recent seizure or active seizure.

- E. Once the event has been declared an MCI, the paramedics should take direction from the MAC for patient destination and treatment per Reference No. 806.1, Procedures Prior to Base Contact.
- VII. Responsibility of the Primary Contracted Physician at the Event, if applicable
- A. Be Board Certified in Emergency Medicine and familiar with the Paramedic and EMT scopes of practice. Additional physicians must be Board Certified or Board Eligible in Emergency Medicine.
 - B. Be familiar with the Los Angeles County prehospital care policies.
 - C. Maintain communication with the jurisdictional incident commander, event coordinator and other medical staff.
 - D. The physician is responsible for the care and disposition for all patients at the designated medical facility.

CROSS REFERENCES:

Prehospital Care Manual:

- Ref. No. 412, **EMT Automated External Defibrillator (AED) Service Provider Program Requirements**
- Ref. No. 519, **Management of Multiple Casualty Incidents**
- Ref. No. 806.1, **Procedures Prior to Base Contact Treatment Protocols**
- Ref. No. 808, **Base Hospital Contact and Transport Criteria**
- Ref. No. 842.1, **Minimum Resource Guidelines for Mass Gatherings and Special Events**
- Ref. No. 842.2, **Mass Gathering and Special Events Medical Action Plan (MAP)**
- Ref. No. 842.3, **Mass Gathering and Special Events Event Roster**
- Ref. No. 842.4, **Mass Gathering and Special Events Patient Care Log**

SUBJECT: **MINIMUM EMS RESOURCE GUIDELINES FOR MASS GATHERINGS AND SPECIAL EVENTS** EMT, PARAMEDIC, HOSPITALS
REFERENCE NO. 842.1

PURPOSE: To establish minimum EMS resource guidelines for Emergency Medical Services (EMS) during mass gatherings, special events, and any Electronic Music Festival events.

AUTHORITY: Health & Safety Code, Section 1797.220
Los Angeles County Code Title 7, Business Licenses, Chapter 7.16,
Ambulances

DEFINITIONS:

Cooling Station: an air-conditioned public facility or shelter where people may go for relief during periods of extreme heat.

First Aid Station: A temporary location with the ability to provide first aid and/or basic medical care.

Medical Station: A temporary location with the ability to provide basic and advanced medical care.

A Medical Station/First Aid Station may be staffed with a:

First Responder: a person who is trained to provide first aid

EMT: to provide first aid level care within the scope of practice of an Emergency Medical Technician (EMT).

EMT-P: to provide advanced first aid level care within the scope of practice of a paramedic.

Nurse: The nurse must hold a current California license. It is preferred that the nurse have experience in emergency medical care and triage of seriously ill or injured patients.

Physician: The physician must hold a current California license and be Board Certified in Emergency Medicine.

Medical Cart: A motorized, drivable mode of transportation (e.g. golf cart or all-terrain vehicle (ATV) that is able to transport a patient in the supine position.

Mobile Cart: A motorized, drivable mode of transportation (e.g. golf cart or ATV) that is able to transport a patient in a sitting position.

EFFECTIVE: XX-XX-XX
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SUPERSEDES:

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APPROVED: _____
Director, EMS Agency Medical Director, EMS Agency

Mobile Teams: Consist of two or more medical personnel (one of whom must be an EMT or higher-level provider) that has appropriate treatment supplies commensurate to the provider's skill level, and has communications capability with at minimum the First Aid Station. Mobile teams are separate from ambulance personnel.

Warming Station: a shelter where people can go to stay warm and dry.

PRINCIPLE:

1. Mass gathering events should have event-specific medical action plans (MAP) that meet minimum guidelines. Some events, such as electronic music festivals, may require additional resources beyond these recommendations. Final approval of a MAP is at the discretion of the jurisdictional provider agency.
2. Staffing modifications may be required by the jurisdictional provider agency based on the type of event.

POLICY:

1. The jurisdictional provider agency may require the event venue/promoter to make free drinking water readily available.
2. Event venue/promoter must provide adequate signage to direct participants to medical/first aid stations, water, and cooling/warming stations.
3. Depending on history and size of an event, the jurisdictional provider agency and/or EMS Agency may require additional medical resources in order to safely provide services at an event.
4. All on site medical personnel shall be accredited/certified/licensed and follow Los Angeles County Prehospital Care Policies and Protocols.
5. All medical equipment and supplies must be equivalent to the level of service being provided.
6. Event medical providers must have radio communication with the jurisdictional provider agency at all times during the event.
7. Mass gatherings, special events, and Electronic Music Festivals have been placed in three categories as identified below. Each of these categories is then broken down by "levels" with the minimum medical staffing requirements specified for each level as follows:

SUBJECT: MINIMUM EMS RESOURCE GUIDELINES EMT, PARAMEDIC, HOSPITALS FOR MASS GATHERINGS AND SPECIAL EVENTS REFERENCE NO. 842.1

Crowd Size (anticipated)	Mass Gathering/ Special Event (no alcohol)	Mass Gathering/ Special Event (alcohol permitted)	Electronic Music Festival
1,000 – 10,000	Level 1	Level 2	Level 5
10,001 – 25,000	Level 2	Level 3	Level 6
25,001 – 35,000	Level 3	Level 4	Level 7
35,001 – 40,000	Level 4	Level 4	Level 8
40,000 – 50,000	Level 4	Level 5	Level 8
50,000 and over	Level 5	Level 6	Level 9

Medical Staffing Levels	First Aid Station/ Medical Station	BLS Ambulance	ALS Ambulance	Mobile Cart	Medical Cart	Mobile Team	Second First Aid Station
Level 1	1 EMT/EMT-P	1					
Level 2	1 EMT/EMT-P	1	1				
Level 3	1 EMT/EMT-P	2	1				
Level 4	2 EMT/EMT-P	2	2				
Level 5	1 MD 1 RN		2	1	1	2	
Level 6	1 MD 2 RN		3	1	2	3	
Level 7	1 MD 2 RN		3	1	2	4	1 RN 1 EMT/P
Level 8	1 MD 3 RN	1	3	2	2	4	1 RN 1 EMT/P
Level 9	2 MD 4 RN	1	4	2	2	5	1 MD 1 RN

8. Event venue/promoter must provide the following outdoor weather contingency requirements:

A. Hot Weather

1. 80 to 89 Degrees

- Free drinking water readily available with signage.
- Canopy shade area (minimum 10' x 20') or other shaded areas provided per 15k attendees.

2. 90 to 94 Degrees

- Free drinking water readily available with signage.
- Canopy shade area (minimum 10' x 20') or other shaded areas provided per 15k attendees.
- Minimum of one shade area to include misters
- Mobile cart added to Levels 3 & 4
- One additional ALS Ambulance or MD for Level 4 events

3. 95 Degrees and Above

- Free drinking water readily available with signage.
- Canopy shade area (minimum 10' x 20') provided per 15k attendees.
- Half of canopy shade areas to include misters (one minimum)/cooling station
- Mobile cart added to Levels 3 & 4
- Second mobile cart added for Levels 5 - 7.
- One additional ALS Ambulance or MD for Level 3 & 4 events.
- MD treatment tent(s) to include portable air conditioning.

B. Cold Weather

1. Rain

- Disposable (aluminum/mylar) blankets suitable for crowd capacity.

2. Below 60 Degrees

- Portable heaters and disposable (aluminum/mylar) blankets suitable for crowd capacity.
- Consider warming stations, if needed.

CROSS REFERENCES:

Ref. No. 842, **Mass Gathering Interface with Emergency Medical Services**

EMS Medical Action Plan (MAP)						
1. Incident Name:						
2. Date Prepared:				3. Operational Period:		
4. Incident Medical Aid Stations						
Triage point	Station location	# of MD's	# of RN's	# of EMT's	# Defibrillators	
First Aid Tent						
5. Number of Mobile Teams			Location of Mobile Teams			
6. Dispatch						
Company name		Address			Phone	
7. Transportation						
Ambulance Provider Name	Address	Phone	# of BLS ambulances		# of ALS ambulances	
			Dedicated ¹	Courtesy ²	Dedicated	Courtesy
8. Hospitals						
Name	Address	Phone	Travel Time	Specialty Care ³		
9. Medical Emergency Procedures⁴						
(CONTINUE ON REVERSE SIDE)						
10. Prepared by: _____						
Contact information: _____ Signature: _____						

¹ Dedicated - Ambulance is at the event for event participants/observers only

² Courtesy - Ambulance is at the event but responds to nearby 9-1-1 system or other calls outside the perimeter of the event

³ Specialty Care - trauma center, pediatric critical care, burn - please list

⁴ Describe the roles of the physician, mobile teams, and medical station personnel as appropriate for emergency medical incidents

