Summary for Gastrointestinal Outbreaks



Protecting and improving the nation's health

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Infectious diseases outbreak pack for festivals

The following guidance is designed to help event organisers plan for and manage an outbreak of key infectious diseases in a festival environment. The management principles outlined will be effective at limiting the spread of viral and bacterial infections.

This document has been produced with reference to PHE's national guidance for individual infectious diseases which can be found at – https://www.gov.uk/topic/health-protection/infectious-diseases



Transmission Rout	e	Person to person by the faecal oral route, from aerosols of projectile vomit and from environmental contamination.
Incubation Period:(length of time from acquiring the infection to developing symptoms)		The incubation period will vary according to the bug/virus causing the illness. For example the incubation period may be short (12 to 48 hours) for norovirus and is usually 2-4 days for E.coli.
Exclusion		Ideally encourage individuals to stay within the medical area, or to isolate themselves in tent until feeling better (usual advice would be for 48 hours after symptoms have stopped)
Recommendations	for action	
Hand Hygiene	eating aHand wPaper tfor dispAlcohol	I gel is not effective against norovirus, but it can be used in addition to
Cleaning and disinfection	 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 at least twice a day (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: All areas of the toilet including rims, seats and handles Wash basins, taps and drinking water taps Door handles and light switches All frequently touched equipment Frequently handled and shared staff items such as radios, telephones and computer equipment, vehicle keys, steering wheels etc. 	
Public spillage incident	 When spillages of vomit or diarrhoea occur: 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 	
Food Safety	working Exclusi • Food T toilets a	andlers who are taken unwell during an outbreak should NOT continue g in order to avoid contamination of the catering areas or food. on from work at least 48 hours after symptoms have stopped. Traders MUST have their own designated area for cleaning equipment, and hand washing facilities. andlers must ensure they are fully compliant with food hygiene ures

	CIEH – Mobile catering guidance - http://www.kfma.org.uk/PDF/Food%20legislation/CIEH Outdoor Mobile Catering Guidance.pdf
Information and Communication	180802-Norovirus HandwashingPDF.p Factsheet.docx df
	 Utilise Health and safety inductions with crew to pass on these messages Include pre-event information to all attendees and traders via tickets and website Use of social media platforms linked to the event to pass on information Utilisation of signage, e.g. LED boards, during event Utilisation of onsite communications with crew e.g. radio messaging timed just before meal time Provision of information for coach companies bringing festival goers to event
Business Continuity:	 Ensure there are safeguards in place to protect areas such as Event Control and Back of House Crew Areas. If possible have 2 separate crew catering areas.

	Sumn	mary for Bacterial Meningitis Case / Outbreak	
Transmission Route:		Highly infectious- only brief contact required for transmission. Transmission via respiratory route, airborne droplet spread and with direct contact with nasal or throat secretions	
Incubation Pe	riod:	7-18 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 usually develops a few days after first symptoms. It can appear as flat red or brown blotches beginning on the face/neck and spreading over the body.	
Recommenda	tions for	action	
Pre-Festival	imp • Me	importance of MMR vaccine prior to attending event. https://www.nhs.uk/conditions/vaccinations/mmr-vaccine/	
During Festival	M P 10 ((() 111		
Post Festival	org	n 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	http	NHS Choices: https://www.gov.uk/government/publications/measles-exposure-information/information-for-individuals-exposed-to-a-case-of-infectious-measles	

Transmission Route:	Person to person through respiratory droplets and direct contact with nose and throat secretions. Close prolonged contact, i.e. sharing a tent at festival, intimate kissing.	
Incubation Period:	2-10 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	 sudden onset of a high fever a severe headache dislike of bright lights (photophobia) vomiting and/or severe diarrhoea or stomach pains painful joints 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. The rash can appear anywhere on the body. It does not fade when pressed under the bottom of a glass (the tumbler test). 	

Recommendations for action

Pre-	 Festival goers and staff should be encouraged to have vaccinations as per UK schedule.
Festival	 Awareness training should be given to all staff regarding signs and symptoms of Meningococcal disease and sepsis.
	 Anyone with suspected bacterial meningitis should be transferred urgently to hospital. Ensure the attending clinician notifies the local Health Protection Team
During Festival	 Complete Festival 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.
	ESQGI.docx
	Staff to follow all infection control measures
Post Festival	 If case is confirmed, then consideration should be given to the use of warn and inform style messages on festival social media and website to alert the wider population of the festival. Consider liaising with local Health Protection team regards a suitable message.
Information	PDF J.
	Meningitis_can_aff ect_anyone_2017.pd

Medical Centre Facilities

Triggering an outbreak, when and how

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 compared with the usual background rate for the place and time where the outbreak has occurred

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.

Things to consider	What	When
Toilet Facilities	Should have separate for staff and festival goers	Throughout Festival
Cleaning of facility	Consider effective handling and disposal of used and soiled items (double bagging for offsite laundering, clinical waste facilities)	Throughout festival but cleaning carried out on a more regular basis during outbreak situation.
	 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) 	
Isolation	 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	Consideration to rotas and availability of extra staff	Additional staff may be required in an outbreak situation /

Faecal pots and forms	Medical centre could consider holding a supply of faecal pots and forms, (usually from onsite EH	If there is increased staff sickness affecting the running of medical centre / If an isolation area has been set up requiring staffing. In an outbreak situation where able to obtain samples to identify organism.
	 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. 	
Monitoring and surveillance	 Having pre-printed/ designed festival questionnaires in medical centre. ESQGI.docx Consider having a large map of site with grid references to enable the quick identification of any sources of infection 	These should be available throughout the event for medical staff to use to inform event management team, EH onsite and PHE.

Title Reporting an outbreak of D&V to Public Health England (PHE) by telephone.

Descripti This card gives you the contact number for PHE and details of the information that PHE will require to help you manage your outbreak.

Who Those members of staff that are responsible for informing PHE of an outbreak i.e. EHO, Event Management team, Medical Centre

<u>When to report</u>: An increase in the number of sickness cases reported (above the normal rate) due to diarrhoea and/or vomiting or single cases of suspected measles, meningitis etc.

Phone: 0344 2253861, option 4 (Thames Valley Health Protection Team, Public Health England)

What PHE will ask for:

- Name and address of the festival, including the postcode
- · Contact person's name and phone number
- Number of attendees at festival.
- 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
 - o Food outlets used
 - o 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.

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 PHE

of an outbreak.

PHE – South East Centre – Thames valley Office	0344 225 3861, option 4.	You will be redirected if calling out of hours
John Radcliffe Hospital	0300 3047777	Lab: 01865 221918
Stoke Mandeville Hospital	01296 315000	Lab: 01296 315309
Royal Berkshire Hospital	0118 322 5111	Lab: 01276 526958
Wexham Park Hospital	01753 633000	Lab: 01753 633467
Milton Keynes University Hospital	01908 660033	Lab:
Frimley Park Hospital	01276 604604	Lab: 01276 526958
Horton General Hospital	0300 304 7777	Lab:
Great Western Hospital	01793 604020	Lab:
Event Management Onsite		
Health and Safety Onsite		
EH office Onsite		
Security Onsite		