

Chapter I of Title 10 (HEALTH) of the Official Compilation of Codes, Rules and Regulations

New York State Sanitary Code PART - 18

PUBLIC FUNCTIONS WITH ATTENDANCE OF OVER 5,000 PEOPLE

Last amended July, 1991

Statutory Authority: Public Health Law Section 225



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Objectives:

- 1) To Provide an overview of NYS Part 18 Public Function Regulations.
 - 2) Review application and Event challenges.
 - 3) Not to bore you.

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Definitions

(a) Public function means any scheduled or advertised event open to the public and likely to attract 5,000 or more people <u>at any one time</u>, except that the term shall not apply to any single day of a planned multi-day series of events at which 5,000 or more people are not likely to attend.



Definitions

(b) Emergency health care facility means a sheltered area or building either naturally or artificially so lighted as will promote the health and safety of patients provided emergency medical care, and containing cot(s) and/or litter(s) and emergency medical equipment and supplies as required by section 18.2 of this Part.



18.4 Emergency Health Care Requirements

(a)

(1) For 5,000 to 15,000 attendees, there shall be <u>one emergency health care</u> <u>facility</u> onsite staffed by a minimum <u>of two emergency medical technicians</u>, <u>one</u> <u>ambulance onsite staffed</u> by at <u>least one emergency medical technician</u>, and the services of a <u>physician available to the site within 15 minutes</u>. Documentation shall be provided showing that local, municipal and public safety officials, including police, fire and local emergency medical services personnel have been advised of the event in writing.



18.4 Emergency Health Care Requirements

(2) For 15,001 to 30,000 attendees, there shall be two emergency health care facilities onsite, each staffed by two emergency medical technicians, one ambulance onsite, staffed by at least one emergency medical technician and the services of a physician available to the site within 15 minutes. Documentation shall be provided showing that local, municipal and public safety officials, including police, fire and local emergency medical services personnel have been advised of the event in writing.



18.4 EHU requirements

(3) For **30,001** to **50,000** attendees, there shall be <u>two emergency</u> <u>health care facilities</u> onsite, each staffed by <u>two emergency medical</u> <u>technicians</u>, <u>two ambulances onsite</u>, each staffed by at least one emergency medical technician, and a physician onsite. Documentation shall be provided showing that local, municipal and public safety officials, including police, fire and local emergency medical services personnel have been advised of the event in writing.



18.4 EHU requirements

(4) For <u>Over 50,000</u> attendees, there shall be <u>two emergency health care</u> <u>facilities onsite</u>, each staffed by <u>two emergency medical technicians</u>, <u>three</u> <u>ambulances onsite</u>, each staffed by at least one emergency medical technician, a physician onsite and a written statement shall be available describing the impact the event will have on public safety and emergency medical services in the area, which must include comments by local police, fire, emergency medical services personnel and other public safety officials who have jurisdiction to provide services.



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Ambulance can be staffed Basic Life Support or

Advanced Life Support (at least 1 EMT)- We go above

and require 2 EMT's on the ambulance. ALS (Advanced NEW YORK STATE OF OPPORTUNITY. Department of Health

Emergency Health Care Unit











Emergency Health Unit Equipment required

Any emergency health care facility at a public function must contain at minimum the following equipment:

- (a) Patient transfer equipment:
 - (1) A device equipped with two two-inch-wide web straps to secure a patient which will enable emergency medical service personnel to move the patient from the incident site to the emergency health care facility.
 - (2) In an auditorium, stadium or similar physical setting with seats in steep tiers, a stair chair-type stretcher.
 - (2) Oropharyngeal airways, in adult, pediatric and infant sizes.
 - (3) Two commercially prepared bite sticks.
 - (4) A portable oxygen system with one medical "D" size cylinder including a regulator consisting of a yoke, pressure gauge, flow meter and a spare cylinder including a regulator consisting of a yoke, pressure gauge, flow meter and a spare of Health

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- (5) Four disposable oxygen masks and four nasal cannulae.
- (6) A portable suction device capable of providing an adjustable flow of over 30 liters/minute at the end of the delivery tube and a vacuum of over 300mm mercury when the tube is clamped, including wide bore tubing, a plastic, rigid pharyngeal suction tip and various size flexible suction catheters.
- (7) One pocket face mask with oxygen inlet.
- (8) Miscellaneous items for oral use which shall be kept clean and be individually wrapped.



- (b) Airway, ventilation, oxygen and suction equipment:
 - (1) Manually operated, self-refilling bagvalve-mask ventilation device with a high concentration oxygen enrichment or portable manually triggered oxygenpowered resuscitation device, either of which shall include adult and pediatricsize face masks.



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- (c) Immobilization equipment:
 - (1) One full-size backboard (72 inches long) with a minimum of two-inch by nine-foot web straps for securing the patient to the device.
 - (2) One padded board splint, 54 inches by 3 inches by 3/8 inch thick with a minimum of one-half inch foam padding on one side covered with a nonporous material.
 - (3) Two padded boards, 36 inches by 3 inches by 3/8 inch thick (cardboard, other malleable or inflatable splints are acceptable substitutes) with a minimum of one-half inch foam padding on one side covered with a nonporous material.



- (4) Two padded boards, 15 inches by 3 inches by 3/8 inch thick (padded wire, cardboard or inflatable splints are acceptable substitutes) with a minimum of one-half inch foam padding on one side covered with a nonporous material.
- (5) A head immobilization device (commercially manufactured device), blanket collar, two five-pound sandbags or other device providing equivalent immobilization of the head.
- (6) One large, one medium and one small extrication collar.



Emergency Health Unit Equipment required

•(d) Wound dressings:

- (1) Twenty-four sterile gauze pads, four inches by four inches.
- (2) Three rolls adhesive tape in assorted sizes.
- (3) Six rolls conforming gauze bandages in assorted sizes, but including three-inch.
- (4) Two universal dressings approximately 10 inches by 30 inches.
- (5) Ten large sterile dressings, five inches by eight inches minimum.



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- D (6) One pair bandage shears.
 - (7) Six triangular bandages.
 - (8) Two liquid glucose or equivalent.
 - (9) Sterile normal saline in plastic containers (1,000 cc minimum).
 - (10) Two occlusive dressings.
 - (11) Two sterile burn sheets.



- (e) Miscellaneous equipment:
 - (1) Spare pillow, four sheets, two pillow cases, one blanket, in addition to linen and pillow on cot(s) or litter(s).
 - (2) Six cloth hand towels.
 - (3) One box facial tissues.
 - (4) Two emesis containers.
 - (5) Portable blood pressure cuff and stethoscope.
 - (6) One male urinal and one bedpan.



- (7) Potable water, minimum five gallons.
- (8) Sterile O.B. kit.
- (9) Carrying case with compartments for essential emergency care equipment (jump kit).
- (10) One flashlight in operable condition.
- (11) One battery lantern in operable condition.
- (12) Communication equipment--two-way radio or telephone between the emergency health care facility and an outside medical facility(s).
- (13) Six chemical ice packs.













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EHU requirements

- (f) Other miscellaneous requirements:
 - (1) an ambulance used to meet the requirements of an emergency health care facility must be certified and equipped pursuant to sections 800.21, 800.22, 800.23 and 800.24 of this Title and must remain onsite at all times during the event except when transporting patients;
 - (2) an emergency health care facility shall place a placard or sign of such size and design at such location as will assure notice to the public of the emergency health care facility's identity as such; and
 - (3) an emergency health care facility shall be maintained at such temperature as will not endanger its ability to care for or will not further compromise the condition of either hypothermic or hyperthermic patients requiring emergency care.

http://www.health.ny.gov/professionals/ems/part18.htm

https://www.health.ny.gov/regulations/nycrr/title 10/par t 7/subpart 7-4.htm#s741

https://training.fema.gov/is/courseoverview.aspx?code=is
-15.b

https://training.fema.gov/emiweb/downloads/is15aspecia leventsplanning-jamanual.pdf

https://www.ruraltraining.org/media/coursematerial/MGT 335 Course Information.pdf



Major Concerns for Event Planners

Weather- Heat and Humidity rapid dehydration of those that do not hydrate. Or hypothermia on the opposite side

Associational as

Age of attendees

Location--- { Crowd CRAZE, Crushing, Stamped, RIOT, Panic}

Alcohol and Drugs

COMMUNICATION FAILURES

Timing of your event

Potential for Violence- Security- Active Shooter, Suicide Bombers.

Traffic flow and access/egress- A good traffic plan can make or break an event.

Crowd size

Proper Planning and getting all the proper stakeholders involved in the process.

Threat and Hazard Identification and Risk Assessment (THIRA).

http://www.jems.com/articles/2016/05/ems-response-to-indian-fireworks-tragedy-was-hindered-by-lax-standards-enforcement.html

https://www.youtube.com/watch?v=YrzjM6MPiBo

https://www.youtube.com/watch?v=eu4DlwE0Bu8

https://www.youtube.com/watch?v=jeUaWAuVs94



Things gone wrong

\$50 million settlement reached in Indiana State Fair stage collapse

Four people died immediately, and more than 45 people more were injured.

The death toll rose in the days after the event. Events at the Indiana State Fair were halted after the incident, and Indiana Gov. Mitch Daniels has called the incident a fluke accident. Seven deaths total.









Tourniquets

264 Injured3 Deaths



Application and Forms:

http://www.health.ny.gov/professionals/ems/

http://www.health.ny.gov/professionals/ems/part18.htm

http://www.health.ny.gov/forms/doh-44.pdf

http://www.health.ny.gov/forms/doh-2225k.pdf

http://www.health.ny.gov/forms/doh-2332.pdf

http://www.health.ny.gov/forms/doh-2342.pdf





Post Event Reporting:

http://www.health.ny.gov/forms/doh-2332.pdf

http://www.health.ny.gov/forms/doh-2342.pdf

References:

http://www.ncbi.nlm.nih.gov/pmc/articles/PMC3271949/

https://sis.nlm.nih.gov/enviro/massgatherings.html

http://training.fema.gov/emiweb/downloads/is15aspecialevent splanning-jamanual.pdf

http://www.kentish.tas.gov.au/webdata/resources/files/Emerge ncy Management Manual for Mass Gatherings.pdf









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