

between the plans prepared by the football match organizing committee, police, local government, and nearest referral health facilities. This was identified by the absence of a medical director at the referral health facility, the absence of in and out access for the medical team to the mass gathering event location, and the absence of crowd management at the site of the incident resulted in 720 injured and 135 of them dead. This made the incident the second worst football stampede incident in history.

Conclusion: Specific mass gathering regulation specific to football matches is required as Indonesia has a risk of hooliganism in some areas. This will be mandatory for the organizing committee to comply with and involve relevant stakeholders, especially the local health sector.

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Managing Hajj Mass Gathering Throughout the Pandemic

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Introduction: The rise of the COVID-19 pandemic caused significant concerns due to the risk of transmission in such mass gatherings. Too many variables for such a critical challenge made it more of a complex situation, with an enormous negative impact on either decision. In this paper, we aimed to summarize the experience of Saudi Arabia in hosting and managing Hajj throughout the pandemic for three seasons, the public health strategies to control the COVID-19 transmission during Hajj, and the policies and regulations that were implemented for the safe return of Hajj.

Method: This is a summary of our experience in managing Hajj seasons throughout the COVID-19 pandemic for the period 2020, 2021, and 2022. A description of the factors, models, and tools used to assess the situation for each year, and the bundles of measures followed to mitigate the events aiming to hold a "Safe Hajj".

Results: 2020 was a unique year, with the pandemic at its height with no vaccination available. So, the decision was to hold a symbolic strict Hajj of only 1,000 pilgrims residing within Saudi Arabia. In 2021, as the World was easing restrictions and distributing vaccines, around 60,000 internal pilgrims got to perform Hajj, and 2022 hosted one million international pilgrims. That is still 40% of 2019 Hajj with 2.5 million due to considerations to avoid usual overcrowding and mandating COVID-19 full vaccination status.

Conclusion: Our experience with the COVID-19 pandemic over the past three years has informed us that huge MGs can be conducted safely during the pandemic if adequate measures were implemented. That would include an accurate and reliable risk assessment to inform policymakers about the most effective strategies.

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The UK Health Security Agency (UKHSA) Planning, Preparation, and Response to the Birmingham 2022 Commonwealth Games—Learning for Future Mass Gatherings, Including Multi-sport Events

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Introduction: The Birmingham 2022 Commonwealth Games (CWG) met the World Health Organization (WHO) definition of a mass gathering: events attended by sufficient people to strain the planning and response resources of a community, state or nation'. It was a key opportunity for the UK in terms of tourism and economy, but a major challenge in terms of the potential for adverse events e.g. infectious disease outbreaks, terrorist attacks. This increased scrutiny and threatened reputational risk. For UKHSA, as a new organization amidst a rapidly changing public health landscape—continued COVID-19 pandemic and increases in Monkeypox, this was a very public test.

Method: In 2021, a small team was established to accelerate preparation including:

- assurance structures
- advice to the Organizing Committee and Government departments
- advice on COVID-19 including testing policy
- staff/stakeholder preparation through exercising/training
- increased staff numbers and skill mix able to adapt
- budget
- operational response structure
- plans in place and tested for a health protection response in the event of an incident
- other mass gatherings reviewed for transferable learning enhanced surveillance systems

Results: Daily epidemiology reporting provided reassurance that there were no significant public health issues requiring escalation. Enhanced surveillance provided reassurance to the community that there were no population ill effects linked to the CWG. Overall, COVID-19 positivity was low. No outbreaks were detected linked to the CWG.

Conclusion: The UKHSA successfully identified, planned and prepared for and mitigated the risks of a mass gathering of 1.5 million people. Early engagement, support, advice and cross-government collaboration has been regarded as exemplary with surveillance data indicating no outbreaks linked to the Games. Despite the breadth of risks visitors were able to attend the event in contrast to the restrictions placed at the Tokyo Olympics. This contributes to the worldwide body of knowledge for planning and delivering mass gatherings – sporting or otherwise.

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Review of Canadian Legislation on Mass Gathering Medical Response

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