COUNTY OF LOS ANGELES
Public Health

Surveying for Diseases at Mass Gatherings: FIFA World Cup Response

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Agenda

- Overview of Core Public Health Responsibilities for Mass Gathering Events
  - Environmental Health
  - Disease Surveillance and Control
  - Emergency Management and Bioterrorism Preparedness
  - Communications and Collaboration
- World Cup Recap

FIFA World Cup 2026

- The 2026 FIFA World Cup was hosted by 11 cities in the United States, 2 cities in Canada, and 3 cities in Mexico:
  - **United States:** Atlanta, Boston, Dallas, Houston, Kansas City, Los Angeles, Miami, New York/New Jersey, Philadelphia, San Francisco/Bay Area, and Seattle
  - **Canada**: Toronto and Vancouver
  - **Mexico:** Guadalajara, Mexico City, and Monterrey
- Tournament dates June 11-July 19, 2026

FIFA World Cup 2026

- 8 games at SoFi Stadium (re-branded Los Angeles Stadium):
  - June 12: USA vs. Paraguay (1st match in US)
  - June 15: Iran vs. New Zealand
  - June 18: Switzerland vs. Bosnia & Herzegovina
  - June 21: Belgium vs. Iran
  - June 25: USA vs. Turkey
  - June 28: S Africa vs. Canada
  - July 2: Spain vs. Austria
  - July 10: Spain vs. Belgium

Other FIFA Activities

- Fan Festival
  - LA Coliseum: June 10 – 14, 2026
- Fan Zones
  - Multiple sites across LA County
- City Parks
- Street gatherings
- Bar, restaurants

Core Public Health Responsibilities during FIFA World Cup Events

- Environmental Health
- Disease Surveillance and Control
- Emergency Management and WMD Preparedness

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Environmental Health

Food Safety and Inspections

- Permitting and inspections of all planned community events (FIFA Sponsored and Others)
  - Includes mobile food facilities and temporary food facilities
- Proactive inspections of all permanent venues (SoFi/LA Stadium and LA Memorial Coliseum)

Outbreak Response

- Assisting ACDC with environmental investigations as warranted (e.g., food, water)

Hotel Inspections

- Conducting proactive inspections prior to the event

EH Strike Team to support BioWatch activities

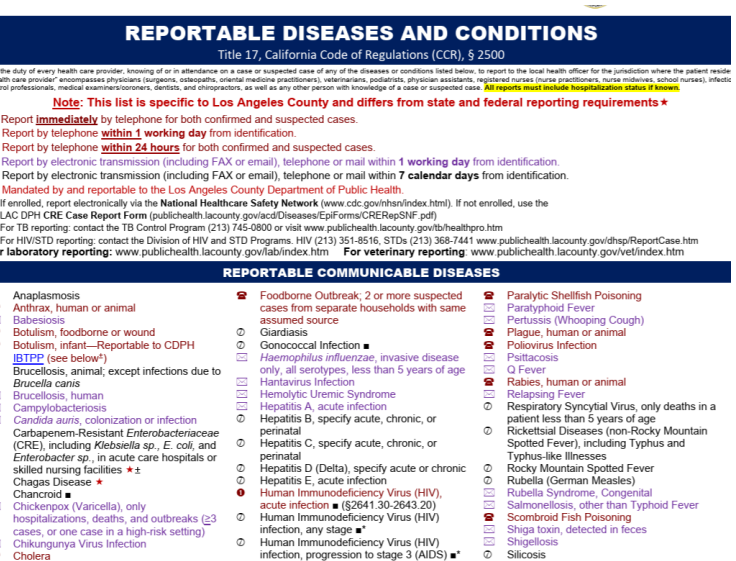
Disease Surveillance and Control

Public Health Lab

Acute Communicable Disease Control Program

Community Field Services

ReportableDiseaseList.pdf



REPORTABLE DISEASES AND CONDITIONS

Title 17, California Code of Regulations (CCR), § 2500

the duty of every health care provider, knowing of or in attendance on a case or suspected case of any of the diseases or conditions listed below, to report to the local health officer for the jurisdiction where the patient resides. alth care provider" encompasses physicians (surgeons, osteopaths, oriental medicine practitioners), veterinarians, podiatrists, physician assistants, registered nurses (nurse practitioners, nurse midwives, school nurses), infectio rol professionals, medical examiners/coroners, dentists, and chiropractors, as well as any other person with knowledge of a case or suspected case. **All reports must include hospitalization status if known.**

Note: This list is specific to Los Angeles County and differs from state and federal reporting requirements ★

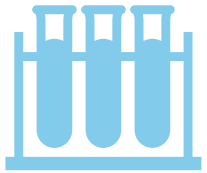
Report **immediately** by telephone for both confirmed and suspected cases.
Report by telephone **within 1 working day** from identification.
Report by telephone **within 24 hours** for both confirmed and suspected cases.
Report by electronic transmission (including FAX or email), telephone or mail within **1 working day** from identification.
Report by electronic transmission (including FAX or email), telephone or mail within **7 calendar days** from identification.
Mandated by and reportable to the Los Angeles County Department of Public Health.
If enrolled, report electronically via the **National Healthcare Safety Network** (www.cdc.gov/nhsn/index.html). If not enrolled, use the LAC DPH **CRE Case Report Form** (publichealth.lacounty.gov/acd/Diseases/EpiForms/CRERepSNF.pdf)
For TB reporting: contact the TB Control Program (213) 745-0800 or visit www.publichealth.lacounty.gov/tb/healthpro.htm
For HIV/STD reporting: contact the Division of HIV and STD Programs. HIV (213) 351-8516, STDs (213) 368-7441 www.publichealth.lacounty.gov/dhsp/ReportCase.htm
r laboratory reporting: www.publichealth.lacounty.gov/lab/index.htm **For veterinary reporting**: www.publichealth.lacounty.gov/vet/index.htm

REPORTABLE COMMUNICABLE DISEASES

Anaplasmosis
Anthrax, human or animal
Babesiosis
Botulism, foodborne or wound
Botulism, infant—Reportable to CDPH
IBTPP (see below[4])
Brucellosis, animal; except infections due to *Brucella canis*
Brucellosis, human
Campylobacteriosis
Candida auris, colonization or infection
Carbapenem-Resistant *Enterobacteriaceae* (CRE), including *Klebsiella sp., E. coli,* and *Enterobacter sp.*, in acute care hospitals or skilled nursing facilities ★±
Chagas Disease ★
Chancroid ■
Chickenpox (Varicella), only hospitalizations, deaths, and outbreaks (≥3 cases, or one case in a high-risk setting)
Chikungunya Virus Infection
Cholera
Foodborne Outbreak; 2 or more suspected cases from separate households with same assumed source
Giardiasis
Gonococcal Infection ■
Haemophilus influenzae, invasive disease only, all serotypes, less than 5 years of age
Hantavirus Infection
Hemolytic Uremic Syndrome
Hepatitis A, acute infection
Hepatitis B, specify acute, chronic, or perinatal
Hepatitis C, specify acute, chronic, or perinatal
Hepatitis D (Delta), specify acute or chronic
Hepatitis E, acute infection
Human Immunodeficiency Virus (HIV), acute infection ■ (§2641.30-2643.20)
Human Immunodeficiency Virus (HIV) infection, any stage ■*
Human Immunodeficiency Virus (HIV) infection, progression to stage 3 (AIDS) ■*
Paralytic Shellfish Poisoning
Paratyphoid Fever
Pertussis (Whooping Cough)
Plague, human or animal
Poliovirus Infection
Psittacosis
Q Fever
Rabies, human or animal
Relapsing Fever
Respiratory Syncytial Virus, only deaths in a patient less than 5 years of age
Rickettsial Diseases (non-Rocky Mountain Spotted Fever), including Typhus and Typhus-like Illnesses
Rocky Mountain Spotted Fever
Rubella (German Measles)
Rubella Syndrome, Congenital
Salmonellosis, other than Typhoid Fever
Scombroid Fish Poisoning
Shiga toxin, detected in feces
Shigellosis
Silicosis

Disease Surveillance

- Title 17 mandated reporting
- Detect unusual clusters/cases
- Wastewater surveillance
- Syndromic surveillance
- Internal program monitoring dashboard



Communicable Disease Testing

- Support testing as needed
- Genomic surveillance
- Conduct Environmental Testing if needed

Medical Liaison to Healthcare Community

- Communicate important updates via **LAHAN**
- Disseminate information through Infection Preventionists and community presentations

Disease/Outbreak Management

- Case interviews
- Contact tracing
- Collaborations with EH
- Provide education, consultation, and technical assistance to internal and external stakeholders

Field work

- Perform case/contact interviews
- Provide education and community outreach to prevent further disease spread

Emergency Management

DPH Departmental Operations Center DOC – EPRD supports emergency management activation

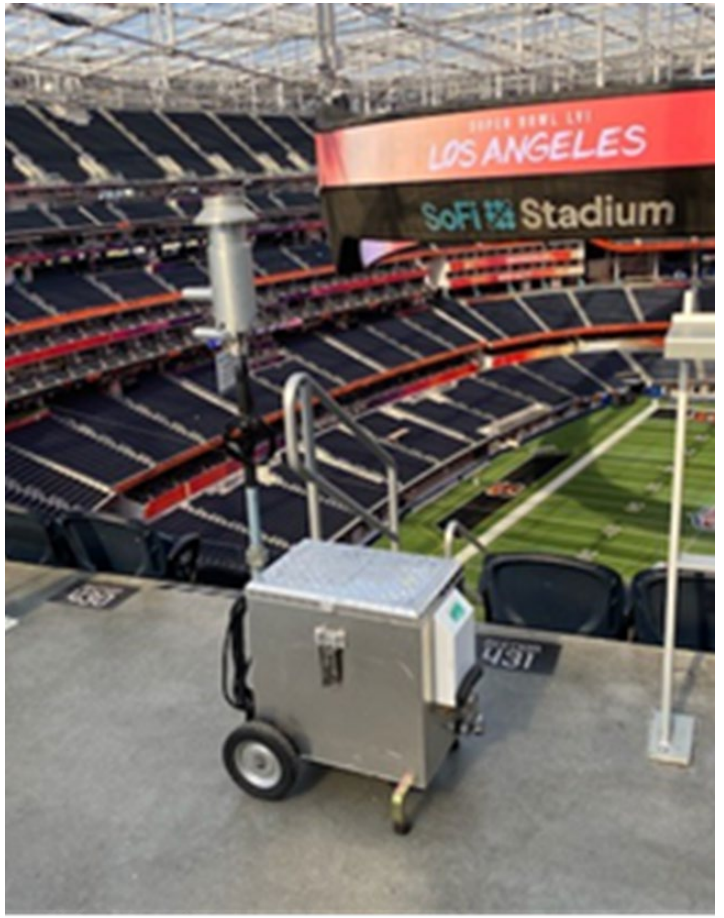
Emergency Operations Centers – EPRD sends staff to represent agency

Command Posts- Technical Advisory Group (TAG) personnel provides BT/WMD support to CP Operations.

Emergency Management

WMD Preparedness

- **BioWatch**- DPH Technical Advisory Group (TAG) conducts BioWatch operations at SoFi Stadium, LA Coliseum, and most of the Fan Zones
- **WMD Incident Response Team**- Emergency Ops team is strategically staged with FBI, LAPD, Sheriff, and Fire Hazmat partners (JHAT) to respond to white powder letters, suspicious substances, and other WMD threats
- **FBI Collaboration**- DPH collaborates with the FBI to conduct any bioterrorism or WMD investigations
- **Joint Regional Intelligence Center (JRIC)** - The TAG is linked with the JRIC for continuous flow of threat intelligence information



Communications

Methods of Communication:

- Dedicated Public Health webpage with event-related health guidance
- Social media messaging and partner amplification
- Multilingual one-page guidance materials and flyers
- Posters and materials for hospitals, vendors, and community partners
- Messaging at transportation hubs, airports, and high-traffic gathering locations

Communications

Key Audiences

- Los Angeles County residents attending games and fan events

- Event attendees at stadiums and fan activation sites

- Workers and vendors supporting events

- Travelers visiting Los Angeles County

- Healthcare providers and public health partners for disease surveillance communications

Coordination Approach

- County will coordinate through a Joint Information Center (JIC) for “One Voice” Messaging

- Collaboration across Public Health programs

- Coordination with regional partners such as Metro, airports, local jurisdictions, and event organizers

- Alignment with messaging from city and county agencies supporting the event

- Event webpage will serve as a central hub for health guidance

Communications

Messaging Content

- **Hydration & Heat Safety**
  Stay hydrated before, during, and after events; recognize signs of heat exhaustion and heat stroke.
- **Communicable Disease Prevention**
  Handwashing, staying home when sick, vaccination awareness, and travel-related disease risks.
  Priority conditions include norovirus, foodborne illness, Shigella, STIs, and measles.
- **Responsible Celebrations & Safety**
  Party responsibly and peacefully, avoid impaired driving, and stay aware of pedestrian safety in crowded areas.
- **Food Safety**
  Encourage residents and visitors to choose permitted vendors and look for the County's food safety grading system.

Lessons Learned From the World Cup

Overall Impression

- FIFA World Cup Games in LA went very smoothly
- Main public health concerns
  - Heat
  - Air quality
- Staffing challenges with pulling of staff to other emergencies
  - Los Palos Fire
  - East LA Oil Spill
  - Sandy Fire in Ventura
  - Santa Susana Fire

Audience Questions

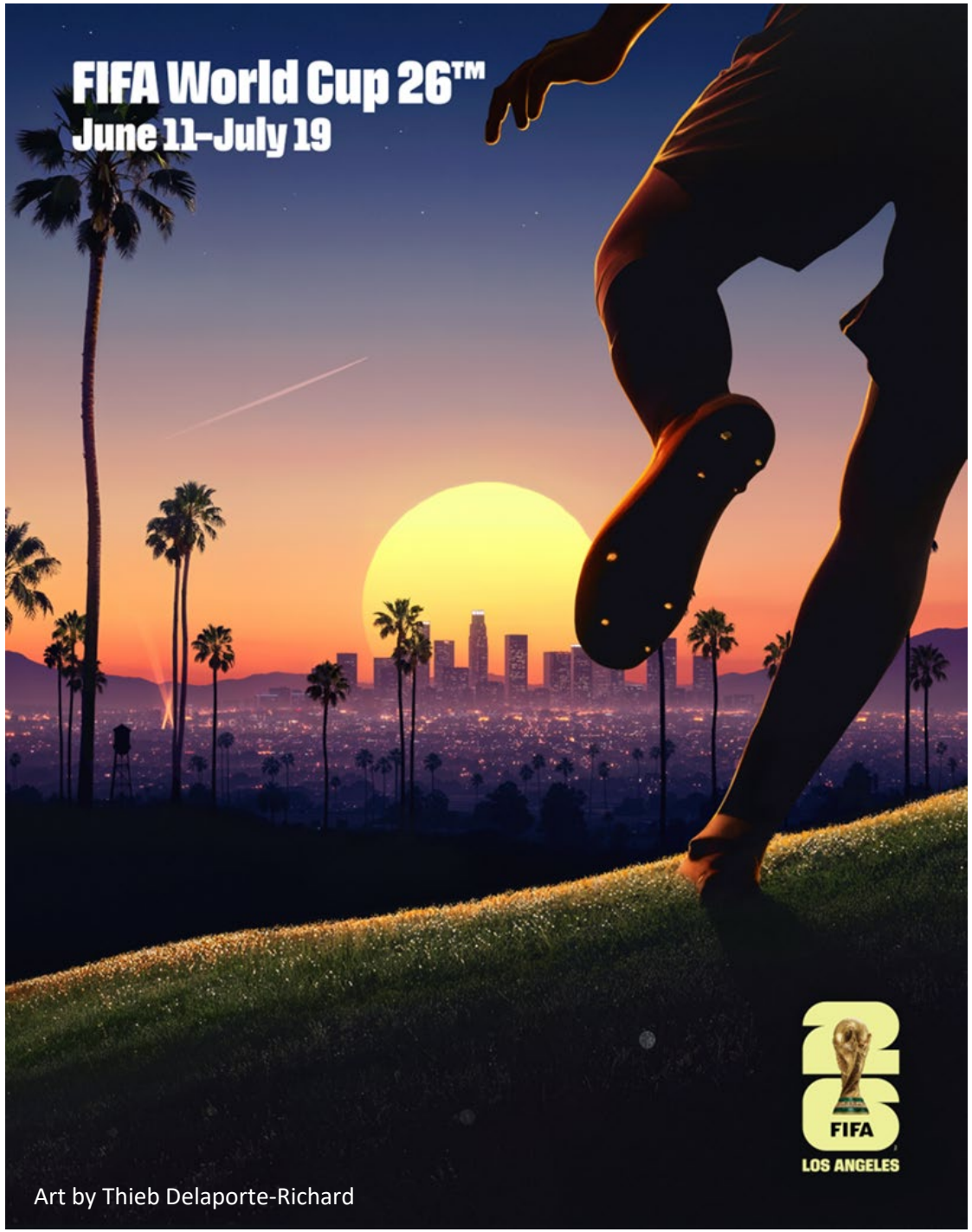
Question 1

- ***Having experienced the World Cup in LA, what are things that you would like to see improved or changed for future mass gatherings such as the Olympics?***

Question 2

- ***What would be the most helpful public health information for your audience/stakeholders in the future?***

Thank you!



Art by Thieb Delaporte-Richard