

Bed Bug Summit

Friday, March 11, 2011

Sponsored by:

Commissioner Deborah Kafoury, Multnomah County
Commissioner Nick Fish, City of Portland
Housing Authority of Portland
Multnomah County Health Department



Portland
Housing
Bureau



About this Event

Why a Bedbug Summit?

On March 11, 2011 the Office of Multnomah County Commissioner Deborah Kafoury, the Office of City of Portland Commissioner Nick Fish, the Housing Authority of Portland and the Multnomah County Health Department's Environmental Health Services co-sponsored a Bedbug Summit.

The Bedbug Summit was a response to the emerging issue of bedbugs in our community, and the increasing impact of bedbugs in the region. In 2007, Multnomah County began to see the emergence of bed bugs in a variety of settings such as transitional housing centers, shelters, and hotels. As a result, there has been an increase in identification of bed bugs through surveillance and inspections, management of the problem by pest control operators and establishing various protocols and policies for field staff, and other such efforts to try to prevent a further spread of this issue. For example, Multnomah County Aging and Disability staff has expressed concern about the impacts on the vulnerable populations that they work with.

Though bedbugs are not a vector - they do not transmit disease to humans - public health has been the default central point for information sharing and community response. Multnomah County Health Department staff have been impacted by bedbugs and have developed protocols to educate and protect field staff. We started by creating best practices with community partners, then coordinating a committee to identify key concerns, issues and solutions. Our housing partners have spent hundreds of thousands of dollars dealing with bedbug infestations in units, hotels and motels are challenged to respond, train staff, and hire pest control operators and see bedbugs as a potential risk to both our hospitality industry and tourism in the state. As we began to tackle this issue, it became apparent that we needed to convene stakeholders that are heavily impacted by this problem and discuss the biggest obstacle – no central authority. Bedbug awareness, education, and prevention require focused resources and inter-jurisdictional cooperation and collaboration to have a meaningful impact on the community. The Bedbug Summit is this region's first step towards a coordinated, preventative response.

Who was there?

The Summit convened 70 stakeholders from the Housing, Lodging, Schools and Childcare, Shelters/Transitional Housing, Public Spaces, Health, Pest Control, Academia, and Government sectors. Participants were invited who had both expertise and decision-making authority within their organization.

Process and Agenda

Participants included representatives from the various sectors. A pre- and post summit survey was sent to participants, and evaluated whether the desired outcomes were met. The desired outcomes are: 1) understanding of the scope of the problem; 2) understanding of current practice; 3) understanding the challenges and barriers to control; 4) identification of resources and policy needed and 4) clearly defined roles and responsibilities.

The day was broken up into a morning session with small group discussion, facilitated by both Health Department staff and staff from community organizations, and an afternoon Integration Team session which included select participants who had specific authority to make commitments on behalf of their organization or agency. (See agenda: appendix A)

Agenda Components

Briefing: Briefings were conducted by experts in the field and those with experience responding to bedbugs, and included representatives from the Health Department: Dr Gary Oxman, who discussed the public health implications; Lila Wickham, who outlined the necessity of the Summit to bring together the right people for a coordinated response; Ben Duncan, who gave a national perspective recognizing other states' efforts to combat bedbugs; and Chris Wirth, who discussed Integrated Pest Management. Margaret Mahoney from REACH Community Development Corporation and Kari Brenk from New Avenues for Youth told their organizational stories about the fiscal impacts and challenges for non-profit organizations. Kara Thallon from Oregon Restaurant and Lodging Association discussed the implications on the industries she represents and the complexities that are involved with bedbug control and eradication.

Sector Table Top Session: The sector table top sessions, broken into six groups (two housing, lodging, schools and childcare, shelters and transitional housing, public spaces) were asked to answer seven questions: (Discussion Notes and Response Matrix: see Appendix B and C)

- What is the scope of the potential risk to our sector?
- What are the challenges and barriers to control?
- What can our sector step up and do? What actions can we take? What resources can we contribute?
- What do we need but can't accomplish alone? What functions need to be done centrally?
- Where might those functions be housed?
- What is our timeline for implementing our sector's actions?
- How would we push this forward / who in our sector would have a role/responsibility?

Integration Team Session: This session brought together participants in a smaller setting to specifically identify roles and responsibilities for policies and actions that were identified in the Sector Table Top Session. Participants represented experts and leadership from the various sectors and City and County leadership. Participants identified major themes that

arose in the morning, and discussed which agencies would be responsible for creating the initial steps towards a coordinated and regional response to bedbugs.

Major Themes

Three primary themes developed from the Summit and were consistently highlighted by all the various participants and sectors.

1. Communication and Outreach
2. Education and Training
3. Surveillance and Regulation

Participants also identified areas of work that will need to have focused attention as a regional strategy is implemented. These include: policies and best practices; planning and sequencing, (who's responsible, for what, when?), waste stream management, cost management, and bedbug problem identification.

Public Health was identified as the best positioned to house the general functions of a bed bug prevention strategy, and the Integration Team selected a Coalition Workgroup model with Multnomah County Health Department taking the leadership role and bringing together a Steering Committee to lead the Workgroup. Within this model, the State has a leadership role in disseminating the work statewide, and key stakeholders will be convened for implementing a work-plan and contributing resources for delivery on priority needs. There is identified need to share costs linked to both FTE allocation and data management.

Next Steps

The Summit Integration Team identified how we will start addressing the emerging bed bug issue. Multnomah County Environmental Health will convene a steering committee to initiate the effort. Membership on this committee will include representatives from the following sectors: County government, State government, Housing, Lodging, and a Pest Management Operator from a regional Pest Management Organization. This group will be small enough to be workable and will be responsible for establishing a Workgroup charter and membership drawing from the stakeholders involved in the Summit. This working group will be responsible for outcomes including: managed/decreased bed bugs and bed bug complaints, stable and effective bed bug management, consistent information based on best available science, and include best practices for both private and public sectors, grant proposals, strategic dissemination of information, and for identifying or creating a certification for Oregon Pest Control Providers.

Representatives from Public Health and Housing will be participating in briefings for Portland City Council and Multnomah County Board of Commissioners.

**To visit Multnomah County Health Department
Bed Bugs information page:
<http://web.multco.us/health/bed-bugs>**

APPENDIX A: Agenda

Purpose

To mitigate the risk of a bedbug epidemic through a proactive approach

Desired Outcomes

- An understanding of the scope of the problem.
- An overview of current practice.
- An understanding of the challenges and barriers to control.
- Identification of resources and policy needed.
- Identification of roles and responsibilities.

SUMMIT AGENDA

- 8:30** **Welcome:** Commissioner Deborah Kafoury, Commissioner Nick Fish, Steve Rudman-HAP Director
Purpose overview
Agenda and process overview
- 9:00** **Briefing**
- Desired outcomes of the day (Lila Wickham Environmental Health Director)
 - Bedbugs and Public Health (Gary Oxman, Health Officer)
 - Background (Ben Duncan Policy Analyst)
 - Housing Asset Management (Margaret Mahoney Director of Property, REACH CDC)
 - OR Restaurant and Lodging Association (Kara Thallon Director of Public Affairs)
 - Shelters (Kari Brenk New Avenues For Youth)
 - Integrated Pest Management (Chris Wirth, Vector Control Manager)
- Q&A
Table-Top Session Information
- 10:20** **Break**
- 10:35** **Sector Table-Top Sessions**
(Sectors include Housing, Lodging, Schools and Childcare, Shelters/Transitional Housing, Public Spaces (Health/Pest Control/Academia/Government will be populated throughout sectors))
- *What is the scope of the potential risk to our sector?*
 - *What are the challenges and barriers to control?*
 - *What can our sector step up and do? What actions can we take? What resources can we contribute?*
 - *What do we need but can't accomplish alone? What functions need to be done centrally?*
 - *Where might those functions be housed?*
 - *What is our timeline for implementing our sector's actions?*
 - *How would we push this forward / who in our sector would have a role/responsibility?*
- 12:00** **Report-Out**
- 12:25** **Next Steps**
- 12:30** **Box Lunch (Eat together or take to-go)**
- 1:00** **Integration Team Session**
- 4:00** **Integration Team Session Closing**

Appendix B: Sector Notes

Shelters and Transitional Housing

What are the potential risks to your sector?

- Cost.
- Having to close in order to address infestations.
- Takes time and money from organizational mission and core functions.
- Cross-contamination between shelters
- Staff becomes overwhelmed, apathetic, “give-up”. Staff burn-out.
- Damaged public perception. Stigma and belief it is a “homeless” problem.
- Difficulty recruiting shelter volunteers.

What are the challenges and barriers to addressing Bed Bugs?

- Education and identification.
- Inter-shelter movement of infestations.
- Lack of adequate laundry facilities.
- Lack of guest cooperation and follow-up.
- Cost of response and treatment.
- Lack of communication between providers/shelters.
- Fearful of losing community partner support.

What are actions and resources this sector could provide? Who would be the lead?

Timeline	Lead	Sector-Contributed Actions and Resources
<ul style="list-style-type: none"> • 3 months • Immediate • 3 months • Ongoing • Ongoing 	<ul style="list-style-type: none"> • Shelter Workgroup • Each Shelter • Shelter Workgroup • Individual shelters • Individual shelters 	<ul style="list-style-type: none"> • Create/implement consistent policies. • Identify an “IPM person” for each organization. • Build relationships with shelters not participating. • Perform comprehensive shelter survey. • Provide outreach and education to other shelters.

What functions need to be done centrally? Who would be the lead?

Lead	Centralized Needs
<ul style="list-style-type: none"> • MCHD, CoP • MCHD, State • Metro • Workgroup w/MCHD as Lead • State 	<ul style="list-style-type: none"> • Education and Awareness, public information campaign • Clearinghouse of information on prevention and treatment and service providers • Information on inspecting used furniture, discarding infested furniture • Example policies on prevention, control and enforcement • Best practices guide

Housing Providers (1)

What are the potential risks to your sector?

- Costs.
- Public / Tenant fear.
- Risk management cost leads to losing control of idea that bedbugs are a “community” problem.
- Regulation, lose best practices & innovative ideas if response is legislated.
- Blame, litigation disputes between tenants, landlord, property management.
- Lost revenue due to vacancies.
- Inappropriate use of pesticides.
- Disinvestment in low-income communities and housing.

What are the challenges and barriers to addressing Bed Bugs?

- Complexity.
- Costs of prevention and treatment, no resources.
- Transient nature of market, customers, tenants.
- Tenants acquiring used/infested furniture. Fear of retaliation.
- Stigma and under or non-reporting.
- Difficulty communicating with diverse community, who often experience other hardships/conditions.
- Lack of community knowledge regarding seriousness or bedbugs.
- Medical providers don’t know signs and symptoms.
- Tenants often conditioned to tolerate stressors.

What are actions and resources this sector could provide? Who would be the lead?

Timeline	Lead	Sector-Contributed Actions and Resources
<ul style="list-style-type: none"> • 2 years • Immediate / Ongoing • Immediately • Immediately 	<ul style="list-style-type: none"> • Landlord/tenant coalition • Housing and PCOs • Housing providers • Housing providers 	<ul style="list-style-type: none"> • Anti-retaliation legislation. • Share protocols and best practices. • Mandatory reporting / inspections. • Determine protocol for non-compliance with PCOs on the part of tenants.

What functions need to be done centrally? Who would be the lead?

Lead	Centralized Needs
<ul style="list-style-type: none"> • MCHD • MCHD, CoP, State, TriMet • State, PCOs, OSU • Healthy Homes Coalition • Metro • Government • Landlord/tenant Association 	<ul style="list-style-type: none"> • Surveillance, tracking, data collections. • Media campaigns, community education. • Repository of best practices, protocols. Clearinghouse for research and materials. • Develop consistent codes, enforcement mechanisms. Update tenant/landlord law. • Manage waste stream. Outreach on proper disposal of infested materials. • Engage community, focus on prevention. • Develop early intervention protocols.

Housing Providers (2)

What are the potential risks to your sector?

- Costs.
- Outbreaks potentially amplified in multi-unit housing, spreads to community.
- Impacts quality of life for tenants.
- Adversely impacts housing providers for low-income communities.
- Can spread quickly.
- Limits ability of community to address homelessness.
- Lack of shared responsibility.

What are the challenges and barriers to addressing Bed Bugs?

- Stigma associated with infestation.
- Housing tenants are diverse, difficult to reach everyone.
- Difficult to identify problem in early stages. Spreads quickly.
- Difficulty communicating with non-English speaking and other vulnerable populations.
- Stigma and under or non-reporting.
- Difficulty communicating with diverse community, who often experience other hardships/conditions.
- Lack of shared responsibility in community.
- Cost.
- Lack of good, safe, effective pesticides.

What are actions and resources this sector could provide? Who would be the lead?

Timeline	Lead	Sector-Contributed Actions and Resources
<ul style="list-style-type: none"> • Immediate • 3-6 months • 6-12 months • 3-6 months 	<ul style="list-style-type: none"> • Housing providers • Housing providers • Housing providers • Housing providers 	<ul style="list-style-type: none"> • Establish routes of communication between providers. Share best practices/successes. • Share materials and disseminate to community. • Develop consistent identification/inspection protocols. • Unified strategy of inspecting new client furniture/belongings.

What functions need to be done centrally? Who would be the lead?

Lead	Centralized Needs
<ul style="list-style-type: none"> • MCHD, City of Portland • MCHD, City of Portland • Metro, EPA • County Aging & Disability Services • Oregon Dept. of Agriculture • MCHD, CoP, PCOs, HAP • City of Portland • MCHD, City of Portland 	<ul style="list-style-type: none"> • Central website / clearinghouse for all shareholders • Media campaigns, community education. • Furniture disposal resources. • Resources for vulnerable populations. • Surveillance • Mobile hot box treatment unit. • Mandatory inspections • Centralized research collection of best practices / protocols

Schools and Childcare Facilities

What are the potential risks to your sector?

- Cross-contamination via clothing, toys and accessories.
- The broad range of educational arenas that could be affected, including:
 - Childcare facilities
 - Public school facilities.
 - Private schools
 - School libraries
- Loss of “teach” time.
- The potential for future medical problems caused by bites.

What are the challenges and barriers to addressing Bed Bugs?

- Education.
- Costs.
- Stigma.
- Confidentiality, difficulty of handling information, need for/difficulty of transparency.
- Lack of appropriate treatment information.
- Disruption of services.

What are actions and resources this sector could provide? Who would be the lead?

Timeline	Lead	Sector-Contributed Actions and Resources
<ul style="list-style-type: none"> • Immediate • ASAP • ASAP • Immediate 	<ul style="list-style-type: none"> • State Nursing Consultant • IPM Coordinators (197 statewide) • State Childcare Division, State Head Start Coordinators • Portland Public Schools 	<ul style="list-style-type: none"> • Inter-Agency coordination • Increased staffing and education • Appropriate, targeted message • Distribution of information within the sector

What functions need to be done centrally? Who would be the lead?

Lead	Centralized Needs
<ul style="list-style-type: none"> • MCHD, State of Oregon • MCHD, State of Oregon • MCHD, State of Oregon • MCHD, State of Oregon • State of Oregon 	<ul style="list-style-type: none"> • Consistent information, educational materials • Consistent statewide media campaign, messaging • Utilization of multiple types of media. • Produce a template RFP (Request for Proposals) for Pest Management • Convene all education partners for an education and strategy session.

Lodging Industry

What are the potential risks to your sector?

- Time spent on inspections and follow-ups.
- Frontline of exposure.
- Costs.
- Litigation and liability.
- Damaged reputation / stigma.
- Economic hit to tourism industry.
- Property damage from self-inspections.

What are the challenges and barriers to addressing Bed Bugs?

- Reliability of inspections, “no guarantee”.
- Time spent inspecting.
- Multiple portals and points of entry.
- Inconsistency between protocols and policies.
- Lack of tracking and surveillance.
- Non-verifiable accounts of bedbugs.
- Lack of knowledge about best practices, selecting a PCO.
- No rules to enforce.
- No control over entry, can’t prevent.

What are actions and resources this sector could provide? Who would be the lead?

Timeline	Lead	Sector-Contributed Actions and Resources
<ul style="list-style-type: none"> • N/D* • N/D • N/D • N/D 	<ul style="list-style-type: none"> • ORLA • Lodging Industry • MCHD-EH • ORLA / OSU-Extension 	<ul style="list-style-type: none"> • Standardized protocols / policies. • Laundry Schedules. • Manage public perception / post inspections • Education on hiring PCO

*N/D Not Determined

What functions need to be done centrally? Who would be the lead?

Lead	Centralized Needs
<ul style="list-style-type: none"> • State of Oregon • N/D • MCHD, State of Oregon • ORLA • Metro • MCHD, CoP, State, OSU-Extension • MCHD 	<ul style="list-style-type: none"> • Best Practices / Standardization for Lodging • Enforce unlicensed / unregulated rentals • Educational materials, traveling tips, training on inspections • Public Relations campaign, de-stigmatize • Information on waste / subject matter experts • Education clearinghouse, collaborative information center. • Surveillance, monitoring

Other Public Spaces

What are the potential risks to your sector?

- Costs
- Damaged public image and associated stigma.
- Legal consequences, liability, responsibility.
- Nature of “other public spaces” (transit, retail, donation-based charities) make them particularly vulnerable.

What are the challenges and barriers to addressing Bed Bugs?

- Stigma of infestations and addressing them.
- Transient nature of bedbugs and customers/users.
- Lack of community knowledge and accurate information.
- Cost of training, prevention, treatment and supplies.
- Negative media attention, sensationalism, scare tactics, not presenting effective solutions.
- Lack of authoritative ownership, who is in charge?
- Classification as a “nuisance” does not give it enough attention.

What are actions and resources this sector could provide? Who would be the lead?

Timeline	Lead	Sector-Contributed Actions and Resources
<ul style="list-style-type: none"> • Immediate • 6 months • Immediate • Ongoing 	<ul style="list-style-type: none"> • Citizen’s bedbug task force • Inter-organization workgroup • Various organizations • Business associations 	<ul style="list-style-type: none"> • Offer trainings / education • Develop response protocols • Promote access pesticide information resource • Protect consumers. Practice good control, identification, prevention.

What functions need to be done centrally? Who would be the lead?

Lead	Centralized Needs
<ul style="list-style-type: none"> • State of Oregon • MCHD, State of Oregon • MCHD • MCHD and Pest Control Operators • Metro 	<ul style="list-style-type: none"> • Legislation / Policy • Public announcement campaigns • Community Education • Statistics gathering and reporting • Information on furniture disposal

Appendix C: Response Matrix

What are the Potential Risks to this Sector?

ITEM	HOUSING	LODGING	SHELTERS	SCHOOLS	OTHER
Cost (Materials, property, etc.)	X	X	X	X	X
Human Resources (Increased Work, FTE, New Responsibilities etc.)	X	X	X	X	X
Regulation (Mandated response protocols Limits Innovation)	X				
Damage to Image	X	X	X		X
Loss of Investment Dollars	X	X			
Detracts from Mission and Core Work	X		X	X	
Legal Consequences (Law Suit, Liability, etc.)		X			X
Apathy (Staff Overwhelmed / Give Up)			X		
Losing Community Partners (Fundors, Volunteers)			X		

What are the Challenges and Barriers?

ITEM	HOUSING	LODGING	SHELTERS	SCHOOLS	OTHER
Cost (Materials, property, etc.)	X	X	X	X	X
Human Resources (Increased work, FTE, new responsibilities etc.)	X	X	X	X	X
Reliability of Inspections (Mandated response protocols limits innovation)		X			
Difficult to Track / Survey					X
Lack of Educational Materials	X			X	X
Lack of Best Practices		X	X		
Lack of Rules (OAR/ORS) to Enforce		X			
Poor Media Attention (Scare tactics, sensationalism)		X	X	X	X
Lack of Authoritative Ownership (No government agency is responsible)					X
Lack of Community Knowledge	X		X	X	X
Transient Nature (Hard to track and source outbreak)	X		X	X	X
Lack of Social Support (Resident Services)	X		X		

What Can Your Sector Do?

ITEM	HOUSING	LODGING	SHELTERS	SCHOOLS	OTHER
Inter-Agency Workgroup (Coordinate, Standardize, Communicate Response)	X	X	X	X	X
Self-Survey (monitor extent of problem and cost associated with)	X		X		
Designate an IPM Person (In-house Staff IPM Expert)			X	X	
Inter-Agency Trainings					X
Develop Bedbug Policy			X		
Disseminate Information to Constituents	X		X	X	X

What Should be Done Centrally?

ITEM	SUGGESTED OWNER(S)	HOUSING	LODGING	SHELTERS	SCHOOLS	OTHER
Education Clearinghouse (Consolidation of Materials, Website. Etc.)	Multnomah County Health Department / Oregon Health Authority	X	X	X	X	X
Inter-Agency Training	Multnomah County Health Department / City of Portland	X	X	X		
Public Announcement Campaign	Multnomah County Health Department / City of Portland / Metro / State	X	X	X	X	X
Inspections (Rental Housing / Shelters)	City of Portland	X				
Establish Best Practices (Inspections, Remediation, template RFP etc.)	Oregon Health Authority	X	X	X	X	
Waste Management (Information on Disposal)	Metro Regional Government		X			
Coordinated Surveillance	Multnomah County Health Department / City of Portland	X	X			X
Increased Resources for Vulnerable Populations	Multnomah County Department of Human Services	X				
Update Tenant/Landlord Laws	Healthy Homes Coalition / State of Oregon					X

Who Made This Event Happen

Sponsors

Commissioner Deborah Kafoury

Commissioner Nick Fish

Steve Rudman, Housing Authority of Portland

Lillian Shirley Multnomah County Health Department

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