

## **BRIEFING NOTE**

**DATE:** December 7, 2016  
**TO:** Community Programs Network  
**FROM:** Linda Reason, Policy Coordinator  
**RE:** **New 'Bed Bugs' Policy and Procedure**

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### Background

Infestations of bed bugs sometimes occur in the homes of clients served by Providence Care, and staff requested about how to respond. It was decided that a new Administrative Manual Environment Management policy and procedure would be developed. Shelley McKee and Linda Reason drafted the attached information, which was sent for feedback to Providence Care Management Forum, Krista Walsh, Sonya Morey, Kathleen Poole, Shelley McKee, Shannon Murray, Jackie Purchase, Marie-Jo Cleghorn, MHS/SMOL/PM Charge Nurses, MHS/SMOL Nursing Coordinators/Supervisors.

### Features to note:

- Information about the characteristics of bed bugs is included
- Procedures for clients being admitted, clinical clients, and community clients are described
- A procedural matrix indicates Interprofessional Team Members and Housekeeping responsibilities

**Draft 2**  
**Nov 18/16**

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Subject: **BED BUGS**

Number: **ADM-EM-39**

Section: Environment Management

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Prepared by: Infection Prevention and Control Services  
Policy Coordinator

Initial Approval Date:

Review Date:

Endorsed by:

Revised Date:

Issued by: Vice-President, Planning and Support  
Services

Approved by: Operations  
Committee

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## POLICY

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### Purpose:

To raise awareness amongst personnel about the transmission and response to suspected or identified infestations of bed bugs.

**Keywords:** wall louse, house bug, mahogany flat, red coat, crimson rambler

### Policy Statement:

Providence Care recognizes that bed bugs have a negative impact on the mental and physical health of clients. The organization is concerned with assisting inpatients and personnel in preventing the spread of bed bugs both at work and at home. Whenever possible, Providence Care personnel work closely with housing and service providers to prevent and reduce the impact of bed bugs to support outpatients.

## **Definitions:**

### **Bed Bugs**

The two species of bed bugs (Insecta: Hemiptera: Cimicidae) usually implicated in human infestations are *Cimex lectularius* and *C. hemipterus*. Bed bugs are not known to transmit or spread disease. Bed bugs have an oval broad, flat body and a short, broad head. Unfed adults are 6 to 10 mm long and have brown wingless bodies. To continue to mate and produce eggs, both males and females must feed at least once every fourteen (14) days. Bed bugs feed at night, but they can survive for months without feeding. Bed bug infestations usually occur around or near the areas where people sleep. These areas include apartments, shelters, rooming houses, hotels, cruise ships, buses, trains, and dorm rooms. They hide during the day in places such as seams of mattresses, box springs, bed frames, headboards, dresser tables, inside cracks or crevices, behind wallpaper, or any other clutter or objects around a bed. Bed bugs have been shown to be able to travel over 100 feet in a night but tend to live within eight (8) feet of where people sleep.

### Signs and Symptoms of Bed Bugs

- Rusty or reddish stains on bed sheets or mattresses caused by bed bugs being crushed. They can also be found in crevices around windows, trim, door jams.
- Dark spots (about this size: •), which are bed bug excrement and may bleed on the fabric like a marker would.
- Red bite marks may be mistaken for flea or mosquito bites.
- Eggs and eggshells, which are tiny (about 1mm) and pale yellow skins that nymphs shed as they grow larger.
- Visualization of live bed bugs.

### Diagnosis

Bed bugs are diagnosed by visual inspection of the skin for bites and sleeping areas in the home environment. Check client belongings for bed bug excrement, small blood spots, live bugs or the pale yellow skins shed by the nymphs as they grow larger. If evidence of bed bugs is found, stop the inspection and initiate control measures. Bed bugs will move once they are disturbed.

### How are Bed Bugs Spread?

Bed bugs are usually transported from place to place as people travel. Bed bugs travel in the seams and folds of luggage, overnight bags, folded clothes, bedding, furniture, and anywhere else where they can hide. Most people do not realize they are transporting stow-away bed bugs from location to location, infecting areas as they travel.

Bed bug bites can vary in appearance. Suspect a bed bug infestation if a client reports nocturnally acquired bites or rashes. Individual response to bites varies, but the most common reactions to bites are small, red and raised lesions that may or may not be itchy. They are often in a linear group of three. Bites most commonly occur on exposed areas of the body, such as the face, neck and extremities. There is no evidence that bed bugs transmit blood borne infectious diseases, such as Hepatitis B, Hepatitis C, or HIV.

### **Client**

Client includes patients, clients and residents.

### **Gooseneck**

Gooseneck means twisting the opening of a bag shut so when it is done it resembles the neck of a goose.



# PROCEDURE

<i>Step</i>	<i>Action</i>	<i>Responsibility</i>
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## FOR ADMITTED AND CLINIC CLIENTS

- |    |  |                                    |
|----|--|------------------------------------|
| 1. | Use the risk assessment table for bed bug management to determine what action is required. | Interprofessional Care Team member |
|----|--|------------------------------------|

Find the scenario that best fits the situation. Discuss concerns with the client/family in a respectful, non-stigmatizing way.

Scenario 1	There is a report of a client/room with bed bugs. <ul style="list-style-type: none"> <li>▪ <b>No</b> bed bugs are found on the client or in their environment</li> <li>▪ <b>No</b> bites are found on the client</li> </ul>
Scenario 2	On <b>initial client contact</b> in a health care facility: <ul style="list-style-type: none"> <li>▪ a client reports they have a bed bug infestation and/or</li> <li>▪ bed bugs are found on a client and/or</li> <li>▪ bed bug bites are found on a client</li> </ul>
Scenario 3	Staff notices one or more bed bugs on a bed or in the environment of a client's room. <ul style="list-style-type: none"> <li>▪ <b>No</b> bed bugs are found on the client</li> <li>▪ <b>No</b> bed bug bite marks are found a the client</li> </ul>
Scenario 4	Staff notice that an admitted client <b>occupying</b> a room has: <ul style="list-style-type: none"> <li>▪ bed bugs</li> <li>▪ fresh bed bug bites, or</li> <li>▪ areas of dark staining (resembling a line made by a fine tipped felt marker) or red flecks of blood (from bed bug bites) are found on the sheets/bed linen in a client's room</li> </ul>
Scenario 5	A client with bed bugs has been <b>in public areas and/or open space areas</b>
Scenario 6	A client requires <b>care in their home</b> and there is evidence of bed bugs – follow the steps outlined in Appendix 1 'Bed Bug Treatment Community Visit Procedure

**Step****Action****Responsibility**

2. Follow the matrix below according to your scenario. Responsibilities are alphabetically listed under matrix. Document the actions taken in the client's personal health information record.
- Assigned staff member

Scenario	Interprofessional Team Member Responsibilities	Housekeeping Responsibilities
1	A	E
2	A+B+I	F+G+H
3	A+B+C	F+G+H
4	A+B+C+D+I	F+G+H
5	A+B+D+I	F+G+J

- A Call Housekeeping to investigate room/area for evidence of bedbugs.
- B
- Don personal protective equipment, including gloves and gown. Tie hair back and, if socks are worn, tuck them into footwear. (Refer to policy ADM-HS-40 'Personal Protective Equipment (PPE).) Discard any disposable items.
  - Take the client to the closest shower area.
  - Place a Contact Precautions sign on the door of the shower room.
  - Have the client remove all clothing and belongings and double bag them into plastic garbage bags; gooseneck it and tie closed.
  - If the individual is to be admitted, give the double bagged belongings to a family member to take home.
  - If the client can be discharged, return their belongings to them immediately before they are ready to leave.
  - Have the client shower, shampoo their hair, and put on a client gown and housecoat. (If the client cannot be showered immediately, have them put on a clean gown/pajamas until a shower is available.)
  - After the client has showered and dressed, move them to a clean room/area.

**Step****Action****Responsibility**

Assigned staff member

- If the client has already been occupying a bed or stretcher, remove all bed linen and double bag it in garbage bags, twist the bag opening into a gooseneck and tie closed. Place the tied garbage bags into the regular laundry bag. (*Bed linen must be placed into garbage bags prior to placing it in the laundry bag so it can be identified by laundry services.*)
  - If the admitted client does not have a family member to take their clothes and belongings home, double bag them in garbage bags, gooseneck the bags and tie closed. Place into a hard plastic or metal container with a lid. Store in the client's room until he/she leaves the health care facility. Instruct the client on how to clean items upon discharge. (See H for instructions.)
  - If the client does not have clothing, or family, or is a long stay client, and their clothing requires washing, items should be laundered on the hottest heat setting in the dryer first, then the washer for a minimum of 30 minutes. If unable to dry and wash immediately, follow gooseneck tie procedure.
- C
- Place a Contact Precautions sign on the door. (Refer to policy ADM-IC-4 'Contact Precautions'.)
  - If possible, collect a bug in a specimen container for verification and identification purposes and contact the Housekeeping Supervisor who will contact the Pest Control Company. (Refer to policy ADM-EM-30 'Wildlife'.) (*One way to collect a bug for identification is to catch it with a piece of clear sticky tape and tape it to a piece of paper. Place the paper into a specimen container.*)
- D
- Ask the client where they have recently been within the facility, e.g. laboratory, x-ray, bathroom.
- E
- As no bed bugs have been found, no further action is required.
  - Thoroughly clean and disinfect all surfaces in the room as per the usual cleaning process, i.e. terminal clean. Using hospital grade disinfectants.

Step	Action	Responsibility
F	<ul style="list-style-type: none"> <li>▪ Thoroughly vacuum, clean and disinfect all surfaces in the room. Pay close attention to seams, creases, folds, baseboards, switch plates, electrical outlets, and cracks.</li> <li>▪ Vacuum, clean and disinfect the bed and remake with fresh linen. If the mattress has cracks in it, steam cleaning may be required. IF the mattress cannot be properly steam cleaned, the cracked mattress may have to be double bagged and disposed of.</li> <li>▪ Once vacuuming is complete, remove the vacuum bag, double bag it in a garbage bag, gooseneck the opening, tie shut, and put it into the regular garbage.</li> <li>▪ Remove all bed linen and double bag it into garbage bags, twist the bag opening into a gooseneck and tie closed.</li> <li>▪ Place tied garbage bag into the regular laundry bag. <i>(Bed linen must be placed into garbage bags prior to being placed in the laundry bag so it can be identified by laundry services.)</i></li> <li>▪ IF the area has a lot of fabric, Housekeeping will assess the need to steam clean.</li> <li>▪ Once the room has been thoroughly vacuumed, cleaned, disinfected, and if necessary, steamed, remove the Contact Precautions sign and advise Nursing that the room can be occupied.</li> </ul>	Assigned staff member
G	<ul style="list-style-type: none"> <li>▪ Attach a surveillance strip to a secure place on the bed as close to the floor as possible, and check the strip daily for bed bugs for two (2) weeks or until the client is discharged, whichever comes first. Two sided sticky tape can be used if a surveillance strip is not available. <i>(Public areas that a surveillance strip can be attached include the back of a chair near the bottom, on the wall near base boards, or on electrical outlets.)</i></li> <li>▪ Date and initial either a record sheet or on the strip itself.</li> <li>▪ <b>If a bed bug is found in/on the surveillance strip, notify the manager, who will contact the Pest Control Company. Follow scenario #4. If no bed bugs are found, no further action is required.</b></li> </ul>	Housekeeping

<b>Step</b>	<b>Action</b>	<b>Responsibility</b>
H	<ul style="list-style-type: none"> <li>▪ Clean and disinfect the shower area using hospital grade disinfectant wipes. Once this has been done, remove the Contact Precautions sign.</li> </ul>	Assigned staff member
I	<ul style="list-style-type: none"> <li>▪ Advise family members to put clothes into a hot dryer for at least 30 minutes to kill any bed bugs. Wipe out the dryer drum with a damp cloth to remove insect parts. Follow this by washing the clothes in hot soapy water and dry in a hot dryer. Recommend that the family bring freshly laundered clothes when they return to take the client home. (<i>One cycle in a hot dryer will kill all stages of the bed bugs.</i>)</li> <li>▪ If a client's belongings cannot be washed or placed in a hot dryer for at least 30 minutes, advise the family to keep the articles in a double bag gooseneck closed. The bag should then be placed in the freezer for at least seven (7) days. Warn them that freezing may be not 100% effective. The longer the time in the freezer, the more effective the kill.</li> </ul>	
J	<ul style="list-style-type: none"> <li>▪ Do not use these areas until the investigation has taken place. Housekeeping will investigate within a two (2) metre radius of where the client was and/or where bed bugs were found.</li> <li>▪ <i>If no bed bugs re found</i>, the area can be used immediately.</li> <li>▪ <i>If bed bugs are found</i>, vacuum, clean and disinfect in a two (2) metre radius of the discovery. Once the area has been vacuumed, cleaned, and disinfected, it can be used.</li> </ul>	

**References:**

Royal Ottawa Health Care Group Bed Bug Resource Manual for ROHCG Staff 2011

Quinte Health Care 'Fact Sheet Bed Bugs' March 3, 2015

Northumberland Hills Occupational Health/Infection Control Manual 'Bed Bugs: Prevention, Management and Treatment for Patients and Staff' Number: VII-013 May 2016

**Step****Action****Responsibility**

US Environmental Protection Agency. Bed Bugs. Introduction to Bed Bugs. March 7,2016 Retrieved from <https://www.epa.gov/bedbugs/introduction-bed-bugs>

**Cross-References:**

Providence Care Administrative Manual Policy and Procedure #ADM-EM-30 'Wildlife'

Providence Care Administrative Manual Policy and Procedure #ADM-HS-40 'Personal Protective Equipment'

Providence Care Administrative Manual Policy and Procedure #ADM-IC-4 'Contact Precautions'

## Bed Bugs #ADM-EM-39

### BED BUG TREATMENT COMMUNITY VISIT PROCEDURE

Ongoing education to engage in precautionary measures in the community, i.e. avoid sitting or leaning against furniture in the residence, minimize items brought into the house, avoid setting belongings on furniture or floor.

