

**BED BUG INFESTATION**

Request for Compensation under the Letter of Understanding

Staff Name: \_\_\_\_\_

Program: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Unit: \_\_\_\_\_ Director \_\_\_\_\_

I am requesting the following compensation under the Letter of Understanding of the Collective Agreement Effective April 1, 2007 – March 31, 2010 as I believe that I have incurred a bed bug infestation as a result of performing my duties at WoodGreen.

To be allowed to use \_\_\_\_\_ sick time hours to deal with the infestation on the following days:

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To be reimbursed for the spraying treatments of my primary residence for the amount of \$ \_\_\_\_\_ and am attaching itemized invoice that clearly indicates that the residence was treated for bed bugs.

I believe that my work was the source of my bed bug infestation because:

Submitted to: \_\_\_\_\_

Date: \_\_\_\_\_

Claim:  Approved  Declined Dated: \_\_\_\_\_

Rationale for Decision:

\_\_\_\_\_  
Unit Director Signature

Evidence of Bed Bug Infestation to be completed by Worker

**Sightings**

- Sighting of bugs which have been identified as bed bugs by Pest Control Expert  
At Employees Home  Date: \_\_\_\_\_  
At the Employees Work Site  Date: \_\_\_\_\_
- Sighting of bugs which have been identified as bed bugs by another qualified individual  
At Employees Home  Date: \_\_\_\_\_  
At the Employees Work Site  Date: \_\_\_\_\_

**Bites**

- Bites, Describe the bites
  - Location (arms, legs, torso, etc)
  - Number of Bites
  - Pattern (clusters, in a row, scattered)When were these first observed? Date: \_\_\_\_\_
- The number of bites changed over time?
- Blood Streaks on mattress have been observed on bedding
- Bites on worker & family members

**Other risk factors that may be contributed to infestation are present**

- Recent travel/hotel stay
- Live in an apartment building, other tenants infested?  Yes  No
- Change in living arrangements – recently moved, had additional/new member move into residence
- Second job where risk factors are present
- Other:

**Work Site risk factors**

- Bed Bugs sighted at work site (include client home when worker conducts community visits – specify client)  
Date:  
Individual who sighted:  
To whom was sighting reported:
- Other staff at work site have reported personal bed bug infestation – who:
- Clients at work site have reported or have symptoms of bed bug infestation – who:

When a worker works primarily in an office setting, the supervisor and worker member of the MSJHSC will be expected to do a physical inspection of the worksite and look for signs of bed bugs, with special attention to:

- Cloth/Wood Furniture
- Cracks along wall
- Additionally, child care will be expected to inspect cots, cribs, and cubbies for bed bugs and children's arms or legs for bites with a pattern that is consistent with bed bug bites