



City of Richmond

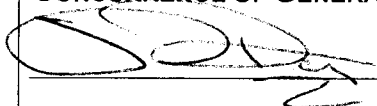

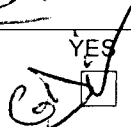
Report to Committee

To: Community Safety Committee **Date:** April 4, 2005
From: Suzanne Bycraft **File:** 10-6125-04-14/2005-Vol
 Manager, Emergency & Environmental Programs 01
Re: **2005 Mosquito Control Program**

Staff Recommendation

1. That Richmond Health Services be retained to undertake a Proactive Larviciding Program, as per their proposal dated March 24, 2005, "2005 West Nile Virus Program Proposal".
2. That the Provincial Crown Land Assessment option outlined in the Richmond Health Services proposal be authorized at an additional cost of \$20,000, with funding provided from the provincial grant.
3. That for the mosquito control program for catch basins:
 - a) The purchase of the larvicide briquets be authorized as a pre-cursor to potential treatment, and
 - b) Staff be authorized to implement the mosquito control treatment program for catch basins if so ordered by the Health Authority.
4. That the Chair, GVRD Board of Directors, be advised that Richmond Council supports the establishment of a GVRD Mosquito Control Administration and Coordination function and will participate in this service.


 Suzanne Bycraft
 Manager, Emergency & Environmental Programs
 (3338)

FOR ORIGINATING DIVISION USE ONLY			
ROUTED TO:	CONCURRENCE	CONCURRENCE OF GENERAL MANAGER	
Budgets	Y <input checked="" type="checkbox"/> N <input type="checkbox"/>		
REVIEWED BY TAG	YES <input type="checkbox"/> NO <input type="checkbox"/>	REVIEWED BY CAO	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>
			

Staff Report

Origin

This report presents the 2005 mosquito control program for Council's consideration. Also addressed is correspondence received from Marvin Hunt, GVRD Board of Directors Chair, which requested Richmond Council's support and participation in a GVRD Mosquito Control Administration and Coordination function.

Analysis

Background

In 2003, the City began a proactive program to undertake mosquito larvicide treatment in watercourses and along Sturgeon Banks to reduce mosquito populations to help combat the potential spread of West Nile virus.

West Nile virus has not yet reached the British Columbia area, however, health officials advise that it's arrival is imminent. The virus has already been detected in birds in the California area this year. These early signs are likely due to the record rainfall that plagued this area recently. This is significant because predictions are that migratory birds from the California area will carry the virus to this area via the Pacific flyway.

2005 Mosquito Control Program

The proposed 2005 program is outlined in Attachment 1 from Richmond Health Services, "2005 West Nile Virus Program Proposal". This includes the following elements:

- Larval Control - commencing May 1, 2005, undertake surveillance and larval control in all City ditches and along Sturgeon Banks. This also includes sampling for identification of larvae in representative catch basins.
- Catch Basins – A study conducted in 2004 confirmed that catch basins pose a potential threat for harbouring West Nile Virus vector mosquitoes. The 2005 program includes provision to undertake this work only upon receipt of an order from the Medical Health Officer. Such an order would only be issued if West Nile Virus appears in B.C. or a neighbouring jurisdiction and there is a high likelihood of human cases.

To prepare for the anticipated need to deliver this program, Richmond Health Services has recommended pre-purchasing the briquets/treatment product needed for larval control in the catch basins. This is due to concerns around delivery timelines (2 – 3 weeks) should we delay purchase of these products until an order is received from the Medical Health Officer. The briquets have a guaranteed shelf life of 2 years, so could be used for a future program if they are not required in 2005. The City will need to provide approximately 5 cu. metres of storage space for the briquettes.

- Crown Lands – The province has recognized the need for treatment on their lands and has offered funding to local governments to undertake this work. The Richmond Health Services proposal includes an option to undertake this work.

Costs for these elements are addressed in the Financial Impact section.

GVRD Proposed Service for Mosquito Coordination

The GVRD has served as a coordinating body in developing policies for treatment of surface waters and catch basins to ensure greater consistency across the region. This has proved beneficial to all working group participants, including Richmond. A gap was identified by the working group, however, in the area of strategic communications. There is a need to create communication linkages between the various players, i.e. B.C. Centre for Disease Control (BCCDC), Health Authorities and local governments.

In a letter to members of Council dated March 7, 2005 (Attachment 2), Marvin Hunt, GVRD Board Chair requested consideration and approval of a GVRD Mosquito Control Administration and Coordination function. Such a function would establish the proper authority for the GVRD to carry out the policy development work done to date, as well as undertake strategic communications work. The GVRD would coordinate with the BCCDC, the Health Authorities and local governments around public messaging in various scenarios/stages of the virus. They would also develop advance messaging, create templates and protocols for implementing press releases as well as prepare scripts and questions and answers for use by various agencies. They will also develop a process to ensure that decision makers and politicians are notified of significant developments prior to the information being made public.

Richmond staff have been actively involved in the working group, and support the development of a GVRD Mosquito Control Administration and Coordination function to continue the policy work and advance the communications coordination work.

Financial Impact

The cost of the work in 2005 as recommended is broken down based on undertaking or not undertaking the catch basin control program as follows:

	Catch Basin Treatment	No Catch Basin Treatment
Larviciding Program	\$100,000	\$100,000
Catch Basin Control	165,000	45,000
Provincial Land	20,000	20,000
Total Cost	\$285,000	\$165,000

The Environmental Programs 2005 budget includes funding in the amount of \$265,000 for this work. The amount noted for assessment and treatment of provincial crown land was not

identified in the budget as staff were unaware during budget preparation that funding may be available to undertake this work. Therefore, this represents an additional cost in 2005. However, as noted on page 2 of the Richmond Health Department proposal (Attachment 1), this cost is almost entirely paid through additional provincial funds (\$18,998.54). Therefore, staff recommend undertaking this work with funding provided from the provincial grant monies.

To date in 2005, the City has received \$30,000 in provincial funding through the Ministry of Health Services. The City is eligible for a further \$177,441.14 in Ministry funding, and has made the appropriate application for these funds. Total anticipated provincial funding in 2005, therefore, is \$207,441.14.

Conclusion

Richmond has been identified as a risk level 3 for West Nile Virus illness in B.C. (1 being the lowest risk level and 4 being the highest). Therefore, it is prudent to maintain a proactive approach to mosquito control to mitigate any impacts from West Nile Virus should it reach our area in 2005. Staff concur with the proposed approach as outlined by Richmond Health Services and recommend the mosquito surveillance and larviciding program be undertaken in 2005.

Staff further support the work of the GVRD in coordinating policy development and strategic communications across the various agencies, and recommend Council approve the proposed GVRD Mosquito Control Administration and Coordination Function.



Suzanne Bycraft
Manager, Emergency & Environmental Programs
(3338)

SJB:



Richmond Health Department
Public Health Inspection

Richmond Health Services
7000 Westminster Highway
Richmond, BC V6X 1A2
Tel: (604) 233-3147 Fax: (604) 233-3175

March 24, 2005

City of Richmond
5599 Lynas Lane
Richmond, BC V7C 5B2

Attention: Suzanne Bycraft, Manager Emergency & Environmental Programs

Dear Ms. Bycraft:

Re: 2005 West Nile Virus Program Proposal

The 2004 West Nile Virus (WNV) program was a continuation of the comprehensive mosquito management plan developed in 2003 for the City of Richmond. Also included was a review of the City's water inlets, to determine if these structures provide mosquito-breeding habitat and if so, whether that poses a threat for the transmission of WNV.

Surveillance activities included the sampling of larval and adult mosquito species, which identified three mosquito species as having high potential for transmitting WNV. *Culex tarsalis* and *Culex pipiens*, are two mosquito species that are present in our ditches and catch basins, and *Aedes dorsalis* is abundant on Sturgeon Bank. The program also included joint coordination with BC Centre for Disease Control (BCCDC) for the submission of adult mosquitoes and corvid species of birds for the testing of WNV.

Results from the water inlet study highlighted the need that these man-made structures do pose a potential threat for harbouring WNV vector mosquitoes. By the end of July, 71% of catch basins and 50% of inspection chambers exhibited positive *Culex pipiens*'s activity.

The program is currently "ramping up" in preparation for its pre-emptive larviciding program of Sturgeon Bank and City ditches as part of its risk based approach which is consistent with the recommendations from BCCDC's Arbovirus Surveillance and Response Guidelines for British Columbia. A guideline which outlines the "Use of larvicides to treat known, accessible, significant breeding sites for *Culex pipiens* and *Culex tarsalis* at Level IIa should be considered in populated southern parts of the province that may be at higher risk for early introduction of WNV in the current year."

Richmond has been identified as being at higher risk (Risk Level 3), of WNV illness in BC, based on the presence of *Culex* mosquitoes, climate and ecosystem type, human population density, and bird migration routes (Attachment 1. Forecasted Risk for WNV Illness in BC).

The Ministry of Health Services recently announced \$5 M additional funding available to local governments for WNV activities for 2005, which will be accessed through the Union of BC Municipalities (UBCM). Funding levels have been based on the relative risk of WNV arrival in an area. Richmond's allocation of this funding is as follows:

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Calculation of Eligible Funding		
Risk Level	Total Population	Funding at that risk level
3	172, 714	\$0.90 per capita
Sum of Base funding		3,000.00
Sum of per capita funding		155,442.60
Sum of crown land funding		18,998.54
Total eligible funding		177,441.14

Source. <http://www.civicnet.bc.ca/siteengine/activepage.asp?PageID=223&bhcp=1>

Based on early information coming out of California, the record rains from this past winter have created prime breeding conditions for mosquitoes prompting health officials to warn of a potentially serious outbreak this year. Also supporting this is the early detection of WNV in birds this February, compared to April in 2004, signaling a longer more dangerous virus season. This all increases the relative risk for those communities along the west coast, which lie on the Pacific Bird Flyway.

The following outlines the scheduled activities for 2005 and options which should be considered in preparation for the arrival of WNV in BC.

A. Proactive Larviciding Program Beginning May 1, 2005 (\$100,000 + GST)

These activities have already been engaged through an existing contractual agreement. It is a continuation of last year's program, and includes:

1. Investigation of all private property complaints, recommendations on source reduction, and enforcement of mosquito control provisions under Public Health Protection Bylaw No. 6989.
2. Surveillance and larval control of **all** City ditches.
3. Continued surveillance and testing of adult mosquitoes.
4. Continued surveillance and testing of corvids.
5. Concurrent public education programs and disbursement of educational material, available through Richmond Health Services.
6. The surveillance, sampling, and identification of larvae at a representative sample of catch basins throughout the City.

B. Catch Basin Control Program - Option (\$165,000 + GST)

Implementation of control measures within catch basins and inspection chambers would be based on the appearance of WNV within British Columbia or in a neighbouring jurisdiction in Canada or the United States in the current year **and** a high likelihood of human cases. It would be initiated upon direction from Richmond City Council, after the issuance of an Order from the Medical Health Officer.

The catch basin program would utilize the rapid response plan outlined in the WNV Catch Basin Management Study (Attachment 2. CB Rapid Response Plan).

Note:

- City of Richmond would provide suitable storage facility for larvicides (approximately 5 m³).
- Cost is based upon using Altosid XR briquets, at \$3.18/briquet. Cost may fluctuate, based on control product choice and/or pricing.

- With the additional funding announced from the Ministry of Health Services, it is recommended that any excess funds be utilized to acquire an inventory of Altosid XR briquets as it is anticipated that there will be a 3-week delay in delivery. Altosid XR briquets have a 24-month guaranteed shelf-life from its manufacturer.

C. Provincial Crown Land Assessment – Option (\$20,000 + GST)

An assessment will be conducted to determine the breeding potential of WNV vector mosquitoes on Provincial Crown Land within the City of Richmond. Mosquito breeding sites will be surveyed and mapped, and larval mosquito species will be characterized to determine the relative risk of WNV.

If it is determined that WNV vector mosquito species are present, larviciding control programs will be initiated to affected areas.

Option Date

- Confirmation should be provided by **April 31, 2005** to allow for the procurement of resources required to conduct the specified work under each option.
- If the Catch Basin Control Program Option is engaged, it is understood that if WNV does not appear, \$5000 + GST will be forwarded to the Richmond Health Department to cover the cost for training, certifying, and maintaining auxiliary staffing levels.

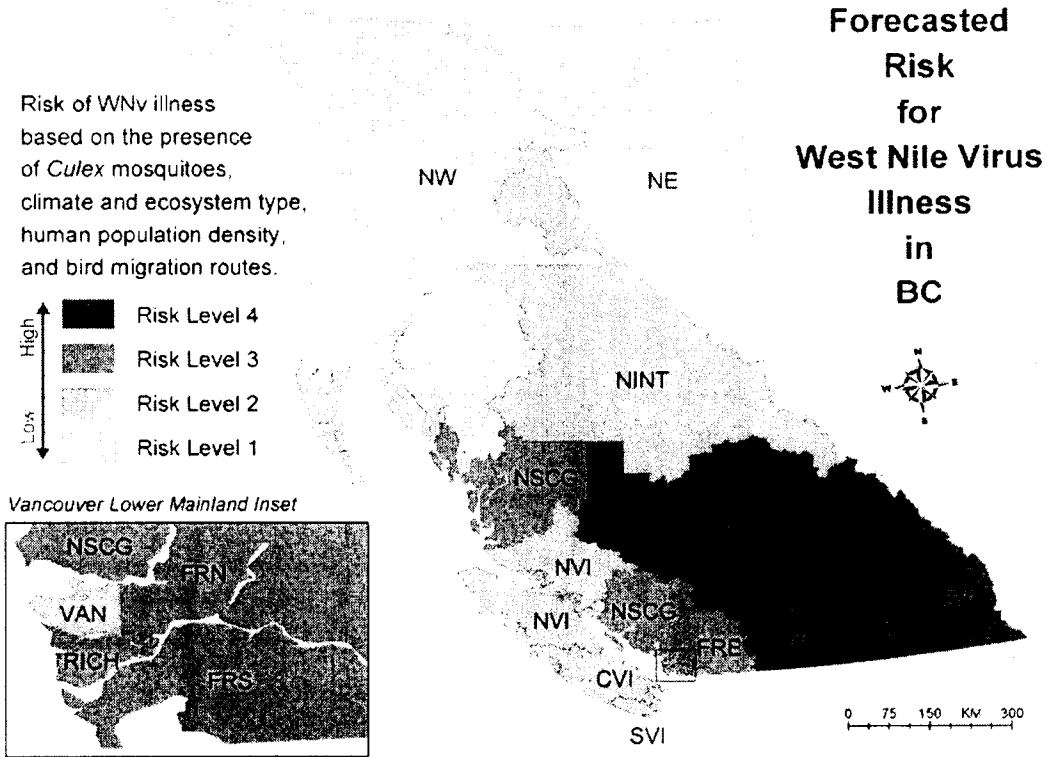
If you require clarification on any of the above items, you may contact the undersigned. Thank you for your consideration.

Yours truly,



Kelvin Higo
Contractor, West Nile Virus Program

Attachment 1. Forecasted Risk for WNV Illness in BC



Source. <http://www.civicnet.bc.ca/siteengine/activepage.asp?PageID=223&bhpc=1>

Attachment 2. CB Rapid Response Plan

Catch Basin / Inspection Chamber Mosquito Management Plan Framework

1. Protocol

- Implementation of control measures within catch basins and inspection chambers upon direction from Richmond City Council, after the issuance of an Order from the Medical Health Officer.
- The recommended control agent will be dependant upon the date of implementation:
 - i. If the required period of control is greater than 1 month, then Altosid XR Briquet (methoprene) will be the recommended control agent as it offers a 150-day residual.
 - ii. If the required period of control is less than 1 month, then Altosid Pellets will be the recommended control agent as it offers a 30-day residual.

Note: The use of Altosid Pellets will be replaced with *Bacillus sphaericus* (Bs) once approved for use in Canada. Bs is more desirable as the risk for environmental impact will be further reduced.

2. Operational Parameters

- Program implementation will begin within 2 weeks of an Order being issued by the Medical Health Officer.
- Completion of treatments will conclude within 4 weeks of implementation.
- Treatment is to include all City catch basins and inspection chambers.
- Total estimated cost - \$165,000 + GST.

3. Staffing

- Field staff:
 - i. 17 total field inspection staff
 - ii. Training – Mosquito and Biting Fly Certification required
- 1 Supervisor required
- 1 Data entry clerk recommended.

4. Equipment and Materials

- Storage facility for pesticide storage
- 1 extended/crew cab pickup with canopy for use as mobile command and the distribution of larvicides to field staff
- Bags for applicators
- Grate pullers
- Grate markers
- Personal protective equipment
- Stationary.
- Signage for transport vehicle and storage facility.

5. Reporting

- Treatment routes based on 'Section-Block-Range' maps
- Staff will report to Supervisor for route assignment
- Completed maps will be submitted for data entry
- It is estimated that applicators will be able to treat 100 inlets/day
- Catch basin and inspection chamber lids will be marked with a dot of paint once treated.

6. Communications

- Media release prior to program implementation
- Phone number for public to report untreated catch basins and inspection chambers.



Board Meeting Date: February 25, 2005

To: GVRD Board of Directors

From: John M. MacFarlane, GVRD WNV Mosquito Coordinator

Date: January 5th, 2005

Subject: **Planning for Larval Mosquito Management for Control of the West Nile Virus in the Greater Vancouver Region**

Recommendation:

1. That the GVRD Board direct staff to prepare a mosquito management service function establishing by-law and circulate to municipalities for their approval.
 2. That the GVRD Board authorize the Chair to request that it be reviewed by the municipalities expeditiously for consent prior to being brought forward to the next session of the Board.
 3. That the GVRD Board endorse the GVRD's participation in the formulation of coordinated communications with the Regional Health Authorities which involves the establishment of a budget to undertake the work program as described in this report and the implementation of the work program undertaken by communication specialists working closely with the REAC WNV Regional Work Group.
 4. That the GVRD Board approve the establishment of a budget of \$120,000 from general government reserves for the implementation of this work in anticipation of the establishment of a service function.
-

1. PURPOSE

To seek approval for establishing a GVRD Mosquito Management Service Function and for implementing operational planning for West Nile Virus communications by local governments in the GVRD is coordinated between them and the regional health authorities.

The on-table nature of the report flows from the receipt of letters from Medical Health Officers that Health Authorities are not prepared to undertake operational-nature WNV-related communications planning or implementation and from the REAC & RAAC endorsed West Nile Virus Work Group recommendations and the unseasonably warm weather could accelerate the arrival of WNV much earlier than expected.

2. CONTEXT

Municipal participants in the REAC West Nile Virus Regional Work Group have identified the need for the coordination of the development of an operational communication program. This work will be developed collectively by the GVRD on behalf of the municipalities.

In order to carry this and similar work on mosquito management the GVRD requires the authority of a service function. The scope and complexity of the work required to meet the West Nile-related needs of member municipalities has grown since the Board directed that a regional policy be developed in late 2003. It is clear that the type of work that is emerging for this and future years will require regional efforts that must operate under proper authority.

The Board is asked to direct staff to prepare an establishing by-law for a mosquito management function within a timeframe that will allow it to be implemented for this year's WNV mosquito season. This will require that the by-law be reviewed by each member municipality for assent prior to approval by the GVRD Board.

Coordination of WNV Communication Program Development

The Regional Policy for a Standardized Preparedness and Management Approach for West Nile Virus for Health Purposes: Mosquito Surveillance, Education and Larval Control (surface waters) was approved by the GVRD Board on March 26th, 2004. It contained a statement that:

“The Regional Health Authorities/Province should prepare public messages on:

- private land owners responsibilities general WNV information;
- strategies for provincial parks;
- surveillance results;
- treatment including personal protection, source reduction and adaptive management.”

and,

“The GVRD should be requested to utilize its communication and education channels to assist the Regional Health Authorities to deliver the public messages across the Lower Mainland.”

and,

“Each jurisdiction may supplement the general regional and provincial communication messages with messaging specific to their needs including, where applicable, private land owners.”

Over the summer of 2004 resources were committed by GVRD toward working with municipalities, Regional Health Authorities and the BC Centre for Disease Control on developing a regional approach to WNV communications. Much of the effort concentrated on the development and delivery of high quality media communicating broad public messages in ads, web site materials, handouts and a traveling exhibit – as well as providing templates to other jurisdictions for their use in creating their own media projects. An analysis of roles and

responsibilities in WNV communications, suggested that this function would be appropriately left to the Regional Health Authorities.

In the fall of 2004 the Chair of the GVRD has communicated to the two Chief Medical Health Officers the position that coordination of any communication on WNV should be undertaken by the Health Authorities. These two jurisdictions have responded (see attachments) as has the BC Centre for Disease Control indicating that communications programs being developed by them will most likely not address operational communications needs identified by the municipalities.

There is continuing concern being expressed by representatives of several municipalities that regional WNV communications needs at a tactical and operational level are not being addressed. This has been reinforced on several occasions at the WNV Mosquito Work Group and by REAC. They believe that there is a need for complementary detailed preparations for a coordinated regional approach to public communications that would dovetail with those being developed by the BC Centre for Disease Control (BC CDC) and the Regional Health Authorities.

After reviewing the BC CDC & Regional Health Authorities' WNV communication plan for 2004 it was noted that these preparations would support, but not overlap, preparations being made by these health jurisdictions and will have to be made when West Nile reaches the Lower Mainland – and that advance preparation will make this more cost effective. The explanation of the operations is another level of detail that the public will want to understand. This aspect is currently missing in the provincial communication plan and may be well served by a cooperative effort by a partnership of the Regional Health Authorities and the GVRD as it is a level of detail and concern that the provincial authorities cannot communicate easily.

The two Regional Health Authorities have formally acknowledged a willingness to actively undertake this regional coordination without detailed commitments to any particular action, particularly with respect to communicating local operations in the event of the appearance of WNV in the region. No resources are currently identified in the GVRD budget for allocation to a communications coordination role in 2005.

Our recommendations were previously endorsed by the Regional Engineers Advisory Committee on December 3rd, 2004. They requested that a funding formula be established to allocate contribution levels from each member municipality.

Operational Communications Needs of Local Governments

A sub-committee of the REAC Regional WNV Mosquito Working Group, chaired by Dipak Dattani, Manager Environmental Engineering (City of Burnaby), with representatives from The BC Centre for Disease Control, Fraser Health Authority, Burnaby, Vancouver, Surrey, Delta, North Vancouver District, and the GVRD met to identify the additional communications needs that have been in discussion. The REAC Regional WNV Mosquito Working Group has identified needs for a **West Nile Virus Local Government Communication Strategy for Larval Control**.

This communications initiative is for larval WNV management communication only. Media specialists in the GVRD have recommended a base budget to establish this coordinated WNV communication program estimated to be \$120,000. This would be composed of four main components:

- GVRD Communications Staff Time (0.5FTE)	\$50,000
- Issues Management System Development	\$10,000
- Outreach	\$40,000
- Collateral Materials	\$20,000
	Total \$120,000

It is recommended that this budget be established from general government reserves for the implementation of this work in anticipation of the establishment of a service function.

3. ALTERNATIVES

There are 2 options that can be considered for adoption:

Option	Pros	Cons
<p>That the Board approve the GVRD taking on responsibility on behalf of municipalities to implement a mosquito management program to include working with regional health authorities to implement a communications program and to process and approve an appropriate by-law and budget for that purpose.</p>	<ul style="list-style-type: none"> a. The GVRD has a well established leadership role in WNV coordination. b. The GVRD has built strong linkages with municipalities and other jurisdictions. c. There is support from REAC & RAAC for coordination and communication. d. The approach will assure success through an integrated approach across the whole region in a cost effective manner. e. The approach is consistent with the RHAs view of their high level role vs their expectations of municipalities and the GVRD. f. The public will receive timely messages at a variety of levels of concern in a consistent approach from all municipalities. g. Will probably raise public confidence and reduce anxiety on this issue. 	<ul style="list-style-type: none"> a. Will require a budget to be allocated to the task. b. Some municipalities may perceive this still to be the role of other jurisdictions:
<p>That the Board decline establishing a mosquito management service function bylaw and to refer the communications role to the Province.</p>	<ul style="list-style-type: none"> a. No change in status quo b. Will not expand the role of GVRD into another function. 	<ul style="list-style-type: none"> a. May open public criticism that member municipalities did not adopt an obvious approach that would promote success in controlling West Nile Virus. b. Probable duplication of effort and expense. c. May increase public anxiety and lower confidence levels.

4. CONCLUSION

It is recommended that the GVRD Board approves the following recommendations:

1. That the GVRD Board direct staff to prepare a mosquito management service function establishing by-law and circulate to municipalities for their approval.
2. That the GVRD Board authorize the Chair to request that it be reviewed by the municipalities expeditiously for consent prior to being brought forward to the next session of the Board.
3. That the GVRD Board endorse the GVRD's participation in the formulation of coordinated communications with the Regional Health Authorities which involves the establishment of a budget to undertake the work program as described in this report and the implementation of the work program undertaken by communication specialists working closely with the REAC WNV Regional Work Group.
4. That the GVRD Board approve the establishment of a budget of \$120,000 from general government reserves for the implementation of this work in anticipation of the establishment of a service function.

APPENDIX

Overview of Background Related to WNV Communications

ATTACHMENTS

1. Letter from Chairman Hunt to Dr. John Blatherwick (VCHA) 08/10/2004
2. Letter from Chairman Hunt to Dr. Roland Guasparini (FHA) 08/10/2004
3. Fax letter from Domenic Losito (VCHA) 01/12/2004
4. Fax letter from Dr. Roland Guasparini (FHA) 01/12/2004
5. Fax letter from Dr. David Patrick (BC Centre for Disease Control) (nd)

APPENDIX: Overview of Background Related to WNV Communications

Communications Goals

Establish consistent, cost effective messaging across the GVRD and member municipalities regarding West Nile virus.

Communications Objectives

- a. Link the West Nile Virus Local Government Communication Strategy to the BC Centre for Disease Control (BCCDC) West Nile Virus Communication Plan;
- b. Ensure that the GVRD Board and Local government elected officials are notified proactively regarding important public announcements which may be made by the Regional Health Authorities and the BCCDC based on various scenarios;
- c. Ensure that the GVRD and local government staff are provided with advance notification on additional surveillance and or treatment or any other actions which may be required by RHA and BCCDC depending on various scenarios; and
- d. Create communication templates to provide regional district and or local government responses to various scenarios.

Strategies

- a. Create public information packages with standard timed message releases (under various scenarios)
- b. Establish effective communication linkages between various stakeholders (such as REAC Regional WNV Mosquito Working Group, RHA, BC CDC) through regular meetings

Target Audiences

- a. Elected officials (Regional Directors, Mayors, Councils and Boards).
- b. Regional and municipal administration, operation and front line staff.
- c. Residents and property owners.”

West Nile Virus Local Government Communication for Larval Control Matrix

SCENARIO	TACTIC	TARGET AUDIENCE	MESSAGE DETAILS
1. No positive	<ul style="list-style-type: none">• Staff education and awareness• Inform Council and/or Board of future plans• Website/newspaper articles/newsletter/tax notices• Pamphlet (e.g. focusing on wetland preservation)	<ul style="list-style-type: none">• Elected officials (Board & local governments)• Parks Commission• Staff• Residents	<ul style="list-style-type: none">• Provide specific information to hotline• Private properties (RHA responsibility)• Collaborative approach throughout region• Convey IPM approach (physical,

	<ul style="list-style-type: none"> • Dead crow pick-up line/Hotline • Outreach (e.g. exhibits) 	<ul style="list-style-type: none"> • Appointed advisory committees 	<ul style="list-style-type: none"> surveillance, pre-emptive larvaciding) • Personal protection information
2a. EARLY positive bird, mosquito and/or horse	<ul style="list-style-type: none"> • FAQ manual (for administrators and frontline staff) • Press release • Media spokespeople (contact person) • Establish early contact with govt. reps (convey 'order') <ul style="list-style-type: none"> ◦ Facilitate elected officials' updates 	<ul style="list-style-type: none"> • Elected officials (Board & local governments) • Parks Commission • Staff • Residents • Appointed advisory committees 	<ul style="list-style-type: none"> • Provide specific information to hotline • Private properties (RHA responsibility) • Collaborative approach throughout region • Convey IPM approach (physical, surveillance, pre-emptive larvaciding) • Personal protection information • Operational details <ul style="list-style-type: none"> ◦ e.g. CBs ◦ order ◦ notification ◦ larvacide
2b. LATE positive bird, mosquito and/or horse	<ul style="list-style-type: none"> • FAQ manual (for administrators and frontline staff) Press release • Media spokespeople (contact person) • Establish early contact with govt. reps (convey 'order') <ul style="list-style-type: none"> ◦ Facilitate elected officials' updates 	<ul style="list-style-type: none"> • Elected officials (Board & local governments) • Parks Commission • Staff • Residents • Appointed advisory committees 	<ul style="list-style-type: none"> • Provide specific information to hotline • Private properties (RHA responsibility) • Collaborative approach throughout region • Convey IPM approach (physical, surveillance, pre-emptive larvaciding) • Personal protection information • Operational details • Bridging to Adult control Communication Strategy (to be developed under RHA leadership)
3a. EARLY positive human (local, non-travel related)	<ul style="list-style-type: none"> • FAQ manual (for administrators and frontline staff)/direction from HA • Synchronization of press release with RHAs • Collaborative efforts in surveillance and treatment <ul style="list-style-type: none"> ◦ Extent and type of treatment 	<ul style="list-style-type: none"> • Elected officials (Board & local governments) • Parks Commission • Staff • Residents • Appointed advisory committees 	<ul style="list-style-type: none"> • Provide specific information to hotline • Private properties (RHA responsibility) • Collaborative approach throughout region • Convey IPM approach (physical, surveillance, pre-emptive larvaciding) • Personal protection information • Personal protection

			<ul style="list-style-type: none"> • No 100% prevention possible (can only reduce impact but cannot prevent it). • Treatment information • Bridging to Adult control Communication Strategy (to be developed under RHA leadership)
3b. LATE positive human (local, non-travel related)	<ul style="list-style-type: none"> • FAQ manual (for administrators and frontline staff) • Synchronization of press release with RHAs 	<ul style="list-style-type: none"> • Elected officials (Board & local governments) • Parks Commission • Staff • Residents • Appointed advisory committees 	<ul style="list-style-type: none"> • No 100% prevention possible (can only reduce impact but cannot prevent it). • Provide specific information to hotline • Private properties (RHA responsibility) • Collaborative approach throughout region • Convey IPM approach (physical, surveillance, pre-emptive larvaciding) • Personal protection information • Bridging to Adult control Communication Strategy (to be developed under RHA leadership)
3c. Positive human (travel related)	<ul style="list-style-type: none"> • FAQ manual (for administrators and frontline staff) • Synchronization of press release with RHAs 	<ul style="list-style-type: none"> • Elected officials (Board & local government) • Parks Commission • Staff 	<ul style="list-style-type: none"> • No action (refer to RHAs for communication)



Greater Vancouver Regional District
4330 Kingsway, Burnaby, British Columbia, Canada V5H 4G8

Parks Department
Telephone 604-432-6350
Fax 604-432-6296

October 8, 2004

File No.: PA04-02-MOS

Dr. John Blatherwick
Chief Medical Health Officer
Vancouver Coastal Health Authority
800 - 601 W Broadway
Vancouver, BC V5Z 4C2

Re: Coordination of West Nile Virus Communication in 2005

Dear Dr. Blatherwick:

I am writing to you and separately to your colleague, Dr. Roland Guasparini, to convey concerns being expressed by some of our member municipalities through the Regional Engineers Advisory Committee (REAC) about coordination of West Nile Virus communications.

As you know the GVRD Board approved a Regional Policy for a Standardized Preparedness and Management Approach for West Nile Virus (WNV) for Health Purposes. This policy has been very successful in mobilizing all the jurisdictions in the region to implement a common management approach to prepare for the eventual arrival of West Nile.

One of the many components of this policy included WNV communications and identified roles and timing. The main position of this section of the policy includes the following:

- “1. The Regional Health Authorities/Province should prepare public messages on:
 - private land owners responsibilities general WNV information;
 - strategies for provincial parks;
 - surveillance results;
 - treatment including personal protection, source reduction and adaptive management.
2. The GVRD should be requested to utilize its communication and education channels to assist the Regional Health Authorities to deliver the public messages across the Lower Mainland.
3. Each jurisdiction may supplement the general regional and provincial communication messages with messaging specific to their needs including, where applicable, private land owners.”

Last Spring, in the absence of any existing regional WNV communication coordination initiatives the REAC Regional WNV Mosquito Working Group began to explore with the GVRD to extend and broaden its mandate and function to new coordination responsibilities. Significant

needs have been expressed by a number of our member municipalities. As a result the GVRD has opened up a number of communication channels of communication on West Nile issues over the past summer and contributed a significant initiative to progressing the implementation of the regional strategy.

We do not possess the infrastructure or resources to take on a new function for coordination of West Nile Virus communications. However given the public health nature of this issue we feel it more appropriate that the communication coordination needs being expressed by our member municipalities would be better served by the Regional Health Authorities and the British Columbia Centre for Disease Control. Given your ongoing responsibilities with management of outbreaks of disease your efficiencies and effectiveness makes your sector the best choice for a coordinating role.

We will continue to support and participate in these initiatives but will look to your agency for the regional leadership in public epidemic disease communications. I am confident that our continuing combined efforts will carry us successfully through 2005 and the expected arrival of West Nile in the region.

Yours truly,



J. Marvin Hunt
Chair, GVRD Board of Directors
JM/HJM



Greater Vancouver Regional District
4330 Kingsway, Burnaby, British Columbia, Canada V5H 4G8

Parks Department
Telephone 604-432-6350
Fax 604-432-6296

October 8, 2004

File No.: PA04-02-MOS

Dr. Roland Guasparini
Chief Medical Health Officer
Fraser Health Authority
300 – 10233 153 Street
Surrey, BC V3R 0Z7

Re: Coordination of West Nile Virus Communication in 2005

Dear Dr. Guasparini:

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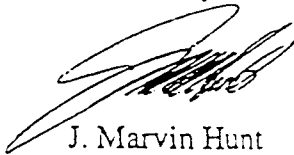
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Yours truly,



J. Marvin Hunt
Chair, GVRD Board of Directors
JM/HMM

cc: Chair, Regional Engineers Advisory Committee



fraserhealth Better health.
Part in health care.

From the Office of the
Medical Health Officer

December 1st, 2004

Chairman
Regional Engineers' Advisory Committee
Greater Vancouver Regional District
4330 Kingsway
Burnaby, BC V5H 4G8

Re: *Communications Planning for Larval Mosquito Management for Control of the West Nile Virus in the Greater Vancouver Region—Recommendation to the Regional Engineers' Advisory Committee*

The Fraser Health Medical Health Officers strongly support GVRD involvement in a coordinated communications strategy regarding West Nile Virus (WNV) preparedness and management. Participation of the GVRD in formulation of coordinated communications with its member municipalities is needed to augment the health messages communicated through the Ministry of Health, the BC Centre for Disease Control, and the Fraser and Vancouver Coastal Health Authorities.

Representatives of Municipal Governments have identified strategic messaging and operational communications as extremely important to local governments. These are not covered in our health messaging and communication strategies. Our health authority communications are neither designed nor intended to deal with the needed local government field-specific and operational types of communications.

The role taken by the GVRD has been crucial in coordinating the development of the *Regional Policy for a Standardized Preparedness and Management Approach to WNV for Health Purposes: Mosquito Surveillance Education and Larval Control*. Communicating these developing strategies is a key to being prepared, and while health has created good messages and a strategy for delivering its messages to the public, there is a need to provide seamless delivery of timely, accurate information at the local operational level.

A significant level of preparedness for WNV has been achieved in the Lower Mainland, something for which the GVRD should take significant credit. However, without an operationally strong, integrated communications strategy, we risk having constituents who are unaware of, or misunderstand, the comprehensive WNV planning and activities in place and are, therefore, susceptible to misinformation. Further, preparedness for communication is important such that, in the event of identification of WNV infection in mosquitoes, birds or people, all agencies are able to communicate with our constituents in an accurate and consistent manner.

Fraser Health looks forward to working with the GVRD in the development of a strong, integrated communication plan that will be of benefit to all levels of government and our constituents in preparing for the arrival of WNV and mitigating its effect on human health.

Sincerely,

Dr. Roland Guassapini
Chief Medical Health Officer
Fraser Health

December 1, 2004

Chairperson
Regional Engineers Advisory Committee
Greater Vancouver Regional District
Burnaby BC Canada

FAXED TO:

Dear John:

*RE: VCH Support for a Jointly Coordinated Communication Strategy
for WNV Operational Communications*

I am writing on behalf of Vancouver Coastal Health and Dr. Blatherwick to confirm our support for a joint GVRD & Regional Health Authority Communications Coordination strategy for West Nile Virus Operational Communications. We are committed to working closely with our local government partners, the GVRD, BCCDC and the Ministry of Health to ensure the most efficient and effective use of communications resources in this important area.

We understand that the intent of this coordinated strategy and the GVRD's involvement is to support and strengthen, not replace the communications efforts undertaken by the Regional Health Authorities, BCCDC and the Ministry of Health. As indicated in previous WNV planning documents, the RHAs, BCCDC and Ministry clearly must take the lead in the public communications of the risks of WNV and risk reduction efforts. The purpose of this joint strategy would be to address operational aspects of WNV prevention and protection, not messaging around health protection or treatment.

It makes eminent sense to coordinate as best we can these efforts to keep our constituents well-apprised of the activities we are jointly undertaking to reduce the risk of WNV. To reiterate, what is being recommended to you by your GVRD WNV Mosquito Coordinator has our strong support.

Yours truly,



Domenic Losito, MBA, REHO
Regional Director, Health Protection

cc: Dr. John Blatherwick
John MacFarlane
Randy Heilbron



BC Centre for Disease Control
 AN AGENCY OF THE PROVINCIAL HEALTH SERVICES AUTHORITY

Chairman,
 Regional Engineers Advisory Committee,
 Greater Vancouver Regional District,
 4330 Kingsway,
 Burnaby, BC
 V5H 4G8

Subject: Communications Plan for West Nile virus.

The British Columbia Centre for Disease Control (BCCDC) coordinates disease surveillance and timely public communications around West Nile Virus in conjunction with Regional Health Authorities and the BC Ministry of Health Services. We have a communication plan established for the arrival of West Nile virus in British Columbia. Our goal is to keep the public well informed and educated about the region-specific risk of West Nile virus and promote actions to prevent the spread of this disease to humans. We report surveillance, laboratory testing, and self-protection measures in a timely manner through various mechanisms that position BCCDC as a credible and reliable source of information.

Our provincial communications are directed both to the general public and to key stakeholder representatives in interested groups, including regional districts and municipal governments. There is an expectation that this information is then further disseminated within these organizations to ensure a coordinated response. Our provincial communications are not intended be able to answer field specific, operational questions. For this reason we strongly support the formulation of a coordinated communications plan by the GVRD.

Such a plan would strengthen links between government, Fraser and Vancouver Coastal Health Authorities and the BCCDC. It would also address specific operational details that may differ across regions of the lower mainland and ensure that training of front line staff is done in a consistent, coordinated manner. Both politicians and administrators should know about a positive test for WNV in their district before the media. A coordinated WNV communications plan for the GVRD would enable better communication between health and municipal officials and ensure internal dissemination to those who need to know.

Sincerely,

Dr. David Patrick
 Director, Epidemiology Services

Sally Greenwood
 Director, Communications

