The Maryland Health Care Facilities Pest Management Survey followed up on the Healthy Hospitals Report with a voluntary survey of state facilities which gives us a snapshot of pest management in Maryland’s health care sector. Details of the survey and the results are included in the report.

Surveys were mailed to 56 hospitals and 140 elder care facilities, with responses received from 22% of those contacted. 60% of medical hospitals responded to the survey. Responses were received from across the state, covering urban, suburban, and rural facilities. The hospital facilities ranged from 60 to 375 beds.

Here’s the headline: While nearly half of the survey respondents favored prevention through integrated pest management at their facility, most contract pest service vendors still rely unnecessarily on toxic pesticides for pest control. Thankfully there are exceptions – including the IPM pilot facilities that we are working with and some of their vendors that are leading the way for safer pest management in Maryland hospitals and elder care facilities.

The survey revealed an overall reliance on toxic pesticides as a first line of pest management. Nearly all facilities, 93%, contract out for structural pest control. The survey found that facilities typically rely on the expertise of their vendor with limited oversight or consultation on pest control approaches and chemical pesticides used in the facility.

Overall, 19 pesticides were identified as being used inside Maryland health and elder care facilities. 11 of these are linked to cancer, 10 are associated with neurological effects, 10 are associated with reproductive effects, 5 cause birth defects or developmental effects, 12 are sensitizers or irritants, 8 cause liver or kidney damage, and 4 are suspected endocrine disruptors. While most stated that pesticides are applied “as needed”, the survey indicates that many are used as a first line of defense.

On the commercial vendor side, the survey indicates that all too often companies claim to provide an IPM service when in fact they do not. While most respondents described or at least labeled their pest program as IPM, the survey tells us that their actual programs do not give priority to the non-chemical preventive measures and controls that are the backbone of safer, green pest management. In fact 32% of respondents stated that pesticides are applied at their facilities on a schedule. In IPM, pesticides are not applied preventively on a schedule.

The survey also found inadequate disclosure of pesticide use to staff, patients, residents, and visitors. Only 60% of the facilities surveyed provide notification of pesticide use to staff, and only a quarter notify patients of pesticide applications.

In sum, the survey data provides us with a view into pest management practices and habits and identifies the critical need for major shifts in pest management priorities at Maryland’s health care facilities.