

# **Tuberculosis Control Plan Policy**

## **Tuberculosis Control Plan For Polk County Employees**

**Justification/Purpose:** To meet the requirements of the Department of Occupational Safety and Health for health care settings, correctional institutions and shelters to have a Tuberculosis (TB) Control Plan (OSHA General Duty Clause Section 5(a)(1)).

**Applicability:** All staff determined to be at higher risk for exposure to TB at the Polk County Health Department (PCHD); Polk County Jail, Polk County Community & Family Services' Juvenile Detention and Shelter Services (CFYS); Polk County Medical Examiner; and any other Polk County employees who have been deemed by Polk County Risk Management, after consultation with the Human Resources Department.

### **Implementation:**

#### **Baseline Analysis for New Hires and Internal Transferring Employees**

Prior to the hiring of a new employee, said department will schedule an appointment for the employee with the Polk County Health Department as soon as possible for a medical history, assessment and screening relating to TB. The official medical record will be maintained at the PCHD. New hires or transferring employees will receive a TB skin test.

If a new hire or transferring employee has been screened in the past twelve (12) months, said employee will be required to provide a copy of medical documentation for review and recording in the PCHD medical records.

Prospective new hires who have a positive TB skin test will be required to bring the test results (to be provided by PCHD) to a health care provider (physician, nurse practitioner, physician's assistant) of their choice, at their expense, for a chest x-ray and thorough medical evaluation within 72 hours of the skin test reading. If active TB disease is excluded as a diagnosis by their primary care provider, the primary care provider may refer employee to PCHD Communicable Disease Team for Latent TB Infection therapy.

Prospective new hires or transferring employees with a history of a positive TB skin test result are required to present proof that he/she is currently free of active disease. Such proof may include:

a) Physician documentation of a negative chest x-ray at the time the TB skin test was first read positive, accompanied by physician certification that the person is currently free of signs and symptoms of active TB, **OR**

b) In the absence of a negative chest X-ray at the time the TB skin test was first read as positive, a chest x-ray at any time prior to hire or transfer provided it is after the TB skin test was first noted to be positive accompanied by medical certification that the person is currently free of signs and symptoms of active TB.

c) Medical certification of completion of a course of prophylactic therapy for latent TB infection, or completion of therapy for active disease in the past and that the person currently remains symptom free.

### **On-going Employee TB Screening**

All departments specifically listed above and other employees as determined by Risk Management to be in a high risk position, who have a history of negative TB screening result, will receive annual TB skin test conducted by the PCHD or CFYS nurse. Only PCHD nurses or CFYS nurse are authorized to read the results. Results read by a non-PCHD nurse will be considered *invalid* and a repeat skin test will be required.

Employees who have a history of a positive TB skin test result, regardless of whether or not they completed treatment for latent TB infection, are exempt from tuberculosis skin test and rather will be evaluated on an annual basis by the PCHD using the TB Annual Symptom Review questionnaire. Annual chest x-rays are unnecessary for the follow-up evaluation of a latently infected person. Employees who are found to have symptoms suggestive of TB will not return to the workplace until their primary care provider has excluded a diagnosis of active TB disease. Employees will need to return with a copy of their chest x-ray and note from primary care provider that active TB disease has been excluded and present to Human Resources prior to returning to work. Human Resources will forward a copy of the documents to the PCHD clinic supervisor.

Employees who have a positive TB skin test during the annual screening, or an internal transfer of an employee from a low risk work setting to one of the above identified departments, will be required to bring the test results (to be provided by PCHD) to a primary care provider (physician, nurse practitioner, physician's assistant) of their choice within 72 hours of the skin test interpretation for a medical evaluation, chest x-ray and possible prophylaxis. The cost of the medical evaluation, chest x-ray, and/or possible prophylaxis will be covered by the employee's health insurance and the department/office for which the employee is employed will pay any co-pay or out of pocket expense for the testing.

Employees who are found to have symptoms suggestive of TB will not return to the workplace until the primary care provider has excluded a diagnosis of active TB disease. Employees who are asymptomatic will not return to the workplace until the primary care provider has excluded a diagnosis of active TB disease.

Employees who have a positive TB skin test and have been determined by their primary care provider to have a diagnosis of suspect TB will receive further medical evaluation, x-rays, laboratories and prophylaxis as necessary. Employees with a preliminary diagnosis of suspect or active TB will immediately leave the workplace and will not return to the workplace until a

definitive diagnosis is made and a primary care provider provides documentation allowing for return to work. This documentation must be provided to Human Resources. Human Resources will forward a copy of this to the PCHD clinic supervisor.

Employees with active TB will receive further medical evaluation, x-rays, laboratories, prophylaxis, and any appropriate specialist referrals as determined by their primary care provider. PCHD shall determine if further appropriate actions appear necessary under Chapter 37 of the Polk County Board of Health Rules and Regulations for Quarantine and Isolation of Persons or Animals with Communicable Diseases and make any such recommendations to the Polk County Board of Health.

TB skin test results and TB Annual Symptom Review will be maintained in the PCHD Electronic Medical Record.

### **Change in High Risk Environment**

In conjunction with Risk Management, the PCHD, Polk County Sheriff and Community & Family Youth Services and Polk County Medical Examiner will periodically assess their department's risk status through evaluation of the characteristics of the populations served and conversion rates of employees. More frequent screenings could also be recommended based on substantially higher conversion rates or when evidence of ongoing transmission is detected.

#### **Sources:**

MMWR, July 7, 2006, Prevention and Control of Tuberculosis in Correction and Detention Facilities Recommendations from CDC and MMWR, December 30, 2005, Guidelines for Preventing the Transmission of Mycobacterium tuberculosis in Health Care Settings.

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