

Standard Operating Procedures

Policy Name: Tuberculosis Screening of Correctional Personnel

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Authority:	Originating Division:	Access Listing:
Commissioner	Health Services Division	Level I: All Access
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I. <u>Introduction and Summary</u>:

All Georgia Department of Corrections (GDC) employees, contract employees, and Students/Interns working at GDC sites who have a risk of exposure to tuberculosis, will be screened for tuberculosis (TB) at the time of hire or contract initiation, and then annually thereafter and/or following exposure to a suspected or confirmed case of TB. The Responsible Health Authority will ensure all current and new employees read this standard operating procedure (SOP) and sign the acknowledgement form (Attachment 1). A copy of the completed acknowledgement form will be placed in each employee's local personnel file. The original acknowledgement form will be forwarded to Corrections Human Resources Management (CHRM) for placement into the official personnel file. This procedure is applicable to all GDC employees, contract vendors, private or county prison employees regardless of work location or job title, who have a risk of exposure to tuberculosis.

II. Authority:

- A. GDC SOPs: 104.39.06 Sick Leave, 507.03.07 Treatment of Employees by Health Care Personnel, 507.03.11 Health Related Training for Correctional Officers, 507.03.14 Training for Health Care and Correctional Personnel Regarding Communicable Diseases, 507.04.55 Contact Investigation Following the Identification of a TB Suspected or Confirmed Case, and 507.04.70 Infection Control Plan; and
- B. Georgia Department of Corrections, Office of Health Services Infection Control Manual:
- C. Centers for Disease Control and Prevention (CDC): Prevention and Control of Tuberculosis in Correctional Facilities. Vol. 45, No. RR-8;
- D. Centers for Disease Control and Prevention (CDC): Controlling TB in Correctional Facilities;
- E. NCCHC 2018 Adult Standards: P-14 and P-15; and



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G. ACA Standards: 5-ACI-6B-05, 5-ACI-1C-15, 4-ALDF-4D-06; 4-ALDF-7B-02; and 4-ALDF-7B-04.

III. <u>Definitions</u>:

Student/Intern - a person enrolled in a school, college or university participating in learning activities at any GDC work location.

IV. Statement of Policy and Applicable Procedures:

- A. New Employees with Previously Negative or Unknown TB Skin Test Results or Previous BCG Vaccination:
 - 1. At the time of employment, tuberculin skin-test screening will be mandatory for all employees who do not have a documented history of a positive skin test.
 - 2. For non-security employees, the initial tuberculin skin-test screening, which includes training regarding communicable diseases (P54-0006-01 Infectious Disease Employee Training Record), will be made available during pre-service orientation and prior to job assignment. The interview and skin test will be made available at no cost to the employee.
 - 3. The facility health care staff, local health department or personal physician or health care provider may perform tuberculin skin testing.
 - 4. The employee must submit suitable documentation that verifies negative results to their assigned facility personnel office. NOTE: Any security employee whose TB test result was negative on their pre-employment physical can use a copy of the TB test results as documentation for a negative skin test. The infectious disease nurse will monitor and track compliance with annual TB skin testing.
 - 5. Tuberculin skin testing is not contraindicated for persons who have received the Bacillus of Calmette and Guerin (BCG) vaccine or pregnant/lactating women, and skin testing should be performed.



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- 6. TB skin test results will be provided to the assigned facility personnel office. The information will be recorded onto the Employee Mantoux Test Record (P54-0008-01), which will be maintained in a confidential manner by the facility personnel staff and collaborate with the responsible health authority for coordinating infection control activities at the facility. The Employee Mantoux Test Record form is located on Captiva in the Health Services Document Library:
 - a. A copy of the Employee Mantoux Test Record, containing the most recent skin test results, should be placed into the employee health record maintained by the facility personnel office. This will ensure that the most recent skin test results are available should the employee transfer to another facility.
 - b. Refer to the procedure for maintaining and handling the employee health record, as described in the Employee Health section of the <u>Infection Control Manual</u>, page 4.
 - c. When an employee transfers to another facility, the facility personnel staff will forward the employee's employee health record to the new facility.
 - d. When an employee terminates from the facility, the facility personnel staff will forward the employee's employee health record to Corrections Human Resources Management (CHRM), where the information will be placed into the official employee file.
- B. New Employees with a Prior History of a Positive TB Skin Test, Previous Tuberculosis or Severe Reaction to a TB Skin Test:
 - 1. The local personnel office will maintain a copy of the pre-employment TB results.
 - 2. New employees with a documented history of a positive skin-test result (TB infection), a documented history of TB disease, or a reported history of a severe



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necrotic reaction to tuberculin will be exempt from routine tuberculin skin-test screening.

- 3. These employees should be screened for symptoms of TB by facility health care staff and the information documented on the Employee Mantoux Test Record (P54-0008-01). Documentation of previous TB skin-test results and a recent (less than 1 year from the employee's date of hire) chest x-ray report, which indicates the employee is free of active disease should be provided to the facility personnel office.
- 4. If symptoms compatible with TB are present (cough, fever, weight loss, night sweats, etc.), the employee should be allowed to use accumulated leave or be placed on authorized leave without pay until a diagnosis of active TB is ruled out (negative) or confirmed (positive). If a diagnosis of active TB is established (positive), the employee will not be permitted to return to work until clinical treatment has been initiated and medical certification is presented which confirms the individual is no longer infectious.

C. Students/Interns:

- 1. Students/Interns engaged in an on-site learning experience will be required to provide evidence of current TB skin test status. Only one (1) negative TB test result is required for Students/Interns.
- 2. The local personnel office must immediately notify the medical unit of any Students/Interns that begin work at their site.
- 3. The Responsible Health Authority or designee serving as the student's preceptor will be responsible for verifying the Student's/Intern's TB skin test status. Verification may be in the form of a copy of the original TB skin test result, or recent (within one (1) year of the Student's/Intern's learning experience at the site) negative CXR report for someone previously TB skin test positive.



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- 4. The Student/Intern will be expected to participate in contact investigation procedures if exposed to someone suspected or confirmed to have active TB.
- 5. Any Student/Intern who refuses to comply with the above requirements will not be permitted to perform their learning experience with the department.

D. Scheduling TB Skin Test for Correctional Employees:

- 1. Employees working in all facilities that house GDC offenders will receive TB skin testing at their respective facilities.
- 2. The facility personnel staff at each facility will establish a TB skin-testing schedule in coordination with the Responsible Health Authority that will be made available to supervisors of eligible correctional employees (Wardens, Superintendents, Regional Directors, etc.).
- 3. It is suggested that at a minimum a specific month out of each year be routinely set aside for TB skin testing in order to minimize disruption of other clinic activities.

E. Interpreting TB Skin-Test Results:

- 1. The employee that tests negative will be considered non-infected and will then be retested annually or more often, if necessary, based upon the system risk assessment; in response to a contact investigation; or as clinically indicated.
- 2. Employees who have a positive TB skin-test result upon initial testing should be promptly evaluated for active TB:
 - a. If no symptoms of TB are present, the Responsible Health Authority or designee will immediately refer the employee to the facility personnel office for further evaluation with the local health department or personal physician for evaluation (which includes a chest x-ray). The employee must provide documentation of a chest x-ray report, which excludes active



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TB, in order to return to work. The employee will be allowed to use any accumulated leave or be placed on authorized leave without pay.

- b. If tuberculosis disease is excluded (negative), the employee would not be considered infectious, but should be considered for preventive therapy and referred to the local health department or personal physician for ongoing evaluation and monitoring.
- c. The Responsible Health Authority or designee will immediately refer the employee with symptoms of TB to facility personnel office for further evaluation with the local health department or personal physician to confirm the diagnosis of active TB (positive) or to rule out active TB (negative). The employee will be allowed to use any accumulated leave or be placed on authorized leave without pay. If a diagnosis of active TB is established, the employee may not return to work until treatment is initiated, and it has been clinically determined that the employee is no longer infectious.
- d. New employees whose TB skin-test results are positive are presumed to be infected prior to employment and will not be eligible for Worker's Compensation benefits related to the development of tuberculosis.

F. TB Skin-test Logs and Data Collection:

- 1. The facility personnel office will maintain an Employee Mantoux Test Record (P54-0008-01), which will contain skin testing information for their employees. This document will also serve as the Employee PPD Tracking log.
- 2. The facility personnel office will develop and maintain a database for recalling employees due for TB skin-testing.



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- G. Periodic Tuberculin Skin-Testing of Employees:
 - 1. Employees must be skin tested annually or more frequently if required by CDC guidelines.
 - 2. Employees who are skin tested will be provided education regarding the meaning of the test and test results.
 - 3. Employees who have a positive TB skin-test result (new conversion) following negative skin-test results will be screened for symptoms of TB by medical during annual testing and results provided to facility personnel office:
 - a. If no symptoms of TB are present, GDC employees will be directed by the facility personnel office to complete an examination to rule out active TB by a health provider on the state Workers' Compensation Panel of Physicians. The facility personnel office must ensure that this examination/treatment information is reported immediately (within 24 hours of the employer's knowledge) to the state Workers' Compensation Risk Management. Contractors will follow their workers' compensation rules.
 - b. GDC employees with symptoms of active TB (i.e., cough, fever, weight loss, night sweats, etc.) or suspected of having active TB will be directed by the facility personnel office to complete an examination by a health provider on the state Workers' Compensation Panel of Physicians to rule out or confirm active TB. The facility personnel office must ensure that this examination/treatment information is reported immediately (within 24 hours of the employer's knowledge) to the state Workers' Compensation Risk Management. The employee may not return to work until a medical certification is received, indicating that the individual does not have infectious, pulmonary TB. The employee will be permitted use of all available sick and annual leave time, as deemed necessary under the circumstances. If active TB is confirmed, the employee may request state



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Workers' Compensation benefits in lieu of using accumulated leave. Contractors will follow their workers' compensation rules.

4. All correctional employees with suspected or confirmed TB disease will be reported to the Department of Public Health by the facility personnel office.

H. Employees Refusing TB Skin Testing:

- 1. TB prevention and control in correctional facilities is critical to the health of employees, offenders, and the general public. The CDC has established that TB skin-testing should be mandatory for employees. Therefore, employees must be tested in accordance with CDC recommendations.
- 2. Employees refusing skin-testing following education and counseling will undergo progressive discipline up to and including termination if necessary. Employees will be sent home without pay and will not be permitted to return to the facility until skin testing has been performed and results obtained.
- I. TB Skin-Testing of Correctional Employees and Students/Interns, Following Identification of a Suspected or Confirmed TB case:
 - 1. Follow the procedures documented in SOP 507.04.55 (Contact Investigation Following the Identification of a TB Suspect or Confirmed Case) for further instructions.

V. Attachments:

Attachment 1: Employee's Acknowledgement Statement

VI. Record Retention of Forms Relevant to this Policy:

Upon completion of Attachment 1, a copy shall be placed in each employee's local personnel file. The original acknowledgement form will be forwarded to Corrections Human Resources Management (CHRM) for placement in the employee's official personnel file.