

**Charleston/Dorchester Community
Mental Health Center**

INFECTION CONTROL POLICY FOR TUBERCULOSIS

**(In Accordance with Directive #709-94
Tuberculosis: Prevention, Treatment and Control)**

I. Purpose: To establish uniform guidelines for the screening of DMH employees for early detection and treatment of tuberculosis. Further, employees will be educated on the symptoms and early recognition of the illness, and instructed to refer consumers suspected of having the illness to the appropriate medical service.

II. Policy: The Charleston/Dorchester Community Mental Health Center will perform the following procedures to help in the prevention, treatment and control of tuberculosis.

III. Procedures:

A. Education:

1. All DMH Permanent and Temporary Employees will be trained during orientation, and annually thereafter, to have a basic understanding of the illness, to recognize the symptoms, and to appreciate why early detection and treatment of tuberculosis is important.
2. Employees will instruct consumers demonstrating symptoms of the illness to report to the County Health Department or to their private physician. In addition, patients will be instructed to decrease the risk of transmitting the suspected illness, by such measures as covering their mouths and noses when coughing or sneezing.

B. Employee Screening:

1. **Pre-Employment:** A two-step PPD Mantoux skin test shall be administered prior to commencement of work unless a documented skin test has been performed within three months of employment. Employees transferring from one DMH facility to another shall provide copies of the most recent PPD test.

2. Employees:

- a. On an annual basis, all DMH Permanent and Temporary Employees will be screened by a registered nurse or physician.
 - An employee with a history of non-reactive PPD will be skin tested annually at a designated mental health center site.
 - An employee who doesn't know the status of previous skin tests will receive a test dose according to the manufacturer's instructions.

 - An employee with a previously documented history of a positive PPD shall require documentation of a negative chest x-ray performed after the positive PPD. The nurse will document the information, which will then be filed at the main administrative office of the mental health center.

 - Employees previously vaccinated with the BCG (Bacillus of Calmette and Guerin Vaccine) will be tested in the same manner as other employees. A reactive skin test may represent a false positive (falsely positive due to the BCG vaccine) or a true positive (positive to the PPD). Employees will be referred to the Carolina Center of Occupational Health (554-1029), the County Health Department, or to their personal physician if testing is positive.

- b. Testing Results:
 - If the skin test is negative (no reaction), the employee does not have the illness.
 - An employee with a previous history of a positive (reactive) test and required documentation will not have any further skin tests; because a person with a positive test will always test positive *-even if they are no longer infected tuberculosis bacterium, io i.e. they have been appropriately treated*

 - **Employees with skin test that is ~ positive (reactive) shall be referred to the Carolina Center for Occupational Health (554-1029), to the County Health Department, or to their personal physician for further evaluation and treatment.**

- The physician will assess the patient for sign of active disease, following guidelines set forth by the Center for Disease Control.
- Employees may continue treatment if it is determined Preventive treatment is indicated.
- Employees who are determined to have ~ tuberculosis are contagious, and must be appropriately treated and cleared by their physician (in consultation with DHEC) *prior to returning to work*. Further, contact investigation shall be conducted according to DHEC protocol to attempt to discover the source of the illness, and to treat those individuals accordingly.

IV. Record Keeping and Reporting.

- a. Records of Employee Screening and Testing shall be maintained by the Administration Office of the Mental Health Center.
- b. All reactive tuberculin test results and suspected or diagnosed cases of tuberculosis shall be reported to the facility Nursing Coordinator immediately.
- c. In accordance with the State Statute 44-31-10, all known or suspected cases of tuberculosis shall be reported to the Executive Director, the Medical Director, and DHEC by the Nursing Coordinator.
- d. TB infection (positive TB Mantoux skin test) and TB disease in employees are both recordable on the OSHA 200 log, with the exception of results of pre-employment screening. The Nursing Coordinator is responsible for filing a report and forwarding it to the Personnel Office.
- e. A P-16 'Report of Injury' form shall be completed and processed on all employee cases of active tuberculosis. This will be the responsibility of the employee's direct supervisor.

V. References: (Taken from Directive #790-94)

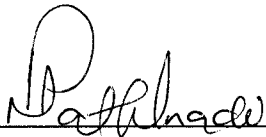
Federal Register: "Draft Guidelines for Preventing the Transmission of Tuberculosis in Health- Care Facilities, Second Edition;" Vo158, No.195, dated October 12, 1993.

South Carolina Department of Labor, Licensing and Regulation: "Enforcement Policy and Procedure for Occupational Exposure to Tuberculosis", Memorandum 94-X- 93, dated February 25, 1994.

CDC: "Guidelines for Preventing the Transmission of Tuberculosis in Health-Care Settings, with Special Focus on HIV -Related Issues", MMWR, dated December 7, 1990.

CDC: "Core Curriculum on Tuberculosis", Second Edition, dated April 1991.

DHEC: South Carolina Department of Health and Environmental Control, Regulation Number 61- 17, Standards for Licensing Nursing Homes, dated February 28, 1992.



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