I. **POLICY:**

A. 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, and then periodically, as deemed necessary (i.e., annually thereafter and/or following exposure to a suspected or confirmed case of TB).

B. Appointing Authorities will ensure all current and new employees read this standard operating procedure 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 Central Personnel Administration (CPA) for placement into the official personnel file.

II. **APPLICABILITY:**

This procedure is applicable to all GDC employees, regardless of work location (prison, boot camp, center, probation office, or central office location) or job title, who have a risk of exposure to tuberculosis.

III. **RELATED DIRECTIVES:**


G. GDC SOP:
   1. IVO10-0005 [Sick Leave]
   2. VH04-0007 [Treatment of Employees by Health Care Personnel]
   3. VH05-0003 [Health Related Training for Correctional Officers]
   4. VH36-0004 [Contact Investigation Following the Identification of a TB Suspect or Confirmed Case]
   5. VH54-0001 [Infection Control Plan]
   6. VH54-0006 [Training of Health and Correctional Personnel Regarding Communicable Diseases]

IV. DEFINITIONS:

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

V. ATTACHMENTS:

Attachment 1 - Employee’s Acknowledgement Statement

VI. PROCEDURE:

A. New Employees with Previously Negative or Unknown TB Skin Test Results or Previous BCG Vaccination

   1. At the time of employment, two-step Mantoux 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 (1st skin test), which includes training regarding communicable diseases, will be made available after pre-service orientation and within 10 working days of the initial assignment.
The interview and skin test will be made available at no cost to the employee. The second of the Two-Step Mantoux skin tests should be received within 3 weeks of employment.

3. The facility health care staff, local health department or personal physician or health care provider may perform tuberculin skin testing.

4. Employees who had skin testing performed within the twelve months prior to employment may count such testing as the first of their two required skin tests. The employee must submit suitable documentation that verifies negative results to the local personnel office. NOTE: Any Security employee (Correctional Officer, Probation Officer, Surveillance Officer, etc.) 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 local personnel office will be responsible for providing the local medical unit with a copy of the TB test results on all security employees. Probation Region Offices and Diversion Centers will be responsible for sending copies of TB test results to the assigned site outlined in VI.E.2. The second of the Two-Step Mantoux skin tests should be received within 3 weeks of employment. The second test may be received in conjunction with the training on communicable diseases, which is required within 10 working days of initial assignment.

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.

6. TB skin test results will be provided to the Health Authority at the facility. The information will be recorded onto the Employee Mantoux Test Record (P54-0008-01), which will be maintained in a confidential manner by the health care staff coordinating infection control activities at the facility. The Employee Mantoux Test Record form is located in the TB section of the Infection Control Manual, issued by the Office of Health Services.

   a. A copy of the Employee Mantoux Test Record, containing the most recent skin test results, should be placed into the OSHA Health Record. This will ensure that the most recent skin test
results are available should the employee transfer to another facility.

b. Once the Employee Mantoux Test Record is completely filled out, this original should be filed in the OSHA Health Record. The copy of previous skin test results should then be removed and discarded in a confidential manner (i.e., shred).

c. Refer to the procedure for maintaining and handling the OSHA Health Record, as described in the Employee Health section of the Infection Control Manual, page 4.

d. When an employee transfers to another facility, the health care staff coordinating infection control activities will forward the employee’s OSHA Health Record to the new facility.

e. When an employee terminates from the facility, the health care staff coordinating infection control activities will forward the employee’s OSHA Health Record to Central Personnel Administration, where the information will be placed into the official medical file.

7. At the time of hire, employees assigned to field probation offices will receive tuberculin skin test screening, unless they submit a documented history of a positive skin test or provide proof of a prior negative skin test. Employees will receive skin test screening, which includes training regarding communicable diseases, within 10 working days of their initial assignment. However, since probation employees do not necessarily go to training within their first 10 days of employment, they must be sent to one of the designated facilities listed in the SOP to receive required training and skin testing. All employees, those who submitted proof of a negative result and those who received their first tuberculin test at the time of hire, are required to receive training on communicable diseases within 10 working days of their initial assignment and should have the second tuberculin test completed within 3 weeks of hire. In each circuit, the Chief Probation Officer or designee will coordinate this process.
NOTE: This includes all employees - law enforcement and support staff.

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 forward a copy of the pre-employment TB results to the local medical unit.

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 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 Health Authority.

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. Acceptable documentation must include, at a minimum, three consecutive reports of "negative" sputum smears for acid-fast bacilli.

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 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 Health Services Administrator, Nurse Manager 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 year of the student's/intern's learning experience at the site) negative CXR report for someone previously TB skin test positive.

4. In a probation office, the Chief Probation officer or designee will verify and maintain confidential records of the student's/intern’s skin test status.

5. The student/intern will be expected to participate in contact investigation procedures if exposed to someone suspected or confirmed to have active TB.

6. 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 and Probation Employees.

1. Employees working in State Prisons, Private Prisons, Boot Camps and Transitional Centers where inmate/probationer health care is provided will receive TB skin testing at their respective facilities.

2. Probation Division employees, which includes Diversion Center employees, will receive TB skin testing at designated Probation Detention Centers or State Facilities listed below:
   a. Southeast Probation Detention Center
      1) Eastern Circuit
      2) Brunswick Circuit
      3) Atlantic Circuit
   b. Women's Probation Detention Center
      1) Ogeechee Circuit
      2) Savannah Diversion Center
   c. Central Probation Detention Center
1) Dublin Circuit
2) Oconee Circuit
3) Cordele Circuit
d. Treutlen Boot Camp
   1) Middle Circuit
e. Augusta State Medical Prison (ASMP)
   1) Augusta Circuit
   2) Augusta Diversion Center
f. Lee State Prison
   1) Dougherty Circuit
   2) Southwestern Circuit
   3) Albany Diversion Center
g. Southwest Probation Detention Center
   1) Tifton Circuit
   2) Southern Circuit
   3) Alapaha Circuit
   4) Thomasville Diversion Center
h. Ware State Prison
   1) Waycross Circuit
   2) Waycross Diversion Center
i. Western Probation Detention Center
   1) Chatahoochee Circuit
   2) Macon Circuit
   3) Houston Circuit
4) Macon Diversion Center

5) Columbus Diversion Center

j. Calhoun State Prison

   1) Pataula Circuit
   2) South Georgia Circuit

k. Putnam State Prison

   1) Ocmulgee Circuit

l. Rockdale-DeKalb Probation Detention Center

   1) Alcovy Circuit
   2) Gwinnett Circuit
   3) Rockdale Circuit
   4) Jimmy Helms Diversion Center
   5) Stone Mountain Circuit

m. J. C. Larmore Probation Detention Center

   1) Atlanta Circuit

n. West Central State Prison

   1) Towaliga Circuit
   2) Griffin Circuit
   3) Flint Circuit
   4) Coweta Circuit
   5) Clayton Circuit
   6) Griffin Diversion Center
   7) Clayton Diversion Center
| o. Northwes Probation Detention Center | 1) Douglas Circuit |
|                                        | 2) Cobb Circuit    |
|                                        | 3) Cobb Diversion Center |
|                                        | 4) Tallapossa Circuit |
| p. Hays State Prison                  | 1) Rome Diversion Center |
|                                        | 2) Rome Circuit     |
|                                        | 3) Lookout Mountain Circuit |
|                                        | 4) Conasagua Circuit |
|                                        | 5) Cherokee Circuit |
| q. I. W. Davis Probation Detention Center | 1) Athens Diversion Center |
|                                        | 2) Piedmont Circuit |
|                                        | 3) Western Circuit  |
|                                        | 4) Alcovy Diversion Center |
| r. Whitworth Probation Detention Center | 1) Northern Circuit |
|                                        | 2) Toombs Circuit |
| s. Colwell Probation Detention Center  | 1) Appalachian Circuit |
|                                        | 2) Northeastern Circuit |
|                                        | 3) Mountain Circuit |
4) Blue Ridge Circuit
5) Gainesville Diversion Center
6) Enotah Circuit
7) Bell Forsyth Circuit
8) Gateway Diversion Center

1) Atlanta Diversion Center

3. The Responsible Health Authority at each facility or probation office will establish a TB skin-testing schedule that will be made available to supervisors of eligible correctional or probation employees (Wardens, Superintendents, Regional Directors, Chief Probation Officers, etc.).

4. Probation Division administrative staff will be responsible for coordinating TB skin test screening of their respective employees and will maintain records verifying that staff are compliant with the TB skin test screening procedures outlined in this SOP.

5. It is suggested that certain days be routinely set aside each week for TB skin testing (e.g., every Monday or Friday between 1-4 p.m.) in order to minimize disruption of other clinic activities. The facility providing TB skin testing should be notified of the number of tests to be performed on a weekly basis.

E. Central Office Employees

1. Central Office employees routinely working at GDC sites who have a risk of exposure to tuberculosis should be periodically screened (e.g., at time of hire, annually and in conjunction with a contact investigation) for possible exposure to tuberculosis.

2. The employee’s supervisor/manager will be responsible for monitoring the TB skin testing process. During the month prior to the Performance Management Form (PMF) review, the employee is responsible for obtaining a TB skin test from their health care provider, personal physician, local health department or correctional facility where currently working. A written hardcopy of test
results will be given to the supervisor/manager. The supervisor/manager will forward, in a confidential manner, the TB skin test results to CPA where they will be placed into the employee’s official medical file.

3. Skin test results should be filed in the employee’s medical file, which is maintained by CPA.

F. Interpreting TB Skin-Test Results

1. Employees with a negative initial test (via the two-step Mantoux method) will be retested with another skin test within 1 - 3 weeks following the initial skin test. If the results of the second test are negative, the employee 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. New 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 supervisor or Appointing Authority will immediately refer the employee to 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 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 supervisor or Appointing Authority should immediately refer the employee with symptoms of TB to 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. Acceptable documentation should include, at a minimum, reports of three consecutive negative sputum smears for acid-fast bacilli.

3. **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.

G. TB Skin-test Logs and Data Collection

1. The health care staff or Chief Probation Officer or designee who is responsible for coordinating infection control activities at the facility or probation 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 health care staff or Chief Probation Officer or designee who is responsible for coordinating infection control activities at the facility or probation office will develop and maintain a database for recalling employees due for TB skin-testing. The database may be arranged by employee birth month, anniversary date of hire or another mechanism, so long as the method chosen contains accurate and reliable TB skin-testing information for employees.

H. Periodic Tuberculin Skin-Testing of Employees

1. Correctional and probation employees must be skin-tested annually or more frequently if required by CDC guidelines regarding Prevention and Control of Tuberculosis in Correctional Facilities and OSHA Rule - 29 CFR 1910.135.

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.
a. If no symptoms of TB are present, the employee will be directed to complete an examination to rule out active TB by a health provider on the Workers’ Compensation Panel of Physicians. The supervisor or Appointing Authority must insure that this examination/treatment information is reported immediately (within 24 hours of the employer's knowledge) to the Workers’ Compensation Risk Management, via the TELECLAIM service phone number 877-656-7475.

b. Any employee 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 supervisor or Appointing Authority to complete an examination by a health provider on the Workers’ Compensation Panel of Physicians to rule out or confirm active TB. The supervisor or Appointing Authority must insure that this examination/treatment information is reported immediately (within 24 hours of the employer's knowledge) to the Workers' Compensation Risk Management, via the TELECLAIM service phone number 877-656-7475. The employee may not return to work until a medical certification is received, indicating that the individual does not have infectious, pulmonary TB (at a minimum, reports of three consecutive negative sputum smears for acid-fast bacilli). 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 Workers’ Compensation benefits in lieu of using accumulated leave.

4. All correctional and probation employees with suspected or confirmed TB disease will be reported to the health department by Medical.

I. Employees Refusing TB Skin Testing

1. TB prevention and control in correctional facilities and probation offices is critical to the health of employees, inmate/probationers and the general public. The CDC and Occupational Health and Safety Administration (OSHA) have 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.

J. TB Skin-Testing of Correctional and Probation Personnel, and Students/Interns, Following Identification of a Suspected or Confirmed TB case

Follow the procedures documented in SOP VH36-0004 (Contact Investigation Following the Identification of a TB Suspect or Confirmed Case) for further instructions.

K. Exposure Control Regarding Tuberculosis

1. The Office of Health Services published an Infection Control Manual in May, 1999 which was distributed to the medical sections of state and private prisons, boot camps, detention and transitional centers. Section II of the manual contains information regarding exposure control for tuberculosis.

2. Field probation staff should be referred to their chief probation officer for access to the exposure control plan for tuberculosis. Section II of the Infection Control Manual has been made available.

3. Each site must determine which class of employees and what job duties pose a risk of exposure to TB. If they are not already listed in the exposure control plan, add them.