

# TUBERCULOSIS PROTECTION PROGRAM

## *Program Element*

### R2-10-207(10)(n)

Each agency shall develop, implement, and monitor a Tuberculosis Protection Program, as applicable.

Tuberculosis (TB) is a communicable, potentially lethal disease transmitted through the bacterium Mycobacterium (M) Tuberculosis. Exposure can occur when infected persons cough, speak, spit, or sneeze droplets dispersed in the air where others can inhale it. Some affected occupational groups include healthcare workers, emergency and first responders, workers in correctional and detention facilities, law enforcement, laboratory technicians handling infected samples, long-term residence facility employees, and workers providing services close to persons infected with TB.

Currently, OSHA does not have a standard specifically for M. Tuberculosis. However, protection for workers is achieved through the General Duty Clause of the OSH Act Section 5(a) (1), the Respiratory Standard 29 CFR 1910.134, Specifications for Accident Prevention Signs and Tags Standard 1910.145, and the Centers for Disease Control "Guidelines for Preventing the Transmission of Mycobacterium tuberculosis in Health-Care Settings, 2005." The Arizona Department of Health Services has also issued the Arizona Tuberculosis Control Manual developed from CDC guidelines to direct control activities within the state.

<b>Definition:</b>	A Tuberculosis Protection Program establishes guidelines and procedures that assist in exposure assessment, application of control methods, training, and medical surveillance. The program focuses on first responders, law enforcement, institutional facilities, and healthcare workers.
<b>Why do I need this program?</b>	<p>If agency staff have the potential to come into contact with customers, patients, or wards of the State that are at risk for infectious tuberculosis (TB), the agency is required to have a written TB protection program. The program shall include procedures to notify employees of health hazards, medical monitoring when applicable, and personal protective equipment requirements including training, fit testing, and care.</p> <p>A program is needed to reduce TB exposure incidents from persons with contagious forms of the disease to uninfected workers. A second objective is to identify settings where a high risk exists for transmission of M. tuberculosis, and the application of effective infection control measures.</p> <p>Consider including this and other infectious disease exposures under your Agency's Employee Communication Disease Exposure Control Plan or Infection Control program.</p>

<p><b>How do I know if this program applies to my agency and my specific job hazards?</b></p>	<p>This program is necessary for agencies with employees who have the potential for exposure to TB-infected patients or clients. To determine the extent of program elements required for your agency program, refer to the CDC Guidelines, “Guidelines for Preventing the Transmission of Mycobacterium tuberculosis in Health-Care Settings, 2005”, Appendix A. To evaluate risk, consider using Appendix B - Tuberculosis (TB) Risk Assessment Worksheet.</p>
<p><b>What are the minimum required elements and best practices for a Tuberculosis Protection Program?</b></p>	<p><b>Guidelines and Criteria:</b> A TB infection-control program is based on a three-level hierarchy of controls including administrative, engineering or environmental, and respiratory protection.</p> <p>The program should be in writing and responsibilities assigned for prompt detection, airborne precautions, and treatment of suspected or confirmed TB patients or clients. The program shall include a documented survey of the agency’s facilities and work practices to identify areas of concern.</p> <p><b>Depending on the work setting, Administrative Controls consist of:</b></p> <ul style="list-style-type: none"> <li>● Implementing work practices for testing and laboratory processing.</li> <li>● Management practices for patients with suspected or confirmed TB.</li> <li>● Cleaning, sterilization, and disinfection of all surfaces, including equipment and vehicles.</li> <li>● Education and training of workers to focus on identifying symptoms and the prevention of disease transmission.</li> <li>● Screening and evaluating workers who may have been exposed.</li> <li>● Using signage to instruct on hygiene and cough etiquette.</li> <li>● Report to the local health department (when required).</li> </ul> <p><b>Engineering or Environmental Controls:</b></p> <p>The CDC Guidelines (2005) recommend the following engineering controls for individuals with confirmed or suspected TB.</p> <ul style="list-style-type: none"> <li>● Primary: Control at the source by using local exhaust ventilation (e.g., hoods, tents, or booths), and diluting and removing contaminated air by using general ventilation.</li> <li>● Secondary: Control the airflow to prevent contamination of air in adjacent areas, and clean the air by using high-efficiency particulate air (HEPA) filtration or Ultraviolet germicidal irradiation (UVGI).</li> </ul>

	<p><b>Respiratory Protection:</b></p> <p>Respirator use is required in healthcare settings where workers or visitors are entering areas with suspected or confirmed TB infections. Respirators are also required for workers where administrative and engineering controls are not feasible, such as vehicles or patient's homes.</p> <p>Respirator use for TB is regulated under the General Industry Standard for Respiratory Protection 29 CFR 1910.134, and therefore requires implementing a respiratory-protection program consisting of:</p> <ul style="list-style-type: none"> <li>• Proper selection of a NIOSH-approved nonpowered particulate respirator (N-, R-, and P-series 95%, 99%, and 100% filtration efficiency), including disposable respirators, or PAPRs with high-efficiency filters;</li> <li>• Training and fit testing of workers wearing respiratory protection; and</li> <li>• Although not a workers' compensation issue, training patients on respiratory hygiene and cough etiquette procedures will reduce droplet exposure to employees, surrounding patients, inmates, and the general public.</li> </ul>
<p><b>Are there any mandatory training requirements or best practices that must be developed by the agency?</b></p>	<p>OSHA requires training on the use of PPE for workers who are required to use such equipment for their jobs. This training includes when to use PPE; what PPE is necessary; how to properly put on, use, and take off PPE; how to properly dispose of or disinfect, inspect for damage, and maintain PPE; and the limitations of PPE. Applicable standards in <a href="#">29 CFR 1910 Subpart I</a> include those for personal protective equipment (<a href="#">29 CFR 1910.132</a>), and respiratory protection (<a href="#">29 CFR 1910.134</a>)</p> <p>The agency's training program must be specific to the setting and cover the following topics:</p> <ul style="list-style-type: none"> <li>• Epidemiology of TB, including multidrug-resistant TB and the potential for exposure within the facility; the signs and symptoms of TB, including the difference between TB infection and TB disease; the modes of transmission of tuberculosis, including the possibility of re-infection of persons with a positive tuberculin skin test.</li> <li>• The agency's Infection Control Program and Respirator Program.</li> <li>• The tasks or activities that may involve exposure to tuberculosis.</li> </ul>

	<ul style="list-style-type: none"> <li>● The use and limitations of methods that will prevent or reduce exposure, including appropriate engineering controls, work practices, respiratory protection, and site-specific control measures.</li> <li>● The selection, use, cleaning, and inspection of respirators. Respirator donning, removal, and checking the fit and seals.</li> <li>● The medical surveillance program.</li> <li>● The procedures to follow for reporting an exposure incident, and the medical management that the agency is required to provide.</li> <li>● The procedures to follow if the employee develops signs or symptoms of TB disease.</li> <li>● Use of signage and labels for communication of hazards. For instance, air systems that may reasonably be anticipated to contain aerosolized M. tuberculosis shall be labeled “Contaminated Air-Respiratory Protection Required.”</li> </ul>
<p><b>Are there specific requirements for documenting the program, training, etc...?</b></p>	<p>It is suggested that training records be maintained for at least the length of the employee’s employment. Training records must include a summary of the topics covered, the date, the name, and qualifications of the trainer, and the name and job classification of all persons attending the training sessions.</p> <p>All records about the employee’s exposure and medical monitoring results must be retained in a confidential file for the duration of employment plus 30 years. Medical records of an employee who has worked for the agency for less than one year need not be retained by that agency if the employee is given his records upon termination. (1910.120)</p> <p>Reference the <a href="#">State Library, Archives and Public Records website</a> for your Agency-specified retention schedules.</p>

**Are there any resources available that can assist me in putting together a TB Infection Control Plan?**

State Risk Management has Loss Prevention Consultants available to assist managers and supervisors in identifying potential hazards and guide agencies on the establishment of program elements.

For assistance, contact State Risk Management Loss Prevention at [rmdlossprevention@azdoa.gov](mailto:rmdlossprevention@azdoa.gov).

### **Additional Resources**

- [OSHA bloodborne-pathogens/worker-protections](#) - OSHA protections against occupational exposure to infectious diseases
- [Tuberculosis Exposure and Control Plan](#) - Oregon Local Public Health Authorities Sample program
- OSHA Tuberculosis Safety and Health Topic Page: [Tuberculosis - Overview | Occupational Safety and Health Administration](#)
- Interpretation Letter: [Tuberculosis and Respiratory Protection Enforcement | Occupational Safety and Health Administration](#)
- [Ventilation - Overview | Occupational Safety and Health Administration](#)
- [Tuberculosis Information for Employers in Non-Healthcare Settings | TB | CDC](#)
- [CDC Respiratory Virus Updates](#)
- [Arizona Department of Health Services Disease Integration & Services](#)
- [Guidelines for Preventing the Transmission of Mycobacterium tuberculosis in Health-Care Settings, 2005, MMWR 2005; 54 \(No. RR-17\):](#)
  - Appendix A of this document provides specific infection control recommendations for a variety of work settings such as correctional facilities and home-based settings.