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| TB EXPOSURE PLAN | | | | NO. 541 | |
| WINNING WHEELS  TUBERCULOSIS  EXPOSURE CONTROL PLAN  I. POLICY  It is the policy of Winning Wheels to comply with OSHA Standards regarding occupational exposure to tuberculosis (TB), by designing and implementing a program to protect our employees from TB. The exposure control plan includes protocol for early identification, training and information to ensure employee knowledge of the hazard of TB transmission, its signs and symptoms, training on our exposure controls, use of equipment and the maintenance of training records. This policy will be reviewed and updated as needed by the Infection Control nurse and committee.  The exposure control plan applies to work operations in our facility where employees may be exposed to TB under normal working hours or during an emergency situation.  II. RISK ASSESSMENT  Winning Wheels is determined to be a low risk setting according to the Center for Disease Control guidelines and our plan has been developed accordingly. Our program is coordinated by the Infection Control Nurse (ICN) in conjunction with the Safety Committee, or their designee, who reviews, updates, and oversees the program. The ICN and the Safety Committee will also be responsible, at least annually, for monitoring the risk category Winning Wheels falls into. Copies of the exposure control plan are made available in the main office and in employee work areas where TB exposure could occur (e.g. Nurses Stations; Dietary). No residents and/or staff have been identified with active TBI and no resident and/or staff have had a positive skin test conversion in the last 12 months.  III. EARLY DETECTION  Employees and volunteers donating more than 10 hours per week will be given a two step Mantoux TB skin test upon commencement of employment by the facility and a one step annually thereafter. Residents will be given a two step TB skin test upon admission unless one has been completed 7 days prior to admission, and a one step test annually thereafter.  Employees and residents whose skin test positive for TB will have a chest x-ray per facility expense. The health department will be notified. Employees and residents who test positive will not be required to have the Mantoux skin test annually. If the chest x-ray is negative, no further follow-up will be necessary unless the employee or resident becomes symptomatic. | | | | | |
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| Employees who are diagnosed per physician to have infectious tuberculosis, will be relieved of work duties until diagnosis is excluded or until they become noninfectious as a result of effective chemotherapy. Residents with a suspected TB diagnosis shall be referred to their physician so that appropriate medical follow-up can be recommended. Residents who have tested positive on a skin test and who develop signs and symptoms of active TB disease will be reported to the physician and the local health department, and will be reported on the OSHA 200 log. Signs and symptoms may include: persistent cough - more than a two week duration, weight loss, fever, night sweats, and anorexia. Before they are permitted to return to work, the physician must verify they are on medication, cough is resolved, and 3 consecutive sputum smears are negative.  IV. MANAGEMENT OF A RESIDENT WITH TB  A resident with a confirmed TB diagnosis shall be transferred to a facility with appropriate AFB isolation. Prior to transfer, the following precautions will be taken to protect other residents and staff:  A. Resident will be placed in isolation.  B. A clearly visible sign must be placed on the door, warning those who enter. The sign should read “STOP, See Nurse before entering!”  C. The resident will be educated about TB transmission and taught to cover their mouth and use tissues when coughing, sneezing, etc. The resident will be instructed to wear a surgical mask.  D. Cough inducting procedures will not be performed in this facility.  V. EDUCATION & TRAINING  The facility shall provide training information and counseling to ensure employee knowledge of the hazards of TB transmission, its signs and symptoms, medical surveillance and therapy, and site-specific protocols, including the purpose and proper use of infection control practices. Training shall be provided at the initial employee orientation and at annual in-services. Information and counseling shall be provided as needed to assure effective implementation of the TB exposure control plan.  VI. DOCUMENTATION  A record keeping system is essential for tracking and assessing the status of persons with TB and TB infection. The facility will record results of employee TB tests and put in employee file initially and annually. Resident results will be placed in their individual charts. | | | | | |
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