

# Laws and Standards for TB Prevention and Care in Chapter 89 Correctional and Detention Facilities

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# Objectives

- Statues and Rules
- Correctional Tuberculosis Screening Plan
- Monthly Report
- Quarterly Reports
- Annual Tuberculosis Screening Report for Jail Administrators

## Section 89.002: Scope of Chapter

- **Jail that:**
  - **Has a capacity of at least 100 beds, or**
  - **Houses inmates that are transferred from:**
    - **a county that has a jail that has a capacity of at least 100 beds, or**
    - **another state**

# Texas Health & Safety Code: Chapter 89

## Subchapter B. Screening of Jail Employees and Volunteers

Section 89.011 Screening of Jail Employees & Volunteers

Section 89.012 Follow up Evaluations & Treatment

Section 89.013 Certificate Required

Section 89.014 Cost of Tests, Follow-Up, and Treatment

## Subchapter C. Inmate Screening and Treatment

Section 89.051 Inmate Screening Required

Section 89.002 Rescreening; Diagnostic Evaluations

Section 89.053 Follow-up Evaluations

Section 89.054 Inmate Transfer & Release

## Subchapter D. Reporting; Rulemaking; Minimum Standards

Section 89.071 Reporting

Section 89.072 Rulemaking

Section 89.073 Adoption of Local Standards

## Subchapter E. Continuity of Care

Section 89.102 Report of Release

# Subchapter B. Screening of Jail Employees and Volunteers

## Section 89.011 Screening of Jail Employees & Volunteers

- Employee or Volunteer has been tested for TB Infection in accordance with board rules.

## Section 89.012 Follow up Evaluations & Treatment

- Employee or Volunteer with positive screening test results must obtain a diagnostic evaluation from the person's own physician to determine if the person has TB.

## Section 89.013 Certificate Required

- Confirm that each employee or volunteer required to be screened under this subchapter has the required certificate.

## Section 89.014 Cost of Tests, Follow-Up, and Treatment

- Employee or volunteer shall pay the expense of a screening test, diagnostic evaluation, or other professional medical service required under this subchapter unless the commissioners court, the governing body of a municipality, or local health department or public health district elects to provide the service.

# Subchapter C. Inmate Screening and Treatment

## Section 89.051 Inmate Screening Required

- Each inmate in a jail or community corrections facility shall undergo a screening test for Tuberculosis infection.

## Section 89.052 Rescreening; Diagnostic Evaluations

- May require a governing body to provide an additional screening test or a diagnostic evaluation.

## Section 89.053 Follow up Evaluations

- If an inmate has a confirmed positive screening test results, the governing body shall provide a diagnostic evaluation to determine whether the inmate has Tuberculosis.

## Section 89.054 Inmate Transfer and Release

- Medical records or documentation of screenings or treatment received transferred with the inmate from one jail or community corrections to another or the Texas Department of Criminal Justice and be available for medical review on arrival of the inmate.

# Subchapter D. Reporting; Rulemaking; Minimum Standards

## Section 89.071 Reporting

- A case of Tuberculosis shall be reported to the appropriate health authority or to the department not later than the 3<sup>rd</sup> day after the day on which the diagnostic is suspected.

## Section 89.072 Rulemaking

- The department shall recommend to the Commission on Jail Standards and the Texas Department of Criminal Justice rules to carry out this chapter.

## Section 89.073 Adoption of Local Standards

- The standards prescribed by this chapter and the rules adopted by the board relating to screening tests or examinations for Tuberculosis required for certain employees and volunteers are minimum standards.

## Subchapter E. Continuity of Care

### Section 89.102 Report of Release

- A corrections facility shall report to the department the release of an offender who is receiving treatment for Tuberculosis. The department shall arrange for continuity of care for the offender.

How to locate Texas Health and Safety Code Chapter 89 from the Internet?

<http://www.statutes.legis.state.tx.us/Docs/HS/htm/HS.89.htm>

# Texas Administrative Code

## Rules

97.171 Purpose

97.172 Scope

97.173 Screening

97.174 Scope of Professional Examinations/Evaluation

97.175 Diagnostic Evaluations\*

97.176 Treatment

97.177 Prevention of Disease

97.178 Reporting

97.179 Tuberculosis Record\*

97.180 Resource Allocation

97.190 Approval of Local Jail Screening Standards

97.191 Continuity of Care

# Texas Administrative Code

## Rule 97.171 Purpose

- Screening and Treatment for TB and Latent TB infection of employees, volunteers, and inmates or detainees in county jails and other correctional facilities

## Rule 97.172 Scope

- Cover the screening process

## Rule 97.173 Screening

- Screen with chest x-rays to identify individuals with lung abnormalities followed by testing for latent TB infection with 14 days

# Texas Administrative Code

## Rule 97.174 Scope of Professional Examinations/Evaluation

- Examination for active Tuberculosis; Latent TB infection without disease

## Rule 97.175 Diagnostic Evaluations

- Steps used in the diagnostic evaluation process and bacteriologic examinations of specimens.

## Rule 97.176 Treatment

- Definition and steps for treatment of latent TB Infection, no disease as well Treatment of active TB Disease

# Texas Administrative Code

## Rule 97.177 Prevention of Disease

- Steps to prevent the spread of Tuberculosis in the facility with the use of Respiratory isolation.
- Work restrictions for jail employees and volunteers.

## Rule 97.178 Reporting

- All suspected or diagnosed cases of TB shall be reported within one working day to the local health authority or regional office. Provide a listing of information needed and what forms to use.

## Rule 97.179 Tuberculosis Record

- Tuberculosis Record form is use for certification that an employee or volunteer does not have Tuberculosis.

# Texas Administrative Code Tuberculosis Record Form

Figure: 25 TAC §97.179(c)

TUBERCULOSIS RECORD					
Certificate <input type="checkbox"/>		Tuberculosis History Record <input type="checkbox"/>		Record of Transfer <input type="checkbox"/> Date of Transfer	
<b>A. IDENTIFICATION</b>					
Facility Name		Address		Medical Section Phone	
<input type="checkbox"/> Inmate		<input type="checkbox"/> Employee		<input type="checkbox"/> Volunteer	
(Last Name)		(First Name)	(Middle)	AKA (Last)	(First)
Date of Incarceration/Employment/Entry:			Cell number or work location:		
Social Security Number:		ID Number:		Sex: <input type="checkbox"/> Male <input type="checkbox"/> Female	
Phone # ( ) ( )	Home Street Address	City	State	Zip	
DOB:	County of Birth		Race (check all that apply): <input type="checkbox"/> White <input type="checkbox"/> Black or African American <input type="checkbox"/> Asian		
Ethnicity: <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Not Hispanic or Latino <input type="checkbox"/> Unknown		<input type="checkbox"/> Native Hawaiian or Pacific Islander <input type="checkbox"/> American Indian or Alaskan Native <input type="checkbox"/> Unknown			
<b>B. TUBERCULIN SKIN TEST (TST) HISTORY</b>					
Initial Skin Test (or Documented History of Positive PPD)					
Date Given:		Date Read:		Size: mm	
TST Date:	Size: mm	TST Date:	Size: mm		
TST Date:	Size: mm	TST Date:	Size: mm		
<b>C. ACTIONS TAKEN FOR FURTHER EVALUATION AND/OR TREATMENT</b>					
Chest X-ray Date:		Results: <input type="checkbox"/> Normal <input type="checkbox"/> Abnormal <input type="checkbox"/> Not Done <input type="checkbox"/> UNK			
History of previous TB treatment? <input type="checkbox"/> Latent TB Infection Start Date: _____ Stop Date: _____ <input type="checkbox"/> TB Disease Start Date: _____ Stop Date: _____			HIV Test: Date: _____ <input type="checkbox"/> Positive <input type="checkbox"/> Negative If not done, give reason _____		
Diagnosis Date: <input type="checkbox"/> Active TB <input type="checkbox"/> Latent TB Infection			For Active TB: Predominant Site: <input type="checkbox"/> Pulmonary <input type="checkbox"/> Other (specify) _____		
<b>CURRENT TREATMENT</b> Regimen Started ____/____/____ Regimen Stop ____/____/____			Case reported to Health Department? <input type="checkbox"/> Yes <input type="checkbox"/> No		
<input type="checkbox"/> INH <input type="checkbox"/> RIF <input type="checkbox"/> PZA <input type="checkbox"/> EMB  Other _____ <input type="checkbox"/> DOT <input type="checkbox"/> Self-administered			Date of Report to Health Department: (MM/DD/YYYY): _____		
Reason Stopped:			Contact Investigation done? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, _____		
Drug Resistance? <input type="checkbox"/> No <input type="checkbox"/> Yes			Patient Interview Date: _____		
			Follow-up Date: _____		

# Texas Administrative Code

## Rule 97.180 Resource Allocation

- The costs of providing inmate screening, evaluation, and treatment is supported by a combination of individual counties, judicial districts, the department, and TX Depart. of Criminal Justice funds.

## Rule 97.190 Approval of Local Jail Screening Standards

- Counties, judicial districts, and private entities operating community corrections facilities shall adopt local standards for screening tests of employees, volunteers, and inmates.

## Rule 97.191 Continuity of Care

- Correctional facility regardless of size that houses adult or youth inmates, must assure continuity of care for those inmates receiving treatment for tuberculosis who are being released or transferred to another correctional facility.
- Facility must contact the department prior to the inmate being released or transferred. If that is not possible, the facility must make the contact immediately upon the inmate's release from custody or transfer to another correctional facility

# Texas Administrative Code

## Internet Location

- texreg.sos.state.tx.us
- Locate pathway on [http://texreg.sos.state.tx.us/public/readtac\\$ext.viewtac](http://texreg.sos.state.tx.us/public/readtac$ext.viewtac)
- web page; Select Title 25 Health Services
- Select Part 1 Department of State Health Services
- Select Chapter 97 Communicable Diseases
- Select Subchapter H Tuberculosis Screening for Jails & Other Correctional Facilities
  - Rules

# Correctional Tuberculosis Screening Plan

## Internet location

<https://www.dshs.state.tx.us/idcu/disease/tb/forms>

[Return to the Top of the Page](#)

### Correctional Facilities

Form Number	Form Name	Format(s)	Revision Date
EF12-11461	Positive Reactors/Suspects/Cases	<a href="#">Word</a> (54 KB)	7/2014
EF12-11462	Monthly Correctional TB Report	<a href="#">Word</a> (102 KB) <a href="#">PDF</a> (56 KB)	6/2011
EF12-11462-I	Monthly Correctional TB Report - Instructions	<a href="#">PDF</a> (42 KB)	6/2011
EF12-11463	Correctional Tuberculosis Screening Plan	<a href="#">PDF</a> (183 KB)	9/2013
EF12-12870	TB Symptom Screening	<a href="#">Word</a> (40 KB)	9/2014
EF12-12870A	TB Symptom Screening (Spanish)	<a href="#">Word</a> (41 KB)	7/2014



# Helpful Tips for Jail Plan

**Review Jail Plan  
before submitting**

**Don't fax but  
mail the Jail  
Plan with all the  
appropriate  
documentation**

**If Jail Plan has  
to be amended,  
please resubmit  
in a timely  
manner once  
contacted by  
DSHS**

**Make sure  
every field is  
answered;  
especially  
question(s) that  
have two parts**

**If not  
applicable,  
write in N/A or  
check the 'Not  
Applicable' box**

**If non-medical  
personnel is  
authorized by  
the medical  
director to  
administer and  
read TB skin  
test, provide  
the credentials**

**If any questions  
concerning on  
"How to fill out  
the Jail Plan",  
contact Jail  
Coordinator at  
DSHS**

# Correctional Tuberculosis Screening Plan

## Who should I contact?

1) Email [congregatesettings@dshs.state.tx.us](mailto:congregatesettings@dshs.state.tx.us)

2) Contact Johna May (512) 533- 3160  
or

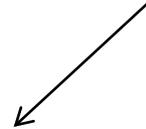
3) email [johna.may@dshs.state.tx.us](mailto:johna.may@dshs.state.tx.us)

# Who Reports to Whom?

- Correctional Facility completes and submits Monthly Correctional TB Report to their LHD or HSR
- LHD or HSR reviews the report for any mistakes or for any information that has been omitted
- Once received at Central Office, the EF12-11462 data is entered into our databases called Testing Activities & Monthly TB Report database. EF12-11461 data is entered into our LTBI spreadsheet.



Correctional or Detention Facility



Local Health Department



Health Service Region



Congregate Setting Team

**Health Service Region 1 (10 Jails)**

**Health Service Region 2/3 (27 Jails)**

**Health Service Region 4/5 (24 Jails)**

**Health Service Region 5/6 (11 Jails)**

**Health Service Region 7 (17 Jails)**

**Health Service Region 8 (17 Jails)**

**Health Service Region 9/10 (13 Jails)**

**Health Service Region 11 (11 Jails)**

**Local Health Department (23 Jails)**



# Monthly Correctional TB Report Form EF12-11462

- Visit [texas.tb.org/forms/#jail](http://texas.tb.org/forms/#jail) to download this form
- Require Chapter 89 facilities complete and submit to LHD and HSR
- Due every month by the 5<sup>th</sup> working day
- New Changes include:
  - Column for Volunteers
  - Number of TB Suspect/ Cases diagnosed at facility
  - Number of TB Suspect/ Cases transferred in
  - Number of LTBI's discharged to the community
  - Number of LTBI's transferred
  - Number of Transferred LTBI/Suspect/Cases reported to HD



## Tuberculosis Services Branch Monthly Correctional TB Report

**PLEASE PRINT.** Report is due no later than the 5<sup>th</sup> working day of the following month. This report should be submitted on a monthly basis to your local health department. Visit <http://texas.tb.org/forms/#jail> to download this form.

REPORTING FACILITY				
Facility Name:	Report Month:			
Contact Person (Please Print):	Email Address (Please Print):			
Phone Number:	Fax Number:			
A. SCREENING				
	Inmates	Employees	Volunteers	Comments
Number of TB Skin Tests Administered:				
Number of TB Skin Tests Read:				
Number of IGRA Tests Administered:				
Number of IGRA Tests Analyzed:				
Number of Prior Positive (Documented history of (+) TST or IGRA):				
Number of Chest X-rays Performed:				
B. SCREENING RESULTS				
	Inmates	Employees	Volunteers	Comments
Number of TB Skin Test measured 10 mm or greater:				
Number Positive IGRA Tests:				
Number of Converted TB Skin Tests or IGRA Tests:				
*Number of TB Suspects Diagnosed at Facility:				
*Number of TB Cases Diagnosed at Facility:				
Number of TB Suspects Transferred In:				
Number of TB Cases Transferred In:				
C. TREATMENT				
	Inmates	Employees	Volunteers	Comments
Number Started on Treatment for TB Infection:				
Number Completed Treatment for TB Infection:				
Number Started on Treatment for TB Disease:				
Number Completed Treatment for TB Disease:				
D. DISCHARGE TO COMMUNITY				
	Inmates	Comments		
Number of LTBI's Discharged to the Community:				
Number of Suspects Discharged to the Community:				
Number of Cases Discharged to the Community:				
Number of Discharged LTBI/Suspects/Cases Reported HD:				
E. TRANSFERS				
	Inmates	Comments		
Number of LTBI's Transferred:				
Number of TB Suspects Transferred:				
Number of Cases Transferred:				
Number of Transferred LTBI/Suspects/Cases Reported to HD:				

\*Include in the EF12-11461 Form

## Helpful Tips for Monthly Correctional TB Report (EF12-11462)

- Do not abbreviate facility name
- The numbers reported for inmates, employees, or volunteers with a prior positive, TB skin test, or CXR performed should match the number of names that are submitted on the EF12-11461 (Positive Reactors/Suspects/Cases ) form
- Each suspects or cases reported should be listed on both EF12-11461 & EF12-11462 with TB 400 (A) and (B)
- Notify the LHD or HSR of TB suspects/cases discharged to the community
- Notify the LHD or HSR of TB suspects/cases transferred in or transferred out



## Helpful Tips for Positive Reactors/Suspects/Cases Form (EF12-11461)

- Book-In Date: Provide unless its an Employee or Volunteer
- Names: Written in black ink, clearly printed & not in cursive
- PT (Patient Type): 1 = Inmates; 2 = Employee; 3 = Volunteer
- SS# or Alien#: Provide
- DOB: Provide
- Race: Provide
- Prior (+): Prior positive mark Y for Yes
- Date Placed: Record TST or IGRA Date Collection
- Date Read: Provide
- Result: Record TST results in MM. IGRA results N = Negative; P= Positive; I = Indeterminate
- CXR Date: Record Date of Collection (if not done, simply don't mark the field box)
- Normal/ Abnormal: Record CXR Results N = Normal or A = Abnormal
- Symptom Screening: Indicate "Y" for Yes (if not done, simply don't mark the field box)
- TB Case or Suspect: if indicators on the TB Case or Suspect on Monthly Correctional TB Report (EF-11462), write either C for Case or S for Suspect
- Date Meds Started: If patient started TB treatment, write the month, day, and last 2 digit of the year in the field box. Ex. 1/1/15

# How to Report an Suspect or Case?

## Reporting

Form Number	Title	Format(s)	Revision Date
TB-340	Report of TB Contacts	<a href="#">PDF</a> (121 KB)	10/2011
TB-341	Continuation of Report of TB Contacts	<a href="#">PDF</a> (63 KB)	11/2011
TB-400A	Report of Case and Patient Services	<a href="#">PDF</a> (17 KB)	11/2003
TB-400B	Report of Case and Patient Services	<a href="#">PDF</a> (18 KB)	11/2003
EF12-11358	Binational Status Report	<a href="#">WP</a> (45 KB)	11/2004
EF12-12104	TB Incident Report	<a href="#">WP</a> (49 KB)	3/2011
EF12-12168	Monthly TST	<a href="#">WP</a> (47 KB)	11/2005
	Guidelines for Congregate Setting Target Testing	<a href="#">WP</a> (32 KB)	5/2014
EF12-14427	Congregate Setting Target Testing Monthly Report	<a href="#">WP</a> (136 KB) <a href="#">XLS</a> (34 KB)	5/2014

When reporting an Suspect or Case on Monthly Correctional TB Report please include both TB 400 (A) and TB 400 (B) for each individual.

TB 400 (A and B) are located under Reporting <https://www.dshs.state.tx.us/idcu/disease/tb/forms>

# What does Department of State of Health Services do with TB 400s?

- 1<sup>st</sup> Step: Research each TB 400 using “Suspect/Case” database; TB PAM; LabWare
- 2<sup>nd</sup> Step: Entered each TB 400 into our “Suspect/Case” database
- 3<sup>rd</sup> Step: Continue to Follow-Up with each case for additional information
- 4<sup>th</sup> Step: Submit our Suspect/Case Report Quarterly to each LHD or HSR to further investigation



## Tuberculosis and Refugee Health Services Branch-Corrections Program Annual Correctional TB Suspect and Case Report for 2015

Health Service Region 04/05

Facility Name	LastName	FirstName	DOB	Country	Reporting Month	Reported As	TB400	Culture Date	Results	Tx Start Date	Classification	Disposition
[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	July/15	Suspect	Yes	3/21/2015	Negative		Suspect	Unknown
[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	03/15	Case	No	2/6/2015	(+)MTB	2/6/2015	Case	Expired
[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	July/15	Suspect	Yes			7/30/2015	Suspect	On Treatment

## Statistics

### Inmate/ Employees Screening Data 2013/2014/2015

#### TST ADMINISTERED

	<u>YEAR 2013</u>	<u>YEAR 2014</u>	<u>YEAR 2015*</u>
Inmate	516,532	512,274	312,560
Employee	17,269	16,515	9,276

#### TST READ

	<u>YEAR 2013</u>	<u>YEAR 2014</u>	<u>YEAR 2015*</u>
Inmate	396,996	394,193	238,206
Employee	16,793	16,126	8,875
Ratio Admin/Read	78%	78%	78%

## Statistics

### Inmate/ Employees Screening Data 2013/2014/2015

#### POSITIVE REACTORS

	<u>YEAR 2013</u>	<u>YEAR 2014</u>	<u>YEAR 2015*</u>
Inmate	27,757	28,614	14,195
Employee	177	178	88

#### CONVERSIONS

	<u>YEAR 2013</u>	<u>YEAR 2014</u>	<u>YEAR 2015*</u>
Inmate	2,491	2,612	1,001
Employee	30	16	53

## Statistics

### Inmate/ Employees Screening Data 2013/2014/2015

#### PRIOR POSITIVES

	<u>YEAR 2013</u>	<u>YEAR 2014</u>	<u>YEAR 2015*</u>
Inmate	16,750	16,403	11,103
Employee	644	622	277

#### CHEST X-RAY

	<u>YEAR 2013</u>	<u>YEAR 2014</u>	<u>YEAR 2015*</u>
Inmate	66,992	48,865	24,138
Employee	586	709	381

Statistics  
Inmate/Employees Screening Data 2013/2014/2015

SUSPECTS

	<u>YEAR 2013</u>	<u>YEAR 2014</u>	<u>YEAR 2015*</u>
Inmate	186	134	106
Employee	0	0	1

CASES

	<u>YEAR 2013</u>	<u>YEAR 2014</u>	<u>YEAR 2015*</u>
Inmate	35	28	21
Employee	0	0	0

# Correctional Facilities Forms Location

[Return to the Top of the Page](#)

## Correctional Facilities

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EF12-11461	Positive Reactors/Suspects/Cases	 (54 KB)	7/2014
EF12-11462	Monthly Correctional TB Report	 (102 KB) <a href="#">PDF</a> (56 KB)	6/2011
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EF12-12870	TB Symptom Screening	 (40 KB)	9/2014
EF12-12870A	TB Symptom Screening (Spanish)	 (41 KB)	7/2014

Location on the internet

- [www.dshs.state.tx.us/idcu/disease/tb/forms](http://www.dshs.state.tx.us/idcu/disease/tb/forms)

Includes Forms:

Positive Reactors/Suspects/Cases  
Monthly Correctional TB Report  
Instructions  
Correctional TB Screening Plan  
TB Symptom Screening

Texas Uniform Health Status Form Location

- [w.tcjs.state.tx.us/docs/UHSUF.pdf](http://w.tcjs.state.tx.us/docs/UHSUF.pdf)

# Annual and Quarterly Reports

Reporting Month	TST Admin		TST Read		Conversions		Positive TST		Prior (+)		IGRA (+)		CXR		LTBI Rx		Suspects Dx		Case Dx		Rx Completed	
	Inmate	Enpl	Inmate	Enpl	Inmate	Enpl	Inmate	Enpl	Inmate	Enpl	Inmate	Enpl	Inmate	Enpl	Inmate	Enpl	Inmate	Enpl	Inmate	Enpl	Inmate	Enpl
██████████																						
July	0	6	0	6	0	0	0	0	0	0	0	0	1204	0	0	0	0	0	0	0	0	0
August	0	4	0	4	0	0	0	0	0	0	0	0	1005	0	0	0	0	0	0	0	0	0
September	2	7	2	7	0	0	2	0	0	0	0	0	900	0	0	0	1	0	1	0	2	0
<b>TOTALS:</b>	<b>2</b>	<b>17</b>	<b>2</b>	<b>17</b>	<b>0</b>	<b>0</b>	<b>2</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>3109</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>1</b>	<b>0</b>	<b>1</b>	<b>0</b>	<b>0</b>	<b>0</b>
██████████																						
July	0	0	0	0	0	0	0	0	0	0	0	0	140	0	0	0	0	0	0	0	0	0
August	24	0	24	0	0	0	9	0	0	0	0	0	174	0	0	0	0	0	0	0	0	0
September	2	141	2	141	0	2	1	2	0	1	0	0	149	32	0	0	0	0	0	0	0	0
<b>TOTALS:</b>	<b>26</b>	<b>141</b>	<b>26</b>	<b>141</b>	<b>0</b>	<b>2</b>	<b>10</b>	<b>2</b>	<b>0</b>	<b>1</b>	<b>0</b>	<b>0</b>	<b>463</b>	<b>32</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>1</b>	<b>0</b>
██████████																						
July	307	12	303	12	0	0	85	0	4	0	0	0	85	0	0	0	0	0	0	0	0	0
August	359	7	339	7	0	0	116	0	2	0	0	0	117	0	0	0	0	0	0	0	0	0
September	388	3	348	3	1	0	97	0	4	0	0	0	97	0	0	0	1	0	0	0	1	0
<b>TOTALS:</b>	<b>1052</b>	<b>22</b>	<b>990</b>	<b>22</b>	<b>1</b>	<b>0</b>	<b>298</b>	<b>0</b>	<b>10</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>299</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>1</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>
██████████																						
July	749	0	362	0	0	0	35	0	15	0	0	0	37	0	0	0	0	0	0	0	0	0

• Break down for Inmates & Employees

- TST admin/Read;
- Conversions
- Prior Positive
- IGRA Positive
- CXR
- LTBI RX
- Suspects DX
- Case DX
- RX completed

Quarterly Report

- Q1: May
- Q2: August
- Q3: November

Annual Report

- Q1: February

# Annual Tuberculosis Screening Report for Jail Administrators

- Go to [www.dshs.state.tx.us](http://www.dshs.state.tx.us)
  - Click Disease Prevention, select Infectious Disease Prevention
    - Select T-Z, Tuberculosis (TB)  
TB in Correctional Facilities

The screenshot shows the DSHS website interface. At the top is a blue navigation bar with links: Home, About Us, News, I am a..., I want to..., Resources, and Find Services. Below this is a left sidebar with a tree view of the site structure, including IDCU Home, Infectious Diseases A-C, D-G, H-L, M-Q, R-S, T-Z, IDCU Health Topics, Disease Reporting, Related Rules & Regulations, Immunization Branch, About IDCU, Related DSHS Sites, and Staff Contact List. The main content area has a breadcrumb trail: Home > TB-HIV-STD and Viral Hepatitis Unit > Annual Tuberculosis Screening Report for Jail Administrators. The main heading is 'Annual Tuberculosis Screening Report for Jail Administrators'. To the right of the heading is a link for 'Correctional TB'. Below the heading is a photo showing a healthcare worker in a white coat and a patient. Under the photo is a list of jails: A, B, C, D, E, F, G, H, I, J, K, L, M, N, O, P, Q, R, S, T, U, V, W, X, Y, Z. At the bottom of the main content area are three download links: 'Jail Administrator Letter' (68 KB), 'Annual TB Screening Report 2013' (824 KB), and 'Glossary of Terms' (98 KB). On the right side of the page is a vertical list of links: TB Home, About Us, FAQs, TB Forms, TB Control Standards, Statistics, Presentations, Links, and TB/HIV/STD and Viral Hepatitis Unit. At the bottom right is a 'Sign up for e-mail updates' button and a box titled 'TB Cases in Selected Counties 2013'.

# Annual Tuberculosis Screening Report for Jail Administrators



## Annual Tuberculosis Screening Report Dallas County Jail 2012

### Tuberculosis Services Branch Correctional Tuberculosis Program



In 2012, a total of 9,951 new tuberculosis (TB) cases were reported in the United States. This represents an incidence rate of 3.2 cases per 100,000 population, which is 6.1% lower than the rate in 2011 which was 3.4 cases per 100,000 population. This is the lowest rate recorded since national reporting began in 1953.

As in 2011, four states (California, Florida, New York, and Texas) continued to report more than 500 cases each in 2012. Combined, these four states accounted for 4,967 TB cases or approximately half (49.9%) of all TB cases reported in 2012.

Texas reported a total of 1,233 TB cases in 2012; 154(12.5%) of those were diagnosed in a correctional facility.\*

Table 1: Diagnosed Cases of Tuberculosis in Correctional Facilities in Texas for years 2011-2012

FACILITY TYPE	2011 (n)	%	2012 (n)	%
Federal Prison	14	8.7	21	13.6
State Prison	19	11.8	22	14.2
Local	49	30.6	38	24.6
ICE	45	28.1	39	25.3
Other Correctional	33	20.6	33	21.4
Juvenile			1	0.6
<b>TOTAL</b>	<b>160</b>		<b>154</b>	

Source: Texas DSHS Surveillance Unit  
<http://www.dshs.gov/nmwr/preview/nmwrhtml/nmwr211a2>

\*Provisional data may be subject to change.



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DSHS Mission: "To improve  
health and well-being in  
Texas"

# Annual Tuberculosis Screening Report for Jail Administrators

In 2012, 161 correctional facilities met the Texas Health & Safety Code Chapter 89 criteria and were required to report their TB screening activities in the form of a Monthly Correctional TB Report. This annual report highlights TB screening activities in your facility and compares results to all designated Texas Health & Safety Code Chapter 89 correctional facilities.

Table 2: TB Screening Results January 1- December 31, 2012

Dallas County Jail	Total at This Facility	% at This Facility	All Facilities (Chapter 89)*
<b>INMATES</b>			
Number of Skin Test Administered	60,853		537,658
Number of Skin Test Read	38,342	63.01%	402,583
Number of Positive Tuberculin Skin Test	2,192	5.72%	24,795
Number of Chest X-rays Performed	5,588		60,701
Number of Conversions	28		1,891
Number of TB Suspects Reported	7		188
Number of Active TB Cases Reported	2		58
<b>EMPLOYEES</b>			
Number of Skin Test Administered	1,620		22,465
Number of Skin Test Read	1,496	92.3%	21,603
Number of Positive Tuberculin Skin Test	11	0.74%	172
Number of Chest X-rays Performed	7		655
Number of Conversions	8		28
Number of TB Suspects Reported	0		1
Number of Active TB Cases Reported	0		1

\*Total = 161 Jails

Source: Department of State Health Services 2012 Monthly Reporting Data

- In 2012, there were 60,853 tuberculin skin tests administered to inmates at the Dallas County Jail. Of that number, 2,192 (5.72%) had a measurement of 10 mm or greater. This represents 8.84% of the total number of positive tuberculin skin test results in all Chapter 89 facilities.
- There were 1,620 tuberculin skin tests administered to employees. Of that number, 11 (0.74%) had a measurement of 10 mm or greater. This represents 6.40% of the total number of positive tuberculin skin test results in all Chapter 89 facilities.
- There were 7 suspects and two cases reported in 2012 at the Dallas County Jail.
- A total of 12 (100%) Monthly Correctional TB Reports were submitted in 2012.

# Questions or Concerns

## Contact

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## Monthly Correctional TB Report

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