



When and how do I perform a Tuberculosis Risk Assessment for my long-term care facility?

A tuberculosis risk assessment should be performed annually for all healthcare facilities, whether or not patients with suspected or confirmed TB disease are expected to be encountered in the setting. The TB risk assessment determines the types of administrative, environmental, and respiratory-protection controls needed for a setting and serves as an ongoing evaluation tool of the quality of TB infection control and for the identification of needed improvements in infection-control measures. The TB Risk Assessment Worksheet (**Appendix B**) can be used as a guide for conducting a risk assessment.

TB Risk Assessment for Settings in Which Patients with Suspected or Confirmed TB Disease Are Not Expected To Be Encountered

(Guidelines for Preventing the Transmission of Mycobacterium tuberculosis in Healthcare Facilities, 2005 – <https://www.cdc.gov/mmwr/pdf/rr/rr5417.pdf>. Accessed July 25, 2017)

The initial and ongoing risk assessment for these settings should consist of the following steps:

1. Review the community profile of TB disease in collaboration with the local or state health department.
2. Consult the local or state TB-control program to obtain epidemiologic surveillance data necessary to conduct a TB risk assessment for the health-care setting.
3. Determine if persons with unrecognized TB disease were encountered in the setting during the previous 5 years.
4. Determine if any HCWs need to be included in the TB screening program.
5. Determine the types of environmental controls that are currently in place, and determine if any are needed in the setting (**Appendices A and D**).

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6. Document procedures that ensure the prompt recognition and evaluation of suspected episodes of health-care–associated transmission of *M. tuberculosis*.
7. Conduct periodic reassessments (annually) to ensure
 - a) proper implementation of the TB infection-control plan;
 - b) prompt detection and evaluation of suspected TB cases;
 - c) prompt initiation of airborne precautions of suspected infectious TB cases before transfer;
 - d) prompt transfer of suspected infectious TB cases;
 - e) proper functioning of environmental controls, as applicable; and
 - f) ongoing TB training and education for HCWs.
8. Recognize and correct lapses in infection control.

You can access the Appendices for performing the Risk Assessment at the following links:

Appendix B – TB Risk Assessment Worksheet

https://www.cdc.gov/tb/publications/guidelines/appendixb_092706.pdf. Accessed July 25, 2017.

Appendices A & D - <https://www.cdc.gov/mmwr/pdf/rr/rr5417.pdf>. Accessed July 25, 2017.

Statistical data needed for TB risk assessment for Nebraska can be found here:

<http://dhhs.ne.gov/Reports/Tuberculosis%20in%20Nebraska%20Annual%20Report%20-%202016.pdf>. Accessed April 18, 2019.

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