

# Infection Preventionist Lunch and Learn

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*of* HEALTH SERVICES

# Series Objectives

- Encourage learning, growth, and networking
- Provide non-regulatory education and information
- Discuss topics relevant to new infection preventionists (IPs)

# Tuberculosis Control Plans



# Tuberculosis (TB)

- TB is a respiratory illness caused by *Mycobacterium tuberculosis*.
- It spreads via airborne route.
- There is a difference in active TB disease vs. latent TB.



# TB Program

- Every health care facility should have a TB program in place.
- The program includes:
  - Environmental controls.
  - Respiratory protection controls.
  - Administrative controls.

# Environmental Controls

**Primary:** Use general and local exhaust ventilation.

**Secondary:** Control airflow using high efficiency particulate air (HEPA) filtration.

# Respiratory Protection Controls

- Implement a respiratory protection program.
- Train health care workers on respiratory protection.
- Educate patients about respiratory hygiene.



# Administrative Controls

- Implement a successful TB control plan.
- Screen and evaluate health care workers.
- Manage patients with suspected or confirmed TB disease.
- Perform a TB risk assessment of the health care facility.

# Facility TB Risk Assessment

- Helps facilities identify the likelihood of encountering TB in the facility and factors that can mitigate its spread.
- Conducted with the assistance of other subject matter experts in the facility.
- Evaluates effectiveness of the TB program.

# Incidence of TB

- Utilize [data](#) available from Wisconsin Department of Health Services (DHS).
- Consider the unique characteristics of the facility.

## Appendix B. Tuberculosis (TB) risk assessment worksheet

This model worksheet should be considered for use in performing TB risk assessments for health-care facilities and nontraditional facility-based settings. Facilities with more than one type of setting will need to apply this table to each setting.

Scoring	√ or Y = Yes	X or N = No	NA = Not Applicable
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### 1. Incidence of TB

What is the incidence of TB in your community (county or region served by the health-care setting), and how does it compare with the state and national average? What is the incidence of TB in your facility and specific settings and how do those rates compare? (Incidence is the number of TB cases in your community the previous year. A rate of TB cases per 100,000 persons should be obtained for comparison.)* This information can be obtained from the state or local health department.	Community rate State rate _____ National rate _____ Facility rate _____ Department 1 rate _____ Department 2 rate _____ Department 3 rate _____
Are patients with suspected or confirmed TB disease encountered in your setting (inpatient and outpatient)?	Yes No
If yes, how many patients with suspected and confirmed TB disease are treated in your health-care setting in 1 year (inpatient and outpatient)? Review laboratory data, infection-control records, and databases containing discharge diagnoses.	Year No. patients Suspected Confirmed 1 year ago _____ 2 years ago _____ 5 years ago _____
If no, does your health-care setting have a plan for the triage of patients with suspected or confirmed TB disease?	Yes No
Currently, does your health-care setting have a cluster of persons with confirmed TB disease that might be a result of ongoing transmission of <i>Mycobacterium tuberculosis</i> within your setting (inpatient and outpatient)?	Yes No

# Risk Classification

Consider:

- Number of TB patients encountered in the facility.
- Transmission of TB in the facility.

## 2. Risk Classification

Inpatient settings	
How many inpatient beds are in your inpatient setting?	
How many patients with TB disease are encountered in the inpatient setting in 1 year? Review laboratory data, infection-control records, and databases containing discharge diagnoses.	Previous year _____ 5 years ago _____
Depending on the number of beds and TB patients encountered in 1 year, what is the risk classification for your inpatient setting? (See Appendix C.)	<input type="radio"/> Low risk <input type="radio"/> Medium risk <input type="radio"/> Potential ongoing transmission
Does your health-care setting have a plan for the triage of patients with suspected or confirmed TB disease?	Yes No
Outpatient settings	
How many TB patients are evaluated at your outpatient setting in 1 year? Review laboratory data, infection-control records, and databases containing discharge diagnoses.	Previous year _____ 5 years ago _____
Is your health-care setting a TB clinic? (If yes, a classification of at least medium risk is recommended.)	Yes No
Does evidence exist that a high incidence of TB disease has been observed in the community that the health-care setting serves?	Yes No
Does evidence exist of person-to-person transmission of <i>M. tuberculosis</i> in the health-care setting? (Use information from case reports. Determine if any tuberculin skin test [TST] or blood assay for <i>M. tuberculosis</i> [BAMT] conversions have occurred among health-care workers [HCWs]).	Yes No
Does evidence exist that ongoing or unresolved health-care-associated	Yes No

# Screening Health Care Workers

Consider:

- Which staff are screened for TB disease and latent TB.
- Type of baseline TB testing that is performed.
- Health care worker TB infection and conversion rates.

# Review of the TB Control Program

Consider:

- Whether there is a written program and when it was last reviewed.
- Whether the infection control committee is actively involved in the TB control program.

## 4. TB Infection-Control Program

Does the health-care setting have a written TB infection-control plan?	Yes No
Who is responsible for the infection-control program?	
When was the TB infection-control plan first written?	
When was the TB infection-control plan last reviewed or updated?	
Does the written infection-control plan need to be updated based on the timing of the previous update (i.e., >1 year, changing TB epidemiology of the community or setting, the occurrence of a TB outbreak, change in state or local TB policy, or other factors related to a change in risk for transmission of <i>M. tuberculosis</i> )?	Yes No
Does the health-care setting have an infection-control committee (or another committee with infection control responsibilities)?	Yes No
If yes, which groups are represented on the infection-control committee? (Check all that apply.)	
<input type="checkbox"/> Physicians <input type="checkbox"/> Nurses <input type="checkbox"/> Epidemiologists <input type="checkbox"/> Engineers <input type="checkbox"/> Pharmacists	<input type="checkbox"/> Laboratory personnel <input type="checkbox"/> Health and safety staff <input type="checkbox"/> Administrator <input type="checkbox"/> Risk assessment <input type="checkbox"/> Quality control (QC) <input type="checkbox"/> Others (specify)

# Lab Processing

Consider:

- What types of TB testing is done by the facility or sent to a reference lab.
- How quickly results are typically available for patients suspected of TB disease.



# Environmental Controls

Consider:

- The types of ventilation used in the facility.
- Air changes per hour in rooms throughout the facility.
- What types of air cleaning method is used in the facility.
- How many airborne infection isolation rooms (AIIR) are present in the facility.

# Respiratory Protection Program

Consider:

- Whether there is a written respiratory protection program for the facility.
- Which health care workers are included in the program.
- Whether respirators are used and which types.
- Whether training and fit testing are routinely done.

# Reassessment of TB Risk

Consider:

- Problems or risks identified during the last facility risk assessment.
- Actions previously taken to resolve problems or mitigate risks.



# Action Items for the IP

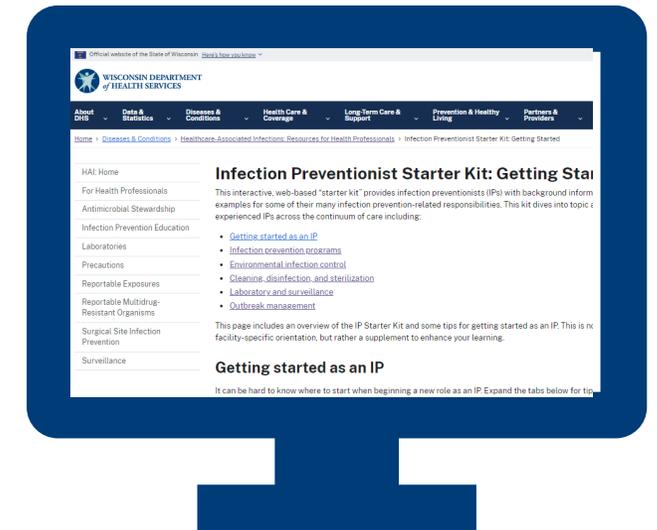
- Work with a team to perform an annual facility TB risk assessment.
- Familiarize yourself with the TB control plan.
- Identify your role in TB prevention in the facility.
- Train staff and audit expected practices.

# Resources

- [Guidelines for Prevention the Transmission of Mycobacterium tuberculosis in Health Care Settings, 2005](#)
- [Tuberculosis Risk Assessment for Health Care Facilities](#)
- [Wisconsin Tuberculosis for Health Care Professionals](#)

# IP Starter Kit

- Interactive, web-based [resource](#)
- Background information, resources, and templates
- Covers topics applicable to IPs across care settings



# HAI Prevention Program Contact Information

 **Email:** [dhswhaipreventionprogram@dhs.wisconsin.gov](mailto:dhswhaipreventionprogram@dhs.wisconsin.gov)

 **Phone:** 608-267-7711

 **Website:** [www.dhs.wisconsin.gov/hai/contacts.htm](http://www.dhs.wisconsin.gov/hai/contacts.htm)

# Send your questions and topic suggestions.

Submit your ideas to Ashley O'Keefe at [ashley.okeefe@dhs.wisconsin.gov](mailto:ashley.okeefe@dhs.wisconsin.gov).



# Upcoming Lunch and Learn Session

**Date: Tuesday, April 14, 2026**

**Topic: Construction ICRA**