



U.S. Immigration  
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Enforcement

ICE Health Service Corps (IHSC)  
Enforcement and Removal Operations  
U.S. Immigration and Customs Enforcement

# Infectious Disease Public Health Actions Guide: Surveillance and Reporting

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## Foreword

This *Infectious Disease Public Health Actions Guide: Surveillance and Reporting* supplements the following IHSC directive:

- IHSC directive: 05-06, *Infectious Disease Public Health Actions*.

This guide explains concepts, assigns responsibilities, and details procedures for infectious disease surveillance and reporting in IHSC-staffed medical clinics.

The intended audience is IHSC-staffed medical clinics supporting health care operations in ICE-owned or contracted detention facilities.

## I. Overview

### A. Purpose

The purpose of this guide is to provide guidance for infectious disease surveillance and reporting in IHSC-staffed medical clinics.

### B. Surveillance Definition

Public health surveillance is the timely, continuous, systematic collection, analysis, and interpretation of health-related data for informing urgent and routine public health activities, including public health interventions; contact and outbreak investigations; evidence-based decision making; and planning, implementation, and evaluation of public health practices. Agency-wide surveillance information is used to monitor disease trends and inform infection prevention and control activities that mitigate transmission and protect the health and safety of detainees and staff.

### C. Responsibilities

Health Services Administrator (HSA), Field Health Care Program Manager (FHPM), and Infection Prevention Officer (IPO)

- Ensure official guidance related to infectious disease surveillance and reporting are routinely implemented.
- Ensure infectious diseases are reported to the health department in accordance with state and local laws.
- Ensure relevant health staff are informed of appropriate point(s) of contact at the local or state health department for reporting urgent public health issues, and ensure that they have contact information and easy access to reporting guidelines and forms.
- Ensure availability of the FHPM, IPO, or designee on weekday shifts during health department operating hours, for communications with local or state health departments for routine and urgent issues.
- Facilitate completion of information requests for surveillance and reporting.

#### Medical Providers

- Report infectious diseases to the local or state health department in accordance with state and local laws.

### Public Health, Safety, and Preparedness (PHSP) Unit Staff

- Monitor infectious disease surveillance information from IHSC-staffed medical clinics and maintain awareness of significant infectious disease information disseminated through domestic and international sources.

### Field Medical Coordinators

- Responsible for reporting of detainees with suspected, probable, and confirmed highly significant infectious diseases (e.g., mumps, measles).
- Responsible for reporting on facilities in respective areas of responsibilities with housing units cohorted for detainee exposures to significant infectious diseases.

### **D. Acronyms**

**CDC** – United States Centers for Disease Control and Prevention

**DHS** – U.S. Department of Homeland Security

**eHR** – Electronic health record

**EpiX** – Epidemic Information Exchange

**HAN** – Health Alert Network

**HSIN** – Homeland Security Information Network

**ICD** – International Classification of Diseases

**MMWR** – Morbidity and Mortality Weekly Reports

**NAAT** – Nucleic Acid Amplification Test

**NBIC** – DHS National Biosurveillance Integration Center

**PAHO** – Pan American Health Organization

**ProMED** – Program for Monitoring Emerging Diseases

**WHO** – World Health Organization

### **E. Definitions with Expanded Information**

**Epidemic** – The occurrence of more cases of disease, injury, or other health condition than expected in a given area or among a specific group of persons during a particular period of time.

**Incidence** – The number of new cases of a disease in a specific area during a specific time.

**Outbreak** – The occurrence of more cases of disease, injury, or other health condition than expected in a given area or among a specific group of persons during a specific period.

**Pandemic** – An epidemic occurring over a widespread area and usually affecting a substantial proportion of the population.

**Reportable Disease** – A disease that, by law, must be reported to public health authorities upon diagnosis.

**Surveillance** – The timely, continuous, systematic collection, analysis and interpretation of health-related data for informing urgent and routine public health activities, including public health interventions; contact and outbreak investigations; evidence-based decision making; and planning, implementation, and evaluation of public health practices.

## **II. IHSC Infectious Disease Reporting**

### **A. Reporting to the Health Department**

Medical providers are required by law to report specific, reportable infectious diseases, to the local or state health department. Each state has its own laws and regulations defining reportable conditions, so medical providers must be knowledgeable of reporting requirements for their jurisdiction.

For tuberculosis (TB) reporting, the FHPM, IPO, or other designated health staff must enter case reporting information in the TB Case Management (TB-CM) template in the electronic health record (eHR) for patients who meet the following criteria. Report TB patients to the PHSP Unit and to the local health department as described in the *IHSC eCW User Guide: TB Case Management*.

1. All patients with confirmed TB disease (culture or NAAT confirmed *M. TB* complex or meeting the clinical definition of active TB disease).
2. Detainees with suspected TB disease that have at least one of the following:
  - a. Started or continued treatment.
  - b. Smear positive for *acid-fast bacilli (AFB)*.
  - c. Cavitory lesions on chest x-ray.
  - d. Symptoms consistent with pulmonary TB.

An abnormal chest x-ray alone should not be reported unless any of the above criteria are met. IHSC health staff should report all detainees with confirmed or suspected TB disease to the local or state TB control programs in accordance with local and state regulations. Most states require TB reporting within one working day after meeting the reporting criteria. The PHSP Unit requires reports within one working day of meeting the criteria. See 05-11-G-1, *Public Health Actions for TB Care Guide: IHSC-Staffed Medical Clinics*.

IHSC health staff should continue reporting updated TB information in eCW until final culture, drug sensitivity results, and classification are available, regardless of whether the detainee is still in custody at the time final results are received. For each update, a new TB-CM encounter must be generated. At no time should an encounter be left unlocked.

The TB-CM template should only be used for TB case management and reporting; it should not be used for documenting any other encounters, transfer summaries, or templates. Health staff should merge the TB-CM templates into a single progress note and print it for reporting to the local or state health department, if the health department agrees to accept the case report in this format.

See also *IHSC eCW User Guide: TB Case Management*, IHSC directive 05-11, *Public Health Actions for Tuberculosis Care*; and 05-11-G-01, *Public Health Actions for Tuberculosis Care Guide: IHSC-Staffed Detention Facilities*.

## **B. IHSC Reporting**

FHPMs, IPOs or designees, and Field Medical Coordinators (FMCs) should report outbreaks and any real or potential significant public health threat to PHSP Unit staff.

At least weekly, FHPMs, IPOs, or designees, and FMCs should report initial and updated status of housing units cohorted for detainee exposures to significant infectious diseases on the [PHSP Unit SharePoint page](#).

FHPMs, IPOs, or designees and FMCs should maintain contact and outbreak investigation line lists of detainees with suspected, probable, or confirmed highly significant infectious diseases (e.g., mumps, measles); these should be updated as new information becomes available. Contact investigation line templates are available on the [PHSP Unit SharePoint page](#). FHPMs, IPOs, or designees and FMCs should upload updated contact investigation line lists to designated folders on the [PHSP Unit SharePoint page](#).

For TB reporting, FHPMs, IPOs or other designated health care providers should assign the TB-CM progress note to the PHSP Unit staff with lead responsibilities for infection prevention and control. See *IHSC eCW User Guide: TB Case Management* for detailed instructions.

### **III. IHSC Infectious Disease Surveillance**

The eHR is used to conduct monitoring and periodic surveillance of infectious diseases. PHSP Unit staff monitor counts of infectious diseases observed at IHSC-staffed facilities using eHR reporting tools. The medical provider's correct assignment of the ICD code in the eHR is essential for accurate infectious disease surveillance.

### **IV. Pandemic or Infectious Disease of Public Health Significance**

Surveillance activities and reporting requirements might change during a pandemic or emerging infectious disease threat. PHSP Unit staff will provide updated guidance during a pandemic or detection of an emerging infectious disease of public health significance.

### **V. Domestic and Global Public Health Awareness**

PHSP Unit staff monitor information disseminated from domestic and international health organizations for announcements and advisories regarding emerging or established public health threats. This information informs health decisions at IHSC-staffed medical clinics. Sources of information include, but are not limited to the following:

- Epi-X: The Epidemic Information Exchange. Epi-X is a secure, web-based communications network for public health professionals, managed by the Centers for Disease Control and Prevention (CDC). It facilitates public health information exchange between CDC, state and local health departments, poison control centers, and other public health professionals.
- Health Alert Network (HAN). HAN is CDC's primary method of sharing cleared information about urgent public health incidents with public information officers; federal, state, territorial, and local public health practitioners; clinicians; and public health laboratories.
- Morbidity and Mortality Weekly Report (MMWR). MMWR is a scientific publication and CDC's primary way of providing timely, reliable, authoritative, accurate, objective, and useful public health information and recommendations.



- National Biosurveillance Integration Center (NBIC). NBIC integrates, analyzes, and shares the nation's biosurveillance information among Department of Homeland Security (DHS) components. This information enables early warning and shared situational awareness of biological events so that critical decisions directing response and recovery efforts are well-informed and, ultimately, save lives.
- Homeland Security Information Network (HSIN). HSIN is a user-driven, web-based unclassified information sharing platform that connects all homeland security mission partners. The HSIN web-portal makes it possible for all levels of government to share sensitive but unclassified information, in support of the homeland security mission. The HSIN portal brings together homeland security partners across the spectrum from law enforcement, critical infrastructure, emergency management, and fire and emergency services to public health, intelligence, and defense.
- The Program for Monitoring Emerging Infectious Diseases (ProMED)-mail. ProMed-mail is an internet-based reporting system, sponsored by the International Society for Infectious Diseases, dedicated to rapid global dissemination of information on outbreaks of infectious diseases and acute exposures to toxins that affect human health, including those in animals and in plants grown for food or animal feed. Electronic communications enable ProMED-mail to provide up-to-date and reliable news about threats to human, animal, and food plant health around the world.
- WHO Disease Outbreak News (DONs). The World Health Organization (WHO) disseminates DONs to provide public information about officially confirmed outbreaks of international importance.
- WHO Weekly Epidemiological Record (WER). The WER serves as an essential instrument for the rapid and accurate dissemination of epidemiological information on cases and outbreaks of diseases under the International Health Regulations and on other communicable diseases of public health importance, including emerging or re-emerging infections.
- Pan American Health Organization (PAHO) Epidemiological Alerts and Updates. PAHO's epidemiological alerts and updates are released to provide information about the occurrence of international public health events confirmed by member states, as well as share recommendations issued by PAHO. Updates are released as new information becomes available regarding events previously shared through epidemiological alerts. These releases complement the WHO DONs.

- Pan American Health Organization (PAHO) Situation Reports. Situation Reports are issued by PAHO to provide updates on international public health responses.

## **VI. Program Monitoring**

PHSP Unit staff periodically request information from health staff to monitor surveillance and reporting activities, and obtain information required for reporting and notification with public health entities. The HSA, FHPM, and IPO should facilitate prompt completion of information requests.

## **VII. Training and Education**

The HSA, FHPM, IPO, or designee should ensure that orientation and annual training include surveillance and reporting procedures is implemented and documented in accordance with IHSC directive 01-04, *Medical Education and Development*.

## **VIII. Privacy and Recordkeeping**

Please refer to IHSC directive 05-06, *Infectious Disease Public Health Actions* for guidance on complying with privacy and recordkeeping procedures.

## **IX. References and Resources**

1. IHSC eCW User Guide: TB Case Management.
2. IHSC directive 05-11, Public Health Actions for Tuberculosis Care.
3. IHSC 05-11-G-01, Public Health Actions for Tuberculosis Care Guide: IHSC-Staffed Detention Facilities.
4. Arizona Department of Health Services - Communicable Disease Reporting.
5. California Department of Public Health - Reportable Diseases and Conditions.
6. Florida Department of Health - Disease Reporting Information for Health Care Providers and Laboratories.
7. Georgia Department of Public Health - Disease Reporting.
8. Louisiana Department of Health and Hospitals - Infectious Disease Epidemiology Program.
9. New Jersey Department of Health - Infectious and Zoonotic Disease Program.
10. New York State Department of Health - Communicable Disease Reporting.
11. Pennsylvania Department of Health - List of Reportable Diseases.
12. Texas Department of State Health Services - Notifiable Conditions.

13. Virginia Department of Health - Surveillance and Investigation.
14. Washington State Department of Health - Notifiable Conditions.