Do I need to wear a mask?

Staff and other prisoners should not be in prolonged contact with infectious pulmonary cases.

The wearing of masks by prison staff is not usually necessary.

Do I need to wear gloves and aprons?

Gloves and aprons need only be worn by staff when dealing directly with sputum-contaminated materials, or procedures such as suction and induced sputum collection. It is unlikely that these procedures will take place in a prison.

Am I at risk from patients with TB spitting?

TB is not normally spread through spitting. This is partly because TB bugs are in phlegm (which comes from deeper in the chest) and not in spit (which is fluid from the mouth).

This document is available in other formats on request.

Please call: 020 8327 7018

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Tuberculosis: frequently asked questions



Information for prison staff

"The greatest risk of transmission of tuberculosis is when a case remains undiagnosed or ineffectively treated"

Is all tuberculosis (TB) disease infectious?

TB in the lungs may be infectious. TB elsewhere is usually not.

Should prisoners with suspected or confirmed tuberculosis be isolated?

Prisoners with TB that does not affect the lungs do not routinely require isolation.

Prisoners with suspected TB of the lungs need to be isolated in a single room until three separate sputum microscopy tests are negative, or until confirmed lung TB is deemed non-infectious by the clinician.

Reorganising accommodation should be considered so that highly susceptible prisoners (for example, those with HIV) are not housed in neighbouring cells.

Take advice from healthcare, the local NHS TB nurse or the PHE Health Protection Team.

Should prisoners with multi-drug resistance be isolated?

Multi-drug-resistant tuberculosis (MDR-TB) cases should be transferred to hospital for treatment in a negative pressure facility.

What precautions should be taken if I need to escort a prisoner with TB?

If the prisoner is infectious they will be asked to wear a mask during the escort.

Remember not all TB patients will be infectious.

What precautions are available if I need to bed watch a prisoner with TB?

Each situation will be individually assessed. This should involve healthcare and the TB nurse.

Should prisoners with suspected or confirmed infectious TB use the communal areas or go to work?

Prisoners with infectious TB should be excluded from work and the communal areas until they have taken at least two weeks treatment and have been reviewed by the healthcare team and the NHS TB service. Prisoners with non-infectious TB do not need isolation.

Can bedding and clothing be washed as usual?

Yes. Bedding and clothing can be washed as normal for all TB cases.

Will the mattress need destroying once the patient has been released?

No. The mattress does not need destroying and can be cleaned as normal.

Should the patient have their own crockery and should they be washed separately?

No. Special precautions are not required regarding crockery, eating utensils, books, bed linen etc, which have been used by a prisoner with TB.

Can the patient use the communal pay phones and will the phone need special cleaning?

The patient can use the phone. No special cleaning or hygiene measures are required. Items visibly contaminated with sputum should be cleaned with Chlor-clean or other appropriate disinfectant.

Should the patient wear a mask?

Infectious TB prisoners may wear a surgical mask to protect others during transfer to hospital, unless advised otherwise by the TB service.

If MDR-TB is suspected, stricter precautions are usually necessary and advice should be taken from the TB service on a case-by-case basis.

Cases should be encouraged to cover their mouth and nose when coughing, at all times.