



What Resettlement Staff Should Know About Public Health Reportable Conditions

Promoting Staff, Volunteer, and Client Wellness

Frontline and management staff of organizations serving refugees and newcomers play an important role in helping to promote health and wellness for clients, staff, and volunteers. This guide introduces resettlement staff to selected public health reportable conditions that are most relevant to their work. The content was created by Switchboard in partnership with the Society of Refugee Healthcare Providers.

What are Public Health Reportable Conditions and Why are they Relevant?

Defining Public Health Reportable Conditions

The medical system (e.g., providers, health centers, or labs) is required to report certain health conditions to public health authorities. These conditions, known as **public health reportable conditions (or notifiable conditions)**, are diseases that are necessary for public health officials to know about because they are contagious (can spread from person to person) and/or are potentially severe. These diseases are preventable

with appropriate precautions. Animal bites are also considered to be a public health reportable condition in some states.

The public health reportable conditions most relevant to resettlement staff, volunteers, and clients are:

- Measles
- Chickenpox (Varicella)
- HIV
- Hepatitis B and C
- Latent tuberculosis infection (LTBI)
- Polio
- Animal bites and exposure

Each state maintains its own list of public health reportable conditions. These lists are lengthy and include many diseases, including those that are rare. Medical providers serving refugee and newcomer patients identified the above shortlist as the most relevant for resettlement staff to be aware of based on their medical experience.

Why Are These Relevant to Resettlement?

While resettlement service providers are not responsible for reporting, they play a critical role in connecting clients with appropriate medical care – particularly if they hear about a client’s health situation that may be a public health concern. It is therefore important for staff to be aware of these conditions.

Service organizations should put in place internal standard operating procedures to address cases of exposure or potential exposure **to infectious (contagious) disease.**

These procedures should address how to:

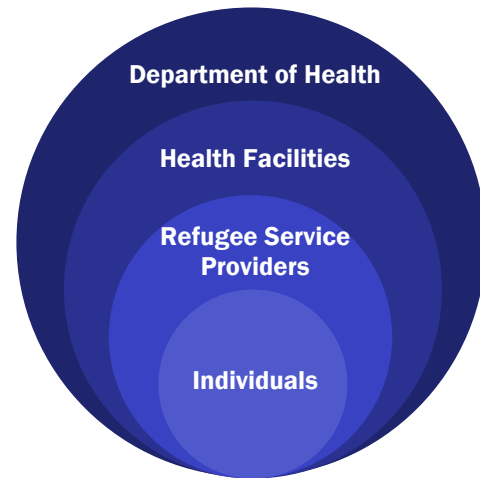
- promote wellness for staff, volunteers and clients;
- help clients seek medical care safely and respectfully;
- maintain confidentiality and client privacy when dealing with health conditions (for example, who needs to know what information within a service organization);
- provide ongoing support and coordination (for example, if a client needs further testing or treatment due to exposure or due to a condition, or if the client cannot work for a time and needs support with daily living needs such as groceries).

Sometimes, relationships with medical providers suffer when service providers refer clients with potentially infectious diseases to care without informing the medical clinic or without helping the client take precautions to prevent exposing others. Clients may not know what precautions to take. Resettlement staff can support both clients and medical provider partners by communicating with clinics and helping clients follow clinics’ advice for safely seeking care in instances of known or suspected infectious disease.

Service providers should also consult with their state refugee health coordinator about when and how to involve them as part of local coordination efforts.

Promoting Wellness is a Team Effort

There are many people and levels involved in a public health reportable condition:



Individuals

Individuals, including clients, individual staff, and volunteers, can help protect themselves, their families, their colleagues, and their communities by:

- Being up to date on all recommended, routine vaccines;
- Getting additional recommended vaccines prior to traveling outside of the U.S.;
- Participating in recommended testing and routine screenings;
- Calling ahead to notify the health clinic of signs that may indicate they have a contagious disease and following the clinic’s instructions;
- Wearing a good-quality face mask if sick;
- Practicing [hand hygiene](#);
- Answering health clinics’ pre-visit questionnaires honestly; and
- Educating themselves about diseases, esp. those that are misunderstood (e.g., latent tuberculosis infection) or stigmatized (e.g., HIV).

Refugee Service Providers

Service providers can help promote wellness by:

- Supporting clients in safely accessing health care when needed;
- Providing clients with linguistically and culturally appropriate health educational materials about vaccinations and other preventive measures;
- Supporting sick or quarantined clients with social needs;

- Following public health recommendations;
- Taking infection prevention precautions, such as having staff be up to date on vaccinations; and
- Connecting clients to existing health and wellness programs and education (e.g., [Refugee Health Promotion](#)-funded programming).

Health Facilities

Health facilities are responsible for taking infection prevention precautions to protect staff and patients, offering **post-exposure prophylaxis** (PEP, see definition at right) treatment as needed for staff and patients, and reporting selected conditions to the Department of Health as required.

Departments of Health

Departments of Health aim to protect the community through providing guidance on quarantine and post-exposure prophylaxis (PEP) and by investigating cases of diseases and **contact tracing** (locating and notifying people who may have been exposed to an infected person).

A Note of Reassurance

Many of the conditions we will talk about in this guide may sound alarming because they have potentially severe health consequences, including death. However, there is good news. **Many of these diseases can be prevented through routine vaccinations and/or other preventive measures, or are not spread through casual contact.** Additionally, many of these diseases' health consequences can be less severe or avoided if treatment is sought as soon as possible.

The best way we can help promote the health of staff, volunteers, and clients is to encourage being up to date on all vaccinations and to contact the appropriate health care professional whenever questions or concerns arise. This is especially important for people who are at risk of more severe illness or who have loved ones who are at risk.

Key Public Health Reportable Conditions

The following diseases are some of the more relevant public health reportable conditions that refugee service providers may encounter in their work with clients.

Key terms and definitions:

Contact tracing: Process of locating and notifying people who may have been exposed to an infected person.

Contagious: Can spread from one person to another.

Infectious disease: Disease where germs enter a person's body, multiply, and cause an infection, leading to illness. Some infectious diseases are contagious.

Post-exposure prophylaxis (PEP): Medical treatment taken after exposure to prevent an infection from occurring. It can take the form of medicine, vaccines, etc.

Public health reportable conditions: Diseases that are necessary for the public to know about because they are contagious and/or potentially severe.

Quarantine: Process where people or animals who were exposed (or potentially exposed) to a contagious disease are separated and restricted in where they can go for a certain amount of time to see if they become sick.

Surveillance: In public health, the collection and analysis of health data to inform activities, including prevention. For example, surveillance can identify if an outbreak of a disease is possible and help ensure people are vaccinated against that disease.

This is not an exhaustive list. State department of health websites typically list out all reportable conditions in a given state (these lists are geared towards medical providers rather than direct service providers).

Measles

Measles is a common disease worldwide that is highly contagious and can be very serious. In the U.S., measles is now eliminated due to widespread childhood immunizations. When measles is present in

the U.S., it is usually linked to travel by unvaccinated individuals outside of the U.S.

When a person infected with measles coughs or sneezes, others who are susceptible can easily become infected if they breathe the contaminated air or touch contaminated surfaces.

Measles can cause serious complications in people who become sick. Becoming sick with measles can be especially dangerous for unvaccinated children younger than five years old, unvaccinated pregnant women, and those with compromised (weakened) immune systems. Measles complications can result in hospitalizations and death.

Because measles is very contagious, it has the potential to overwhelm families along with local health and resettlement systems if there is a large outbreak. Fortunately, it is easy to prevent measles with vaccination. Measles is included among the vaccines given to refugees overseas who are going to be resettled in the U.S. However, infants younger than 12 months are too young for vaccination and need vaccination in the U.S. once they are old enough.

Measles vaccines save lives! They are highly effective and prevent severe health issues. Encourage clients to obtain vaccines on time, including second doses and vaccines for U.S.-born infants.

Thanks to overseas monitoring, surveillance, and vaccinations, it should be very rare for a refugee family to travel following a measles exposure.

The U.S. Centers for Disease Control and Prevention (CDC) website has more information about how measles is [spread](#), as well as [commonly asked questions](#). Clients, staff, and volunteers can reach out to their health care providers with any questions or concerns they may have.

Making sure service providers, volunteers, and clients are up to date on all recommended vaccines is the most effective way to promote wellness and protect against public health reportable conditions.

The domestic medical screening is a great way for clients to get tested and/or vaccinated for many of these conditions.

Chickenpox (Varicella)

Chickenpox (varicella) is another very contagious disease that can be serious. Babies, pregnant people, and those with compromised immune systems are most at risk for complications from chickenpox.

Vaccination is the best way for staff, volunteers, and clients to protect themselves if they do not have documented immunity to chickenpox from prior infection. The chickenpox vaccine is given to refugees departing for the U.S. who are 12 months to 19 years old. Babies younger than 12 months are too young to be vaccinated. The vaccine is also not yet available in some countries.

Visit the CDC website to learn more about [chickenpox](#), including how it is spread.

HIV, Hepatitis B and C

HIV and hepatitis B and C are infections caused by viruses. These conditions are **not** spread by casual contact (for example, contact that might occur in the course of case management interactions). Therefore, unlike for other contagious diseases, **no special precautions need to be taken related to these infections for routine resettlement activities.**

However, ensuring that staff, volunteers, and clients are provided education about these diseases can help reduce judgment and stigma.

Clients should also be encouraged to participate in the [domestic medical exam \(DME\)](#), which provides routine screening for these and other diseases. This is critical because many people may not know they have these diseases. If screening shows they do, they can receive treatment that will help them have better health and quality of life.

Vaccinations for hepatitis B are also available.

The CDC has more information about [HIV](#), [hepatitis B](#) and [hepatitis C](#).

Latent Tuberculosis Infection (LTBI)

Tuberculosis (TB) is caused by bacteria. A person has TB disease when the disease is active and is making them sick. If someone has TB disease in their lungs or throat, the TB bacteria can get into the air and make others sick. TB can be serious if untreated.

Latent tuberculosis infection (LTBI) is when a person is infected with TB bacteria but it is not making them sick.

People with LTBI are not contagious.

However, people with LTBI could develop TB disease in the future, at which point they are sick and may become contagious. Health care providers refer to this situation as the bacteria “waking up.” Individuals with LTBI are encouraged to receive treatment so that the TB bacteria does not have a chance to become active in the future.

The best way service providers can help promote wellness for themselves and clients is by encouraging clients to complete the domestic medical examination. Routine TB screening is part of the DME and is especially important if it was not already done during the overseas medical exam.

Very rarely, the routine screening will find that a client has active TB disease. If this is the case, the health department will advise the person’s close contacts about measures to take. More likely, clients will be diagnosed with LTBI. They are not contagious, and service providers do not need to take any special precautions. Service providers should encourage clients to complete the full treatment for the LTBI so that these clients do not become sick in the future.

The CDC has more information about [tuberculosis](#), [latent TB infection](#), and TB resources for service providers working with [Ukrainians](#).

Polio

Polio is a contagious virus that can infect a person’s spinal cord and make them paralyzed. It can also cause death. Anyone not immune to polio is at risk for severe disease.

Vaccinations are the best way for individuals to keep themselves and their loved ones safe. Polio vaccines are typically offered as part of the overseas vaccine program for refugees who are six weeks to 10 years old prior to resettling in the U.S. Because polio vaccination is a multiple dose series, it is important to encourage clients to make sure they have received all necessary doses. Learn more about [polio](#) on the CDC website.

Animal Bites and Exposure

Animal bites need to be reported because of the potential for animals to have the rabies virus. Rabies in humans is deadly if left untreated.

Times to report animal bites include if someone is:

- Bitten by a bat;
- In close contact with a bat, even if they’re not sure they were bitten (for example, if a bat is found where the person sleeps);
- Found with a bat and unable to say if they have been bitten (for example, in the case of a small child);
- Bitten by a cat or dog who is not vaccinated against rabies or if their vaccination status is unknown; or
- Bitten by certain other animals (e.g., foxes, raccoons).

Staff, volunteers, and clients can best protect themselves by:

- Keeping bats out of the home;
- Avoiding wild animals;
- Avoiding pets whose rabies vaccination history is unknown; and
- Vaccinating pet dogs and cats against rabies.

If clients do report exposure to a bat or an animal bite, service providers can help them contact either Animal Control or the local Department of Health. These organizations will help determine next steps, such as testing of the wild animal or quarantine for an unvaccinated pet. If the animal is not available, clients should consult with the Department of Health and their health care provider. They may need to undergo treatment. Visit the CDC website for more information about [rabies](#).

Reporting Requirements

Reporting is important because it:

- Protects our families and communities;
- Is required by law;
- Can help determine where resources are used to prevent and treat diseases; and
- Helps prevent the spread of potentially severe diseases that could overwhelm the health system.

The medical provider's office, health center, or lab where a patient is diagnosed does the reporting, **not the resettlement provider**. The local Department of Health then determines next steps that need to be taken by those impacted.

Resettlement staff are not expected to report conditions. The service provider's role is to refer clients for medical care. Service provider organizations are also highly encouraged to develop internal protocols for how to address scenarios of exposure/potential exposure to infectious disease for staff, volunteers and clients.

Reporting requirements, including which conditions are considered reportable and the required timeframe, vary by jurisdiction and health condition. Reporting a condition does not require public disclosure of a person's identity.

Conclusion

Ensuring service providers, volunteers, and clients are up to date on all recommended vaccines and that clients have completed domestic medical screening is the most effective way to promote wellness and protect against public health reportable conditions. Working with appropriate health partners and following recommended preventive or treatment measures is also critical. With these measures, we can help keep ourselves, clients, families, and communities safe.

Resources

Switchboard webinar recording: [Understanding U.S. Domestic Medical Screening for Refugees and Other Newcomers](#)

U.S. Centers for Disease Control and Prevention (CDC) resources about specific diseases:

- [Measles](#)
- [Chickenpox \(Varicella\)](#)

- [HIV, Hepatitis B, and Hepatitis C](#)
- [Tuberculosis](#) and [Latent Tuberculosis Infection](#)
- [Tuberculosis Resources for Service Providers Working with Ukrainians](#). Includes translated materials.
- [Animal Bites/Rabies](#)
- [Polio](#)

State of Minnesota Department of Health poster: [Think Tuberculosis \(TB\)](#)

The [National Resource Center for Refugees, Immigrants, and Migrants \(NRC-RIM\)](#) is funded by the U.S. Centers for Disease Control and Prevention to support health departments and community organizations working with refugee, immigrant, and migrant communities that have been disproportionately affected by health inequities.

- [COVID-19 Information for Newcomers](#) - NRC-RIM partnered with the International Organization for Migration (IOM) to create a booklet highlighting the most important information about COVID-19 information for new arrivals to the United States. Available in 19 languages with audio recordings.

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