

MAXABILITIES OF YORK COUNTY

PROCEDURE TITLE: Medical: Screening for Tuberculosis (TB)

APPLICABILITY: MaxAbilities of York County (MaxAbilities) Staff and Volunteers
Consumers participating in a MaxAbilities Residential or Day Program

EFFECTIVE DATE: June 26, 2007

PROCEDURE REVISION: December 4, 2025
September 29, 2010
April 29, 2010

REFERENCE: MaxAbilities Policy: “Medical: Guidelines for Screening for Tuberculosis”
OIDD Departmental Directive 603-06
CDC Guidelines
SCDPH Health Licensing Standards
OSHA General Industry Standard (as applicable)

PROCEDURE PURPOSE: The Two-Step Skin Test (intradermal Mantoux method) is given to establish a true baseline. In particular it will establish as true negative for a person never infected with TB. If the person does not react to the first test, the second test is given to give the immune system a “boost”. The second test should be positive if the person is truly infected with TB. The first dose triggers a response, but the second dose provides the true reaction. They both work together to provide a true baseline. This baseline information will become very important in the future. By having established a true baseline, the likelihood of misinterpreting later tests is minimized. This helps to eliminate the possibility of unnecessary medical tests and medications for those who may not need them.

ROUTINE SCREENING FOR NEW ADMISSIONS (Residential and Day Programs):

1. Consumer admitted from the community or home that is NOT documented to be a previously positive reactor

- a. A Two-Step Skin Test is to be done and read within one month prior to admission. It is acceptable for the first TB test to be given and read before admission and then give the second step within one month after admission.
- b. Where immediate placement is needed and the first step of the Two-Step Skin Test cannot be read by the date of admission, the medical record must document a recent (within one month) chest x-ray and a written assessment for symptoms of active TB (*attachment A*) prior to admission. A Two-Step Skin Test will be performed within one month after admission.

2. Consumer admitted from another long-term care facility that is NOT documented to be a previously positive reactor

- a. If there is a documented Two-Step Skin Test within six months prior to admission, then no further admission screening for TB is required.
- b. If the documented Two-Step Skin Test was completed more than six months before admission, then a One- Step Skin Test must be done and read within one month prior to admission.
- c. If the first step of the Two-Step Skin Test has been completed, then the second step is required within one month after admission.
- d. When immediate transfer is needed and the first step of the Two-Step Skin Test cannot be done and read by the date of the transfer, the medical record must document a recent (within one month) chest x-ray and a written assessment for symptoms of active TB prior to transfer. The receiving facility shall perform a One-Step Skin Test within one month after admission.

3. Consumer admitted directly from the hospital that is NOT documented to be a previously positive reactor

- a. If a documented Two-Step Skin Test was done in the hospital within six months prior to admission, then no further admission screening for TB is required.
- b. If a documented Two-Step Skin Test was done greater than six months prior to admission then a One-Step Skin Test must be done and read prior to admission.
- c. If the first step of the Two-Step Skin Test has been completed in the hospital, then the second step is required within one month after admission.
- d. Where immediate transfer is needed and the first step of the Two-Step Skin Test cannot be done and read by the date of the transfer, the medical record must document a recent (within one month) chest x-ray and a written assessment for symptoms of active TB prior to transfer. The receiving facility shall perform a One-Step Skin Test within one month after admission.

4. Consumer admitted from one MaxAbilities program to another that is NOT documented to be a previously positive reactor

- a. See # 2 listed above

5. Consumer re-admitted to the same program after being discharged to the Community

- a. If there is a documented Two-Step Skin Test within six months prior to admission, then no further admission screening for TB is required.
- b. If a documented Two-Step Skin Test was done greater than six months prior to admission, then a One-Step Skin Test must be done and read prior to admission.
- c. Where immediate transfer is needed and first step of the Two-Step Skin Test cannot be done and read by the date of the transfer, the medical record must document a recent (within one month) chest x-ray and a written assessment for symptoms of active TB prior to transfer. The receiving facility shall perform a One-Step Skin Test within one month after admission.

SCREENING FOR NEW ADMISSIONS WITH SPECIAL CONSIDERATION (Residential and Day Programs):

1. Consumer admitted with a documented history of positive TB Skin Test

- a. Within one month prior to admission, a chest x-ray (CXR) and a physical exam including an assessment for signs and symptoms of active TB must be completed.
- b. All persons who have a positive TB Skin Test will be referred to their attending physician and evaluated for prophylactic therapy (INH).
- c. All persons diagnosed with active TB will be treated according to CDC Guidelines for Tuberculosis Treatment. DHEC/ Local Health Department will be consulted and all recommendations will be followed.
- d. YCBDSN does not have the capability to allow residential placement of individuals with active contagious TB disease so alternate placement would need to be obtained for any individual who is diagnosed with an active case of the disease. The individual would be required to undergo evaluation by a physician in cooperation with the Health Department and deemed non-contagious prior to residential program admission.
- e. All persons with a positive TB Skin Test must be evaluated annually and a record shall be kept in the MaxAbilities Nursing Department of the evaluation which documents the presence or absence of the symptoms of Tuberculosis. Annual chest x-rays are not indicated.

2. Consumer admitted without a positive TB Test history but whose initial TB test is interpreted as positive

a. Interpreting a TB Skin Test reaction depends on the size of the induration and on the person's risk factors.

1) An induration of ≥ 5 mm. is considered a positive reaction for the following people:

- People living with HIV
- Recent close contact with infectious TB
- People with chest x-ray findings suggestive of previous TB disease
- People with organ transplants
- Other immunocompromised patients

2) An induration of ≥ 10 mm. is considered a positive reaction for the following people:

- People who have recently come to the US (within the last five years) from areas of the world where TB is common (for example: Asia, Africa, Russia, Eastern Europe, or Latin America)
- People who inject illegal drugs
- People who live or work in high risk congregate settings (for example: nursing homes, homeless shelters, correctional facilities)
- Mycobacteriology laboratory workers
- People with medical conditions, other than HIV, that increase the risk for developing TB disease
- Children younger than 4 years
- Infants, children or adolescents exposed to adults in high-risk categories

3) An induration of ≥ 15 mm is considered a positive reaction for people with no known risk factors for TB. However, targeted testing should be done only in high-risk groups since a positive reaction in low-risk groups can be inaccurate. Most people who have a positive TB test reaction will usually have a positive reaction every time they are tested, regardless of whether they received treatment. This is because the TB Skin Test detects the immune response to tuberculin- not the presence of tubercle bacilli in the body (TB disease).

b. The MaxAbilities nursing department, in cooperation with the MaxAbilities Medical Director and local DPH/ Health Department personnel, will determine the most prudent course of action for any admission that falls under this situation.

- c. MaxAbilities does not have the capability to allow residential placement of individuals with active contagious TB disease so alternate placement would need to be obtained for any individual who is diagnosed with an active case of the disease. The individual would be required to undergo evaluation by a physician in cooperation with the Health Department and deemed non-contagious prior to residential program admission.

DISCHARGES: The requirements for a person being discharged from a MaxAbilities residential or day program to another licensed facility are as follows:

1. A baseline Two-Step Skin Test must be done if there is no other documented Two- Step Skin Test.
2. If it has been longer than six months since the Two- Step baseline, then a One- Step Test must be given and read within one month prior to discharge.
3. If the person has a documented positive TB Skin Test, then a physical exam that includes an assessment for signs and symptoms of TB and a chest x-ray within one month of discharge is necessary.

SCREENING FOR NEW EMPLOYEES/ VOLUNTEERS/ CONTRACT WORKERS (*working in areas covered by this procedure*):

1. TB Testing Requirements:

- a. TB Skin Tests must be done no more than one month prior to employment.
- b. A Two-Step Skin Test will be administered to all new employees unless they have documentation of:
 - 1) A previous Two-Step Skin Test within the last 12 months, then proceed with the One-Step Skin Test
 - 2) A previous Two-Step Skin Test baseline with documented annual TB Skin Tests, then proceed with a One-Step Skin Test
 - 3) A previous positive Skin Test (if a previously positive reaction cannot be documented), then a Tuberculin Skin Test using a partial dose of .05 ml of 5TU PPD intradermally shall be administered and read in 48-72 hours. If results are less than 10mm, then the Skin Test will be repeated using a full dose in one to three weeks. This will be considered a Two-Step Skin Test.
 - 4) A history of BCG vaccine (treat as in #3)

- c. After administering the Skin Test, the nurse should document the screening dates, dates of results, results in millimeters (mm), nurse's signature, and/or chest x-ray date and results in the person's health file. This information is maintained in the MaxAbilities Human Resources Department.
- d. Persons whose initial TB Skin Test is interpreted as positive:
1. Interpreting a TB Skin Test reaction depends on the size of the induration and on the person's risk factors.
 - a) An induration of ≥ 5 mm is considered a positive reaction for the following people:
 - People living with HIV
 - Recent close contact with infectious TB
 - People with chest x-ray findings suggestive of previous TB disease
 - People with organ transplants
 - Other immunocompromised patients
 - b) An induration of ≥ 10 mm is considered a positive reaction for the following people:
 - People who have recently come to the US (within the last five years) from areas of the world where TB is common (for example: Asia, Africa, Russia, Eastern Europe, or Latin America)
 - People who inject illegal drugs
 - People who live or work in high risk congregate settings (for example: nursing homes, homeless shelters or correctional facilities)
 - Mycobacteriology laboratory workers
 - People with medical conditions, other than HIV, that increase the risk for developing TB disease
 - Children younger than 4 years
 - Infants, children or adolescents exposed to adult in high-risk categories
 - c) An induration of ≥ 15 mm is considered a positive reaction for people with no known risk factors for TB. However targeted testing should be done only in high-risk groups since a positive reaction in low-risk groups can be inaccurate. Most people who have a positive test reaction will usually have a positive reaction every time they are tested, regardless of whether they received treatment. This is because the TB Skin Test detects the immune response to tuberculin, not the presence of tubercle bacilli in the body.

- e. A TB evaluation form for signs/symptoms shall be completed by the employee with a positive TB test initially at the time of hire and annually thereafter.
- f. Referrals for employees with a Positive Tuberculin Skin Test
 - 1) All Tuberculin Skin Tests determined to be positive on health care workers must be referred to and further evaluated by the local DPH/ Health Department or a physician.
 - 2) Any employee who has a Positive Tuberculin Skin Test will be placed on administrative leave until the necessary follow up to determine infection/disease status has been completed by medical professionals.
 - 3) These referrals must be documented in the person's health file with a copy of their chest x-ray report and a written physician's progress note stating what action was taken.

2. Positive Employee TB Infection/ Disease Requirement:

- a. All cases of tuberculosis infection and disease must be reported to DPH/ local Health Department and their recommendations will be followed.
- b. Any employee diagnosed with active TB must be cleared by the local Health Department or the physician before being allowed to return to work.

ANNUAL TUBERCULIN SKIN TESTING REQUIREMENTS FOR STAFF/ VOLUNTEERS/ CONTRACT WORKERS *(working in areas covered by this procedure):*

- 1. Persons who have previously been negative will receive annual TB Skin Tests within the month of March with appropriate follow up as necessary should their test convert to positive.
- 2. Persons who have previously been positive and not received prophylactic medication (INH therapy) from the public health department or a physician will be instructed as to their lifelong risk for active TB, the signs/ symptoms of tuberculosis and will be evaluated annually using a TB evaluation form.
- 3. Persons who have previously been positive and who have received a completed course of prophylactic medication (INH) from the public health department or private physician need only be evaluated annually for signs/symptoms of tuberculosis using a TB evaluation form.

CHEST X-RAYS: Chest x-rays will be obtained on the following people and the documentation placed in their health files:

1. All persons found to be positive on the initial Skin Test
2. Person whose Skin Test converts to positive
3. Known tuberculin reactors or Skin Test negative persons with pulmonary symptoms that may be due to tuberculosis. These x-rays can be done at the local health department. After the initial chest x-ray to evaluate for TB, routine repeat chest x-rays are recommended only to evaluate symptoms suggestive of tuberculosis.

RESPONSIBILITY:

1. Individuals participating in MaxAbilities Day Services Only:
 - a. The Director of Vocational Supports/ designee is responsible to ensure that the necessary Two-Step Skin Test is completed and documentation is obtained by MaxAbilities prior to program admission.
 - b. Program Directors/ Managers are responsible to ensure the annual One-Step Skin Test is completed and documentation is available in the program to verify completion of the annual screening requirement.
 1. This annual testing is done at no cost to the participating individual.
 2. Program Directors/ Managers are also responsible for all notifications to participating individuals and/or families that testing is due. Copies of notification will be maintained.
 3. For individuals with previous positive TB Skin Test: a copy of the annual TB Signs/ Symptoms Evaluation Form must be on file in lieu of annual TB Skin Tests.
 - c. Individuals participating in MaxAbilities Day Services must comply with the initial/ annual screening process. Failure to comply may result in suspension from the program until the necessary testing requirement is completed.
2. Individuals participating in MaxAbilities Residential Services:
 - a. The Director of Residential Supports/ designee is responsible to ensure that the necessary Two-Step Skin Test is completed and documentation is obtained by MaxAbilities prior to program admission.
 - b. Coordinators/ Administrators are responsible to ensure the annual One-Step Skin Test is completed and documentation is available in the program to verify completion of the annual screening requirement.
 1. This annual testing is done at no cost to the participating resident.

2. Coordinators/ Administrators are also responsible for notifications to residents and/or families (as applicable) that testing is due. Copies of any notification made will be maintained.
 3. For residents with previous positive TB Skin Test: a copy of the annual TB Signs/ Symptoms Evaluation Form must be on file in lieu of annual Skin Testing.
 - c. Individuals participating in MaxAbilities Residential Services must comply with the initial/ annual screening process.
 - d. MaxAbilities does not have the capability to allow residential placement of individuals with active contagious TB disease so emergency transfer to an appropriate placement would need to be obtained for any current resident who is diagnosed with an active case of the disease. The individual would be required to undergo evaluation by a physician in cooperation with the Health Department and deemed non-contagious prior to residential program re-admission.
3. Employees, Volunteers, Contract Workers (*working in areas covered by this procedure*):
- a. The Director of Human Resources/ designee is responsible to ensure that the necessary Two-Step Skin Test is completed and documented according to current MaxAbilities policy.
 - b. The Director of Human Resources/ designee is responsible to ensure that the annual One-Step Skin Test is completed and documentation is available to verify the annual screening requirement.
 - c. For employees/ volunteers/ contract workers with previous positive TB Skin Test: a copy of the annual TB Signs/Symptoms Evaluation Form must be on file in lieu of annual Skin Testing.
 - d. Employees must comply with initial/ annual TB screening requirements. Failure to comply will result in the employee being placed on unpaid administrative leave until they are in compliance.
4. The MaxAbilities Nursing Department is responsible to:
- a. Maintain adequate supplies of TB testing materials
 - b. Complete/ Interpret TB Skin Tests in accordance with CDC/ Public Health Guidelines
 - c. Complete thorough documentation of testing and forward to appropriate parties.

RECORD KEEPING:

1. The MaxAbilities Human Resources Department will maintain current TB screening records on all employees, volunteers, contract workers. The Human Resources Department will also maintain a database of TB screening due dates for all employees to ensure prompt notification of annual testing can occur.
2. The MaxAbilities Day and Residential programs will maintain current TB screening records on all individuals receiving services through the particular program.
3. The MaxAbilities Nursing Department will maintain a database of TB screening due dates for all consumers to ensure prompt notification of annual testing can occur.