

HOME HEALTH AGENCIES  
REGULATION INTERPRETATION  
BUREAU OF CHILD CARE AND HEALTH FACILITIES

KAR 28-51-103(c)(6)

**SUBJECT:** Initial and periodic health assessments and tuberculin testing of home health agency employees.

**DATE:** 3/8/07 **REVISED:** 8/19/09

**INTERPRETATION:** KAR 28-51-103(c)(6) requires the following for each employee of a home health agency: Evidence of good general health and a negative tuberculin skin test or chest X-ray upon employment. Subsequent periodic health assessments or physical examinations shall be given in accordance with agency policies. To be in compliance with these requirements, agencies should incorporate the following into their policies and procedures.

1. At the time of hire, a TB (tuberculosis) determination will be made. A TB skin test or BAMT (Blood Assay for Mycobacterium Tuberculosis) is to be given or results of a recent TB skin test by a public health department or BAMT processed by a qualified laboratory (within 8 - 10 weeks of hire date) obtained. A negative TB determination is to be made prior to allowing the employee to provide patient care. CDC (Centers for Disease Control) recommend a two-step TB or a single BAMT. At this time, we are not specifically requiring two-step. It is up to the agency. TB testing is not automatically contraindicated because of pregnancy, other physical conditions, or BCG vaccination (CDC guidelines). For pregnant employees, the test may be postponed, if a physician gives a written statement to that effect and certifies their good health. Written statement(s) must be on file.

A CXR (chest X-ray) is utilized for individuals with a documented history of positive TB skin testing and/or history of chemotherapy for TB. A CXR that has been taken within 6 months of hire is acceptable. If a CXR is used to make the TB determination, documentation of positive TB skin test/BAMT and/or history of chemotherapy for TB from a physician or other source (not just the employee's statement) must be on file. On rare occasions, a CXR is used due to the employee's physical condition. A physician's written statement is required and must be on file.


2. A health assessment or physical examination is to be conducted at the time of hire to determine good general health. An assessment may be completed by an RN. Any abnormal findings are to be referred to a physician.

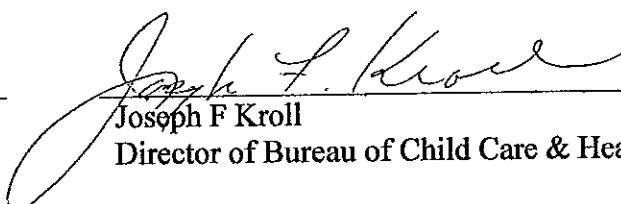
A physical examination cannot be made by an RN. They must be completed by a physician (MD/DO)

3. The agency's policies and procedures should include the agency's specifics for TB and good general health determination upon hire and subsequently. These policies need to include specific time frames and evaluation methods. Many agencies give TB skin test annually. If an agency elects to give a two-step at the time of hire, they only need to give a single skin test, if the individual has documented evidence of a negative TB skin test within 12 months of the date of hire (CDC guidelines). Subsequent CXRs do not have to be completed unless the employee becomes symptomatic. In lieu of a subsequent CXR, agencies use a TB questionnaire - usually on an annual basis (CDC guidelines).

4. In formulating and revising these policies, consultation with the local health department(s) is advised to aide in establishing frequency of subsequent TB determination. If exposure to a person known to be positive for TB occurs, consultation with the local health department(s) is advised to facilitate appropriate action. Periodic review of CDC guidelines is recommended, <http://www.cdc.gov/nchstp/tb/>

Surveyors will determine compliance not only with the regulation, but also with agency policies.

  
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