.01 Procedures:

This provider instruction procedure is only in effect if the Department of Health and Mental Hygiene (DHMH) declares a shortage of tuberculosis testing solution.

The Office of Licensing and Monitoring based on DHMH recommendation shall defer the T.B. two step skin test of all employees and volunteers during the period of the shortage.

Other screenings for T.B. shall be documented in lieu of the skin test during this time, which include a signs and symptoms check or acquiring a doctor's note regarding the employee or volunteer's TB risk. The signs/symptoms of TB are coughing for more than two weeks, significant weight loss, and night sweats. If any employee experiences all of these symptoms they should see a doctor immediately.

Once the shortage has ended all skin test for new employees, regular scheduled screening for current employees, foster parents and foster family household members will be required.

.02 Definitions:

1. Tuberculosis (TB) - (short for *tubercle bacillus*) is a disease caused by a bacterium called *Mycobacterium tuberculosis*. The bacteria usually attack the lungs, but TB bacteria can attack any part of the body such as the kidney, spine, and brain. If not treated properly, TB disease can be fatal.

2. Purified Protein Derivative (PPD) – Solution used for tuberculosis skin test

.03 References: COMAR 07.05.01.13C, 07.02.06, 07.05.03.10C (1)(a)

07.05.01.13 Personnel Policies and Practices.

C. Medical Information.
In the event of shortage of tuberculosis testing solution

(1) The agency shall obtain a physician's report before an individual's employment or volunteer appointment and every 2 years thereafter for an employee, governing board member, or volunteer who may be in close or frequent contact with children in care or receiving adoption services.

(2) The individual's medical report shall include a clearance for tuberculosis, communicable diseases, and any mental health challenges that would preclude working with children.

(3) If a medical report documents a potential medical threat to children in care, the chief administrator or president of the governing board shall take appropriate action to protect the children.

07.05.02.06 Foster Parent Medical Requirements.

A. All household members or employees of the individual or couple seeking foster parent certification or re-certification shall have:

   (1) An initial medical examination at the time of application for foster parent certification by a qualified Maryland physician which includes:

       (a) An analysis of a tuberculosis test or x-ray, and

       (b) Testing for any other communicable disease; and

   (2) Reexaminations at least every 2 years after the initial examination.

B. Household Health and Mental Health Issues. If any household member or employee of the household has symptoms or a history of health or mental health problems which might impair the foster parent's proper care of the foster child or which might be communicable or injurious to the foster child, the agency shall require that individual to:

   (1) Have an additional medical or psychological examination for the problem; and

   (2) Provide a signed, written statement by the examining physician or licensed mental health professional that the problem poses no threat to the foster child.

07.05.03.10C(1)(a) Application for Adoptive Parent.

C. Reconsideration.

   (1) The application shall include:

       (a) Documentation of annual medical evaluations of the adoptive parent and all other individuals living in the home;