

## Recommendations for Tuberculosis (TB) Assessment in Long-Term Care and Retirement Homes

### Recommendations for Residents

A tuberculosis assessment is important to identify active TB disease to prevent transmission in the Home and to identify latent TB infection so treatment can be initiated, if indicated. Therefore, within 90 days prior to admission or up to 14 days after admission:

1. All new residents must undergo a history and physical exam by a physician or nurse practitioner that includes a symptom review and a chest x-ray (posterior-anterior and lateral) for those > 65 years of age. If symptoms or chest x-ray suggest possible active TB disease, the resident should not be admitted to the facility until further assessment is done.
2. A resident who is  $\leq$  65 years of age with previous negative or unknown skin test results, should have a two-step TST done. A TST is not recommended for residents with a previous positive TST.

### Recommendations for Residents admitted to Short-Term Care of less than 3 months (e.g. Respite care)

Residents in facilities for short term care should receive an assessment and symptom review by a physician/nurse practitioner to rule out active pulmonary TB within 90 days prior to admission or 14 days after admission, (LTCH Act\*, Sec.229-10.1). If the symptom review indicates potential active pulmonary TB disease, a chest x-ray must be obtained and active TB disease ruled out. A TST for residents in short term care is not recommended.

### Management of Residents with Suspected Active TB Disease

If at any time, active pulmonary TB disease is suspected in a resident, the individual should be isolated immediately. This involves placing the resident in a single room, keeping the door closed, limiting interactions with staff and visitors and ensuring appropriate personal respiratory protection. The resident should wear a surgical mask if tolerated while others are in the room. N95 masks are recommended for staff. Immediate steps should be taken to ensure appropriate medical care, investigation and follow-up according to facility policies and procedures. The Leeds Grenville and Lanark District Health Unit should be notified and consulted regarding follow-up.

### Reporting Requirements for Tuberculosis

Under the Health Promotion and Protection Act, R.S.O. 1990, c. H.7, diagnoses of TB infection and cases of suspect and confirmed active TB disease are reportable to Public Health. For information on how to report or to ask for advice related to TB infection or TB disease, please contact the Leeds, Grenville and Lanark District Health Unit.

## Recommendations for Baseline Assessment of Employees and Volunteers

Baseline tuberculin skin testing (TST) is important for all new employees and volunteers in order to assess risk if there is an exposure to a case of active TB. Given the low incidence of TB disease in Leeds, Grenville and Lanark, it is acceptable that the following assessment be initiated within 6 months before starting work or within 6 weeks post-hire. Volunteers include those who expect to work regularly during the next year (approximately a half day per week or more). If a person has symptoms of TB (cough of more than 2 weeks duration with or without fever, night sweats or weight loss), the person should not work until pulmonary TB disease is ruled out by a physician.

Person with unknown TST	*Person with a positive TST on baseline testing	Person with documented results of previous 2-step TST	
<p>A 2-step TST is required</p> <p>↓</p> <p>If both tests are negative</p> <p>↓</p> <p>No further testing is recommended</p>	<p>Report person with positive TST to Leeds, Grenville and Lanark District Health Unit for education</p> <ul style="list-style-type: none"> <li>Refer to physician for a medical evaluation, possible treatment for latent TB and education about signs and symptoms of active TB</li> <li>Remind person to promptly report symptoms suggestive of TB disease, such as cough of more than 2 weeks duration with or without fever, night sweats or weight loss</li> <li>Further skin testing is not recommended</li> </ul>	<p>If any previous test was positive</p> <p>↓</p> <p>Do not do a TST. Refer to physician for a medical evaluation.</p>	<p>If both tests were negative</p> <p>↓</p> <p>Done &gt;6 months ago      Done &lt;6 months ago</p> <p>↓</p> <p>A 1-step TST is necessary      No further testing is recommended</p> <p><b>Note:</b> If the result of this TST is positive, refer to *Person with a positive TST.</p>

## Requirements for Contract Workers and Students

Supplying agencies or schools are responsible for pre-placement TB assessment and follow-up. This should be clarified with agencies or schools to confirm that individual contract workers and / or students have had their TB skin test to ensure a baseline prior to starting the placement.

## Regular Screening for Residents, Employees and Volunteers

Annual TB skin testing is not recommended. If an infectious case of active TB disease occurs in the facility, contact follow-up will be coordinated by the Leeds, Grenville and Lanark District Health Unit. TB skin testing is free for persons identified as a contact of a case of TB disease.

### References:

Public Health Agency of Canada, (2014). *Canadian Tuberculosis Standards*, 7th Edition.

<https://www.canada.ca/en/public-health/services/infectious-diseases/canadian-tuberculosis-standards-7th-edition.html>

\*Ontario Laws. *O. Reg.79/10: GENERAL* under Long-Term Care Home Act, 2007, S.O. 2007, c.8 <https://www.ontario.ca/laws/regulation/100079>



For more information, please call **1-800-660-5853** or visit our website at [www.healthunit.org](http://www.healthunit.org)