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**DEPARTMENT OF HEALTH AND ENVIRONMENTAL CONTROL**

CHAPTER 61

Statutory Authority: 1976 Code Sections 1-23-130 and 44-29-150 through -170

61-22. The Evaluation of School Employees for Tuberculosis.

**Emergency Situation:**

This is a new emergency situation concerning challenges to schools and day care centers for infants and children in implementing tuberculosis screening requirements for employees during the remainder of the school year.

Section 44-29-150 of the South Carolina Code of Laws provides that “[n]o person will be initially hired to work in any public or private school, kindergarten, nursery or day care center for infants and children until appropriately evaluated for tuberculosis according to guidelines approved by the Board of Health and Environmental Control.” In addition, section 44-29-160 requires that “[a]ny person applying for a position in any of the public or private schools, kindergartens, nurseries, or day care centers for infants and children of the State shall, as a prerequisite to employment, secure a health certificate from a licensed physician certifying that such person does not have tuberculosis in an active stage.” In furtherance of these statutory requirements, the South Carolina Department of Health and Environmental Control (“DHEC” or the “Department”) originally promulgated Regulation 61-22 in 1981, setting forth guidance for the evaluation of school employees for tuberculosis. Except as discussed below, Regulation 61-22 had not been changed since 1986.

To update school screening processes, DHEC submitted proposed revisions of Regulation 61-22 to the S.C. General Assembly on January 25, 2016, and those revisions took effect by publication of the revised Regulation 61-22 in S.C. State Register Volume 40 Issue 6 on June 24, 2016 (the “Revised Regulation”).

Shortly after adoption of the Revised Regulation, DHEC recognized that the short time period between the adoption of the Revised Regulation and the start of the new school year would create significant hardships for schools, nurseries and day cares in meeting the Revised Regulation’s new requirements. In order to protect the public welfare, DHEC filed an emergency regulation on August 3, 2016, tolling the implementation of the Revised Regulation and reinstating the Prior Regulation. DHEC re-filed the emergency regulation on October 31, 2016, pursuant to S.C. Code Ann. § 1-23-130(C).

Contemporaneously with filing the emergency regulation, DHEC received comments from effected stakeholders requesting revisions to Regulation 61-22. Based upon these comments and concerns, DHEC initiated the required statutory process to further amend the regulation. DHEC engaged stakeholders for their additional input, reaching over two hundred private and public school and daycare staff, including, but not limited to, the South Carolina Board of Education, the South Carolina School Board Association, the South Carolina Independent School Association, the South Carolina Charter School Association, the South Carolina Parent Teacher Association, Greenville County School District, Charleston County School District, as well as the Department of Social Services and the South Carolina Association of Early Care and Education. As a culmination of the work with these stakeholders and others, DHEC submitted a new Regulation 61-22 (the “New Regulation”) to the General Assembly on January 10, 2017, the first day of session.

On January 29, 2017, the emergency regulation expired, resulting in the Revised Regulation again becoming effective, but before the General Assembly could consider the New Regulation. Some of the same stakeholders who helped craft the New Regulation have contacted DHEC, raising questions and concerns about this gap between the expiration of the emergency regulation and consideration of the New Regulation. Their comments raise serious concerns about the burdens associated with having to implement the Revised Regulation’s requirements during the remaining months of the school year. Further, these partners have conveyed to the agency the burdensome human and financial resources required to change processes at this time and before the General Assembly has had the opportunity to fully review the New Regulation and its provisions that have been universally supported by stakeholders.

DHEC recognizes that the difficulties in implementing the Revised Regulation during the school year will create significant hardships for schools, nurseries and day cares in meeting the Revised Regulation’s requirements. Consequently, DHEC has determined that there exists the real likelihood that the Revised Regulation’s requirements cannot be implemented before the school year ends or without great costs, which places the public’s welfare in imminent peril. To alleviate strain on school, nursery and day care operations, and to protect the public’s welfare, DHEC finds the enactment of this new emergency regulation necessary.

Through this new emergency regulation, DHEC will toll the implementation of the Revised Regulation and implement the following TB evaluation and screening requirements. These requirements are consistent with the New Regulation, distinct and different from those of the prior emergency regulation, and in line with current recommendations from the Centers for Disease Control and Prevention (CDC), yet conforming with processes already being followed by schools and day cares. These new emergency requirements are both protective of public health and attainable with respect to compliance.

**Text:**

**61-22. The Evaluation of School Employees for Tuberculosis.**

(Statutory Authority: 1976 Code Sections 44‑29‑150, 44‑29‑160, 44‑29‑170)

(Public or Private School, Kindergarten, Nursery or Day Care Center)

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I. PURPOSE AND SCOPE.

The General Assembly, in sections 44‑29‑150 through 44‑29‑170 of the 1976 South Carolina Code of Laws, charged the South Carolina Board of Health and Environmental Control with approving guidelines for the evaluation for tuberculosis of persons working in a public or private school, kindergarten, nursery or day care center for infants and children (Registered family child care homes are exempt from requirements of these guidelines). As more fully set forth below, as a prerequisite to employment and as a condition of continued employment, all persons to whom these guidelines apply shall be evaluated for tuberculosis and shall provide certification on a form designated by the Department that the person does not have tuberculosis in an active stage. Re-evaluation will not be required for employment in subsequent consecutive years unless otherwise indicated.

These guidelines modernize the approach to screening for tuberculosis and take into account contemporary scientific and epidemiologic principles. Under these guidelines, most school employees will need to be evaluated for tuberculosis only one time and will not be required to be screened annually absent certain factors. Non-routine screening is based on epidemiologic and clinical information and is combined with an underlying policy concerning preventive treatment of tuberculosis disease and infection. These guidelines will afford children greater protection against exposure to tuberculosis in the school, kindergarten, nursery and day care center environments.

II. DEFINITIONS.

For the purpose of these guidelines, the following definitions and clarifications shall apply:

A. “Approved TB Screening Tests” means tests for the detection of TB disease and/or latent TB infection approved by the United States Food and Drug Administration and recommended by the Centers for Disease Control and Prevention.

B. “Department” means the South Carolina Department of Health and Environmental Control.

C. “DHEC 1420” means the form designated by the Department for documenting and certifying tuberculosis evaluation, including results of Approved TB Screening Tests, disposition and preventive measures.

D. “Disposition” means the plan for continuing health care of a person following evaluation for tuberculosis.

E. “Employee” means any person working in a public or private school, kindergarten, nursery or day care center for infants and children, whether a new hire or currently employed, whether a direct employee or an independent contractor, and whether full-time, part-time, temporary or in any other capacity. Examples of employees to whom these guidelines apply include, but are not limited to, teachers, substitute teachers, teacher aides, student teachers, administrators, school psychologists, custodians, bus drivers, coaches, trainers, guidance counselors, school nurses and cafeteria workers, among others.

F. “Latent TB infection” means a person has become infected with the bacterium that causes TB, but does not have TB in an active stage. A person with latent TB infection does not feel sick, does not have symptoms and cannot spread TB bacteria to others.

G. “Preventive treatment” means treatment to prevent latent TB infection in an individual from developing into TB disease.

H. “Tuberculosis” or “TB” means generally a bacterial infection 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. TB bacteria can live in the body without making you sick. This is called “latent TB infection.” For most people who breathe in TB bacteria and become infected, the body is able to fight the bacteria to stop them from growing. For others, TB bacteria become active in the body and multiply. In those instances, people will go from having latent TB infection to being sick with “TB disease” or “TB in an active stage.”

I. “TB disease” or “TB in an active stage” means a person has become infected with the bacterium that causes TB and the bacterium has become active and has multiplied. People with TB disease usually have symptoms and may spread TB bacteria to others.

III. GUIDELINES FOR SCREENING AND EVALUATION.

A. Evaluation for Tuberculosis:

1. As a prerequisite to employment, and as a condition for continued employment, all employees shall be evaluated for tuberculosis by a licensed health care provider and shall provide written certification from a licensed physician that the person does not have TB disease.

2. Tuberculosis evaluations must be completed no more than one year prior to employment.

3. Tuberculosis evaluations shall be conducted utilizing Approved TB Screening Tests.

4. Certification of tuberculosis evaluation, including disposition and preventive treatment, shall be documented on DHEC 1420 and retained in the files of the school, kindergarten, nursery or day care center for infants and children where the person works.

B. Disposition Following Evaluation:

1. Any employee with a negative Approved TB Screening Test shall require no further routine screening except as otherwise provided in Section III(B)(3) below.

2. Any employee with a positive Approved TB Screening Test or with a history of latent TB infection or TB disease shall be further evaluated by a licensed health care provider.

a. If the evaluation reveals no TB disease, then no exclusion and no further routine screening shall be required except as otherwise provided in Section III(B)(3) below.

b. If the evaluation reveals TB disease, then the individual shall be excluded from working in any school, kindergarten, nursery or day care center for infants and children until a licensed physician certifies that the individual no longer has TB in an active stage.

3. An employee in a public or private school, kindergarten, nursery or day care center for infants and children that has been evaluated for tuberculosis as required above will require no further routine screening so long as the person’s employment in one or more of these work settings is continuous during consecutive years. Continuous employment in consecutive years includes, but may not be limited to, a change in employment directly from one of these work settings to another such as moving from a public school directly to a private school, moving from one school district directly to another, or moving from a day care center directly to a school. Short-term breaks in employment, such as maternity or paternity leave or traditional school year breaks, e.g., summer or winter break, shall not necessitate a new TB evaluation.

4. Nothing in these guidelines shall prevent a public or private school, kindergarten, nursery or day care center for infants and children from requiring additional tuberculosis evaluations or screenings of its employees and volunteers.

C. Documentation:

1. Every school, kindergarten, nursery or day care center for infants and children shall maintain a completed DHEC 1420 for each employee and shall make such records available for review by representatives of the Department upon request. Records may be maintained in an individual facility or in a centralized office, such as in a school district office.

2. For persons who are not employed directly by a school, kindergarten, nursery or day care center, but who work in these settings, the person’s employer shall maintain a completed DHEC 1420 and shall make such records available for review upon request by representatives of the Department as well as representatives of any school, kindergarten, nursery or day care center in which the person works.

3. If an employee moves or transfers directly to another public or private school, kindergarten, nursery or day care center for infants and children such that employment in any of these work settings remains uninterrupted, no additional routine screening or evaluation for tuberculosis shall be required beyond that which is described above, provided the employee has a completed DHEC 1420, which should be transferred to the new place of employment.

4. If an employee works in more than one school, kindergarten, nursery or day care center for infants and children, each facility shall maintain a separate copy of the individual’s completed DHEC 1420 unless kept in a centralized office governing all places of employment.

5. Any employee who does not have proper documentation on file that he or she is free of TB disease shall be excluded from working in any school, kindergarten, nursery or day care center for infants and children until written certification by a licensed physician is received and documented on DHEC 1420 declaring that the individual does not have tuberculosis in an active stage.

D. Non‑routine Screening and Recommended Education:

1. An employee who would otherwise be exempt from routine annual screening for tuberculosis may be required to undergo non‑routine screening if there is epidemiologic or clinical evidence that such employee may have been exposed to TB bacteria or become infected with TB or may have moved from having latent TB infection to TB disease. Epidemiologic and clinical evidence includes, but may not be limited to:

a. Identification of an employee as a close contact of a person with TB disease;

b. Occurrence of tuberculosis in any public or private school, kindergarten, nursery or day care center for infants and children; or

c. Observation of signs or symptoms in an employee suggestive of tuberculosis.

2. The Department recommends that regular employees and volunteers of public or private schools, kindergartens, nurseries or day care centers for infants and children participate in a Public Health Education element annually. Recommended Public Health Education materials will be made available by the Department and will include disease prevention, symptoms and screening information for communicable diseases common to public or private school, kindergarten, nursery or day care center environments.

IV. ADDITIONAL INFORMATION AND FORMS.

A. Questions regarding these guidelines may be addressed to personnel of the county health departments or the regional offices of the Department of Health and Environmental Control. Questions which cannot be resolved at the local level may be referred to the Tuberculosis Control Program, Department of Health and Environmental Control, 2600 Bull Street, Columbia, S.C. 29201.

B. Employees may obtain tuberculosis evaluations and certifications from private physicians. Certification forms (DHEC 1420) are available, upon request, from the Department.

V. EFFECT ON THE “REVISED REGULATION.”

This emergency regulation supersedes any and all provisions of the Revised Regulation.