

PAM HEALTH POLICY AND PROCEDURE MANUAL

SUBJECT: Face Masks FLORIDA HOSPITALS	POLICY NUMBER: IC 40
INDEX TITLE: Infection Control	PAGE NUMBER: 1 of 6
ORIGINAL DATE: January 19, 2024	REVIEW DATE:
	REVISION DATE:
APPROVED BY: <i>Kathleen Brown, DNP, MSHA, BSN</i> Executive Vice President and Chief Quality Officer	

This policy applies to the following hospital(s):

LTCH		IRF	
PAM Health Specialty Hospital of Corpus Bayfront		PAM Health Rehabilitation Hospital of Allen	
PAM Health Specialty Hospital of Corpus Christi North		PAM Health Rehabilitation Hospital of Beaumont	
PAM Health Specialty Hospital of Covington		PAM Health Rehabilitation Hospital of Clarksville	
PAM Health Specialty Hospital of Dayton		PAM Health Rehabilitation Hospital of Centennial Hills	
PAM Health Specialty Hospital of Denver		PAM Health Rehabilitation Hospital of Clear Lake	
PAM Health Specialty Hospital of Hammond		PAM Health Rehabilitation Hospital of Clearlake-North Campus	
PAM Health Specialty Hospital at Heritage Valley		PAM Health Rehabilitation Hospital of Corpus Christi	
PAM Health Specialty Hospital of Jacksonville	X	PAM Health Specialty Hospital of Covington DPU	
PAM Health Specialty Hospital of Las Vegas		PAM Health Rehabilitation Hospital of Dover	
PAM Health Specialty Hospital of Luling		PAM Health Rehabilitation Hospital of El Paso	
PAM Health Specialty Hospital of New Braunfels		PAM Health Rehabilitation Hospital of Fargo	
PAM Health Specialty Hospital of Oakdale		PAM Health Rehabilitation Hospital of Georgetown	
PAM Health Specialty Hospital of Oklahoma City		PAM Health Rehabilitation Hospital of Golden	
PAM Health Specialty Hospital of Reno		PAM Health Rehabilitation Hospital of Greeley	
PAM Health Specialty Hospital of Rocky Mount		PAM Health Rehabilitation Hospital of Henderson	
PAM Health Specialty Hospital of San Antonio		PAM Health Rehabilitation Hospital of Houston	
PAM Health Specialty Hospital of San Antonio Medical Center		PAM Health Rehabilitation Hospital of Humble	
PAM Health Specialty Hospital of Sarasota	X	PAM Health Rehabilitation Hospital of Jupiter	X
PAM Health Specialty Hospital of Shreveport		PAM Health Specialty Hospital of Luling DPU	
PAM Health Specialty Hospital of Stoughton		PAM Health Rehabilitation Hospital of Miamisburg	

I. PURPOSE

To ensure the health and safety of our patients, team members, and visitors, face masks will be required under special circumstances. This policy provides guidance related to use of facial coverings in alignment with Emergency Rule 59AER23-2.

II. DEFINITIONS

- A. **Common Area** – Where patients are not treated, diagnosed, or examined.
- B. **Health Care Setting** – Hospital and outpatient department.
- C. **Mask**–Refers to cloth or surgical face mask, a face shield, or any other facial covering that covers the mouth and nose.
- D. **Patient** – Any person receiving treatment, care, or other services at the hospital or outpatient department.
- E. **Sterile Area** – Locations where surgery is conducted or where procedures that require aseptic techniques are performed.
- F. **Team Members** -- Any person that is a hospital employee, contract employee, student, resident, independent contractor, vendor, or any other person who provides care, treatment, or other services (including clinical staff and physicians) to the hospital or outpatient department. Any person who is credentialed through the Medical Staff Office practicing at the hospital or outpatient department.
- G. **Visitor** – Any person in the hospital or outpatient department who is not a Team Member or Patient.
- H. **Vulnerable Patient** – Patient whose treating health care practitioner has diagnosed the patient with or confirmed a condition affecting the immune system in a manner which is known to increase risk of transmission of an infection from employees without signs or symptoms of infection to a patient and whose treating practitioner has determined that the use of facial coverings is necessary for the patient's safety.

III. POLICY STATEMENT

The masking guidelines contained in this policy are intended to comply with the standards established in Emergency Rule 59AER23-2 and apply to all Team Members, Visitors, and Patients at the hospital or outpatient department. Current law provides distinct guidelines for when a provider may require a visitor, patient, or employee to wear a facial covering. The rule requires that providers must allow covered persons to opt out of their facial covering policy, except for certain circumstances.

Facial covering and other PPE recommendations and/or requirements may be reviewed and reassessed with national and state standards, and state and federal laws, rules, requirements, and regulations in the event of a community outbreak.

IV. EXCEPTIONS

This Policy does not apply to the use of personal protective equipment recommended and/or required for chemical or physical hazards.

V. PROCEDURE

A. MASKING REQUIREMENTS

1. TEAM MEMBERS

Team Members are required to wear a Mask within a Health Care Setting when the Team Member is:

- a. Interacting with any Patient with respiratory symptoms, Airborne, Droplet, Enhanced, Droplet/Contact or combination of precautions (transmission-based precautions)
- b. Anticipating exposure to splash/spray of body fluid (Standard Precautions 00IFC34).
- c. Conducting or being present during the performance of sterile procedures, including aseptic procedures or surgeries, that call for practices that minimize the risk of microbial contamination to reduce the rate of invasive or surgical site infection, or works in a Sterile Area (as per departmental policies in which sterile procedures are conducted).
- d. Interacting with a Patient who is on transmission precautions which require a Mask (droplet or airborne, enhanced droplet/contact or when anticipating exposure from splash or spray of body fluids).
- e. Working with a Vulnerable Patient.
- f. Engaging in potentially hazardous activities that require Masks to prevent physical injury or harm in accordance with national, state, and industry standards, and state and federal laws, rules, requirements, and regulations and as per departmental policies.

Team Members should avoid entering the hospital if they are sick and should follow departmental call off procedures. If symptoms of infection should develop while at work that may be spread through droplet or airborne transmission, Team Members should immediately put on a Mask and contact their immediate supervisor.

2. PATIENTS

Patients exhibiting signs or symptoms of, or who have been diagnosed with, an infectious disease that can be spread through droplet or airborne transmission are required to wear a Mask in Common Areas of the hospital, for example, hallways, waiting rooms, or any areas where the Patient is not being treated, diagnosed or examined.

3. VISITORS

Masks are required for Visitors who are:

- a. Exhibiting signs or symptoms of a respiratory illness, or who have been diagnosed with an infectious disease that can be spread through droplet or airborne transmission.
- b. In sterile areas of the Health Care Setting or an area where sterile procedures are being performed.
- c. In an in-patient or clinical room with a Patient who is exhibiting signs/symptoms or has been diagnosed with an infectious disease that can be spread through droplet or airborne transmission or who is on Enhanced Droplet/Contact precautions.
- d. Visiting a Vulnerable Patient.

Masks will remain available throughout the hospital for Team Members, Patients, and Visitors who choose to wear them.

B. OPT-OUT PROVISIONS

1. TEAM MEMBERS

Except as set forth in Section V(A)(1) or as required by then-applicable law, a Team Member may opt-out of Mask requirements.

2. PATIENTS

A Patient may opt out of wearing a Mask if, based upon the professional judgment of the physician treating the patient, an alternative method of infection control or infectious disease prevention is available, or otherwise permitted by the Florida Patient Bill of Rights and Responsibilities.

3. VISITORS

A Visitor may opt out of wearing a Mask if, based upon the professional judgment of the physician treating the Patient who is being visited, an alternative method of infection control or infectious disease prevention. Opt-out options for visitors may also include virtual visits using FaceTime, Zoom or WebEx for example that otherwise comply with hospital rules and guidelines.

VI. RESPONSIBILITY

Departmental leaders are responsible for ensuring policy is followed and concerns are escalated to the appropriate departmental personnel for additional assistance and support.

REFERENCES:

- ACHA 59AER23-1 Definitions
- 59AER23-2 Standards for the Appropriate Use of Facial Coverings for Infection Control
- Fla. Stat. § 408.824 (SB 252)
- Fla. Stat. § 381.026 (Florida Patient Bill of Rights)

- Fla. Admin. Code 59AER23-1 (Definitions Rule)
- Fla. Admin. Code 59AER23-2 (Standards Rule)
- OSHA Rules 1. Bloodborne Pathogens (29 CFR 1910.1030) 2. Personal Protective Equipment (29 CFR 1910. 132) 3. Respiratory Protection (29 CFR 1910. 134)