SCOPE

This policy applies to all Brooks workforce members which for the purposes of this policy refers to all directors, officers, managers, employees, medical staff, contractors, volunteers, students and others associated or affiliated with Brooks. Brooks includes the following entities: Brooks Rehabilitation; Brooks Rehabilitation Hospital University Campus; Brooks Rehabilitation Hospital Bartram Campus; Brooks Health Foundation; Brooks Health Development; Brooks Rehabilitation Home Health; Bartram Crossing Skilled Nursing; The Green House Residences; Bartram Lakes Assisted Living; University Crossing Skilled Nursing; Brooks Rehabilitation Clinical Research Center; Brooks Rehabilitation Medical Group; and Brooks Halifax Rehabilitation Services (Corporate HR and Compliance Policies Only).

Any workforce member found to have violated this policy may be subject to disciplinary action up to and including termination of employment or termination of services agreement/contract as may be applicable.

This policy also applies to patients and visitors.

PURPOSE

To ensure the health and safety of our patients, employees, and visitors facemasks will be required under special circumstances, such as when a patient, visitor, or employee is exhibiting signs or symptoms of or has a diagnosed infectious disease that can be spread through droplet or airborne transmission.

To ensure compliance with Florida Statutes § 408.824 which requires distinct guidelines for when a provider may require a visitor, patient or employee to wear a facial covering and allows for an opt-out of the facial covering policy.

POLICY

This policy applies to all patients, visitors, and employees two years of age and older. Visitors with known infections are discouraged from coming into the hospital or inpatient facilities (e.g., flu, colds, and communicable diseases). Face masks 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. The standards and protocols in this policy will govern in the event that the System encourages or requires the use of face masks at any of its Locations. Unless otherwise noted, all other System
policies, procedures, and guidance that encourage or require the use of face masks are subject to the standards, protocols, and provisions herein. This policy does not apply to the use of personal protective equipment that are recommended and/or required for chemical or physical hazards.

PROCEDURE

A. **Patients.** In the event the use of face masks is required across the System, Patients may be required to wear a face mask in the common areas of System locations if the patient is exhibiting signs or symptoms of or has a diagnosed infectious disease that can be spread through droplet or airborne transmission.

B. **Visitors.** In the event the use of face masks is required across the System, Visitors may be required to wear a face mask if the Visitor is:
   1. Exhibiting signs or symptoms of or has a diagnosed infectious disease that can be spread through droplet or airborne transmission;
   2. In an in-patient or clinical room with a Patient who is exhibiting signs or symptoms of or has a diagnosed infectious disease that can be spread through droplet or airborne transmission; or
   3. Visiting a Patient (i) whose treating health care provider has diagnosed the Patient with or confirmed a condition affecting the immune system in a manner which is known to increase the risk of transmission of an infection to the Patient from others without signs or symptoms of infection; and (ii) whose treating provider has determined that the use of a face mask is necessary for the Patient’s safety

C. **Employees.** Employees should avoid entering the facility if they are sick. Employees who are sick should contact their immediate supervisor and the Employee Health Office. Employees will be required to wear an FDA-certified medical/surgical mask (ASTM F2100) or NIOSH-approved respirator if they ARE:
   1. Conducting sterile procedures or working in a sterile area
   2. Working with a 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 face masks is necessary for the patient’s safety,
   3. With a patient on droplet or airborne isolation, or
   4. Engaging in non-clinical potentially hazardous activities that require face masks to prevent physical injury or harm in accordance with industry standards.

D. **Generally.** Locations reserves the right to require the use of face masks across the System in other circumstances consistent with national and state standards, and state and federal laws, rules, requirements, and regulations.
OPT-OUT OF FACIAL COVERINGS PROCEDURE

In the event that facemasks are encouraged or required across the System, at any of its Locations, then Visitors, Patients, Team Members and Professional Staff Members may opt-out from wearing facemasks as follows:

Patients may opt out of a facemask requirement unless opting out would violate the Florida Bill of Rights and Responsibilities (381.026 F.S.)

A. If an alternative method of infection control is available, Patients and Visitors may opt-out of any existing facemask requirements by notifying a provider, and such request will be reviewed consistent with System’s infection control procedures, Medicare conditions of participation, OSHA requirements and Joint Commission requirements.

B. Employees may opt out of any facemasks requirements by notifying the Employee Health Office and corresponding Infection Preventionist, and such requests will be reviewed by corresponding Infection Preventionist. Such requests will be reviewed consistent with System’s infection control procedures, Medicare conditions of participation, OSHA requirements and Joint Commission requirements.

C. All requests will be reviewed in a timely matter and no greater than 72 hours.

Notwithstanding the opt-out provisions herein, in the event any Locations requires the use of facemasks, the following exclusions shall apply:

A. If there are no alternative methods of infection control or infectious disease prevention, a Patient may not opt-out of any Facial covering requirements in the following circumstances:

1. A Patient has been diagnosed or is exhibiting signs or symptoms of an infectious disease that can be spread through droplet or airborne transmission;
2. Opting out has been identified by a provider as being medically or programmatically contraindicated for medical, safety or programmatic issues; or
3. Opting-out would otherwise infringe on the rights and would risk the safety or health of other patients, individuals or staff/employees of Hospital.

B. If there are no alternative methods of infection control or infectious disease prevention, a Visitor may not opt-out of any Facial covering requirements in the following circumstances:

1. The Visitor has been diagnosed or is exhibiting signs or symptoms of an
infectious disease that can be spread through droplet or airborne transmission;
2. Opting-out would otherwise infringe on the rights and would risk the safety or health of patients, individuals, or staff/employees of Hospital; or
3. There are no alternative methods of infection control or infectious disease prevention.

C. An employee may not opt-out of any facial covering requirements if the employee is:

1. Conducting a sterile procedure, 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;
2. Caring for a Patient or being present while sterile procedures are being performed, including aseptic procedures or surgeries;
3. Working in a sterile area, including where surgeries or procedures that require aseptic techniques are performed;
4. With a Patient who is on droplet or airborne isolation;
5. Working with a Patient whose treating health care provider has diagnosed the patient with or confirmed a condition affecting the immune system in a manner which is known to increase the risk of transmission of an infection to the Patient from others without signs or symptoms of infection; and (ii) whose treating provider has determined that the use of a Facial covering is necessary for the Patient's safety; or
6. Engaging in potentially hazardous activities that require a facial covering to prevent infection, injury or harm in accordance with national, state, and industry standards, and state and federal laws, rules, requirements, and regulations

Alternative methods of infection control or prevention may include face shields or barriers and will be reviewed and identified by Infection prevention specialists and senior clinical leadership (CMO/CNO)

The System reserves the right to consider other exclusions from the opt-out provisions in order to comply with applicable state and federal laws, rules, requirements and regulations.

In compliance with Florida Statute § 408.824 this policy will be accessible from the homepage of Brooks Rehabilitation website and accessible at locations.
DEFINITIONS

(1) “Common area” refers to areas in a health care setting where patients are not treated, diagnosed, or examined.
(2) “Employee” refers to any person under employment or contract of a health care setting, including health care practitioners, administrative staff, maintenance staff, aides, contractors, students, and volunteers.
(3) “Health care setting” refers to any place where health care practitioners and/or health care providers practice their profession or provide services.
(4) “Patient” refers to a person receiving services from a health care practitioner or health care provider.
(5) “Sterile areas” refers to locations where surgery is conducted or where procedures that require aseptic techniques are performed.
(6) “Sterile procedure” refers to aseptic procedures with the goal of minimizing the risk of microbial contamination to reduce the rate of invasive or surgical site infection.
(7) “Visitor” refers to any person in a health care setting who is not an employee or patient of the health care setting.

REFERENCES


C. Fla. Admin. Code 59AER23-1 (Definitions Rule)
D. Fla. Admin. Code 59AER23-2 (Standards Rule)
E. OSHA Rules
F. Conditions of Participation Infection Control Worksheet – See tag 1.A.3. – “The Infection Control Officer(s) can provide evidence that the hospital has developed general infection control policies and procedures that are based on nationally recognized guidelines and applicable state and federal law.”
G. Joint Commission
   1. Hospital Respiratory Protection: Resources and Projects | The Joint Commission
   2. Hospital Respiratory Protection Program Toolkit (osha.gov)
H. CDC Prevention strategies for Seasonal Influenza in Healthcare Settings: Guidelines and Recommendations