

Title: Facial Coverings and Masking Guidelines	Document Reference Number: 7848
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Owner: Thaddeus Westfall (Director Infection Prevention)	Department(s): Quality Improvement
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Policy Statement

It is the policy of Jupiter Medical Center (“JMC”) that facial coverings and other Personal Protective Equipment (“PPE”) 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 if JMC encourages or requires the use of facial coverings at any of its Locations. This policy applies to all patients, visitors, and employees/Team Members two (2) years of age and older. Unless otherwise noted, all other JMC policies, procedures, and guidance that encourage or require the use of facial coverings are subject to the standards, protocols, and provisions herein. This Policy does not apply to the use of PPE that is recommended and/or required for chemical or physical hazards.

Purpose

To provide for the health and safety of our patients, team members, and visitors, face masks will be required under special circumstances, such as when a patient, visitor, or team member is exhibiting signs or symptoms of or has a diagnosed infectious disease that can be spread through droplet or airborne transmission.

Scope

Organization-wide

Definition(s)

- **Locations** – Any of the Hospital owned or affiliated hospitals, campuses, facilities, premises, and locations.
- **Patients** – Any person receiving treatment, care, or other services from Hospital or any of its wholly owned or affiliated subsidiaries at any of the Hospital Locations.
- **Team Members** – Any person that is a hospital employee, volunteer, student, resident, independent contractor, vendor, member of the Board of Hospital, or any other person who provides any care, treatment, or other services (including clinical staff and physicians) to Hospital and/or patients of Hospital at any of the Hospital Locations, or any of Hospital’s wholly owned or affiliated subsidiaries.
- **Professional Staff Members** – Any person who is an appointee to the Professional Staff at any of the Hospital affiliated hospitals, including Allied Health Professionals, Medical Staff, Associate Staff, Locum Tenens, and any other person or provider with permanent or temporary privileges at any of the Hospital affiliated hospitals who provides any care, treatment, or other services for Hospital and/or patients of Hospital, any of the Hospital affiliated hospitals, or any of Hospital’s wholly owned subsidiaries.
- **Visitors** – Any person visiting any of the Hospital Locations that is not a Patient, Team Member, or Professional Staff Member.
- **Masks** – Any cloth or surgical face mask, a face shield, or any other facial covering that covers the mouth and nose that is compliant with Hospital’s current masking guidelines.

Policy

1. **Patients** In the event that JMC requires the use of facial coverings, patients may be required to wear a mask in the common areas of the hospital 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.
2. **Visitors** In the event that JMC requires the use of facial coverings, visitors may be required to wear a Facial covering if the visitor is:
 - 2.1. Exhibiting signs or symptoms of or has a diagnosed infectious disease that can be spread through droplet or airborne transmission.
 - 2.2. In any sterile area of a Hospital Location, including where surgeries or procedures that require aseptic techniques are performed.
 - 2.3. 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.
 - 2.4. Visiting a Patient:
 - 2.4.1. 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 visitors without signs or symptoms of infection.
 - 2.4.2. Whose treating provider has determined that the use of a Facial covering is necessary for the patient's safety.
3. **Team Members**
 - 3.1. Team members should avoid entering the facility if they are sick. Team members who are sick should contact their immediate supervisor and the Employee Health Services.
 - 3.2. Team members will be required to wear an FDA certified medical/surgical mask (ASTM F2100) or NIOSH-approved respirator if they ARE:
 - 3.2.1. Conducting sterile procedures
 - 3.2.2. Working in a sterile area
 - 3.2.3. 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 facial coverings is necessary for the patient's safety.
 - 3.2.4. Working with a patient on droplet or airborne isolation
 - 3.2.5. Engaging in non-clinical potentially hazardous activities that require facial coverings to prevent physical injury or harm in accordance with industry standards.
 - 3.3. JMC reserves the right to require the use of Facial coverings at the hospital locations in other circumstances consistent with national and state standards, and state and federal laws, rules, requirements, and regulations.

4. OPT-OUT OF FACIAL COVERING PROCEDURES

- 4.1. In the event that JMC encourages or requires the use of Facial coverings at any of its locations, then visitors, patients, team members and Professional Staff Members may opt-out from wearing facial coverings as follows:
 - 4.1.1. If an alternative method of infection control is available, patients and visitors may opt-out of any existing facial covering requirements by notifying a provider, and such request will be reviewed consistent with JMC's infection control procedures.
 - 4.1.2. Employees may opt out of any facial covering requirements by notifying Employee Health, and such requests will be reviewed by the JMC Infection Prevention team.
- 4.2. Notwithstanding the opt-out provisions herein, if JMC requires the use of facial coverings at any of its locations, the following exclusions shall apply:
 - 4.2.1. 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:
 - 4.2.1.1. A patient has been diagnosed or is exhibiting signs or symptoms of an infectious disease that can be spread through droplet or airborne transmission.
 - 4.2.1.2. Opting out has been identified by a provider as being medically or programmatically contraindicated for medical, safety or programmatic issues; or
 - 4.2.1.3. Opting-out would otherwise infringe on the rights and would risk the safety or health of other patients, individuals, or team members of JMC.
 - 4.2.2. 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:
 - 4.2.2.1. The visitor has been diagnosed or is exhibiting signs or symptoms of an infectious disease that can be spread through droplet or airborne transmission.
 - 4.2.2.2. Opting-out would otherwise infringe on the rights and would risk the safety or health of other patients, individuals, or team members of JMC; or
 - 4.2.2.3. There are no alternative methods of infection control or infectious disease prevention.
- 4.3. A team member may not opt-out of any facial covering requirements if the employee is:
 - 4.3.1. 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.
 - 4.3.2. Caring for a patient or being present while sterile procedures are being performed, including aseptic procedures or surgeries.
 - 4.3.3. With a patient who is on droplet or airborne isolation
 - 4.3.4. Working with a patient:
 - 4.3.4.1. 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.
 - 4.3.4.2. Whose treating provider has determined that the use of a Facial covering is necessary for the patient's safety.

Facial Coverings and Masking Guidelines Continued

- 4.3.5. 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.
- 4.4. JMC 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.

Related Documents

[Bloodborne Pathogens Exposure Control Plan](#)

References

- 1) Fla. Stat. § 408.824 (SB 252)
- 2) Fla. Stat. § 381.026 (Florida Patient Bill of Rights)
- 3) Fla. Admin. Code 59AER23-1 (Definitions Rule)
- 4) Fla. Admin. Code 59AER23-2 (Standards Rule)
- 5) OSHA Rules
 - a. Bloodborne Pathogens (29 CFR 1910.1030)
 - b. Personal Protective Equipment (29 CFR 1910. 132)
 - c. Respiratory Protection (29 CFR 1910. 134)
- 6) 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.”
- 7) Joint Commission 1. Hospital Respiratory Protection: Resources and Projects | The Joint Commission 2. Hospital Respiratory Protection Program Toolkit (osha.gov)
- 6) CDC Prevention strategies for Seasonal Influenza in Healthcare Settings: Guidelines and Recommendations

**Approved by: Policy Committee, Pamela Canter
(VP Chief Nursing Officer)**

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