

Requirements In Aspire

Facilities

Number: 3.4.26

Area: Infection Prevention and

Control

Effective Date: 07/31/2023 Revised Date: 07/31/2023

Purpose:

It is the policy of **Aspire Health Partners, Inc.** (AHP) to provide prevention and control measures related to infectious and communicable diseases for the protection of Aspire Health Partners, Inc. (AHP) patients, visitors, and staff in compliance with recommendations set forth by Centers for Disease Control (CDC), American Psychiatric Nurses Association (APNA), Association for Professionals in Infection Control and Epidemiology (APIC) and Florida Professionals in Infection (FPIC). Our Infection Control Program will follow established guidelines, recommendations and compliance with the Florida Department of Health, Occupational Safety and Health Administration (OSHA), Centers for Disease Control (CDC), State of Florida Department of Professional Regulations (DPR) mandates, Food and Drug Administration (FDA), Centers for Medicare and Medicaid Services (CMS), and Florida Statute 408.824.

Scope:

This directive pertains to all patients, visitors, and staff two years of age and older in all program and service areas owned, leased, or operated by AHP/TDA.

Procedure:

To ensure the health and safety our patients, visitors, and staff, facial coverings/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 AHP's current Infection Control Protocol) will be required when said patient, visitor, or staff, is exhibiting signs or symptoms of or has a diagnosed infectious disease that can be spread through droplet or airborne transmission.

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



Requirements In Aspire

Facilities
Number: **3.4.26**

Area: Infection Prevention and

Control

Effective Date: **07/31/2023**Revised Date: **07/31/2023**

1. Mask requirements for Infection Prevention and Control

- **A. Patients**. Patients may be required to wear a facial covering/mask in the common areas of patient care service 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. Visitors may be required to wear a Facial covering/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 Facial covering/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 Infection Control Hotline. Employees will be required to wear an FDA certified medical/surgical mask (ASTM F2100) or NIOSH-approved respirator if they ARE:
 - 1. 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



Requirements In Aspire

Facilities

Number: **3.4.26**

Area: Infection Prevention and

Control

Effective Date: **07/31/2023**Revised Date: **07/31/2023**

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,

- 2. With a patient on droplet or airborne isolation, or
- 3. Engaging in non-clinical potentially hazardous activities that require facial coverings to prevent physical injury or harm in accordance with industry standards.
- **D. Generally**. AHP reserves the right to require the use of Facial coverings at the patient care service locations in other circumstances consistent with national and state standards, and state and federal laws, rules, requirements, and regulations.

2. Patient, Visitor or Staff right to opt-out of facial coverings/masks under certain conditions:

- **A. Patients:** If an alternative method of infection control is available, patients may opt-out of any existing facial coverings/mask requirements by notifying a provider. Such requests will be reviewed and must be consistent with AHP's Infection Control Protocol.
- **B. Visitors:** If an alternative method of infection control is available, visitors may opt-out of any existing facial coverings/mask requirements by notifying appropriate program staff. Such requests will be reviewed and must be consistent with AHP's Infection Control Protocol.
- **C. Staff:** Staff may opt out of any facial covering/mask requirements by notifying Infection Control @ <u>Infectioncontrolhotline@aspirehp.org</u>. Such requests will be reviewed by AHP's Infection Control Team.



Requirements In Aspire

Facilities
Number: **3.4.26**

Area: Infection Prevention and

Control

Effective Date: **07/31/2023**Revised Date: **07/31/2023**

3. Notwithstanding the opt-out provisions herein, in the event that AHP requires the use of Facial coverings at any of its Locations, the following exclusions shall apply:

- **A.** If there are no alternative methods of infection control or infections disease prevention, a patient <u>may not</u> 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 infections 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 AHP.
- **B.** If there are no alternative methods of infection control or infection disease prevention, a Visitor <u>may not</u> 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 other patients, individuals, or staff/employees of AHP; or
 - 3. There are no alternative methods of infection control or infectious disease prevention.
- **C.** A staff member <u>may not</u> opt-out of any facial covering requirements if the staff member is:
 - 1. With a Patient who is on droplet or airborne isolation;
 - 2. Working with a Patient whose treating health care provider has diagnosed the patient with or confirmed a condition affecting



Requirements In Aspire

Facilities

Number: 3.4.26

Area: Infection Prevention and

Control

Effective Date: **07/31/2023**Revised Date: **07/31/2023**

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 whose treating provider has determined that the use of a Facial covering is necessary for the Patient's safety; or

- 3. 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.
- **D.** AHP 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.

Attachments: None

Authority:	Date:
Shannon Robinson (Chief Integration Officer)	07/31/2023