



INFECTION CONTROL DEPARTMENT POLICY & PROCEDURE

Title: Universal Masking Policy

Number: IC-6013

Effective Date: 05-29-20

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Review Date: (no revisions):

PURPOSE

To provide guidelines of universal masking during the COVID-19 Pandemic. This policy addresses all patients, visitors, vendors, community members, volunteers, medical staff, students and employees of Grays Harbor Community Hospital and Harbor Medical Group. Masks shall be worn at all times on the premises including all indoor public space and outside public space when unable to physically distance from others.

POLICY

1. **EMTALA Obligations.** Hospitals must comply with EMTALA obligations and screen and stabilize patients presenting at the Emergency Department with an emergency condition. This policy does not alter hospital responsibilities under EMTALA.
2. **Screening of Patients and Visitors.** All patients and visitors should be screened for symptoms of COVID-19 before entering the hospital or health care facility.
 - a. If possible, patients and visitors should be screened telephonically prior to arriving at any hospital or health care facility.
 - b. All patients and visitors should, in any event, be screened in person prior to entering the facility.
 - c. Symptoms of COVID-19 include cough, shortness of breath or difficulty breathing, fever, chills, muscle pain, sore throat and new loss of taste or smell.¹
3. **Universal Face Covering.** All patients, patient representatives, and visitors who do not have symptoms of COVID-19 must wear a face covering while in the facility, except as otherwise provided in this policy.
 - a. If possible, the facility should provide face coverings to patients, patient representatives, and visitors without them. Face coverings may be cloth, or procedural masks.
 - Facilities should follow the DOH Category Yellow PPE Conservation Strategies.
 - If they provide face coverings, facilities should consider controlling access to avoid inadvertent depletion of supplies.
 - If supplies permit, hospitals may choose to provide procedural masks rather than cloth face coverings.
 - b. A patient or visitor may use their own face covering, provided it completely

covers the person's nose and mouth. A face covering with a **valve** does not provide source protection, and a patient or visitor with such a face covering must replace or cover it with one that does not have a valve.

- c. A visitor without their own face covering will not be permitted to enter the facility if the facility is unable to provide a face covering for visitor use, in the event of supply shortages.
- d. If a patient or visitor declines to wear the mask, a member of the care team will immediately meet with the person to explain the reasons for the policy requiring mask use.
- e. Staff should work with the patient or visitor to try to find a mask that feels comfortable to wear. Staff should express appreciation to the patient or visitor for wearing the mask and keeping other patients, visitors and staff safe.
- f. Patient representatives or visitors who assert that they have an exemption from wearing a face-covering, shall be evaluated based on the exemption criteria as identified by the Washington State Secretary of Health in most recent version of Order 20-03.² This order identifies the following exemptions:
 - Children younger than five years old;
 - Children who are younger than two years old should never wear face coverings, due to the risk of suffocation.
 - Children who are two, three, or four years old, with the assistance and close supervision of an adult, are strongly recommended to wear a face covering at all times in public settings when around non-household members; and
 - People with a medical condition, mental health condition, developmental or cognitive condition, or disability that prevents wearing a face covering. This includes, but is not limited to, people with a medical condition for whom wearing a face covering could obstruct breathing or who are unconscious, incapacitated, or otherwise unable to remove face covering without assistance.

If possible and available, reasonable accommodations may be implemented for visitors and representatives, so long as the accommodation does not constitute an undue burden to the organization or other patients, or jeopardize the safety or wellbeing of staff or patients. This shall be evaluated on a case-by-case basis and in consideration of the aforementioned. Accommodations may include, but are not limited to, expediting the patient and representative to an isolated room or area, implementing the use of visual or audio tele-communication devices, or scheduling appointments during low volume times.

4. **Visitors and Patient Representatives** with symptoms of COVID-19 should be turned away and advised to consult with their health care provider or to call Public Health for evaluation. If a visitor or patient representative requests treatment for a health care condition, consider the visitor to be a patient and treat the person as a patient under this policy.
5. **Patients** with symptoms of COVID-19 should immediately receive a **medical facemask** before entering the facility.
 - a. A child age 2 and under, and anyone who has trouble breathing or is

unconscious, incapacitated or otherwise unable to remove the face cover should not wear a mask.

- b. Masks may be clinically contraindicated for some patients, such as those with certain behavioral health diagnoses. Any patient who declines to wear a mask should be evaluated by the care team to determine if wearing a mask is clinically inappropriate. If the care team so determines, the patient should not be required to wear a mask, and alternative infection control measures should be implemented and enforced.
6. **Patients – Ambulatory Care.** An ambulatory patient should wear a medical facemask (for those with symptoms of COVID-19) or face covering (for other patients) at all times in the facility except as instructed by the clinical care team and except for patients who should not wear masks as described above in sections 2(a) and (b).
7. **Inpatients – In-Room Use.** A hospital inpatient may remove their facemask or face covering when in the patient’s room. The patient should put it on before leaving the room.
 - a. A patient should wear a facemask or face covering during any transport.
 - b. Patients should not wear a mask when sleeping, whether hospital staff are present or not.
8. **Employees-All patient care areas.** All employees working in or entering direct patient care areas will be required to wear a medical grade mask supplied by the hospital at all times. The only exceptions are when working alone in an office or vehicle, alone outside, or eating.
9. **Employees- Non patient care areas.** All employees in non-patient care areas of the hospital will be required to use a cloth face covering at all times. This can be a cloth mask from home. If unable to bring one in, the hospital is obligated to provide a cloth facial covering. The only exceptions are when working alone in an office or vehicle, do not have any in-person contact with others, are alone outside or eating.
10. **Employees with medical or disability issue.** Employees with a medical or disability issue preventing mask use should provide a medical professional’s accommodation statement specifying that a facial covering cannot be worn due to their medical conditions
11. **Working alone definition.** While working indoors in areas not generally accessible to the public and when no customers, volunteers, visitors or non-employees are present, but only if the worker is fully vaccinated against COVID-19.
12. **Hospital management.** It is the responsibility of the Department Director, Supervisor, or Manager to hold staff accountable to the Universal Masking protocol.
13. **Exceptions:** In the interest of necessary patient care, the CMO, CNO or their delegate may authorize exceptions to the requirements of this policy. Any such exceptions should be infrequent and as limited as possible.

Notes:

Secretary of Health Order 20-03.4 identifies that face covering requirements lawfully imposed by another public agency or official are to be followed if they are more protective than the requirements in this order. If they are less protective, then this order must be followed.

The United States Department of Justice issued notice on June 30, 2020 that the Americans with Disabilities Act does not provide a blanket exemption to people with disabilities from complying with legitimate safety requirements necessary for safe operations.

References:

¹ CDC “Watch for Symptoms”, <https://www.cdc.gov/coronavirus/2019-ncov/symptoms-testing/symptoms.html>

² DOH “Order of the Secretary of Health 20-03.4—Face Coverings-Statewide”, https://www.doh.wa.gov/Portals/1/Documents/1600/coronavirus/Secretary_of_Health_Order_20-03_Statewide_Face_Coverings.pdf

³ United States Department of Justice, Office of Public Affairs, Notice: “The Department of Justice Warns of Inaccurate Flyers and Postings Regarding the Use of Face Masks and the Americans with Disabilities Act”, June 30, 2020. <https://www.justice.gov/opa/pr/department-justice-warns-inaccurate-flyers-and-postings-regarding-use-face-masks-and>

Approved By:

Director Infection Control/Employee Health

Date

Chief Nursing Officer

Date