



**STATE OF WASHINGTON**  
**DEPARTMENT OF SOCIAL AND HEALTH SERVICES**  
*Aging and Long-Term Support Administration*  
*PO Box 45600, Olympia, Washington 98504-5600*

June 10, 2022

**AL TSA: AFH #2022-024**  
**AL TSA: ALF #2022-020**  
**AL TSA: ESF #2022-019**  
**AL TSA: ICF/IID #2022-012**  
**AL TSA: NH #2022-034**

**ALTERNATIVES TO TEMPORARY BARRIERS USED TO SEPARATE COVID AREAS  
IN LONG-TERM CARE SETTINGS**

Dear Administrator/Provider/Superintendent:

This letter is to share information about alternatives to temporary barriers used to separate COVID areas in long-term care (LTC) settings.

Blanket Waivers were issued by the Centers for Medicare and Medicaid Services (CMS) during the COVID-19 Public Health Emergency. Temporary barriers (such as plastic walls with zippered opening) across hallways were allowed to separate dedicated COVID areas from other parts of a Nursing Facility setting through use of these waivers. Although these CMS waivers did not specifically apply to all LTC settings, use of the temporary barriers was also allowed in other LTC settings to create a dedicated COVID areas through use of state-based waivers or approvals.

The CMS Blanket Waiver allowing temporary barriers expired June 7, 2022. Nursing facilities will no longer be able to utilize temporary barriers to designate a COVID area. This is considered a violation of the Life-Safety Code (LSC). At this time, all other long-term care providers are also asked to discontinue use of the temporary barriers to create a dedicated COVID area. Barriers do not equate to being infection-free or eliminating transmission risk. Providers must continue to implement actions to reduce the likelihood of COVID-19 transmission without the use of temporary barriers.

**ACTIONS TO REDUCE COVID-19 TRANSMISSION**

Clearly identify clean to dirty process flow between units:

- Use signage to:
  - Identify clean and dirty areas;
  - Designate location of key items like trash cans; and
  - Provide visual cues to donning and doffing Personal Protective Equipment (PPE).
- Set up donning/doffing stations between units. Ensure:
  - PPE and Hand Hygiene products are stocked and available; and
  - All items are always within arm's reach.
- Train Staff
  - Available PPE in advance before donning in practice;
  - How to don/doff PPE correctly; and
  - Proper location and orientation when doffing (using defined designated space).

- Build success with a sustain plan:
  - Monitor your process flow (clean to dirty);
  - Include reinforcement of activities and proactive supervision; and
  - Monitor system to ensure PPE / station supplies are always stocked & available.

#### **REGULATORY RESPONSE**

- Use of barriers (i.e., zippered walls) to separate COVID-19 units is a potential Life Safety Code (LSC) violation in nursing facilities. It is considered a concern for sprinkler systems in facilities required to install this type of fire safety system. If RCS staff see a barrier separating COVID from non-COVID areas in use, the surveyor/licensor will refer the facility to the State Fire Marshal.
- If the facility does not use a barrier to separate COVID-19 from non-COVID-19 units, this is not a violation. RCS staff will focus on clean to dirty process flow between units.

Thank you for your continued commitment to resident health and safety. If you have any questions, please contact [Katherine.Ander@dshs.wa.gov](mailto:Katherine.Ander@dshs.wa.gov).

Sincerely,



Mike Anbesse, Director  
Residential Care Services

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