



Department of Health

KATHY HOCHUL
Governor

MARY T. BASSETT, M.D., M.P.H.
Commissioner

KRISTIN M. PROUD
Acting Executive Deputy Commissioner

September 20, 2022

DAL: DACF #22-09
Subject: Cold Weather Advisory

Dear Adult Care Facility Administrator:

During extended periods of cold temperatures, adult care facilities (ACFs) are expected to provide residents with a comfortable and safe environment and to take the necessary precautions to prevent cold-related conditions. Section 461-q of New York State Social Services Law requires the Department of Health ("Department") to set allowable temperatures for resident-occupied areas of the facility. Regulatory compliance requires that the ACF be maintained at a safe and comfortable temperature level. When the outside temperature is 65 degrees Fahrenheit or less (18 degrees Celsius or less), ACFs must maintain the inside temperature in residents' bedrooms and all common areas at the following temperatures as required by regulation at Title 18 of New York Codes, Rules, and Regulations ("18 NYCRR"):

Adult Home: 18 NYCRR §487.11(m) a minimum temperature of 68 degrees Fahrenheit (20 degrees Celsius).

Residences for Adults: 18 NYCRR §490.11(n) a minimum temperature of 68 degrees Fahrenheit (20 degrees Celsius).

Enriched Housing Programs: 18 NYCRR §488.11(i) a minimum temperature of 72 degrees Fahrenheit (20 degrees Celsius) unless the Operator can demonstrate that the building is in compliance with local heating requirements which are lower, and that the Operator does not have control of the building.

Many ACFs have added standby power generators as a measure to maintain operations during outage periods. Please ensure that generators are properly maintained to function as designed as their ability to generate temperature control devices may make a difference in resident comfort.

During the cold weather months, residents may be at risk for cold-related conditions. Elderly residents and those with chronic medical conditions such as diabetes, circulatory, or thyroid disease are at increased risk for hypothermia and frostbite. The following information summarizes cold-related conditions.

Cold-Related Conditions

Hypothermia: A drop in one's core body temperature below 95 degrees. This may occur when exposure to the cold causes a person's body to lose heat faster than it can be produced. Hypothermia can occur with air temperatures of 60 to 65 degrees Fahrenheit (15-18 degrees Celsius).

Symptoms: Symptoms of hypothermia vary depending on how long the individual has been exposed to the cold temperatures.

Early Symptoms: Shivering, fatigue, loss of coordination, confusion and disorientation.

Late Symptoms: No shivering, blue skin, dilated pupils, slowed pulse and breathing and loss of consciousness.

Management: Move the person into a warm room and warm their body with a blanket. Seek medical attention to determine if further treatment is needed.

Frostbite: A decrease in blood flow to an individual's extremities due to exposure to extreme cold resulting in freezing of the skin. Frostbite causes a loss of feeling and color in the affected areas. In extremely cold temperatures, the risk of frostbite is increased in residents with reduced blood circulation and those who are not properly dressed.

Symptoms: Symptoms of frostbite include reduced blood flow to hands and feet, numbness, tingling or stinging, aching, bluish or pale, waxy skin.

Management: Move the person into a warm room and immerse the affected area in warm (not hot) water (the temperature should be comfortable to the touch for unaffected parts of the body). Do not rub or massage the frostbitten area as doing so may cause more damage. Do not use a heating pad, or the heat of a stove, or radiator for warming. Affected areas are numb and can be easily burned. Seek medical attention to determine need for further treatment.

Enclosed is additional information regarding steps to be taken by ACFs in cold weather, steps to prevent hypothermia and frostbite, and symptoms of cold exposure and treatment. **This information is to be posted in a conspicuous area in your facility that is accessible by both staff and residents.**

Thank you in advance for your efforts to provide our residents with a safe environment that allows them to enjoy a meaningful and satisfying quality of life. If you have any questions regarding the information in this correspondence, please contact your Regional Office or write to acinfo@health.ny.gov.

Sincerely,



Heidi L. Hayes, Acting Director
Division of Adult Care Facility
and Assisted Living Surveillance

Enclosure

cc: A. Herbst
V. Deetz
S. McGarvey
T. Hesse
J. Pinto
D. Pulver
J. Van Dyke

STEPS TO BE TAKEN BY ADULT CARE FACILITIES IN COLD WEATHER

1. Maintain heating systems in good working order in accordance with program regulations [Adult Homes 18 NYCRR §487.11(k)(9), Enriched Housing Program 18 NYCRR §488.11(g)(9) and Residences for Adults 18 NYCRR §490.11(i)(9)].
2. Maintain situational awareness of potential weather fronts.

National Weather Service Links for Local Hazardous Weather Outlooks

Binghamton, NY Forecast Office: <https://www.weather.gov/bgm/ehwo>

Albany, NY Forecast Office: <https://www.weather.gov/aly/ehwo>

Buffalo, NY Forecast Office: <https://www.weather.gov/buf/ehwo>

New York, NY Forecast Office: <https://www.weather.gov/okx/ehwo>

Burlington, VT Forecast Office: <https://www.weather.gov/btv/ehwo>

3. Observe and monitor residents to ensure both their comfort and safety.
4. Instruct staff to monitor residents for signs and symptoms of heat related conditions. Notify the resident's physician and obtain medical services if necessary.
5. Routinely monitor the temperature in the facilities when the outdoor temperature is below 65 degrees Fahrenheit (18 degrees Celsius) to assure the inside temperature in residents' bedrooms and all common areas is maintained at the temperature stated in regulation [18 NYCRR §487.11(m), 18 NYCRR §488.11(i) and 18 NYCRR §490.11(n)] for your type of ACF.
6. If there are areas that fall below the required indoor temperature required by regulation, residents must be moved to common areas that meet the proper temperature. The area must be of sufficient size to safely accommodate the residents in compliance with social distancing rules to lessen the spread of COVID-19.
7. If the regulatory minimum temperature is not sustained, the emergency plan must be activated.
8. Assure that facility policies and procedures for heat emergency situations are current, complete, known to staff, and carried out.
9. All staff should be familiar with the symptoms of cold-related conditions and their management.
10. Check all doors/windows for drafts. Eliminate drafts when possible by drawing curtains/shades on days when the temperatures are below freezing. Encourage residents to sit away from windows/drafts.
11. Encourage residents to wear appropriate winter clothing while indoors and to dress in layers with appropriate outerwear when leaving the building. Residents should always wear a hat or ear covering and gloves when going outdoors.
12. Encourage residents not to partake in outdoor activities for extended periods of time.
13. Offer warm fluids/beverages to residents during the winter months.
14. The whereabouts of all residents must be accounted for per applicable regulation [Adult Homes 18 NYCRR §487.7(d)(i)(1), Enriched Housing Program 18 NYCRR §488.7(b)(i)(1), and Residences for Adults 18 NYCRR §490.7(d)(i)(iv)].

STEPS TO PREVENT HYPOTHERMIA AND FROSTBITE

1. Avoid prolonged outdoor exposure on very cold days. Do not stay outdoors for extended periods.
2. Increase activity level according to the temperature. Avoid activities that cause physical exhaustion.
3. Dress in layers. Layers of clothing are warmer than one thick layer of clothing.
4. Avoid tight clothing as it reduces blood circulation.
5. Wear clothing to protect ears, face, hands and feet in extremely cold weather.
 - Boots should be waterproof and insulated.
 - Wear gloves.
 - Wear a hat; it keeps one's whole body warmer (hats reduce the amount of body heat that escapes from the head).
6. Drink large amounts of non-alcoholic, decaffeinated warm fluids.
7. Replace wet or damp clothes as soon as possible during the winter months.
8. If there is a feeling of coldness or shivering begins, add a layer of clothing and/or notify a staff person.

SYMPTOMS OF COLD EXPOSURE AND MANAGEMENT

Cold-Related Condition	Signs and Symptoms	Management
Hypothermia	<ul style="list-style-type: none">• Shivering• Fatigue• Drowsiness• Exhaustion• Blue skin and/or numbness• Confusion/disorientation• Loss of coordination• Memory loss• Slurred speech• Glassy stare• Slow, irregular pulse• Decreased level of consciousness	<ol style="list-style-type: none">1. Remove all <u>wet</u> clothing.2. Place the resident in dry clothing or blanket.3. Move the resident to warm indoor environment.4. If conscious, give the resident a warm non-alcoholic beverage.5. Seek medical attention to determine whether further treatment is needed.
Frostbite	<ul style="list-style-type: none">• Any discoloration of the skin; bluish, pale, flushed, white or yellow• Skin appears waxy• Lack of feeling, numbness, tingling, stinging or aching.	<ol style="list-style-type: none">1. Move resident into warm area.2. Handle the frostbitten area gently. DO NOT RUB THE AREA.3. Immerse affected area into warm (not hot) water or place the affected area against a warm body part (e.g. armpit).4. Seek medical attention to determine if further treatment is needed.