

NEW YORK STATE

DEPARTMENT OF SOCIAL SERVICES

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BRIAN J. WING
Commissioner



OFFICE OF HOUSING AND ADULT SERVICES

ADULT CARE FACILITY DIRECTIVE NO. 5-97

SEPTEMBER 30, 1997

To: Operators of Adult Homes, Residences for Adults, and Enriched Housing Programs

Subject: Medical Oxygen Equipment

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I. PURPOSE

To provide operators of adult homes, residences for adults, and enriched housing programs with the Department's current policy and requirements regarding the conditions under which oxygen enrichers, oxygen concentrators, and pressurized oxygen cylinders are permitted. This Directive supersedes the regulatory interpretation titled "Oxygen Equipment" that is contained in Adult Care Facility Informational Letter No. 8-90, dated November 26, 1990.

II. BACKGROUND

Oxygen enrichers and oxygen concentrators are machines that separate oxygen from room air, and deliver this oxygen to individuals for whom physicians have prescribed oxygen treatments.

The term "pressurized oxygen" or "compressed oxygen" refers to oxygen

that is stored in steel or aluminum cylinders at 2200 lbs. of pressure per square inch. Cylinders of pressurized oxygen are used to provide oxygen to individuals who require such for medical purposes, or as storage vehicles for filling smaller cylinders. Smaller cylinders of pressurized oxygen, in what are known as "E" size or smaller, are utilized to provide portability to individuals for whom oxygen is prescribed for medical purposes, or as backup for persons who may be in need of emergency supplies of oxygen.

In the past, the Department of Social Services permitted the use of oxygen enrichers, but not oxygen concentrators, in adult care facilities (ACFs). Pressurized oxygen was permitted only if a waiver request by an operator was approved to allow the pressurized oxygen for use in emergencies.

In light of the information available now concerning the safety of the medical oxygen equipment, the policy has been revised to permit not only oxygen enrichers but, under the conditions specified below, oxygen concentrators and pressurized oxygen as well.

Please note, however, that both the use and the storage of liquid oxygen continue to be prohibited in adult care facilities, as previously communicated in Adult Care Informational Letter No. 8-90, dated November 26, 1990.

III. PROGRAM IMPLICATIONS

Consistent with Department regulations regarding the use of medical equipment in ACFs [487.4(b)(14); 488.4(b)(14) and 490.4(b)(16)], when a resident of an adult home, enriched housing program, or residence for adults is prescribed medical oxygen, the following standards must be complied with:

1. The operator must agree to the resident's use of an oxygen enricher, oxygen concentrator, or oxygen cylinder.
2. The operator must retain on file a copy of the operating instructions for the equipment, and train all staff in and observe all related cautions and dangers regarding the equipment.
3. Oxygen enrichers and oxygen concentrators must be listed or approved by Underwriters Laboratories (UL), the Canadian Standards Association (CSA), or by a similarly recognized entity. Pressurized oxygen cylinders must meet industry standards and must be so identified.
4. The individual for whom medical oxygen is prescribed must receive initial training from licensed medical personnel on the use, maintenance and storage of the oxygen equipment.
5. The resident must be able to maintain and use the oxygen equipment without assistance, except as provided in item 6, below.

6. A physician must certify, in writing: the resident's need for oxygen equipment; the resident's ability to use and maintain the equipment with only intermittent or occasional assistance from medical personnel and that such assistance, if needed, is available from approved community resources; and whether the resident is appropriate for admission or retention in the ACF. Subsequent to the physician's initial certification, each required medical evaluation must attest to the resident's ability to use and maintain the equipment. At a minimum, re-evaluation by a physician must take place and be documented every twelve months.
7. An appropriate supplier must be available to service the oxygen equipment as necessary.
8. The resident must be able to participate in activities of daily living and facility life, including daily meal attendance in the dining room.
9. The use of the oxygen equipment must not interfere with the life, safety, care, or comfort of other residents of the facility.
10. The resident's roommate(s), if any, must agree to the use of the equipment in the bedroom.

Pressurized cylinders of oxygen are permitted only for purposes of emergency backup or portability, and then only under the following conditions:

- a. Only E size or smaller cylinders, in reasonable numbers given the total of residents prescribed medical oxygen or with medical conditions requiring the availability of medical oxygen, may be utilized or stored.
- b. If the ACF operator stores pressurized oxygen for use in medical emergencies, or if any resident is prescribed the use of pressurized oxygen, the facility staff must be trained by appropriate personnel in the use of the equipment, and at least one facility staff person who is trained in the use of the pressurized oxygen equipment must be on duty and on-site at all times.
- c. The oxygen cylinders must be stored and secured in a well-ventilated storage area, next to an unheated wall (also known in architectural terms as an inside wall), and away from heat and hot surfaces. A sign must be placed on the door to the storage area indicating the presence of oxygen. If pressurized oxygen is used regularly by a resident in his/her apartment or bedroom, then a sign must be placed on the entrance door to the apartment or bedroom indicating that oxygen may be in use.

- d. The stored oxygen cylinders must be chained to a wall or otherwise secured, either in carriers, weighted base stands, appropriate rack storage, or as otherwise specified in the manufacturer's or distributor's safety guidelines.
- e. Tags or other appropriate indicators must be used to identify whether the cylinders are full or empty.
- f. The operator must notify in writing the local fire department or local code enforcement official, as appropriate, that the facility has this oxygen supply, and this notice must be appropriately updated in a timely manner in terms of storage locations or numbers of containers. The storage and/or use of oxygen equipment must also comply with all other applicable local or state statutes, codes and regulations.

If portable oxygen equipment is used in common areas of the facility:

1. The resident must be able to safely transport the equipment, without need for staff assistance.
2. Sufficient and appropriate electrical outlets must be available, and facility staff must ensure that neither the equipment nor electrical connects present a potential hazard.
3. Portable pressurized oxygen may not be used in common areas where smoking may take place.


In addition, the facility operator must keep on file and comply with any other safety guideline or standard that is provided by the manufacturer of the oxygen equipment and/or the medical equipment supplier.

IV. REQUIRED ACTION

Operators must consider their ability to meet the needs of residents who are prescribed the use of medical oxygen equipment, as well as the potential impact on other residents. Operators who admit or retain residents who are prescribed the use of medical oxygen, or who wish to store an emergency supply of pressurized oxygen, must comply with the above standards.

V. EFFECTIVE DATE

This Directive is effective immediately.



John C. Fredericks
Associate Commissioner
Office of Housing & Adult Services