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DAL: DAL #20-15
Subject: Warm Weather Advisory

Dear Adult Care Facility Administrator/Operator:

You are expected to provide your residents with a comfortable and safe environment throughout the summer months and to take the necessary precautions to prevent heat related conditions. Section 461-q of Social Services Law requires the New York State Department of Health (Department) to set allowable temperatures for resident-occupied areas of the facility. Compliance with this law requires you to maintain your facility at a safe and comfortable temperature. New York State regulation at 18 NYCRR §487.11(m), §490.11(n) and §488.11(i) require the operator to perform the following when the outside temperature exceeds 85 degrees (30 degrees Celsius):

- Take measures to maintain a comfortable environment;
- Monitor resident exposure and reactions to heat;
- Arrange for health care, if needed;
- Arrange for the temporary relocation of residents, if needed; and
- One common room in such adult home, enriched housing program and residence for adults shall be required to be air conditioned.

During the summer months residents may be at risk for heat-related conditions. Elderly residents and those with chronic medical conditions including cardiopulmonary conditions, high blood pressure and residents with mental illness are at increased risk for heat exhaustion, heat stroke and heat cramps. The following information summarizes these conditions.

Heat Related Conditions

Heat Exhaustion Heat exhaustion is a milder form of heat-related illness that can develop after several days of exposure to high temperatures and inadequate or unbalanced replacement of fluids. Those most prone to heat exhaustion are elderly people and those with high blood pressure.

Symptoms: Heavy sweating, paleness, muscle cramps, tiredness, weakness, dizziness, headache, nausea, vomiting and fainting. The skin may be cool and moist. The pulse rate will be fast and weak, and breathing will be fast and shallow. If heat exhaustion is untreated, it may progress to heat stroke.

Management: Move the person to an air-conditioned environment and offer cool, nonalcoholic beverages. Have the person rest or provide them with a cool shower, bath, or sponge bath. Ensure they are wearing lightweight clothing. Seek medical attention if symptoms worsen or last longer than one hour.

Heat Stroke Heat stroke is the most serious heat-related illness. It occurs when the body becomes unable to control its temperature: the body's temperature rises rapidly, the sweating mechanism fails, and the body is unable to cool down. Body temperature may rise to 106°F or higher within 10 to 15 minutes. Heat stroke can cause death or permanent disability if emergency treatment is not provided.

Symptoms: An extremely high body temperature (above 103°F), red, hot, and dry skin (no sweating), rapid, strong pulse, throbbing headache, dizziness, nausea, confusion and unconsciousness.

Management: Call for immediate medical assistance while you begin cooling the victim.
Do the following:

- Move the person to a shady area.
- Cool the person rapidly, using whatever methods you can. For example, immerse them in a tub of cool water; place the person in a cool shower; spray them with cool water from a garden hose; sponge the person with cool water; or if the humidity is low, wrap them in a cool, wet sheet and fan him or her vigorously.
- Do not give alcohol to drink.

Heat Cramps People who sweat a lot during strenuous activity are prone to heat cramps. Heat cramps may also be a symptom of heat exhaustion. People with heart problems or those on a low-sodium diet should seek medical attention for heat cramps.

Symptoms: Muscle pain or spasms – usually in the abdomen, arms or legs.

Management: Seek medical attention for heat cramps if they do not subside in 1 hour. If medical attention is not necessary, take the following steps:

- Stop all activity and have the person sit quietly in a cool place.
- Offer clear juice or a sports beverage.
- Inform the person not to return to strenuous activity until a few hours after the cramps subside because further exertion may lead to heat exhaustion or heat stroke.

General Information

Medications: The risk for heat-related illness and death may increase among people using the following drugs: (1) psychotropics, which affect psychic function, behavior, or experience (e.g. haloperidol or chlorpromazine); (2) medications for Parkinson's disease, because they can inhibit perspiration; (3) tranquilizers such as phenothiazines, butyrophenones, and thiozanthenes; and (4) diuretic medications or "water pills" that affect fluid balance in the body.

Electric Fans: Electric fans may provide comfort, but when the temperature is in the high 90s, fans will not prevent heat-related illness. Taking a cool shower or bath or moving to an air-conditioned place is a much better way to cool

off. Air conditioning is the strongest protective factor against heat-related illness. Exposure to air conditioning for even a few hours a day will reduce the risk for heat-related illness.

The Department recommends that the common room(s) accommodate as many residents as possible, while maintaining social distancing rules to lessen the spread of COVID-19. Facilities are expected to turn on the air conditioning in the common room(s) and monitor the air temperature hourly in all common areas as well as in the non-air-conditioned rooms at various locations on each floor of the facility. If room air conditioners are typically used, the air conditioners must be turned on regardless of a resident's ability to pay. If your facility utilizes central air conditioning, there is no need to monitor hourly as long as the central air is turned on.

Additional information regarding steps to be taken by adult care facilities in warm weather, steps to prevent and manage heat-related conditions and medications that may make a resident more sensitive to heat are enclosed. **This information is to be posted in a conspicuous area in your facility that is accessible to both staff and residents.** Please be advised that this letter and its enclosures will be available online at: http://www.health.ny.gov/facilities/adult_care/dear_administrator_letters/.

Finally, many adult care facilities 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.

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 letter or its enclosures, please contact your appropriate regional office or write to the Division of Adult Care Facility and Assisted Living Surveillance at acinfo@health.ny.gov.

Sincerely,



Heidi L. Hayes, Acting Director
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Enclosure

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