



JAMES V. McDONALD, MD, MPH Commissioner

JOHANNE E. MORNE, MS Executive Deputy Commissioner

October 1, 2025

DAL: NH 25-16

Subject: Cold Weather Advisory

Dear Nursing Home Administrator:

With the arrival of cold temperatures, you are encouraged to take the necessary precautions to ensure that residents are comfortable and safe in nursing homes throughout the winter months. Regulations at both the New York State (Title 10 of New York Codes, Rules, and Regulations § 415.5) and Federal (Title 42 of the Code of Federal Regulations § 483.10) levels require that nursing homes maintain comfortable and safe temperature levels within their facilities. For those residents who might be leaving the facility for any reason, including outside visits or community events, facilities must ensure that any health or safety issues associated with cold weather have been assessed and addressed.

During the colder weather months, many residents may be at risk for cold-related illnesses. Elderly residents and those with health problems such as diabetes and circulatory or thyroid diseases are at increased risk to develop hypothermia and frostbite. Regulations at Title 10 of New York Codes, Rules, and Regulations (NYCRR) Part 713 require nursing homes to be equipped with a heating system capable of maintaining all resident areas at a minimum temperature of 75 degrees Fahrenheit. However, occupied areas are not required to be kept at these temperatures if residents are comfortable at a lower temperature. If low room temperatures are identified, individual body temperatures should be monitored to ensure there is no risk of hypothermia to the resident. Nursing homes should be cognizant of the needs and wishes of each resident and assure that a safe and appropriate temperature is provided.

Cold Related Conditions

Hypothermia: A drop in one's core body temperature below 95 degrees Fahrenheit.

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.

<u>Early Symptoms</u>: 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 Nursing Homes 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 for your continued efforts to maintain the health and safety of those who reside in New York State nursing homes. If you have questions, please email nhinfo@health.ny.gov.

Sincerely,

Stephanie E. Paton, RN, Director Division of Nursing Home and ICF/IID Surveillance Office of Aging and Long-Term Care

Enclosure

cc: Dr. Fish

V. Deetz

C. Rodat

H. Hayes

A. Cokgoren

R. Barone

S. Caldwell

S. Dudley

A. Lachut

STEPS TO BE TAKEN BY NURSING HOMES IN COLD WEATHER

Maintain heating systems in good working order in accordance with program regulations.

- If heating equipment malfunctions during normal business hours (8:00 a.m. to 5:00 p.m.), the Department of Health Centralized Complaint Intake Unit must be contacted. Contact instructions are available at: www.health.ny.gov/facilities/nursing/complaints.htm.
- For malfunctions that occur on nights, weekends, or holidays, please contact the Department of Health Duty Officer at 1-866-881-2809. Under such circumstances, individual room temperatures should be frequently monitored.

Calibrate thermometers to ensure their accuracy.

Ensure that carbon monoxide detectors are installed and frequently monitored to ensure functionality.

Ensure that you have sufficient generator fuel on hand, and that you follow the manufacturer's recommended maintenance schedule.

Ensure that all means of egress to the public way are kept clear and functional at all times.

Maintain situational awareness of potential weather fronts.

Albany, NY Forecast Office: https://www.weather.gov/aly/
Binghamton, NY Forecast Office: https://www.weather.gov/bgm/
New York, NY Forecast Office: https://www.weather.gov/btv/
Burlington, VT Forecast Office: https://www.weather.gov/btv/

Observe and monitor residents to ensure both their comfort and safety.

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 applicable infection control policies and procedures.

If the regulatory minimum temperature is not sustained, the emergency plan must be activated.

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.

Familiarize all staff with the symptoms of cold-related conditions and their management.

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.

Encourage residents not to partake in outdoor activities for extended periods of time.

Know the whereabouts of all residents to assure their health and safety is maintained.

Offer warm fluids/beverages to residents during the winter months.

Avoid prolonged outdoor exposure on very cold days. Do not stay outdoors for extended periods.

Enclosure: DAL #25-16 Page 1 of 2

STEPS TO BE TAKEN BY NURSING HOMES IN COLD WEATHER

Increase activity level according to the temperature. Avoid activities that cause physical exhaustion.

Dress in layers. Layers of clothing are warmer than one thick layer of clothing.

Avoid tight clothing as it reduces blood circulation.

Wear clothing to protect ears, face, hands and feet in extremely cold weather. Boots should be waterproof and insulated. Wear gloves. Wear a hat. Hats reduce the amount of body heat that escapes from the head.

Drink large amounts of non-alcoholic, decaffeinated warm fluids.

Replace wet or damp clothes as soon as possible during the winter months.

If there is a feeling of coldness or shivering begins, add a layer of clothing and/or notify a staff person.

Familiarize all staff with cold weather policies and procedures and know when to implement them.

SYMPTOMS OF COLD EXPOSURE AND MANAGEMENT

Cold-Related Condition	Signs and Symptoms	Management
Hypothermia	 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 	 Remove all wet clothing. Place the resident in dry clothing or blanket. Move the resident to warm indoor environment. If conscious, give the resident a warm non-alcoholic beverage. Seek medical attention to determine whether further treatment is needed.
Frostbite	 Any discoloration of the skin; bluish, pale, flushed, white or yellow. Skin appears waxy. Lack of feeling, numbness, tingling, stinging or aching. 	 Move resident into warm area. Handle the frostbitten area gently. DO NOT RUB THE AREA. Immerse affected area into warm (not hot) water or place the affected area against a warm body part (e.g. armpit). Seek medical attention to determine if further treatment is needed.

Enclosure: DAL #25-16 Page 2 of 2