

Hypothermia

Recognition and Prevention

Reproduced with kind consent from:
Dr Anneka Clarke
NHS Frimley ICB, Safeguarding Team

Hypothermia is a serious medical condition in which a person's body temperature falls below the usual level (>35°C) as a result of being in severe cold for a long time.

Hypothermia can develop in vulnerable people after a relatively short exposure to cold weather. It can even develop after a small drop in room temperature. Many people who use Health and Social Care services may be at risk of developing hypothermia. They can include:

- Older people living in Care Homes or receiving care at home
- People with reduced mental capacity, reduced mobility or a sensory impairment
- People who cannot communicate that they are exposed to cold



Signs and Symptoms

- Shivering
- Pale skin, blue lips
- Slurred speech or mumbling
- Slow, shallow breathing
- Weak pulse
- Clumsiness or lack of coordination
- Drowsiness or very low energy
- Confusion or memory loss
- Loss of consciousness

Safeguarding Considerations

1. What factors could have led to the hypothermia?
2. If a child has hypothermia, have you raised a Safeguarding Concern
3. If a vulnerable adult with care needs has hypothermia (i.e. a disabled person being cared for by family), have you raised an Adult Safeguarding Concern?
4. If the person is in a nursing home or residential care, have you raised an Adult Concern/spoken to your Safeguarding Lead?
5. Are there any other household members at risk, such as children or other vulnerable adults?
6. Is there any Self-Neglect/Hoarding? Does the patient have mental capacity?
7. Does the patient have any history of severe mental illness, alcohol dependence or substance misuse?
8. Are there any potential future risks to the individual and to the wider community e.g. use of unsafe open fires, where the chimney may not have been swept/old gas fires which could be hazardous? Consider a Safe and Well Check. www.twfire.gov.uk/hsc
9. Is the patient a victim of financial abuse and cannot afford heating?
10. Is there any risk of exploitation or cuckooing (also known as home invasion)?

Immediate Treatment

- **Do** call 999 ambulance
- **Do** remove any wet clothing or pads
- **Do** warm up slowly with blankets and a hat
- **Do** give a high calorie snack, like chocolate
- **Do** keep the patient awake and talking until help arrives
- **Do not** rewarm the patient too quickly, such as with a heater or hot bath
- **Do not** attempt to warm the arms and legs – heating and massaging the limbs can stress the heart and lungs
- **Do not** give the patient alcohol or a cigarette



Tips for Safety and Prevention

- Consider giving opportunistic advice during interventions with older people on staying warm and well at home this winter, for example warm clothing, thermal vests and layers, hats, thick socks, warm drinks, good nutrition and getting up/moving regularly
- Be inquisitive when on home visits
 - *Does the environment feel cold?*
 - *Is the central heating on?*
 - *Is the person able to access hot drinks and meals?*
- Is the patient using a small gas heater or paraffin heater without adequate ventilation?
 - *Think carbon monoxide*
 - *Think fire risk*
- Consider referral to the Social Prescriber for support with accessing Winter Fuel Payments, boiler services etc
- Signpost to Age UK Website
<https://www.ageuk.org.uk/information-advice/health-wellbeing/keep-well-this-winter/stay-healthy-in-winter/>