

# HCPA Event

## Fire Safety Workshop for Home Care



# Caring Together

**HFRS**

# Aims and Objectives:

## Aim:

The aim of the training is to improve all staff's awareness of fire risks in the homes of vulnerable people by educating delegates on how to recognise and refer fire risks and risk behaviour in order to reduce preventable fires resulting in death and/or injury.

## Objectives:

- Identify hazards and risk behaviours within the home
- Understand what services are offered by HFRS and how to refer people for Safe and Well Visits



# Case Study 1 – Mr Stone

Mr Stone was in his late 60s, used a mobility aid and lived alone.

Mr Stone had a bed in his living room where he spent most of his time both sleeping and watching TV whilst smoking.

Mr Stone was known to multiple agencies who had observed burn marks from cigarette's on Mr Stone's mattress.

Mr Stone was known to have had a small fire in his home but HFRS had not attended as a neighbour put this out.





# Case Study 1 – Mr Stone

HFRS received a call from a member of the public stating they could see smoke issuing from a house and can hear an alarm sounding.

A neighbour informed HFRS on arrival that they feared Mr Stone was still in the property and informed them that he spent a the majority of his time in the downstairs living room. The crews entered the property and targeted this area for search and rescue.

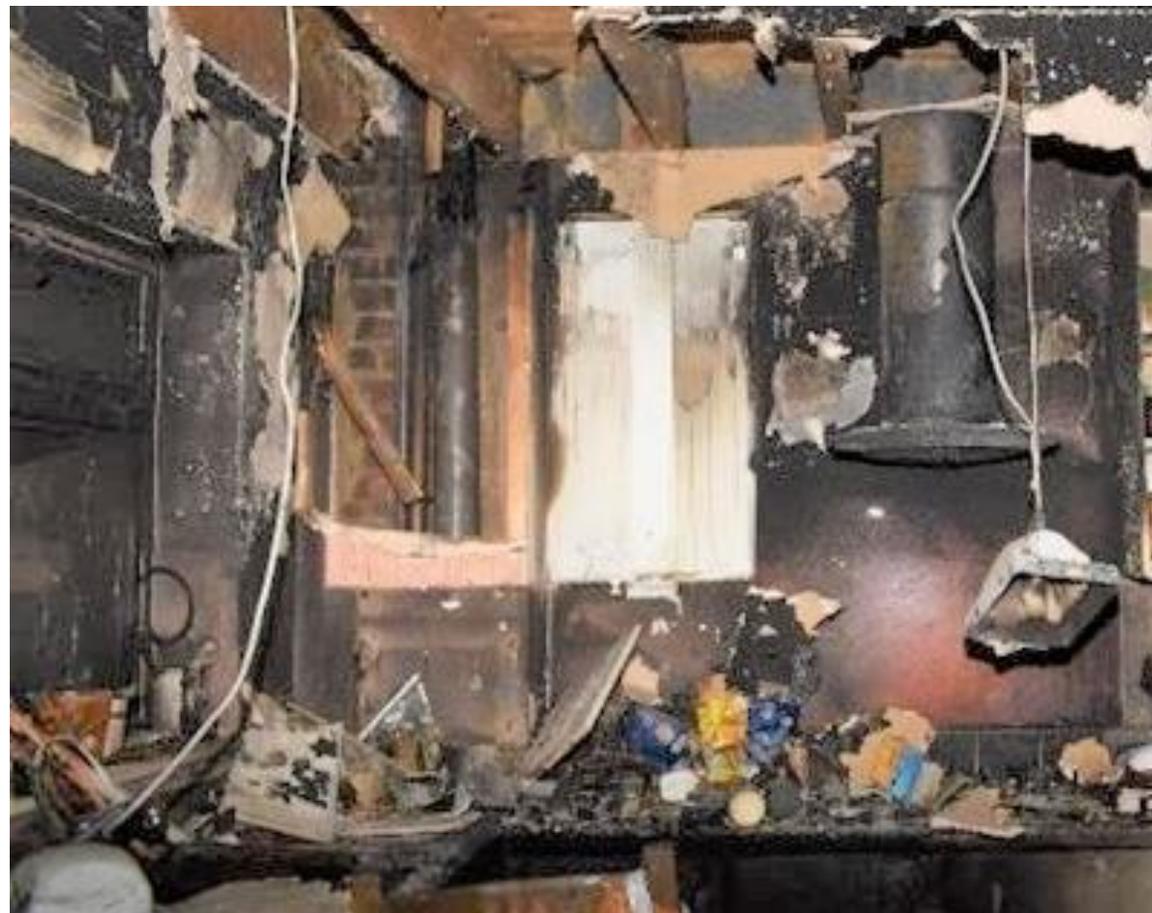




## Case Study 1 – Mr Stone

During the course of the inquiry into Mr Stone's death it became apparent that whilst other agencies involved in Mr Stone's care recognised there may have been potential fire risks, they were not aware of the services offered by HFRS that could have prevented this fire fatality.

This incident highlighted the need for more open communication between agencies and a more robust reporting and referral process was required.





## SAR outcome:

1. To review how publicity and awareness regarding Safe and Wells (S&W) and Home Safety Visits can be improved within other agencies aligned to Hertfordshire Safeguarding Adults Board (HSAB).
2. Review how referrals and requests for home safety visits are risk assessed to establish priority in terms of speed and response for individuals most at risk of fires in the home.





## SAR outcome:

3. To review how HFRS link in with partner agencies to undertake multi-agency assessments to reduce an individual's risk.
4. Consider how further training and support can be offered to reduce risk other than fitting smoke detectors.
5. To continue to identify those at high risk of fire in the home and continue to share information between partner agencies in order to keep the individual safe.





## 2017-2020 Fire Deaths:

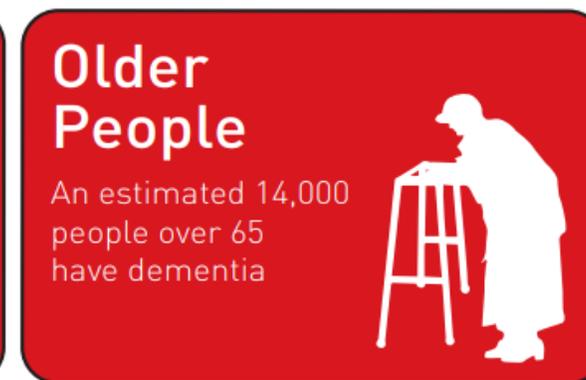
From 01/04/2017-31/03/2020 there were 14 fire incidents in Hertfordshire that resulted in 16 fatalities.

Of the incidents attended 7 were accidental dwelling fires and 7 were suicides.





# Hertfordshire Person's at-Risk Data Prediction



Person



# Living Alone

Most fire deaths in the home involve people who are living on their own. Like many other risk factors, living alone isn't necessarily a huge concern on its own, however accompanied by other risk factors e.g. having limited mobility or smoking indoors after using oxygen can vastly increase the risk.

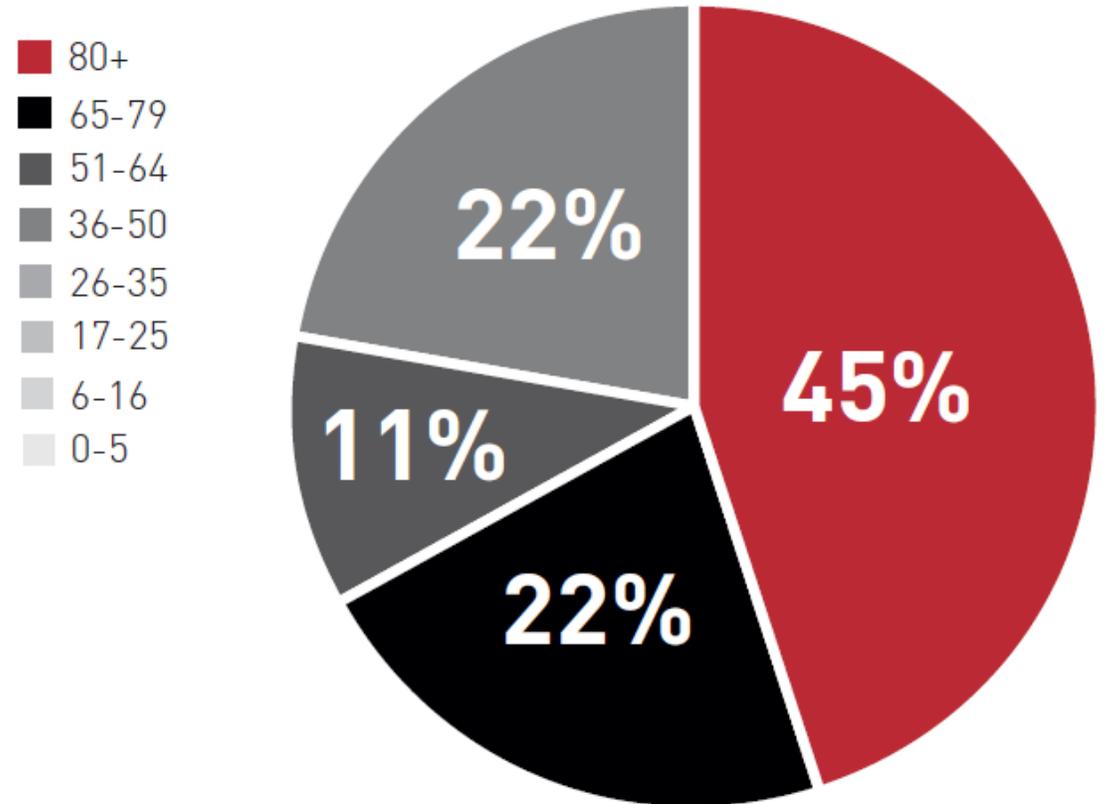




# Older Person

As we age, our reflexes often slow with some people experiencing changes in their cognition and memory, it's for these reasons that older people make up for the majority of fire deaths in the UK.

67% of fire deaths across the county from 2017-2020 were made up of those aged 65+.





# Limited Mobility and/or Frailty

Mobility impairment may restrict a person at risk's ability to either respond to a small fire or escape in the instance of a bigger fire.





# Long Term Health Conditions

Physical health conditions are often seen as a common risk factor as conditions including multiple sclerosis and cancer may inhibit or prolong response to fire alarms and in turn the evacuation process.





# Mental Ill Health

People with mental health issues such as anxiety, depression or dementia are proven to be at greater risk of having fires in their homes. In the event of a fire their cognitive ability may prevent them from understanding the immediate need to escape and/or call 999.





# Sensory Needs

If an individual is unable to hear the sound of a smoke alarm as a result of being hard of hearing, they may not be able to respond as quickly to a fire. It's essential that individuals who are hard of hearing have the correct fire equipment to alert them in the instance of a fire.

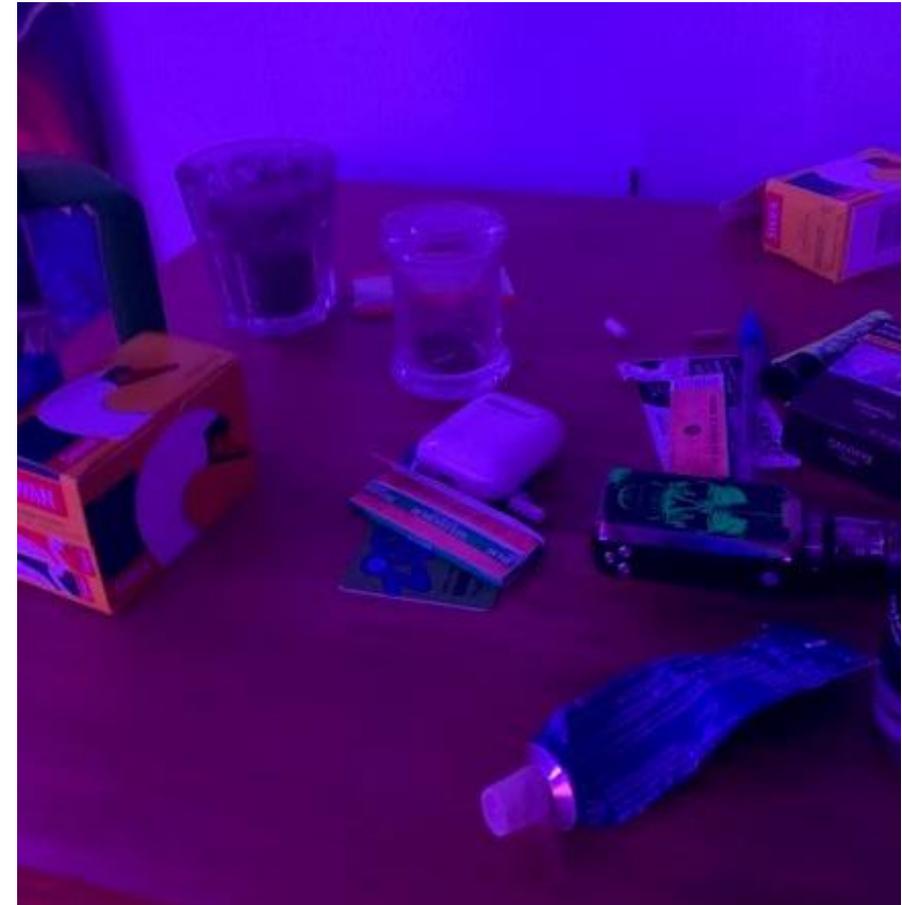


Behaviour



# Drugs and Alcohol

Over 75% of Hertfordshire fire death's between 2017-2020 has a present risk factor of drugs (prescription and/or non prescription) and alcohol. Being under the influence can inhibit response to fire.





# Smoking Materials

Smoking in the home is one of the leading causes of fire death's in Hertfordshire, this can be commonly caused by people falling asleep with cigarette's in hand, dropping them or inappropriate disposal.

Practical support that can be given includes encouragement to smoke outside where possible and the provision of advice and resources for appropriate disposal of smoking materials.







# Home Oxygen User

Oxygen users clothing and other materials can become enriched with oxygen. Clothing and materials which become enriched with oxygen can burn vigorously if ignited. Clothing will continue to be enriched, even after the service user's oxygen supply is turned off.

Service user's are advised to ventilate clothing in the open air for at least 20 minutes before smoking or going near an open flame or source of ignition





# Emollient Creams

Paraffin based emollient creams for conditions including eczema, psoriasis and ichthyosis are highly flammable. People using these creams must be advised to stay away from ignition sources as even freshly washed clothes, bedding and linen can still be soaked in emollient creams increasing flammability.

Consider water based creams where appropriate.





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Environment



# Hoarding

Hoarding and clutter increase fire risk and add to fire loading, which could result in a fire spreading at a more rapid rate. As well as being a fire hazard, hoarding can contribute to other health risks e.g. environmental hazard, trips hazards and so on. It's essential to keep hoarding away from cooking and other heat sources.

Hoarding can impede escape routes and attract vermin which increases the fire risk, in cases where the premises type is a flat or attached building, this may pose a risk to surrounding neighbours.





# Airflow Mattress

When a air mattress is punctured by an ignition source the air is released causing a fire to spread rapidly. When an airflow mattress is punctured and loses air the pump reacts by trying to replace the air which in turn fuels the fire at a more rapid rate.





# Accidental Fire Death Causes

As well as the risk factors posed by personal characteristics, behaviours and the home environment, it's important to consider causes and behaviours of fire.

It's likely that the cause of fire will run in conjunction with one or more of the elements we've discussed. When a combination of these risk factors are present, the fire risk as well as the rapidity in which it spreads is exacerbated.

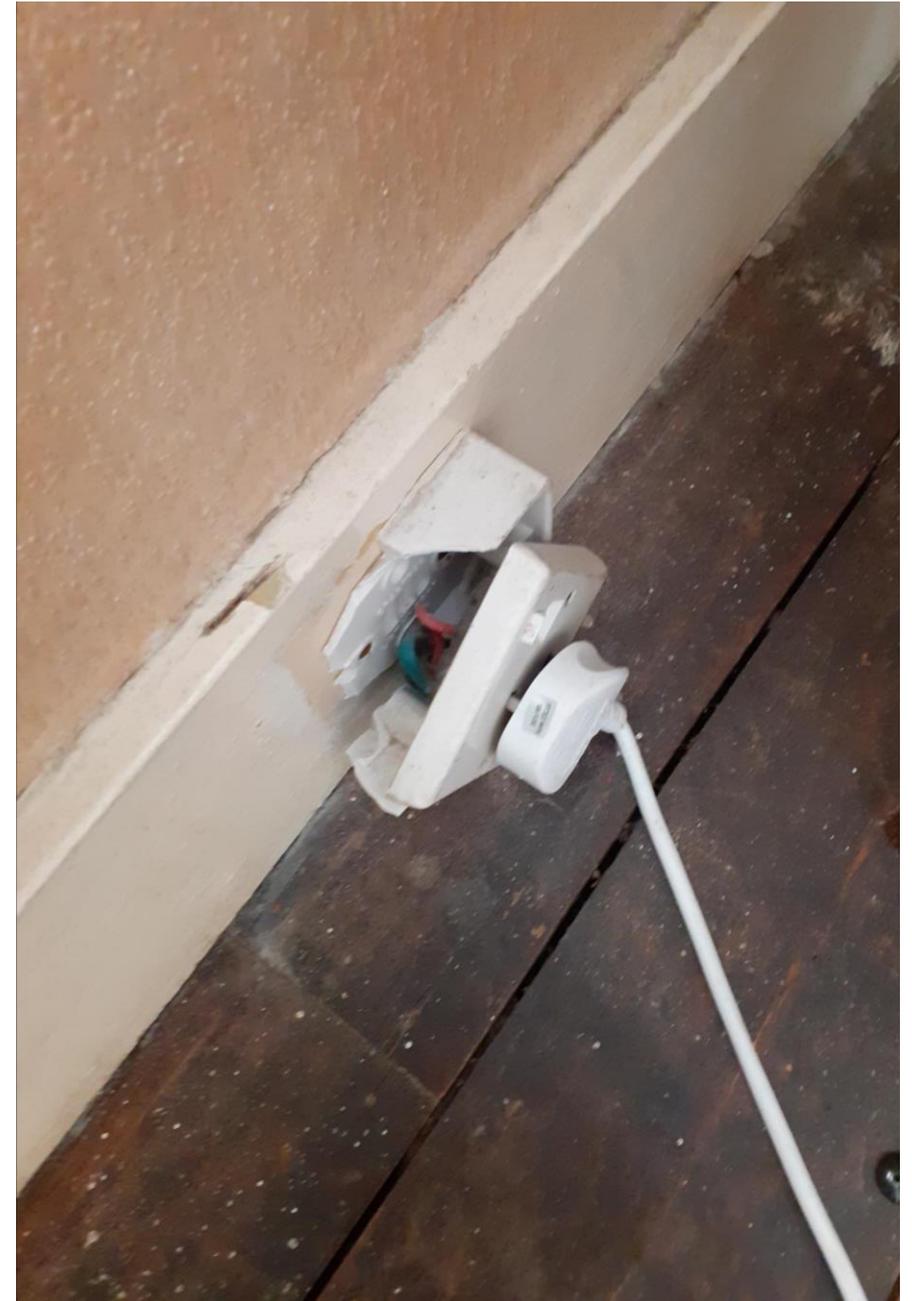




# Electrical Faults

From April 2020 - March 2021 there were 3,665 dwelling fires in England that were caused by electrical faults, there was an additional 1707 fires caused by electrical faults in other settings including care homes.

Electrical faults were the joint leading cause for accidental fire deaths in Hertfordshire between 2017-2020.





# Heat from Portable Heater or other Heat Sources

Placing items too close to heat sources can be a common cause for fire. Many materials will absorb heat and once a certain temperature is reached then the material and the surrounding room may combust.

Be mindful that the risk of heat sources causing a fire is dramatically increased if other highly flammable materials are present.

Ensure heat sources are placed at a safe distance from furnishings and traffic flow of the room.





# Cooking Unattended

HFRS have been called to numerous incidents where cooking had been left unattended over the past audit period. Nationally unattended cooking is one of the most common causes of fire in the home.

Substance dependency or illnesses that require strong medication is a common risk factor when looking at cooking that's caused a fire in the home.





# Unsafe Use of Candles



Unsafe use of candles are a common cause of fire in the home, it's essential that all candles are supported by heatproof holders, this includes tealights.

The placement of open flames should always be considered, ensure candles, wax melts and tealights are kept at a safe distance from anything else to prevent materials catching alight.



# Case Study 2 – Miss Hall

# Fatal Fire in Welwyn Garden City 2019

**22 Feb. 2018 – 28 Feb. 2019**

Around 100+ calls were made from resident to East of England Ambulance Service for a multitude of reasons.

**13 Nov. 2018**

HFRS called to assist ambulance to force entry due to concerns for resident.

**29 Dec. 2018**

HFRS called to assist ambulance to force entry due to reports of person fitting. HFRS did not attend as they passed entry code to ambulance which allowed them entry.

HFRS called to assist ambulance to force entry due to concerns for resident.

**12 Nov. 2018**

HFRS called to assist ambulance to force entry due to welfare concerns for resident who was known to be alcohol dependent.

**14 Nov. 2018**

# Fatal Fire in Welwyn Garden City 2019

**1 Feb. 2019**

ACS open a referral (substance misuse) following a safeguarding referral from EEAS.

**15 Feb. 2019**

ACS social worker gains access to Miss Hall's home – (welfare check)

**25 Feb. 2019**

ACS receive safeguarding concern from, EEAS. Concerns over home environment, cigarette butts on floor and clutter to knees in form of paper.

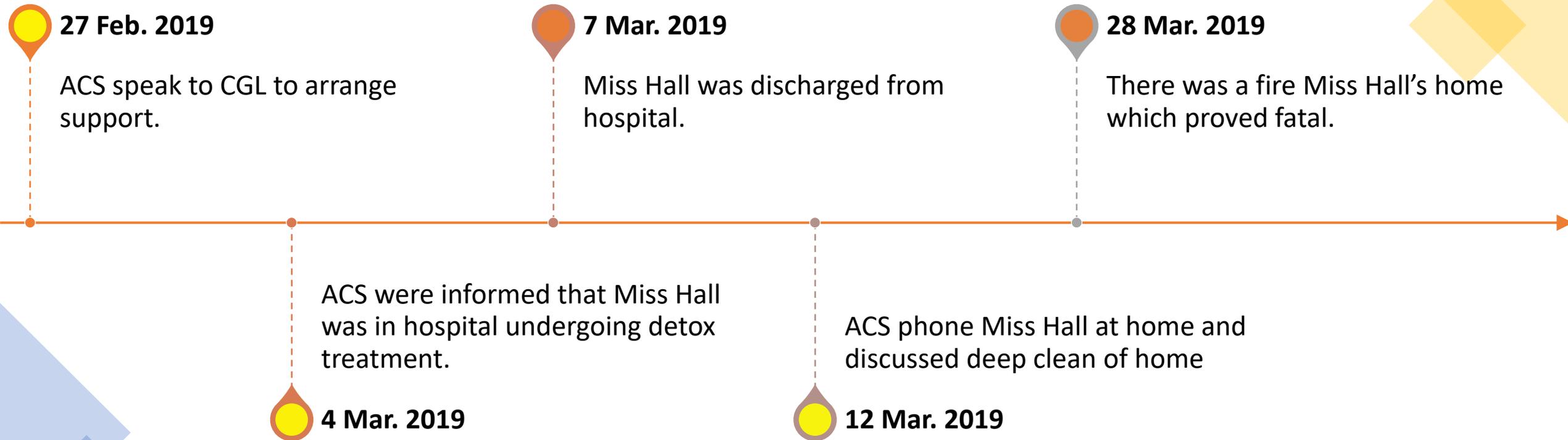
ACS social worker attempts visit to Miss Hall's home – no answer at the door.

**13 Feb. 2019**

EEAS raise their concerns to Police about a "high fire risk" at the property – no referral received by HFRS. EEAS raise safeguarding concerns to ACS.

**24 Feb. 2019**

# Fatal Fire in Welwyn Garden City 2019





## Risk Factors – Miss Hall

- Miss Hall lived alone.
- Miss Hall smoked inside her home.
  - Known to be alcohol dependant.
- Miss Hall contacted EEAS 100+ times.
- Miss Hall had previously been in rehab unit.
- Miss Hall had been informed that she was due to be evicted in April 2019.





## Risk Factors – Miss Hall

- Miss Hall was believed to have stopped drinking for a number of years up until her 50<sup>th</sup> birthday.
- Miss Hall was believed to have an alcohol bottle in her hand when she was found. There were numerous other alcohol bottles surrounding her in the living room and kitchen. A number of lighters and cigarettes were found close to her.



How can HFRS help?



# Safe and Well

- Provision of home safety, health and wellbeing advice and literature
- Checking existing or installing new smoke alarms
- Issuing fire-retardant bedding, mats and other materials
  - Completing onward referrals
- Signposting to other support services
  - Source fire retardant furnishings
  - Fitting arson proof letterboxes
  - Provision of specialist equipment



# Fire Retardant Materials

HFRS can source additional fire retardant equipment in cases where individuals pose a significant risk.

We can look to source a range of furniture including armchairs, beds and curtains which are manufactured to a higher retardant level than standard furniture, this equipment will require funding.



# Likelihood of Fire Risk Assessment

Clutter

Alcohol

Medication/Drugs

Pests Evident

Emollient Cream

Smoking In bed  
(burns evident)

Candle Use

Unsafe heaters





# Likelihood of Fire Risk Assessment

Old electrical appliances in use

Overloaded extension leads in use

Unsafe cooking practices

Cigarette burns evident

Unsafe oxygen use (equipment)

Threat of arson

Oxygen use with ignition source

Fire Setting





# Risk of injury risk assessment

Mental health issues

Hearing impairment

Learning disability

Living alone

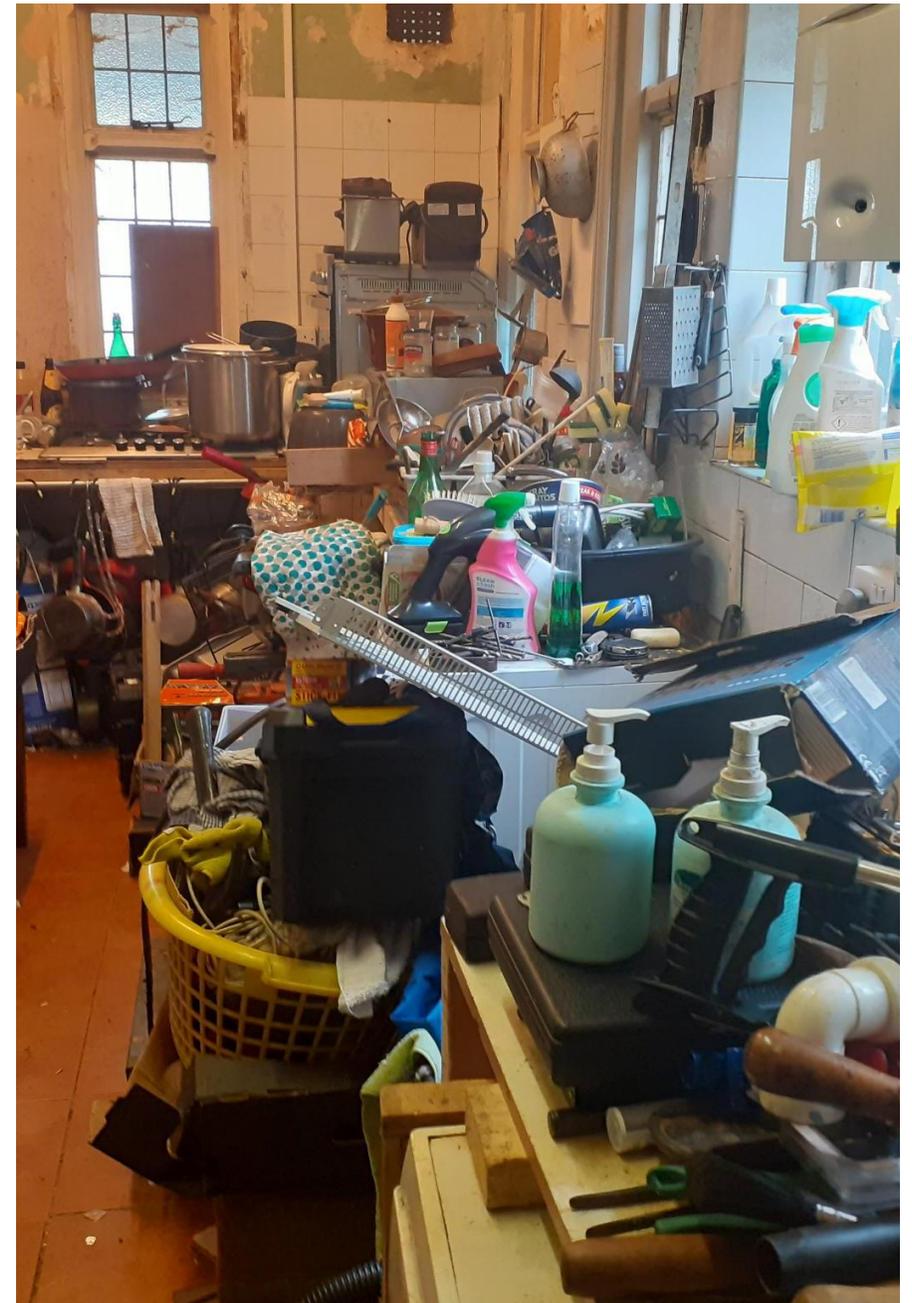
Dementia

Alcohol

Drug abuse / medicated

Impaired vision

Poor Housekeeping





# Risk of injury risk assessment



Air Mattress

Previous history of fire

Bed or Chair Managed

Mobility Aids

Unable to lock/open front door to escape

Compromised Escape Routes

Incapacitated due to drugs / alcohol

No fire detection

Emollient Cream User

Over 65 years



# Referral Process

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When you are visiting a member of the community's home in any capacity, it's unacceptable not to report any potential fire hazards observed.



Where possible and permitted, remove hazards particularly if they pose a high fire risk. This ensures you've fulfilled your responsibility in keeping an individual safe from immediate danger.



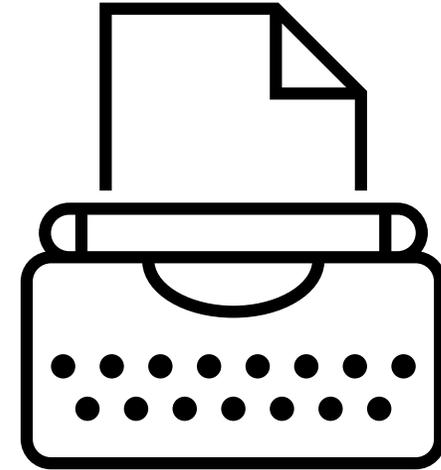
Responding to fire hazards like any other personal safety concern involves shared responsibility across agencies.



We ask you to remember the following four steps:  
Record. Respond. Report. Refer.



# Record



Record any fire hazards or risk behaviours you identify in the visiting log record or comparable record book. Record any hazards that required removing or immediate attention. Record the above alongside personal information for the referral process. This includes:

- Occupants consent for a Home Safety Visit.
  - Occupants Name
- Occupants Address and Postcode
  - Occupants Contact Details

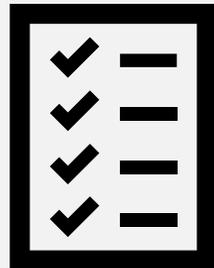


Inform:



Where appropriate, inform your line manager or relevant superior of any hazards and/or risk behaviors identified at the property and recorded as well as informing them of the referral for a home safety visit.

Report:



The staff member or their manager should then report on all of the detail regarding the occupant and confirm that they have given consent for a referral to be made to other agencies.



# Refer:

The referral process can be undertaken by completing online [referral form](#).

When referring the individual, please ensure you complete your own contact details as well as what agency you're referring from and the reason's for your referral, this information will have already been collected through the recording process. Completing the form through this link will ensure the individual is upgraded from a 'Safe and Well' to a 'Home Safety Check'.

