

POL34 – Fire Safety In a Service Users Home Policy and Procedure

Serendipity Healthcare Ltd
Unit 5, Millennium Way, Dunston, Chesterfield, Derbyshire
S41 8ND



1. Purpose

1.1 To minimise the risk of fire in Service Users' homes as much as possible, and to provide guidance to staff and Service Users on what action to take in the event of a fire in a Service User's home.

1.2 To ensure the safety of staff and Service Users as far as practically possible.

1.3 To support Serendipity Healthcare Ltd in meeting the following Key Lines of Enquiry:

Key Question	Key Lines of Enquiry
RESPONSIVE	R1: How do people receive personalised care that is responsive to their needs?
SAFE	S2: How are risks to people assessed and their safety monitored and managed so they are supported to stay safe and their freedom is respected?
SAFE	S6: Are lessons learned and improvements made when things go wrong?
WELL-LED	W2: Does the governance framework ensure that responsibilities are clear and that quality performance, risks and regulatory requirements are understood and managed?
WELL-LED	W5: How does the service work in partnership with other agencies?

1.4 To meet the legal requirements of the regulated activities that Serendipity Healthcare Ltd is registered to provide:

- The Fire and Rescue Services Act 2004
- The Care Act 2014
- Equality Act 2010
- The Health and Social Care Act 2008 (Regulated Activities) Regulations 2014
- Health and Social Care Act 2008 (Registration and Regulated Activities) (Amendment) Regulations 2015
- Health and Safety at Work etc. Act 1974
- Human Rights Act 1998
- Management of Health and Safety at Work Regulations 1999
- Mental Capacity Act 2005
- Mental Capacity Act Code of Practice

2. Scope

2.1 The following roles may be affected by this policy:

- All staff

2.2 The following Service Users may be affected by this policy:

- Service Users

2.3 The following Stakeholders may be affected by this policy:

- Family
- Representatives

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- Commissioners
- Fire and Rescue Service

3. Objectives

- 3.1** To ensure that staff understand that fire prevention is an important obligation for all organisations, including Serendipity Healthcare Ltd, and that fire has the potential to present significant risks to health and safety.
- 3.2** To ensure that Service Users receive support to live safely in their own homes.
- 3.3** To ensure that where fire safety risks exist within Service Users' own homes that suitable support and advice is provided by Serendipity Healthcare Ltd.

4. Policy

- 4.1** This policy ensures that staff and Service Users are safeguarded from fire as far as is practically possible and Serendipity Healthcare Ltd will do so by:
 - Training Care Workers on fire safety
 - Completing risk assessments in Service Users' homes before service commences, on a regular basis and in response to any near misses, incidents or accidents
 - Encouraging Care Workers to raise concerns about fire safety issues within the Service User's accommodation
 - Encouraging Care Workers to be aware of, and to report, any fire safety concerns during the journey from, or to, the Service User's accommodation, especially when accommodation is within a block of flats with communal areas and fire safety arrangements
 - Making referrals to the Fire Service where there are concerns about fire risks in Service Users' homes
 - Not permitting Care Workers to provide a service if there is a significant risk of fire
 - Supporting Service Users to check smoke and carbon monoxide alarms and referring them to the Fire Brigade, where required, to ensure that the Service Users' safety is maintained

5. Procedure

5.1 Smoking

Serendipity Healthcare Ltd must consider the risk posed by carelessly or accidentally discarded smoking materials, particularly if Service Users have limited mobility. This follows advice from coroners after inquests into the deaths of high-risk smokers with mobility problems who acquired burn injuries as a result of matches or cigarettes dropping on to clothing or bedding.

5.2 Electronic Cigarettes

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There have been incidents, including a fatal fire, where e-cigarettes were found to have contributed to the incident. Specifically, electronic cigarettes have a charging pack which can overheat, and they also use a heating element to vaporise the liquid content prior to inhalation. This element is an ignition source and will pose a risk near to any oxygen supply. Serendipity Healthcare Ltd must:

- Treat e-cigarettes similarly to standard cigarettes when Service Users are on medical oxygen or in a potentially oxygen-enriched environment
- Encourage Service Users not to leave their e-cigarettes unattended whilst on charge and never overnight when they are asleep
- Encourage Service Users to purchase products from reputable sources
- Highlight the fire risks of e-cigarettes to Service Users and document the risks in the risk assessment

5.3 Combustible Materials

Consideration must also be given to those Service Users who may use hand sanitiser. Prior to igniting a cigarette, in order to minimise the risk of fire, alcohol rub users are instructed to rub their hands until dry, which indicates that the flammable alcohol has evaporated.

Flammable creams and ointments, such as petroleum jelly, increase the chance of a fire starting if a Service User accidentally drops a cigarette or a match. Dropping cigarettes or matches on to clothing is dangerous, but when flammable creams are involved, this really increases the chance of a fire starting and becoming much more intense.

Essential oils are also flammable and if used in massage, a risk assessment must be conducted.

5.4 Air, Foam, Fluid, or Gel-Filled Mattresses

Dynamic air flow pressure-relieving mattresses (and overlays placed on top of standard mattresses) are designed to prevent and help treat pressure ulcers for Service Users who spend extended periods in bed. They are commonly used in hospitals, hospices and care homes but are also provided for home use and are filled with air by a pump. There have been several fatal fires attributed to the use of such mattresses in the home. Serendipity Healthcare Ltd should:

- Undertake a full assessment, which must include fire safety
- Consider the differences between a home environment and that in a hospital or residential care setting (where the beds might usually be used). For example, patients are not allowed to smoke in hospital but can choose to do so at home; candles or some electrical equipment with a potential fire risk would not usually be present in hospitals and staff are usually on hand at these premises to provide immediate assistance if a fire occurs
- If there is a fire, and it is safe to do so, turn off the air pump

5.5 Fire Risk Assessments

- Risk assessments must consider the Service User's environment, behaviours and the risk they pose to others, not just themselves
- When caring for Service Users with limited mobility, consider the provision of interlinked smoke alarms connected into a Telecare, Carecall or Lifeline type system

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- The difference between a hospital, residential care setting and a domestic household must be considered when using any medical devices or equipment
- If there is a heightened risk from fire (e.g. the Service User has dementia), make a referral to the Fire and Rescue Service as they provide advice and support to reduce risk and improve fire safety awareness in the home
- Discourage smoking in, or on any bed. If a Service User is insistent on smoking, they should smoke away from their bed and mattress and ideally only when someone else is with them to offer immediate
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- assistance if required
- Fire retardant covers, bedding, or clothing for at-risk smokers must always be considered, particularly if they are confined by immobility (crib 5 rated)
- Keep all ignition sources away from bedding and dynamic airflow mattresses and do not use dynamic air flow mattresses with electric blankets
- Do not burn candles in the room of a Service User as this could result in a heightened risk from fire
- Do not overload plug sockets and ensure that electrical items are maintained and switched off and unplugged when not in use
- Consider evacuation routes, particularly if the Service User has limited mobility

5.6 Procedure in the Event of a Fire

- Shout to alert any others in the Service User's home
- Call 999 – Request the Fire Service
- Do not put yourself or others in danger of fire by trying to tackle a fire
- Evacuate the building taking the Service User if possible
- Where possible, close the doors behind you as this will help to slow down the fire
- If you need to access a room through an evacuation route, then check the warmth of the door with the back of the hand. If it is warm do not open and find an alternative route
- If it is not possible to evacuate the Service User, leave them sitting on the floor with a damp towel held over their mouth and nose to reduce smoke inhalation. Close all doors and windows and cover the door well with a damp towel if possible
- If there is smoke in a room keep low and cover your mouth with a damp cloth
- Do not re-enter the building under any circumstances
- Wait for the Fire Service to attend
- Do not re-enter the building until the fire officer advises it is safe to do so
- If there are any combustible materials such as Oxygen, inform the Fire Brigade

6. Definitions

6.1 Combustible Materials

- A combustible material is any material that, in the form in which it is used and under the conditions anticipated, will ignite and burn or will add heat to an existing fire

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Lisa Ward – HR Manager