

## **Fire Safety Awareness Training – 26/11/2024**

### **Questions and Answers**

- (1) Is fire retardant bedding part of London Fire Brigade (LFB) recommendations / provision or is the person expected to buy their own?**
- (2) If Adult Social Care (ASC) needs to purchase the bedding, where do we source them? Recently we had an individual refusing to be referred to LFB**

In the first instance bedding should be sourced by the individual or responsible person. LFB can provide the bedding free of charge if there is an immediate risk. This should be accessed by requesting a Home Fire Safety Visit (HFSV) from LFB and clearly outlining the risks requiring provision of fire retardant bedding – for example, stating that the person smokes in bed. It's important to note that fire retardant bedding needs to be replaced on a regular basis, or new ones obtained.

*See question 4 around what to do if a person refuses a HFSV.*

- (3) Is there any scope to ban smoking indoors in a Care Home or Extra Care setting?**

There are different regulations in place in relation to Fire Safety Regulations which govern care homes as opposed to supported accommodation or extra care settings.

Fire safety regulations for care homes are primarily governed by the [Regulatory Reform \(Fire Safety\) Order 2005](#), more commonly known as the Fire Safety Order.

The responsible person (registered manager of the care home) has a legal duty to carry out a fire risk assessment of their premises and take appropriate measures to minimise the risk of fire and ensure the safety of residents, staff, and visitors.

These Regulations state that a registered person must:

- Consult with a fire authority for advice.
- Take adequate precautions against fire risk, including having a clear evacuation plan in place.
- Plan for the detection, containment, and extinguishment of fires through the provision of recommended fire safety equipment.
- Ensure the regular maintenance of fire safety equipment.
- Be responsible for the training of care home staff, and the appointment of competent fire wardens for the premises.

- Organise regular fire drills to practice evacuation procedures; all drills must be recorded, as should any equipment testing.

Care homes can offer designated areas for smoking, such as individual smoking rooms for residents. The rooms must be well ventilated, and smoke must not get into other rooms.

The Thematic Fatal Fires SAR noted the limitations of the Fire Safety Order in relation to fire safety in supported accommodation and extra-care housing (as well as in private dwellings). As residents have individual tenancy arrangements, they are permitted in law to smoke within their properties and the provider cannot stipulate that they use a designated smoking area. However as per the measures outlined above for care homes, the same practice must apply for supported and extra-care accommodation schemes in that they have a legal duty to carry out a fire risk assessment of their premises and take appropriate measures to minimise the risk of fire. Best practice is to ensure that Person Centred Fire Risk Assessments (PCFRAs) and Personal Emergency Evacuation Plans (PEEPs) are in place for all residents, and that LFB carry out a HFSV for all high-risk residents.

**(4) If a person does not want a referral for a HFSV, could we still offer to go an online checker with that person?**

If a person declines a referral for a HFSV good practice is to:

1. Offer the Online Fire Safety Checker: Attempt to go through the online checker with them to address potential risks.
2. Refer to LFB if in doubt: Even if the individual refuses, you may still refer to the LFB to allow contact to be attempted.

Actions Based on capacity and risk:

- If the individual lacks capacity to make a decision around receiving a HFSV (evidenced within a mental capacity assessment) make a best interests decision to refer them to the LFB.
- Ensure the decision prioritises their safety and involves a multi-agency approach.
- If the individual has capacity but refuses support:
  1. Clearly explain the potential risks and consequences of refusing the visit.
  2. Document their refusal and the associated risks.
  3. Explore alternative safety measures or support options.
  4. If risks to the individual or others remain significant, escalate safeguarding concerns.

Additional steps:

- Seek guidance: Consult your line manager or contact the LFB for advice.
- Escalate if necessary: If risks are severe and unaddressed, consider legal advice or seeking advice as to whether safeguarding actions may be

warranted, for example around risks of self-neglect and where there are risks to others.

- Staff can contact the managers within ASC listed below for advice and consultation:
  - Fatal Fires Lead: [Denise.Roach@rbkc.gov.uk](mailto:Denise.Roach@rbkc.gov.uk)
  - Strategic Safeguarding Lead: [Delyth.Shaw@rbkc.gov.uk](mailto:Delyth.Shaw@rbkc.gov.uk)
  - Safeguarding Operational Service Manager: [Hugh.Constant@rbkc.gov.uk](mailto:Hugh.Constant@rbkc.gov.uk)

- (5) Is it possible for LFB to provide aids such as a vibrating pillow to people in general needs housing?**
- (6) I have 2 residents who are hard of hearing – how do I proceed with ordering hard of hearing alarms?**

LFBs hard of hearing alarms are linked to a vibrating pad which can be placed under a pillow or in an armchair, as well as strobe lighting units. All such aids including fire retardant bedding or arson proof letter boxes are issued on a case-by-case basis subject to an assessment by local fire fighters. They are all accessed by requesting a HFSV via our website. Remember to add as much detail about the risk when making the referral and have responsible persons in attendance.

You can also refer to ASC to request an overall needs assessment by the Sensory Team.

- For Kensington and Chelsea contact the Information and Advice Team on 020 7361 3013 or email [socialservices@rbkc.gov.uk](mailto:socialservices@rbkc.gov.uk)
- For Westminster contact the Information and Advice Team on 020 7641 1175 or email [adultsocialcare@westminster.gov.uk](mailto:adultsocialcare@westminster.gov.uk)

- (7) In relation to escape plans, what if internal doors have glass in them? Will this give the same level of protection?**

Glass in and of itself shouldn't be a cause for decreased fire protection. During the fire safety awareness training LFB used 20-30 minutes as a minimum rough guide for fire protection of doors and this would include glass doors. Of course this depends on the condition of the glass, fitting and any hole/gaps present – but the same can be said of any material. There will be a regulatory requirement for some doors to be fire doors depending on the type of door and the type of premise. Fire doors will usually have self-closing devices, signage, nearby lighting etc, any glass present in these doors will be fire rated. Checks can be carried out on whether a door or premise should comply with regulations by visiting the [National Fire Chiefs Council \(NFCC\) specialised housing website](#) or [LFB website](#).

- (8) In relation to escape plans, what advice to stay safe is there for people who are alone and restricted to bed or who are not able to shut the door / block off gaps?**

Consideration can be given to providing a misting tower where they spend the majority of their time. This can be arranged via a referral to ASC.

As well as the above: Make sure the person has the means and ability to contact LFB immediately. As part of their escape plan consider quick access for emergency responders i.e. move them to the ground floor, make sure entry is available to crews by key safe etc. Request a HFSV from LFB as local crews will offer some solutions and will want to familiarise with and record the risk.

**(9) Any extra considerations for oxygen patients, especially those with limited mobility?**

Ensure a HSFV is carried out by LFB. LFB will record the risk so that we have the information with us when we are enroute to an incident. Keep the bulk of the cylinders in one place if possible and keep these as safe as possible – outside in porches or sheds etc is best, away from heaters or naked flames, out of escape routes.

**(10) 24-hour Indoor Segment Timers – do they have a safety function in them? As they turn on lights and radios.**

As long as they are from a reputable manufacturer with kite marks etc they will be fused and have in-built safety functions. The usual electric safety advice, delivered during the training and accessed via our website will apply.

**(12) What is the fire risk with incontinence products?**

Incontinence products are often supplied in large quantities to people who have continence problems. They contain plastics and other chemicals, in addition to paper or textile padding which provide additional fuel to a developing fire.

In terms of fire safety advice in relation to incontinence products:

- Never smoke or allow others to smoke close to the stored incontinence products.
- Always store incontinence products safely away from anything that has a flame or is likely to get hot, for example heaters, candles, fires, chargers and other electrical appliances.
- Try not to store the supplies all in one place – ideally not next to the person's bed or chair.

**(13) Are all emollient creams risky?**

The emollient creams that present the highest risk are those that contain paraffin. Where risks are identified GPs should be asked to prescribe lower risk emollient creams.

The SAEB/LFB [Emollients and Fire Safety Learning Briefing](#) contains further guidance.