

# Safeguarding adults at risk – Fire Safety

Presented by Fiona  
Bateman

BSAB Independent Chair





# Webinar: house keeping

- Please put all microphones on **MUTE**
- If you would like to ask a question, please use the **CHAT** function
- **RESPECT** the stories you hear and protect the identity of adults at risk through **CONFIDENTIALITY**
- Take care of your own **WELLBEING** throughout this session

# The role of BSAB

- BSAB is a partnership, it includes the local authority, clinical commissioning group, police, Fire Brigade, community and voluntary organisations, housing, health and social care providers. The board provides partner agencies opportunities to review practice, provide positive cross-agency challenges to enable accountability and strengthen the culture of continuous improvement.
- Our priorities this year are:
  - To establish that safeguarding practice reflects 'MSP' principles, meaning that adults at risk and people important to them are involved in decisions about how best to protect them from harm
  - Adults at risk are heard and their experiences shape continuous improvement
  - That we advance equality of opportunity, including ensuring access to justice for adults at risk
- S44 Care Act: statutory function to review cases where an adult with care and support needs dies or suffered serious harm as a result of abuse or neglect and there is reasonable cause for concern about how the SAB, members of it or other persons with relevant functions worked together to safeguard the adult.



# Mr A review in 2018

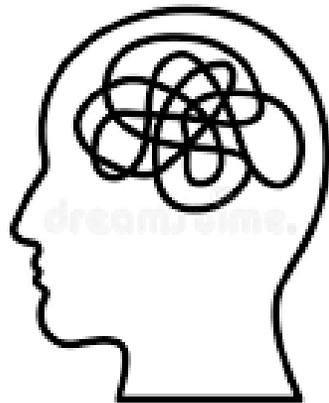
We know risk of serious harm from fire increases for adults with care and support needs, esp. if:

- Poor mobility or frailty- FSA requirement for evacuation plans helpful, but also important to build on successful work done to reduce harm by working with providers and social care staff, GPs, OTs and pharmacist
- If the adult smokes- check capacity and tenancy conditions, they may not have a 'right to smoke' so use opportunities to offer safe alternatives or smoking cessation advice
- Hoarding- this requires multi-agency, trauma informed processes. Working with colleagues from Hoarder UK, BSAB has redesigned our policy and support offer to adults who hoard to reduce fire risks;

An independent audit, in 2020, of the impact of BSAB fire safety task and finish group's work confirmed significant improvement in risk reduction across social care workloads

(Self) Neglect came into sharp focus over C-19, it is wider than simply poor maintenance of personal care or a habitable home. NCL audit (2019) and BSAB SAR in RT (2020) identified safeguarding risks arising from failure to manage treatable conditions and refusing necessary care. The resulting action plan has already demonstrated practice improvement.

Three further fire deaths in 2021 prompted us to look at how widely fire prevention is embedded across all partner agencies:



### Case 1

An 88 year old gentleman, who lived alone. In 2010 a podiatrist raised concerns that he had no heating or hot water at home. In 2017 he received treatment for leg ulcers but was not otherwise known to services.

### Case 2

A 57 year old lady who was known to mental health services and had a history of drug and alcohol services. Steps had been taken to reduce risk of self-harm.

### Case 3

An elderly lady who lived alone and had a history of falls. She was showing signs of confusion. She was in receipt of domiciliary care. It is believed that a portable heater ignited within her micro-environment

# Fire prevention: Mental capacity and best interest decisions

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It is vital that the Best Interest weighing process becomes embedded in the practice of professionals working with adults who lack capacity to take decisions.

S.1 Mental Capacity Act 2005 simply states that a '*person should not be treated as unable to make a decision merely because he makes an unwise decision*'. This principle requires consideration of the person's capacity in a time and issue specific manner. Practitioners should actively test and record their assessment of a person's ability to realise and weigh up the fire risks posed, as well as their ability to make an informed decision against safer options to manage those risks.

Use available tool to work with the adult at risk in their environment:  
<https://www.london-fire.gov.uk/safety/the-home/home-fire-safety/home-fire-safety-checker-hfsc/> and refer to the LFB for a home safety fire visit!

It is also crucial practitioners update capacity and risk assessments when needs change, often this will increase risk that any incident could be fatal.



# Fire Safety Act 2021 and Fire Safety (England) Regulations 2022

- This Act requires a 'responsible person' of multi-occupied residential buildings with two or more sets of domestic premises to update their fire risk assessment to include an assessment of the building's structure, external walls, and flat entrance doors. In some cases, a Responsible Person will be able to update the fire risk assessment themselves, however where the update requires an assessment of materials which make up a building's external wall system the Responsible Person may need to contract a suitably competent fire risk assessor to undertake that assessment for them.
- From January 2023 the Fire safety regs will apply and require responsible persons to implement many of the recommendations arising from the Grenfell Inquiry.
- There will be further consultation on how to implement recommendations regarding personal emergency evacuation plans (PEEPs) and emergency evacuation information sharing and evacuations plans (EEIS+). Whilst these are not yet mandatory in certain situations, it is recommended that practitioners responsible for the safe delivery of treatment and care explore with the adult at risk opportunities for preventing fire and put in place plans to reduce the risk of harm if a fire does break out.

# Duty of Care

- LFB inspections under the Regulatory Reform (Fire Safety Order) 2005 relate to fire risk to a building and not to single dwelling such as supported living flats: they shouldn't be relied on as individual fire risk assessments. Care providers, landlords and commissioners must, when fulfilling their functions, ensure they have met their duties to adults at risk.
- All care plans should specify what equipment or arrangements are necessary to safeguard adults at risk and prevent harm. Where these may increase risk or intensity of a fire, additional arrangements/equipment to reduce foreseeable harm (including those associated with flammable hoist materials) should be considered, with clarity provided on who is responsible in line with LFB guidance on personal protection systems (<https://www.london-fire.gov.uk/media/4842/pps-guidance-document-16112015-2.pdf>).
- The LFB have also published a home safety fire video: <https://www.facebook.com/LondonFireBrigade/videos/check-your-homes-fire-safety-in-minutes/151625533562461/>

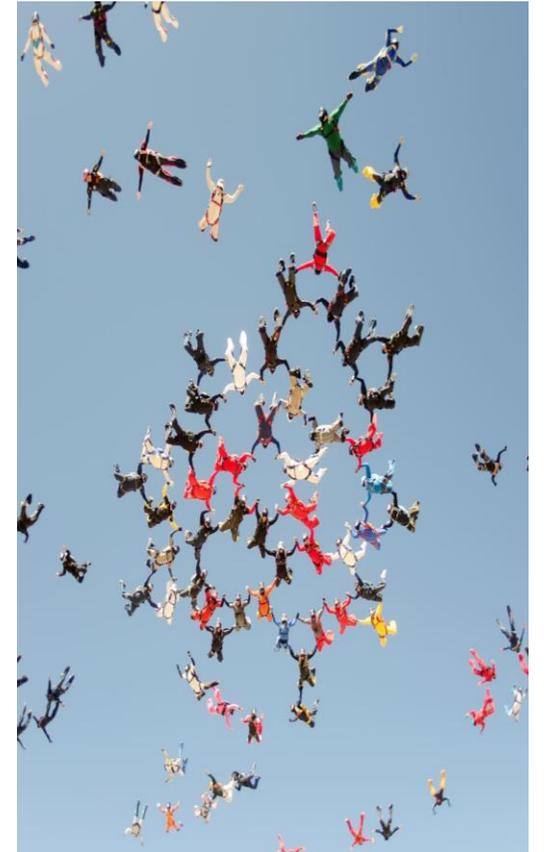
# Next steps:

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BSAB and partners have drawn up an action plan to include:

- A professional survey to ascertain the level of fire safety awareness across the partnership workforce;
- A questionnaire for health, housing and social care commissioners and providers to understand how fire safety/ prevention is embedded into contracts and staff training;
- Collate the findings and report in December (and via our annual report next year) on any recommendations to improve practice and reduce the risks of fatal fires for adults with care and support needs.

.... **How can you and your organisation take this forward?**



# How to report concerns in Barnet

**Social care direct at Barnet council are the point of first contact**

- **Tel 020 8359 5000 text (SMS) 07506 693707**  
email [socialcaredirect@barnet.Gov.Uk](mailto:socialcaredirect@barnet.Gov.Uk)

**Police community safety unit** in an  
**emergency 999**

- **Tel 020 8200 1212 email [sxmailbox-tib@met.Pnn.Police.Uk](mailto:sxmailbox-tib@met.Pnn.Police.Uk)**

- What happens after you report abuse:

<https://www.Barnet.Gov.Uk/sites/default/files/assets/citizenportal/documents/adultsocialcare/whathappensafteryoureportabusebookletmay12.Pdf>

- Your concern should always be taken seriously and acknowledged. Usually the adult at risk will be consulted and you should always be told if the concern will be investigated.
- If you hadn't had this it is ok to ask again!

