



South London and Maudsley   
NHS Foundation Trust



# Development of fire guidance for health & social care practitioners

**Barbara Dunk, OT Consultant Assistive Technology, South London & Maudsley NHS Foundation Trust**

**Alison Thrower, Advanced Practitioner Telecare, London Borough of Southwark**

**Yvonne Drake, Fire Liaison & Arson Reduction Officer  
London Borough of Southwark / London Fire Brigade**



# Fire Guidance development-Why?

- To improve awareness and risk management for all health & social care practitioners
- Challenge the 'Its not my job' mentality & 'blinkered' approach to assessment & interventions
- To enhance clinical reasoning in all aspects of environmental adaptation, considering the person, their environment, routines, & support systems
- To support realistic care plans to support service users in their chosen activities
- To build a more integrated & standard approach to fire prevention & management

# How did we approach this? - multi agency working

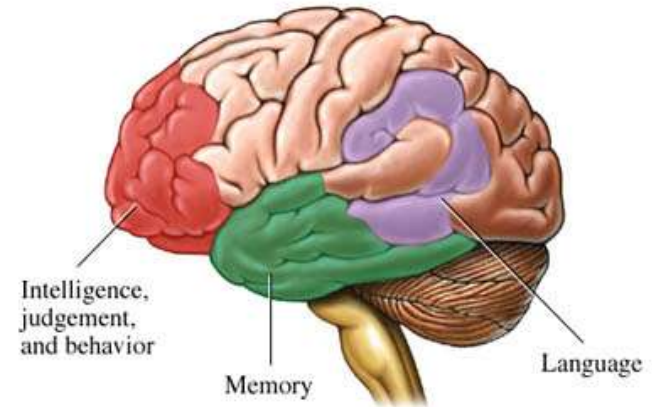
## AT Peer Supervision Group, & Forum:

- Peer support
- Telecare specialists working with other agencies
- Sharing experiences & knowledge
- Joint problem solving
- Examining the evidence base
- Development of good practice
- Cascading information to support good practice



# Dementia /memory problems: Challenges for fire prevention

- Memory & attention – unattended pans, distractions, reduced ability to respond to risks/situations
- Judgement & problem solving – inappropriate behaviours, tampering
- Lack of mental capacity

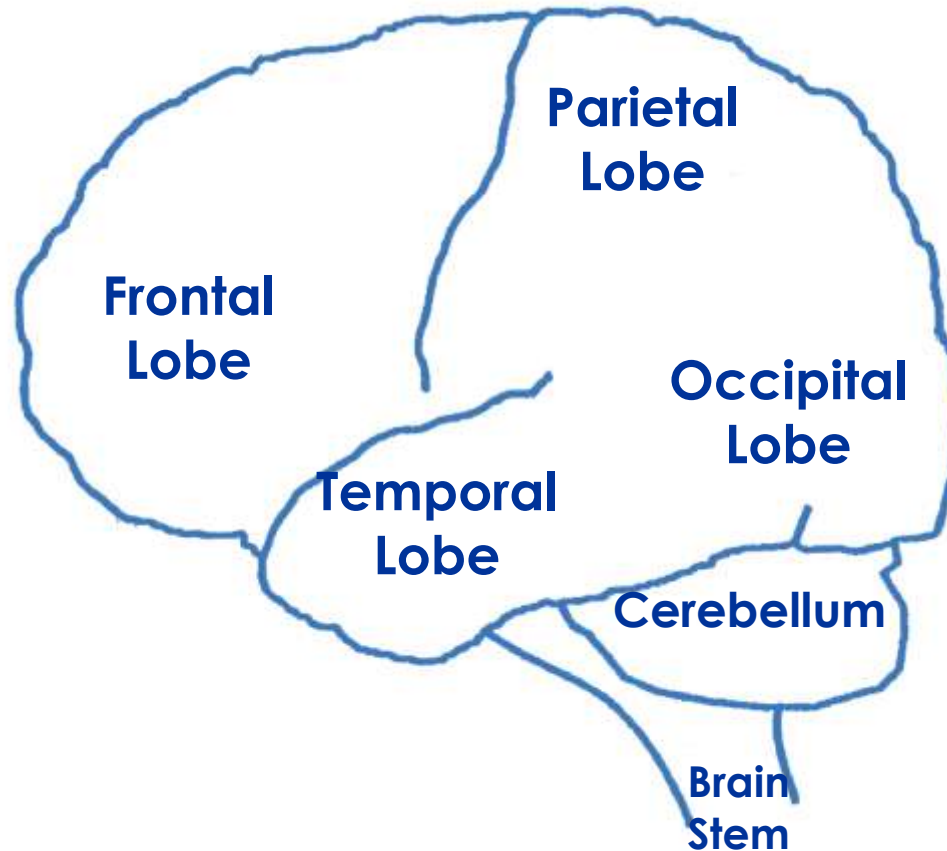


- Lack of insight & awareness – reduced ability to use electrical & other devices safely
- Poor organisation, sequencing and planning

# Brain-Behaviour Relationships

## Frontal Lobe

- Initiation
- Problem solving
- Judgment
- Inhibition of behavior
- Planning/anticipation
- Self-monitoring
- Motor planning
- Personality/emotions
- Awareness of abilities/limitations
- Organization
- Attention/concentration
- Mental flexibility
- Speaking (expressive language)



## Parietal Lobe

- Sense of touch
- Differentiation: size, shape, color
- Spatial perception
- Visual perception

## Occipital Lobe

- Vision

## Cerebellum

- Balance
- Coordination
- Skilled motor activity

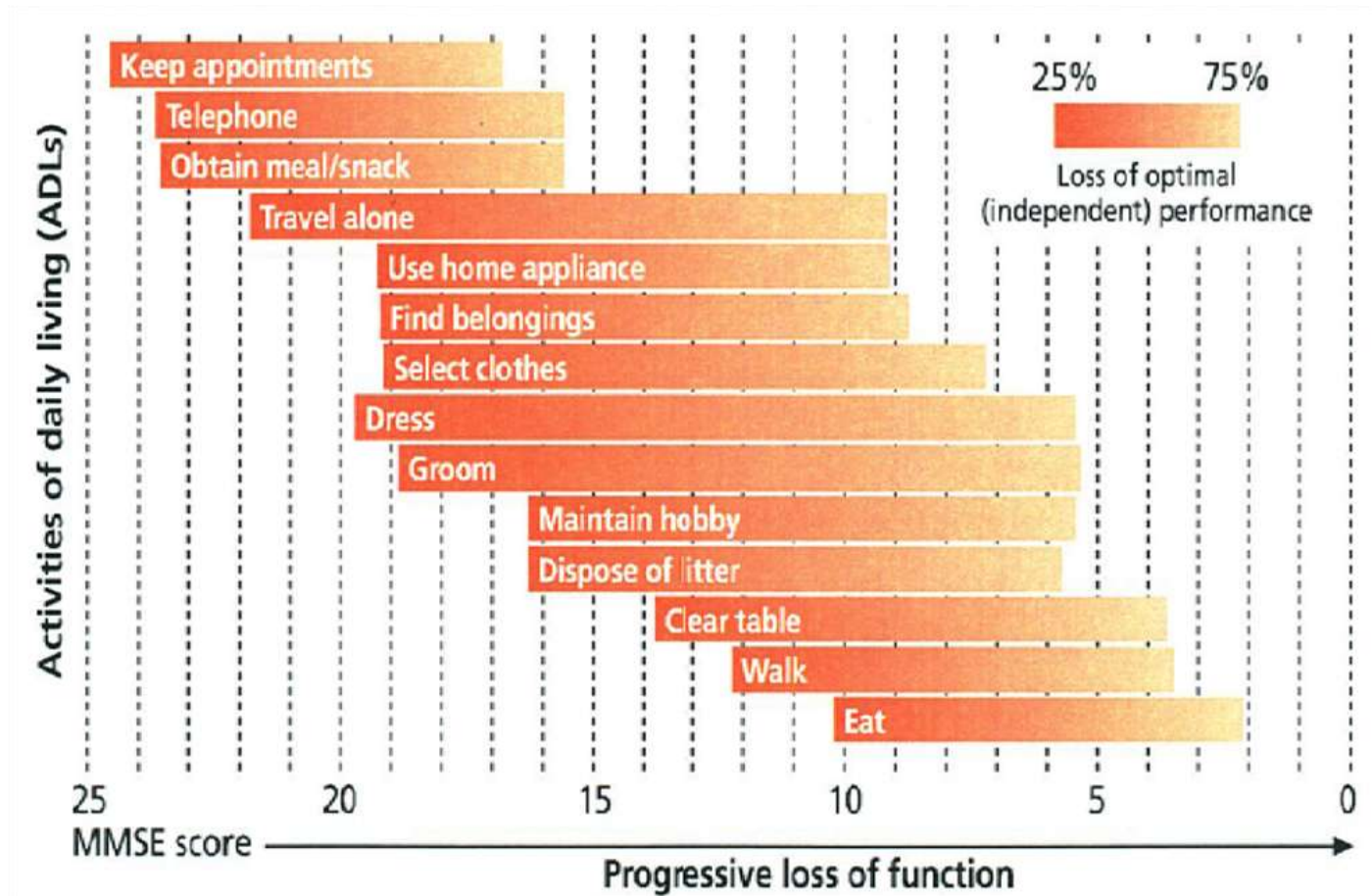
## Temporal Lobe

- Memory
- Hearing
- Understanding language (receptive language)
- Organization and sequencing

## Brain Stem

- Breathing
- Heart rate
- Arousal/consciousness
- Sleep/wake functions
- Attention/concentration

# How activities of daily living deteriorate as dementia progresses



# Physical Health Conditions-Challenges for fire prevention



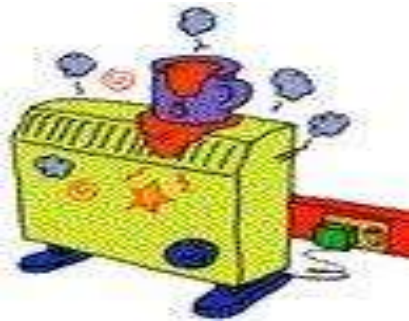
- ❖ Is there a physical disability impacting upon the persons mobility?
- ❖ Is the person being hoisted or assisted with transfers?
- ❖ Does the person live alone?
- ❖ Can anyone in the property assist them to leave in an emergency?
- ❖ Does the person sleep upstairs and rely on a stairlift to get downstairs?
- ❖ Does the person have uncontrolled epilepsy and cook independently?
- ❖ Is there evidence of hoarding?

# Importance of cooking: retaining some independence in food & drink preparation





# Risk of fire from electrical & other appliances



# Enablers for fire prevention

- Range of electronic AT integral to support/care plans to facilitate a positive risk taking approach
- Focus on adapting existing environment due to familiarity & limitations on ability to adapt to changes
- The importance of early diagnosis, good risk assessment procedures, & multi-agency working
- Accessible & timely access to expert & independent advice, appropriate signposting to support services
- Skills development for all agencies involved in supporting vulnerable people & people with memory problems

## Unsafe Use of Electric Kettle



### Warning Signs

- Heating electric kettle on hob
- Leaving kettle on hob
- Boiling kettle dry
- Unsafe condition of kettle e.g. frayed wire
- Inappropriate position of kettle
- Adding inappropriate items to kettle (tea bags, milk etc)

### Think About

- The condition of the kettle
- Safe position of kettle eg pouring and carrying of kettle
- Vision and Hearing
- Physical conditions i.e. sensation, grip, tremor, mobility, balance and seizures
- Cognitive skills e.g. memory, attention, judgement, insight
- Substance misuse e.g. drugs, alcohol, prescribed medication
- Removal of kettle
- Alternative provision of drink e.g. flask, carer

### Possible Safety Solutions

- Monitored / unmonitored heat + smoke detection
- Consider wider equipment e.g. trolley, kettle tipper, perching stool, liquid level indicator
- Change kettle to travel size or whistling style
- Adapting environment
- Education / rehabilitation

## Unsafe Use of Microwave



### Warning Signs

- Use of metal containers and objects
- Cooking too long e.g. super heating and burning
- Build up of spillage
- Drying items in the microwave
- Storage of items on the microwave
- Unsafe condition of microwave e.g. burnt, blackened

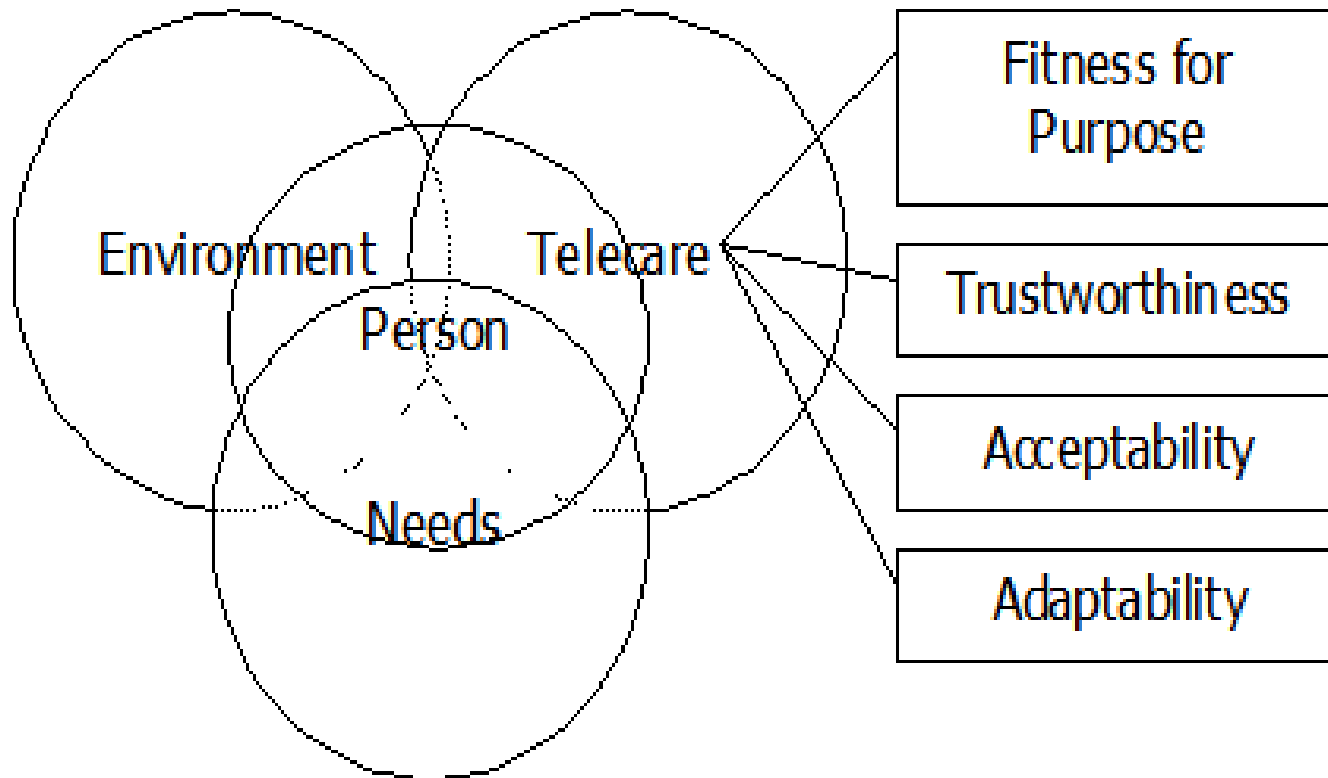
### Think About

- Condition of the microwave
- Familiarity with operating the microwave
- Safe positioning of microwave e.g. too high / too low; storage around microwave
- Use of microwave by carer or client
- Vision and Hearing
- Physical conditions i.e. sensation, grip, tremor, mobility, balance and seizures
- Cognitive skills e.g. memory, attention, judgement, insight
- Substance misuse e.g. drug, alcohol, prescribed medication

### Possible Safety Solutions

- Advice on safe operation e.g. appropriate containers and regular cleaning
- Use of food with similar cooking times
- Monitored / unmonitored
- red heat + smoke detection
- Adapting environment e.g. bump ons, adjusting position
- Unplug and isolate for carers use only
- Removal of microwave
- Alternate provision of food / drink e.g. meals on wheels, carer

# How do we ensure reliability in equipment & systems



# Evidence base: ATILA - Assistive Technology and Telecare to maintain Independent Living At home for people with dementia

- A multi-site, pragmatic randomised control trial (RCT)
- NIHR funded (research arm of NHS) sponsored by King's College London and SLaM
- **Objectives:**
  - To establish whether AT can **extend the time** that people with dementia can continue to live independently in their own homes and whether this is **cost-effective**.
- **Secondary objectives:**
  - To measure carer burden
  - To measure the Quality of life of carers
  - To record the number and severity of serious adverse events

# Thank you for listening

