

Fire and Rescue Services

The value of working in
partnership with
occupational therapists

Royal College of
Occupational
Therapists



Occupational Therapy
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The value of working in partnership with occupational therapists

The challenge for Fire and Rescue Services

For over 10 years fire and rescue services (F&RS) have been carrying out interventions in people's homes to reduce their risk from fire and to provide advice on actions to take in the event of fire. This approach has helped to successfully reduce the number of incidents and fatalities.

Fire and Rescue Services are in a unique position to do more than their obvious remit. Across the UK F&RS are now starting to:

- 1. build on prevention and response roles to reduce risk and enhance safety and wellbeing of vulnerable people and communities;**
- 2. to work effectively with partners to improve efficiency and;**
- 3. to address health related risk factors, such as alcohol and smoking.^{1, 2, 3, 4}**

Without a doubt, addressing these priorities will decrease demands on both fire and health and social care services and improve the safety of vulnerable people. People are vulnerable if they have cognitive impairment, mental health conditions, smoke, misuse substances, are frail or physically inactive, are socially isolated, or live in cold homes. To minimise dependency on services and to reduce the need for crisis interventions, identifying people with these risk factors and intervening early is crucial. The most common reasons for domestic fires are related to occupation – smoking and “misuse of equipment or appliances”.⁵



Working with OT's, we have seen the benefits of using a person centred and risk enablement approach for the most vulnerable in our communities. We recognise that working in partnership creates better outcomes for the individual but also has cost benefits for all agencies involved

Emma Darby

Engagement and Partnership Officer, Nottinghamshire Fire and Rescue Service



Occupational therapist, Paula Breeze, is a Health and Social Care Services Coordinator with the Greater Manchester Fire and Rescue Service. Here she explains why people with health conditions might benefit from a Safe and Well visit.

View the film to find out more about Safe and Well visits.

<https://youtu.be/mCFH8bNh7sE>

How are F&RS meeting the challenge?

Innovative partnerships between the F&RS and occupational therapy services. This has already led to:

- 1. Development and implementation of referral pathways that promote joint working and information sharing across the health, social care and fire and rescue services.**
- 2. Shared training programmes to develop competencies to deliver on public health.**
- 3. Joint home visits by F&RS staff and occupational therapists for people who have complex needs and are considered high risk.**
- 4. Formal arrangements for occupational therapy students to have diverse practice placements and learning opportunities with local fire and rescue services.**

How can occupational therapists and fire and rescue services enhance safety, wellbeing and health of vulnerable people and communities?

To capitalise on their unique position working in the community, F&RS are employing occupational therapists

Occupational therapists identify vulnerable adults using risk stratification tools. They assess support, advise, signpost and provide early intervention for people with complex presentation and multiple co-morbidities. The aim for an occupational therapist is to improve a person's confidence and ability to continue with occupations through the use of strategies, techniques and equipment. This may involve minimising risk through completing a home hazard assessment and adapting the home; helping a person accommodate their illness and/or conditions by learning or relearning skills and enabling a person to link in with family, friends and communities.

1. To work effectively with partners

During their work, F&RS services may come across vulnerable people at risk. Through agreed referral pathways, F&RS can signpost or refer on to occupational therapy. This may include people who are at risk of falls, people with dementia or people with mental health difficulties.

Working with occupational therapists provides an opportunity for the F&RS to ensure that Fire Risk is incorporated into occupational therapy assessments.

2. To address risk factors

Understanding the relationship between a person's **environment**, what that person does in the home (**occupations**) and how illness or disability impacts upon the **person** is key to assessing fire risk- the PEO model.⁶

Occupational therapists can provide training and advice to F&RS staff in a range of public health interventions, such as preventing falls through screening for home hazards and making minor adaptations. They can also advise on how to adapt approaches and communication when working with people who have a range of conditions that may impact on their ability to understand, process and action new information, for example people living with dementia or psychosis. Occupational therapists can actively work with vulnerable people to address high risk such as hoarding.

May's Story

May had a long history of mental health needs and lived with her son. The house was very cluttered. Access to the back door was blocked and routes obstructed, adding to the fire and trip risk. There were no smoke alarms.



Initially May and her son would not consent to being referred to the fire service. Both were experiencing high levels of anxiety. May was apprehensive about leaving the property and worried about her son. May's son was feeling overwhelmed by the levels of clutter and worried about his mother's health. The key to May and her son accepting help, was winning their trust.

To do this, taking time to build a rapport, the occupational therapist used her skills to assist May and her son to identify small achievable goals about going out together and leisure activities. This helped them to feel more positive. Together they identified small areas that they could tidy and take items to charity shops. These small steps helped May and her son to feel less anxious and finally agree to the fire service referral. The fire officer identified where the clutter presented the highest risk of fire. The occupational therapist again helped May and her son to break down the task of clearing these areas into small steps so that situation was less overwhelming.

Existing partnerships between occupational therapists and fire and rescue services

Greater Manchester Mental Health Foundation NHS Trust and Greater Manchester Fire and Rescue Service

A partnership has been established between Greater Manchester Mental Health Foundation NHS Trust and Greater Manchester Fire and Rescue Service (GMFRS) to reduce the risk of fire. This includes the implementation of a referral pathway that promotes joint working. The original aim was to reduce harm from fire and help GMFRS understand mental health better and signpost people appropriately. Further examination of fire statistics showed that people who are at increased risk of fire had multiple issues and it was determined that there was further potential to meet broader public health priorities.

Together the services have:

1. Established Safe and Well Checks including dementia, falls prevention, social isolation, home security, housing and warmth.
2. A referral system for occupational therapy assessment.
3. Established joint visits to include a 'Safe and Well' check.
4. Integrated evaluation of fire risk into the occupational therapy assessment.
5. Published Health and Social Care Fire Safety Guidance. (Available at: www.gmmh.nhs.uk/fire-safety-advice)
6. Offered role emerging placements for occupational therapy students since 2009.

Mental Health Services for Older People (MHSOP) Nottinghamshire Healthcare Foundation NHS Trust and Nottinghamshire Fire and Rescue Service

Nottinghamshire Fire and Rescue Service (NFRS) includes the Persons at Risk Team (PART) who specialise in working with the most vulnerable groups to prevent fires. Home Safety Check visits are being extended to offer public health interventions e.g. winter warmth, a multi-agency hoarding framework and a Handy Person Scheme.

A partnership has been established between NFRS and the occupational therapists of the MHSOP Directorate. This has included members of the PART team and occupational therapists shadowing each other and sharing expertise. Occupational therapists have advised on equipment provision and the use of a Person, Occupation and Environment approach for holistic assessment of needs and risk.

Together the services have:

1. Established joint working on complex cases.
2. Delivered on fire risk and public health campaigns.
3. Offered role emerging placements for occupational therapy students since 2013.
4. Provided a one year secondment for a Band 6 occupational therapist working with Nottinghamshire Fire and Rescue Service.



Christine Davidson
Occupational Therapist,
Dundee Health & Social Care Partnership

FACT
Over two thirds of fire-related deaths occurred in accidental dwelling fires and more than half of the victims were aged 65 years or older

Fire Statistics: Great Britain April 2013 to March 2014

View the film featuring occupational therapists in the Older People's Mental Health Service in Dundee working in partnership with Scottish Gas and the Scottish Fire and Rescue Service to keep people safe at home.

<https://youtu.be/0hx6StlBZAo>

Diverse placements for occupational therapy undergraduates within fire and rescue services

Scottish Fire and Rescue Service and NHS Tayside

A pilot was run to evaluate the potential benefit of joint partnership between allied health professionals (NHS) and Scottish Fire and Rescue Service working to deliver effective fire prevention services. In Scotland the numbers of fires are 40% higher than the rest of the UK due to high rates of deprivation. Cross-referring people and delivering risk assessments has been demonstrated to enhance the safety of high-risk individuals and deliver net savings for society.

Impact:

The pilot in Dundee was estimated to have prevented **4.4 fires**, with a saving of **£32,390 per fire averted**.

(The results are sensitive to the probability of a fire.)⁷



View this short film from NHS Education for Scotland Occupational Therapy Placements with the Scottish Fire and Rescue Service
www.nes.scot.nhs.uk/education-and-training/by-discipline/allied-health-professions/resources,-publications-and-useful-links/occupational-therapy-placements-with-the-scottish-fire-and-rescue-service

Betty's Story

Betty has Alzheimer's disease and lives alone in a bungalow. Her GP raised concerns regarding her ability to complete daily living



activities. Occupational therapy staff recognised Betty was placing herself at risk due to unsafe smoking practices, numerous burn marks had been noted upon clothing and soft furnishings. Nottingham FRS (NFRS) completed a Home Safety Check and recommended a heat sensor was fitted in the kitchen and two telecare linked smoke alarms in the hallway and lounge area. Alternative ash trays were provided and fire retardant throws were placed over the sofa. The occupational therapist prompted their use and reinforced the safer smoking strategies identified by fire service colleagues.

A Just Checking system was installed to enable the occupational therapist to understand Betty's patterns of activity. Whilst the data was being collected the NFRS attended a fire at Betty's home. Betty had attempted to prepare her own lunch after finding the café shut and had left the cooking unattended, only returning on the sound of the alarm. A joint visit was carried out by the occupational therapist and NFRS to work with Betty to identify ways to keep her safe whilst cooking. There was one further incident when N FRS attended Betty's home. However, after persevering with the intervention plan and working with Betty's family there have been no further reported incidents of fire.

Further resources and examples of partnership working between occupational therapy services and fire and rescue services can be found on www.rcotimprovinglives.com

Occupational Therapy

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Making the case for occupational therapy in three key pressure points in health and social care:

1. Keeping people out of hospital
2. Reducing pressure on primary care
3. Addressing over reliance on social care

This publication is endorsed by the
National Fire Chiefs Council



NFCC
National Fire
Chiefs Council

The Royal College of Occupational Therapists (RCOT) is the professional body for occupational therapists and represents over 31,000 occupational therapists, support workers and students from across the United Kingdom. Occupational therapy enables people of all ages to participate in daily life to improve health and wellbeing. The philosophy of occupational therapy is founded on the concept that occupation (participating in activities) is essential to human existence and good health and wellbeing.

Occupational therapists are regulated by the Health and Care Professions Council (HCPC), and work with people of all ages with a wide range of occupational problems resulting from physical, mental, social or developmental difficulties. Occupational therapists work in the NHS, Local Authority social care services, housing, schools, prisons, care homes, voluntary and independent sectors, and vocational and employment rehabilitation services.

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www.rcot.co.uk

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