

Dear Domiciliary Care Provider

Emollients, potential fire risks and person-centred risk assessments

What is the issue?

We know emollients are widely used and are important for the treatment of skin conditions such as eczema, psoriasis and bed sores - and we support their continued use.

However, scientific testing by Anglia Ruskin University has shown that fabric - such as clothing, towelling, bandages or bedding - contaminated with emollients containing paraffin, and also emollients which contain no paraffin, such as those made with natural oils, burn quicker and hotter than fabric which has not been contaminated. The tests showed the average time to ignition is approximately 6 seconds. Testing also demonstrated regular washing of fabrics does not totally remove the risk.

In December 2018, the Medicines and Healthcare products Regulatory Agency (MHRA) recommended labelling and product information for emollients should include a warning about the fire risk, so it's worth always checking labelling whenever you replenish products as information may have been updated.

Since 2010, there have been 56 confirmed fire fatalities in the UK where emollients are thought to have been involved in the rapid development of the fire. All the people who died were older, many had restricted mobility and a number had care plans in place. In 79% of these fatalities, smoking materials such as matches, lighters and cigarettes were found to be the ignition source of the fire.

What this means for you as a domiciliary care provider?

We recommend you keep your staff informed and regularly updated about the potential fire risks of emollients, especially when used by smokers, so they can monitor and review individual risk assessments effectively and report issues as appropriate.

Due to the potential fire risk outlined above we also advise you should, as part of the individual person-centred risk assessments you carry out, reduce or mitigate the risks of a fire arising and assess the risk of harm to that person if a fire occurred.

You can do this by:

Identifying and evaluating the hazard

- 1. Is the person wearing clothing or bandages which may be contaminated with emollient?
 - a. Do they smoke whilst wearing contaminated clothing?
 - b. Do they cook whilst wearing contaminated clothing?
 - c. Do they sit close to a fire or heat source whilst wearing contaminated clothing?
- 2. Could the person's bedding (including fire-retardant bedding) be contaminated with emollient?
 - a. Do they smoke in bed?
- 3. Could the person's soft furnishings (upholstered chairs, cushions, fire-retardant throws) be contaminated with emollient?
 - a. Do they smoke whilst sitting in the chair?
- 4. Would they be less able to react if they accidentally set themselves alight? Any risks identified and measures put in place must be recorded in the significant findings of the fire risk assessment and regularly reviewed in light of any decline in mobility, fine motor skills or cognitive ability.

Eliminating the hazard

Ensure the person is aware of the risk. People should be advised not to smoke, cook using a gas or electric hob, sit close to or go near to any heat source such as open, gas or electric fire or halogen heater, if there is any chance that their clothing, towelling, bedding or bandages are contaminated with emollients.

Reducing the hazard

Encourage the person to quit smoking by offering them information on smoking cessation services. Avoid dressing the person in their day or night clothes until any emollient which has been applied to their skin has completely dried in. Consider whether the person is able to smoke in a 'safer' way i.e. smoke outside whilst wearing an uncontaminated outer covering, only using a safety lighter or a supervised smoking arrangement. Ensure their furniture is placed at a safe distance from any fire or heat source. Consider recommending ready- cooked meals which can be microwaved. Isolating the hazard.

Isolating the hazard

In extreme circumstances where actions to eliminate or reduce the hazard will not be taken by the person, consider contacting your local fire and rescue service so that a home fire safety visit can be carried out and/or a relevant health professional for further guidance and advice.

Controlling the hazard

Continue to remind and prompt people about the fire safety issues and any unsafe behaviours they are displaying. Ask the person to share any information you have given them with their family members. It should be noted that regular washing of items such as clothing and towelling may reduce the risk but will not remove it completely.

Fire safety equipment

In addition to the above, you may wish to suggest that interventions, appropriate to the risk, are acquired from the person's personal budget. These may include linked additional smoke detection or telecare detection systems, fire retardant throws, bedding and smoking aprons, safety or deep ashtrays.

If you are unclear or have any queries please contact: safeandwell@dwfire.org.uk

