FIRE SAFETY TRAINING

Please read the following information sourced from
The Australasian Fire and Emergency Service Authorities Council booklet version 2, 2017.

Once you have read and learnt the information, go to the main portal of teams and complete the multiple-choice competency questions.

AQC suggests you take notes as you work through the training.

This learning resource provides information about:
Basic home fire safety and associated state/territory smoke alarm legislation for

Community services workers and Health workers who deliver services in the community setting.

INTRODUCTION

Knowledge about basic home fire safety and smoke alarms will give community services workers and health workers information that will help them to:

- Reduce the risk of fire when their workplace is a consumer's home
- Help consumers to understand and practise basic home fire safety
- Inform consumers about the risk of fire in their homes
- Help consumers to think about ways of safe escape and to use these ways if there is a fire in their home
- Help consumers to understand and to fully recognise the risk of fire in their homes
- Reduce the risk of fire injuries and/or fatalities in the home.

FIRE SPREAD AND SPEED

Fire spreads very quickly.
Fire services' research has confirmed it can take only a few minutes for a fire in the home to fully take over the room where it started. The bad effects of a fire in the home can be minimised by stopping the fire from spreading.

HEAT TRANSFER

Fire spreads through heat transfer. Heat is transferred by:

- radiation
- convection
- conduction.

CONVECTION

Convection is the transfer of heat through a liquid or gas due to the circulation of that liquid or gas.
The best example of heat being transferred by convection is water boiling in a pan.
Convection cannot happen in solid materials.

For example, heating the bottom of a container that has liquid or gas in it makes the hot liquid or gas rise, and the cooler liquid or gas fall to the bottom of the container.

This creates a circulation system where the heated parts of the liquid or gas continually rise and carry heat to all parts of the container.

Hot-water heaters have their heating element at the bottom of the tank, so convection circulates heat through the container.

An example of heat transfer in the home by convection is:

- hot smoke and air rising above a fire, for example up a chimney

CONDUCTION

Conduction is the transfer of heat through a solid material from an area of higher temperature to an area of lower temperature.

Different substances conduct heat at different rates.

For example, metals are better conductors of heat than wood.

An example of heat transfer by conduction in the home is:

• heat on one side of a steel door or roller shutter will be conducted to the other side of the steel door or roller shutter.

COMBUSTIBLE FUELS

Typical fire fuels include:

• common solid combustibles such as wood, leaves, grass, scrubland , rubber, paper and household contents such as furniture, curtains, bedding.

• flammable liquids such as diesel fuel, petrol, kerosene and alcohol — the flammable vapour given off by the liquid burns, although the liquid itself does not burn

• flammable gases such as liquefied petroleum gas (LPG), natural gas, acetylene and hydrogen.

Knowing about fire fuels will make it easier to recognise many fire hazards.

SOURCES OF HEAT

Fires are started and kept going by heat.

A key to fire prevention is to remove heat sources or to keep them away from combustible fuels.

OPEN FLAMES AND SPARKS

An open flame can ignite combustibles. Examples of open flames in the home are:

- stove-top gas jets
- candles
- kerosene lamps or heaters
- open fires in fireplaces or ‘campfires’ in the yard
- barbecues
- cutting torches
- welding equipment.

SOURCES OF HEAT

Smoking materials are a common cause of ignition and fire, especially when they are not put out properly. Examples of smoking materials as a source of heat in the home are:

- cigarettes
- cigars
- matches

ELECTRICAL EQUIPMENT - Electricity produces heat when it flows, for example, in electrical equipment used for heating.

- electrical equipment that over-heats because it is overloaded and/or is not maintained properly
- electric heaters placed too close to combustible materials
- overloaded power boards and double adaptors.

SOURCES OF HEAT

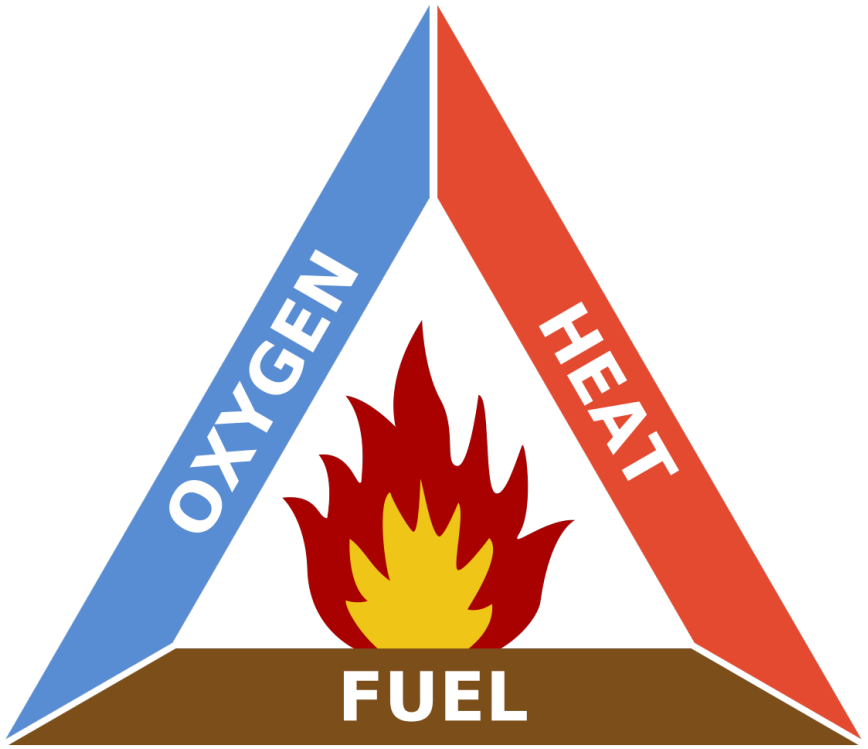
HOT SURFACES Many processes produce hot surfaces. A hot surface can set fire to solid combustibles that touch it. Examples of hot surfaces in the home as a source of heat include:

- appliances that may be constantly running, such as computers, televisions, BluRay/DVD/ CD players, VCR players
- electric blankets
- heaters including fixed electrical or gas heaters, heating vents, portable heaters
- hot water service
- oven.

OTHER HEAT SOURCES that may ignite a fire include:

- heating from friction in machinery
- static electricity sparks, which may be produced when some non-conducting surfaces are separated from each other
- heat from some chemicals reacting with each other
- external sources such as lightning.

Elements required for a fire



Extinction of a fire

To stop or slow a fire *one of the three elements* of the fire triangle must be removed.

- if a fire runs out of fuel, it will smoulder out
- If a fire can be cooled down it will lose heat and go out i.e. use of extinguishers
- if the oxygen is removed it will suffocate
- i.e. a fire blanket suppresses fire by removing oxygen
- fire extinguishers are developed to eliminate one of the three elements

HOME FIRE SAFETY: HIGH RISK GROUPS

People ‘at risk’ of being injured or dying in a fire in the home are, people who are unable to receive, understand or act on information before or during an emergency.

People in the following groups are considered more likely to be at risk in a fire:

- older people
- people who have cognitive deficits
- people who have a disability, intellectual or physical
- young children, particularly those under five years of age
- people who experience social and financial disadvantage

YOUR RESPONSIBILITY TO CONSUMERS AND SELF

Community services workers and health workers are crucial in reducing fire risk within a consumer's home and your own home.

You can identify areas of risk or hazard by being aware of all risk factors including an individual's cognitive, physical ability and by completing the fire safety training.

This can help minimise or prevent:

- a fire in their home
- reduce or limit the damage of a fire in their home
- reduce their risk of injury and/or death due to a fire in their home
- educate consumers to think about and recognise their risk
- increase the consumer's awareness of hazards.

While high risk groups are at risk in a fire, it is important to note that **anyone** can be at risk based on the type of emergency and the location.

However, for people who require support and assistance to live as independently as possible in the community, fire can be part of a more complex range of risks.

RESEARCH FINDINGS

While Australian fire services and international fire services conduct research into their own specific communities, in terms of fire fatalities and preventable residential fires there are some clear areas of risk found by this research:

- most fire fatalities and injuries occur at night between 8.00 pm and 8.00 am
- smoking materials are a leading cause of fire fatalities
- the kitchen and the bedroom are the most common rooms of origin of fire i.e. where the fire starts
- the majority of fire injuries are burns and/or smoke inhalation
- most fire fatality victims lived alone
- high-risk behaviour — SEE FOLLOWING slides

HIGH RISK BEHAVIOURS

high-risk behaviour such as

- not having a working smoke alarm
- Smoking
- Drinking too much alcohol
- Hoarding — increase a person's fire risk.
- low income households are most at risk from fire and are less likely than higher income households to have smoke alarms
- People who experience social and financial disadvantage are more likely to behave in ways that will increase their risk of death or injury in a fire due to not knowing about safety issues and/or not prioritising safety issues
- smoking is a leading cause of fire deaths in the home

AFAC research Accidental Fire Fatalities in Residential Structures: Who's at Risk? (October 2005)

OTHER RISK FACTORS

The following groups are most ‘at risk’ of being injured in a residential fire:

- children aged between 0 and 4 years
- adults aged 20–44 years
- low socio-economic status
- poor educational background
- older adults (65+ years)
- ethnic minorities
- individuals who smoke individuals who drink excessively.

These risk factors alone are not necessarily responsible for residential fire injuries or deaths, but they contribute to a person’s risk status.

People with a combination of these risk factors are at an even greater risk. Being aware of these risk factors means community services workers and health workers can refer issues on to the most appropriate person.

OLDER PEOPLE

Older people are the highest fire fatality and injury risk group in the community.

People aged 65 years and over represent nearly a quarter of all preventable fire fatalities in the home.

As well, the fire risk of this group increases as people age, reaching a peak at 80 years of age and over.

Given their high fire risk and the growing provision of community-based care options, it is vital that older people and those who deliver informal or formal care and support to them in their homes are aware of basic home fire safety

OLDER PEOPLE - RISK FACTORS

Older people may:

- Have difficulty installing and maintaining a working smoke alarm
- Experience loss of hearing, loss of vision and a poorer sense of smell, which may affect how quickly they are alerted to a fire
- Be affected by memory loss or poor cognition
- Be affected by mobility issues, reducing their ability to escape safely and quickly if a fire occurs in their home
- More likely to economise and use older appliances, such as portable heaters and electric blankets
- Be more likely to live in older homes, which may not include features such as an electrical safety switch, or they may be unable to undertake home maintenance/unwilling for home maintenance to occur/unaware of the need for home maintenance
- Ignore their own personal risk factor and fire safety information targeted at them
- experience difficulties with reading or writing English and therefore be unable to access fire safety information
- Not like to ask for assistance — even though the need for assistance will increase with age as the likelihood of living alone increases.

PEOPLE WHO HAVE A DISABILITY

People who have a disability, whether permanent or temporary, can be at risk in a fire in the home because their disability may affect:

- Their ability to install and maintain a working smoke alarm
- How quickly they identify a fire in their home
- How quickly they can evacuate their home
- Their ability to evacuate their home without assistance •
- Their income and consequently their financial ability to replace old appliances
- Their ability to read/write English, which can impact their ability to access fire safety information.

CHILDREN

All children are at risk if they are involved in a fire.

Statistics show that children under 5 years of age are a particularly high fire risk because they have a limited understanding of the danger of fire and they need an adult to help them to access safety if a fire occurs in their home.

When teaching children about fire safety, care needs to be taken about how much information to give children at particular ages because specialist advice shows information may result in an increased interest in ‘fire play’ by some children.

CHILDREN

Children under 5 years of age may:

Children under 5 years of age may:

- live with parents/carers who are unable to afford, install or maintain a working smoke alarm
- be at higher risk in their home environment, which is determined by their parents'/carers' social and financial background
- be more likely to be involved in 'fire play' due to natural curiosity
- have a developmental disadvantage as they may not be able to react appropriately and escape a fire in a home because they need help from an older person
- be at higher risk if left unsupervised near cooking and heating sources
- be at higher risk if they can access sources of ignition (cigarette lighters, matches, candles)
- have parents/carers who are unable to access mainstream fire safety information due to their culture and/or linguistic background.

SOCIAL AND FINANCIAL DISADVANTAGE

Social and financial disadvantage can significantly increase a person's fire risk.

People with limited social or financial resources may not be able to access information or establish basic home fire safety.

They may:-

- be unable to afford, install or maintain a working smoke alarm
- think fire safety is not as important as other needs
- be unable to access basic home fire safety information
- use old appliances that are unsafe
- be unable to afford repairs and maintenance
- use different methods of heating, cooking and lighting — in the hope of saving costs
- participate in activities that increase their fire risk
- have poor or no social networks/supports/contacts
- have limited access to resources to ensure their safety, such as secure housing
- be unable to access mainstream fire safety information due to their culture, linguistic background or inability to read/write English

be unable to maintain the vegetation around their home.

ALCOHOL, SMOKING AND OTHER DRUGS (INCLUDING MEDICATION)

The use of alcohol and other drugs may increase the possibility of a fire starting through a lack of care and an increase in risk-taking behaviour. Recreational drugs and medication can affect a person's senses and abilities.

As well, people affected by alcohol and other drugs may not have the awareness to identify if a fire has started and what to do in a fire. Smokers need to take extra care, particularly when they are older.

When smoking is combined with alcohol and other drugs (including medication) this risk is further increased

People who smoke or are affected by Drugs, Alcohol (including medications)

May:-

- be unable to install or maintain a working smoke alarm
- not be able to afford a working smoke alarm
- not understand the consequences of their behaviour and actions
- fail to properly extinguish butts
- not be able to identify if a fire has started or if a smoke alarm has activated
- not be able to respond quickly in a fire
- not be able to escape safely in a fire
- have difficulty reading and/or writing English, which can impact on their ability to access home fire safety information

ROLE OF COMMUNITY SERVICES WORKERS AND HEALTH WORKERS

Understanding the principles of basic home fire safety and why specific groups are at risk will allow community services workers and health workers who deliver services and support to people in their homes to make a positive contribution to the home fire safety of their consumers.

Helping consumers to understand basic home fire safety will be guided by agency policies and procedures about reporting and referral.

Australian fire services recommend:

In the first instance, that workers make sure of their own safety and the safety of consumers.

Thinking carefully about promoting the use of fire blankets and fire extinguishers to older people or people who have a disability due to their varied levels of capacity AS - using this equipment could *delay* their safe escape from their home in a fire and therefore delay them calling for assistance, which could place them at higher risk of injury.

ROLE OF COMMUNITY SERVICES WORKERS AND HEALTH WORKERS

APPLIANCES AND EQUIPMENT

Electrical appliances and household equipment are part of daily life.

To be safe they need to be in good working order and only used according to the manufacturer's instructions.

It is essential that community services workers and health workers whose role requires them to use appliances in a consumer's home follow their Employer's guidelines about the use of equipment and reporting faulty appliances

ROLE OF COMMUNITY SERVICES WORKERS AND HEALTH WORKERS

APPLIANCES AND EQUIPMENT

ENCOURAGE CONSUMERS TO -

- purchase electrical appliances that have an automatic shut off — especially when replacing appliances
- turn off electrical appliances at the power point
- make sure electrical appliances are never used near water
- regularly inspect electric blankets for damage or excess wear and damage, and to replace them if necessary
- use electric blankets correctly — turn on 30 minutes before getting into bed and turn off when getting into bed
- only use certified electrical trades people to repair faulty/damaged electrical appliances and equipment
- clean the lint filter in the clothes dryer every time the dryer is used
- keep the hot water service temperature on low
- use low wattage light globes in lamps

ROLE OF COMMUNITY SERVICES WORKERS AND HEALTH WORKERS

APPLIANCES AND EQUIPMENT (cont)

ENCOURAGE CONSUMERS TO -

- correctly use microwaveable personal warmers (wheat/heat bags or wheat/heat packs) by following the instructions and to only purchase these products when instructions are provided
- place extension cords against the wall (not under rugs)
- use one plug for each appliance and to not use double adapters — never overload power boards
- be aware that electrical extension cords and power boards are only recommended for temporary use
- only purchase and use products that have the Australian Standard Certified Product Standards MarkTM
- only purchase and use electrical appliances, extension leads and power boards that have been approved for use and have the Regulatory Compliance Mark (RCM),

A small triangle with a tick inside the triangle or the Australian Product Standards certified Mark

ROLE OF COMMUNITY SERVICES WORKERS AND HEALTH WORKERS

CANDLES, OIL BURNERS AND INCENSE

People might use candles, oil burners and incense as:-

- a personal choice
- they like the look or the smell
- as part of cultural, Indigenous or religious practices or rituals
- when faced with social and financial disadvantage, for example when their electricity is not connected.
- Information, encouragement and advice about how to use candles, oil burners and incense safely is important.

ENCOURAGE CONSUMERS TO -

- Always supervise burning candles, oil burners or incense
- Use candles, oil burners and incense on a stable non-combustible surface (such as a plate or special holder) and only use non-combustible holders
- Keep candles, oil burners and incense away from curtains and windows
- Use candles, oil burners or incense away from children and pets

ROLE OF COMMUNITY SERVICES WORKERS AND HEALTH WORKERS

COOKING

Unattended cooking is a common cause of fire in a home. Cooking can involve indoor appliances such as stove/cook tops, ovens and microwaves as well as outdoor appliances such as barbecues.

ENCOURAGE CONSUMERS TO:-

- properly supervise cooking
- keep cooking areas free from grease, oil, dust and dirt
- make sure matches are out of the reach of children
- keep saucepan/frypan handles turned inward
- keep curtains, blinds, tea towels and paper towels away from stove/cook tops and appliances such as toasters
- use proper protection such as oven mitts or gloves
- when cooking, wear clothes with tight-fitting sleeves rather than loose-fitting sleeves

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OUTDOOR COOKING - FOLLOW BBQ SAFETY TIPS

ENCOURAGE CONSUMERS TO:-

- Be aware of, and comply with, any fire restrictions that may be in place such as total fire bans before using a gas barbecue, make sure the service date of the gas cylinder has not expired check the gas fittings are not perished or damaged and that the gas connections are secure set up the barbecue on a firm level base in a well-ventilated area away from flammable objects —
- DO NOT use a gas barbecue inside a garage or other enclosed area due to the potential build-up of harmful smoke and fumes
- Never leave the barbecue unattended when cooking and make sure children and pets are at least two metres away from the barbecue at all times make sure you turn off the gas cylinder when you have finished cooking so residual gas from the line is used up, then turn off the barbecue.
- LPG is flammable, heavier than air and may remain in low-lying areas for some time when using a wood-fired barbecue never add fuel of any type to start or increase a cooking fire

ROLE OF COMMUNITY SERVICES WORKERS AND HEALTH WORKERS

ELECTRICAL REPAIRS

Repairing electrical appliances is a specialist task, requiring training and certification. People who try to repair electrical appliances without the correct certification are placing themselves and other people at risk of injury or death. Most electrical accidents happen indoors.

ENCOURAGE CONSUMERS TO :-

- never overload circuits, that is,
- never put double adaptors on a power board —
- use another power board or get an electrician to install more power points if more power points are needed
- use certified repairers to check and repair damaged or faulty electrical equipment
- identify and remove electrical appliances that need repairing
- arrange for regular safety checks, especially if old wiring has deteriorated and become unsafe

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HEATING

Heating can include fixed electrical and gas-powered appliances, an open fireplace or portable heaters including electrical, gas and kerosene heaters. During the change of seasons and winter, when the use of heating increases, fire incidents are more frequent — often due to people not using heating safely.

ENCOURAGE CONSUMERS TO

- Turn off heaters when leaving the house or going to bed
- Use portable heaters that **have an automatic cut-out,** thermostat control and anti-roll features monitor/supervise children near all types of heating
- Regularly maintain chimneys, flues, fireplaces and heating appliances as recommended by the manufacturer
- Always use a fire screen in front of an open fireplace
- Safely store heating fuel, such as wood, away from heat sources — keep wood and other combustibles at least one metre from an open fireplace
- Extinguish fires in an open fireplace completely before going out or going to bed
- Dry clothes a safe distance away from heaters so that if the clothes rack is knocked over, it cannot come into contact with the heater
- Keep portable electric heaters away from wet areas to avoid the possibility of electric shock
- Make sure combustibles are kept away from all heat sources in the home such as hot water services, and fixed and portable heating appliances

ROLE OF COMMUNITY SERVICES WORKERS AND HEALTH WORKERS

OPEN FIRES IN THE YARD

People may have an open fire in the yard — such as a campfire, bonfire or barbecue — for cooking, heating or lighting. These fires need to be monitored at all times - to prevent them from becoming a fire risk. Always check the Fire ban restrictions for your suburb or regional area.

ENCOURAGE CONSUMERS TO:-

- Make sure the fire is in a clear area
- Keep an open fire just big enough for their needs
- Always supervise their open fire and not leave children by themselves near fires, not even for a minute
- Put out an open fire properly with water, not dirt, even if leaving the fire for a short time
- Put out the open fire at night to avoid people, particularly children, being burnt the morning after by hot ashes and embers left over from an open fire

ROLE OF COMMUNITY SERVICES WORKERS AND HEALTH WORKERS

SMOKING

Preventable fires in the home, fire fatalities and injuries are often a result of smoking. These fires can be due to lack of care/concentration when smoking and extinguishing cigarette butts.

Cigarette lighters and matches left in reach of children can also give them an opportunity to engage in ‘fire play’.

Consumers who smoke and who also have other issues — such as difficulty walking, being affected by medication, or long-term mental health issues — increase their risk of being unable to respond in a fire.

In this situation, workers will need to think about a range of protective measures that will produce a safe outcome for individual consumers. In some community services agencies or health agencies it may be policy for workers to make a record of a client who is a smoker.

ROLE OF COMMUNITY SERVICES WORKERS AND HEALTH WORKERS

SMOKING

ENCOURAGE CONSUMERS TO:-

- Use heavy, high-sided ashtrays on a stable surface
- Put out butts completely
- Put butts in water before putting them in the rubbish bin
- Establish a safe smoking area — this may be outside under cover, or involve a range of protective measures such as placing an industrial rubber welding mat in the area where the person usually smokes or using a ‘smoking apron’, which is something that is used in residential care (made from similar material to a fire blanket)
- NEVER smoke in a home where oxygen therapy is used, as this is extremely dangerous

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HOARDING & SQUALOR

Hoarding is a behaviour resulting from a mental health condition. Squalor describes an environment.

People can live with hoarding and squalor, or just hoarding, or just squalor.

Hoarding and squalor are not the same, but they are linked. Prolonged hoarding may result in squalor but not all hoarding is squalor. Hoarding behaviour and squalid living environments can affect many aspects of a person's life:

- Personal safety
- fire risk
- mental health
- child protection
- animal protection
- building safety
- disability
- sanitation
- physical health
- housing

These issues, in turn, may require responses that are covered by a diverse range of laws, policies and living requirements.

ROLE OF COMMUNITY SERVICES WORKERS AND HEALTH WORKERS

HOARDING

What people hoard and their reasons for hoarding are diverse.

Hoarding is a chronic progressive condition. The internationally recognised Diagnostic and Statistical Manual of Mental Disorders (DSM-5) identifies hoarding as: Persistent difficulty discarding or parting with possessions, regardless of their actual value.

This difficulty is due to a perceived need to save the items and distress associated with discarding them. The hoarding causes clinically significant distress or impairment in social, occupational, or other important areas of functioning (including maintaining a safe environment for self and others).

Possessions congest active living areas and substantially compromise their intended use. Hoarding can be confined to inside a residence or outside a residence, or both. Hoarding outside a residence that includes the inability to adequately maintain vegetation and the stockpile of things in the yard further increases the risk for occupants and emergency responders.

ROLE OF COMMUNITY SERVICES WORKERS AND HEALTH WORKERS

SQUALOR

Some people might neglect (or seem not to care about) their own cleanliness, or the cleanliness of their dependents or home, and might not dispose of rubbish.

This may be due to a broad range of health conditions, including some types of disability, dementia, schizophrenia, drug addiction or alcoholism.

Also, some people may not have developed or learned living skills adequate to support themselves on a daily basis.

Recent research by Caulfield Hospital (Alfred Health) and Monash University in Melbourne has identified that older people affected by squalor may have impaired function of the frontal lobe. The frontal lobe is the area of the brain that controls executive functions such as risk assessment and planning. This research indicates that:

- there are two paths to squalor — hoarding or a passive decline, where people do not actively collect ‘stuff’ (they’re not hoarders, they just don’t maintain their environment in a reasonable state)
- people who passively decline into squalor may be particularly at risk due to their lack of insight into risk
- cognitive assessments must include tests of executive function when assessing people who live in squalor, with or without hoarding.

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FIRE RISKS WITH HOARDING & SQUALOR

Fires in hoarding homes increase the risk to the occupant, their neighbours and firefighters. Hoarding increases the risk of fire because:

- Large accumulation of possessions results in an abnormally high fuel load and greater opportunity for ignition
- Blocked exits and narrow internal pathways slow down or prevent escape for the occupant and access for firefighters
- Non-functional gas or electricity connections may result in unsafe practices for cooking, heating and lighting.

ENCOURAGE AND/OR WORK WITH CONSUMERS TO:-

- Install additional smoke alarms in the home above the minimum required by law
- Regularly test smoke alarms
- Unblock exits to the home
- Widen internal pathways in the home
- Make sure utilities such as gas and electricity are connected and are in safe working order
- Remove combustibles from heat and ignition sources
- Prioritise establishing a one-metre clearance around the cooking areas and heating sources

ROLE OF COMMUNITY SERVICES WORKERS AND HEALTH WORKERS

BURNS AND SCALDS SAFETY

Burn and scald injuries are preventable. The pain, blistering, itching, skin grafts and scarring due to burns are all preventable. Health and community care workers can educate community members on burn and scald hazards, and other risk factors within the home and community, through:

- identifying burn and scald risk factors
- providing prevention information and education
- valuating burn and scald prevention strategies.

Burns can be caused by:

scalding from hot liquids such as tea, coffee, cooking liquids and oils baths, hot water taps filling hot water bottles

flame burns from naked flames such as matches, gas stove/oven jets, open fires, campfires, cigarettes, lighters

contact burns from touching hot objects such as irons, kettles, heaters, stoves, ovens, microwaveable personal warmers (wheat/heat bags or wheat/heat packs), barbecues

ROLE OF COMMUNITY SERVICES WORKERS AND HEALTH WORKERS

BURNS AND SCALDS SAFETY

Burns and scalds risk factors include:

In the home — chemicals, electrical outlets, heaters, hot drinks, hot tap water, irons, kettles, lighters, matches, open fires, ovens, stoves

Smoking cigarettes, consuming alcohol and using drugs

Open fires — campfires, bonfires and barbecues for cooking, heating and lighting.

ENCOURAGE CONSUMERS TO:-

- Think about how their behaviour increases their burns and scalds risk and what they can do to prevent burns and scalds
- Apply first aid for burns and scalds as soon as possible: stop the burning process — unless clothing is stuck to the skin, remove it as quickly as possible cool the burn surface — as soon as possible after the incident, run cold water over the surface of the burn for 20 minutes cover the burn with clean cloth seek medical attention if the burn is on the face, hands, feet, genitals, or is blistered or larger than a 20 cent coin
- Turn the temperature of their hot water down

ROLE OF COMMUNITY SERVICES WORKERS AND HEALTH WORKERS

STORAGE OF CHEMICALS

Every home will have a range of chemicals used for cleaning and other purposes. It is essential that these be stored safely according to the instructions on the labels

ENCOURAGE CONSUMERS TO:-

- safely store chemicals, cleaning products and fuels: out of reach of children and pets in approved containers away from heat sources
- correctly dispose of used/old chemicals, cleaning products and fuels (contact local council waste services for disposal facilities)

ROLE OF COMMUNITY SERVICES WORKERS AND HEALTH WORKERS

SMOKE ALARMS

Working smoke alarms save lives.

A working smoke alarm significantly increases a person's chance of escaping if a fire occurs in the home because it provides early warning of fire.

The speed of fire means that smoke alarms are a vital part of fire safety in every home for everyone.

Early warning about a fire is critical, particularly for the risk groups we have discussed and the people who care for them.

ROLE OF COMMUNITY SERVICES WORKERS AND HEALTH WORKERS

SMOKE ALARMS

To meet the regulatory requirements, smoke alarms installed in homes must comply with Australian Standard AS 3786:2014 Smoke alarms using scattered light, transmitted light or ionisation.
There are two types of smoke alarms:

- ionisation — smoke alarms are considered to be better at detecting *flaming fires*; an ionisation smoke alarm can be identified by the radioactive warning symbol on the smoke alarm

- photoelectric — smoke alarms are considered to be better at detecting *smouldering fires* and fires that start away from the smoke alarm.

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SMOKE ALARMS LEGISLATION IN SA

SOUTH AUSTRALIA Legislation requires:

• since 1995, all new homes to have a 240-volt, hard-wired, mains-powered smoke alarm - unless the home is not connected to mains power — plus a battery back-up in the case of power failure

• from February 1998, when a house with replaceable battery-powered smoke alarms is sold, the new owner must, within 6 months of the title transfer, install smoke alarms either hard-wired to the 240-volt household power supply (unless the dwelling is not connected to such a supply) or powered by ten-year life, non-replaceable, non-removable, permanently connected batteries

• all existing buildings to which the legislation applies, unless subject to other requirements, must be fitted with smoke alarms by January 2000; these alarms may, as a minimum, be powered by a 9-volt battery. Reference: Development Act 1993

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SMOKE ALARMS LEGISLATION IN SA

WHAT IS A WORKING SMOKE ALARM?

Only working smoke alarms reduce the risk of injuries or deaths in a fire in the home.

A ‘working’ smoke alarm:

- beeps when tested or activated
- is tested regularly
- unit is replaced every ten years because this is as long as the smoke alarm unit lasts
- is cleaned regularly, preferably with a vacuum
- has a functioning battery
- complies with the relevant Australian Standards.

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SMOKE ALARMS

WHY ARE SMOKE ALARMS NECESSARY?

A working smoke alarm:

- acts as an ‘electronic nose’
- alerts people to smoke from a fire
- gives people more time to escape to safety – it can take only minutes for a small fire to grow to the size of the entire room.

Fire risk in the home is greatest at night when we are asleep.

- When we sleep, we lose our sense of smell.

Increasingly, insurance policies are insisting on smoke alarms being install

ROLE OF COMMUNITY SERVICES WORKERS AND HEALTH WORKERS

SMOKE ALARMS

ENCOURAGE CONSUMERS AND THEIR FAMILY AND FRIENDS TO:-

- install a smoke alarm in the correct location
- regularly test that the smoke alarm is working
- know the smoke alarm warning sound (‘beep beep beep’)
- know what to do when the smoke alarm sounds
- recognise the chirping sound that lets you know the battery is going flat and needs to be replaced or that the entire unit may need to be replaced

ROLE OF COMMUNITY SERVICES WORKERS AND HEALTH WORKERS

SMOKE ALARMS

YOUR ROLE

Community services workers and health workers who identify any of the following issues related to smoke alarms in a client's home should inform their supervisor, according to their agency's policies and procedures:

- there is no working smoke alarm
- the smoke alarm coverage is inadequate for the client's needs
- the smoke alarm has been removed or tampered with
- the client advises the smoke alarm is false alarming for no obvious reason
- the smoke alarm failed to activate during a small fire incident
- the client reports not hearing the smoke alarm during testing

ROLE OF COMMUNITY SERVICES WORKERS AND HEALTH WORKERS

SMOKE ALARMS

PLACEMENT OF SMOKE ALARMS

Fire services recommend that a smoke alarm should be installed in homes, apartments and caravans on the ceiling away from a wall:

- outside bedroom/s or sleeping area/s
- outside the room where the primary carer sleeps when the primary carer sleeps in a separate room
- between kitchen/living areas and bedroom/s
- in a common hallway that connects bedrooms
- at separate ends of the home if sleeping areas are in both areas
- in all paths of travel between sleeping areas and exits to common corridors
- in all paths of travel between sleeping areas and exits to open air. Smoke alarms should also be located away from air conditioners, heaters, fans and other temperature control devices that may affect the smoke alarm. Two-storey homes need extra protection and should have smoke alarms installed as listed above as well as additional smoke alarms installed:
- on every level
- at the top of the stairwell
- at the bottom of the stairwell
- downstairs on the ceiling of the path used to exit the home.

ROLE OF COMMUNITY SERVICES WORKERS AND HEALTH WORKERS

SMOKE ALARMS

PLACEMENT OF SMOKE ALARMS

Smoke alarms should NOT be installed in a bathroom or near cooking areas because steam and cooking smoke can cause the alarm to go off unnecessarily. Fire services recommend at least one smoke alarm be installed on every level of every home.

As a community services worker or health worker, if you know the minimum placement of smoke alarms in a home, then you will be able to identify clients who:

- do not have enough protection
- have smoke alarms installed in the wrong place.

ROLE OF COMMUNITY SERVICES WORKERS AND HEALTH WORKERS

SMOKE ALARMS

FOR DEAF OR HARD OF HEARING CONSUMERS:

Smoke alarms with sensory stimulation devices other than standard audible devices should be installed in accommodation occupied by people who are deaf or hard of hearing. Smoke alarms for people who are deaf or hard of hearing should employ at least two alternative alarm methods. Note: Alternative alarm methods may include alarm tones of varying frequency, vibrating pads and strobe lights.

For information about the states/territories that provide subsidies, go to the national relay service link at relayservice.gov.au/making-a-call/emergency-calls/smoke-alarms-for-peoplewho-are-deaf-or-have-a-hearing-impairment/

People who are Deaf or hard of hearing should use smoke alarms that have been designed specifically to suit their needs, such as a smoke alarm with:

- a sender unit
- strobe light with receiver and a 240-volt power pack
- vibrating bed pads.

ROLE OF COMMUNITY SERVICES WORKERS AND HEALTH WORKERS

This section looks at how community services workers and health workers can transfer their basic home fire safety knowledge to ‘all hazards’ and assist in planning and being prepared for:

- bushfires
- cyclones
- floods
- heatwaves

storms.

Identifying hazards and simple practical ways to decrease them can make a great difference to consumer safety.

ROLE OF COMMUNITY SERVICES WORKERS AND HEALTH WORKERS

KNOW THE AREA YOU TRAVEL IN AND UNDERSTAND THE RISK

Planning, being prepared and knowing what to do is crucial so that workers and consumers know what they are going to do if they are in a hazardous situation.

Before you travel to work at a consumer's home:

• find out about the types of risks that exist where you will be working or travelling to, and the conditions in which you will need to travel through

• find out about the predicted weather conditions such as bushfire danger ratings, flood warnings or storm alerts and know what the different levels of warning mean, such as advice — monitor conditions and review your plan watch and act — conditions are changing, start taking actions to follow your plan emergency warning — you are in imminent danger, take action immediately

• remember that weather conditions can change quickly and without warning

• be clear about how you will keep updated about the weather conditions while you are travelling

• identify alternative routes and think about where last-resort options are located, such as a Neighbourhood Safer Places or community refuge centres or areas.

ROLE OF COMMUNITY SERVICES WORKERS AND HEALTH WORKERS

Communication via the Internet is not always available

National Broadband Network (NBN) :
Community services workers, health workers and their consumers also need to be aware that homes connected to the NBN, may not be able to use their existing phones during a power outage.

When the NBN is installed, the existing copper wire back-up system is disconnected and the NBN system does not have a battery back-up for phone operation as part of the standard installation unless it is specifically requested.

It is important to note that if an NBN battery back-up is installed, it is limited in its capacity to maintain power to a phone for an extended period.

ROLE OF COMMUNITY SERVICES WORKERS AND HEALTH WORKERS

Community services workers and health workers who visit/work in a consumer's home have a responsibility to:

- themselves in terms of work health and safety
- their consumer in terms of their duty of care.

So it is important that workers:

- understand the likelihood of a bushfire/cyclone/flood/heatwave/storm occurring in their geographical location
- are aware of changes to a consumer's situation so that they can tell the right person about these changed circumstances such as - has a temporary injury or reduced mobility, which could impact on the consumer's understanding and/or ability to cope in a hazardous situation.

For example if a consumer lives in a bushfire/cyclone/flood/heatwave/storm prone area and family/friends/ neighbours who the consumer usually relies will be away at a critical time. Alternative contacts and plans may need to put into place.

ROLE OF COMMUNITY SERVICES WORKERS AND HEALTH WORKERS

When working in and travelling through bushfire/cyclone/flood/heatwave/storm prone areas, it is essential to your safety by:

- maintaining organisational contact — making sure you have a car phone charger and keeping your phone charged; telling your supervisor/organisation when you are leaving and when you expect to return
- programming office phone numbers into mobile phones
- not driving through or past fires or swollen creeks, or in heavy rain, when travelling to or from a consumer's home
- Plan what to do if while in a consumer's home and there is a sudden forecast of a bushfire, cyclone or storm
- keeping a working torch in the car
- not relying on a single source of information and monitoring multiple sources of information including radio, television, websites, smart phone apps, social media
- keeping tuned in to local radio alerts and local council/shire/community advice
- being familiar with local conditions such as flood-risk roads and bridges
- heat stress symptoms
- first aid
- sheltering in place if unsafe to travel, and contacting the office before you leave the area
- maintaining a heightened sense that in a hazard, regular conditions can and do change quickly, often with little warning.

SUMMARY

- Fire spreads very quickly.
- The impact of a fire can be minimised by preventing the spread of the fire.
- To prevent fires, eliminate heat sources or keep them away from combustible fuels.
- Sources of heat include open flames and sparks, smoking materials, electrical equipment, hot surfaces and other heat sources.
- The investigation of fires by fire services provides valuable information.
- The role of fire services is to prevent and reduce injury, and the loss of life and property due to fires and other incidents.
- Knowledge about basic home fire safety and about what to do if there is a fire in the home will reduce the possibility of fire occurring.
- Removing oxygen, fuel or heat will stop a fire

SUMMARY (cont 1)

People who are unable to receive, understand or act on information before or during an emergency are more at risk when there is a fire or other hazards in the home.

- Consumers can benefit from preventative information given to them by community services workers and health workers.
- Research indicates that fatal fires are more likely to occur at night when people are asleep, with the kitchen and bedroom being the most common rooms of origin of fire.
- Research indicates that high-risk behaviour increases a person's fire risk.
- AFAC research indicates that certain groups of people are more at risk of being involved in preventable residential fire fatalities than other groups of people.

SUMMARY (cont 2)

In addition to a home where a smoke alarm is not installed, or a home where a smoke alarm is installed but is either not working or incorrectly placed, community services workers and health workers who observe the following should report the issue to their supervisor:

- episodes of cognition and memory loss, which may mean there is no awareness of fire risk
- faulty appliances such as an oven
- clutter, hoarding and/or squalor
- burnt or damaged electrical power points
- faulty heating sources
- evidence of previous fire incidents such as burnt cookware or range hood

SUMMARY (cont 3)

- a lack of supervision or care of children that gives them easy access to cigarette lighters, matches and other ignition sources.
- evidence that children are involved in ‘fire play’.
- failure of consumer or others to properly extinguish cigarette butts resulting in small fire incidents such as burnt clothing, bedding or furniture.
- inappropriate use of medication, which may reduce fire safety awareness.
- evidence of fire risk behaviour due to a fascination with fire.
- not understanding the consequences of fire risk behaviour.

SUMMARY (cont 4)

Only working smoke alarms save lives.

- Home - owners and landlords have a legal responsibility to comply with their state/ territory smoke alarm legislation.
- Fire risk in homes is greatest at night when people are asleep; correct placement of smoke alarms in homes will decrease this risk.
- Every home should have at least one smoke alarm on every level.
- Smoke alarms must: comply with the relevant Australian Standard be tested regularly be dusted or vacuumed (around the smoke alarm vents) according to the manufacturer's instructions have a non-long-life battery changed once a year be replaced after ten years.
- Community services workers and health workers should refer clients at risk of a fire in their home where smoke alarms are inadequately installed or faulty, to their supervisor.
- People who are Deaf or hard of hearing should use smoke alarms designed to suit their needs.
- Assistive technology supports basic home fire safety for those with high care needs

SUMMARY (cont 5)

Community services workers and health workers can transfer their basic home fire safety knowledge to help clients plan and prepare for ‘all hazards’ (bushfires, cyclones, floods, heatwaves and/or storms), according to the risks in the area in which they work.

- Community services workers and health workers who know the area in which they work and understand the risk of the possible hazards will be better able to assist consumers in planning and preparing for these hazards.
- Fire services and emergency services are a good place to start when looking for information about minimising risk before, during and after a hazard or emergency

SUMMARY (cont 6)

RESIDENTIAL TENANCY AGREEMENTS (for consumers who rent)

In terms of smoke alarms, residential tenancy agreements should cover who is responsible for:

- installing smoke alarms
- changing a smoke alarm battery when required
- replacing smoke alarms
- testing and inspecting smoke alarms are working
- maintaining smoke alarms. This responsibility can be different for public tenants and private tenants — this information is available from each state/territory housing authority

SOUTH AUSTRALIA legislation:

- It is the landlord's responsibility to ensure smoke alarms are installed and operational, which includes regular cleaning, testing and battery replacement.

SUMMARY (cont 7)

Community services workers and health workers can transfer their basic home fire safety knowledge to help clients plan and prepare for ‘all hazards’ (bushfires, cyclones, floods, heatwaves and/or storms), according to the risks in the area in which they work.

- Community services workers and health workers who know the area in which they work and understand the risk of the possible hazards will be better able to assist consumers in planning and preparing for these hazards.
- Fire services and emergency services are a good place to start when looking for information about minimising risk before, during and after a hazard or emergency – website addresses on next slide.

ACTIVITY

Find the Barbecue Dangers. The picture shows many potential fire hazards.

Find the items/areas that could be unsafe. The weather forecast is Hot Dry & Windy !

Write at least 5 risks you find in the questions sections.

ROLE OF FIRE SERVICES

Australian fire services provide a government-funded service to enhance community safety; fire services also provide a fee-for-service to businesses.

The role of fire services is to prevent and reduce injury, the loss of life and property, and damage to property and the environment due to fires and other incidents.

This is underpinned by four key principles:

- prevention
- preparation
- response
- recovery

IN THE EVENT OF A FIRE

Remove yourself and the consumer to a safe area

Do not attempt to extinguish the fire

CALL

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FOR MORE INFORMATION VISIT

SOUTH AUSTRALIAN METROPOLITAN FIRE SERVICE
www.mfs.sa.gov.au

SOUTH AUSTRALIAN COUNTRY FIRE SERVICE
www.cfs.sa.gov.au

SOUTH AUSTRALIAN STATE EMERGENCY SERVICE
www.ses.sa.gov.au

Thank you for your participation
in AQC's Mandatory
Fire Safety for Community workers training

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BBQ Picture
www.afac.com.au Accidents Happen – Upper Primary