



Strategic Intention COVID-19 – Prevention

13th July 2020 – Issue 3

Introduction

This guidance is intended to support and safely apply the intentions set out in the [Government 3 step recovery strategy](#).

The strategy sets out three clear phases to recovery:

- Phase 1 – Lockdown
- Phase 2 – Smarter Controls
- Phase 3 – Reliable Treatment

This guidance is intended to directly support Phase 2 – Smarter Controls which includes measures to reduce the restrictions but with strict conditions on their implementation. As the Government amends this guidance, these strategic intentions and supporting documentation will also be revised.

Getting back to work

This document provides a strategic framework setting out considerations for fire and rescue services (FRS) to safely resume Prevention and Protection activities which may have been temporarily disrupted due to COVID-19¹. Its purpose is to ensure that the resumption of activities protects the safety of both staff and the public and does so in accordance with current government guidance and by way of common sector specific risk assessment.

The government has updated its guidance for people who are shielding taking into account that coronavirus COVID-19 infection rates have decreased significantly over the last few weeks. This guidance remains advisory.

From 1 August the government is advising that shielding will be paused for all English residents. From this date, the government is advising individuals to adopt strict social distancing rather than full shielding measures. Strict social distancing means that individuals should take particular care to minimise contact with others outside of their household or support bubble.

¹ The purpose of this non-statutory guidance is to provide fire and rescue services with general advice to assist with a consistent, standardised approach across all services. The guidance does not constitute legal advice. Fire and rescue services' legal duties will remain those specified by law, in particular article 26 of the Regulatory Reform (Fire Safety) Order 2005, during the COVID-19 pandemic, but if any fire and rescue services consider that difficulties arise in relation to compliance with those duties, they should take legal advice.

Prevention

Strategic intention: In line with the requirement under the Fire and Rescue Services Act 2004 for each Fire and Rescue Authority to promote fire safety we will adopt a risk-based approach to Home Fire Safety Checks, the promotion of safety messages in educational establishments and wider community based prevention promotion including road and water safety.

This document replaces the following NFCC guidance note:

- Strategic Intention Covid-19 – Prevention (27 May 2020 – Issue 2)

It is also accompanied by:

- Prevention Model Risk Assessment (20th May 2020 – Issue 1)

Application in Devolved Governments

FRS should be aware of the current COVID management measures relevant to their devolved government, where appropriate. There is currently no single consensus and this advice will change over time. Refer to the end of this document for links to coronavirus advice within the devolved governments.

Home Fire Safety Checks/Safe and Well Visits

In order to continue to prevent fires in the home and keep communities safe, we have to ensure that we can deliver fire risk checks, fire safety advice and provide risk reduction equipment such as smoke alarms where the risk of fire is high.

Our fire safety messaging needs to respond to the challenges we now face as more vulnerable adults are discharged from hospitals into the community and where people self-isolate and/or spend increased amounts of time in the home environment where many fires start.

As part of the Government's response to COVID-19 the Fire & Rescue Service (FRS) has adopted a risk-based approach to their Home Fire Safety Checks / Safe & Well Visits. This action is taken in order to avoid the spread of COVID-19 to vulnerable groups and to protect staff from the spread of COVID-19. The Government's definition of vulnerable groups has been developed to identify two main vulnerability groups as follows:

High Risk (clinically extremely vulnerable) this group includes people who:

- are having chemotherapy or antibody treatment for cancer, including immunotherapy
- are having an intense course of radiotherapy (radical radiotherapy) for lung cancer
- are having targeted cancer treatments that can affect the immune system (such as protein kinase inhibitors or PARP inhibitors)
- have blood or bone marrow cancer (such as leukaemia, lymphoma or myeloma)
- have had a bone marrow or stem cell transplant in the past 6 months, or are still taking immunosuppressant medicine
- have been told by a doctor they have a severe lung condition (such as cystic fibrosis, severe asthma or severe COPD)
- have a condition that means they have a very high risk of getting infections (such as SCID or sickle cell)
- are taking medicine that makes them much more likely to get infections (such as high doses of steroids or immunosuppressant medicine)
- have a serious heart condition and are pregnant

Moderate Risk (clinically vulnerable) this group includes people who:

- are 70 or older
- have a lung condition that's not severe (such as asthma, COPD, emphysema or bronchitis)
- have heart disease (such as heart failure)
- have diabetes
- have chronic kidney disease
- have liver disease (such as hepatitis)
- have a condition affecting the brain or nerves (such as Parkinson's disease, motor neurone disease, multiple sclerosis or cerebral palsy)
- have a condition that means they have a high risk of getting infections
- are taking medicine that can affect the immune system (such as low doses of steroids)
- are very obese (a BMI of 40 or above)
- are pregnant – see [advice about pregnancy and coronavirus](#)

High risk and moderate risk groups have been advised that they are no longer required to shield from 1st August 2020, although they should still take precautions such as social distancing, hand hygiene and to only meet other people outdoors, in groups of up to 6 – try to stay 2 metres away from each other at all times.

Further information can be found in the [Staying alert and safe \(social distancing\) guidance](#).

The non-exhaustive list of premises/people include those individuals identified as being a high fire risk, including those at risk of:

- Arson Deliberate Fire
- Hate Crime
- Domestic Violence
- Post Fire Incident
- Assured Health or Social Care Referral for heightened fire risk (including hospital discharge, mental health, substance use and hoarding etc.)

Working Safely during Covid-19 – Other People's Homes Guidance

This guidance should be read in conjunction with [Working Safely during Covid 19 - Other People's Homes Guidance and Guidance on Shielding and Protecting People who are Clinically Extremely Vulnerable from COVID-19 \(updated 3 July 2020\)](#) . In line with the Governments guidance the following factors need to be considered by all FRS working in the home setting

- Work can now be carried out in households which were previously isolating or where an individual had been previously advised to shield. Home visit should only be undertaken if it is to remedy a direct risk to the safety of the household and its occupants.
- When working in a household where somebody is vulnerable and may have been previously shielding, for example the home of someone over 70, prior arrangements should be made with vulnerable people to avoid any face-to-face contact – for example, when answering the door. You should be particularly strict about handwashing and respiratory hygiene.
- Staying updated with the latest guidance and considering how it can be applied to your work. This can include:
 - Washing your hands more often than usual for 20 seconds using soap and hot water, particularly after coughing, sneezing and blowing your nose.
 - Reducing the spread of germs when you cough or sneeze by covering your mouth and nose with a tissue, or your sleeve (not your hands) if you don't have a tissue and throw the tissue in a bin immediately, then wash your hands.

- Cleaning and disinfecting regularly touched objects and surfaces using your regular cleaning products to reduce the risk of passing the infection on to other people.
- Maintain social distance as far as possible.
- Communicating with households prior to any visit to discuss how the work will be carried out to minimise risk for all parties.

A Risk Based Approach to Working in the Home Setting

All FRS need to balance how to keep households safe from fire whilst limiting the exposure of staff to the public and/or the Coronavirus (COVID-19), for their benefit as well as the benefit of staff. Individuals that had previously been shielding can now receive home visits that are conducted observing social distancing measures, correct use of PPE and adherence to personal hygiene measures. However individuals who were shielding may still wish to shield and therefore may be uncomfortable accepting a visit. Consent is therefore essential for any visits deemed to be necessary

However prior to any home fire safety checks being undertaken, the referral partner or occupier will be contacted and asked to confirm:

- If anyone in the property is showing symptoms of COVID-19 such as a high temperature (greater than 37.8°C) or a new, persistent dry cough
- If anyone in the property has been tested and is confirmed as COVID-19
- If anyone in the property has been in contact with someone with COVID-19

If the answer to any of the above is yes, then additional control measures will be required in order to complete the home fire risk check. Dependent on the outcome of the triage process set out above services may consider undertaking a telephone risk assessment or a home visit where equipment is required to be fitted and if the fire risk is deemed to be sufficiently high.

We will continue to provide risk reduction equipment such as smoke alarms, fire retardant bedding and literature, such as leaflets. Where the occupier is able to receive and fit themselves, we recommend that FRS should post or deliver equipment to them.

Where a Safe and Well telephone assessment identifies that:

- Hearing impaired alarms are required; or
- The occupier is unable to fit smoke alarms or any risk reduction equipment themselves, and have no support to do this for them;

In these circumstances, staff will attend to fit the fire risk reduction equipment.

Staff undertaking these visits must adopt agreed safety measures and use of appropriate Personal Protection Equipment (PPE) as detailed in Public Health England (PHE) guidance on the use of PPE (3 May 2020). Section 8.10 of this guidance sets out PPE requirements for the delivery of services in the individuals home or usual place of residence.

<https://www.gov.uk/government/publications/wuhan-novel-coronavirus-infection-preventionand-control/covid-19-personal-protective-equipment-ppe>

In addition to PHE guidance on PPE. All services should continue to follow guidance on PHE as set out by the NFCC for Firefighters and frontline staff on 9 April 2020 (this may require updating in line with PHE update in May 2020). All issued NFCC guidance on COVID-19 can be found [here](#).

In line with current Government advice, a two-metre distance must be kept between the householder(s) and the person undertaking the Home Fire Safety Check should be dressed in PPE as approved by PHE and the NFCC.

When increasing the number of home visits undertaken, the following criteria must be met locally:

- 1. An agreed definition of those individuals/households that meet the definition of high fire risk as outlined in this document must be agreed with local strategic partners and triaged appropriately to prioritise high risk visits that may have been delayed during the lockdown restrictions.*
- 2. All referrals for home visits should come through an approved partner agency, no self-referrals should result in a face to face visit at this stage without a risk-based telephone triage process.*
- 3. All referrals must first be risk assessed for COVID-19 by the referring partner.*
- 4. Home Fire Safety Checks/Safe and Well Visits must be carried out using the agreed level of PPE and must adhere to current Government guidance regarding safe social distancing practice.*
- 5. Where individuals are isolating through contact and trace whilst being identified as high fire risk, Home Fire Safety Checks/Safe and Well Visits must be carried out using the agreed level of PPE and must adhere to current Government guidance regarding safe social distancing practice.*
- 6. All Home Fire Safety Checks/Safe and Well Visits should be able to draw down on existing partnership arrangements to secure support, ensuring effective onward referrals are dealt with as required.*
- 7. All FRS staff must have provision of and be aware of how to access occupational health support to protect staff pre and post visit to minimise the risk of COVID 19 to vulnerable individuals and members of staff.*

Promoting Safety in Educational Establishments

FRS Staff undertaking visits at educational establishments such as schools and colleges should make consideration to utilising the Staywise platform to deliver services virtually and remotely, removing the need for a physical visit to occur.

In the event that a visit to an educational establishment is essential, then the principles around Social Distancing, PPE and personal hygiene must be adopted by FRS staff at all times as detailed above.

Any additional risk control measures would be subject to compliance within the existing risk assessment of the establishment being visited and it must be recognised that as we adapt to new methods of Service delivery those establishments may be reluctant to engage with third party contractors such as the FRS.

Promoting Safety in Community Setting including Road Safety and Water Safety

Should FRS staff need to engage with younger people in relation to arson or wilful fire setting, a full risk assessment should be undertaken and the visit should be planned taking into consideration the principles around Social Distancing. This should be done in conjunction with the guardian of the young person or in the case of an engagement at an educational establishment, in line with the risk assessment of that establishment.

The promotion of road or water safety should be considered through enhanced national/local campaigns and local digital platforms. Where distance teaching and learning is achievable, then this should be adopted to encourage limited interaction between FRS staff and others.

Where it is not possible to deliver these services without a visit from FRS staff, then the principles around Social Distancing, PPE and personal hygiene must be adopted by staff at all times as detailed

above. Similarly, the risk assessment of the establishment being visited should be the overarching measure for risk control.

Additional guidance

- [Guidance for First Responders](#) (link attached)
- [Guidance on Staying alert and safe \(social distancing\)](#)
- <https://www.gov.uk/government/publications/guidance-on-shielding-and-protecting-extremely-vulnerable-persons-from-covid-19>

Devolved Administrations Guidance

- [Coronavirus advice for businesses in Scotland](#)
- [COVID-19 Support for Business in Wales](#)
- [COVID-19: business and employers in Northern Ireland](#)
- [Coronavirus guidance for business in Jersey](#)
- [Business guidance in Guernsey](#)
- [COVID-19 Updates in the Isle of Man](#)