Working across boundaries to improve wider safe and well outcomes

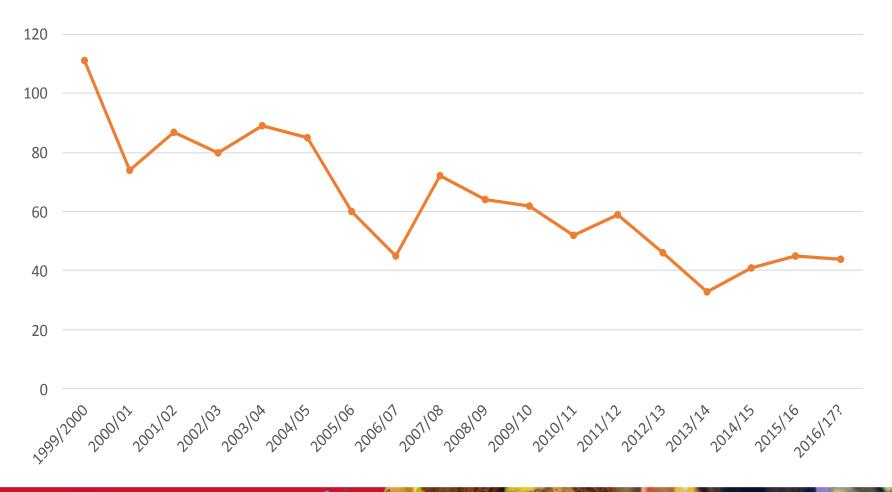
Assistant Chief Officer David McGown Director of Prevention & Protection Scottish Fire & Rescue Service







Fire fatalities 1999/00 – 2016/17





Fire fatalities profile

- o Smoking
- o Living Alone
- o Reduced mobility
- Health / mental health issues
- Alcohol consumption
- o Addiction issues





Current distribution HFSV's by risk

HFSV	High	Medium	Low	Total
2013/14	24,286	29,323	17,713	71,322
2014/15	27,283	26,658	11,912	65,853
2015/16	24,505	27,964	19,320	71,789
Total (Risk)	76,074 (36%)	83,945 (40%)	48,945 (24%)	208,964



Unintentional harm in communities

- Unintentional harm costs Scotland approx. <u>£4.5Bn p.a.</u>
- The most at risk within adult population living alone/ poor physical health/ cognitively impaired /strongly correlates with ageing and inequality
 - > Approx1 million GP visits and 0.5 million A&E attendances as a result of unintentional harm
 - > 2013-14 there were 54,673 emergency admissions for unintentional harm
 - 64% of emergency hospital admissions for unintentional harm are for falls; 84% in +65 population;
 87% for +75s population
 - Falls annually account for more than 70% of all fatal accidents in the +65 age group
 - > 33% of physical unintentional harm occurs in the home
 - > 75% of falls- related deaths occur in the home
 - Annual cost of falls to Scotland is £470m and rising
 - Unintentional psychological harm mental wellbeing falls to lowest mean score in +75 population
- Much (40 50%) of the unintentional harm in the home is preventable & risk profile closely matches those most at risk of harm from fire



The Fire and Rescue Framework for Scotland (2016)

"The SFRS should work with other public sector partners to evolve a holistic and dynamic process of identification, evaluation and assessment of community risk and Best Value in order to prioritise and target its use of resources to ensure an appropriate response to incidents across Scotland and support improved outcomes for communities...."

This means while maintaining our response capabilities:

- Developing further how we work with and support Health and Social Care in meeting risks to safety within communities
- Developing further our approach to building community resilience/ capacity to help make communities safer



Current developments

- Building Safer Communities
- SFRS / Health & Social Care partnerships
- Identifying vulnerability & sharing data – NHS (NSS)
 - Police Scotland
 - Scottish Federation of Housing Associations
 - Persons at Risk Database



Vulnerability index?





Bespoke preventative measures

- Greater use of Technology Enabled Care
- Smart, and linked, alarms
- Domestic fire suppression systems
- Broader home safety measures (falls, dementia, etc)
- Targeted media & engagement strategies (family and neighbourhood awareness, community resilience, etc)





Future requirements

- Agreeing common outcomes
- National strategy
- Joint prevention & response models
- Working outwith traditional boundaries

