



Historical Analysis of Fatalities in Accidental Dwelling Fires between 2005/06 and 2024/25

AUDIENCE

**TO BE PRESENTED TO:
Authority
Strategic Leadership Team**

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PREVENTION STRATEGY & PERFORMANCE

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1	Analysis of Fatalities in Accidental Dwelling Fires between 1st April 2024 and 31st March 2025	J Fielding	June 2025

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1. Agreement

For the purpose of this report, the following agreement was made between the Prevention function and the Strategy & Performance Directorate.

This work was requested by Area Manager Mark Thomas and received on 01/04/2025.

The Manager¹ has approved this report/ piece of work can be undertaken by the Strategy & Performance Directorate.

If the scope of the work changes, authorisation must be again obtained and would be noted within the version control document sheet.

It was agreed that this report would be produced in draft format by June 2025 and would be sent electronically to the Director of Strategy & Performance and Client for comment.

The Manager / Client agreed that their comments would be received back by June 2025.

The final report, which will always be in PDF format, would be produced by June 2025, subject to receiving comments.

¹ Deb Appleton

2. Summary

The purpose of this report is to analyse the circumstances and contributing factors concerning deaths in accidental dwelling fires attended, between 2005/06 and 2024/25. Fatalities in accidental dwelling fires are relatively rare compared to other incidents that Merseyside Fire and Rescue Service attends, though their impact is most severe to the families and friends of the deceased.

In summary, this report presents the following findings:

Victim Summary

- Between 2005/06 and 2024/25 there were **144** fire deaths due to accidental dwelling fires; these deaths are attributed to **137** fire incidents.
- Prior to 2016/17, there was an upward trend in the count of fatalities; though this upward trend was halted with the 7 deaths during 2016/17, this was then followed by lows of 4 deaths between 2017/18 to 2018/19 and 2021/22. During 2023/24 there was a single fatality, the lowest in Merseyside Fire & Rescue history. In the past year (2024/25) there were 7 deaths.
- When analysed by district, Wirral saw 46 deaths, followed by Liverpool with 43. When aggregated to incidents per 100,000 population; Wirral has the greatest number of deaths with 0.72 deaths per 100,000 population, while Liverpool's ratio is much lower, with 0.46 per 100,000 population. Sefton is the 2nd highest with 0.54 deaths per 100,000 population, St Helens is at least risk with 0.36 deaths per 100,000 population.
- The risk of death in accidental dwelling fires increases with age, with ages above 70 being at greatest risk, this is especially true for males above the age of 85.
- There is a bias towards male victims with 80 fatalities (55.6% overall), female victims accounted for 64 deaths.
- White British or Irish ethnic group accounted for 139 victims or 96.5% overall, Other Ethnicities accounted for 5 deaths. Proportionally, the 5 Other Ethnicity victims equate to 3.5% of deaths, short of the Merseyside proportion of other ethnicity population which according to the 2021 Census sits at 8.3%.
- In 92 out of 144 fire fatalities, the victim was the sole occupier. Taking all living circumstances into account, 103 (71.5%) victims were alone at the time of the fire that claimed their lives.
- Commonly victims had between 3 and 7 risk factors which could have contributed to the fatal incident.

Incident Summary

- Concerning deprivation and the use of Department for Levelling Up, Housing and Communities Index of Deprivation (IOD) 2019, the general trend is that fatalities tend to occur more often in deprived areas, with fewer fire deaths occurring in areas of less deprivation. When the average age of victims is added to the equation it has been found that victims tend to die younger in deprived areas with older victims being found in areas of less deprivation.

- In 80 incidents a smoke alarm was fitted and actuated (58.4% in total). There were 12 incidents where smoke alarms were fitted and did not actuate. On 24 occurrences there was no smoke alarm and a further 8 incidents where the fitted smoke alarm was inoperable (i.e. no batteries). There were 11 occurrences where it was unknown whether the smoke alarm actuated and 2 incidents where the level of damage done to the property was so severe it was unknown whether a smoke alarm had been fitted.
- 75 Home Fire Safety Checks (HFSC) were completed with victims prior to the incidents (equal to 58.4%), which claimed their lives. 56 (40.9%) did not have a HFSC. 6 were unknown.
- When analysing ignition sources, it was found that of the 141 fatal incidents, 70 (51%) were a result of smokers' materials. Since 2009/10, when 7 deaths were the result of smokers' materials, there was a gradual reduction with only 1 death attributable to this ignition source between 2011/12 and 2012/13. However, since 2013/14, deaths from smokers' materials have increased leading to a high of 8 during 2015/16, though this has fallen since. During 2024/25, 3 deaths were attributed to smokers' materials.
- When analysing the ignition source and room of origin; smokers' materials were responsible for the majority of fire fatalities in both the living room and the bedroom.
- When smokers' materials are combined with alcohol, 33 incidents (24.1%) were related to this combination.
- Victims aged above 65 are more likely to be involved in a fire where the careless use of heating appliance has taken place; this ignition source is most predominant in the living room.
- By month, the greatest number of deaths occurred during the autumn/winter months, particularly between November and January. The month of April also tends to have high counts of fire deaths.
- Peak times for incidents where a fatality occurs are between 02:00 - 03:59, 07:00 - 08:59, 14:00 - 15:59 and 20:00 – 20:59.

3. Introduction

The purpose of this report is to analyse fatalities from accidental dwelling fires (ADF) between 2005/06 and 2024/25; analysing the circumstances and demographic background of such occurrences, using business intelligence to target risk and prevention work.

Compared to other incident types that Merseyside Fire & Rescue Authority (MFRA) attends, fire fatalities are relatively low in number, although their impact is most significant to family members, friends and the community of the deceased.

Fatalities in accidental dwelling fires are reported in MFRA's Service Delivery Plan as Key Performance Indicator DC12, which is reported to Authority Members on a quarterly and annual basis.

4. Methodology

The software used in this report includes:

- Microsoft Excel 365 to interpret and graphically represent figures.
- MapInfo Professional 17 which was used to tag incidents with geographical information

The calculation for fatalities per 100,000 population is:

*(sum of Fatalities / sum of Population) * 100,000*

Population figures are based on the combined Mid-Year estimates published by the Office for National Statistics, for the period 2003 and 2023 (the most recent available data).

Index of Deprivation 2019 (IOD 2019) has been used to measure the levels of deprivation where fire fatalities took place².

The IOD 2019 data was then analysed in two ways:

- At a local level the IOD 2019 data was restricted to solely Merseyside, this data was then split into 10 bands with equal counts, each representing a decile of relative localised deprivation. This data is merged with fatality incident data and analysed.
- At a national level the IOD 2019 data has not been restricted to Merseyside, the national dataset is split into 10 equal bands, with each band being a decile of deprivation. This data was merged with fatality incident data and analysed.

The Index of Deprivation 2019 was sourced from the Ministry for Housing and Communities and Local Government.

Data used in this report was supplied by the Merseyside Fire & Rescue Authority Incident Investigation Team; with the coroner ultimately determining the cause of death.

Data used within this report is based on fatal incidents occurring in the home where the motive for the incident is judged to have been accidental. Please note the data contained within this report includes some information that is still awaiting Coroner agreement and as such the figures contained may be subject to change.

Fire fatalities include any person who has died as the direct or indirect result of injuries caused by a fire incident even if death occurred weeks or months later. There are also occasional cases where it transpires subsequently that fire was not the cause of death. For all these reasons, fatalities data may therefore be subject to revision.

Concerning the Long Time Series Analysis, counts are sourced from the following:

² IOD ranks deprivation in the form of an index, where low numbers indicate Super Output Areas (LSOA) which have high levels of deprivation and high numbers indicating Super Output Areas with least deprivation

- Between 1991/1992 – 1999/2000: Freedom of Information Request from Department for Communities and Local Government
- Between 2000/2001 – present: Incident Investigation Team archives

The time of call analysis is based on incidents, which were **NOT** late calls, accounting for 120 incidents within the entire dataset.

Data Limitations:

The findings within this report are based on available data. As fire fatalities are a relatively rare occurrence the volume of data is small. Therefore, some conclusions based on the data should be approached with caution.

For reporting purposes, certain risk factors including drugs and mental health have been grouped into generic titles. Drugs includes both prescription and illegal narcotics whilst mental health includes conditions ranging from depression, dementia through to schizophrenia.

The injury analysis within Appendix A is based on criteria used to measure Performance Indicator: DC13 Number of injuries from accidental dwelling fires. This is based on a count of persons injured by fire and required hospital treatment.

5. Results

5.1 Victims of Fatal Accidental Dwelling Fires

The following section is based on the details of victims who died because of an accidental dwelling fire. In total between 2005/06 and 2024/25 there were **144** victims and as such the following tables and charts all equate to this figure.

5.1.1 Long Time Series Analysis

Chart 1: Long time series of fatalities in accidental dwelling fires between 1991/92 and 2024/25

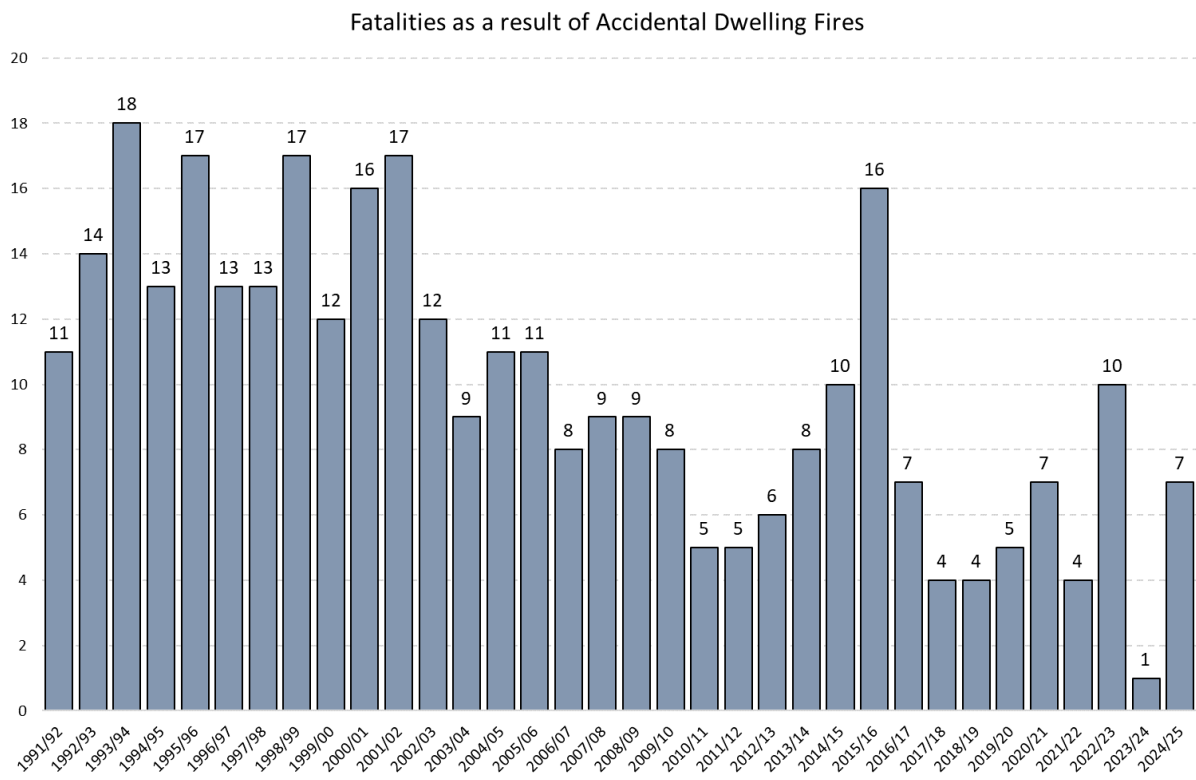


Chart 1 provides a count of accidental dwelling fire fatalities between 1991/92 and 2024/25. What is evident is that over this period, fatalities on the whole have reduced, with isolated peaks at irregular intervals.

In recent years, counts of accidental dwelling fire deaths have fluctuated, from a high of 16 during 2015/16 to a low of 1 during 2023/24. During 2024/25 there were 7 fire deaths which is an increase of 6 on the previous year, but a reduction of 3 based on data from two years prior. The fluctuations in fire deaths shows little pattern, highlighting the difficulty with identifying where and when these incidents take place.

5.1.2 Comparison of Fatalities by District

Chart 2: Fatalities in accidental dwelling fires between 2005/06 and 2024/25 by local authority

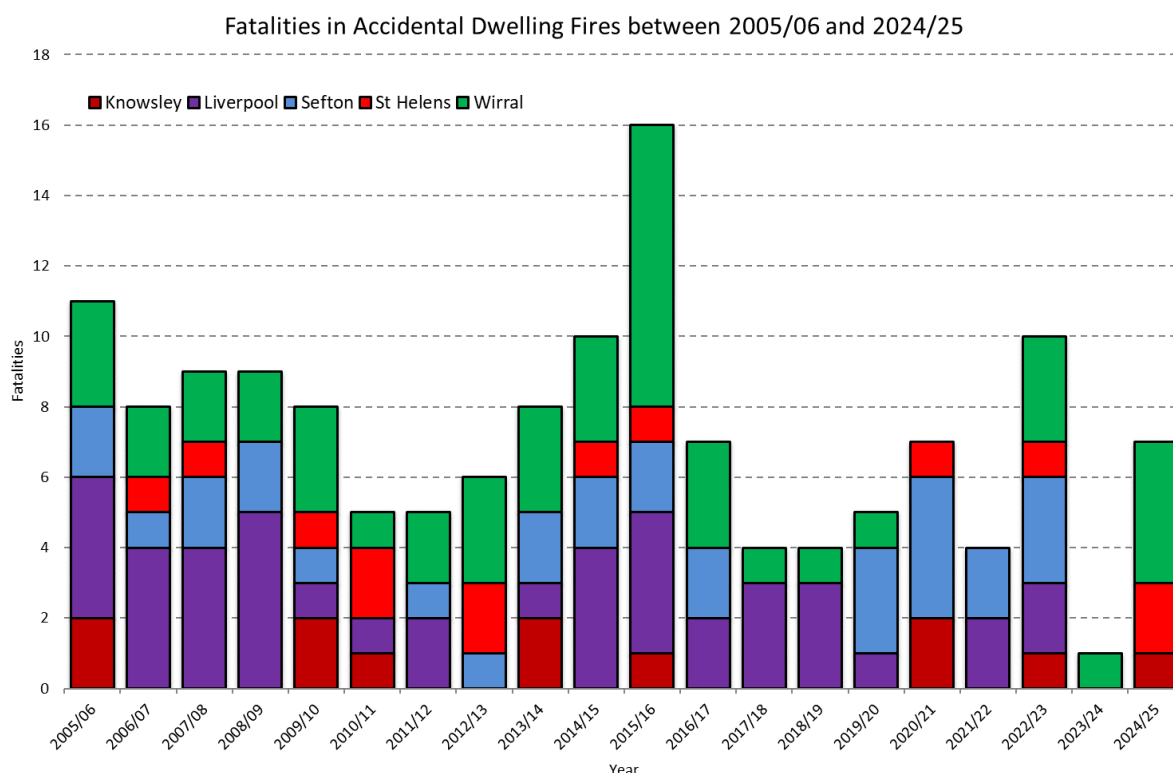


Chart 2 identifies that over the 20-year period, fatalities have fluctuated. Prior to 2010/11, accidental dwelling fire fatalities were on a downward trend, only for the opposite to occur between 2012/13 and 2015/16.

Since the 20-year high of 16 during 2015/16, fire deaths have fallen – leading to an all-time low of 1 during 2023/24.

Table 1: Comparison of overall fatality counts by district and population

Counts	Knowsley	Liverpool	Sefton	St Helens	Wirral	Total
Overall Fatalities	12	43	30	13	46	144
Rate per 100,000 population	0.40	0.46	0.54	0.36	0.72	0.52
Fatal Incidents	12	41	27	13	44	137

Table 1 allows a direct comparison of overall fatality counts between the Merseyside districts by aggregating the data to deaths per 100,000 head of population for direct comparison.

The table shows that over the 20-year period, there have been 46 accidental dwelling fire deaths in Wirral, closely followed by Liverpool with 43. When population counts are considered – Wirral proportionally has had the greatest number of fatalities with 0.72 per 100,000 population, Liverpool by contrast had a far lower ratio of 0.46 per 100,000 population. Sefton saw the 2nd highest ratio with 0.54 per 100,000 population, followed by Knowsley with 0.4 and St Helens seeing the lowest ratio with 0.36 per 100,000 population.

Accounting for the number of fatal incidents by district, the table identifies that of the 144 deaths, 7 incidents involved 2 victims – resulting in a total of 137 incidents.

5.1.3 Demographic Analysis

Chart 3: Fatalities by age and sex (with fatalities per 100,000 population ratio)

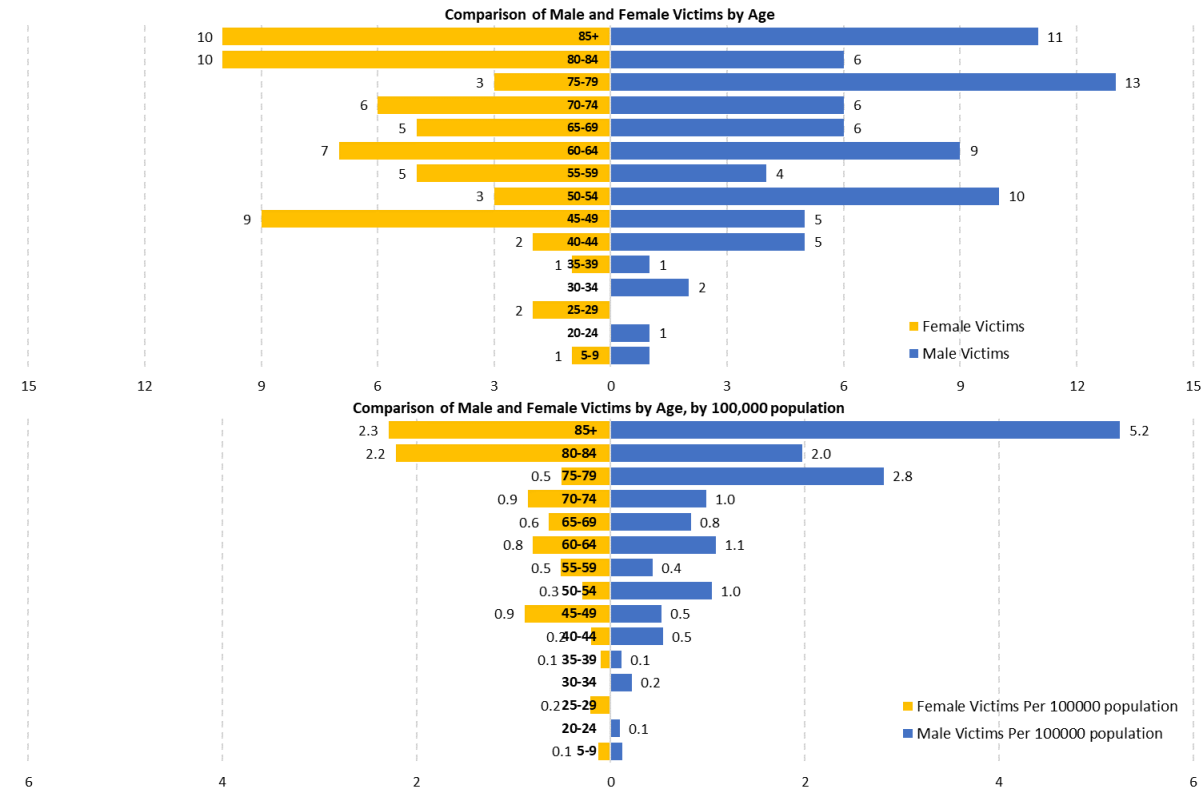


Chart 3 provides the count of fire deaths by age and sex along with the ratio of fire deaths per 100,000 head of population. The table identifies several age groups at greatest risk from a fatality - especially the 75 and above age groups (and even more so - males in the 85+ group with a ratio of 5.2 deaths per 100,000 population).

When the ratio of deaths to proportion of population is accounted for; it is apparent that with age the risk of death resulting from an accidental dwelling fire increases significantly. Applying a correlation analysis to the available data a R value of 0.92 is achieved indicating a strong statistical link between age and fire related mortality.

There is a bias towards male victims with 80 or 55.6% of total fatalities. Female victims accounted for 64 or 44.4% of accidental dwelling fire fatalities.

Concerning the victim racial profile; 139 (96.5%) victims were described as White – British or Irish, and 5 being another ethnic minority. Proportionally, the 5 other ethnicity victims equate to 3.5% of deaths, short of the Merseyside proportion of other ethnicity population which according to the 2021 Census sits at 8.3%.

5.1.4 Habitation and Carer Status

Table 2: Habitation and carer status

Status	Lived alone		Cohabited		Other Circumstance		
Carer	Alone at Time	Accompanied	Alone at Time	Accompanied	Alone at Time	Accompanied	Total
Yes	38		1	11			50
No	45	1	7	25	2	2	82
Unknown	9		1	2			12
Total	92	1	9	38	2	2	144

Table 2 identifies that most victims (92, 63.9%) lived alone and were alone at the time of the incident. Of the victims who cohabited, 9 were alone at the time and 38 were accompanied. In combination, 103 of the 144 victims (71.5%) were alone at the time of the incident.

Most victims did not have a carer (82, 56.9%), whilst 50 or 34.7% did. Concerning victims who lived alone, 38 from 92 (or 41.3%) needed a carer.

Table 3: Habitation and carer status – OVER 65 age group only

Status	Lived alone		Cohabited		
Carer	Alone at Time	Accompanied	Alone at Time	Accompanied	Total
Yes	29		1	8	38
No	22		2	7	31
Unknown	7				7
Total	58	0	3	13	76

Table 3 identifies that most victims above the age of 65, lived alone and were alone at the time of the incident (76.3%, 58). Of the victims who cohabited, 13 were accompanied and 3 were alone at the time. Overall, 61 of the 76 victims (80.3%) were alone at the time of the incident. In the age group analysed, 38 victims (50%) required carers in some capacity.

5.1.5 Analysis of other factors

There are other factors that can have an impact on the outcome of an accidental dwelling fire. It is important to note that having one of the following factors doesn't necessarily indicate that an individual is at heightened risk of having an incident.

The 10 risk factors³ (some of which are described in greater detail throughout this report) include:

- living alone
- being alone at the time of the incident
- above the age of 65
- evidence of alcohol use

³ This list is by no means comprehensive, but the more common risks identified within the data available.

- evidence of drugs both prescription and illegal
- disability
- mobility issues
- mental health issues
- no smoke alarm
- cause of the fire being smoking materials

Within the 20-year dataset, it was found that:

- 64.6% of victims lived alone
- 71.5% of victims were alone at the time of the incident
- 52.8% of victims were above the age of 65
- 39.6% of victims had evidence of alcohol use
- 40.3% of victims had evidence of drugs both prescription and illegal
- 57.7% of victims had a disability
- 45.8% of victims had mobility issues
- 20.1% of victims had mental health issues
- 42.4% of victims had no smoke alarm
- 49.3% of victims were involved in a fire attributed to smoking materials

What is important is that when several of these elements are combined the possibility of a deadly event is more likely, but in 3 cases, some victims had none of these risk factors.

Chart 4: Total deaths by count of risks factors

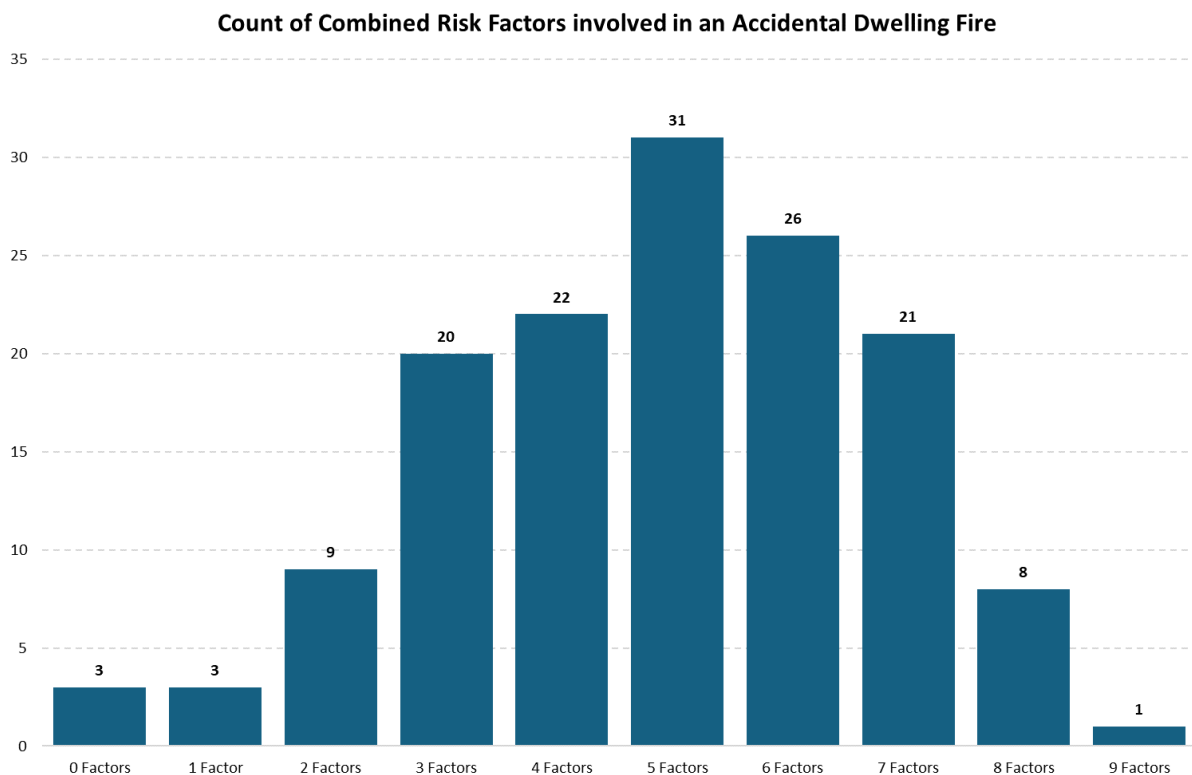


Chart 4 shows that fire victims commonly had between 3 and 7 of the listed risk factors, with 5 risk factors being most common. At the extreme ends of the scale, very few victims had 0 factors (3) and 1 victim had 9 risk factors.

5.2 Incident Related Analysis

The following analysis is based on the **count** of incidents, not the count of victims – as in the previous section therefore, the counts in the following analysis equate to **137**.

5.2.1 Comparison of Fatal Incidents and Deprivation

Chart 5: Fatalities in accidental dwelling fire incidents between 2005/06 and 2024/25 linked to deprivation⁴

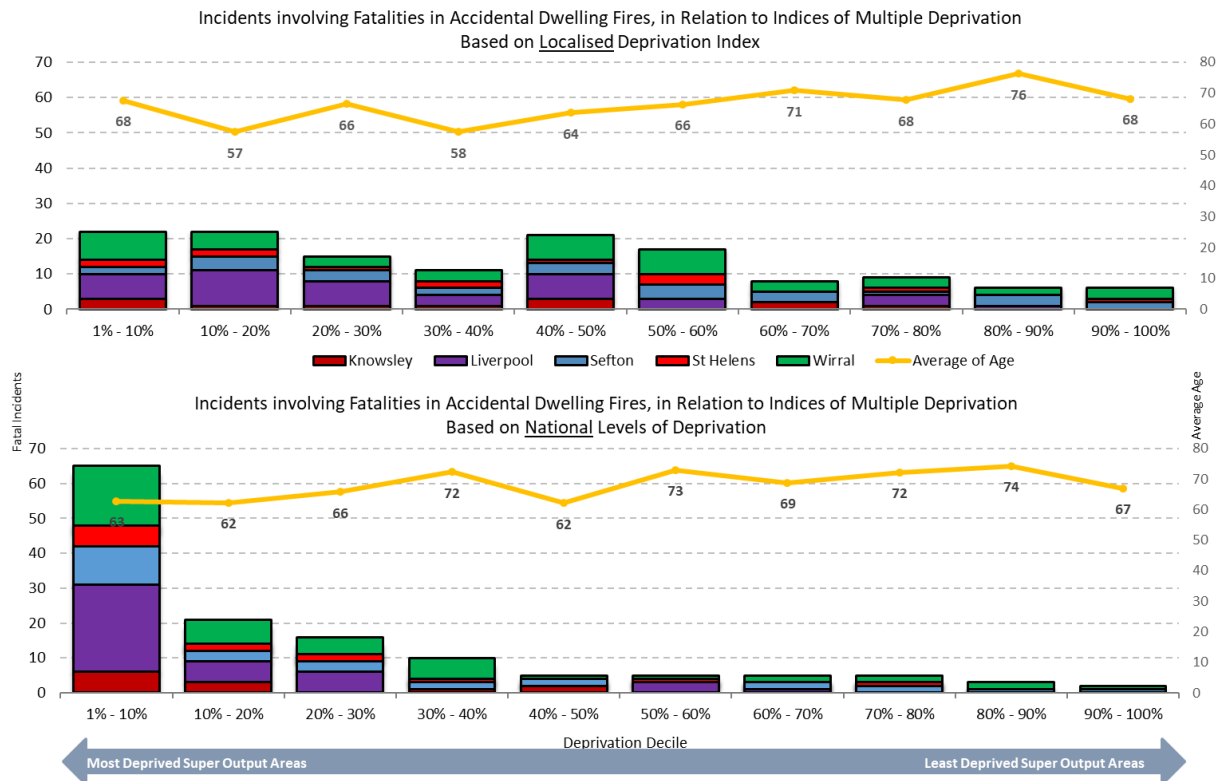


Chart 5 ranks the level of deprivation in the area in which the incident took place, using the Index of Deprivation 2019 (IOD). Utilising a localised deprivation index, the chart demonstrates that (in general) as deprivation increases the number of fire deaths gradually increases. When applying the national IOD dataset to the fatality data, there is far more skewing⁵ of the data particularly within the 10% most deprived areas. **As such, based on national levels⁶ of deprivation, the most deprived 10% decile accounted for 65 fatal incidents – 47.4% of total fatal incidents within Merseyside.**

The chart also identifies the average ages of the victims by each deprivation decile group. In general terms, the chart identifies that fatal fire victims in deprived areas tend to be younger. By contrast, in less deprived areas victims tend to be slightly older.

⁴ As per the Ministry of Housing, Communities and Local Government document Index of Deprivation 2019

⁵ Due to the high levels of deprivation, the National IOD chart is skewed because Merseyside has more locations within the 10% most deprived areas of England.

⁶ The lower chart is a microcosm of how deprived Merseyside is when compared to the national picture.

When analysed at a district level:

District	Local Index of Deprivation	National Index of Deprivation
Knowsley	Like Liverpool, Knowsley is one of the most deprived local authorities in England. Taking this into account, three quarters of fatal fire incidents within the district occurred within the 50% most deprived areas of Merseyside	All of the fatal fire incidents in Knowsley took place in 50% most deprived areas, with 6 occurring in the 10% most deprived decile
Liverpool	Like Knowsley, Liverpool is one of the most deprived Local Authorities in England, with high deprivation skewing the data with fatal incidents tending to occur in areas of higher deprivation. Within Liverpool, 34 fatal fire incidents took place within the 50% most deprived areas and 7 took place in the 50% least deprived areas.	In Liverpool, the majority of fatal fire incidents (25) took place in the 10% most deprived area. Overall, 37 from 41 fatal fire incidents took place in the 50% most deprived parts of Merseyside (equal to 90.2%)
Sefton	Sefton has a more balanced profile, with 14 taking place in the most deprived 50% of Merseyside and 13 occurring in the 50% least deprived.	Within Sefton 21 of the 27 fatal fire incidents (77.8%) took place in the 50% most deprived areas. 11 of which took place in the 10% most deprived decile. There were 2 deaths that took place in the 2 least deprived deciles for deprivation
St Helens	Just under two thirds of fatal fire incidents in St Helens occurred in the 50% most deprived areas.	Most fatal fire incidents in St Helens took place in the 50% most deprived areas, especially the 1% - 10% decile, where 6 took place.
Wirral	Wirral has a sporadic pattern, with concentrations occurring in the most deprived 1% - 20% and 40% - 60% quintiles. Within Wirral, fatal fire incidents are spread more evenly with 26 incidents taking place in the 50% most deprived areas and a further 18 taking place in the 50% least deprived areas.	Most fatal fire incidents in Wirral took place in the 50% most deprived areas accounting for 36 of the 44 deaths (81.8%), the 1% - 10% decile accounted for 17 incidents overall. There were 3 deaths that took place in the 2 least deprived deciles for deprivation

5.2.2 Smoke Alarm Analysis

Smoke alarms provide an important early warning to residents should a fire occur within a property. It must be emphasised that in most incidents the actuation of a smoke alarm can and does save lives; however, this is not always the case, as personal mitigating circumstances like: mobility, underlying medical conditions, prescription medicines, mental health related illness and alcohol consumption can impede a victim escaping regardless of the actuation of a smoke alarm.

The following section analyses the performance of smoke alarms as well as whether a HFSC (Home Fire Safety Check) had taken place.

Table 4: Smoke alarm functionality & HFSC Status

Status	HFSC			Total	%
	Yes	No	Unknown		
Fitted & Actuated	61	16	3	80	58.4%
Fitted Did Not Actuate	5	6	1	12	8.8%
Fitted No Batteries	2	6		8	5.8%
Fitted Unknown if Actuated	6	5		11	8.0%
None Fitted	1	21	2	24	17.5%
Unknown		2		2	1.5%
Total	75	56	6	137	

Table 4 identifies that in most properties (80 or 58.4%) a smoke alarm was fitted and operational. In 12 cases the smoke alarm was fitted and failed to actuate, though this is more likely due to the nature of the incident rather than the performance of the smoke alarm itself.⁷

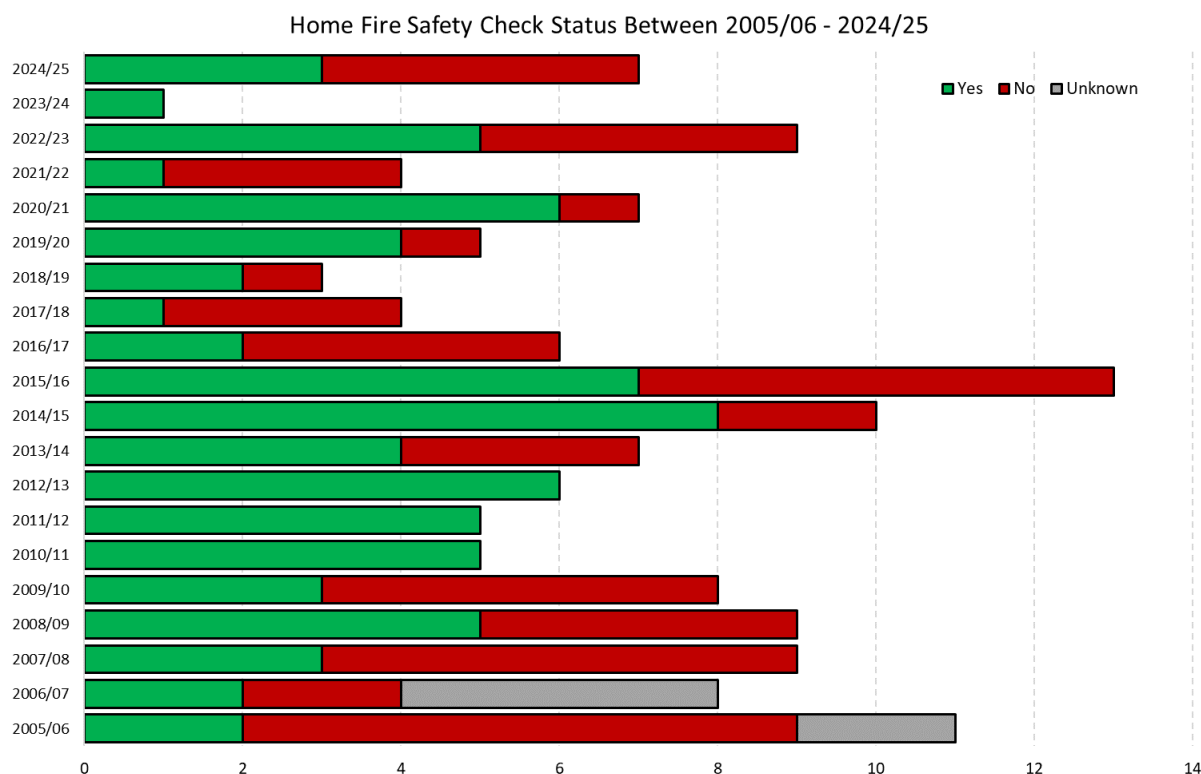
In 8 properties (5.8%), there were smoke alarms fitted, but with no batteries therefore not providing the early warning system a smoke alarm provides, additionally in 6 of these cases a HFSC had not taken place.

In 24 cases there was no smoke alarm fitted – again meaning no early warning system being available in the property. During 3 incidents, the level of damage done to the property was so great, it was unknown whether a smoke alarm had been fitted or not.

When analysing smoke alarm functionality against HFSC status, 52.7% (75 from 137) of properties had previously had a HFSC. Of these properties, 61 had a smoke alarm fitted, which actuated successfully. 56 properties (40.9%) did not have a HFSC visit prior to the incident and 6 were unknown.

⁷ 111 from 137 (81%) properties had a fitted smoke alarm – regardless of whether it was in an operational state

Chart 6: Home Fire Safety Check status 2005/06 to 2024/25



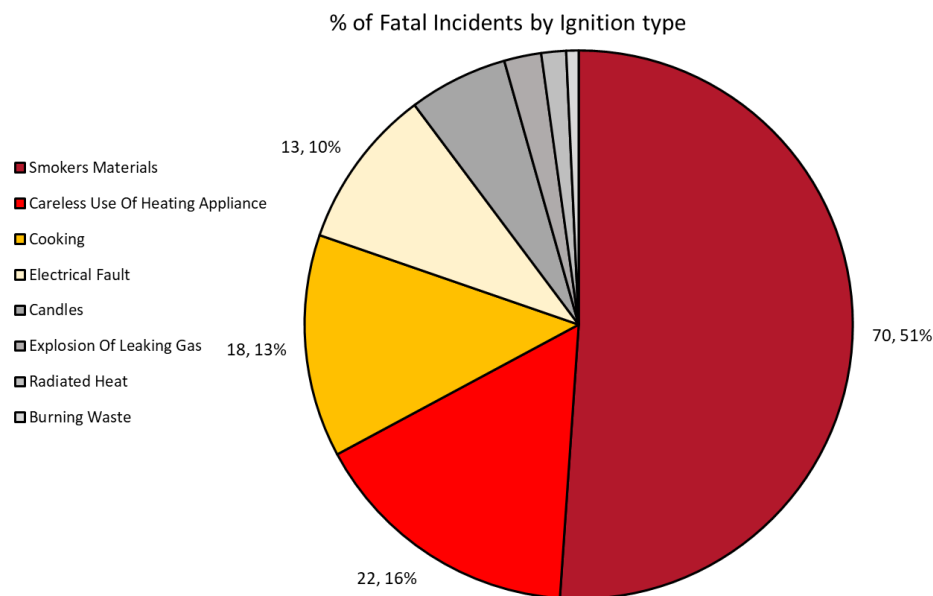
The above chart shows that when focused on properties that did not receive a HFSC, there is a lot of fluctuation between the years. In the earlier period of the analysis particularly between 2005/06 and 2009/10 most fatal fire incidents involved properties that had not received a HFSC, or data is unavailable.

From 2010/11 onwards the data shows limited consistency, as previously stated there are generally more properties to have received a HFSC than not, though how this is distributed throughout the years is highly inconsistent. Between 2010/11 to 2015/16, there were more properties to have received a visit than not. However following this period, the pattern is much more inconclusive.

The circumstances leading up to a fire death are often complex with many seemingly random factors impacting the outcome. The inconsistency within the data shows that a HFSC alone is not going to prevent a fatal fire incident, and whilst it is arguable that all such incidents are avoidable, the complex events leading up to a death cannot always be accounted for.

5.2.3 Ignition Source Analysis

Chart 7: Proportion of fatal incidents by ignition source



During the 20-year period analysed smokers' materials account for the majority of fatal incidents with 70 or 51%. Careless use of heating appliances follows, with 22 (16%) incidents, cooking with 18 (13%) incidents and Electrical Faults with 13 (10%).

The following table overleaf provides further context into the circumstances for the above ignition sources.

Table 5: List of fatal incident ignition sources

Ignition Source	Detail	Total
Smokers Materials	Smokers Materials including Cigarettes, Lighters, E-Cigarettes	70
	Subtotal	70
Careless Use of Heating Appliance	Careless Use of Heating Appliance	15
	Electrical Heater too Close to combustibles	4
	Collapsed Onto Gas Fire	2
	Coal or Spark from Open Fire	1
	Subtotal	22
Cooking	Cooking - unattended food left on hob - misadventure	11
	Cooking - Accidental Ignition of Clothing	4
	Candle or Butane Camping Stove igniting flammable materials	1
	Combustible Materials Left on Hob	1
	Cooking - Misuse of Microwave	1
	Subtotal	18
Candles	Candles	8
	Subtotal	8
Electrical Fault	Electrical Fault	9
	Rupture of Lithium-Ion battery	3
	Overloaded multi-tap	1
	Subtotal	13
Explosion Of Leaking Gas	Ignition Of Gas from Cooker - Gas Leak	1
	Explosion of Gas released from broken main	1
	Spark From Fridge/Freezer - Ignition of gas mistakenly left on	1
	Subtotal	3
Radiated Heat	Radiated Heat - from halogen spotlight igniting bedding	1
	Radiated Heat - from tabletop lamp	1
	Sub Total	2
Burning Waste	Burning waste in garden	1
	Sub Total	1
Grand Total		137

Table 5 adds additional context to the ignition sources detailed in Chart 6.

The average age of victims, where the cause of the fire was related to the careless use of a heating appliance was 77 years. The average age where smokers' materials were involved was 63 and for cooking it was 62.

5.2.4 Room of Origin and Ignition Source

Table 6: Room of origin with ignition source and prior alcohol consumption

Room Of Origin	Ignition Cause	Total	Of which involved consumption of Alcohol		
			Yes	No	Unknown
Living Room	Smokers Materials	31	15	13	3
	Careless Use of Heating Appliance	16	4	12	
	Candles	4	1	3	
	Electrical Fault	3		3	
	Radiated Heat	1		1	
	Subtotal	55	20	32	3
Bedroom	Smokers Materials	30	12	15	3
	Careless Use of Heating Appliance	6	1	5	
	Electrical Fault	4	1	3	
	Candles	3	2	1	
	Radiated Heat	1		1	
	Cooking	1		1	
	Subtotal	45	16	26	3
Kitchen	Cooking	16	9	4	3
	Smokers Materials	5	3	2	
	Electrical Fault	3	1	1	1
	Explosion Of Leaking Gas	2		2	
	Subtotal	26	13	9	4
Hallway	Electrical Fault	3		3	
	Smokers Materials	2	1	1	
	Subtotal	5	1	4	0
Bathroom	Explosion Of Leaking Gas	1		1	
	Candles	1	1		
	Subtotal	2	1	1	0
Bedsit	Smokers Materials	2	2		
	Subtotal	2	2	0	0
Caravan	Cooking	1		1	
	Subtotal	1	0	1	0
Garden	Burning Waste			1	
	Subtotal	1	0	1	0
Grand Total		137	53	74	10

Table 6 provides a breakdown including: room of origin, respective ignition source and whether a victim was under the influence of alcohol at the time. The table identifies that smokers' materials are a significant cause in fires in the living room (31 from 55, 56.4%) and even more so in the bedroom (30 from 45, 66.6%), with the cause of careless use of heating appliance also being common to these rooms.

Alcohol had a potential influence in 53 (38.7%) fatal incidents which were linked to the consumption of alcohol. Where alcohol consumption is combined with

smokers’ materials, then 24.1% (33) of incidents are linked to this combination of factors.

Within the living room, just over a third (20 or 36.4%) of fatal fire incidents involved the consumption of alcohol. A similar trend also occurred for the bedroom, where 35.6% (16) fatal fire deaths were associated with alcohol consumption.

Within the kitchen, cooking is the most common cause of fatal fire incident with 16 overall, 9 of which involved the consumption of alcohol.

5.2.5 Fatal Incidents by Year and Ignition Source

Chart 8: Breakdown of ignition source by year

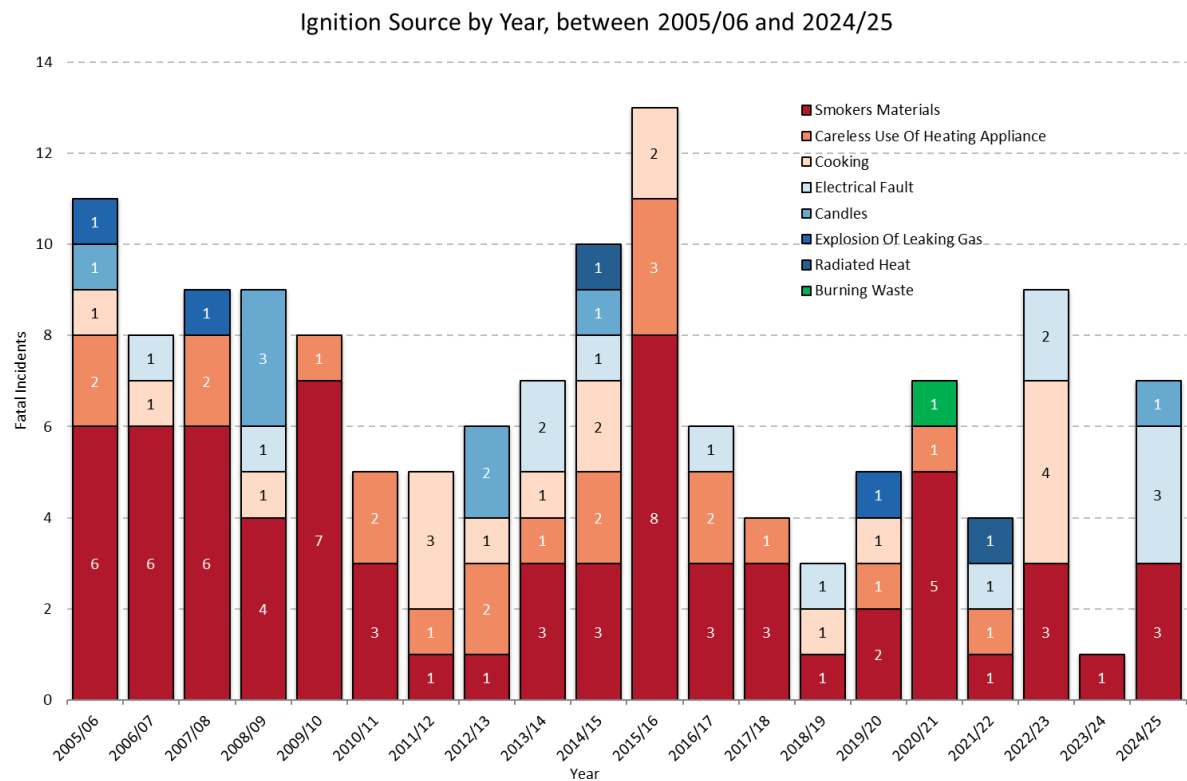


Chart 8 provides an annual breakdown of the ignition sources involved in fatal fires. The chart shows that smokers’ materials was the most common ignition source in 17 of the 20 years analysed.

Smokers’ materials deaths had been falling between 2009/10 and 2011/12, however since 2013/14, these incidents were on the rise culminating in a high of 8 during 2015/16. Since 2015/16 the overall numbers of fatal incidents related to smokers’ materials have generally fallen, though they still make up a notable proportion of fire deaths, especially during 2021/22 where 5 deaths took place as well as 2022/23 and 2024/25 where 3 deaths occurred.

Incidents involving careless use of heating appliances have remained relatively consistent, in 14 years there were deaths related to this cause.

Fatal incidents linked directly to cooking and cooking practices have fluctuated throughout the time frame, with the exceptions of 4 incidents during 2022/23.

Of note, was that during 2022/23, one of the incidents related to an Electrical Fault was due to a lithium-ion battery rupturing on an E-Bike. This incident resulted in 2 deaths. Tragically, a similar incident occurred during 2024/25 with lethal consequences.

5.2.6 Fatalities by Month and Ignition Source

Chart 9: Fatal fire incidents by month and ignition source

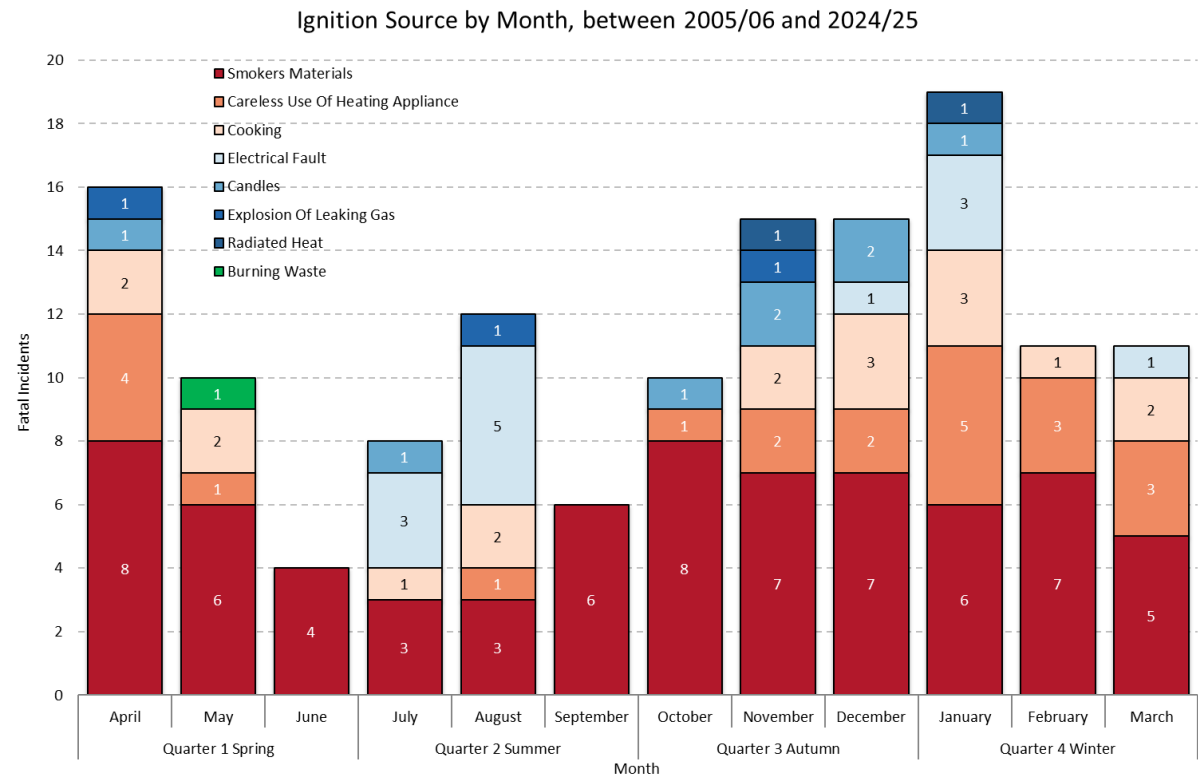


Chart 9 identifies that there are more fatal fire incidents taking place during quarters 3 Autumn (40 in total) and 4 Winter (41).

Concerning the quarterly breakdown of smokers' materials; the data suggests a link to seasonality with 18 incidents in quarter 1 – Spring, 12 in quarter 2 – Summer, 21 in quarter 3 – Autumn and 19 in quarter 4 – Winter.

Fatalities involving smokers' materials are lower during the spring and summer months, especially between: June to August. The months of: April and October narrowly have the highest counts with 8 each and the months of November, December and February have high counts of 7 each.

During winter/early spring, when the weather is most inclement - careless use of heating appliances is more common.

Electrical faults occur most during August and January, coincidentally two months with extreme contrasts in weather.

Cooking related deaths are sporadic with groupings between November to May.

5.2.7 Analysis of Incidents by Time of Call

Chart 10: Fatalities by hour and whether alcohol consumption had occurred⁸

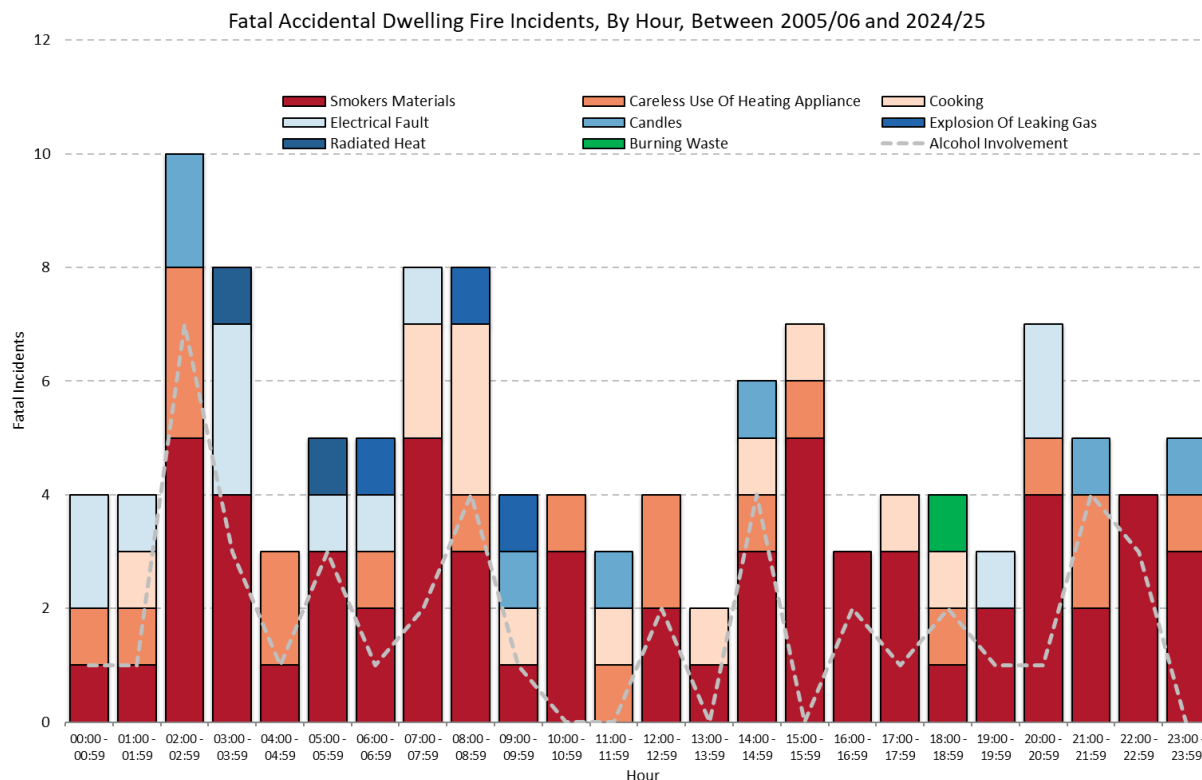


Chart 10 provides an overview by hour of when a fatal fire incident has taken place as well as the ignition source and whether alcohol consumption.

In summary, the chart provides the following findings:

- There are multiple peaks in fatal incidents throughout a 24-hour period. The sharpest peak occurs between 02:00 – 02:59 where 10 fatal incidents took place. Notably, excessive alcohol consumption had occurred in 7⁹ of these incidents and overall, 5 deaths were the result of smoker's materials.
- Other peaks took place between 07:00 – 08:59 and 14:00 – 15:59 both times associated with meals and food preparation. And evening between 20:00 – 20:59, where smokers materials and electrical faults are prominent.
- Alcohol consumption and fire death tend to peak in the early hours (02:00 – 02:59), the morning (08:00 – 08:59), afternoon (14:00 – 14:59) and evening (21:00 – 21:59). Relatively few incidents took place during late afternoon and early evening.

⁸ This analysis is based on the time of call to a live incident, this does not include late calls, please refer to methodology for details

⁹ The ignition sources for the fatal incidents that involved alcohol consumption included: 3 smokers materials, 2 candles and 2 careless use of heating appliance

6. Appendix A: Retrospective analysis of Accidental Dwelling Fire Injuries

Though every death is a tragedy, the learning from such an occurrence is incorporated into our future planning where our aim is to prevent further deaths by implementing initiatives and activities to target individuals at greatest risk. Though the fatality data is key in identifying risk trends, it is not the only data under consideration. Injury data from accidental dwelling fires provides a far greater data set, which adds richness to the analysis. The following section briefly analyses injuries from accidental dwelling fires and identifies commonalities between fire victims.

Chart 11: Accidental dwelling fires and injuries – long time series

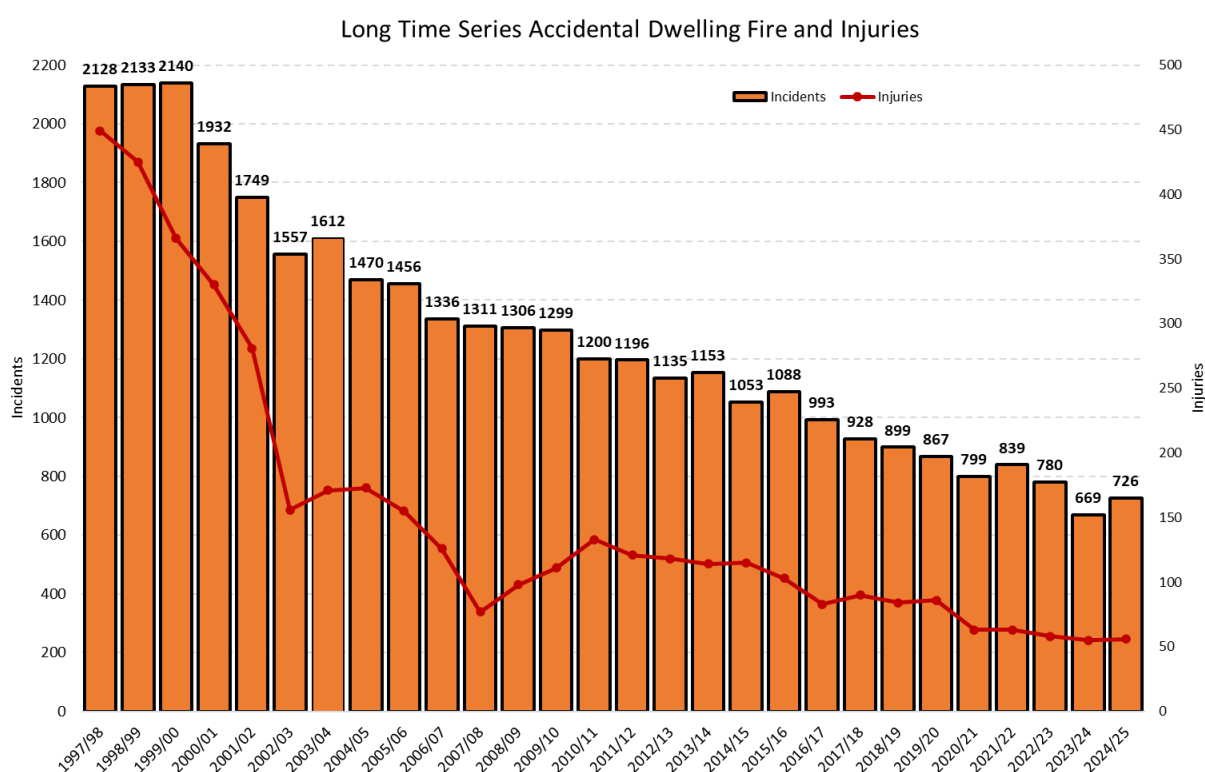


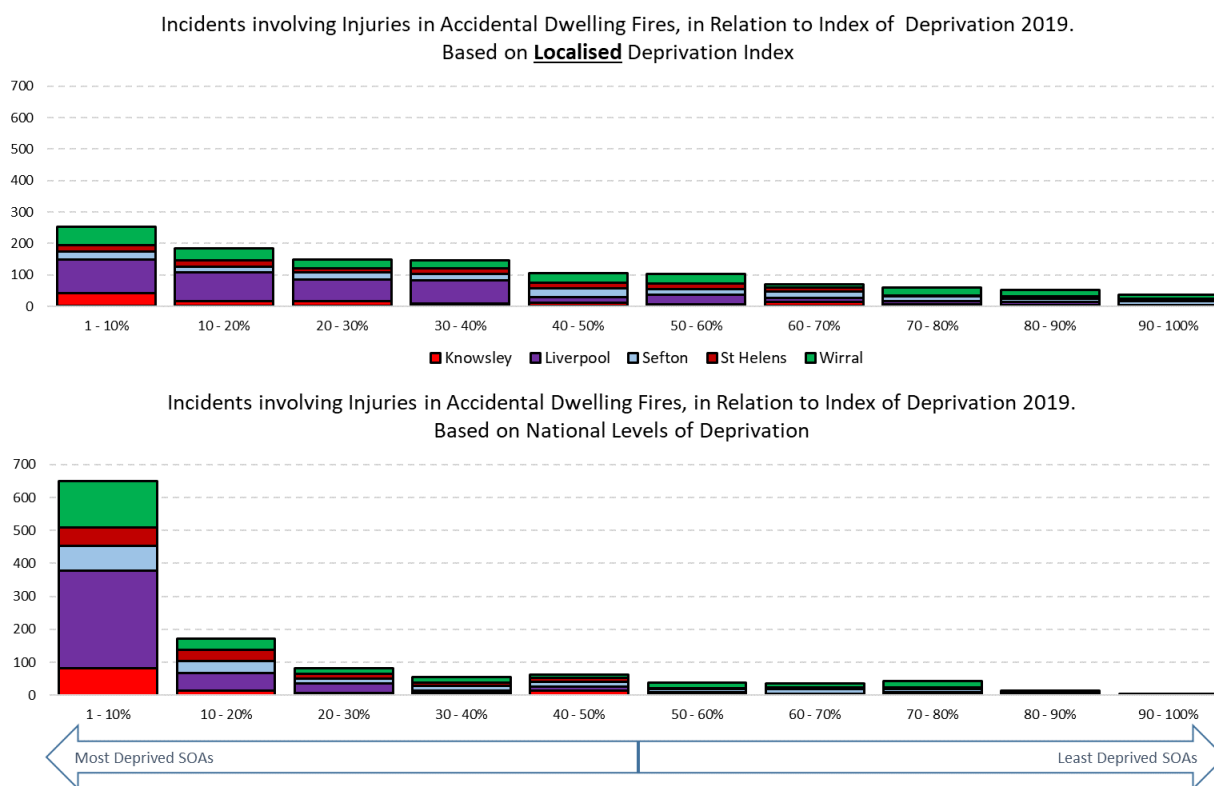
Chart 11 provides a long time series of accidental dwelling fire incidents and injuries between 1997/98 and 2024/25.

- The chart shows that over the 28-year period both incidents and injuries have fallen significantly, with a high of 2140 incidents during 1999/00 and low of 669 during 2023/24 – a reduction of 1471 incidents or -68.7%.
- Injuries have fallen from a high of 449 during 1997/98 to 55 during 2023/24 – a reduction of 394 incidents or -88%.
- Over the period, incidents have fallen gradually, though injuries have been inconsistent¹⁰. This inconsistency is likely due to the nature of each dwelling fire including the potential for multiple injuries occurring at the

¹⁰ Over the last 10 years (2015/16 to 2024/25) the ratio of injuries to incidents has been very consistent with injury ratios from 1 injury every 10 incidents through to 1 every 13 incidents.

same incident as well as the severity of the incident differing from case to case.

Chart 12: Accidental dwelling fire injury related incidents between 2008/09 and 2024/25 in relation to Indices of Deprivation (IOD) 2019



Like Chart 5 earlier in this report, the above chart identifies that when using national Indices of Deprivation data there is a clear link between fire injuries and deprivation, with the majority of incidents involving injury occurring within the most deprived decile. There are more incidents involving injury within the most deprived decile than all other deciles combined (649 against 507)

When a localised deprivation index is applied the changes between the deciles is more gradual, there are still significant differences between the most and least deprived areas, but it is less pronounced than the national comparator.

Chart 13: Injury in accidental dwelling fire population pyramid

Comparison of Male and Female Injuries by Age Group per 10,000 population. 2008/09 to 2024/25

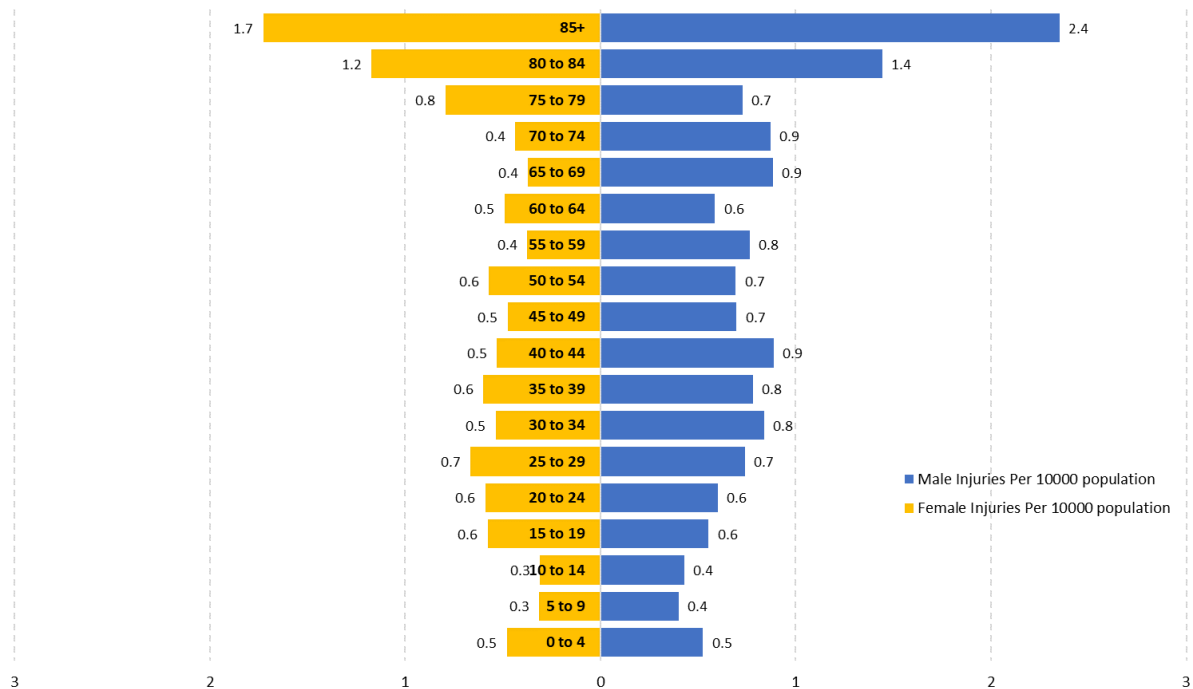


Chart 13 provides a comparison of the different age groups of those injured in an accidental dwelling fire. The chart mirrors the findings from chart 2 (earlier within this report) where there is a disproportionate number of victims above the age of 65 (equal to 26.0% of total injuries from 18.3% of the population).

Taking sex into account, proportionally 45.2% of people injured were female and 54.8% were male.

Concerning the ethnicity profile of people injured due to an accidental dwelling fire, 87.1% were recorded as White British or Irish, with 5.7% being other ethnicities and 7.2% being unknown.