HOSPITAL OR HOSPICE FIRES FACT SHEET

During 2009-2013, U.S. fire departments responded to an estimated average of 1,200 fires per year in hospitals or hospices. These fires caused an average of 40 civilian injuries and $9 million in direct property damage annually. There was an estimated average of less than one death per year during this period. Hospices accounted for only 3% of the fires in these properties.

Hospital or hospice fires were less common on Saturday and Sunday than the rest of the week. The peak time period was 9:00 a.m. to noon. They were least common between midnight and 6:00 a.m.

Cooking equipment was involved in three out of five (62%) hospital or hospice fires, while 9% were intentionally set. Electrical distribution or lighting equipment was involved in 7% of the fires. Heating equipment and smoking materials each were involved in 4% of fires.

Forty-four percent of the hospital or hospice fires started in a kitchen or cooking area, while seven percent started in a lavatory, locker room or check room and 4% started in a bedroom or patient room.

Nearly nine of 10 fires (87%) were confined to the object of origin. Fire spread beyond the room of origin in only 3% of the incidents.

John Hall’s report U.S. Experience with Sprinklers indicates that in 2007-2011, automatic extinguishing equipment was present in eight out of ten (78%) hospital fires, and sprinklers were present in almost two-thirds (63%).

The deadliest hospital fire in U.S. history in this property class was the 1929 Cleveland Clinic fire in Cleveland, Ohio, that killed 125 people. This incident, and a number of other catastrophic hospital fires are summarized in NFPA’s 2012 publication, Major Hospital Fires, by Marty Ahrens. Additional hospital fire investigation reports are available at Fire Investigations Health Care Facilities.


Source: NFPA, Fire Analysis and Research Division.