Module 1:

HHRS Overview

Welcome to the *Healthy Homes Rating System* course. In this Overview module, we will discuss:

# Course Goals

# Student Learning Outcomes

# Course Overview

# Module 1 - HHRS Overview

# Learning Objectives

# What is the HHRS?

* + The HHRS Process
	+ Underlying Principles
	+ HHRS Terms
	+ Hazards and Their Impact on

Health

* + Occupants and Deficiencies

# How it Works

* + Where Did the HHRS Come From?
	+ Key Features
	+ Using the HHRS

# Review

Course Goals

The goals of this course are to enable students to:

Student Learning Outcomes

At the conclusion of this course, students should be able to:

* Interpret housing-related health hazards using evidence-based likelihood and spread of harm data.
* Calculate hazard scores and identify hazard bands.
* Identify and prioritize effective corrective actions.
* Produce a Health Homes Rating System Assessment Report.

Course Overview

The following modules comprise the *Healthy Homes Rating System* course:

* Module 1: HHRS Overview
* Module 2: Do a Health Homes Assessment
* Module 3: Classify/Categorize Deficiencies into Hazards
* Module 4: Evaluate Health Impacts
* Module 5: Determine Appropriate Actions and Generate a Report

Module 1: HHRS Overview

Learning Objectives for this Module

* Describe the purpose of the HHRS
* List four steps included in the HHRS process
* Define four common HHRS terms
* Identify two important HHRS resources

# **What is the HHRS?**

## The HHRS is a process to analyze and prioritize hazards in the home to determine how likely it is that they will be a health hazard and what harm they could cause. The HHRS was developed to allow the assessment of all of the main potential housing related health and safety hazards. By focusing on current and potential hazards, the emphasis is placed directly on the risk to resident health or safety, rather than cosmetic or physical conditions alone. The rating of hazards assists you in determining the most important hazards to address.

# **The HHRS Process**

The HHRS is a four step process that includes:

# **Underlying Principles**

# The underlying principle of the HHRS is that –

# **Any residential premises should provide a safe and healthy environment**

# **for any potential occupant or visitor.**

## To satisfy this principle, a dwelling should be designed, constructed and maintained with nonhazardous materials and should be free from both unnecessary and avoidable hazards. **Some hazards**, however, **are** **necessary or unavoidable**, and **others are considered desirable or expected** because the perceived benefits outweigh the risks. For example, electricity is hazardous but considered necessary; stairs (however well designed) are hazardous but necessary in any multi-story dwelling. For such hazards, the design, construction and maintenance should be such as to reduce to a minimum the probability of an occurrence that could result in harm and of the potential harm that could result. It is a general principle that any dwelling should provide adequate protection from all potential hazards prevailing in the local external environment. This includes the normal local weather conditions, ground conditions and pollution (including noise, air and radiation).

# **HHRS Terms**

There are several terms that are crucial for you to understand when utilizing the HHRS.

# *What is a Deficiency?*

The deficiency may not be at the worst stage possible, so the perspective taken is “over the next 12 months” when determining impact on hazards.

A deficiency is a failure of an **element** to meet the **ideal**, whether that failure is inherent, such as a result of the original construction or manufacture, or a result of deterioration or of disrepair and a lack of maintenance.

While a deficiency may have implications in building and aesthetic terms, for the HHRS its prime importance is whether the effect from that deficiency has the potential to cause harm *over the next 12 months* – i.e. when the deficiency results in a **hazard**.

The first stage in assessing the condition of a dwelling is a review of the deficiencies identified during the inspection.

# **Hazards and Their Impact on Health**

When assessing a dwelling, the current occupants are not taken into consideration. Since a dwelling changes occupancy numerous times in its life, sometimes even during a single year, the HHRS is concerned with identifying conditions that threaten the health of the most vulnerable (likely to be impacted) occupants.

Identifying and assessing hazards involves an understanding of the basic physiological and psychological requirements for human life, and of the functions of a dwelling as a whole and of each individual dwelling element.

A dwelling should be capable of satisfying the basic and fundamental needs for the everyday life of a household. It should provide shelter, space and facilities for the occupants. And, it should be suitable for the spectrum of households and individuals who could normally be expected to occupy a dwelling of that size and type.

# **Occupants and Deficiencies**

You do NOT consider the current occupants when linking deficiencies with hazards. The most vulnerable occupant should be considered whether present or not at the time of the inspection. The only HHRS hazard that DOES take into account current occupants is ‘Crowding and Space.’ There are 2 steps to this assessment:

1) is the dwelling suitable for occupation as constructed

2) is the current occupation consistent with the design of the dwelling or is it overcrowded?

In practice, the most vulnerable occupants will be the ones currently living in the dwelling, since the reason you are doing the assessment in the first place stems from some issue identified with the dwelling already. In rental tenancy, there is often significant turnover and making the home safe and healthy for the current occupants does nothing to make it safe and healthy for the next residents who may be of a completely different age or vulnerability.

The goal of the HHRS is to make the dwelling as safe and healthy as possible for all potential occupants, whether currently in occupation or not. Current occupants will be considered when determining what actions to take to address hazards identified.

# **How it Works**

As the range of potential housing hazards have differing characteristics, the Health Homes Rating System uses a formula to generate a numerical score that allows comparison of the full range of hazards. This, together with the simple but logical approach of assessing both the likelihood and harm outcome allows the comparison of highly likely minor hazards and very unlikely major ones. Whatever the hazard, the higher the score - the greater the risk.

# **Where Did the HHRS Come From?**

## The HHRS was developed and tested over ten years in Great Britain. It became law in 2006. The key principle is that dwellings should provide a safe and healthy environment for the most vulnerable occupants.

# **Key Features**

There are several key features of the HHRS to keep in mind:

* It is a rating system, **NOT** a standard.
* It uses a risk-assessment methodology.
* It provides evidence and statistics to assist in making judgments about hazards.
* It rates hazards according to how serious they are and the effect they are having, or could have, on the occupants’ health.

HHRS users can utilize spreadsheet functions to perform the scoring calculations.

# **Using the HHRS**

The scores that are a feature of the HHRS allow comparison of widely differing hazards and take account of the potential frequency of occurrence and severity of outcome. There are many strengths to using this system; here are several:

1. Occupants and owners can prioritize hazards.
2. Local housing and health officials know which hazards are most serious to the occupants and can prioritize funding to address these.
3. Local policy makers can identify which areas of the community (because most homes were built in blocks) are in greatest need of attention and what health impacts those communities are facing.

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