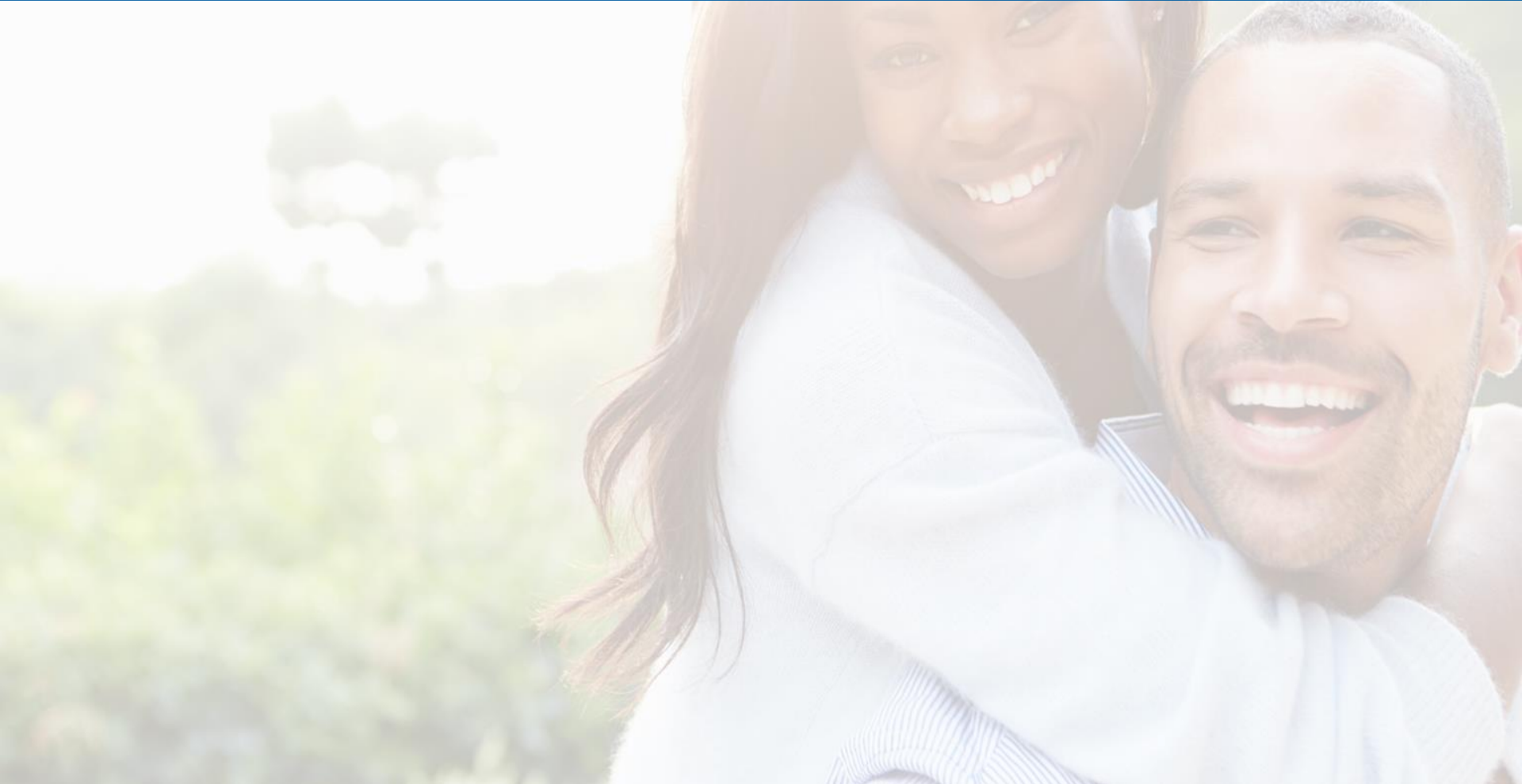
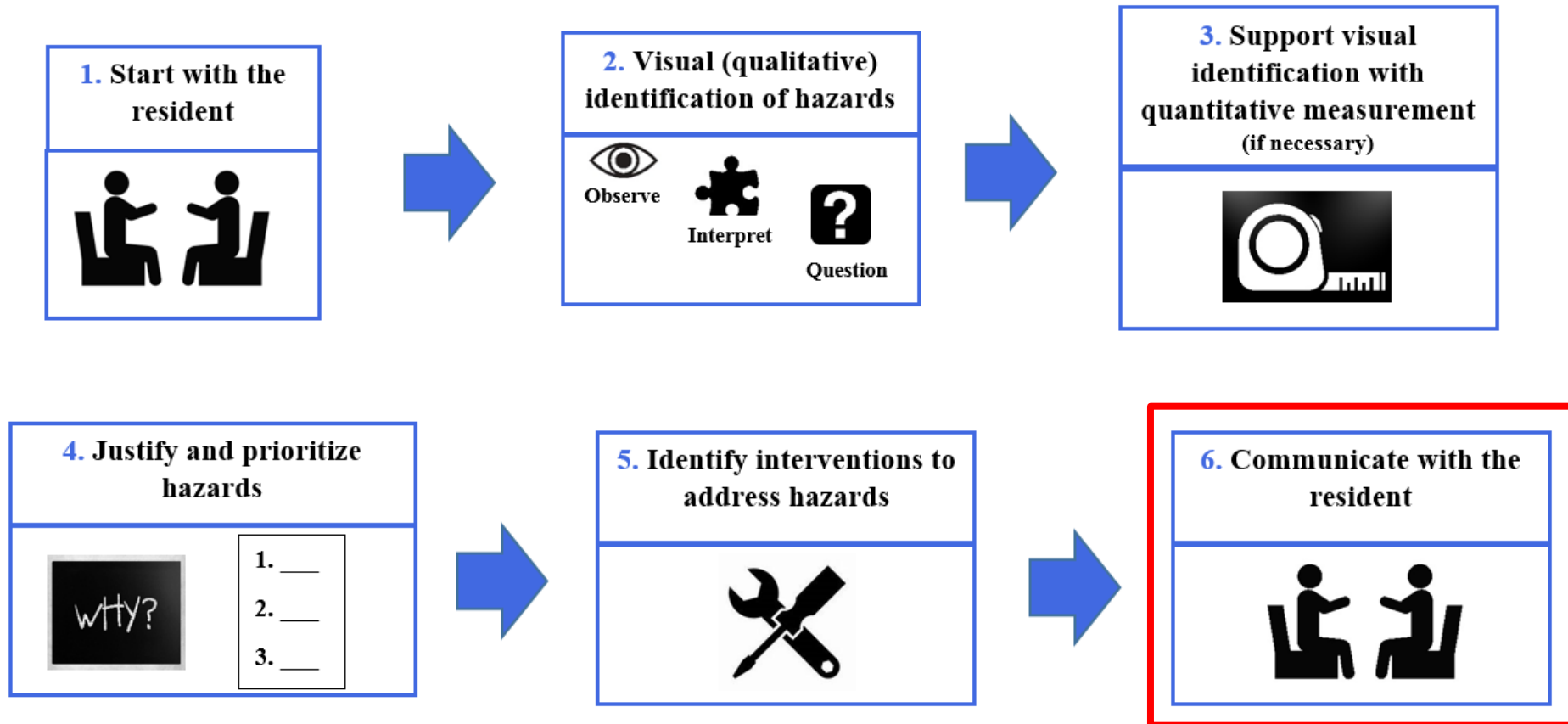


# Step 6: Communicate with the Resident



# KEY STEPS



# KEY STEPS

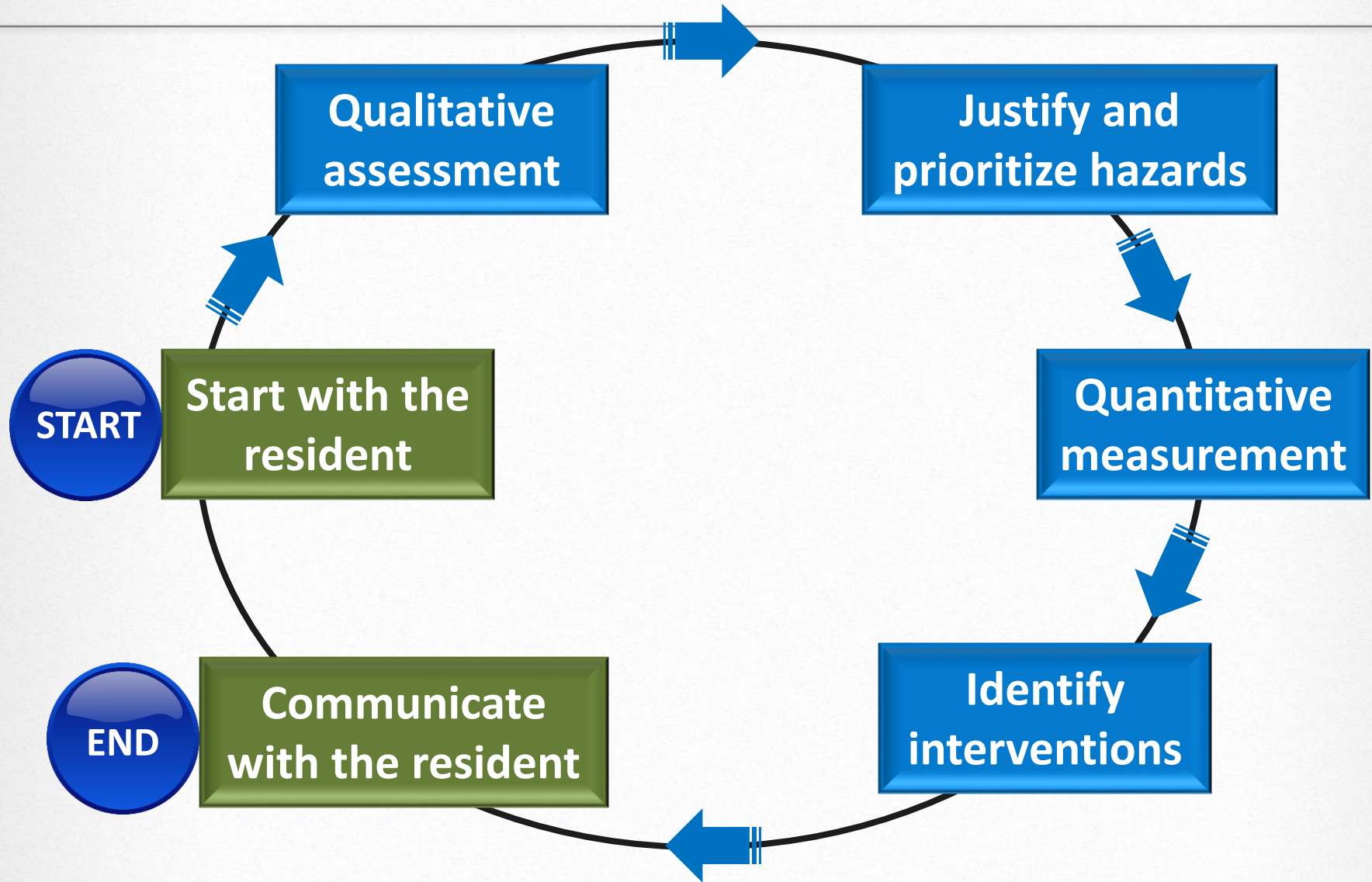
## 6. Communicate with the resident



- Components of the written report provided to the resident
- Effective verbal communication with the resident
- Creating a scope of work
- Educating the resident
- Referring the resident to other services
- Practicing resident communication



# A FULL CIRCLE





# COMMUNICATE WITH THE RESIDENT

1. Results	Provide information on the results of your qualitative and quantitative evaluation.	<b>Included in written report.</b>
2. Quantitative Measurement	Pay special attention to any quantitative measurement results.	
3. Action Steps	Recommend action steps.	
4. Scope of Work	Provide draft scope of work (if necessary).	
5. Referrals	Provide referrals.	
6. Education	Educate the resident about hazards and interventions	



# KEY HOME ASSESSMENT REPORT COMPONENTS

## PART 1: Background information

- Client Contact Information
- Assessment Site Location
- Assessor's Contact Information

## PART 2: Introduction

- Reason for assessment
- Assessment scope of services

## PART 3: Assessment Results and Recommendations

## PART 4: Limitations

## PART 5: References



# KEY HOME ASSESSMENT REPORT COMPONENTS

## PART 1: Background information

- Client Contact Information
- Assessment Site Location
- Assessor's Contact Information

## PART 2: Introduction

- Reason for assessment
- Assessment scope of services



# PART 2: Introduction

- Scope of services
- Reason for assessment

See page 25 of the sample in your binder:  
**Scope of Work and Hypothesis** (*Appendix A - Environmental Health Assessment Report*)



## Level I Environmental Health Assessment

AFP ID #: \_\_\_\_\_

Contact: \_\_\_\_\_

Site Address: \_\_\_\_\_

Contact Phone \_\_\_\_\_

Date of Site Visit: \_\_\_\_\_

\_\_\_\_\_  
Environmental Hygienist

\_\_\_\_\_  
Date

\_\_\_\_\_  
Environmental Health Coordinator

\_\_\_\_\_  
Date





# KEY HOME ASSESSMENT REPORT COMPONENTS

**PART 3: Assessment Results and Recommendations**

**PART 4: Limitations**

**PART 5: References**



# PART 3: Assessment Results and Recommendations

See pages 3 - 16 of the sample in your binder:

## ***1.0 – Environmental Health Issues and Action Summary***

EHA ID #: \_\_\_\_\_ Date of Site Visit: \_\_\_\_\_

### 1.0 - Environmental Health Issues and Action Summary

The following issues were identified during the Environmental Health Assessment of your home. The issues described below are followed by some specific actions that are recommended to eliminate or minimize the impact an issue may be having on the indoor environmental health of your home. This action plan is intended to provide you with some specific things you can do to that, when completed, should improve the general health of your home's indoor environment and may improve the overall health of your family.

Building Issues and Recommended Actions to take

	Photos of Issues
<p><b>Issue:</b> Splash blocks/extension tubing were missing on downspouts. Downspouts was also observed to be damaged.</p> <p><b>Action(s):</b> 1) Repair the broken downspout and install extension tubing on all downspouts to assure that water is draining away from home. 2) Clean out gutters and downspouts periodically to remove debris to allow proper water drainage.</p>	
<p><b>Issue:</b> A lot of trash and broken glass pieces were observed on side and back of the home. Family reported mice and cockroaches inside the home.</p> <p><b>Action(s):</b> 1) It is recommended to remove and dispose of all the trash and unwanted items from around the home in order to keep pests and odors away from home. 2) Safely remove and dispose of all the glass pieces around the home in order to prevent injuries from occurring.</p>	
<p><b>Issue:</b> Visible gap was observed around back door of home. Holes were observed on basement windows of the home. Dryer vent opening was not sealed.</p> <p><b>Action(s):</b> Install weather stripping around the back door, seal and close all gaps with a proper sealant in order to prevent unwanted air, moisture and pests from entering home.</p>	 



# PART 3: ASSESSMENT RESULTS AND RECOMMENDATIONS – QUANTITATIVE RESULTS

See examples in  
your binder from  
the Quantitative  
Measurements  
module.

Environmental Allergen Laboratory  
Analysis for Environmental Allergens by Immunoassay  
Dust Sample Report

Contact: \_\_\_\_\_ Batch ID#: \_\_\_\_\_  
Site Address: \_\_\_\_\_

Client Sample ID: \_\_\_\_\_  
Lab Sample ID: \_\_\_\_\_ VO2

Sample Description and Location:  
CHILD'S BEDROOM FLOOR

Sampling Date: \_\_\_\_\_ Date of Analysis: \_\_\_\_\_ Sampling Method: \_\_\_\_\_  
Sample Type: Grab Sample Area (sq. ft.): 9.0

Allergen	MDL (ug/g)		Low	Medium	High
Cat	0.32	0.01	<0.5	0.5 - 1.5	>1.5
Dog	1.21	0.01	<0.5	0.5 - 2.5	>2.5
Rodent	0.01	0.01	<0.3	0.3 - 1.0	>1.0
Dust Mite	0.09	0.01	<0.5	0.5 - 1.5	>1.5
Cockroach	0.13	0.01	<0.3	0.3 - 1.3	>1.3

MDL = Method Detection Limit

Analyst Signature: \_\_\_\_\_ Date: \_\_\_\_\_ QC Review Chk: \_\_\_\_\_  
Method of Analysis: Std. Method Instrument: Immunoassay

Dust samples:  
Dust should be collected with a vacuum and frozen as soon as possible after collection. Dust samples including any loose material are separated by size through a 50 mesh (300 um) brass screen to remove gross debris. Samples yielding at least 500 mg of sieved material are preferred. Sieved dust is extracted in PBS and extracted for 3 hours at -20°C. Extracts were stored at -20°C until analysis 19 18.

The dust is analyzed for antigens from 9 biological sources including fungal antigens specific to Alternaria alternata, Cladosporium herbarum and Aspergillus fumigatus. Also, antigens from Dermatophagoides farinae, Canis familiaris, Felis domesticus, Mus Muscularis and Periplatitia americana are determined by monoclonal antibody assay. These assays were purchased from InBio Laboratories or developed in our laboratory using materials from Greer Laboratories, Lenoir, NC.





# PART 4: LIMITATIONS

The most important disclaimer is what you could not see or access.

See sample in your binder (page 25)

Report Disclaimer and Conditions

## Appendix A - Scope of Environmental Health Assessment Report

### Scope of Work

This environmental health assessment was performed by the Center for Environmental Health (CEH) at Children's Mercy Hospital. Environmental Health Assessments are a limited visual assessment of the structural and mechanical components of the building, and a visual assessment of the rooms and their contents to look for potential sources of environmental contaminants. On-site measurements of indoor air components and sampling for laboratory analysis for indoor contaminants may be performed to support the assessment, if deemed necessary and appropriate by the assessment team. The visual assessment information that has been gathered, along with any on-site measurements and laboratory results, are reviewed and compiled into this assessment report. This report includes a series of environmental health issues/actions summaries that were used to guide the development of an environmental health action plan in order to assist families as they seek actions they can take to try to improve the indoor environmental quality of their home.

This environmental health assessment is provided through the Kansas City Asthma-Friendly Home Partnership (KCAFHP), a Center for Environmental Health (CEH) community collaboration. It has specific program components that are targeted to provide education and training to specific groups in the Kansas City community. These groups each represent stakeholders in building a comprehensive, community-based approach to indoor environmental health, and asthma education and management. The ultimate goal of this community-based approach is reduction in new cases of asthma and better management by working with the child's primary care physician and reduction of the healthcare burden of pediatric asthma in the Kansas City.

### Hypothesis

The hypothesis for this environmental health assessment was that environmental contaminants were present in the home and that they were of sufficient concentration to contribute to symptoms of occupants with chronic health problems. This hypothesis was tested through visual observations, on-site measurements, and if necessary,

### Report Disclaimer and Conditions

This report is limited in scope to the information gathered during site reconnaissance and the results of the laboratory analyses of any samples gathered during reconnaissance. It is intended for use by the family who occupies the building. No information regarding the history of the site or its occupancy has been reviewed. There is no warranty or guarantee of the health or safety conditions in the building based on this assessment. Only readily accessible parts of the building were evaluated and only random samples will be taken. Maintenance and repair issues may be discussed, but a detailed survey of any records are not a part of this assessment report. The report may not be considered a compliance inspection or certification for past or present codes or regulations of any kind.

This assessment and report addresses only allergy or asthma provoking substances, respiratory irritants, and other indoor air quality issues. It does not evaluate presence or concentration of radon gas, lead paint, or asbestos. It is not a formal assessment of the presence of rodents, termites, insects, or other infestations. It is not a formal assessment of fire or safety hazards in the building. No claims can be made beyond the limitations of the information reported herein. No warranties, either expressed or implied, apply to the services described hereunder. If you have any questions regarding any part of this report, please feel free to contact the Center for Environmental Health at Children's Mercy Hospitals and Clinics at 816-960-8919 and we will be happy to assist you.

Children's Mercy Hospital © 2010

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# PART 4: REFERENCES

## References Used for This Report (page 27)

### Appendix C - References Used For This Report

- 1) American Society of Heating, Refrigerating and Air-Conditioning Engineers, Inc. Thermal Environmental Conditions for Human Occupancy - ASHRAE Standard (ANSI/ASHRAE 55-2010). Atlanta, Georgia, 1992.
- 2) American Society of Heating, Refrigerating and Air-Conditioning Engineers, Inc. Ventilation and Acceptable Indoor Air Quality in Low-Rise Residential Buildings - ASHRAE Standard (ANSI/ASHRAE 62.2-2010). Atlanta, Georgia, 1992.
- 3) Macher, J. (Ed). "Bioaerosols: assessment and control", American Conference of Governmental Industrial Hygienists (ACGIH), Cincinnati, Ohio, 1999.
- 4) Environmental Protection Agency (EPA). Building Air Quality: A Guide for Building Owners and Facility Managers. December, 1991.
- 5) Indoor Environmental Standards Organization. (Presentation June 2003) Standards of Practice for the Assessment of Indoor Environmental Quality, Volume 1: Mold Sampling; Assessment of Mold Contamination. Indoor Environmental Standards Organization, Rockville, MD.
- 6) Spengler, J. D., Samet, J.M., Mendelsohn, J.F. Indoor Air Quality Handbook. January, 2001.
- 7) Institute of Inspection, Cleaning and Restoration Certification (IICRC). Standard and Reference Guide for Professional Water Damage Restoration - ANSI/IICRC 5500, April 2006. Vancouver, Washington.
- 8) International Code Council. International Property Maintenance Code (IPMC), 2012.
- 9) Burroughs, H.E., Hansen, S. Managing Indoor Air Quality (3), 2004.
- 10) Prezant, B., Weekes, D.M., Miller, J.D. Recognition, Evaluation, and Control of Indoor Mold, 2008.





# GENERAL GOALS FOR A HOME ASSESSMENT REPORT

**Avoid information overload.**

**Communicate in a way that makes sense to the resident.**

**Communicate the bad AND the good.**

**Use photos from the home to reinforce issues.**

**Address the resident's concerns.**

**Provide specific actions the resident can take.**

**Connect the assessment with interventions.**



# Creating a Scope of Work

## What is going to be done?

1. Repair the . . .
2. Install a . . .
3. Remove . . .

## How will it be done?

1. . . . labeled in accordance with . . .
2. Installed in accordance with . . .
3. . . rating of no more than . . .



# Creating a Scope of Work

What is going to be done?

## Issues and Owner/Landlord Recommended Actions to take

**Issue:** Exhaust fan/light fixture was loose and missing a cover in the bathroom located on the first floor.

**Action(s):**

- 1) Re-attach and install a cover on the exhaust fan in the bathroom
- 2) Operate fan during, and for 15 - 20 minutes after taking shower/bath to help decrease the humidity level during and to prevent mold and bacteria growth.



# Creating a Scope of Work

How will it be done?

Example from  
the NREL  
Standard Work  
Specifications

## 6.6003.1 Surface-Mounted Ducted

Topic: Exhaust

☆ Favorite

Subtopic: Fans

Desired Outcome: Surface-mounted ducted fans installed to specification

Note: The authority having jurisdiction may require that a licensed professional perform certain tasks outlined in this detail.

For supporting material, see [Referenced Standards](#) and [Calculation of the Infiltration Credit](#).

Single-Family Homes

Manufactured Housing

<input type="checkbox"/> Select All		Print	Copy to Excel	Email
	TITLE	SPECIFICATION(S)	OBJECTIVE(S)	
<input type="checkbox"/>	6.6003.1a Hole through interior surface	A hole no greater than a 1/4" greater than the assembly will be cut to accommodate fan assembly	Minimize repair work Ensure a secure installation	
<input type="checkbox"/>	6.6003.1b Wiring	Wiring will be installed in accordance with original equipment manufacturer specifications, and local and national electrical and mechanical codes	Prevent an electrical hazard	
<input type="checkbox"/>	6.6003.1c Fan mounting	Fan outlet will be oriented toward the final termination location  Fan will be oriented so the equivalent length of the duct run is as short as possible  Fan will be mounted securely in accordance with manufacturer specifications	Ensure short duct run to achieve optimum air flow  Ensure a secure installation  Ensure fan housing does not shake, rattle, or hum when operating	
<input type="checkbox"/>	6.6003.1d <a href="#">Backdraft damper</a>	A <a href="#">backdraft damper</a> will be installed between the outlet side of the fan and the exterior	Prevent reverse air flow when the fan is off	
<input type="checkbox"/>	6.6003.1e	Duct-to-fan outlet will be	Exhaust to outside	





# STAY CALM AND EDUCATE



**OR**



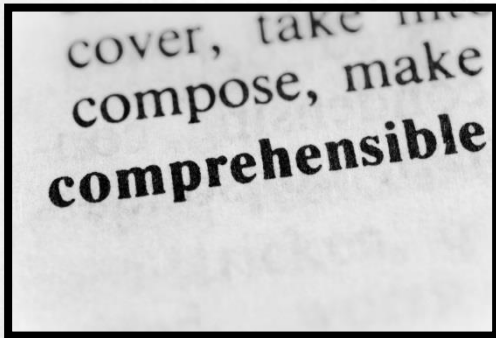


# In-Home Education



## Grab the Moment

*A teachable moment might be part of a sit-down conversation, or NOT. It might be as you're doing the visual assessment.*



## You're Not Making Sense

*We get it. You like being an expert. Everyone does. But rein that in and focus on keeping information relevant and understandable.*

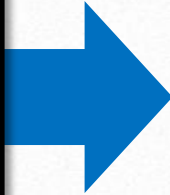


## It's Always About Health

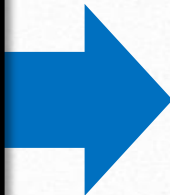
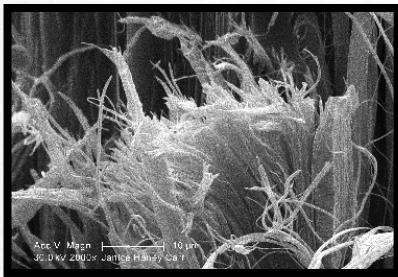
*With healthy homes, the absolute bottom line is health. Always connect back to that.*



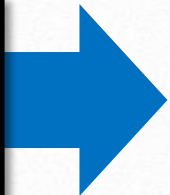
# Referrals



Lead risk  
assessment



Asbestos  
assessment



Community  
services



Other?

Mold

Radon



# RESOURCES TO HELP CLIENTS IMPROVE THEIR HOME

---

**Look for programs in your community-**

---

Community Development Organizations

---

Neighborhood Improvement Organizations

---

Home Weatherization Programs

---

Utility sponsored energy efficiency grants

---

HUD Healthy Homes Grant Programs





# OTHER LOCAL RESOURCES

Minor Home Repair Programs

Asthma Coalitions

Chronic Disease Coalitions

School Nurse and Social Worker

Faith-Based Organizations



# ENVIRONMENTAL INTERVENTION- LEVERAGING RESOURCES

## Donated Healthy Homes Supplies

- Smoke Detectors- Red Cross, Fire Dept.
- CO Detectors- Some Fire Depts
- Radon Test Kits - State Radon Offices
- Child Safety Kits - Child Advocacy Organizations

## Discounted Healthy Homes Supplies

- Home supply manufacturers (filters, paint, caulk, etc)
- Hardware stores- local or national
- Home Improvement - some more receptive than others
- National retailers - have local donation committees
- Buy local so families can find replacement supplies and buy local too.





# WHAT WOULD YOU DO?

1. Get together with your partner.
2. Your trainer will give you one card for each of two scenarios. For one scenario, you'll get a resident card and for the other, you'll get the HHE card. Don't share your cards with your partner.
3. Spend 10 minutes reading the scenarios and preparing what you would do as the HHE.
4. Practice role playing your approach to working with a resident in the scenario in which you are an HHE. Your partner will play the resident.

