

Appendix 2 – Guidance and definitions

Housing Health and Safety Rating System

The Housing Act 2004 transformed the way in which the standard of properties is assessed. For over 40 years properties were assessed using the 'fitness standard', which over the course of time did not address the hazards present in all homes. The 2004 Act introduced the concept of applying a risk assessment to dwellings contained within the Housing Health and Safety Rating System.

The Housing Health and Safety Rating System (HHSRS) sets out 29 hazards listed below:

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|------------------------------|---|
| • Damp & mould growth | • Food safety |
| • Excess cold | • Personal hygiene |
| • Excess heat | • Water supply |
| • Asbestos & MMF | • Falls (baths) |
| • Biocides | • Falls (level surfaces) |
| • Carbon monoxide | • Falls (stairs) |
| • Lead | • Falls (between levels) |
| • Radiation | • Electrical hazards |
| • Uncombusted fuels | • Fire |
| • Volatile organic compounds | • Flames, hot surfaces |
| • Crowding and space | • Collision & entrapment |
| • Entry by intruders | • Explosions |
| • Lighting | • Position and operability of amenities |
| • Noise | • Structural collapse |
| • Domestic hygiene | |

The assessment of hazards is a two-stage process: addressing first the likelihood of an occurrence and then the range of probable harm outcomes.

Stage 1: Likelihood of an occurrence

The first stage is to assess the likelihood (over and above the average as defined within the rating system for that type and age of property) of a "relevant occupier" (i.e. the most vulnerable type of occupier) suffering any harm as a result of the identified hazard.

Stage 2: Range of probable harm outcomes

The next stage is to assess which of the four classes of harm a relevant occupier is most likely to suffer. The classes of harm are as follows:

- Class I – Extreme harm, including:
 - Death
 - Lung cancer
 - Permanent paralysis
 - 80% burns
- Class II – Severe harm, including:
 - Cardio-respiratory diseases

- Mild stroke
 - Loss of hand or foot
 - Serious burns
- Class III – Serious harm, including:
 - Gastro-enteritis
 - Diarrhoea
 - Mild heart attack
 - Loss of a finger
- Class IV – Moderate harm including:
 - Pleural plaques
 - Broken finger
 - Moderate cuts to face or body
 - Regular serious coughs or colds.

Having completed these two stages the officer will arrive at a hazard score and in turn a hazard banding, detailed below:

Numerical Score Range	Band
5,000 or more	A
2,000 – 4,999	B
1,000 – 1,999	C
500 – 999	D
200 – 499	E
100 – 199	F
50 – 99	G
20 – 49	H
10 – 19	I
9 or less	J

Hazards that fall within Band A – C are classed as Category 1 hazards, for which the Council has a duty to carry out enforcement action. Hazards that fall within bands D – J are classed as Category 2 hazards, for which the Council has the option to carry out enforcement action. The choice of enforcement action available to the Council include:

- An improvement notice;
- A prohibition order
- A hazard awareness notice
- Emergency remediation action
- Emergency prohibition order
- A demolition order
- Declaration of a clearance area

What is an House in Multiple Occupation ?

The Housing Act 2004 has introduced a new definition of a House in Multiple Occupation (HMO). In general terms, a premise will be an HMO if it is one of the following:

- **A shared house** lived in by people who belong to more than one family and who share one or more facilities.
- **A house in bedsits** lived in by people who belong to more than one family and who share one or more facilities.
- **An individual flat** lived in by people who belong to more than one family and who share one or more facilities.
- **A building of self-contained flats** that do not meet 1991 Building Regulation standards.

Definitions

Family – husband, wife, co-habitee, child, step-child, foster-child, grandchild, parent, step-parent, foster-parent, grandparent, brother, half-brother, sister, half-sister, aunt, uncle, niece, nephew, cousin.

Facilities – basic amenities: wc; wash hand basin, shower, bath; cooking facilities.

One of the other significant changes effected by the 2004 Act is the introduction of mandatory licensing for certain HMOs. In general terms, the mandatory licensing requirements only apply to HMOs that:

- Are occupied by at least five persons; and,
- Are occupied by persons living in two or more single households.
- And comprises of wholly or partly shared facilities, or where the accommodation is not fully self-contained.

The intention of this threshold is to ensure that those HMOs that constitute the greatest fire risk are subject to licensing. As part of the application for a licence, certain prescribed information must be submitted to the Council.