

Consultation on draft guideline – deadline for comments 5pm on 09/08/19 email: IndoorAir@nice.org.uk

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| | <p>Please read the checklist for submitting comments at the end of this form. We cannot accept forms that are not filled in correctly.</p> <p>We would like to hear your views on the draft recommendations presented in the guideline, and any comments you may have on the rationale and impact sections in the guideline and the evidence presented in the evidence reviews documents. We would also welcome views on the Equality Impact Assessment.</p> <p>In addition to your comments below on our guideline documents, we would like to hear your views on these questions:</p> <ol style="list-style-type: none"> 1. Which areas will have the biggest impact on practice and be challenging to implement? Please say for whom and why. 2. Would implementation of any of the draft recommendations have significant cost implications? 3. What would help users overcome any challenges? (For example, existing practical resources or national initiatives, or examples of good practice.) <p>See section 3.9 of Developing NICE guidance: how to get involved for suggestions of general points to think about when commenting.</p> |
| <p>Organisation name – Stakeholder or respondent (if you are responding as an individual rather than a registered stakeholder please leave blank):</p> | <p>[Policy Connect]</p> |
| <p>Disclosure Please disclose any past or current, direct or indirect links to, or funding from, the tobacco industry.</p> | <p>[None to disclose]</p> |

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| Name of commentator person completing form: | | [Oliver Buckley-Mellor] | | |
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| Type | | [office use only] | | |
| Comment number | Document [guideline, evidence review A, B, C etc., methods or other (please specify which)] | Page number Or 'general' for comments on whole document | Line number Or 'general' for comments on whole document | Comments |
| | | | | <p>Insert each comment in a new row. Do not paste other tables into this table, because your comments could get lost – type directly into this table.</p> |
| 1 | Guideline | General | General | <p>Informing health professionals about carbon monoxide and its risk factors is essential to reducing incidents, improving indoor air quality, and saving lives. The draft guidelines address several areas that contribute to the risk of carbon monoxide exposure (such as insufficient ventilation) but these causative links are not explicitly discussed.</p> <p>We recommend future guidance directly highlights these risk factors and provides additional information on topics including: the usage of carbon monoxide alarms; which groups are more vulnerable to carbon monoxide; and why regularly servicing fuel-burning appliances (such as boilers) is needed to prevent carbon monoxide exposure and maintain indoor air quality.</p> |
| 2 | Guideline | General | General | <p>Although the draft guidelines acknowledge how individual risk factors (such as housing quality and age) affect the likelihood and impact of poor indoor air quality, the relationships between these factors have been ignored.</p> <p>For example, young children are both more susceptible to the effects of carbon monoxide exposure and more likely to be exposed because children are disproportionately affected by poverty (according to the House of Commons Library). Living in poverty increases their risk of living in poor-quality housing without a carbon monoxide alarm or regularly serviced fuel-burning appliances, which both increase the risk of carbon monoxide exposure. Additionally, living in poverty increases a household's risk of being in fuel poverty, which research from National Energy Action shows has a positive correlation with the risk of carbon monoxide exposure.</p> |

Indoor air quality at home

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| | | | | It is essential that future guidance explicitly acknowledges these relationships if health professionals are to make effective home visits. We therefore recommend NICE guidance clearly explains how individual risk factors for indoor air quality can affect each other and compound this risk. |
| 3 | Guideline | 4 | 3 | Whilst we welcome NICE’s acknowledgement of poor-quality housing as a risk factor, we recommend this guidance is accompanied by information on why a lack of carbon monoxide alarms increases the risk of carbon monoxide exposure and poor indoor air quality. |
| 4 | Guideline | 5 | 15-18 | We welcome support for the use of visual inspections and sensors to improve indoor air quality in homes and we recommend NICE guidance highlights the utility of carbon monoxide monitors in achieving this goal. |
| 5 | Guideline | 5 | 19-22 | We welcome the usage of existing home visits to identify poor indoor air in homes and we recommend NICE guidance highlights specific risk factors related to carbon monoxide exposure, such as a lack of carbon monoxide alarms, insufficient ventilation, and the use of un-serviced fuel-burning appliances. We also recommend NICE guidance acknowledges how carbon monoxide can leak between conjoined buildings, which is a risk factor that may not be addressed by individual home visits. |
| 6 | Guideline | 8 | 1-6 | We support NICE advising people to increase ventilation when using fuel-burning appliances. However, it is essential that NICE acknowledges how socioeconomic factors can complicate this recommendation. For example, households in fuel poverty may intentionally block or limit ventilation in order to reduce heat loss and vicariously their energy costs. We recommend NICE guidance explicitly acknowledges socioeconomic factors such as fuel poverty when discussing heating and ventilation in order to fully inform health professionals who inspect ventilation systems. |
| 7 | Guideline | 8 | 10-15 | Whilst we support providing health professionals with guidance on landlord obligations pertinent to indoor air quality, we recommend providing more detailed information on key regulations, such as The Smoke and Carbon Monoxide Alarm Regulations 2015, and the role they play in maintaining indoor air quality. |
| 8 | Guideline | 9 | 9-11 | We recommend NICE’s guidance specify carbon monoxide exposure as being particularly hazardous to people with respiratory or cardiovascular conditions. |
| 9 | Guideline | 10 | 5-23 | We recommend NICE’s guidance specify carbon monoxide exposure as being particularly hazardous to pregnant people, fetuses, and young children. |
| 10 | Guideline | 11 | 17-23 | We recommend NICE’s guidance specify which indoor air quality hazards (such as carbon monoxide exposure) are affected by using adequate ventilation. |
| 11 | Guideline | 12 | 7-8 | We strongly support NICE’s guidance on ensuring energy efficiency measures maintain the effectiveness of ventilation, as this is essential in reducing the risk of carbon monoxide exposure. |
| 12 | Guideline | 14 | 12 | We strongly recommend that NICE guidance specifies landlord obligations pertinent to indoor air quality – especially the obligation to carry out Gas Safety Checks and for certain landlords to install carbon monoxide alarms – as this will inform health professionals who make home visits. |

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| 13 | Guideline | 17 | 18-22 | We welcome NICE's acknowledgement of poor-quality housing as a risk factor for indoor air quality; however, we recommend future guidance is more specific in order to aid health professionals identify hazards, such as a lack of carbon monoxide alarms or un-serviced fuel-burning appliances. |
| 14 | Guideline | 18 | 28-29 | We agree that 'staff who visit vulnerable people in their homes are ideally placed to report on poor housing conditions'. We therefore recommend these staff are given detailed guidance on the training needed to identify risk factors including a lack of carbon monoxide alarms, un-serviced fuel-burning appliances, and a reliance on secondary heating systems such as gas hobs. |
| 15 | Guideline | 19 | 3-6 | We agree that devices which measure pollutants, such as carbon monoxide alarms, are becoming increasingly common and this is being driven by their declining cost and growing lifespan. |
| 16 | Guideline | 20 | 25 | We recommend NICE explicitly acknowledge the barriers preventing tenants from reporting their landlords to Local Authorities – such as the threat of eviction – and account for these when justifying their recommendations. |
| 17 | Guideline | 22 | 26-30 | We welcome NICE's recognition of the barriers preventing tenants from carrying remedial work (such as servicing a boiler) and the health risks these pose. We recommend NICE guidance provides healthcare professionals with information on how to advise these tenants and address these barriers. |
| 18 | Guideline | 24 | 10-15 | We recommend NICE's guidance explicitly acknowledge how open solid-fuel fires can increase the risk of carbon monoxide exposure if used in confined and insufficiently ventilated spaces. This includes the improper usage of barbeques in confined and unventilated spaces. |
| 19 | Guideline | 26 | 12-15 | We recommend NICE's guidance specifies carbon monoxide exposure as being particularly hazardous to people with respiratory or cardiovascular conditions. |
| 20 | Guideline | 27 | 17-21 | We recommend NICE's guidance specifies carbon monoxide exposure as being particularly hazardous to pregnant people, fetuses, and young children. |
| 21 | Guideline | 28 | 2-4 | Whilst it is encouraging that NICE recognises the need for training specific to indoor air quality, we recommend NICE provides greater detail on the contents of this training and how it could be delivered in practice given the limited time of healthcare professionals. |
| 22 | Guideline | 28 | 15-18 | We strongly support using the World Health Organization's guidelines on indoor air pollutants (such as carbon monoxide) as the basis for national regulations or guidelines. |
| 23 | Guideline | 33 | 4 | We recommend NICE explicitly acknowledge landlord obligations regarding carbon monoxide alarms under The Smoke and Carbon Monoxide Alarm (England) Regulations 2015, particularly in relation to home visits that inspect heating and ventilation systems. |

Insert extra rows as needed

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Checklist for submitting comments

- Use this comment form and submit it as a **Word document (not a PDF)**.
- Complete the disclosure about links with, or funding from, the tobacco industry.
- Include **page and line number (not section number)** of the text each comment is about.
- Combine all comments from your organisation into 1 response. **We cannot accept more than 1 response from each organisation.**
- Do not paste other tables into this table – type directly into the table.
- **Mark any confidential information or other material that you do not wish to be made public. Also, ensure you state in your email to NICE that your submission includes confidential comments.**
- Do not include medical information about yourself or another person from which you or the person could be identified.
- Spell out any abbreviations you use
- For copyright reasons, comment forms **do not include attachments** such as research articles, letters or leaflets (for copyright reasons). We return comments forms that have attachments without reading them. The stakeholder may resubmit the form without attachments, but it must be received by the deadline.
- **We do not accept comments submitted after the deadline stated for close of consultation.**

You can see any guidance that we have produced on topics related to this guideline by checking [NICE Pathways](#).

Note: We reserve the right to summarise and edit comments received during consultations, or not to publish them at all, if we consider the comments are too long, or publication would be unlawful or otherwise inappropriate.

Comments received during our consultations are published in the interests of openness and transparency, and to promote understanding of how recommendations are developed. The comments are published as a record of the comments we received, and are not endorsed by NICE, its officers or advisory Committees. Further information regarding our privacy information can be found at our [privacy notice](#) on our website.