Blackfriars Hall Accommodation Ventilation Strategy

Last reviewed: February 2026

1. Objectives

- Ensure all **student bedrooms** and **common areas** meet Oxford City Council HMO expectations for *adequate natural and/or mechanical ventilation*.
- Minimise damp, mould growth, and poor indoor air quality as required under the *Housing Health and Safety Rating System (HHSRS)*, which applies to all HMOs.
- Provide a clear system for routine maintenance, staff responsibility, and annual inspection.

2. Ventilation Requirements (HMO-Aligned)

2.1 Bedrooms

As required by local HMO standards, bedrooms must have **adequate natural light and ventilation**, meaning:

- **Opening windows** large enough to permit adequate airflow and purge ventilation in warm months.
- Windows must be operable by the occupant and free of obstructions.
- Where natural ventilation is limited (e.g., small rooms, restricted openings), **supplementary mechanical ventilation** (e.g., trickle vents, heat-recovery ventilators) should be installed to maintain acceptable air quality.

2.2 Common Areas (Hallways, Kitchens, Living Rooms)

- All shared rooms must provide adequate ventilation under HMO minimum standards, which include safety and health protections under HHSRS.
- **Kitchens:**
    - Must have either a suitably sized opening window OR
    - A **mechanical extractor fan** ducted to the outside (recommended extraction ≥ 60 L/s at hob level or 30 L/s intermittent).
- **Bathrooms and WCs:**
    - Should have mechanical extraction (minimum intermittent extraction recommended 15 L/s) ducted to outside.
- **Communal living rooms:**
    - Must have at least one opening window or mechanical ventilation providing continuous background airflow.

2.3 Damp and Condensation Control

- Ventilation systems must be adequate to prevent damp and mould, which is a key hazard under the HHSRS and must be addressed for all HMOs as part of required standards inspections.

- Rooms must maintain airflow at a level that prevents condensation on cold surfaces.
- Kitchens and bathrooms should have **boosted mechanical extraction** to remove excess humidity.

3. Design Elements of the Ventilation Strategy

3.1 Natural Ventilation Measures

- Ensure windows in all bedrooms and shared rooms open at least **1/20th of the floor area** (best practice), enabling daily purge ventilation.
- Fit **trickle vents** to window frames where feasible.
- Install security restrictors that still permit safe ventilation where needed on ground-floor windows.

3.2 Mechanical Ventilation Measures

- Install extractor fans in:
    - Kitchens
    - Bathrooms
    - Internal rooms with no direct window
- Fans must:
    - Be ducted to the exterior
    - Have overrun timers (20–30 minutes recommended)
    - Run quietly enough to avoid tenant disablement
- Consider **continuous mechanical ventilation (MVHR)** in areas with persistent condensation risk.

3.3 Tenant Guidance

- Provide residents with instructions on how to use windows, ventilation controls, and extractor fans safely and effectively.
- Include condensation-avoidance advice (e.g., covering pans, using lids, avoiding drying clothes indoors without ventilation).

3.4 Maintenance Responsibilities

- Facilities team ensures ventilation units are functioning, clean, and compliant.
- Issues reported via the Hall's maintenance request system must be investigated promptly to remain compliant with HMO standards and management regulations.

Annual Ventilation Inspection Schedule

This schedule ensures compliance with Oxford City Council HMO licensing duties, which require properties to meet standards verified through inspections and ongoing maintenance obligations.

1. Inspection Frequency

- **Annual Full Ventilation Inspection** (once every 12 months).

- **Mid-Year Ventilation Check** (optional but recommended at 6 months).
- **Reactive Inspections** whenever tenants report ventilation or damp issues.

2. Annual Inspection Checklist

2.1 Bedrooms

- Confirm windows open freely and provide adequate natural ventilation.
- Check trickle vents (if installed) are unobstructed.
- Inspect for condensation, mould, or stale air.
- Test supplementary mechanical ventilation where installed.

2.2 Kitchens

- Test extractor fan function, airflow strength, and noise level.
- Confirm ducting is clear and discharging externally.
- Check for signs of condensation or grease accumulation.

2.3 Bathrooms/WCs

- Test mechanical extraction; verify overrun timer settings.
- Check ducting and grilles for blockages.
- Inspect for mould around ceilings and windows.

2.4 Communal Areas

- Confirm opening windows (if present) function correctly.
- Ensure airflow paths are not blocked by furniture or stored items.
- Check mechanical ventilation systems in interior hallways if present.

2.5 Damp and Mould Assessment

- Conduct a room-by-room inspection for condensation spots, mould, or damp odour.
- Record findings and schedule remediation if required.

2.6 Documentation

- Record findings in the annual compliance file (required for all licensed HMOs) and retain evidence for inspection.
- Update maintenance schedules and action lists in accordance with management regulations and HHSRS duties.

3. Follow-Up & Compliance Recording

- All issues identified during inspections must be logged, assigned, and resolved within a defined timescale.
- Completed works must be documented in the Hall's records to demonstrate compliance with HMO licence conditions.

- The Hall should retain ventilation records for at least the duration of each HMO licensing cycle.

4. Summary

This ventilation strategy ensures:

- Compliance with **Oxford City Council HMO standards** for natural light and ventilation in bedrooms and common areas.
- Alignment with minimum health and safety expectations under the **Housing Health and Safety Rating System** and **management regulations**, both of which apply to all HMOs.
- A structured annual inspection process to maintain ventilation performance, prevent damp and mould, and protect occupant wellbeing.