

# Newport Healthy Homes - Health and Visual Assessment

Baseline Report

Start Date:  to End Date:

**Table 1: Number of People with Characteristics in the Home**

Characteristic	Number of Homes	Total Number	Average Number
Live in home			
Have Asthma			
Smoke			

**Table 2: Percent of Homes with Characteristics**

Characteristic	Number of Homes	Percent Yes	Percent No	Percent Don't know or Refused
Anyone with asthma				
Anyone that smokes				
Anyone that smokes in the home				
Have cockroaches, mice, rats or bedbugs in last 4 months				
Have cockroaches in last 4 months				
Have mice in last 4 months				
Have rats in last 4 months				
Have bedbugs in last 4 months				
If pests in last 4 months, seen pests in > 4 rooms				
If pests in last 4 months, used spray or fogger				
If pests in last 4 months, in past year, has there been a 24 hour period with excessive heat?				
If pests in last 4 months, in past year, has there been a 24 hour period with excessive cold?				
Evidence of water leaks				
Roof leak				
Plumbing leak				
Basement leak				
Window leak				
Air conditioner leak				
Other leak				
If evidence of water leaks, is location currently wet?				
Damp/musty odor in dwelling				
Damp/musty odor in kitchen				
Damp/musty odor in bedroom				
Damp/musty odor in bathroom				
Damp/musty odor in basement				
Damp/musty odor in other room				
Visual evidence of a pest problem				

**Table 3: Evidence of Mold in Bathroom and Non-Bathroom Room**

Question	Category	Percent (number)
Evidence of mold in non-bathroom room	<2 feet	
	2 ft or more	
	None	
Evidence of mold in bathroom	<1 foot	
	1 ft or more	
	None	

**Table 4: Percent of People with Characteristics**

Question (number of people)	Number of People	Percent Yes	Percent No	Percent Don't know or Refused
Have Health Insurance				
Regular Source of primary medical care				
If asthma, out of control				

**Table 5: Frequency Distribution of the Number of Cigarettes Smoked per Day in the Home**

Category	Percent (Number)
None-only smoke outside	
<6	
7-12	
13-24	
>24	
Refused	

**Table 6: Number of Days with Asthma Events for People with Asthma**

Question	Time Period	All people with Asthma			People with Reported Days > 0	
		Number of People	Total (sum)	Average	Number of People > 0 reports	Average
If < 18 years, days school missed	Last month					
	Last year					
If >= 18 years, days work missed	Last month					
	Last year					
Days spent in hospital	Last month					
	Last year					
Days in the Emergency Department	Last month					
	Last year					