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Development of an assessment methodology for IAQ ventilation performance in residential buildings: An investigation of relevant performance indicators

- 4
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10 Abstract

11 Ventilation of residential buildings is an important area of research, since it addresses 12 crucial issues: providing healthy indoor air to occupants, avoiding condensation risk and 13 damage of the building, as well as ensuring energy efficiency. With regard to regulatory or 14 labeling requirements, performance-based approaches for ventilation should be developed. 15 These must ensure that a ventilation system is designed not only to save energy but also to avoid risks to occupants' health. In order to formulate a performance-based approach, a 16 crucial question has to be addressed: What are the relevant indoor air quality (IAQ) 17 18 performance indicators to be calculated? In this paper, we present an extensive 19 investigation of the literature on IAQ performance in order to identify a reduced set of relevant indicators. We identified five relevant IAQ performance indicators to be used as 20 21 output data: maximum cumulative exceeding carbon dioxide (CO₂) exposure over 1,000 22 ppm, maximum cumulative occupant formaldehyde (HCHO) and fine particulate matter 23 (PM_{2.5}) exposure, maximum percentage of time with relative humidity (RH) higher than 70%

⁶ Evelyne Gonze^b

(condensation risk), and maximum percentage of time with RH outside a range of 30–70%
(health risk). Importantly, we demonstrate that a performance-based method using these
five IAQ indicators is relevant, applying it to a low-energy house.

27 Keywords Ventilation, indoor air quality, performance, residential buildings, indicator,
28 review

29 Introduction

30 Since people spend 60–90% of their life in indoor environments (e.g., homes, offices, 31 schools), and because indoor air is generally more polluted than outdoor air, indoor air 32 quality (IAQ) is a major factor affecting public health [1–4]. For example, Logue et al. [5] estimated that the current harm to public health in disability-adjusted life years (DALYs) per 33 34 person-year from all sources attributable to IAQ, excluding second-hand smoke (SHS) and 35 radon, was somewhere in the range between the health effects of road traffic accidents 36 (4,000 μDALYs/person-year) and all-cause heart disease (11,000 μDALYs/person-year). 37 According to the World Health Organization (WHO) [6], 99,000 deaths in Europe and 81,000 38 in the Americas were attributable to household (indoor) air pollution in 2012. Health gains 39 in the European Union (EU-26) due to effective implementation of IAQ requirements are 40 very important: these have been estimated at more than 300,000 DALYs per year [6].

The main role of building ventilation is to ensure correct IAQ. The different regulations and standards throughout the world are mainly based on "prescriptive" approaches, using airflows or air change rate requirements as performance indicators [7–11]. For example, the French building code for residential ventilation imposes air renewal rates adapted to the house size and the type of ventilation system (different airflow rates are required for constant airflow ventilation and for humidity-controlled ventilation) [12].

However, with the same ventilation rates, we could achieve a wide range of IAQ levels. As a
result, standards and regulations generally set ventilation rates on the basis of comfort
considerations and not on health criteria, as suggested in the Healthvent project [16,17].
These are all based on the assumption that airflows evacuating human bioeffluents,
including odors, are sufficient means of controlling other contaminants [18,19], which,
however, cannot be guaranteed.

53 The European standard 15665 [13] proposed IAQ performance indicators for assessing 54 ventilation performance, but the long list of criteria, as well as the lack of selection of 55 parameters used to calculate these criteria, has made it inapplicable to date [9,14].

56 A "performance-based" approach, where achieved IAQ is checked at the design stage of a 57 building, is still lacking in regulations and standards and needs to be developed for building 58 ventilation [15]. The main purpose would be to evaluate IAQ performance level by 59 considering the ventilation systems globally, rather than checking ventilation rates only.

From a review of performance-based approaches applied to residential ventilation [16], we
learned that such methods were rare and almost always use IAQ indicators based on carbon
dioxide (CO₂) and humidity (condensation risk) only.

63 Choosing relevant pollutants and relevant indicators to assess IAQ levels in residential 64 buildings is a challenging task; indeed, the list of identified indoor pollutants is long and may 65 still grow [17]. Several reviews devoted to measurement studies of concentration levels in 66 buildings have been conducted, discussing acceptable values and proposing metrics to 67 assess IAQ performance and health impact [5,18,19]. However, there is still no consensus in 68 the literature on which pollutants are the most important to be considered, which precise 69 indicators should be used, and how to compute them at the design stage of a building. The

70 answers to these questions are a necessary step for performance-based assessment and

71 represent the research gap addressed in our paper.

72 Moreover, the choice of IAQ performance indicators, being the main output of a

73 performance-based method, also impacts the other steps of performance assessment:

74 inputs and process, as shown in Figure 1.



75

76

Figure 1. Schematic diagram illustrating a performance-based approach for ventilation at the design stage of a
 residential building.

79

In this paper, we propose an extensive review and analysis of the literature dealing with IAQ performance indicators in order to identify a reduced set of relevant indicators to be used in performance-based approaches, going beyond the only two historical indicators used today based on CO₂ and humidity. We then demonstrate that the proposed set of IAQ indicators can be applied in a performance-based approach to ventilation system assessment, illustrating this based on a case study.

86 Methodology for the literature investigation

87 There is no consensus on a reduced set of IAQ performance indicators to be used in a 88 performance-based method for ventilation, as illustrated by the long list of performance indicators proposed in the European EN 15665 standard "Ventilation for buildings. 89 90 Determining performance criteria for residential ventilation systems" [13] and by the on-91 going research for its revision. The recent International Energy Agency's Energy in Buildings 92 (IEA-EBC) Annex 68 "Indoor air quality design and control in low energy residential buildings" 93 proposed metrics to evaluate the IAQ of low-energy residential buildings based on 14 94 pollutants of concern [20].

95 In this paper, we used three important definitions given in the EN 15665 standard:

96 - **Parameter:** pollutant or marker that is used in the expression of a requirement

97 - **Criteria/performance indicator:** way (method) to express the required performance

98 - **Requirement/threshold**: level of required performance.

99 The first part of the paper addresses the first issue: the analysis and selection of the relevant 100 parameters in residential dwellings. The second part of the paper goes on to analyze the 101 corresponding IAQ performance indicators based on the selected parameters and the 102 corresponding requirements (or thresholds). Then, the third part of the paper proposes a 103 selection of five IAQ performance indicators and the corresponding requirements (or 104 thresholds) to which they should be compared in a performance-based approach. Lastly, 105 this paper presents the results of an application on a low energy house, using the selected 106 IAQ indicators to compare the performances of three ventilation systems.

107 We reviewed standards (European Committee for Standardization [CEN] and American108 Society of Heating, Refrigerating and Air-Conditioning Engineers [ASHRAE]), published

literature, regulations from European countries, as well as resources from the Air Infiltration and Ventilation Center (AIVC, IEA-EBC Annex 5) related to residential building ventilation IAQ performance, using the keywords: ventilation performance, IAQ performance indicator, ventilation IAQ performance, ventilation IAQ criteria, IAQ criteria, performance-based ventilation. We selected only the literature relevant for the assessment of ventilation systems performance. As a result, 82 documents from 1983 to 2020 were analyzed in this paper.

Review of parameters of concern for ventilation performance assessment

117 In order to select the most relevant parameters for the evaluation of ventilation 118 performance, this study was motivated by a number of points: parameters already used for 119 the evaluation of ventilation systems performance; pollutants presenting a major health 120 issue because they are commonly observed and have a strong health impact; and pollutants 121 relevant for ventilation performance assessment because they are impossible to reduce at 122 source, such as those related to human metabolism or kitchen activities. We started from 123 the two commonly used parameters, CO₂ and humidity, and extended our research framework to identify other pollutants that could complement them. 124

125 General studies on pollutants of concern

A starting point for our investigation was the AIVC technical note *"TN 68: Residential Ventilation and Health"* [17]. Authors considered existing guidelines and standards, hazard assessment, cumulative risk assessment, as well as impact assessment exposure studies, and proposed a selection of high-priority pollutants for residential ventilation standards (Table 1). They confirmed the importance of considering fine particulate matter (PM_{2.5}), formaldehyde (HCHO) and acrolein, as pointed out elsewhere [5]. In that particular paper

[5], the authors estimated the population-averaged annual cost in DALYs lost due to chronic
air pollutant inhalation in U.S. residential dwellings. The paper presents the results in DALYs
lost per year per 100,000 persons for the 12 pollutants with the highest median DALY losses
(PM_{2.5}, HCHO, acrolein, ozone, nitrogen dioxide [NO₂], ammonia, acetaldehyde,
crotonaldehyde, 1.1-dichloroethene, styrene, carbon tetrachloride, 1.4-dichlorobenzene,
chromium, + acute carbon monoxide [CO] deaths, radon and SHS for comparison).

138 CO, radon and SHS were excluded in Table 1. Indeed, in the context of ventilation standards, 139 it is important to consider ventilation as a way to dilute remaining pollutants once their 140 sources have been reduced. From this perspective, Borsboom et al. [17] propose that 141 tobacco smoke and radon should not be considered when establishing ventilation 142 standards. Although these pollutants were clearly identified in a cumulative risk assessment 143 study [5] and an impact assessment of chronic residential exposure [19], they are more 144 impacted by home characteristics (such as the depressurization of subfloors for radon) and 145 occupant behavior than by ventilation strategies [17]. We can assume that CO is, likewise, 146 not a pollutant suitable for assessing ventilation performance, as shown by the results of a 147 study [21] in which adjusting the stove had a greater impact than changes in airflows.

148 Table 1. Selection of pollutants in residential ventilation standards [13]

Н	igh-priority pollutants for chronic exposure (ranked by population impact)	High-priority pollutants for acute exposure
1.	Particulate matter	Acrolein, chloroform, CO, HCHO, NO ₂ , PM _{2.5}
2.	Mold and moisture	
3.	Formaldehyde	
4.	Acrolein	

149

150 $PM_{2.5}$ are defined as particles with an aerodynamic diameter equal or inferior to 2.5 μ m, 151 also known as fine particles. They are emitted inside and outside mainly during combustion 152 (natural and anthropic). They can become the main contributor to the indoor pollutant 153 concentration [22]. Furthermore, due to their small dimension, these particles can 154 penetrate the human airways to varying depths and may even infiltrate the blood [23]. The 155 inhalation of these particles has a wide range of effects, from eye, nose, or throat irritation 156 to respiratory or cardiovascular dysfunction (such as myocardial infarction or stroke) 157 depending on the time and intensity of exposure [24]. As a result, several studies identified 158 PM_{2.5} as one of the pollutants of concern in dwellings [25,26,5,17]. Moreover, Logue et al. 159 [5] estimated that PM_{2.5} have a huge impact in terms of the total health damage due to 160 indoor air pollutants in the DALY calculation. The French Agency for Food, Environmental 161 and Occupational Health and Safety (ANSES) concluded that the socioeconomic cost of 162 indoor air pollutants, calculated on the basis of early mortality alone, was €19.5 billion per 163 year, of which €14.5 billion was directly attributable to suspended particulate matter [27]. 164 Therefore, we decided to retain PM_{2.5}.

165 HCHO is a common volatile organic compound (VOC) that is interesting to survey in 166 dwellings for many reasons, as proposed in [5,17]. Firstly, this substance is recognized as 167 having wide-ranging health impacts, depending on the concentration as well as acute and 168 chronic exposure. Effects are known to range from eye irritation to nasopharyngeal cancer 169 (deemed to be unattributable to confounding factors), and are suspected to include other 170 neurologic, reprotoxic, and carcinogenic effects [28–30]. Secondly, this pollutant is nearly 171 always present in homes, and it is also produced almost exclusively indoors (up to 10 times 172 more than outside) due to the huge quantity of indoor emitting materials, furniture, and 173 products [31]. It can also result from the oxidation or reaction of other VOCs into alkene and 174 ozone [32]. As a result, several studies identified HCHO as one of the pollutants of concern 175 in dwellings [25,33,26,19,5,17], and we consequently decided to retain it.

176 In addition, humidity is one of the prioritized pollutants of concern identified in Table 1.177 Indeed, the WHO shows the relationships between adverse health effects such as

178 respiratory and allergic symptoms and damp or moldy indoor environments [34]. The risk of 179 mold has been clearly linked to the lack of performance of ventilation systems and the 180 energy efficiency programs that tend to decrease the indoor air temperature [35].

Criteria	Pollutant	PM _{2.5}	SHS	Radon	нсно	Acrolein	CO (acute)	NO ₂	Chloroform	CO2	H ₂ O
Parameters already used as i	ndicators	-								x	x
Health issue based on [5] ran	king	1	2	3-6	4	5	7	8	9		x
Adapted to ventilation perform	rmance evaluation	x			x	x		x	x	x	x
Total		1x	2	3-6	4x	5x	7	8x	9x	хх	xxx
Selected parameters		х			х					х	х

Table 1. Criteria and identified pollutants for the selection of parameters for ventilation performance assessment

181 Moreover, a review of performance-based approaches used in standards and regulations 182 dedicated to smart ventilation showed that the performance indicators most widely used 183 included criteria based on humidity to avoid condensation risk, as in France and Belgium 184 [16].

Finally, in Table 2, we cross-tabulated the main pollutants previously discussed in the literature analysis with the three criteria we defined to characterize a relevant parameter for IAQ performance indicators. When deciding between the pollutants with health issues and also suited to ventilation performance evolution, such as HCHO, acrolein and NO₂, we gave priority to those with a greater impact on health. Therefore, using IAQ performance indicators based on at least the pollutants HCHO, humidity, and PM_{2.5} to assess ventilation performance appears important for risk avoidance. Moreover, CO₂ has already been used as an IAQ indicator, even if its role as a pollutant is not yet clearly established, as will bediscussed in the following section.

194 A focus on CO₂

There is debate in the literature regarding whether CO₂ should be considered a pollutant,
despite the fact that it has no health consequences at concentrations observed in residential
dwellings, or whether it could be considered as a relevant marker in ventilation standards.

198 Indeed, several studies have shown that health effects directly attributable to CO₂ are 199 minimal at concentrations observed in indoor environments, which are commonly in the 200 range of 350–2000 ppm, and sometimes up to 6000 ppm in bedrooms during night periods 201 [36]. The American Conference of Governmental Industrial Hygienists considers 5000 ppm 202 to be the threshold for 8-h exposure in indoor environments [37]. In 2013, the ANSES 203 published results of an analysis of available CO₂ epidemiological and toxicological studies, as 204 well as of studies on the effects of CO₂ on health, performance, and comfort [38]. On the 205 basis of the results, it was concluded that the only health threshold on which several studies 206 converge is exposure of 10,000 ppm for 30 min, corresponding to respiratory acidosis for a 207 healthy adult at a modest level of physical exertion. The analysis mentions an experimental 208 study [39] of 22 human subjects, suggesting an effect on psychomotricity performance 209 above 1000 ppm attributable to CO₂ but which, according to the authors, still requires 210 further investigation. In addition, 1000 ppm is the old threshold proposed by Von 211 Pettenkofer in 1858 to prevent odors from bioeffluents, assuming an outside concentration of 500 ppm [40]. Other studies of specific applications such as bomb shelters, submarines 212 213 [41], and high-risk industrial facilities and homes [42] have used higher threshold values for CO₂. They confirm that CO₂ is not dangerous by itself at the levels measured in residential
buildings.

216 The recent study by [43] shows different results. A total of 25 individuals were exposed for 217 4 h 15 min, first to pure CO₂ (at either 1000 ppm or 3000 ppm) and then, by decreasing the 218 ventilation rate, to all emissions from occupants (called "human bioeffluents"), including CO₂, and corresponding CO₂ levels (of either 1000 ppm or 3000 ppm). No statistically 219 220 significant effects were observed in the first case; the second showed an increase in 221 reported headaches, fatigue, sleepiness, and difficulty in thinking clearly. The authors 222 conclude that moderate concentrations of bioeffluents, but not pure CO2, will affect 223 occupants at typical indoor exposure levels. This can also be seen as a study of dose-224 response relationships between human bioeffluents, including CO₂, and indicators of health, 225 wellbeing, and performance.

From the threshold values summarized in Table 3, we highlight that, despite the consensus that pure CO_2 has no effect on human health at concentrations observed in residential settings, moderate concentrations of human bioeffluents, including CO_2 , will affect occupants at typical indoor exposure levels.

Table 3. CO₂ concentration levels and their associated health effect found in the literature: no effect linked to
 pure CO₂ exposition; an effect but an effect for human bioeffluents at typical indoor exposure levels

Effects	CO ₂ threshold [ppm]	Comments	References
Comfort	1000	To prevent odors from bioeffluents	(Von Pettenkofer, 1858) [40]
No effect	1000 or 3000 for 4 h 15 min	Pure CO ₂	(Zhang, et al., 2016) [43]
Increasing intensity of reported			(Zhang, et al., 2016) [43]
headache, fatigue, sleepiness,	1000 or 3000	Metabolic CO ₂ +	
and difficulty thinking clearly	for 4 h 15 min	human bio-effluents	
Hygienic threshold in indoor environments	5000	For 8-h exposure	(ACGIH, 2011) [37]

Respiratory acidosis for a healthy adult at a modest level of physical exertion	10,000	For 0.5 h	Several studies reviewed in (ANSES 2013) [38]
Bomb shelters	20,000		(de Gids and Heijnen, 2011) [41]
Submarine	30,000		(de Gids and Heijnen, 2011) [41]
Irreversible effects	50,000		(French Ministry for Ecology, 2007) [42]
Mortality level			(de Gids and Heijnen, 2011) [41]
- 1% lethal effects threshold	100,000		(French Ministry for Ecology, 2007) [42]
- 5% lethal effects threshold	200,000		(French Ministry for Ecology, 2007) [42]

232

233 Moreover, several authors agree that CO₂ is a good marker of occupant emissions, including 234 bio-emissions and odors [40,44-46,43], as well as some VOC and particle emissions from 235 office equipment used by occupants [47–49]. Emmerich and Persily, 2011 [48] justify the use 236 of CO₂ as an indicator of ventilation rate per person based on regulations or standards, since 237 the relationship between indoor CO₂ concentration and ventilation rates is well understood 238 and described in [50–52]. It has also been recommended that CO₂ be monitored to mitigate 239 the risk of virus transmission during the COVID-19 pandemic and used, for example, as a 240 traffic light indicator based on CO₂ level (yellow/orange light is set to 800 ppm and the red 241 light up to 1000 ppm) [53]. Other slightly different values have been applied in specific 242 countries such as France [54] and Belgium [55]. All analyzed performance-based approaches 243 used in regulations and standards for smart ventilation have used performance indicators 244 based on CO₂ [16], as have most of the analyzed literature on smart ventilation performance 245 [56].

In summary, the analyzed literature shows that using CO_2 is relevant as a parameter for performance-based approaches for ventilation. Indeed, it is at least correlated with bioeffluents, which affect occupant health at CO_2 concentrations widely measured in dwellings. Therefore, CO_2 is relevant, but needs to be used with other parameters.

250 Review of IAQ ventilation performance indicators and thresholds based on

251 the selected parameters of concern

252 Once the parameters have been identified, relevant IAQ performance indicators also need 253 to be determined. However, qualifying and quantifying IAQ is a complex issue. For each 254 parameter, there are several ways of using measured or calculated data related to the 255 individual parameter. Performance indicators could be related to background or peak 256 exposures, or may be calculated over different time periods (whole year/heating period/one 257 standardized week in the winter, etc.). Depending on the information we are looking for, it 258 can be relevant to calculate the indicators per occupant (dose or exposure) or per zone 259 (condensation risk), including either the whole building, specific zones, or all zones, etc.

260 Pollutants with dose–response law-based indicators

Most of the performance indicators based on pollutants in the literature come from measurement campaigns and are related to comparisons with a given threshold, set to different levels depending on guides and regulations in different countries and referred to as "IAQ metrics." The IEA-EBC Annex 68 "*Indoor air quality design and control in low energy residential buildings*" [18] proposed using three IAQ metrics:

For long-term exposure: the maximum value, among the pollutants of concern, of
 the ratio between the mean concentration and the reference exposure limit value

268 (ELV) set to the minimal value used worldwide, i.e., 9 μ g/m³ for HCHO [57] and 10 269 μ g/m³ for PM_{2.5} [26]

For short-term exposure: the maximum value among the pollutants of concern of the
 ratio between the mean concentration, over the reference period for the reference
 acute ELV, and the related acute ELV set to the minimum value used worldwide, i.e.,
 for HCHO, 123 μg/m³ for HCHO over 1 h (Canada) and 25 μg/m³ for PM_{2.5} over 24 h
 (WHO)

275 - The DALY metric described elsewhere [5].

Other studies use a different approach based on the dose-response law approach [58–60]. The dose depends on the cumulative exposure, which is an indicator calculated per person as shown by Equation 1 [61]. This indicator is rarely used in an in situ measurement context, as it would need to be calculated to know exactly where occupants are in the house at each time step and to measure the concentrations in each of the rooms, as well as at each time step. At the design stage of a building, it can be calculated starting from occupancy schedules used as input data.

283

 $CumExp_i = \sum_{t=0}^{d} C(t) \cdot \Delta t$

284

(Equation 1)

where the cumulative exposure CumExp_i (kg.m⁻³.h) for an occupant *i*, is the sum of C(t)pollutant concentration level (in kg.m⁻³) to which the occupant is exposed at the instant *t*, multiplied by the time step Δt (depending on the measurement or the simulation time step) and *d* the total duration (of the measurement or the simulation).

The average occupant exposure, AvgExp, is another performance indicator proposed by the EN 15665 [13]. It is defined as the average concentration to which an occupant is exposed. It can be obtained by dividing the cumulative exposure by the total duration of thesimulation (Equation 2).

294

where $AvgExp_j$ (in kg.m⁻³) is the ratio between $CumExp_j$ (in kg.m⁻³) and the total duration *d*.

AvgExp_i = $\frac{\sum_{t=0}^{d} C(t) \cdot \Delta t}{d} = \frac{\text{CumExp}_{i}}{d}$

In a more general way, the EN 15665 standard [13] also proposes using the following IAQ performance indicators depending on whether they are related to specific activities or background pollution:

For specific activities: maximum threshold, average and weighted concentration,
 average exceeding concentration over a threshold value, dose above a given value,
 decay criteria, time to obtain a percentage of the maximum value, and value after a
 certain time

For background pollutants: maximum threshold, average and weighted
 concentration, average exceeding concentration over a threshold value, and dose
 above a given value

306 Table 4 provides an overview of the pollutants with dose–response law-based performance307 indicators.

308	Table 4. Pollutant-based performance indicators in the reviewed literature
-----	--

Performance indicators Thresholds		References	
Thr	ee IAQ metrics		
-	$C_{long-term}/ELV_{long-term}$	$ELV_{long-term}$ = 9 µg/m ³ for HCHO	
		and 10 μg/m ³ for PM _{2.5}	
-	Cshort-term/ELVacute	ELV _{acute} = 123 μ g/m ³ over 1 h for HCHO and 25 μ g/m ³ over 24 h for particulate matter PM _{2.5}	[18]
-	DALY	No threshold	
Cu	mulative exposure $CumExp_i$ or	Depending on pollutant; ELV . <i>d</i> (µg.m ⁻³ .h)	[62]

(Equation 2)

309

310 *Humidity-based indicators*

We also reviewed IAQ performance indicators related to humidity. Variables associated with humidity are relative humidity (RH) and absolute humidity. RH is the ratio of water vapor pressure in the air at a given temperature to the saturation water vapor pressure at the same temperature. Absolute humidity is the mass of water vapor in the air per unit mass of air. It is rarely used as an IAQ performance indicator (EN 16798-1 [11]). RH is the parameter most commonly measured and used, as shown in Table 5.

317 Performance indicators related to humidity can be divided into two categories:

 To assess occupant comfort and health: indicators related to an acceptable range and number of hours out of this range, as proposed in the standard EN 15665[13].
 For example, some authors [65,66] note than the minimum thresholds for RH vary within the range of 20–30%, while the maximum thresholds vary in the range of 65– 80%. Very rarely, only the number of hours when RH is lower than a threshold should be calculated. Mansson et al. [67] propose that the number of hours with RH lower than 30% should not exceed 800 h.

2. To assess the condensation risk in a building: the number of hours during a given period with humidity higher than a given threshold, set to 75% in the French regulation for demand-controlled ventilation (DCV) [68] or to 80% in the former Belgium regulation for DCV [69]. In Nordic countries, however, strongly varying thresholds could be set, with [70] proposing 45%.

- 330 Some authors, such as Woloszyn et al. [71], propose more detailed indicators as boxplots,
- 331 which are also relevant for scientific analysis. However, they are less appropriate for use in a
- 332 regulatory context.
- 333 This part of the literature is summarized in Table 5.

334 Table 5. Humidity-based performance indicators in the reviewed literature

Performance indicators	Thresholds	References
Absolute humidity	< 12 g/kg	EN 16798-1 [11]
Number of hours with RH < 30%	< 800 h	
4-Week period with water vapor content < 7g/kg	< 0	[67]
during the heating season		
RH	Usual range [min; max]	
	Min [20–40%]	[65]
	Max [60–80%]	
RH	Acceptable range	[72] and TR 14788
	[30; 70%]	[73]
Number of hours with RH under or over the range	Not given	
Time ratio when the value of RH is over the range		EN 15665 [13]
during a selected period		
RH boxplot	[40; 50%]	Inspired by EN
		15251 [71,74]
Number of hours with RH >75%	WC and main room < 100 h	French regulation
Over the heating period	Kitchen < 600 h	for DCV [68]
	Bathroom < 1000 h	
Time per month during which critical thermal	No absolute threshold	Former Belgian
bridges are exposed to RH > 80% from December 1		regulation for DCV
to March 1		[69]
Number of hours with RH > 45% (in Nordic countries)	Not given	[70]

335

336 *CO*₂-based indicators

We reviewed IAQ performance indicators related to CO₂. The EN 15655 (CEN, 2009) standard proposes using four different indicators for a background pollutant: the average concentration, the weighted concentration, the average exceeding concentration above a threshold value, and the dose above a threshold value. Concentrations can be compared with four classes in order to assess the IAQ level, as proposed by several standards such as EN 16798-1 [11], the Finnish Society of Indoor Air Quality and Climate (FISIAQ) [75], and EN 343 13779 [76], assuming an outdoor concentration of 400 ppm: CO₂ lower than 750 or
344 800 ppm, between 750/800 ppm and 900/1000 ppm, between 900/1000 ppm and
345 1200/1400 ppm, and higher.

Based on this approach, Ribéron et al. proposed using the air stuffiness index for homes (ICONE) [77]. This index is given in (Equation 3) as a log function of the percentage of time when the measured CO_2 concentration at night is higher than 1000 ppm (f1), and 1700 ppm (f2), in the main bedroom and the living room:

350
$$I_{ICONE} = 8.3 \log(1 + f_1 + 3f_2)$$

351

(Equation 3)

Recent studies on ventilation performance [9,78] used a large set of indicators (six): cumulative exposure over 1000 ppm (ppm.h), standardized by the duration of the heating period or by the exceeding period; average exceeding concentration above 1000 ppm; average concentration; percentage of time spent in four classes based on the three thresholds (400, 600, and 1000 ppm) above outdoor concentration; exposure cumulative frequency plot; and standard deviation of concentrations.

Most of the performance-based approaches for ventilation reviewed in [16] (from France, Spain, The Netherlands, and Belgium), as well as some references such as the IEA (Mansson, [67], p. 27) and several papers [9,79–81], propose adapting the "dose" concept initially used for pollutants and calculating a cumulative exceeding exposure over thresholds varying between 950 ppm and 2000 ppm. These are sometimes calculated per room or per person, and the calculation period can also vary (whole year, several definitions of heating period, etc.), as described in the last lines of Table 6.

Table 6 summarizes CO₂-based performance indicators and associated thresholds in the reviewed literature.

367 Table 6. CO₂-based performance indicators and thresholds in the reviewed literature

CO ₂ -based performance indicators	Thresholds	References					
Average concentration, weighted concentration, average	Four classes based on	EN 15655					
exceeding concentration above a threshold value, dose above		(backaround					
a threshold value	750·900·1200 (ppm)	nollutant) [13]					
	750, 500, 1200 (ppin)						
	800-1000-1400	EN 16708-1 [11] +					
	800, 1000, 1400						
	(ppm)	[/5]					
	above Coutdoor	EN 13779 [76]					
The air stuffiness index for homes, ICONE	Not given (relative	[77]					
$I_{ICONE} = 8.3 \log(1 + f_1 + 3f_2)$	comparison)	[//]					
- Cumulative exposure over 1000 ppm (ppm.h):	Not given (relative						
standardized by the heating period duration or by the	comparison)						
exceeding period							
- Average exceeding concentration above 1000 nnm		[9,78]					
A verage exceeding concentration above 1000 ppm							
- Average concentration							
- Percentage of time spent in four classes based on the							

three thresholds	(400, 600,	1000 ppm)	(outdoor=0)
------------------	------------	-----------	-------------

- Exposure cumulative frequency plot

 Standard deviation of concentrations 		
Cumulative exposure over 1050 ppm (ppm.h)	Not given (relative	Annex 27 IEA [67]
	comparison	
Cumulative exposure indicator over 2000 ppm (ppm.h) in	400,000 ppm.h	French regulation
each room		for DCV
		[68]
Yearly averaged concentration in each room	900 ppm	Spanish regulation
Yearly cumulative exposure over 1600 ppm in each room	500,000 ppm.h	for ventilation
		[82]
Per-person cumulative exposure over 950 ppm	Not given	Former Belgian
	(relative comparison)	regulation for DCV
	· · · ·	[69]
Per-person exposure index over 1200 ppm (LKI ₁₂₀₀)		

$$LKI_{1200} = \sum_{t=0}^{I} \left(\frac{C_{CO_2 > 1200}(t) - 1200}{1000} \right) * t \qquad \begin{array}{c} 30,000 \text{ ppm.h} \\ for DCV [83] \end{array}$$

368 Proposal for a reduced set of performance indicators and associated

369 thresholds

The challenge in our investigation consists in identifying and selecting, from the long lists of indicators described in Tables 4–6, a reduced set of performance indicators to assess the IAQ performance of ventilation at the design stage of a building. Indeed, if we compare our approach with the ones developed for energy performance, usually only two or three performance indicators are used (total primary energy consumption, summer comfort indicator, renewables integration indicator, etc.).

376 Since we identified four relevant parameters: HCHO, humidity, CO₂, and PM_{2.5}, to assess 377 ventilation performance, we wanted at least one performance indicator per parameter. We 378 proposed two indicators for humidity, since we wanted to assess two separate risks: the 379 condensation risk (building damage risk and indirect health risk to occupants) and the direct 380 health risk. For pollutants with dose–response laws, HCHO and PM_{2.5}, our investigation considered the cumulative exposure indicator as important at the design stage of a building. Indeed, it is directly related to the response on health, and dose thresholds have been proposed in the literature from dose–response studies [62]. In our work, we focused on long-term exposure. We also considered the maximum cumulative exposure among the occupants of a home as the most relevant performance indicator related to pollutants at the dwelling scale: *MaxExp* (Equation 4).

388 This could be compared with the cumulative exposure corresponding to the reference ELV 389 set to the minimum value used worldwide, as proposed by Cony Renaud Salis et al. [18].

390
$$MaxExp = \max_{i} \left(\sum_{t=0}^{d} C(t) \Delta t \right) = \max_{i} (CumExp_{i})$$

391

(Equation 4)

392 where *i* is related to the building occupants.

393 Therefore, we proposed a reduced set of five IAQ performance indicators based on health 394 and building preservation, including one indicator based on the bedrooms where occupants 395 spent most of their time[1,3], one indicator based on all rooms, and three indicators based 396 on occupants:

- 397 I_{CO2} = Cumulative CO₂ exposure exceeding the reference value (for instance: over
 398 1000 ppm) maximum of all bedrooms
- 399 I_{HCHO} = Cumulative HCHO exposure of occupants maximum of all occupants (health
 400 risk)
- 401 IPM2.5 = Cumulative PM2.5 exposure of occupants maximum of all occupants (health
 402 risk)

403 - I_{RH70} = Percentage of time with RH higher than a threshold (for instance: 70%) – 404 maximum of all rooms (condensation risk)

- 405 I_{RH30_70} = Percentage of time spent by an occupant with RH outside of a given range
 406 (for instance: 30%–70%) maximum of all occupants (health risk)
- 407 The time intervals to be calculated over a total duration time *d* correspond to the heating 408 period for mild climates where air conditioning is rare (as in France).

409 These performance indicators could then be compared with selected thresholds. In order to 410 illustrate this proposal, we selected published thresholds presented in Table 7 and adapted 411 them to a simulation duration d in hours. For CO₂, HCHO, and PM_{2.5}, we propose comparing 412 the calculated cumulative exposure to the threshold exposure corresponding to a constant threshold concentration (1000 ppm, 9 µg.m⁻³, and 10 µg.m⁻³, respectively) during the entire 413 414 simulation. For the maximum time spent with RH >70% in all the rooms, we propose 415 comparing it to the ratio between the number of hours thresholds and the duration *d* used 416 in technical agreements for French DCV [68]. In this reference, the thresholds for number of 417 hours with RH >75% are 1000 h in bathrooms, 600 h in the kitchen, and 100 h in all other 418 rooms. With a simulation duration equal to 5568 h (during the heating period from 1 Oct to 419 20 May), we obtain the thresholds expressed in percentages equal to 18%, 10.8%, and 1.8%, 420 respectively. We propose keeping the distinction made between rooms, calculating local 421 indicators $(I_{RH70,r})$ for each of the three types of rooms.

For the maximum time spent indoors by an occupant with RH out of the range 30–70%, we propose comparing it to the ratio between a threshold and the duration *d*. Mansson [84] proposes the threshold of 800 h for time spent with RH <30%, but using three different heating period durations *d* depending on the location (Nice 13 Nov–27 Apr; London 27

426 Sept-20 May ; Ottawa 2 Oct-20 May). We calculated the ratio as a percentage threshold

427 with the Ottawa duration equal to 5544 h, in order to have a duration *d* close to the one

428 used for the I_{RH70} thresholds and to keep the same order of magnitude.

Table 7. Selected IAQ performance indicators and corresponding thresholds calculated for a simulation duration
 d (hours).

IA	Q performance indicators	Thresholds	Reference used to calculate the indicator
I _{CO2}	Maximum cumulative exceeding CO ₂ exposure over 1000 ppm in the bedrooms (BR) (ppm.h)	1000 <i>d</i> (ppm.h)	[43] 1000 ppm combined with occupants' bioeffluents
І _{нсно}	Maximum cumulative occupant HCHO exposure (μg.m ⁻³ .h)	9 <i>d (</i> μg.m ⁻³ .h)	[18] 9 μg.m ⁻³ proposed as the ELV for HCHO
I _{PM2.5}	Maximum cumulative occupant PM _{2.5} exposure (μg.m ⁻³ .h)	10 <i>d</i> (μg.m ⁻³ .h)	[18] 10 μg.m ⁻³ proposed as the ELV for PM _{2.5}
I _{RH70,r}	Maximum time spent with RH >70% By room r (%)	Bathrooms: 18% Kitchen: 10.8% Other rooms: 1.8%	[68] 1000 h/600 h/100 h are the thresholds for RH >75% in bathrooms/kitchen/other We keep these values in a conservative approach
I _{RH30_70}	Maximum time spent by the occupant with RH out of 30–70% (%)	14.4%	[67] 800 h is the threshold for RH <30%. We select the value of 800 h in a conservative approach

431

437

432 Results could be given with the radar approach as proposed in Figure 2, plotting each 433 normalized indicator (Equations 5 & 6), which must be lower than 1 for a regulatory 434 approach requiring compliance with thresholds values, as illustrated in black line on the 435 radar.

436
$$I^{n} = \frac{I}{Threshold'} \text{ for } I^{n}_{CO2}, I^{n}_{HCHO}, I^{n}_{PM2.5}, I^{n}_{30,70}$$

(Equation 5)

438
$$I^n = \max_r \left(\frac{l_r}{Threshold(r)}\right); \text{ for } I^n_{RH70}$$

439

(Equation 6)

These could also be required to be lower than 80% to claim an IAQ label, as illustrated by the gray dotted line on the radar. In the given case for a completely hypothetical "House A," changes must be made to the ventilation design (and/or also to occupant behavior to



reduce emissions levels) in order to allow the ratios I^{n}_{CO2} and $I^{n}_{PM2.5}$, to be lower than 1.

Figure 2. Visualization proposal: calculated IAQ indicator ratios with their thresholds at the design stage of
 "House A." The black pentagon illustrates the required thresholds by the regulations (ratio=1). The dotted gray
 pentagon could illustrate a better performance results expected for an IAQ label (ratio=0.8).

447

448 Application to a case study: a low-energy house

- 449 *Case study*
- 450 The case study is a low-energy, two-storey detached brick house, as shown in Figure 3 and
- 451 described in [85]. We assume being at the design stage of this house, which must comply
- 452 with a hypothetical regulation, code, or label, requiring the proposed IAQ ventilation
- 453 performance indicators to be calculated according to the proposed method.



456

Figure 3. Plan of the house studied: (a) ground floor (b) first floor.

Airflows, RH, PM_{2.5}, CO₂, and HCHO concentrations were computed using numerical 457 458 modeling with CONTAM software [86]. The house was modeled using 11 zones, each room 459 represented by one zone. A 10-min time step was selected with weather data for a typical 460 year in Lyon, France (ASHRAE IWEC Weather file, 2001). The calculation was performed over 461 the heating period from October 15, 00:00 AM, to April 14, 12:00 PM, accounting for 4366 simulated hours. The inside temperature was set to 20°C during this period. The wind at the 462 463 building was calculated from the weather data using a 0.3287 modifier factor, resulting from 464 a power law used with factors from a suburban area and the house being 8.5 m in elevation. 465 The pressure coefficients from the EN 15242 were used, assuming no barrier, i.e., +0.5 on the upwind facades and -0.7 on the downwind facades. 466

467 The moisture buffering effect was represented using the boundary layer diffusion model in 468 CONTAM. The simplified particles phenomena implemented in CONTAM were used with a default penetration rate of 1, a deposition velocity using 0.65 m.h⁻¹, and 9.90 .10⁻⁷ h⁻¹ as 469 470 indoor particle resuspension rate based on measured median values in a four-resident 471 dwelling given in [87]. We used the pollutant emission data and occupancy schedules 472 proposed in an extensive review [88], as summarized in Figure 4. Only three indoor emission 473 scenarios (low/medium/high) for HCHO and PM_{2.5} were simulated.







Figure 4. Scenarios of pollutant emission and occupancy schedules used (from [88])

476 Description of the three ventilation systems

477 Several options for the ventilation system were assessed, complying with French airing 478 regulations [89]:

- 479 1. An exhaust-only constant airflow ventilation system (EV)
- 480 2. A balanced constant airflow ventilation system (BV) (extracted airflows at each exhaust
- 481 component are the same for 1 and 2)
- 482 3. A humidity-based demand-controlled ventilation (DCV) system, considered to be one of
- 483 the references in France.

According to French regulations, for a seven-room house with two bathrooms and two toilets, a constant-airflow ventilation system must provide the following extracted flows: 30 m³.h⁻¹ in each bathroom, 15 m³.h⁻¹ in each toilet, and 45 m³.h⁻¹ in the kitchen. A high-speed ventilation system must also be able to provide 135 m³.h⁻¹ in the kitchen during peak periods. As a result, the total extracted airflow in the whole house is 135 m³.h⁻¹ during basic 489 mode and 225 m³.h⁻¹ during peak mode. The basic mode accounts for an average dwelling 490 air change rate of 0.4 h⁻¹.

491 The humidity DCV system adjusts the airflows according to the direct RH measurement 492 through the extensions and retractions of a hygroscopic fabric modifying the cross-section 493 of inlets and outlets [90]. In our case study, this system includes:

- A kitchen exhaust Air Terminal Device (ATD) providing an airflow of between 15 and
 55 m³.h⁻¹, and a peak airflow of 135 m³.h⁻¹ for 30 min if activated by the user
- Bathroom exhaust ATD providing an airflow of between 5 and 45 m³.h⁻¹
- Toilet exhaust ATD providing a constant airflow of 5 m³.h⁻¹, which could be switched
 to 30 m³.h⁻¹ for 20 min thanks to an occupancy sensor
- One trickle ventilator in each bedroom and two in the living room, with an operating
 rate of between 4 m³.h⁻¹ and 31 m³.h⁻¹ (reference pressure of 10 Pa).

502 Results and discussion

503 The main results of this case study are detailed in Table 8 for each of the three emission 504 scenarios (low/medium/high for HCHO and PM_{2.5}). Figure 5 focuses on the medium emission 505 scenarios as an example. It shows the IAQ performance of the three ventilation systems,



—Acceptable thresholds — Exhaust only ventilation — Balanced ventilation • • •Humiditiy controlled ventilation Figure 1. Normalized performance indicators for all three ventilation systems (medium emission scenarios)

assessed according to the five selected IAQ indicators for this case study.

507

508 With this performance-based approach applied to this study case, we can first observe that 509 none of these three ventilation systems either reaches all the IAQ targets or provides complying IAQ performance results. For example, the balanced ventilation system (BV) 510 provides the best IAQ in terms of CO₂, HCHO, and condensation risk. However, the DCV 511 system provides slightly better IAQ if one looks at the occupant-based humidity indicator, 512 513 with a I_{RH3070}^{n} result 10% lower. The EV system shows almost the same performances as 514 the DCV, except for the Iⁿ_{RH70} (condensation risk), for which this system is 67% less efficient 515 than the DCV system. Indeed, this condensation risk score is reached in bedrooms: for the 516 EV and DCV systems, the uncontrolled infiltration airflows are higher than for the BV 517 systems. As a consequence, the air inlet flows in bedrooms vary more, and can be lower for 518 EV and DCV than for BV systems. With the BV, the entering airflows in the bedrooms are 519 therefore higher compared to EV, leading to higher air change rates and, as a result, a lower 520 level of humidity in the bedrooms. In addition, DCV outperforms EV. This result confirms 521 that the DCV strategy provides a clear benefit over EV, despite lower airflows during low 522 humidity periods. Finally, the three system responses are close in terms of Iⁿ_{PM2.5} indicators, 523 and none reaches the acceptable threshold. Indeed, the airflow provided at high speed during cooking periods is the same in the three systems, and seems to not be efficient 524 525 enough to remove PM_{2.5} during peak emission.

Table 8. Ventilation system performance results based on the five normalized IAQ indicators with input scenario
 variations for HCHO and PM_{2.5}

Normalized indicator (with associated scenario)									
Ventilation system	I ⁿ co2	I ⁿ _{RH30_70}	I ⁿ RH70		I ⁿ нсно	I ⁿ PM2,5			
				Low	Medium	High	Low	Medium	High
EV	1.17	0.82	2.18	0.52	1.06	1.88	1.21	1.76	2.31
DCV	1.16	0.78	1.3	0.53	1.09	1.94	1.3	1.78	2.33
BV	0.72	0.87	0.72	0.43	0.82	1.41	1.24	1.76	2.29

528

The performances are far from acceptable for the $I^{n}_{PM2.5}$ and I^{n}_{HCHO} , indicators, except for the low and medium HCHO emission scenarios. These results highlight the interest of this performance-based method, taking into account IAQ parameters other than the traditional CO₂ and humidity, for a better consideration of IAQ in the choice and design of ventilation strategy.

534 **Conclusion and perspectives**

535 In order to improve IAQ in buildings, we suggest that performance-based approaches should 536 be used to choose and design the ventilation strategy at the design stage of a given residential building. The first challenge was to identify a reduced set of relevant IAQ
performance indicators. As shown by the published literature, most of the IAQ performance
indicators already considered for the assessment of ventilation performance are based on
humidity and CO₂ only, and neglect other parameters.

In this paper, we first analyzed and selected the relevant parameters for the assessment of IAQ ventilation performance in residential settings. We then analyzed and selected the corresponding IAQ performance indicators based on the selected parameters and identified the corresponding requirements (or thresholds). We reviewed standards, the published literature, regulations in European countries, as well as resources from the AIVC.

As a result, based on four relevant parameters (HCHO, humidity, CO₂, and PM_{2.5}), we identified at least five relevant IAQ performance indicators (I_{CO2}, I_{HCHO}, I_{PM2.5}, I_{RH30_70}, I_{RH70}) to be used as output data of a ventilation performance assessment approach of this kind.

Applying such a performance-based method using these five indicators, we demonstrated in this paper how this could make it possible to compare the performance of three different ventilation strategies in a low-energy house. In this case, we observed a small advantage for the studied BV system on global IAQ performance and showed that humidity-based DCV, despite lower airflows during low-humidity periods, provides almost the same IAQ performance as EV-only ventilation, while clearly reducing condensation risk.

555 We also observed poor performances for indicators based on HCHO and PM_{2.5}, highlighting 556 the importance of taking into account IAQ parameters other than the traditional CO₂ and 557 humidity, for a better consideration of IAQ in performance-based approaches.

558 This list of performance indicators is intended to be improved as new knowledge in the field 559 becomes available, and can be expanded as soon as new pollutants of concern are

560	identified. Moreover, within a broader overall performance framework, these IAQ indicators
561	should be expanded to include energy performance indicators such as the energy losses or
562	electricity consumption of systems, virus transmission prevention, and acoustic comfort,
563	among others.
564	At present, this paper proposes a clear contribution to the development of performance-
565	based approaches for ventilation in residential buildings and the improvement of IAQ for
566	future occupants. Furthermore, the proposed IAQ indicators can also be used to process
567	data collected during IAQ measurement campaigns.

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