

Hull Local Plan: 2016 to 2032

SPD20 Houses in Multiple Occupation (HMOs)

Supplementary Planning Document

Consultation Statement

September 2022

1. Background

- 1.1 In preparing Supplementary Planning Documents (SPDs) the Council is required to follow the procedures laid down in the Town and Country Planning (Local Planning) (England) Regulation 2012.
- 1.2 Regulation 12 states that before adoption of a SPD the local planning authority must prepare a statement setting out:
 - the persons that the local authority consulted with when preparing the SPD;
 - a summary of the main issues raised by those persons; and
 - how those issues have been addressed in the SPD.
- 1.3 This Consultation Statement accompanies the Hull Affordable Housing Supplementary Planning Document. This document provides additional planning guidance on the following policy of the Hull Local Plan: 2016 to 2032, which was adopted on the 23rd November 2017:
 - Policy 7 Houses in Multiple Occupation, in particular part 2(a)

2. First Consultation

- 2.1 Preparation of a draft SPD was undertaken with input from officers from Planning Development Management, Housing Strategy & Renewal, and Environmental Health. The draft SPD progressed through the Council's committee regime and elected members had the opportunity to comment on the draft document. At Planning committee on 18th January 2022 and Cabinet on 24th January 2022, Members agreed to approve the draft SPD for consultation purposes.
- 2.2 The draft SPD was made available for public consultation between 31st January and 14th March 2022. A public notice to publicise this event was published in the Hull Daily Mail on Monday 31st January 2022.
- 2.3 The draft SPD and associated documentation was made available for inspection on the Council's website and at the following Council locations:

- Wilson Centre
- Guildhall reception
- 2.4 In addition, all consultees on the Council's local planning consultation database (around 70), and the Humber Landlords Association, were emailed directly with details of the consultation.
- 2.5 The draft SPD was also taken to Area Committees for their comments.

3. Consultation responses and issues raised

- 3.1 The Council received representations from only three respondents. The representations received and the Council's responses are set out in Appendix 1.
- 3.2 The majority of issues raised relate to the principle of HMOs rather than to HMO guidance. These issues will be considered in the local plan review process that has recently started.

4. Second Consultation

4.1 One representation (from Historic England) was received, and this is included in Appendix 1. No further changes to the document were required as a result of this representation.

5. Final SPD

5.1 The responses to the consultation were reviewed and it was considered that no changes to the SPD were necessary.

Appendix 1: Representations to SPD20 Consultation

Respondent	Comment	Council response
1. Consulted	e comments	
Avenues &	The response of the APPRA committee to this document was	The Council thanks the respondent for their comments.
Pearson Park	uncontentious: the adjective applied in discussion was that	
Residents'	the document is 'sound.'	SPDs are allowed only to provide guidance and advice on the
Association		implementation of existing policies. They cannot create new or
(APPRA)	However, as many of our houses are built in terraces, we	amend existing policy.
	notice that little attention is given to the particular	
	circumstances of adjoining houses. Usage seems to be	This SPD is concerned with a specific aspect of HMOs, i.e., defining
	defined only by numbers of occupants, not by the close	'concentrations'. It cannot deal with HMO policy more generally.
	proximity of dwellings. We think that more attention should	This must be considered in local plan policy. A review of the local
	be given to the difficulties experienced by residents whose	plan is about to begin, and HMO policy will be a topic for re-
	houses are not just next to each other, but share dividing	consideration. This will include the 50% threshold figure.
	walls. A resident spoke recently to a committee member	
	about a children's home nearby which houses only two	Many of the issues raised, such as noise and disturbance, are
	children: but there is still a level of frequent noise which	considerations within the existing local plan Policy 7 regarding
	would be unusual in a family home.	HMOs. Other issues (such as the suitability of mid-terrace
	Position de la contrata del contrata del contrata de la contrata del contrata de la contrata del contrata de la contrata del contrata de la contrata del co	properties for use as HMOs) can be considered during the
	Residents' attitudes are kind and accepting: there has to be	forthcoming local plan review.
	proper provision somewhere for the less fortunate and we, as	
	a community, would not wish to seem unwelcoming. But	
	terraces are built too close to each other for us to be happy	
	about an HMO mid-terrace; so, added to the rule banning the	
	use of three adjacent dwellings as HMOs and the rule preventing 'sandwiching' of a family home by HMOs, should	
	be consideration of the position and size of the house seeking	
	permission for a change of use to an HMO. There are some	
	very large local terraced houses which are too big for most	
	people to take on these days: no-one would contest their	
	division into flats or HMOs – and because they are commonly	
	built round a rather grand central staircase, there is sufficient	

internal space to provide a comfortable distance between the units of accommodation.

This is not, of course, the case in the smaller terraces where normal neighbouring sounds are accepted: the tread of neighbours going upstairs, for instance: or the hum of conversation through adjoining walls. This is well within the bounds of city living: but the more upsetting sounds of difficult behaviour, or perhaps just the frustrated cries of the speechless, are not comfortable sounds to live next to.

Consequently, we would like to see a lower proportion of HMOs allowed in terraced housing: we think there should be no more than 20% of our houses converted to multiple occupation, if that. Detached houses, surrounded by the buffer of their own space, are essentially preferable for conversion to institutional use, but should also be limited to the same 20% to ensure that the area retains the neighbourhood bonds – expectations and obligations – which should include all residents, regardless of whether they have chosen to live here or have been placed here.

Conservation Area Advisory Committee (CAAC)

As people living in residential areas across the city have expressed concerns about the proliferation of HMOs and the problems associated with them, we welcome the attention that HCC is giving to addressing these issues.

Please note that our comments refer to HMOs in general, but also to specific areas of difficulty in the Old Town Conservation Area, since that is the primary brief of CAAC.

OUR OBSERVATIONS

The Council thanks the respondent for their comments.

SPDs are allowed only to provide guidance and advice on the implementation of existing policies. They cannot create new or amend existing policy.

This SPD is concerned with a specific aspect of HMOs, i.e., defining 'concentrations'. It cannot deal with HMO policy more generally. This must be considered in local plan policy. A review of the local plan is about to begin, and HMO policy will be a topic for reconsideration. This will include the 50% threshold figure.

- 1) Minimal internal space standards:
- a) We have concerns that 150m2 floor space (see No.1 under Local Plan 2016-23 heading in SPD 20) is too small for seven people.
- b) Do the minimum internal space standards set out in Table 5.5 apply to the Old Town Conservation Area? We ask as we understood from a verbal comment from John Craig, when we met with him on 27.01.22, that the minimal internal space standards do not apply to HMOs or flats in the Old Town. We think that they should.
- 2) Concentration of HMOs:
- a) The proposed permitted proportion of 50% for HMOs in a specific street is too high. Such a concentration adversely affects the character and appearance of a street and area, and the sense of community. It is well-documented (and is mentioned in SPD 20) that HMOs can have a negative effect upon a locality in which they are situated: bins in and on frontages; severe parking problems, lack of a sense of ownership by tenants; lack of care of fabric by absentee landlords who have no stake in the area; anti-social behaviour, including noise and disturbance.
- b) The 50% concentration could easily be higher than is apparent by simply counting the number of HMOs, as HMOs tend to be in the larger properties in a street of mixed-sized properties; and thus the numbers of tenants in HMOs could easily exceed the numbers other types of residents. SPD 20 seems to assume that all the properties of a street are of equal size.

In relation to the specific points raised:

- 1) It is not possible to change to space standards as part of this exercise as that would constitute a policy change (as outlined above). It is correct that minimum space standards do *not* apply to housing in the city centre that is a new build/ conversion/ change of use. This was the recommendation of the local plan inspector owing to concerns about viability. However, minimum room sizes for HMOs apply throughout the city, including the city centre.
- 2) See comments above regarding limitations on what SPDs are allowed to cover. It should be noted that the 50% threshold is not 'proposed'. This is the current agreed policy. The case for a lower or variable threshold will be considered separately as part of the Local Plan review.
- 3) The government is clear that Article 4 Directions should not be applied in a blanket fashion across wide areas. Proposals for new Article 4 areas must be accompanied by evidence of the need for a Direction in the specific area. The potential need for Article 4 Directions in specific areas of the city, including the city centre/ Old Town, is kept under regular review and further consideration will be given through the review of the Local Plan.
- 4) and 5) Bin storage and refuse collection, along with parking, are taken into consideration when new applications for HMOs are determined. These matters are already included in Policy 7 and advice is sought from relevant Council sections when considering any planning application. The effectiveness of the current policy (including bins/ refuse and parking standards) will be considered through the review of the Local Plan.

- c) We consider that a 50/50 balance introduces detriment to a street. A lower level for HMOs (we suggest 25% and certainly no higher than 33%) would protect the integrity of residential areas and limit the negative effect of too many HMOs in a street.
- 3) The use of Article 4 Directions:
- a) We agree that Article 4 Directions should be used to control the change of dwelling houses to small HMOs. However, we think they should be adopted city-wide now and not just in specified individual areas, as conversions to HMOs have an impact on all residential areas. Our view is that this is important in the Old Town too, where residential conversions are becoming the norm with the decline of retail and commercial uses.
- b) Article 4 Directions should, as a priority, now be placed on all Conservation Areas.
- 4) Refuse collection/bins:
- a) The issue of refuse storage and collection in the Old Town is of paramount importance given the nature of its layout of narrow streets and narrow pavements, and lack of space for bins at the front of residential properties.
- b) Wheelie bins or the large containers usually used for commercial waste, are unacceptable at the front of properties. They are highly visually detrimental, as well as an impediment to the movement of pedestrians and mobility scooters.

Questions:

- (a) The Private Housing (Environmental Health) team has a statutory obligation to undertake an inspection of each HMO subject to mandatory licensing, during the course of its 5-year licence. This is to ensure that the property meets the conditions of the licence and to also check its state of repair. There are approximately 1,000 properties subject to HMO licensing.
 - In relation to other HMOs which are not subject to licensing within the city (as defined by the Housing Act 2004), inspections are undertaken if concerns are raised.
- (b) The Private Housing (Environmental Health) team maintains a "register" for all HMOs subject to mandatory licensing. This contains information on the permitted number of households and occupants within those properties. Any member of the public can access this register at the council's offices, for free, during working hours. A small charge of £50 is levied if individuals or companies request a copy of the full register.

With regards to other HMOs which are not subject to licensing within the city, the Private Housing (Environmental Health) team maintains a database of properties believed to be HMOs. The database contains the established or estimated number of units/ households and the maximum number of occupants it can contain. This information is as a result of direct involvement with the address or from alternative sources such as

- c) Proposals for conversion to HMOs must give details of dedicated storage areas. Thought must also be given by the Planning Department as to how refuse collection is made: in the narrow streets of the old town, normal-sized bin lorries will cause damage to original stone kerbs and pavements by having to override them.
- d) Where no private space exists off street for the storage of bins, planning permission for HMOs should be refused.
- e) All of the above points apply equally to flats.
- 5) Parking:
- a) In due course, we will be responding in writing to SPD 32 and Appendix C, and SPD5, as the issue of parking in the Old Town has ramifications for dealing with planning proposals for converting commercial properties to residential use other than HMOs.
- b) For now, we think clarification is needed on whether the tenants in HMOs are excluded from on street resident parking permit schemes.

QUESTIONS:

- a) What is HCC's inspection regime for HMOs after completion and occupation?
- b) Does HCC have a register of the number of HMO buildings in the city, which includes the following information:* number of units in each building

information provided by the landlord/ agent, planning applications, council tax or the electoral roll.

	* number of residents per HMO unit and building	
Historic England	No comments	Noted
Marine Management Organisation (MMO)	No comments	Noted
National Highways	No comments	Noted
Natural England	No comments	Noted
Resident of Dover	Issues for consideration (6):	The Council thanks the respondent for their comments.
	Para 1, lines 3 and 4: There is no acknowledgement here that what drives people to HMOs is largely poverty. Landlords take advantage of local housing allowances and price flats out of the budgets of single	SPDs are allowed only to provide guidance and advice on the implementation of existing policies. They cannot create new or amend existing policy.
	people. Landlords would rather have 6 single people paying to rent rooms than 3 people renting 3 flats. HMOs are also increasing male domains where women can be at risk, especially vulnerable women. HMOs are often populated with vulnerable people with a range of health conditions. Your description here does not reflect the reality those of us who	This SPD is concerned with a specific aspect of HMOs, i.e., defining 'concentrations'. It cannot deal with HMO policy more generally. This must be considered in local plan policy. A review of the local plan is about to begin, and HMO policy will be a topic for reconsideration. This will include the 50% threshold figure.
	live next to them experience daily. Para 6, line 1: 50% is far too high. The figure should be lower. Be honest about who HMOs serve (landlords) and what the risks are. If 50% of buildings are HMOs, then the percentage of households in any street will be far greater. If a street of 20	The comments on drivers for the need for HMOs are noted but the fact remains that there is a need for such housing in the city and the Government sees this form of housing as meeting that need, at least in part. The supporting text in the Local Plan highlights the fact that HMOs often provide accommodation for people with limited housing options and more vulnerable people.
	buildings has 10 C3 dwellings and 10 C4 HMOs, that means 60	The 50% threshold is intended to protect the supply of single family houses in any given area. It is accepted that HMOs result in

households will be in 10 buildings if each HMO contained 6 people. That's 85% of households in half of the street.

People deserve space. People deserve their own kitchen and bathroom. People deserve affordable rents for flats, not being cramped in a single room. This is 2022 not 1882.

This consultation was not well publicised, indeed I only found out about it accidentally on the Sunday afternoon before the deadline. Had I had more time, my thoughts may have been better considered over several days, not ten minutes. Please publicise these consultations more widely in future.

an intensification of use in an area and the policy is intended to control that – to protect residential amenity. The extent to which it is successful in doing so (including the use of a 50% threshold) will be explored through the review of the Local Plan.

The Local Plan sets out minimum standards for HMOs. The Council does not have any control over rents charged in such properties.

The consultation was advertised on the Council's website, in the local press and by email to parties who have registered an interest in Hull's planning policies. However, the Council is always open to suggestions on how it can carry out consultations more effectively. In addition, as part of the review of the Local Plan there will be a number of separate opportunities to comment on the HMO policy and indeed other parts of the plan.

2. Committee comments

Riverside Area Committee 9/3/22 Members welcomed the revision and recognised that whilst this could not be applied retrospectively, it did represent some improvement to the process and provided greater control.

Members reiterated the need to clearly communicate to the public as to what can and cannot be undertaken or addressed and recognised the impact that the relaxation of the rules and planning policy nationally had upon the planning department, particularly in terms of the building of extensions.

A further discussion took place around other tenures such as supported accommodation, and the need to ensure that these types of properties were also monitored in terms of concentration to ensure that they did not adversely impact upon the area.

More fundamental review of policy proposed as part of Local Plan review.

This is recognised as an important message and is one which will be taken forward as part of the Local Plan review.

The Local Plan review will allow fresh consideration to be given to the extent to which the current approach to HMOs can be broadened out – albeit this may be difficult to achieve given limitations of the national planning system.

	Members reiterated that regulation was key. This was not intended to demonise landlords of HMOs as there were a number of very good landlords. It was also important to recognise that shared accommodation was not necessarily the choice of the renter and for many young people there were few alternative options.	Comment noted.
Wyke Area Committee 16/3/22	Approach supported – no further comments	Noted
Foredyke Area Committee 16/3/22	Members were fully supportive of the SPD and asked for an update in 6 months on the Supplementary Planning Document.	Noted
North Area Committee 24/3/22	Will the approach set out in the SPD provide a basis to refuse applications? Agreed that this is a useful interim approach pending a review of the Local Plan.	Yes – once adopted weight can be added to such matters in determining planning applications. Noted
East Area Committee 5/4/22	The committee was generally supportive, with a recognition that as part of this particular process only limited changes are possible.	Comment noted.
	The need for HMOs to meet identified needs was highlighted Importance of pushing for better quality housing. Questions were raised about when the Local Plan would be reviewed and arrangements for consultation.	The review of the Local Plan has already commenced and a provisional target for adoption in 2023 has been agreed – this target date may need to be reviewed and a report is due to be presented to Planning Committee and Cabinet in due course. Arrangements for consultation are set out in the Council's Statement of Community Involvement.

West Area	Members were fully supportive of the SPD, subject to wider	Noted
Committee	consideration as part of the Local Plan review.	
19/4/22		
3. 2nd consultation	comments	
Historic England	We would ask that the document includes the following additional statement to address proposals for HMOs that affect heritage assets: Proposals for HMOs affecting heritage assets, designated and non-designated, will be considered in line with the requirements of Local Plan Policy 16 and the NPPF.	SPDs are allowed only to provide guidance and advice on the implementation of existing policies. They cannot create new or amend existing policy. This SPD is concerned with a specific aspect of HMOs, i.e., defining 'concentrations'. It cannot deal with HMO policy more generally. This must be considered in local plan policy. A review of the local plan is about to begin, and HMO policy will be a topic for reconsideration.
Marine Management Organisation (MMO)	No comments	Noted
National Highways	I can confirm that there is no particular element of the SPD20 that would be relevant to National Highways.	Noted

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