



Consultation Report: Considering the case for additional licensing of houses in multiple occupation

Housing standards and adaptations
Housing Services
City of York Council

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1. EXECUTIVE SUMMARY

This document sets out a proposal to designate 8 wards in the City to be subject to additional licensing of Houses in Multiple Occupation (HMOs) under the Housing Act 2004¹.

It explains the evidence on the basis of which the authority provisionally (subject to consultation) considers the statutory conditions for additional licence to be met, including evidence that the proposal would improve the standards of property management and address problems affecting HMO residents. Alternatives to the proposal are appraised and an explanation provided as to why it is not considered that these would be sufficient to address the issues identified in the evidence base.

Between 16th April and 27th June 2021, the Council carried out a preliminary statutory consultation on a proposed additional HMO licensing scheme with key stakeholders. It was open to all residents in the city. The outcome of that consultation was that there was broad support for the proposals, in principle, but the authority decided that a second, more detailed, consultation was necessary allowing respondents to consider the more detailed proposals that have now been formulated, and offering those people likely to be affected by the proposals a further opportunity to make comments.

Some of the key responses from the first consultation have been included in this updated report including:

- 1) information provided by the Citizens' Advice York and the University of York Students' Union report called "Students' Experiences of Private Rented Housing in York" and
- 2) the response of York Residential Landlords Association.

Detailed analysis of the results from both consultation exercises will be included in the final report to the Executive prior to any decision being made.

This refreshed evidence base seeks to ensure that those persons who would be likely to be affected are consulted upon are clearly aware:

- 1) Which wards are being proposed to be included in the designation namely Hull Road ward, Guildhall ward, Fishergate ward, Clifton ward, Heworth ward, Micklegate ward, Osbaldwick and Derwent ward and Fulford and Heslington ward.
- 2) The evidence used to determine the proposed designation and how an additional licensing scheme would seek to improve standards and management of HMOs in these wards where other action has been ineffective in doing so
- 3) What the proposed scheme looks like including the type of HMO to be included, the draft conditions being proposed, including proposed ideal minimum room sizes and fee structure.
- 4) That the consultation, decision making process and proposed scheme meets the tests set out in section 56 and 57 and the guidance issued under the Housing Act 2004: Licensing of Houses in Multiple Occupation and Selective Licensing of Other Residential Accommodation (England) General Approval 2015.

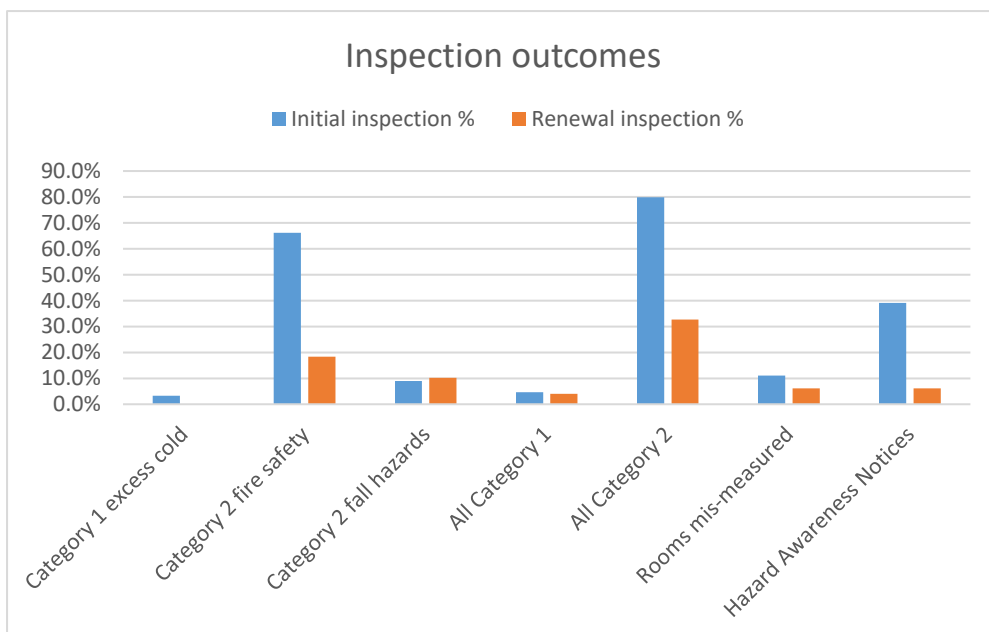
¹ The statutory basis is section 56 and 57 and the guidance issued under the Housing Act 2004: Licensing of Houses in Multiple Occupation and Selective Licensing of Other Residential Accommodation (England) General Approval 2015

York is well known nationally and internationally as a great place to live, work and visit. However, the city is also well known for its high housing costs. Partly due to the problems associated with a lack of affordable housing supply, many people look to the city’s private rented sector (PRS) to meet their housing needs. While overall standards in the PRS are good, the sector also displays some of the worst conditions.

HMOs are a significant sub-sector of the private rental market. Ongoing pressures within the housing market mean that for many, including a rising proportion of families, the only chance of a decent home is in a properly managed and well regulated HMO.

The provision of good quality housing for York residents is a key priority. The Council Plan 2019-23, York Health and Wellbeing Strategy 2017-22 and the York and North Yorkshire Housing Strategy 2015-2021 all call for more decent, energy efficient and safe homes that have a positive impact on people’s health and wellbeing.

The mandatory licensing of larger HMOs in York has been effective in regulating and improving the standard of accommodation offered to let within this sector. Licensing has encouraged a positive interaction with landlords and allowed for any problems presented by each house to be managed on an individual basis through a bespoke set of licence conditions. Comparison of inspection data of HMOs licensed for the first time in 2018 and those properties licensed again through the renewal programme shows a substantial reduction in hazards and improvement in property standards and management practices.



With over 3,000² HMOs in the city, only one third of them are currently regulated through mandatory licensing. In existing licensed properties, a substantial reduction in hazards was found from initial to renewal inspections.

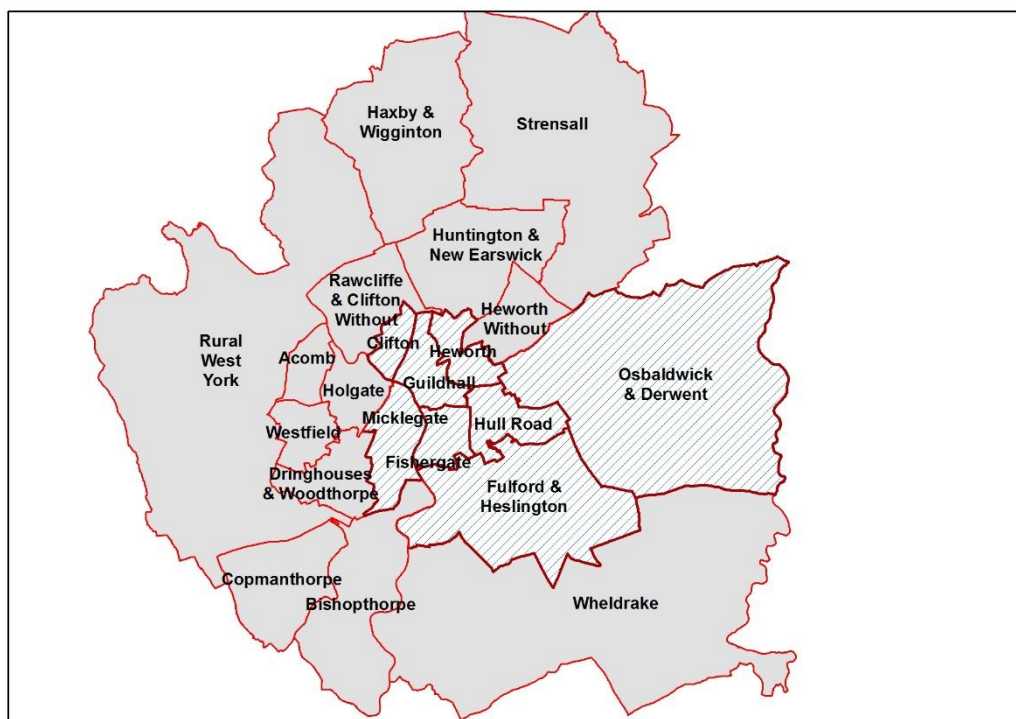
² Number of private sector HMOs excluding University owned and privately owned halls of residence, which are regulated by Approved Codes of Practices

Data shows that HMOs are more typically found in areas closer to the city centre and the two major university complexes, such as Hull Road ward, Guildhall ward, Fishergate ward, Clifton, Heworth ward, Micklegate ward, Osbaldwick and Derwent ward and Fulford and Heslington ward, where the additional licensing scheme is proposed. Many of these areas have high numbers of older properties where poor conditions are more prevalent. Analysis of energy performance certificate (EPC) data shows a strong correlation between HMO density and lower EPC ratings, with unlicensed HMOs being most likely to fall below expected EPC standards. Likewise, analysis of environmental complaints data shows some correlation between high HMO areas and Anti- Social Behaviour (ASB) , noise and waste complaints.

Although this effect could also be due in part to the fact that these areas are typically more densely populated and towards the urban core, where such complaints are more prevalent, nonetheless the authority considers that these factors cannot be disentangled from each other: for example, a large number of HMOs in an area plainly contributes to the density of population in that area; HMOs tend to also be found in larger numbers near the urban core. The authority believes that the number, and management, of HMOs is relevant to the number of complaints in those areas.

Additional licensing targeted at wards with the highest number and concentrations of HMOs in the city would extend the positive effects of improved property management and standards brought about by mandatory licensing and allow the benefits to be available more widely. Targeted additional licensing is proportionate to the issues identified and operationally manageable. This would address problems evidenced in this sector affecting HMO residents and the wider public.

Map of Proposed Wards: cross-hatched and outlined in bold



Alternatives to extending HMO licensing have been considered but in each case the weaknesses are deemed to outweigh the strengths with none of the alternatives giving an effective solution to problems within the HMO sector. The benefits of additional licensing to the council include a consistent approach to HMOs in York, improved links with landlords and pro-active and pre-emptive involvement with the sector that minimises reactive work. A case study from the Midlands area³ has shown that the costs associated with licensing have little if any direct impact on rents.

The council believes that licensing all HMOs in targeted areas is essential for bringing about improvements particularly in relation to property condition including energy efficiency and management quality of York's HMO rental stock.

³ Coventry case study outlined in section 5 of this report

2. Introduction

Access to decent affordable housing is essential to support good health and wellbeing and a good quality of life. Overall, housing standards in York are high - the physical condition of the city's housing stock is generally good across all sectors and energy efficiency levels are above the national average.

However, this overall positive picture masks disparities both between and within sectors that give rise to some concern. On the whole we find some of the worst conditions within the PRS, which includes a significant proportion of houses in multiple occupation.

Local authorities have an obligation under the Housing Act 2004 to keep housing conditions in their area under review. This includes all tenures of housing, not just stock that may be owned by the local authority.

The council has developed a number of policies and strategies to further its overall approach to property conditions. An assessment of poor housing conditions completed in 2015⁴ forms an important contribution to the full evidence base which underpins these policies and strategies towards improving housing standards.

Councils have an obligation to enforce certain statutory minimum standards in housing and have powers that they can use to do this, while further mandatory and non-mandatory powers are available to the Authority under the Housing Act 2004.

In line with our strategic ambitions to improve people's quality of life, we are focussed on utilising what tools and resources we have to tackle poor housing standards in York. To this end, this report puts forward the authority's case for introducing additional licensing of HMOs in the PRS, in those wards where we know some of the worst housing standards can be found.

The York and North Yorkshire Housing Strategy recognises that, amongst other things, there are limited affordable housing options available in the city making it clear that the PRS will need to play a greater role in meeting housing needs going forward.

Landlord licensing is part of a wider set of measures to enable landlords in York to provide good quality housing within their communities and additional licensing can help alleviate the poor housing conditions and management in the HMO sector by setting and maintaining the appropriate standards, in the 8 wards listed above, in the most vulnerable sector of York's private rental market.

Ensuring standards are maintained delivers a wide range of positive outcomes not just for individuals but for society as a whole including:

- Fewer homes that pose a risk to health and wellbeing
- Improved outcomes for families and young people
- More independence for older or vulnerable households

⁴ BRE research – The condition of private Housing in York [BRE Dwelling Level Housing Stock Modelling and Database \(york.gov.uk\)](https://www.york.gov.uk/research-and-analysis/bre-research)

- Lower carbon emissions, improved energy efficiency and reduced fuel poverty
- Less anti-social behaviour
- Neighbourhoods that are more cohesive, attractive and economically vibrant

Additional licensing, in the targeted wards with the highest number and concentrations of HMOs, would require all private landlords with new HMOs to apply for a licence for each property and meet certain property and management standards before they can be let to tenants. Existing HMOs would be given set periods, outlined in our draft conditions policy set out in Appendix 1 to comply with certain conditions where they are related to structural work.

3. Licensing of Houses in Multiple Occupation

The Housing Act 2004 has given councils the power, in certain circumstances, to introduce additional licensing of HMOs which fall outside of the mandatory HMO licensing definition so as to improve conditions for tenants and the local community.

3.1 What is an HMO?

A HMO is defined in Sections 254 and 257 of the Housing Act 2004. A HMO can be a building or part of a building if it is:

- Occupied by persons who form more than one household, and where those persons share (or lack) one or more basic amenities, such as a WC, personal washing and cooking facilities.
- A converted building containing one or more units of accommodation that do not consist entirely of self-contained flats. (There is no requirement that the occupiers share facilities)
- A converted building consisting entirely of self-contained flats, where the building work undertaken in connection with the conversion did not comply with the 1991 Building Regulations and more than one third of the flats are occupied under short tenancies.

The HMO must be occupied by 2 or more households:

- As their only or main residence;
- As a refuge by persons escaping domestic violence; or
- During term time by students.

In all cases:

- Occupation of the living accommodation must be the only use of that accommodation; and
- Rents are payable or other considerations are provided.

Under the Housing Act 2004, a household comprises:

- A single person (though a property will not qualify as an HMO if it is occupied by 2 single people who are separate households);
- Co-habiting couples (whether or not of the opposite sex); or
- A family (including foster children and children being cared for) and current domestic employees.

Bed and breakfast and hostel accommodation occupied by individuals as their main and permanent address are also considered to be an HMO.

Certain types of buildings will not be HMOs for the purpose of the Housing Act. They are:

- Buildings, or parts of buildings, occupied by no more than two households, each of which comprise a single person only (for example, two person house or flat shares);
- Buildings occupied by a resident landlord with up to two tenants;

- Buildings managed or owned by a public sector body, such as the police, local authority, registered social landlords, fire and rescue authority and the NHS;
- Buildings occupied by religious communities;
- Student halls of residence where the education establishment has signed up to an Approved Code of Practice; and
- Buildings occupied entirely by freeholders or long leaseholders.

3.2 Mandatory licensing

Under the Housing Act 2004, certain types of HMO (defined in Regulations by the Secretary of State) are always licensable. For these HMOs there is an obligation on the landlord to apply for a licence to the local authority where the HMO is located. Local authorities, therefore, must be in a position to manage the applications for licences. Originally, licensable HMOs were those comprising three or more storeys with five or more residents living as two or more households that share some facilities. From 1 October 2018, the definition of a mandatory licensable HMO changed and the rule regarding 3 or more storeys was removed. All properties that meet the following criteria therefore require a mandatory HMO licence:

- It is occupied by five or more persons living in two or more separate households; and
- It meets either
 - The standard test under section 254(2) of the Act; or
 - The self-contained flat test under section 254(3) of the Act (but is not a purpose-built flat situated in a block comprising three or more self-contained flats); or
 - the converted building test under section 254(4) of the Act.

The total number of licensable HMOs of this nature within York is estimated to be 1,050. The council currently licences around 1029 under the national mandatory scheme. Operating a HMO without a licence is a criminal offence and the council will investigate and consider taking action in line with our Enforcement Policy. The Council will consider the following action in relation to an unlicensed HMO; the issuing of a serving civil penalty notice up to £30k or a prosecution. In addition we can or advise tenants to, to apply for a Rent Repayment Order (landlords would need to repay up to 12 months rental income) During the period that the property is unlicensed, a Notice of Seeking Possession under Section 21 Housing Act 1988 to evict tenants cannot be used.

The Council estimates that there are still around 2,000 HMOs in York that are not subject to the mandatory licensing provisions.

3.3 Additional licensing

In April 2015 the Secretary of State for Communities and Local Government gave Local Authorities general approval to introduce additional and selective licensing designations in England without requiring the specific confirmation of the Secretary of State, if certain conditions are met: Licensing of Houses in Multiple Occupation and Selective Licensing of Other Residential Accommodation (England) General Approval 2015.

When considering the introduction of an Additional Licensing Scheme councils must proceed through the statutory process as laid out in Section 56 and 57 of, and the guidance issued under, the Housing Act 2004.

Section 56 of the Act places requirements upon councils when considering a designation for additional licensing of HMOs, in that councils must:

- Consider that a significant proportion of the HMOs of that description in the area are being managed sufficiently ineffectively as to give rise, or likely to give rise, to one or more particular problems either for those occupying the HMOs or for members of the public;
- Take reasonable steps to consult with persons who are likely to be affected and consider any representations made in accordance with the consultation and not withdrawn; and
- Have regard to any information regarding the extent to which any codes of practice approved under section 233 have been complied with by persons managing HMOs in the area (these codes relate to University managed accommodation).

Section 57 provides further considerations for councils in that they should ensure that:

- Exercising the designation is consistent with the authority's overall housing strategy;
- Seek to adopt a coordinated approach in connection with dealing with homelessness, empty properties and anti-social behaviour affecting the PRS as regards combining licensing with other action taken by them or others; and
- Consider whether there are any other courses of action available to them (of whatever nature) that might provide an effective method of dealing with the problem or problems in question; and
- That making the designation will significantly assist them to deal with the problem or problems (whether or not they take any other course of action as well).

The General Approval provides the additional condition for any additional licensing scheme not subject to specific confirmation by the Secretary of State that consultation on the proposed designation should take place for not less than 10 weeks.

The guidance for the general approval provides examples of properties being managed "sufficiently ineffectively" including:

- Those whose external condition and curtilage (including yards and gardens) adversely impact upon the general character and amenity of the area in which they are located;
- Those whose internal condition, such as poor amenities, overcrowding etc. adversely impact upon the health, safety and welfare of the occupiers and the landlords of these properties are failing to take appropriate steps to address the issues;
- Those where there is a significant and persistent problem of anti-social behaviour affecting other residents and/or the local community and the landlords of the HMOs are not taking reasonable and lawful steps to eliminate or reduce the problems; and
- Those where the lack of management or poor management skills or practices are otherwise adversely impacting upon the welfare, health and safety of residents and/or impacting upon the wider community.

The evidence set out in Section 4 below is considered to demonstrate that the condition and management practices of a significant proportion of relevant HMOs are such that the proposals would meet the statutory criteria of the Act and the General Approval.

Under section 60(2) of the 2004 Act a designation cannot last for longer than 5 years.

4. Supporting information: the case for licensing

4.1 National context

The Office of National Statistics (ONS) projects there will be a population increase in the UK of 11 million people over the next two decades. The English Housing Survey (EHS) 2018/19 reported that the PRS accounts for 4.6 million or 19.9% of all households, representing a doubling in proportion since the 1990s.

A large proportion of the growth has come from families with children, who now make up nearly a third of private renting households nationally. Almost half of renters are aged 35 and over and nearly a third of renters expect to be renting for the rest of their lives. Only 6% of renters say it is their preferred choice of housing.

Generally speaking, property conditions in the private rented sector are worse than any other tenure. A third of privately rented homes do not meet the government's Decent Homes Standard, while around one in 7 contain a hazard posing a serious danger to the health and safety of renters, much higher than rates in the owner occupied and social rented sectors.

Between 1998/99 and 2018/19, the proportion of private renters living in overcrowded accommodation increased from 3% to 6%. This compares to 1% of owner occupiers and 8% of social renters.

In 2018/19, the average (mean) rent (excluding services but including Housing Benefit) for households in the social sector was £102 compared with £200 per week in the PRS, a difference of £98 per week.

4.2 Local context - Strategic links

The Council Plan 2019-23 sets out the council's overall strategic approach to services in York. With a clear vision to *"improve peoples' quality of life"*, the council aims to deliver across eight objectives:

- Create a cleaner and greener city
- Well paid jobs and an inclusive economy
- Getting around sustainably
- Good health and wellbeing
- Safe communities and culture for all
- Create homes and world class infrastructure
- A better start for children and young people
- An open and effective council

The York Health and Wellbeing Strategy 2017-22 recognises that creating health, wealth and happiness requires more than simply managing people's health problems. The health and wellbeing of people can be improved if people have jobs, good housing and are connected to

families and communities. There is evidence that providing a healthier home environment for children and young people ensures that they have better outcomes in education⁵.

The York and North Yorkshire Housing Strategy 2015-21 vision is to “*enable more new homes and for all housing to be of a quality, type and size which meets the needs of our communities and supports economic growth.*” Beneath this vision are number of key priorities, the most notable being:

- Increase the supply of good quality housing across all tenures and locations
- Ensure the housing stock reflects local needs
- Ensure new homes are of good design and environmental quality regardless of tenure
- Make best use of our existing stock and ensure it is a decent quality.
- Ensure all homes have a positive impact on health and wellbeing and are affordable to run

York private sector housing strategy 2016-21 sets out five strategic objectives designed to improve the condition and management of owner-occupied and PRS homes: These include:

- Encourage and support owner occupiers to maintain safe homes, free from Cat 1 hazards
- Encourage, support and regulate private landlords and agents to provide safe and well managed properties, free from Cat 1 hazards. Inform and support tenants about what they can expect
- Maximise use of the existing housing stock to increase the supply of decent affordable homes
- Enable more sustainable homes by increasing energy efficiency and reducing fuel poverty

The strategy states that investing in our homes and ensuring standards are maintained delivers a wide range of positive outcomes not just for us personally but for the city as a whole including:

- Fewer homes that pose a risk to health and well being
- Improved outcomes for families and young people
- Lower carbon emissions improved energy efficiency and reduced fuel poverty
- More independence for older or vulnerable households
- Less anti-social behaviour relating to derelict or nuisance properties
- Less poverty and communities that are more cohesive, attractive and economically vibrant

High housing costs have placed additional pressure on social and affordable rented accommodation let by the council and local Registered Providers (RPs). There are currently around 1,500 households on the council’s housing waiting list hoping to secure one of the small number of social and affordable rented homes that become available each year. A shortage of affordable accommodation pushes further demand pressures onto the PRS, including HMOs.

PRS accommodation meets a diverse range of needs. It provides a flexible option for those who do not wish to buy, face barriers to buying or are saving for a deposit. It offers a range of shared accommodation for smaller households and is increasingly used by a growing number

⁵ [Journal of Environmental Health Research - Beyond safety to wellbeing \(core.ac.uk\)](http://www.core.ac.uk/journal-of-environmental-health-research)

of families. With rising costs and limited social rented homes the sector looks set to remain an important source of housing for the foreseeable future.

In line with national trends, the PRS in York has seen considerable overall growth over the past 20 years. In 2001 the sector was reported to be around 10% of total stock and this has increased to 17.5%.⁶

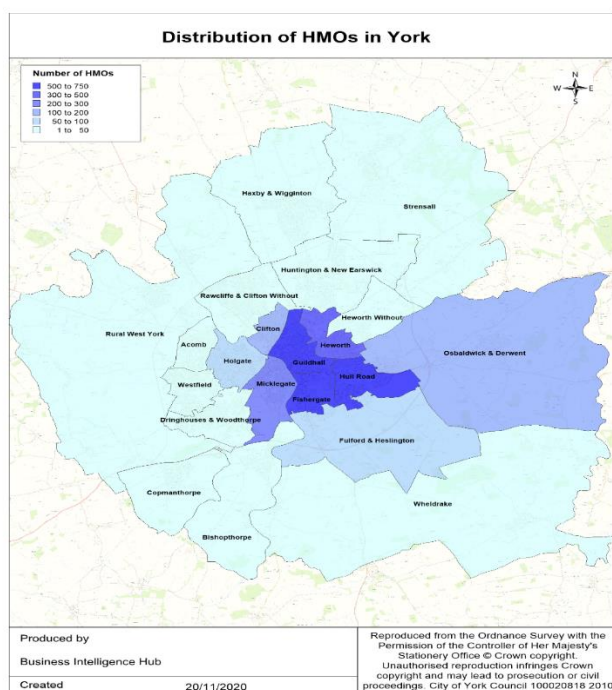
Planning policy in the form of an Article 4 Directive has been developed by the council to create and sustain ‘mixed and balanced communities’, by encouraging the spread of sustainable and viable options for accommodation across the city. Notwithstanding, it is clear from the data presented below that the city does have several areas where HMOs within the PRS are substantial in number and that a significant proportion of them are being managed sufficiently ineffectively as to give rise, or likely to give rise, to one or more particular problems either for those occupying the HMOs or for members of the public

4.3 HMOs in York - Number and distribution

Data shows there are over 3000 (19% of PRS) HMOs in York, not including university halls of residence, of which 1,029 are licensed. The data and hotspot density map below clearly shows a larger concentrations of HMOs in certain wards focussed within close proximity of the city centre and the two major university complexes.

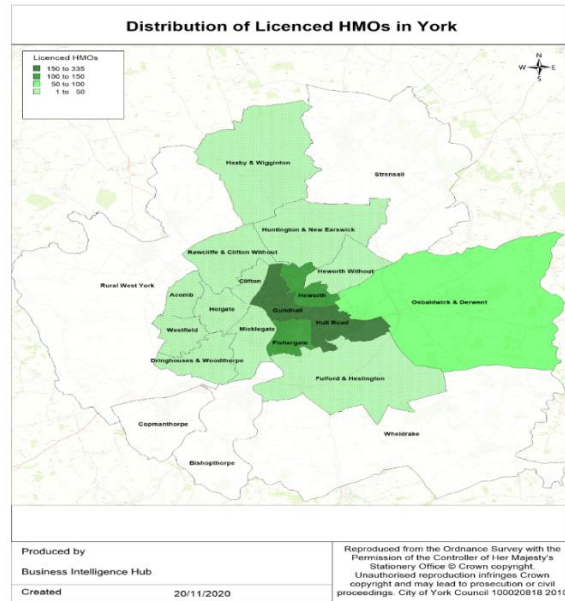
- Wards with the highest **number** of HMOs (i.e. over 100) include Hull Road, Guildhall, Fishergate, Heworth, Micklegate, Clifton, and Osbaldwick and Derwent.
- Wards with the highest **concentrations** of HMOs (i.e. over 10%) include Hull Road, Guildhall, Fishergate and Fulford and Heslington.

Fig 1. Distribution of HMOs - Hotspot Density



⁶ ONS estimate 2018

Fig 2. Distribution of licensed HMOs – Hotspot density



Taking this into account alongside property condition and hazard identification data set out below, it is proposed to apply the licensing requirements in the following wards, cross-hatched in the map diagram below:

- Clifton
- Guildhall
- Heworth
- Micklegate
- Fishergate
- Hull Road
- Fulford & Heslington
- Osbaldwick & Derwent

Fig 3. Proposed additional licensing wards



4.4 Enforcement of HMOs

The council must consider if a significant proportion of the HMOs in the proposed targeted area are being managed sufficiently ineffectively as to give rise to, or be likely to give rise to, one or more particular problems either for those occupying the HMOs or for members of the public.

The council takes a positive approach in dealing with concerns about HMOs and concentrates on four main areas of enforcement:

- Unlicensed HMOs
- Non-compliance of licence conditions
- Poor Management of HMOs
- Health and Safety

Unlicensed HMOs

Under the Housing Act 2004 the council is responsible for administering the mandatory licensing scheme described earlier in this report. Where the council suspects there is an unlicensed HMO it has powers to inspect without providing any notice to the occupants or the owner. Once a property has been found to be operating without a licence the council will instigate a formal investigation and decide, based on the Council's Enforcement Policy, what course of action is appropriate.

Non-compliance of licence conditions

When a HMO is licenced the licence holder is issued a licence with conditions, critically the licence condition ensures that the property and the licence holder meets the three tests within specified periods

The three tests being that the:

- 1) Property is reasonably suitable for occupation as a HMO (**physical standards**)
- 2) Management arrangements are satisfactory (**management standards**) including having passed a recognised training qualification or to do so within an 18 month period of issuing the licence.
- 3) Licensee and manager are fit and proper persons (**Fit and Proper test**). The applicant must be the most appropriate person to hold the licence.

Where the licence holder fails to meet the conditions then the council will instigate a formal investigation and decide based on the Council's Enforcement Policy, what course of action is appropriate.

Poor Management of HMOs

In cases of poor management the council has powers under the Management of Houses in Multiple Occupation (England) Regulations 2006. The general principle of the regulations is to protect the health, safety and welfare of occupants by requiring landlords and managers of HMOs to comply with certain duties. These regulations apply irrespective of whether the HMOs are licenced or not. Effective management also relies in part on residents being fully aware of their responsibilities. They should be made aware that they are either required by

regulation or by the terms of the tenancy agreement not to act in a way that obstructs the manager, or causes nuisance or annoyance to neighbours, and also be made aware of the consequences if they do not comply with this. Additional HMO Licensing is a proactive approach, satisfactory management arrangements are required to be in place and the licence holder needs to have a recognised training qualification

Health and Safety

The Housing Health and Safety Rating System (HHSRS) applies to HMOs as any other housing accommodation and the council is required to keep property conditions ‘under review’. The application of HHSRS in non-licensed HMOs is a reactive approach as the council relies upon residents and tenants to complain so that it is aware of issues. More recently with austerity, resources have resulted in reactive services taking priority. In the case of licensed HMOs the council has a duty to carry out a HHSRS inspection at least once every five years. This is a much more a proactive approach.

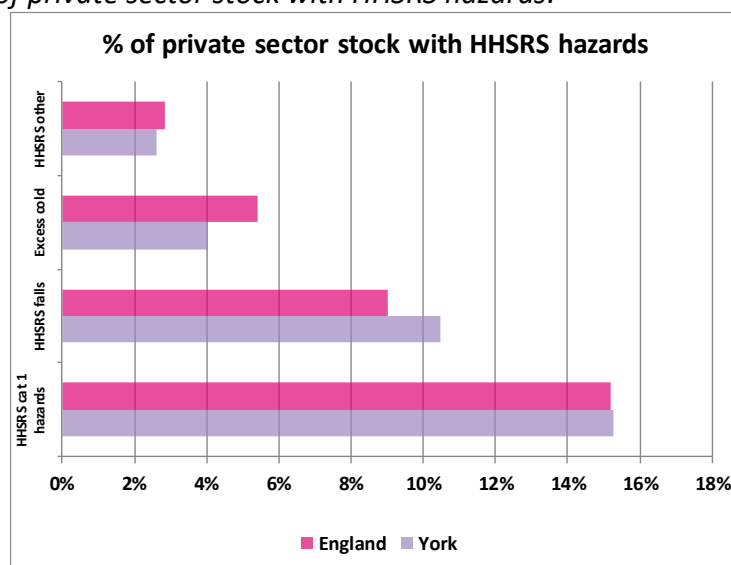
4.5 Housing health and safety rating system (HHSRS)

The HHSRS provides the minimum standard for housing, in that a property should be free from a Category 1 hazard. There are 29 criteria for assessing hazards in a property and typically hazards arise from faults or deficiencies in the dwelling which could cause harm.

Figure 4 below shows the number of hazards, grouped into major hazard categories, in York compared to England as a whole, across the private sector housing stock (owner occupied and privately rented)⁷. Compared to England, York has a similar level of dwellings with category 1 hazards, although there are higher rates of falls on stairs. Around 15% of all private dwellings in York have a category 1 hazard.

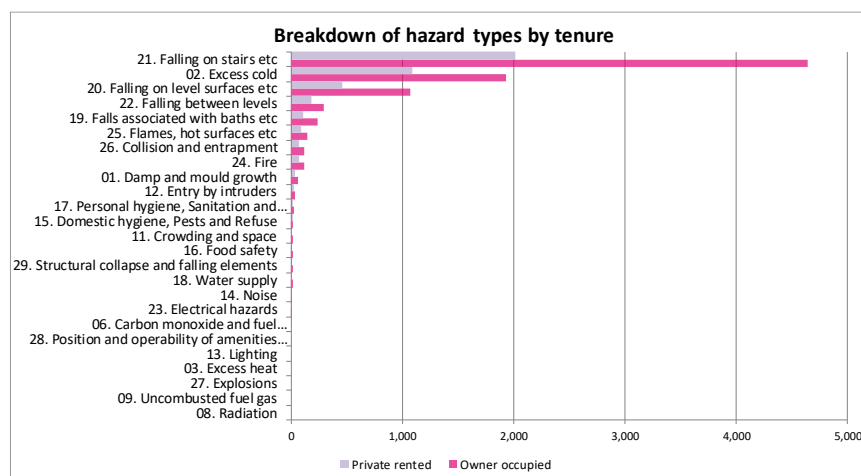
There are an estimated 12,920 category 1 hazards in York’s private sector stock, of which over 4,194 (32%) are within the privately rented sector.

Fig 4. Percentage of private sector stock with HHSRS hazards.



⁷ BRE Health Impacts and Costs of Poor Housing in York 2015

Fig 5. Estimated number of category 1 hazards in York by tenure



The two main hazards in the private rented sector are falls on stairs (2,015 hazards) and excess cold (1,088 hazards).

4.6 Complaints

During the period 1 October 2018 to 30 September 2020 the council’s housing standards team received 872 service requests including empty property enquiries. Of these, 698 related to PRS housing conditions and tenancy relations. 156 of these were dealt with by the technical support team relating to HMO general advice including advice on the HMO licensing process. 542 were passed to the HMO enforcement team of which 63 related to tenancy advice matters and 415 related to housing conditions such as damp and mould, overcrowding and lack of gas safety certificates. 64 requests related to investigations into potential unlicensed HMOs.

4.7 HMO inspection data

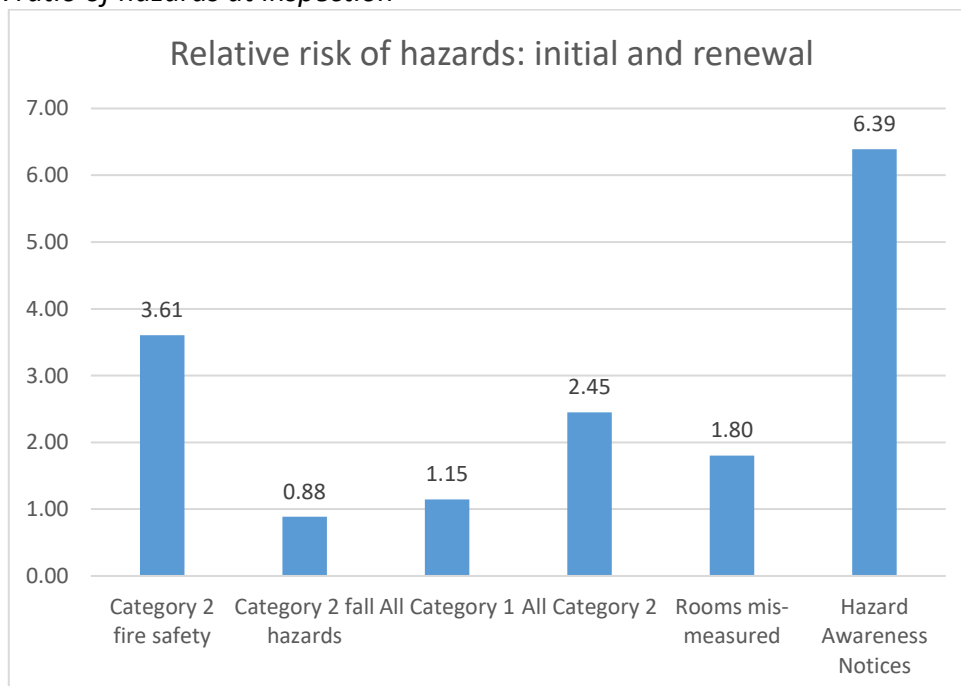
HMO inspection data demonstrates the significant benefits of licensing, with considerably reduced rates of Category 1 and 2 hazards in post-licence inspections. For example in fig 7 below, HMOs being licenced for the first time were found to be 3.61x higher risk of Fire Safety (Category 2 hazards) at more risk of the most serious Category 1 hazards; and at more than double the risk of Category 2 hazards compared to those properties who were being renewed for the second or third time. This was based on 348 inspections carried out in total, with full details contained in Appendix 3. By introducing the same inspection regime for smaller HMOs through additional licensing scheme it is anticipated that the same reduction in the number of serious category 1 and 2 hazards would be achieved.

Fig 6. Inspection outcomes initial and at renewal



Fig 7. Below shows the relative likelihood of identifying the hazards listed at inspection, comparing those which are being licenced for the first time and subsequent visits when the property is being licenced for the second or third time (renewal). Hazards were disproportionately more likely prior to licensing, with 3.61x the risk of Category 2 Fire Safety hazards being identified, and 6.39x the risk of Hazard Awareness Notices being issued by comparison to licensing renewal inspections. This demonstrates very clear improvements following licensing. By introducing the same inspection regime for smaller HMOs through additional licensing scheme it is anticipated that the same reduction in the number of category 1 hazards would be achieved.

Fig 7. Risk ratio of hazards at inspection



From 299 inspections of HMOs (Table 1) licensed for the first time 33 properties were found to have rooms which had been declared by landlords as meeting the minimum new legal standards, to be below the legal standards. A further 49 inspections of properties (Table 2) being licenced through the renewal programme found 3 landlords to have declared rooms to be meet the legal standards, to be below them. The proposed Additional Licensing Scheme would seek to ensure that any information provided in application form is followed up by an inspection confirming that it is accurate and that licence conditions are being met. Full data is included in Appendix 3.

Table 1. Initial HMO inspection data

HMOs licence: HMO inspection data	Rooms mis- measured	Inspections	Suspended Prohibition notice	Hazard Awareness Notice
2018-2020	33	299	2	117

Table 2: Renewals: HMO inspections data

	Rooms mis- measured	Inspections	Suspended Prohibition notice	Hazard Awareness Notice
2019-20 Renewals: HMO inspections data	3	49	1	3

By introducing the same inspection regime for smaller HMOs through additional licensing scheme it is anticipated that conditions will be improved. It is also anticipated that the licence condition ensuring that landlords receive a minimum level of training will mean that they understand the reasons for the licence conditions and the minimum standards.

4.8 HMO Licence Conditions

All HMOs are issued with standard licence conditions but where the licence holder, or property or management fails to meet a required standard then a specific licence condition is imposed. Table 3 shows the number of HMOs that failed to meet the standards in 2018. The licence holders were all issued with conditions to ensure that these matters were resolved. It is expected that should additional HMO licensing be extended to other HMOs then similar levels of issues will be found.

The following table outlines the type and number of conditions imposed on HMOs that were licensed during the first six months of licensing after the 1st October 2018.

Table 3. Type and number of conditions imposed on licensed HMOs in first six months of licensing

Standard licence conditions	Conditions imposed on HMOs and existing HMOs that have been renewed
The number of properties failing the room size and a condition imposed. NB this could relate to more than one room in the property	58
The number of properties failing to meet the required level of kitchen facilities for the number of occupants and households	192
The number of properties failing to meet the required level of bathroom facilities for the number of occupants and households	12
The number of properties failing to meet the required level of toilet facilities for the number of occupants and households	82
The number of properties failing to provide the level of controllable heating facilities for the number of occupants and households	25
The number of properties failing to meet the required minimum energy efficiency levels and licence conditions imposed	78
The number of properties failing to meet the required level of carbon monoxide detection in the house	205
The number of licence holders who fail to meet the required level of training by attending and passing a recognised training course	312
Total conditions	964
<i>Of which: individual HMOs with at least 1 condition imposed</i>	609

Table 4 below is a snap shot on the 12th February 2021 showing the significant improvement in just over 16 months, both in terms of the management and condition of HMOs.

Table 4. Issues identified following licensing

Conditions above the standard conditions	Number of properties
The number of properties failing the minimum room size	2
The number of properties failing to meet the required level of kitchen facilities	16
The number of properties failing bathroom/showering facilities	0
The number of properties failing to meet the required level of toileting facilities	12
The number of properties failing to meet the controllable heating condition	0
The number of properties failing to meet the required level of minimum energy efficiency levels	9
The number of properties failing to meet the required level of carbon monoxide detection in the house	4
The number of licence holders who failed to meet the minimum level of training	5
Total at 12th February 2021	48

This illustrates the benefits of licensing in improving property standards and management practices, with a total of 964 conditions imposed on 609 properties (Table 3), representing around 60% of the licensed HMOs. By comparison, following licensing 48 conditions had been imposed on the same number of properties (Table 4) – highlighting the very substantial improvements achieved. Without licensing these properties would likely to continue to fail to meet the standards required. Comparable improvements in standards and management practices would be expected in additional licensed HMOs.

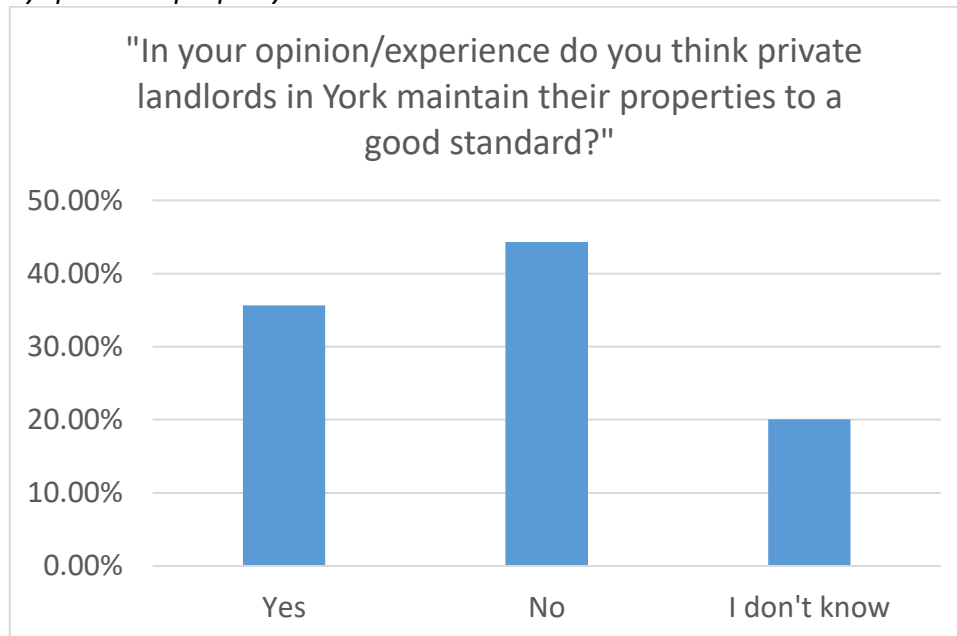
4.9 Responses to the council’s consultation

The first consultation on additional licensing proposals concluded in June 2021. 822 responses were received, including 228 who identified as a private tenant and 238 as a private landlord, letting agent or manager. The percentages shown below exclude non-answering respondents, full details are available in the separate data spreadsheet.

The responses highlighted existing good practice alongside areas for improvement. Around 35% of respondents considered that “private landlords in York maintain their properties to a

good standard”, which provides an excellent base to improve the quality of this sector. Over 40% believed private landlords in York do not maintain their properties to a good standard, which fits the evidence noted above for the potential improvements through additional licensing.

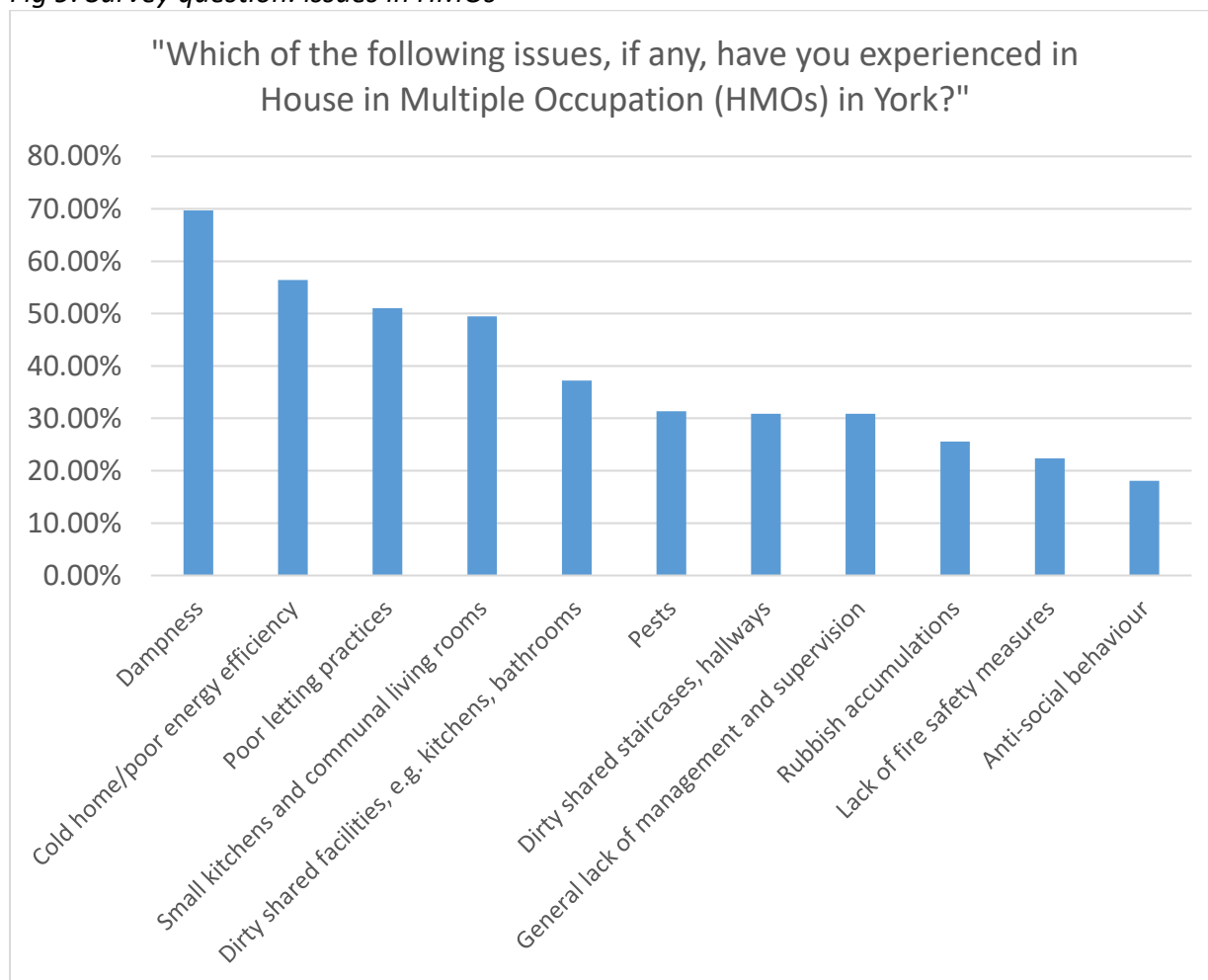
Fig 8. Survey question: property standards



70% of respondents’ experience of damp as an issue in HMOs in York is corroborated by results in the student renters’ survey outlined below. This prevalence suggests management and property condition challenges in the more complex households living in HMOs. It is expected that damp issues would be managed by a range of options, for example improving the energy performance of the property increasing ventilation, provision of better clothes drying facilities, or technologies to address specific moisture concentrations in a property.

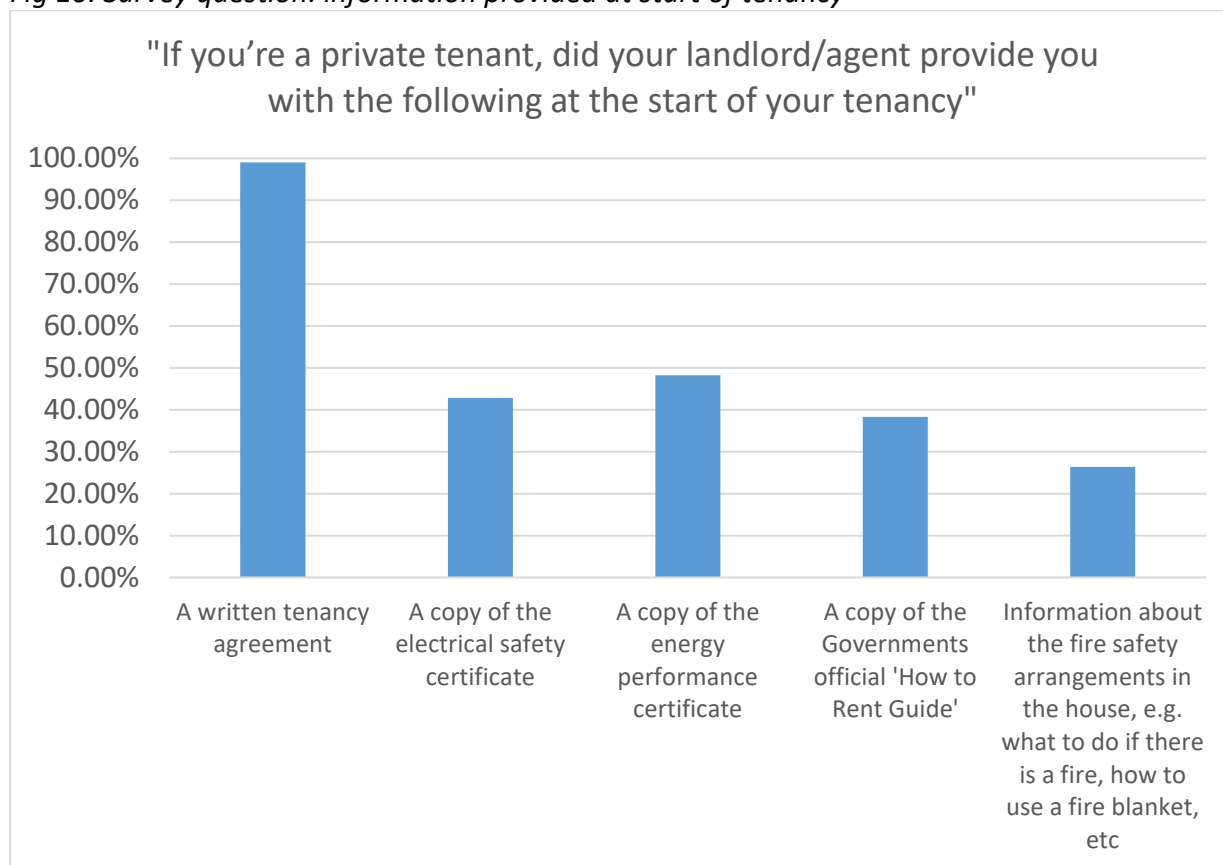
Other property maintenance and management factors highlighted in the responses illustrate the potential benefit of improvement through additional licensing.

Fig 9. Survey question: issues in HMOs



Similarly shortcomings in practice are suggested by a majority of tenant's essential statutory certificates and documentation not having been provided as required in licensing arrangements at tenancy commencement (figure 10). The table also highlights significant poor management practices which are also seen in for example, the lack of an EPC records data. An Additional licensing scheme will seek to ensure that valid EPCs, Electrical safety certificates and where gas is provided to the HMO gas safety certificates are submitted as part of the application. Conditions are imposed about fire safety and information for tenants is provided. Critically it also ensures that landlords and those involved in the management of the properties have the right knowledge and skills through completion of a recognised training qualification

Fig 10. Survey question: information provided at start of tenancy



The York Residential Landlord Association wrote a letter responding to the consultation, included in Appendix 6, and representations were made by landlords and business owners in response to the survey questions. Consideration has been given to the proposals and evidence presented in respect of the statutory requirements of sections 56 and 57 and the guidance issued under the Housing Act 2004: Licensing of Houses in Multiple Occupation and Selective Licensing of Other Residential Accommodation (England) General Approval 2015.

4.10 “Students’ Experiences of Private Rented Housing in York”

Reference: <https://yusu.org/news/article/news-and-blogs-yusu-cay-private-rented-housing#>

In May 2021 a report was released on “Students’ Experiences of Private Rented Housing in York”, carried out by Citizens’ Advice and York University Students Union. With over 600 respondents some valuable information is provided on this sub-sector, with high relevance to HMOs. The data presented supports the need for improvement to property standard and management practices in higher risk sub-sectors of the private rental sector with key concerns including damp, pests/insects, a significant minority of gas/electrical safety concerns, and slow responses to repairs needs.

This provides further corroboration for the datasets above- HMO inspections in section 4.6, HMO conditions 4.7 and Consultation in 4.8 datasets analysed above and highlights factors that would be addressed by the additional licensing proposal.

Fig 11. Student report: issues experienced

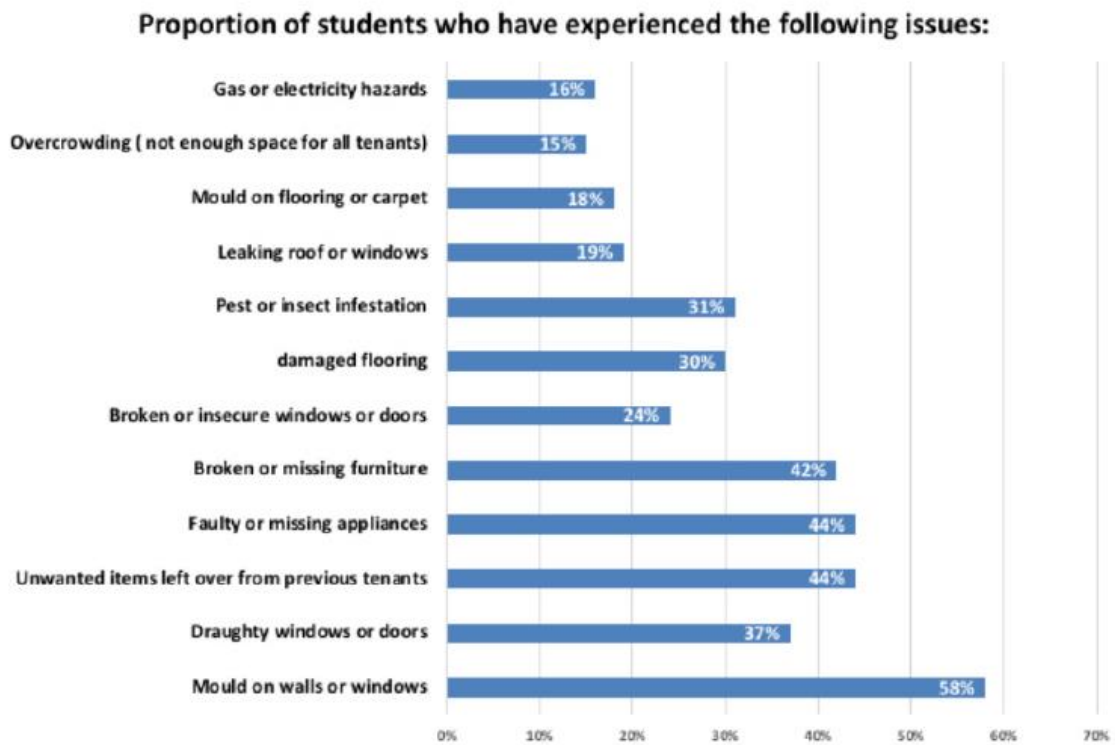
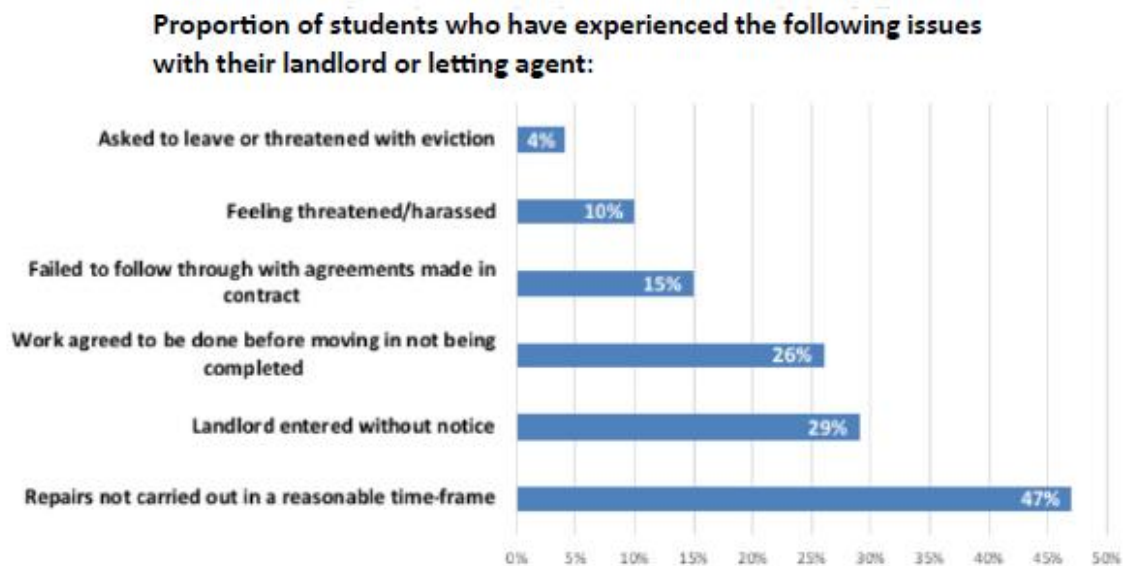


Fig 12. Student report: Landlord/letting agent's issues



4.11 Property conditions

Information concerning the HMO stock in the city has historically been built up from operational records outlined in 4.6 to 4.8, however, some landlords and agents are reticent to provide the council with data unless specifically required to do so. Additional licensing would enable the collection of more detailed and accurate information about the HMO stock. This is one of the less apparent benefits of licensing.

The figures below provide relevant information regarding the stock and conditions in the PRS as reported in the 2015 assessment of housing conditions.

As previously described, MHCLG guidance provides examples of properties being managed “*sufficiently ineffectively*” and includes;

- those where the external condition and curtilage (including yards and gardens) adversely impacts upon the general character and amenity of the area in which they are located; and
- where the internal condition, such as poor amenities, overcrowding etc. adversely impact upon the health, safety and welfare of the occupiers; and
- where landlords of these properties are failing to take appropriate steps to address the issues.

Property age and conditions

It is well reported that poor housing conditions, including overcrowding and homelessness, are associated with property age and the effect of such conditions have a direct impact on health including in particular, cardiovascular diseases, respiratory conditions and mental health problems.

The age of dwellings in the PRS is therefore an important consideration as there is a direct correlation between property age and conditions - the worse conditions are generally present in older stock types. Figure 13 from the assessment of poor housing conditions completed in 2015⁸ shows the dwelling age profile by ward which provides a means of identifying areas with properties of certain ages; for example, Guildhall, Micklegate, Clifton, Fishergate wards exhibit above average concentrations of pre-1919 and private-rented properties .

The additional licensing proposal is designed to address the issues identified in this evidence base. In the context of older properties at higher risk of being poor quality impacting on the health and wellbeing of tenants, improving the quality of management and property maintenance is especially significant.

⁸ BRE research – The condition of private Housing in York [BRE Dwelling Level Housing Stock Modelling and Database for XXX \(york.gov.uk\)](#)

Fig 13. Dwelling age by ward

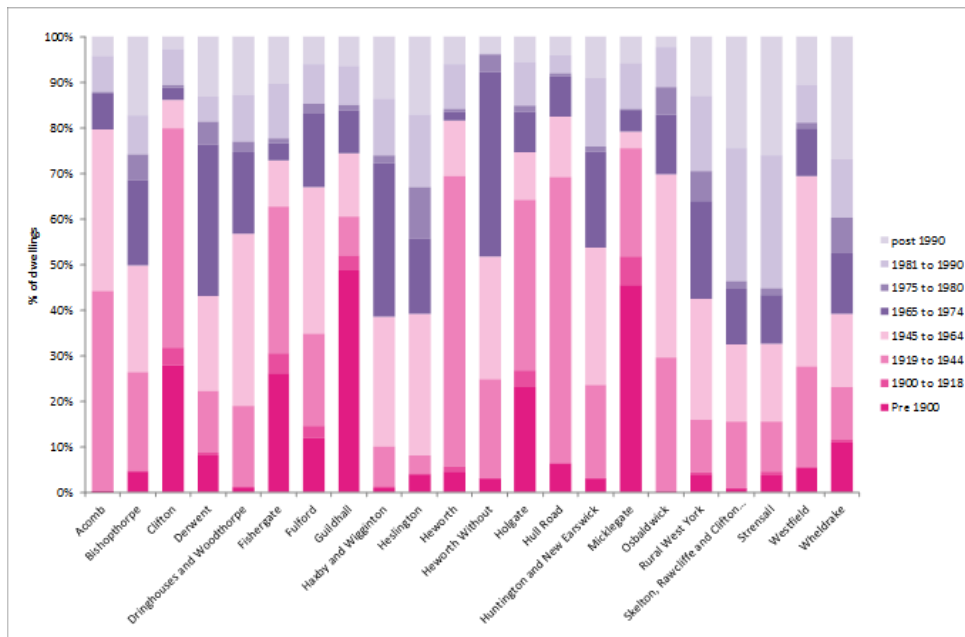
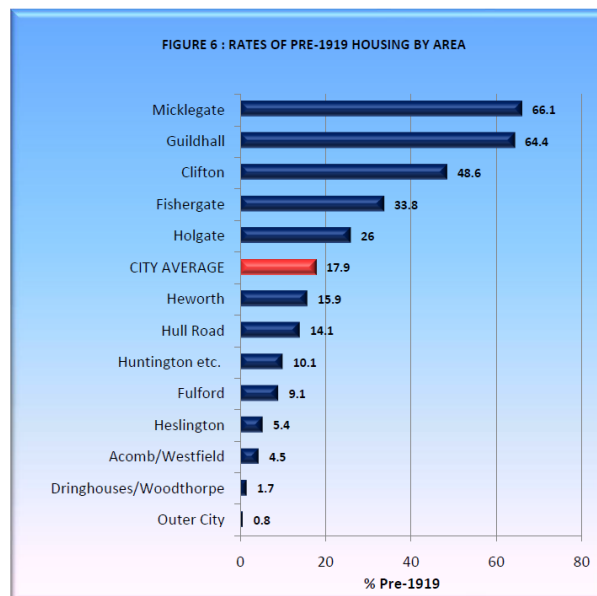


Fig 14. Rates of pre-1919 housing by ward

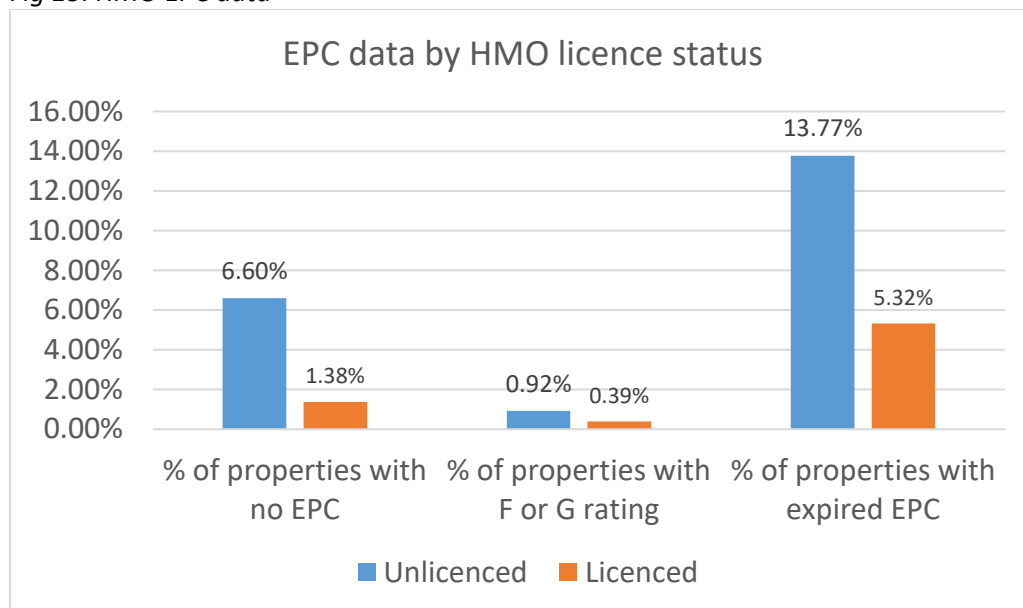


4.12 Energy Performance of HMOs

Analysis of Energy Performance Certificate (EPC) data shown below highlights a much greater incidence of HMOs with no, or an expired EPC certificate, and of F and G rated certificates. A requirement of licensing is that a valid EPC should be submitted with the application. A valid EPCs is a legal requirement for most HMOs and should be E or higher unless there is a specific exemption. By having an EPC it provides critical information which a landlord can act on and improve their HMO. Again this demonstrates the benefits of licensing in reducing these impacts on tenants and improving property standards, and management quality.

It is also a requirement that licensed HMOs have all low-cost energy efficiency measures carried out, which would improve some of the worst performing properties.

Fig 15. HMO EPC data



The EPC analysis data is cross-matched from EPC records and planning article 4 HMO records.

Fig 16. HMO EPC risk ratios

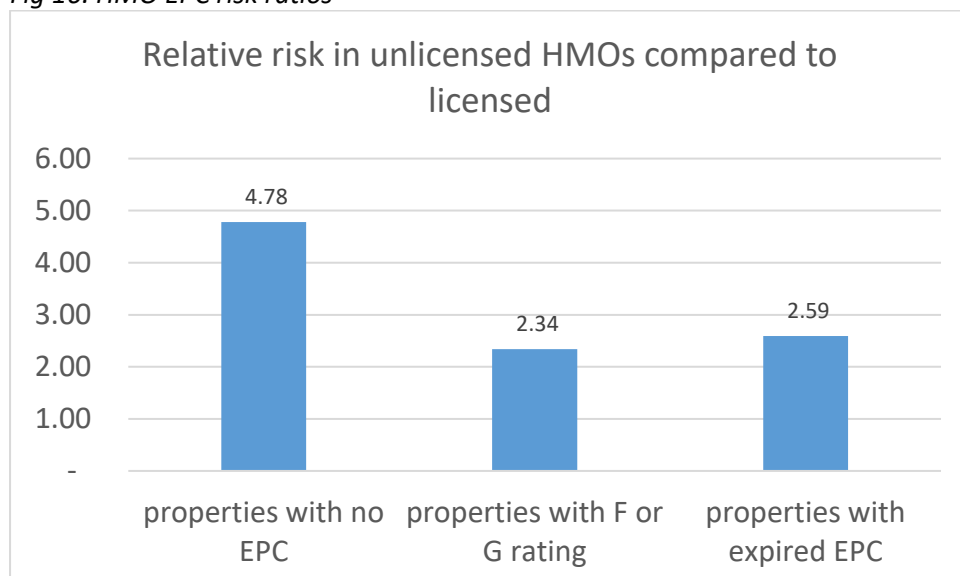


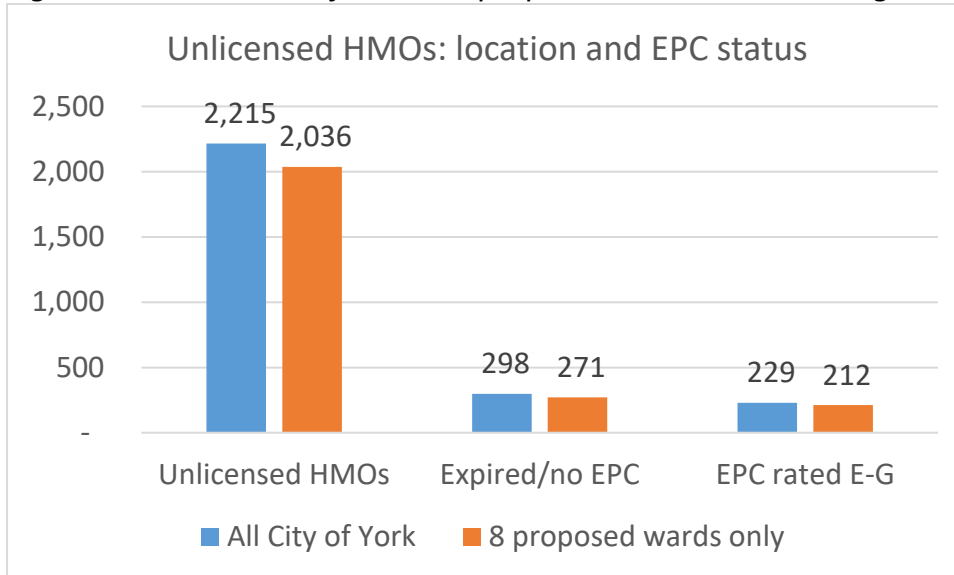
Table 5. EPC data for licensed and unlicensed HMOs in York

EPC Rating (incl. expired EPCs)	Unlicensed	Licensed	Total HMOs
A	3		3
B	108	15	123
C	642	403	1045
D	935	485	1420
E	210	93	303
F	13	3	16
G	6	1	7

No EPC	136	14	150
Ambiguous Address	9	0	9
Exempt	0	1	1
Total	2062	1015	3077

A ward based analysis shows (fig 17.) that the overwhelming majority of unlicensed HMOs with EPC issues that could impact negatively on property standards are concentrated in the 8 wards identified.

Fig 17. Concentration of HMOs in proposed additional licensing wards



There is also an apparent correlation between wards with higher numbers of HMOs and prevalence of lower ratings (i.e. below D) both for licensed and un-licensed HMOs. A targeted Additional HMO licensing scheme would seek to ensure that valid EPCs were provided for HMOs and that the Landlords would be actively be asked to act upon them. The data above shows that these HMOs are most likely to be in the older parts of the city and that tenants are likely to be experiencing the dampness and mould as a result of living in such homes which are not being managed effectively.

4.13 Environmental complaints data

Analysis of complaints data gives insights into potential correlations between anti-social behaviour, noise and waste complaints and areas with higher numbers and concentrations of HMOs.

There appears to be some correlation between anti-social behaviour complaints and areas with higher density of housing and also higher numbers of HMOs. There appears to be no correlation with ASB and HMOs in Osbaldwick and Derwent ward.

Likewise, there appears to be some correlation between HMO prevalent areas and noise complaints, with five of seven areas with the most HMOs appearing towards the top of the list. Again though this may not be evidence of a direct causal link as areas with far fewer

HMOs also feature in the top 10 wards. The concentration of noise complaints is within or adjacent to the urban core where housing is more densely situated.

Waste complaints are also concentrated within or towards the urban core where wards with the greatest number of HMOs are found, though again some of this could be related to littering and commercial operations within or towards the city centre.

Inherently there is a link between high density housing, high concentrations of HMOs with increased levels of anti-social behaviour, noise and waste complaints impacting on residents in those wards.

Fig 18. Antisocial behaviour – Hotspot density

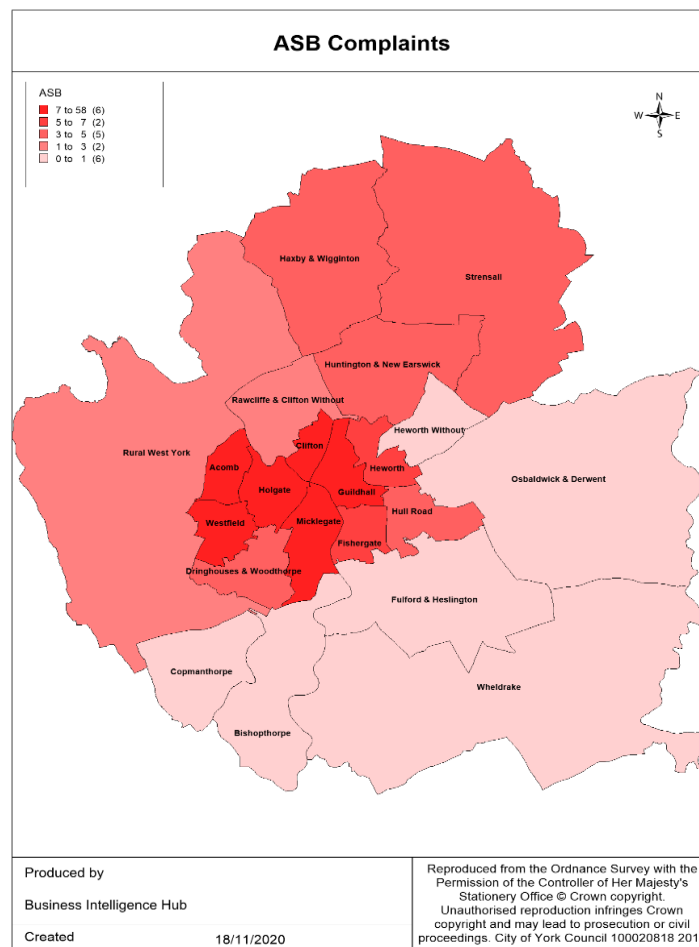
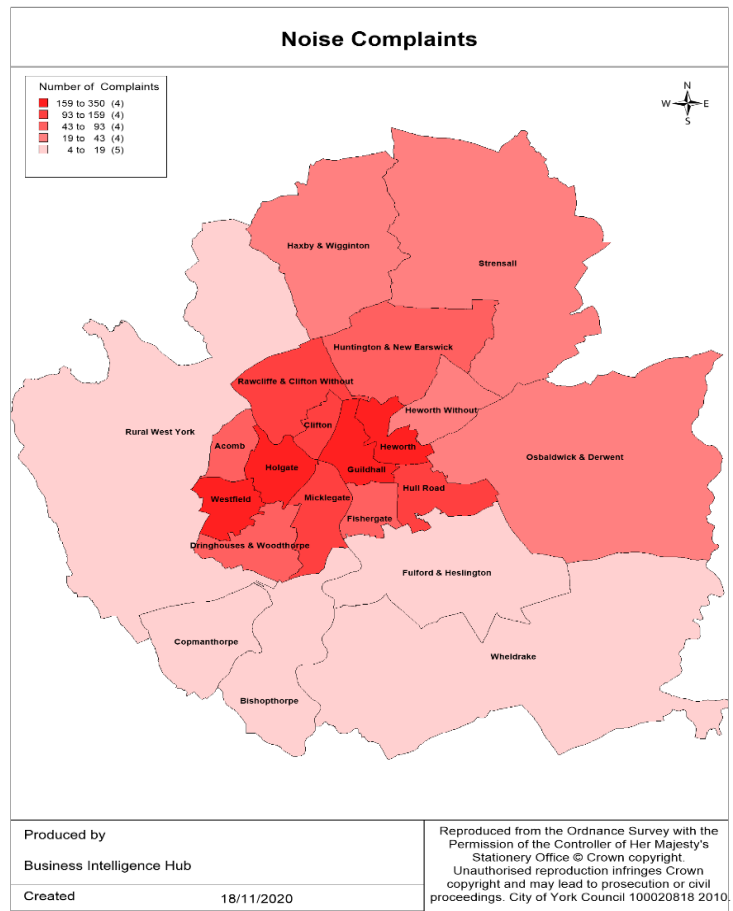
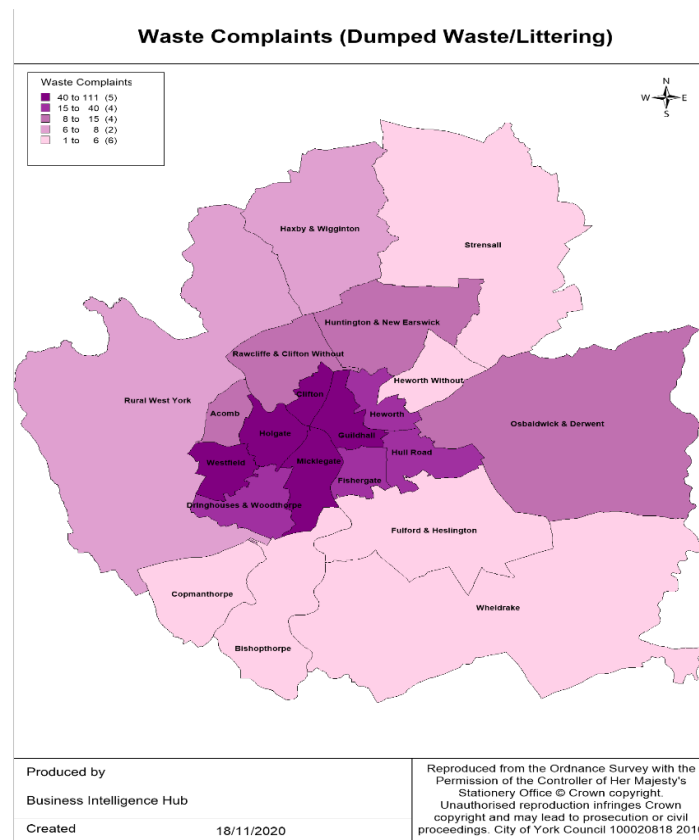


Fig 19. Noise complaints – Hotspot density



* includes Littering and Dumped Waste

Fig 20. Waste complaints – Hotspot density

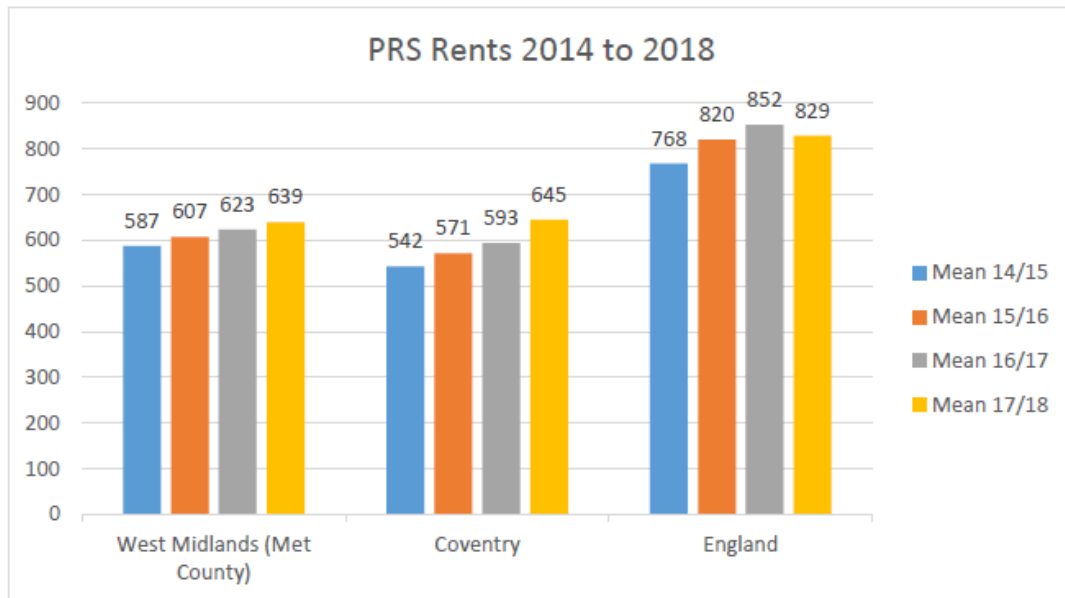


5. Impact of licensing

One of the biggest criticisms of licensing schemes is that the cost associated with the licensing fee will be passed onto tenants by an increase in rent. In 2018/19 City of Coventry Council conducted research into this area and made a comparison of rents from 2014- 2018 between areas in England that had discretionary licensing schemes and those that did not, in order to establish if there was any evidence to show that discretionary licensing increases rent.

The research showed that rental values had increased in Coventry, on average by 19% between 2015 and 2018 compared to 11% in the West Midlands and 8% in England over the same period.

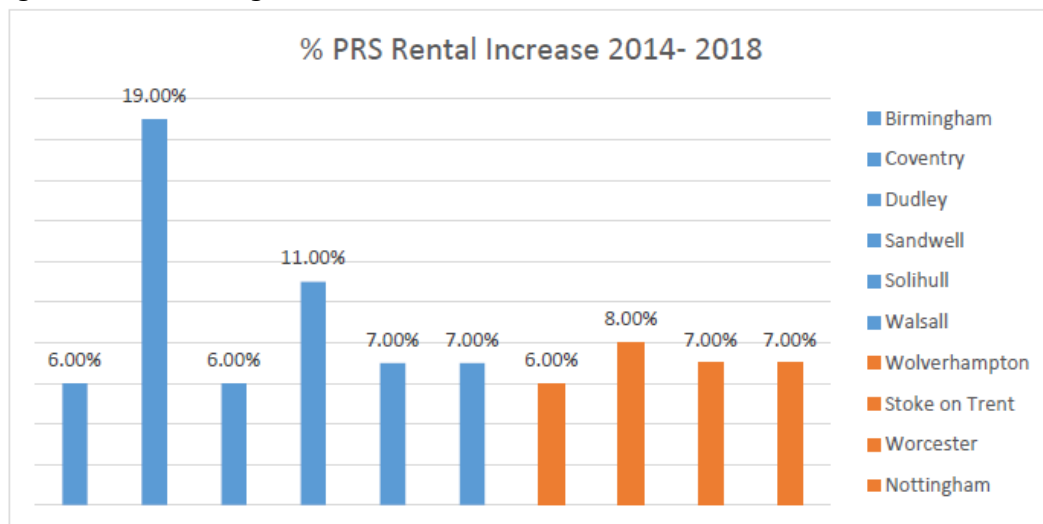
Fig 21. PRS rents between 2014 and 2018



The summary of overall rents was used to conduct the comparison of rents in areas with and without discretionary licensing schemes in other areas across the West Midlands region and England. The comparison can be seen in Figure 22 below.

Fig 22. Comparison of rents in areas with and without licensing.

Councils without discretionary licensing schemes are in blue and Councils with discretionary licensing schemes in orange.



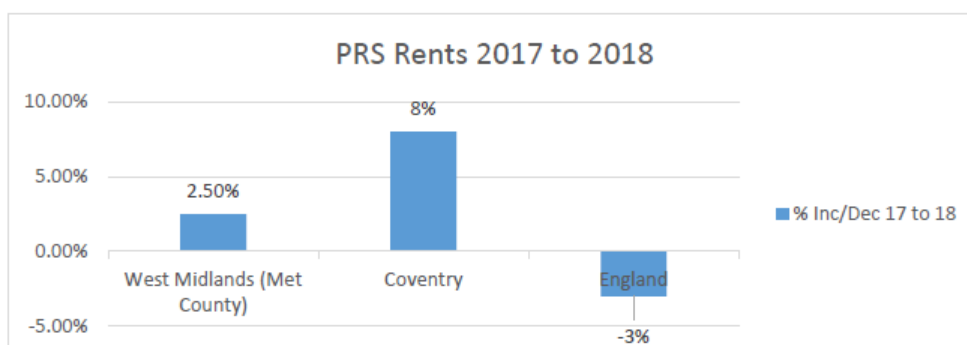
As can be seen from Fig 22 above, rental increases have occurred across all authority areas, with the most significant in Coventry (19%) and Sandwell (11%). Both of these areas do not currently operate discretionary licensing schemes.

It is also notable that those areas with discretionary licensing schemes (Wolverhampton, Stoke on Trent, Worcester and Nottingham) experienced rent increases below the average levels in the West Midlands and, in a few instances (Wolverhampton, Worcester and Nottingham) below those reported across England during the same period.

The Office for National Statistics (ONS) reported that private rental prices paid by tenants in Great Britain rose by 0.9% in the 12 months to July 2018, down from 1.0% in the 12 months to June 2018.

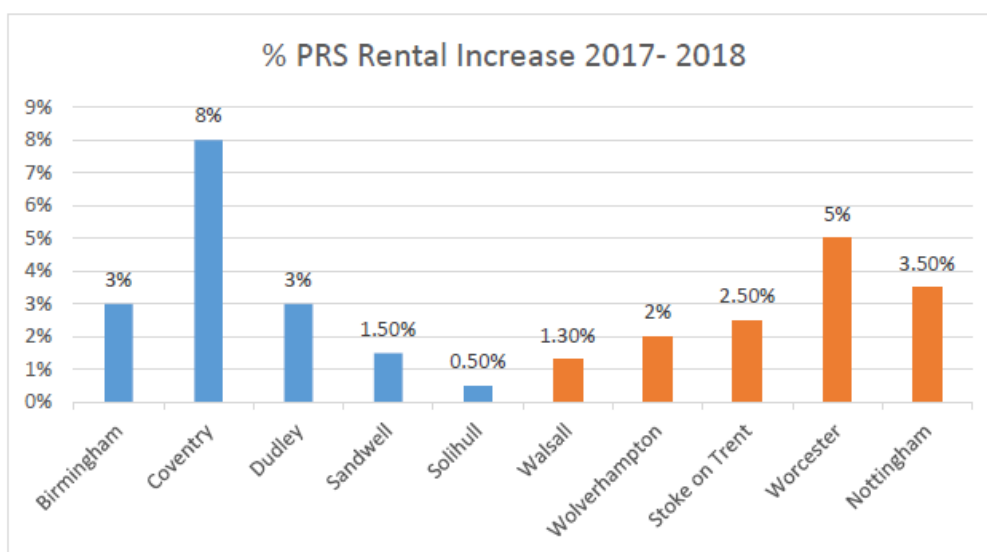
Data available for the period from 1st April 2017 to 31st March 2018 shows that there was an 8% increase in average rents in Coventry compared to 2.5% in the West Midlands and a 3% decrease across England. Figure 24 provides the breakdown for each category reported.

Fig 23. PRS rents during 2017 to 2018



Further analysis of data for this period shows that the average rent increases across the West Midlands were relatively consistent and well above the average for England. Coventry and Worcester experienced the highest increases with 8% and 5% respectively. Overall the greatest increases occurred in areas which do not have discretionary licensing schemes in operation.

Fig 24. Percentage of PRS rent increase during 2017-18



Despite the perception that licensing increases rents it is apparent that there is very little evidence to suggest that discretionary licensing schemes are directly responsible for rental increases. Where there has been an increase in rent it is more likely associated with broader

market factors and not as a direct result of the introduction of discretionary licensing schemes. As noted in section 8.2 below, the proposed licensable HMOs are a distinct sub-market with tenants often limited in ability to pay. Accordingly the evidence identified above is consistent with licensing costs being insignificant in impact on rent increases which are driven by existing supply and demand dynamics.

The CML has reported that activity in the buy-to-let market is set to drop as a result of the recent tax crackdowns on buy-to-let regulations and these are expected to lead to a further 'professionalisation' in the sector, while some 'amateur' landlords could see their properties become less profitable.

It is likely that rents in York will continue to rise as a direct result of these market pressures and by a lack of housing supply generated by fewer buy-to-let properties but not as a direct result of the introduction of discretionary licensing schemes.

6. Proposed Licence Conditions

All HMO landlords letting HMOs in the targeted wards will require a licence from the council for each of their HMOs. The proposed licence full conditions are attached at Appendix 1.

They include conditions required as part of the National Mandatory HMO licensing scheme and proposed new conditions required by the Council around room size having regard to government guidance:

“The mandatory room size conditions will however be the statutory minimum and are not intended to be the optimal room size. Local housing authorities will continue to have discretion to require higher standards within licence conditions, but must not set lower standards”

Recent tribunal decisions have been really clear that the size of the individual rooms should be sufficient to enable adequate living space for all reasonable functions of daily life to be carried out and that a council is entirely justified in refusing to grant a HMO licence.

The licence will also specify the maximum number of households the Council assess the HMO can accommodate or limit the occupancy of the HMO. This might occur if a HMO size was unable to accommodate the number of households or if there was part of the HMO that would not be such as a bedroom, etc.

Failure to comply with any of the licence conditions may result in prosecution or the imposition of a civil penalty of up to £30,000 per breach and loss of the licence.

When deciding to grant a licence the Council must be satisfied that the proposed licence holder is a 'fit and proper person'.

Where landlords fail to licence a property, the council can take enforcement action against them and following successful prosecution they could face an unlimited fine (plus costs) or the imposition of a civil penalty of up to £30,000. Tenants and the Council can claim back rent and/or local housing allowance for a period of up to a year during the time an HMO has not

been licensed. Landlords cannot use section 21 eviction proceedings to evict their tenants whilst the HMO remains unlicensed.

Reference: <https://www.gov.uk/government/publications/houses-in-multiple-occupation-and-residential-property-licensing-reform-guidance-for-local-housing-authorities/houses-in-multiple-occupation-and-residential-property-licensing-reform-guidance-for-local-housing-authorities>

7. Proposed Fees

The City of York Council will charge a fee to cover the scheme running costs. The HMO full fee structure can be found in Appendix 2. New smaller HMOs under the additional licensing scheme will be classed as “Band A” type properties. The licensing process including visits to ensure that the Licence conditions are being met takes the equivalent length of time of those which are currently covered by this fee i.e. HMOs occupied by 5/6 persons.

The City of York Council cannot make a profit or surplus from the scheme, which means it will annually review the cost of running the scheme and the projected revenue stream from licensing. We anticipate that to ensure that the Additional HMO licensing scheme tackles the issues raised in this report effectively, 11 new members of staff are required. Over the 5 year period the scheme will be operated on a basis that a breakeven position is maintained.

If adopted any scheme will conform to the Provision of Services Regulations 2009. This means:

a) The licence fee will be split between the administrative and enforcement costs. The administrative cost of processing the licence will be charged for at the time of application and the enforcement cost will be charged to successful applicants only at the point the licence is issued. Included in the administrative costs all set up costs will have been included. No enforcement charge will be made if the Council refuse to issue the licence.

b) Tacit consent will apply to the scheme. This means that the Council must set a reasonable time frame in which it must process a full and complete licence application. If it fails to meet this time frame then the HMO can be operated as though the Council had issued an unconditional licence. In exceptional circumstances the Council may extend this period once for a maximum of 12 weeks

See Appendix 2 for the full fee structure, however for a “Band A” property a licence issued for the first time for a 5 year period will be

Band	Number of occupants	First stage fee (£)	Second stage fee (£)	Total fee (£)
A	Up to 6 occupants	£717	£478	1195

Subsequent 5 year licences (Renewal) will be

Band	Number of occupants	First stage fee (£)	Second stage fee (£)	Total fee (£)
A	Up to 6 occupants	£522	£348	870

8. Option appraisal and the benefits of additional licensing

8.1 Option appraisal

As part of the Option Appraisal process the council must consider;

- whether there are other courses of action available to them that might provide an effective method of dealing with the problem or problems in question;
- that making the designation will significantly assist them to achieve the objective; and
- that making the designation will significantly assist them to deal with the problem or problems in question

Alternative approaches to extending HMO licensing have been considered and evaluated against the strengths of additional licensing. Each approach is a valuable tool for dealing with the problems in the HMO stock. However in each case the weaknesses outweigh the strengths.

The options considered include possible interventions for tackling substandard and ‘problematic’ smaller HMOs in the city as set out below:

Do nothing further:

The Council has already intervened by introducing an Article 4 Directive to manage the numbers of HMOs across the city. Doing nothing more would leave the local housing market to be the driver for landlords carrying out improvements to their properties.

The council would be limited to a basic complaint response service with action by other departments and agencies on a largely ad hoc basis. The option is reactive and relies on the housing market as a driver for landlord-initiated housing improvement across the board. All council services would continue to use their existing enforcement powers.

Informal area action (Proactive inspection programme):

This would be delivered through a non-statutory Action Area, considering parts of the city where there were concentrations of poorly managed or maintained properties. The driver for the housing improvement would come from a combination of council activity from different services focussing work in the area and landlord activity (including peer pressure)

Voluntary accreditation:

From around 2000 until 2012, the council supported the Universities in running a Voluntary Code of Practice for landlords to sign up to a set of standards. However there

were serious weaknesses with the scheme in that there was no supporting inspection programme to ensure that the standards that landlords were signed up to were being adhered to.

In 2012 with the Universities supporting this scheme brought it to a close and it was replaced by the council run voluntary accreditation scheme. This was initially successful, with over 100 hundred landlords/ agents signing up to the scheme. The scheme included an element of inspection. The scheme was flawed in that it attracted “good” landlords but the HMO landlords with the worst standards did not come forward and so the council was unable to tackle the worst end of the sector through this approach. With the extension of mandatory HMO licensing to HMOs irrespective of the number of storeys the number of landlords in the scheme dwindled to a level which made it unsustainable and it was brought to a close in 2018.

Given this experience it is not considered that this would be an effective response to address problems identified in a significant proportion of HMO property standard and management.

Targeted use of Interim Management Orders (IMOs) and Final Management Orders (FMOs).

The Housing Act 2004 gives local authorities powers to use Management Orders for tackling comprehensive and serious management failures.

City-wide additional licensing scheme.

Licensing would be extended to all HMOs in the city (in all wards) and would include all smaller multi-occupied properties not currently subjected to Mandatory HMO Licensing irrespective of the evidence relating to housing conditions and the impact that HMOs are having on their residents.

Area-based additional licensing scheme.

Licensing would be introduced in selected wards in the city where there is the highest number and concentration of HMOs and where evidence demonstrates there is the greatest need.

In general, approaches other than additional licensing are judged to have the following limitations:

- Most other schemes are expensive and would require funds being taken from the Council Tax. This seems unfair when many of the problems are due to poor management practices by landlords or agents operating in a buoyant market place. Additional licensing would be self-financing with the fee covering the cost of licensing; the fee will be paid by the applicants and not by the wider community.
- The use of IMOs on individual properties does not appear to give value for money, as the amount of resources being put into one property will mean that other properties cannot be tackled. It is clear from our experience that if this were to be the only sanction available then operating more than a few IMOs at a time would not be

feasible given the lack of funding. This approach can also be seen to be heavy handed and can cause problems for the Council when attempting to work with and engage with landlords.

- None of the other proposals give a long-term solution to the problems within the HMO sector.
- Schemes such as the voluntary code/accreditation schemes tend to be self-selecting attracting better landlords rather than the poorer landlords.
- Focussing on the wards with the highest concentration of HMOs and those with the poorest conditions will ensure that council is using the evidence base to ensure that limited resources are effectively used.

8.2 Benefits of additional licensing

While the general public may not be directly involved in paying or receiving rent, they also experience the impact that HMOs have on the social and political economy of York. The view that HMO Licensing is instrumental in the improvement of facilities, management and safety in the housing rental market is echoed by a broad cross-section of the city. Licensing is seen as one strand in preventing the long-term decline in the amenity of the urban environment. It will ensure that residents of the wards are less likely to suffer from badly managed HMOs due to poorly maintained HMOs, and poorly managed HMOs in terms of noise and rubbish.

They recognise that wider licensing removes the inequalities caused by partial regulation and spreads costs and obligations in a fairer way. They recognise that it creates a common footing and can help agents. Provided that it is properly run, they see it as helping the market function effectively.

It is considered that the proposed scheme would meet the statutory tests of Housing Act 2004 Sections 56 and 57 with the benefits outlined below.

Benefit: Substantial improvement to standards and management practices in high risk properties

As demonstrated in the evidence review, licensed properties demonstrate significant improvements at subsequent inspections in key areas such as fire safety, damp, state or repair, statutory management obligations and EPC maintenance requirements. This has the potential to improve wellbeing of tenants who often have limited choice in this sub-sector of the market. It will improve the wellbeing of neighbouring residents by providing improving maintenance and management of HMOs.

Benefit: Consistent approach to HMOs in York

Additional licensing will extend and continue the process of upgrading of HMO rental stock already begun by the Mandatory scheme. Additional licensing will add a significant portion of the York HMO market to the list of those houses where the council currently is involved with licensing.

This will mean that such houses will be subject to the same evaluation and improvement regime as the larger houses already covered by the national scheme. York has in the order of 2,000 HMOs occupied by less than five occupants. They deserve to be afforded the same protection as people in licensed HMOs. Without additional licensing there is significant and growing disparity in York's HMO market.

The inclusion of all multi occupied houses as licensable HMOs will enable York to develop a consistent approach to the whole of the HMO rental market. When there is a critical mass of houses subject to the same requirements, other houses (whether licensable or not) will be obliged to comply with that standard by market pressures. A house presented for rent without offering those facilities is unlikely to be attractive to tenants.

Benefit: Appreciation of property values

York has a buoyant housing market and this being the case means that there will be a financial benefit to individual landlords in the longer term as accommodation standards are raised across the HMO sector. The benefit will be apparent in the capital appreciation of the property value. The heavy usage that multiple households inflict on the fabric of a building usually causes a far more rapid decline than does that of a single family.

Where there are heavy concentrations of HMOs, as is the case in York, it can lead to a general reduction in the amenity of whole suburbs and the relative loss of value of specific properties. A bespoke agreement between landlord and local housing authority as a result of licensing ensures that standards are maintained and improvements encouraged. In turn, this means that neighbourhoods will not deteriorate and thus property values are enhanced.

Benefit: Links with landlords

The formation of a formal but direct and individual link with the council, which the Licence Conditions afford, also allows for a beneficial flow of information between the authority and landlords. Critically the licensing condition which requires a licence holder to hold a recognised training qualification ensures that all licence holders have an understanding of the laws which relate to operating a HMO. This proactive approach will support not only raising physical standards but also improve management of the properties. Landlords and Agents can also sign up to receive news and ideas relevant to the development of the market sector. They can also provide accurate data on which council can make informed decisions on issues which impact on both landlords and tenants.

The creation of a dynamic partnership between the landlord and council is an under-rated benefit of Licensing. There are other, ancillary benefits for landlords through additional licensing.

Benefit: A recognised group of landlords

Landlords, once subject to licensing, become part of a specific group recognised in law and by government policy. This has implications for their ability to organise themselves to influence HMO related decisions. Recognition as a licensed landlord will have several flow-on benefits.

It may have the benefit of providing for simpler justification to lending institutions when it comes to securing finance if the local housing authority requires specific work to be done.

Agents and letting organisations such as student housing departments are more likely to accept landlords if their *bona fides* is supported by being licensed. Licensing brings its own degree of reliability and assurance to the relationship between landlord and agent.

That benefit is reinforced by the fact that licensing requires landlords to keep their letting arrangements (either privately or through an agent) on a more business-like footing. A licensed landlord is obliged to do things formally, like provide written terms of occupancy rather than *ad hoc* verbal arrangements that too often result in disputed interpretations of the agreement.

Benefit: pro-active involvement eliminates reactive work

Licensing also provides a consequential benefit in that it eliminates or mitigates many of the issues that generate tensions between landlords and tenants. Licensing is a means of pre-empting problems (for example, damp or ventilation issues leading to poor living conditions) before they become matters of contention and stress that the landlord would otherwise have to manage. Licensing will go a long way to ensure there are fewer hassles for a landlord from, for example, anxious parents of students who rent a house. It will at least, provide a recognised mechanism for resolving any disputes without the cumbersome mechanisms of prosecution.

The council already deals with much of this work but in different capacities. The work is normally in response to a service request. Reacting to something after damage has been done is usually a negative and inefficient way of resolving an issue. Additional licensing will allow for positive, pro-active and efficient involvement, and should eliminate many problems before they occur.

9. Conclusion

Additional licensing is a viable solution for York, particularly to address poor property conditions and energy efficiency in the HMO sector. This report states the reasoning and evidence collated by City of York Council required to proceed with a formal consultation on the proposal to declare York or certain wards of the city as an area for additional licensing.

The scheme would cover all HMOs in York or certain parts of York, irrespective of the number of storeys and which have 3 or more persons who form more than one household unless they

are specifically exempted by the Housing Act 2004. This will also align with the Council's approach to controlling the numbers and distribution of HMOs outlined in the Article 4 Directive.

The buoyant housing market in York continues to do well with the numbers of HMOs rising each year. Landlords who have chosen to evade controls have operated without regulation for many years, which has resulted in HMOs often being let out in an unsafe manner.

The mixture of property types in the PRS in York coupled with the strong student market means that a high number of HMOs fall outside mandatory licensing. Such properties are next door to, or across the street or around the corner from those that are licensable.

The occupants of licensed properties benefit from the controls on the quality and management of licensed properties. Unlicensed properties may come to the council's notice from service requests from tenants or, more often, from worried parents but many unsatisfactory houses are never reported so standards are not enforced and the quality of the rental stock does not improve.

City of York Council has embraced mandatory HMO licensing which has proved to be a valuable tool in improving poor conditions and management practices in HMOs across the city. The extension of the mandatory scheme to cover more HMOs can only add to this improvement.

The preferred stance of the council is that licensing should apply to *all* HMOs in an agreed area in the same way, for example that licensing applies to *all* taxis. The new powers therefore would give the council the opportunity to make this a reality.

With the introduction of additional licensing controls applied to the whole of the HMO sector either across the city or within certain target wards, the council will be able to take a more proactive approach to dealing with the sector.

The council wants to continue to develop its links and working relationship with landlords and agents in the city, which have been greatly enhanced by mandatory licensing and it will continue to investigate other interventions that could complement additional licensing.

This approach is in line with our strategic ambitions outlined in Section 4 to improve people's quality of life, we are focussed on utilising what tools and resources we have to tackle poor housing standards in York. To this end, this report puts forward the authority's case for introducing additional licensing of HMOs in the PRS, in those wards where we know some of the worst housing standards can be found.

Additional licensing will always be considered as part of a wider set of measures to enable landlords in York to provide good quality housing within their communities and additional licensing can help alleviate the poor housing conditions and management in the HMO sector by setting and maintaining the appropriate standards, in the 8 wards of Hull Road, Guildhall ward, Fishergate ward, Clifton, Heworth ward, Micklegate ward, Osbaldwick and Derwent ward and Fulford and Heslington.

10. Consultation

There is a statutory requirement to consult for a minimum period of 10 weeks on any proposals to designate an area subject to Additional Licensing. The first consultation showed that there was significant support for Additional HMO licensing but the initial analysis found that there was a lack of understanding in some areas around the evidence base specifically around how additional HMO licensing would raise standards, the proposed draft conditions for the smaller HMOs and also the fee structure.

In summary the first online consultation was shared with/via

- A general press release
- 598 Landlords/agents already known to the council
- Student bodies and the Universities/colleges of further Education
- the York Residential Landlord Association to distribute to their members
- the Residential National Landlord Association (RNLA)
- Business networks
- statutory partners North Yorkshire Fire and Rescue, North Yorkshire Police and health partners through the Better Care Fund partnership
- the third sector partners through Advice York Partnership and Citizen Advice York
- Council Corporate and Housing Face book accounts

Responses

- 822 responses were received in direct response to the HMO online consultation
- 2 focus groups were held one with the student unions and one with the local group of the RNLA
- 10 individual letters/emails received

Subject to Covid restrictions during the consultation period the second consultation will include the following.

- Online questionnaire tailored to gauge cross section of views on the proposals
- Focus groups with key stakeholder groups, Universities and Student bodies
- Residents and other key organisations such as the Police
- Drop in sessions in various parts of the City
- E-communications through social media and the Council's website
- Workshops with Landlords and Agents to present the proposals.

The second consultation will seek to ensure that all those persons who would be likely to be affected are consulted upon and are clearly aware

- Which wards are being proposed to be included in the designation namely Hull Road ward, Guildhall ward, Fishergate ward, Clifton Ward, Heworth ward, Micklegate ward, Osbaldwick and Derwent ward and Fulford and Heslington ward.
- The evidence used to determine the proposed designation and how an additional licensing scheme would seek to improve standards and management of HMOs in these wards where other action has been ineffective in doing so

- What the proposed scheme looks like including the type of HMO to be included, the draft conditions being proposed and fee structure,

The results of this second consultation will be considered alongside the first and will form part of the development of the proposed structure of any additional licensing scheme.

Both consultations will satisfy the legal requirement in section 56 and 57 of the Housing Act 2004 to take reasonable steps to consult with those people who may be affected by the designations. This includes neighbouring areas outside of the identified 8 wards

Appendix 1: Licensing Conditions for Houses In Multiple Occupation

General Statement

The council aims to encourage, support and regulate private landlords and agents to provide safe and well managed properties, free from category 1 hazards. Inform and support tenants around what they can expect⁹. Good quality Houses in Multiple Occupation (HMOs) provide a source of affordable and flexible housing for residents in the city.

To support this aim and to ensure that Houses in Multiple Occupation, the changes reflect the:

- Housing Act 2004 and regulations/orders made there under
- The councils wider strategic objectives in particular relating to sustainability
- Best Practise from other councils
- First Tier Property Tribunal judgements,
- Other legislation such as the Energy Efficiency (Private Rented Property)(England and Wales) Regulations 2015.

Where it relates to a new HMO then the proposed licence holder will need to ensure that the standards are achieved by complying with the licence conditions prior to a HMO being licensed and let.

The three tests being that the:

- 1) Property is reasonably suitable for occupation as a HMO (**physical standards**)
- 2) Management arrangements are satisfactory (**management standards**) **including having passed a recognised training qualification or to do so within a 18 month period of issuing the licence**
- 3) Licensee and manager are fit and proper persons (**Fit and Proper test**) The applicant must be the most appropriate person to hold the licence.

The council is aware that enforcement action on its own is insufficient. We will continue to work in partnership with landlords/managing agents and letting agents and other partners. By offering a wide range of support/advice for example on our website, landlord training and events.

HMO Licence – general

A licence will be valid for a maximum of five years and will specify the maximum number of occupants and households for the house and the number and occupancy levels within each room used as sleeping accommodation.

A licence will not relate to more than one HMO.

It cannot be transferred to another person if the licence holder dies, the licence cease to be in force.

During the first 3 months beginning with the date of the licence holder's death the house will be treated as if a temporary exemption notice (TEN) has been served

A licence ends automatically after 5 years or after the period specified in the licence (if that is different).

Unless the HMO ceases to be licensable within that period or the council grants a temporary exemption notice on the expiry of that period the HMO must be re-licensed or an Interim Management Order made in respect of it

⁹ Strategic Aim 2 Private Sector Housing Strategy

A licence will be granted:

- Where the house is reasonably suitable for occupation as a HMO (**physical standards**) and
- The management arrangements are satisfactory (**Management Standards**) this includes the licence holder having attended a recognised training course or to do so within a 18 month period of issuing the licence.
- The licensee and manager are fit and proper persons (**Fit and Proper test.**) The applicant must be the most appropriate person to hold the licence

A property which meets the requirements of being the licensing of HMOs order will need to be licenced even if the property does not have the relevant planning permission. This does not mean that the property has the relevant planning permission.

Transitional Arrangements for HMOs which are due to be licenced for the first time under the Additional HMO Licensing scheme

All new HMO applications received following the declaration of an Additional HMO Licensing Scheme will be risk assessed to determine when to visit the property during the 5 year period. The risk assessment will have regard to:

- 1) The size of the sleeping rooms/communal rooms and whether they meet the new minimum space standards (see section on space standards)
- 2) Safety issues – in particular relating to fire safety, gas safety and electrical safety
- 3) Level of amenities
- 4) History of compliance with the landlord and any person managing the property.

Where it is determined that the property does not meet the requirements relating to safety and/or room sizes. Then the property will be visited before a licence is issued to ensure that these safety matters are resolved and the appropriate action is taken having regards to our enforcement policy.

Where the minimum room sizes are not met a licence condition will be issued having regard to the room size giving the licence holder up to 18 months to ensure that the room either meets the standard through building work or that it ceases to be used. NOTE the council does not intend to reduce the licensing fee in these circumstances.

Where the property is safe and meets the minimum room size standards but lacks the level of amenities (bathroom and kitchen) in line with Appendix A. The licence holder will be normally be given up to 18 months to comply with these provisions.

The Three Tests

Test 1: That the property is reasonable suitable and meets the physical standards

Licence Condition	Additional explanatory notes
<p>All rooms used for sleeping accommodation and communal space will meet the legal minimum room sizes and have regard to the “ideal” standard. Each room used for sleeping accommodation room will specify the size of the room and the number of people who can occupy that the room</p> <p>Where gas is supplied to provide copies of the annual gas safety certificates at the</p>	<p>It should be noted if dwellings do not meet all aspects of the guidance below they may not necessarily be hazardous when assessed using the HHSRS ie if overall dwelling sizes are not achieved, bedrooms are marginally smaller and/or narrower than specified or when ceiling heights are marginally lower than specified.</p>

application stage and on demand.

The licence holder must ensure that carbon monoxide detectors are fitted to all high-risk rooms/each level where there is sleeping accommodation to ensure the audibility of the alarm is adequate to wake a sleeping person, in accordance with EN50291. Where this is not being met the licence will be issued with a condition that the matter is required within a maximum of 28 days.

To provide a copy of the current electrical safety certificate for the fixed electrical wiring at the application stage. The electrical safety inspection should be done at intervals not exceeding 5 years. Where matters have been raised by the competent person as needing urgent or remedial the licence holder must have declared that the work must have been completed.

To provide current copies of the Portable Appliance Tests (PAT) that a competent person has carried out those checks within two years of making the licence condition. To ensure throughout the period of the licence that the checks are carried out at least once every two years. The licence holder must supply to the authority on demand a copy of the current PAT certificate.

Where furniture is provide that the licence holder on applications confirms that it meets the Furniture and Furnishings (Fire Safety) Regulations 1988 as amended and that continues to do so throughout the period of the licence.

To provide a copy of the **comprehensive fire** risk assessment for that property and details of the satisfactory means of fire escape and fire detection system.

<p>To provide copies of the Energy Performance Certificate for that property (EPC). The condition will ensure that the property complies with the Minimum Energy Efficiency Standards as per the regulations or that the Licence holder has registered the property on the PRS exemption register and provided the relevant evidence to support the exemption</p> <p>To ensure that adequate heating is provided which is fully controllable by the tenants, and safely and properly installed and maintained. It should be appropriate to the design, layout and construction, such that the whole of the dwelling can be adequately and efficiently heated. The space heating may be centrally controlled but such systems should be operated to ensure that tenants are not exposed to cold indoor temperatures and should be provided with controls to allow the tenants to regulate the temperature within their unit.</p> <p>Conditions can be imposed restricting or prohibiting the use of occupation of particular parts of the house by persons occupying it where there are specific health and safety issues or where the minimum room sizes are not being met.</p> <p>Conditions can be imposed requiring work to ensure facilities or equipment to be made available or to meet any such standards that the works are carried within such period or periods as may specify by in or determined under the licence.</p>	<p>For guidance on risk assessments and standards visit North Yorkshire Fire and Rescue http://www.northyorksfire.gov.uk/businesssafety/legislation</p> <p>To ensure that they comply with the Minimum Energy Efficiency Standards so that properties with F and G ratings are not being let unless the license holder has registered their property on the Government website and has provided the relevant evidence to support the exemption. https://prsregister.beis.gov.uk/NdsBeisUi/failover-landing</p> <p>This will be linked to the condition relating to minimum room sizes.</p>
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<p>To provide details about facilities and equipment to be made available in the house for the purpose of meeting the kitchen, bathroom and personal washing facilities standards as per prescribed in the national standards as outlined in Appendix B. Should the standards not be met then a licence condition will be issued to provide the necessary standards within a period up to 18 months of issuing the licence.</p> <p>Conditions will be imposed requiring any such facilities and equipment provided to be kept in good repair and proper working order.</p>	<p>Where a property is not visited prior to issuing a licence for any other purpose (room size or fire safety) and the property is deemed to be meet all other requirements apart from the amenity standards in appendix B then a licence condition will be issued giving up to 18 months to meet those standards</p>
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That the management arrangements are satisfactory

Conditions	Additional explanatory notes
<p>A system for tenants to report defects, including in emergencies and arrangements to respond to those requests.</p> <p>To provide a written statement of terms of the tenancy to the tenants within 28 days moving in to the HMO.</p> <p>A process for dealing with anti-social behaviour occurring within the HMO by tenants or their visitors.</p> <p>Arrangements in place for periodic inspections to identify where repair or maintenance is needed. Should be met and that the licence will be issued to ensure that they continue to be met.</p> <p>To keep smoke alarms in working order. To supply on demand with a declaration by the licence holder as to condition of the and positioning of such alarms</p>	

<p>The name, address and telephone number for licensee and manager is to be displayed in the common parts of the HMO.</p> <p>Copies of a valid relevant safety certificates (gas/electrical/ PAT testing) and a plan showing the internal layout of the property specifying the rooms to be displayed in the common parts.</p> <p>A copy of the licence and licence condition to be displayed in the common parts.</p> <p>The licence holder must ensure that the exterior of the property is maintained in a reasonable decorative order and state of repair.</p> <p>The licence holder must ensure that the refuse is stored correctly at the property. That information about refuse storage and collection is given to the tenants at the start of the property including a copy of the refuse collection calendar and at the end of the tenancy the tenant is provided with information and guidance on the correct disposal of excess and bulky waste</p> <p>All other matters relating to the management of the HMO will be dealt with under the management regulations.</p>	<p>This will be deemed to be met if kept in a file for public viewing in the communal areas of the licenced property</p> <p>All relevant safety certificates to be displayed and a copy of the layout of the property specifying the rooms used for sleeping accommodation and the maximum number of occupants. This will be deemed to be met if kept in a file for public viewing in the communal areas of the licenced property</p> <p>Amended condition: to include the licence conditions to be provided at the house. This will be deemed to be met if kept in a file for public viewing in the communal areas of the licenced property.</p> <p>To ensure that licence holders are provide adequate storage at the property. That the refuse storage and collection is being properly managed by the licence holder by requiring the licence holder to give information to the tenant about the refuse storage arrangements and collection at the beginning, during and end of the tenancy in line with the council scheme</p>
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Fit and proper person test for licence holders and managers

A person will be considered fit and proper if the council is satisfied that:

- They have no unspent convictions relating to offences involving fraud, dishonesty, violence or drugs, or sexual offences
- They have no unspent convictions relating to housing or landlord and tenant law
- They have not been refused a HMO licence, been convicted of breaching the conditions of a licence or have acted otherwise than in accordance with the approved code of practice under S197 of the Act within the last five years
- They have not been in control of a property subject to an HMO Control Order an Interim Management Order (IMO) or Final Management Order (FMO) or work in default carried out by a local authority
- They have not been subject to legal proceedings by a local authority for breaches of planning, compulsory purchase, environmental protection legislation or other relevant legislation.

The council will require all applicants to complete a self-certification form. The council will reserve the right to check the accuracy of the information with its partners.

Amenity Standards – Bathroom Facilities

The table below outlines the minimum facilities which should be provided

Number of persons Sharing	1 bathroom with WC	1 bathroom and 1 separate WC	2 bathrooms with WCs	2 bathrooms, a separate WC, or a third bathroom	3 bathrooms with WC
3 or 4	✓	x	x	x	x
5	x	✓	x	x	x
6	x	x	✓	✓	✓
7	x	x	✓	✓	✓
8	x	x	✓	✓	✓
9	x	x	x	✓	✓
10	x	x	x	✓	✓
11 - 15	x	x	x	x	✓

Where a separate toilet is provided the room should contain a wash hand basin with hot and cold running water. The wash hand basin should be correctly connected to waste drainage. The term bathroom means a room containing a bathing facility, which can either be a suitable bath or shower compartment or both.

Amenity Standards- Kitchen Facilities

The table below outlines the minimum facilities which should be provided

Up to 5 People	<ul style="list-style-type: none"> • 1 sink • 1 x 4 ring cooker • other amenities as detailed below
6-7 people	<ul style="list-style-type: none"> • 2 x sink or 1x sink and 1 x dishwasher • 2 x 4 ring cooker or 1x 6 ring cooker and microwave • other amenities as detailed below
8-10 people	<ul style="list-style-type: none"> • 2 x sink or 1 x sink and 1 x dishwasher • 2 x 4 ring cooker • other amenities as detailed below
11+ people	<i>Please contact the Housing Standards and Adaptations Service</i>

Other required kitchen amenities in a shared house

Fridge with freezer space -0.075m² or one 1 shelf per person

Worktops 1.5m x 0.5m for up to 5 sharers, additional 0.5m work surface for each additional user up to 3m x 0.5m

Electrical sockets 4 in addition to those used for major appliances (fridge, microwave, washing machine)

Dry food Storage 0.08m³ or 1 shelf per person (the space in the unit under the sink is not acceptable)

Where cooker rings/hobs are provided they must suitably and safe located and suitably connected to the fixed electrical system.

Guidance Note for room sizes and measurement

The purpose of this guidance is to advise those responsible for living conditions in Houses in Multiple Occupation about how to determine an appropriate size for a dwelling. The guidance has also been introduced to reduce the increasing number of Crowding and Space hazards which have been identified within the city over recent years. Having read this guidance if readers are still unable to determine an appropriate size for a dwelling they may wish to consult a suitably qualified professional such as an Architect or Property Surveyor.

The Housing Act 2004 (“the Act”) introduced a new system for assessing housing conditions known as the Housing Health and Safety Rating System (HHSRS). The underlying principle of the HHSRS is that “any residential premises should provide a safe and healthy environment for any potential occupier or visitor”.

Dwellings are assessed using the HHSRS to determine if any defects or deficiencies associated with the dwelling could contribute towards a hazard which has the potential to cause harm. The seriousness of the hazard is then scored and dependent upon that score rated as either a Category 1 or Category 2 hazard. Councils have a legal duty to address the most serious Category 1 hazards and discretionary powers to address Category 2 hazards.

It is envisaged assessing the suitability of a dwelling using this new guidance will serve to increase acceptable minimum room sizes.

It should be noted the provision of sufficient space applies to all occupiers and potential occupiers, irrespective of age. This is because the health and safety of all age groups, as specified in section 11.02 of the HHSRS Operating Guidance, can suffer due to a lack of space.

Any dwelling which cannot safely accommodate the required basic items of furniture and associated activity zones for the expected number of users may well be hazardous when assessed using the HHSRS and therefore potentially subject to enforcement action

This guidance refers to legislation, regulations and national standards which if needed should also be referred to by landlords, property developers and managing agents to assist them in determining a suitable size for a dwelling.

The Licensing of Houses in Multiple Occupation (Mandatory Conditions of Licences) (England) Regulations 2018

These regulations only apply to licensable HMO, they legally require HMO licence holders to:

- ensure the floor area of any room in the HMO used as sleeping accommodation by one person aged over 10 years is not less than 6.51m²
- ensure the floor area of any room in the HMO used as sleeping accommodation by two persons aged over 10 years is not less than 10.22m²
- ensure the floor area of any room in the HMO used as sleeping accommodation by one person aged under 10 years is not less than 4.64m²
- ensure any room in the HMO with a floor area of less than 4.64m² is not used as sleeping accommodation

These floor areas are to be regarded as barely adequate and therefore should not be routinely assumed as optimum bedroom sizes. The lack of space in bedrooms of this size becomes apparent when furnished with the required basic items of bedroom furniture.

It should be noted the Act enables the council to determine a HMO is not reasonably suitable for occupation even if it does meet prescribed standards for a specified number of persons or households. This means even if a dwelling has a sufficient number of bedrooms which meet the minimum size requirements and contains the required number of bathroom/toilet/kitchen facilities etc. the council may for some other reason, such as inadequate communal space, still refuse to grant a licence.

Before determining an appropriate dwelling size, the mode of occupation must first be determined. Mode of occupation is the manner in which people come to live in a property and how they then interact with each other ie in a cohesive or non-cohesive manner. It is

how the dwelling is actually occupied which determines dwelling size and not the way in which the property is presumed or asserted to be occupied by the landlord or agent.

There are broadly two types of HMOs

- 1) Shared houses
- 2) Bedsit Accommodation

Shared houses

These are HMOs which are normally rented to a defined social group who are usually known to each other prior to occupation, commonly students on a joint contract/lease or sometimes work colleagues, who all wish to live in a cohesive manner.

Occupiers each enjoy exclusive use of a bedroom, with or without a lock on the door, but as in a single household dwelling would willingly share a living room, kitchen and dining space with other occupiers. Occupiers of this type of HMO tend to have the same characteristics as a single family household and are usually liable under the terms of their contract/lease to replace housemates who move out during the term of the tenancy.

The anticipated duration of a tenancy in this type of HMO will typically be 12 months and occupiers, such as students, may spend long periods away from the dwelling.

Bedsitting accommodation

These are individual lettings usually found within HMOs in which occupants each have exclusive use of certain lockable rooms but share one or more basic amenity such as a kitchen, bathroom or toilet with other tenants. Occupants in these HMOs tend to live in a non-cohesive manner.

Properties containing bedsitting accommodation sometimes do not have communal living or dining rooms because each occupant typically wishes as far as possible to live independently of other tenants. Occupants will have their own letting agreement which specifies the part of the property they can exclusively occupy. It should be noted even when a communal living, kitchen or dining room are provided, unless there is evidence of regular use of these facilities by all occupants, individual letting rooms will need to be of a sufficient size to cater for the combined activities of living, sleeping, cooking and dining.

If shared kitchens are provided in dwellings containing bedsitting accommodation they must be of a sufficient size for the number of users and no more than one floor distance from any unit of accommodation. Unless an eating area is provided in the kitchen. For health and safety reasons tenants must not have to negotiate more than one staircase carrying hot food and drinks.

Occupants living in bedsitting accommodation are usually signed up on an Assured Shorthold Tenancy (AST). These tenancies normally begin as fixed term tenancies where the duration is defined from the outset, typically 6 months, however tenants can live in bedsits for many

years. Tenants often have no say about who they live with because other tenants are usually selected by the landlord/agent as and when units of accommodation become available.

Proposed **minimum** bedroom sizes and communal room sizes having regard to the useable space

It should be noted if dwellings do not meet all aspects of the guidance below they may not necessarily be hazardous when assessed using the HHSRS ie if overall dwelling sizes are not achieved, bedrooms are marginally smaller and/or narrower than specified or when ceiling heights are marginally lower than specified.

It should be noted bedroom sizes contained in the guidance **do not** supersede bedroom sizes mentioned in the HMO (sorry not sure I understand this bit)of this guidance however bedrooms which comply would more likely be regarded as being “ideal” as defined in the HHSRS.

Guidance on measuring room

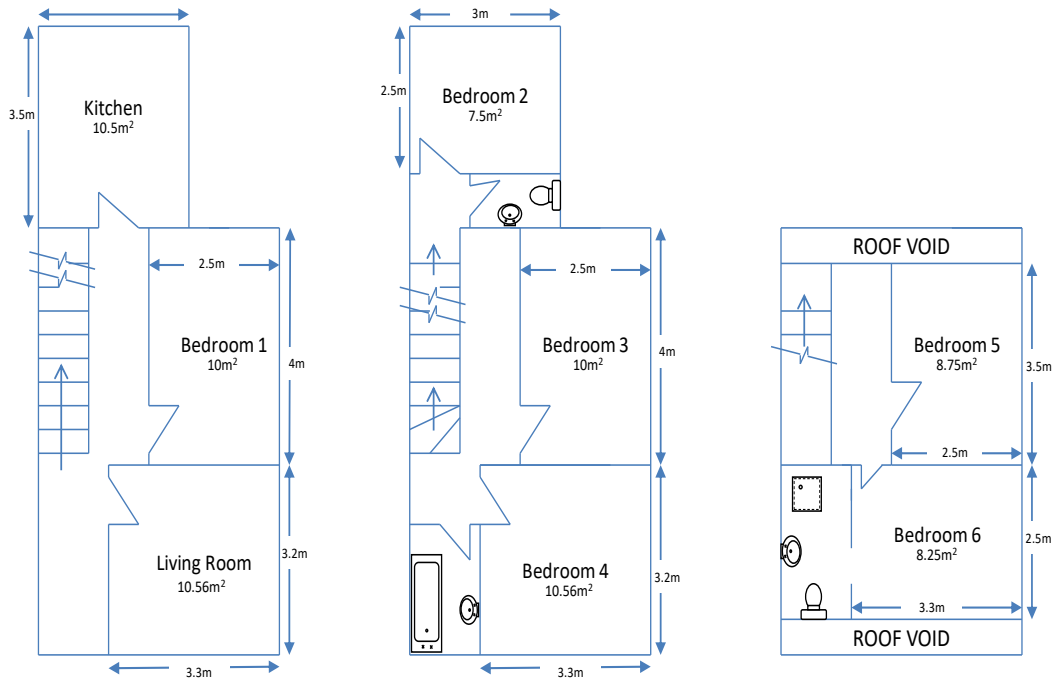
When measuring a room to be used for sleeping accommodation or communal spaces, only practical useable floor space must be measured.

When measuring the room the following space should be excluded:

- Floor areas where the ceiling height is less than 1.5 metres
- Chimney breasts
- Area taken up by bathroom/WC facilities either en-suite or within the room
- Areas which are not floor spaces – e.g. bulkheads and wide window ledges
- Any floor space which for any other reason renders it un-usable by the occupant

We will include:

- Bay windows
- Fixed cupboards – usable by the occupant
- Walk in wardrobes where they are at floor level and have a head height of at least 1.5m
- Projected skirting boards



Proposed Room size Guidance for Shared Houses

Category 1: HMO Occupied by 3 -7 People with communal living space	
Single Bedroom	6.51 square metres (Sqm)*
Double Bedroom	10.22 Sqm*
Kitchen	7 Sqm
Living room	10 Sqm
Combined kitchen/living room	15 Sqm

Category 2: HMO Occupied by 8 – 10 People with communal living space	
Single Bedroom	6.51 Sqm*
Double Bedroom	10.22 Sqm*
Kitchen	10 Sqm
Living room	10 Sqm
Combined kitchen/living room	18 Sqm

Bedsit Accommodation

Category 3: HMO Occupied by 3 – 7 People with <u>no</u> communal living space but shared kitchen	
Single Bedroom	10 Sqm
Double Bedroom	15 Sqm
Kitchen	7 Sqm

Category 4: HMO Occupied by 8 -10 People with <u>no</u> communal living space but shared kitchen	
Single Bedroom	10 Sqm
Double Bedroom	15 Sqm
Kitchen	10 Sqm

Category 5: HMO – cooking facilities in bedrooms	
Single Bedroom	13 Sqm
Double Bedroom	18 Sqm

Both Shared and Bedsit HMOs with more 11 or more occupants will be individually assessed.

Appendix 2: Proposed fees for new HMO licence applications from the start date of the new Additional HMO licensing scheme

What is an HMO?

A property is a house in multiple occupation (HMO) if both of the following apply:

- at least 3 tenants live there, forming more than 1 household
- there are shared facilities e.g. toilet, bathroom or kitchen facilities

Under the proposed Additional HMO Licensing Scheme the threshold for licensing a HMO in the targeted wards of the city will be 3 tenants or more living there forming more than 1 household. In the remainder of the city Mandatory HMO licensing will be 5 or more tenants forming more than 1 household

There are two types of HMO licence applications with two different licensing fee structures

- A new HMO licence application, which is when a licence holder applies for the first time to have a HMO licence for a specific property
- A Renewal HMO licence application, when a licence holder applies for a subsequent and successive HMO licence when the licence period comes to the end.

In both cases a licence normally lasts 5 years

The licence fee structure reflects the amount of work involved to process the application including the visit(s) to ensure that it is compliant with Part 2 matters of the Housing Act 2004.

In line with recent court decisions – there are 2 stages to fee payment:

- **your first stage fee payment** will need to accompany your licence application so that we can carry out necessary checks to enable the Notice of Intention to Issue the licence
- **your second stage fee payment** will need to be paid when your application is complete, but before the Notice of Decision to grant the licence is issued. There's a reduction of £75 to the second stage fee if you've already attended a recognised training course

Band	Number of occupants	First stage fee (£)	Second stage fee (£)	Total fee (£)
A	Up to 6 occupants	£717	£478	1195
B	7 to 9 occupants	£837	£558	1395
C	10 to 14 occupants	£915	£610	1525
D	15 or more occupants	£1029	£686	1715

Fees for HMO licence renewals

Licence holders renewing a licence for the same property will be charged a 'renewal fee', which is lower than the full HMO application licence fee (provided we receive your application in time).

If we receive an incomplete or late application, we'll charge the full fee (as for an initial application) as detailed above. However, HMO training discounts will still apply.

Note: All quoted fees are **VAT exempt**.

Band	Number of occupants	First stage fee (£)	Second stage fee (£)	Total fee (£)
A	Up to 6 occupants	£522	£348	870
B	7 to 9 occupants	£558	£372	930
C	10 to 14 occupants	£579	£386	965
D	15 or more occupants	£639	£426	1065

We charge for a property we find to be unlicensed.

If we find an unlicensed rented property, we will charge an additional charge (based on the hourly enforcement rate) if we have to do more administrative work than is normally expected, such as identifying unlicensed HMOs and bringing them into the licensing regime. This applies only where we make a decision and don't take formal enforcement action.

If you fail to licence an address that isn't exempt we may:

- take prosecution proceedings
- impose a financial penalty of up to £30,000

If you're convicted, the Court may impose an unlimited fine.

You could also:

- have control of your unlicensed properties taken away from you
- be ordered to repay up to 12 months' rent to us or your tenants
- be restricted on how you terminate tenancies

Appendix 3: Background information

A1 The Housing Standards and Adaptations Team

The council's Housing Standards and Adaptations team (the team) play a key role in regulating the private housing sector through education, persuasion and enforcement activities. The team are responsible for ensuring properties and landlords in the PRS meet minimum legal requirements.

The service has been working with landlords to improve conditions within the HMO stock of the city through the national mandatory HMO licensing scheme as well as statutory regulatory functions relating to maintaining minimum standards in properties in the rented sector.

A variety of interventions have been used in York to tackle problems in the HMO stock in the city. These range from providing advice and support to landlords and tenants through to the use of legislative powers to raise standards within HMOs.

The primary driver for all of the work carried out by the team is the protection of the health, safety and welfare of residents living in HMO's whether it is acting in an advisory role or regulatory role through enforcement. Where serious breaches occur legal action has been taken which has led to convictions and formal action. The outcome of this work is a healthier and safer environment in which people live.

The team works with a range of internal services including Housing options, Planning and Community Safety. The team contribute to the council's corporate objectives and there are also strong links with external agencies including in particular North Yorkshire Police and Fire and Rescue services, HMRC and UK Border Agency.

The relationship with private landlords and letting agents within the city and other stakeholders has developed over the years and events are held to inform landlords and agents of key issues that may affect them. The service also meets with letting agents, college domestic bursars and other strategic partners on a regular basis. Since 2016 it has been a legal requirement for all licence holders to hold a recognised training qualification as a condition of HMO licensing. Following receipt of a successful bid to the MHCLG the team is now able to offer online training to all landlords.

Despite the above many landlords remain disengaged until formal action is pursued by the council.

A2 Demographics

York's population increased from 190,800 in 2008 to almost 210,000 in 2018, a rise of over 10%. Almost 1 in 4 (23%) of all residents in York are aged 18-29, a much higher proportion than many other cities. Since 2001 the proportion of people in this age group rose by over 30%. Like the national picture, younger households are more likely to rent privately than older households; in 2017 those in the 25 to 34 years age group in York's PRS represented the largest group (35%).

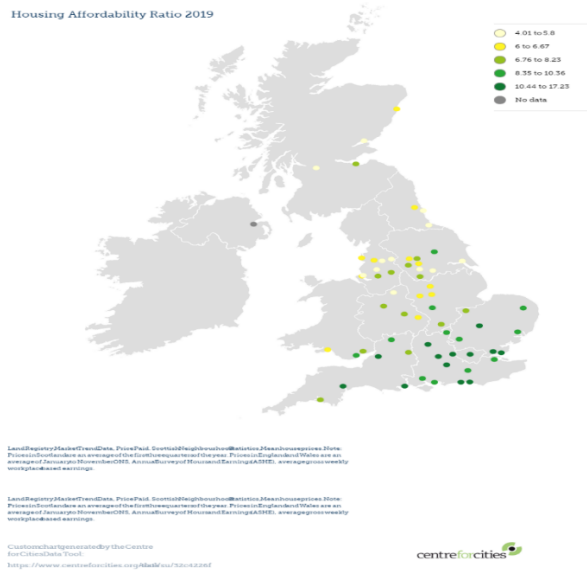
A significant factor in York’s relatively young age profile is the presence of two large universities which together host around 22,000 students each year. Whilst both universities seek to offer purpose built student accommodation, this is not yet sufficient to meet all needs so many look instead to York’s PRS.

A3 Housing context in York

Around 85% of the 89,590¹⁰ households in York are in the private sector, either owner-occupied (68% - 60,999 households) or privately rented (17.5% - 15,671 households). Virtually all the rest (15% - 13,439 households) are let as either social or ‘affordable’ rent by the council or registered social landlords (RSLs).

There are significant pressures within York’s housing market as demand outstrips supply. For many of the past 10 years the supply of new homes has fallen short of identified need. A significant minority of households face a worsening of affordability as the cost of home ownership and private rents rise faster than local incomes. In 2019 Centre for Cities¹¹ found that York’s housing affordability ratio stood at 9.05.

Housing affordability to earnings ratio



¹⁰ ONS estimate 2018

¹¹ Centre for Cities – Cities Index 2020

Anti-social behaviour complaints by ward Dec 2019 – Oct 2020

Number of Anti-Social Behaviour Complaints by Ward - 16th December 2019 to 16th October 2020

Ward (those with more than 100 HMOs shown in red)	Number of Complaints
Guildhall Ward	58
Westfield Ward	34
Micklegate Ward	21
Holgate Ward	20
Clifton Ward	9
Acomb Ward	7
Heworth Ward	6
Fishergate Ward	5
Haxby & Wigginton Ward	4
Hull Road Ward	4
Huntington & New Earswick Ward	4
Dringhouses & Woodthorpe Ward	3
Strensall Ward	3
Rawcliffe & Clifton Without Ward	2
Rural West York Ward	1
Bishopthorpe Ward	0
Copmanthorpe Ward	0
Fulford & Heslington Ward	0
Heworth Without Ward	0
Osbalwick & Derwent Ward	0
Wheldrake Ward	0
Total	181

Noise complaints by ward

Noise Complaints by Ward - 16th December 2019 to 16th October 2020

Ward (those with more than 100 HMOs shown in red)	Number of Complaints
Westfield Ward	350
Guildhall Ward	294
Heworth Ward	294
Holgate Ward	159
Micklegate Ward	148
Hull Road Ward	122
Clifton Ward	114
Rawcliffe & Clifton Without Ward	93
Acomb Ward	88
Fishergate Ward	75
Huntington & New Earswick Ward	63
Dringhouses & Woodthorpe Ward	43
Osbalwick & Derwent Ward	31
Heworth Without Ward	30
Haxby & Wigginton Ward	27

Strensall Ward	19
Bishopthorpe Ward	15
Rural West York Ward	15
Fulford & Heslington Ward	14
Wheldrake Ward	12
Copmanthorpe Ward	4
Grand Total	2010

Waste complaints by ward

Waste Complaints by Ward - 16th December 2019 to 16th October 2020

Ward (those with more than 100 HMOs shown in red)	Number of Complaints
Guildhall Ward	111
Micklegate Ward	85
Holgate Ward	75
Clifton Ward	63
Westfield Ward	40
Fishergate Ward	26
Heworth Ward	26
Hull Road Ward	19
Dringhouses & Woodthorpe Ward	15
Rawcliffe & Clifton Without Ward	14
Huntington & New Earswick Ward	10
Osbalwick & Derwent Ward	9
Acomb Ward	8
Rural West York Ward	7
Haxby & Wigginton Ward	6
Copmanthorpe Ward	5
Strensall Ward	5
Bishopthorpe Ward	4
Fulford & Heslington Ward	4
Heworth Without Ward	3
Wheldrake Ward	1
Grand Total	536

HMOs by ward

HMOs by ward

Ward	HMOs	Licensed HMOs	Proportion of HMOs which are licensed	Number of Households (2011 Population Census)	Proportion of Households which are HMOs
Hull Road	746	335	44.91%	3984	18.72%
Guildhall	665	201	30.23%	4329	15.36%
Fishergate	559	122	21.82%	3945	14.17%
Heworth	321	136	42.37%	5785	5.55%
Micklegate	210	39	18.57%	6133	3.42%
Clifton	161	48	29.81%	5652	2.85%
Osballdwick & Derwent	114	51	44.74%	3025	3.77%
Fulford & Heslington	78	29	37.18%	661	11.80%
Holgate	70	19	27.14%	5930	1.18%
Westfield	31	5	16.13%	6004	0.52%
Huntington and New Earswick	29	4	13.79%	5429	0.53%
Dringhouses and Woodthorpe	26	9	34.62%	4843	0.54%
Acomb	22	8	36.36%	3520	0.63%
Rawcliffe and Clifton Without	21	4	19.05%	5583	0.38%
Heworth Without	10	4	40.00%	1687	0.59%
Haxby and Wigginton	6	1	16.67%	5270	0.11%
Strensall	3	0	0.00%	3198	0.09%
Rural West York	2	0	0.00%	4218	0.05%
Bishopthorpe	1	0	0.00%	1736	0.06%
Wheldrake	1	0	0.00%	1620	0.06%
Total	3076	1015			

EPC ratings by ward – licensed and unlicensed HMOs

EPC Ratings by Ward 2020 (wards with 100 or more HMOs in red)

	Licensed									Unlicensed									
	A	B	C	D	E	F	G	Expired	No EPC	A	B	C	D	E	F	G	Expired	No EPC	
Acomb		1	1	5	1							7	2	2			2		
Bishopthorpe													1				1		
Clifton			10	29	7	1		3	1		2	25	65	13			9	1	
Copmanthorpe																			
Dringhouses & Woodthorpe			7	2				0				5	8	2		1	2		
Fishergate		1	23	82	14			14	2		7	128	233	35	1		44	2	
Fulford & Heslington			15	11	3			1			1	13	24	4	1		3		
Guildhall		2	45	112	37			15	5		61	160	159	45	6	1	83	5	
Haxby & Wigginton				1							1	2	1	1					
Heworth		5	59	59	11			3	2		1	5	60	87	16	1	1	23	2
Heworth Without			1	3							1		3	2					
Holgate			6	9	1	1		1	1		2	23	22	2	1		10	1	
Hull Road		5	199	122	9			13			1	6	124	198	53	2	1	53	
Huntington & New Earswick			1	2	1			0			2	7	11				3		
Micklegate			4	24	8			3	3		12	47	78	25		1	34	3	
Osballdwick & Derwent		1	30	20				1			8	27	21	6			9		
Rawcliffe & Clifton Without			1	2	1						1	4	7	2		1	3		
Rural West York													1						
Strensall												1	1	1					
Westfield			1	2		1	1	1				6	14	2	1		5		
Wheldrake														1					
Total	0	15	403	485	93	3	1	55	14	3	108	642	935	210	13	6	284	14	

A4 HMO inspections data and impact of COVID-19

The restrictions/changes caused by the Pandemic have been significant in a number of ways including tenants initially being restricted to their homes and using them for the first time as their work/office space; landlords/agents were unable to respond to complaints about repairs during the full lockdown or as lockdown was eased due to the availability of furlough arrangements by their contractors and initially the reduction in the number of proactive inspections carried out by officers compared to the same period last year.

Government guidance issued early on the Pandemic changed the council's approach to tackling issues advising to take a more informal approach to resolve issues found. Although this increased the workload of officers as it meant that time periods to ensure compliance were reviewed and extended both for licensing conditions and for notices, it enabled officers to still concentrate on the worst conditions in the poorest sector.

Going forward we understand that there are likely to be serious delays in the court system due to the backlog of cases. It is even more important that during this period that there is a mechanism such as Additional HMO licensing that seeks to bring up to standard the poorest properties by identifying the properties/landlords and working with the sector to ensure compliance.

Initial HMO inspection data

2018-2020 inspections	Category 1 hazards	Category 2 hazards
Excess cold	10	0
Fire safety	1	198
Fall hazards	1	27
Other hazards	2	14
Total	14	239

Initial HMO inspection	Rooms mis-measured	Inspections	Suspended Prohibition notice	Hazard Awareness Notice
2018-2020	33	299	2	117

Renewals: HMO inspections data

2019-20	Category 1 hazards	Category 2 hazards
Excess cold	0	1
Fire safety	1	9
Fall hazards	0	5
Other hazards	1	1
Total	2	16

	Rooms mis-measured	Inspections	Suspended Prohibition notice	Hazard Awareness Notice
2019-20 Renewals: HMO inspections data	3	49	1	3

HMO inspection data for the second half of 2018 following the implementation of the extension HMO licensing

Inspections	Category 1 Hazards	Category 2 Hazards
117 inspections 16 rooms found to be mis-measured	4 category 1 Hazards 1 lack of natural lighting 3 excess cold 1 suspended Prohibition Notice	86 Category 2 Hazards 74 Fire safety 8 Fall Hazards 2 Structural collapse 1 Crowding and Space 1 Collision and Entrapment 18 Hazard Awareness Notices

HMO inspection data for the second half of 2019

HMO inspection figures for the second half of 2019

Inspections	Category 1 Hazards	Category 2 Hazards
141 inspections 3 rooms found to be mis-measured and licence conditions varied 34 properties were found to be meet standards	8 in total 7 Excess cold resulting in 6 Hazard Awareness Notices 1 Letter/Email 1 Hazard removed before action taken 1 Crowding and space resulting in Suspended Prohibition Order	123 in total 99 Fire Safety 68 Hazard Awareness Notices 7 Hazard Information Sheets 24 letters/emails 15 Fall Hazards 9 HAN 6 HIS 4 Flames, Hot surfaces 4 HANS 3 Damp and Mould 2 HANS 1 letter/email 2 Lighting 2 HANS

HMO inspection data for the first half of 2020

HMO inspection figures for the first half of 2020

Inspections	Category 1 Hazards	Category 2 Hazards
41 Inspections 14 properties were up to standard Management issues in two properties dealt with by email	2 in total 1 fall hazards 1 Letter/Email 1 Fire safety issue 1 hazard Awareness Notice	30 in total 25 Fire Safety 4 Hazard Awareness Notices 1 Hazard Information Sheets 20 letters/emails 4 Fall Hazards 2 HAN 2 letters/emails 1 Damp and Mould 1 HANS 1 letter/email

HMO renewals inspection data for the second half of 2019

HMO Renewals inspection figures for the second half of 2019

Inspections	Category 1 Hazards	Category 2 Hazards
22 inspections 3 rooms found to be mis-measured and licence conditions varied 11 properties were found to meet standards	2 in total 1 Hazards of Fire Letter Crowding and Space Suspended Prohibition Order	11 in total 7 Hazards relating to Fire 3 Hazard Awareness Notices 2 Hazard information sheets 2 hazards of Falls 2 letters/emails 1 hazard of Excess Cold Letter 1 hazard of Damp and Mould Letter/email

HMO renewals inspection data for the first half of 2020

HMO Renewals inspection figures for the first half of 2020

Inspections	Category 1 Hazards	Category 2 Hazards
27 inspections 19 properties were found to meet standards Management Issues <u>Fire</u> 1 Letter/emails <u>General Management</u> 3 Letters/emails	None	5 in total 2 Hazards relating to Fire 2 Letters/emails 3 Hazards of Falls 3 letters/emails

A5. HMO licensing procedures context

The council adopts a robust approach to taking enforcement and has a mechanism to resolve issues either through legal action, which may result in the landlord/licence holder or manager being prosecuted, or through further licensing controls such as revoking a licence and restricting their ability to run HMOs.

Where necessary and appropriate the council will pursue formal action against landlords and agents.

The council also adopts informal measures such as re-inspections, which carry a higher charge for licence renewals or require landlords to employ the services of a competent and professional agent. This is dependent upon a number of factors but in general terms consideration is given to the following:

- The gravity of the offence alleged;
- The complexity of what is in issue;
- The general record and approach of the person responsible;
- The severity of the consequences for the defendant and others affected; and
- Whether it is in the best interests of the public to deter others from similar failures.

In some cases the breaches found do not always warrant formal action so the council will adopt an informal approach and provide the landlord with a warning or caution. If a landlord fails to heed these warnings about problems then the council has applied enforcement and prosecuted where the problem is serious enough and it would be in the public interest to take such action.

Appendix 4: HMO case studies

The English Housing Survey (EHS), which is an annual survey conducted to “*determine people’s housing circumstances and the condition and energy efficiency of housing*” Department for Communities and Local Government (2014) *English Housing Survey – Headline report* DCLG February 2015, reported that HMOs are often old, solid wall properties with low levels of insulation and sometimes expensive electric heating systems and.... “*Section 257 HMOs pose particular problems because they are by definition older, poorly converted properties*”.

The evidence and experience over the years, in York, is that some of the worst conditions are present in HMOs. The case studies below highlight what we have uncovered in recent years and critically how Licensing has helped to ensure that properties are safe for tenants:

Guildhall Ward

Property A was a converted mid terrace house situated on a main road, which is occupied by five student tenants. The ground floor comprises two bedrooms, a kitchen/lounge area and a separate WC. Bedroom 2 was in the middle of the house and sandwiched between bedroom 1, the communal kitchen/lounge area and the hallway. As a result of this, the bedroom had no outside window and no natural light or fresh ventilation. It did have a UPVC internal window which opens into the communal kitchen/lounge area, giving no privacy or any fresh air. In addition this window was also a fire hazard as it did not give a 30 minute fire resistance and was adjacent and looked into a communal kitchen.

The above hazards were scored under the HHSRS system for lighting and fire hazards, lighting scored a band C Cat 1 hazard, fire scored band F, Cat 2 hazard. A suspended prohibition notice was served

Clifton Ward

Property B was a converted mid terrace property occupied by 5 tenants who were not a cohesive group. The ground floor comprised two bedrooms, kitchen and bathroom. There were signs of damp in the area between the kitchen and bathroom. The front bedroom showed signs of damp to the front walls, there was no Thermostatic Radiator Valve (TRV) on the radiator and the door was an old Pine door.

The second bedroom was tenanted by a male who was away for long periods of time, the bed was positioned in the middle of the room, the door which was old Pine door and was badly damaged. Upstairs in the property there were three further bedrooms, a bathroom and separate WC.

The smallest bedroom at the rear of the property was too small to be used. The front bedroom also showed signs of damp to the front wall and the door on middle bedroom also showed signs of traumatic damage and was an old Pine door.

The separate toilet was very small, cold, with no wash basin and the suspended ceiling was missing. The upstairs bathroom was at the front of the property and when the shower curtain was pulled back from the window area, the state of the wooden sash window was revealed, the bottom wooden frame was hanging off at a 45 degree angle and appeared to be only held in place in one corner, the glass had no support and the condition of the rest of the frame was extremely poor and required immediate repair. This would not have been found had the shower curtain not been moved. On inspection it was found that the property requires updating, redecoration and repair in several places..

The above was dealt with using the HHSRS system for Excess cold, Licensing conditions to prevent the inadequate room being re-let and the illegal and matters relating to poor management were dealt with using the HMO management regulations.

Heworth Ward

During an inspection of property C, in addition to fire safety issues, we noted potential structural movement with numerous external and internal cracks in the walls around the ground floor extension housing the shower room and bedroom 2 of the property. We asked to be provided with a structural engineers report to inform of any works which need to be carried out. It found that the extension was suffering from structural movement and that although the structure was safe, further works were necessary within the next 6 – 12 months to limit the risk of further damage. The landlord confirmed that they would be undertaking the recommended remedial work in the report within the timescale stated.

The above matters were dealt with using the HHSRS system for Fire Safety and Structural Collapse.

Fishergate Ward

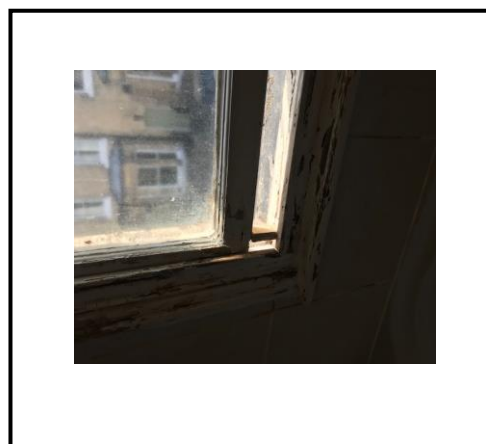
Property D was a 1960s open plan house with limited fire safety measures. Means of escape straight down an open plan staircase linking the first floor landing and the open plan lounge.

Deficiencies found:

- Lack of general 30 min separation
- No interlinked detection
- Ceiling breach in kitchen
- Lack of low level full length railing

Action required:

- Escape windows to four of the six bedrooms
- Fire doors throughout to include removal of an ornate glass pane between the lounge and the kitchen
- Thumb turn on FEP in rear yard as GF bedroom means of escape was to the small enclosed rear yard
- Interlinked detection
- Full length railing to be fitted to reduce the gap at floor level



The above matters were dealt with using the HHSRS system for Fire Safety. A Hazard Awareness Notice was served.

Property E was a large detached property of 23 lets with 35 occupants. The lets comprised of flats, bedsits and bedrooms. The property had three shared kitchens but no communal living accommodation. On inspection the property was found to be run down. One of the bedroom lets was found to be under the 6.51m² of useable floor space. Also two bedrooms were over the 6.51m² rule but well under 10m² of useable floor space. Six other bedrooms which were all over the 6.51m² rule were looked at due to the lack of a communal living space. Using old guidelines and liaising with other local authorities, we worked out that due to the lack of this communal living space one person should have 10m² of useable floor space, 2 persons should have 15m² of useable floor space and a kitchen area should be at least 3m².

From the initial inspection we had initially found that three of the bedrooms should not have any people using them, one as mentioned was under the 6.51m² useable floor space rule.

We measured the six rooms in question in the presence of the HMO Licence applicants. We found after measuring these rooms a further two rooms were under the 10m² of useable floor space. So in total five letting units were not to be used.

HMO licence conditions were imposed outlining how many people could live in each of the units in the property, that 5 of these units could not be let under the current set-up at the address. We talked with the owners of the property and they are now in the process of converting a large bedroom near one of the large kitchens, to make a large kitchen diner/ living area, to service the needs of the residents in the rooms that were deemed to be unusable. We have stipulated what should be in the new area, i.e. comfortable seating, table and chairs etc.

The above matters, rooms let failing to meet the minimum legal standards were dealt with using licensing conditions.

Hull Road Ward

Property F was a two storey HMO with six bedrooms. One bedroom was below 6.51m² (not occupied)

Deficiencies found included:

- Lack of fire detection and fire doors
- Built in appliances damaged and broken but not replaced by agent
- Furniture in poor condition and not compliance with The Furniture and Furnishings (Fire Safety) Regulations 1988.
- External communal area (rear garden) overgrown and poorly maintained
- Lack of refuse receptacles – Agent advising tenants it's their responsibility to supply
- Leak to WC and bath (two separate rooms) which had cause water ingress to floor boards and damages floor covering (ongoing and not addressed by Agent)

Conservatory to the rear had rotten windows causing water seepage and infestation of wood lice (potential Excess cold) unable to heat due to drafts around windows.

The above matters were dealt with using the HHSRS system for Fire Safety. A Hazard Awareness notice was served and at the same time the Licence holder was informed how to deal with the management regulations breaches.

Appendix 5: summary of YUSU report



Appendix 6: Letter from the YRLA

