# Houses in Multiple Occupation Guidance and Standards 2019

# 1. Introduction

The term 'Houses in Multiple Occupation' (HMO) describes a type of dwelling that includes bedsits and similar shared accommodation. A detailed definition can be found in the Housing Act 2004 (see Appendix 1) which also describes the types of HMOs that are subject to mandatory licensing (see Appendix 2).

HMOs provide a valuable source of affordable accommodation. Young and professional single people, students and migrant workers predominantly access this type of accommodation, where there is a higher level of transience than may be found in other sectors of the private housing market. As a whole there are more residents on low incomes in the HMO sector.

The Council, through this document, requires a good standard of accommodation and to address problems often associated with HMOs; for example disrepair, lack of amenities, inadequate fire safety provisions and poor management. The West Suffolk Housing Strategy identifies Houses in Multiple Occupation as a priority area for the monitoring of standards within the private rented sector.

West Suffolk Council will work in partnership with external agencies such as Suffolk Fire and Rescue Service, and private landlords and tenants of HMOs, to achieve the aims and objectives of this policy.

# 2. Aim

- (a) To safeguard the health, safety and well-being of residents within West Suffolk who live in houses in multiple occupation by ensuring the application and maintenance of standards in these properties.
- (b) To contribute towards the delivery of West Suffolk's Housing Strategy
- (c) To contribute to the West Suffolk Strategic Priority 3: Homes for Our Communities

# 3. Objectives

To achieve the overall aim we have identified five objectives, to:

- Develop our knowledge on the number of HMOs in West Suffolk
- Promote good standards in HMOs and provide information and advice to landlords and tenants
- Encourage co-operation between landlords and tenants
- Eliminate poor property and poor management standards in HMOs
- Meet the legislative obligations for HMO licensing

# 4. Implementation

The Public Health & Housing team within Planning and Regulatory Services is principally responsible for private sector housing and will therefore play the lead role in implementing HMO standards. Our objectives will be achieved by engaging in a positive dialogue with landlords, tenants, letting agents and other internal and external partners.

- 4.1 To develop our knowledge we will:
  - Carry out surveys to identify HMOs
  - Maintain and update a database of known HMOs
  - Liaise with other organisations to determine trends which may lead to the creation of HMOs
  - Exchange information with other council services, such as Anglia Revenue Partnership, Planning & Regulatory Services and Waste Management
  - Share knowledge with Suffolk Fire and Rescue Service and University Campus Suffolk
  - Work with local estate and letting agents
  - Act upon information from the public and their local Members
  - Work with housing colleagues through the West Suffolk Letting Partnership (WSLP)
  - 4.2 To ensure satisfactory standards we will:
    - Carry out proactive routine inspections of HMOs in accordance with our hazard weighted risk assessment programme (see Appendix 3)
    - Inspect newly identified HMOs within a maximum of 6 months and incorporate them into the inspection programme
    - Advise landlords of any category 1 and category 2 hazards identified under the Housing Act 2004 Housing Health and Safety Rating System (HHSRS)
    - Advise landlords and agents of the requirements of the HMO Management regulations
    - Consult with Suffolk Fire and Rescue Service in accordance with the HMO protocol adopted by all Suffolk local authorities
    - Take enforcement action where appropriate and necessary in accordance with good practice
    - Liaise with colleagues in Planning and Regulatory Services, and Housing Services
    - Work with other organisations such as Trading Standards (flammable furnishings) and the Health & Safety Executive (gas safety) to ensure the interests of the tenants are fully protected
  - 4.3. Meeting our obligations for licensing:

The Housing Act 2004 introduced mandatory national licensing for all houses in multiple occupation, occupied by five or more persons. We operate a mandatory licensing scheme and have raised awareness of the legislative requirements through the local press, landlords forums and writing to direct to landlords; we will:

- Advise owners of their obligations to licence HMOs
- Process licence applications (for which there is a fee see Appendix 2) within three months
- Maintain a register of licensed HMOs
- Ensure that all HMOs subject to licensing attain the standards required by the licence
- Inspect each licensed HMO at least once every five years
- Advise landlords and letting agents on the requirements of the HMO management regulations
- Take enforcement action where HMO owners fail to licence
- 4.4. To promote good standards we will:
  - Provide information and advice to letting agents and individual landlords through discussions, our landlord information pack and site visits
  - Provide guidance through our amenity standards (see Appendix 4)
  - Have regular meetings of our landlords' forums
  - Encourage landlords and letting agents to join an accredited landlords' association
- 4.5. To encourage co-operation between landlords and tenants we will:
  - Raise awareness of the statutory requirements particularly regarding termination of tenancy
  - Encourage landlords to manage properties in accordance with best practice
  - Advise and support responsible landlords in dealing with tenants causing problems with anti-social behaviour
  - Advise tenants on their tenancy rights and provide information on general housing rights and responsibilities
- 4.6 Partnership with University Campus Suffolk

University Campus Suffolk has developed a code of practice for landlords wishing to make accommodation available to their students. Landlords are required to comply with the code which specifies a high standard of repair, safety, amenity and housing management. Applications for accreditation are made through the University. We will:

- Encourage all landlords to adopt the University Campus Suffolk Standards
- Inspect properties for landlords wishing to have accreditation under the University Campus Suffolk scheme

# 5. Review

This document will be reviewed annually or when there are changes to council policy, Government, guidance, legislation or other circumstances that would deem this appropriate and necessary.

Appendices:

Appendix 1- Definition of a House in Multiple Occupation(HMO)

Appendix 2 -Licensing Houses in Multiple Occupation

Appendix 3- HMO Inspection programme

Appendix 4- Houses in Multiple Occupation Amenity Standards

Useful/relevant guidance:\_

LACORS HOUSING-FIRE SAFETY (2008)

Regulatory Reform (Fire safety) Order Sleeping Accommodation Guidance (2006) RICS Private rented sector code of practice (2014)

Asset Skills HHSRS Guide

HMO Joint Protocol between Suffolk Fire & Rescue Service and the District & Borough Councils (2007 and supplementary guidance 2008) University Campus Suffolk Accommodation Code of practice (2010)

# Definition of a House in Multiple Occupation (HMO)

Under the Housing Act 2004, if you let a property which is one of the following types it is a House in Multiple Occupation:

- An entire house or flat which is let to 3 or more tenants who form 2 or more households and who share a kitchen, bathroom or toilet.
- A house which has been converted entirely into bedsits or other nonself- contained accommodation and which is let to 3 or more tenants who form two or more households and who share kitchen, bathroom or toilet facilities.
- A converted house which contains one or more flats which are not wholly self-contained (i.e. the flat does not contain within it a kitchen, bathroom and toilet) and which is occupied by 3 or more tenants who form two or more households.
- A building which is converted entirely into self-contained flats if the conversion did not meet the standards of the 1991 Building Regulations and more than one-third of the flats are let on short-term tenancies.

In order to be an HMO the property must be used as the tenants' only or main residence and it should be used solely or mainly to house tenants. Properties let to students and migrant workers will be treated as their only or main residence and the same will apply to properties which are used as domestic refuges.

#### What counts as a self-contained unit of accommodation?

A self-contained unit is one which has inside it a kitchen (or cooking area), bathroom and toilet for the exclusive use of the household living in the unit.

If the occupiers need to leave the unit to gain access to any one of these amenities that unit isn't self-contained.

#### Is a block of flats an HMO?

A purpose built block of flats is not an HMO. However, an individual flat within it might be if it is let to 3 or more tenants (at least one of whom is unrelated). The flat will not be subject to mandatory licensing. However, a purpose built flat with 5 or more tenants may require a mandatory licence.

If the block is a house which has been converted entirely into self-contained flats the conversion will be regarded by local housing authorities as an HMO if it does not comply at least with the standards of the 1991 Building Regulations and if more than one third of the flats are let out on short leases. These blocks of flats will not be subject to mandatory HMO licensing.

# What is a household?

The following are 'households' for the purposes of the Housing Act 2004:

Members of the same family living together including:

- Couples married to each other or living together as husband and wife (or in an equivalent relationship in the case of persons of the same sex).
- Relatives living together, including parents, grandparents, children (and step-children), grandchildren, brothers, sisters, uncles, aunts, nephews, nieces or cousins.
- Half-relatives will be treated as full relatives. A foster child living with his foster parent is treated as living in the same household as his foster parent.
- Any domestic staff in the household are also included if they are living rent-free in accommodation provided by the person for whom they are working.

Therefore three friends sharing together are considered three households. If a couple are sharing with a third person that would consist of two households. If a family rents a property they are a single household. If that family had an au-pair to look after their children that person would be included in their household.

# Are there any exceptions to the definition of HMOs?

Certain types of properties are not classed as HMOs for the purpose of the Housing Act 2004 HMO management and licensing requirements, these include:

- A two person flat share; a property, or part of a property, lived in by no more than two 'households' each of which consists of just one person.
- A property where the landlord and his household is resident with up to 2 tenants.
- Buildings occupied entirely by freeholders or long leaseholders.
- Buildings managed or controlled by a public body (such as the police or the NHS), a local housing authority or a registered social landlord.
- A building where the residential accommodation is ancillary to the main use of the building, for example, religious buildings, conference centres etc.
- Buildings which are already regulated (and where the description of the building is specified in regulations), such as care homes, bail hostels etc. (however, domestic refuges are not exempt).

# Licensing of Houses in Multiple Occupation

### Which types of HMO need a licence?

Under the national mandatory licensing scheme an HMO must be licensed if it is a building which occupied by five or more tenants in two or more households.

#### Licence Fee Structure

Type of Application	Fee
New Application for a 5 year HMO	£550
licence.	
New Application for a 5 year HMO licence where the applicant already has a licenced HMO registered in West Suffolk, and where the licence holder and management arrangements are intended to be the same.	£350
Application to renew a HMO licence for 5 years.	£350

### HMO Inspection programme

HMOs on our database are inspected on a regular basis. The frequency is determined on a risk assessment basis and programmed inspections are carried out, every one, two, three or five years. Higher risk properties are inspected annually and the lower risk properties five yearly.

Risk factors include number of storeys, fire precautions, the housing health & safety rating system, amenities and management.

All newly identified HMOs will be inspected within six months and incorporated into the inspection programme.

Risk Factor	Category	Score
	1	5
Number of storeys	2	10
	3	15
	4+	30
Fire Precautions	Full fire protection	0
HHSRS	Partial fire protection	20
hazard (24)	No fire protection	40
Amenities	Satisfactory	0
HHSRS hazards	Unsatisfactory minor	5
(16), (17) & (18)	Unsatisfactory major	10
	No hazards	0
HHSRS	Lower score category 2 (F-J)	5
Other hazards	Category 2 hazards (D & E)	10
	Category 1 hazards (A-C)	20
Management	Confident	0
	Reasonably confident	15
	Little confidence	30
	No confidence	60
	HMO check	160

#### **Inspection frequency**

Score	Inspection frequency
5-10	Five Yearly
15-55	Three Yearly
60-80	Two Yearly
85-160	Yearly
165+	Six Monthly

## Houses in Multiple Occupation Amenity Standards

All houses are assessed using the Housing Health & Safety Rating System (HHSRS) as defined by the Housing Act 2004. Houses should not contain any category 1 hazards.

The following standards relate specifically to houses in multiple occupation and are a guide for the minimum standard which should be achieved. There may be variations to take into account particular circumstances for individual properties.

Schedule of amenity provisions in relation to number of persons	
1 – 5 persons	At least 1 bathroom and 1 WC (the bathroom and WC may be combined). At least 1 kitchen, not more than 1 floor distance from furthest bedroom. Where there is more than 1 floor distance an additional kitchen should be provided or a dining room provided on the same floor as the kitchen.
6-10 persons	At least 2 kitchens, not more than 1 floor distance from furthest bedroom. Where there is more than 1 floor distance a dining room should be provided on the same floor as the kitchen. Or 1 large kitchen with dining room, with 2 sets of facilities - dependent upon the actual number of tenants. 2 bathrooms AND 2 separate WCs with wash hand basins (WHBs); one of the WCs can be contained within one of the bathrooms
10 + persons	At least 2 kitchens, not more than 1 floor distance from furthest bedroom. Where there is more than 1 floor distance a dining room should be provided on the same floor as the kitchen. Or 1 large kitchen with dining room, with sets of facilities dependent upon the actual number of tenants. 3 bathrooms AND 3 separate WCs with WHBs (but two of the WCs can be contained within the bathrooms)

NB A bathroom must contain a full sized bath/shower and a wash hand basin. Where a separate toilet is provided the room should contain a wash hand basin.

### Space Standards

All rooms should be of suitable size. The following is a guide to a minimum room size. The bedroom sizes listed below are statutory minimum room sizes:

#### **Bedroom:**

Bedroom only with separate shared living room

1 person	6.51m <sup>2</sup>
2 persons	10.22 m <sup>2</sup>

Bed-sitting room where there is no separate living room

1 person	10.0m <sup>2</sup>
2 persons	15.0m <sup>2</sup>

Bed-sitting room containing cooking facilities

1 person	13.0m <sup>2</sup>
2 persons	18.0m <sup>2</sup>

Unless related, persons should not be required to share bedrooms. It is accepted, however, that some groups may wish to share rooms.

#### Living room

To be provided where bedrooms are not large enough for use as bed-sitting rooms

Minimum living space

1-5 persons  $11m^2$  or  $13m^2$  combined kitchen/diningroom 6-10 persons  $14m^2$  or  $16.5m^2$  combined kitchen/diningroom

#### **Dining room**

To be provided as an alternative to a living room or where a bed-sitting room is provided which is more than one floor distance away from a kitchen:

11.0m <sup>2</sup>
16.5m <sup>2</sup>
21.5m <sup>2</sup>
25.0m <sup>2</sup>

Kitchen/diners are acceptable, where the dining area is separate from cooking and sink areas and is of the above dimensions.

# Kitchen

Kitchens shall be provided no more than one floor away from any occupied rooms, unless a dining area is available as detailed. Kitchens must not be located within the fire escape route.

Each kitchen for up to 5 persons should have a minimum floor area of  $7m^2$  and be provided with the following:

- 1 cooker with 4 rings, oven and grill (alternatively a microwave oven may be substituted for one or two of the rings)
- 1 sink with hot water, cold drinking water, base unit and drainer and tiled splash back
- 1 single wall or floor cupboard per person for food storage (minimum size 1x 500mm standard unit) or
- 1 double wall or floor cupboard for food storage per 2 persons (minimum size 1 x 1000mm standard unit)
- 1000mm x 600mm worktop for food preparation per 3 persons or
- 2000mm x 600mm worktop for food preparation per 5 persons
- 1 standard fridge per 3 persons (with separate shelf for each person) or
- 1 large fridge per 5 persons (with separate shelf for each person)
- A sufficient number of suitably located electrical sockets (a minimum of 4 double sockets is recommended)
- Separate cooker panel for electric cookers.

NB cooking facilities in a single bed-sitting room may be a portable appliance such as a two ring oven and grill may be substituted for a full cooker.

The kitchen shall be of sufficient area for the safe provision of all necessary facilities. Cookers shall not be placed adjacent to doorways and there shall be sufficient floor space for the safe retrieval of items from the oven and for the safe circulation of occupants generally.