

## Appendix 2 Main issues and suggestions raised during the consultation period

Comments	Council response	Changes to SPD
<p>1. Information provided on the negative impacts of living next to HMOs: how they change the character of areas; the need to improve standards and maintenance; and the issues of anti-social behaviour, noise and crime; and parking problems.</p>	<p>The aim of the SPD is to prevent new concentrations of HMOs from establishing and thus encourage a more even distribution around the city. It is also intended to improve the quality of new HMO accommodation. The council will continue to use its own powers and work in partnership with others to address these issues.</p>	<p>No change</p>
<p>2. Concern about the impact of intensifying larger HMOs – suggestions that the threshold approach should be applied for increases in the number of people living in larger HMOs (or where the balance of a community will be adversely affected) and that no more large HMOs are permitted where areas are already over 10% limit</p>	<p>The threshold is designed to provide a mix of housing types in each area taking into account the concentration of existing HMOs surrounding the application site. Although the level of occupation of a large HMO is higher than a small HMO, they are treated as the same type of household. Whilst the threshold approach will not apply to intensification of existing large HMOs, amenity issues will be assessed as part of the planning application, in addition to considerations such as living standards and parking provision.</p> <p>Change – extra text added to clarify the policy and highlight the potential impacts of intensifying the use of existing HMOs.</p>	<p>New paragraphs 4.8.3 and 4.8.5 (4.8.2 and 4.8.4 remain the same):</p> <p>4.8.3 The council however recognises that the intensification of persons when existing C4 HMOs increase the number of bedrooms and become large HMOs can have a harmful impact on neighbouring occupiers. This is due to increased comings and goings, especially those associated with the independent lifestyle pattern of occupiers living individually of one another.</p> <p>4.8.5 The council has been regularly supported in these concerns at appeal,</p>

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		<p>where it has been demonstrated that increasing the number of occupants can lead to negative amenity impacts on local residents. It is evidence from past applications, since the introduction of the larger HMOs sui generis class, that this has become a significantly greater issue for the character and amenities of local communities in areas with a high proportion of HMOs. As such the council will carefully consider the impacts on the local community arising from intensifying larger HMOs in an area with a high proportion of existing HMOs.</p>
<p>3. Need to clarify the approach to allow changes between C4 and C3 lets and back again - 'flipping' properties between rentals to families and sharers. Large HMOs should be allowed to flip/revert back to family use</p>	<p>The approach of the revised HMO SPD is to support family housing and prevent the over-concentration of HMOs in saturated areas. Although new HMOs will have a flexible C4/C3 permission, this does not apply to large HMOs or existing C4 uses. The current approach therefore acts as a disincentive to landlords without this flexible permission to rent properties out to families. The council will investigate the changes required, which may include changes to the Article 4 direction, and other requirements to enable an authorised C4 to flip between a C3 and C4 use.</p>	<p>Amend paragraph 4.7.2 as follows:</p> <p>The flexible planning condition <u>currently only applies to</u> <del>can only be applied to</del> new permissions for HMO dwellings; <del>and will not apply to large HMOs or existing C4 uses.</del> <u>The council is investigating how this could be extended to include authorised C4 uses and large HMOs.</u></p>

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4. Suggestion that the threshold is applied over a different area i.e. street, ward, identified areas of restraint	To apply a threshold to an area wider than the current 40m radius would not be workable for planning officers due to the increase in properties to be assessed. Individual wards have not been used because there is little correlation between ward boundaries and the distribution of impacts arising from potential new HMOs. Any new HMO will primarily affect the immediate locality around the property, so it is appropriate that the threshold is set at this level. In addition the approach needs to be clear, easily understood and easily applied.	No change
5. Suggestion to apply a different percentage threshold i.e. a compromise of 15% citywide	The introduction of a 10% threshold will provide consistency throughout the city. It is also in response to concerns reported by local residents to officers and members of the planning panel about the negative impacts of introducing a new HMO into their neighbourhood. The council's experience in applying the SPD shows inspectors have supported 10% as a reasonable threshold. Since the adoption of the SPD a 10% threshold has also been widely adopted nationally by councils including Portsmouth City Council and Bournemouth Borough Council.	No change
6. Concern that changes to the approach would make housing issues worse as there is a need for affordable housing such as bedsits and it is important that occupiers on low income are in	It is acknowledged that there will continue to be demand for HMO accommodation in the city including the cheapest types of accommodation and the city centre will be a draw for many people. The revised SPD does not prevent new HMOs in central areas where the local area is below the 10% threshold, even though individual wards are above the threshold. The background evidence paper also highlights that the majority of HMO postcodes assessed (2,000) were in two Mosaic classifications	No change

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accessible locations in and near the city centre	which cover students, recent graduates and older residents. There is a need for a range of HMO accommodation fulfilling a variety of roles and a more even spread within local areas, recognising that Southampton is generally an accessible city.	
7. Concern that proposals will not address issues from HMOs or stop permanent residents leaving affected areas	The aim of the SPD is to prevent new concentrations of HMOs from establishing and thus encourage a more even distribution around the city. The distribution of applications shows this has happened since its introduction. The revised SPD will introduce a consistent approach across the city and address issues in areas with a 20% threshold currently. The revised SPD also clarifies the policy for exceptional circumstances where the introduction of further HMOs would not change the character of the area and last remaining owner occupiers may struggle to sell their property for continuing C3 use.	No change
8. SPD should state a presumption in favour of the change of use if the proportion of existing HMOs in the local area are below the threshold	The threshold approach is one of the tests for planning applications. A new HMO will be permitted where the threshold limit has not been breached subject to the impact on amenity and character of the local area.	No change
9. Suggestion that large HMOs count double when assessing the proportion of existing HMOs due to their increased impact	The threshold is designed to provide a mix of housing types in each area taking into account the concentration of existing HMOs surrounding the application site. Although the level of occupation of a large HMO is higher than a small HMO, they are treated as the same type of household. When assessing proposals for new HMOs, in addition to the threshold test, amenity and character	No change

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	<p>issues will also be assessed. The amenity and character impacts of large HMOs will be considered in assessing planning applications for extensions to these type of properties. Changes proposed above (1.) clarify this.</p>	
<p>10. Need to take into account halls of residence as part of assessment due to their impact on the demographics of an area and its character. Population density should be considered in addition to the number of HMOs.</p>	<p>The threshold approach assesses the residential properties in the immediate surroundings of the application site in order to prevent the loss of family homes. The Housing Act excludes halls of residence either managed by or on behalf of educational establishments from the buildings which are defined as HMOs. When applications are received, planning officers determine whether they are halls of residence or C4 HMOs depending on the type of accommodation, management arrangements etc. The council generally supports purpose built student accommodation to relieve the pressure on local housing markets as set out in the Core Strategy. Amenity issues will however be considered when determining applications for new purpose built student accommodation.</p>	<p>No change</p>
<p>11. Mixed views were expressed about the impact of the recent increase in purpose built student accommodation. It either provides an alternative to HMOs and increases the supply in existing HMOs or will be unattractive to students after their first year and will be used to</p>	<p>The background evidence document states that future demand for HMO accommodation for students remains uncertain. The council has been advised that there is likely to be some growth in student numbers in the future. In the last 5 years, over 1,000 new student bedspaces have been completed. There are also over 4,000 bedspaces in the pipeline. The nature of these properties which include small flats and studios in addition to larger cluster flats may be attractive to some students returning to student</p>	<p>No change</p>

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enable to universities to expand further.	accommodation later in their courses and postgraduates who would not consider traditional halls of residence.	
12. Need to apply sandwiching approach to properties at the rear and opposite to reflect potential impact on all sides	The sandwiching approach is designed to avoid the potential negative impacts of HMOs on both sides of a residential property. This is a particular issue where properties share a party wall and the impacts when people are using their front door and driveway. In a dense urban area, extending this to include properties to the rear and opposite would be overly complex and restrictive.	No change
13. Extending HMO definition in accordance with the Housing Act 2004 to include 2 bedroom flats as they are capable of being used as HMOs	1 and 2 bed flats continue to be excluded as it is considered that they are unlikely to be used as HMOs. Including small flats would also considerably increase the number of properties included in the assessment and skew the concentration of HMOs in some roads with a mix of flats and houses.	No change
14. Requiring planning permission to be in place before HMOs can be licensed and apply	Planning and licensing are two separate systems assessing different aspects of HMOs. The Planning team is working closely with Licensing to improve the flow of information and ensure both teams are aware of the approach taken on issues and any changes proposed.	No change
15. Housing standards should be more rigorously applied, there is a need for better monitoring and enforcement including use of 215 notices to maintain gardens	The council works with landlords to resolve issues directly. It seeks to avoid using 215 notices which can be expensive and time consuming to implement.	No change

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16. Suggestion for a regulation 7 direction to tackle 'to let' boards	Consent for the display of signs is controlled under existing Advertisement Regulations. The Enforcement team will investigate breaches of the regulations as set out in their enforcement policy. They are working closely with the Licensing team to address the issue.	No change
17. Need for updated parking standards as current levels of parking are insufficient	There are no current plans to update the parking standards in the city. Part of the application for a new HMO will be an assessment of parking to show this is sufficient for the size of the property proposed.	No change