Small Houses in Multiple Occupation: evidence to justify a citywide Article 4 Direction

June 2019
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1. Purpose of This Report

1.1 This report provides the evidence to justify the purpose and extent of a citywide Article 4 Direction in Brighton & Hove to require planning permission for the change of use of a Use Class C3 dwellinghouse to a Use Class C4 small House in Multiple Occupation (HMO). The Direction applies across the city except in that part of the Council’s administrative area which falls within the South Downs National Park.

1.2 Authority to make a non-immediate citywide Article 4 Direction was approved at the Council’s Tourism, Development and Culture Committee (TDC) on 17 January 2019\(^1\). The Direction was formally ‘made’ on 3 June 2019 and, subject to confirmation at a future meeting of TDC, will come into force one year later on 3 June 2020.

1.3 As part of the process of introducing the Article 4 Direction, a statutory consultation is taking place from 3 June 2019 to 15 July 2019. To assist communities and other stakeholders to respond to the consultation, this document sets out the Council’s justification for the imposition of the Direction.

1.4 If you wish to make representations you may do so in the following ways:

- via the Council’s consultation portal at [https://consultations.brighton-hove.gov.uk](https://consultations.brighton-hove.gov.uk);
- by email to planningpolicy@brighton-hove.gov.uk; or
- by post to Planning Policy, Projects and Heritage Team, Brighton & Hove City Council, Hove Town Hall, Norton Road, Hove BN3 3BQ.

Any representations must be received by 15 July 2019.

2. Background

2.1 A House in Multiple Occupation, commonly known as a HMO, is a property occupied by at least three people who are not from one ‘household’ (e.g. a family) but share facilities such as a bathroom and kitchen. Examples include bedsits, shared houses, lodgings, accommodation for workers/employees and refuges. Planning use classes distinguish between ‘small’ HMOs of up to six people (C4 use class), and ‘large’ HMOs of seven or more occupants which are categorised as *sui generis*.

2.2 The cost of housing in the city and the overall shortage of new planned housing compared to the assessed need for additional homes means that many young professionals, students and other people on low incomes live in HMOs.

2.3 Concentrations of HMOs can cause a number of negative impacts on local communities, for example more frequent noise nuisance, depopulation of

\(^1\) [https://present.brighton-hove.gov.uk/documents/s136219/Houses%20of%20Multiple%20Occupation%20Area.pdf](https://present.brighton-hove.gov.uk/documents/s136219/Houses%20of%20Multiple%20Occupation%20Area.pdf)
neighbourhoods during academic vacations, increased pressure on parking due to higher population densities, and higher levels of population transience leading to a possible longer-term breakdown of community cohesion.

Planning Background

2.4 In April 2010, the Town and Country Planning (Use Classes) Order 1987 was amended by the introduction of a new C4 use class covering small Houses in Multiple Occupation, defined as “Use of a dwellinghouse by not more than six residents as a “house in multiple occupation”.” On 1 October 2010, the Town and Country Planning (General Permitted Development) (Amendment) (No. 2) (England) Order 2010 introduced a permitted development right to change the use of a building from a single house (C3) to a House in Multiple Occupation (C4) without the need to make a planning application.

2.5 Local planning authorities have powers to make an Article 4 Direction under the Town and Country Planning (General Permitted Development) (England) Order 2015 (as amended) to remove permitted development rights. These remove permitted development rights in part or all of their area, thereby requiring planning permission for a change of use that would otherwise be permitted development. Article 4 Directions have tended to be used in conservation areas so as to exert greater control over extensions or other changes to buildings. However, they are also a means by which local planning authorities can exert greater control over the proliferation of small HMOs (i.e. through requiring planning permission for the change of use of a dwellinghouse in Use Class C3 to a small HMO in Use Class C4). Importantly however, the introduction of an Article 4 Direction does not mean that all planning applications for a change of use from a dwellinghouse to a Use Class C4 HMO will be refused. The Direction only relates to requiring the submission of a planning application for consideration by the Local Planning Authority, and any application will be determined on its merits having regard to the policies in the development plan and any other material considerations.

2.6 The National Planning Policy Framework\(^2\) (paragraph 53) requires the use of Article 4 Directions to be limited to situations where it is “necessary to protect local amenity or the wellbeing of the area”, and should not be used unless there is “clear justification” for doing so. The National Planning Practice Guidance\(^3\) (PPG) further states that evidence is required to justify the purpose and extent of the Direction, to demonstrate that such action is needed to protect local amenity or well-being of the area. The PPG also requires the potential harm that the Direction is intended to address to be clearly identified. Finally, it requires there to be a “particularly strong”

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\(^3\) [www.gov.uk/guidance/when-is-permission-required#article4](www.gov.uk/guidance/when-is-permission-required#article4)
justification if a Direction is to relate to a wide area (for example covering the entire area of a local planning authority).

2.7 In January 2013, an Article 4 Direction was confirmed by Brighton & Hove City Council’s Policy & Resources Committee within the wards of Hanover and Elm Grove, Hollingdean and Stanmer, Moulsecoomb and Bevendean, Queen’s Park and St. Peter’s and North Laine in response to increasing numbers of small HMOs in this area. This removed the permitted development right which allowed changes of use from a dwellinghouse (use class C3) to a small HMO (use class C4) without planning permission. No permitted development rights apply to changes of use to large HMOs and these require planning permission citywide.

2.8 In determining planning applications for changes of use to HMO, City Plan Part One Policy CP21 is applied. This policy states, in summary, that applications for HMOs will not be permitted where more than 10 per cent of dwellings within a radius of 50 metres of the application site are already in use as an HMO. This policy has been effective in preventing further proliferation in areas which already have dense concentrations of HMOs. However, it cannot be applied retrospectively, so many areas of the city within the existing Article 4 area have high concentrations which would not now be allowed.

2.9 Further criteria to help manage concentrations and residential amenity are proposed through an additional policy in the draft City Plan Part Two⁴ which was subject to public consultation in summer 2018. A Proposed Submission version of the Plan will be published in late 2019.

**Types of Article 4 Directions**

2.10 Two types of Article 4 Direction can remove permitted development rights. Firstly, an immediate Article 4 direction can take effect immediately, but this must be confirmed by the local planning authority following consultation within six months or it will lapse.

2.11 Secondly, a non-immediate Article 4 Direction with a prior notice period of 12 months may be made which results in development rights being withdrawn only upon confirmation of the Direction following local consultation.

2.12 In this instance, a non-immediate direction has been made to allow the results of local consultation to be fully considered and taken into account in advance of the Council deciding to confirm the direction and remove permitted development rights. The decision to confirm the Direction will be taken by Tourism, Development and Culture Committee in early 2020. There will be some delay in the Council’s ability to manage additional C4 HMOs during the notice period, however as existing

⁴ [www.brighton-hove.gov.uk/content/planning/planning-policy/city-plan-part-two](http://www.brighton-hove.gov.uk/content/planning/planning-policy/city-plan-part-two)
concentrations are relatively low in much of the area proposed for the extension, this is not likely to cause a significant problem.
3. Justification for the Citywide Direction

3.1 By way of national context, it should be noted that Article 4 Directions relating to HMO development that cover an entire Local Planning Authority Area are not uncommon. They have been implemented in a significant number of other cities, including Manchester, Oxford, Portsmouth, Southampton and York. There are therefore clear precedents for such a measure being appropriate in urban areas with significant numbers of HMOs. This does not obviate the need for the proposed Direction in Brighton & Hove to be fully justified, and the evidence to do so is set out below.

Current Distribution and Concentrations of HMOs in Brighton & Hove

3.2 The City Council holds data that enables a picture of the location of HMOs in the city to be established. Two sources have been used to analyse the existing distribution and density of known existing HMOs in the city in October 2018 (see Appendix 1). There is some overlap between the two sources and the data sources have been combined and filtered to avoid double-counting prior to the analysis taking place.

i) Council Tax Data

3.3 Revenues and Benefits data can be used to indicate properties occupied solely by students as such households are exempt from paying Council Tax. Where these properties are inhabited by three or more residents this information indicates likely HMOs, however it is not possible to verify this without intensive interrogation of the data and address points. For example some groups of students may be living in flatted accommodation which would not be considered to be an HMO but would show up in the data. This data source does not identify HMOs where non-students or a mix of students and non-students reside.

ii) Licensing Data

3.4 Two types of licensing for HMOs exist in Brighton & Hove. The purpose of licensing is to ensure that properties are suitable and safe for the number of people the landlord intends to rent it to.

Citywide national licensing

3.5 The Housing Act 2004 requires landlords of larger HMOs to apply for licences. HMOs that need to be licensed are those which:

- are occupied by five or more people forming two or more households (i.e. people not related or living together as a couple), and
- have an element of shared facilities (e.g. kitchen, bathroom, etc).

3.6 Flats situated in purpose built blocks consisting of 3 or more flats do not require an HMO Licence.
Citywide additional licensing for smaller HMOs

3.7 This applies to smaller HMOs consisting of two or more storeys, with three or more occupiers from two or more households sharing facilities. The city-wide scheme began on 1 March 2018, having previously covered a smaller area more focused on the city centre. Although significant numbers of licenses have been granted since the scheme began, it remains possible there may be some lag in achieving comprehensive coverage of all licensable HMOs, resulting in the possibility of the numbers being an under-estimate.

3.8 A register of all properties in the city with a HMO license is maintained on the City Council website⁵.

iii) Distribution Analysis

3.9 Map 1 below shows the location of all known HMOs using the two data sources described above, with the wards that form the existing Article 4 Direction area highlighted in bold. It is clear that whilst the majority of HMOs are within the existing zone, there are significant numbers of HMOs distributed elsewhere in the city.

⁵ www.brighton-hove.gov.uk/content/housing/general-housing/licensing-houses-multiple-occupation-hmos
3.10 The two data sources have been combined and analysed at Super Output Area (SOA)\(^6\) based on the number of HMOs in each SOA as a percentage of the total number of addresses (see Map 2 below). This is intended to more clearly identify areas of particular concentration as the raw data in Map 1 does not in every case effectively highlight high concentrations of HMOs in areas of low housing density. Using SOAs instead of wards to map this information allows localised variations in HMO density to be more clearly identified.

3.11 Map 2 shows that the areas of highest concentrations are within the existing Article 4 area, however there are also significant numbers of HMOs outside this area, including some pockets with very high concentrations. These are notably in the area bordered by the London Road railway viaduct, New England Road and Beaconsfield Road, with other SOAs with higher concentrations are found in the East Brighton and Regency wards. The spread of significant numbers of HMOs in the area south of the Brighton to Portslade railway line and east of the existing Article 4 area into Kemptown and East Brighton is also clearly visible. Some particular locations within these areas are examined in more detail below.

\(^6\) Super Output Areas are used in the analysis of census data and are automatically generated to be as consistent in population size as possible. The minimum population is 1000 and the mean is 1500.
Map 2: Percentage of Properties in Known HMO Use by Ward
Concentrations outside of the Existing Article 4 Direction Area

3.12 Maps 3, 4 and 5 below highlight in more detail three of the clusters of HMOs outside of the current Article 4 area in different parts of the city.

Map 3: HMO locations in the vicinity of Hove Station
3.13 In some areas a ‘cliff-edge’ scenario has transpired which is likely to be partly due to the proximity to the boundary of the existing Direction. For example, the area near Preston Road, as seen on Map 5 below. The area above the thick black line is outside of the existing Article 4 Direction area, and some streets in closest proximity to the boundary have experienced very high levels of HMO development, in particular New England Road, Argyle Road, Campbell Road, Preston Road. The effect is particularly noticeable on Beaconsfield Road where the east side of the road is within the existing Article 4 area, but the west side is not.
3.14 The distribution of known HMOs in the city, and in particular the concentrations that have been highlighted, illustrates that proliferation of HMOs is not restricted to the five wards which are currently subject to an Article 4 Direction. Significant numbers of HMOs exist in much of the city with only some more peripheral areas in the north-west and south east of the city’s administrative area hosting very few HMOs at present.

**Housing Market Analysis**

3.15 The latest Brighton & Hove Housing Market Report (Q4 2018) highlights the severe housing affordability issue in the city, with the average property price in the city being 48% higher than the overall average for England and Wales. Property prices in the city are also considerably higher than in neighbouring areas.

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3.16 In Brighton & Hove the average 1-bed flat costs nearly 8.5 times the median household annual income and a 3-bed house costs over 16 times the median household annual income.
(see Figure 1 below). Households on average incomes must have either a sizeable deposit or borrow significantly in excess of prudent mortgage limits in order to buy. A sufficient mortgage for the average 1-bedroom flat would require an income of nearly £57,000 per annum with a £62,000 deposit and a 3-bed home requires an income of nearly £110,000 with a £118,000 deposit. The 2015 Brighton & Hove City Council Objectively Assessed Need for Housing report showed that the average household income in Brighton & Hove was £38,300. However, 33% of households earn below £20,000. The average is affected by the number of very high earners in the city.

![Average property prices and income multipliers (2018 Q4)](image)

**Figure 1**

3.17 There are similar pressures in the rented sector. The average rent for a one bedroom flat is £938 per month, which is equivalent to the monthly repayment cost of a £160,444 mortgage. Traditionally, a mortgage of this amount would require an income of £49,367 to finance, 70% above the city average.

3.18 Renting a room in a shared property is significantly cheaper at £537 per month. These affordability pressures are likely to sustain the demand for lower-cost accommodation such as HMOs amongst low and medium income residents of the city.

3.19 Affordability pressures are unlikely to be eased to any significant extent through the delivery of additional housing supply. The objectively assessed housing need for the city is estimated to be 30,120, significantly higher than the adopted housing provision target of 13,200 new homes. This target is set in Policy CP1 of the City Plan Part One and was considered by the City Plan Inspector to be a realistic, deliverable quantum of housing over the Plan period to 2030 given the city’s housing land supply constraints. Demand for new housing is therefore likely to continue to outstrip supply, and with similar pressures in many neighbouring authorities, it is expected that affordability pressures will remain and demand for cheaper HMO accommodation will be sustained.
3.20 Affordability pressures are a citywide issue. Looser controls on the development of HMOs in one part of the city may, in time, lead to these areas becoming a focus for unmanaged new concentrations of HMOs. Given the factors which indicate that this is a realistic prospect, it is important to impose an Article 4 Direction now to allow proactive effective management of the distribution, rather than waiting until new concentration have become apparent. This reactive approach would not achieve the objective of ensuring sustainable, balanced communities, as the communities would already have become unbalanced before action was taken.

3.21 It is important to note that this analysis largely applies to the non-student housing market sector of the city. The geographical extent of the existing Article 4 Direction along Lewes Road was driven by a focus on student HMOs and the recommendations of the Student Housing Strategy 2009. Looking forward, the ongoing population growth in the city and lack of housing supply compared to the assessed need over the City Plan period, combined with the expected stabilisation of university student numbers and increase in supply of Purpose Built Student Accommodation, means that future demand for HMOs is likely to be driven by the non-student sector. Non-students are likely to be more flexible over the location of their accommodation, and the Lewes Road corridor would therefore less of a focus for HMO development. The distribution analysis of existing known HMOs set out above is reflective of this, with concentrations noted in other areas of the city, particularly around main transport routes. This trend is likely to continue in the future.

Need for Family Homes

3.22 Evidence supporting the Brighton & Hove City Plan Part One identified a need to protect and deliver a proportion of family homes as part of the city’s overall housing need. A demographic analysis of the demand/need for homes in the city over the plan period indicated that an estimated 76% of the overall need/demand (for both market and affordable homes) will be for two, three and four+ bedroom properties (34%, 31% and 11% respectively). It is therefore important to ensure that the supply of these family sized dwellings is maintained.

3.23 The proposed Article 4 Direction will help to manage, in a balanced way, the competing demands for the use of houses as family homes and HMOs.

Amenity Impacts

3.24 Much of the evidence that justified the implementation of the existing Article 4 Direction along the Lewes Road was set out in the City Council’s Student Housing Strategy (2009). This document focussed on the impacts of student HMOs, however many of the issues apply to HMOs in general and are well-known and generally accepted nationwide. Concerns about the negative amenity impacts of increasing numbers of HMOs have been raised by communities in a number of areas of the city outside of the existing Article 4 area. These include East Brighton, Preston Park and Withdean wards.

7 See Brighton & Hove City Plan Part One, para. 4.213
The 2009 Strategy set out a number of negative amenity issues that can be caused by concentrations of HMOs, including:

- Increase in population densities resulting in increases in domestic refuse, litter (e.g. fast-food and pizza boxes) and fly-tipping of unwanted household items (e.g. discarded beds/mattresses, sofas and fridges);
- The removal of hedges, fences, gates, and gardens for driveways;
- The changing visual appearance of streetscapes and residential environs in negative ways;
- Higher levels of population transience;
- The proliferation of ‘to-let’ boards, unkempt gardens and yards;
- Dilapidated external residential facades and the disrepair of housing (depending on the landlord);
- The exclusion of local families and low-income individuals and households from the local housing market;
- The replacement / displacement of local families by transient student populations;
- The marginalisation and polarisation of local families;
- The gradual closure of local crèches, nurseries and schools, and other community facilities;
- The loss of family-oriented public and private services;
- Higher levels of burglary and crime;
- The formation of a new sense of place, and a different type of ambience in the neighbourhood;
- Rising levels of noise nuisance (e.g. parties, higher occupancy levels in HMO);
- The incongruous patterns of the everyday living (e.g. timing of work, play and sleep) of established residents and many students;
- Increased car parking and congestion;

Evidence held by the Council highlights how wards with higher concentrations of HMOs continue to have higher levels of antisocial behaviour, noise and refuse complaints. The city’s wards are ranked in terms of the frequency of anti-social behaviour issues, noise and waste complaints, with the wards covered by the existing Article 4 Direction highlighted. The ward with the greatest prevalence of incidents is ranked 1, and the ward with the least is ranked 21. It should be noted that ward level data must be considered a blunt instrument since it often contains a wide mix of neighbourhoods covering a large area, however a correlation between HMO proliferation and prevalence of antisocial behaviour and other complaints can be seen.
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<th>Ward</th>
<th>Police Anti-social Behaviour</th>
<th>Council Anti-social Behaviour</th>
<th>Noise Complaints</th>
<th>Waste Complaints</th>
<th>Average rank</th>
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Table 1: Brighton & Hove Wards Ranked by Prevalence of Selected Amenity Impacts

3.27 It can be seen that other wards with higher levels of HMOs such as Regency and East Brighton are also ranked amongst the highest wards for these negatively amenity effects. It is considered that managing the distribution of further HMO development in other areas of the city and avoiding any new areas of high concentrations developing will mitigate against potential future amenity impacts in areas that currently have relatively low levels of such impacts.

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9 Police categorise ASB in various ways not all of which relate to residential properties. Examples include vehicle related ASB, drug and solvent misuse and prostitution.

10 Noise complaints average about 350 per month, are seasonal and cover all tenures. Over 56% of noise complaints related to music and parties. Other sources of noise disturbance were spread thinly with machinery accounting for 9% and animals only 4%.
Effect of Future Planning Policy

3.28 As noted above, additional locational planning policy criteria to manage concentrations of HMOs are proposed through draft Policy DM7 of City Plan Part Two, scheduled to be adopted in Spring 2021. These criteria are that applications for HMO development will be permitted where the proposal complies with City Plan Part One Policy CP21 and all of the following criteria are met:

a) fewer than 20% of dwellings in the wider neighbourhood area are already in use as HMOs;
b) the proposal does not result in a non-HMO dwelling being sandwiched between two existing HMOs in a continuous frontage;
c) the proposal does not lead to a continuous frontage of three or more HMOs.

3.29 The consideration of these additional criteria in the determination of applications is likely to have the effect of reducing the opportunities for further HMO development in areas of the city within the existing Article 4 Direction area, particularly those with very high existing concentrations. The result of this could be that demand for additional HMO accommodation in these areas could be displaced to locations outside of the existing area. This is especially likely in locations near to the existing Article 4 Direction boundary, exacerbating the cliff-edge scenario that has been observed in some locations such as Argyle and Campbell Roads, and would also be likely to occur close to the boundary of an enlarged Article 4 Area if it did not cover the whole city.

4. Appropriate Geographic Extent of the Direction

4.1 The National Planning Practice Guidance requires there to be a “particularly strong” justification if a Direction is to relate to a wide area (for example covering the entire area of a local planning authority). Having regard to the evidence in this report, it is considered appropriate to implement the Direction citywide.

4.2 As discussed above, the existing Article 4 Direction covering five wards has caused some additional problems along its boundary and has not had an effect in preventing further concentrations of HMOs appearing in other others of the city. It is considered that a further limited extension to cover areas that currently have above average levels of HMOs would be a reactive move that may also need revisiting in future years.

4.3 Seeking to limit the geographic extent of the Direction presents problems in determining exactly where the boundary should be. There would be the difficulty in providing reasonable justification for the inclusion of some streets and the exclusion of others, particularly given the wide dispersal of HMOs evident in Map 1. The possibility of streets immediately adjacent to the boundary of the Direction, but not within in it, attracting higher levels of HMO development in the future as planning permission would not be required is undesirable. As discussed above, this phenomenon has been observed in some locations in the city as a result of the existing Direction following ward boundaries. It is considered that a citywide Direction is a coherent solution that provides clarity and consistency to communities, developers and landlords.
4.4 Aligning the geographical extent of the licensing and planning legislative regimes for HMOs is also considered to be beneficial. Presently, requirements for planning permission and licenses vary across the city. This can confusing for both landlords and communities as similar developments in different parts of the city have different requirements in order to legally operate. Alignment with the citywide area for licensing HMOs will avoid confusion and ensure that requirements for licensing and planning consent are coherent and consistent throughout the city.

5. Conclusions
5.1 This report sets out the justification for the purpose and extent of a citywide Article 4 Direction in Brighton & Hove relating to changes of use from C3 dwellinghouse to C4 small HMO. Whilst it is recognised that there are some parts of the city which currently have few HMOs, there are a number of compelling reasons for proposing a citywide approach:

- Provides a proactive strategic approach to HMO management in the city, providing long-term certainty for developers and communities by avoiding the need for further reactive incremental extensions;
- Prevents HMO concentrations getting too high before action is required;
- The affordability pressures which could result in increased demand for HMOs are a citywide issue;
- Avoidance of a ‘cliff-edge’ scenario where streets immediately adjacent to the boundary of an Article 4 Direction area attract higher levels of HMO development due to planning permission not being required. This situation has transpired in some areas of the city in recent years in part due to the proximity to the boundary of the existing Direction.
- The existing Article 4 Direction was primarily introduced in response to demand for affordable accommodation from the student sector causing significant changes of use from dwellinghouses to HMOs in the Lewes Road academic corridor. Due to the expected stabilisation of university student numbers and the increase in the supply of Purpose Built Student Accommodation, it is expected that much of the future additional demand for HMO accommodation will stem from non-student groups who are likely to be more flexible over the location of their accommodation.
- Alignment with the citywide area for licensing HMOs. This approach will avoid confusion and ensure that requirements for licensing and planning consent are consistent throughout the city.

5.2 An extended Article 4 Direction would, if confirmed, extend the Council’s ability to manage the concentration of HMO accommodation across the city and assist in the maintenance of sustainable and balanced communities.