

## **ARTICLE 4 DIRECTION (2022 Update)**

**Removal of permitted development rights for the change of use from Use Class C3 (dwelling-houses) to C4 (HMOs)**

**BACKGROUND DOCUMENT**

**Context, Evidence and Justification Paper**

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## 1. INTRODUCTION

1.1 This document sets out the policy context and supporting evidence to justify the introduction of a new Article 4 Direction under the provisions of the Town and Country Planning (General Permitted Development) Order 2015 (as amended). The Article 4 Direction will remove permitted development rights for the change of use from dwelling-houses (Use Class C3) to small houses in multiple occupancy (HMOs) (Use Class C4) in all urban areas of the Blackburn with Darwen borough. This will grant the Council greater control in the management of HMO conversions.

## 2. LEGISLATIVE AND NATIONAL POLICY CONTEXT

2.1 In April 2010, the Government introduced a new Use Class C4 (C4) to the Use Classes Order, relating to Houses of Multiple Occupation (HMOs) covering small shared houses or flats; defined as being occupied by 3 to 6 unrelated individuals who share basic amenities.

2.2 In October 2010, the Government then introduced legislation, under 'permitted development rights' to allow the change of use of a dwellinghouse to a C4 use without the need to apply for planning permission. This legislation was *The Town and Country Planning (General Permitted Development) (Amendment) (England) Order 2010*<sup>1</sup>, which has since been both amended and then superseded by orders in 2013 and 2015. The Town and Country Planning (General Permitted Development) (England) Order 2015 (as amended)<sup>2</sup>, or GPDO for short, now takes precedent, and gives permission to carry out certain works under 'permitted development rights', subject to certain conditions.

2.3 The GPDO (2015) (Part 3, Class L, (part b)) grants permitted development rights to allow the conversion from a use falling within Use Class C3 (dwellinghouses) to a use falling within Class C4 (houses in multiple occupation). (*Conversely, Part (a) allows the change of use from C4 (HMO) to C3 (dwellinghouses).*) In both cases, this relates only to dwellinghouses of not more than 6 residents.

2.4 Proposals for houses of multiple occupation containing 7 or more residents already require planning permission to be sought.

2.5 In usual circumstances, the conversion of a dwellinghouse to a HMO, for 3 to 6 persons, does not therefore require planning permission to be sought. However, the Government recognise that sometimes local circumstances will mean that greater control needs to be given to local powers to manage such types of development. Consequently, Article 4 of the GPDO (2015) allows Local Planning Authorities (LPAs) to remove permitted development rights from specified areas under their management, thereby requiring

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<sup>1</sup> [The Town and Country Planning \(General Permitted Development\) \(Amendment\) \(England\) Order 2010 \(legislation.gov.uk\)](https://www.legislation.gov.uk)

<sup>2</sup> [The Town and Country Planning \(General Permitted Development\) \(England\) Order 2015 \(legislation.gov.uk\)](https://www.legislation.gov.uk)

applicants to apply for planning permission and enabling the LPA the opportunity to consider a proposal in more detail. These are called Article 4 Directions.

- 2.6 The National Planning Policy Framework (NPPF)<sup>3</sup> (Paragraph 53) states that the use of Article 4 Directions to remove national permitted development rights should be limited to situations where a Direction is necessary to protect local amenity or the well-being of the area, and must be based on robust evidence and apply to the smallest geographical area possible.
- 2.7 Amenity relates to those elements which contribute to a person's or business' overall well-being, and include visual attractiveness of a place, community safety, personal safety, balanced social/demographic mix, social inclusion and community cohesion, ownership and pride of place, access to services and facilities, satisfaction with the area as a place to live or work. The cumulative impact of HMOs on amenity, particularly in Blackburn with Darwen, includes concerns relating to housing standards and market, social cohesion, crime and anti-social behaviour, growth, investment and regeneration.
- 2.8 According to the accompanying National Planning Guidance<sup>4</sup>, this means that the potential harm that the Direction is intended to address must be clearly identified, and a strong justification set out for the withdrawal of permitted development rights set relating to a wide area (e.g. that covering a large proportion of the LPA area).
- 2.9 The re-introduction of planning powers can then help provide safeguards to better manage HMO conversions and the impacts they have on local communities and the standards of development.

### ***Immediate and non-immediate directions***

- 2.10 When introducing an Article 4 Direction, there are two types of Direction under the GPDO: non-immediate directions and directions with immediate effect. In accordance with Sections 107 and 108 of the Town and Country Planning Act 1990<sup>5</sup> and The Town and Country Planning (Compensation) (England) Regulations 2015<sup>6</sup> (as amended), compensation provisions apply to directions with immediate effect, whereas non-immediate directions may be served, giving 12 months' notice of the intent to enforce a direction, without the need to grant any subsequent compensation.
- 2.11 Schedule 3 of the GPDO sets out the procedures and requirements relating to how Article 4 Directions must be prepared, consulted and confirmed. These are explained in Section 6 and 7 of this paper.

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<sup>3</sup> [National Planning Policy Framework \(publishing.service.gov.uk\)](https://www.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/426622/nppf-2019.pdf)

<sup>4</sup> [When is permission required? - GOV.UK \(www.gov.uk\)](https://www.gov.uk/guidance/when-is-permission-required)

<sup>5</sup> [Town and Country Planning Act 1990 \(legislation.gov.uk\)](https://www.legislation.gov.uk/ukpga/1990/25)

<sup>6</sup> [The Town and Country Planning \(Compensation\) \(England\) Regulations 2015 \(legislation.gov.uk\)](https://www.legislation.gov.uk/uksi/2015/1084)

### **3. LOCAL POLICY CONTEXT**

#### ***Introduction of an Article 4 Direction (2012)***

- 3.1 In January 2012, Blackburn with Darwen (BwD) Council Forum agreed to introduce a (non-immediate) Article 4 Direction to remove permitted development rights for the conversion of C3 to C4 uses within the wards then known as Shear Brow, Corporation Park, Wensley Fold, Mill Hill, Ewood, Sudell and Sunnyhurst.
- 3.2 Later that year, a Supplementary Planning Document (SPD), relating to Planning Applications for HMOs, was consulted upon and adopted. The SPD introduced clear and detailed local policy guidance to set out how and why HMOs were affecting the sustainability of communities and neighbourhoods in Blackburn with Darwen, and the very limited circumstances where they may be supported.
- 3.3 In February 2013, the Article 4 Direction (agreed in January 2012) came into force requiring all changes to C4 uses within the defined Article 4 areas to seek planning permission. Small HMOs outside of the defined areas, where issues of concentration had not been identified, still retained their permitted development rights.

#### ***Local Plan Part 2 (2015)***

- 3.4 In December 2015, Part 2 of the Local Plan was adopted, with a strong HMO development plan policy (Policy 19), confirming that HMOs will “only exceptionally” be supported. Such developments are only considered acceptable where the proposal does not erode amenity or character, does not necessitate substantial extensions, can accommodate necessary parking and where adequate waste/recycling facilities are provided. The policy was to complement the existing Article 4 Direction which removed permitted development rights relating to conversions of smaller family dwellings to HMOs.

#### ***Houses in Multiple Occupation and Residential Conversions and Sub-divisions SPD (2012)***

- 3.5 This supplementary planning document (SPD) was to provide additional detail explaining how the Council were to operate saved policies from the Blackburn with Darwen Local Plan, principally Policies H9 and HD5, and set out good practice which the Council expects to see adopted by developers. It is intended that this SPD will be deleted with the adoption of the new Local Plan (2021-2037) due to the policy approach set out in DM6. Information on the Local Plan 2021-2037 is provided as this section continues.

#### ***Review of the Article 4 Direction***

- 3.6 In accordance with national planning guidance (para 49)<sup>7</sup>, the Council report accompanying the original Article 4 Direction (2012) set out its intent to monitor the

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<sup>7</sup> [When is permission required? - GOV.UK \(www.gov.uk\)](https://www.gov.uk/guidance/when-is-permission-required)

appropriateness of the Direction, including review and consideration of whether the original rationale and/or extent of the Article 4 Direction continues to be valid.

- 3.7 Whilst the planning actions taken so far to resist additional HMO approvals in those designated areas are considered to have been successful, there have been increasing concerns, from a variety of Council services, that the number of HMO beds in the borough is growing and, with it, concerns regarding the amenity harm and associated impact on public services and communities. Despite the existing Article 4 Direction, over recent years the BwD borough has seen a considerable increase in the provision of HMO accommodation, and the Council now consider there to be an over-provision of such accommodation, which includes providing for needs imported from outside of the Borough. Concentrations of HMOs (including hostel provision) have significant impacts on the Council's ability to address the housing supply imbalance and are associated with significant increases in the demand for frontline services.
- 3.8 Whilst acknowledging that planning is only one part of a number of preventative actions to be implemented by the Council as a whole, Planning continues to be a key tool in the management of HMOs in the Borough.

#### ***Local Plan 2021-2037***

- 3.9 The emerging Local Plan (2021-2037) contains a new policy (DM6: HMOs) which states planning permission will not be granted for any new HMOs in any part of the borough during the Plan period. However, this relates only to those HMO developments requiring planning permission and so Article 4 Directions are a necessary tool to 'catch' HMO developments that could otherwise be carried out under permitted development rights.
- 3.10 Therefore, it is the Council's intent to extend the use of Article 4 Directions to other appropriate areas of the borough to fulfil the intended policy aims of DM6. Under this approach, planning applications will be required for all HMO conversions in areas the Article 4 Direction will cover, and then the policy will guide the assessment of those planning applications [to refuse them].
- 3.11 It is worth noting that the policy wording remains subject to Government examination in 2022/2023 and may, ultimately, not be supported or adopted in this form. In line with the NPPF (para 48), LPAs may give varying weight to relevant policies in emerging plans according to criteria. However, the principle of evidencing, reviewing and establishing changes to the Article 4 Direction areas remain relevant for the Council to facilitate stronger management of HMO conversions in those areas.

#### ***Boundary review (2018)***

- 3.12 Alongside the policy context, there have been additional changes relating to ward boundaries, which the original Article 4 Direction areas were based upon. Under the original Article 4 Direction the designated areas were based on the boundaries of seven ward areas as they applied in 2012. In 2018, BwD Council went through a boundary review by the Local Government Boundary Commission for England

(LGBCE), under the Local Democracy, Economic Development and Construction Act (2009). The review resulted in the number of electoral wards in the borough changing from 23 to 17, with the effect of subsequently changing the delineations of ward boundaries<sup>8</sup>.

- 3.13 There has therefore been a 'shift' in the boundaries for some, or all, of those wards that were originally covered by the 2012 Article 4 Direction. For example, the 'Sunnyhurst' ward was removed in 2018 and replaced by 'Darwen West' which covers a much larger geographical area including a significantly greater amount of rural area. Consequently, the Article 4 boundaries no longer relate to the seven wards they were originally drawn against.
- 3.14 The 2012 Direction made clear that, whilst the plans were intended to mirror the stated Council's electoral wards as close as possible as the date of the Direction, it is the Plans that defined the land subject to the Direction and not the electoral boundaries which may change from time to time. The area covered by the 2012 Direction remains as it was, until such time the Article 4 is modified, irrespective of the 2018 boundary revisions.
- 3.15 However, aside all new available evidence, the Council are now able to consider revisions to the boundaries of a new Direction and determine the most appropriate geography. Though it should be noted here that, in considering the evidence, the boundary changes have had some inevitable impacts on the ability for some ward data to be compared historically, which is explained further in the following section.
- 3.16 This report will set out the evidence justifying the introduction of a new Article 4 Direction, including identifying its new boundaries, which will, once in effect, cancel the 2012 Direction.

### ***Council plan objectives***

- 3.17 In addition to the planning context, the Council also has a series of corporate objectives to support the Council in being the best it can be. The Council's Corporate Plan (2019-2023) sets out the Council's eight priorities, of which seven relate closely to the appropriate management of HMOs. They are:
- Safeguarding and supporting the most vulnerable people
  - Reducing health inequalities and improving health outcomes
  - Connected communities
  - Safe and clear environment
  - Strong economy to support social mobility
  - Supporting our town centres and businesses
  - Transparent and effective organisation

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<sup>8</sup> [Review of Polling Districts Polling Places and Polling Stations.pdf \(blackburn.gov.uk\)](#)

### *Local Plan 2021-2037*

Similarly, the emerging Local Plan 2021-2037 establishes 12 strategic objectives, of which 3 closely link to the appropriate management of HMOs. They are:

- SO1: Health and wellbeing
- SO3: Housing needs
- SO5: Built and historic environment.



## 4. EVIDENCE

### **HOUSES OF MULTIPLE OCCUPATION**

#### ***Definitions of HMOs***

- 4.1 Definitions of HMOs vary slightly across Planning and Housing<sup>9</sup>.
- 4.2 Under the GPDO 2015, permitted development rights apply to the change of use of a dwellinghouse to a HMO with 3 to 6 unrelated occupants, as their only or main residence, who share basic amenities such as a kitchen or bathroom, unless those rights have been removed under an Article 4 Direction. Proposals for houses of multiple occupation containing 7 or more unrelated occupants, as their only or main residence, who share basic amenities such as a kitchen or bathroom, already require planning permission to be sought under ‘Sui Generis’.
- 4.3 Definitions of HMOs under the Housing Act include self-contained accommodation but they are otherwise broadly similar in character to those of Planning. Under Part 3 of the Housing Act 2004 (as amended), from October 2018, mandatory licensing applies to all rented properties with 5 or more unrelated people occupying it, who share facilities like a kitchen, toilet or bathroom. This licensing enables Councils to prescribe standards of safety and amenity and the suitability for occupation. Unlicensed HMOs therefore relate to those smaller HMOs of 3 to 4 unrelated people.
- 4.4 Councils can also use the powers under the Housing Act 2004 Part 3, to bring in Selective Licensing Scheme (SLS) areas requiring owners of *all* rented properties (not just HMOs) to apply for a selective licence. Under Part 2 of the same Act, a Council is also able to designate an ‘Additional HMO licensing scheme’ which requires owners of all smaller HMOs (3 and 4 bedroom HMOs) within the designated area to be licensed as HMOs by the authority, just like the larger (5 bedroom or more) mandatory HMO licensed properties.
- 4.5 The effect of this is to create slight disparities between HMOs recorded by planning (PD/permission) and Housing (licensed/unlicensed) but the broad patterns remain the same.

#### ***Growth in the number of HMOs***

- 4.6 There are a number of issues that make it difficult to historically compare the number of HMOs in the BwD borough. These include: differences in the ward area boundaries resulting from the Government’s 2018 boundary review; differences in the definitions of HMOs that occur between planning, housing and licensing; and differences in how the data is collected - i.e. whether counting properties, bed-spaces or individual flats. Housing, for example, count HMO bed spaces irrespective of the size of the parent property, whereas, in terms of HMO management, planning may be more focused on just those HMOs that contain 6 or fewer occupants.

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<sup>9</sup> [Housing Act 2004 \(as amended\)](#) – See Section 254 and 259 for definition of HMO

4.7 In 2011, prior to the introduction of the Article 4 Directions, there were **129 HMOs/hostels** in the borough, representing 0.22% of the total number of properties. This comprised 82 HMOs in Blackburn and 47 HMOs in Darwen, with the majority located in the inner urban areas and within seven wards. All seven wards were in the top ranked groups for high numbers of environmental reports, high incidences of crime and anti-social behaviour, high deprivation, low house prices and high proportions of vacant properties.

Table 1: HMOs by Ward July 2011 (Source: BwD Planning Report 2011)

Ward	Total no of properties	No of HMOs	HMOs as % of total properties
Audley	3241	6	0.19%
Bastwell	2250	0	0.00%
Beardwood with Lammack	2258	0	0.00%
Corporation Park	2471	25	1.01%
Earcroft	2087	2	0.10%
East Rural	831	0	0.00%
Ewood	3106	11	0.35%
Fernhurst	2223	2	0.09%
Higher Croft	3168	0	0.00%
Little Harwood	2498	5	0.20%
Livesey with Pleasington	2876	0	0.00%
Marsh House	2887	3	0.10%
Meadowhead	2583	0	0.00%
Mill Hill	3153	10	0.32%
North Turton with Tockholes	1851	0	0.00%
Queens Park	2587	6	0.23%
Roe Lee	2655	1	0.04%
Shadsworth	3474	3	0.09%
Shear Brow	2457	10	0.41%
Sudell	3256	9	0.28%
Sunnyhurst	2980	9	0.30%
Wensley Fold	2963	24	0.81%
Whitehall	1782	3	0.17%
<b>TOTAL</b>	<b>59637</b>	<b>129</b>	<b>0.22%</b>

4.8 Using data from the Council's Local Land and Property Gazetteer (LLPG), in 2022 there were **390 HMOs** in BwD, representing 0.61% of the total number of properties. Direct comparison needs to be avoided between 2021 and 2011 data, due to the likely differences in data source and counting methodology. However, it is clear that the number and proportion of HMOs has significantly increased in the ten year period, with an indicative 200% growth.

4.9 The revisions to ward boundaries also make it difficult to compare HMO numbers by area, with a reduction from 23 wards in 2011 to 17 wards by 2021. (For example, Shear Brow now falls largely within the Central Blackburn ward but maintains its position as the ward with amongst the highest proportion of HMOs.) As the Article 4 Direction areas aligned with the ward boundaries at that time, it is also difficult to identify changes in those wards that fell within, and outside, of the restricted areas. Nevertheless, it is apparent that numbers, and proportions, of HMOs have increased significantly, and, again, predominately fall within urban areas and areas of high deprivation, low house prices and high proportions of vacant properties. The number of HMOs has notably grown outside of the central areas of Blackburn and Darwen,

indicating a dispersed growth of HMOs in areas not covered by the restrictions of the 2012 Directions.

- 4.10 Acknowledging differences in counting and reporting, the Council’s housing team recorded 506 HMO *bed spaces* in 2015, and 1169 in 2021, representing a 131% increase in the number of bed spaces over that period. Given the slightly shorter time-period, this is a broadly similar increase to that reported through analysis of the LLPG.

Table 2: HMOs by Ward April 2022 (Source: BwD LLPG)

WARD	No of Properties	No of HMOs	%
Audley & Queen’s Park	3297	11	0.33%
Bastwell & Daisyfield	2681	5	0.19%
Billinge & Beardwood	3333	5	0.15%
Blackburn Central	4433	131	2.96%
Blackburn South & Lower Darwen	3225	1	0.03%
Blackburn South East	4328	5	0.12%
Darwen East	5145	33	0.64%
Darwen South	4365	30	0.69%
Darwen West	3950	3	0.08%
Ewood	4387	32	0.73%
Little Harwood & Whitebirk	3349	2	0.06%
Livesey with Pleasington	3992	3	0.08%
Mill Hill & Moorgate	4146	15	0.36%
Roe Lee	3862	5	0.13%
Shear Brow & Corporation Park	2753	45	1.63%
Wensley Fold	3384	63	1.86%
West Pennine	3526	1	0.03%
<b>Grand Total</b>	<b>64156</b>	<b>390</b>	<b>0.61%</b>

Figure 1: Distribution of HMOs, showing urban area and wards (April 2022) (Source: BwDBC May 2022)

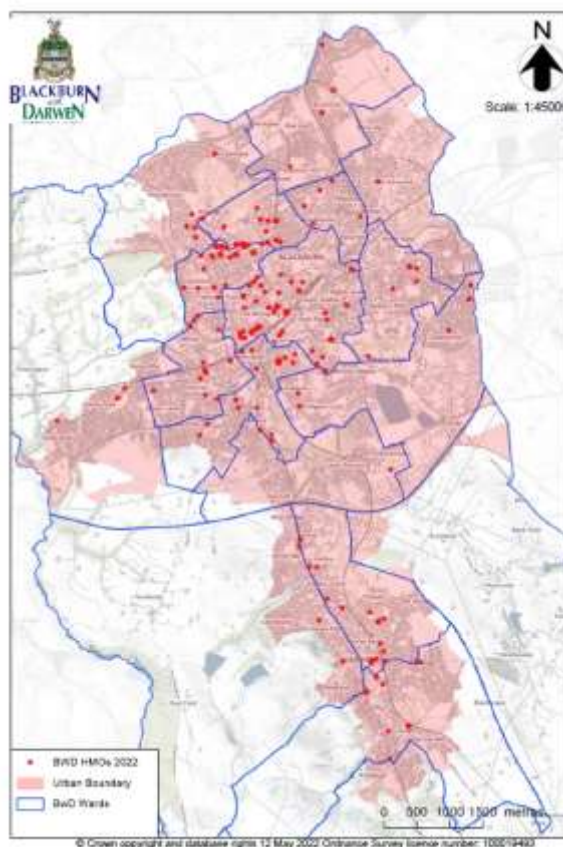
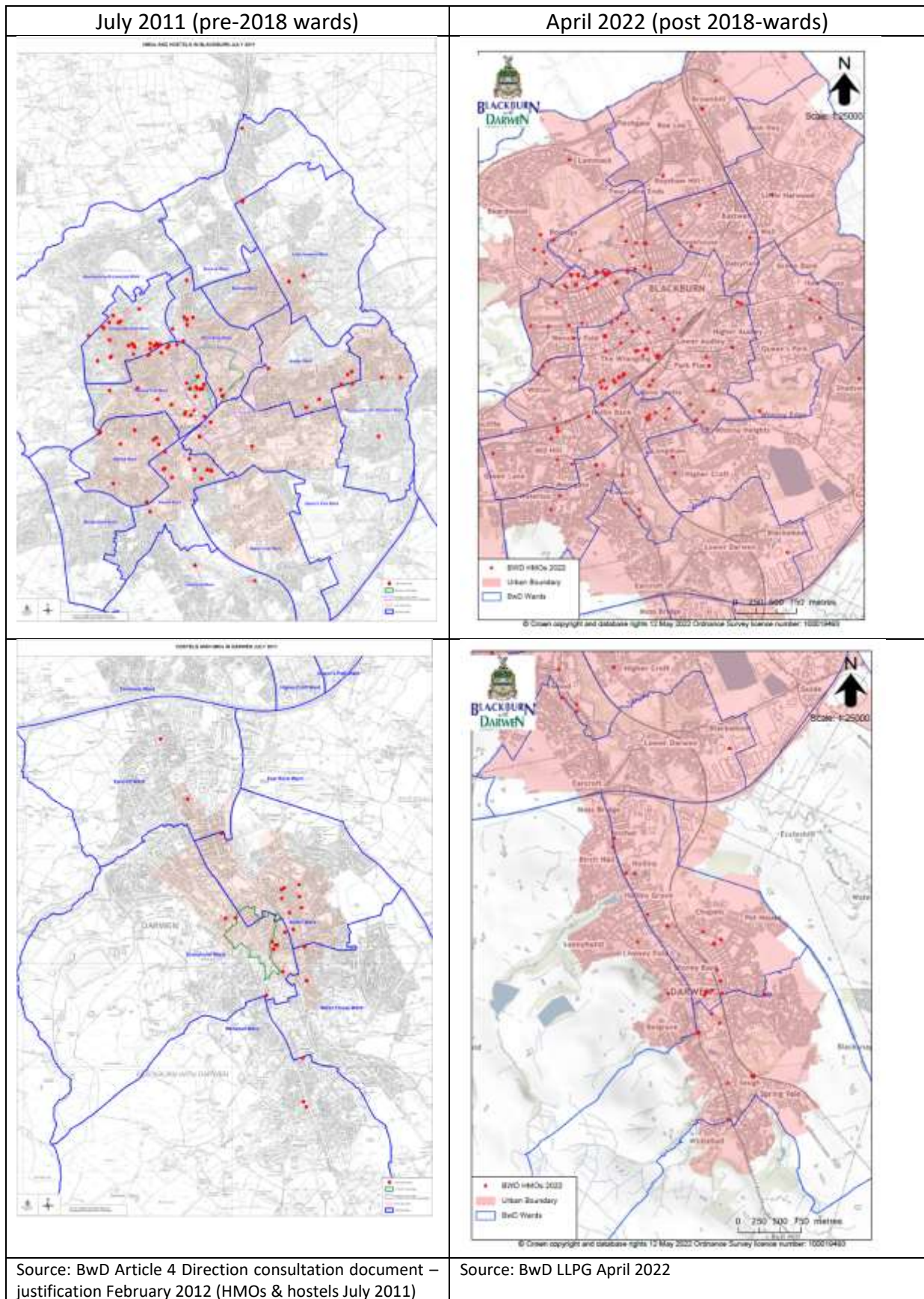


Figure 2: Comparison of HMO distribution in July 2011, with that of April 2022.



### **Planning applications**

4.11 In terms of the borough-wide HMO growth, the significant majority appears to have occurred through permitted development. Between May 2012 and May 2022, just 11 planning applications were received for the conversion of C3 dwelling houses to C4 small HMOs (3-6 persons) alongside 2 Certificate of Lawfulness applications. Each of those 13 applications related to proposed development in areas covered by the existing Article 4 Direction, which mandates the submission of a planning application for a change of use from C3 to C4. Both Lawfulness Certificates were granted. Of the 11 planning applications (for change of use), just 2 were permitted and the remainder were all refused or withdrawn showing the Article 4 Direction has been successful in allowing the Council to manage the conversion of HMOs within the designated boundaries of the Direction. When considering this data in conjunction with the above data, which shows the temporal growth in HMOs, it illustrates that much of the HMO expansion across the borough since 2012 has been through permitted development rights in those areas outside of the Direction area.

Table 3: Planning applications for the change of use from C3 to C4 (May 2012-May 2022)

Appl No	Decision	WARD 2022	PRE 2018 WARD
10/12/0320	GRANT	MILL HILL & MOORGATE	MIL HILL
10/14/0106	PERMIT	DARWEN EAST	SUDELL
10/17/0824	WITHDRAWN	DARWEN EAST	SUDELL
10/17/1881	REFUSE	MILL HILL & MOORGATE	MILL HILL
10/18/0875	WITHDRAWN	DARWEN EAST	SUNNYHURST
10/21/1182	REFUSE	DARWEN SOUTH	SUNNYHURST
10/21/1305	WITHDRAWN	DARWEN EAST	SUDELL
10/12/1206	GRANT	WENSLEY FOLD	CORPORATION PARK
10/21/1093	REFUSE	EWOOD	EWOOD
10/12/0960	REFUSE	BLACKBURN CENTRAL	CORPORATION PARK
10/13/0165	PERMIT	BLACKBURN CENTRAL	CORPORATION PARK
10/16/0247	REFUSE	WENSLEY FOLD	CORPORATION PARK
10/17/1181	REFUSE	MILL HILL & MOORGATE	MILL HILL

Source: BwDBC 2022

### **Imported need**

- 4.12 Each year, the BwD Homeless team register 200 homeless applications, predominately as a direct effect of imported need. Whilst there are no figures for HMOs directly, data relating to B&Bs shows that in April 2021 referrals came from Pendle, Rossendale, Burnley, South Ribble and Rochdale but there is anecdotal evidence from the Housing team that referrals extend from areas further afield including Scarborough, London and Kent.
- 4.13 There is further (anecdotal) evidence that BwD private landlords import people from other areas of the country to fill the available bed spaces in HMOs, including from homelessness referrals, prison release referrals and violent offenders subject to bail conditions.
- 4.14 The change of use through Permitted Development may mean that vital opportunities to inspect the premises for suitability and safety prior to occupation are missed and means that transparency, and opportunities to intervene around, location and spatial distribution of units are missed. This can, and has, led to the placement of converted units in close proximity which pose a potential risk to those residents.

### **Comparison with other Pennine areas**

- 4.15 Council held data shows that Blackburn with Darwen has a significantly higher proportion of HMO bed spaces than any of the other Pennine local authorities. Caution needs to be stressed when considering these figures, as the data includes larger, licenced HMOs and hostel bed spaces which are not the focus or remit of the proposed Direction and which serve to create a much larger total number of bed spaces than the data presented above (which sought focus on smaller HMOs). However, the data is valuable in illustrating a sizeable disparity between Blackburn and Darwen and other Pennine authorities: Blackburn and Darwen has a total of 862 bed spaces compared to 330 in Burnley and 75 in Rossendale. Whilst acknowledging that Blackburn with Darwen has a much larger resident population than other Pennine authorities, the number of HMO bed spaces is clearly substantially disproportionate, further suggesting the borough accommodates a large amount of imported need.

*Table 4: HMO comparison figures across other Pennine Local Authority areas (2022)*

Local Authority Area	Estimated Population (2019)	Number of HMO bed spaces
Blackburn with Darwen	148,753	862
Burnley	88,527	330
Rossendale	70,895	75
Hyndburn	80,815	15

*Source: Blackburn with Darwen and other Individual Local Authorities (2022)*

## **DEMOGRAPHICS**

### ***Population***

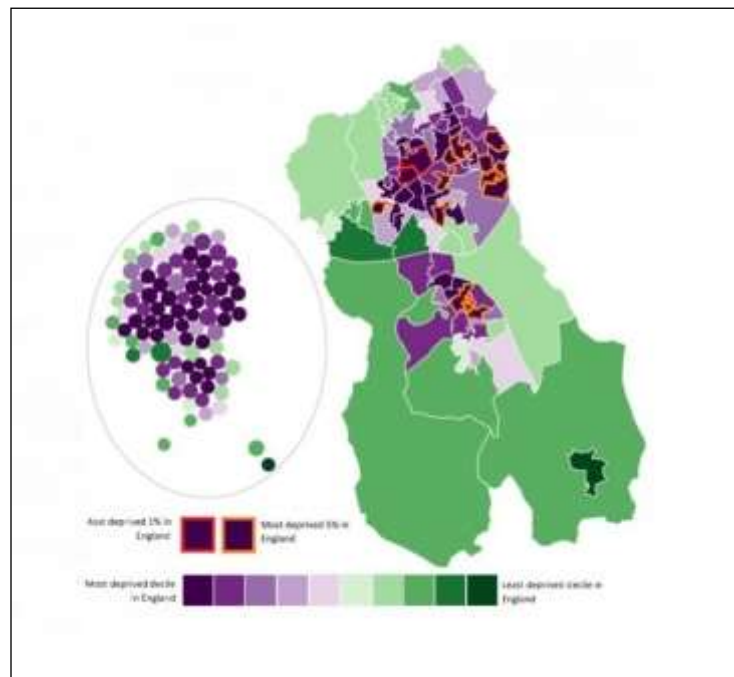
4.16 Blackburn with Darwen (BwD) covers 137 square kilometres and has a population of approximately 150,000 people (ONS 2020), with the number of people per km<sup>2</sup> around three times the England and Wales average illustrating a relatively high population density ([LCC Profile](#)). The population has, in general, been on an upward trend over recent years, and means BwD has the highest population of the 14 Lancashire local authorities, with a bias towards a much younger population than the norm ([LCC Profile](#)). Using ONS population projections, it is estimated that between 2018 and 2043, the population in the authority will increase by just 1%, the lowest rate for any of the 14 Lancashire authorities, and below the expected increase for Lancashire (7.2%) and England (10.3%) ([LCC Profile](#)).

### ***Deprivation***

- 4.17 A significant proportion of BwD's population live in areas of high deprivation.
- 4.18 The Indices of Multiple Deprivation provide statistics on relative deprivation which are reported at a small area level (called Lower Super Output Areas (LSOAs)) across 32,844 areas of England and 317 local authority areas. It uses 7 distinct domains, combined and weighted, which include income, employment, health, education, crime, barriers to housing and services, and the living environment.
- 4.19 The latest release from 2019, showed the BwD unitary authority is in the most deprived 10% in England, and, with regards the local concentration measure, this deprivation has got relatively worse since 2015 ([LCC Insight](#)). In fact, BwD has been in the 20% most deprived in England the five indices published since 2000. As of 2019, 56% of BwD's LSOAs are in the most deprived 20% of England ([LCC Insight](#)).

4.20 Spatial mapping of BwD's 89 LSOAs shows that over a third (33 LSOAs) are within the most deprived tenth (10%) of LSOAs nationally. Two of these LSOAs (outlined in red in Fig 3) are among the most deprived 1% in England, and a further 12 (outlined in orange) are in the most deprived 5%. The highest levels of overall deprivation are found in the urban areas.

Figure 3: Index of Multiple Deprivation 2019 (map with inset cartogram)  
Source: (JSNA 2020 p5)



4.21 Indices are relative, not absolute, as they are ranked in order nationally

and so a change in ranking doesn't necessarily mean a worsening in performance – other places could improve whilst BwD stayed the same. However, as can be seen in Table 4, the general overview through the indices is that BwD is relatively *more* deprived in 2019 than it was in 2015. (JSNA 2020 p5). The IMD illustrate that BwD has some of the highest levels of deprivation within England, particular within the urban areas of the Borough.

Table 5: Summary measures at Borough level

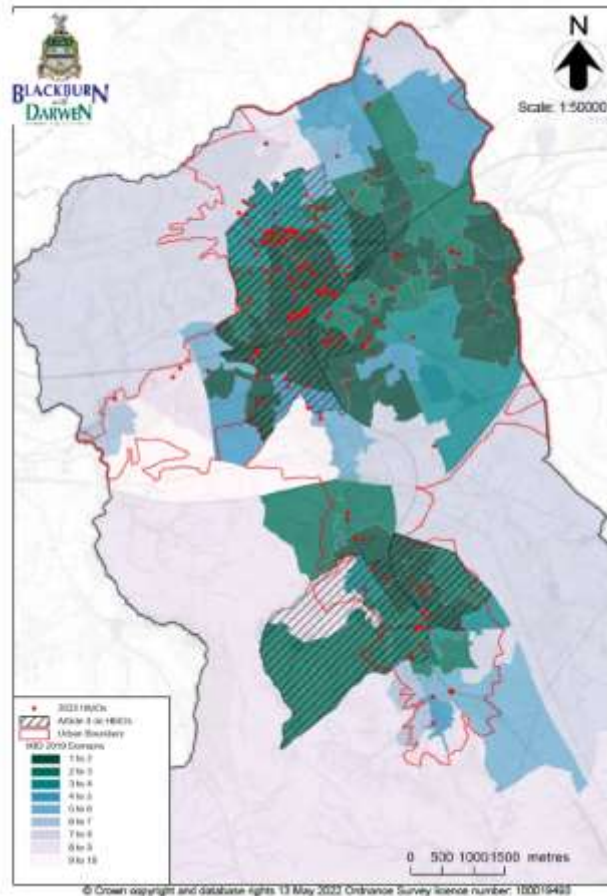
Summary measure	BwD Rank 2015 (out of 317 LAs)	BwD Rank 2019 (out of 317 LAs)
Average score	15 <sup>th</sup>	9 <sup>th</sup>
Average rank	24 <sup>th</sup>	14 <sup>th</sup>
Proportion of LSOAs in most deprived 10% nationally	12 <sup>th</sup>	9 <sup>th</sup>

Source: (JSNA 2020 p5).



4.22 Reducing deprivation is a key priority of the Council in seeking to achieve its strategic priorities. Figure 4 illustrates the levels of deprivation alongside recorded HMOs and the original Article 4 designations (diagonal marked areas) and the urban boundary (red line). The highest concentrations of HMOs are found in the most deprived areas of the borough (the darkest areas). Clusters of HMOs are also found in areas of relatively high deprivation beyond the central areas of Blackburn and Darwen which were covered by the original Article 4 Directions. In conjunction with the growth in HMO numbers, it is likely that the Article 4 Direction restrictions have had the effect of encouraging HMOs to disperse to other areas of the borough, but HMOs still remain located within the most deprived areas.

Figure 4: Deprivation (deciles) mapped against HMO clusters (Source: BWD via CLG IMD 2019)



4.23 Given the growth in HMOs outside of the current Article 4 Direction designated areas, there is justification to extend the designation to cover the urban areas of the Borough. This would extend the restrictions to cover the significant majority of the most deprived areas of the borough.

## HOUSING

4.24 An ACORN profile of local households classifies Lancashire residents by 18 socio-economic main groups. Within BwD, at the granular district level, 'Modest means' is the dominant group, 'young hardship' is second while 'difficult circumstances', only dominant in Blackburn Central ward, is third ([LCC Profile](#)). This classification indicates that the dominant type of households in BwD are those struggling socio-economically, requiring low cost housing, typically found in the most urban and deprived areas of the borough.

## Housing prices by ward

4.25 House prices in BwD are relatively low. In 2021, the median house price in the borough was £112,500, less than half the median rate for England and Wales of £267,500. Figure 5 illustrates that the lowest house prices are found in the central areas of Blackburn and Darwen and correlate with the areas of highest deprivation rates. In 2021, the lowest median rates in the Borough were found in Darwen East, Ewood and Blackburn Central (c.£78-80K) whilst the highest rates were found in the wards of West Pennine and Billinge and Beardwood (c.£187K-224K) illustrating wide disparities across the urban and rural areas of the borough.

4.26 The availability of low-cost accommodation continues to make BwD attractive to low-income and vulnerable households, which reinforces the demand for this type of accommodation. Low house prices encourage landlords to buy up cheap properties to maximise their rental income and thereby make them desirable investments. The growth in HMOs, and the issues they often then generate, then serves to keep area house prices low, perpetuating the cycle of cheap properties and HMOs.

4.27 The more rural areas of the Borough command higher house prices which are not attractive to landlords and it is considered that those areas therefore can better self-regulate in relation to HMO conversions.

4.28 Extending the Article 4 Direction areas to the urban areas would help better manage the conversion of low-cost housing to HMOs.

4.29 Figure 6 shows the correlation between deprivation levels and median house prices for BwD in 2020, clearly illustrating that the more deprived an area is, the lower the house prices are.

Figure 5: Median house price values by ward, shown against HMO clusters (Source: BwD Council 2022 (Median house prices (CLG

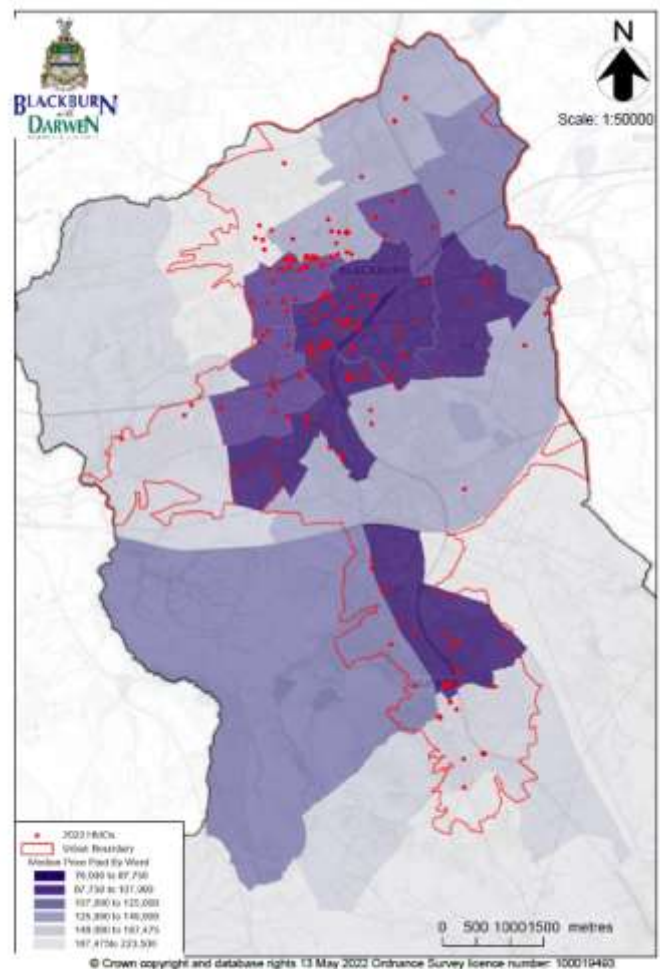


Figure 6: Deprivation and median house price relationships (Source: [LCC Insight](#)).



**Median house prices to earnings**

4.30 The median house prices to earnings ratio in the authority area is well below the England average ([LCC Profile](#)) and reflective of wide variations and disparities in general affordability across the Lancashire-14 area ranging from 3.75 to 6.66 times earnings. Blackburn with Darwen has amongst the lowest house price to earning ratios of less than 5, joining Burnley (3.75), Pendle (4.5), Hyndburn (4.33) and Blackpool (4.84) at the lower end of the range. For comparison purposes, the England ratio of house price to earnings was 7.84 (Source: [LCC 2021](#)).

**Housing Density / Overcrowding**

4.31 The links between poor housing and health are well-established and insecure, poor quality and overcrowded housing can worsen mental health. A household is defined as overcrowded if it has fewer bedrooms than it needs to avoid undesirable sharing. Based on the 2011 census data, Blackburn with Darwen has the third highest rate of overcrowding in the Lancashire-14 with a rate of 6.9%.

Table 6: Percentage of overcrowding, 2011 census (Source: [LCC Dashboard](#))

Area Name	Perc overcrowding	Area Name	Perc overcrowding
NHS Blackburn with Darwe...	6.9	Blackburn with Darwen UA	6.9
NHS Blackpool CCG	7.1	Blackpool UA	7.1
NHS Chorley and South Ri...	3.7	Burnley CD	5.1
NHS East Lancashire CCG	4.8	Chorley CD	3.8
NHS Fylde & Wyre CCG	3.7	Fylde CD	3.9
NHS Greater Preston CCG	6.0	Hyndburn CD	4.6
NHS Lancashire North CCG	5.0	Lancaster CD	5.3
NHS West Lancashire CCG	3.5	Pendle CD	5.5
		Preston CD	7.5
		Ribble Valley CD	3.0
		Rossendale CD	5.1
		South Ribble CD	3.0
		West Lancashire CD	3.5
		Wyre CD	3.4

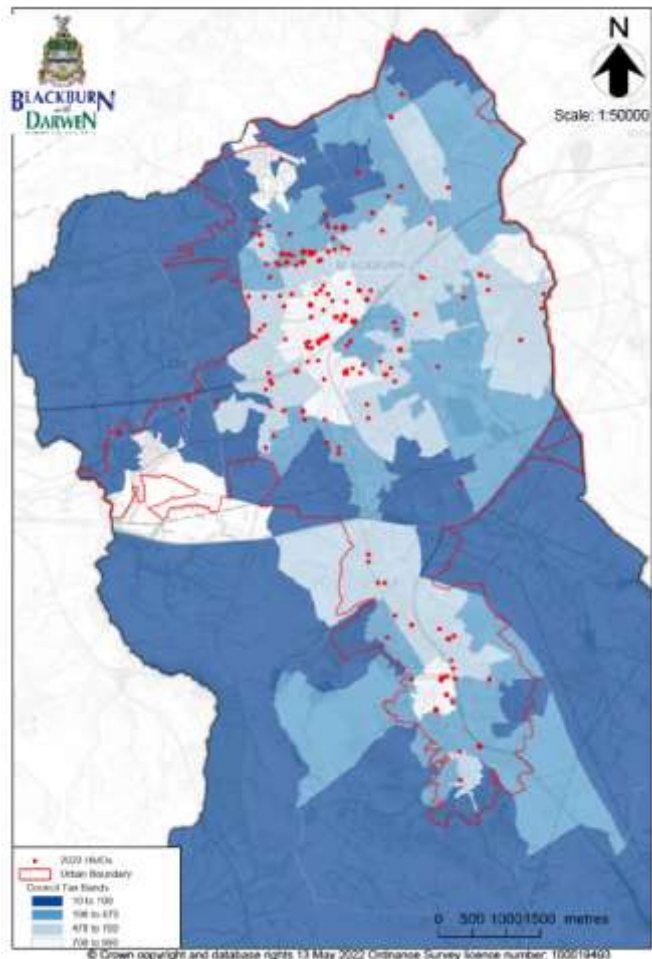
- 4.32 Overcrowding is more common for renters than owner-occupiers: nationally, 1.2% of owner-occupiers are overcrowded compared to 8.7% of social-renting households and 6.7% of private-renting households. Evidence suggests that overcrowding has a detrimental effect on household members' physical and mental health, and the recent coronavirus (Covid-19) pandemic identified increased risks of transmission in overcrowded housing (Source: [HoC 2021](#)), which further impacts on health provision services.

## Housing stock

### Council Tax Banding

- 4.33 Council tax bands are based on the price the property would have sold for on the open market on 1 April 1991 in England. BwD, like other East Lancashire authorities, has a very high proportion of its housing stock in council tax band A, identifying those properties at the cheapest end of the housing market. The significant majority of the HMO clusters are found in those areas with the highest proportions of Band A (and low cost) housing.

Figure 7: Proportion of Council Tax Band A properties (LSOA), shown against clusters of HMOs (Source: VOA 2021)



- 4.34 In BwD, 57.5% of properties are in Band A, compared to an average of 24.1% in England (Source: [LCC 2021](#)) illustrating a much higher proportion of its stock is of cheaper stock.

### Tenure

- 4.35 In 2020, the Lancashire-14 average of owner/occupied or privately rented properties in the dwelling stock was 87.4%, above the England average. In BwD, the percentage was only 81.2%, the lowest in all of the Lancashire-14 areas ([LCC 2021](#)).
- 4.36 Conversely, a high proportion of the borough's dwelling stock is in the registered social landlord (RSL) sector. RSLs provide accommodation but do not trade for profit. In 2020, BwD had the highest percentage of stock in the registered social landlord sector

in the whole Lancashire-14 area at 18.8% (LCC 2021). A high proportion of privately rented stock can affect amenity through unbalanced communities, often at the expense of owner-occupied properties.

### ***Vacant dwellings***

4.37 The percentage of vacant dwellings is high with BwD having a vacancy rate of 4.0%, which is amongst the highest in Lancashire (after Blackpool 4.5% and Burnley 4.3% ) and higher than the Lancashire-14 average of 3.3% and the England rate of 2.6% (LCC 2021).

## **EMPLOYMENT AND INCOME**

### ***Economic activity***

4.38 BwD has a lower proportion of its resident population who are economically active, than compared to the North West and Great Britain. Conversely, it has a higher proportion of residents who are unemployed.

Table 7: Employment and unemployment (October 2020-September 2021)

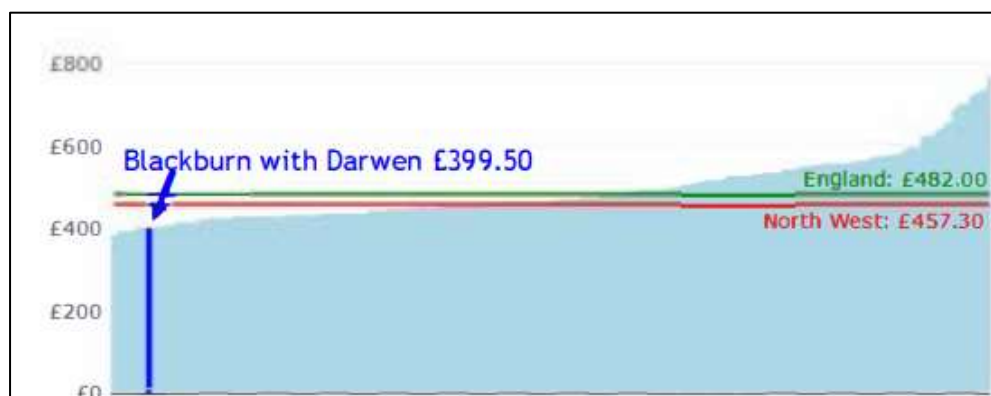
All people	Blackburn with Darwen	BwD %	NW %	GB %
Economically active	66,900	72.3	76.9	78.5
In employment	63,500	68.5	73.3	74.6
Unemployed	4,000	5.9	4.7	4.8

Source: NOMIS 2022 (from ONS annual population survey)

### ***Average earnings***

4.39 In 2019, BwD's median gross weekly pay was £399.50, compared to £457.30 (NW) and £482 (GB), which placed BwD 7<sup>th</sup> lowest out of 150 upper-tier authorities in England (Source: JSNA 2020 p9), as illustrated by Figure 8.

Figure 8: Median gross weekly earnings (2019)



Source: JSNA 2020

4.40 In 2021, the median gross weekly pay for BwD was £569.70, lower than the comparables for the North West (£575.80) and Great Britain (£612.80) (Source: NOMIS 2022). However, average earnings in Blackburn with Darwen are noticeably higher when measured by place of work in comparison to place of residence and so the authority records a net loss from commuter flows. The figure by place of residence is well below the national average (Source: [LCC 2019](#)).

### **Household income**

4.41 Gross disposable household income (GDHI) is effectively the amount of money that households have available for spending or savings after taxes, social contributions, pensions and housing interest payments. In 2016, the per-head figure for Blackburn with Darwen was more than a third lower than the UK average (35.9%). In general terms the per-head figure for the authority is in long-term decline in comparison to the UK average. Of all the authorities in the 'NUTS2' geography, BwD is ranked 2<sup>nd</sup> lowest for GDHI. (Source: [LCC Insight](#) 2021.)

### **Worklessness**

4.42 Worklessness has short and long-term effects to physical and mental health, and, along with income, is a key factor in socio-economic deprivation. Its definition is wider than unemployment, and includes those claiming Universal Credit or other benefits, those with caring responsibilities and those with a health condition or disability. In 2020, 14.8% of BwD households were workless, which is higher than the national rate of 13.6%.

Table 8: Workless households (Jan-Dec 2020)

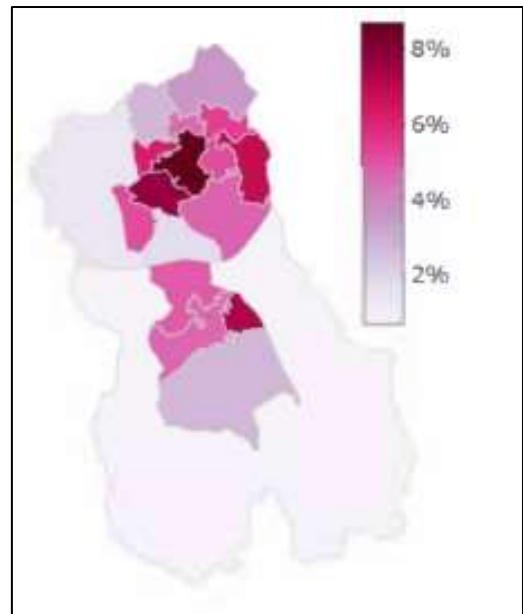
	Blackburn with Darwen	NW	GB
Number of workless households	6400	357,900	2,772,600
Percentage of households that are workless	14.8%	15.5%	13.6%

Source: NOMIS 2022 (from ONS annual population survey)

### Claimant counts

4.43 Historically, the ‘claimant count’ was the number of people claiming Job Seekers Allowance (JSA), but has since been redefined to include those claiming Universal Credit (UC), which is a benefit paid to people on low income or who are out of work. As UC now covers a broader span of claimants, there will inevitably be an increase in claimants, and therefore the claimant count cannot be used to accurately study time-trends.

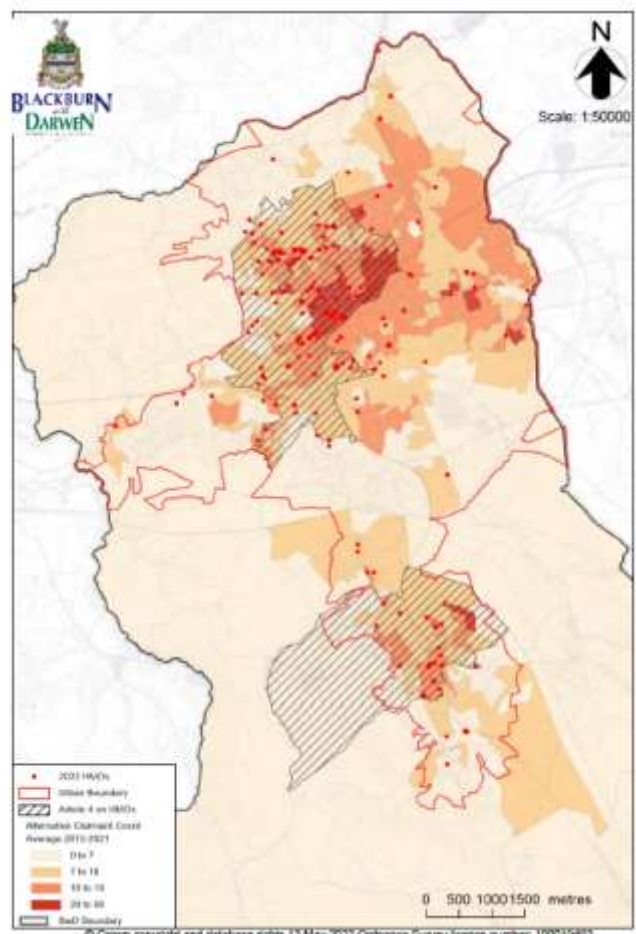
Figure 9: Claimant county rates as % of residents aged 16-64 (Source: JSNA 2020 p8 (December 2019 data))



4.44 To navigate around these ‘moving goalposts’, the Department of Work and Pensions introduced a new ‘alternative claimant count’, which make adjustments for the shift. This data shows that the number of claimants in BwD has been consistently higher than England, with a figure of 4.9% in 2019, compared to 3.1% for England, placing the Borough in the highest fifth nationally (JSNA 2020, p8). Figure 9 shows that the highest concentrations of claimants within the borough are found in the main urban areas, and correlate with the areas of highest deprivation.

Figure 10: Alternative claimant counts – average new monthly claimants (Nov 2015- 2021) by LSOA (Source: DWP 2022)

4.45 Figure 10 shows the average monthly number of new claimant counts (people claiming unemployment related benefits who were not claiming benefits in the previous month). The average is taken using a snapshot of data taken each November between 2015 and 2021.



4.46 The highest number of new claimants are found in the urban areas of Blackburn and Darwen, and also largely correlate with those areas that have high concentrations of HMOs.

4.47 This data cannot infer that all new claimants are associated with HMOs, but instead that the HMOs are located

in the areas that typically have higher levels of benefit claimants and the highest proportions of low-cost housing.

- 4.48 Anecdotal evidence is that many of the new benefit claimants are from people who originate outside of the BwD area, indicating imported need for subsequent low cost accommodation and services.

### **Employment and Support Allowance**

- 4.49 Blackburn with Darwen has a large number of employment and support allowance (ESA) claimants (Source: [LCC 2019](#)). In 2018, BwD had the second largest number of ESA claimants in the Lancashire-14 area (7,320), representing 11.8% of the total claimants in Lancashire (61,630). 50% of claimants in the Lancashire-14 area were classified under the health condition of ‘mental and behavioural disorders’, rising to 53.01% in BwD. Blackburn with Darwen (£127.99) had the highest total mean ESA weekly amounts in the Lancashire-14 area in August 2018, above the Great Britain level of £124.32. In August 2018 BwD received the second largest of ESA award payments per week in the Lancashire-14 area of £0.936 million. (Source: [LCC 2019](#)).

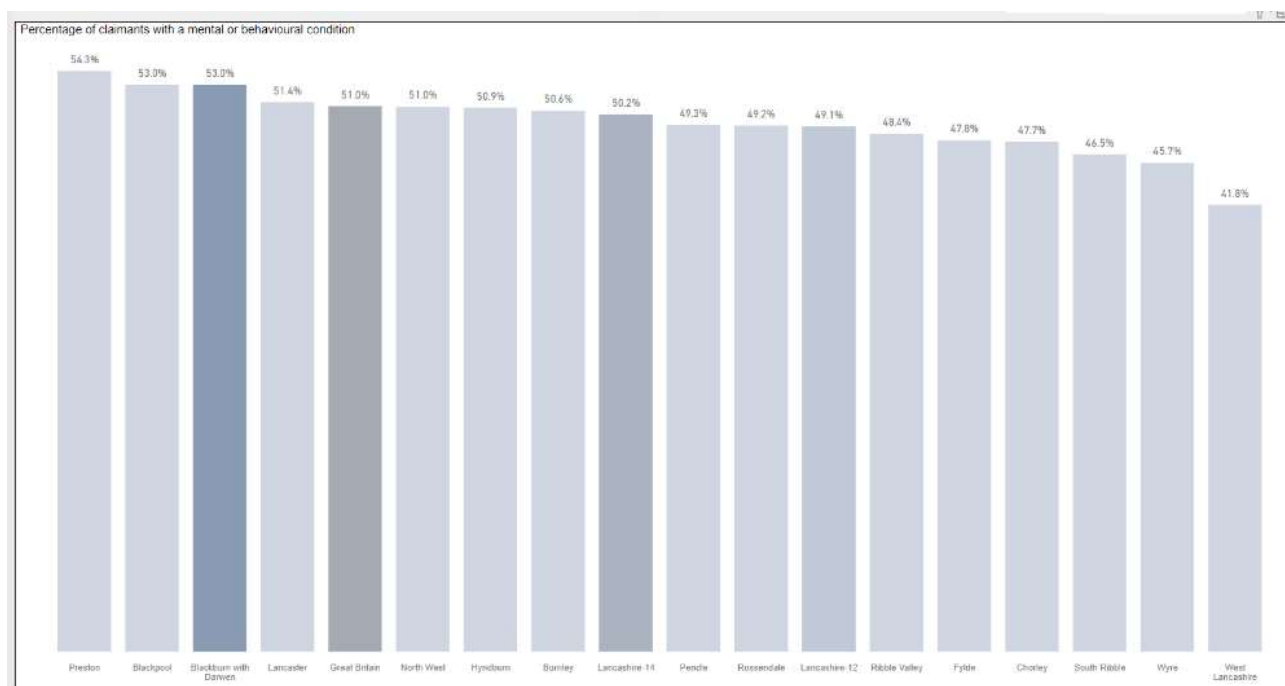


Figure 11: Percentage of ESA claimants with a mental or behavioural problem (Source: [LCC Insight 2019](#))

### **TOWN CENTRE BUSINESS AND REGENERATION**

- 4.50 In October 2021, the Blackburn Business Improvement District (BID) team undertook a survey of town centre businesses, obtaining a 60% completion rate from approximately 183 surveys, with the majority from retail units and restaurant/café/bars. The survey asked for the views of businesses on the town centre with findings including:



- 90% of businesses stated that the levels of anti-social behaviour (ASB), rough sleeping and begging need to be reduced, marking it as a clear priority action area above addressing the number of empty shops and offices. The survey notes it is difficult to compare to 2018 results, but states this aspect appears to have increased in need.
  - 39% of businesses disagreed or strongly disagreed that Blackburn feels clean and comfortable.
  - 63% of businesses thought that BID priorities to improve the town centre appearance were / would continue to benefit their business, with 62% saying the same for safety and security improvement.
  - In terms of the 'safe and secure' priorities, and a five year future plan, the three highest priorities were given to addressing homelessness/anti-social behaviour and begging (79% rated it a high priority), security patrols (79%) and retail crime prevention and support (74%).
- 4.51 The survey ratings concluded that the two highest priorities for improvements were to address ASB/rough sleeping/begging and empty shops. Respondent businesses did not consider Blackburn had a good environment, cleaning or comfort standard or year on year growth, and that customers are visiting less and for a shorter duration. Whilst visits may be affected by a number of factors, including retail and leisure habits changing following the covid pandemic, it is clear that businesses consider that the prevalence of homelessness, crime and ASB are having an adverse impact on immediate businesses in the town centre.
- 4.52 Many considered that the behaviour of some individuals, known as being attached to town-centre HMOs, detracts vital business development opportunities, new shoppers and leisure seekers. The direction of resources to address the harm caused by these referrals into the town centre, including local investment in police officers and security guards, also serves to reduce investment from the private sector to regenerate the town centre, affecting the long-term development plans for the borough, economic recovery and its broader reputation and perception.
- 4.53 In response to the survey, the BID team prepared a Reset Plan (March 2022) to recommend the interventions and opportunities for town centre recovery. Whilst much of this focused on expanding the town centre offer and increasing its appeal, the need to improve the town centre experience means that issues relating to ASB need to be addressed, although direct action falls outside the remit of the business improvement activity.
- 4.54 A similar survey was also undertaken in Darwen in October 2021. As with Blackburn's, 45% of respondents stated addressing ASB was a priority to address, ahead of empty shops or pavement conditions. 84% considered that tackling ASB was a high priority, with shoplifting prevention and training following at 71%.

Figure 12: Results from Blackburn BID Survey 2021



## **CRIME, ANTI-SOCIAL BEHAVIOUR AND ENVIRONMENT**

4.55 There is a significant link between HMO residents and crime, particularly within Blackburn Town Centre. Over a 12 month period in 2015, 10% of town centre HMOs had residents charged within 305 crimes, although crime rates are expected to be higher than just those recorded. 50% of those crimes were against businesses, and 20% involved car crime. Persons from those HMOs were responsible for a fifth of all theft/shoplifting offences in the town centre. Of the offenders, 36% had a birthplace recorded in Blackburn and 42% recorded as not in Lancashire, which further suggests large portions of the need for HMOs are imported (Source: BwD Council). It also indicates the detrimental impacts made to local amenity as a direct result of HMO residents.

### ***Crime / anti-social behaviour***

4.56 Figure 13 and the Lancashire [recorded crime article](#) reveals that Blackburn with Darwen has a crime rate which is above average for the Lancashire-14 area. The highest rates (all above the national average) are found in urban areas and correlate with areas of deprivation (Source: [LCC 2021](#)). BwD Council data shows that crime levels for violence, criminal damage, theft and ASB are nearly double the borough average in the wards where HMOs are located. Figure 14 shows the distribution of anti-social behaviour offences in the BwD borough in 2021/22.

Figure 13: Total recorded crime rate (per 1000 people) March 2020-March 2021 (Source: [LCC Insight](#))

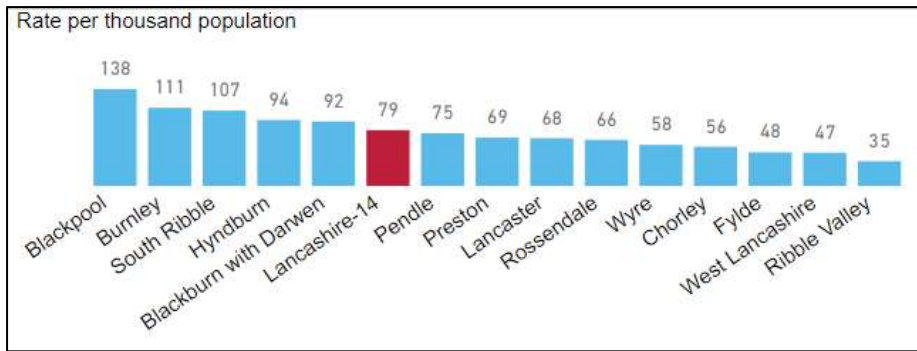
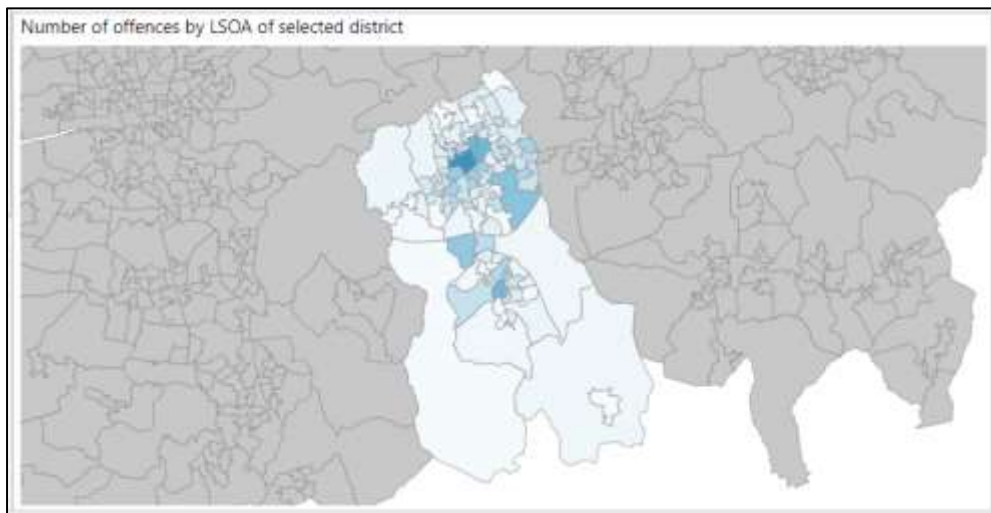
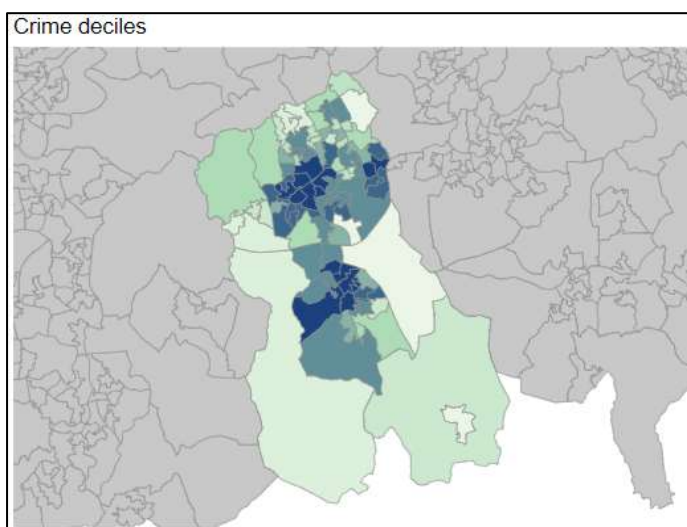


Figure 14: Distribution of Anti-social behaviour offences March 2021-Feb 2022 (Source: [LCC Insight 2022](#))



4.57 Patterns of crime correlate with deprivation. In the deprivation domain for crime, the darker areas show those areas at higher risk of crime.

Figure 15: Crime Deciles at LSOA (Source: IMD 2019 via [LCC Insight](#))



4.58 Alcohol is known to contribute to offending behaviour, particularly violence, anti-social behaviour and criminal damage. Residents in the authority have an above average number of hospital stays due to alcohol and alcohol related mortality as shown in Figure 16 (Source: [LCC Profile](#)).

Figure 16: Local Alcohol Profiles for BwD & England (Source: [OHID 2022](#) via [LCC Profile](#) 2022)

Indicator	Period	Blackburn		Region England			England		Best
		Recent Trend	Count	Value	Value	Value	Worst	Range	
Admission episodes for alcohol-related conditions (Narrow): Old Method	2018/19	↓	912	675	742	664	1,127		389
Admission episodes for alcohol-related conditions (Broad): Old Method	2018/19	↔	4,279	3,359	2736	2367	4,022		1,329
Admission episodes for alcohol-specific conditions	2020/21	↓	1,220	898	795	587	2,276		296
Alcohol-related mortality: Old Method	2018	↔	77	62.7	54.9	46.5	86.1		26.9
Alcohol-specific mortality	2017 - 19	-	63	16.0	14.8	10.9	27.3		3.9

## Environmental Crime

4.59 Data collected by the Council on the number of environmental crime offences in 2021/22 shows the highest numbers of reports derive from the urban areas of the borough (see Fig 17). Fly tipping forms the highest proportion of reported offences. Reports of accumulated back yard rubbish are, again, highest in the urban areas (darker colours) and correlate with higher densities of HMOs. As with other data, this is not to state that higher levels of environmental crime are due to HMOs, but only that there is a strong correlation between areas with higher concentrations of HMOs and higher levels of environmental crime.

4.60 Environmental crimes have significant impacts on residential amenity.

Figure 17: Environmental Crime Reports by ward in 2021/22 (Source: BwDBC EnviroCrime 2022)

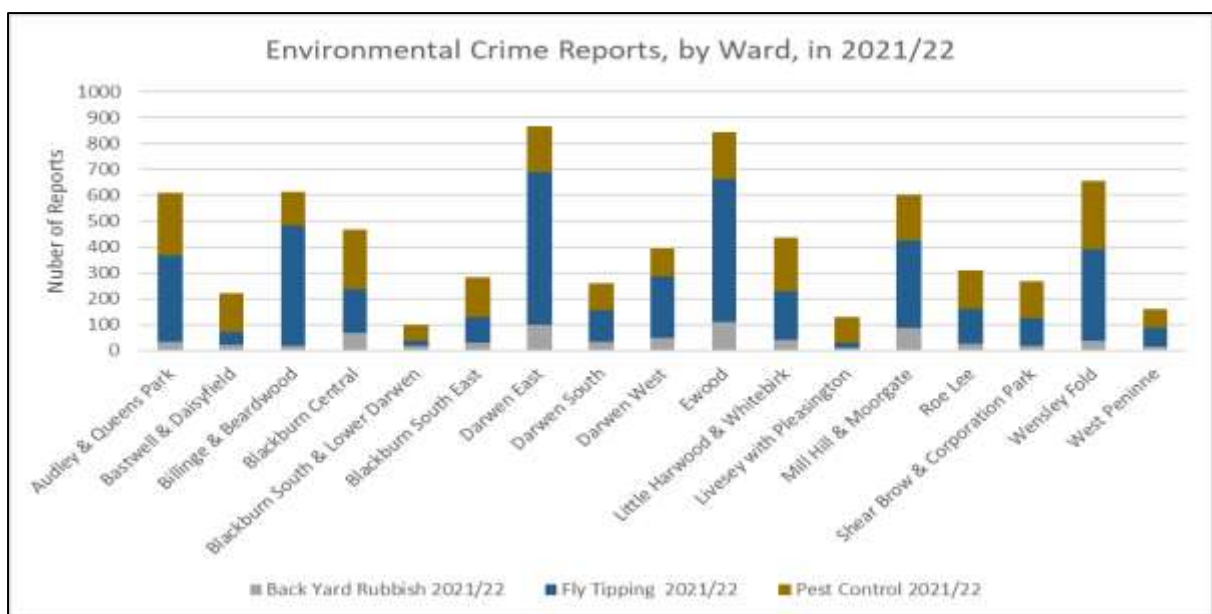
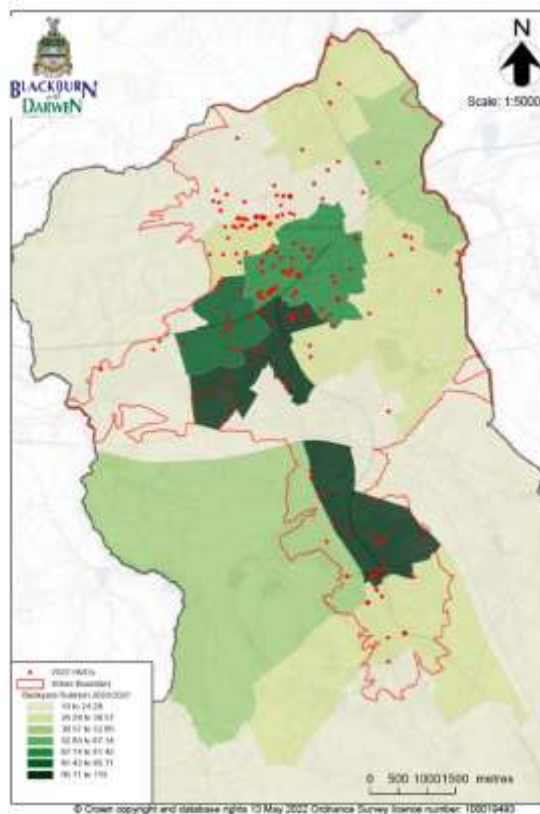


Figure 18: Environmental crime (back yard rubbish), by ward for 2021/22, shown against HMOs (Source: BwdBC EnviroCrime 2022; BwdBC LLPG 2022)



## **SUMMARY OF EVIDENCE**

- 4.61 In 2012, and in response to the growing number of uncontrolled HMOs following the Government’s changes to the GPDO, the Council introduced Article 4 Directions to seven of its wards to better manage the conversion of dwellings to HMOs in those areas. The designation of these areas was subject to ongoing monitoring and review.
- 4.62 Following review, and based on the evidence presented through this report, the Council consider it has a robust justification to make a new Article 4 Direction that will serve to extend permitted development restrictions across the urban areas of the borough.
- 4.63 The evidence shows that, since 2012, the numbers of HMOs have grown significantly and the locations of those HMOs show they have dispersed to parts of the borough that fall outside those areas currently managed under the Article 4 planning powers. It is expected that this is as a result of the Article 4 Direction restrictions. Based on planning application data, much of that growth appears to have occurred through permitted development rights. The evidence has also shown that the wide variety of inter-related issues pertaining to HMOs are not confined solely to the boundaries of a few wards contained under the existing Article 4 Directions but stretch across the urban areas.

- 4.64 As a result of changes to the ward boundaries in 2018, the Article 4 Direction boundaries no-longer correlate with current ward boundaries and so, through this review, more appropriate boundaries can now be considered.
- 4.65 This report does not purport to say that all of the borough's issues are linked to HMOs, but it can say that there is a high correlation of issues where HMOs have become established.
- 4.66 The data shows a variety of inter-related issues across the urban areas of the Borough (rather than the 7 original wards). As a general summary:
- The borough has high proportions of poor quality housing stock which can be bought cheaply, and is located in the most deprived and urban areas of the borough. These areas are impacted by social and amenity issues including higher levels of anti-social behaviour and crime. The highest levels of anti-social behaviour, crime and environmental crime are often associated with clusters of HMOs.
  - HMOs operate within a private market and attract an enhanced rate of public-funded housing benefit as they are listed as providing support for their clients, which can attract opportunistic landlords into the BwD area in the anticipation of generating high levels of revenue for often sub-standard housing.
  - The type of cheap and low standard accommodation generally attracts and houses those who are vulnerable and presenting with multiple and complex needs, who, once resident in BwD, require intense support, not just from the Council but involving finite resources from across the public sector, including the emergency services and support services. The Council support extends to helping vulnerable people claim benefits to support them.
  - High proportions of the borough's ESA claimants are in relation to mental and behavioural problems and patterns of new UC claimants are typically located in the areas of high deprivation and cheap housing. Anecdotal evidence confirms many ESA and UC claimants originate from outside of the BwD area, meaning the borough involuntarily imports a high percentage of adults with multiple and complex needs that then require support. BwD's 'pro-active' approach to supporting clients with needs and in crisis results in a large percentage of these referrals remaining in the Borough.
  - Alongside data accompanying crime statistics, this indicates that much of the HMO need is imported from other areas of the country, with landlords targeting the vulnerable to fill their bed spaces and secure income. Demand is not generated from a local need. Blackburn with Darwen has a significant and disproportionately higher proportion of HMOs than other Pennine local authority areas, further suggesting it is accommodating need from other areas.
  - Most out of Borough placements go unnoticed until the client presents to housing needs for support after eviction of crisis. As a result, vulnerable people are continually, albeit unintentionally, being placed at risk by LA housing departments who place individuals in accommodation without knowledge of the accommodation or the circumstances regarding risks of the other communal residents. Placed clients

are largely those with the most challenging and complex behaviours, resulting in increases of incidences of rough sleeping, street begging, anti-social behaviour, violence, street-working, street drug and alcohol use and general criminality within the borough. The prevalence of properties converted to HMOs also increases the risks for individuals as placements cannot be known.

- Benefit payments, responding to crime, ASB and environmental damage also drains the Local Authority of revenue and, in turn, opportunities to invest in improving areas of the borough and regenerating the town centres. Such improvements are highly prioritised by town centre businesses, who cite the social problems accompanying existing HMOs as a priority for the Council, and its partners, to address to ensure their businesses and the wider town centres can prosper. The regeneration of Blackburn and Darwen town centres are a key focus of the Council, alongside wider objectives.

4.67 The ability for HMOs to appear without more effective planning management perpetuates these issues. The resulting effects are to create detrimental impacts on the **amenity and wellbeing** of local areas, with increased levels of crime, anti-social behaviour (ASB) and environmental issues. It also fosters a vicious cycle of amenity deterioration, depressed house prices and poor quality stock, damaging local character, worsening deprivation rates and creating a perpetuating negative spiral that then encourages further HMOs to continue the cycle. Clusters of unmanaged HMOs have a detrimental impact on the growth, regeneration, image, investment and sustainability of communities and neighbourhoods. The transient nature of tenants in such accommodation, many of whom have no connection to BwD, undermines community cohesion, neighbourhood sustainability and 'civic pride'. It also has the potential to fundamentally change the character of an area, and for an area's housing choice to be skewed away from family accommodation.

4.68 Through the emerging Local Plan, the Council have an ambition for balanced growth in the Borough, which includes a focus on the provision of jobs and economic growth, regenerating the town centres of Blackburn and Darwen, and addressing inequalities in health and deprivation. Aside this, the Council's corporate priorities include a focus on reducing health inequalities, supporting connected communities, safeguarding the most vulnerable people and supporting town centres and businesses. Based on the available data, it is likely that this work will be significantly undermined unless tighter management of HMO accommodation is introduced, and with it greater protection of the amenity of local neighbourhoods, strengthening communities, improving housing and working to address deprivation and health inequalities.

4.69 Whilst acknowledging Planning is just one tool to try and address the borough's cumulative HMO issues, extending the Article 4 Directions to all urban areas will grant the Council more effective control to restrict the otherwise unregulated conversion of dwelling houses to HMOs. It is expected that such interventions can seek to rebalance communities and address the cumulative and detrimental impacts of HMOs on the borough and local amenity.

## 5. PROPOSED COUNCIL RESPONSE

- 5.1 Government guidance is that Article 4 Directions should apply to the smallest geographical level possible. The 2012 Article 4 Direction covered 7 wards (with the ward boundaries drawn as they applied at that time).
- 5.2 The evidence presented through this report has demonstrated that HMO numbers have grown considerably and been dispersed beyond those areas covered by the original Article 4 Direction and that i) **the factors contributing to a continuing growth in HMOs and ii) the consequential harm arising from HMOs both extend to a wider urban area** than those original seven wards.
- 5.3 Without Council intervention, there is a risk that these factors will see a continued growth in HMOs, and the vicious circles described through this report will continue to spin.
- 5.4 To **protect local amenity and the well-being of the area from further harm**, the Council therefore propose to extend the Article 4 Directions to cover the urban areas of the borough. The boundary of those urban areas is set by Policy CP2 of the emerging Local Plan 2021—2037. The new Article 4 Direction, once in effect, will replace the 2012 Article 4 Direction and its designated areas.

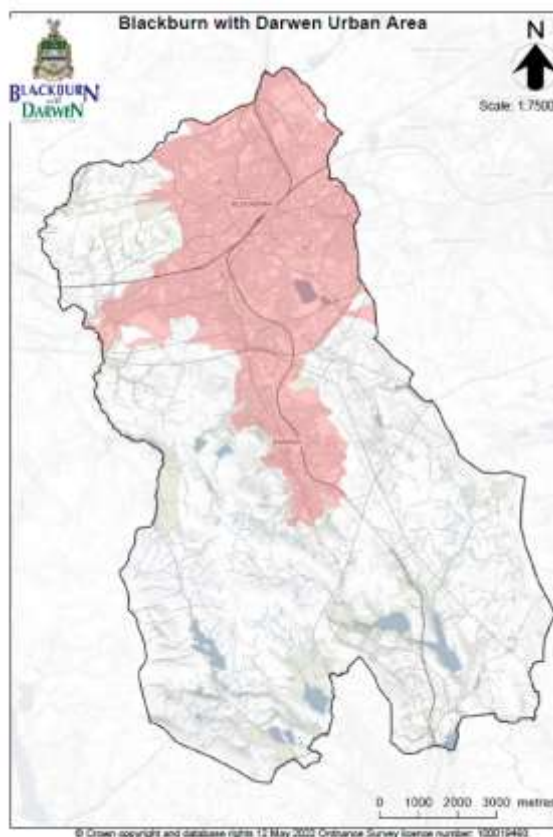
5.5 This area is shown on the map at Fig 19.

5.6 It is considered that this is the smallest, appropriate geographical level to apply for the reasons evidenced through this document.

5.7 The remaining non-urban areas of the Borough are considered to be self-regulating due to higher house prices and better quality housing stock dissuading their conversion to HMOs by potential landlords. But, as before, the Article 4 Direction will be subject to future monitoring and review, and, should issues disperse into those areas to create negative impacts on local amenity, then the boundaries can again be considered.

5.8 It is acknowledged that, under the GPDO, in an area with an Article 4 Direction it would be possible for a dwellinghouse to change from a HMO to a dwellinghouse under permitted

Figure 13: Proposed Article 4 Direction area (urban area)





development rights, but then require planning permission to change again from a dwellinghouse to a HMO. Under these proposals, that would likely result in a refusal of planning permission under Policy DM6. However, the number of cases of this are expected to be few.

## **Risks**

Risk	Mitigation
The current situation will remain in place for a further 12 months whilst the non-immediate direction is introduced. In this time, there could be a 'rush' of conversions to avoid the future requirement for planning application.	Planning is just one part of the regulatory process available to the Council to manage the conversion of properties to HMOs. The only alternative to a non-immediate direction would be to introduce an immediate direction, but this would leave the Council open to the risk of financial compensation for a 12 month period.
Planning applications for the conversion to an HMO in an Article 4 Direction area are exempt from a planning fee.	Under the emerging policy DM6, it is expected that all applications will result in a refusal, which may deter applicants. The cost of processing applications will be met through the existing budget for the Growth department.
The extended Article 4 Direction could result in a reduction in the supply of HMOs.	The Council's Housing and Economic Needs Assessment (2018) and Update (2021) identified no need for any type of this accommodation (HMOs).
Transfer of displacement of problems to other areas not covered by an Article 4 Direction.	The evidence shows a growth of HMOs dispersed into areas not covered by the existing Article 4 Direction, but this is understood to be because of the similar conditions across the wider urban area, including deprivation and low-cost housing. Rural areas are considered to be self-regulating due to higher house prices and better quality housing stock dissuading conversion to HMOs.

## 6. CONSULTATION

- 6.1 Article 4 Directions need to be made through a two stage process. The first is for the Council to make the direction and undertake local consultation with the areas the Direction is proposed to take effect in. The second is the confirmation of the direction by the Council. Prior to confirming the Direction, the Council must consider all comments made during the consultation and consider whether materials changes are necessary to the Direction. If significant amendments are needed, further consultation may be required.
- 6.2 Schedule 3 of the GPDO 2015 sets out the procedures for publicity and consultation of an Article 4 Direction. In accordance with those requirements, the following consultation will be undertaken:
- Advertisement in the local press: *Lancashire Telegraph & Bolton News*
  - Display of the Article 4 Direction Notice at all libraries within Blackburn (Blackburn Central library, Darwen library, Cherry Tree library, Mill Hill library and Roman Road library), for a period of 6 weeks.
  - Display of the notice in Blackburn Town Hall and Darwen Town Hall.
  - Notice published on the Council web pages.
  - Site notices
  - Correspondence to statutory consultees and other bodies
- 6.3 Individual service of the notice on owners and occupiers of land is impracticable due to the number of owners and occupiers in the area the proposed Article 4 Direction is to cover.
- 6.4 The notice will include all details required by Schedule 3 (4) including a description of the development and area, a statement of effect, and a copy of the map area.
- 6.5 A period of **6 weeks** will be given for representations to be made, following which the Council will consider all representations made and take them, with a final report, to Council to seek confirmation of the Direction.
- 6.6 Any representations requiring material changes to the Article 4 Direction may warrant further consultation.
- 6.7 The Secretary of State (SoS) will be notified of the relevant details on the date the notice is first published/displayed, and following its confirmation by the Council.

## 7. PROPOSED TIMETABLE

7.1 The Council are pursuing a non-immediate Direction and there is a 12 month lead in period from the date the direction is made, to the date it takes effect. This follows the same stance as the 2012 Direction, so as to avoid the need for financial compensation measures at cost to the Council.

### Timetable

7.2 A timetable for the preparation of the Article 4 Direction is set out below. The Article 4 Direction will be taken before full Council for approval at both the preliminary stage, to 'make' the notice, and the final stage, to consider the representations made through public consultation and to 'confirm' the notice.

7.3 Aside that work, the Local Plan Examination in Public is expected in 2022, and through it, will make the case for the newly worded policy. It is anticipated that the Local Plan will be adopted by the Council in summer 2023. Should the Article 4 Direction proceed in accordance with the timetable, then this will also take effect in summer 2023.

**Table 9: Timetable for preparation of the Article 4 Direction**

Planning and Highways Committee 'to make'	16 June 2022
Full Council 'to make'	28 July
Direction Notice 'made'	August
Secretary of State notified	August
6 week consultation on Direction notice	August – September
Analysis of representations/additional consult?	October/November
Planning and Highways Committee 'to confirm'	Autumn/Winter 2022/23
Full Council 'to confirm'	Winter / Spring 2023
Direction Notice confirmed	Winter / Spring 2023
Secretary of State notified	Winter / Spring 2023
Direction Notice takes effect	August 2023

7.4 Note that if the consultation results in any representations that the Council consider are warranted and necessitate 'material changes' to the consultation, then this will require another round of consultation which may amend the timetable relating to the date the direction notice may be confirmed.

7.5 Council's may 'confirm' all article 4 directions. However, the Secretary of State (SoS) must be notified 'as soon as practicable' (PPG para 50<sup>10</sup>) at both the preliminary (notice 'made') and final (notice 'confirmed') stages. The SoS does not have to approve article 4 directions but will only intervene where there are clear reasons for doing so (PPG Para 50).

<sup>10</sup> [When is permission required? - GOV.UK \(www.gov.uk\)](https://www.gov.uk)

7.6 Once the Direction is made, the Council will again continue to monitor and review the appropriateness of the direction and its extent.