

## **Guidance on Fire Safety and Amenities for Houses in Multiple Occupation (HMOs)**

The Housing Act 2004 and various Regulations made under the Act provide the minimum standards for all HMOs (Licensable or not). Of the Regulations, the Licensing and Management of Houses in Multiple Occupation and Other Houses (Miscellaneous Provisions) (England) Regulations 2006 (as amended) is the most relevant and references to legal requirements are taken from those Regulations except where noted.

In addition, we use statutory and non-statutory guidance and best practice to inform our decision making. Note: this guidance is subject to periodic review to reflect changes in legislation, guidance and best practice.

### **Fire Safety**

#### **Legal requirements:**

*Appropriate fire precaution facilities and equipment must be provided of such type, number and location as considered necessary.*

The Regulatory Reform (Fire Safety) Order 2005 requires all HMOs to have a fire risk assessment carried out by a competent person.

Part 1 of the Housing Act 2004 and specifically the Housing Health and Safety Rating System (HHSRS) which uses a risk-based approach to assess the hazard of fire.

The Management of Houses in Multiple Occupation (England) Regulations 2006 require fire fighting equipment and fire alarms to be maintained in good working order.

Fire Safety is the most important consideration with HMO's. Some HMOs present a higher fire risk (e.g. bed sit HMOs with cooking facilities in each room) but other HMOs (e.g. shared houses) may have a similar risk to family houses.

The occupants of HMOs are also considered: higher risks are associated with vulnerable occupants; where there are high numbers of occupants or where the occupants have limited contact with each other. It is better to assume a higher level of risk when it is assessed as the profile of occupants may change.

If the building containing the HMO also includes a part of the building in commercial use is poorly constructed or has long or complex escape routes, this is also likely to mean that there is a higher fire risk.

The over-riding factor is that, in nearly all cases, fire safety measures are based on early detection and the presumption of total evacuation of the property in the event of a fire (i.e. not staying-put).

We base our fire safety standards on LACORS Housing [Fire Safety Guidance](#). Despite its age, this guidance remains a practical guide to many situations.

Fire precautions in HMOs use both technological (detection) and physical measures (fire doors) to improve safety:

1. **Automatic fire detection and warning system (AFD).** Systems should be installed by contractors experienced in such work and should be tested by the landlord or responsible person regularly and a log of such testing be kept on site. Further testing and maintenance by a competent contractor should be carried out every 6-12 months (depending on the system) and a certificate of testing issued.

Generally, AFD systems should conform to B.S. 5839 Part 6. There are various grades and categories according to the level of risk. Grade A systems should be used for all large and more complex HMO's and always in HMO's with cooking facilities within letting rooms. Grade D systems are used for smaller HMO's. Some HMOs (e.g. bed sits) require a mixed system using elements of both Grade A and Grade D systems.

Detectors/sounders used include heat detectors in each kitchen (or unit containing cooking facilities), and smoke detectors in bedrooms and common areas.

Each HMO should be assessed individually, and the detection and warning arrangements provided, as appropriate.

2. **Furnishings:** should comply with the Furniture and Furnishings (Fire) (Safety) Regulations 1988: furnishings complying with this standard give off less toxic fumes in the event of a fire.
3. **The structure** separating one unit of accommodation from another should be brick or block or timber stud and plasterboard to provide a minimum of 30 minutes fire protection. Walls comprising timber stud with timber cladding are not acceptable. Glazed panels (except fire resistant glass) are not acceptable.
4. **Emergency lighting:** where the escape distance to the outside is excessive or complex, or lacks natural light, emergency lighting should be provided in the escape route, to B.S. 5266 and externally at the final exit of the building.
5. **Cooking facilities** -in a letting room or a communal kitchen, a fire blanket sited close to the exit door must be provided. Appropriate extinguishers may also be needed in larger HMOs.
6. **Escape windows:** if required should have one opening side-hinged escape window in each bedroom with a clear space of 450 x 450 mm, and the lower edge should be no more than 1.1m from floor level.

**7. Fire doors:** 30 minute fire doors should be provided throughout larger HMOs (except bathrooms and WC`s unless there is a boiler in that room). In 2 storey HMO`s, fire doors to all rooms may not always be necessary, except for the kitchen. Where any letting room contains cooking facilities, fire doors should be fitted to those rooms.

Generally, fire doors should be fitted with 3 fire-resistant steel hinges, combined smoke seals and intumescent strips and be fitted with a suitable self-closer, e.g. a dual speed hydraulic self-closer. Any gap between door and frame should be no greater than 3 mm.

Fire doors in small HMOs with simple AFD systems should not have smoke seals fitted (but intumescent strips are still needed) as the smoke from a fire in any room without a detector will need to be detected and the alarm activated by the sensors in the common parts.

All doors in an HMO, *whether fire doors or not*, should be of robust construction (i.e. not lightweight or thin panels); be close-fitting and have no holes or cracks.

Fire doors to shared kitchens should ideally have fire resistant vision panels to reduce risk of accidents; likelihood of door wedging etc.

**8. Escape doors:** all such doors should be openable from the inside without the use of a key. This includes final escape doors (e.g. front/rear doors) as well as bedroom doors. Thumb turn or snib action locks to room side are usually required.

## **Amenities and Facilities**

The number of persons permitted to occupy an HMO will depend on the provision of sufficient amenities (kitchens, bathrooms and toilets) to the HMO and the number and size of the letting rooms.

Our guidance refers to shared facility HMOs. In practice there are some HMOs with cooking and/or bathing facilities within units as well as some sharing of amenities and these will be assessed individually.

The Legal requirements also include the Housing Act 1985, Housing Act 2004 (Part 1 containing the Housing Health and Safety Rating System) and the HMO Management (England) Regulations 2006.

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## **Shared kitchens**

### **Legal requirements**

*1. A kitchen, suitably located in relation to the living accommodation, and of such layout and size and equipped with such facilities so as to adequately enable those sharing the facilities to store, prepare and cook food.*

*2. The kitchen must be equipped with the following equipment, which must be fit for the purpose and supplied in a sufficient quantity for the number of those sharing the facilities:*

*(i) sinks with draining boards*

*(ii) an adequate supply of constant cold and hot water to each sink supplied*

*(iii) installations or equipment for the cooking of food*

*(iv) electrical sockets*

*(v) worktops for the preparation of food*

*(vi) cupboards for the storage of food or kitchen and cooking utensils*

*(vii) refrigerators with an adequate freezer compartment (or, where the freezer compartment is not adequate, adequate separate freezers)*

*(viii) appropriate refuse disposal facilities; and*

*(ix) appropriate extractor fans, fire blankets and fire doors.*

## **Shared Washing and Toilet facilities**

### **Legal requirements**

*There must be an adequate number of bathrooms, toilets and wash hand basins for the number of persons sharing the facilities and wherever reasonably practicable, there must be a wash hand basin with appropriate splash back in each unit having regard to the age and character of the HMO.*

*All washing facilities must have an adequate supply of cold and constant hot water.*

*All bathrooms must be adequately heated and ventilated.*

*Bathrooms and toilets must be of adequate size and layout, fit for purpose and be suitably located.*

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**Kitchen facilities** are generally provided in the ratio of one set per 5 occupants. Typically, the facilities should include a full-size cooker (or a 4 ring hob and separate oven), 1.0 m sink and drainer unit, 0.5m of worktop per occupant (plus 0.5m), a fridge shelf per occupant and similar freezer space plus cupboard space for dry food storage and utensils. Sufficient spare electrical sockets need to be provided (in addition to the sockets required for the main appliances). The under-sink cupboard, if any, shall not be used for food storage.

The minimum size of a kitchen is 7 m<sup>2</sup> for 5 persons taking account of layout; food storage, preparation and cooking. More occupants will require proportionately more facilities and the kitchen size and layout must be increased and still be functional and practical.

Ideally shared kitchens should be no more than one floor away from any letting.

No kitchen shall have more than 2 complete sets of facilities.

Dishwashers and combination microwave oven/grills may be acceptable in lieu of a second set of facilities for kitchens shared by 6/7 persons.

Communal lounges and dining areas are recommended whenever possible and may be required in larger HMOs so that kitchens do not become overcrowded at times of peak use. A six-person HMO kitchen may need to be 10 m<sup>2</sup> plus a communal room.

**Bathroom facilities** should be adequate for the number of occupants in the ratio of at least one bathroom (containing bath or shower, WC and wash hand basin) per 5 occupants. Where there are 6 to 10 occupants, there should be two bathrooms, but one of the WC's must be separately located with a wash hand basin.

### **Minimum room sizes for HMO units:**

The Council uses the standards in the Housing Act 1985.

- the minimum floor area for a single letting room for one person is 6.51 m<sup>2</sup> (70 sq. ft.) and, for 2 persons, 10.22 m<sup>2</sup> (110 sq. ft.) where the rooms do not contain sanitary or cooking facilities
- for rooms containing cooking facilities, the minimum areas should be 10 m<sup>2</sup> for one and 13 m<sup>2</sup> for two persons
- areas of rooms under 1.5 m in height, due to sloping ceilings or other obstructions must be disregarded\* as they are unsuitable for use.
- Until recently, the minimum bedroom only sizes noted above could be relaxed where there are communal or shared areas available for the use of occupants (e.g. a lounge or dedicated dining area) but new Regulations will prohibit this.\*
- no room in an HMO should be occupied by more than 2 persons
- room measurements need to reflect "the usable floor area" i.e. to be practical and functional.

\*NOTE: Mandatory guidance on room sizes and measurements of usable space in attic/loft rooms in Licensed HMOs has also been published and take effect from 1<sup>st</sup> October 2018.

## Heating & Ventilation

### Legal requirements

*Each unit of living accommodation in an HMO must be equipped with adequate means of space heating.*

#### Heating

While there is no specific requirement for a fixed heating system, the ideal is a gas-fired central heating system covering the whole HMO with thermostatic radiator valves fitted to radiators in bedrooms so that the occupiers of individual rooms can control the heating in their letting.

Any method of heating should be capable of cost-effective and efficient heating to the letting room(s) to maintain a temperature of 21°C.

Communal rooms in HMOs also require heating.

If electric heating is used, it must have thermostatic control and a programmable timer. It should be wall mounted and have its own dedicated socket or conveniently located spur. Trailing leads are not acceptable. Off-peak storage heaters can be used preferably fitted with a built-in additional peak rate convection heater. Full instructions for their use must be provided.

The use of portable naked flame heaters (e.g. bottled gas heaters) is not acceptable.

#### Ventilation

Ideally windows to bedrooms should be double glazed and fitted with trickle vents. If cooking or bathing facilities are within the bedroom suitable controllable mechanical ventilation must also be provided. Bedrooms must have windows with a minimum size of 1/10<sup>th</sup> of floor area of which half is to openable. Window restrictors may be required.

Communal rooms such as bathrooms and kitchens will usually require mechanical ventilation even if there are openable windows or air bricks as condensation and mould can be a significant issue in HMOs. They must automatically work with the lights and a minimum of 10 minutes overrun

## Health and Safety of Occupants

HMOs should be free from significant hazards in accordance with the Housing Health and Safety Rating System (HHSRS) in Part 1 of the [Housing Act 2004](#)

29 hazards are included in the HHSRS assessment. In HMOs, the hazards commonly seen include excess cold; damp and mould, electrical safety, fire safety, gas safety and falls.

## All HMOs must be managed in accordance with The Management of Houses in Multiple Occupation (England) Regulations 2006

All HMOs must comply with the [HMO Management Regulations](#). These Regulations impose duties on both the person having control of the HMO and the tenants.

### Owner/managers` duties:

- Maintenance of common parts, fixtures, fittings and appliances - keeping them clean and tidy, clear of obstructions and in proper working order.
- Maintenance of living accommodation - appliances, fixtures and fittings in individual rooms must be maintained in proper working order.
- Safety Measures - such as fire detection, fire doors and emergency lighting must, once installed, be properly maintained.
- Supply and maintenance of gas and electricity, water and drainage.
- Provision of information for tenants - full details of the owner/manager/ person responsible including emergency contacts etc must be posted in a common area in all HMOs.
- Adequate waste disposal arrangements must be in place.

### Occupiers duties:

The tenants of the HMO have a duty to ensure that they take reasonable care to avoid damage and disrepair to the property and should not obstruct the owner/manager in complying with any of the Management Regulations.

The landlord must arrange for a Periodic Test Report on the fixed electrical installations in the HMO to be carried out every 5 years. Gas safety certification can also be required by the Management Regs, as well as being required annually under the Gas Safety (Installation and Use) Regulations using a GasSafe registered contractor.

N.B. If the provisions of the HMO Management Regulations are breached, the Council can use powers to prosecute the manager of the HMO, which may result, upon conviction, in an unlimited fine. As an alternative to prosecution, Civil Penalty Notices may also be used for non-compliance with the HMO Management Regulations with each individual breach subject to a Penalty Notice.

Please also see the Councils [Private Sector Housing Enforcement Policy](#).

**Support for landlords.** We offer advice to landlords including a site visit to help you make sure that the building is safe, in good repair and has adequate means of detecting and escaping from fire.

Please contact Private Sector Housing on 01372 474 645 or by [email](#).