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**BASILDON BOROUGH COUNCIL** 

# HOT FOOD TAKEAWAY ASSESSMENT

**DECEMBER 2015** 





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# 1. INTRODUCTION

# Background

- 1.1 The proliferation of fast food and hot food takeaways over recent decades has had a significant influence over food consumption patterns. Fast Food Outlets/Hot Food Takeaways (classified as 'A5' in Planning Use Class) are now a common feature of town/shopping centres and high streets because they fulfil an increasing demand for instant food access and convenience.
- 1.2 Current trends in research continue to reveal that increased exposure and opportunity to buy fast food (including proximity and opening hours) results in increased consumption levels which can have negative effects on health. This is because some hot food takeaways offer energy-dense food with high levels of saturated fat, sugar, salt and preservatives which are linked to obesity and related health conditions.
- 1.3 Obesity is one of the biggest health challenges facing the UK. According to the Health Survey for England data published in 2010 by the NHS Information Centre, 26% of adults are obese and 3 in 10 children aged 2 to 15 are either overweight or obese. In 2007, the Foresight report *'Tackling Obesities: Future Choices'* predicted that if no action is taken, 60% of men, 50% of women and 25% of children would be obese by 2050. The availability and accessibility of food are key features of an obesogenic environment where the widespread availability of fast food and an environment that promotes sedentary behaviour is of concern.
- 1.4 Planning controls could be part of a coordinated approach to tackle unhealthy diets and obesity. Local authorities are now developing policies and guidance to control hot food takeaways in response to local concerns about a proliferation of takeaways and the effect on diets, health outcomes, eating behaviour and obesity, in particular childhood obesity.
- 1.5 Basildon Council is committed to creating a healthy and happy borough to live and work in, and to supporting local people to improve their health and well-being. The issue of public health, and in particular the prevalence of obesity has emerged as an issue since 1998, and is therefore something that the new Local Plan could look to address through a range of means, including but not limited to controls on the use of buildings for the provision of hot food takeaways. It will however be necessary for any such policy to be accompanied by an assessment which demonstrates that there is a relationship between hot food takeaways and obesity within Basildon Borough for any such policy to be justified.
- 1.6 This document provides a local evidence base necessary to justify whether an appropriate planning policy response will be essential in mitigating the health and other impacts of the prevalence of hot food takeaways.

# Purpose and Scope of the Assessment

- 1.7 The purpose of this study is to see whether a policy which controls the use of buildings as Hot Food Takeaways can be justified for inclusion in the Local Plan. Such a policy would apply to new takeaways only and could not extend to existing, lawful businesses.
- 1.8 Hot food takeaways (Class A5) differ in purpose from restaurants or cafes (Class A3), drinking establishments (Class A4) and shops (Class A1). Under the Town and Country Planning (Use Classes) Order 1987 as amended, the definition of a Class A5 hot food takeaway is an establishment whose primary business is the sale of hot food for consumption off the premises. However, some businesses classified as restaurants (use class A3) offer takeaway services. This is the case for many fast food restaurants, and also for many restaurants serving Indian or Chinese style cuisine. This document specifically applies to all establishments providing hot food takeaways for consumption off the premises, including those restaurants that provide takeaway services.
- 1.9 The study then provides an analysis of the relationship between the prevalence and proliferation of hot food takeaways, and obesity, childhood obesity, deprivation levels and health outcomes. In particular, the effect of fast food consumption on the diets and eating behaviour of children is of concern because significant health problems related to obesity start to develop at primary school age, and behaviour established in early life has been shown to track into adulthood.

# Limitations on the Scope of the Assessment

- 1.10 It is unlikely a policy of this nature alone can achieve a reduction in obesity within the community. There is a need to work with existing takeaway businesses to offer healthier choices and reduce the amount of fats and sugars in their existing menu options. This is beyond the scope of planning.
- 1.11 There is also a need to educate communities about making healthy choices for themselves. This not only includes making good choices about the foods they eat, but also about being more active. Again, this is beyond the scope of planning, although it is recognised that the provision of open spaces, space for leisure and opportunities to travel by active modes (bicycle or foot) can be achieved through the planning regime. Separate studies are considering these matters.

# Aim and Objectives

1.12 The aim of this study is to undertake an assessment of the location of hot food takeaways in Basildon Borough, and compare these locations to data regarding obesity, health outcomes and deprivation levels in order to determine whether there are any correlations which justify a policy to control the use of buildings as hot food takeaways.

- 1.13 The specific objectives of this study are to:
  - 1. Identify the location of hot food takeaways in Basildon Borough with a view to detecting clusters and concentrations of such uses.
  - 2. Determine whether there are any correlations between obesity, childhood obesity, deprivation levels and health outcomes, and the location of hot food takeaways.
  - 3. Examine the location of hot food takeaways in relation to schools, youth centres, leisure centres, equipped parks and other open spaces.
  - 4. Make recommendations, where appropriate, with regard to the policies that could be applied in Basildon Borough to control the use of buildings as Hot Food Takeaways.

# Planning Policy Background

#### **National Policy Context**

- 1.14 The National Planning Policy Framework identifies that the planning system can play an important role in creating healthy, inclusive communities (paragraph 69). In drawing up Local Plans, Local Planning Authorities should pursue policies to support the vitality and viability of town centres (paragraph 23) and deliver social, recreational and cultural facilities and services the community needs (paragraph 70). Planning policies and decisions should take account of and support local strategies to improve health and wellbeing for all (paragraph 17). When preparing local plans, local planning authorities should work with public health officers and health organisations to understand and take account of the health status and needs of the local population and the barriers to improving health and wellbeing (paragraph 17).
- 1.15 Across the Country, a number of local authorities have identified that there is a particular issue with obesity in their areas, and an associated link with poor health outcomes. This is known to be affecting the capacity of health services to meet local healthcare needs in an effective way and requires a drive towards better prevention of obesity and the promotion of more active lifestyles. The Foresight report (2007) argued that obesity should be tackled by a multi-faceted way with interventions addressing the many causes of obesity, supporting communities to eat healthily and become more active. Foresight and other analysis emphasised the role of the built environment in influencing decisions on physical activity and a healthy diet. A number of studies are cited by Foresight who concluded that increased availability of and access to and reliance on 'food on the go' (including, but not restricted to, fast food) is an important consideration for planners.
- 1.16 The Marmot Review (2010) highlighted a social gradient in health which is related to deprivation. Health inequalities are determined by social inequalities, including environmental inequalities. Those living in the most

deprived neighbourhood are more exposed to environmental conditions, which negatively affect health. In response, actions are needed across the social gradient and across the determinants of health. This includes actions to improve the food environment in local areas and fully integrate the planning, transport, housing, environmental and health systems to address the social determinants of health in each locality. A report on the implications for spatial planning arising from the Marmot Review noted that deprived areas could particularly benefit from policies which aim to improve availability of healthier food options and better access to shopping facilities, coupled with planning restrictions to control the density of fast food outlets.

- 1.17 Guidance in May 2011 from the National Institute for Health and Clinical Excellence (NICE) on the prevention of cardiovascular disease and Type 2 diabetes recognises that planning mechanisms can help promote healthy diets by controlling fast-food outlets and improving access to food retailing. It recommends that local planning authorities regulate the number of takeaways and other food retail outlets in specific areas (for example, within walking distance of schools) and regulate the opening hours of outlets, particularly those near schools that specialise in foods high in fat, salt or sugar. Such controls should be complimented by initiatives to improve the nutritional quality of food available in existing takeaways and other food outlets.
- 1.18 In November 2010, the Government published its Public Health White Paper setting out a range of reforms to the responsibilities, powers and resources for addressing public health. It takes forward the focus on tackling health inequalities as highlighted by the Marmot Review and the role of local government to create healthy places by bringing together a wider range of services, including planning. The White Paper recognises the potential for local planning authorities to influence access to healthy food and manage a concentration of fast food outlets.
- 1.19 The Government's 'A Call to Action on Obesity in England (Oct 2011)' places an emphasis on empowering people and communities to take action where behaviour is influenced by a range of factors, including the neighbourhood that people live in. Tackling obesity requires a comprehensive and integrated range of interventions. It states that there is clear evidence that the built and physical environments are important factors in influencing people's physical activity, access to and consumption of healthy food, and social interaction. It acknowledges the potential of the planning system to create a healthier built environment and notes that a number of local areas have taken steps to limit the growth of fast food takeaways, for example by developing supplementary planning documents. Allotments and food growing projects can provide some opportunities for people to be more active and eat more healthily.
- 1.20 There is therefore scope within the context of national planning policy and within wider policy related to health and wellbeing to consider the role the local plan could play in reducing obesity. This is reinforced by case law. A High Court case (the 'Cable Street' case) ruled that healthy eating and the proximity of a proposed hot food takeaway to a school is capable of being a

material planning consideration. There is therefore a role for planning to play in delivering health and wellbeing strategies and take into account healthy eating policies and programmes.

- 1.21 Several authorities, predominantly in London, have already put policies in place to restrict the provision of new fast food outlets. Waltham Forest and Barking and Dagenham have both been successful in applying such policies within their areas, with Waltham Forest reporting a reduction in fast food outlets in their area, and also a reduction in childhood obesity rates.
- 1.22 However, in areas where no such policy is in place, local planning authorities have not been successful in defending appeals against proposals for takeaways and restaurants on the basis of health impacts. The London Borough of Tower Hamlets lost an appeal due to the lack of a specific policy to restrict hot food takeaways, and a lack of evidence to demonstrate an overconcentration of takeaways and any link between proximity to a school and childhood obesity. Consequently, Tower Hamlets undertook research to inform a policy on hot food takeaways which is now being successfully applied.

#### **Local Policy Context**

- 1.23 The Basildon District Local Plan was adopted in 1998, and does not include any policy related to the restriction of hot food takeaways (use class A5). Having regard to the Tower Hamlets case, it is unlikely that the Council could therefore reasonably refuse an application for a hot food takeaway for reasons of health at this time.
- 1.24 At its meeting in December 2014, the Council's Cabinet approved a Local Development Scheme which sets out the programme for preparing a new Local Plan. The Local Plan will set out the overall strategy for development and growth within Basildon Borough as well as allocation and development management policies. The new Local Plan will replace that which was adopted in 1998, and will be able to respond to those matters of policy significance that have arisen or changed since that time, including public health.
- 1.25 Obesity prevalence in Basildon is significantly greater than regional and national rates according to the Basildon JSNA Product to Support Clinical Commissioning Groups (May, 2012). This is a result of low levels of physical activity and unhealthy eating habits. In particular, childhood obesity is a growing threat to children's health. Tackling childhood obesity requires changes in the behaviour of individual children, their parents and of society in general and reflects recent trends in greater consumption of fat and sugar, and reduced physical activity.
- 1.26 The Basildon and Brentwood Clinical Commissioning Group has identified within their Strategic Prevention Implementation Plan the need to focus on some actions to reduce obesity within the area. In particular, they have identified the following action regarding takeaways:

"Having regard to good practice, investigate the current locations of A5 (hot food takeaways) within the Borough with a view to identifying whether there is any correlation with local health indicators and explore whether as a result there is a need for a local land use policy in the local plan".

1.27 The Clinical Commissioning Group therefore considers that planning services in Basildon Borough may have a role to play in reducing obesity through better control of the location, prevalence and proliferation of hot food takeaways.

#### Methodology

- 1.28 Data is held on food outlets by a number of service areas including Environmental Health and Planning. Each of these databases is independent from the other. The purpose of this assessment is to set out some initial analysis of these existing databases in order to identify the number, location and nature of fast food outlets in Basildon. It is expected that this will then be linked and compared to other spatial data sets including health data and deprivation data.
- 1.29 Whilst planning data shows all those premises with planning consent to sell hot food to takeaway, these planning consent may not have been enacted. Additionally, a hot food takeaway may change to another use within class A e.g. a shop without planning consent. Planning data is not therefore the most accurate data source in this regard. All establishments involved in the sale of food do however require a license from Environmental Health. As such, Environmental Health Services hold a complete, and up to date, database that lists every business (legally) selling food, including hot foods, within Basildon Borough. The list of establishments selling food was extracted from this database as the primary data source for this assessment.
- 1.30 The Environmental Health data was initially sorted to distinguish between hot food takeaways, mobile food units and restaurants/cafés. Data of restaurants and cafes was also extracted in order to allow for consideration of the distribution of such businesses, given that some businesses classified as restaurants also offer takeaway services. This is the case for many fast food restaurants, and also for many restaurants serving Indian or Chinese style cuisine. Data on the distribution of other fast food restaurants serve to provide further context relating to the influence of the food environment on an individual's food choices and the complex behavioural and societal factors that combine to contribute to the causes of obesity.
- 1.31 The result was the generation of a list of hot food takeaways as well as fast food restaurants from these databases. These lists were mapped and interrogated within the Council's GIS System. Clusters and concentrations of such uses were identified within administrative boundaries, using queries and thematic mapping. For the purposes of this assessment, electoral wards have been used as the geographical boundaries within which data is analysed and presented. The particular interest is in identifying clusters and

concentrations of hot food takeaways whilst also providing an evidence base for commissioning appropriately targeted interventions to support improved access to healthier eating options for residents.

- 1.32 Spatial data on obesity, childhood obesity, deprivation levels and health outcomes is available at ward level as presented in the Joint Strategic Needs Assessment Area Profiles. Other local health profiles are also produced by Public Health England (PHE). The mapping of this information was then compared with the initial mapping of hot food takeaways to identify any spatial correlation that exists between health indicators and the location of hot food takeaways.
- 1.33 Further analysis was also undertaken on the location of hot food takeaways and restaurants in relation to places where children and young people gather such as schools, youth centres, leisure centres, equipped parks and other open spaces. Consideration was given to primary school provision and secondary school provision separately, as secondary school pupils are more likely to make choices independent of the adults around them.
- 1.34 This assessment is concluded by drawing all analyses together, providing the extent of the relationship between hot food takeaways and health outcomes, and identifying the potential policy interventions that Basildon Council may consider in controlling the use of buildings as Hot Food Takeaways.

# 2. SPATIAL CONTEXT

## **Hot Food Takeaway Premises**

- 2.1 *Table 1* below shows the distribution of those establishments classified as hot food takeaways (use class A5), including mobile food premises in the Borough as of July 2015. The highest cluster of takeaway premises can be found in Fryerns ward, containing 14% of the total units within the Borough. High clusters are also found in Pitsea South East and Wickford North, both containing 11.8% of the total units respectively. At the time of the survey, Langdon Hills had the least number of takeaway units at 0.5% and is closely followed by Crouch at 1.6%. Throughout the rest of the Borough, there is a medium to fair representation of takeaway units within each ward.
- 2.2 Although densities vary slightly as reflected in *Table 2* below, Fryerns, Pitsea South East and Wickford North still contain the highest concentration of takeaway outlets per unit population respectively. While Langdon Hills, Crouch, Burstead, and Wickford Castledon respectively, remain have the lowest concentration of hot food takeaway units.

Ward Name	Hot Food Takeaways	Mobile Hot Food Units	Aggregate Takeaway Units	Proportion of Total Units (%)
Billericay East	13	1	14	7.5
Billericay West	8	1	9	4.8
Burstead	4	1	5	2.7
Crouch	1	2	3	1.6
Fryerns	11	15	26	14
Laindon Park	6	8	14	7.5
Langdon Hills	1	-	1	0.5
Lee Chapel North	7	6	13	7.0
Nethermayne	6	6	12	6.5
Pitsea North West	5	5	10	5.4
Pitsea South East	11	11	22	11.8
St Martin's	11	1	12	6.5
Vange	5	3	8	4.3
Wickford Castledon	4	1	5	2.7
Wickford North	15	7	22	11.8
Wickford Park	4	6	10	5.4
Total	112	74	186	100

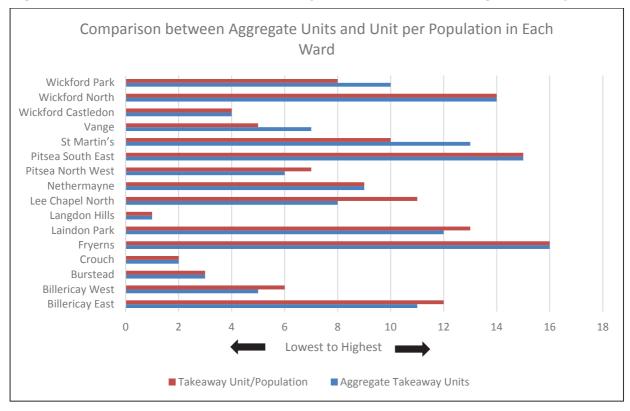
 Table 1: Distribution of Hot Food Takeaways and Mobile Food Units by Ward

Ward Name	Aggregate Takeaway Units	Area (m²)	Density (Unit/m²)	Population*	Density (Unit/population)
Billericay East	14	5317313	379808.1	11777	841.21
Billericay West	9	5307417	589713	11964	1329.33
Burstead	5	19238093	3847618.6	10620	2124.00
Crouch	3	14266553	4755517.7	8943	2981.00
Fryerns	26	5713402	219746.2	13118	504.54
Laindon Park	14	5859640	418545.7	11367	811.93
Langdon Hills	1	5845046	5845046	9064	9064.00
Lee Chapel North	13	2125354	163488.8	13488	1037.54
Nethermayne	12	6873043	572753.6	11866	988.83
Pitsea North West	10	4109303	410930.3	12722	1272.20
Pitsea South East	22	17902746	813761.2	11736	533.45
St Martin's	12	2404894	200407.8	8410	700.83
Vange	8	1645424	205678	10048	1256.00
Wickford Castledon	5	4347584	869516.8	7602	1520.40
Wickford North	22	4667098	212140.8	12235	556.14
Wickford Park	10	4817098	481709.8	9537	953.70
Total	186	110444326	593786.7	174497	26475.1

Table 2: Density of Takeaway Units by Area and Population

\*ONS 2011 Census

Figure 1: Distribution of Hot Food Takeaway Units across the Borough Wards by Rank



# **Restaurants and Cafes**

- 2.3 A number of businesses classified as restaurants also offer takeaway services as is the case for many fast food restaurants, and also for many restaurants serving Indian or Chinese style cuisine. *Table 3* below presents the distribution of other food/catering facilities within the Borough including restaurants, cafes, canteens, etc. It should be noted that there is a clear distinction between a restaurant and cafe (Class A3) and a hot food takeaway (Class A5) according to the Town and Country Planning (Use Classes Order) as amended. While the primary business activity of restaurants and other Class A3 uses continues to be the sale of food for consumption within the premises, this study considers it necessary to give further context of residents' access to other retail sale of food other than fresh food.
- 2.4 From *Table 3*, St Martins has the highest cluster of other food/catering facilities, closely followed by Fryerns ward. Vange is the only ward without a restaurant/cafe. There are also low representations in Langdon Hills and Billericay West.

Ward Name	Restaurants/Cafes	Proportion of Total Units (%)
Billericay East	23	11.17
Billericay West	3	1.46
Burstead	10	4.85
Crouch	6	2.91
Fryerns	38	18.45
Laindon Park	9	4.37
Langdon Hills	2	0.97
Lee Chapel North	4	1.94
Nethermayne	10	4.85
Pitsea North West	8	3.88
Pitsea South East	16	7.77
St Martin's	45	21.84
Vange	-	-
Wickford Castledon	15	7.28
Wickford North	13	6.31
Wickford Park	4	1.94
Total	206	100

Table 3: Distribution of Restaurants by Ward

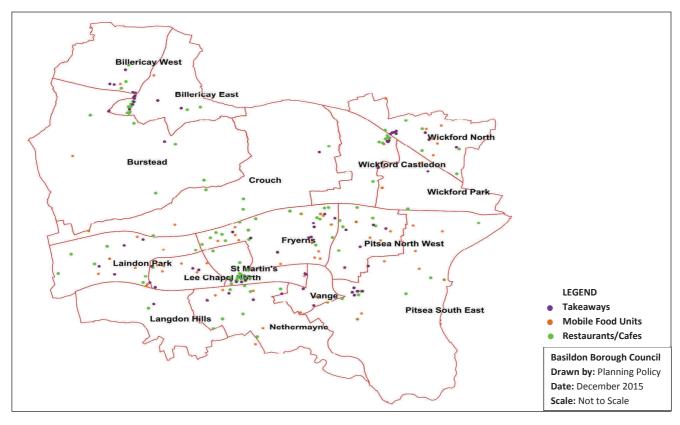


Figure 2: Distribution of Hot Food Takeaways and Restaurants within Basildon Borough

# Town and Local Centres

2.5 Basildon is served by five (5) Town Centres. *Table 4* includes a breakdown of the number of takeaways within each town centre's designated frontage. The average proportion of units in A5 use in Basildon Borough's town centres is 6.1%. As *Table 4* illustrates, Laindon and Pitsea centres have a particularly high concentration of takeaways.

Town Centre	Hot Food Takeaways	Mobile Hot Food Units	No. of Hot Food Units	No. of Total Units	Proportion of Units in A5 Use (%)
Basildon	7	-	7	297	2.4
Billericay	8	-	8	194	4.1
Wickford	14	1	15	155	9.7
Pitsea	8	1	9	67	13.4
Laindon**	7	-	7	39	17.9
	44	2	46	752	6.1

Table 4:	Proportion	of Takeaways	s by Town Centre

\*\*Subject to Regeneration

- 2.6 There are 39 Local Centres and shopping parades across the Borough. These local centres contributes towards the high levels of accessibility to services, facilities, amenities and shopping opportunities within Basildon Borough. The Basildon Borough Local Development Monitoring Report 2011-2012 (April 2013) concluded that, in relation to local centres, variation in provision was due to use class changes. Where such changes of use did take place, the majority were from retail (use class A1) to take-away food shops (use class A5).
- 2.7 While new retail development is expected to be located within town and local centres, a proliferation of hot food takeaways, particularly where they form clusters both within and outside of designated centres, can have an adverse impact on the vitality and viability of designated shopping locations. Clustering of A5 uses could also displace other retail shops and break up the continuity of the retail frontage, particularly during daytime hours. It is therefore important that such uses do not detract from the town or local centre's primary retail function, or result in a loss of shops to the detriment of local residents.

# **Health Profile**

#### **Childhood Obesity**

2.8 There is widespread consensus that the early years in a child's life (aged 0-5 and especially the first 22 months) have a strong impact on future health, attainment and social/emotional development. Since 2005, Primary Care Trusts have been required to collect height and weight data for BMI on all primary school children in reception year (ages 4/5) and year 6 (ages 10/11) through the National Childhood Measurement programme (NCMP). *Table 5*  *and Figure 3* below show the prevalence of obesity and excess weight in children at Reception and year 6 for Basildon Borough.

Ward Name	% Ob	ese	Average	% Excess	Weight	Average	Average
	Reception	Year 6	Child	Reception	Year 6	Child	Child Obesity
	(Aged 4-	(Aged	Obesity	(Aged 4-5)	(Aged	Excess	and Excess
	5)	<u>11</u> )			<u>11</u> )	Weight	Weight
							Prevalence
							(%)
Billericay	5.5	11.2	8.35	18.3	24.2	21.25	13.51
East							
Billericay	6.3	9.7	8.0	15.5	23.8	19.65	12.66
West							
Burstead	5.4	11.3	8.35	18.9	25.7	22.3	13.93
Crouch	11.2	20.2	15.7	23.2	32.8	28.0	20.62
Fryerns	10.1	19.6	14.85	21.5	33.5	27.5	19.91
Laindon Park	8.6	21.0	14.8	19.6	36.4	28.0	20.08
Langdon Hills	8.7	15.3	12.0	18.1	32.0	25.05	17.22
Lee Chapel	9.0	21.7	15.35	22.1	36.7	29.4	20.97
North							
Nethermayne	6.2	16.5	11.35	16.1	35.1	25.6	17.05
Pitsea North	10.4	21.4	15.9	26.3	35.7	31.0	21.94
West							
Pitsea South	12.4	25.1	18.7	24.6	39.0	31.8	23.97
East							
St Martin's	9.3	19.2	14.25	21.3	33.6	27.45	19.53
Vange	9.4	22.1	15.75	23.8	34.4	29.10	21.09
Wickford	7.6	16.1	11.85	19.4	30.7	25.05	17.13
Castledon							
Wickford	10.6	17.4	14.0	22.7	32.9	27.8	19.52
North							
Wickford	8.6	11.1	9.85	21.9	30.2	26.0	16.33
Park							
Overall	8.71	17.43	13.07	20.83	32.29	26.56	18.47
Average (%)							

Table 5: Obesity and Excess Weight Prevalence by School Year and Electoral Ward of Child Residence, Basildon (2011/12 to 2013/14)

Source: National Child Measurement Programme 2011/12 to 2013/14

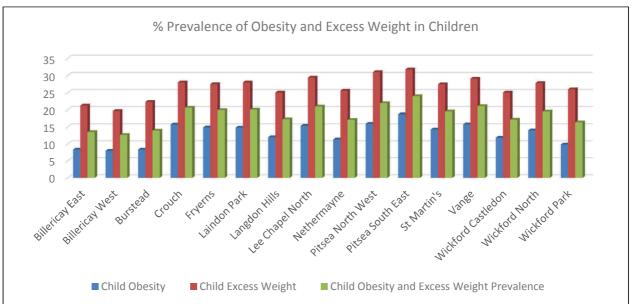


Figure 3: Prevalence of Obesity and Excess Weight in Children (2011/12 to 2013/14)

- 2.9 According to the data presented above, the percentage of reception pupils measured as obese is 8.71% while that of Year 6 pupils is 17.43%. There is no statistically significant difference between childhood obesity prevalence in Basildon when compared to the East of England region and the remaining ONS local authority comparators (Basildon JSNA, 2012). Generally, the percentage of obese children in Essex has remained stable over the last four years, with figures below the national average (Essex Needs Assessment for Schools, Children and Families, 2013).
- 2.10 However, while obesity data for Basildon Borough remains lower than the Essex average in Primary aged children at 13.07%, this figure rises to 18.47% when considered together with other health outcomes such as excess weight. The perception of Primary aged children of themselves, and the need to lose weight is also above the Essex average as revealed by the School Health Education Unit survey<sup>1</sup> (Essex Insight, 2012).

#### Adult Obesity

2.11 The Office for National Statistics (ONS) released synthetic estimates of healthy lifestyle behaviours in 2007 based on 2003-05 data. The estimates are based on modelling and show the expected prevalence of specific lifestyle behaviours given the demographic and social characteristics of an area. *Table 6* below shows the estimated prevalence of obesity across the Borough.

<sup>&</sup>lt;sup>1</sup> The School Health Education Unit survey was completed by 1114 children and young people from 8 schools in the Basildon Borough. They represent 4.3% of the total 5-19 School population of children and young people in the Basildon.

Ward Name	Obese Adults (%)
Billericay East	22.6
Billericay West	23.1
Burstead	23.8
Crouch	27.4
Fryerns	28
Laindon Park	27.1
Langdon Hills	23.8
Lee Chapel North	27
Nethermayne	26.7
Pitsea North West	29.3
Pitsea South East	29.8
St Martin's	28.4
Vange	29.2
Wickford Castledon	26.8
Wickford North	27
Wickford Park	28.1
Average (%)	26.76

Table 6: Percentage of the Population Aged 16+ with A BMI of 30+, Modelled Estimate,2006-2008

Source: Public Health England, 2010

- 2.12 *Figure 4* shows the estimated prevalence of obese adults aged 16+ in Basildon compared with its ONS cluster local authorities. This illustrates that Basildon has a greater percentage of obese adults than five of its comparator local authority populations at about 26%, which is significantly higher than the estimated England average of 23.6%. Only one comparator local authority (Swale) has a significantly greater percentage of obese adults than Basildon.
- 2.13 In addition, 3 out of 4 (72%) adults in the Borough are classified as overweight or obese, and this is also higher than the national average of 64% (Sport England, Active People Survey).

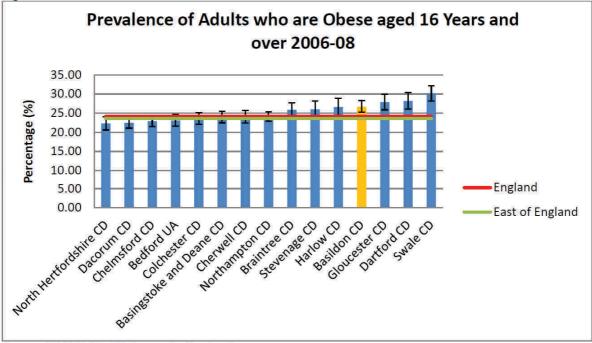


Figure 4: Prevalence of Obese Adults aged 16 Years and Over, 2006-08

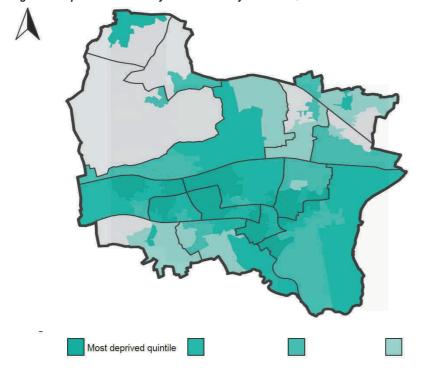
Source: ERPHO (Health Survey for England)

2.14 Health damaging behaviour and poor lifestyles often impact on a significant proportion of the Borough's population, particularly those living in the deprived neighbourhoods. Socially disadvantaged groups suffer poorer physical health and lower life-expectancy than the more advantaged, and are more likely to have a poor diet. Priorities in Basildon therefore include reducing levels of obesity, especially in adults, as well as other health inequalities by tackling poverty.

# Deprivation

- 2.15 The Indices of Deprivation provide a guide as to which are the most affluent and most deprived areas within England and Wales. The Indices of Multiple Deprivation are a measure of multiple deprivation at a small area level. Super output areas (SOA) were designed to improve the reporting of small area statistics and are built up from groups of output areas (OA).
- 2.16 The level of deprivation is determined by a set of 38 indicators, chosen to cover a range of economic, social and housing issues. The model that underpins the Indices of Multiple Deprivation (IMD) 2010 is based on distinct dimensions of deprivation, which can be recognised and measured separately. The key domains examined by the IMD are Income Deprivation, Employment Deprivation, Health Deprivation and Disability, Education, Skills and Training Deprivation, Barriers to Housing and Services, Living Environment Deprivation and Crime. Each dimension is measured independently using the best indicators available to generate a score or domain index. These domain scores are then combined with explicit weightings to generate an Index of Multiple Deprivation that is an aggregate of the component domains.

2.17 The figure below (*Figure 5*) is based on the 2015 Health Profile published by Public Health England. The map shows the differences in deprivation levels in Basildon based on national quintiles (fifths) of the Index of Multiple Deprivation 2010 by Lower Super Output Area. The darkest coloured areas are some of the most deprived areas in England. The chart shows the percentage of the population in England and in the Borough who live in each of these quintiles.



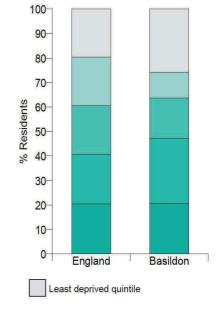


Figure 5: Deprivation Levels by Ward: LSOA by National Quintile

Source: Public Health England, June 2015

Ward Name	IMD Score*	Ward Rank (National)**	Ward Rank (Local)***
Billericay East	5.77	476	16
Billericay West	6.58	702	15
Burstead	7.28	919	14
Crouch	17.20	4418	9
Fryerns	30.89	6470	5
Laindon Park	28.25	6213	7
Langdon Hills	10.37	2090	13
Lee Chapel North	32.51	6615	4
Nethermayne	20.34	5074	8
Pitsea North West	33.49	6676	3
Pitsea South East	28.77	6258	6
St Martin's	34.07	6733	2
Vange	36.12	6878	1
Wickford Castledon	10.39	2099	12
Wickford North	11.69	2614	10
Wickford Park	10.70	2224	11

Table 7: Average Index of Multiple Deprivation (IMD) (2010) Score by Ward

Source: Averages of LSOA-level scores for higher geographies, Public Health Observatories (PHOS) of England \*The ward with the highest score is the most deprived and vice-versa on this overall measure.

\*\*Ranking based on 7586 wards, with a ranking of 1 representing the least deprived ward. Because of the small size of some populations, summary scores were not calculated for wards in the City of London or Isles of Scilly. \*\*\*A ranking of 1 is the most deprived, and 16 is the least deprived.

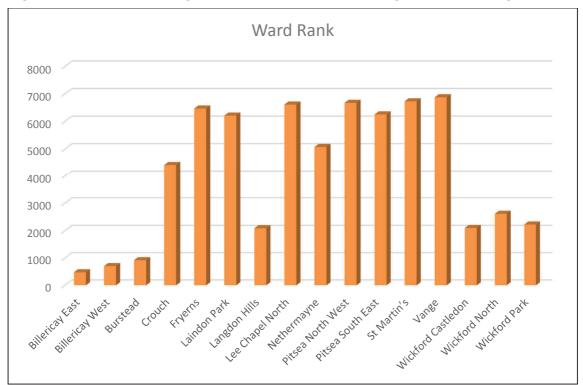


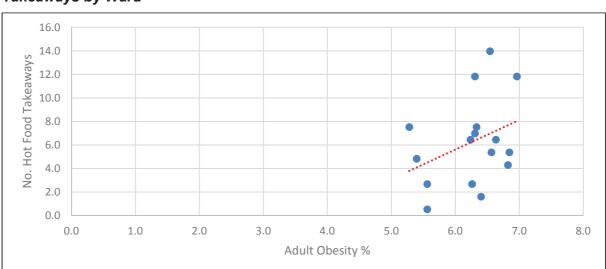
Figure 6: IMD 2010 for English Wards – Basildon Borough Ward Rankings

2.18 The Ward data presented in above is for 2015 electoral wards. There is a distinct north-south divide when it comes to deprivation in Basildon Borough, with Billericay and Wickford having low levels of income deprivation. Billericay is within the top 10%, whilst some of the wards in Basildon (Lee Chapel North, Vange, Fryerns, Pitsea East and Pitsea West) are in the bottom 20% of English Wards for deprivation. Deprivation is higher than average within the Borough, and about 22.4% (8,100) children live in poverty (PHE, 2015).

# 3. ANALYSIS OF RELATIONSHIPS

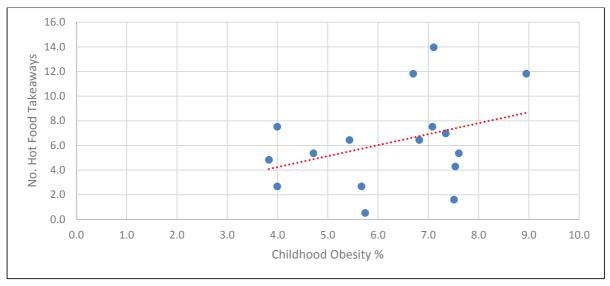
# Hot Food Takeaways and Obesity

- 3.1 The Joint Strategic Needs Assessment (JSNA) for Basildon Borough has been developed to assess the needs of the local population in terms of health care and service provision, and to inform policy decisions and investment. It highlights Basildon's key health and wellbeing challenges including rising levels of obesity. Approximately 26.7% of all adults (aged 16 years and over) in Basildon are obese, which is far higher than the average in England (24.9%). One in seven children in reception year in Basildon are overweight (20.8%) or obese (8.71%). In year 6, the figure rises to one in four children being overweight (32.29%) or obese (17.43%).
- 3.2 Obesity, amongst other high levels of long-term chronic conditions is often related to poor lifestyle choices, and is a key driver for cardiovascular diseases which in part accounts for much of the inequalities in life expectancy in the Borough. Focusing on primary care prevention initiatives and local authority services could help residents address vital lifestyle changes. One of such initiatives seeks to determine whether the prevalence of hot food takeaways is related to obesity levels amongst residents.
- 3.3 *Figure 7 and 8* compare adult and childhood obesity levels respectively with the number of hot food takeaways in each ward. They show that there is a positive correlation between higher levels of obesity and the number of hot food takeaways in a ward.
- 3.4 It is noted that there are a couple of outliers within the data presented in *Figures 7 and 8*. In Burstead and Vange for example, increased levels of obesity have been recorded albeit the seeming lower number of takeaway units within these wards. However, it should be recognised that there are many complex behavioural and societal factors that combine to contribute to the causes of obesity, including the influence of genetics, individual psychology, uptake of physical activity, deprivation, among others.



*Figure 7: Scatter Graph Comparing Adult Obesity Levels with the Number of Hot Food Takeaways by Ward* 

*Figure 8: Scatter Graph Comparing Childhood Obesity Levels with the Number of Hot Food Takeaways by Ward* 



# Hot Food Takeaways and Deprivation

3.5 The Foresight report found that obesity levels tend to be higher in deprived areas than in wealthy areas. Recent work by the National Obesity Observatory (NOO) (2012) has found that there is a strong association between deprivation and the density of fast food outlets, with more deprived areas having more fast food outlets per population. *Figure 9* below looks at the location of takeaway premises across the borough in order to examine the association between availability of fast food outlets and increasing deprivation.

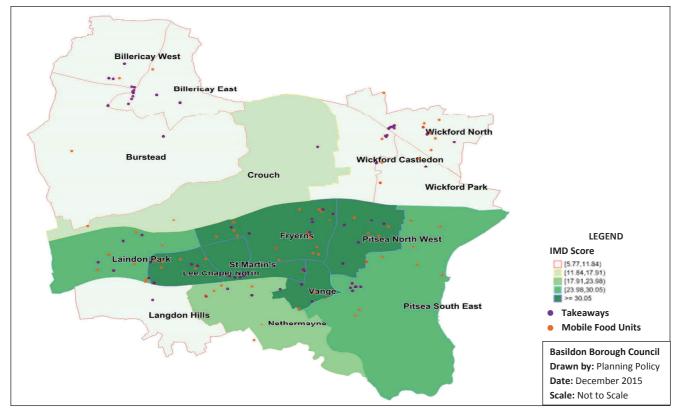
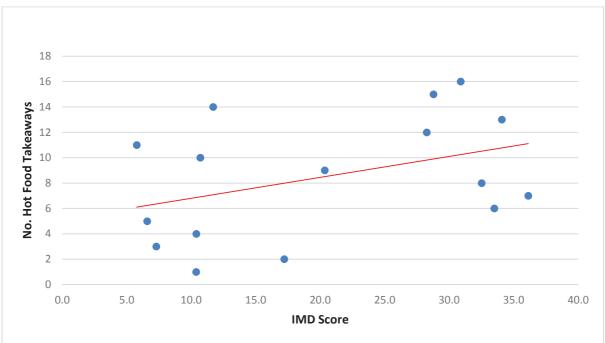


Figure 9: Map showing the Relationship between Deprivation Levels and the Locations of Takeaway Premises

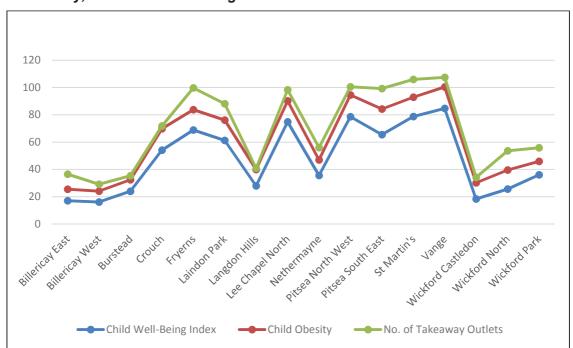


*Figure 10: Scatter graph showing the Relationship between the Number of Hot Food Takeaways and Deprivation Levels by Ward* 

3.6 *Figure 10* shows a slight positive correlation between the distribution of takeaway outlets across the Borough, and the corresponding IMD recorded for each ward. On the average, deprivation levels tend to be higher in areas with more concentration of takeaway outlets, and vice-versa. This therefore becomes an important issue to highlight in policy decision making, as land use restrictions on new hot food outlets may help to prevent further amplification of deprivation.

# **Obesity Prevalence in Children**

3.7 The prevalence of obesity in children is closely related to socioeconomic status in children and this result remains, almost entirely consistent, across a range of different socio-economic status indicators. The Child Well-Being Index (CWI) creates a small area index exclusively for children in England, and uses data covering Material Well-Being; Health; Education; Crime; Housing; Environment; and Children (at risk of being) in need. *Figure 11* below shows that the CWI is closely related to the prevalence of obesity in children, which in turn is linked to the accessibility of hot food environments.



*Figure 11: Graph showing the Relationship between the Density of Takeaway Outlets, Child Obesity, and Child Well-Being Index* 

- 3.8 School children who leave school at lunchtime to purchase food are more exposed to opportunities to buy high calorie, high fat and high sugar foods, than those who remain on school premises and eat school food at lunchtime. Research indicates that an obese adolescent is likely to remain so during adulthood, which may lead to obesogenic diseases and reduced life expectancy<sup>2</sup>. It is therefore important to encourage healthier living among children, and limit the opportunities that young people have to eat 'fast food', thus reducing childhood obesity.
- 3.9 Evidence shows that an increasing number of hot food takeaway shops are operating within easy walking distance to schools. Their low prices coupled with close proximity to schools provide added incentive and temptation to children, increasing their likelihood of consuming fast food at a rate that is disproportionate to their daily nutritional requirements.
- 3.10 A number of local authorities have already drawn up policies to restrict the development of new fast food premises near schools and other places where young people gather, in an effort to establish appropriate healthy eating habits and reduce the rate of childhood obesity in the local population. Exclusion zones are being introduced to restrict new A5 uses within the boundaries of locations where children and young people congregate, particularly schools. A 400m distance (equivalent to a 10 minute walk when taking into account physical barriers, rather than as the 'crow flies') is often considered sufficient to deter school children from walking to the takeaways during their lunch period or after school.

<sup>&</sup>lt;sup>2</sup> British Medical Association Board of Science and Education. Adolescent Health BMA publications, 2003.

- 3.11 The operation of fast food outlets near schools, youth centres, leisure centres, equipped parks and open spaces within the Borough has therefore been examined more closely to justify part of the Council's efforts in providing a holistic approach to tackling concerns over community health and childhood obesity.
- 3.12 *Table 8* examines the distribution of existing takeaway outlets near primary and secondary schools. Out of the total of 186 takeaway units that are within the Borough, 129 units (69.4%) are within 400m of either a primary or secondary school. The figure is however significantly higher for primary schools (51.1%) than for secondary schools (18.3%).

	Primary	Secondary	Total within Proposed Exclusion Zone	Total within the Borough
Takeaway Shops	65	17	82	112
Mobile Units	30	17	47	74
Total	95	34	129	186

#### Table 8: Existing Hot Food Premises within 400m of Primary and Secondary Schools

- 3.13 Proximity of fast food takeaways to primary schools could be addressed differently to secondary schools, as secondary schools pupils are considered to have greater mobility and independence compared to primary school pupils. Given the age of the primary school children, it is unlikely that they would travel to and from school unaccompanied by an adult.
- 3.14 In addition to schools, limiting the unhealthy food options in proximity to youth centres, leisure centres, and parks where children congregate can contribute to improving the health of children and young people who visit these facilities.
- 3.15 Basildon Borough has an extensive network of recreation and leisure facilities which include sports and leisure centres, swimming pools, parks and open spaces, playing pitches and other facilities. The 2010 PPG Open Space Assessment for Basildon identified 150 'Children & Young People's Spaces' throughout the Borough, following removal of all 109 (42%) poor spaces. Even with the removal of all poor provision, the Borough provides a large number of play spaces compared to similar authorities.
- 3.16 There is a hierarchical structure for play areas within Basildon Borough including Neighbourhood Equipped Area of Play (NEAPs), Local Equipped Area of Play (LEAPs), Local Landscaped Area for Play, Local Areas of Play (LAPs), and other activity areas. Access to spaces that provide for children and young people is often regulated by recommended standards which relate distances to specific grades of play space. Play Spaces for young children are close to residential properties as small children will not be allowed or able to walk very far (even when accompanied) to access play spaces, unlike older children.

- 3.17 *Appendix 6* shows that the coverage of play spaces is concentrated on the urban environment compared to those which are more natural in character. While there are parts of the Borough which have large distances to play spaces, the majority of the New Town area is within a suitable distance of play spaces. This sheer intensity of coverage of play spaces within the Borough would make it difficult to create exclusion zones around children play spaces as this would put pressure on what available spaces are left for the permitted location of fast food outlets. A closer analysis of *Appendix 5* also reveals that the 400m exclusion zone around schools covers many of these play areas.
- 3.18 In addition to the outdoor play areas, Basildon Borough Council has a large portfolio of indoor facilities including swimming pools, sports halls, health and fitness facilities, village halls and community centres, many of which accommodate children and young people. *Appendix* 7 shows the distribution of these centres across the Borough. Not unlike the outdoor play areas, many of these centres are covered within the 400m exclusion zone around schools. It is also important to note at this point, that a number of recreational and leisure facilities are secured for community use on school and other education establishment sites.

# 4. CONCLUSIONS AND RECOMMENDATIONS

# Conclusion

- 4.1 Government advice and guidance encourages planning authorities to support local strategies to improve health and wellbeing and to maximise the role of the planning system to create a healthier environment. The planning system can assist in addressing growing concerns regarding the proliferation of takeaway uses and their impact on human health, particularly children's health, as well as the cumulative impacts on retail vitality and residential amenity.
- 4.2 Obesity is a major health challenge facing Basildon Borough which can be related to a poor diet. In addition, there are significant variations in obesity levels linked to deprivation where there is an association between deprivation and the density of fast food outlets. In Basildon, the combination of an over-concentration of takeaway shops and high levels of deprivation highlights the negative effects associated with hot food take away uses. Preventing an overconcentration of takeaways will therefore make an important contribution to promoting healthy eating in the Borough.
- 4.3 This review also considers that the location of hot food takeaways in close proximity to places where children and young people congregate could tempt children into consuming a greater amount of unhealthy food which would undermine initiatives to promote a healthier diet, particularly in schools. It is concluded that takeaways within walking distance of schools, parks, open spaces, or other children play areas influence eating behaviour and contribute to rising levels of childhood obesity.
- 4.4 The availability of fast food is seen to be part of an obesogenic environment and the planning system has an important role to play to promote healthy eating and physical activity. In order to make use of the planning system a planning policy response is required. This makes it crucial that Basildon Council develops a locally specific policy to address the issue of the number and location of takeaway shops in the Borough, and the associated health impacts.
- 4.5 The ability of the planning system to address the health impact of hot food takeaways is however limited in that it can only control new hot food takeaways and cannot deal with the problems of existing takeaways and other fast food outlets. Preventing new hot food takeaways from opening can only be a part of an overall approach to reducing unhealthy eating. Planning controls should be seen as part of a strategic response, including initiatives to work with takeaway businesses and with schools, and the combined use of other regulatory controls and public health interventions. Both the council and its partners are encouraged to utilise a number of other initiatives to reinforce this policy objective, including promoting healthy eating habits and physical activity among residents; increased enforcement of environmental health and waste regulations; and working with businesses to ensure they use healthy ingredients in preparing fast food.

# **Policy Options**

- 4.6 It is recommended that the emerging Local Plan provides a planning policy mechanism to address the issues of concern relating to the location of hot food takeaway shops, particularly their proximity to schools to ensure an appropriate and proportionate assessment can be made when planning permission is required.
- 4.7 Potential approaches have been identified in other neighbouring local authorities which have developed policies and guidance to control hot food takeaways. Such policies focus on different combinations of approaches including restricting take away uses to specific areas such as town centres; restricting the concentration and clustering of uses; and reducing the proximity to sensitive uses, such as schools.
- 4.8 Looking at the survey data of the Borough's existing takeaway shops, there is a clear pattern of concentration both within and outside designated town centre locations. Therefore, appropriate criteria for managing the concentration and clustering of take away uses should generally apply to areas inside and outside of the town centres or shopping parades.

### Takeaway Uses in Town and Local Centres

- 4.9 It is acknowledged that hot food takeaways, particularly in town centre locations, offer a popular service to local communities and have a significant role to play within town centres and other shopping areas. The survey data reveals that takeaway uses within the Borough's town centres range from 2.4% to 17.9%, showing a clear pattern of concentration in some centres. Furthermore, visual inspection shows that A5 uses also account for a significant proportion of units in local shopping parades. Whilst local shopping parades are a sustainable location for hot food takeaways because they are close to where people live, there are some instances where the number of takeaways in such parades dominates over A1 shopping provision, reducing the diversity of local retail available.
- 4.10 Therefore this review recommends that a maximum percentage of takeaway uses be applied to all centres and parades, in accordance with the hierarchy of the centres as considered appropriate to respond to local conditions. The following thresholds are proposed:
  - Within Town Centres, no more than 10% of shop units should comprise hot food takeaways;
  - Within local shopping parades comprising 6 or less shop units, no more than 50% of the shop units should comprise hot food takeaways;
  - Within local shopping parades comprising 7 to 14 shop units, no more than 30% of the shop units should comprise hot food takeaways; and

- Within local shopping parades comprising 15 or more units, no more than 20% of the shop units should comprise hot food takeaways.
- 4.11 Managing the number of takeaway uses in town and local shopping centres is considered an adequate means to addressing the proliferation of such uses. Such concentration and clustering of uses should be measured in terms of an entire centre rather than within a specific retail frontage. This is because the Council already has policies which seek to control a concentration and clustering on non-A1 (shop) uses within designated shopping frontages, which also helps in preventing a proliferation of hot food takeaways. A holistic approach will be better suited to considering applications in town and local centres, with a specific policy setting out thresholds whereby further hot food takeaway uses would be resisted.

#### **Proximity to Schools and Other Sensitive Uses**

- 4.12 Restricting the presence of takeaway shops in close proximity to schools, typically within walking distance of schools, is an approach that could limit children's access to unhealthy foods. This is particularly an issue at lunchtime and immediately before and/or after school. A criteria relating to restricting takeaway uses in close proximity to schools through an 'exclusion zone' is recommended for both primary and secondary schools. Whilst pupils in primary education should not be allowed out of school premises during the school day, research has indicated that the most popular time for purchasing food from shops is after school<sup>3</sup>.
- 4.13 A 400m distance, equivalent to a 10 minute walk when taking into account physical barriers, is considered sufficient to deter school children from walking to takeaway shops during their lunch period, and before or after school hours. As such, with regard to proposals which fall outside designated town centre and local parade locations, it is recommended that planning permission for a hot food takeaway shop should only be permitted where the proposal will fall beyond:
  - A 400m exclusion zone (equivalent to a 10 minute walking distance) around the boundary of any primary or secondary school, sixth form college or youth centre, either within or outside Local Education Authority control.
- 4.14 Given the extent of the exclusion zone around schools, it is deemed unnecessary to implement further buffers around parks, open spaces and leisure centres. The 400m exclusion zone around schools is considered extensive and sufficient enough to cover many of these youth centres and parks where children and young people congregate.

<sup>&</sup>lt;sup>3</sup> The School Fringe, From Research to Action. Policy Options within schools on the Fringe. Education Research, Sarah Sinclair, JT Winkler, Nutrition Policy Unit, London Metropolitan University, January 2009.

#### **Concentration and Clustering of Uses**

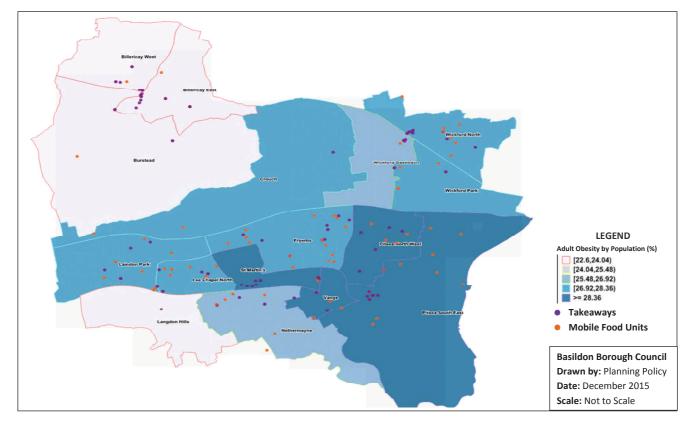
- 4.15 Clusters of hot food takeaways both within and outside of designated centres can have an adverse impact on the vitality and viability of existing designated shopping centers and on residential amenity. Managing the concentration and clustering of take away uses is a common approach that seeks to maintain a good mix of different uses in an area. This approach is especially useful in areas located further away from town centre or schools restrictions.
- 4.16 Outside designated shopping centres, in areas where the residential character of an area predominates, the need to protect residential amenity takes precedence. To reflect this, tighter restrictions on appropriate concentrations and groups of A5 uses are encouraged in such locations as necessary.
- 4.17 To encourage balanced and diverse shopping needs, applications for new hot food takeaways should be assessed for their cumulative impact, giving considerations to the existence of similar types of A5 uses adjacent or in close proximity to the site. It is recommended that:
  - > No more than two A5 units should be located adjacent to each other; and
  - Between individual and groups of hot food takeaways, there should be at least two non-A5 units.

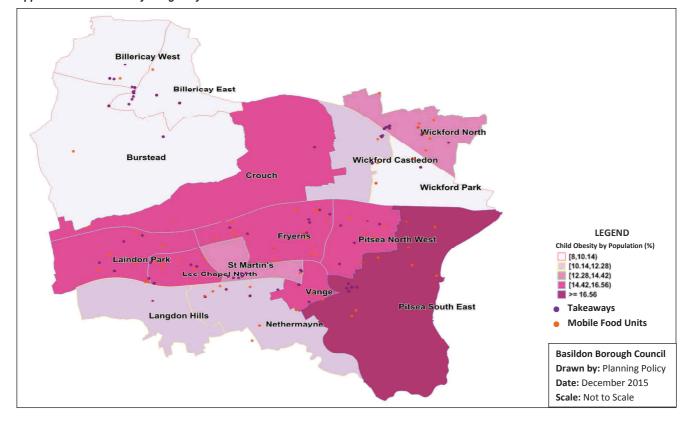
#### **Restaurants Providing a Takeaway Service**

- 4.18 The Council is concerned with the issue of 'A5 by the back door' whereby planning permission is granted for an A3 use, but the premise operates predominately as an A5 use. Policies to control such concentrations of A3 restaurants could be considered to limit the availability of takeaway services in addition to those provided by A5 hot food takeaways.
- 4.19 Often, the proposed layouts should provide a clear guide to the dominant use of premises, in particular the number of tables or chairs to be provided for customer use. In determining the dominant use of a premises, applicants should be able to demonstrate that the proposed use will be the primary business activity, giving consideration to:
  - The proportion of space designated for food preparation and other servicing in relation to designated customer circulation space; and
  - > The number of tables or chairs to be provided for customer use.

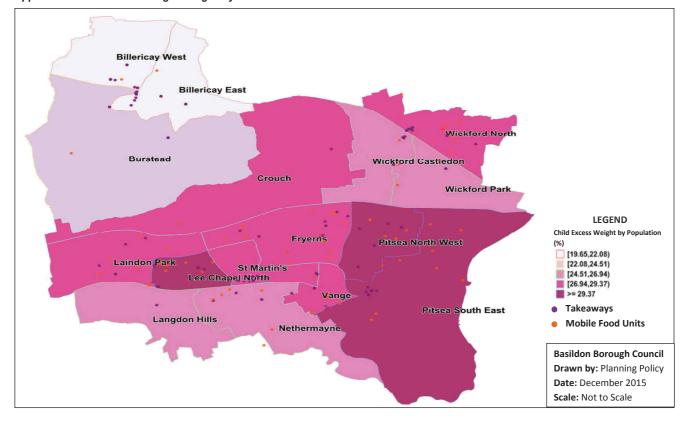
# **APPENDICES**

Appendix 1: Adult Obesity Ranges by Ward

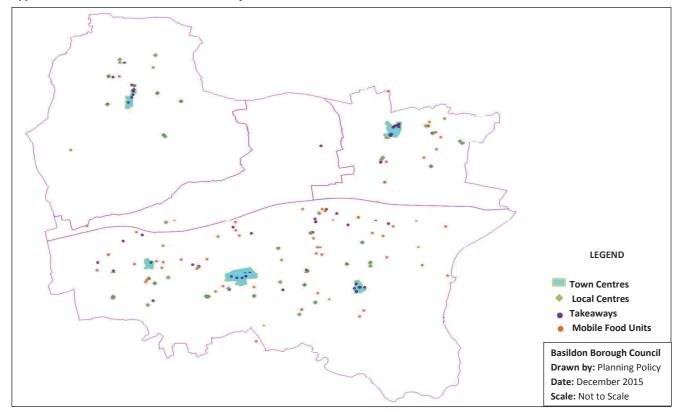




Appendix 2: Child Obesity Ranges by Ward

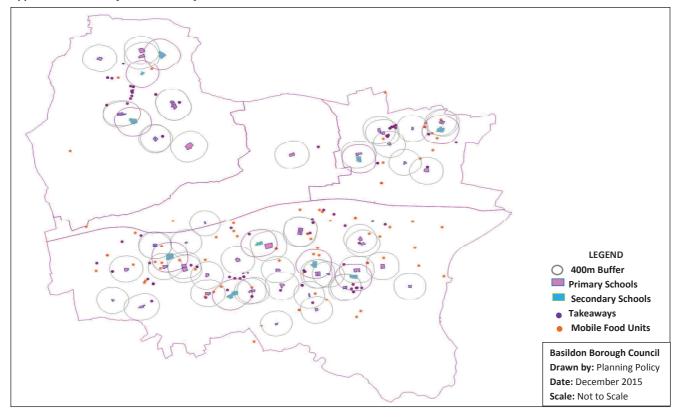


Appendix 3: Child Excess Weight Ranges by Ward

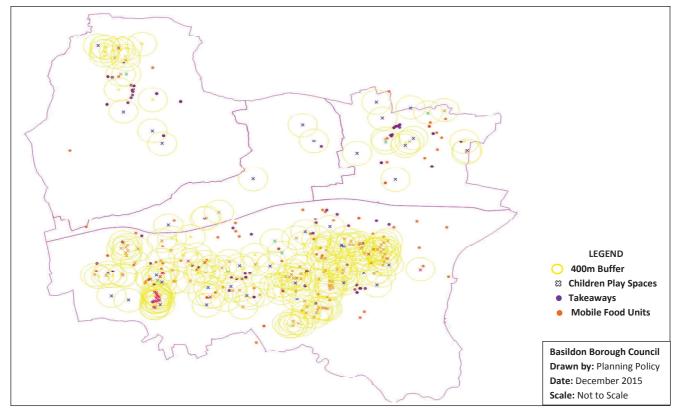


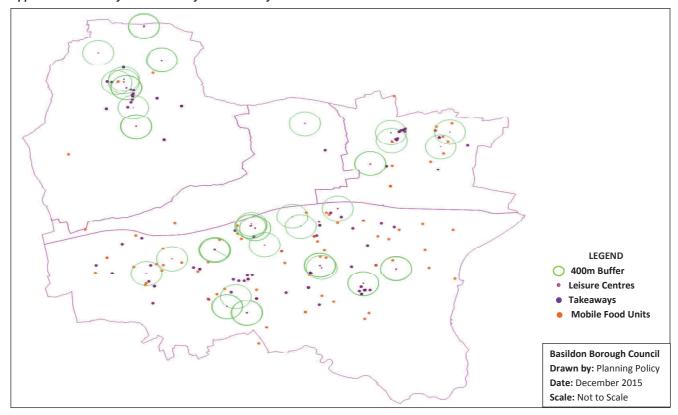
Appendix 4: Distribution of Hot Food Takeaways across Town and Local Centres

Appendix 5: Takeaways and Proximity to Schools



Appendix 6: Takeaways and Proximity to Parks and Open Spaces





Appendix 7: Takeaways and Proximity to Community Halls and Leisure Centres