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1 Introduction

1 Introduction

Purpose of the Supplementary Planning Document

- 1.1** This Hot Food Takeaway Supplementary Planning Document (SPD) provides detailed guidance to businesses, applicants, agents and the local community on how the Local Planning Authority will assess applications for hot food takeaways where planning permission is required, for example new hot food takeaways or applications for a variation of opening times, in partnership with Public Health, Environmental Health and Highways. This SPD is a material consideration in the determination of a planning application and provides further information and guidance that is not currently set out in local planning policy to those involved in planning applications covering hot food takeaways. This SPD is in accordance with the National Planning Policy Framework and the Kirklees Health and Wellbeing Plan 2018-2023.
- 1.2** This SPD explains the overall approach to the principle of hot food takeaway proposals across Kirklees, including:
- Using local health intelligence to inform decision making via a health toolkit;
 - Recognising the role of hot food takeaways in the vitality and viability of town and other centres;
 - The over concentration and appropriate level of clustering of hot food takeaways in centres;
 - Limiting opening hours for hot food takeaways within 400m of primary and secondary schools; and
 - Limiting the impacts of takeaways in relation to environmental health, highways issues and general residential amenity.

1.3 In addition, the principles relating to limiting opening hours within 400m of primary and secondary schools, noise abatement and extraction of odours and takeaway design and community safety will apply to all Section 73 planning applications for the removal or variation of a condition following grant of planning permission in relation to existing hot food takeaways.

1.4 Anyone intending to submit a planning application for a new hot food takeaway or a Section 73 application in relation to an existing hot food takeaway is encouraged to read this SPD and contact the Council's Planning Department for further advice and information.

Context

1.5 Kirklees Council is committed to improving the health and wellbeing of its residents, workers and visitors. This commitment is established through the Kirklees Council Plan 2021/23, the Kirklees Health and Wellbeing Plan 2018-2023 and the Kirklees Healthy Weight Declaration. The commitment is further articulated through this Hot Food Takeaway SPD, which aims to reduce the trend towards increasing levels of obesity and poor diet in Kirklees by preventing the over concentration of hot food takeaways thereby reducing the exposure of particularly vulnerable groups, such as school children, to hot food takeaways.

2 Background

2.1 National Policy and Health Context

National Planning Policy

National Planning Policy Framework (NPPF)

- 2.1** The NPPF⁽¹⁾ endorses local policies that support the vitality and viability of town centres. It promotes healthy communities and the adoption of local plans that limit changes of use where they do not benefit the local community.
- 2.2** At the heart of the NPPF is a presumption in favour of sustainable development, achieved through economic, social and environmental objectives. Paragraph 87 of the NPPF aims to support the vitality of existing town centres by applying a sequential test to main town centre uses (which includes hot food takeaways) so they are not located in edge of centre or out of centre locations. Paragraph 92 promotes social interaction, including opportunities for meetings between people who might not otherwise come into contact with each other, for example through mixed use developments, strong neighbourhood centres, and active street frontages. Paragraph 92 also states that planning policies and decisions should also enable and support healthy lifestyles, especially where this would address identified local health and wellbeing needs, for example access to healthier food. The NPPF aims to support strong, vibrant and healthy communities by creating a high-quality built environment reflecting the community's needs. The core principles encourage planning to be a creative exercise in finding ways to enhance and improve the places in which people live their lives. It emphasises that planning should take account of and support local strategies to improve health, social and cultural wellbeing for all.

Planning Practice Guidance (PPG) - Healthy and Safe Communities and Town Centres and Retail

- 2.3** PPG is statutory guidance which underpins the NPPF. The following paragraph: **How can planning help create a healthier food environment?** supports the guidance in this SPD:

'Planning can influence the built environment to improve health and reduce obesity and excess weight in local communities. Local planning authorities can have a role by supporting opportunities for communities to access a wide range of healthier food production and consumption choices. Planning policies and supplementary planning documents can, where justified, seek to limit the proliferation of particular uses where evidence demonstrates this is appropriate (and where such uses require planning permission).....Planning policies and proposals may need to have particular regard to the following issues:

- *proximity to locations where children and young people congregate such as schools, community centres and playgrounds*
- *evidence indicating high levels of obesity, deprivation, health inequalities and general poor health in specific locations*
- *over-concentration of certain uses within a specified area*
- *odours and noise impact*
- *traffic impact*
- *refuse and litter'*

- 2.4** In relation to town centres the PPG states;

'Local planning authorities can take a leading role in promoting a positive vision for these areas, bringing together stakeholders and supporting sustainable economic and employment growth. They need to consider structural changes in the economy, in particular changes in shopping and

1 National Planning Policy Framework, MHCLG July 2021

2 Background

leisure patterns and formats, the impact these are likely to have on individual town centres, and how the planning tools available to them can support necessary adaptation and change.'

2.5 The range of issues that can be considered through the plan-making and decision-making processes in respect of the vitality of town centres include considerations of: complementary uses within centres to support vitality of centres, including residential development, fostering evening and night time activities to stimulate economic growth, the identification of primary and secondary shopping frontages, utilisation of various planning mechanisms to stimulate growth, creation of town centre strategies, monitoring town centre uses, permitted development rights and the location of main town centre uses outside of town centres.

National Health Context

Healthy Eating, Obesity and the Role of the Planning System

2.6 During the last decade the consumption of food away from the home has increased by 29% with the number of takeaways or fast food outlets increasing dramatically. Takeaway food has been demonstrated to be energy dense and to have high levels of sugar, salt and fat and low levels of micro nutrients. Single large meals and snacks obtained in hot food takeaway outlets often approach or exceed recommended daily requirements for energy, fats, sugar and salt thereby increasing the risk of obesity if eaten regularly (more than once a week).

2.7 Research conducted in 2007 as part of the government foresight project "Tackling Obesity - future choices" has suggested that these social and environmental trends could be contributing to rising levels of overweight

and obese people in the UK. Unhealthy eating, a poor diet and being overweight or obese has a significant impact on health. Obesity both in adults and children is linked with an increased risk of significant health issues, including diabetes, cardiovascular disease, cancer, musculoskeletal problems and both maternal and infant death. Obese or overweight children are also more likely to experience bullying, low self-esteem and a diminished quality of life and in adulthood they are also likely to be overweight. They are also disproportionately from low-income households and black and minority ethnic families. Obesity also increases sickness absence and demands on social care services with severely obese people being more likely to need social care than those who are a healthy weight.

2.8 It is estimated that obesity is responsible for more than 30,000 deaths each year. On average, obesity deprives an individual of an extra 9 years of life, preventing many individuals from reaching retirement age⁽²⁾.

2.9 In 2011, the Secretary of State issued Healthy Lives, Healthy People⁽³⁾ which also recognised the role that could be played by the planning system in supporting public health e.g. the use of Supplementary Planning Documents to include planning measures aimed at reducing obesity⁽⁴⁾.

2.10 The Briefing Paper *Obesity and the environment: regulating the growth of fast food outlets* which was issued in 2014⁽⁵⁾, addresses the opportunities to limit the number of fast food outlets (especially near schools) and to make fast food healthier, one of which is using planning measures to address the proliferation of hot food takeaways.

2 Health matters: obesity and the food environment; Public Health England; 31 March 2017

3 Healthy Lives, Healthy People: A call to action on obesity in England, 2011

4 White Paper: Healthy Lives, Healthy People: Our strategy for public health in England. HM Government Department of Health, 2010

5 Obesity and the environment: regulating the growth of fast food outlets. Public Health England, March 2014

2.11 Health matters, published by Public Health England (PHE)⁽⁶⁾ shows that the typical adult diet exceeds recommended dietary levels of sugar and fat. In recent years, the proportion of food eaten outside the home has increased and this food tends to have a higher calorie content. Over half of British adults have experienced an increase in the number of fast food shops on their nearest high street. Living within close proximity to fast food takeaway outlets has been associated with higher rates of obesity and weight gain⁽⁷⁾. This document also advises town planners that: *'Supported by local evidence, and working alongside public health teams, town planners can develop planning documents and policies to support the creation of healthy environments promoting opportunities for the production and consumption of healthier food, and restricting the proliferation of hot food takeaways.'*

2.12 In 2018, PHE set out further guidance in a report titled *Promoting healthy weight in children, young people and families: A resource to support local authorities*⁽⁸⁾. The report makes recommendations for local government, including a 'whole systems' approach to achieving aims such as improving the availability of healthy food. The report suggests that planning authorities should make full use of planning powers to restrict the proliferation of hot food takeaways near schools and the unacceptable clustering of hot food takeaways in town centres.

2.13 In 2020, PHE published a guidance document, which aims to provide practical support for local authorities that wish to use the planning system to achieve important public health outcomes around diet, obesity and physical activity⁽⁹⁾. The document says that it "aims to support a consistent evidence-based approach to developing local planning policy and guidance, including SPDs, and making planning decisions on

planning applications". "This guidance will encourage and support more local authorities in taking appropriate action through the planning system on ensuring healthy weight environments," it adds.

2.14 The document says that, in refusing applications for new fast food outlets, local authorities have had planning decisions challenged through the appeals process. "Healthy eating and proximity to a school has been a consideration in a number of planning appeals," it says. "It has often not been the only determining factor in the decision. But healthy eating and proximity to a school have been given substantial weight when there is an adopted local plan policy or SPD in place, local evidence on childhood obesity and healthy eating initiatives, and representations from the relevant school."

2.15 The document says that the "adoption of policies restricting hot food takeaways near schools by an increasing number of local planning authorities following examination in public, and evidence from planning appeals, demonstrates that the Planning Inspectorate supports such policies where the appropriate evidence has been provided to support those policies".

National Child Measurement Programme

2.16 As part of the National Child Measurement Programme (NCMP)⁽¹⁰⁾, children are weighed and measured at school. The information is used by the NHS to plan and provide better health services for children.

6 Public Health England was replaced by the Office for Health Improvement and Disparities (OHID) on 1st October 2021

7 Health matters: obesity and the food environment; Public Health England; 31 March 2017

8 Promoting healthy weight in children, young people and families: A resource to support local authorities. Public Health England, October 2018

9 Using the planning system to promote healthy weight environments Guidance and supplementary planning document template for local authority public health and planning teams. Public Health England, 2020

10 <https://www.nhs.uk/live-well/healthy-weight/national-child-measurement-programme/>

2 Background

2.17 Table 1 'Weight of Reception Children' and Table 2 'Weight of Year 6 Children' (NCMP 2019/20) below shows the percentage of overweight and obese reception and year 6 children in Kirklees in comparison to Yorkshire and the Humber and England as a whole.

	Underweight	Healthy Weight	Overweight and Obese Combined
England	0.9%	76.1%	23.0%
Yorkshire and the Humber	0.8%	75.2%	24.1%
Kirklees	0.9%	74.6%	24.6%

Table 1 Weight of Reception Children. Source: National Child Measurement Programme 2019/20

	Underweight	Healthy Weight	Overweight and Obese Combined
England	1.4%	63.4%	35.2%
Yorkshire and the Humber	1.4%	62.9%	35.8%
Kirklees	1.5%	61.8%	36.7%

Table 2 Weight of Year 6 Children. Source: National Child Measurement Programme 2019/20

2.18 The percentages of overweight and obese reception and year 6 children have increased since the previous year which were 23.2% and 35.5% respectively. Also, the percentages of children with a healthy weight in Kirklees have reduced for both cohorts⁽¹¹⁾.

11 National Child Measurement programme 2018/19

12 Fast Food Outlets as defined by Public Health England as 'energy dense food that is available quickly, therefore it covers a range of outlets that include, but are not limited to, burger bars, kebab and chicken shops, chip shops and pizza outlets'.

13 <https://fingertips.phe.org.uk/search/fruit#page/3/gid/1/pat/6/par/E12000003/ati/102/are/E08000034/iid/93077/age/164/sex/4/cid/4/tbm/1>:

Density of Fast Food Outlets

2.19 PHE has provided a definition of a fast food outlet⁽¹²⁾ and also released data on the density of fast food outlets in local authority areas. The table below shows how Kirklees compares with other local authorities in West Yorkshire and England as a whole.

Area	Fast Food Outlets per 100,000 Population
England	96.1
Bradford	142.1
Calderdale	137.3
Kirklees	143.4
Leeds	122.5
Wakefield	137.9

Table 3 Density of Fast Food Outlets Source: Public Health England at 31/12/2017

2.20 This data shows that the local authorities in West Yorkshire already have high concentrations of fast food outlets compared to England. The density of fast food outlets in Kirklees is currently the highest in West Yorkshire and this evidence highlights the requirement for the authority to intervene.

Dietary Choices (adults)

2.21 Public Health England also gather data on dietary choices and the results for 2019/20 are set out in the table below⁽¹³⁾:

Area	Proportion of the adult population meeting the recommended '5-a-day' on a usual day
England	55.4%
Yorkshire and the Humber	53.5%
Kirklees	50.0%

Table 4 Adult Dietary Choices (Public Health England (based on Active Lives, Sport England) (2019/20))

2.22 This data shows that compared with England and the rest of Yorkshire and the Humber, a lower proportion of adults eat the recommended 5-a-day serving of fruit and vegetables. This, along with the fact there is a high concentration of fast food outlets in Kirklees could contribute to greater consumption of takeaway food in Kirklees.

2.2 Local Policy

Kirklees Local Plan Strategy and Policies (February 2019)

2.23 This SPD has been developed to support the Kirklees Local Plan which was adopted in February 2019. The Local Plan identifies a number of strategic objectives which aim to deliver the vision for Kirklees. The relevant objectives relating to health and wellbeing and sustainable economy are;

Objective 1: *Support the growth and diversification of the economy, to increase skill levels and employment opportunities including the provision of a high quality communication infrastructure.*

Objective 2: *Strengthen the role of town centres, particularly Huddersfield, Dewsbury and Batley, to support their vitality and viability.*

Objective 5: *Tackle inequality and give all residents the opportunity of a healthy lifestyle, free from crime and to achieve their potential in work and education.*

2.24 The Local Plan is the catalyst for the spatial implementation of the above objectives, and the policies and guidance in the Local Plan together with this SPD will be part of a range of initiatives to help deliver these corporate goals. Policies **LP16 Food and drink uses and the evening economy** and **LP47 Healthy, active and safe lifestyles** are the most relevant policies relating to hot food takeaways. Other Local Plan policies relate to town centres and environmental protection.

Policy LP16

Food and drink uses and the evening economy

Proposals for food and drink, licensed entertainment uses and associated proposals will be supported, provided they are located within a defined centre, and subject to:

- ensuring the concentration of food and drink and licensed entertainment uses are not located in a particular centre or part of a centre, where they would result in harm to the character, function, vitality and viability of the centre, either individually or cumulatively.

In order to assess the potential harm of food and drink and licensed entertainment proposals on a centre, the following criteria will be considered with a planning application:

- the number, distribution and proximity of other food and drink uses, including those with unimplemented planning permission in a particular centre;

2 Background

- b. the impacts of noise, general disturbance, fumes, smells, litter and late night activity, including those impacts arising from the use of external areas;
- c. the potential for anti-social behaviour to arise from the development, having regard to the effectiveness of available measures to manage potential harm through the use of planning conditions and / or obligations;
- d. the availability of public transport, parking and servicing;
- e. highway safety;
- f. the provision of refuse storage and collection; and
- g. the appearance of any associated extensions, flues and installations.

Proposals for food and drink uses and licensed entertainment uses located outside of defined centres will be subject to criteria b to g set out above and also require the submission of a Sequential Test and Impact Assessment.

Policy LP47

Healthy, active and safe lifestyles

The council will, with its partners, create an environment which supports healthy, active and safe communities and reduces inequality.

Healthy, active and safe lifestyles will be enabled by:

- a. facilitating access to a range of high quality, well maintained and accessible open spaces and play, sports, leisure and cultural facilities;

- b. increasing access to green spaces and green infrastructure to promote health and mental well-being;
- c. the protection and improvement of the stock of playing pitches;
- d. supporting initiatives which enable or improve access to healthy food. For example, land for local food growing or allotments;
- e. increasing opportunities for walking, cycling and encouraging more sustainable travel choices;
- f. supporting energy efficient design and location of development;
- g. ensuring that the current air quality in the district is monitored and maintained and, where required, appropriate mitigation measures included as part of new development proposals;
- h. creating high-quality and inclusive environments incorporating active design and the creation of safe, accessible and green environments which minimise and mitigate against potential harm from risks such as pollution and other environmental hazards;
- i. encouraging the co-location of facilities so that different types of open space and facilities for sport and recreation can be located next to each other and in close proximity to other community facilities for education and health;
- j. working with partners to manage the location of hot food take-aways particularly in areas of poor health;
- k. encouraging initiatives to promote energy efficiency within homes; and
- l. supporting appropriate initiatives which address poor health indicators and anti-social behaviour in the district.

Health Impact Assessments will be carried out for all proposals that are likely to have a significant impact on the health and well-being of the local communities, or particular groups within it, in order to identify measures to maximise the health benefits of the development and avoid any potential adverse impacts.

Other Related Kirklees Local Plan Policies

- LP1 Presumption in favour of sustainable development
- LP2 Place shaping
- LP13 Town centre uses
- LP14 Shopping frontages
- LP21 Highways and access
- LP22 Parking
- LP24 Design
- LP25 Advertisements and shop fronts
- LP52 Protection and improvement of local environmental quality

Our Council Plan 2021/23

2.25 The Kirklees Plan's vision for Kirklees is to be a district that combines a strong, sustainable economy with a great quality of life - leading to thriving communities, growing businesses, high prosperity and low inequality where people enjoy better health throughout their lives and encompasses the theme 'well' whereby no matter where they live, people in Kirklees should be able to live their lives confidently, in better health and for longer. Preventing problems and supporting people early will help people choose healthy lifestyles and increase physical and mental health and wellbeing.

Kirklees Health and Wellbeing Plan 2018-2023

2.26 The Kirklees Health and Wellbeing Plan has a vision to ensure that no matter where they live, people in Kirklees live their lives confidently and responsibly, in better health, for longer and experience less inequality.

2.27 The Health and Wellbeing Plan brings together partners to focus on the people who live in Kirklees and how, working collectively, we can improve the health and wellbeing of the whole population. One of the opportunities identified in the plan is tackling the underlying causes of poor health and wellbeing, with a strong focus on creating 'Quality Places' as part of which, people have the opportunity of a healthy lifestyle, this includes the recognition that the planning process can influence choices over food, diet and lifestyles choices when considering new proposals for such uses and can influence the range of services provided within a particular centre.

Healthy Weight Declaration

2.28 Kirklees Council and its partners have committed to the 'Kirklees Healthy Weight Declaration', which follows a national initiative led by Food Active that is being adopted by local authorities to address obesity levels. The Healthy Weight Declaration acknowledges the need to create environments that enable healthy behaviours, including making healthy choices easier. It is underpinned by 14 standard commitments including considering commercial partnerships, provision of food and drink in public buildings, facilities and providers, and infrastructure needed to influence active travel.

2.29 One specific element of the Kirklees Healthy Weight Declaration is the consideration of supplementary planning guidance for hot food takeaways, specifically in areas around schools, parks and where access to healthier alternatives are limited.

2.3 Local Evidence

2.30 In Kirklees there is recognition that decisions and behaviours are influenced by a complex and broad range of factors which can be defined as the 'wider determinants of health'. Obesity is more complex than just a result of the food people eat, it is also about levels of physical

2 Background

activity, how easy it is for people to walk and cycle around their communities, incomes, skills and understanding of cooking healthy food, social norms and people's access to healthy food. This complex relationship can create what is known as an obesogenic environment. This is where the environments in which individuals, families and communities live make it difficult for people to make healthy choices, which increases the risk of becoming overweight or obese. This is explored in more detail in Appendix 1.

Hot Food Takeaways in Kirklees

- 2.31** The Current Living in Kirklees (CLiK) survey undertaken in 2021 found that 24% of adults have fast food or a takeaway at least once a week. Those living in the most deprived areas (10% most deprived) are the most likely to eat takeaway food at least once a week (30%) and those living in the least deprived areas are among the least likely (18%).
- 2.32** More information on the prevalence of hot food takeaways is provided through the Public Health England data. Public Health England have provided the number of fast food outlets in each ward in Kirklees and from this the Council have calculated the number of fast food outlets per 1,000 population. This information can be found in Appendix 1.

Childhood Obesity in Kirklees

- 2.33** Based on the 2018/19 National Child Measurement Programme, in Kirklees, approximately 1 in 4 (23.2%) of reception age children and 1 in 3 (35.5%) of year 6 children had excess weight (overweight and obese) in 2018/19. It is important to recognise that the numbers of

children that have excess weight can vary significantly between different wards in Kirklees. These differences are detailed in a table in Appendix 1, where the data is shown by ward.

Adult Obesity in Kirklees

- 2.34** Over half of all adults in Kirklees are overweight or obese. The proportion of adults who are obese has increased from 1 in 6 (17%) in 2005 to 1 in 5 (21%) in 2021⁽¹⁴⁾. It is important to recognise that levels of adults who are overweight or obese can vary significantly between different wards in Kirklees. This data is shown by ward in a table in Appendix 1.

Links between Deprivation and Obesity

- 2.35** In **Kirklees, 14.3%** of the population was income-deprived in 2019. Of the 316 local authorities in England (excluding the Isles of Scilly), Kirklees is ranked **87th most income-deprived**.
- 2.36** There is a strong relationship between deprivation and childhood obesity. Analysis of data from the NCMP⁽¹⁵⁾ shows that obesity prevalence among children in both Reception and Year 6 increases with increased socioeconomic deprivation (measured by the Index of Multiple Deprivation (IMD) score). Obesity prevalence in the most deprived 10% of children is approximately twice that of the least deprived 10%.
- 2.37** The graph below compares deprivation ranking (IMD 2019) with percentage of adults classed as obese in Kirklees⁽¹⁶⁾. This data reinforces the point that there is a link between deprivation and obesity levels as it shows that the highest percentage of obese adults live in the worst deprived areas.

14 Current Living in Kirklees Survey; 2021

15 [National Child Measurement Programme \(NCMP\)](#)

16 Current Living in Kirklees Survey; 2021

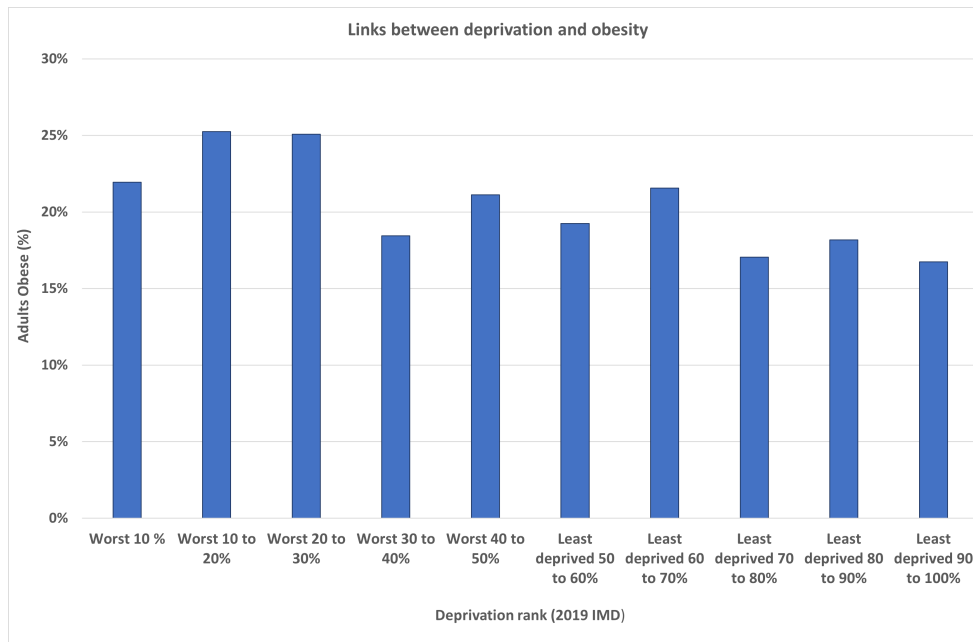


Figure 1 Links between deprivation and obesity (Current Living in Kirklees (CLiK) Survey 2021 and IMD 2019)

Links between Deprivation and Fast Food Outlets

2.38 As well as the link between deprivation and obesity, research has also established a link between levels of deprivation and the proliferation of fast food outlets⁽¹⁷⁾. The graph below compares deprivation ranking with the number and density of fast food outlets. This evidence demonstrates that there is a link as it shows that the highest density of fast food outlets are in the most deprived areas.

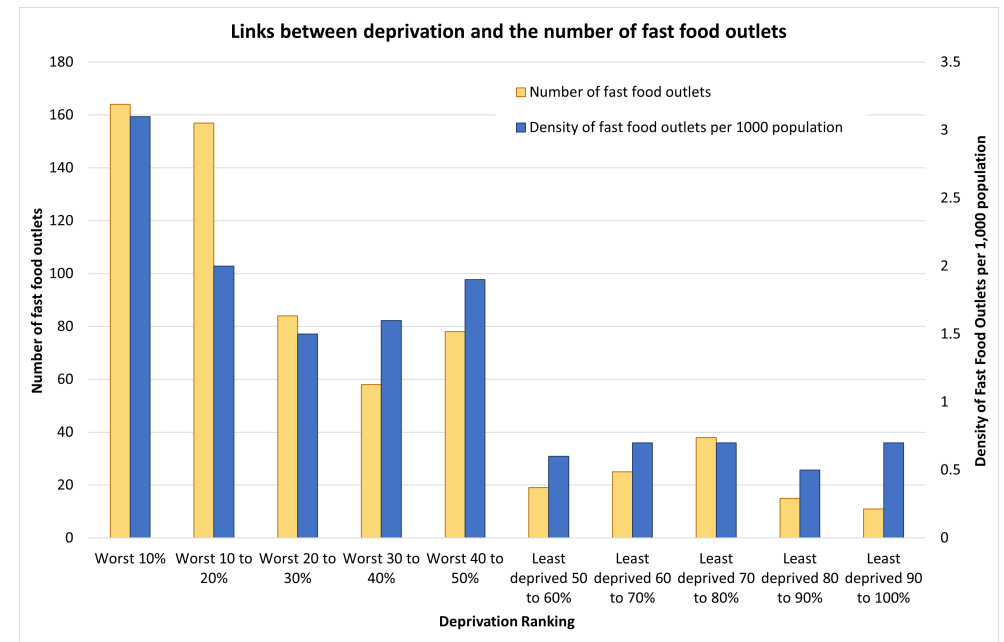


Figure 2 Links between deprivation and the number of fast food outlets in Kirklees

2.4 A whole systems approach to support healthy environments and reduce obesity

2.39 Within Kirklees there are a number of food initiatives and a broader set of system wide actions which support our healthy weight ambition and to raise awareness of healthy alternatives for fast food operatives.

2 Background

Kirklees Food Initiatives and Nutrition Education (FINE) Project

- 2.40** The Kirklees Food Initiatives and Nutrition Education (FINE) Project offers free one-to-one support and consultancy or specific masterclasses to fast food takeaways across Kirklees to enable them to assess where they can make improvements and implement positive change within their business.
- 2.41** The masterclasses aim to guide, encourage and inspire Kirklees independent food businesses to review current practice and to continually make improvements to the menu offer.

The FINE Team

PO Box 1720
Huddersfield
HD1 9EL
Tel: 01484 221000
email: fine.project@kirklees.gov.uk

Getting It Right First Time (GIRFT)

- 2.42** Getting It Right First Time (GIRFT) is a 3-hour session open to food businesses who register at least 28 days before they open (which is the legal requirement). The session summarises the main relevant requirements for food hygiene but also licensing, waste etc. that apply to most businesses in the one session. The aim is to provide information and advice to assist food operators to have a safe and compliant business and to have a positive first (and subsequent) food inspection and hopefully achieve a good food hygiene rating.

Thriving Kirklees (Healthy Child Programme)

- 2.43** The Kirklees Integrated Healthy Child Programme covers a range of support for children and young people's health and wellbeing. From health improvement and prevention, to support and interventions for children and young people who have existing or emerging mental health problems.
- 2.44** Further information about this programme can be found by accessing the following website: www.thrivingkirklees.org.uk

Everybody Active: Kirklees Physical Activity and Sport Strategy 2015-2020

- 2.45** Everybody Active is a Kirklees-wide partnership that makes it easier for people to be active and for activity to be an enjoyable part of everyday life. The Everybody Active vision is more people, more active, more often in Kirklees, which seeks to create conditions to encourage and make it easier for people to be more active. By making changes across all sectors like workplace, schools, travel, regeneration, community development, it can make it much easier for us all to be active and for activity to be an enjoyable part of everyday life.

Kirklees Food Charter 2020

- 2.46** This is designed to drive change in the Kirklees food culture. It has action plans to impact on health, the economy and environment by promoting better local food, skills training, local food businesses and healthy eating along with a culture that promotes safe, affordable, accessible, sustainable local food and that supports the environment.

3 What is a Hot Food Takeaway?

- 3.1** The Town and Country Planning (Use Classes) Order 1987 (as amended) draws a distinction between a shop (including sandwich shops), a restaurant or café which are in Use Class E and a hot food takeaway. Establishments whose primary business is the sale of hot food where the consumption is mostly undertaken off the premises is Sui Generis (in a class of its own).
- 3.2** Takeaways are differentiated from restaurant or café uses because they can raise different environmental issues. These include litter, longer and sometimes later opening hours, extra traffic and increased pedestrian activity.
- 3.3** It is for the applicant to determine whether their business will trade as a hot food takeaway which sells hot food where the consumption of that food is mostly undertaken off the premises and apply for planning permission for the correct use. To help with this, key considerations of how the business will operate are set out in paragraph 3.5. Where clarification is required, applicants are advised to consult with Kirklees Council.
- 3.4** Where an application is submitted for a range of explicitly stated uses including a hot food takeaway, it would be assessed against this guidance as if it was a hot food takeaway.
- 3.5** Where the hot food takeaway element of a proposal is equal to or larger than the non-hot food takeaway element the guidance in this SPD will apply to that proposal. To determine the nature of a proposal the operation of the premises will be considered, particularly:
- The proportion of space designated for food preparation and other servicing in relation to designated customer circulation space;
 - The number of tables and chairs to be provided for customer use;

- The hours of opening; and
- The percentage of the hot food takeaway use to the overall turnover of the business.

- 3.6** The applicant will be expected to provide detailed floor plans to demonstrate the above and that the proposed use will be the primary business activity. For clarity, Table 5 'Examples of Hot Food Takeaway Sui Generis Use' sets out examples of uses which are considered to be hot food takeaways, and those which are not. This list is not exhaustive:

Examples of Hot Food Takeaways	Examples of other uses
Fish and Chip shops	Restaurants/Snack Bars/Cafes
Pizza Takeaway	Sandwich/Deli shops
Chinese/Thai Takeaway	Bakeries
Indian Takeaway	Coffee shops
Kebab Takeaway	Public houses (pubs)/Wine bars
Burger Takeaway	Ice cream shops/parlours
Chicken/Southern Fried Chicken/Fried Chicken shops	Shisha bars
Some fast food drive throughs	Night club

Table 5 Examples of Hot Food Takeaway Sui Generis Use

4 Requirements for Hot Food Takeaway Applications

4 Requirements for Hot Food Takeaway Applications

4.1 This SPD sets out seven principles that apply to hot food takeaways (as defined in Section 3) where planning permission is required, for example, new hot food takeaways or applications for a variation of opening times (Section 73 application).

4.1 HFT1 Public Health Toolkit

Policy HFT 1

Public Health Toolkit

Proposals for all new hot food takeaways will be assessed against the Kirklees Council Public Health Toolkit. Proposals that are not accepted by the toolkit will be refused, unless other material considerations indicate otherwise.

HFT1 will not apply where the application site is within the designated Principal Centres of Huddersfield and Dewsbury and the designated Town Centres of Batley, Cleckheaton, Holmfirth and Heckmondwike.

4.2 In order to reflect the complexities of the obesogenic environment, the council has developed a tool which will support the decision making process for hot food takeaway proposals. The assessment tool uses a range of local data, known as indicators, these are:

- Index of Multiple Deprivation (IMD) quintile
- Percentage of adults overweight
- Percentage of adults obese

- Percentage of 5-year olds (reception) with excess weight
- Percentage of 11-year olds (year 6) with excess weight
- Diabetes prevalence rate
- Coronary heart disease prevalence rate

4.3 Each indicator is assessed and allocated points using the postcode of the proposed hot food takeaway.

4.4 A hot food takeaway will be refused permission if it is located within a postcode that has a combined points total above 20 (21 or above) across the seven indicators of deprivation, obesity and related health conditions out of a possible 42 (unless other material considerations indicate otherwise).

4.5 The council wants to take a balanced and fair approach to supporting local business and economic growth whilst also taking steps to ensure our environments support the health and wellbeing of our residents.

4.6 The tool utilises data from a range of sources, some refreshed annually and others updated less frequently. The latest available data will be imported into the tool by the end of each calendar year, with the latest version of the tool being available for use with all planning applications from January of the following year.

4.7 Background and an explanation of the obesogenic environment, the methodology behind the toolkit points system, data sources used by the toolkit and a worked example of the Public Health Toolkit can all be found in Appendix 1.

Relevant Local Plan Policy

LP47 (j)

4.2 HFT2 Town Centre Vitality and Viability

Policy HFT 2

Town Centre Vitality and Viability

Hot food takeaways (Sui Generis) will not be supported in a principal town, town, district or local centre where the cumulative impact of introducing the facility would be detrimental to the vitality and viability of that centre.

A proposal will be considered to be harmful to the vitality and viability of a centre if it meets one or more of the three criteria below:

1. Hot Food Takeaway Unit Threshold

Level	Hot Food Takeaway Threshold
1.Principal Town Centre	Within the Primary Shopping Area (PSA) increases the concentration of hot food takeaway ground floor units to more than 10% of all main town centre uses.
2.Town Centre	Increases the concentration of hot food takeaway ground floor units in a centre to more than 10% of all main town centre uses.
3. District Centre	Increases the concentration of hot food takeaway ground floor units in a centre to more than 15% of all main town centre uses.
4. Local Centre	Increases the concentration of hot food takeaway ground floor units in a centre to more than 15 % of all main town centre uses.

Table 6 Shopping Centre Hierarchy Hot Food Takeaway Threshold

2. Creates a cluster of three or more hot food takeaways together
3. Reduces the number of units between hot food takeaway clusters to one or none.

Vacancy level considerations:

Hot food takeaways will be supported in centres that have reached the threshold in this guidance where it can be demonstrated that there is no demand for an alternative use and there is a vacancy level of 10% or more in principal, town, and district centres or a vacancy level of 25% or more in local centres and they meet planning policy in all other respects.

Conditions will be attached to any planning approval to ensure that shutters are designed to prevent any harmful effects on the visual amenity of the street scene.

- 4.8** Hot food takeaways provide a service to local communities. They form part of the local economy particularly when located within defined centres which have a good mix of main town centre uses including shops selling food and non-food goods, offices and leisure facilities such as cafes, restaurants and pubs.
- 4.9** Shopping centres have changed over time with traditional shops such as greengrocers, newsagents and convenience stores being replaced by retail service uses such as hairdressers, health and beauty salons and hot food takeaways. This has detrimentally affected the mix of uses raising concerns about the vitality and viability of centres. It has also resulted in a dominance of uses that are generally open in the evening, creating dead frontages during the day particularly where shutters are closed.

4 Requirements for Hot Food Takeaway Applications

- 4.10** The role and function of centres in Kirklees is set out in Local Plan Policy LP13 Town Centre Uses. The characteristics of the centres vary considerably but it is important they are retained as they provide a focus for the local community, support social interaction and contribute to sustainability.
- 4.11** Principal Town Centres are the largest in Kirklees, their Primary Shopping Areas are the focus for retailing and other main town centre uses incorporating those which serve the evening/night-time economy including hot food takeaways. The policy threshold for principal centres applies to the primary shopping area to support a strong retail core and the health of these centres. Between the primary shopping area and the town centre boundary criteria 2 and 3 apply.
- 4.12** The health and vitality of centres in the district is monitored through the Town Centre Audit programme. Further details are set out in Appendix 2 including the number of different uses within each defined centre in the Local Plan. The balance of uses needs to be managed to ensure that centres remain attractive to shoppers, visitors, residents and businesses during the day and in the evening. In centres where the number of hot food takeaways has not reached the threshold set out in HFT2, this SPD also seeks to limit the number of hot food takeaways concentrating next to each other and their impact on the mix of uses along an active street frontage.
- 4.13** Where there are a significant number of vacant units in proportion to the size of the centre, it also has a detrimental impact on the vitality and viability of a centre by reducing pedestrian footfall and economic activity. Therefore this guidance gives consideration for a unit to be occupied by a hot food takeaway even if the threshold has already been reached and there is no demand for an alternative use. The applicant needs to demonstrate that the premises have been marketed for a period of at least 6 months for an alternative main town centre use.

- 4.14** Shutters closed during the day can have a negative impact on the street frontage. The dead frontages created can deter shoppers and even deter other uses from locating on the high street. To encourage shoppers and visitors and create active and vibrant streets it is important to ensure that shutters are designed appropriately. There are a number of different grille options available in modern shutters. Grilles that allow views through are preferred and can be open mesh or transparent.

Relevant Local Plan Policy

LP13, LP14, LP16

4.3 HFT3 Proximity to Schools

Policy HFT 3

Proximity to Schools

Where planning permission is sought for a hot food takeaway (new or variation of condition) within 400m of the principal entry point to a primary (infant and/or junior or middle) or secondary school, and the proposal meets planning policy in all other respects, planning permission will only be permitted subject to the condition that opening hours are restricted to the following:

A primary school (infant and/or junior or middle): the hot food takeaway is not open to the public between 3pm to 5pm weekdays and there are no over the counter sales⁽¹⁸⁾ during these times.

18 The selling of a product directly to the public in the premise

4 Requirements for Hot Food Takeaway Applications

A secondary school: the hot food takeaway is not open to the public before 5pm on weekdays and there are no over the counter sales before that time.

HFT3 will not apply where the application site is within the designated Principal Centres of Huddersfield and Dewsbury and the designated Town Centres of Batley, Cleckheaton, Holmfirth and Heckmondwike.

In all cases HFT2 Town Centre Vitality and Viability will also need to be complied with.

- 4.15** Reducing children's exposure to foods contributing towards obesity such as those sold in hot food takeaways can reduce access to food and drink that is high in fat, salt and sugar.
- 4.16** A specific issue has been identified with teenagers leaving secondary schools at lunchtimes to access hot food takeaways. Children in primary school do not normally leave school premises during school hours but research indicates that the most popular time for purchasing food from shops is after school⁽¹⁹⁾.
- 4.17** The aim of this guidance is to ensure that during times when children are making food choices, such as lunchtime and after school, the environment and availability of hot food takeaways is not encouraging unhealthy choices.
- 4.18** Hot food takeaways within easy walking distance of schools can provide an attractive and affordable food option for pupils. In an effort to establish appropriate healthy eating habits and reduce the rate of childhood obesity in the local population the Council therefore considers it

appropriate to restrict the hours of operation of hot food takeaways within 400m of primary (infant and/or junior or middle) and secondary schools.

- 4.19** The council has created 'restrictive zones' which represent a realistic 5 minute walk-time (400m) (10 minutes there and back) from the entrance points of every relevant school in the district. These restrictive zones represent the ease with which pupils may walk along certain routes. A greater distance can usually be walked in 10 minutes along a straight main road for example than could be walked where there are barriers to movement such as busy junctions. Further information on the reasoning for a 5 minute walk as a restrictive zone is shown in Appendix 3. HFT3 will apply in all circumstances where any of the application site (red line boundary) falls within the restrictive zone.
- 4.20** Primary, middle and secondary school locations may change over time, sometimes with new ones opening or an existing one relocating or expanding. In these cases, the new location of the school entrances will automatically have a restrictive zone as per this SPD. Where an existing school closes without a replacement at the same site, the restrictive zone will no longer apply.
- 4.21** Maps showing the 400m restrictive zones around schools (including infant, junior, primary, middle, secondary and special schools) are available on the Councils webpages. These maps are to be used by potential applicants and those involved in the determination of planning applications to ascertain whether a premise falls within a 400m zone.

Relevant Local Plan Policy

LP47 (j)

4 Requirements for Hot Food Takeaway Applications

4.4 HFT4 Noise Abatement and Extraction of Odours

Policy HFT 4

Noise abatement and extraction of odours

Proposals for new hot food takeaways must demonstrate effective kitchen odour control and extract systems and appropriate noise attenuation measures. Noise attenuation and odour control measures must:

- Be acceptable in terms of visual amenity, including location and external finish;
- Not adversely impact on neighbouring occupiers by virtue of noise, vibration or odour; and
- Remain appropriate to the type of food being prepared and be routinely and properly maintained.

Proposals must demonstrate appropriate sound proofing of party walls and ceilings where necessary.

Where appropriate, restrictions on the hours of operation will be considered.

All applications must be accompanied by an Odour and Noise Impact Assessment. This should include full details of the extraction system proposed including the internal layout and external appearance showing the location of all the main components of the system, together with details of any necessary noise attenuation and odour abatement measures.

4.22 A common concern associated with takeaways is the impact on the amenity of adjoining occupiers through the generation of noise and odour, usually from ineffective, inappropriate and/or badly maintained kitchen odour control and extract systems or inadequate noise attenuation measures.

4.23 Noise can be generated both from odour control and extract equipment and from the normal operation of the premises itself. Badly installed, poorly maintained or inappropriate equipment is not only unsightly but can lead to significant odour, noise and vibration disturbance. Noise generated internally usually from the kitchen can also be a nuisance to occupiers of premises adjacent to the takeaway, as can noise generated from normal customer activity such as vehicle movements, particularly motorcycle delivery vehicles and slamming car doors and general customer noise outside the premises.

4.24 The position and appearance of flues providing odour extraction for takeaways can be detrimental to the street scene if they are prominently located, of poor quality and/or inadequately maintained. Consideration will therefore be given to the location and appearance of the proposed extraction equipment as well as to the proposed maintenance regime to ensure that there is minimum detriment to visual amenity. In sensitive locations such as Conservation Areas extraction equipment should be installed as much as possible within the building if practicable and appropriate.

4.25 The design of kitchen odour control and extract systems and ventilation equipment should ensure that odours, fumes and/or noise do not negatively impact on the amenity of neighbours. The use of equipment appropriate to the type of food being produced is also essential to reduce cooking smells. Such equipment should at the least meet minimum industry standards so that odour is effectively dispersed externally and

4 Requirements for Hot Food Takeaway Applications

also cannot penetrate through the building into neighbouring property. Such equipment must also be properly maintained so that such measures continue while ever the premises are in operation.

- 4.26** Applications must be accompanied by an Odour and Noise Impact Assessment which should include suitable mitigation measures and must include full details of the extraction system proposed including the internal layout and external appearance and location. This should also show the location of the flue termination point in relation to adjacent properties and any necessary noise attenuation measures. The applicant will be expected to demonstrate that the proposed extract system will not cause a noise or vibration problem. This is to ensure that odour control and extract systems are properly designed and installed so that they are effective and do not require remedial work or replacement⁽²⁰⁾.
- 4.27** The takeaway operating hours are also relevant to noise issues that can arise from the operation of a takeaway. Noise can occur from food preparation or delivery activities even though the takeaway is not open for customers. Noise from multiple movements of delivery vehicles, especially if they are using motorcycles, can cause significant noise issues. Consideration will therefore be given to restricting the hours of operation of the proposed hot food takeaway in predominantly residential areas or other areas where noise sensitive premises are attached or in close proximity.
- 4.28** A takeaway proposed where there is residential accommodation on the floor directly above will not normally be acceptable unless the residential accommodation is occupied by the operator of the takeaway (or their family or employee of the takeaway). In some circumstances it may be acceptable if the applicant can demonstrate that there is (or will be) a significant level of sound insulation in the separation floor between the

two uses, but permission is unlikely to be forthcoming for late night/early morning use. The demonstration of adequate sound insulation should be in the form of an acoustics report from a suitably qualified person.

Relevant Local Plan Policy

LP16 (b) and (g), LP52

4.5 HFT5 Waste Disposal

Policy HFT 5

Waste Disposal

Any proposal for a hot food takeaway should;

- Accommodate commercial bin stores within the building where practicable. If this is not possible the bin store must be on site and adequately screened in a manner and location that does not detract from the street scene or the character of the area and that does not cause odour nuisance to neighbouring occupiers;
- Locate bin stores to enable access for refuse collection vehicles; and
- Consider the provision of bins for customer's litter in locations that do not cause a nuisance or obstruction on the highway or any other public or private space.

4 Requirements for Hot Food Takeaway Applications

All applications must be accompanied by a Waste Management Strategy which should cover storage and disposal of waste including provision of grease traps where appropriate. It should also consider recycling and the use of sustainable food packaging, such as cardboard boxes and paper straws.

- 4.29** As it is a legal requirement that businesses that produce waste comply with the Environmental Protection Act 1990 (s34 Duty of Care etc as respects waste), the appropriate disposal of all waste arising from the operation of a hot food takeaway will be a material consideration when such applications are received.
- 4.30** It is important that the waste generated by the operation of a hot food takeaway does not detract from the character of the area or cause nuisance to other users or occupiers in the vicinity. Proposals will not be acceptable if waste cannot be adequately stored and if proper access for refuse collection vehicles cannot be safely provided.
- 4.31** All applications must be accompanied by a Waste Management Strategy so that waste disposal details can be properly assessed. The Waste Management Strategy should include details of the storage of trade waste including the location, number and size of bins, the size and storage facilities for which must be commensurate with the amount of waste produced, the provision of bins for customer's litter at the premises and elsewhere if appropriate, screening measures, access for service vehicles, the frequency of disposal of waste/council refuse collection and the provision of grease traps appropriate for the use proposed to avoid grease and fat entering the public sewerage system.

4.32 The Waste Management Strategy should also include measures to deter vermin, for example smaller bins that are emptied more frequently are less likely to attract rats and will help to keep odour release to a minimum. The Waste Management Strategy will be considered against policies in this SPD and other appropriate requirements such as those set out by Yorkshire Water relating to wastewater discharge.

4.33 The Kirklees Council Waste Management Design Guide for New Developments (Waste Collection, Recycling and Storage Facilities Guidance)⁽²¹⁾ contains guidance on the storage and collection of commercial waste, including size, nuisance issues, security, access and fire risk. This guidance should be taken into account when preparing a Waste Management Strategy.

4.34 The council also encourages the Waste Management Strategy to consider recycling and other initiatives such as 'litter picks' in the vicinity of the takeaway. There should be enough space within the bin storage area to include separate bins for dry mixed recyclables and glass. Applicants are also encouraged to consider the use of sustainable food packaging, such as cardboard boxes and paper straws.

Relevant Local Plan Policy

LP16 (b) and (f), LP52

21 <https://www.kirklees.gov.uk/beta/planning-applications/pdf/waste-management-design-guide-new-developments.pdf>

4.6 HFT6 Takeaway Design and Community Safety

Policy HFT 6

Takeaway design and community safety

When determining applications for hot food takeaways consideration will be given to safety and residential amenity. This includes the design of the premises and any outdoor areas.

The advice of West Yorkshire Police and the Community Safety Partnership in relation to personal safety or crime and disorder will be given significant weight in determining such planning applications.

Where appropriate, restrictions in opening hours may be required and applicants may need to provide and/or contribute to deterrent measures.

- 4.35** Hot food takeaways can make a valuable contribution to the vibrancy of the night time economy. In this context, when considering proposals for hot food takeaways it is important to ensure that the safety of both takeaway operators and users as well as residential amenity in the local area is considered. The aim is to manage the impact of people congregating around such venues which could lead to problems of noise, disturbance and anti-social behaviour.
- 4.36** It is therefore important to consider community safety in the design of the takeaway. This will include associated outdoor spaces and the consideration of natural surveillance as well as reducing the risk of conflict with vehicles. Many hot food takeaways are focused on the night time economy so it is also important to consider the impact of premises which are closed during the day through consideration of the design of shutters, shop fronts and natural surveillance to seek to ensure

a welcoming environment at all times of the day. Such design elements will be considered in accordance with the Local Plan Design Policy (LP24).

- 4.37** Local Planning Authorities are required to take Section 17 of the Crime and Disorder Act into account when making decisions on planning applications and this would involve consideration of whether or not a proposal would generate crime and disorder if it were to be approved. The West Yorkshire Police Designing Out Crime Officer at Kirklees Council will assess the merits of individual applications following consultation with West Yorkshire Police and an assessment of crime data in the area. Where potential crime and disorder concerns are identified, it is likely they will recommend refusal or amendment of the application.
- 4.38** The Council will also liaise with 'Safer Kirklees', the Kirklees Community Safety Partnership which brings together various groups to enable the Council to consider community safety. This group will be able to advise on appropriate deterrent measures such as CCTV cameras. More information on the work of the Community Safety Partnership can be accessed at: www.kirklees.gov.uk/saferkirklees.

Relevant Local Plan Policy

LP16 (b) and (c), LP24, LP25, LP35

4 Requirements for Hot Food Takeaway Applications

4.7 HFT7 Highway Safety

Policy HFT 7

Highway safety

Applications for hot food takeaways will be refused where the use is considered to have an unacceptable adverse impact on highway efficiency and safety, including the consideration of:

- The existing use and location of the site or premises;
- Accessibility for pedestrians, cyclists and vehicular traffic; and
- The operational requirements of the business.

4.39 Hot food takeaways usually generate high numbers of short visits, by customers either with or without a car, by delivery and other service vehicles needed for the normal operation of the business and also increasingly cycles, mopeds or motorbikes picking up orders for delivery to customers' homes. Delivery vehicles will therefore be taken to mean those vehicles delivering both to and from the premises. These visits also tend to be concentrated at certain times, at lunchtime and in the evening depending on opening hours.

4.40 It is important when considering applications for hot food takeaways that the safety of all users, as well as the amenity of the occupiers of nearby homes and businesses is not adversely affected. It is important that vehicle movements associated with hot food takeaways do not worsen existing traffic conditions in the immediate area such that highway or pedestrian safety is compromised. Consideration will therefore be given as to whether the proposal is detrimental compared to the existing use of the site or premises and whether the proposal is located where there is an existing evening economy or other conditions

where a certain amount of activity would be expected when the premises are open. The existing circulation by pedestrian and vehicular traffic should not be materially worsened by the proposal even where such uses would normally be expected to operate. This will include the consideration of road safety incidents.

4.41 Hot food takeaways can generate a high number of car borne visits that require short term parking. If there is a lack of suitable parking spaces nearby, customers and delivery drivers may choose to, or have no alternative but to park for short periods in inappropriate locations. This can lead to conflict with other road users and dangerous conditions for pedestrians. Consideration will therefore be given to the presence of existing traffic controls such as double yellow lines, laybys used for bus stops, zebra crossings or other crossings or controls or the presence of junctions where inconsiderate parking would cause a danger to pedestrians or other road users or which would disperse short term parking resulting in loss of amenity for residents or other businesses. If parking arrangements in the vicinity of the premises cannot safely accommodate the increased need for short stay parking the proposal will not be acceptable if it cannot demonstrate that such arrangements could be put in place.

4.42 The normal operational requirements of hot food takeaway premises also generate a certain amount of vehicle movement, including delivery vehicles both loading and unloading, waste disposal and other service vehicles, as well as parking arrangements for staff. Any application for a hot food takeaway will need to demonstrate that appropriate existing or proposed off-street parking arrangements or other acceptable on-street parking arrangements needed for the proper and safe functioning of the premises are or can be made available.

4 Requirements for Hot Food Takeaway Applications

Relevant Local Plan Policy

LP16 (d) and (e)

5 Other Considerations and Legislation affecting Hot Food Takeaways

5 Other Considerations and Legislation affecting Hot Food Takeaways

Licensing

5.1 A premises licence is required for any business selling hot food and drink between the hours of 11pm and 5am, and this is issued by the council under the Licensing Act 2003. The Licensing Act is a permissive regime which means that unless the authority receives representation in objection to the application for a licence, it is automatically granted. If a representation is received, then it must be relevant to the application and show how the proposed activities will impact on one or more of the four licensing objectives which are:

- Prevention of crime and disorder
- Prevention of public nuisance
- Public safety
- Protection of children from harm

5.2 For further information please contact the Licensing Service:

www.kirklees.gov.uk/entertainment

Kirklees Council - Licensing Service

PO Box 1720

Huddersfield

HD1 9EL

Tel: 01484 456868

email: licensing@kirklees.gov.uk

Food Safety

5.3 The food business operator of any new food business must register the premises as a food business with the Council at least 28 days prior to starting to operate or taking it over if it is an existing business. It is also a legal requirement to notify the Council of any significant change (e.g. where you change what you do or if there is a change in partnership or you set up a limited company etc.) or closure of an establishment. It is free to register. If you make, prepare or handle food that comes from animals (products of animal origin), for example meat or dairy products, other than for direct sale to the consumer, you may need to be approved by the Council. You should contact Environmental Services for advice before starting to prepare/sell products of animal origin as you must have approval before starting to operate.

5.4 It is strongly advised that the applicant should contact the food safety team prior to submitting an application for planning permission. Food safety officers can provide detailed advice on the current requirements of food hygiene and health and safety legislation. Advice provided before any application is submitted can help ensure that all necessary requirements are met prior to the commencement of the business.

5.5 More information can be found on the Council's website: www.kirklees.gov.uk/foodbusiness

Kirklees Council - Environmental Health

PO Box 1720

Huddersfield

HD1 9EL

Tel: 01484 414739

5.6 There is also large amount of information on setting up a food business and the legal requirements for food businesses at the Food Standards Agency website: www.food.gov.uk

5 Other Considerations and Legislation affecting Hot Food Takeaways

Environmental Health

- 5.7 Environmental Health can be consulted on planning applications where the application may create harmful impacts from noise, odour, litter and light.
- 5.8 Through the planning process Environmental Health can ensure that the extract system at a new hot food takeaway is suitable to effectively control odours without causing excessive noise. This should prevent statutory odour and noise nuisance from the system and therefore avoid the need for any enforcement action under the Environmental Protection Act 1990.
- 5.9 Guidance on bin storage and waste management can be found within the Environmental Protection Act 1990. The applicant needs to consider their duty of care to dispose of waste lawfully under the Environmental Protection Act. More information on this can be found at paragraphs 4.30 and 4.32 of this document.
- 5.10 Please visit the Kirklees website for further information:
www.kirklees.gov.uk/noise

6 Monitoring, Implementation and Review

6 Monitoring, Implementation and Review

Monitoring

- 6.1** The successful implementation of this SPD will be assessed through the Annual Monitoring Report (AMR). The AMR will note when the SPD has been used in determining planning applications, the number and location of new hot food takeaways permitted and refused and the new hot food takeaways approved with restricted opening hours. Monitoring will also include noting changes in school entrances and the opening of new primary, middle, secondary and special schools.

Implementation

- 6.2** The SPD will be primarily implemented through the development management process and the determination of planning applications. The SPD does not have the status of the development plan (for the purpose of Section 38 of the Planning and Compulsory Purchase Act 2004), but it will be an important material consideration in determining planning applications.

Review

- 6.3** The Council's AMR will highlight any issues that may need a review. Where such a review is required, a timetable for this activity will be included in the Local Development Scheme as resources permit.
- 6.4** Changes in National or Regional Planning Policy or progress on Development Plan Documents, which form a part of the Local Plan, may also prompt the need for further reviews.

Appendix 1: The Obesogenic Environment

This is an evidence base focusing on the harms of excess weight and the relationship between hot food takeaways and levels of obesity. It provides the evidence to support the requirements shown in HFT1 and HFT3. This appendix covers the impacts of obesity and the current situation locally.

Whole systems approach to support healthy environments and reduce obesity

Kirklees Council recognises that the decisions and behaviours of individuals, including the use of hot food takeaways are influenced by a complex relationship with a broad range of factors. This can be defined as the ‘wider determinants of health’. Obesity is complex. It is influenced by what we eat, how we access our food, availability and affordability of healthy food and our skills and understanding of cooking healthy food. It is also about how physically active we are, how easy it is to walk and cycle around our communities, our income and our social norms. This complex relationship can create what is known as an obesogenic environment⁽²²⁾. This is where the environments in which individuals, families and communities live make it challenging for people to make healthy choices, which increases the risk of becoming overweight or obese. The Foresight Report⁽²³⁾ also states that “Changes to our environment (including both the activity and food related environment) are a necessary part of any response to support behaviour change and appropriate behaviour patterns.”

While the planning system alone cannot solve the obesity crisis, when utilised effectively it can be a powerful tool for positively influencing healthy behaviours and providing healthy options through the built and natural environment⁽²⁴⁾.

Having a positive policy framework for a healthier food environment benefits Local Planning Authorities, public health, businesses and most importantly consumers and communities. It allows for all interests to be considered and balanced during development planning. The planning system should consider the impact of developments on people’s eating behaviours and their health implications. Building on the evidence of existing literature, the Town and Country Planning Association and The Office for Health Improvement and Disparities (OHID) (formerly Public Health England), developed a framework for influencing and planning for healthy weight environments⁽²⁵⁾. One element focus’s on ‘Healthy Food measures aimed at improving the food environment for access to, consumption and production of healthier food choices:



Figure 3 Planning Healthy Weight Environments (Ross & Chang, 2014)

22 [Tackling obesities: future choices - GOV.UK \(www.gov.uk\)](https://www.gov.uk/government/consultations/tackling-obesities-future-choices)

23 [Tackling obesities: future choices - GOV.UK \(www.gov.uk\)](https://www.gov.uk/government/consultations/tackling-obesities-future-choices)

24 Hamidi S, Ewing R., Compact Development and BMI for Young Adults. 2020, J Am Plann Assoc., pp. 86(3): 349-363.

25 [\[PDF\] Using planning powers to promote healthy weight environments in England | Semantic Scholar](#)

Appendix 1: The Obesogenic Environment

1 Movement and access

- Clearly signposted, with direct walking and cycling networks
- Safe and accessible networks, and a public realm for all
- Walking prioritised over motor vehicles, and vehicle speed managed
- Area-wide walking and cycling infrastructure provided
- Use of residential and business travel plans

2 Open spaces, play and recreation

- Planned network of multi-functional green and blue spaces
- Easy-to-get-to natural green open spaces of different sizes
- Safe and easy-to-get-to play and recreational spaces for all, with passive surveillance
- Sports and leisure facilities designed and maintained for everyone to use

3 Healthy food

- Maintain and enhance opportunities for community food growing
- Avoid over-concentration of unhealthy food uses such as hot-food takeaways in town centres and in proximity to schools or other facilities aimed at children and young people
- Shops/food markets that sell a diverse offer of food choices and are easy to get to by walking, cycling or public transport

4 Neighbourhood spaces and social infrastructure

- Community and healthcare facilities provided early as a part of new development

- Services and facilities co-located within buildings where feasible
- Public spaces that are attractive, easy to get to, and designed for a variety of uses

5 Buildings

- Adequate internal spaces for bike storage, dining and kitchen facilities
- Adequate private or semi-private outdoor space per dwelling
- Car parking spaces are minimised across the development
- Well-designed buildings with passive surveillance

6 Local economy

- Enhance the vitality of the local centre by providing a more diverse retail and food offer
- Centres and places of employment that are easy to get to by public transport, and on walking and cycling networks
- Facilities are provided for people who are walking and cycling to local centres and high streets, such as street benches, toilets and secure bike storage

It is therefore within this context in which the Hot Food Takeaway SPD plays a vital role in terms of enabling healthy environments across Kirklees.

Obesity is determined by a wide range of factors sitting within the wider determinants of health, including the environment and therefore actions to reduce obesity prevalence requires a whole systems approach⁽²⁶⁾.

The Obesogenic Environment

Evidence shows that the environment can help people access and choose healthier food options on our high streets, around schools and in our town centres⁽²⁷⁾. The quality of the local environment in which people live and work are contributing factors to excess calorie consumption and inactive lifestyles which make it challenging for people to make healthy choices and increase the risk of becoming overweight or obese⁽²⁸⁾.

This complex relationship can create what is known as an obesogenic environment and is demonstrated in the table and image below:

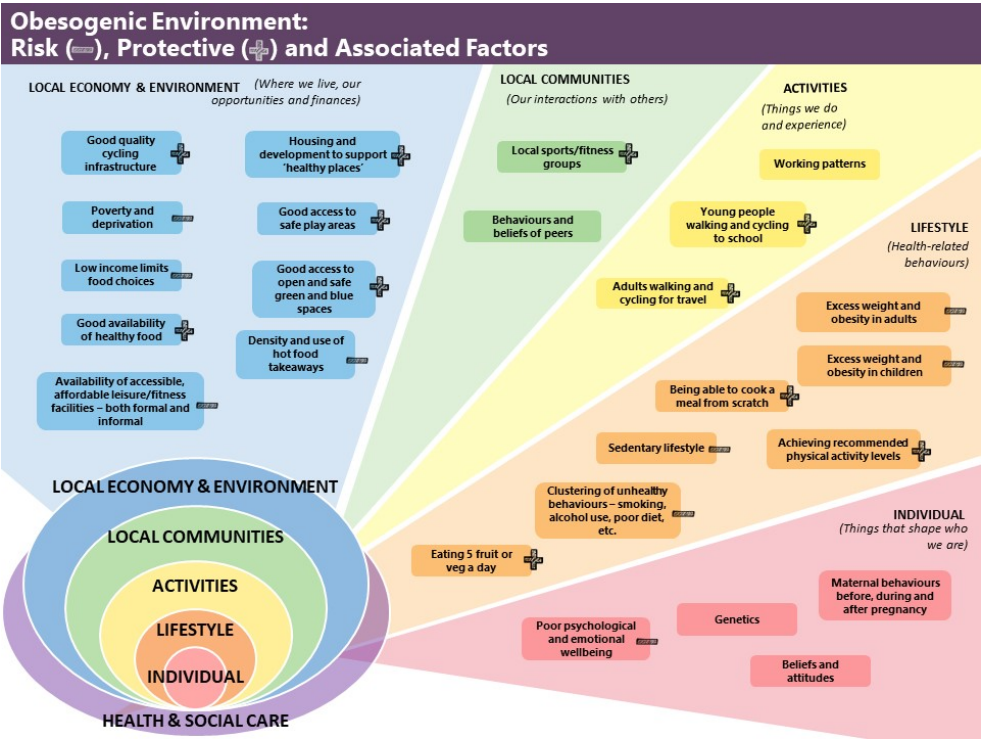


Figure 4 The Obesogenic Environment

	Risk (-)	Protective (+)	Associated Factors
Local Economy and Environment <i>(Where we live, our opportunities and finances)</i>	Poverty and deprivation Low income limits food choices Availability of accessible, affordable leisure/fitness facilities – both formal and informal	Good quality cycling infrastructure Housing and development to support 'healthy places' Good access to safe play areas Good access to open and safe green and blue spaces Good availability of healthy food	
Local Communities <i>(Our interactions with others)</i>		Local sports/fitness groups	Behaviours and beliefs of peers

27 [Healthy weight environments: using the planning system - GOV.UK \(www.gov.uk\)](http://www.gov.uk)

28 [Healthy weight environments: using the planning system - GOV.UK \(www.gov.uk\)](http://www.gov.uk)

Appendix 1: The Obesogenic Environment

	Risk (-)	Protective (+)	Associated Factors
Activities (Things we do and experience)		Young people walking and cycling to school Adults walking and cycling for travel	Working patterns
Lifestyle (Health-related behaviours)	Excess weight and obesity in adults Excess weight and obesity in children Sedentary lifestyle Clustering of unhealthy behaviours – smoking, alcohol use, poor diet, etc.	Being able to cook a meal from scratch Achieving recommended physical activity levels Eating 5 fruit or veg a day	
Individual (Things that shape who we are)	Poor psychological and emotional wellbeing		Maternal behaviours before, during and after pregnancy Genetics Beliefs and attitudes

Table 7 Obesogenic Environment

The impact of obesity

The rise in obesity is one of the biggest threats to health in the UK. In England, among adults 16 and over, 68% of men and 60% of women were overweight or obese in 2019. Among children, 18% of boys and 13% of girls were obese and children with an obese parent were more likely to be obese⁽²⁹⁾.

Food and nutrition, and our levels of physical activity, are second only to smoking tobacco in the impact on our health. A combination of eating too much energy as calories and a lack of physical activity leads to obesity, diabetes, heart disease, stroke and some cancers. Eating habits established in childhood and adolescence tends to continue and affect adult health. Individuals with irregular meal patterns are more likely to become overweight and obese⁽³⁰⁾.

Obesity is associated with an increased risk of earlier death and a range of diseases that have a significant health impact on individuals, such as diabetes, heart disease, cancer and musculoskeletal problems. Additionally, the risk of maternal death from childbirth and infant death are increased⁽³¹⁾.

It is estimated that obesity is responsible for more than 30,000 deaths each year. On average, obesity deprives an individual of an extra 9 years of life, preventing many individuals from reaching retirement age⁽³²⁾.

Obesity is caused by the imbalance between calories (or energy) taken into the body and calories used by the body and burnt off in physical activity, over a prolonged period. Excess energy results in the accumulation of excess body fat. Therefore it is an individual's biology, for example, genetics and metabolism, and their eating and physical activity behaviour that are primarily responsible for maintaining a healthy body weight⁽³³⁾.

29 Health Survey for England 2019 <https://digital.nhs.uk/data-and-information/publications/statistical/health-survey-for-england/2019>

30 Kirklees Joint Strategic Needs Assessment, 2013

31 Kirklees Joint Strategic Needs Assessment, 2013

32 Health matters: obesity and the food environment; Public Health England; 31 March 2017

33 Kirklees Joint Strategic Needs Assessment, 2013

Appendix 1: The Obesogenic Environment

The typical adult diet exceeds recommended dietary levels of sugar and fat⁽³⁴⁾. One of the dietary trends in recent years has been an increase in the proportion of food eaten outside the home, which is more likely to be high in calories. Over half of British adults have experienced an increase in the number of fast food shops on their nearest high street since they started living there⁽³⁵⁾. The Greater London Authority takeaways toolkit states that ‘the increase in fast food outlets will be a contributory factor in the growth of the obesogenic environment’⁽³⁶⁾.

Children who are obese or overweight are increasingly developing type 2 diabetes and liver problems during childhood. They are more likely to experience bullying, low-esteem and a lower quality of life. They are highly likely to go on to become overweight adults at risk of cancer, heart and liver disease. They are also disproportionately from low-income households and black and minority ethnic families⁽³⁷⁾.

The regular consumption of takeaway food is linked to obesity in children and young adults. A study carried out involving children aged 9 -10 years old in three English cities, found that regular consumption of takeaway food, higher body fat weight, raised blood cholesterol and poor diets was greater when

compared to children who rarely or never consumed takeaways⁽³⁸⁾. Additional calorie consumption was noted among children who ate takeaway food in the home compared to children who rarely eat these meals⁽³⁹⁾.

Prevalence of fast food outlets in deprived areas

Research shows that fast-food outlets are more prevalent in areas of deprivation and this research supports the supposition that fast-food outlets are associated with weight gain in children⁽⁴⁰⁾.

Research also shows that takeaway food can be a low-cost option for purchasers⁽⁴¹⁾. Takeaway food outlets are 2-3 times as many in the most deprived parts of England compared to the least deprived areas⁽⁴²⁾. Furthermore, the frequency of takeaway food consumption among children from lower socio-economic groups⁽⁴³⁾, led to greater total calorie consumption than children in higher socio-economic groups⁽⁴⁴⁾.

The chart below illustrates the association between the density of fast-food outlets and area level deprivation. The local authorities with a higher deprivation score (more deprived) have a greater density of fast food outlets⁽⁴⁵⁾.

34 Health matters: obesity and the food environment; Public Health England; 31 March 2017

35 Butland B, Jebb S, Kopelman P, McPherson K, Thomas S, Mardell J, et al. Tackling Obesities: Future Choices – Project report. Government Office for Science, 2007

36 Takeaways Toolkit: Tools, interventions and case studies to help local authorities develop a response to the health impacts of fast food takeaways. Greater London Authority, November 2012

37 Childhood Obesity, A Plan for Action, Department of Health and Social Care, 2018

38 Pearce M, Bray I, Horswell M. Weight gain in mid-childhood and its relationship with the fast-food environment. *Journal of Public Health* Volume 40, Issue 2, June 2018, Pages 237–244

39 Donin, A. S. et al. Takeaway meal consumption and risk markers for coronary heart disease, type 2 diabetes and obesity in children aged 9-10 years: a cross-sectional study. *Arch. Dis. Child. archdischild-2017-312981* (2017). doi:10.1136/archdischild-2017-312981

40 Pearce M, Bray I, Horswell M. Weight gain in mid-childhood and its relationship with the fast food environment. *Journal of Public Health* Volume 40, Issue 2, June 2018, Pages 237-244

41 Smith, K. J. et al. Takeaway food consumption and cardio-metabolic risk factors in young adults. *Eur. J. Clin. Nutr.* 66, 577–584 (2012)

42 Drewnowski, A. & Spector, S. E. Poverty and obesity: the role of energy density and energy costs. *Am. J. Clin. Nutr.* 79, 6-16 (2004)

43 Public Health England. Obesity and the environment Density of fast food outlets (2016)

44 Donin, A. S. et al. Takeaway meal consumption and risk markers for coronary heart disease, type 2 diabetes and obesity in children aged 9-10 years: a cross-sectional study. *Arch. Dis. Child. archdischild-2017-312981* (2017). doi:10.1136/archdischild-2017-312981

45 Goffe, L., Rushton, S., White, M., Adamson, A. & Adams, J. Relationship between mean daily energy intake and frequency of consumption of out-of-home meals in the UK National Diet and Nutrition Survey. *Int. J. Behav. Nutr. Phys. Act.* 14, (2017)

Appendix 1: The Obesogenic Environment

Relationship between density of fast food outlets and deprivation

by local authority

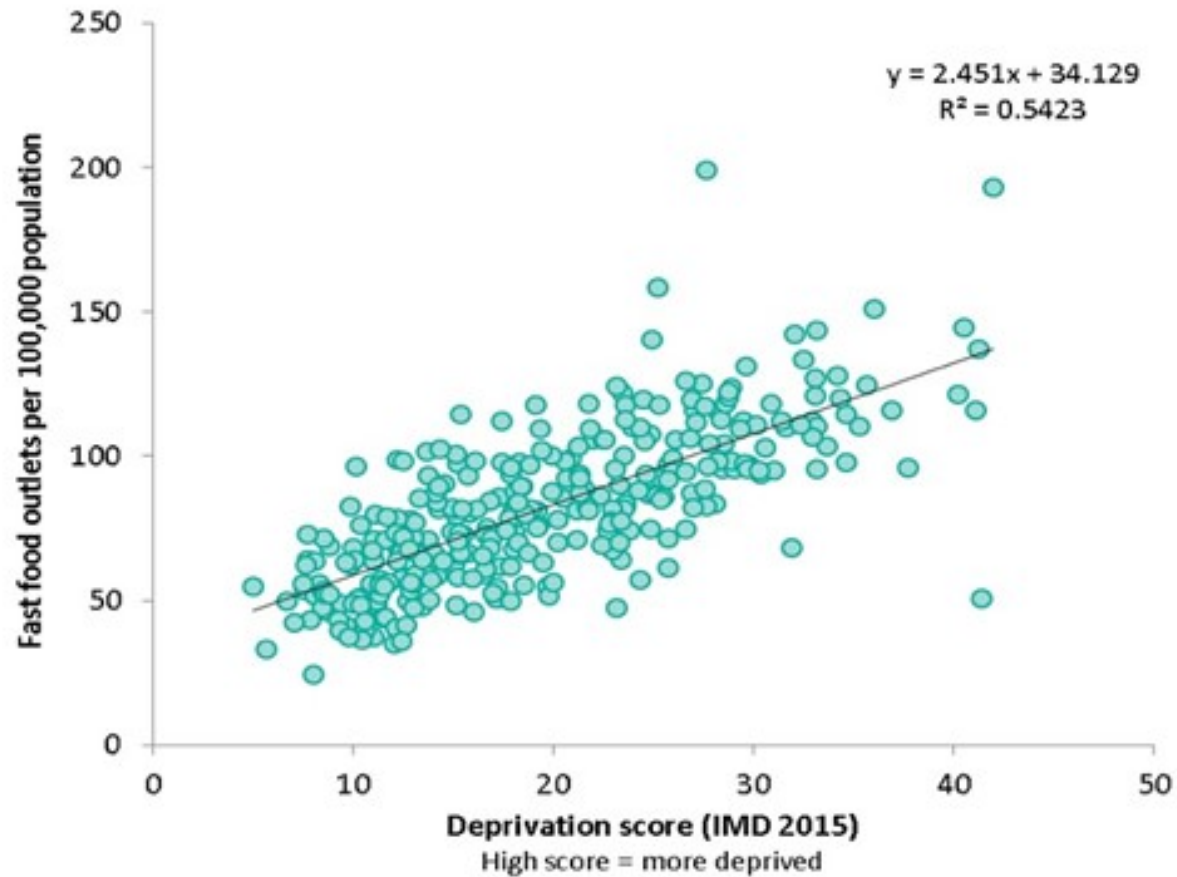


Figure 5 Relationship between density of fast food outlets and deprivation (PHE)

Appendix 1: The Obesogenic Environment

Adults living in the most deprived areas were the most likely to be obese. This difference was particularly pronounced for women, where 39% of women in the most deprived areas were obese, compared with 22% in the least deprived areas⁽⁴⁶⁾.

There are also inequalities in obesity rates between different socioeconomic groups, among children in reception and year 6, the prevalence of obesity in the 10% most deprived groups is approximately double that in the 10% least deprived. There is also a marked gradient in obesity levels among adults⁽⁴⁷⁾⁽⁴⁸⁾.

Tackling and preventing obesity is a high priority for the Government. OHID continues to prioritise reducing obesity, particularly among children and will work across the Department of Health and Social Care, the rest of government, the healthcare system, local government and industry to focus towards preventing ill health, in particular in the places and communities where there are the most significant disparities⁽⁴⁹⁾.

In Kirklees, levels of childhood obesity are rising in line with national trends. Obesity in children starting school is around twice as prevalent in those living in the most deprived areas compared to the least deprived areas, and with only a small number of overweight and obese children returning to a healthy weight in Year 6. A substantial number of children move out of the healthy weight category as they move through Primary school. This trend then continues into adulthood with 41% of 18-34 year olds in Kirklees been above a healthy weight⁽⁵⁰⁾.

In Kirklees, parents believe weight gain is a result of an external uncontrollable factor i.e. genetics or medication. Children give other reasons such as availability of cheap junk food, laziness and their parents working long hours, resulting in them eating whatever they can find when they return from school and turning to easy fast food for evening meals⁽⁵¹⁾.

Wider economic related impacts

The rising prevalence of obesity is a concern beyond the related poor health outcomes and mortality. Studies have projected an upward trend in obesity cases which will add further economic burden to healthcare services and wider society. The combined medical costs associated with treatment of obesity and associated diseases is estimated to increase by £1.9 -2 billion a year in the UK by 2030 compared to £6.1 billion in 2014 to 2015⁽⁵²⁾⁽⁵³⁾. Obesity also affects economic development, with the overall cost of obesity to the wider society estimated to be £27 billion⁽⁵⁴⁾.

Covid-19 and obesity

Throughout 2020, it has been demonstrated, that being overweight or living with obesity puts you at risk of dying from COVID-19. New evidence in the UK and internationally, indicates that being overweight or living with obesity is associated with an increased risk of hospitalisation, severe symptoms, advanced levels of treatment such as mechanical ventilation or admission to Intensive Care Units and death from COVID-19. These risks increase

46 Health Survey for England 2019 Overweight and obesity in adults and children <https://files.digital.nhs.uk/9D/4195D5/HSE19-Overweight-obesity-rep.pdf>

47 Obesity and the environment: regulating the growth of fast food outlets. Public Health England, March 2014

48 Butland B, Jebb S, Kopelman P, McPherson K, Thomas S, Mardell J, et al. Tackling Obesities: Future Choices – Project report. Government Office for Science, 2007

49 <https://fingertips.phe.org.uk/profile/national-child-measurement-programme>

50 Health and Inequalities Across the Life Course. Director of Public Health Kirklees Annual Report 2020-21 <https://www.kirklees.gov.uk/beta/delivering-services/pdf/public-health-report.pdf>

51 Kirklees Joint Strategic Needs Assessment, 2013

52 [https://www.thelancet.com/journals/lancet/article/PIIS0140-6736\(11\)60814-3/fulltext#sec510819e1224](https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(11)60814-3/fulltext#sec510819e1224)

53 Health matters: obesity and the food environment, Public Health England March 2017

54 Health matters: obesity and the food environment, Public Health England March 2017

Appendix 1: The Obesogenic Environment

progressively as an individual's body mass index (BMI) increases. The risk posed by being overweight or living with obesity to people with COVID-19 is relatively high⁽⁵⁵⁾.

Excess weight is one of the few modifiable factors for COVID-19 and so supporting people to achieve a healthier weight will be crucial to keeping people fit and well as we move forward⁽⁵⁶⁾.

Takeaway meals in England

Access to takeaway food outlets has been associated with increased takeaway food consumption and higher body weight⁽⁵⁷⁾.

The Ordnance Survey data shows that since 2017, the number of takeaway food outlets in England has risen in the last three years from 56,638 outlets to an additional 4,000 (8%) during this period⁽⁵⁸⁾. The takeaway industry has reported an increase in nominal expenditure on takeaway food from £7.9 billion in 2009 to £9.9 billion in 2016 and is set to grow further in the next five to six years⁽⁵⁹⁾. Annual growth of 2.6% per annum is forecasted over the next five years⁽⁶⁰⁾.

Takeaway food outlets are particularly associated with obesity, whereas restaurants and supermarkets are not. The food choices available in restaurant and meals eaten out of the home may be 'unhealthy', however, there is more varied food options available which include more healthy options and the

portion sizes tend to be smaller than takeaway food portions. In one UK study (of adults) only frequent use of takeaways (not cafes and not restaurants) was associated with obesity⁽⁶¹⁾⁽⁶²⁾. Access to supermarkets has been shown to be protective of obesity in adults⁽⁶³⁾⁽⁶⁴⁾.

55 Tackling obesity: empowering adults and children to live healthier lives. Department of Health & Social Care, July 2020

56 Tackling obesity: empowering adults and children to live healthier lives. Department of Health & Social Care, July 2020

57 Tackling obesity: empowering adults and children to live healthier lives. Department of Health & Social Care, July 2020

58 Keeble, M., Adams, J., White, M. *et al.* Correlates of English local government use of the planning system to regulate hot food takeaway outlets: a cross-sectional analysis. *Int J Behav Nutr Phys Act* **16**, 127 (2019)

59 Maguire, E. R., Burgoine, T. & Monsivais, P. Area deprivation and the food environment over time: A repeated cross-sectional study on takeaway outlet density and supermarket presence in Norfolk, UK, 1990-2008. *Health Place* **33**, 142–7 (2015)

60 Centre for Economics and Business Research. The Takeaway Economy Report. (2017)

61 Jaworowska, A. *et al.* Nutritional composition of takeaway food in the UK. *Nutr. Food Sci.* **44**, 414–430 (2014)

62 Penney, T. L. *et al.* Utilization of Away-From-Home Food Establishments, Dietary Approaches to Stop Hypertension Dietary Pattern, and Obesity. *Am. J. Prev. Med.* **53**, e155–e163 (2017)

63 Mackenbach, J. D. *et al.* Accessibility and Affordability of Supermarkets: Associations with the DASH Diet. *Am. J. Prev. Med.* **53**, 55–62 (2017)

64 Burgoine, T. *et al.* Interplay of Socioeconomic Status and Supermarket Distance Is Associated with Excess Obesity Risk: A UK Cross Sectional Study. *Int. J. Environ. Res. Public Health* **14**, 1290 (2017)

Density of Fast Food Outlets in England

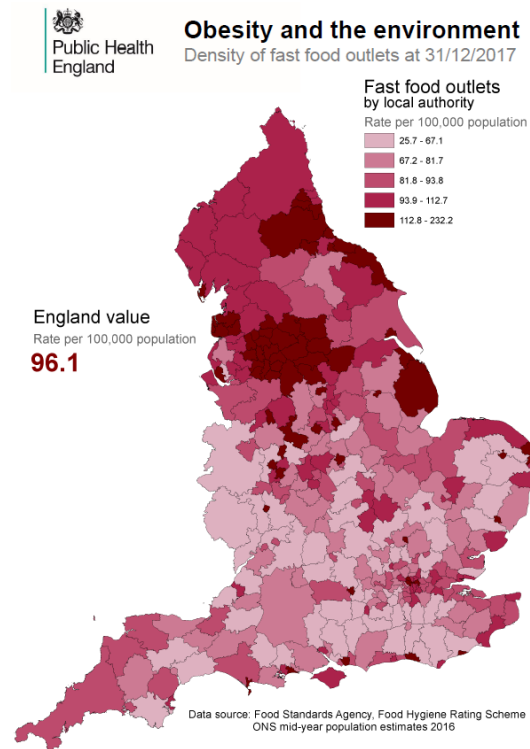


Figure 6 Density of Fast Food Outlets 2017 (PHE)

In December 2017 Kirklees recorded a density of 143.4 fast food outlets/per 100,000 population. This is worse compared to the benchmarks of England recorded at 96.1 and is worse than all the West Yorkshire Authorities⁽⁶⁵⁾.

Fast Food Outlets in Kirklees

Ward	Number of Fast Food Outlets	Fast Food Outlets per 1,000 population
Newsome (inc. Huddersfield Town centre)	75	3.09
Dalton	47	2.72
Greenhead	56	2.64
Cleckheaton	34	1.96
Heckmondwike	34	1.96
Dewsbury East	35	1.74
Batley East	28	1.45
Colne Valley	24	1.35
Dewsbury South	26	1.35
Crosland Moor and Netherton	25	1.28
Golcar	23	1.26
Birstall and Birkenshaw	20	1.18
Dewsbury West	24	1.07
Denby Dale	17	1.01
Mirfield	20	1.00
Liversedge and Gomersal	20	1.00

65 https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/741555/Fast_Food_map.pdf

Appendix 1: The Obesogenic Environment

Ward	Number of Fast Food Outlets	Fast Food Outlets per 1,000 population
Batley West	20	0.96
Holme Valley North	16	0.93
Lindley	17	0.82
Ashbrow	16	0.78
Holme Valley South	13	0.67
Almondbury	12	0.66
Kirkburton	10	0.61

Table 8 Number of fast food outlets per 1,000 population by ward. Source: Public Health England Fast Food Outlets at 31/12/2017 and ONS mid-2020 population estimates

Childhood Obesity in Kirklees

Based on the 2018/19 National Child Measurement Programme, approximately 1 in 4 (23.2%) of reception age children and 1 in 3 (35.6%) of year 6 children had excess weight in 2018/19. It is important to recognise that the numbers of children have excess weight can vary significantly between different wards in Kirklees. This is detailed below:

Kirklees Ward	Reception excess weight (%)	Year 6 excess weight (%)
Almondbury	23.3	31.6
Ashbrow	24.2	46.6
Batley East	20.3	34.6

Kirklees Ward	Reception excess weight (%)	Year 6 excess weight (%)
Batley West	21.7	33.9
Birstall and Birkenshaw	19.9	37.7
Cleckheaton	32.4	42.0
Colne Valley	20.7	31.3
Crosland Moor and Netherton	20.1	38.7
Dalton	32.6	35.9
Denby Dale	28.0	35.2
Dewsbury East	26.1	37.6
Dewsbury South	28.0	37.4
Dewsbury West	25.1	42.0
Golcar	17.4	34.4
Greenhead	24.1	34.2
Heckmondwike	22.0	42.0
Holme Valley North	15.5	30.5
Holme Valley South	20.8	28.2
Kirkburton	19.0	32.6
Lindley	22.0	27.9
Liversedge and Gomersal	22.6	37.2

Appendix 1: The Obesogenic Environment

Kirklees Ward	Reception excess weight (%)	Year 6 excess weight (%)
Mirfield	19.0	27.8
Newsome	26.5	33.5

Table 9 Childhood obesity in Kirklees by ward NCMP (Year 2018/19)

Adult Obesity in Kirklees

Over half of all adults in Kirklees are overweight or obese. The proportion of adults who are obese has increased from 1 in 6 (17%) in 2005 to 1 in 5 (21%) in 2021⁽⁶⁶⁾. It is important to recognise that levels of adults who are overweight or obese can vary significantly between different wards in Kirklees. The areas with the highest percentage of overweight or obese adults are Dalton (65%) and Dewsbury West (74%) whilst the lowest proportions of overweight or obese adults are in Holme Valley South (51%) and Liversedge & Gomersal (53%).

Ward	Adults overweight or obese total	Adults overweight	Adults obese
Almondbury	58%	30%	23%
Ashbrow	59%	35%	21%
Batley East	57%	34%	19%
Batley West	63%	34%	25%
Birstall and Birkenshaw	64%	38%	19%

Ward	Adults overweight or obese total	Adults overweight	Adults obese
Cleckheaton	64%	38%	26%
Colne Valley	55%	38%	15%
Crosland Moor and Netherton	54%	31%	21%
Dalton	65%	32%	27%
Denby Dale	53%	27%	18%
Dewsbury East	63%	28%	31%
Dewsbury South	64%	43%	19%
Dewsbury West	74%	42%	25%
Golcar	57%	32%	20%
Greenhead	60%	32%	26%
Heckmondwike	61%	29%	24%
Holme Valley North	54%	36%	14%
Holme Valley South	51%	34%	15%
Kirkburton	57%	37%	16%
Lindley	55%	38%	17%
Liversedge and Gomersal	53%	35%	14%
Mirfield	64%	37%	24%

Appendix 1: The Obesogenic Environment

Ward	Adults overweight or obese total	Adults overweight	Adults obese
Newsome	56%	27%	27%
Kirklees Average	59%	34%	21%

Table 10 Adult obesity levels in Kirklees by ward Source: Current Living in Kirklees Survey 2021

The toolkit uses derived obesity rates at LSOA level based on the proportion of obese patients on GP registers. CLiK survey figures are self-reported, but the sample size is too small to enable figures at LSOA level to be used. As the methodologies differ, CLiK survey obesity rates are not comparable to GP register rates.

To summarise, the above information shows that obesity, and the long term consequences of obesity, is a growing problem with a significant burden on health and society. In addition, our food choices also directly cause and exacerbate other health risks un-related to obesity, such as the impact of trans-fat use on cardiovascular risk; and impact of salt in food on the risks from high blood pressure.

This appendix also shows that obesity is influenced by many factors, and hot food takeaways are just one of those factors. For this reason, the requirements shown in section 4 with regard to planning applications for hot food takeaways is not seen as the sole solution to reducing obesity in Kirklees. Kirklees Council and its partners are taking a broader approach to tackling obesity, which the requirements in the Hot Food Takeaway SPD can contribute to. More information on this whole systems, holistic approach (including working with schools, healthy eating campaigns and community cooking skills) can be found on the Kirklees Council web pages.

Appendix 2: Supporting information and evidence for HFT2 Town Centre Vitality and Viability

National Town Centre context

In recent years, there has been much research done considering the issues relating to town centres and the high street by Government and many other bodies. The Government published a report on High streets and town centres in 2030 in February 2019 concluding that;

'We are convinced that high streets and town centres will survive, and thrive, in 2030 if they adapt, becoming activity-based community gathering places where retail is a smaller part of a wider range of uses and activities....Individual areas will need to identify the mix that best suits their specific characteristics, local strengths, culture and heritage. Fundamentally, community must be at the heart of all high streets and town centres in 2030'.

A lack of diversity on high streets where there is the clustering of unhealthy outlets including fast food outlets has been identified and it is not healthy for local communities or the economy⁽⁶⁷⁾.

Local Evidence

The Local Planning Authority assesses the health and vitality of defined centres within the Kirklees District on an annual/biannual basis through the town centre audit programme. Principal, town and district centres are assessed annually and local centres are assessed every other year. The occupancy of ground floor units and gross ground floor floorspace within defined town centre boundaries are monitored including the number of hot food takeaways.

The audit programme data provides a snapshot of the occupancy of centres at the time the survey was undertaken. Therefore, the number and occupancy of shop units including those in use as hot food takeaways will change over time effecting the mix and balance of the type of shops, services, and unit vacancy within centres. Therefore, the percentage of hot food takeaway units, vacant units and total number of shop units surveyed will also change overtime. The latest occupancy data is published in the council's authority monitoring report and is used as a starting point for the consideration of planning applications.

The data in Table 11 'Town Centre Occupancy Data 2018/2019' is from the occupancy surveys of principal, town and district centres undertaken in 2019 and local centres undertaken in 2018 prior to the Covid pandemic. This data highlights the mix of main town centre uses within each of the defined centres at the time of the survey. As part of that mix the survey has identified that the number of hot food takeaways within the principal centres Primary Shopping Areas (PSA) is 2.6 %, town centres is 6.7% and in district centres it is 10.3% of all the units recorded in main town centre uses (as defined in the glossary of the Local Plan and National Planning Policy Framework) including those that are vacant. The number of hot food takeaway units cumulatively within the 61 defined local centres is 15%, however, this ranges from an individual centre having no hot food takeaways at all to the highest of 40%.

The hot food takeaway thresholds set out in this guidance reflect the role and function that the centres undertake which are set out in Local Plan policy LP13 Town centre uses.

Principal town centres and town centres provide for the shopping needs of residents across Kirklees and are the focus for financial services, offices, entertainment and leisure, arts, culture, tourism, further education, and health services.

67 Royal Society for Public Health, Health on the High Street Running on empty 2018 <https://www.rsph.org.uk/static/uploaded/dbdbb8e5-4375-4143-a3bb7c6455f398de.pdf>

Appendix 2: Supporting information and evidence for HFT2 Town Centre Vitality and Viability

District Centres provide a range of shopping for everyday needs and are the local focus for basic financial services, food and drink, entertainment, leisure and tourist facilities and health services with Local Centres providing for top-up shopping and food and drink.

Some centres have existing high concentrations of hot food takeaways for their role and function such as Heckmondwike Town Centre at 12.4%, Marsh, Moldgreen, Ravensthorpe, Skelmanthorpe district centres at 15.4%, 19.4%, 17.5%, 15.6% respectively and over half of the local centres (33) are above 15%. Centres need to be allowed to grow and diversify with a suitable mix of uses to promote their long-term vitality and viability and the over concentration of one type of use is detrimental to mix and balance of uses within them.

However, long term vacant units are also detrimental to the vitality and viability of centres and where there is no demand for other town centre uses it can be preferable for it to be occupied by a hot food takeaway. The vacancy rate as identified in the 2019 town centre occupancy survey shows that within principal, town and district centres, it ranges from 0 to 30%. In the local centres (2018 occupancy survey data) which vary from the largest that have above 40 units to the smallest which have less than 10 units within them, the vacancy rate ranges from 0 to 33%. The Footfall and Vacancies Monitor⁽⁶⁸⁾ from the British Retail Consortium and Springboard has reported that the national town centre vacancy rate was 10.3% in July 2019, the highest since January 2015.

68 <https://www.retailgazette.co.uk/blog/2019/08/shop-vacancy-rate-four-year-high-brc-springboard-footfall-monitor/>

Appendix 2: Supporting information and evidence for HFT2 Town Centre Vitality and Viability

2018/2019 Town Centre Occupancy Data

Local Plan Town Code	Defined Centre	Comparison (non food goods)	Convenience (food goods)	Financial & Business	Leisure Services	Retail Services	Vacant outlets	Total	%Vacant	HFT's (count)	HFTA's % of total units	Average of the count (No. of HFT/No of centres).
TCB1	Huddersfield PSA	175	38	36	97	57	88	491	17.9	10	2	
TCB2	Dewsbury PSA	52	12	14	26	24	42	170	24.7	7	4.1	
Principal Centres (2019)	Total	227	50	50	123	81	130	661	19.7	17	2.6	8.5
TCB 3	Batley	30	16	9	26	29	22	132	16.7	7	5.3	
TCB 4	Cleckheaton	48	15	22	34	30	9	158	5.7	11	7	
TCB 5	Holmfirth	52	13	16	39	26	11	157	7.0	5	6.7	
TCB 6	Heckmondwike	36	11	5	28	28	13	121	10.7	15	12.4	
Town Centres (2019)	Total	166	55	52	127	113	55	568	9.7	38	6.7	9.5
DCB 1	Almondbury	9	4	0	4	6	1	24	4.2	1	4.2	
DCB 2	Birstall	11	5	6	18	18	3	61	4.9	7	11.5	
DCB 3	Denby Dale	8	5	3	3	4	0	23	0.0	3	13	
DCB 4	Honley	8	4	4	9	7	1	33	3.0	0	0	
DCB 5	Kirkburton	7	4	4	3	10	1	29	7.1	1	3.5	
DCB 6	Lindley	14	7	2	15	13	2	53	3.8	5	3.8	

Appendix 2: Supporting information and evidence for HFT2 Town Centre Vitality and Viability

Local Plan Town Code	Defined Centre	Comparison (non food goods)	Convenience (food goods)	Financial & Business	Leisure Services	Retail Services	Vacant outlets	Total	%Vacant	HFT's (count)	HFTA's % of total units	Average of the count (No. of HFT/No of centres).
DCB 7	Marsden	10	6	0	11	2	1	30	3.3	2	6.7	
DCB 8	Marsh	17	5	4	20	18	1	65	1.5	10	15.4	
DCB 9	Meltham	11	5	3	13	10	1	43	2.3	5	11.6	
DCB 10	Milnsbridge	18	5	5	14	10	7	59	11.9	7	11.9	
DCB 11	Mirfield	32	7	9	15	17	4	84	4.8	4	4.8	
DCB 12	Moldgreen	8	3	1	13	10	1	36	2.8	7	19.4	
DCB 13	Ravensthorpe	20	11	2	16	9	5	63	7.9	11	17.5	
DCB 14	Skelmanthorpe	5	4	3	11	7	2	32	6.3	5	15.6	
DCB 15	Slaithwaite	12	7	4	23	9	1	56	1.8	6	10.7	
District Centres (2019)	Total	190	82	50	188	150	31	691	4.5	71	10.3	4.7
LCB 1	Aspley	9	6	0	13	6	4	38	10.5	8	21.1	
LCB 2	Batley Carr	1	1	0	2	2	0	6	0.0	1	16.7	
LCB 3	Batley Rd	5	2	0	4	5	4	20	20.0	2	10.0	
LCB 4	Berry Brow	0	1	0	3	2	2	8	25.0	1	12.5	
LCB 5	Birchcliffe	0	2	1	3	3	0	9	0.0	0	0.0	
LCB 6	Birkby	11	14	4	16	12	4	61	6.6	11	18.0	
LCB 7	Birkenshaw	2	3	2	5	3	1	16	6.3	1	6.3	

Appendix 2: Supporting information and evidence for HFT2 Town Centre Vitality and Viability

Local Plan Town Code	Defined Centre	Comparison (non food goods)	Convenience (food goods)	Financial & Business	Leisure Services	Retail Services	Vacant outlets	Total	%Vacant	HFT's (count)	HFTA's % of total units	Average of the count (No. of HFT/No of centres).
LCB 8	Blackmoorfoot Road	1	4	1	3	3	0	12	0.0	2	16.7	
LCB 9	Brockholes	0	1	0	3	2	0	6	0.0	1	16.7	
LCB 10	Chickenley	1	2	0	3	2	0	8	0.0	1	12.5	
LCB 11	Cophorn Gdns/ Keldergate	3	1	0	0	2	1	7	14.3	1	14.3	
LCB 12	Crosland Moor	6	2	1	12	8	3	32	9.4	8	25.0	
LCB 13	Cross Bank Carlinghow	0	1	0	1	2	1	5	20.0	1	20.0	
LCB 14	Earlsheaton	1	3	0	6	4	0	14	0.0	1	7.1	
LCB 15	Edge Top Road Thornhill	2	2	0	2	1	0	7	0.0	1	14.3	
LCB 16	Fartown Bar	9	6	4	11	12	2	44	4.5	6	13.6	
LCB 17	Golcar	4	3	0	2	4	1	14	7.1	0	0.0	
LCB 18	Gomersal	5	2	1	3	5	2	18	11.1	1	5.6	
LCB 19	Greenside	3	3	0	5	1	0	12	0.0	2	16.7	
LCB 20	Halifax Rd, Dewsbury	1	1	0	0	2	2	6	33.3	0	0.0	
LCB 21	Hillhouse	8	6	4	10	10	1	39	2.6	2	5.1	
LCB 22	James Street	0	1	0	3	1	0	5	0.0	2	40.0	

Appendix 2: Supporting information and evidence for HFT2 Town Centre Vitality and Viability

Local Plan Town Code	Defined Centre	Comparison (non food goods)	Convenience (food goods)	Financial & Business	Leisure Services	Retail Services	Vacant outlets	Total	%Vacant	HFT's (count)	HFTA's % of total units	Average of the count (No. of HFT/No of centres).
LCB 23	Kirkheaton	4	3	0	5	7	1	20	5.0	3	15.0	
LCB 24	Lepton	2	3	0	3	0	0	8	0.0	3	3.5	
LCB 25	Linthwaite	2	2	0	11	4	0	19	0.0	5	26.3	
LCB 26	Littletown	2	2	0	5	3	1	13	7.7	2	15.4	
LCB 27	Lockwood	13	5	0	15	11	9	53	17.0	7	13.2	
LCB 28	Long Lane, Dalton	0	1	0	2	2	0	5	0.0	0	0.0	
LCB 29	Lower Hopton	1	1	0	2	2	2	8	25.0	1	12.5	
LCB 30	Lower Staincliffe	0	2	0	3	2	0	7	0.0	1	14.3	
LCB 31	Manchester Rd/ Longroyd Lane	2	3	0	5	1	1	12	8.3	3	25.0	
LCB 32	Moorend	5	4	0	10	4	2	25	8.0	5	20.0	
LCB 33	Mount Pleasant	5	6	0	1	7	0	19	0.0	1	5.3	
LCB 34	Mount St	1	1	0	2	1	0	5	0.0	1	20.0	
LCB 35	Netherton	4	4	0	5	7	0	20	0.0	4	20.0	
LCB 36	New Hey Rd	2	2	2	5	4	0	15	0.0	2	13.3	
LCB 37	New Mill	1	2	0	5	3	1	12	8.3	2	16.7	
LCB 38	Newsome	3	4	0	6	3	1	17	5.9	3	17.6	
LCB 39	Oakenshaw	4	2	1	2	1	4	14	28.6	2	14.3	

Appendix 2: Supporting information and evidence for HFT2 Town Centre Vitality and Viability

Local Plan Town Code	Defined Centre	Comparison (non food goods)	Convenience (food goods)	Financial & Business	Leisure Services	Retail Services	Vacant outlets	Total	%Vacant	HFT's (count)	HFTA's % of total units	Average of the count (No. of HFT/No of centres).
LCB 40	Old Bank Rd	2	0	0	7	4	0	13	0.0	4	30.8	
LCB 41	Paddock	9	7	0	10	4	0	30	0.0	7	23.3	
LCB 42	Paddock Foot	3	2	2	4	2	2	15	13.3	2	13.3	
LCB 43	Rawthorpe	1	2	0	2	0	0	5	0.0	2	40.0	
LCB 44	Roberttown	5	3	0	6	6	0	20	0.0	2	10.0	
LCB 45	Salendine Nook	4	1	1	3	5	0	14	0.0	1	7.1	
LCB 46	Saviletown	7	3	0	2	4	2	18	11.1	1	5.6	
LCB 47	Scholes (HW)	2	3	0	7	4	1	17	5.9	4	23.5	
LCB 48	Scissett	21	2	0	8	11	1	43	2.3	2	4.7	
LCB 49	Sheepridge	1	1	0	4	2	1	9	11.1	2	22.2	
LCB 50	Shepley	1	2	1	2	4	0	10	0.0	1	10.0	
LCB 51	Six Lane Ends	1	2	1	3	3	0	10	0.0	3	30.0	
LCB 52	Slaithwaite Road	2	2	0	5	3	0	12	0.0	3	25.0	
LCB 53	Staincliffe	1	1	0	5	3	0	10	0.0	2	20.0	
LCB 54	The Knowl	0	4	0	1	7	2	14	14.3	1	7.1	
LCB 55	Thornhill	4	3	0	3	4	1	15	6.7	3	20.0	
LCB 56	Thornhill Lees	2	2	0	4	4	3	15	20.0	3	20.0	
LCB 57	Thornton Lodge	9	2	2	2	9	9	33	27.3	1	3.0	

Appendix 2: Supporting information and evidence for HFT2 Town Centre Vitality and Viability

Local Plan Town Code	Defined Centre	Comparison (non food goods)	Convenience (food goods)	Financial & Business	Leisure Services	Retail Services	Vacant outlets	Total	%Vacant	HFT's (count)	HFTA's % of total units	Average of the count (No. of HFT/No of centres).
LCB 58	Trinity Street	3	2	2	9	1	1	18	5.6	4	22.2	
LCB 59	Wakefield Road, Earlsheaton	2	0	0	1	2	1	6	16.7	1	16.7	
LCB 60	Wakefield Road/ Dalton Green Lane	2	1	0	4	6	1	14	7.1	2	14.3	
LCB 61	Waterloo	5	2	2	12	6	0	27	0.0	6	22.2	
Local Centres (2018)	Total	210	161	32	301	248	75	1027	7.3	155	15.1	2.6

Table 11 Town Centre Occupancy Data 2018/2019

Appendix 3: Supporting information and evidence for HFT3 Proximity to Schools

Appendix 3: Supporting information and evidence for HFT3 Proximity to Schools

Further evidence supporting a restrictive buffer around Kirklees schools

This is an evidence base focusing on the harms of excess weight and the relationship between hot food takeaways within close proximity of schools and levels of obesity. It provides the evidence to support the requirement shown in HFT3. This appendix covers the impacts of obesity, particularly childhood obesity, and the current situation locally.

In Kirklees there are increasing numbers of children and adults who are overweight or obese and physically inactive. The evidence from the National Child Measurement Programme (2018/19) shows that in Kirklees approximately 1 in 4 (23.2%) of reception age children (5 year olds) and 1 in 3 (35.6%) of year 6 children (11 year olds) had excess weight in 2018/19. As children move into secondary school weight management continues to be a concern across Kirklees.

Increased obesity from a younger age contributes to a negative impact on the ability of children to live a healthier lifestyle⁽⁶⁹⁾. Obese children are more likely to be ill, be absent from school due to illness, experience health-related limitations and require more GP appointments than normal weight children. As children constitute the future workforce of an economy, this is also associated with a reduction in employee productivity and increased spending on health

care over the lifetime⁽⁷⁰⁾. This clearly illustrates the importance and relevance of addressing childhood obesity in the UK, if the UK economy and society is to make the most of the available human resources.

Research and reports into the impact of hot food takeaways near schools is an area that continues to expand. There are a number of case studies that look at councils who are using the planning system to introduce restrictions on the proliferation of fast food takeaways, taking a holistic approach to tackling the challenge of obesity⁽⁷¹⁾.

Hot food takeaways within easy walking distance of schools can provide an attractive and affordable food option for pupils. Research has indicated that children attending schools near fast food outlets are more likely to be obese than those whose schools are more inaccessible to such outlets⁽⁷²⁾.

A concentration of hot food takeaways in a particular area can create what are termed “obesogenic environments” (see Appendix 1) in which pupils have ready access to fast food outlets when travelling to and from school⁽⁷³⁾.

Researchers have also successfully identified the link between the presence of a hot food takeaway within 400m of schools and childhood obesity⁽⁷⁴⁾⁽⁷⁵⁾. There is evidence to show that children regularly eat from hot food takeaways if they are located within the places where they spend time, i.e. either the school or home environment.

69 Janssen, H. G., Davies, I. G., Richardson, L. D., & Stevenson, L. (2017). Determinants of takeaway and fast food consumption: a narrative review. *Nutrition research reviews*, 1-19

70 Cawley J. The Economics Of Childhood Obesity. *Health Affairs* 29, NO. 3 (2010): 364-371

71 Tipping the scales Case studies on the use of planning powers to restrict hot food takeaways. Local Government Association, 2016

72 Engler-Stringer, R., Ha, L., Gerrard, A. and Muhajarine, N. (2014). The community and consumer food environment and children's diet: a systematic review. *BMC Public Health*. 14 (522)

73 <https://journals.sagepub.com/doi/pdf/10.1177/0017896910364834>

74 Fraser, L. K., Edwards, K. L., Cade, J., & Clarke, G. P. (2010). The geography of fast food outlets: a review. *International journal of environmental research and public health*, 7(5), 2290-2308

75 Barrett, M., Crozier, S., Lewis, D., Godfrey, K., Robinson, S., Cooper, C., ... & Vogel, C. (2017). Greater access to healthy food outlets in the home and school environment is associated with better dietary quality in young children. *Public health nutrition*, 20(18), 3316-3325

Appendix 3: Supporting information and evidence for HFT3 Proximity to Schools

A survey of nearly 2,500 Brent secondary school pupils showed that pupils attending schools with takeaways within 400m are more likely to visit a hot food takeaway after school at least once a week (62 per cent) than pupils at schools with no takeaways within a 400m radius (43 per cent)⁽⁷⁶⁾. Southwark carried out a survey in support of their local plan which showed pupils from schools with a closed gate policy would skip lunch in order to save money to spend in takeaways on the way home⁽⁷⁷⁾.

Research on the impact of local food environment round schools and its impact on diet, with a specific focus on primary and secondary schools in East London, concluded that the close proximity of hot food takeaway not only influences the obesity of the secondary school students but also the primary school students⁽⁷⁸⁾. This is because although primary school children are not allowed to leave by themselves, the lack of awareness amongst parents regarding child healthcare and obesity means parents are likely to walk the children to the takeaway.

Further to this, research found that '*more frequent takeaway meal consumption in children was associated with unhealthy dietary nutrient intake patterns and potentially with adverse longer term consequences for obesity and coronary heart disease risk.*'⁽⁷⁹⁾ Researchers have found that schools have more fast food outlets in close vicinity than would be expected by chance and that this was amplified in more deprived areas and that banning any new fast food outlets opening within 400m of schools could help reduce children's exposure to fast food⁽⁸⁰⁾.

In an analysis of the Millennium Cohort Study data the researchers found for certain children, in particular those with maternal education below degree level and those with lower self-regulation, that living near fast food restaurants or attending schools near fast food restaurants was associated with an increased Body Mass Index (50).

In 2019, the Royal Society for Public Health (RSPH) published a document⁽⁸¹⁾, one of the key learnings from this piece of work is that there is often a crucial window of exposure to obesogenic environments for children during their daily routes to and from school, which can have a substantial impact on food consumption and that unhealthy fast food outlets have in some cases become de facto extensions of the school environment. This often isn't driven by a desire for food but by a lack of other appropriate, safe, affordable and socially acceptable spaces for young people after school.

Where we live has a huge role to play in tackling childhood obesity, whether it is the way towns and cities are designed or how many fast food outlets can operate near schools. Local authorities have a range of powers and opportunities to create healthier environments, including developing planning policies to limit the opening of additional fast food outlets close to schools and in areas of over-concentration. They can also offer professional training, parenting support, social marketing campaigns and weight management services⁽⁸²⁾.

Kirklees considers that this guidance should be applied to both primary and secondary schools, as this approach takes into account the overall influence of the "obesogenic environment". It is acknowledged that the majority of

76 [mayor_of_london_-_m91_hot_food_takeaways.pdf](#)

77 Southwark Council (2018). P45 Hot Food Takeaways A Review of the Evidence. [Online]

78 Smith, D., Cummins, S., Clark, C., & Stansfeld, S. (2013). Does the local food environment around schools affect diet? Longitudinal associations in adolescents attending secondary schools in East London. BMC public health, 13(1), 70

79 Donin A, Nightingale C, Owen C, Rudnicka A, Cook D and Whincup P. Takeaway meal consumption and risk markers for coronary heart disease, type 2 diabetes and obesity in children aged 9–10 years: a cross-sectional study Archives of Disease in Childhood. Population Health Research Institute, St George's, University of London, London, 2017

80 Davis B & Carpenter C. Proximity of Fast-Food Restaurants to Schools and Adolescent Obesity. American Journal of Public Health, March 2009; 99(3): 505–510

81 Routing out childhood obesity. Royal Society for Public Health, 2019

82 Childhood obesity: a plan for action Chapter 2. HM Government June 2018

Appendix 3: Supporting information and evidence for HFT3 Proximity to Schools

primary school pupils are likely to be accompanied by a supervising parent, guardian or adult, during the journeys to and from school. Some primary school children, such as those in year 6, are allowed to walk to and from school on their own, in preparation for the transfer to secondary schools. It is not just about the food choices that a secondary school pupil might make at lunch time or walking to and from home, but also about the food that the parents of primary age children might purchase for their children, and also the influence that heavily marketed 'fast-food' might have on the attitudes of impressionable young children. The Council considers the issue of primary school children using hot food takeaways is a concern that should be addressed alongside secondary school pupils.

Evidence for using a 400m-walking-distance restrictive buffer relative to Kirklees schools

One of the assumptions used to support the criteria is that 0.4km (or 400m) is a convenient distance people are willing to walk to either access facilities or services on foot or walk to a bus stop to access a facility, this distance is used by many local authorities who have adopted similar policies. This distance is approximately equivalent to a 5 minute walk time, resulting in a total 10 minute walk time (five minutes in each direction)⁽⁸³⁾. The 400m distance and the resultant 10 minute walking duration leaves sufficient time for pupils to leave school, purchase the hot food and subsequently return for the afternoon lessons.

A 10 minute walk one way (total 20 minutes walk time there and back) was considered as there is some evidence to show that it is this greater distance that can impact on the consumption of food from hot food takeaways by pupils⁽⁸⁴⁾, but this evidence is currently limited and therefore Kirklees will be using the more robust and evidenced 5 minute walk approach. The same

study observed hundreds of pupils leaving schools during a lunchtime, with a vast majority of the observed pupils purchasing unhealthy food types. The popular diet for those who ate off-campus consisted of fizzy drinks, chips and confectionery items.

There is acknowledgement that a 400m circumference as the crow flies (used by some local authorities) may have different walking times dependent on the street geography of the area. The zones are based on a 5 minute walk from the entrances of a school, created using RouteFinder™ and therefore include consideration of the street geography and create a more accurate indication of a 5 minute walk from the school gates. This will guide those involved in submitting hot food takeaway applications and those involved in the determination of these applications. Additionally, using this approach will contribute towards avoiding legal challenge when enforcing the requirement in the SPD. For example, a planning appeal in Barking and Dagenham was allowed as the Inspector considered that 400m would equate to a 5 minute walk as the crow flies and that taking into account site specific factors the actual journey time from the nearest school would take longer than 5 minutes. As a result, the inspector considered it unlikely that the proposed takeaway would therefore attract custom from pupils of the school⁽⁸⁵⁾.

The Inspector for an appeal in the London Borough of Lambeth, considered that it is more appropriate to use a typical walking route as a guide rather than a direct linear measurement. This is because this is typically the route that children would take whereas a linear route may cut across roads, gardens, railway lines etc⁽⁸⁶⁾.

Walking speeds can vary greatly depending on many factors such as height, weight, age, terrain, surface, load, effort and fitness. The average human walking speed is about 5.0 km per hour (3.1 miles per hour). Specific studies

83 Obesity and the environment: regulating the growth of fast food outlets. Public Health England, March 2014

84 Hot-food takeaways near schools; An impact study on takeaways near secondary schools in Brighton and Hove. Brighton and Hove City Council, September 2011

85 122 Fanshawe Avenue, Barking, Change of use from A2 to A5 takeaway (Ref: APP/Z5060/A/11/2167225)

86 489-491 Norwood Road, London SE27 9DJ Change of use of vacant ground floor commercial premises to mixed A3/A5 (restaurant and hot food takeaway) use (Ref: APP/N5660/W/17/3178462)

Appendix 3: Supporting information and evidence for HFT3 Proximity to Schools

have found pedestrian walking speeds ranging from 4.51 km per hour (2.80 mph) to 4.75 km per hour (29.95 mph) for older individuals and from 5.32 km per hour (3.31 mph) to 5.43 km per hour (3.37 mph) for younger individuals and a brisk walking speed can be around 6.5 km per hour (4.0mph)⁽⁸⁷⁾⁽⁸⁸⁾. With this in mind, and to encompass the variety in age of the pupils, students and families that this requirement is aimed at, the 400m walking distance restrictive buffer has been created using the overall average walking speed of 4.8km per hour, this equates to a 5 minute walk time of 0.4km (or 400m), which is a convenient distance people are willing to walk to either access facilities and services on foot, or walk to a bus stop to access a facility⁽⁸⁹⁾.

Methodology used to generate a 400m-walking-distance restrictive buffer relative to Kirklees schools

A convenient method to map areas within a fixed walking distance of a source location is to use standard point-buffer functionality within a GIS. However, such an approach is premised on the notion that all parts of the resultant circular buffer are uniformly accessible from a given source point (e.g. school) and not constrained by real-world barriers/obstacles on the ground. In reality, (unconstrained) as-the-crow-flies movement on the ground from a source point is usually limited in occurrence. The circular-buffer approach therefore tends to exaggerate the overall areal extent of a source point's surroundings that are within a given walking distance in practice. Such a shortcoming does not provide a particularly sound basis for defining a restrictive zone intended to limit access to takeaways in proximity to schools.

As an alternative, two further means of generating appropriate 'restrictive' buffers were also examined. Specifically use of: (i) isodistance-distance buffering in MapInfo using the Drivetime web service; and (ii) distance buffering with RouteFinder™ (Network Analysis System for MapInfo) software. Both methods require use of a route network and source-location layer as input.

Drivetime-isodistance output was characterised by a buffer that tapered markedly with increased distance from the source location, yielding a poor correspondence to properties alongside the route layer used. Results using RouteFinder™ software were better, with reliable distances along input routes obtained.

Kirklees Council has opted for a hybrid approach to produce a mapped-restriction zone based on a 400m walking distance of primary and secondary schools (within which, establishment of hot food takeaway outlets will be restricted). The approach utilises (a) RouteFinder™ output (to determine only those portions of a constructed, district-wide walkable routes network within a specified distance of mapped access points (in/out of the school grounds); with (b) standard, 30m-line-buffer output applied to the output obtained at (a). Use of mapped access points (in/out of the school grounds) was considered preferable to the use of a single point (or polygon centroid) often used to depict a point within the footprint of the principal school building.

An essential pre-requisite of this methodology involves the acquisition/production of a district-wide, walkable-routes network (WRN). The WRN for Kirklees was constructed by combining these GIS data: (i) OS MasterMap Highways Network data – specifically “RoadLink (excluding motorways)”, “PathLink” and “ConnLink”; with (ii) the Local Authority's Public Rights of Way (PROW) map layer. Network topology and error identification/correction was assisted using the PolyBuilder tool in MapInfo. School access points (SAPs) were based substantially on Ordnance Survey (OS) MasterMap® Sites Layer data, with limited amendment to rectify recognised/identified omissions. Using the WRN and SAPs as input, 370m-walking-distance output was obtained using RouteFinder™, from which only those portions of the district-wide WRN within 370m of SAPs could be selected. Applying a standard, 30m-line buffer to that reduced-selection

87 Study Compares Older and Younger Pedestrian Walking Speeds. TranSafety, Inc. 1997 – 10 -01

88 Aspelin, Karen (2005-05-25). Establishing Pedestrian Walking Speeds. Portland State University

89 Providing for Journeys on Foot. CIHT 2000

Appendix 3: Supporting information and evidence for HFT3 Proximity to Schools

WRN_(rs) yielded the final (370 + 30 = 400m) buffer (strictly, a 30m buffer of all walkable routes within 370m of SAPs). This approach provides good identification of properties alongside the WRN_(rs).

Appendix 4: Explanation of points based Public Health Toolkit

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Explanation of points based Public Health Toolkit

The council has a responsibility to enable and support residents to live in and access healthy environments. In order to reflect the complexities of the obesogenic environment, the council has developed a tool which will support the decision-making process for hot food takeaway proposals. The assessment tool uses a range of local data, known as indicators. These indicators were chosen to represent the health of the population living in a particular location. These indicators are also susceptible to be negatively impacted by fast food takeaways due to the types of the foods sold at such establishments so are important to consider during the application process. The indicators include:

- Index of Multiple Deprivation (IMD)* quintile
- Percentage of adults overweight
- Percentage of adults obese
- Percentage of 5-year olds with excess weight
- Percentage of 11-year olds with excess weight
- Diabetes prevalence rate
- Coronary heart disease prevalence rate

*The Indices of Deprivation are a unique measure of relative deprivation at a small local area level (Lower-layer Super Output Areas) across England and have been produced by the Government in similar way since 2000. The Indices provide a set of relative measures of deprivation for small areas across England, based on seven different domains, or facets, of deprivation:

- Income Deprivation
- Employment Deprivation
- Education, Skills and Training Deprivation
- Health Deprivation and Disability

- Crime
- Barriers to Housing and Services
- Living Environment Deprivation

Combining information from the seven domains produces an overall relative measure of deprivation, the Index of Multiple Deprivation (IMD).

Postcodes are scored against each of the indicators using the following criteria:

Category	Worst	2	3	4	Best
Range	Most deprived 20%	Most deprived 20-40%	Most deprived 40-60%	Least deprived 60-80%	Least deprived 80-100%
Score	6	4	2	0	0

Table 12 Public Health Toolkit Scoring - IMD RANK

Category	Worst	2	3	4	Best
Range	>=13%	12%-13%	11%-12%	10%-11%	<10%
Score	6	4	2	0	0

Table 13 Public Health Toolkit Scoring - ADULTS OBESE

Category	Worst	2	3	4	Best
Range	>=29%	26%-29%	23%-26%	20%-23%	<20%
Score	6	4	2	0	0

Table 14 Public Health Toolkit Scoring - 5 YEAR OLDS WITH EXCESS WEIGHT

Appendix 4: Explanation of points based Public Health Toolkit

Category	Worst	2	3	4	Best
Range	>=40%	38%-40%	36%-38%	34%-36%	<34%
Score	6	4	2	0	0

Table 15 Public Health Toolkit Scoring - 11 YEAR OLDS WITH EXCESS WEIGHT

Category	Worst	2	3	4	Best
Range	>=11.5%	9.5%-11.5%	7.5%-9.5%	5.5%-7.5%	<5.5%
Score	6	4	2	0	0

Table 16 Public Health Toolkit Scoring - DIABETES PREVALENCE

Category	Worst	2	3	4	Best
Range	>=4%	3.5%-4%	3%-3.5%	2.5%-3%	<2.5%
Score	6	4	2	0	0

Table 17 Public Health Toolkit Scoring - CORONARY HEART DISEASE PREVALENCE

The middle scoring category is set around the Kirklees average, with consistent ranges above and below the mid-point to the 'worst' and 'best' categories, respectively. Locations score points where they are around the average or above, and score most points when they fall into the 'worst' category. Any location that is the same as or below the Kirklees average for any of the indicators does not score any points and fall into the 'best' category. A postcode would be refused permission where it has a combined points total of more than 20 across the seven indicators of deprivation, obesity and related health conditions (out of a maximum possible score of 42, with mean and median scores for all Kirklees postcodes of 15 and 14, respectively). The threshold of more than 20 will encompass 20% of postcodes in Kirklees.

The tool utilises data from a range of sources, some refreshed annually, and others updated less frequently (see details below). The data in the tool will be updated in November each year, with the latest version of the tool being available for use with all planning applications from January of the following year.

Examples of how the tool works

Location: BD19 4HE

Category	Value	Score
IMD rank	Most deprived 20-40%	4 points
Adults overweight	29%	0 points
Adults obese	13.3%	6 points
5 year olds with excess weight	22.6%	0 points
11 year olds with excess weight	37.2%	2 points
Diabetes prevalence	8.5%	2 points
Coronary heart disease prevalence	4.1%	6 points
Total		20 points
Outcome		Accepted

Appendix 4: Explanation of points based Public Health Toolkit

Location: HD2 1BT

Category	Value	Score
IMD rank	Most deprived 10-20%	6 points
Adults overweight	36.4%	4 points
Adults obese	13.5%	6 points
5 year olds with excess weight	24.2%	2 points
11 year olds with excess weight	46.6%	6 points
Diabetes prevalence	9.8%	4 points
Coronary heart disease prevalence	3.7%	4 points
Total		32 points
Outcome		Rejected

Data Sources

Index of Multiple Deprivation (IMD)

Relative deprivation quintile at Lower Super Output Area (LSOA) level based on English Indices of Deprivation 2019, provided by Ministry of Housing, Communities and Local Government. Last updated: September 2019. Next update: Not known (likely to be 2024-25 based on previous updates).

Overweight adults

Percentage of adults with a Body Mass Index of 25-30 kg/m² at Ward level (not including obese adults, BMI 30+ kg/m²) from 2016 Current Living in Kirklees survey. Last updated: July 2016. Next update: Late 2022.

Obese adults

Percentage of adults (age 18+) with a Body Mass Index of 30+ kg/m² from GP practice Quality Outcome Framework registers in 2019/20. Composite obesity rates at LSOA level were created by apportioning GP practice values in proportion to the LSOA population registered to each practice (population from January 2021, provided by NHS Digital). Last updated: August 2020. Next update: October 2022.

5 year olds with excess weight

Percentage of Reception pupils with a Body Mass Index in the overweight or obese category (using population monitoring thresholds) at Ward level from 2018/19 National Child Measurement Programme. Last updated: September 2019. Next update: September 2022.

11 year olds with excess weight

Percentage of Year 6 pupils with a Body Mass Index in the overweight or obese category (using population monitoring thresholds) at Ward level from 2018/19 National Child Measurement Programme. Last updated: September 2019. Next update: September 2022.

Appendix 4: Explanation of points based Public Health Toolkit

Diabetes prevalence

Percentage of adults (age 17+) on the diabetes GP practice Quality Outcome Framework registers in 2019/20. Composite rates at LSOA level were created by apportioning GP practice values in proportion to the LSOA population registered to each practice (population from January 2021, provided by NHS Digital). Last updated: August 2020. Next update: October 2022.

Coronary heart disease prevalence

Percentage of people (all ages) on the coronary heart disease GP practice Quality Outcome Framework registers in 2019/20. Composite rates at LSOA level were created by apportioning GP practice values in proportion to the LSOA population registered to each practice (population from January 2021, provided by NHS Digital). Last updated: August 2020. Next update: October 2022.