

# Cheshire East Local Plan

## Site Allocations and Development Policies Document

### **Hot Food Takeaway Background Report [ED 50]**

August 2020

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# 1. Introduction

1.1 Across England there is an upward trend in the prevalence of obesity and the UK's childhood obesity rates are now ranked amongst the worst in Europe. In England 64% of adults are overweight or obese, alongside 34% of children starting at secondary school<sup>1</sup>.

## 1.2 Impacts of obesity

- 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<sup>2</sup>.
- The risk of developing type 2 diabetes is four times greater in obese children than children with normal weight<sup>3</sup>.
- Child obesity is associated with poor self-esteem and emotional health, poor sleep and weight-related bullying<sup>4</sup>.
- Overweight children are much more likely to become overweight adults<sup>5</sup>.
- Obese adults are: 5 times more likely to develop type 2 diabetes; over 2.5 times more likely to develop high blood pressure - a risk factor for heart disease and stroke; and at increased risk of certain cancers, for example, they are 3 times more likely to develop colon cancer<sup>6</sup>.
- Obesity is estimated to be the fourth largest risk factor contributing to deaths in England (after hypertension, smoking and high cholesterol). It is estimated that in the future, obesity could overtake tobacco smoking as the biggest cause of preventable death.
- Obesity has numerous other negatives aside from health, including employee absenteeism from work<sup>7</sup> and social exclusion<sup>8</sup>.
- The annual spend on the treatment of obesity and diabetes is greater than the amount spent on the police, the fire service and the judicial system combined.
- It is estimated that the NHS spent £4.2 billion on overweight and obesity-related ill-health in 2007. This figure is expected to rise to £8.3 billion in 2025 and £9.7 billion by 2050<sup>9</sup>. When taking into account the impact of

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<sup>1</sup> National Health Services, 2017: Public Health England, 2018

<sup>2</sup> Wijga A et al, (2010), '[Comorbidities of obesity in school children: a cross-sectional study in the PIAMA birth cohort](#)', *BMC Public Health*; 10:184.

<sup>3</sup> Abbasi A, Juszczak D, van Jaarsveld CHM, Gulliford MC, (2017) '[Body mass index and incident type 1 and type 2 diabetes in children and young adults: a retrospective cohort study](#)'.

<sup>4</sup> Public Health England, (2019), [Childhood obesity: applying All Our Health](#).

<sup>5</sup> Simmonds M et al, (2016), '[Predicting adult obesity from childhood obesity: a systematic review and meta-analysis](#)'.

<sup>6</sup> Public Health England, (2017) Guidance, '[Health matters: obesity and the food environment](#)'.

<sup>7</sup> Finkelstein N et al, (2010), '[Effects of problem based economics on high school economics instruction](#)'.

<sup>8</sup> Westermann S et al, (2015), '[Social exclusion and shame in obesity](#)', *Eating behaviour*, 17:74-6.

<sup>9</sup> Foresight Report, Government Office for Science, 2<sup>nd</sup> Edition, 'Tackling Obesities: Future Choices – Project Report'

obesity on economic development, its overall cost to society is estimated at £27 billion.

### 1.3 The food environment contribution to Obesity

- Even though the precise causes contributing to obesity are various, including cultural, environmental and biological factors; one such cause is the heightened consumption of food.
- Dietary risk factors for obesity include high energy density foods, diets high in fat and low in fibre, sugar-rich drinks, and consumption of large portion sizes<sup>10</sup>.
- Various studies have found that food prepared out of the home, which includes hot food takeaways, tends to be energy dense, higher in total fat, saturated fatty acids, sugar and salt, and lower on micronutrient intake<sup>111213</sup>.
- A single typical fast food meal contains nearly 60% of recommended daily calories, half the recommended daily level of salt and saturated fat, and no portions of fruit and vegetables<sup>14</sup>.
- A study which analysed 489 samples of takeaway meals from a random sample of 274 takeaway establishments in Wirral, Liverpool and Knowsley showed that takeaway meals were inconsistent with UK dietary recommendations and that the majority of meals were excessive for portion size, calories, fat and salt<sup>15</sup>.
- A further UK study shows that replacing just one homemade meal per week with a takeaway meal increases the daily intake of fat, saturated fatty acids and salt. The increases were higher if takeaway food was consumed more than once per week<sup>16</sup>.
- An analysis of the UK National Diet and Nutrition survey found more than one quarter (27.1%) of adults and one fifth of children eat food from out-of-home food outlets at least once a week<sup>17</sup>.

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<sup>10</sup> Government Office for Science, (2007), '[Foresight Tackling Obesities: Future Choices – Project Report](#)', 2nd Edition

<sup>11</sup> Davies G et al, (2013), Saturated fatty acid content of popular takeaway food in the UK

<sup>12</sup> Prentice, A.M. and Jebb, S.A., (2003), '[Fast Foods, Energy Density and Obesity: A Possible Mechanistic Link](#)', *Obesity Reviews*, 4(4):187-94.

<sup>13</sup> Lachat C et al, (2011), '[Eating out of home and its association with dietary intake: a systematic review of the evidence](#)' *Obesity Review*, 13(4):329-46

<sup>14</sup> London Health Commission, (2014), '[Better Health for London](#)'.

<sup>15</sup> Jaworowska A, Blackham TM, Long R, Taylor C, Ashton M, Stevenson L, et al, (2014), '[Nutritional composition of takeaway food in the UK](#)', *Nutrition & Food Science*, 44:5, 414-430

<sup>16</sup> Blackman T. et al, (2015), '[Increased takeaway meal consumption increases dietary energy, salt and fat](#)'.

<sup>17</sup> Adams J et al, (2015), '[Frequency and socio-demographic correlates of eating meals out and take-away meals at home: Cross-sectional analysis of the UK national diet and nutrition survey, waves 1–4 \(2008–12\)](#)', *International Journal of Behavioral Nutrition and Physical Activity*,

Article number: 51

- The Greater London Authority takeaways toolkit states “the increase in fast food outlets will be a contributory factor in the growth of the obesogenic environment”<sup>18</sup>.
- Studies have shown that people exposed to the highest number of takeaways are 80 per cent more likely to be obese and 20 per cent more likely to have a higher Body Mass Index than those with the lowest number of encounters<sup>19</sup>.
- The Takeaway Economy Report 2017<sup>20</sup> confirms there was a 34% increase in spending on hot food takeaway food between 2009 and 2016. In 2016, 12.1% of all food spending was on takeaway food. In 2016, £9.9 billion was spent on takeaway food and this is estimated to rise to £11.2 billion by 2021.

1.4 Given the scale and cost of obesity, and the significant burden on families, the health and social care system, employers and society as a whole means prevention of obesity is a high priority, especially given the recent link to an increased risk from coronavirus (COVID-19). Nearly 8% of critically ill patients with COVID-19 in intensive care units have been morbidly obese, compared with 2.9% of the general population<sup>21</sup>. As a result, the Government released on the 27 July 2020, a new Obesity Strategy entitled ‘Tackling Obesity: Empowering adults and children to live healthier lives’ and a new ‘Better Health’ campaign led by Public Health England to help people lose weight and reduce the risk of becoming serious ill from COVID-19 and to protect the NHS.

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<sup>18</sup> Greater London Authority, (2012), ‘[Takeaways Toolkit](#)’.

<sup>19</sup> Burgoine T et al, (2014), ‘[Associations between exposure to takeaway food outlets, takeaway food consumption, and body weight in Cambridgeshire, UK: population based, cross sectional study](#)’, *British Medical Journal*, 2014;348:g1464

<sup>20</sup> Just Eat, (2017), ‘[The Takeaway Economy Report 2017](#)’.

<sup>21</sup> Department of Health and Social Care, (July 2020), Press Release ‘[New obesity strategy unveiled as country urged to lose weight and beat coronavirus and protect the NHS](#)’

## 2. Local Context

- 2.1 An article entitled 'Childhood Obesity in the North West'<sup>22</sup> highlights that over the last three years, the percentage of obese and severely obese Reception children has increased from 9.8% to 10.2% - an increase of 0.4%. The percentage of overweight children has also increased by 0.3%. The article also notes that the amount of healthy weight children has declined from 76% to 75.2% - a decline of 0.8% in total. This highlights that the governments and local authorities efforts to tackle childhood obesity in the North West have so far proved unsuccessful.
- 2.2 Analysis from Public Health England shows the density of fast food outlets varies per local authorities across England<sup>23</sup>. The map (Appendix 1) shows the number of outlets for every 100,000 people resident in the local authority. The density of fast food outlets in local authorities ranges from 26 to 232 per 100,000 population. Public Health England data shows that Cheshire East had 332 food outlet types as at 31/12/2017. This represents a rate of 88 per 100,000 head of population.
- 2.3 The Food Environmental Assessment Tool (FEAT)<sup>24</sup> enables further exploration of the geography of food retail, including changes over time. Table 2.1 shows that the number of takeaway food outlets in Cheshire East has steadily increased from 2014 to 2018.

Year	Takeaways	% of total food outlets	Takeaway per 1000 residents
June 2014	364	25%	0.98%
June 2015	367	24.7%	0.99%
June 2016	386	25%	1.04%
June 2017	387	26.4%	1.05%
June 2018	384	25%	1.04%

**Table 2.1 - Number of takeaway outlets in Cheshire East 2014-2018**

*Note: takeaways are defined by FEAT as food outlets where hot food is ordered and paid for at the till, with no waiter service, and limited no sit-in option. It includes bakeries, such as Greggs, as well as well-know brands more obviously associated with fast food, such as KFC and McDonald's and local independent takeaways.*

<sup>22</sup> Childhood Obesity in the North West, (2019), available at:

<https://www.gogofruitbasket.com/blog/part-6-childhood-obesity-north-west/>

<sup>23</sup> Public Health England (2018), Obesity and the Environment- [Density of Fast Food Outlets by Local Authority](#) at 31/12/2017

<sup>24</sup> FEAT, available at <https://www.feat-tool.org.uk/feat2/>

2.4 Local Authority Health Profiles produced by Public Health England<sup>25</sup> also shows that the number of obese Year 6 children in Cheshire East has increased between 2014 to 2019 (Table 2.2).

Year	2014	2015	2016	2017	2018	2019
No. of Year 6 classified as obese	494	527	515	540	539	682
% of Year 6 classified as obese	15.1%	15.6%	15.4%	15.9%	15.4%	17.9%

**Table 2.2 – Public Health England Figures 2014 – 2019 (Number and Percentage of Obese Year 6 children)**

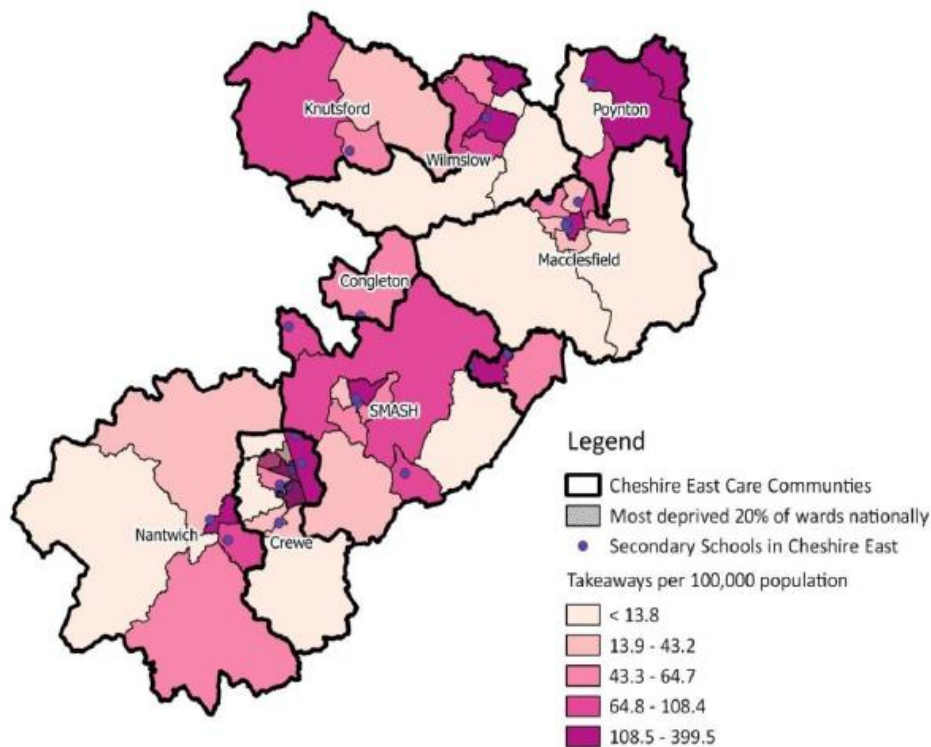
2.5 Promoting the health and wellbeing of the district is a clear priority of the Council. Having additional outlets close to schools could negate efforts by Cheshire East Council and its partners to support programmes aimed at encouraging healthy eating and an active lifestyle. These include (*inter alia*):

- Green Space Strategy
- Cycling Strategy
- Let's Get Movin' Programme
- Cheshire East Fresh Catering Service
- One You Cheshire East service
- Joint Health and Wellbeing Strategy 2018-2021
- Making Every Contact Count
- Cheshire East Partnership Five-Year Plan
- Cheshire East Emotionally Healthy Schools Project
- Active Cheshire
- Live Well Cheshire East

2.6 As shown in Figure 2.1, several secondary schools have a high proportion of Hot Food Takeaways outlets in close proximity. Further proliferation of these premise types could run counter to efforts to promote healthy eating amongst school pupils.

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<sup>25</sup> Public Health England, Local Authority Health Profiles, available at: [https://fingertips.phe.org.uk/profile/health-profiles/area-search-results/E12000002?search\\_type=list-child-areas&place\\_name=North%20West](https://fingertips.phe.org.uk/profile/health-profiles/area-search-results/E12000002?search_type=list-child-areas&place_name=North%20West)



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**Figure 2.1 – Secondary Schools and Hot Food Takeaways**

- 2.7 Local authorities have a statutory duty to improve the health of their residents through the Health and Social Care Act 2012. Borough public health teams commonly lead the preparation of Joint Strategic Needs Assessments (JSNA) and play a key role in developing Health and Wellbeing Strategies.
- 2.8 In June 2019 Cheshire East JSNA published ‘Excess Weight 2019’<sup>26</sup>. This acknowledges that the prevention of excess weight is more likely to be achieved at the macro level through policies on active travel, green space, the built environment and the regulation of food and drink manufacturing and marketing.
- 2.9 In another document entitled ‘The Joint Health and Wellbeing Strategy for the Population of Cheshire East 2018-2021’<sup>27</sup> it identifies a need to focus on the root causes of ill health (e.g. alcohol, obesity, smoking) rather than focusing on named diseases, because these factors contribute to multiple diseases and illnesses (e.g. smoking contributes to heart disease, stroke, lung cancer and vascular dementia). This is reiterated in Cheshire East

<sup>26</sup> <https://www.cheshireeast.gov.uk/pdf/social-care-and-health/excess-weight-in-children.pdf>

<sup>27</sup> Cheshire East, ‘The Joint Health and Wellbeing Strategy for the Population of Cheshire East 2018-2021’.



Partnership 'Five-Year Plan 2019-2024'<sup>28</sup> which also seeks to support children to be healthy by focusing on childhood obesity. Early intervention and prevention were seen as important to preventing long-term ill health in a document 'Healthwatch Cheshire East: People's views on the Cheshire East Partnership Five-Year Plan'<sup>29</sup>, including focusing on self-care, smoking, obesity and more mental health support.

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<sup>28</sup> Cheshire East Partnership, '[Five Year Plan 2019-2024](#)'.

<sup>29</sup> Healthwatch Cheshire East (2019) '[People's Views on Cheshire East Partnership Five-Year Plan](#)'

## 3. Planning Policy Context

### National Policy

#### National Planning Policy Framework

3.1 The National Planning Policy Framework<sup>30</sup> (NPPF) was first published in March 2012 and has been subsequently updated in 2019. It is a key document for local plan making and consideration in planning decisions. At the core of the NPPF is a presumption in favour of sustainable development. Paragraph 8 of the NPPF (February 2019) explains the three dimensions of sustainable development:

- Economic: to help build a strong, responsive and competitive economy, by ensuring that sufficient land of the right types is available in the right places and at the right time to support growth, innovation and improved productivity; and by identifying and coordinating the provision of infrastructure;
- Social: to support strong, vibrant and healthy communities, by ensuring that a sufficient number and range of homes can be provided to meet the needs of present and future generations; and by fostering a well-designed and safe built environment, with accessible services and open spaces that reflect current and future needs and support communities' health, social and cultural well-being; and
- Environmental: to contribute to protecting and enhancing our natural, built and historic environment; including making effective use of land, helping to improve biodiversity, using natural resources prudently, minimising waste and pollution, and mitigating and adapting to climate change, including moving to a low carbon economy.

3.2 Section 7 of the NPPF aims to ensure that planning policies should protect the viability of town centre environments and encourages local authorities to create policies that make clear which uses will be permitted in such locations.

3.3 Section 8 of the NPPF emphasises how the planning system can help facilitate social interaction and create healthy, inclusive communities. Paragraph 92 states that local authorities have a responsibility to promote healthy communities and should “take account of and support local strategies to improve health, social and cultural wellbeing for all”. In addition Paragraph 91c) states that planning policies should:

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<sup>30</sup> Ministry of Housing, Communities and Local Government (2019) [‘National Planning Policy Framework’](#)

“enable and support healthy lifestyles, especially where this would address identified local health and well-being needs – for example through the provision of safe and accessible green infrastructure, sports facilities, local shops, access to healthier food, allotments and layouts that encourage walking and cycling.”

## National Planning Practice Guidance

- 3.4 National Planning Practice Guidance (PPG) emphasises the importance of promoting access to healthier food and the role that local authorities have in considering health and well-being in their plan making and decision taking. Paragraph 004 states the following:

*“How can planning create a healthier food environment?”*

*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). In doing so, evidence and guidance produced by local public health colleagues and Health and Wellbeing Boards may be relevant. 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”*

## Local Policy

### Local Plan Strategy 2010-2030

- 3.5 The Cheshire East Local Plan Strategy<sup>31</sup> (LPS) sets out the overall vision and planning strategy for development in the borough and contains planning policies to ensure that new development addresses the economic, environmental and social needs of the area. It also identifies strategic sites and strategic locations that will accommodate most of the new development

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<sup>31</sup> Cheshire East Council (2017) '[Cheshire East Local Plan Strategy](#)'

needed. The LPS acknowledges the importance of creating a healthy environment through a number of policies, including:

- 3.6 LPS Policy SD1 (Sustainable Development in Cheshire East) states that in order to achieve sustainable development in Cheshire East, the following considerations to development will apply: Development should wherever possible..... 8) Support the health, safety, social and cultural well-being of the residents of Cheshire East.
- 3.7 Strategic Priority 2 seeks to create sustainable communities, where all members are able to contribute and where all the infrastructure required to support the community is provided. This will be delivered by (*inter alia*) ensuring that development provides the opportunity for healthier lifestyles through provision of high quality green infrastructure and cultural, recreational, leisure and sports opportunities.
- 3.8 LPS Policy SC3 (Health and Well-Being) seeks to promote safe, healthy, fulfilling and active lifestyles.
- 3.9 LPS Policy SE6 (Green Infrastructure) aims to deliver a good quality, and accessible network of green spaces for people to enjoy, providing for healthy recreation and biodiversity and continuing to provide a range of social, economic and health benefits.
- 3.10 LPS Policy SE13 (Flood Risk and Flood Management) states that developments must integrate measures for sustainable water management to reduce flood risk, avoid an adverse impact on water quality and quantity with the borough and provide opportunities to enhance biodiversity, health and recreation.
- 3.11 Strategic Location LPS1 (Central Crewe) seeks financial contributions towards education provision, highways improvements and health infrastructure as required.
- 3.12 The role of creating a healthy environment is also recognised in the Vision for Cheshire East. This seeks people to lead healthy and active lifestyles benefiting from improved access to sporting facilities', high quality open spaces, play areas, allotments and the open countryside.

### **Emerging Site Allocations and Development Policies Document**

- 3.13 In order to address obesity and promote an environment where healthy choices are available Policy RET5 (Restaurants, cafes, pubs and hot food takeaways) seeks to limit the opening hours of hot food takeaways within 400m to secondary schools and sixth form colleges. A map showing a 400m radius around schools in Cheshire East is presented in Appendix B.
- 3.14 This Policy only focusses on secondary schools and sixth form colleges due to increased level of independence and autonomy that secondary school pupils enjoy. Secondary school children are more likely to make their own

decisions when purchasing food items. Primary school children do not leave school grounds at lunchtime however, it is the age at which healthy eating behaviours can be influenced by the actions of their parents and carers. Additional planning control in such circumstances would be of very limited value. The Policy does not therefore apply to primary schools.

3.15 Secondary schools and sixth form colleges 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's entrance will automatically have an exclusion zone. Where an existing school closes without a replacement at the same site, the exclusion zone will not apply.

3.16 Policy RET5 (Restaurants, cafes, pubs and hot food takeaways) states the following:

1. *“The building or change of use of establishments to restaurants and cafés, drinking establishments and hot food takeaways will be permitted provided they comply with other policies in the development plan and where there will be no adverse effect, either individually or cumulatively, on the character of the area, amenities of residential occupiers, community safety and/or highway safety.*
2. *Where permission is granted for such uses or for an extension of such use, conditions appropriate to the permitted use may be imposed relating to community safety, hours of opening, noise, odour and fumes, the disposal of refuse, and restricting the sale of hot food to be consumed off the premises.*
3. *Where hot food takeaways are located within 400 metres of a secondary school or sixth form college, planning permission will be granted subject to a condition that the premises are not open to the public before 17:00 on weekdays and there is no over the counter sales before that time. The only exception to this approach will be where the proposal is in a principal town centre, town centre or local centres designated in the local plan.*
4. *Where space allows and it is appropriate to the use, character of the area, and will not conflict with pedestrian movement or public safety, external dining and seating shall be encouraged. Measures to screen outdoor dining and seating areas and to provide shelter should be of a high quality and not detrimental to the character and appearance of the area”.*

3.17 The Town and Country Planning (Use Classes) (Amendment) (England) Regulations 2020 (2020 No. 757) is due to come into force on the 1st of September 2020. These Regulations will create a new broad 'Commercial, business and service' use class (Class E) which incorporates the previous shops (A1), financial and professional services (A2), restaurants and cafes (A3) and offices (B1) use classes. Public houses / drinking establishments (A4) and hot food takeaways (A5) will become sui generis under the new regulations.

## 4. Hot Food Takeaway Policy

- 4.1 Obesity is a complex problem with many drivers, including our behaviour, environment, genetics, economy and culture. According to 'Public Health England's 'Obesity and the environment: regulating the growth of fast food outlets'<sup>32</sup>

*"Obesity is a complex problem that requires action from individuals and society across multiple sectors. One important action is to modify the environment so that it does not promote sedentary behaviour or provide easy access to energy-dense food".*

- 4.2 Obesity has been a significant issue for the Government since the Foresight report "Tackling Obesities: Future Choices" was published in 2007, which highlighted the need for a society wide approach to tackling obesity. The Foresight report identified that whilst biology and personal responsibility were key factors in weight gain, they were being overwhelmed by exposure to modern lifestyles suggesting the need to address environmental factors including 'increased dietary abundance', the physical ease of access to food and drink from supermarkets, takeaways and restaurants and the proximity of food outlets to schools.
- 4.3 In 2008 the Strategy 'Healthy Weight, Healthy Lives: a Cross-Government Strategy for England'<sup>33</sup> was published as the first step in a sustained programme to support people to maintain a healthy weight. The Strategy states that 'local authorities can use existing planning powers to control more carefully the number and location of fast food outlets in their local areas'. A recommendation by National Institute for Health and Clinical Evidence (2010)<sup>34</sup> elaborates on this by encouraging planning authorities 'to restrict planning permission for takeaways and other food retail outlets in specific areas (for example, within walking distance of schools)'. This advice is also supported by a government document prepared in 2011 'The Healthy People, Healthy Places: A Call to Action on Obesity in England' which highlights the role that planning can have in creating a healthier built environment by developing supplementary planning policies that can limit the growth of hot food takeaways.
- 4.4 The Public Health England document "Obesity and the environment: regulating the growth of fast food outlets" produced in 2014 also focuses on how local planning authorities can help create healthier built environments.

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<sup>32</sup> Public Health England, (2014), '[Obesity and the environment: regulating the growth of fast food outlets](#)'.

<sup>33</sup> HM Government, (2008), '[Healthy Weight, Healthy Lives: a Cross-Government Strategy for England](#)'.

<sup>34</sup> National Institute for Health and Care Excellence (2010). Public Health Guidance 25 '[Cardiovascular disease prevention](#)'.

The 400m radius of the hot food takeaway restriction zone is quoted within this guidance as a proxy distance for a 5 minute walk.

- 4.5 In 2014, the Town and Country Planning Association (TCPA) developed 'Six Healthy Weight Environment elements' as part of the Planning Healthy Weight Environments project<sup>35</sup> supported by Public Health England. One of the six elements is a healthy food environment which provides access to healthy food retail. The TCPA recommends that development avoids overconcentration of hot-food takeaways (A5 uses) in existing town centres or high streets, and restricts their proximity to schools or other facilities for children and young people and families.
- 4.6 A further document published by Public Health England in March 2017 recommends that "Planning documents and policies to control the over-concentration and proliferation of hot food takeaways should form part of an overall plan for tackling obesity and should involve a range of different local authority departments and stakeholders"<sup>36</sup>. The NHS has also published a good practice guide 'Using the Planning System to Control Hot Food Takeaways'<sup>37</sup>.
- 4.7 The national 'Childhood obesity: a plan for action, Chapter 2' (2018)<sup>38</sup> sets out the Governments' ambition to halve childhood obesity rates and reduce the gap in obesity between children from the most and least deprived areas by 2030. As this document confirms, local authorities have a range of powers and opportunities to create healthier environments, including the power to develop planning policies to limit the opening of additional hot food takeaway outlets close to schools and in areas of over-concentration.
- 4.8 The NHS has also recently published four 'Putting Health into Place' Publications. The document entitled 'Design, Deliver and Manage'<sup>39</sup> acknowledges that improving the food environment is important in enabling more people to access healthier options and such action is critical as not everyone has the same access by a greater density of hot food takeaways in areas of higher deprivation. There is a clear link between deprivation and higher density of hot food takeaways. Lack of diverse food options restricts choices and chances to engage in healthier behaviours, with the children from the most deprived areas twice as likely to be obese as those from the least deprived.

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<sup>35</sup> TCPA, (2014), '[Planning Healthy Weight Environments. A TCPA Reuniting Health with Planning Project](#)'

<sup>36</sup> Public Health England (2017), '[Health matters: obesity and the food environment](#)'.

<sup>37</sup> London Healthy Urban Development Unit, (2013,) '[A Good Practice Guide: Using the Planning System to control hot food takeaways](#)'.

<sup>38</sup> Department of Health and Social Care, (2018), '[Childhood Obesity: a plan for action](https://www.gov.uk/government/publications/childhood-obesity-a-plan-for-action-chapter-2)  
<https://www.gov.uk/government/publications/childhood-obesity-a-plan-for-action-chapter-2>

<sup>39</sup> Public Health England and NHS, (2019), '[Design, Deliver and Manage](#)' (2019)

## Hot Food Takeaways and Schools

- 4.9 As this document highlights child obesity tends to persist into adulthood, so obese children are more likely to become obese adults. It is therefore vital to support and encourage children to have healthy lifestyles and restricting their access to unhealthy foods around their schools will help achieve this objective. A priority for the Council is therefore to ensure that this issue is addressed within the Local Plan.
- 4.10 Research and reports into the impact of hot food takeaways near schools is an area that continues to expand. There is evidence that takeaway food is appealing to children. Interviews with children in nursery, primary and secondary schools in London and other parts of the UK, conducted by Barnardo's, identified that pupils view 'fast food' as the most tasty and desirable food<sup>40</sup>.
- 4.11 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<sup>41</sup>. 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'<sup>42</sup>.
- 4.12 A number of recent studies found a positive association between the density of unhealthy food outlets in a given neighbourhood, including fast food, and the prevalence of overweight and obesity in children<sup>43,44</sup>. This association was stronger for older children (secondary school pupils)<sup>45</sup>. Other researchers have found that fast food restaurants within 160 metres of a school (0.1 miles) is associated with a 5 per cent increase in obesity.<sup>46</sup>
- 4.13 Clary et al. (2017) differentiate between access to unhealthy food outlets and exposure. They define access as "the potential for the foodscape to be used at the time when individuals decide to do so" and argue that exposure constantly influences our intentions, preferences and routine tendency.

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<sup>40</sup> Ludvigsen A and Sharma N, (2004), [Burger Boy, Sporty Girl; what children say about school meals](#)

<sup>41</sup> Engler-Stringer R et al, (2014), [The community and consumer food environment and children's diet: a systematic review](#). *BMC Public Health*. 14 (522)

<sup>42</sup> Donin A et al, (2017), [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*.

<sup>43</sup> Fraser et al, (2010), [The Geography of Fast Food Outlets: A Review](#). *International Journal of Environmental Research and Public Health*, 7(5): 2290–2308.

<sup>44</sup> Barrett M et al, (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.

<sup>45</sup> Cetateanu A., Jones A., (2014), [Understanding the relationship between food environment, deprivation and childhood overweight and obesity: evidence from a cross sectional England-wide study](#) ' *Health Place*, 27:68-76

<sup>46</sup> Davis and Carpenter (2009) op. cit. [Proximity of fast-food restaurants to schools and adolescent obesity](#), *Journal of Public Health*, 99(3):505-10



They cite various international studies associating exposure to unhealthy food outlets with unhealthy diet and behaviours, and argue that food outlets along individuals' daily-path (as the route taken to and from school or work) shape their preferences for the choices they will subsequently make<sup>47</sup>.

- 4.14 A study in Hackney found that 54% of 11-19 year olds make a purchase from a takeaway at least one day per school week (9% do so every day); 39% purchase from takeaways for lunch during the school week, while 32% do so on the way home from school (Rockpool Research Associates. Healthy Living in Hackney: young people's health behaviours and attitudes)<sup>48</sup>. Other studies, including in neighbouring Tower Hamlets, similarly find results that children commonly make purchases from takeaways near to their school. In an Oxford University review, 10 of the 15 studies examining associations between fast food outlets' proximity to schools and children's weight found a statistically significant association that children who attend schools located near to fast food outlets are more likely to be overweight or obese than children at other schools.
- 4.15 In a 2008 study, Sinclair and Winkler identified three sources of food available during the school day: food brought from home, food provided by schools and food bought from the "school fringe", which they defined as the "doughnut of shops that surround secondary schools and that specifically include hot food takeaways". They found that shops on the fringe (including takeaways) were the most widely used by pupils, with 80% of them buying something from them at least once a week. The most popular time to make a purchase was immediately after school and children tended to visit those food outlets that were along transport routes to and from the school<sup>49</sup>.
- 4.16 In 2014, a survey of nearly 2,500 Brent secondary school pupils found that pupils attending schools within 400m of takeaway outlets were more likely to visit a hot food takeaway after school at least once a week (62%) than pupils at schools with no takeaways within a 400m radius (43%)<sup>50</sup>.

## What other authorities are doing

- 4.17 There is a growing global evidence base which indicates that policies which regulate people's exposure to fast food, contribute to improving diet and health<sup>51</sup>.

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<sup>47</sup> Clary C et al, (2017), '[Between exposure, access and use: Reconsidering foodscape influences on dietary behaviours](#)', *Health and Place*, 44:1-7.

<sup>48</sup> London Borough of Hackney, (2016), [A Health Needs Assessment for 5-19 Year Old Residents of the London Borough of Hackney and the City of London](#)

<sup>49</sup> Sinclair, S. and Winkler, J. (2009),. [The School Fringe: from Research to Action](#). Policy Options within Schools on the Fringe. Nutrition Policy Unit, London Metropolitan University

<sup>50</sup> London Borough of Brent, (2014), [Takeaway use among Brent's school students](#)

<sup>51</sup> Burgoine T et al, (2016) [Does neighbourhood fast-food outlet exposure amplify inequalities in diet and obesity? A cross-sectional study](#), *The American Journal of Clinical Nutrition*, 103(6):1540-

- 4.18 Research into planning policy found that the most commonly represented health-focused domain of action was exclusion zones near places for children and family (28.7%) e.g. schools, parks and leisure facilities including sport centres and youth clubs. The details of exclusion zone policies differed by local government area. Distance based exclusion zones ranged from 200 to 800m, and walking time based exclusion zones from 5 to 10 min. Other strategies addressing places for families and children included restriction of takeaway food outlet opening hours during school lunch times, and immediately after school<sup>52</sup>.
- 4.19 The 400m figure is based on research conducted by London Metropolitan University<sup>53</sup> suggesting that 400m was the maximum distance that students would walk to and back in their lunch break. 400 metres has also been outlined within the Institute of Highways and Transportation Guidelines for providing journeys on foot.
- 4.20 The 400m exclusion zones around schools is now an accepted standard across many planning policies and supplementary planning documents, and is also presented within the [Draft London Plan](#). Some authorities only have the exclusion zone in place around secondary schools as generally, primary school children are not permitted to leave the school at lunchtime and are usually accompanied to and from school by an adult.
- 4.21 The document 'Tipping the Scales'<sup>54</sup> details case studies of where planning powers have been used to limit hot food takeaways in local areas. This document outlines the local evidence and policy drivers used to support adoption of the policy. More recent examples where local authorities have used planning powers to restrict hot food takeaways include (*inter alia*) the following:
- The London Borough of Waltham Forest '[Draft Local Plan](#)' (July 2019) continues to have a policy (Policy 60 – Hot Food Takeaways) in place restricting hot food takeaways within 400m of a nursery/primary school/secondary school/community college/youth facility.
  - Broxtowe Borough Council had their '[Part 2 - Local Plan](#)' adopted in October 2019. Policy 24 (The health impacts of development) states that hot food takeaways of any size within 400m of any part of the grounds of a school will be assessed against the hot food takeaway

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<sup>52</sup> Keeble M et al (2019) [How does local government use the planning system to regulate hot food takeaway outlets? A census of current practice in England using document review](#). *Health & Place*, vol. 57, 171-178.

<sup>53</sup> Sarah Sinclair, JT Winkler (2008), '[The School Fringe, From Research to Action. Policy Options within schools on the Fringe](#)', Education Research, , Nutrition Policy Unit, London Metropolitan University.

<sup>54</sup> LGA, (2016), '[Tipping the Scales: Case Studies on the use of planning powers to restrict hot food takeaways](#)'.

checklist unless such takeaways are within the defined boundary of a Town or District Centre.

- Plymouth recently adopted [‘The Plymouth Plan’](#) in March 2019. Policy HEA1 (Addressing health inequalities, improving health literacy) seeks to support healthy eating and improving access to good food through: (iii) using planning powers to protect the food environment within a 400 metre radius of providers of secondary education
- North East Lincolnshire adopted their [‘Local Plan’](#) in March 2018. Policy 23 (Retail hierarchy and town centre development’ states proposals for hot food takeaways (Use Class A5) need to demonstrate that account has been taken of.....C. the relationship with any school located within 400m of the proposed A5 use’.
- Hyndburn District Council adopted their [‘Development Management DPD’](#) in January 2018. Policy DM5 (Hot Food Takeaways) states where the proposed development is located within the hot food takeaway restriction zone (400m of a primary school or secondary school) opening hours are restricted.
- Coventry City Council adopted their [‘Hot Food Takeaway SPD’](#) in August 2019. This states ‘Hot food takeaway applications will not be approved if the hot food takeaway falls within a 5 minute walk from the gate(s) of any primary or secondary school (including any Special School, Sixth Form College and Academy), within or outside Local Education Authority Control’.
- Middlesbrough Council formally adopted their [‘Interim Hot Food Takeaway Policy’](#) on the 24<sup>th</sup> July 2019. This states (inter alia) that ‘planning permission will not be granted for A5 uses within 400m walking distance of an entry point to a secondary school’.
- Barnsley Council adopted their [‘Planning Advice Note Hot Food Takeaways’](#) in May 2019 (which should be read in conjunction with the adopted SPD on hot food takeaways). This states outside District or Local Centres, proposals for Hot Food Takeaways within 400m of a secondary school or Advanced Learning Centre (ALC), will have regard to guidance from Public Health England on the link between childhood obesity and proximity to Hot Food Takeaways. District and Local Centres are areas of shopping and services as outlined in the Local Plan and will be measured as a circular buffer taken from the centre of the school or ALC.
- Leeds City Council adopted their [‘Hot Food Takeaway SPD’](#) in April 2019. Policy HFT1 (Proximity to Secondary Schools) states planning permission will not be granted for new A5 Uses within 400 metres of

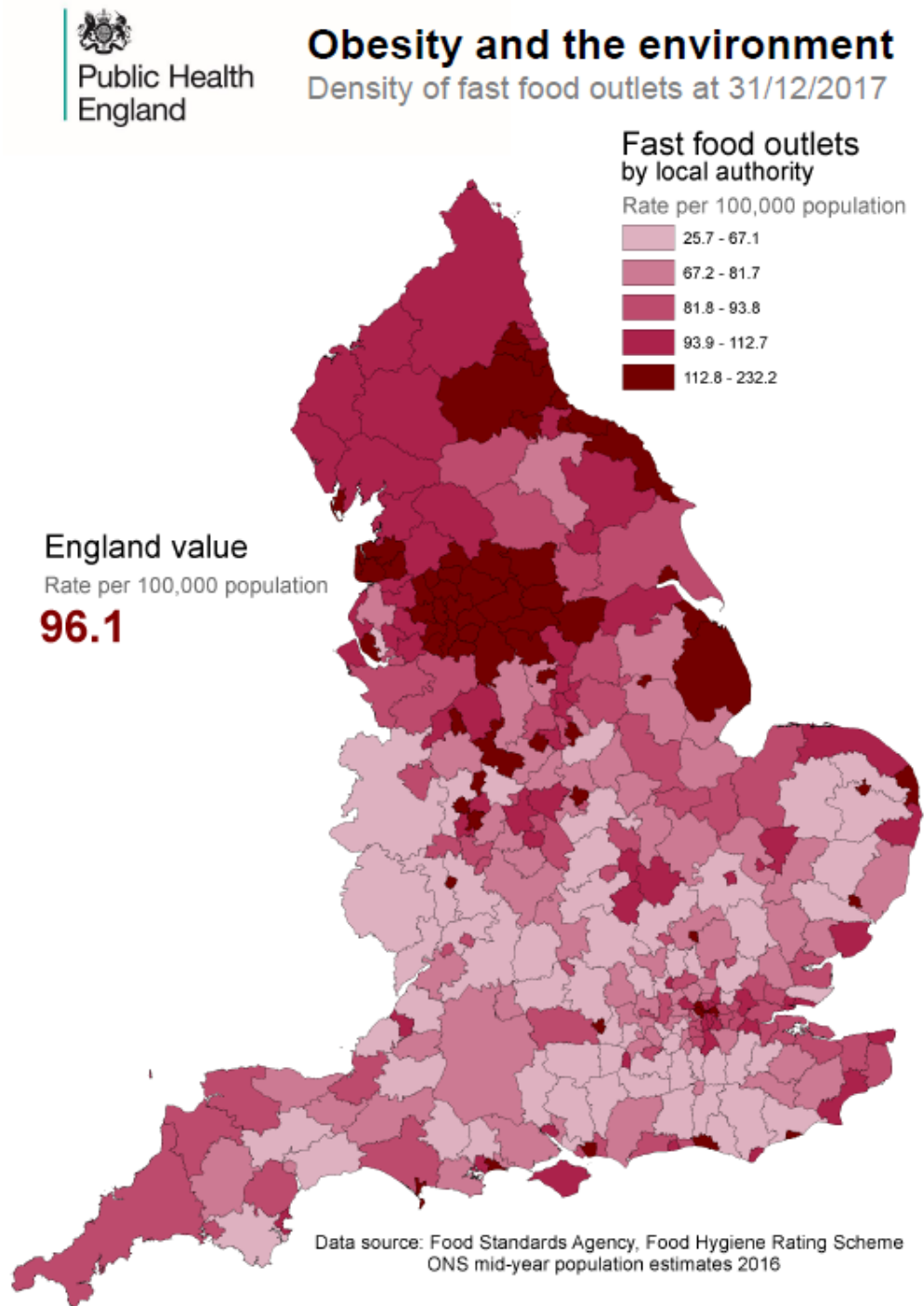
a secondary school main entrance except within the boundaries of designated centres.

- City of Wolverhampton Council adopted their [‘Hot Food Takeaway SPD’](#) in June 2018. Policy HFT1 (Proximity to Secondary School) states that ‘no new Hot Food Takeaway development will be permitted within 400 metres of a secondary school, as measured in a direct line (as the crow flies) from any school entrance used by pupils’.
- Sefton Council adopted their SPD on [‘Control of Hot Food Takeaways and Betting Shops’](#) in September 2017. Policy EQ10 (Food and Drink) states in order to address the problem of obesity amongst children, proposals for hot food takeaways [Class A5 uses] within 400 metres of secondary schools and further education establishments will not be permitted. Exceptions will be made where: it is located within a designated town, district or local centre; or the premises are not open until after 1700 hours.
- Manchester City Council adopted their [‘Hot Food Takeaway SPD’](#) in March 2017. Policy 3 (Hot Food Takeaways and Schools’ states Where a hot food take away is proposed within 400 metres of a primary or secondary school, and the proposal meets planning policy in other respects, planning permission will only be permitted subject to the condition that opening hours are restricted to the following:
  - A primary school: the hot food takeaway is not open to the public between 3 pm to 5.30pm on weekdays.
  - A secondary school: the hot food takeaway is not open to the public before 5.30pm on weekdays.The only exception to this approach will be where the proposal is within a district centre designated in the Local Plan and can demonstrate that the introduction of such a use will meet all other relevant policies.

## 5. Conclusion

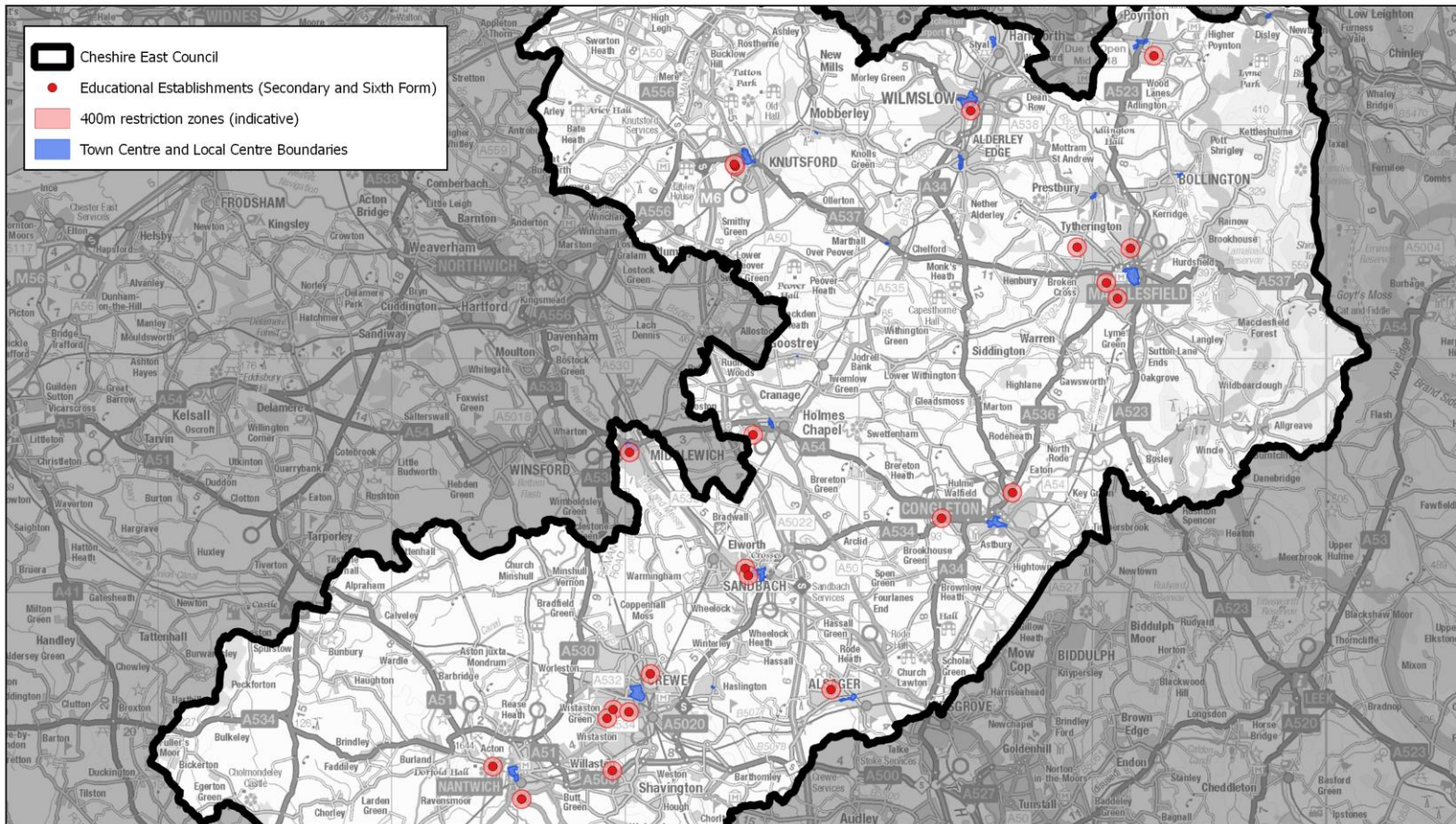
- 5.1 The Council understand that obesity is a complex problem and as such there is no single solution. The need for actions at all levels of government and society has been recognised. This measure is one of the many initiatives being worked on by the Council.
  
- 5.2 National guidance advises Local Planning Authorities to restrict the location of Hot Food Takeaways, particularly around schools (NPPG Paragraph 4). No new Hot Food Takeaway should increase the exposure of school children to these opportunities. As explained, studies show that Hot Food Takeaway food tends to be unhealthy, and the food environment can influence diet. Policy RET5 therefore aims to restrict the access of secondary school children to unhealthy foods, to encourage and support healthy lifestyle choices, by restricting the opening hours of Hot Food Takeaway proposals located outside a centre but within easy walking distance of a secondary school/sixth form college thus supplementing LPS Policy, NPPF, and NPPG paragraph 4. Local evidence / strategies, as detailed earlier in this report, also support Policy RET5 within the SADPD.

## Appendix 1 – Obesity and the Environment



Source: Public Health England (2018), *Obesity and the Environment- [Density of Fast Food Outlets by Local Authority](#) at 31/12/2017*

**Appendix B – 400m radius**



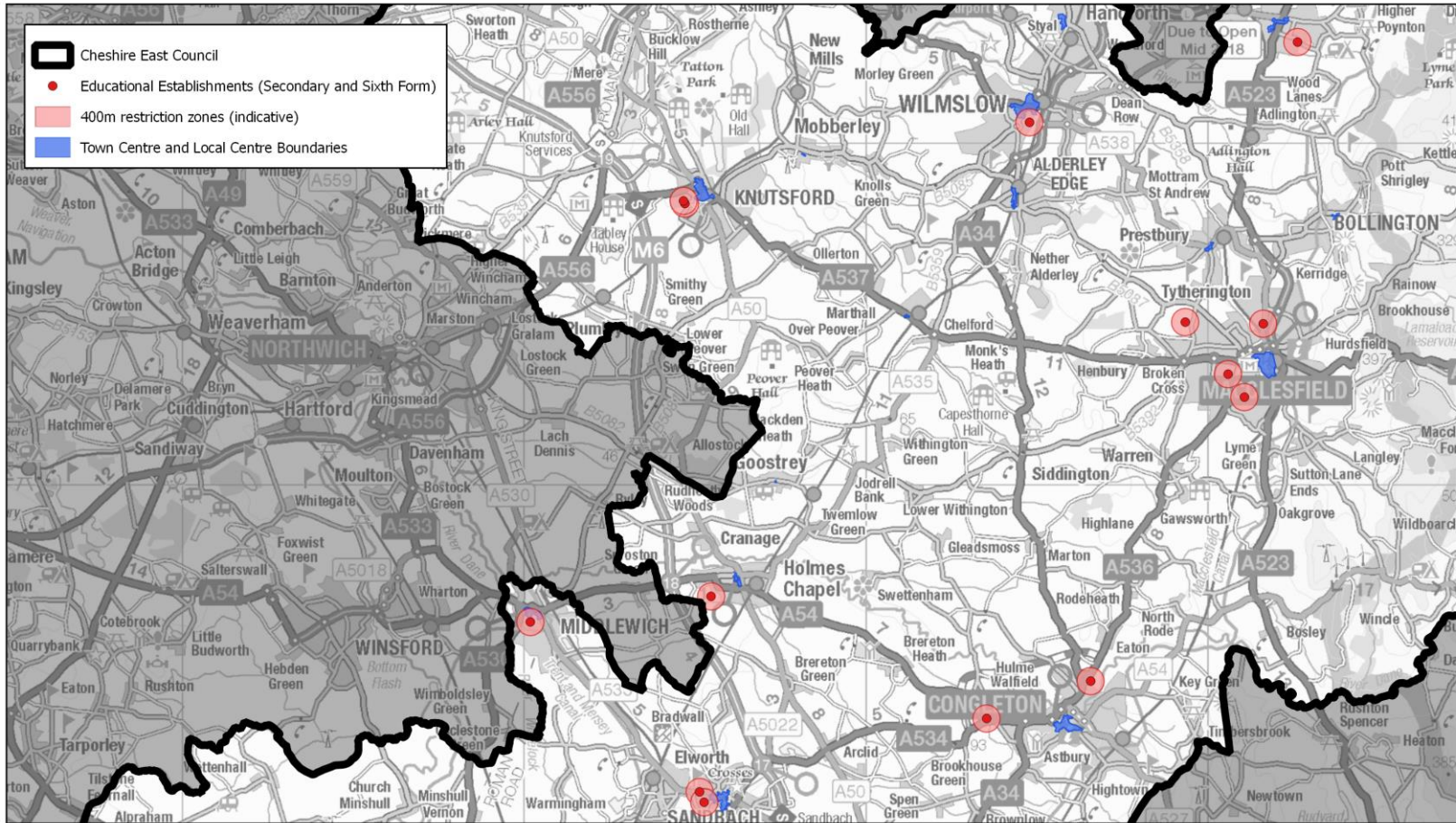
**Map of Hot Food & Takeaway Restriction Zones**




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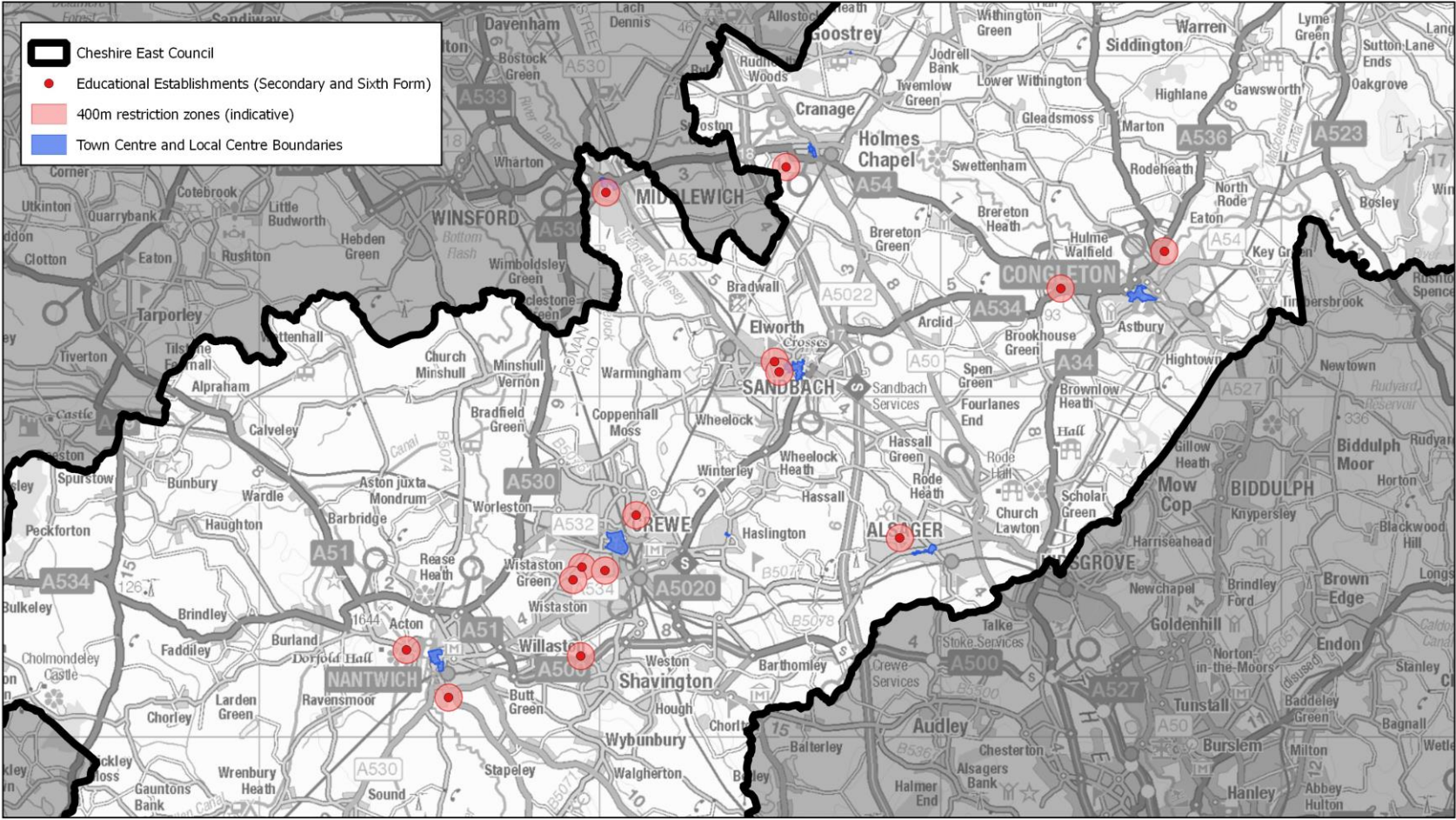


**Map of Hot Food & Takeaway Restriction Zones  
Northern Area**



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**Map of Hot Food & Takeaway Restriction Zones  
Southern Area**



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