



# Planning for Health:

Supplementary Planning Document (SPD)

Adoption Draft for Executive - October 2022

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# 1. Introduction

# 1.1 The Purpose and Scope of the SPD

- 1.1.1 This Supplementary Planning Document (SPD) has been prepared by Burnley Council as part of its planning policy framework. It supplements the policies of Burnley's Local Plan 2012-2032 which was adopted on 31 July 2018.
- 1.1.2 SPDs elaborate on the policy and proposals in Local Plans but do not have their formal statutory 'Development Plan' status. SPDs cannot introduce entirely new policy. They are, however, material considerations in the determination of relevant development proposals. This SPD provides detailed guidance on the application of the Local Plan's policies in respect of health-related matters.
- 1.1.3 The SPD highlights the ways in which the planning system can contribute to protecting and improving people's physical and mental health and promote the creation of healthy places. It explains how the relevant Local Plan policies can be applied to achieve better health outcomes and outlines or signposts other strategies and initiatives that support and complement the Local Plan policies.
- 1.1.4 The SPD was adopted by the Council on [to add]

# 1.2 Planning-related Health Impacts

#### The Wider Determinants of Health

- 1.2.1 The World Health Organisation defines health as 'a state of complete physical, mental and social wellbeing'.
- 1.2.2 As well as access to good quality healthcare services, there are many factors that affect health and wellbeing. These include the physical and social conditions in which people live, culture, education, housing, transport, employment, crime, income, leisure and other services. These factors all influence health in either a positive or negative way, both directly and indirectly. These factors are usually known as the 'wider determinants of health' (See Figure 1 overleaf).
- 1.2.3 Differences in health outcomes between different groups of similar age within society are referred to as 'health inequalities. These inequalities are not caused by one single issue but a complex mix of factors reflecting differing social, environmental and economic conditions.
- 1.2.4 A healthy place is one which supports and promotes healthy behaviours and environments and removes health inequalities for people of all ages. It provides people with opportunities to protect and improve their physical and mental health and supports community engagement and wellbeing. It is a place which is inclusive and promotes social interaction. It also meets the needs of children and young people to grow and develop, as well as being adaptable to the needs of an increasingly elderly population and those with dementia and other sensory or mobility impairments.



Table/Figure 1: The Dahlgren and Whitehead model of the Main Determinants of Health

#### The Role of Planning

- 1.2.5 Planning has an important role in influencing these wider determinants of health. Planning policies can directly or indirectly contribute to protecting and improving people's physical and mental health and thus help tackle health inequalities. This is particularly important in Burnley given the health inequalities highlighted in Section 1.3.
- 1.2.6 The planning system alone cannot protect health or improve health outcomes. The planning system only deals directly with 'new' development proposals. Wider political and economic factors e.g. national policy, legislation and tax and spending decisions have a much greater impact on health outcomes. However, if the planning system fails to ensure new development is of an appropriate standard or protect vital green infrastructure, the longer-term opportunities to improve health outcomes will be thwarted. Most importantly in terms of outcomes, successful planning can help improve the economic prosperity of areas by providing land for development and jobs, delivering good quality new development and protecting and enhancing the environment. Increased prosperity enables people to make and afford healthier life choices.

#### **Physical Health**

- 1.2.7 As set out later in Section 1.3, life expectancy for both men and women in Burnley remains lower than the Lancashire and England average, and rates of mortality from heart disease and stroke, and from cancer, are all significantly higher than the Lancashire and England averages. Childhood obesity levels are also above the Lancashire and England averages as are infant mortality rates.
- 1.2.8 The planning system can directly protect people's physical health, for example by ensuring safe design to avoid accidents or helping protect from pollution (that cannot fully be controlled by other statutory regimes).
- 1.2.9 It can indirectly protect people's physical health by helping to tackle obesity and cardio-vascular disease by protecting and providing social and community infrastructure (parks, sports

facilities) and supporting new development which helps people to live more active lifestyles and make healthier food choices.

#### Mental Health

- 1.2.10 Traditionally, physical and mental health have been considered separately. However, the links between mental health and physical health are strong and poor physical health can lead to an increased risk of developing mental health problems. Similarly, poor mental health can have a negative impact on physical health, leading to an increased risk for some conditions.
- 1.2.11 It is reported that 37% of people with severe symptoms of common mental disorders also have one or more of, high blood pressure, cancer, epilepsy or asthma. The Campaign to End Loneliness reports that a lack of social connections is a comparable risk factor for early death as smoking 15 cigarettes a day. It increases the likelihood of mortality by 26%, higher than other well-known risk factors such as obesity and physical inactivity.
- 1.2.12 Good access to education, training and jobs; opportunities for safe social interaction; access to services and facilities including outdoor and green space; good quality housing; and a high-quality general environment all protect and improve people's mental health.
- 1.2.13 Opportunities to shape the environment through commenting on national policy, engaging in the preparation of local plans and SPDs, and through commenting on individual planning applications, are important for people to feel engaged and are also important in harnessing local knowledge and developing and strengthening community structures such as local residents action groups. Whilst local choices can be made over local plan policy approaches and site allocations, local plans (and thus planning decisions) must be consistent with national planning policy and take account of national planning practice guidance. This can cause frustration.
- 1.2.14 Increasing amounts of development do not require planning permission and for those developments that do, planning policies and decisions rarely attract a consensus, and the planning system cannot take into account the effect on people's mental and/or physical health of seeing development proposals approved (or refused) that they personally disagree with e.g. those that will spoil a cherished view they have over private land. Nor can it take into account objections to disturbance and disruption caused during the construction phase of development, providing that this is of course appropriately managed by conditions, for example to restrict activities to working hours. Specific instances of excessive noise or antisocial behaviour arising from development can be dealt with under other legislation outside the planning process.

<sup>&</sup>lt;sup>1</sup> Physical health and mental health | Mental Health Foundation

<sup>&</sup>lt;sup>2</sup> Loneliness Research | Campaign to End Loneliness

# 1.3 Key Health Issues in Burnley

#### **Population**

- 1.3.1 The borough's population in 1991 was 92,000, by 2011 it had fallen to 87,000.<sup>3</sup> The most recent ONS 2020 mid-year population estimate (MYE) indicates a seventh consecutive year of growth and that Burnley's population now stands at 89,344.
- 1.3.2 The latest 2018-based ONS sub-national population projections (SNPP) released in 2020 give a projected population at the end of the Local Plan period (2032) of 91,861. The local plan, in determining the level of housing required, used a population scenario which indicated a population in 2032 of 92,460.
- 1.3.3 The number of people aged 65 and over is growing in Burnley, as in England generally, with a rise from 14,200 people in 2011 to 16,800 in 2020 (+2,600 people).<sup>4</sup>
- 1.3.4 The borough's population is diverse with about 12.6% of its residents at the 2011 Census being black or minority ethnic, an increase from 8.2% in 2001. There is a continuing pattern of residential separation in Burnley with eight out of fifteen of its wards having 3% or fewer residents who are not white, while two wards have a black or minority ethnic population greater than 25% (Queensgate 29%, Daneshouse with Stoneyholme 82%).

#### Health and Deprivation

- 1.3.5 Within some of the inner urban neighbourhoods there are significant pockets of deprivation. This is in stark contrast to the greater affluence of some suburbs and villages.
- 1.3.6 The Indices of Deprivation<sup>5</sup> 2019 ranked Burnley as the 8th most deprived area out of 326 local authority areas in England (based on rank of average scores). In 2015 it was ranked 9th. The most prevalent form of deprivation in Burnley relates to health and disability.
- 1.3.7 Although it is increasing gradually, life expectancy for both men and women in Burnley is lower than the Lancashire and England averages. The table below shows life expectancy since the start of the local plan period 2012. Life expectancy for both men and women is lower than the Lancashire and England average.<sup>6</sup>
- 1.3.8 According to the Burnley Health Profile 2019 (Public Health England), life expectancy is 11.5 years lower for men and 4.5 years lower for women in the most deprived areas of Burnley than in the least deprived areas.

Table/Figure 2: Life Expectancy at Birth

	Year	Burnley	Lancashire (12)	England
Males	2010-2012	75.6	78.0	79.1
	2011-2013	75.6	78.2	79.3
	2012-2014	76.1	78.4	79.4
	2013-2015	76.3	78.5	79.5

<sup>&</sup>lt;sup>3</sup> ONS population mid year estimates (MYE)

<sup>&</sup>lt;sup>4</sup> Source ONS MYE

<sup>&</sup>lt;sup>5</sup> English indices of deprivation 2019 - GOV.UK (www.gov.uk)

<sup>&</sup>lt;sup>6</sup> Office for National Statistics, Life Expectancy at Birth and at Age 65 by Local Areas in England and Wales, 2012-14

	2014-2016	76.7	78.7	79.5
	2015-2017	76.2	78.6	79.6
	2016-2018	76.2	78.5	79.6
	2017-2019	76.0	78.5	79.8
	2018-2020	75.7	78.3	79.4
Females	2010-2012	80.5	81.9	82.9
	2011-2013	80.1	81.9	83.0
	2012-2014	80.1	82.1	83.1
	2013-2015	80.0	82.1	83.1
	2014-2016	80.5	82.2	83.1
	2015-2017	80.9	82.2	83.1
	2016-2018	81.4	82.2	83.2
	2017-2019	80.8	82.3	83.4
	2018-2020	80.3	82.0	83.1

Source: Public Health England & ONS, Local Authority Health Profiles https://fingertips.phe.org.uk/profile/health-profiles

- 1.3.9 The table below shows that Burnley's rates of mortality from heart disease and stroke, and from cancer, are all significantly higher than the Lancashire and England averages. Rates had been steadily decreasing since 2010-2012 but the figures for 2017-2019 saw a slight rise on the previous year's figures, but this was still well below the 2010-12 figures.
- 1.3.10 Modifiable risk factors, including tobacco use, alcohol consumption, poor diet, physical inactivity and being overweight or obese, contribute to the number of early deaths from these diseases as do environmental factors such as (sometimes historic) industrial pollution and pollution from vehicle emissions.

Table/Figure 3: Mortality Rates by Disease

	Year	Burnley	Lancashire (12)	England
Mortality due to cardiovascular	2010-2012	121.2	92.6	80.8
disease (inc. heart disease and	2011-2013	113.9	89.8	77.8
stroke) per 100,000 population of those under 75	2012-2014	109.9	85.6	75.7
	2013-2015	106.0	85.0	74.6
	2014-2016	103.1	82.1	73.5
	2015-2017	102.4	81.1	72.5
	2016-2018	99.8	81.4	71.7
	2017-2019	101.4	83.7	70.4
Mortality due to cancer per 100,000	2010-2012	205.1	156.6	146.5
population of those under 75	2011-2013	188.0	155.8	144.4
	2012-2014	183.7	149.8	141.5
	2013-2015	170.3	143.5	138.8
	2014-2016	168.6	138.5	136.8
	2015-2017	170.2	137.8	134.6
	2016-2018	163.1	138.3	132.3
	2017-2019	168.7	136.4	129.2

Source: Public Health England & ONS, Local Authority Health Profiles (As Above)

1.3.11 The table below shows that the infant mortality rate in Burnley (rate per 1000 live births), remains higher than the Lancashire and England averages but at its lowest rate since 2012.

**Table/Figure 4:** Infant Mortality Rates

	Burnley	Lancashire (12)	England
2010-2012	6.6	5.1	4.3
2011-2013	6.7	5.3	4.1
2012-2014	5.9	4.8	4.0
2013-2015	8.2	4.6	3.9
2014-2016	6.8	4.5	3.9
2015-2017	7.8	4.7	3.9
2016-2018	6.6	4.7	3.9
2017-2019	7.0	4.2	3.9
2018-2020	5.1	3.8	3.9

Source: Public Health England & ONS, Local Authority Health Profiles (As Above)

1.3.12 According to the Burnley Health Profile in 2019/20 22.0% (250) Year 6 children (10-11 years old) were classified as obese; this is a marked increase from the rate in 2018/19. The Burnley rate is above the Lancashire and England rate. The Lancashire and England rates are gradually increasing.

Table/Figure 5: Obesity in Children (Year 6 ages 10-11)

Year	Burnley	Lancashire (12)	England
2012/13	19.1	17.9	18.9
2013/14	21.0	18.1	19.1
2014/15	21.7	18.4	19.1
2015/16	23.4	18.9	19.8
2016/17	21.2	18.9	20.0
2017/18	22.7	18.8	20.1
2018/19	20.0	19.9	20.2
2019/20	22.0	20.7	21.0

Source: Public Health England & ONS, Local Authority Health Profiles (As Above)

1.3.13 The following table below from the 2011 Census shows the number and percentage of people in Burnley whose day-to-day activities were limited by long term illness or disability.

Table/Figure 6: Day-to-day activities limited by long term illness or disability 2011 Census

	Population	A lot	A lot %	Little	Little %	Not limited	Not limited %
Burnley	87, 059	10,090	11.6	9,517	10.9	67,452	77.5

Source: ONS 2011 Census

#### **Activity Levels**

- 1.3.14 Since November 2015, Sport England has conducted a survey called the 'Active Lives Survey' which measures sport and physical activity level across England.<sup>7</sup>
- 1.3.15 The survey from May 2020/218 found that in Burnley:
  - 34.4% of people were classed as 'inactive' (less than 30 minutes activity per week), compared to the England average of 27.5%
  - 10.9% of people were classed as 'fairly active' (30-149 minutes of activity per week), compared to the England average of 11.6%
  - 54.7% of people were classed as 'active' (at least 150 minutes of activity per week), compared to the England average of 60.9%

1.3.16 In 2020/21 the percentage of people classed as inactive continued to increase reaching a high of 34.4%. The percentage of people who were classed as fairly active declined again in 2020/21 to 10.9%. The percentage of people who were classed as active in 2020/21 remained flat at 54.7%. It is important to note that the COVID-19 pandemic may have impacted the recent figures due to the enforced closure of sports facilities.

Table/Figure 7: Physical Activity – Active Lives Survey

	Inactive %	Fairly Active %	Active %
Nov 2015/16	31.7	12.6	55.7
May 2016/17	30.8	11.3	57.8
May 2017/18	26.0	12.9	61.1
May 2018/19	29.0	15.0	56.0
May 2019/20	33.9	11.4	54.7
May 2020/21	34.4	10.9	54.7

Source https://activelives.sportengland.org

#### Housing Stock

1.3.17 Burnley has a much higher proportion of terraced housing than England or the region as a whole. Terraced housing made up 50.1% of Burnley's total housing stock of 39,962 according to the 2011 census (compared to a regional average of 30% and an England average of 24.5%). The vision and objectives of the Local plan identified the need to improve housing quality and choice and support economic growth. This included diversifying away from smaller terraced properties, to provide larger aspirational detached and semi-detached homes with gardens and off-street parking - while still providing quality and choice at all ends of the market and ensuring the efficient use of land.

1.3.18 Much of the terraced housing stock comprises pre-1919 two bedroomed houses and this not only constrains choice in the housing market, but can have health impacts. A majority of the terraced stock has no off-street parking, a small rear yard and in most cases no front gardens. The limited private amenity space together with modern refuse and recycling arrangements means there is very

<sup>&</sup>lt;sup>7</sup> Source: Sport England Active Lives data tables | Sport England

<sup>&</sup>lt;sup>8</sup> These estimates include the activities of walking, cycling, dance, fitness and sporting activities, but exclude gardening which is outside of Sport England's remit. Activity is counted in moderate intensity equivalent minutes whereby each 'moderate' minute counts as one minute and each 'vigorous' minute counts as two moderate minutes.

little space for people to have any form of greenery or food growing at home and limited opportunities for sitting out in the fresh air or sunshine, in private, or away from refuse bins.

- 1.3.19 Furthermore, levels of excess cold and poor thermal comfort in Burnley's housing stock are higher than the England average and in 2009 13,100 homes failed the thermal comfort criterion of the decent homes definition.<sup>9</sup>
- 1.3.20 Terraced housing remains very popular and provides a suitable and affordable product for many people, but it is essential that residents in smaller terraces in particular, have access to green space nearby. This includes both physical access for relaxation, play and exercise and visual access to green areas with plants and trees. The availability of allotments for those who do not have gardens is also important.





Well maintained small street terraces – (left) no hint of greenery - but (right) in the parallel street - the beautiful Thursby Park © Google Street View

1.3.21 The importance of access to green infrastructure to people's physical and mental health was highlighted during the early months of the Covid-19 pandemic. Due to 'lockdown' restrictions, the opportunity to exercise outdoors and close to home was of increased importance for everybody, but for those who live in flats or homes without private gardens and for those without access to a private car, locally accessible open spaces were essential for their physical and mental health.

#### Fuel Poverty

- 1.3.22 The definition of fuel poverty has undergone a series of revisions over the past decade.
- 1.3.23 Under a previously used definition, a household was considered to be in fuel poverty if it spent more than 10% of its income on fuel, but this measure could include both people in financial difficulties and those who could comfortably spend over 10% of their income heating larger properties that are at the higher end of the price range. It was therefore considered an indicator of limited value.
- 1.3.24 In June 2014, fuel poverty results for 2012 were published by the Department of Energy and Climate Change (now the Department for Business, Energy & Industrial Strategy BEIS). These used a new definition of fuel poverty, the 'low income high costs' method of calculation. A household was then defined as 'fuel poor' if:
  - A household has required fuel costs that are above the median level; and
  - Were the household to spend that amount, they would be left with a residual income below the official poverty line.

<sup>&</sup>lt;sup>9</sup> According to the 2009 Pennine Lancashire House Condition Survey

- 1.3.25 Using this definition, in 2019, (the latest stats available) the number of households in fuel poverty in England was estimated at 3.2 million, representing approximately 13.4% of all English households. This proportion is a substantial increase from 10.2% in 2018.
- 1.3.26 The 2019 results indicated that in Lancashire, 71,822 households (13.7%) were in fuel poverty. Within Lancashire, Pendle (17.3%) had the 26th worst rate in the country, whilst Burnley at 16.4% had the 42nd worst rate. Whilst Burnley had improved in the England ranking from the 20th worst overall, this still represents a worse position than in 2018 when the number was 5,353 equating to 13.6% (BEIS/Lancashire Profile).
- 1.3.27 In 2019 within Burnley, one urban neighbourhood (LSOAs) had levels of fuel poverty above 30%, which was an improved position on 2018 when three urban neighbourhoods (LSOAs) had levels of fuel poverty above 30%.
- 1.3.28 In February 2021 a new fuel poverty strategy was published<sup>10</sup> and a new fuel poverty metric 'Low Income Low Energy Efficiency' (LILEE) was set out in the strategy. The LILEE indicator considers a household to be fuel poor if:
  - it is living in a property with an energy efficiency rating of band D, E, F or G as determined by the most up-to-date Fuel Poverty Energy Efficiency Rating (FPEER) Methodology; and
  - its disposable income (income after housing costs (AHC) and energy needs) would be below the poverty line.

Table/Figure 8: Households in fuel poverty in East Lancashire 2019

Area	All households (estimated number)	Fuel-poor households (estimated number)	Fuel-poor households (%)	Rank out of 314 local authorities in England
Burnley	39,670	6,507	16.4	42
Blackburn with Darwen	60,504	9,922	16.4	43
Hyndburn	36,271	5,642	15.6	67
Pendle	39,460	6,818	17.3	26
Ribble Valley	25,463	2,978	11.7	196
Rossendale	30,654	4,549	14.8	90
Lancashire	524,303	71,822	13.7	-
North West	3,177,487	461,364	14.5	-
England	23,661,751	3,175,979	13.4	-

Source: Department for Business, Energy & Industrial Strategy (2019 sub-regional fuel poverty data, low income high cost measure) https://www.lancashire.gov.uk/lancashire-insight/deprivation/fuel-poverty/https://www.gov.uk/government/statistics/sub-regional-fuel-poverty-data-2021

- 1.3.29 The issues of thermally inefficient stock and higher than average levels of fuel poverty overlap.
- 1.3.30 There have been dramatic rises in the wholesale energy prices since summer 2020 and more and more customers are facing large increases in bills as fixed rate deals end and standard tariff rates increase. From 1 April 2022, the Ofgem price cap for direct debit customers increased by £693, rising to £1,978 per year (increasing from £1277 in October 2021). Customers paying via other methods, such as prepayment meters, had higher tariff caps. In addition to some targeted and universal support

<sup>&</sup>lt;sup>10</sup> Sustainable warmth: protecting vulnerable households in England - GOV.UK (www.gov.uk)

for domestic customers in 2022/3, the Government has announced an Energy Price Guarantee which is to come into effect on 1 October 2022 and will limit (cap) the unit cost of electricity and gas so that a household with typical energy use in Great Britain pays, on average, around £2,500 a year on their energy bill until April 2023. This cap was originally intended to remain for "the next two years", but the Government has subsequently announced a Treasury-led review into how it supports energy bills beyond April 2023.

1.3.31 These rising costs will no doubt increase the numbers of people in fuel poverty.

#### Fast Food and Takeaways

- 1.3.32 As part of its policy monitoring the Council conducts a biennial survey of use classes and vacancies within the two Town Centres of Burnley and Padiham and the eight District Centres. The most recent survey was completed in May 2021. The survey data can be used for many purposes, including to identify the location of hot food takeaways (A5/Sui Generis Use Class).
- 1.3.33 Public Health England (PHE) data published in 2018 showed the density of "fast food outlets" for each local authority in England, with the figures ranging from 26 to 232 outlets per 100,000 population, with the average across England being 96.1. It indicates that there were 147 fast food outlets in Burnley giving at density of 168, the 3rd highest in England. Figures for the number of outlets in each ward is also available. This data does not just include hot food takeaways but also restaurants and other establishment's selling certain types of fast food.
- 1.3.34 Further information and comment on the statistics for Lancashire and Burnley is set out in Appendix B.
- 1.3.35 There is strong evidence linking the density of fast food outlets to the level of an area's deprivation and the data shows higher concentrations of fast food outlets in England's most deprived communities. Whilst the link between the regular consumption of hot food takeaways and obesity is widely accepted, and there is an established correlation between the prevalence of outlets in a particular and the level of deprivation, it has not possible to determine how much of this is a cause of deprivation or an effect. It is both.











### **Further Information**

1.3.36 Further information on health is set out on the Council's Authority Monitoring Report (AMR) and Public Health England's local authority health profiles. Local Authority Health Profiles - OHID (phe.org.uk)

<sup>&</sup>lt;sup>11</sup> Fast food outlets: density by local authority in England - GOV.UK (www.gov.uk)

<sup>12</sup> Local Authority Health Profiles - OHID (phe.org.uk)

# 2.1 National Planning Policy

- 2.1.1 National planning policy exists in the form of the National Planning Policy Framework (NPPF)<sup>13</sup> and a small number of other policy documents and Written Ministerial Statements (WMS), supported by a regularly updated online practice guidance covering a series of themes (NPPG).<sup>14</sup> It also exists in the provisions of relevant legislation. Local Plans are prepared to be consistent with national policy.
- 2.1.2 The NPPF has a presumption in favour of sustainable development, with three dimensions to the concept: economic; social; and environmental. The social role comprises 'supporting 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 well-designed beautiful and safe places, with accessible services and open spaces that reflect current and future needs and support communities' health, social and cultural well-being.'
- 2.1.3 The NPPF discusses the importance of 'promoting healthy and safe communities' and states that planning policies and decisions should: 'Aim to achieve healthy, inclusive and safe places which...
  - c) 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'. <sup>15</sup> (Para 92c)
- 2.1.4 The NPPF also states that:
  - "Planning policies and decisions should promote an effective use of land in meeting the need for homes and other uses, while safeguarding and improving the environment and ensuring safe and healthy living conditions." (Para 119)<sup>16</sup>
- 2.1.5 The National Design Guide 2021<sup>17</sup> also highlights key environmental elements that promote health, including the section 'Nature' (p26-29):
  - 'To encourage physical activity and promote health, well-being and social inclusion.' (Nature, well-designed places, p26).
- 2.1.6 The National Model Design Code 2021<sup>18</sup> sets a baseline standard for quality and practice which local planning authorities are expected to take into account when determining applications, including "how the design of new development enhances the health and wellbeing of local communities and creates safe, accessible and active environments" (Part One, Para 11)
- 2.1.7 Planning Practice Guidance (NPPG) refers to planning for an environment that supports people of all ages in making healthy choices, helps to promote active travel and physical activity, and promotes access to healthier food, high quality open spaces, green infrastructure, play, sport and

<sup>&</sup>lt;sup>13</sup> Current version 2021 National Planning Policy Framework

<sup>&</sup>lt;sup>14</sup> Planning practice guidance - GOV.UK (www.gov.uk)

<sup>&</sup>lt;sup>15</sup> Mention of access to healthier food and allotments were specifically added to the 2018 version and the creation of community orchards in the 2021 version Para 131

<sup>&</sup>lt;sup>16</sup> Reference to 'healthy living conditions' was first mentioned in the 2018 NPPF. The 2012 NPPF use the phrase 'acceptable living standards'. This is a clarification rather than a change in policy and seeks to highlight the link between these matters and health

<sup>&</sup>lt;sup>17</sup> National design guide - GOV.UK (www.gov.uk)

<sup>&</sup>lt;sup>18</sup> National Model Design Code National Model Design Code - GOV.UK (www.gov.uk)

recreation. It confirms that planning can influence the built environment to improve health and wellbeing.

#### Planning Reform

2.1.8 This SPD does not take account of the proposals for the reform of the current system of planmaking and development contributions set out in the Levelling Up and Regeneration Bill of May 2022.

# 2.2 Local Policy

#### Burnley's Local Plan

- 2.2.1 Burnley's Local Plan 2012-2032 was adopted on the 31 July 2018. It is a comprehensive local plan which includes a full suite of strategic and other policies which identify the quantum and quality of development required and allocate sites.
- 2.2.2 A number of its policies have direct or indirect impacts on the wider determinants of health. Indeed, it could be argued that almost every policy has some impact even if health is not its main or a key emphasis. The key policies and their health impacts are discussed in Sections 3 to 7.

#### Strategic (Corporate) Plan

- 2.2.3 The Council's Strategic Plan (February 2021)<sup>19</sup> sets out how the Council will address the key challenges facing the borough, grouped under four strategic policy themes: People, Places, Prosperity and Performance.
- 2.2.4 It recognises that reducing health inequality is a significant challenge in Burnley and that the Council is well positioned to influence and deliver many measures that can help prevent ill health, both through its key functions (parks and greenspaces, housing and environmental health); and its enabling role particularly in improving community safety and its partnership with Burnley Leisure. Moreover, it recognises that poverty is a significant cause of poor health and accordingly the most significant long-term contribution to reducing health inequality is the Council's commitment to help grow the local economy and increase educational attainment and skills.
- 2.2.5 Whilst the Local Plan cannot introduce policies directly addressing the refurbishment of the existing housing stock, through the Plan's Vision, Objectives and suite of policies and allocations which support economic growth, it aims to facilitate and support wider improvement and investment in the existing housing stock. This is supported by a wide range of complementary actions such as the Council's Empty Home Programme, Selective Licencing, Good Landlord and Agent Scheme and various grant schemes.

#### Community Recovery Plan

2.2.6 The Council has also developed a Community Recovery Plan which sets out a co-ordinated multi-agency partner approach to assisting with the local recovery from the Covid-19 Pandemic which began in 2020. This includes a number of actions for the period up to March 2021, under the interlinked categories of impact including economy; health and wellbeing; community and inclusion. <sup>20</sup>

<sup>&</sup>lt;sup>19</sup> Burnley Council Strategic Plan 2019 (moderngov.co.uk)

<sup>&</sup>lt;sup>20</sup> Community Recovery Plan November 2020 1.pdf (moderngov.co.uk)

# Climate Change Strategy

2.2.7 In July 2019 the Council declared a climate emergency to highlight the importance and urgency of the issue. To support this declaration the Council adopted a 5-year Climate Change Strategy in February 2022 that draws together all the work that the Council is doing, and intends to do, to tackle the issue and ensure that it does everything practically possible to limit Burnley's contribution to global climate change and adapt to its effects.

#### Facilities-related strategies

#### **Green Spaces Strategy**

- 2.2.8 Burnley Borough Council's Green Spaces Strategy 2015-2025 recommends standards for open space provision. These informed the development of the Local Plan and in particular Policy HS4. It also identifies priorities for improvements for:
  - Parks and Gardens;
  - Natural and Semi-Natural Greenspaces;
  - Amenity Green Spaces;
  - Provision for children and young people;
  - Outdoor sport;
  - Allotments;
  - · Cemeteries, and
  - Greenways.

#### Play Area Strategy

2.2.9 The Burnley Play Area Strategy 2017-2026 identifies the borough's existing play facilities, those to be maintained and where new provision may be required. This strategy will inform the requirement for and location of new or enhanced/safeguarded play space provision required under Policy HS4 or IC5.

#### Playing Pitch Strategy

- 2.2.10 The Rossendale, Pendle and Burnley Playing Pitch Strategy 2016-2026 (PPS) identifies where protection, enhancement and the provision of new sites for football (both adult and junior), cricket, rugby union, rugby league, hockey, tennis, bowls and rounders should occur up to 2026. These informed the development of the Local Plan and in particular the site allocations. An update of the strategy is underway.
- 2.2.11 In accordance with the Local Plan, where Sport England raise an objection to the loss of any existing playing pitch or field and requires replacement provision, or requires new provision to support development and this is backed up by up to date evidence, in particular through the PPS; the Council may seek contributions from developers towards this, and such contributions will be prioritised as being 'necessary and critical' and thus 'priority 1'. In cases where suitable replacement cannot be achieved, planning permission would normally be refused.<sup>21</sup>

<sup>&</sup>lt;sup>21</sup> See Developer Contributions SPD 2020

#### Together an Active Burnley

2.2.12 Together an active Burnley: the physical activity and sport strategy for Burnley 2018 2023 sets out a long-term vision for physical activity and sport in Burnley and how it can contribute to the priorities for improving life in the borough for all. It aims to help create the right environment so that the choice for the least active residents to build activity into their everyday lives is an easy and enjoyable one and to create the conditions for local residents to thrive, develop key life skills and reach their potential through and in sport.

# 2.3 Other Health-related Strategies, Initiatives and Guidance

- 2.3.1 A wide range of national, regional and local health related strategies and guidance are relevant to planning for health. National strategies inform the policy content of the NPPF and therefore the Local Plan. Regional and local strategies also inform the development of the Local Plan and the relevant bodies are engaged in the Local Plan's production e.g. NHS, Lancashire County Council, Sport England.
- 2.3.2 New and updated strategies and initiatives (that postdate the Local Plan and have direct relevance to its content) include the following:

#### Local Authority Healthy Weight Declaration

2.3.3 The Healthy Weight Declaration was designed by Food Active to support local government in developing and implementing policies which promote healthy weight. The Council signed up to this declaration in 2022.<sup>22</sup>

#### Pennine Lancashire Childhood Obesity Trailblazer Programme

- 2.3.4 The 'Healthier Place Healthier Future' Programme (HPHF) is one of five Government funded childhood obesity trailblazers.<sup>23</sup> Referenced in the Childhood Obesity Plan: Chapter 2, the trailblazer programme supports local authorities to test existing levers to improve child health and increase the prevalence of healthy weight. The programme is commissioned by the Department for Health and Social Care (DHSC) and delivered by the Local Government Association (LGA).
- 2.3.5 The Pennine Lancashire Trailblazer includes a consortium of seven Council's: Blackburn with Darwen, Burnley, Hyndburn, Pendle, Ribble Valley, Rossendale and Lancashire County Council. Funding is for three years. The programme commenced in June 2019.
- 2.3.6 The HPHF team are working across and within the districts to collaboratively improve the food environment and make it easier for people to lead healthier lives. Delivery is focused on working within wards that have high levels of deprivation, large concentrations of fast-food establishments and children living with obesity.
- 2.3.7 The project is built upon 'four levers for change' to influence healthier environments. These four levers are:
  - **System leadership:** working with system leaders to engage and inspire action to support healthy weight and more broadly the health and wellbeing agenda.

<sup>&</sup>lt;sup>22</sup> Food Active | Local Authority Declaration on Healthy Weight

<sup>&</sup>lt;sup>23</sup> Childhood Obesity Trailblazer Programme | Local Government Association

- **Businesses:** working with food businesses to encourage a healthier offer and to provide business support in return.
- **Planning:** working with planning authorities to support development of healthier places; aligning policy across the districts and using planning to support public health.
- **Communities:** working with communities to make sure what we are doing meets the needs of our Pennine Lancashire residents, giving them the opportunity to drive change and push for a healthier, accessible, and affordable food environment.

#### The Planning Lever

- 2.3.8 The planning lever aims to gather evidence and influence the development of positive planning policies to encourage healthier lifestyles. Specifically, the project is working with districts to influence local plans (where these are actively being written or updated) and where possible, align policies across districts. For others, such as in Burnley, it is supporting policy implementation and the production of a Planning for Health SPD (this document).
- 2.3.9 The agreed planning related actions, include:
  - Development of a Planning for Health SPD (for Burnley to be adopted by June 2022)<sup>24</sup>
  - Conducting a 'deep dive' into the policies, planning decisions and appeals relating to food outlets in Pennine Lancashire.
  - Developing a joint planner's agreement on health.

#### Together an Active Future

- 2.3.10 The Pennine Lancashire Together an Active Future (TaAF) initiative is one of twelve Sport England Local Delivery Pilots (LDPs).<sup>25</sup> TaAF has small teams across Pennine Lancashire whose role is to bring together local people and partners and improve the opportunities for people to be more active.
- 2.3.11 Sport England has also published a new 10 year strategy Uniting the Movement which seeks to tackle the long-standing inequalities in sport and physical activity.

#### 25 Year Environment Plan

2.3.12 The government's 25 Year Environment Plan published in 2018 sets out its goals for "improving the environment, within a generation, and leaving it in a better state than we found it". It details how government will work with communities and businesses to do this. It sets out what the government will be doing over the next 25 years. It includes policies/goals to connect people with the environment to improve health and wellbeing (chapter 3), including through new development.

#### Office for Health Improvement and Disparities (OHID)(was Public Health England)

2.3.13 Public Health England was replaced in 2021 by the UK Health Security Agency and Office for Health Improvement and Disparities.

<sup>&</sup>lt;sup>24</sup> SPD's were to be supported initially in Rossendale and Pendle and then in Burnley, Hyndburn and Ribble Valley

<sup>&</sup>lt;sup>25</sup> Local delivery | Sport England

- 2.3.14 Public Health England's 2020 publication 'Using the Planning System to Promote Healthy Weight Environments' postdates the adoption of Burnley's Local Plan. It does not include anything that is incompatible with the Local Plan approach, and it provides a useful overview of the ways in which the planning system can improve health outcomes around diet, obesity and physical activity and create a healthy weight environment. A healthy weight environment is one that supports individuals and local communities in maintaining and achieving a healthy weight through facilitating access to healthier food and active environments.
- 2.3.15 The guidance promotes the use of SPDs to support adopted local plan policies. It recognises that improving the quality of the environment by actively promoting walking and cycling, enabling easier access to healthier food and drink options and supporting a diverse and healthy high street retail offer, can help promote a healthy weight and reduce inequalities associated with obesity prevalence.
- 2.3.16 The guidance highlights that effective planning for health can contribute to an area's economic wellbeing and that there are other co-benefits to be realised such as improving air quality and tackling issues of refuse, litter and smells.
- 2.3.17 The guidance was written before the 2020 and 2021 Use Class Order changes and extensions of Permitted Development rights further limited the tools available to local planning authorities to shape their areas.

#### **National Obesity Strategy**

2.3.18 The 2020 policy paper 'Tackling obesity: empowering adults and children to live healthier lives<sup>27</sup> outlines actions the government will take to tackle obesity and help adults and children to live healthier lives.

#### Social Prescribing

- 2.3.19 Social Prescribing is a non-medical intervention to support people's health and wellbeing. Referral routes are typically GPs, other medical professionals and include self-referrals.
- 2.3.20 These interventions are often provided by the Voluntary, Community, Faith and Social Enterprise sector (VCFSE). Green Social Prescribing involves referrals to nature-based interventions and activities that link people to natural environments.

#### Lancashire Health and Well Being Board

- 2.3.21 Lancashire County Council has had a responsibility for Public Health since its transfer from the NHS in 2013. Public Health includes a focus on improving health and wellbeing outcomes for people and their communities. It also includes focus on prevention, promoting behaviour change and addressing health inequalities.
- 2.3.22 It coordinates a Health and Wellbeing Board made up of key leaders from the health and care system in Lancashire to work together to improve the health and wellbeing of the local population and identify the priority health and wellbeing needs of the area (using the Joint Strategic Needs Assessment). It published and annual report on the state of our health and wellbeing across Lancashire: Report of the Director of Public Health 2020/21.

<sup>&</sup>lt;sup>26</sup> Healthy weight environments: using the planning system - GOV.UK (www.gov.uk)

<sup>&</sup>lt;sup>27</sup> Tackling obesity: empowering adults and children to live healthier lives - GOV.UK (www.gov.uk)

# 3.1 Introduction

- 3.1.1 Burnley's Local Plan 2012-2032 was adopted on the 31 July 2018. It is a comprehensive local plan which includes a vision, objectives, strategic and other policies and site allocations.
- 3.1.2 The Local Plan Vision for Burnley is supported by a number of Objectives designed to address the key issues and challenges identified and summarised section 2 of the Plan. These include:

#### Key Issues & Challenges:

- An ageing population
- Reversing trends of outmigration, particularly of the working age population
- Reducing deprivation and health inequalities
- Reducing crime
- 3.1.3 All policies and choices made in the Local Plan flow from its Vision and Objectives (whilst also ensuring the plan is consistent with national policy as this is one of the tests of the plan's 'soundness.')
- 3.1.4 The eleven local plan objectives are set out in Appendix A, but of particular note is objective 6.

"To improve mental and physical health and wellbeing by improving environmental quality and increasing opportunities for exercise and for sport and recreation, including improved access to nature and the wider countryside."

- 3.1.5 The development of the Local Plan was also subject to Sustainability Appraisal and Strategic Environmental Assessment (SA). The SA is an iterative process that looks at the significant effects of the emerging plan and the reasonable alternatives and culminates in a final report. The SA looks at the social, economic and environmental effects of the plan's, vision, objectives, policies and site choices and tests them against a series of SA Objectives.
- 3.1.6 These included Objective 7: "To improve physical and mental health and reduce health inequality"; with three sub-objectives/questions: 7a. Will it promote healthier lifestyles? 7b. Will it reduce health inequalities among different groups in the community? and 7c. Will it reduce isolation for vulnerable people? <sup>28</sup>

# 3.2 Local Plan Health Impacts

- 3.2.1 Whilst it could be shown that almost every Local Plan policy has a potential direct or indirect impact on people's mental or physical health even if health is not its main or key emphasis, a number of policies have a specific link which the SPD seeks to explore.
- 3.2.2 For some policies, the link to health is obvious and the application of the policy is clear and there is no need for discussion or additional guidance on the application of the policy in this SPD e.g. Policy IC1 c) ensuring safe and convenient access.
- 3.2.3 For others, the link is either less clear or more complex and the SPD can be used to assist in the interpretation of the policy and its health impacts to better inform planning decisions.

<sup>&</sup>lt;sup>28</sup> Sustainability Appraisal | Burnley Borough Council

- 3.2.4 Policies have been grouped as follows:
  - Environmental Protection Policies (section 4
  - Open Space and Infrastructure Policies (section 5)
  - Sustainable Travel and Transport Policies (section 6) and
  - Food Environment Policies (section 7)

# 3.3 Themes and Impacts

- 3.3.1 For this SPD, in assessing the health impacts of policies, the following themes have been identified. An individual policy may address more than one of these themes.
- Theme 1 Policies that protect people from harm
- Theme 2 Policies that seek to enable people to live healthier lifestyles
- Theme 3 Policies that seek to provide access to health infrastructure
- Theme 4 Policies that involve the general protection or enhancement of the environment that can improve quality of life.
- 3.3.2 The key policies are then scored in relation to their role and relative importance ('Impact') in tackling these health issues and inequalities. This impact scoring does not reflect the importance of the health issue, but rather the importance of the planning tool to the matter (against the availability of other tools). This approach will give applicants a clear indication of the firmness of the application of certain key policies and aligns with the prioritisation established in the Developer Contributions SPD.
- 3.3.3 Where a policy or specific clause is identified as Impact 1, the highest level of policy compliance will be sought, particularly where it is in association with Theme 1.
- 3.3.4 A summary matrix of Themes and Impacts of the key policies is set out in Section 8.
- **Impact 1**: Where the planning tool clearly can or does have a positive effect on its own (regardless of other agencies' activities) but is also essential to the efforts of other agencies to address health issues and inequalities; and where normal levels of public and private sector funding can deliver the policy e.g. protection of precious open space and ensuring safe vehicular access in new development.
- **Impact 2:** Where the planning tool is one of the key tools available in relation to the matter and is essential to the efforts of other agencies to address health issues and inequalities; and where it clearly can or does have a positive effect, but is heavily reliant on public sector funding or private sector investment e.g. the protection and provision of formal sports and play facilities.
- **Impact 3**: Where the planning tool complements wider efforts to tackle health inequalities but has a limited effect on its own e.g. controlling the location and where possible the menu offer of hot food takeaways.

# 3.4 How to use this SPD

- 3.4.1 Planning decisions by law must be made in accordance with the local plan (the development plan) unless material considerations indicate otherwise. Material considerations can include changes to national policy which postdate the local plan and SPDs; however, the local plan remains the starting point.
- 3.4.2 Whilst SPDs cannot introduce entirely new policy, they can elaborate on the application of local plan policies in respect of health-related matters and identify any new national policy which as a material consideration, strengthens or otherwise the plan's policies.
- 3.4.3 Many factors have to be balanced in planning decisions and achieving sustainable development; some matters are mutually supportive, whilst others pull in different directions.
- 3.4.4 The aim of this SPD is to identify in more detail than is possible in the Local Plan itself, the important links between planning policies and decisions and people's physical and mental health, to highlight how important the matter is in Burnley with its acknowledged health inequalities, and to aid decision making by categorising relevant policies/clauses according to their health impact.
- 3.4.5 This is discussed in sections 4-7 and summarised in the matrix in Section 8.

#### **Planning Application Submissions**

#### Validation Checklist

- 3.4.6 The Council's validation checklist<sup>29</sup> sets out the requirements for planning submissions. It requires all 'major' applications to be accompanied by a number of assessments (and some non-major applications in specific circumstances). At present, a separate health impact assessment (HIA)<sup>30</sup> is not required. For major applications however, a 'planning statement' is required.
- 3.4.7 Planning statements are normally prepared by professional planning agents but may be prepared by others. They may incorporate other assessments required e.g. affordable housing statement, but they should as a minimum provide an explanation and justification for the proposals in the context of local plan policies and any other material considerations, including adopted SPDs. A suitable statement may include:
  - An assessment of the site and its context
  - A description of the proposed development
  - An assessment of the relevant planning policies and an appraisal of how the proposal accords with that policy context
  - Any need for the development and any benefits that would arise from it (such as economic benefits from new employment, provision of community facilities, affordable housing, environmental improvements etc)
- 3.4.8 The current validation checklist dates from 2017 and requires updating. The updated version will include reference to the adopted Local Plan, all of the Council's adopted SPDs and any consequent additional/refined information requirements, including any requirements for HIA.

<sup>&</sup>lt;sup>29</sup> Planning Application Validation Checklist 1st November 2017.pdf (burnley.gov.uk)

<sup>&</sup>lt;sup>30</sup> Health Impact Assessment in spatial planning - GOV.UK (www.gov.uk)

# 4. Environmental Protection Policies

# 4.1 Policy NE5: Environmental Protection

Relevant Themes:	Impact Level:
Theme 1 - Policies that protect people from harm	1

- 4.1.1 Local Plan **Policy NE5: Environmental Protection** sets out the requirements for new development to address environmental impacts which can have a direct impact on health. These include:
  - air quality
  - light pollution
  - noise pollution
  - land contamination, and
  - land instability
- 4.1.2 Developments that have potential impacts on any of these five categories identified in policy NE5 would be the subject of consultation with any relevant national bodies e.g. the Coal Authority and internally with the Council's environmental health officers.
- 4.1.3 For allocated sites where development has already been determined to be acceptable in principle, these factors will have already been considered and determined to be capable of being addressed, but they will need to be further assessed in terms of the specific design and mitigation measures at the planning application stage, and subsequently through the successful discharge of relevant conditions.
- 4.1.4 Policy NE5 is now supported by the Air Quality Management: Protecting Health and Addressing Climate Change SPD which sets out the requirements for new developments to address air quality impacts primarily in terms of vehicle emission-related pollutants. These are known to have adverse impacts on people's health above certain exposure levels. They also contribute to climate change, the effects of which can also impact on people's health.



4.1.5 Whilst Policy IC3 Clause 8) requires the provision of ultra-low emission vehicle (ULEV) charging infrastructure in accordance with specific standards set out in the Plan's Appendix 9; **Policy NE5 4**) supports and promotes additional provision to protect air quality. These standards, which are being successfully implemented, will in due course be overtaken by the higher provision standards set out in revisions to the Building Regulations introduced in December 2021 (Part S). These will take effect from 15 June 2022 and require the installation of infrastructure (charging points and/or cabling) for the charging of electric vehicles for certain building projects. The projects covered include most new dwellings with 'associated' (on site) parking spaces.

- 4.1.6 There exist separate legislative regimes which seek to prevent certain levels of environmental and physical harm, such as air and water pollution, or noise nuisance. The grant of planning permission does not override these separate controls. The policies of the Local Plan do however, seek to avoid situations where planning permission is granted for schemes which are likely to cause breaches (serious and/or regular) of this separate legislation.
- 4.1.7 The policies of the Local Plan also go further than this and seek to protect the environment from levels of harm that may fall below the standard that can be separately enforced under other regimes but still could be demonstrably detrimental to people's physical and mental health. This may result in applications being refused or conditions being attached to planning permissions to help ensure this does not occur e.g. conditions imposed that restrict the hours of working on business premises or construction activity.
- 4.1.8 Policy NE5 requires the risk of adverse impacts to be minimised and supports refusal where the levels of any "negative" or "adverse" impacts are "unacceptable" (air quality and light pollution) or would result in "significant impact on health and quality of life" (noise pollution).

#### Limitations

- 4.1.9 The widening of Permitted Development rights and reforms to the Use Classes Order means more and more development does not require planning permission and so the Council has less control over potentially harmful development.
- 4.1.10 Even where the Council does have control, its planning decisions cannot take into account the effect on people's mental and/or physical health of seeing development proposals approved that they personally disagree with e.g. those that will spoil a cherished view they have over private land. Schemes cannot be refused simply because they will have an impact e.g. create some additional noise from traffic or site activity that was not present previously or because they will cause some disturbance and disruption during their construction phase. The issue is about the level of impact (as set out in para 4.1.8 above). Conditions may be imposed to help minimise impacts for example to restrict activities to working hours, require wheel washing of construction vehicles etc.

#### Summary

4.1.11 Policy NE5 is a key policy in ensuring development does not create unacceptable adverse environmental impacts which can affect people's physical and mental health. Whilst it is complemented by other legislative regimes, the policy has a clear positive impact on its own and failure to apply the policy can cause real harm to human health and /or create compliance issues for other legislative regimes. It is therefore identified in this SPD as Theme 1, Impact level 1.

# 4.2 Policy SP5: Development Quality and Sustainability

Relevant Themes:	Impact Level:
Theme 1 - Policies that protect people from harm	1
Theme 2 - Policies that seek to enable people to live healthier lifestyles	2
Theme 4 - Policies that involve the general protection or enhancement of the environment that can improve quality of life.	2

**4.2.1** Policy SP5: Development Quality and Sustainability includes clauses which seek to directly protect physical and mental health. The effect of these clauses in protecting people from direct harm is quite limited and complex but is nevertheless important. These clauses include:

#### Energy Efficiency and Water Consumption

- 4.2.2 **Policy SP5 Clause 1),** in seeking improved energy efficiency and water consumption (above the Building Regulations) can help protect people's physical and mental health by (potentially) reducing fuel costs thus allowing people to afford to adequately heat and/or cool their homes and reducing the pressures of high fuel and water bills. There is also a wider but more complex link to climate change. Reduced energy usage helps to secure overall reductions in greenhouse gas emissions which contribute to climate change, and improved water efficiency helps limit drought.
- 4.2.3 The Building Regulations set minimum standards for many aspects of construction of new buildings and certain alterations, including energy efficiency.
- 4.2.4 In 2019, the Government announced the introduction of a Future Homes Standard for England by 2025. The standard will ensure that new-build homes are future-proofed with low-carbon heating and high levels of energy efficiency. The Government expects that homes built to this standard will produce no operational carbon dioxide (once the supply has been decarbonised), with 75% to 80% lower emissions than those built to current Building Regulations standards. This will mainly be achieved by moving to very high efficiency electrical heating instead of gas boilers with heat pumps becoming the primary heating technology for new homes.
- 4.2.5 As a stepping-stone to the Future Homes Standard, in December 2021 the Government introduced an interim uplift in Building Regulations standards, effective from June 2022, that would result in an estimated 31% reduction in carbon emissions from new homes compared to current standards. The emphasis will be on the adoption of a 'fabric first approach' with higher standards for the building envelope and improved airtightness, along with the use of low-carbon heating technologies.
- 4.2.6 As the 2021 regulation changes will result in such significant uplifts in energy efficiency, the requirements Policy SP5 1) will be met (in terms of energy efficiency) once homes become subject to the new regulations. Until that time, clause 1 will be applied as is and require a clear demonstration of all reasonable efforts to improve energy efficiency above the current Building Regulations levels. The costs of these measures and their benefits will need to be balanced against any other competing planning matters that could be affected, such as density and architectural quality.

#### Unneighbourly development

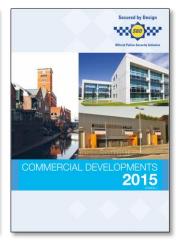
4.2.7 **Policy SP5 Clause 2) g) and h)** seek to protect people from unneighbourly development which could have an adverse impact on their mental health and to ensure adequate conditions for occupiers of new development. For new housing development and home extensions, Policy HS4 and HS5 have specific clauses in this regard (HS4 3) and (HS5 1 c).

#### Crime

- 4.2.8 **Policy SP5 Clause 6)** seeks to reduce crime and the fear of crime through designing safer places. Crime and the fear of crime has a significant effect on people's mental and/or physical health both directly and indirectly through deterring healthy lifestyles.
- 4.2.9 Layout, building design and appropriate lighting and a high quality public realm can both deter crime and increase perceptions of safety in an area and which may encourage greater levels of exercise (walking and cycling) and social interaction with all the associated health benefits.
- 4.2.10 Design solutions to reduce crime and the fear of crime need to be considered on a case by case basis there is no single solution. Advice on the crime context (e.g., the type and level of crime experienced in the locality) and suitable prevention measures is provided by Lancashire Constabulary in response to certain major applications.<sup>31</sup>







#### Design, Layout and Appearance

- 4.2.11 **Policy SP5 Clauses 2) to 4)** set out the wider design requirements which seek to deliver high quality design and locally distinctive development. Well-designed developments can directly improve mental health by creating environments which people want to occupy and use, creating a strong and positive sense of community identity, giving people an enhanced experience and greater feeling of well-being and pride in their environment.
- 4.2.12 High quality environments play a key role in shaping a positive image of a place and in turn enhancing its economic viability, attracting investment and jobs which are fundamental to people's physical and mental well-being.
- 4.2.13 Updated versions of the NPPF were issued in 2018, 2019 and 2021 and a new National Design Guide was issued by the government in 2021.<sup>32</sup> The 2018 version of the NPPF added reference to

<sup>31</sup> Secured by Design - Lancashire Constabulary - Designing Out Crime

<sup>32</sup> National design guide - GOV.UK (www.gov.uk)

healthy living conditions (Para 119). The 2021 version significantly strengthened policies towards design. Together these changes are a material consideration which add weight to/strengthen aspects of SP5 clause 2).

- 4.2.14 The NPPF makes clear that creating high quality buildings and places is fundamental to what the planning and development process should achieve. The National Design Guide, and the National Model Design Code and Guidance Notes for Design Codes are intended to illustrate how well-designed places that are beautiful, healthy, greener, enduring and successful can be achieved in practice. These form part of the NPPG. Whilst these all post-date the Local Plan they are consistent with its approach and reinforce the importance of high-quality design through the planning system and its role in protecting and improving physical and mental health.
- 4.2.15 In July 2020, Design for Homes, a social enterprise company, in partnership with Homes England, NHS England and NHS Improvement, announced that the Government endorsed industry standard for well-designed homes and neighbourhoods 'Building for Life 12' (to which the Local Plan refers at para 4.5.21), is to be replaced by 'Building for a Healthy Life'.<sup>33</sup> The new initiative puts a greater focus on healthier communities by encouraging healthier lifestyles to be considered as an important aspect of design in the development of new housing and neighbourhoods.

#### Accessibility

- 4.2.16 **Policy SP5 Clause 5** requires new development, as appropriate to its nature and scale, to incorporate and promote sustainable methods of transport including cycle routes, walking routes and good links to public transport; and to be inclusive and accessible to all.
- 4.2.17 The links between sustainable transport and health (clause 5a) is discussed in Section 6.1 in relation to policies IC1 to IC3 which set out specific requirements for travel and transport.
- 4.2.18 The Local Plan at Para 4.5.22 states that good design should contribute positively to making places better for people, to create environments that make the active choice the easy and attractive choice for people and communities, and this important aspiration is reflected in the requirements of Policy SP5 and other policies in the Local Plan (such as IC1 to IC3). Further information can be found in 'Active Design' prepared by Sport England, which is intended to promote the right conditions and environments for individuals and communities to lead active and healthy lifestyles.
- 4.2.19 A monitoring indicator for clause 5 b) is the number of toilets built to 'Changing Places' standards. A Changing Places toilet is a fully accessible toilet with additional equipment to a standard accessible toilet and enough space for up to two carers.
- 4.2.20 The following table shows the number of changing places toilet facilities available in the borough. Two more facilities are planned by the Council at Padiham Leisure Centre and the Mechanics Theatre, Burnley for installation by the end of 2023.
- 4.2.21 In January 2021 the building regulations were amended to require changing place facilities to be included in a wide range of large facilities that provide public access including sport, recreation and entertainment venues, shopping centres and large retail stores.<sup>34</sup>

<sup>&</sup>lt;sup>33</sup> Building For Life | Design for Homes

<sup>34</sup> The Merged Approved Documents (publishing.service.gov.uk)

Table/Figure 9: Changes Places Toilet Facilities installed

Year	Location	Facilities
2018/19	St Peters Leisure Centre	1
	Charter Walk Shopping Centre, Burnley	1
2019/20	Tesco Extra, Burnley	1
2019/20	Towneley Park	1
	Burnley Football Club	1
2020/21	N/A	0

Source: http://changingplaces.uktoiletmap.org, Burney Council and Tesco plc,

https://www.innovacareconcepts.com/en/blog/news/burnley-fc-choose-an-innova-changing-place-to-improve-stadium-accessibility/

#### Limitations

- 4.2.22 The numbers of new homes being built in Burnley represents a very small proportion of the overall stock of older and generally less energy efficient properties. The Local Plan sets a requirement for at least 3,880 additional homes over the 20-year period from 2012 to 2032 which represents a growth of just under 10%. Around 80% of the requirement is likely to be met through new build, the remainder through conversion, change of use and the reuse of empty homes. Around half of the overall requirement had already been delivered by 31 March 2021.
- 4.2.23 The widening of Permitted Development rights and reforms to the Use Classes Order means more and more development does not require planning permission and so the Council has less control over potentially harmful development.
- 4.2.24 Even where the Council does have control, its planning decisions cannot take into account the effect on people's mental and/or physical health of seeing development proposals approved that they personally disagree with e.g. those that will spoil a cherished view they have over private land or are not to their particular taste and applications cannot be refused simply because they have some adverse effects or introduce unwanted change. The tests for Policy SP5 in terms of unneighbourly development is whether the adverse effect on amenity or future conditions for occupiers are "unacceptable". The test for this is the level of amenity reasonably expected to be enjoyed at the property bearing in mind its particular location and current levels of amenity e.g. in a village, town centre location or predominantly residential area.
- 4.2.25 Wider crime prevention and criminal enforcement is of course a matter for the police and the grant of planning permission does not override criminal law. The policies of the Local Plan do, however, seek to avoid situations where planning permission is granted for schemes which are likely to result in offences being committed (serious and/or regular), or provide environments where the risk of crime and the fear of crime is unnecessarily increased.

#### Summary

4.2.26 Policy SP5 is a key policy in ensuring development does not create unacceptable adverse environmental impacts which can affect people's physical and mental health. Whilst it is complemented by other legislative regimes (building regulations and criminal law), the policy has a clear positive impact on its own and failure to apply the policy can cause real harm and /or create compliance issues for other legislative regimes. Aspects of the Policy (unneighbourly development and crime) are therefore identified in this SPD as Theme 1, Impact level 1; Others (accessibility) as Theme 2, Impact level 2 and others (design quality and appearance) as Theme 4, Impact level 2.

# 5. Open Space and Infrastructure Policies

# 5.1 Policy SP6: Green Infrastructure

Relevant Themes:	Impact Level:
Theme 1 - Policies that protect people from harm	1
Theme 2 - Policies that seek to enable people to live healthier lifestyles	2
Theme 4 - Policies that involve the general protection or enhancement of the environment that can improve quality of life.	1

- 5.1.1 Local Plan Strategic **Policy SP6: Green Infrastructure** seeks to protect, enhance and extend the borough's multifunctional green infrastructure network (GI).
- 5.1.2 Access to GI can has a positive impact on people's physical and mental health. GI reduces pollution, can reduce the risk of flooding and its effects, including as part of SuDS schemes, and provides opportunities for formal or informal physical activity, social interaction and the enjoyment of nature. This, importantly, includes opportunities that are free of charge to use for those on restricted incomes. GI also contributes to climate change mitigation and adaptation.
- 5.1.3 Visual access to GI also has a positive impact on people's mental wellbeing, and the frequency of exposure is important. As such, in addition to the importance of public of parks and formal recreational facilities are smaller spaces that people will encounter naturally in the course of their daily routines, including streetscapes, private gardens, workplace gardens, and views from home or office windows.







Townley Park, One of Burnley's six Green Flag Parks

- 5.1.4 The importance of access to GI to people's physical and mental health was highlighted during the early months of the Covid-19 pandemic. Due to 'lockdown' restrictions, the opportunity to exercise outdoors and close to home was of increased importance for everybody, but for those who live in flats or homes without private gardens and for those without access to a private car, locally accessible GI was essential for their physical and mental health. The lockdown restrictions exacerbated existing health inequalities.
- 5.1.5 No changes are necessary to the Local Plan's approach to protecting and providing new GI in response the pandemic as the Local Plan has specific and strong policy protections/requirements in place. The Pandemic has however helped to highlight the vital importance of these policies to people's

mental and physical health and also the ability of other organisation to deliver their services and initiatives e.g. social prescribing.

### Limitations

5.1.6 Policy SP6 is a strategic overarching policy - much of what it seeks to achieve is taken forward through other subject-specific policies e.g. policy NE1, NE2, NE4, HS4 and IC5, and these are discussed in the following sections.

### Summary

5.1.7 Policy SP6 is a strategic overarching policy taken forward through other subject-specific policies. Together, these policies help protect people's physical and mental health. Aspects of the Policy are identified in this SPD as Theme 1, Impact level 1 (the role of GI in reducing pollution and flooding) and other aspects as Theme 2, Impact level 2 (the role of GI in providing opportunities for physical activity) and Theme 4, Impact level 1 (the role of GI in providing opportunities for the enjoyment of nature and high-quality environments).

# 5.2 Policy NE2: Protected Open Space

Relevant Themes:	Impact Level:
Theme 2 - Policies that seek to enable people to live healthier lifestyles	1
Theme 4 - Policies that involve the general protection or enhancement of the environment that can improve quality of life.	2

- 5.2.1 Local Plan **Policy NE2: Protected Open Space** identifies specific Council-owned open spaces within the Plan's identified Development Boundaries that are to be protected in situ for at least the lifetime of the Plan. These specific open spaces were identified on their scarcity, quality, visual amenity and GI functions.
- 5.2.2 Whilst these open spaces include those that are publicly accessible, this is not a prerequisite for their identification. These protected open spaces include areas that are not publicly accessible or usable but have been judged to be vital to maintain visual amenity or environmental quality. This insitu protection applies throughout the plan period such that development which undermines their fundamental purpose and nature as open space will not be supported.
- 5.2.3 Whilst Policy NE2 therefore identifies in advance specific open spaces that must be retained in situ, Policy SP6 and Policy IC5 are used in relation to specific development proposals to assess whether it is necessary to protect or provide any other green infrastructure, the type necessary and/or whether this needs to be retained or re-provided elsewhere as compensation or mitigation.<sup>35</sup>
- 5.2.4 Policy SP4 protects land outwith the identified Development Boundaries which it defines as "open countryside" where development is to be "strictly controlled".

### Limitations

5.2.5 The open spaces that this policy applies to are almost exclusively within the Council's ownership. The approach and methodology used to identify these particular spaces could be used in the future, including by neighbourhood planning groups, to identify further open spaces in private ownership or the ownership of other public bodies that are similarly precious. This type of policy cannot be used as a blanket protection for all open spaces within a built up area or as wider protection for the open countryside.

### Summary

5.2.6 Policy NE2 helps protect people's physical and mental health. Aspects of the Policy are identified in this SPD as Theme 2, Impact level 1 (the role of these protected open spaces in providing opportunities for physical activity) and Theme 4, Impact level 2 (the role of these protected open spaces in providing opportunities for the enjoyment of nature and high-quality environments).

<sup>&</sup>lt;sup>35</sup> In this context compensation would mean direct reprovision of the facility or opportunity that would be lost, whereas mitigation could include new opportunities or on or off site improvements to address other impacts of the development e.g. biodiversity net gain.

# 5.3 Policy IC5: Protection and Provision of Social and Community Infrastructure

Relevant Themes:	Impact Level:
Theme 2 - Policies that seek to enable people to live healthier lifestyles	2
Theme 3 - Policies that seek to provide access to health infrastructure	3

### The Scope of the Policy

- 5.3.1 Local Plan **Policy IC5**: **Protection and Provision of Social and Community Infrastructure** is concerned with the provision and protection of public or private facilities that are accessible to the public (free of charge or via a fee).
- 5.3.2 Social and community infrastructure includes many facilities which have clear links to health e.g. public parks and play spaces, playing fields and sports pitches, allotments, indoor sports and leisure facilities, off-road footpath and cycle routes.
- 5.3.3 For development proposals involving any loss of social and community infrastructure, depending on the circumstances, the acceptable approach could be:
  - That the existing social or community infrastructure that is on the development site is essential and cannot be relocated and the scheme should therefore be refused;
  - That the existing social or community infrastructure that is on the development site is surplus to requirements and can be lost;
  - That the demand for the existing social or community infrastructure still exists but that it can be relocated and provide the same local functionality or even be enhanced.<sup>36</sup>
- 5.3.4 For allocated sites, where it was likely that a facility would need to be relocated e.g. playing fields, and the issue was capable of being addressed, this was identified in the allocation policy so that any developer would be aware of the need to address this issue.

### Outdoor sport and recreational facilities and open space

- 5.3.5 In assessing whether existing open spaces and outdoor sport or play facilities are required to remain in situ<sup>37</sup> or be relocated, and whether new facilities must be provided on or off-site, the standards set out in the Council's Green Spaces Strategy, and proposals in the Burnley Play Area Strategy and Playing Pitch Strategy will be relevant. Policy HS4 specifically addresses the need for new open space and play space in association with new housing development (see next section).
- 5.3.6 Policy IC4 sets out that Developer Contributions towards new or replacement off-site provision may be required and the Developer Contributions SPD prioritises such contributions as

<sup>&</sup>lt;sup>36</sup> This could include direct reprovision of the facility or opportunity that would be lost or new similar opportunities.

<sup>&</sup>lt;sup>37</sup> Those protected by Policy NE2 must remain in situ

Priority 1 (open or play space required by Policy HS4 and replacement playing pictures) or Priority 2c (other open space, pedestrian and cycle way provision/improvement).

- 5.3.7 As set out earlier, the importance of access to GI to people's physical and mental health was highlighted during the early months of the Covid-19 pandemic. Due to 'lockdown' restrictions, the opportunity to exercise outdoors and close to home was important for everybody, but for those who lived in flats or homes without private gardens and for those without access to a private car, locally accessible GI was essential for physical and mental health. The restrictions exacerbated existing health inequalities in the borough.
- 5.3.8 Protecting and providing minimum levels or open space and recreation facilities is identified as 'Impact 1' in this SPD and 'Priority 1' in the Developer Contributions SPD and is essentially 'nonnegotiable'.







### Community Facilities

- 5.3.9 Community facilities, including places of worship, recreational centres, social centres, pubs and community halls, play an important yet sometimes undervalued role in helping to build and maintain strong communities and support good mental and physical health.
- 5.3.10 They provide facilities for social interaction and for recreational activities. These range from space for exercise classes and for local interest and support groups, to more informal facilities for social interaction such as in pubs. Ensuring that people do not feel the negative impacts of social exclusion is an important consideration in terms of both their physical and mental health. Such facilities can encourage companionship, a sense of identity and belonging and help to address loneliness among vulnerable groups. These facilities are also increasingly relied upon for the delivery of health services e.g. vaccination programmes, health campaigns etc functioning as broader community hubs.
- 5.3.11 Local Plan Policy IC5 seeks to protect such community and social infrastructure where there remains a demand for the facility in question, and provide new such infrastructure where it is required to support development.

### Allotments and Community Food Growing Spaces

- 5.3.12 National planning policy recognises the role of food growing in helping to enable and support healthy lifestyles through, amongst other things, the provision of allotments.
- 5.3.13 It is recognised that allotments can and do improve community wellbeing, providing a source of fresh food and opportunities for healthy outdoor exercise and social interaction, as well as being a positive resource for people with physical and mental health disabilities.<sup>38</sup> This is particularly

<sup>38</sup> growing-community-second--8f5.pdf (local.gov.uk)

important in Burnley given the high proportion of properties without any suitable private 'garden' space. Other opportunities for food growing include community gardens and orchards. Vertical gardening and the use of green walls also offer a means of local food production to householders who may not have access to allotments, and are suitable for many types of plants, from herbs to fruit.

5.3.14 A number of allotment sites are protected by Policy NE2, and others by Policy SP6 and IC5 which support their wider protection or replacement and the provision of new facilities where appropriate.







### Health Infrastructure

5.3.15 Whilst the Local Plan cannot control decisions made by health providers to introduce new, close or relocate facilities, be it the NHS or private companies (e.g. pharmacies); it can inform these decisions. Burnley is fortunate in having a full local plan that identifies many of the sites for development to 2032 and this gives the best opportunity possible for infrastructure providers such as the East Lancashire Hospitals Trust<sup>39</sup> (who run Burnley General Hospital) and the NHS Lancashire and South Cumbria Integrated Care Board <sup>40</sup> (who Commission GP services) to plan their services in the knowledge of where development is likely to happen.

5.3.16 Local Plan Policy IC5 seeks to protect health infrastructure where there remains a demand for the facility in question and provide new infrastructure where it is required to support development.

5.3.17 The Local Plan requires most new residential development to be in accessible (aka sustainable) locations i.e. locations where people can access day to day facilities including GP's and pharmacies other than by private car if they so choose, or do not (for whatever reason) have access to a private car. Developer Contributions may be required to improve access to services through improving footpaths and cycle links or through new or improved bus stops.

5.3.18 Policy IC4 sets out that where additional health infrastructure is required directly as a result of new development, this can be something that a developer is asked to provide or to contribute towards. The Developer Contributions SPD sets out how this policy is applied and that any requests for contributions must be supported by a robust evidence of the need for the contribution and how it will be spent. Viability can be taken into account where development, which is otherwise acceptable, cannot afford to make such a contribution, but only where occupants of the development will still

<sup>&</sup>lt;sup>39</sup> The East Lancashire Hospitals NHS Trust (ELHT) was established in 2003 and provides acute secondary healthcare for the people of East Lancashire and Blackburn with Darwen across five hospital sites and various community sites; including Burnley General Teaching Hospital.

<sup>&</sup>lt;sup>40</sup> The former Clinical Commissioning Group (CCG's) were replaced on 1st of July 2022 by new integrated care boards.

have access to appropriate facilities. These types of contributions are 'Priority 2 - necessary and important.'

- 5.3.19 Refusals based on a lack of health infrastructure will only be relevant where it is clear that there is no realistic prospect of the services required being provided by the NHS or the private sector.
- 5.3.20 In drawing up the Local Plan, consultation took place with the NHS, ELHT and CCG at all stages. Specific discussions were held with the CCG about the planned level of growth and proposed housing allocations and the likely impacts on the health services the CCG provided and its capacity to accommodate the sites and growth planned. The CCG accepted that the Borough cannot stand still and that the development of better-quality homes would have a positive health impact on residents. In addition, the CCG felt that the development of more attractive aspirational homes might assist in workforce recruitment within the health sector.
- 5.3.21 At that time, the CCG estimated that the growth proposed in the Local Plan may require an additional four whole-time equivalent GPs, with associated nursing and administrative staff. It was anticipated that this growth could be accommodated within existing practices and would not be required until later in the plan period.
- 5.3.22 It was proposed to review the situation periodically with the CCG (now the NHS Lancashire and South Cumbria Integrated Care Board) and wider NHS, to identify where pressures may exist and whether these require support through developer contributions.
- 5.3.23 A review of the Council's Infrastructure Delivery Plan (IDP) is underway. This will set out updated information on infrastructure needed to support the Local Plan.

### Limitations

- 5.3.24 The provision and availability of facilities relies on public or private sector funding and investment decisions and much of this is outwith the remit of the planning system.
- 5.3.25 The Local Plan therefore has a limited role in protecting existing facilities. Although it can successfully prevent (in some circumstances) the demolition, redevelopment or change of use of important facilities it cannot normally force a facility to remain open. Where it can protect the facility/building however, this significantly increases the chance of it being brought back into similar uses.
- 5.3.26 Where new development is proposed which relies on specific existing facilities or requires additional facilities, then the Local Plan through Policy IC5 can require these to be maintained or provided through a legal (S106) Agreement.

### Summary

5.3.27 Policy IC5 helps protect people's physical and mental health. Aspects of the Policy are identified in this SPD as Theme 2, Impact level 2 (the role of sporting facilities and wider open space in providing opportunities for physical activity, social interaction and food growing), and Theme 3, Impact level 3 (providing access to health facilities).

# 5.4 Policy HS1 – HS7: Housing Developments

Relevant Themes:	Impact Level:
Theme 1 - Policies that protect people from harm	1
Theme 2 - Policies that seek to enable people to live healthier lifestyles	2
Theme 4 - Policies that involve the general protection or enhancement of the environment that can improve quality of life.	1

### Privacy and Daylight

- 5.4.1 Similar to Policy SP5 clauses 2 g and h) discussed earlier, **Policy HS4 clause 3**) which applies specifically to new housing developments, includes set privacy distances and more generalised requirements for adequate daylighting and outlook to protect people from unneighbourly development which could have an adverse impact on their mental and physical health. **Policy HS5 clause 1 c**) which applies to home extensions and alterations has equivalent requirements.
- 5.4.2 The effect of these clauses in protecting people from direct harm is quite limited in scope but is nevertheless important and neighbours expect these standards to be strictly applied. Neighbour disputes can cause real harm to people's mental health and well-being. Of course, not all new alterations and extensions that can cause problems require planning permission.

### Gardens and Open Space

- 5.4.3 **Policy HS4 clause 3 a)** sets out the requirement FOR private and functional outdoor space for occupants. This is an important aspect of improving quality and choice in the housing stock. In considering building layout and open space provision, consideration should be given to using buildings and/or landscaping to provide adequate shading.
- 5.4.4 **Policy \HS4 clause 5)** sets out the requirements for recreational open space in new housing developments. The importance of physical and visual access to open space to people's physical and mental health is discussed earlier (in Sections 1.3 and Section 5.1-5.3).
- 5.4.5 For schemes of over 50 dwellings, recreational open space is required on site (as it is for schemes of 10-49 dwellings where this is determined to be the correct approach). New open spaces provided under this policy would be protected moving forward by Policy NE2.
- 5.4.6 As this particular policy is mainly concerned with recreational open space, in order to provide tangible health benefits, the open space needs to be well sited and managed, convenient and safe to use. Clauses 6 to 9 set out the specific requirements for the design and location of the open space, including a requirement for the main space to be socially inclusive and overlooked by adjoining properties to avoid anti-social behaviour.
- 5.4.7 **Policy HS3** aims to make the most efficient use of land by maximising the density of housing developments whilst meeting other important policy objectives. The policy requires housing developments, unless justified by individual site constraints or development needs, to be at a gross density of at least 25 dwellings per hectare (dph) and at least 40 dph within or close to Town and

District Centres. Allocated sites have their own individual density expectations based on the considerations set out in Policy HS3.

### Housing Mix

- 5.4.8 Policy SP1 of the Local Plan sets a requirement for at least 3,880 additional homes. This includes C3 housing of all types and tenures, including C3 Extra Care. It does not include C2 nursing homes or other institutional accommodation. The provision of such accommodation is supported on suitable sites by Policy SP4 and the wider policies of the Plan.
- 5.4.9 **Policy HS3** and the site allocations under **Policy HS1** reflect the need to meet a wide range of housing needs and to improve housing quality and choice in line with the vision and objectives of the Local Plan, including by diversifying away from smaller terraced properties to provide larger aspirational detached and semi-detached homes and bungalows with gardens and off-street parking while still providing quality and choice at all ends of the market and ensuring the efficient use of land. Policy HS3 does not set out indicative targets for every type of housing, rather, together with Policy HS4 and Policy SP5 it allows for and supports other types of housing including residential caravans for those Gypsies and Travellers who have permanently ceased travelling; and for custom and self build.
- 5.4.10 **Policy HS2** seeks to ensure there is a sufficient supply of good quality affordable housing and **Policy HS7** that the specific needs of Gypsies and Travellers who practice a travelling lifestyle are met.<sup>41</sup>
- 5.4.11 At least one of the Plan's housing allocations is identified as being suitable for C3 extra care or sheltered housing. An application for 93 units of affordable rent extra care housing has been approved subject to the signing of a Section 106 Agreement.<sup>42</sup>
- 5.4.12 Construction of a new 66 bed C2 facility which will provide residential and dementia care for those aged over 65 years is underway at the site of the former Bull and Butcher Public House at Manchester Road, Burnley.





Left: Approved 66 Bed C2 Scheme © LNT Care Developments Right: The Buildings Regulation Part M

5.4.13 **Policy HS4 clause 4)** requires a proportion of new homes to be built to the enhanced adaptable standards of the building regulations (Part M4(2)) allowing people with disabilities and/or age-related challenges to remain in their home wherever possible. This policy has a direct role in

<sup>&</sup>lt;sup>41</sup> Including those who have ceased temporarily - as explained in the Local Plan.

<sup>&</sup>lt;sup>42</sup> Site HS1/10 - application 2021/0659. The scheme is not formally approved until the section 106 agreement is signed

preventing harm because these standards ensure occupants and any carers are less prone to accidents and injury, and by helping people to remain in their own homes can also help protect their mental health and reduce healthcare costs with benefits for other users.

5.4.14 The positive effects of this policy clause are limited by the number of dwellings that the plan requires to be constructed to these standards (20% of schemes of over 10 dwellings i.e. over 400 from the allocations, plus 20% of any major windfalls) but together with the specialist forms of accommodation mentioned above, they will significantly increase the sock of specialist and adaptable housing in the borough over the Plan period.

### Limitations

5.4.15 The numbers of new homes being built in Burnley represents a small proportion of the overall stock of older and generally less energy efficient and adaptable properties. The Local Plan sets a requirement for at least 3,880 additional homes over the 20-year period from 2012 to 2032 which represents a growth of just under 10%. Around 80% of the requirement is likely to be met through new build, the remainder through conversion, change of use and the reuse of empty homes. Around half of the overall requirement had already been delivered by 31 March 2021.

### Summary

5.4.16 Policy HS1 to HS7 help protect people's physical and mental health. Aspects of these Policies are identified in this SPD as Theme 1, Impact level 1 (ensuring adequate privacy, daylight and living standards) and Theme 2, Impact level 2 (the role of open and play space in providing opportunities for physical activity and the requirement for adaptable homes and meeting the needs of Gypsies and Travellers) and Theme 4, Impact level 1 (providing safe and convenient parking, private or communal gardens/outdoor space, high quality design).

# 6. Sustainable Travel and Transport Policies

# 6.1 Policies IC1 to IC3: Travel and Transport Policies

Relevant Themes:	Impact Level:
Theme 1 - Policies that protect people from harm	1
Theme 2 - Policies that seek to enable people to live healthier lifestyles	2
Theme 3 - Policies that seek to provide access to health infrastructure	3

6.1.1 Policy IC1: Sustainable Travel, IC2: Managing Transport and Travel Impacts, and IC3: Car Parking Standards, individually and cumulatively have direct and indirect health impacts.

### Policy IC1 and IC2 Sustainable Travel and Transport Impacts

- **6.1.2** Policy IC1 Sustainable Travel clause C) ensures appropriate standards of pedestrian, cycle and vehicular access to new developments, including adequate visibility splays; which obviously has a direct role in reducing harm from accidents.
- 6.1.3 **Policy IC1, supported by Policy IC2** compliment Policy SP4: Development Strategy which focusses development, including employment and new housing, close to local services including sporting facilities and health infrastructure in order to reduce the need to travel. Policies IC1 and IC2 seek to ensure sustainable travel choices are available. These choices include walking and cycling (active travel), which, if undertaken safely, can improve health.<sup>43</sup> <sup>44</sup> They also include public transport for those who do not have access to a private car.

### Policy IC3 Car Parking Standards

- 6.1.4 **Policy IC3 Clause 5)** requires adequate, safe parking, including mobility parking spaces, which obviously has a direct role in reducing direct harm from accidents and a direct role in helping people with mobility impairments to access health and community infrastructure.
- 6.1.5 **Policy IC3 Clause 8)** requires the provision of ultra-low emission vehicle (ULEV) charging infrastructure in accordance with specific standards set out in the Plan's Appendix 9. These standards, which are being successfully implemented, will in due course be overtaken by the higher provision standards set out in revisions to the Building Regulations introduced in December 2021 (Part S). These will take effect from 15 June 2022 and require the installation of infrastructure (charging points and/or cabling) for the charging of electric vehicles for certain building projects. The projects covered include most new dwellings with 'associated' (on site) parking spaces.
- 6.1.6 Whilst Policy IC3 sets out minimum requirements, Policy NE5 4) supports and promotes additional provision to protect air quality, as set out earlier in section 4.1, Policy NE5 is now supported by the Air Quality Management: Protecting Health and Addressing Climate Change SPD which sets out the requirements for new developments to address air quality impacts primarily in terms of vehicle emission-related pollutants. These are known to have adverse impacts on people's health above

<sup>&</sup>lt;sup>43</sup> Active Travel in Lancashire - Lancashire County Council

<sup>44</sup> Lancashire Cycling and Walking Infrastructure Plans - Lancashire County Council

certain exposure levels. They also contribute to climate change, the effects of which can impact on people's health.

6.1.7 Burnley's Local Plan does not take the approach of under-providing parking to encourage or force people to use alternative means of travel to the private car. Rather, Policies IC1-2 adopt a user hierarchy of i) pedestrians ii) cyclists iii) public transport and iv) private vehicles. Together with Policy IC3 the aim of this prioritisation is to allow people to make sustainable and healthy travel choices whilst ensuring people who do not have access to private cars are not socially excluded. Providing inadequate parking can cause accidents and nuisance. The vision and objectives of the Local plan identify the need to improve housing quality and choice including by diversifying away from smaller terraced properties to provide larger aspirational detached and semi-detached homes with gardens and off-street parking.

### Limitations

- 6.1.8 Road safety and traffic management relies also on investment by other public sector agencies, notably National Highways and Lancashire County Council, and on the enforcement of speed limits through legislation via the police.
- 6.1.9 The availability of public transport is highly dependent on government funding decisions.

### Summary

6.1.10 Policies IC1, IC2 and IC3 help protect people's physical and mental health. Aspects of the Policies are identified in this SPD as Theme 1, Impact level 1 (road safety and reducing pollution) and others as Theme 2, Impact level 2 (the role of foot and cycle paths in providing opportunities for physical activity and all modes of sustainable transport in preventing social exclusion) and Theme 3, Impact level 3 (providing access to health infrastructure through public transport and accessible parking).

# 7. Food Environment Policies

# 7.1 Policy TC7: Hot Food Takeaways

Relevant Themes:	Impact Level:
Theme 1 - Policies that protect people from harm	1
Theme 2 - Policies that seek to enable people to live healthier lifestyles	3
Theme 4 - Policies that involve the general protection or enhancement of the environment that can improve quality of life.	2

7.1.1 **Policy TC7: Hot Food Takeaways** seeks to control the location and environmental impacts of new hot food takeaways. The main focus of the policy is controlling the location of new outlets to protect town centres and (mainly residential) amenity. The policy does not refer specifically to health impacts, but these are acknowledged in the supporting text (para 5.3.50).

### Links to Obesity

- 7.1.2 The link between the regular consumption of food from hot food takeaways and obesity has long been established. The food environment plays an important role in promoting a healthy diet, but this is a complex system influenced and determined by a series of factors, including a person's awareness, ability to access specific food outlets, and affordability.
- 7.1.3 Takeaway food outlets provide a popular service and contribute to the local economy, particularly the night-time economy. Whilst there is demand for these facilities, it is recognised that takeaway outlets tend to sell food that although tasty, is high in fat, salt or sugar, and low in levels of beneficial nutrients. Regular consumption of these types of foods over time can increase a person's risk of being overweight or obese as well as increasing the risk of chronic diseases. Some takeaway food can represent a low-cost option to the consumer which may enhance its appeal to children and those with low incomes.
- 7.1.4 Whilst the 2021 NPPF does not contain specific reference to hot food takeaways, it advises that planning policies and decisions should enable and support healthy lifestyles, especially where this would address identified local health and wellbeing needs, including access to healthier food.<sup>45</sup>
- 7.1.5 This is supported by the NPPG which indicates that local plans and SPDs can, where justified and evidenced, seek to limit the proliferation of less healthy uses such as hot food takeaways, including on health grounds. $^{46}$   $^{47}$

### Limitations of Planning

7.1.6 Whilst planning (policy and decisions) can in some circumstances control the location of new hot food takeaways on health grounds, the lack of control over existing outlets and the ability to travel

<sup>&</sup>lt;sup>45</sup> Para 92 c). Access to healthier food was not specifically mentioned in the 2012 NPPF to which the Local Plan was written. It was first mentioned in the 2018 version and this change can therefore be a material consideration in planning decisions.

<sup>&</sup>lt;sup>46</sup> NPPG Healthy and Safe Communities Para 004. This para (then para 06) was first introduced in July 2017 prior to the adoption of the Local Plan and remains largely unchanged

<sup>&</sup>lt;sup>47</sup> SPDs cannot introduce entirely new policies

and/or order online for home delivery means planning's role is severely limited. Control of and demand for existing takeaways is beyond the remit of planning.

- 7.1.7 More and more people order takeaways by telephone or online for home delivery rather than by visiting outlets. Whilst most online ordering should be restricted to adults who have the ability to pay online; telephone orders where there is the option for cash payment at the point of delivery may be available to children.
- 7.1.8 Unhealthy food may also be obtainable from cafes and restaurants which offer a takeaway service; and unhealthy food, confectionery, alcohol and sweetened drinks are widely available in other shops and supermarkets, at leisure facilities or at mobile food outlets.
- 7.1.9 Recent reforms to the Use Classes Order and Permitted Development rights mean that cafes and restaurants can now more easily be created without planning permission. These may serve unhealthy food to eat in or offer an ancillary takeaway service. Many well-known providers of hot food takeaways are classed as restaurants.<sup>48</sup>
- 7.1.10 Hot Food Takeaways still require planning permission as do pubs, wine bars and other drinking establishments. The latter many also serve food that may or may not be healthy. 49
- 7.1.11 Tackling the health implications of excessive takeaway consumption and wider poor-quality food consumption is reliant on a whole system approach to diet and obesity, including societal changes, education, tax regimes, food quality standards (licencing), calorie and allergen labelling, advertising etc.
- 7.1.12 Many of these wider actions are set out in the government's 2020 policy paper "Tackling obesity: empowering adults and children to live healthier lives" which outlines actions the government will take to tackle obesity and help adults and children to live healthier lives.<sup>50</sup>



High quality takeaway shopfront at St. James's Street, Burnley – Google Street View 2022

<sup>&</sup>lt;sup>48</sup> The Use Class is E if the premises is for the sale of food and drink principally to visiting members of the public where consumption of that food and drink is mostly undertaken on the premises

<sup>&</sup>lt;sup>49</sup> See Appendix B for further explanation

<sup>&</sup>lt;sup>50</sup> Tackling obesity: government strategy - GOV.UK (www.gov.uk)

### Popular Planning Approaches

- 7.1.13 Despite the clear limitations, a number of local authorities are trying out different approaches to limiting new hot food takeaways through their Local Plans. There is as yet no evidence of the effectiveness of these policies in actually reducing obesity levels, or in most cases, in reducing the overall number of takeaway outlets; but clearly as part of a concerted effort to tackle the issue, these efforts can play a part; particularly in protecting children.
- 7.1.14 Lancashire County Council has recently updated its non-statutory 'Hot Food Takeaways and Spatial Planning' Advisory Note,<sup>51</sup> and this also sets out some of the research undertaken into the setting and applying of policies limiting the number of new takeaway outlets; although again it does not set out any evidence of a corresponding decrease in obesity levels.
- 7.1.15 Popular approaches used in local plans elsewhere include:
  - Exclusion zones: Banning or limiting the number of new outlets within certain distances of secondary schools or places where young people congregate; or limiting their opening hours to avoid times when schoolchildren are likely to be passing.
  - **Density limits**: Setting a maximum number or density of units within a certain area above which no new outlets will be supported. These can be based on simple numbers which are easy to administer, or relate to specific obesity or deprivation levels within certain areas e.g. Wards this is more difficult as these will fluctuate (and hopefully decrease) over time.

### Burnley's Local Plan Approach

- 7.1.16 Whilst Burnley's Local Plan Hot Food Takeaways Policy TC7 does not specifically refer to applications being refused on health grounds, by restricting takeaways in the main to Town and District Centres, 52 the Plan's approached has a similar effect to the other approaches that seek to restrict new outlets near schools because the borough's secondary schools are away from the Town and District Centres. The exception is Coal Clough Academy which is within 400m of Coal Clough Lane and Accrington Road District Centres. The portion of Accrington Road District Centre that falls within 400m of the school contains two hot food takeaways.
- 7.1.17 The map in Appendix D shows the location of the Town and District Centres, secondary schools and 400 metre radius distances from their site entrances.
- 7.1.18 Whilst wider design issues are dealt with in other policies, principally Policy SP5; Policy TC7 identifies some of the common issues associated with hot food takeaways which require particular attention, such as waste provision, odours, hours of opening, ensuring adequate parking is available to retain the free flow of traffic, and protecting residential amenity. These clauses protect people from direct harm, and indirect harm through seeking to protect the wider environment.

<sup>&</sup>lt;sup>51</sup> LCC hot-food-takeaways-and-spatial-planning. undated

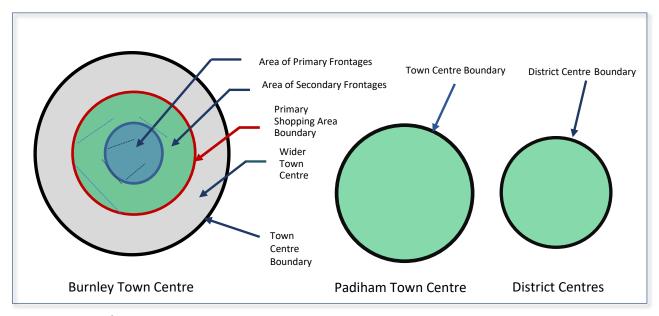
<sup>&</sup>lt;sup>52</sup> The policy Clause 1) directs hot food takeaways to the Secondary Frontages of Burnley Town Centre's Primary Shopping Area, to Padiham Town Centre and to the eight District Centres.

<sup>&</sup>lt;sup>53</sup> In Burnley most of the secondary schools (whose pupils would be most vulnerable to the temptation of takeaways) were rebuilt on new sites in that late noughties.

### Town and District Centres

- 7.1.19 **Policy TC7 1)** identifies three areas where hot food takeaways will "be permitted" providing they satisfy the other clauses set out in Clause 3 of the Policy and any wider plan policies (including Policy TC3). These areas are shown in light green below.
  - a) Burnley Secondary Frontage area
  - b) Padiham Town Centre
  - c) District Centres

Table/Figure 10: Diagram of Town and District Centre zones



### Town Centre Clustering:

- 7.1.20 Concentrating takeaways in Town and District Centres (to protect the vibrancy of the centres and residential amenity) can drive out other retail uses and cause clustering.
- 7.1.21 Clustering can have negative weight-related health impacts, not only by providing increased temptation and choice, but increased competition can lead to price undercutting and reductions in quality and/or increases in portion size.
- 7.1.22 It is also sad to say that areas with concentrations of hot food takeaways often display the poorest visual environmental qualities, often (but not always) with poorly designed, inferior quality and inadequately maintained shopfronts, signage and security measures. Close competition can encourage signage which attempts to outbid neighbours. This can have a negative effect on local residents and other businesses and can create a negative image of an area, reducing its attractiveness to visitors and investment which can contribute to a spiral of economic decline that has many health implications.
- 7.1.23 **Policy TC7** clause **3) a)** 'Clustering' allows for the refusal of proposals that would create an unacceptable concentration of hot food takeaways in Burnley's Secondary Frontages or in Padiham Town Centre.
- 7.1.24 This clause supports Policy TC3 (Burnley Town Centre Primary and Secondary Frontages) which limits the levels of non-A1 Use Classes in Burnley's Primary and Secondary Frontages (which

together make up the Primary Shopping Area - edged red above) to protect the retail offer.<sup>54</sup> This clustering restriction only applies in Burnley's Secondary Frontages or Padiham Town Centre because clustering is not likely in Burnley's Primary Frontages (because of the restrictions on non-A1 retail uses in Policy TC3), or elsewhere because of TC7 clause 2).<sup>55</sup>

7.1.25 Changes to the Use Classes Order introduced by the government since the Local Plan was adopted has impacted on the interpretation of the Local Plan's Town Centre policies and in particular on the effectiveness of Policy TC3 in controlling uses and protecting the retail offer. However, some level of control is still possible and national policy on the approach to town centres set out in the NPPF remains largely unchanged and consistent with the approach of the Local Plan. (See Appendix B).

### Elsewhere:

7.1.26 **Policy TC7 2)** does allow takeaways outside of the Secondary Frontages of Burnley's Primary Shopping Area, Padiham Town Centre and the District Centres, where the property does not physically adjoin a residential property or other sensitive use outside of the applicant's control.

7.1.27 The wording of the Policy TC7 clauses 1 and 2 and 3 b) is a little confusing, but read as a whole the intention is clear:

- The three areas identified in Clause 1 are the areas where hot food takeaways will "be permitted" (rather than "only be permitted" as stated), providing they satisfy the other clauses set out in Clause 3 of the Policy and any wider plan policies that are applicable (including Policy TC3). New Hot Food Takeaways could therefore adjoin residential properties outside of the applicant's control in these three areas.
- Outwith the three areas identified in Clause 1, Clause 2 applies, which would not normally allow a new takeaway to open adjoining a terraced house, under a flat or in a semi-detached house where any of these are in someone else's ownership. Policy TC7 Clause 3 (especially b) seeks to protect residential amenity generally but clause 2) is much stricter so as to make it clear these are unacceptable locations in principle.
- As worded, this Clause 2 restriction would also apply in Burnley's Primary Frontages and the wider Town Centre of Burnley. This is explained below:
  - The Clause 2 restriction does not refer to the Primary Shopping Frontages area of Burnley (marked blue on diagram) because hot food takeaways are non-A1 uses and are therefore limited in this area by Policy TC3, and TC7 Clause 2 restrictions are also not relevant in this area due to its commercial nature. Clause 2 could have usefully made this clearer.
  - The Clause 2 restriction does not refer to the wider Burnley Town Centre area (marked grey on diagram). National policy supports hot food takeaways in town centres (as set out in TC2 Clause 3), but given the greater mix of commercial and residential uses in this wider town centre area (i.e. beyond the Primary Shopping Area), residential amenity will be an issue. Policy TC7 Clause 3 provides a level of protection for residential and other amenity but the strict restrictions of Clause 2 are not considered relevant in this wider Town Centre area.

<sup>&</sup>lt;sup>54</sup> Class A1 is now within a wider Class E along with classes A2 A3 B1a B1c B1b and D2 – see Appendix B

<sup>&</sup>lt;sup>55</sup> current statistics for the takeaways in the various retail locations are set out in Appendix C

7.1.28 The suite of Local Plan Town Centre policies TC1-TC8 seek to ensure the Town Centres remain vibrant and can support a range of civic, retail and leisure facilities which has a positive health impact.

### Proposed Refined Approach

- 7.1.29 As discussed above, Policy TC7 does not refer specifically to health impacts but its overall effect, and particularly clause 2), is to limit the amount of new takeaways that could be opened in the more deprived areas of the borough outwith the Town and District Centre boundaries (as the building stock in these areas tends to be predominantly flats, terraced houses or semis) and effectively restricts new outlets near secondary schools. It does allow, in some circumstances, new outlets in Town and District Centres and these are areas where young people may congregate in their leisure time and away from parental oversight.
- 7.1.30 As acknowledged above, using planning policies to control the location of hot food takeaways on health grounds, particularly for adults, is of limited value and in Burnley's case, the proximity of hot food takeaways to secondary schools is not a major issue. However, an approach to the application of Policy TC7 which formalises the link to obesity and ill-health impacts that is acknowledged in the supporting text and builds on the existing clustering restrictions set out in the policy is considered justified. Whilst this approach goes a little beyond the Local Plan policy, it is fully consistent with its overall approach and is supported by new national policy that post-dates the adoption of the Local Plan (see footnote 45).
- 7.1.31 This refinement to the application of Policy is set out below. It is not possible or appropriate to introduce an entirely new policy approach through an SPD e.g. one based on restricting the proportion of takeaways based on obesity or deprivation levels in particular Wards.

### **Policy TC7 Additional Interpretation:**

Where new takeaways are allowed under **Policy TC7**, be they in a location set out in **Clause 1**) i.e. Burnley Secondary Frontages area, Padiham Town Centre, or a District Centre, or elsewhere if they satisfy **clause 2**) and 3); the Council will consider:

- i) Imposing conditions on opening hours under **Clause 4**) where a new takeaway is close to a secondary school requiring the outlet to shut at school letting out times. The hours of closure may need to reflect the possibility of after school clubs running past the school closing time. This would allow sales to adults at lunchtimes and evenings or anytime at weekends. Children can be prevented from leaving school premises at lunchtimes by appropriate school policies.
- ii) Interpreting Clause 3 a) to include the District Centres and the 'unacceptable concentration' referred to will be measured as follows: 56

### **Burnley Secondary Frontage:**

No more than two consecutive hot food takeaway uses in any length of secondary frontage will be allowed and there should be a gap of at least two non-takeaway uses between premises.

### **Padiham Town Centre:**

No more than two consecutive hot food takeaway uses will be allowed and there should be a gap of at least three non-takeaway uses between premises.

<sup>&</sup>lt;sup>56</sup> The existing pattern of takeaways is generally in line with these standards

### **District Centres:**

No more than two consecutive hot food takeaway uses will be allowed and there should be a gap of at least three non-takeaway uses between premises.

### Elsewhere:

No consecutive hot takeaway uses will be allowed.

### Summary

7.1.32 Policy TC7 helps protect people's physical and mental health. Aspects of the Policy are identified in this SPD as Theme 1, Impact level 1 (e.g. location, odours, hours of opening) and others as Theme 4, Impact level 1 (visual amenity, clustering, waste). The proposal to restrict the opening hours of new takeaways within 400 metres of secondary school boundaries and extending the remit of the clustering policy to protect health would also fall under Theme 2, Impact level 3.

# 8. Policy Health Impact Matrix

8.1.1 This table provides a summary matrix of themes and relative health impacts of key policies and clauses as set out and discussed in Section 4 to 7.

Local Plan Policy:	Theme 1 - policies that protect people from harm		Theme 2 - policies that seek to enable people to live healthier lifestyles	Theme 3 - policies that seek to provide access to health infrastructure	Theme 4 - Policies that involve the general protection or enhancement of the environment that can improve quality of life.
NE5	Clause 2) Clause 4) Clause 5) Clause 6)	Clause 7) Clause 8) Clause 9)	-	-	-
SP5	Clause 1) Clause 2 g) and h) Clause 6)		Clause 5	-	Clauses 2) 3) and 4)
SP6	Clause 1 Clause 2		Clause 1 Clause 2	-	Clause 1 Clause 2
NE2	-		Clause 1 Clause 2	-	Clause 1 Clause 2
IC5	-		Clause 1	Clause 1	-
HS1-HS4 and HS7	HS4 Clause 2 and 3 HS5 Clause 1 C		HS4 Clause 4 HS4 Clause 5 HS2 HS7 Clause 1 (Part)	-	HS1 – Various HS4 Clause 1 HS5 Clause 1 HS7 Clauses 1 (part) and 2
IC1-3	IC1 Clause 1 c IC2 Clause 1 a IC3 Clause 8		IC1 Clause 1 IC2 Clause 1) to 3) IC3 Clause 5	IC1 Clause 1 IC3 Clause 5	
ТС7	Clause 2 Clause 3 e) and h)		Clause 1 Clause 2 Clause 3 a) and c) Clause 4	-	Clause 3, all sub-clauses

Impact level 1	Impact level 2	Impact level 3

# 9. Monitoring and Review

- 9.1.1 A monitoring framework has been established to assess the performance of the policies in the Local Plan to see if they are performing as intended towards delivering the Vision and Objectives set out and to identify the need for a local plan review, new or updated SPDs, or other interventions. The monitoring framework is reported on in the Council's Annual Monitoring Report (AMR).
- 9.1.2 A number of these monitoring indicators are relevant to this SPD including those (core output type) indicators which directly measure the performance of policies e.g. the delivery of adaptable homes or loss of protected open space. Other indicators are more 'contextual' showing matters such as life expectancy, levels of disease and obesity and where these show an improvement or deterioration it is often difficult to link this directly to the performance of planning policies as they are influenced by many other wider factors. However, where performance against such contextual health indicators show a prolonged deterioration, this would need to be looked at to see whether the policies are having any effects or whether an alternative approach is justified.

# Appendices

# Appendix A: Local Plan Objectives

### **Delivering Sustainable Growth**

1. To minimise the adverse impacts of climate change and support growth to meet the need for jobs, homes and services in the context of moving towards a low carbon economy and stemming population decline. Growth will be managed so that it takes place in the most appropriate locations, promotes the re-use of previously-developed land and buildings, energy efficiency and sustainable design; and encourages the use of decentralised and renewable or low carbon energy sources.

### Population and Housing

2. To revitalise the housing market by encouraging a well-integrated mix of high quality, aspirational and affordable homes of different types and tenures to meet the needs of a wide range of households and support economic growth.

### **Economy and Employment**

- 3. To create an environment that supports economic prosperity, growth, entrepreneurship and a diverse business base.
- 4. To enhance and develop Burnley town centre's role as a sub-regional commercial centre and Padiham's as a market town, supported by a network of other smaller centres that supply accessible services to local neighbourhoods; encouraging development that supports these service centres to ensure they are vibrant and prosperous.

### The Natural Environment

- 5. To protect and enhance the borough's distinctive landscape character and high quality network of habitats and open spaces necessary for people and wildlife to thrive.
- 6. To improve mental and physical health and wellbeing by improving environmental quality and increasing opportunities for exercise and for sport and recreation, including improved access to nature and the wider countryside.

### The Built and Historic Environment

- 7. To create a safe, healthy, attractive, locally distinctive and accessible public realm for all.
- 8. To ensure that the intrinsic qualities and distinctive character of the historic environment is protected and, where possible, enhanced; and that heritage assets are used positively to promote and support regeneration and recreation and stimulate 'pride of place'.

### Accessibility, Transport and Other Infrastructure

- 9. To improve connectivity to major cities, including Manchester and Leeds, and provide infrastructure that supports sustainable economic growth and travel patterns.
- 10. To establish Burnley as a centre of educational excellence with high levels of educational attainment and a skilled, highly qualified workforce that meets the needs of the borough's economy.

### **Community Involvement**

11. To promote a diverse, vibrant and creative local culture encouraging pride and community cohesion and to seek community involvement in planning the future of the borough.

# Appendix B: Use Class Reforms

### **Use Classes**

- B1. The Use Classes Order divides different types of development into 'Use Classes'. A changes of use within an identified Class is not 'development' and therefore can be carried out without planning permission or any form of notification to a local planning authority.
- B2. Any external alterations to buildings to facilitate the change of use will still require planning permission in most cases.
- B3. Internal and external alterations to buildings to facilitate the change of use may also require building regulations approval.
- B4. Certain types of new uses may also require licencing.

### Permitted Development

B5. Permitted Development is development that has been granted planning permission through national legislation. This can be limited, for example by size of building or its location, or can be subject to conditions for example it must be carried out in similar materials, and, increasingly, through a 'prior approval' process which is akin to a light touch planning application where people have to apply to the Council in a particular form, but the Council can consider only certain planning matters and not others.

### Reforms

- B6. Significant changes to the Use Classes Order and to Permitted Development rights have been made by the government over the last few years.
- B7. These include establishing a new Use Class Class E which includes a variety of different commercial and leisure uses covering most of what was Classes A1 (shops), A2 (financial and professional services), A3 (restaurants and cafes) and B1 (business) as well as parts of classes D1 (non-residential institutions) and D2 (assembly and leisure). Certain shops and facilities with are deemed as being important to the local community have been placed into Use Class F2.
- B8. Cafes and restaurants, which were Class A3, are now included in Class E and so can be widely created without planning permission. These may serve unhealthy food to eat in or offer an ancillary hot food takeaway service.
- B9. Hot Food Takeaways, which were Class A5, are now classed as a 'Sui Generis' use, which means they are in a class of their own. There are no permitted development right to change the use of any premises to a hot food takeaway and so planning permission is always required.
- B10. Permitted Development rights allow existing takeaways to be changed to a Class E use subject to the local planning authority being notified of the intention in writing; or the conversion up to 150sqm of floorspace to residential use falling within Class C3 (dwellinghouses) subject to a prior approval process.
- B11. Pubs, wine bars and other drinking establishments which were Class A4 are also now a sui generis use which means planning permission is required for their creation. These may serve unhealthy food to eat in or offer an ancillary hot food takeaway service.

- B12. The reforms to permitted development rights include allow the conversion of Class E buildings to residential use without planning permission. These rights are subject to a prior approval process, but, as with many of the other changes, they are clearly intended to limit the local planning authority's ability to restrict the change which makes it much harder for them to protect their town centres and ensure satisfactory living conditions for residents.
- B13. The changes impact on the interpretation of the Local Plan policies as these were adopted prior to them being introduced and therefore refer to the former Use Classes. However, whilst the changes have limited the effectiveness of certain policies e.g. those in controlling uses in the Primary Shopping Area and therefore in protecting the retail offer, some level of control is still possible and national policy on the approach to town centre's set out in the NPPF remains largely unchanged and consistent with the approach of the Local Plan.
- B14. Use Class and permitted development rights are extremely complicated and it is always advisable to check what form of permission you may need before you plan or start work.

### Guidance

Use Classes - Change of use - Planning Portal

Is permission needed? | Burnley Borough Council

Legislation.gov.uk

guide-to-the-use-classes-order-in-england.pdf (lichfields.uk)

# Appendix C: Fast Food and Hot Food Takeaway Statistics

### **Burnley Council Statistics 2021:**

C1. As part of its Local Plan monitoring, the Council conducts a biennial survey of Use Classes and vacancies within the two Town Centres of Burnley and Padiham and the eight District Centres. The most recent survey was completed in May 2021. The survey data can be used for many purposes, including to identify the location of hot food takeaways (A5/Sui Generis Use Class). The survey is based on an external inspection of the premises and is not necessarily legally definitive.

C2. The 2021 statistics for hot food takeaways below do not include vacant premises (the last use of which may have been a hot food takeaway).

### **Burnley Town Centre:**

22/538 = 4.09%

### **Burnley Secondary Frontages:**

13/180 = 7.22%

### **Padiham Town Centre:**

8/197 = 4.10%

### **District Centres:**

Accrington Road	2/28	=	7.14%
Brierciffe Road	5/69	=	7.25%
Coal Clough Lane	0	=	0%
Colne Road	21/120	=	17.50%
Harle Syke	2 /15	=	13.33%
Lyndhurst Road	0	=	0%
Pike Hill	0	=	0%
Rose Grove lane	2/31	=	6.45%

### (OHID) Public Health England Statistics

- C3. This data set (including maps and charts) shows the variation in density of fast food outlets in local authorities across England per 100,000 population. The data was produced using the Food Standards Agency (FSA) Food Hygiene Rating Scheme (FHRS) dataset. It is <u>not</u> a measure of the number of A5/Sui Generis hot food takeaways.
- C4. According to this data published in 2018, the density of fast food outlets for each local authority in England ranged from 26 to 232 outlets per 100,000 population, with the average across England being 96.1. It indicated that there were 147 fast food outlets in Burnley giving at density of 168, the 3rd highest in England. Figures for the number of outlets in each Ward is also available.<sup>57</sup>
- C5. The notes accompanying the data set say that 'fast food' refers to food that is energy dense and 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 and that it is likely that the data here does not show the complete picture for fast food outlets. Many of the outlets that could be considered 'fast

<sup>&</sup>lt;sup>57</sup> Fast food outlets: density by local authority in England - GOV.UK (www.gov.uk)

food' are likely to be multi-functional; sit-down and eat in, takeaway and home delivery. As a result businesses may have been recorded under the category of restaurant or café which would mean they may not have been included here despite selling similar types of food to those included in this analysis."

C6. However, despite these notes, it does appear that a number of A3 restaurants and some A1 food retailers have been included in the statistics?

C7. The data is a specific snapshot at a point in time (31/12/2017).

### Lancashire County Council Statistics

C8. Lancashire County Council has gathered data on the number of "takeaways" and rate per 100,000 of the population for Districts in Lancashire from Feat (Food environment assessment tool).<sup>58 59</sup> It would appear that this isn't actually data on hot food takeaways but data on fast food outlets. At the time of drafting this SPD the web data is not actually available so we are unable to check what is included.

C9. As the figures for Burnley are similar to the Public Health England figures it is assumed that they are not figures just for hot food takeaways but also include restaurants and other outlets selling fast food. For other areas in East Lancashire however the figures are considerably higher than the Public Health England statistics.

C10. The figures reported by LCC show that the rate of "takeaways" in 2018 is high in Burnley at 168.3 per 100,000 people but the number is fairly static (3% rise) in comparison to the significantly greater increases in Pendle (15%) and Hyndburn (24%) and also nearby Blackburn with Darwen (38%).<sup>60</sup>

Area	2014		2015		2016		2017	2018		Difference	Percentage	
	Count	Rate		increase								
England	47566	87.6	48171	87.9	50641	91.6	56977	102.4	59131	105.6	11565	24%
Lancashire	1399	118.3	1421	119.5	1481	123.9	1519	126.4	1557	128.7	158	11%
Burnley	145	166.3	149	170.8	147	168.0	157	179.0	149	168.3	4	3%
Chorley	117	104.8	120	106.2	127	111.1	128	110.6	124	106.1	7	6%
Fylde	92	119.3	95	122.6	96	122.8	103	130.6	96	120.3	4	4%
Hyndburn	111	138.5	118	147.3	125	155.5	127	157.9	138	170.8	27	24%
Lancaster	137	97.7	141	100.2	145	102.3	136	95.4	147	101.9	10	7%
Pendle	126	140.5	128	142.3	138	152.5	138	152.2	145	158.6	19	15%
Preston	200	143.0	200	142.2	205	145.4	211	149.3	227	160.1	27	14%
Ribble Valley	62	106.7	57	97.4	63	107.0	65	109.2	65	108.2	3	5%
Rossendale	105	151.9	98	141.2	104	149.0	106	150.6	111	156.6	6	6%
South Ribble	107	98.1	115	104.8	124	112.6	130	117.8	137	124.0	30	28%
West Lancashire	74	66.2	76	67.6	76	67.2	82	72.0	82	72.0	8	11%
Wyre	123	113.3	124	113.2	131	119.1	136	123.2	136	122.3	13	11%
lackburn with Darwen	190	128.9	199	134.6	230	154.9	234	157.3	263	176.6	73	38%
Blackpool	286	203.0	285	203.3	309	220.7	340	243.1	348	249.8	62	22%

<sup>&</sup>lt;sup>58</sup> FEAT is developed by the Centre for Diet and Activity Research and the MRC Epidemiology Unit at the University of Cambridge. It is designed around the needs of professionals in public health, environmental health and planning roles, locally and nationally.

<sup>&</sup>lt;sup>59</sup> Feat (feat-tool.org.uk) at the writing the source of this data is not available

<sup>&</sup>lt;sup>60</sup> Blackburn with Darwen has had a Local Plan policy in place since Dec 2015 and PfH SPD in place since April 2016.

# Appendix D: Secondary Schools Map

