

Hot Food Takeaway Supplementary Planning Document

Leeds Local Plan

Supplementary Planning Document

April 2019

Contents

		PAGE
1	Purpose	3
2	Background	3
3	Focus of this SPD and other Council Services	6
4	Definitions	9
5	National Evidence	10
6	Local Evidence	12
7	Policy Context	14
8	Other Planning Policy Matters	20
9	Contact Details	20
10	Monitoring	21

Appendices

Appendix 1 - Plans of A5 Use Restriction Areas around Secondary Schools

Appendix 2 - Number of HFT outlets found in Local Authorities and Wards

Appendix 3 - Plans of Hot Food Takeaways Locations

1. Purpose

1.1. The primary purpose of this document is to help improve the health of Leeds' citizens. Whilst this will involve the cooperation of several different services, planning has an important role to play in shaping healthy communities and one way of doing this is controlling the appropriate locations of Hot Food Takeaways (HFTs). This Supplementary Planning Document (SPD) aims to control the locations of HFTs that are in close proximity to secondary schools and where clustering of several HFTs can produce negative impacts.

2. Background context

2.1. The World Health Organisation defines health as 'a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity¹'. Hugh Barton and Marcus Grant's settlement health map² (Figure 1) brings attention to the role that the built environment can have on people's health and well-being, and allows us to understand how planning can make a positive impact upon the health environment.

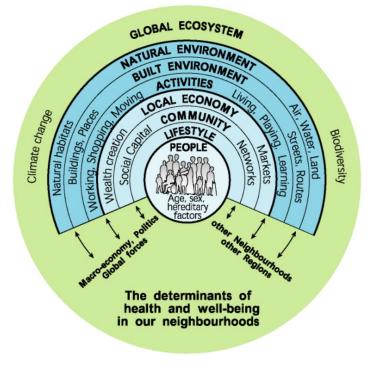


Figure 1:Barton and Grant's Settlement Health Map

¹ http://www.who.int/governance/eb/who_constitution_en.pdf

² Hugh Barton and Marcus Grant's settlement health map – in H. Barton and M. Grant: 'A health map for the local human habitat'. Journal of the Royal Society for the Promotion of Health, 2006, Vol. 126 (6), 252-253.dx.doi.org/10.1177/1466424006070466

- 2.2. The National Planning Policy Framework (NPPF) sets out the relationship between planning and health, and this relationship is also integrated into the Leeds Core Strategy which was adopted in 2014. Reference is made in the Profile section of The Core Strategy (Our People sub heading) to Leeds City Council's ambition to become a Child Friendly City and the Leeds Joint Health and Wellbeing Strategy that sets out a vision for Leeds to be healthy and caring city for all ages.
- 2.3. The health of Leeds' residents is one of the key objectives of the Leeds Best Council Plan³. In taking forward City Council and Best Council Plan priorities, the development plan for Leeds has a key role to play in shaping form, location and overall pattern of development. This Supplementary Planning Document will help the Council achieve its core health intentions through planning decisions, which are:
 - a) People live longer and have healthier, active lives;
 - b) All children and young people enjoy healthy lifestyles;
 - c) Leeds becomes 'a city which offers its residents the best support available to maintain their health and wellbeing long into the future';
 - d) The Best Council Plan 2016/17 update focusses on ensuring residents enjoy happy, healthy, active lives. Early intervention and reducing health inequalities is listed as one of its key breakthrough projects.
- 2.4. The City Council has a key ambition for Leeds to be a Child Friendly City in creating places and services where children and young people feel safe and welcome and involved and informed about what goes on around them. In taking this initiative forward, 12 'wishes' have been developed for a more child friendly Leeds. These include: travel, the City Centre, places and spaces, a healthy lifestyle and jobs. The Leeds Joint Health and Wellbeing Strategy (a strategy approved by the City Council, the three Clinical Commissioning Groups, Third Sector, Health watch and NHS England Area Team jointly) (June 2013), also sets out a vision for Leeds to be a healthy and caring City for all ages.
- 2.5. Leeds, along with rest of the UK, currently has a high level of obesity that has a large effect on people's health and wellbeing, with obesity related illnesses believing to cost the NHS £6.1 billion a year⁴. Tackling the causes of obesity is complex, and requires the contribution of different sectors and services⁵.

³ http://www.leeds.gov.uk/council/Pages/Council-plans.aspx

⁴ http://food.cieh.org/an_update_on_adult_obesity_levels_in_the_uk.html?RequestId=95a3936a

⁵ https://www.gov.uk/government/publications/reducing-obesity-future-choices

- 2.6. Evidence has proven there to be a link between obesity and unhealthy food choices. One of the ways planning can help address obesity is to limit access to unhealthy food choices by managing the locations of Hot Food Takeaways.
- 2.7. Leeds City Council currently has numerous health initiatives spread across several council services that aim to improve health and well-being. Licensing, public health and environmental health all have the ability to control and regulate HFTs, and have been actively involved in the preparation of this SPD. This SPD will complement other council initiatives in helping to restrict the impact that HFTs can have on both young and old people's well-being and health.

3. Focus of this SPD and other Council Services

- 3.1. Environmental health, licensing and public health all have the ability to help control HFTs and to mitigate against their adverse impacts.
- 3.2. Current work programmes led by **Public Health** and partners to improve the food environment include:
 - a) Development of a food charter for the Council and partners across the city.
 - b) Research into the food environment working with Environmental Health to monitor the prevalence of hot food takeaways and explore consumer behaviours.
 - c) Exploring strategies to tackle the unhealthy food environment working with Trading Standards and Environmental Health based on good practice from other areas. Exploring Strategies include improving the quality and nutritional value of food sold in takeaway outlets. All parties are seeking funding for a pilot project so this work is dependent upon funding being available.
 - d) European Food Information to Consumers Regulation No 1169/2011 (FIC) and the Food Information Regulations 2014 (FIR) require HFTs to clearly display the name of the food, any allergenic ingredients in the food and the quantitative ingredients declaration (QUID) on products containing meat⁶.
- 3.3. **Licensing** requires any business selling hot food and drink after 11pm to have a premises licence issued under the Licensing Act 2003 by the Council. The Licensing Act is a permissive regime which means that unless the authority receives representation in objection to the application for a licence, it is automatically granted. If a representation is received, then it must be relevant to the application and show how the proposed activities will impact on one or more of the four licensing objectives which are:
 - a) Prevention of crime and disorder
 - b) Prevention of public nuisance
 - c) Public safety
 - d) Protection of children from harm
- 3.4. Local Licensing Guidance notes have been published for certain areas across the district, such as South Leeds. These provide further information for anyone applying to sell alcohol or provide late night refreshments in certain geographic locations.
- 3.5. **Environmental Health** can be consulted on planning applications where the application may create harmful impacts on noise, odour, litter and light.

⁶ https://www.gov.uk/guidance/food-labelling-giving-food-information-to-consumers

Guidance on bin storage and waste management can be found within the Environmental Protection Act 1990.

- 3.6. This SPD will provide further clarification on how current Council planning policies can be used to protect against a range of adverse impacts created by HFTs. Ultimately, the SPD will address the following key aims:
 - a) Minimise the negative impact on health that HFTs can cause by controlling their proximity around secondary schools;
 - b) Minimise the negative impact on health that HFTs can cause by controlling their clustering in centres and parades.
- 3.7. This SPD only focusses on secondary schools due to increased level of independence and autonomy that secondary school pupils enjoy, compared to younger school children. Secondary school children are more likely to make their own decisions when purchasing food items during lunch time hours and journeys to and from school.
- 3.8. This SPD recognises the role that existing planning policies can also play in dealing with HFT proposals for other reasons:
 - a) Ensure Leeds City Centre, Town and Local Centres and Neighbourhood Parades retain their primary purpose providing for weekly and day-to-day shopping requirements, employment, community facilities and leisure opportunities in easily accessible locations, with appropriate concentrations of hot food takeaways;
 - b) Help protect the amenity of neighbouring residents from the effects of litter, traffic, smells and disturbances associated with HFTs;
 - c) Help keep centres and parades visually attractive by ensuring minimal impact on the street scene and public realm associated with HFTs. Shutters being down within key retail hours and litter can have a negative impact on attractiveness and perceived vitality of the centre.
- 3.9. The HFT SPD carries material weight for when the Council makes decisions on planning applications. It builds and expands upon existing policies found in the adopted Core Strategy and UDP, which is listed in a later section of this document, and implement Best Council Plan objectives.
- 3.10. The SPD will primarily be used by Development Management and Policy officers when determining A5 Use (see paragraph 4.1 below) applications, as well as assisting applicants as to the appropriate locations for such a use. It is advised that anyone planning to submit an application for an A5 use should read this SPD in conjunction with the Core Strategy and UDP.

4. Definitions

- 4.1. The Town and Country Planning (Use Classes) Order 1987 (as amended) defines a HFT as a Use Class A5 and as 'premises where the primary purpose is the sale of hot food for consumption off the premises'.
- 4.2. It should be noted that planning permission will not be required where there is already an existing A5 use on the property and that some unhealthy food can be sold from shops and restaurants as well as HFTs.
- 4.3. Accessibility to unhealthy food is not only confined to HFTs (A5), but also retail (A1) and restaurants (A3). However, this SPD relates only to uses that are deemed to be an A5 use, which will be determined at the planning application stage depending upon the primary use of the property. In deciding whether an application is for an A5 use, consideration will be given to the proportion of space designated for hot food preparation, the number of tables and chairs to be provided to customers and the percentage of turnover attributed to the A5 use. Where an application is submitted for a range of explicitly stated uses including A5 (such as an A3/A5 hybrid application), it would be assessed against this guidance as if it was an A5 use. However it is also noted that certain other uses (such as A3) may have an ancillary A5 element which would not need be assessed against this SPD. Examples of A5 and non A5 uses are as follows, however this list is not comprehensive:

A5 Use	Non A5 Use		
Fried Chicken Shops	Restaurants (A3)		
Fish and Chips Shops	Cafes (A3)		
Pizza Shops	Wine Bars (A4)		
Chinese takeaways	Pubs (A4)		
Indian takeaways	Sandwich Shops (A1)		
Kebab takeaways	Coffee Shops (A1/A3)		
Burger takeaways	Ice Cream shops (A1)		
Fast food drive through	Bakeries (A1)		
	Shisha bars (A4)		

Table 1: List of A5 and non A5 uses

5. National evidence

- 5.1. An increase in the amount of the population who are overweight and obese has become a major health problem within the United Kingdom. Obesity is a consequence of a diet resulting in an energy imbalance, which is normally due to eating too many calories or not participating in enough physical activity. The reasons for this are due to a complex mix of environmental, cultural and behavioural factors.
- 5.2. There has been a constant increase in the level of obesity over the last few decades. In 1993, 13.2% of men and 16.4% of women were categorised as obese, compared to 26.9% and 26.8% respectively in 2015⁷. 28% of children aged 2 to 15 were also found to be either overweight (14%) or obese (14%) in 2015.⁸
- 5.3. As mentioned previously, obesity and weight related illnesses are estimated to cost the NHS £6.1 billion a year, with that figure expected to rise to £9.1 billion by 2050. There is also a wider cost to the economy of around £20 billion a year when accounting for sick days and the decrease in productivity. People who are overweight and obese are more likely to be effected by problems including type 2 diabetes, cardiovascular disease and cancer.
- 5.4. Obesity has been a significant issue for the Government since the Foresight report "Tackling Obesities: Future Choices"⁹ was published in 2007, which highlighted the need for a society wide approach to tackling obesity. The "Healthy lives, healthy people: a call to action on obesity in England" government document prepared in 2011 highlights the role that planning can have in creating a healthier built environment by developing supplementary planning policies that can limit the growth of HFTs¹⁰. The Public Health England document "Obesity and the environment: regulating the growth of fast food outlets"¹¹ produced in 2014 also focuses on how local planning authorities can help create healthier built environments. The document highlights a change in eating patterns that has seen more people eat outside of the home at calorie rich establishments and advises how local planning authorities can use their powers to shape the food environment, which included the development of an SPD.

⁷ https://www.gov.uk/government/statistics/health-survey-for-england-health-survey-for-england-2015

⁸ http://www.content.digital.nhs.uk/catalogue/PUB22610/HSE2015-Sum-bklt.pdf

⁹ https://www.gov.uk/government/collections/tackling-obesities-future-choices

¹⁰ https://www.gov.uk/government/publications/healthy-lives-healthy-people-a-call-to-action-on-obesity-in-england

¹¹ https://www.gov.uk/government/publications/obesity-and-the-environment-briefing-regulating-the-growth-of-fast-food-outlets

- 5.5. A study into the nutritional composition of HFT food in the UK shows a largely unfavourable nutritional content of the food they provide¹². The research reviewed Indian, Chinese, kebab, pizza and English-style establishments and found that all were inconsistent with UK dietary recommendations.
- 5.6. The Greater London Authority takeaways toolkit states that 'The increase in fast food outlets will be a contributory factor in the growth of the obesogenic environment'¹³. There are several sources of evidence that support the influence of the food environment on a children's food intake and weight¹⁴. A systematic review of research into the consumer food environment and its effect on children's diets found that there is moderately strong evidence that the food environment may influence diet¹⁵.
- 5.7. Both Public Health England and the National Institute for Health and Clinical Evidence (NICE) provide advice that local planning authorities should restrict the location of HFTs in specific locations, such as around schools¹⁶.

¹² Nutritional composition of takeaway food in the UK, (Jaworowska et al. 2013)

¹³ https://www.london.gov.uk/sites/default/files/takeawaystoolkit.pdf

¹⁴ The influence of the food environment on overweight and obesity in young children: a systematic review, Osei-Assibey et al, 2012 (BMJ Open, 2012)

¹⁵ The community and consumer food environment and children's diet: a systematic review. Rachel Engler-Stringer et al, 2014

¹⁶ https://www.nice.org.uk/guidance/ph25

6. Local evidence

- 6.1. The Public Health Outcomes Framework has indicators for excess weight in adults and physical activity levels:
 - 62.3% of adults in Leeds are classified as overweight or obese and this is not significantly different from the England average;
 - 63.8% of adults in Leeds are achieving 150 minutes of moderate physical activity a week and this is above the England average of 57%;
 - 23.7% of adults in Leeds are classed as inactive. That is less than 30 minutes of moderate physical activity a week. Leeds performs better than the regional and national average (29.2% and 27.7% respectively)
 - The GP Data Audit in January 2015, reviewed the Body Mass Index (BMI) recorded in patient records for the adult population of Leeds (aged 16 years or over). This identified that 22% of the adult population are obese, compared to a 25% national average (BMI >30).
- 6.2. Research (Table 1) from the National Child Measurement Programme shows that 21.6% of reception school children and 33% of Year 6 children in Leeds are either overweight or obese.

School Year	Area	Underweigh t	Healthy Weight	Overweight	Obese	Combined overweight and obese	% measured
	Leeds	1.0%	77.4%	12.7%	8.8%	21.6%	95.4%
Reception	Yorkshire and Humber	0.9%	77.6%	12.7%	8.8%	21.5%	95.0%
	England	1.0%	77.2%	12.8%	9.1%	21.9%	96.0%
	Leeds	1.5%	65.5%	13.7%	19.3%	33.0%	94.4%
Year 6	Yorkshire and Humber	1.4%	65.3%	14.1%	19.2%	33.3%	93.0%
	England	1.4%	65.3%	14.2%	19.1%	33.2%	94.0%

Table 2: National Child Measurement Programme's healthy children comparison

6.3. The Leeds figures in the Table 1 are similar to national and regional levels, highlighting the fact that Leeds does not have an exceptional problem with regards to childhood obesity. However, the nationwide figures are seen to be

too high¹⁷, and any attempt to reduce children's obesity levels should be encouraged.

6.4. It is often found that Black and Minority Ethnic (BME) groups have worse health than the general population with higher rates of limiting lifelong conditions. Often these diseases can be linked to diet, such as type 2 diabetes and cardiovascular disease. Wards with the highest number of HFTs also contain large BME populations (City and Hunslet, Gipton and Harehills and Hyde Park and Woodhouse). This SPD has the potential to positively impact the health of these communities.

¹⁷ https://www.gov.uk/government/publications/childhood-obesity-a-plan-for-action/childhood-obesity-a-plan-for-action

7. Policy Context

National Planning Policy Framework (NPPF)¹⁸

- 7.1. The NPPF was first published in March 2012 and has been subsequently updated in 2019. It is a key document for local plan making and consideration in planning decisions. At the core of the NPPF a presumption in the favour of sustainable development. Paragraph 8 of the NPPF (February 2019) explains the three dimensions of sustainable development:
 - **Economic:** to help build a strong, responsive and competitiveeconomy, by ensuring that sufficient land of the right types is available in the right places and at the right time to support growth, innovation and improved productivity; and by identifying and coordinating the provision of infrastructure;
 - Social: to support strong, vibrant and healthy communities, by ensuring that a sufficient number and range of homes can be provided to meet the needs of present and future generations; and by fostering a well-designed and safe built environment, with accessible services and open spaces that reflect current and future needs and *support communities' health*, social and cultural well-being; and
 - **Environmental:** to contribute to protecting and enhancing our natural, built and historic environment; including making effective use of land, helping to improve biodiversity, using natural resources prudently, minimising waste and pollution, and mitigating and adapting to climate change, including moving to a low carbon economy.
- 7.2. Paragraph 91 c) that states planning policies should:

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.

¹⁸ https://www.gov.uk/government/publications/national-planning-policy-framework--2

- 7.3. Section 7 of the NPPF aims to ensure that planning policies should protect the viability of town centre environments and encourages local authorities to create policies that make clear which uses will be permitted in such locations.
- 7.4. Section 8 of the NPPF emphasises how the planning system can help facilitate social interaction and create healthy, inclusive communities.
- 7.5. National Planning Practice Guidance (NPPG) emphasises the importance of promoting access to healthier food and the role that local authorities have in considering health and well-being in their plan making and decision taking.

Local Health Policy

7.6. Saved UDP Policy GP5 is the principal policy used in the assessment of applications for HFTs. The policy states:

DEVELOPMENT PROPOSALS SHOULD RESOLVE DETAILED PLANNING ACCESS. CONSIDERATIONS (INCLUDING DRAINAGE, CONTAMINATION, STABILITY, LANDSCAPING AND DESIGN). PROBLEMS PROPOSALS SHOULD SEEK TO AVOID OF ENVIRONMENTAL INTRUSION, LOSS OF AMENITY, POLLUTION, DANGER TO HEALTH OR LIFE, AND HIGHWAY CONGESTION, TO MAXIMISE **HIGHWAY** SAFETY, AND TO PROMOTE ENERGY CONSERVATION AND THE PREVENTION OF CRIME. PROPOSALS SHOULD HAVE REGARD TO THE GUIDANCE CONTAINED IN ANY FRAMEWORK OR PLANNING BRIEF PREPARED FOR THE SITE OR AREA.

7.7. GP5 seeks to avoid *danger to health or life,* and therefore the key aim of this SPD is to amplify the negative health impact that a clustering and the location of HFTs can generate. The purpose of the following guidance is to supplement UDP policy GP5 and provide further criteria that will be considered by the LPA when determining a planning application for an A5 Use. Other relevant planning policies can be found within section 8 of this document.

New Guidance

HFT 1: Proximity to secondary schools

Planning permission will not be granted for new A5 Uses within 400 metres of a secondary school main entrance except within the boundaries of designated centres.

- 7.8. Policy P1 and Map 4 of the Leeds Core Strategy list the Town and Local Centres designations. Maps which show the hierarchy of Centres and their relation to secondary schools can be found in the appendix item 1. The 400 metre zone for each school is a radius centred on the main school entrances from which the pupils use. Whre a HFT application falls within a 400m exclusionary zone and a centre, permission would be granted as long it complies with Local Plan policies and HFT 2 and 3. If any part of a building is in contact with the 400m buffer, then that building will be covered by HFT 1.
- 7.9. No restriction will apply around primary, first and middle schools as children who attend these schools are generally not allowed out of school at lunch time. It is also expected that primary, first and middle school children will have less independence and autonomy than secondary school students. Only 25% of primary school children travel home from school without a guardian¹⁹, compared to the majority of secondary school students. The 400 metre was chosen as that represents a 10 minute walking distance from the school²⁰. Consideration will be given if it can be demonstrated that an applicant's site falls outside of a 10 minute walking trip due to physical or geographical barriers on the ground.
- 7.10. As previously mentioned, the nutritional content of HFT food in the UK is poor and contains high amounts of fat, salt and sugar which are linked to low nutritional quality and weight gain. With evidence suggesting that the food environment can have an effect on children's food intake and weight, and guidance from both Public Health England and NICE suggesting that planning authorities should restrict the location of HFTs in specific locations, HFT 1 aims to limit the impact of HFTs around secondary schools.
- 7.11. A study into the locations of HFTs nationally has found that schools have a higher concentration of HFTs in their surrounding area that would be expected by chance, and especially in the more deprived areas²¹. With evidence implying that overweight and obese children are more likely to become obese adults²², it is vital to support and encourage children to have healthy lifestyles and restricting their access to unhealthy foods around their schools will help achieve this objective.

¹⁹ http://www.psi.org.uk/docs/7350_PSI_Report_CIM_final.pdf

²⁰ http://www.ciht.org.uk/en/knowledge/publications/index.cfm/providing-for-journeys-on-foot-2000

²¹ The Geography of Fast Food Outlets: A Review, Fraser et al.(2010)

²² http://www.noo.org.uk/NOO_about_obesity/obesity_and_health/health_risk_child

HFT 2: Clustering

A. Planning permission will not be granted where an A5 proposal would result in the clustering of A5 uses which would detrimentally harm the function and vitality of the city centres, town centres, local centres and neighbourhood parades.

B. Planning permission will not be granted where clustering would have a detrimental impact on the amenity of existing and future occupants of the adjacent and connected properties.

C. To prevent clustering, an A5 use will only be permitted when the following criteria are satisfied:

- I. No more than two consecutive A5 uses should adjoin each other.
- II. Between groups of existing A5 uses, there should be at least two non A5 uses.
- III. Where the number of units in a parade or frontage fall within the thresholds in column 1 in the table below, no more than the number of A5 units in column 2 will be permitted in total.

Number of units in parade/frontage	Number of A5 units permitted under HFT 2iii
Fewer than 5	2
5-10	3
11+	4

- 7.12. Leeds currently has 966 HFT outlets, which results in a density of 126 outlets per 100,000 population²³. This density ranks Leeds in 15th place out of 325 in terms of highest density and 2nd out of 325 in number of outlets, when compared to other local planning authorities in England (See appendix item 2). By Ward, City and Hunslet (175), Gipton and Harehills (60) and Hyde Park and Woodhouse have the highest number of HFT outlets. A map showing the current locations of HFTs can be found in the appendix (appendix item 3).
- 7.13. With evidence showing that HFTs sell predominantly unhealthy food, the proliferation of HFTs in centres increases the access to unhealthy food items whilst also reducing the choice to healthier food options.
- 7.14. HFTs can play an important role in providing a popular service to local communities, and therefore are seen as acceptable uses in certain locations. However, the success and vitality of our city, town and local centres is strongly

²³ http://www.noo.org.uk/visualisation

linked to the variety of shops and services that can be found there. Centres provide key places where residents can locally purchase convenience goods, and therefore it is of vital importance that these areas retain that function. HFTs therefore should not have a negative impact on the vitality of centres and should not detract from their prime shopping function by limiting the amount of convenience shops.

- 7.15. HFTs are often open at unusual hours, which can have a negative effect on the visual and functionality of a retail centre. It is important to maintain active frontages within retail centres, and a HFT with shutters down during the day will have a negative impact on these frontages. Therefore a clustering of HFTs within a centre can have a negative impact on the vitality of that centre by making it less appealing to customers, whilst intensifying the negative effects attached to HFTs. Current and emerging policy exists (UDP BD7 and Site Allocations Plan policy RTC 4) that limits the usage of shutters to exceptional circumstances and ensures that HFTs would need to maintain or enhance the appearance of the existing retail or shopping frontages.
- 7.16. With delivery vehicles and customers picking up orders, the clustering of HFTs may result in a significant impact on highway safety and further impact the vitality of the centre.
- 7.17. HFTs are often visited during evening hours when background noise and activity can be considered low, and can result in an increase in noise, disturbances, odour, litter and anti-social behaviour which will be intensified when A5 uses are clustered together.
- 7.18. Policy SP2 shows that the vitality and viability of local centres is a key Core Strategy objective. Such places are often Transport Hubs and offer highly sustainable locations for residential developments (such as above ground floor centre uses). Clustering of HFTs in centres may harm the desirability of such sustainable locations. The proportions set out within HFT 2 are guidelines and as such each application will be treated on its own merits
- 7.19. When a HFT may be considered to comply with planning policy, it is often necessary to apply planning conditions that can control the nature of use and impacts on the surrounding areas. These will often relate to opening hours in order to prevent late evening and night time noise disturbances.

HFT 3: Amenity Considerations

When considering suitable opening times for HFTs, the following will be taken into account:

- A. The impacts on residential amenity;
- B. Whether there is an existing night time economy in the area;
- C. The existing character and levels of activity and noise in the area.

8. Other Planning Policy Matters

- 8.1. Other policies concerning amenity, shopping frontages, parking and waste management may also be relevant to determining HFTs. It is considered that the policies in the Unitary Development Plan, Core Strategy, emerging Site Allocation Plan (SAP) and Aire Valley Leeds Area Action Plan are satisfactory for making these considerations without further amplification by this SPD. For reference, a new A5 application must be in accordance with the following policies. It is also worth noting that Neighbourhood Plans also have the ability to create and adopt their own local HFT policies.
- 8.2. **CENTRE USES:** Core strategy policies **CC1**, **P1**, **P2**, **P3** and **P4** are relevant for the designation of centres and the uses acceptable within those centres. These policies also cover impact on amenity.
- 8.3. **OUT OF CENTRE USES.** Core Strategy policy P8 controls town centre uses (including HFTs) proposed in out-of-centre and edge-of-centre locations
- 8.4. **FRONTAGES:** UDP saved policies **SF1 -10** refer to the allocation of primary and secondary frontages and the uses found acceptable along those frontages. The emerging SAP proposes to supersede these UDP policies with proposed policies **RTC1**, **RTC2**, **RTC3** and **RTC4**.
- 8.5. **DESIGN:** Core Strategy policy **P10** covers the key principles of design and the principal of waste and recycling storage. Core Strategy policy **P11** is relevant if the A5 proposal is in an area of conservation importance.
- 8.6. **SHUTTERS: UDP Policy BD7** states that solid shutters will only be permitted in exceptional circumstances and the use of security glass or open mesh grills will be encouraged.
- 8.7. TRAFFIC MANAGEMENT AND PARKING: Core Strategy policies T2, P3,
 P4 and P10 cover car parking measures. The Leeds Parking SPD expands upon these policies.

9. Contact Details

9.1. Leeds Council's Development Management Team have an adopted protocol for pre-application advice (charges applicable). The team's contact details and further information can be found at:

http://www.leeds.gov.uk/council/Pages/Pre-application-enquiries.aspx

10. Monitoring

10.1. The successful implementation of this SPD will be assessed through the Annual Monitoring Report (AMR). The AMR will note when the SPD has been used in determining planning applications and the number and location of new HFTs permitted and refused. Monitoring will also include noting changes in school entrances and the opening of new secondary schools.