Participants; Inspector, Council.

Issues; policy DM24. My Q160

1) Council’s overall view of, and response to, representations and Inspector’s questions. Presentation of proposed amendments.

2) Health and well being

I am not content with the response to Q160.

DM24A does not appear to me to be an effective development management policy. To take an absurd example; a developer could produce a piece of paper demonstrating that a proposed development would have an adverse effect on health equalities. He would have complied with the policy and so could expect permission to be granted because, as the Act requires, a decision must be made in accordance with the development plan unless material considerations indicate otherwise. Core Strategy Policy CS13B by itself is more effective because it goes beyond requiring a Health Impact Assessment as an end in itself; it requires a development to address or mitigate whatever adverse effects are identified (and not limited to those which the developer’s own assessment might admit to).

To be effective DM24A needs to go beyond CS13B; it needs to specify the characteristics of health inequalities on which impact would be a material consideration; it needs to set parameters by which the impacts would be judged acceptable or otherwise and it should not limit itself to an assessment of impact prepared by the developer. The justification for the policy would need to justify the chosen characteristics by demonstrating that development can impact upon them and would need to justify the level at which the impact on the chosen parameters becomes significant. Without this, I am likely to have to delete this part (A) of policy DM24 in the interests of the soundness of the plan.

From a brief perusal of Documents KE37-43 inclusive, it seems that the Council may have enough background evidence to formulate and justify an effective development management policy but it has not yet done so.
Further work is needed.

I was not expecting this to remain an issue and so have not identified a hearing session to discuss it but I will now do so.

The responses to my Qs165 and 169 fills gaps in the justification for policy DM24 C. Would the Council please consider the following modifications to paragraph 25.6;

As opposed to other unhealthy foods sold in retail uses which fall within the general retailing use class, hot food takeaways are in a use class of their own and so may be managed within a specific planning policy. In recent years there has been concern that the high number of hot food takeaways in the borough are causing a number of detrimental impacts. Feedback from consultation with over 2,500 local residents showed significant dissatisfaction with both the number of local Hot Food Takeaways and their impact on the vibrancy and quality of town centres. Compared to other retail uses, an overconcentration or clustering of HFTs are likely to have a detrimental impact on amenity and on the retail character and function of a shopping centre. Such harmful impacts relate to increased incidence of litter, smells, crime and anti-social behaviour, noise and general disturbance, parking and traffic problems. Where concentrations occur in our town centres, they can pose a serious threat to the local economic vitality and viability. The Council's Annual Monitoring Report 2011-2012 shows that the average percentage of HFTs within primary and secondary frontages is 5%. By limiting new HFTs (and improving existing ones), the viability and vitality of our town centres will be enhanced. Better town centres means a better local economy. A stable local economy enhances the opportunity to attract and retain wealth in the borough which is locally identified as a key priority.