Medway Local Plan 2041 Examination

Matter 10 – Health, Communities & Infrastructure Hearing Statement

Medway Council

Issue

- **Whether the Plan provides a robust framework for improving health and wellbeing, reducing health inequalities, sustaining and enhancing local communities and infrastructure delivery which is justified, effective and consistent with national policy.**

Introduction

This Hearing Statement has been prepared in response to the Inspectors' Matters, Issues and Questions for Phase 2 of the Examination of the Medway Local Plan 2041.

The Council's answers are set out under each question raised by the Inspectors. References are given to the submitted Plan, examination documents, evidence base documents and statements of common ground where relevant.

For ease of navigation, this Hearing Statement includes bookmarks and a linked table of contents.

Where the Council considers modifications necessary to improve effectiveness, clarity or consistency with national policy, these are identified in this Hearing Statement.

Artificial Intelligence

Artificial Intelligence (AI) was used to assist in the preparation of this Hearing Statement.

Specifically, Microsoft 365 Copilot (GPT-based large language model) was used to assist with drafting, editing and refining text, improving structure and summarising planning policy and guidance in the Council's responses to questions relating to policies T28, DM21 and S24.

The source material used by the AI system comprised publicly available planning documents and information provided by the Council's officers, including the Plan (ref: A1), submitted evidence base documents, the National Planning Policy Framework (2024), Planning Practice Guidance and the Inspectors' Matters, Issues and Questions.

AI was used solely as a drafting and editorial aid. All factual content, planning judgements, conclusions, references, quotations and positions presented in this Hearing Statement have been reviewed, checked and approved by the Council. The Council accepts full responsibility for the content of this submission.

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Questions

Policy T27: Reducing Health Inequalities and Supporting Health and Wellbeing

10.1 Does the length of Policy T27 impact on its effectiveness with regard to consistency and the number of health and well-being matters that it concerns?

Council's response

10.1.1 The Council considers that health and wellbeing Policy requires a full and comprehensive approach. However, the Council would support splitting the Policy into two and restructuring and reformatting the preamble text to aid in clarity and effectiveness, as suggested below.

Evidence base

- B22.10 Health and Wellbeing Topic Paper - page 19, where reference is made to the Hot Food Takeaway Guidance Note updated March 2026, and pages 11-12 referencing the HIA Toolkit
- Hot Food Takeaway Guidance Note (updated March 2026) - appended to this document – whole document
- B19 Health Impact Assessment Toolkit – whole document
- The National Planning Policy Framework 2024 - Chapter 8 Promoting Healthy and Safe Communities; and updated NPPF 2026 - Chapter 16 Promoting Healthy Communities and Policies CC2, CC3, HO1, HO5, TC2, DP3, TR3, TR4, HC1, HC3, HC4, P1 P3, N2, N3
- Medway's Joint Local Health and Wellbeing Strategy 2024-2028 – page 6 "The building blocks of health and wellbeing"; pages 13-15 Priority Theme 1: Healthier, Longer Lives for everyone, pages16-18 Priority Theme 2: Reduce Poverty and Inequality; pages 19-20 Priority Theme 3: Safe, Connected and Sustainable Places
- Medway's Childhood Obesity Plan – whole document
- One Medway Council Plan - page 5 Our Ambition, page 9 health data, page 20-21 Priority 4 Improving Health and Wellbeing for All
- The Kent and Medway Integrated Care Strategy – page 2 Foreword, page 7 determinants of health, page 13 vision, pages 14-17 Outcome 1: Give children and young people the best start in life, pages 18-21 Outcome 2: Tackle the wider determinants to prevent ill health
- Public Health England's Spatial Planning for Health – page 6 Built environment and health, pages 11-22 Neighbourhood Design; pages 23-29 Housing; pages 30-37 Food Environment; pages 38-50 Natural and Sustainable Environments; pages 51-62 Transport

- The Marmot Review - Marmot objectives including Best Start in Life, Education and Capabilities, Employment, Healthy Standard of Living, Healthy and Sustainable Places, and Ill-health Prevention
- Medway's Joint Strategic Needs Assessment (whole document) and local health data.

Explanation

10.1.2 The Council considers that the length of Policy T27 reflects the breadth of factors that influence health and wellbeing. National policy, public health evidence, and local strategies as referenced within Document B22.10, the Health and Wellbeing Topic Paper, recognise that health outcomes are shaped by a wide range of social, economic and environmental determinants, including housing, access to services, transport, open space, food environments, employment and social connections, rather than healthcare provision alone. These are all matters which can be influenced through the planning system and thus requires a full and comprehensive approach.

10.1.3 However, on consideration, the Policy may benefit from additional preamble text and reorganisation to provide clearer background, data and evidence on specific parts of the wording, particularly around tackling obesity and fast-food outlets. In doing so, the Policy would lend itself to being split into two, i.e. one policy being strategic and the other being a development management policy.

10.1.4 At the same time, in order to tie in with the Hot Food Takeaway Guidance Note (updated March 2026 - as referred to within the Health and Wellbeing Topic Paper at page 19), the Council suggests removing reference to 'hybrid uses' from the current Policy wording where it states that "*The development of hot food takeaways, or of hybrid uses incorporating such uses…*". i.e. a restaurant with a dedicated takeaway and delivery operation.

10.1.5 The updates to both the Policy and the Hot Food Takeaway Guidance Note (updated March 2026) bring these documents into consistency with the NPPF 2024 paragraph 97, including amendments relating to 'Proximity to Schools' whereby reference to 400m has been removed and replaced with 'walking distance'.

Conclusion

10.1.6 The Council does acknowledge that separating strategic health objectives from development management requirements would improve clarity and effectiveness. Accordingly, the Council proposes the split of Policy T27 (ref: A1, pages 187 & 188) into:

- Policy T27a: Reducing Health Inequalities and Supporting Health and Wellbeing; and
- Policy T27b: Creating Healthy and Sustainable Places.

10.1.7 The Council has also updated the Hot Food Takeaway Guidance Note to reflect the Policy wording and the NPPF (2024 version).

10.1.8 The Council considers that these modifications would improve usability while retaining the comprehensive approach required to address health inequalities.

10.1.9 The Council considers that these proposed modifications are justified by proportionate evidence, effective, positively prepared and consistent with national policy.

Proposed Main/Minor Modification

10.1.10 Separate the policy into two distinct parts and reformat and provide additional preamble text. Remove reference to 'hybrid uses' from the Policy as detailed above.

10.1.11 Attention is also drawn to the Hot Food Takeaway Guidance Note (updated March 2026) appended to this document, whereby reference to 'hybrid uses' has been removed and updated text has also been provided in relation to proximity to schools.

10.1.12 Policy T27a and preamble text (ref: A1, pages 185-187):

> '10.1.1 Promoting the health and wellbeing..... 10.2.7 An Integrated Care....cycling routes to schools.'
>
> Policy T27**a:** Reducing Health Inequalities and Supporting Health and Wellbeing
>
> The Council will maintain and improve the health and wellbeing of our residents, encouraging healthy lifestyles and tackling the causes of ill health and inequalities. This will be achieved by.....
>
> .....Development that would have an unacceptable impact on health or wellbeing will not be permitted.'
>
> - ~~Development proposals will help .....Locations away from places that are regularly frequented by younger people such as schools and youth facilities, and where they are likely to worsen health inequalities are considered preferable.~~

10.1.13 Insert new text starting at 10.2.8 through to 10.2.13 followed by separate Policy T27b:

> **'10.2.8 New development has the potential to support significant improvements in human health, but can also have considerable adverse impacts on health, both within the red line and on the wider environment, if it is inappropriately located, designed, constructed and/or operated. Certain types of use can cause detrimental cumulative impacts as a result of their concentration. It is important that specific consideration is given to the potential overall impact of development on health during the planning process, with individual proposals seeking to maximise their positive contribution as far as practicable, recognising that health requirements and issues can vary**

between different groups of identity and on an individual basis. Health impact assessments will be an important tool for this, and the Council has produced a template for developers to follow.

10.2.9 Tackling obesity is one of the biggest health challenges facing the UK (DHSC, 2020). Currently one in four adults in England are obese (OHID, 2024). There is a clear link between increased body fat (obesity) and risk of medical conditions including type 2 diabetes, cancer, heart and liver disease. The UK-wide NHS costs attributable to overweight and obesity are projected to reach £9.7 billion by 2050, with wider costs to society estimated to reach £49.9 billion per year (PHE, 2017). Many factors can contribute to obesity, including sedentary lifestyles and excessive consumption of fast food. Fast food and ready meals are often high in calories, salt and fat (UK Health Security Agency, 2016).

10.2.10 Helping people to live well for longer, while giving them the freedom and opportunities to make their own decisions is a key factor for Public Health. This means reducing the chances of problems from arising in the first place and, when they do, supporting people to manage them as effectively as possible. One of the key goals outlined within The Medway Joint Local Health and Wellbeing Strategy 2024-2028 is to improve the physical and mental health and wellbeing of Medway residents and reduce inequalities. A specific priority includes supporting residents to live healthy lives and supporting people and families to access healthy food (Medway Council, 2024).

10.2.11 An important contributing factor to poor diet and health in certain parts of Medway is the distribution and access to unhealthy eating outlets. In certain locations there is an issue where such uses cluster together, reinforcing the ease of access to unhealthy foods and adversely affecting the vitality of the area. An overabundance of hot food takeaways (defined as "the sale of hot food where consumption of that food is mostly undertaken off the premises") displaces other shops and food options and impacts on the vitality and viability of designated town and neighbourhood centres. Because of this, some communities in Medway have a limited choice of and access to fresh, nutritious food. The clustering of hot food takeaways breaks up the continuity of the retail frontage and can detract from the primary retail function resulting in the loss of shops, which is to the detriment of local residents and the vitality and viability of the centre as a whole. Consideration will therefore be given to managing the proliferation of and therefore access to, such uses to avoid over-concentration.

10.2.12 National research has shown that the density of fast-food outlets is higher in deprived areas making it harder for people in these areas to access healthier food options Evidence has also shown associations between exposure to takeaway food outlets and body mass index, and groups most exposed to takeaway food outlets near home and along commuting routes have a higher mean body mass index than those least exposed. Exposure to takeaway food outlets in home, work and commuting environments combined is associated with marginally higher consumption of takeaway food and greater odds of obesity (BMJ, 2014).

10.2.13 Furthermore, evidence shows that once obesity is developed it is difficult to treat. If in adolescence obesity develops, it is likely to remain into adulthood (Simmonds, 2016). Having fast food outlets within walking distance of schools negates some of the independent health promotion initiatives implemented in schools and is a contributing factor in the rise of obesity in the area (Lorna K Fraser, 2010).

Policy T27b: Creating healthy and sustainable places

Development proposals will help to create healthy and sustainable places, recognising the cumulative effect individual units and specific uses can have on the success of places.[141] The Council will seek to manage the concentration and mix of specific premises to support healthier communities. In particular, the location and concentration of the following types of development will be carefully managed to avoid possible adverse impacts on health and wellbeing:

a. hot food takeaways;
b. off-licences;
c. facilities that encourage smoking, for example smoking shelters and shisha lounges; and
d. payday lenders, betting shops and amusement arcades.

Planning applications will be refused where hot food takeaways and fast food outlets are within walking distance of locations where children and young people congregate or locations where a concentration of uses is having an adverse impact on local health, pollution or anti-social behaviour. The development of hot food takeaways~~, or of hybrid uses incorporating such uses,~~ will not be permitted in wards where more than 10% of year 6 pupils are classified as obese. Where this is acceptable, the Council will only consider granting planning permission where:

a. The location and design is acceptable and the proposed use does not detrimentally affect the vitality of the shopping area;

b. there is no harm or loss of amenity to the living conditions of nearby residents, including that created by noise and disturbance from other users and their vehicles, odour and litter;
c. and parking and traffic generation is not a danger to other road users, public transport operators or pedestrians.

Where uses identified in points a-d above can be justified, acceptability will be informed by the location proposed. Locations away from places that are regularly frequented by younger people such as schools and youth facilities, and where they are likely to worsen health inequalities are considered preferable.'

Supporting text 10.2.8 – 10.2.17 are renumbered to 10.2.14 – 10.2.23:

'~~10.2.8~~ **10.2.14** Chapter 8 of the NPPF makes it clear that .....~~10.2.17~~ **10.2.23** Health, social care, community, sport..... that attracts investment.'

Reason for proposed Main/Minor Modification

10.1.14 To provide greater clarity and effectiveness. To remove reference to 'hybrid uses'. To update the Hot Food Takeaway Guidance Note in line with the Policy and the NPPF (2024 version).

10.2 What is the difference between the 2 sets of bulleted criteria under Policy T27, in relation to what they seek to achieve and their deliverability, and therefore their effectiveness?

Council's response

10.2.1 The two sections serve different but complementary purposes; the first set of criteria establishes the Council's strategic approach to reducing health inequalities and improving health and wellbeing across Medway, the second set of criteria provides the mechanism through which those strategic objectives are delivered through the planning process.

Evidence base

- B22.10 Health and Wellbeing Topic Paper - page 19, where reference is made to the Hot Food Takeaway Guidance Note updated March 2026, and pages 11-12 referencing HIA
- Hot Food Takeaway Guidance Note (this was updated March 2026) - whole document
- B19 Health Impact Assessment Toolkit – whole document
- The National Planning Policy Framework 2024 - Chapter 8 Promoting Healthy and Safe Communities; and updated NPPF 2026 - Chapter 16 Promoting Healthy Communities and Policies CC2, CC3, HO1, HO5, TC2, DP3, TR3, TR4, HC1, HC3, HC4, P1 P3, N2, N3
- Medway's Joint Local Health and Wellbeing Strategy 2024-2028 – page 6 "The building blocks of health and wellbeing"; pages 13-15 Priority Theme 1: Healthier, Longer Lives

for everyone, pages16-18 Priority Theme 2: Reduce Poverty and Inequality; pages 19-20 Priority Theme 3: Safe, Connected and Sustainable Places
- Medway's Childhood Obesity Plan – whole document
- One Medway Council Plan - page 5 Our Ambition, page 9 health data, page 20-21 Priority 4 Improving Health and Wellbeing for All
- The Kent and Medway Integrated Care Strategy – page 2 Foreword, page 7 determinants of health, page 13 vision, pages 14-17 Outcome 1: Give children and young people the best start in life, pages 18-21 Outcome 2: Tackle the wider determinants to prevent ill health
- Public Health England's Spatial Planning for Health – page 6 Built environment and health, pages 11-22 Neighbourhood Design; pages 23-29 Housing; pages 30-37 Food Environment; pages 38-50 Natural and Sustainable Environments; pages 51-62 Transport
- The Marmot Review - Marmot objectives including Best Start in Life, Education and Capabilities, Employment, Healthy Standard of Living, Healthy and Sustainable Places, and Ill-health Prevention
- Medway's Joint Strategic Needs Assessment (whole document) and local health data.

Explanation

Strategic health objectives

10.2.2 The first set of criteria establishes the Council's strategic approach to reducing health inequalities and improving health and wellbeing across Medway. It sets out the outcomes that the Local Plan seeks to achieve, including:

- promoting active lifestyles;
- improving access to green and blue infrastructure;
- reducing exposure to environmental hazards;
- improving access to education and employment;
- supporting access to healthy food;
- supporting mental wellbeing; and
- ensuring access to community and healthcare facilities.

10.2.3 These objectives are directly informed by the local evidence base and national public health guidance.

Development management and implementation criteria

10.2.4 The second set of criteria provides the mechanism through which those strategic objectives are delivered through the planning process. These criteria relate to:

- provision and retention of community infrastructure;
- health facilities;

- allotments and food-growing opportunities;
- Health Impact Assessments; and
- development proposals that support healthier lifestyles and communities.

Conclusion

10.2.5 The Council therefore considers that the two parts are distinct but complementary: the first establishes the policy objectives and the second provides the implementation framework through which those objectives are delivered.

10.2.6 The Council therefore considers that the approach is justified by proportionate evidence, effective, positively prepared and consistent with national policy.

Proposed Main/Minor Modification

10.2.7 No modifications proposed.

Reason for proposed Main/Minor Modification

N/A

10.3 How would Policy T27 be deliverable and therefore effective where it refers to 'selling fresh food' (first set of bulleted criteria, last but one bullet point)?

Council's response

10.3.1 The Council considers that the Policy is deliverable and effective. However, to improve clarity, the Council would support a minor modification to the Policy wording.

Evidence base

- B22.10 Health and Wellbeing Topic Paper - page 18
- B22.10 Health and Wellbeing Topic Paper - page 19, where reference is made to the Hot Food Takeaway Guidance Note updated March 2026
- Hot Food Takeaway Guidance Note (this was updated March 2026) - appended to this document – whole document
- B19 Health Impact Assessment Toolkit – Section 4.9
- The National Planning Policy Framework 2024 - Chapter 8 Promoting Healthy and Safe Communities; and updated NPPF 2026 - Chapter 16 Promoting Healthy Communities and Policies HC4, NR3, TC2, GB5 and HC5
- Medway's Joint Local Health and Wellbeing Strategy 2024-2028 – page 6 "The building blocks of health and wellbeing"; pages 13-15 Priority Theme 1: Healthier, Longer Lives for everyone, pages16-18 Priority Theme 2: Reduce Poverty and Inequality; pages 19-20 Priority Theme 3: Safe, Connected and Sustainable Places
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- One Medway Council Plan - page 5 Our Ambition, page 9 health data, page 20-21 Priority 4 Improving Health and Wellbeing for All

- The Kent and Medway Integrated Care Strategy – page 2 Foreword, page 7 determinants of health, page 13 vision, pages 14-17 Outcome 1: Give children and young people the best start in life, pages 18-21 Outcome 2: Tackle the wider determinants to prevent ill health
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- The Marmot Review - Marmot objectives including Best Start in Life, Education and Capabilities, Employment, Healthy Standard of Living, Healthy and Sustainable Places, and Ill-health Prevention
- Medway's Joint Strategic Needs Assessment (whole document) and local health data.

Explanation

10.3.2 The Council's intention is not to require developers to operate, provide or secure specific retailers. Instead, the policy seeks to support the creation of healthier food environments through improved access to healthy and affordable food, particularly in communities where access to fresh food may be limited. This reflects the evidence presented in document B22.10 the Health and Wellbeing Topic Paper regarding food deserts, healthy weight environments and the importance of providing opportunities to access healthy food.

10.3.3 It is also supported by a number of Council-wide initiatives, including:

1. **Medway Council's Sustainable Food Policy**, which was developed through the Medway Food Partnership and includes commitments relating to healthy food access, local sourcing and strengthening local food systems. This provides a policy framework that supports increased availability of healthy and fresh food through procurement and wider food system activity. This is currently going through approval by Cabinet.

2. **Social Enterprise Kent Community Food Shop**, funded by the Crisis and Resilience Fund and developed with support from the Medway Food Partnership, it improves access to affordable fresh food and healthy products while reducing food waste and supporting wider community resilience.

3. **Healthy Start promotion campaigns**, delivered in partnership with Family Hubs, maternity services and community food organisations, helping eligible families access support that can be used to purchase fruit, vegetables and other healthy foods. Around 2,000 local families currently access the scheme, with activity underway to increase uptake further.

Examples of existing smaller initiatives:

1. **Medway Food Partnership's Good Food Made Easy**, which promotes affordable healthy eating, seasonal produce and locally sourced food through campaigns, recipes, community engagement and partnerships with local producers such as Produced in Kent.

2. **Rochester Farmers' Market**, promoted in partnership with Medway's Town Centre Team, providing a regular route for residents to purchase fresh produce directly from local producers while supporting independent food businesses and shorter supply chains.

3. **Fresh fruit and vegetable provision at Medway NHS Foundation Trust**, including a regular fruit and vegetable stall operating from a high-footfall location at Medway Maritime Hospital, improving access to fresh produce for staff, patients and visitors.

4. **Community food projects and food support networks**, many of which distribute fresh fruit and vegetables as part of wider efforts to improve food security and access to healthy food in communities experiencing greater health inequalities.

10.3.4 In addition, the Medway Food Partnership's work with farmers, producers, retailers, NHS partners, schools, community organisations and local businesses demonstrates an active strategic approach to strengthening local food supply chains, increasing opportunities for fresh food retail and improving access to healthy food across Medway. This provides a strong foundation for delivering the ambitions set out in Policy T27.

10.3.5 The policy may therefore be delivered through:

- supporting local centres and neighbourhood centres;
- retaining existing food retail provision;
- providing suitable retail opportunities within major developments;
- increasing opportunities for community food growing, allotments and communal gardens; and
- improving accessibility to shops selling healthy and affordable food.

Conclusion

10.3.6 The Council considers that the Policy approach is justified by proportionate evidence, effective, positively prepared and consistent with national policy.

10.3.7 However, to improve clarity, the Council would support a minor modification to more accurately reflect the role of planning and the policy objective.

Proposed Main/Minor Modification

10.3.8 Amend text in policy T27, ref: A1, page 187, bullet 8:

> 'Creating a healthy food environment.....unhealthy eating outlets, ~~and improving the accessibility of retail facilities selling fresh food~~ **improving access to healthy and affordable food**'.

Reason for proposed Main/Minor Modification

10.3.9 To improve effectiveness and more accurately reflect the role of planning and the Policy objective.

10.4 Where the second list of bulleted criteria under Policy T27 refers to major development, how is this defined?

Council's response

10.4.1 For the specific purposes of Policy T27, Major Development is defined in accordance with the definition used by Medway's Planning Validation Team.

10.4.2 The Council is open to considering a lower threshold for Major Development in the context of Policy T27 and the Health Impact Assessment Toolkit, if the Inspector considers this is justified.

10.4.3 The Council suggests, within the context of the HIA Toolkit and Policy T27, relabelling the threshold as 'Large Scale Development' to differentiate from the DMPO 2015 Major development definition used elsewhere in the Local Plan, and avoid confusion.

Evidence base

- The Town and Country Planning (Development Management Procedure) (England) Order 2015
- Planning permission validation checklist April 2025 – whole document
- B22.10 Health and Wellbeing Topic Paper - whole document
- B19 Health Impact Assessment Toolkit – Section 1, Introduction
- The National Planning Policy Framework 2024 - Chapter 8 Promoting Healthy and Safe Communities; and updated NPPF 2026 - Chapter 16 Promoting Healthy Communities and Policies CC2, CC3, HO1, HO5, TC2, DP3, TR3, TR4, HC1, HC3, HC4, P1 P3, N2, N3

- Medway's Joint Local Health and Wellbeing Strategy 2024-2028 – page 6 "The building blocks of health and wellbeing"; pages 13-15 Priority Theme 1: Healthier, Longer Lives for everyone, pages16-18 Priority Theme 2: Reduce Poverty and Inequality; pages 19-20 Priority Theme 3: Safe, Connected and Sustainable Places
- Medway's Childhood Obesity Plan – whole document
- One Medway Council Plan - page 5 Our Ambition, page 9 health data, page 20-21 Priority 4 Improving Health and Wellbeing for All
- The Kent and Medway Integrated Care Strategy – page 2 Foreword, page 7 determinants of health, page 13 vision, pages 14-17 Outcome 1: Give children and young people the best start in life, pages 18-21 Outcome 2: Tackle the wider determinants to prevent ill health
- Public Health England's Spatial Planning for Health – page 6 Built environment and health, pages 11-22 Neighbourhood Design; pages 23-29 Housing; pages 30-37 Food Environment; pages 38-50 Natural and Sustainable Environments; pages 51-62 Transport
- The Marmot Review - Marmot objectives including Best Start in Life, Education and Capabilities, Employment, Healthy Standard of Living, Healthy and Sustainable Places, and Ill-health Prevention
- Medway's Joint Strategic Needs Assessment (whole document) and local health data.
- Review of other authorities adopted Local Plans and Major Development definitions (particularly: Adopted Colchester Borough Local Plan Policy DM1, Adopted Brentwood Local Plan Policy MG04, Adopted Braintree Local Plan Policy LPP 49, Adopted Oxford Local Plan Policy RE5)

Explanation

10.4.4 The current definition has derived from that used by the Planning Validation Team at Medway Council for the purposes of PS1 and PS2 Reporting (http://opendatacommunities.org/data/planning/decisions/major-and-minor-development-type/all), this being:

A small-scale major

- 10 residential units, or more.
- 0.5 hectares or more on an outline for residential
- 1000 square meetings of floor space
- 1 hectare of site area.

A large-scale major

- 200 residential units, or more.
- 10,000 square metres of floor space

10.4.5 The Council would be content to include additional explanatory text to clarify this distinction.

Conclusion

10.4.6 The Council considers that the definition of Major Development is justified by proportionate evidence, effective, positively prepared and consistent with national policy.

Proposed Main/Minor Modification

10.4.7 The Council would support clarifying the definition of Major Development in the context of the Health Impact Assessment Toolkit and in general within Policy T27, to provide for clarity.

10.4.8 Clarify the definition and threshold for major development in the context of the HIA (ref: A1, page188, 2nd bullet):

> 'All Large Scale Development[x] proposals or those that the.....'
>
> **Footnote x: Large scale development in the context of the HIA is set at 200 or more residential units or 10,000sqm of floorspace**'

10.4.9 Insert a footnote to clarify the definition of major development outside of the HIA context (ref:A1 in the context of the HIA (ref: A1, page187, bullets 10 and 11:

> 'Major development[x] will be permitted where it provides facilities.....sport, and leisure facilities.
>
> Major development[x] must ensure that health care facilities.....and enable combined trips.'
>
> **Footnote x: Major development is defined as the delivery of 10 or more homes or the site has an area of 0.5 hectares of more (NPPF glossary, page 108)**.'

Reason for proposed Main/Minor Modification

10.4.10 To provide clarity.

10.5 Is Policy T27 seeking to control the uses under criteria b), c) and d) consistent with national policy?

Council's response

10.5.1 Whilst the NPPF does not mention these uses specifically, their inclusion in the Policy does reflect local circumstances and links into Paragraph 96c of the NPPF.

Evidence base

- Additional health data, October 2026, appended to this document

- B22.10 Health and Wellbeing Topic Paper - page 19, where reference is made to the Hot Food Takeaway Guidance Note updated March 2026
- Hot Food Takeaway Guidance Note (this was updated March 2026) - whole document
- B19 Health Impact Assessment Toolkit – whole document
- The National Planning Policy Framework 2024 - Chapter 8 Promoting Healthy and Safe Communities; and updated NPPF 2026 - Chapter 16 Promoting Healthy Communities and Policies TC2, HC4 and HC5
- Medway's Joint Local Health and Wellbeing Strategy 2024-2028 – page 6 "The building blocks of health and wellbeing"; pages 13-15 Priority Theme 1: Healthier, Longer Lives for everyone, pages16-18 Priority Theme 2: Reduce Poverty and Inequality; pages 19-20 Priority Theme 3: Safe, Connected and Sustainable Places
- Medway's Childhood Obesity Plan – whole document
- One Medway Council Plan - page 5 Our Ambition, page 9 health data, page 20-21 Priority 4 Improving Health and Wellbeing for All
- The Kent and Medway Integrated Care Strategy – page 2 Foreword, page 7 determinants of health, page 13 vision, pages 14-17 Outcome 1: Give children and young people the best start in life, pages 18-21 Outcome 2: Tackle the wider determinants to prevent ill health
- Public Health England's Spatial Planning for Health – page 6 Built environment and health, pages 11-22 Neighbourhood Design; pages 23-29 Housing; pages 30-37 Food Environment; pages 38-50 Natural and Sustainable Environments; pages 51-62 Transport
- The Marmot Review - Marmot objectives including Best Start in Life, Education and Capabilities, Employment, Healthy Standard of Living, Healthy and Sustainable Places, and Ill-health Prevention
- Medway's Joint Strategic Needs Assessment (whole document) and local health data.

Explanation

10.5.2 The intention of the Policy is to manage the concentration and location of uses where there is potential for adverse impacts on health, wellbeing and health inequalities locally specific to Medway.

10.5.3 In support of document B22.10 - the Health and Wellbeing Topic Paper, the Council is providing additional health data and background on the following uses:

- off-licences;
- facilities that encourage smoking, including shisha lounges;
- payday lenders, betting shops and amusement arcades

10.5.4 This Health Data in Support of Matter 10, provides a supplementary evidence base to support document B22.10 – the Health and Wellbeing Topic Paper. It has been prepared to address the justification for the Policy in respect of off-licences, shisha

lounges, betting shops, amusement arcades and payday lenders. It draws upon local public health evidence to demonstrate the relationship between these uses, health inequalities and the wider determinants of health.

10.5.5 It presents a range of health and socio-economic data for Medway, including evidence on alcohol-related harm, deprivation, crime and anti-social behaviour, gambling-related harm and the health impacts of shisha smoking. It identifies geographic variations in health outcomes across Medway's wards, highlighting areas with disproportionately high levels of alcohol-specific hospital admissions and other indicators of disadvantage. The document also includes evidence on the prevalence of harmful gambling behaviours and the concentration of health risks within more deprived communities. This is supported by recent appeal decision reference 6014100 (appended to this document). Collectively, the data supports Policy T27 in creating healthier environments and reducing health inequalities across Medway.

10.5.6 The evidence base demonstrates that health inequalities within Medway are strongly associated with deprivation, lifestyle factors and the wider determinants of health. Medway has significant health challenges, including a life expectancy gap between the most and least deprived communities, high levels of deprivation and poorer than average health outcomes across a range of indicators.

10.5.7 The Council considers that planning has a role in managing concentrations of certain uses where cumulative impacts arise. However, the strongest and most direct national policy support is in relation to hot food takeaways through paragraphs 96c and 97 of the NPPF (2024).

Conclusion

10.5.8 The Council considers that the approach is justified by proportionate evidence, effective, positively prepared and consistent with national policy.

Proposed Main/Minor Modification

10.5.9 None.

Reason for proposed Main/Minor Modification

N/A

10.6 What is the local evidence to support the control of specifically these uses, under criteria b), c) and d)?

Council's response

10.6.1 The policy is informed by a substantial local evidence base regarding health inequalities and the wider determinants of health.

Evidence base

- Additional health data October 2026, appended to this document
- B22.10 Health and Wellbeing Topic Paper - page 19, where reference is made to the Hot Food Takeaway Guidance Note updated March 2026
- Hot Food Takeaway Guidance Note (this was updated March 2026) - whole document
- B19 Health Impact Assessment Toolkit – whole document
- The National Planning Policy Framework 2024 - Chapter 8 Promoting Healthy and Safe Communities; and updated NPPF 2026 - Chapter 16 Promoting Healthy Communities and Policies TC2, HC4 and HC5
- Medway's Joint Local Health and Wellbeing Strategy 2024-2028 – page 6 "The building blocks of health and wellbeing"; pages 13-15 Priority Theme 1: Healthier, Longer Lives for everyone, pages16-18 Priority Theme 2: Reduce Poverty and Inequality; pages 19-20 Priority Theme 3: Safe, Connected and Sustainable Places
- Medway's Childhood Obesity Plan – whole document
- One Medway Council Plan - page 5 Our Ambition, page 9 health data, pages 20-21 Priority 4 Improving Health and Wellbeing for All
- The Kent and Medway Integrated Care Strategy – page 2 Foreword, page 7 determinants of health, page 13 vision, pages 14-17 Outcome 1: Give children and young people the best start in life, pages 18-21 Outcome 2: Tackle the wider determinants to prevent ill health
- Public Health England's Spatial Planning for Health – page 6 Built environment and health, pages 11-22 Neighbourhood Design; pages 23-29 Housing; pages 30-37 Food Environment; pages 38-50 Natural and Sustainable Environments; pages 51-62 Transport
- The Marmot Review - Marmot objectives including Best Start in Life, Education and Capabilities, Employment, Healthy Standard of Living, Healthy and Sustainable Places, and Ill-health Prevention
- Medway's Joint Strategic Needs Assessment (whole document) and local health data.

Explanation

10.6.2 The policy is informed by a substantial local evidence base regarding health inequalities and the wider determinants of health.

10.6.3 In support of document B22.10 - the Health and Wellbeing Topic Paper, the Council is providing additional detailed health data and background on the following:

- off-licences;
- facilities that encourage smoking, including shisha lounges;
- payday lenders, betting shops and amusement arcades

10.6.4 This Health Data in Support of Matter 10, provides a supplementary evidence base to support document B22.10 – the Health and Wellbeing Topic Paper. It has been prepared to address the justification for the Policy in respect of off-licences, shisha lounges, betting shops, amusement arcades and payday lenders. It draws upon local public health evidence to demonstrate the relationship between these uses, health inequalities and the wider determinants of health.

10.6.5 It presents a range of health and socio-economic data for Medway, including evidence on alcohol-related harm, deprivation, crime and anti-social behaviour, gambling-related harm and the health impacts of shisha smoking. It identifies geographic variations in health outcomes across Medway's wards, highlighting areas with disproportionately high levels of alcohol-specific hospital admissions and other indicators of disadvantage. The document also includes evidence on the prevalence of harmful gambling behaviours and the concentration of health risks within more deprived communities. This is supported by recent appeal decision reference 6014100 (appended to this document). Collectively, the data supports Policy T27 in creating healthier environments and reducing health inequalities across Medway.

10.6.6 The English Indices of Deprivation also identifies:

- Medway as being within the most deprived 30% of local authorities nationally;
- over 40% of residents living within the three most deprived national deciles;
- a significant life expectancy gap between the most and least deprived communities;
- poorer than average performance across a number of health indicators;
- significant levels of social isolation and poor mental wellbeing in some communities.

10.6.7 The evidence also demonstrates the importance of creating healthy environments, reducing inequalities and supporting community wellbeing through planning interventions. This is reflected within Medway's Joint Local Health and Wellbeing Strategy (page 6), the One Medway Council Plan (pages 20-21), the Kent and Medway Integrated Care Strategy (page 7) and Marmot Place ambitions.

Conclusion

10.6.8 The Council considers that the approach is justified by proportionate local evidence, effective, positively prepared and consistent with national policy.

Proposed Main/Minor Modification

10.6.9 None.

Reason for proposed Main/Minor Modification

N/A

10.7 Is the approach under Policy T27 (below the a), b), c) and d)) criteria on page 188) to control hot food takeaways consistent with national policy, in particular as it would seem to apply in town centres and introduce obesity controls?

Council's response

10.7.1 Policy T27 builds on the approach in the NPPF in order to address and tackle the significant local obesity challenges present in Medway.

10.7.2 It is important to note that under Question 10.1 of this document, the Council has proposed removing reference to 'hybrid uses' from this part of the Policy.

Evidence base

- B22.10 Health and Wellbeing Topic Paper - page 18
- B22.10 Health and Wellbeing Topic Paper - page 19, where reference is made to the Hot Food Takeaway Guidance Note updated March 2026
- Hot Food Takeaway Guidance Note (this was updated March 2026) - appended to this document – whole document
- B19 Health Impact Assessment Toolkit – Section 4.9
- The National Planning Policy Framework 2024 - Chapter 8 Promoting Healthy and Safe Communities; and updated NPPF 2026 - Chapter 16 Promoting Healthy Communities and Policies HC4, NR3, GB5 and HC5
- Medway's Joint Local Health and Wellbeing Strategy 2024-2028 – page 6 "The building blocks of health and wellbeing"; pages 13-15 Priority Theme 1: Healthier, Longer Lives for everyone, pages16-18 Priority Theme 2: Reduce Poverty and Inequality; pages 19-20 Priority Theme 3: Safe, Connected and Sustainable Places
- Medway's Childhood Obesity Plan – whole document
- One Medway Council Plan - page 5 Our Ambition, page 9 health data, page 20-21 Priority 4 Improving Health and Wellbeing for All
- The Kent and Medway Integrated Care Strategy – page 2 Foreword, page 7 determinants of health, page 13 vision, pages 14-17 Outcome 1: Give children and young people the best start in life, pages 18-21 Outcome 2: Tackle the wider determinants to prevent ill health
- Public Health England's Spatial Planning for Health – page 6 Built environment and health, pages 11-22 Neighbourhood Design; pages 23-29 Housing; pages 30-37 Food Environment; pages 38-50 Natural and Sustainable Environments; pages 51-62 Transport

- The Marmot Review - Marmot objectives including Best Start in Life, Education and Capabilities, Employment, Healthy Standard of Living, Healthy and Sustainable Places, and Ill-health Prevention
- Medway's Joint Strategic Needs Assessment (whole document) and local health data.
- Other Local Authority examples: Gateshead Council's adopted Hot Food Takeaway SPD, TCS6 of the adopted Northumberland Local Plan Policy TCS6, Waltham Forest Local Plan Policy 51, London Plan Policy E9

Explanation

10.7.3 National policy expressly recognises the role of the planning system in creating healthier food environments and addressing obesity. Paragraphs 96 and 97 of the NPPF 2024 require planning policies and decisions to support healthy lifestyles and enable access to healthier food choices. Paragraph 97 states that local planning authorities should refuse applications for hot food takeaways:

- within walking distance of schools and other places where children and young people congregate, unless the location is within a designated town centre; and
- in locations where there is evidence that a concentration of such uses is having an adverse impact on local health, pollution or anti-social behaviour.

10.7.4 Policy T27 reflects these national objectives by seeking to create a healthier food environment through controlling the location of unhealthy food outlets and improving access to healthier food options. The Hot Food Takeaway Guidance Note (updated March 2026) explains that the policy aims to maintain and improve health and wellbeing, tackle health inequalities, and address obesity as a recognised public health issue within Medway.

10.7.5 The Council's position is supported by extensive local evidence.

10.7.6 Medway experiences obesity levels above the England average. Childhood obesity remains a significant public health challenge, with almost two in five children (38.1%) leaving primary school overweight or obese. The Medway food environment contains a growing number of hot food takeaways, with 272 takeaways recorded in 2025, representing a 14% increase over the previous decade. Evidence also demonstrates associations between greater exposure to takeaway outlets, increased takeaway consumption and higher rates of obesity.

10.7.7 The policy is additionally supported by:

- Medway's Joint Local Health and Wellbeing Strategy;
- Medway's Childhood Obesity Plan;
- The Integrated Care Strategy;

- Public Health England guidance on healthy weight environments; and
- National evidence regarding the relationship between takeaway food environments and obesity.

10.7.8 The Council would also note that the proposed approach has not been developed in isolation and is informed by a range of adopted planning policies and guidance prepared by other local planning authorities. In particular, Gateshead Council's adopted Hot Food Takeaway SPD uses Year 6 obesity prevalence, concentration thresholds and controls around schools and places where children congregate. Similarly, Policy TCS6 of the adopted Northumberland Local Plan uses childhood obesity data and takeaway density thresholds to manage new takeaway development. Waltham Forest Local Plan Policy 51 and London Plan Policy E9 also demonstrate established approaches based on managing proximity to schools and over-concentration of hot food takeaway uses. These examples demonstrate that health-led planning controls on hot food takeaways have been successfully incorporated into adopted development plans elsewhere and provide useful precedents for the approach proposed by Medway.

Conclusion

10.7.9 The NPPF explicitly supports planning measures that promote healthier food environments and address identified health needs. NPPF paragraph 97 specifically recognises adverse health impacts arising from concentrations of hot food takeaways as a material planning consideration. Policy T27 seeks to manage over-concentrations and assess cumulative impacts on health, vitality and viability.

10.7.10 The Council therefore considers that the principle of managing hot food takeaway development is consistent with national policy. The Council considers that the approach is justified by proportionate evidence, effective, positively prepared and consistent with national policy.

Proposed Main/Minor Modification

10.7.11 None under this question. However, the response to Question 10.1 suggests a modification to the Policy through removal of reference to 'hybrid uses'.

Reason for proposed Main/Minor Modification

N/A

Policy T28: Existing Open Space, Outdoor Sports and Play Spaces

10.8 Are the existing open spaces, outdoor sports and play spaces which Policy T28 seeks to protect defined on the Policies Maps?

Council's response

10.8.1 The open spaces, outdoor sports and play spaces protected by Policy T28 are not identified on the Policies Map.

Evidence base

- NPPF (2024) (Glossary, PDF page 76)

Explanation

10.8.2 The Council has not identified existing open spaces, outdoor sports facilities and play spaces on the Policies Map. Instead, Policy T28 relies upon the definition of open space contained within the NPPF (2024), namely: "All open space of public value, including not just land, but also areas of water (such as rivers, canals, lakes and reservoirs) which offer important opportunities for sport and recreation and can act as a visual amenity."

10.8.3 The Council considers that this approach reflects the broad scope of the national definition and avoids the risk that individual open spaces, sports facilities or areas of public value could be inadvertently omitted from the Policies Map. The identification of a finite set of sites on the Policies Map could imply that the protection afforded by Policy T28 applies only to mapped sites, whereas the Council's intention is that the policy applies to all open spaces, outdoor sports facilities and play spaces that fall within the NPPF definition. Furthermore, this approach allows flexibility if any new open spaces are introduced or if existing spaces change.

10.8.4 The Council also notes that the purpose of Policy T28 is to provide policy protection consistent with national policy rather than to designate a specific network of protected open spaces. The Council's evidence base, including the Open Space Assessment (ref: C2.17) and Playing Pitch Strategy (refs: C2.18.1 and C2.18.2), provides the principal source of information regarding the location, function and value of open spaces and sports facilities across Medway. These documents can be updated more readily than the Policies Map and provide a more comprehensive and flexible evidence base for decision-making.

Conclusion

10.8.5 The Council considers that the absence of mapped open space designations does not undermine the effectiveness of Policy T28. The policy is capable of being applied through the development management process by reference to the definition of open space and the Council's supporting evidence base. However, the Council would be open to modifications to the supporting text explaining more clearly how Policy T28 should be applied in practice.

10.9 Would a proposal have to meet only one of the criteria (a. to e.) under Policy T28 for publicly accessible open space to be lost, or is a different

approach to these criteria proposed in terms of the effectiveness of the policy?

Council's response

10.9.1 The Council does not consider that the criteria were intended to operate as a simple checklist whereby compliance with a single criterion automatically justifies the loss of publicly accessible open space. Rather, the policy should be applied having regard to the overall purpose of safeguarding publicly accessible open space and ensuring that any loss is appropriately justified, mitigated or compensated.

Explanation

10.9.2 The Council's intention is that Policy T28 should provide a framework for assessing proposals affecting publicly accessible open space, having regard to the nature of the space, its contribution to the local area and the justification for its loss. However, the Council acknowledges that the current drafting could be interpreted as allowing the loss of open space where any one of criteria (a) to (e) is met.

10.9.3 The Council would therefore support modifications to improve clarity and effectiveness. This could include restructuring the policy so that criteria (a) to (e) are clearly presented as alternative circumstances in which loss may be acceptable, while ensuring that proposals continue to be assessed against the wider objectives of the Plan, relevant evidence base documents and national policy relating to open space, sport and recreation facilities.

Conclusion

10.9.4 Subject to such clarification, the Council considers that the policy objective remains justified and consistent with national policy. The proposed modification would improve the effectiveness of Policy T28 by providing greater certainty for applicants, stakeholders and decision-makers.

10.10 Are the criteria in Policy T28 (a. to i.) consistent with national planning policy?

Council's response

10.10.1 The Council considers that the protective elements of Policy T28 largely reflect the requirements of paragraph 104 of the NPPF (2024). The Council notes the replacement-style national policy approach in HC7 of the NPPF (2026), i.e. emphasis on protecting existing open space, sports and recreational land unless one of the nationally prescribed exceptions applies.

10.10.2 The principal local expression of the Council's strategy for open space, sport and recreation is contained within the evidence base, Policy DM21 and the site allocation policies.

10.10.3 Consequently, the Council is open to modifications to Policy T28 to more closely align it with paragraph 104 of the NPPF, or alternatively to simplify the policy to avoid unnecessary duplication of national policy.

10.11 Is the Plan seeking to designate land as Local Green Space (paragraph 10.3.4)?

Council's response

10.11.1 The Council is not seeking to designate land as Local Green Space. The Council invited nominations for Local Green Space designation as part of it's Regulation 18 consultation in 2024 (ref: C2.1, Question 40, PDF page 185). The Council did not receive any such nominations.

Proposed Minor Modification

10.11.2 Delete paragraph 10.3.4 of the Plan (ref: A1, PDF page 192).

Reason for proposed Minor Modification

10.11.3 Paragraph 10.3.4 of the Plan (ref: A1, PDF page 192) originates from the Regulation 18 consultation document in 2024 (ref: C2.1, paragraph 10.3.4, PDF page 180). This paragraph should have been deleted at Regulation 19 stage.

10.12 What is the evidence base which supports Policy T28 (and DM21), noting that the Open Space Assessment is a draft document (paragraph 10.3.6)? Note: We are not encouraging the Council to submit any further evidential documents.

Council's response

10.12.1 The Council accepts that the evidence base supporting Policies T28 and DM21 requires clarification.

Evidence base

- Fields in Trust Standards (ref: A1, Appendix C, PDF pages 432-472)

Explanation

10.12.2 In relation to Policy T28, the policy seeks to protect existing publicly accessible open space, outdoor sports facilities and play spaces from inappropriate loss. The Council acknowledges that there is no specific evidence base document that directly supports the detailed wording of criteria (a) to (e). Rather, the policy was intended to reflect the protection afforded by national policy, particularly paragraph 104 of the NPPF (2024), together with the broader objectives of the Council's Open Space Assessment. As set out in the Council's response to Questions concerning consistency with national policy, the Council considers that Policy T28 adds limited value beyond the protections already provided by national policy and would be open to modifications that more closely align the policy with the NPPF and remove unnecessary duplication.

10.12.3 In relation to Policy DM21, the position is different. Whilst paragraph 10.3.8 of the supporting text states that the accessibility and quantity standards were derived from the Open Space Assessment (2024), this reflects an earlier iteration of the policy that was consulted upon during Regulation 18. Following Council officers' consideration of the draft Open Space Assessment (ref: C2.17, Table 14.1.2, PDF page 106 and Table 14.2.2, PDF page 109), the Council did not proceed with those locally-derived standards and instead reverted to the nationally recognised Fields in Trust Standards (2024). These standards are embedded within Policy DM21 and reproduced at Appendix C of the Plan. Accordingly, paragraph 10.3.8 no longer accurately describes the basis of the submitted policy and should be deleted through a Main Modification.

Conclusion

10.12.4 The Council proposes a modification to the supporting text to explain that Policy DM21 is informed by the Fields in Trust Standards (2024), rather than the accessibility and quantity standards previously considered through the draft Open Space Assessment. The Council does not consider that this issue undermines the overall soundness of Policy DM21, as the policy's standards are clearly identified in the submitted Plan through Appendix C and are supported by a recognised national benchmark.

Proposed Minor Modification

10.12.5 Update paragraph 10.3.8 of the Plan (ref: A1, PDF page 195) to clarify that Policy DM21 is informed by the Fields in Trust Standards (2024).

Reason for proposed Minor Modification

10.12.6 This modification would improve the accuracy of the supporting text, provide greater clarity regarding the evidence base underpinning the policy and improve the effectiveness of the Plan.

10.13 Do the emerging Built Facilities Strategy (MLP/ED11A), Facilities Planning Model (MLP/ED11B) and Playing Pitch Strategy (MLP/ED11C) have any bearing on Policy T28 (and DM21)? Note: We are not encouraging the Council to submit any further evidential documents.

Council's response

10.13.1 The emerging Built Facilities Strategy (MLP/ED11A), Facilities Planning Model (MLP/ED11B) and Playing Pitch Strategy (MLP/ED11C) do not have any bearing on Policy T28 (and DM21).

10.14 Do these Strategies and Sport England representations to the Plan necessitate a main modification to this policy / these policies in considering the Council's Response to Inspectors' Initial Questions

(MLP/ED6) (page 8, under 17.) and the Statement of Common Ground with Prescribed Bodies (MLP/ED24A) (section 2.14)?

Council's response

10.14.1 The Council is not currently in a position to conclude that specific modifications are required. The completed evidence is expected to be particularly valuable in informing future updates to the Infrastructure Delivery Plan (IDP).

Explanation

10.14.2 The Council has engaged constructively with Sport England. Version 7 (17 December 2025) of the Statement of Common Ground with Prescribed Bodies records that Sport England's Regulation 19 representations noted that a Playing Pitch Strategy and Built Facilities Strategy were due to be commissioned and that the outcome of this work could potentially require changes to planning policies. The Council acknowledged this possibility and agreed to keep the matter under review through the Examination process.

10.14.3 Subsequently, Version 9 (14 September 2026) of the Statement of Common Ground explained that the production of the Playing Pitch Strategy and Built Facilities Strategy remained dependent on information from stakeholders and continued external review. The document notes that both pieces of evidence remain subject to change, including review by Sport England and the relevant steering group, and that associated action plans are being developed through engagement with clubs, operators and other stakeholders.

10.14.4 At the time of writing, these evidence base documents have not been finalised. Consequently, the Council considers that it would be premature to identify specific modifications arising from evidence that remains under review. The Council has not therefore concluded that modifications to the Plan are currently required as a direct consequence of the emerging Playing Pitch Strategy, Built Facilities Strategy or Facilities Planning Model.

10.14.5 Nevertheless, the Council recognises that the final versions of these documents may provide further evidence regarding the quantity, quality, accessibility and future provision of sports and recreation facilities across Medway. Once completed, this evidence will be reviewed alongside the submitted Plan and Infrastructure Delivery Plan. The Council will continue to maintain a schedule of proposed modifications during the Examination and, if the final evidence identifies any material implications for policy or infrastructure planning, these will be considered at the appropriate stage.

Conclusion

10.14.6 The Council anticipates that the most immediate role of the completed documents will be to inform future iterations of the IDP, which is a live document intended to be updated throughout the plan period. In the absence of finalised evidence, the Council does not consider there is currently a robust basis for concluding that modifications are required.

Policy DM21: New Open Space, Outdoor Sports and Play Spaces

10.15 Does Policy DM21 seek to rely on Fields in Trust Standards (2024) (as set out in the first paragraph of the policy itself) or the Council's standards in its Open Space Assessment (2024) (as set out in paragraph 10.3.8) and which is understood to be in draft form (paragraph 10.3.6)?

Council's response

10.15.1 Please see the Council's response to question 10.12.

10.16 How would Policy DM21 apply if these standards change during the time period of the Plan?

Council's response

10.16.1 Policy DM21 is based on the Fields in Trust Standards (2024), which are reproduced in Appendix C of the submitted Plan (ref: A1, PDF page 432-472) and provide the basis for the quantity standards applied by the policy. As drafted, the policy refers specifically to the Fields in Trust Standards (2024), rather than incorporating future revisions automatically.

10.16.2 The Council recognises that external standards, guidance and evidence may evolve during the lifetime of the Plan. If the Fields in Trust Standards were materially amended or replaced, the Council would assess the implications of those changes through its monitoring and plan review processes, including consideration of whether updates to Local Plan policy or supporting guidance were necessary.

10.16.3 Should the Fields in Trust Standards be materially revised or superseded during the Plan period, the Council would consider the implications through its plan monitoring and review processes. The Council will continue to monitor open space provision through the Authority Monitoring Report, updates to the evidence base and wider plan review processes, having regard to any future changes in national policy, guidance or recognised industry standards. The Council therefore considers that there are appropriate mechanisms available to review the policy approach should significant changes occur during the plan period.

Conclusion

10.16.4 The Council considers that the policy remains effective because it is based on a clearly defined set of standards at the point of adoption, whilst retaining the ability for those standards to be reviewed and updated through the statutory plan review process if required.

10.17 What type of development would Policy DM21 apply to in relation to making new open space, outdoor sports and play spaces provision and in the case of residential development what types would be specifically excluded?

Council's response

10.17.1 Policy DM21 is intended to apply to residential-led development, with the operative requirements applying to residential developments of 10 or more dwellings. The only specific exemption contained within the submitted policy relates to sheltered housing and special needs housing for older people.

Explanation

10.17.2 Policy DM21 is intended to apply to residential-led development, with the operative requirements applying to residential developments of 10 or more dwellings. The policy requires such developments to provide new and/or enhanced publicly accessible open space and recreation provision in accordance with the Fields in Trust Standards (2024), having regard to the scale and nature of the development.

10.17.3 The policy is intended to apply broadly to conventional residential development, including market and affordable housing schemes, mixed residential developments and strategic allocations. The calculation of requirements is based upon the anticipated resident population generated by the development.

10.17.4 The only specific exemption contained within the submitted policy relates to sheltered housing and special needs housing for older people. In these circumstances, children's play provision is not required because the occupier group would not be expected to generate a need for such facilities. However, the policy makes clear that formal and informal open space provision would still be sought.

10.17.5 The Council acknowledges that greater clarity could be provided regarding the precise scope of the policy and the types of residential development to which different elements of the standards apply.

Conclusion

10.17.6 The Council would support modifications to the supporting text and/or policy wording to clarify the treatment of specialist housing types and ensure consistent application through the development management process. Subject to such clarification, the Council considers that the policy remains effective as a framework for

securing open space, outdoor sports and play provision associated with residential development.

10.18 Where criterion d. of the first list of criteria refers to minor development, how is this defined for the purposes of Policy DM21?

Council's response

10.18.1 The Council considers that, for the purposes of Policy DM21, "minor development" should be interpreted as residential development proposals comprising fewer than five dwellings.

Explanation

10.18.2 The intention of criterion (d) is to provide flexibility for smaller residential schemes where it can be demonstrated that improving or expanding existing open space, play or recreation facilities would better meet local needs than requiring the provision of new facilities on-site. Given the limited scale of such developments, on-site provision may not always represent the most effective or practical approach to meeting the policy objectives.

Conclusion

10.18.3 The Council acknowledges that the term "minor development" is not defined within Policy DM21 and could therefore lead to uncertainty in decision-making. The Council would support a Main Modification to define the term explicitly within the policy or supporting text, thereby improving its effectiveness and providing greater certainty for applicants and decision-makers.

10.19 How is criterion f. of the first list of criteria under Policy DM21 consistent with a standards-based method, as it concerns a pre-application discussion-based approach to on-site open space provision?

Council's response

10.19.1 Criterion (f) is intended to provide flexibility in how open space requirements are delivered, rather than to depart from the standards-based approach set out in Policy DM21.

Explanation

10.19.2 The Council considers that criterion (f) is consistent with a standards-based approach because it does not displace the Fields in Trust Standards (2024), which form the basis of Policy DM21 and are reproduced in Appendix C of the Plan (ref: A1, PDF page 432-472). Rather, criterion (f) is intended to provide flexibility regarding the manner in which the standards are implemented on individual sites.

10.19.3 The purpose of criterion (f) is to recognise that different development sites will have different characteristics, constraints and opportunities. Whilst the quantity

standards establish the starting point for calculating open space requirements, it may not always be appropriate or practical to deliver every category of open space provision on-site. Pre-application discussions therefore provide a mechanism for considering how the required provision can best be delivered, taking account of factors such as site size, configuration, accessibility, local deficiencies and opportunities to enhance existing facilities.

10.19.4 The Council acknowledges, however, that the current wording may create uncertainty because it could be interpreted as allowing the standards themselves to be varied through discussion.

Conclusion

10.19.5 The Council would therefore support a modification clarifying that the Fields in Trust Standards establish the baseline requirement for provision, and that discussions with applicants are intended only to determine the most appropriate means of delivering the required open space, outdoor sports and play provision in the context of the particular development proposal. Such a modification would improve the effectiveness of the policy and provide greater certainty for applicants and decision-makers.

Policy T29: Community and Cultural Facilities

10.20 Is the list of community facilities (paragraph 10.4.1) intended to be a definition of such facilities for the purposes of Policy T29, noting that there is a later reference to shops and healthcare facilities (paragraph 10.4.7)

Council's response

10.20.1 The listing of community facilities at paragraph 10.4.1 was not intended to be an exhaustive list applicable to Policy T29. However, the Council recognises that a definition would be helpful and proposes a modification to paragraph 10.4.1 to clarify this.

Evidence base

a. NPPF, page 28, paragraph 98a, page 58, paragraph 200

Explanation

10.20.2 National policy at paragraph 28a identifies community facilities as inclusive of local shops, meeting places, sports venues, open space, cultural buildings, public houses and places of worship. Paragraph 200 includes pubs, music venues and sports club to that list. Modifications to paragraph 10.4.1 should include all these listed but also note that the list is not exhaustive.

Conclusion

10.20.3 The Council considers that Policy T29 is justified by proportionate evidence, effective, positively prepared and consistent with national policy.

Proposed Main/Minor Modification

10.20.4 Amend text at paragraph 10.4.1 (ref: A1, page 195):

'Community facilities~~, such as village halls and community centres, sports venues, cultural buildings, pubs and places of worship,~~ make an important contribution to the quality of life. **For purposes of policy T29, community facilities are buildings, spaces, services and infrastructure that provide for the health, welfare, social, educational, recreational, cultural, spiritual and day-to-day needs of a community, contributing to community wellbeing, social cohesion and sustainable development.** ~~They support access to key services, adding to the vibrancy of neighbourhoods and centres, and encourage social interaction and boost wellbeing.~~ **These include, for example, village halls and community centres, sports venues and clubs, cultural buildings, pubs, music venues, local shops, places of worship, health care facilities, open spaces and meeting places.'**

Reason for proposed Main/Minor Modification

10.20.5 To make the application of Policy T29 more effective.

10.21 Does this policy consider new healthcare facilities, such as hospitals and doctors surgeries?

Council's response

10.21.1 Paragraph 3 of Policy T29 does make reference to provision in planning for new development. This can be made clear with a modification.

Evidence base

a. N/A

Explanation

10.21.2 N/A

Conclusion

10.21.3 The Council considers that Policy T29 is justified by proportionate evidence, effective, positively prepared and consistent with national policy. Clarity can be provided regarding the provision of health care facilities.

Proposed Main/Minor Modification

10.21.4 Amend text at paragraph 3 of Policy T29 (ref: A1, page 197):

'The Council will require provision to be made for community and cultural facilities **that could include health care facilities where appropriate as determined through site allocations** in planning for new development.

Reason for proposed Main/Minor Modification

10.21.11 To provide clarification of requirements.

10.22 Are education facilities the subject of the policy?

Council's response

10.22.1 No, education is considered public service infrastructure. The provision and maintenance of facilities in responding to the changing population and educational requirements is managed through a specific route and would not require inclusion in Policy T29.

Evidence base

a. N/A

Explanation

10.22.2 N/A

Conclusion

10.22.3 The Council considers that Policy T29 is justified by proportionate evidence, effective, positively prepared and consistent with national policy and does not need to include education facilities within the definition of community facilities.

Proposed Main/Minor Modification

10.22.4 N/A

Reason for proposed Main/Minor Modification

10.22.5 N/A

10.23 If open space in any form would be the subject of Policy T29, how would this operate with Policies T28: Existing Open Space, Outdoor Sports and Play Spaces and DM21: New Open Space, Outdoor Sports and Play Spaces, in terms of effectiveness as they would all cover the same matter (open space)?

Council's response

10.23.1 The community value of the space is recognised through this policy and the value it holds in supporting sustainable development. Policies T28 and DM21 cover the provision and loss of open space. The Council would therefore

propose a modification to supporting text at paragraph 10.4.1 to ensure an effective application of policies.

Evidence base

a. N/A

Explanation

10.23.2 Policies T28 and DM21 provide very detailed considerations for the provision and loss of open space. Whilst the social value of open space is recognised within the definition of community facilities, how it is provided or considered through development proposals can be managed more appropriately through policies T28 and DM21.

Conclusion

10.23.3 The Council considers that is Policy T29 is justified by proportionate evidence, positively prepared and consistent with national policy. The clarification of open space being considered through Policies T28 and DM21, whilst recognising its social value through Policy T29 will ensure the effective application of all three policies.

Proposed Main/Minor Modification

10.23.4 Add text to the end of modified paragraph 10.4.1 (ref: A1, page 195):

'The value of open space as a community facility is recognised through Policy 29, however the consideration of provision or loss of open space must be applied through policies T28 and DM21'

Reason for proposed Main/Minor Modification

To ensure the effective application of policies.

10.24 What development would Policy T29 apply to in terms of providing community and cultural facilities, and what types of development would be specifically excluded?

Council's response

10.24.1 Policy T29 would apply when proposals result in more residents. In terms of the loss of community facilities, this could be applicable to any form of development that would result in the loss of a community facility. As such, the Council proposes modifications to provide clarity.

Evidence base

a. N/A

Explanation

10.24.2 N/A

Conclusion

10.24.3 The Council considers that Policy T29 is justified by proportionate evidence, effective, positively prepared and consistent with national policy.

Proposed Main/Minor Modification

10.24.4 Amend text at paragraph 3 of Policy T29 (ref: A1, page 197):

' The Council will require provision to be made for community and cultural facilities in planning for new **residential** development.'

Reason for proposed Main/Minor Modification

10.24.5 To provide clarity of the policy requirements.

10.25 Where the third paragraph of Policy T29 refers to large scale residential development, how is this defined?

Council's response

10.25.1 The intention was not to have a threshold or define this as applicable to just 'large scale' development. Varying contextual circumstances would trigger a different threshold. The Council propose a modification to the policy wording to clarify a case by case review.

Evidence base

a. N/A

Explanation

10.25.2 'Large scale development' is not defined in terms of a threshold because local circumstances will determine an appropriate response. For example, a proposed development in the centre of Chatham may not need community facilities due the existence of adequate provision. Proposed growth in a more rural location, where facilities are limited or reaching maximum capacity, will be classed as large scale.

10.25.3 Additionally, application of a single threshold may not be appropriate in its application across the varied contexts in Medway, i.e. a figure of 200 may be appropriate in High Halstow or Hoo but locations like Stoke, Allhallows and Grain may need a significantly reduced threshold reflecting the smaller scale settlement pattern by comparison. The Council therefore proposes a minor modification to clarify this through the provision of a footnote.

N/A

Conclusion

10.25.4 The Council considers that Policy T29 is justified by proportionate evidence, positively prepared and consistent with national policy. Its effectiveness can be improved by providing clarity on how large scale would be determined.

Proposed Main/Minor Modification

10.25.5 Amend wording at paragraph 3 of Policy T29 (ref: A1, page 197):

'~~Large scale r~~**R**esidential developments will be required **on a case-by-case basis** to provide community facilities.....'

Reason for proposed Main/Minor Modification

10.25.6 To ensure effective application of the policy.

10.26 Why does the last paragraph of Policy T29 (with the bulleted list below) which deals with the loss of a community or cultural facility include a criterion (and sub-criteria) on new community facilities?

Council's response

10.26.1 There has been a formatting error in the way the last paragraph has been presented. This text should a new paragraph. The Council can address this through a minor modification.

10.26.2 Additionally, Regulation 19 comments from the NHS recommend deletion of the last bullet in this policy. The Council accepts this proposal.

Evidence base

a. N/A

Explanation

10.26.3 N/A

Conclusion

10.26.4 The Council considers that Policy T29 is justified by proportionate evidence, effective, positively prepared and consistent with national policy. Modifications to format and deletion of text will improve the effectiveness of the policy.

Proposed Main/Minor Modification

10.26.5 Align text to become new paragraph 8 in Policy T29 (ref: A1, page197):

'8. Proposals for new community facilities should:

- Have safe access....
- Service transformation plan.'

10.26.6 Delete the last bullet beneath the newly defined paragraph 8 (ref: A1, page 198):

'~~Healthcare facilities are formally declared……estates strategy or service transformation plan.~~'

Reason for proposed Minor Modification

10.26.7 Addressing formatting issue and responding to a proposed modification recommendation.

10.27 The Statement of Common Ground with Prescribed Bodies (MLP/ED24A) (section 2.14) refers to modifications that are needed following discussions with NHS Kent and Medway IDB. What are these, are they Main Modifications and do they relate to Policy T29, or any other policy?

Council's response

10.27.1 The NHS comments made at section 2.14 (ref: MLP/ED24A) refers to various other site allocation policies and nothing specifically related to Policy T29 other than the modification accepted at 10.26 (ref: C1.2, File U, page 3).

Evidence base

a. C1.2 Regulation 19 (2025) Representations, File U, page 3

Explanation

10.27.2 N/A

Conclusion

10.27.3 The Council considers that Policy T29 is justified by proportionate evidence, effective, positively prepared and consistent with national policy.

Proposed Main/Minor Modification

10.27.4 N/A

Reason for proposed Main/Minor Modification

10.27.5 N/A

Policy S24: Infrastructure Delivery

Strategic Role

10.28 What role does Policy S24 play in delivering the spatial strategy and strategic objectives of the Plan?

Council's response

10.28.1 Policy S24 provides the overarching framework for ensuring that the scale and distribution of development proposed by the Local Plan is supported by the infrastructure necessary to make that growth sustainable. The policy gives effect to the spatial strategy by requiring development to be accompanied by appropriate infrastructure needed to mitigate its impacts and meet the needs of growing communities. It provides the strategic link between the development proposed by the Plan, the infrastructure requirements identified in the Infrastructure Delivery Plan (IDP), and the more detailed infrastructure requirements contained in thematic policies and site allocation policies. In this way, Policy S24 supports the delivery of the Plan's vision and strategic objectives, particularly the objective of ensuring that housing and economic development needs are met in full and are supported by appropriately phased grey, green and blue infrastructure.

10.29 How does Policy S24 relate to the Infrastructure Delivery Plan (IDP) and what is the status of that document?

Council's response

10.29.1 Policy S24 provides the strategic policy framework for securing and coordinating infrastructure delivery, whilst the Infrastructure Delivery Plan (IDP) identifies the specific infrastructure requirements, delivery agencies, indicative costs, funding sources and phasing assumptions necessary to support the scale and distribution of development proposed by the Plan.

10.29.2 The IDP is a live evidence base document that informed the preparation of the Plan and is intended to be reviewed and updated throughout the plan period as infrastructure requirements, funding arrangements, delivery programmes and development assumptions evolve. The policy and the IDP therefore perform different but complementary functions. Policy S24 establishes the requirement for development to be supported by appropriate infrastructure and mitigation, whilst the IDP provides the detailed evidence regarding what infrastructure is required, who is responsible for delivery and how delivery may be achieved.

10.29.3 The Council considers that Policy S24 and the IDP operate together to support the implementation of the Spatial Development Strategy. The policy provides the overarching planning framework for infrastructure delivery, whilst the IDP remains the primary mechanism for monitoring, coordinating and updating the detailed infrastructure requirements necessary to support growth throughout the Plan period..

10.30 Which infrastructure projects are critical to the successful delivery of the Plan?

Council's response

10.30.1 The Council submitted the IDP (ref: B2), dated December 2025, as an evidence base document to support the Plan. The IDP is a live document; it is subject to review through the Council's internal Strategic Infrastructure Planning Group.

10.30.2 Since submission in December 2025, Council officers have reviewed the Infrastructure Delivery Schedule, which is attached to the IDP (ref: B1, Appendix 1, PDF pages 97-118). As part of this review, infrastructure projects have been reclassified by priority, i.e. 'Critical', 'Essential' or 'Desirable' to the delivery of the plan based on the following definitions:

- Critical: Without it, key allocations or the plan strategy could not proceed, or development would be unacceptable. A prerequisite to development.
- Essential: Needed to support growth and ensure sustainable communities, but development may be able to proceed alongside phased delivery.
- Desirable: Improves outcomes, capacity, resilience or quality of place.

10.30.3 After review, the following infrastructure projects are deemed critical:

Infrastructure Sub-type	**Project Name**
Environment	Hoo Strategic Environmental Management Scheme
Flood Defences	MEASS Benefit Area 1.2 Kingsnorth
Flood Defences	MEASS Benefit Area 2.1 Medway Towns - Lower Upnor to Medway Bridge
Flood Defences	MEASS Benefit Area 2.2 Medway Towns - Medway Bridge to West St Mary's Island
Flood Defences	MEASS Benefit Area 2.3 Medway Towns - St Mary's Island to the Strand
Early Years & Primary	Expansion of New Road by 0.5FE
Early Years & Primary	Expansion of Riverside Primary School by 1FE
Early Years & Primary	New 1FE school at Land South of Rochester Road
Early Years & Primary	New 2FE Primary School (Strood West)
Early Years & Primary	New 2FE School at East Hill
Secondary	New 6-8FE Secondary School
Highways	Bells Lane
Highways	Dock Road, Chatham
Highways	Four Elms Roundabout
Highways	Gillingham Gate Gyratory
Highways	M2 Junction 4 (Alternative)
Highways	Main Road Hoo

Highways	Ropers Lane
Highways	Sans Pareil Roundabout
Highways	Station Road, Strood
Other	Strood to Hoo Bus Rapid Transit

Infrastructure Requirements

10.31 What transport, education, healthcare, utilities, wastewater, flood defence, green infrastructure and community infrastructure requirements have been identified?

Council's response

10.31.1 The Infrastructure Delivery Schedule, which is attached to the IDP (ref: B1, Appendix 1, PDF pages 97-118), identifies transport, education, healthcare, utilities, wastewater, flood defence, green infrastructure and community infrastructure requirements.

10.32 Have all strategic infrastructure requirements arising from the planned growth strategy been adequately identified and assessed, with proportionate evidence?

Council's response

10.32.1 Yes, all strategic infrastructure requirements arising from the planned growth strategy have been adequately identified and assessed, with proportionate evidence.

10.32.2 The Statement of Common Ground with Prescribed Bodies (ref: MLP/ED24A, paragraph 2.13.6, PDF page 31-32) sets out the Environment Agency's position regarding flood defences. During the Phase 1 hearings, the Council submitted the 'Medway Flood Defences High Level Appraisal' (ref: MLP/ED27), which at the time of writing is subject to a consultation.

10.33 Are there any significant infrastructure deficits which already exist and, if so, how have they been addressed in the Plan?

Council's response

10.33.1 The Council acknowledges that parts of Medway already experience infrastructure deficiencies. These include highway capacity constraints (ref: MLP/ED38, 'Impact of Committed Growth', PDF pages 2-3), pressures on health (ref: B2, PDF page 56) and education services (ref: B2, PDF page 33); deficiencies in accessible open space in parts of the urban area (B2, PDF page 84); and limitations in the range of services and facilities available to some rural communities (B2, PDF page 76). These matters have been identified through the Council's consultation activities during the preparation of the Plan and through its evidence base

10.33.2 However, the IDP is concerned with the infrastructure required to support the scale and distribution of development proposed by the Plan and to mitigate the impacts arising from that growth. Existing infrastructure deficits have informed the preparation of the spatial strategy, site allocations and infrastructure planning process, but the principle applied throughout the Plan is that development should make appropriate contributions towards addressing its own impacts rather than resolving historic deficiencies unrelated to the proposed growth.

10.33.3 Nevertheless, opportunities exist whereby strategic growth can help secure wider infrastructure improvements that benefit both existing and future communities such as new schools, community facilities and green infrastructure proposed through strategic allocations. In these cases, infrastructure provision responds both to the needs generated by development and, where appropriate, contributes to improved service provision for existing communities.

Funding and Delivery

10.34 What proportion of identified infrastructure is expected to be funded through developer contributions and what proportion relies upon public funding or third-party investment?

Council's response

10.34.1 It is not currently possible to identify a definitive proportion of infrastructure that will be funded through developer contributions compared with public funding or third-party investment. However, the Council considers that there is a reasonable and proportionate basis for concluding that the infrastructure necessary to support the Plan is capable of being funded and delivered over the Plan period.

Evidence base

- Infrastructure Delivery Schedule (ref: B1, Appendix 1, PDF pages 97-118)
- Alternative highway costs (ref: C1.2 – File K, PDF pages 157-162)

Explanation

10.34.2 The Infrastructure Delivery Schedule, which is attached to the IDP (ref: B1, Appendix 1, PDF pages 97-118), identifies a range of infrastructure projects that are expected to be funded through a combination of developer contributions, public sector funding programmes, statutory infrastructure provider investment and other third-party funding sources. Given that the IDP is a live document and many infrastructure projects remain at an early stage of development, it is not currently possible to provide a definitive percentage split between developer-funded infrastructure and infrastructure funded through public sector investment or third parties.

10.34.3 The Council's approach is that development should mitigate its own impacts through planning obligations and developer contributions where this is necessary to

make development acceptable in planning terms. Policy S24 establishes this principle, whilst the site allocation policies and the IDP identify the infrastructure requirements associated with planned growth.

10.34.4 Some infrastructure requirements are expected to be funded predominantly through developer contributions, including elements of transport mitigation, education provision, community facilities, green infrastructure and site-specific mitigation measures. Other infrastructure, particularly utility infrastructure, healthcare investment, strategic transport improvements and infrastructure provider programmes, will rely upon a combination of developer contributions, provider investment plans, Government funding programmes and other third-party investment mechanisms.

10.34.5 The Council also notes that infrastructure costs and funding assumptions will continue to evolve as projects are refined. For example, some strategic transport interventions within the evidence base are currently expressed as cost ranges and alternative assessments suggest that lower delivery costs may be achievable in some instances.

10.34.6 It is important to note that the Hoo Consortium's alternative highway costs are £65m lower than the Council's; therefore, there could be less reliance on funding in addition to developer contributions and/or highway mitigation schemes could be delivered sooner (ref: C1.2 – File K, PDF pages 157-162).

Conclusion

10.34.7 The Council considers that the absence of a definitive funding split does not undermine the soundness of the Plan.

10.34.8 The Council considers that there is a reasonable and proportionate basis for concluding that the infrastructure necessary to support the proposed development strategy is capable of being funded and delivered over the plan period.

10.34.9 Furthermore, paragraph 28 of the NPPF (2024) recognises that plans come forward at different times and that there may be uncertainty regarding the future direction of infrastructure providers' plans. In that context, national policy does not require all funding mechanisms to be identified with certainty at the point of plan adoption.

10.35 Which infrastructure projects currently have secured funding?

Council's response

10.35.1 The following infrastructure projects currently have secured funding:

Infrastructure Sub-type	Project Name	Notes
Transport: Highways	Four Elms Roundabout – Interim Scheme	MedwayOne Section 106 Agreement

Transport: Highways	M2 Junction 4	To be delivered by Lidsing Garden Community (Maidstone borough)
Transport: Other	Local Cycling and Walking Infrastructure Plan (ATF5 & ATF6)	Under construction
Utilities & Waste: Wastewater	Wastewater Treatment	Under construction / Funded water industry's 5 yearly investment plan
Early Years & Primary	New 2FE School at East Hill	Under construction
Community & Cultural Facilities: Other	Upgrades to Deangate	Football Foundation grant
Utilities & Waste: Digital	CityFibre	Under construction

10.36 Which projects remain unfunded or only partially funded?

Council's response

10.36.1 The following infrastructure projects are currently only partially funded:

Infrastructure Sub-type	**Project Name**	**Notes**
Transport: Highways	Main Road Hoo – Interim Scheme	MedwayOne Section 106 Agreement
Community & Cultural Facilities: Environment	Hoo Strategic Environmental Management Scheme	Section 106 agreements

Evidence base

- Infrastructure Delivery Schedule (ref: B1, Appendix 1, PDF pages 97-118)

Explanation

10.36.2 The Council recognises that the majority of infrastructure projects identified in the Infrastructure Delivery Schedule, which is attached to the IDP (ref: B1, Appendix 1, PDF pages 97-118), are currently unfunded. However, the absence of secured funding at this stage does not mean that these projects are undeliverable within the Plan period. The IDP is a live document and infrastructure funding packages will continue to evolve as development comes forward, infrastructure providers refine their investment programmes and further funding opportunities become available.

10.36.3 The Council has established a Strategic Infrastructure Group to coordinate infrastructure planning and delivery across relevant services and infrastructure providers. As part of this work, planning officers have analysed the potential value and sources of developer contributions associated with planned growth, having regard to

the adopted Developer Contributions and Obligations Guide. This provides an understanding of the likely contribution that development can make towards infrastructure delivery over the Plan period.

10.36.4 In addition, infrastructure projects may be funded through a combination of developer contributions, infrastructure provider investment programmes, Government funding streams and other third-party investment. The Council's experience in preparing bids to funding programmes, including the Housing Infrastructure Fund, has demonstrated that the existence of an up-to-date development plan, supported by a robust IDP, is often an important consideration in securing external funding. Accordingly, the Council considers that the current funding position does not undermine the deliverability of the infrastructure required to support the Plan.

Conclusion

10.36.5 The Council therefore considers that the Plan remains justified and effective, as it identifies the infrastructure required to support growth and provides a reasonable and proportionate basis for concluding that funding and delivery mechanisms can be developed throughout the plan period.

10.36.6 Furthermore, paragraph 28 of the NPPF (2024) recognises that plans come forward at different times and that there may be uncertainty regarding the future direction of infrastructure providers' plans. National policy does not require all infrastructure funding to be secured at the point of Plan adoption.

10.37 Is there sufficient certainty regarding funding of infrastructure to conclude that the Plan is deliverable?

Council's response

10.37.1 Yes. The Council considers that there is sufficient certainty regarding infrastructure funding to conclude that the Plan is deliverable.

10.37.2 The Council acknowledges that a number of infrastructure projects identified within the Infrastructure Delivery Plan (IDP) are currently unfunded or only partially funded. However, the absence of secured funding at this stage does not mean that these projects are undeliverable within the Plan period. The IDP is a live document and infrastructure funding packages will continue to evolve as development comes forward, infrastructure providers refine their investment programmes and further funding opportunities become available. Infrastructure is expected to be delivered through a combination of developer contributions, infrastructure provider investment programmes, Government funding streams and other third-party funding sources.

10.37.3 The Council's Strategic Infrastructure Group continues to review infrastructure requirements, potential developer contributions and funding opportunities across the Plan area.

Critical Dependencies

10.38 Which infrastructure projects are prerequisites for development coming forward?

Council's response

10.38.1 Please see the Council's answer to question 10.30.

10.39 What would be the implications for housing and employment delivery if key infrastructure projects are delayed or do not come forward?

Council's response

10.39.1 The implications of delay or non-delivery would depend on the nature of the infrastructure concerned and whether it is a critical dependency for a particular allocation or wider component of the spatial strategy.

Explanation

10.39.2 The IDP identifies a range of infrastructure interventions that will come forward over different timescales.

10.39.3 The Council will monitor infrastructure delivery through the IDP and engagement with infrastructure providers. If significant delays occur, the Council would review the implications for development delivery and identify appropriate corrective measures, including updates to the IDP, revised phasing arrangements or, where necessary, consideration of a review of relevant aspects of the Plan.

10.39.4 Where infrastructure is required to support a specific allocation, development can be phased to align with infrastructure delivery and, where appropriate, alternative delivery mechanisms, funding sources or mitigation measures may be identified.

Conclusion

10.39.5 The Council considers that potential uncertainty regarding future infrastructure delivery does not undermine the overall soundness of the Plan. Rather, the Plan incorporates a framework for ongoing monitoring and review that enables infrastructure delivery and development phasing to be managed over the plan period

10.40 Does the policy contain appropriate triggers linking development and infrastructure provision?

Council's response

10.40.1 The Council acknowledges that the submitted version of Policy S24 does not set out detailed development triggers linked to the delivery of specific infrastructure projects. Whilst the policy establishes the principle that development should be supported by timely infrastructure provision and appropriate mitigation, the detailed

infrastructure requirements, delivery programmes and dependencies are principally identified through the IDP, supporting evidence and the site allocation policies.

10.41 Is the phasing of infrastructure in place and is it sufficiently clear?

Council's response

10.41.1 The Infrastructure Delivery Schedule, which is attached to the IDP (ref: B1, Appendix 1, PDF pages 97-118), identifies broad timelines relating to the Plan period for each infrastructure project.

10.41.2 Please see the Council's response to question 10.40.

Infrastructure Providers

10.42 Have infrastructure providers confirmed that the assumptions within the Plan and the IDP are reasonable and achievable?

Council's response

10.42.1 The Council's engagement with infrastructure providers and associated Statements of Common Ground indicate that infrastructure providers generally consider the Council's assumptions to be reasonable and achievable, subject to ongoing investment, monitoring and collaboration.

10.43 Have utility providers identified any capacity constraints relating to water supply, wastewater treatment, electricity distribution, telecommunications or gas infrastructure?

Council's response

10.43.1 For water supply and wastewater treatment, Southern Water has not indicated any critical capacity constraints for the Plan, subject to potential Main Modifications following a current consultation.

10.43.2 For electricity distribution, UK Power Networks has not indicated any capacity constraints for the Plan.

10.43.3 For gas infrastructure, Southern Gas Networks has not indicated any capacity constraints for the Plan.

10.43.4 For telecommunications, specific locations will require targeted investment.

Evidence base

- Infrastructure Delivery Plan (ref: B2)
- Viability Assessment (ref: B5)
- Council's response to the Inspectors' Initial Questions (ref: MLP/ED6)
- Council's Letter Regarding Statements of Common Ground (ref: MLP/ED19)
- Statement of Common Ground with Southern Water (ref: MLP/ED21)

Explanation

10.43.5 The Statement of Common Ground with Southern Water (ref: MLP/ED21, PDF page 4) states that "Southern Water's initial checks indicate that multiple site allocations face limited local network capacity. Whilst an existing lack of capacity is not a fundamental constraint to the Local Plan and its site allocation, both parties agree that standard protective policy text will be included for these allocations stating that the occupation of development will be phased to align with the delivery of necessary network reinforcements." Furthermore, at the time of writing, the Council's submitted Technical Note (ref: MLP/ED39) concerning water efficiency is subject to a consultation.
10.43.6 This is consistent with the IDP (ref: B2, PDF pages 46-47). Southern Water's site-specific considerations are reflected in the Council's response to the Inspectors' Initial Questions (ref: MLP/ED6, Appendix F, PDF pages 80-99).

10.43.7 With regard to wastewater treatment, the IDP sets out Southern Water's 5-year cycle Water Resource and Management Plans, which typically look ahead to a 50-year horizon (ref B2, PDF pages 48-49). The IDP notes recently completed and planning investment in the two wastewater treatment works at Motney Hill and Whitewall Creek. The Council has shared its housing trajectory and employment phasing for the Plan with Southern Water, as per the Statement of Common Ground with Southern Water (ref: MLP/ED21, PDF page 3).

10.43.8 In the Council's Letter Regarding Statements of Common Ground (ref: MLP/ED19), the Council noted two meetings with UK Power Networks to inform the IDP (ref: B2, PDF pages 41-43), which states "Although no new specific infrastructure has been identified UK Power Networks has estimated that there will be a cost of the £15-20m to cover reinforcement to the network. Reinforcement may include connections and some upgrades to the existing network." It is important to note that the Viability Assessment assumed 15% for 'other normal costs' and services (ref: B5, paragraph 7.11, PDF page 104). Subsequently, in July 2025, the Council shared its housing trajectory and employment phasing for the Plan with UK Power Networks as inputs to the 'Regional Planning Dashboard' and 'LAEP+ Planning Tool', which will facilitate ongoing collaboration on network capacity and investment.

10.43.9 In Summer 2025, the Council shared its housing trajectory and employment phasing for the Plan with Southern Gas Networks. The IDP states: "Currently, capacity is available in the areas to be allocated for development. However, due the large level of development planned, it is possible that network reinforcement would be required to fully support this. Whether and where any deficits may occur would be determined by the actual level of development at each of these sites. Medway Council has shared spatial data and a housing trajectory with SGN in Summer 2025 to inform SGN's emerging forecasts."

10.43.10 The IDP (ref B2, PDF page 52) states: "While most growth areas in Medway benefit from strong coverage, specific locations such as the Hoo Peninsula remain underserved and will require targeted investment." It is important to note that the Viability Assessment assumed 15% for 'other normal costs' and services (ref: B5, paragraph 7.11, PDF page 104).

Conclusion

10.43.11 The evidence before the Examination does not indicate that utility providers have identified any critical capacity constraints that would prevent delivery of the scale and distribution of development proposed by the Plan. Instead, the position of the utility providers is that network reinforcement, upgrades and targeted investment will be required in some locations as growth comes forward.

10.43.12 The Council has engaged proactively with utility providers and continues to share housing trajectories, employment forecasts and spatial data to support infrastructure planning and investment programmes.

10.43.13 The Council therefore considers that the Plan is justified and effective, being supported by proportionate evidence and ongoing collaboration with utility providers. Furthermore, paragraph 28 of the NPPF recognises that plans come forward at different times and that there may be a degree of uncertainty regarding the future direction of infrastructure providers' plans. In this context, national policy does not require all infrastructure investment programmes to be fully designed, funded or implemented at the point of Plan adoption. The Council considers that there is a reasonable and proportionate basis to conclude that the necessary infrastructure can be planned and delivered alongside growth over the Plan period.

10.44 Have healthcare and education providers confirmed that planned growth can be accommodated?

Council's response

10.44.1 The Council considers that there is a reasonable and proportionate basis for concluding that the healthcare and education needs arising from planned growth can be planned for and accommodated over the plan period through the IDP, developer contributions and ongoing engagement with infrastructure providers.

Evidence base

- For healthcare:
    - Infrastructure Delivery Plan (ref: B2, chapter 3.3, PDF pages 30-39)
    - Infrastructure Delivery Schedule (ref: B2, Appendix 1, PDF pages 100-101)
    - Developer Contributions and Obligations Guide (December 2025) (ref: B4, chapter 13, PDF pages 45-46)
- For education:

- Infrastructure Delivery Plan (ref: B2, chapter 3.5, PDF pages 53-61)
- Infrastructure Delivery Schedule (ref: B2, Appendix 1, PDF page 102)

Explanation

10.44.2 The Council has engaged extensively with healthcare and education providers throughout the preparation of the Plan. In relation to healthcare, the Council has worked with NHS Kent and Medway and incorporated the NHS Kent and Medway Developer Contribution Guide into its own approach to developer contributions (ref: B4, chapter 13, PDF pages 45-46). The Council acknowledges that the precise nature, scale, timing and location of all additional healthcare infrastructure required to support growth will continue to evolve throughout the plan period and will be influenced by NHS service planning, funding programmes and estate strategies. However, the Council does not consider that this level of detail is required at the plan-making stage.

10.44.3 The Council recognises that healthcare infrastructure planning will require ongoing engagement throughout the Plan period. In this regard, the Council's Strategic Infrastructure Group will play an important coordinating role in continuing discussions with NHS Kent and Medway and other healthcare providers to refine infrastructure requirements, monitor emerging capacity issues, review delivery programmes and help ensure that healthcare provision keeps pace with development. This reflects the dynamic nature of healthcare planning, where estate strategies, service models, funding programmes and provider priorities are often reviewed and updated over time. The Council therefore considers that the strategic approach established through the IDP, supported by the Strategic Infrastructure Group and ongoing engagement with healthcare providers, provides an appropriate framework for identifying and delivering healthcare infrastructure alongside growth.

10.44.4 In relation to education, the Council has worked closely with its Education Planning Team in preparing the Plan and the IDP. The education requirements arising from planned growth have been assessed and reflected in both the IDP (ref: B2, chapter 3.5, PDF pages 53-61 and Appendix 1, PDF page 102) and the site allocation policies including provision for new primary and secondary schools and school expansions where required (e.g. ref: A1, Policy SA7 criteria 2a and 3, PDF page 275). The Council therefore has a greater degree of certainty regarding the scale, location and phasing of education infrastructure required to support the development strategy.

Conclusion

10.44.5 The Council therefore considers that the Plan is justified, being supported by proportionate evidence regarding the likely healthcare and education infrastructure requirements arising from planned growth and the mechanisms available to plan for and secure their delivery.

10.44.6 The Plan is also effective, as it has been prepared through ongoing engagement with NHS Kent and Medway, the Council's Education Planning Team and other infrastructure providers, and is supported by the Infrastructure Delivery Plan, developer contribution mechanisms and ongoing infrastructure planning arrangements.

10.44.7 Whilst some elements of healthcare and education provision will be dependent upon future funding programmes, service strategies and investment decisions of individual providers, this is consistent with paragraph 28 of the NPPF (2024), which recognises that plans come forward at different times and that there may be a degree of uncertainty regarding the future direction of infrastructure providers' plans.

10.44.8 The Council therefore considers that there is a reasonable and proportionate basis for concluding that the healthcare and education infrastructure necessary to support the scale and distribution of development proposed by the Plan can be planned and delivered over the plan period, such that the Plan is consistent with national policy and meets the tests of soundness.

Monitoring and Review

10.45 How will delivery of infrastructure be monitored throughout the Plan period?

Council's response

10.45.1 The Council will monitor infrastructure delivery through a number of complementary mechanisms. Firstly, the Infrastructure Delivery Plan (IDP) is a live document that will be reviewed and updated throughout the plan period to reflect changes in development phasing, infrastructure requirements, funding arrangements and delivery programmes. The IDP therefore provides the primary mechanism for tracking the delivery of infrastructure required to support the planned growth strategy.

10.45.2 Secondly, the Council has established internal governance arrangements, including a Strategic Infrastructure Group, which brings together relevant services and enables ongoing engagement with infrastructure providers, delivery partners and other stakeholders. This provides an opportunity to review delivery programmes, identify risks and dependencies, and coordinate responses to emerging infrastructure issues.

10.45.3 Thirdly, the Council has submitted a Monitoring Framework as part of the examination evidence base. This includes a specific indicator for Policy S24 and identifies the information sources that will be used to monitor infrastructure delivery. Whilst the Council has proposed modifications to Policy S24, the Monitoring Framework remains a useful mechanism for identifying data sources and relevant monitoring information.

10.45.4 Finally, the Council will continue to publish an annual Authority Monitoring Report (AMR). This provides a formal mechanism for reporting on the implementation of

Local Plan policies, development delivery and infrastructure provision, and for identifying circumstances where corrective action, updates to the Infrastructure Delivery Plan or a review of elements of the Local Plan may be required.

10.45.5 The Council considers that these measures provide an appropriate framework for monitoring infrastructure delivery throughout the plan period. Nevertheless, as set out elsewhere in this Hearing Statement, the Council would support modifications to Policy S24 to provide a clearer link to the IDP, monitoring arrangements and periodic review mechanisms, thereby improving the effectiveness of the policy.

10.46 What indicators will be used to identify infrastructure delivery problems?

Council's response

10.46.1 Please see the Council's responses to questions 10.39 and 10.45.

10.47 What contingency measures exist if critical infrastructure is delayed or fails to come forward?

Council's response

10.47.1 Please see the Council's response to question 10.39.

10.48 Should the policy contain clearer monitoring or review mechanisms?

Council's response

10.48.1 The Council considers that Policy S24 could benefit from clearer references to the Infrastructure Delivery Plan and its role in monitoring and reviewing infrastructure delivery throughout the Plan period. However, the Council does not consider that the absence of such references undermines the overall effectiveness of the policy.

Consistency with Other Policies and Allocations

10.49 How does Policy S24 interact with site allocation policies and infrastructure-specific policies elsewhere in the Plan?

Council's response

10.49.1 Please see the Council's response to question 10.40.

10.50 Is there any inconsistency between the Infrastructure Delivery Plan and infrastructure requirements identified within allocation policies?

Council's response

10.50.1 The Plan was finalised in June 2025, whereas the IDP was subsequently updated and published in December 2025. As a consequence, there are instances where infrastructure requirements, project descriptions, costs, delivery assumptions and phasing information have evolved following further engagement with infrastructure

providers, statutory bodies and other stakeholders. This reflects the iterative nature of infrastructure planning and is consistent with the Council's position that the IDP is a live document that will continue to be reviewed and updated throughout the Plan period.

10.50.2 The Council has not identified any inconsistencies that fundamentally alter the scale or distribution of development proposed by the spatial strategy, nor any inconsistency that would prevent implementation of the Plan. Rather, the differences relate to matters of timing, delivery assumptions, infrastructure specification and the continuing refinement of infrastructure requirements.

10.50.3 Nevertheless, the Council recognises that there is scope to improve consistency between the latest IDP and certain site allocation policies. The Council proposes modifications to strengthen the relationship between the Local Plan and the IDP and to ensure that infrastructure delivery, phasing and monitoring arrangements are clearly linked. The Council is also open to targeted modifications to site allocation policies where these would improve consistency with the latest infrastructure evidence and clarify infrastructure triggers, phasing requirements or delivery mechanisms.

10.50.4 The Council considers that the Plan remains justified and effective, as infrastructure requirements have been identified on a proportionate evidence base and are supported by a process of ongoing monitoring, review and refinement through the IDP. Modifications would further improve clarity and consistency without altering the overall development strategy.

10.51 Are any main modifications required to ensure consistency between Policy S24 and other policies and site allocations?

Council's response

10.51.1 Policy S24 establishes the principle that development should be supported by timely infrastructure provision and appropriate mitigation. The detailed infrastructure requirements, delivery programmes and dependencies are principally identified through the IDP, supporting evidence and the site allocation policies. However, Policy S24 may benefit from clearer links to the IDP.

Soundness

10.52 Is Policy S24 positively prepared, justified, effective and consistent with national policy?

Council's response

10.52.1 Yes. The Council considers that Policy S24 is positively prepared, justified, effective and consistent with national policy.

10.52.2 Policy S24 provides the overarching policy framework for ensuring that the infrastructure necessary to support the scale and distribution of development proposed

by the Plan is planned, coordinated and delivered alongside growth. The policy is supported by the Infrastructure Delivery Plan (IDP), which identifies the infrastructure requirements arising from the development strategy, delivery agencies, potential funding sources and phasing assumptions. The policy has been informed by engagement with infrastructure providers, statutory consultees and internal Council services throughout the preparation of the Plan.

10.52.3 The Council considers that Policy S24 is positively prepared because it seeks to ensure that infrastructure is delivered alongside the housing, employment and community development needs identified by the Plan. It is justified because it is supported by a proportionate evidence base, including the IDP and supporting infrastructure studies. It is effective because it establishes a framework for securing infrastructure through planning obligations, developer contributions and ongoing engagement with infrastructure providers, whilst being supported by the IDP as a live document that will be monitored and updated throughout the plan period. The policy is also consistent with national policy because it promotes sustainable development, infrastructure planning and collaborative working with infrastructure providers in accordance with the NPPF (2024).

10.52.4 The Council acknowledges that the effectiveness of Policy S24 could be enhanced through clearer references to the IDP and its role in identifying, coordinating, monitoring and updating infrastructure requirements throughout the Plan period. However, the Council considers that this is a matter of clarification rather than a fundamental soundness issue. Accordingly, the Council considers that Policy S24 provides an appropriate and deliverable framework for supporting the implementation of the Spatial Development Strategy and that the policy is sound.

10.53 Does the evidence demonstrate that the infrastructure necessary to support the scale and distribution of development proposed by the Plan can be delivered within the Plan period?

Council's response

10.53.1 The Council considers that the evidence demonstrates that the infrastructure necessary to support the scale and distribution of development proposed by the Plan can be delivered within the Plan period.

10.53.2 Please see the Council's responses to questions 10.28, 10.32, 10.36, 10.39, 10.43, 10.44 and 10.45.

Policy DM22: Digital Communications

Principle and Justification

10.54 What evidence demonstrates that additional local planning policy intervention is required to support digital communications infrastructure in Medway?

Council's response

10.54.1 Local policy intervention is required because A1, Medway Local Plan 2041 (Regulation 22, December 2025), paragraphs 10.6.4–10.6.7 (PDF pages 203–204; document pages 202–203), identifies uneven gigabit coverage, an urban–rural disparity and localised mobile weak spots, while B2, Infrastructure Delivery Plan (December 2025), Digital Infrastructure: Quality and Capacity Review (PDF pages 50–52; document pages 49–51), quantifies the fixed and mobile coverage position. Major development provides a practical opportunity to secure connection-ready infrastructure at the outset through Policy DM22 of A1, Medway Local Plan 2041 (Regulation 22, December 2025) (PDF page 204; document page 203). The policy's sustainability effects are assessed in A3.3, Sustainability Appraisal of the Medway Local Plan 2025–2041 – Volume 3 of 3: Appendices of the Regulation 19 Sustainability Appraisal (June 2025), Appendix H, section H.9.6 (PDF pages 410–411; Appendix pages H120–H121).

Evidence base

- A1, Medway Local Plan 2041 (Regulation 22, December 2025), paragraphs 10.6.1–10.6.10 and Policy DM22 (PDF pages 202–204; document pages 201–203).
- B2, Infrastructure Delivery Plan (December 2025), Digital Infrastructure: Quality and Capacity Review and Proposed Infrastructure (PDF pages 50–52; document pages 49–51).
- A3.3, Sustainability Appraisal of the Medway Local Plan 2025–2041 – Volume 3 of 3: Appendices of the Regulation 19 Sustainability Appraisal (June 2025), Appendix H, section H.9.6, Policy DM22: Digital Communications (PDF pages 410–411; Appendix pages H120–H121).
- National Planning Policy Framework (December 2024), paragraph 36 and Chapter 10, paragraphs 119–123.

Explanation

10.54.2 A1, Medway Local Plan 2041 (Regulation 22, December 2025), paragraphs 10.6.4–10.6.7 (PDF pages 203–204; document pages 202–203), identifies limited gigabit coverage at the evidence-base date, an urban–rural disparity and weak voice and 4G/5G coverage on parts of the Hoo Peninsula. Policy DM22 in the same document (PDF page 204; document page 203) responds through requirements for major development to provide FTTP, confirm provider availability, install infrastructure ready for 5G and gigabit-capable broadband, submit evidence with the application and justify an alternative where the preferred solution is not possible. A3.3, Sustainability Appraisal of the

Medway Local Plan 2025–2041 – Volume 3 of 3: Appendices of the Regulation 19 Sustainability Appraisal (June 2025), Appendix H, section H.9.6 (PDF pages 410–411; Appendix pages H120–H121), records a significant positive effect for the economy and positive effects for climate mitigation, pollution and waste, transport and accessibility, and education. These locally evidenced matters explain why the policy adds development-management detail to the objectives in National Planning Policy Framework (December 2024), paragraphs 119–123.

Conclusion

10.54.3 The local requirement is justified by identified Medway circumstances and is complementary to national policy. Subject to the clarification proposed under question 10.68, the policy is justified, effective and consistent with national policy.

Proposed Main/Minor Modification

N/A

Reason for proposed Main/Minor Modification

N/A

10.55 What deficiencies or constraints in digital connectivity, broadband provision or mobile coverage have been identified and how have they informed the preparation of Policy DM22?

Council's response

10.55.1 The identified deficiencies are low gigabit coverage at the evidence-base date, an urban–rural disparity in broadband provision and weak mobile voice and 4G/5G coverage in parts of the Hoo Peninsula. These matters are identified in A1, Medway Local Plan 2041 (Regulation 22, December 2025), paragraphs 10.6.4–10.6.7 (PDF pages 203–204; document pages 202–203), and quantified in B2, Infrastructure Delivery Plan (December 2025), Digital Infrastructure: Quality and Capacity Review (PDF pages 50–52; document pages 49–51).

Evidence base

- A1, Medway Local Plan 2041 (Regulation 22, December 2025), paragraphs 10.6.1–10.6.10 and Policy DM22 (PDF pages 202–204; document pages 201–203).
- B2, Infrastructure Delivery Plan (December 2025), Digital Infrastructure: Quality and Capacity Review and Proposed Infrastructure (PDF pages 50–52; document pages 49–51).

Explanation

10.55.2 B2, Infrastructure Delivery Plan (December 2025), Digital Infrastructure: Quality and Capacity Review (PDF pages 50–52; document pages 49–51), records superfast broadband availability to 98.95% of premises, FTTP/FTTH coverage of 82.37%, gigabit-

capable coverage of 92.3% and 5G coverage across approximately 38.7% of Medway's land area, while identifying less consistent rural coverage and targeted investment needs, including on the Hoo Peninsula. Those findings informed Policy DM22 in A1, Medway Local Plan 2041 (Regulation 22, December 2025) (PDF page 204; document page 203), which requires FTTP, confirmation that a connection can be made, readiness for 5G and gigabit-capable broadband, and justified alternative provision where the preferred solution is unavailable. The policy is therefore directed to the specific weaknesses identified in the Medway evidence rather than imposing an unsupported general telecommunications obligation.

Conclusion

10.55.3 The deficiencies and the policy response are clearly linked in the submitted Plan and provide proportionate local justification.

Proposed Main/Minor Modification

N/A

Reason for proposed Main/Minor Modification

N/A

10.56 How does Policy DM22 support the wider spatial strategy and economic development objectives of the Plan?

Council's response

10.56.1 Policy DM22 supports the spatial strategy by embedding high-quality digital connectivity in major residential and commercial development and supports economic development by improving access to gigabit-capable and mobile networks. A1, Medway Local Plan 2041 (Regulation 22, December 2025), paragraphs 10.6.1 and 10.6.6–10.6.7 (PDF pages 202–204; document pages 201–203), links connectivity to business, learning, investment, quality jobs and a growing economy. A3.3, Sustainability Appraisal of the Medway Local Plan 2025–2041 – Volume 3 of 3: Appendices of the Regulation 19 Sustainability Appraisal (June 2025), Appendix H, section H.9.6 (PDF pages 410–411; Appendix pages H120–H121), assesses a significant positive effect on the economy.

Evidence base

- A1, Medway Local Plan 2041 (Regulation 22, December 2025), paragraphs 10.6.1–10.6.10 and Policy DM22 (PDF pages 202–204; document pages 201–203).
- B2, Infrastructure Delivery Plan (December 2025), Digital Infrastructure: Quality and Capacity Review and Proposed Infrastructure (PDF pages 50–52; document pages 49–51).
- A3.3, Sustainability Appraisal of the Medway Local Plan 2025–2041 – Volume 3 of 3: Appendices of the Regulation 19 Sustainability Appraisal (June 2025), Appendix H,

section H.9.6, Policy DM22: Digital Communications (PDF pages 410–411; Appendix pages H120–H121).

Explanation

10.56.2 A1, Medway Local Plan 2041 (Regulation 22, December 2025), paragraph 10.6.1 (PDF page 202; document page 201), explains that access to good broadband and telephone services is essential for business, learning and communities and that high-speed broadband is a key component of a successful economy. Paragraphs 10.6.6–10.6.7 (PDF pages 203–204; document pages 202–203) link improved coverage to quality jobs, investment and economic growth. Policy DM22 (PDF page 204; document page 203) applies those objectives to major development across Medway by requiring connectivity infrastructure to be considered when schemes are designed and serviced rather than after occupation. The significant positive economic effect recorded in A3.3, Sustainability Appraisal of the Medway Local Plan 2025–2041 – Volume 3 of 3: Appendices of the Regulation 19 Sustainability Appraisal (June 2025), Appendix H, section H.9.6 (PDF pages 410–411; Appendix pages H120–H121), corroborates that contribution.

Conclusion

10.56.3 Policy DM22 makes a direct and positive contribution to the Plan's economic and spatial objectives.

Proposed Main/Minor Modification

N/A

Reason for proposed Main/Minor Modification

N/A

10.57 What evidence demonstrates that the policy is justified by local circumstances rather than relying upon matters already addressed through national policy and guidance?

Council's response

10.57.1 The policy is justified by Medway-specific evidence rather than by national policy alone. A1, Medway Local Plan 2041 (Regulation 22, December 2025), paragraphs 10.6.4–10.6.7 (PDF pages 203–204; document pages 202–203), and B2, Infrastructure Delivery Plan (December 2025), Digital Infrastructure: Quality and Capacity Review (PDF pages 50–52; document pages 49–51), identify uneven broadband provision and local mobile weak spots. Policy DM22 of A1, Medway Local Plan 2041 (Regulation 22, December 2025) (PDF page 204; document page 203) translates the objectives in National Planning Policy Framework (December 2024), paragraphs 119–123, into clear application requirements for major development in Medway.

Evidence base

- A1, Medway Local Plan 2041 (Regulation 22, December 2025), paragraphs 10.6.1–10.6.10 and Policy DM22 (PDF pages 202–204; document pages 201–203).
- B2, Infrastructure Delivery Plan (December 2025), Digital Infrastructure: Quality and Capacity Review and Proposed Infrastructure (PDF pages 50–52; document pages 49–51).
- National Planning Policy Framework (December 2024), paragraph 36 and Chapter 10, paragraphs 119–123.

Explanation

10.57.2 National Planning Policy Framework (December 2024), paragraphs 119–123, provides strategic support for advanced communications. Policy DM22 does not simply repeat that support. Drawing on the local coverage position in A1, Medway Local Plan 2041 (Regulation 22, December 2025), paragraphs 10.6.4–10.6.7 (PDF pages 203–204; document pages 202–203), and B2, Infrastructure Delivery Plan (December 2025), Digital Infrastructure: Quality and Capacity Review (PDF pages 50–52; document pages 49–51), the policy specifies what major proposals must demonstrate: FTTP, provider engagement, readiness for 5G and gigabit-capable broadband, evidence with the application and a justified alternative where the preferred provision is not possible. Those are locally directed development-management requirements.

Conclusion

10.57.3 The policy adds locally justified development-management detail without displacing national telecommunications policy.

Proposed Main/Minor Modification

N/A

Reason for proposed Main/Minor Modification

N/A

Future Technology and Network Capacity

10.58 How does Policy DM22 support future telecommunications technologies, including gigabit-capable broadband, 5G and successor technologies?

Council's response

10.58.1 Policy DM22 in A1, Medway Local Plan 2041 (Regulation 22, December 2025) (PDF page 204; document page 203) requires major development to be ready for 5G, gigabit-capable broadband and future technological advancements, with appropriate infrastructure installed where relevant. A1, Medway Local Plan 2041 (Regulation 22, December 2025), paragraphs 10.6.8–10.6.10 (PDF page 204; document page 203), also

supports continuing provider engagement and coordinated ducting. A14, Medway Local Plan Monitoring Framework (Regulation 22 Submission, December 2025), Policy DM22 indicator (PDF page 17), provides for monitoring of 5G signal and FTTP coverage.

Evidence base

- A1, Medway Local Plan 2041 (Regulation 22, December 2025), paragraphs 10.6.1–10.6.10 and Policy DM22 (PDF pages 202–204; document pages 201–203).
- B2, Infrastructure Delivery Plan (December 2025), Digital Infrastructure: Quality and Capacity Review and Proposed Infrastructure (PDF pages 50–52; document pages 49–51).
- A3.3, Sustainability Appraisal of the Medway Local Plan 2025–2041 – Volume 3 of 3: Appendices of the Regulation 19 Sustainability Appraisal (June 2025), Appendix H, section H.9.6, Policy DM22: Digital Communications (PDF pages 410–411; Appendix pages H120–H121).
- A14, Medway Local Plan Monitoring Framework (Regulation 22 Submission, December 2025), introductory monitoring provisions (PDF page 2) and Policy DM22 indicator, target and data sources (PDF page 17).

Explanation

10.58.2 Policy DM22 in A1, Medway Local Plan 2041 (Regulation 22, December 2025) (PDF page 204; document page 203) expressly addresses FTTP, 5G, gigabit-capable broadband and future technological advancement. Paragraphs 10.6.8–10.6.10 of the same document (PDF page 204; document page 203) explain the role of industry engagement and early coordination with network providers, including introducing new ducting alongside other on-site infrastructure works. This allows passive infrastructure to be installed efficiently and reduces the need for later works. A14, Medway Local Plan Monitoring Framework (Regulation 22 Submission, December 2025), Policy DM22 indicator (PDF page 17), then tracks change in 5G signal and FTTP coverage across Medway.

Conclusion

10.58.3 The policy provides an effective framework for current and successor digital technologies.

Proposed Main/Minor Modification

N/A

Reason for proposed Main/Minor Modification

N/A

10.59 Is the policy sufficiently flexible to accommodate technological change throughout the Plan period?

Council's response

10.59.1 Yes. Policy DM22 is technology-aware but not limited to a particular equipment generation or provider. It refers expressly to future technological advancements, uses "where relevant", and permits alternative methods and evidence-based exceptions. A14, Medway Local Plan Monitoring Framework (Regulation 22 Submission, December 2025), introductory monitoring provisions (PDF page 2), allows new data sources to be used and indicators and targets to be updated during the Plan period.

Evidence base

- A1, Medway Local Plan 2041 (Regulation 22, December 2025), paragraphs 10.6.1–10.6.10 and Policy DM22 (PDF pages 202–204; document pages 201–203).
- B2, Infrastructure Delivery Plan (December 2025), Digital Infrastructure: Quality and Capacity Review and Proposed Infrastructure (PDF pages 50–52; document pages 49–51).
- A14, Medway Local Plan Monitoring Framework (Regulation 22 Submission, December 2025), introductory monitoring provisions (PDF page 2) and Policy DM22 indicator, target and data sources (PDF page 17).

Explanation

10.59.2 Flexibility is provided directly by the wording of Policy DM22, particularly "where relevant", "future technological advancements", "alternative methods" and the evidence-based exception. The policy therefore establishes outcomes without fixing a technical specification that could become obsolete. In parallel, A14, Medway Local Plan Monitoring Framework (Regulation 22 Submission, December 2025), introductory monitoring provisions (PDF page 2), confirms that new data sources may be used and indicators and targets updated over the Plan period.

Conclusion

10.59.3 The policy is sufficiently flexible for the Plan period.

Proposed Main/Minor Modification

N/A

Reason for proposed Main/Minor Modification

N/A

10.60 What evidence demonstrates that existing telecommunications infrastructure has sufficient capacity to support the scale of growth proposed by the Plan?

Council's response

10.60.1 B2, Infrastructure Delivery Plan (December 2025), Digital Infrastructure: Quality and Capacity Review (PDF pages 50–52; document pages 49–51), provides high-level evidence of strong existing fixed-broadband coverage and identifies no general network-capacity constraint. It is not, however, a network-wide capacity assessment of the full scale and distribution of planned growth. Policy DM22 in A1, Medway Local Plan 2041 (Regulation 22, December 2025) (PDF page 204; document page 203) therefore requires connection availability and appropriate infrastructure to be demonstrated for each major development.

Evidence base

- A1, Medway Local Plan 2041 (Regulation 22, December 2025), paragraphs 10.6.1–10.6.10 and Policy DM22 (PDF pages 202–204; document pages 201–203).
- B2, Infrastructure Delivery Plan (December 2025), Digital Infrastructure: Quality and Capacity Review and Proposed Infrastructure (PDF pages 50–52; document pages 49–51).
- A14, Medway Local Plan Monitoring Framework (Regulation 22 Submission, December 2025), introductory monitoring provisions (PDF page 2) and Policy DM22 indicator, target and data sources (PDF page 17).

Explanation

10.60.2 B2, Infrastructure Delivery Plan (December 2025), Digital Infrastructure: Quality and Capacity Review (PDF pages 50–51; document pages 49–50), records superfast broadband availability to 98.95% of premises, FTTP/FTTH coverage of 82.37% and gigabit-capable coverage of 92.3% by late 2025. It also identifies less consistent indoor rural coverage, 5G coverage across approximately 38.7% of Medway's land area and targeted investment needs in underserved locations, including the Hoo Peninsula (PDF pages 51–52; document pages 50–51). The evidence therefore supports a conclusion that no strategic, network-wide barrier has been identified, but it does not demonstrate unrestricted capacity at every location. Policy DM22 in A1, Medway Local Plan 2041 (Regulation 22, December 2025) (PDF page 204; document page 203) appropriately addresses that limitation through provider confirmation and connection-ready infrastructure at application stage.

Conclusion

10.60.3 B2, Infrastructure Delivery Plan (December 2025), Digital Infrastructure: Quality and Capacity Review (PDF pages 50–52; document pages 49–51), demonstrates strong overall coverage and identifies localised limitations, but does not demonstrate unrestricted capacity in every location. Policy DM22 in A1, Medway Local Plan 2041 (Regulation 22, December 2025) (PDF page 204; document page 203), provides a proportionate mechanism for site-specific capacity and connection to be addressed.

Proposed Main/Minor Modification

N/A

Reason for proposed Main/Minor Modification

N/A

10.61 Have infrastructure providers identified any constraints or investment requirements that are necessary to support planned development?

Council's response

10.61.1 B2, Infrastructure Delivery Plan (December 2025), Digital Infrastructure section (PDF pages 50–52; document pages 49–51), identifies localised coverage constraints and associated investment and delivery measures. It identifies planned additional rural coverage, targeted investment in underserved areas and funding involving developers, providers and BDUK, but does not identify an overriding strategic telecommunications constraint that would prevent the Plan's growth from being delivered.

Evidence base

- A1, Medway Local Plan 2041 (Regulation 22, December 2025), paragraphs 10.6.1–10.6.10 and Policy DM22 (PDF pages 202–204; document pages 201–203).
- B2, Infrastructure Delivery Plan (December 2025), Digital Infrastructure: Quality and Capacity Review and Proposed Infrastructure (PDF pages 50–52; document pages 49–51).

Explanation

10.61.2 B2, Infrastructure Delivery Plan (December 2025), Digital Infrastructure section (PDF page 50; document page 49), identifies O2, EE, Vodafone and Three as mobile lead agencies and BT Openreach, CityFibre and Virgin Media for broadband. It records planned additional rural coverage for Strood, the Hoo Peninsula, Cuxton and Halling, continued work with BDUK and mobile operators, targeted investment for underserved areas including the Hoo Peninsula, and funding from developers, providers and BDUK (PDF pages 51–52; document pages 50–51). These are identified delivery and investment requirements, not evidence of an overriding capacity barrier. Policy DM22 in A1, Medway Local Plan 2041 (Regulation 22, December 2025) (PDF page 204; document page 203) requires provider confirmation at application stage so that site-specific requirements are addressed when development comes forward.

Conclusion

10.61.3 B2, Infrastructure Delivery Plan (December 2025), Digital Infrastructure section (PDF pages 50–52; document pages 49–51), identifies targeted investment requirements, particularly for rural and underserved areas, but no strategic provider

constraint that would prevent planned development. Policy DM22 in A1, Medway Local Plan 2041 (Regulation 22, December 2025) (PDF page 204; document page 203), requires provider-specific matters to be confirmed at application stage.

Proposed Main/Minor Modification

N/A

Reason for proposed Main/Minor Modification

N/A

10.62 How will new development contribute to improved digital connectivity?

Council's response

10.62.1 Major development will contribute through the requirements in Policy DM22 of A1, Medway Local Plan 2041 (Regulation 22, December 2025) (PDF page 204; document page 203) to provide FTTP, confirm provider availability, and install infrastructure ready for 5G, gigabit-capable broadband and future technologies. Where the preferred solution is unavailable, the policy requires reasoned justification and alternative provision. A14, Medway Local Plan Monitoring Framework (Regulation 22 Submission, December 2025), Policy DM22 indicator (PDF page 17), monitors the resulting direction of change in 5G signal and FTTP coverage.

Evidence base

- A1, Medway Local Plan 2041 (Regulation 22, December 2025), paragraphs 10.6.1–10.6.10 and Policy DM22 (PDF pages 202–204; document pages 201–203).
- B2, Infrastructure Delivery Plan (December 2025), Digital Infrastructure: Quality and Capacity Review and Proposed Infrastructure (PDF pages 50–52; document pages 49–51).
- A14, Medway Local Plan Monitoring Framework (Regulation 22 Submission, December 2025), introductory monitoring provisions (PDF page 2) and Policy DM22 indicator, target and data sources (PDF page 17).

Explanation

10.62.2 Policy DM22 secures connection-ready infrastructure when major development is designed and serviced. Where the preferred solution is not feasible, the applicant must justify that position and use alternative methods, including infrastructure supporting mobile broadband or wi-fi, to provide gigabit-capable connectivity. A14, Medway Local Plan Monitoring Framework (Regulation 22 Submission, December 2025), Policy DM22 indicator (PDF page 17), measures change in 5G signal and FTTP coverage across Medway, providing a plan-level measure of whether connectivity is improving.

Conclusion

10.62.3 New major development will support incremental improvement in Medway's digital connectivity in a proportionate and measurable way.

Proposed Main/Minor Modification

N/A

Reason for proposed Main/Minor Modification

N/A

Deliverability and Effectiveness

10.63 What consultation has taken place with telecommunications providers and how has that informed the policy?

Council's response

10.63.1 B2, Infrastructure Delivery Plan (December 2025), section 1.3, paragraphs 1.3.1–1.3.7 (PDF pages 12–14; document pages 11–13), records engagement with statutory and non-statutory consultees and internal and external service providers in preparing the Infrastructure Delivery Plan. Its Digital Infrastructure section (PDF pages 50–52; document pages 49–51) identifies the relevant mobile and broadband operators and continuing partnership work. The submitted documents demonstrate programme-level engagement, but do not provide a provider-by-provider schedule of representations on the wording of Policy DM22.

Evidence base

- A1, Medway Local Plan 2041 (Regulation 22, December 2025), paragraphs 10.6.1–10.6.10 and Policy DM22 (PDF pages 202–204; document pages 201–203).
- B2, Infrastructure Delivery Plan (December 2025), section 1.3, Engagement with Infrastructure and Service Providers (PDF pages 12–14; document pages 11–13), and Digital Infrastructure section (PDF pages 50–52; document pages 49–51).

Explanation

10.63.2 B2, Infrastructure Delivery Plan (December 2025), section 1.3, paragraphs 1.3.1–1.3.7 (PDF pages 12–14; document pages 11–13), explains how engagement with infrastructure and service providers informed the Infrastructure Delivery Plan. The Digital Infrastructure section identifies the principal mobile and broadband operators and records continuing work with BDUK, mobile operators, telecommunications providers and infrastructure partners (PDF pages 50–52; document pages 49–51). A1, Medway Local Plan 2041 (Regulation 22, December 2025), paragraphs 10.6.4 and 10.6.9–10.6.10 (PDF pages 203–204; document pages 202–203), separately records joint working on Project Gigabit and intended continuing engagement with industry and

network providers. This evidence supports the policy's delivery approach, while not establishing a detailed provider-by-provider response to its precise wording.

Conclusion

10.63.3 The policy is supported by documented programme-level and infrastructure-planning engagement. The evidence does not, however, establish a detailed provider-by-provider consultation response to the wording of Policy DM22, and no wider claim is necessary to demonstrate soundness.

Proposed Main/Minor Modification

N/A

Reason for proposed Main/Minor Modification

N/A

10.64 Are the requirements of Policy DM22 capable of being consistently applied in development management decisions?

Council's response

10.64.1 Yes, subject to a limited clarification concerning relevance, technical feasibility, reasonable achievability and matters controlled by a network provider. Policy DM22 in A1, Medway Local Plan 2041 (Regulation 22, December 2025) (PDF page 204; document page 203) identifies the development threshold, required outcomes, evidence to accompany an application and the route where full compliance is not possible. The proposed clarification makes the feasibility and third-party-control tests explicit.

Evidence base

- A1, Medway Local Plan 2041 (Regulation 22, December 2025), paragraphs 10.6.1–10.6.10 and Policy DM22 (PDF pages 202–204; document pages 201–203).
- National Planning Policy Framework (December 2024), paragraph 36 and Chapter 10, paragraphs 119–123.

Explanation

10.64.2 Policy DM22 identifies its scope as major residential and commercial development, specifies the required connectivity outcomes, requires application evidence and provides an exception and alternative-provision route. These features provide an identifiable basis for consistent decision-making. Consolidating the exception wording and expressly recognising provider availability and technical feasibility would remove residual ambiguity and align the policy with the requirement for clear and effective policies in National Planning Policy Framework (December 2024), paragraph 36.

Conclusion

10.64.3 With the proposed clarification, DM22 provides a clear and consistently applicable development-management framework.

Proposed Main/Minor Modification

10.64.4 Minor Modification: amend the exception wording to state:

> "*Where a requirement is not relevant, technically feasible or reasonably achievable because connection or service delivery depends on a network provider, the applicant must provide proportionate evidence and identify the best available alternative provision*."

Reason for proposed Main/Minor Modification

10.64.5 To make the policy precise, proportionate and effective, and to avoid requiring applicants to guarantee matters controlled by network operators.

10.65 How would compliance with the policy be assessed?

Council's response

10.65.1 Compliance would be assessed against the evidence expressly required by Policy DM22 in A1, Medway Local Plan 2041 (Regulation 22, December 2025) (PDF page 204; document page 203), including the proposed infrastructure, provider confirmation and evidence supporting any alternative approach. A14, Medway Local Plan Monitoring Framework (Regulation 22 Submission, December 2025), Policy DM22 indicator (PDF page 17), separately monitors the plan-level outcome through changes in 5G signal and FTTP coverage.

Evidence base

- A1, Medway Local Plan 2041 (Regulation 22, December 2025), paragraphs 10.6.1–10.6.10 and Policy DM22 (PDF pages 202–204; document pages 201–203).
- A14, Medway Local Plan Monitoring Framework (Regulation 22 Submission, December 2025), introductory monitoring provisions (PDF page 2) and Policy DM22 indicator, target and data sources (PDF page 17).

Explanation

10.65.2 Policy DM22 requires evidence to be submitted with the planning application and reasoned justification where the stated requirements cannot be met. In practice, the assessment can address the infrastructure specification, provider correspondence, layout and ducting details, confirmation of FTTP and future-ready provision, and evidence supporting an alternative. The evidence should be proportionate to the proposal and may inform any necessary condition or obligation where the relevant tests are met. Plan-wide effectiveness is then assessed through the indicator in A14, Medway Local Plan Monitoring Framework (Regulation 22 Submission, December 2025) (PDF

page 17), rather than substituting that coverage indicator for application-level compliance.

Conclusion

10.65.3 The policy contains an identifiable application-level test and a separate plan-level monitoring measure.

Proposed Main/Minor Modification

N/A

Reason for proposed Main/Minor Modification

N/A

10.66 Are the policy requirements proportionate to the scale and nature of development proposed?

Council's response

10.66.1 Broadly yes. Policy DM22 applies only to major residential and commercial development, uses "where relevant", and permits justified alternatives and exceptions. Those features focus the requirements on schemes where coordinated infrastructure is practical and provide flexibility where a requirement cannot be delivered. The clarification proposed under questions 10.64 and 10.68 would make proportionality more explicit.

Evidence base

- A1, Medway Local Plan 2041 (Regulation 22, December 2025), paragraphs 10.6.1–10.6.10 and Policy DM22 (PDF pages 202–204; document pages 201–203).
- National Planning Policy Framework (December 2024), paragraph 36 and Chapter 10, paragraphs 119–123.

Explanation

10.66.2 The major-development threshold in Policy DM22 limits the requirement to schemes where early coordination of digital infrastructure is likely to be material and practicable. The phrases "where relevant", the alternative-method provision and the evidence-based exception avoid an inflexible requirement. An express reference to proportionate evidence and matters within reasonable applicant control would further support consistency with the effectiveness test in National Planning Policy Framework (December 2024), paragraph 36.

Conclusion

10.66.3 The requirements are proportionate, subject to the clarification proposed in response to questions 10.64 and 10.68.

Proposed Main/Minor Modification

N/A

Reason for proposed Main/Minor Modification

N/A

10.67 Has the Council assessed the viability implications of the policy and its requirements?

Council's response

10.67.1 Yes. B5, Medway Council Local Plan Viability Assessment Update (June 2025), paragraph 8.135 (PDF page 146; document pages 145–146), expressly considers Policy DM22. It identifies Part R of the Building Regulations and fibre broadband as part of the cost context and attributes no additional development cost to the policy.

Evidence base

- A1, Medway Local Plan 2041 (Regulation 22, December 2025), paragraphs 10.6.1–10.6.10 and Policy DM22 (PDF pages 202–204; document pages 201–203).
- B2, Infrastructure Delivery Plan (December 2025), Digital Infrastructure: Quality and Capacity Review and Proposed Infrastructure (PDF pages 50–52; document pages 49–51).
- B5, Medway Council Local Plan Viability Assessment Update (June 2025), paragraph 8.135 (PDF page 146; document pages 145–146).

Explanation

10.67.2 B5, Medway Council Local Plan Viability Assessment Update (June 2025), paragraph 8.135 (PDF page 146; document pages 145–146), states that Part R of the Building Regulations requires new homes to be gigabit-ready, that fibre broadband is a normal development cost except in the most rural locations, and that no additional cost is attributed to Policy DM22. Policy DM22 is also limited to major development and includes a reasoned exception and alternative-provision route. The policy's requirements have therefore been expressly considered in the viability evidence rather than assumed.

Conclusion

10.67.3 The viability assessment expressly considers Policy DM22 and attributes no additional development cost to it. This supports the policy's viability, while the exception and alternative-provision clauses provide further flexibility for atypical locations.

Proposed Main/Minor Modification

N/A

Reason for proposed Main/Minor Modification

N/A

10.68 Could the policy impose obligations which are beyond the control of applicants or developers?

Council's response

10.68.1 Potentially yes, because availability and timing of a live connection may depend on a telecommunications provider. Policy DM22 in A1, Medway Local Plan 2041 (Regulation 22, December 2025) (PDF page 204; document page 203) already requires provider confirmation while permitting justification, alternatives and exceptions. A limited clarification is needed to distinguish enabling infrastructure within an applicant's control from final connection or service activation controlled by a network provider.

Evidence base

- A1, Medway Local Plan 2041 (Regulation 22, December 2025), paragraphs 10.6.1–10.6.10 and Policy DM22 (PDF pages 202–204; document pages 201–203).
- B2, Infrastructure Delivery Plan (December 2025), Digital Infrastructure: Quality and Capacity Review and Proposed Infrastructure (PDF pages 50–52; document pages 49–51).
- National Planning Policy Framework (December 2024), paragraph 36 and Chapter 10, paragraphs 119–123.

Explanation

10.68.2 Policy DM22 requires applicants to engage with providers and demonstrate the proposed connectivity provision, but its present wording could be read as requiring a result dependent on a third party. The existing justification, alternative-method and exception provisions partly address that risk. The proposed consolidated wording would make clear that applicants must provide proportionate evidence and the best available enabling provision, without guaranteeing a provider's commercial or operational action. That would improve effectiveness without weakening the policy objective.

Conclusion

10.68.3 With the proposed clarification, the policy would not impose an unreasonable or undeliverable obligation.

Proposed Main/Minor Modification

10.68.4 Minor Modification: use the consolidated exception wording proposed in response to question 10.64.

Reason for proposed Main/Minor Modification

10.68.5 To ensure effectiveness and proportionality where final connection or service activation is controlled by a network provider.

Environmental and Design Considerations

10.69 How does Policy DM22 balance the provision of telecommunications infrastructure against visual, heritage, landscape and environmental considerations?

Council's response

10.69.1 Policy DM22 supports digital infrastructure, but it operates with the design, heritage, landscape and environmental policies in A1, the Medway Local Plan 204. Paragraph 10.6.2 (PDF page 202; document page 201) requires careful siting having regard to amenity, heritage and landscape. The detailed development-management tests are provided by Policy T1: High Quality Design and Amenity (document pages 64–67), Policy S4: Landscape Protection and Enhancement (document pages 38–41), Policy S6: Kent Downs National Landscape (document pages 44–46), Policy DM9: Heritage Assets (document pages 76–78) and Policy DM10: Conservation Areas (document pages 79–80).

Evidence base

- A1, Medway Local Plan 2041 (Regulation 22, December 2025), paragraph 10.6.2 and Policy DM22 (PDF pages 202–204; document pages 201–203), Policy T1: High Quality Design and Amenity (document pages 64–67), Policy S4: Landscape Protection and Enhancement (document pages 38–41), Policy S6: Kent Downs National Landscape (document pages 44–46), Policy DM9: Heritage Assets (document pages 76–78), Policy DM10: Conservation Areas (document pages 79–80), and Policy S24: Infrastructure Delivery (document pages 198–201), as relevant.
- A3.3, Sustainability Appraisal of the Medway Local Plan 2025–2041 – Volume 3 of 3: Appendices of the Regulation 19 Sustainability Appraisal (June 2025), Appendix H, section H.9.6, Policy DM22: Digital Communications (PDF pages 410–411; Appendix pages H120–H121).
- National Planning Policy Framework (December 2024), paragraph 36 and Chapter 10, paragraphs 119–123.

Explanation

10.69.2 A1, Medway Local Plan 204, paragraph 10.6.2 (PDF page 202; document page 201), expressly states that communications development should be carefully sited with regard to amenity, heritage and landscape. Policy DM22 establishes the connectivity outcomes, while Policies T1, S4, S6, DM9 and DM10 provide the detailed impact tests at the cited document pages. A3.3, Sustainability Appraisal of the Medway Local Plan

2025–2041 – Volume 3 of 3: Appendices of the Regulation 19 Sustainability Appraisal (June 2025), Appendix H, section H.9.6 (PDF pages 410–411; Appendix pages H120–H121), records the policy-level sustainability effects. Reading these provisions together avoids duplicating specialist policy tests within DM22 while ensuring that connectivity benefit does not override environmental and design considerations.

Conclusion

10.69.3 The policy achieves an appropriate balance through its supporting text and the operation of the Plan as a whole.

Proposed Main/Minor Modification

N/A

Reason for proposed Main/Minor Modification

N/A

10.70 What safeguards exist to ensure that telecommunications infrastructure does not result in unacceptable impacts upon designated heritage assets, conservation areas, the Kent Downs National Landscape or other sensitive locations?

Council's response

10.70.1 The safeguards are provided by the statutory duties and national policy applicable to designated assets and landscapes, together with the policies in A1, Medway Local Plan 2041 (Regulation 22, December 2025): paragraph 10.6.2 (PDF page 202; document page 201), Policy T1 (document pages 64–67), Policy S4 (document pages 38–41), Policy S6 (document pages 44–46), Policy DM9 (document pages 76–78) and Policy DM10 (document pages 79–80). These provisions apply alongside Policy DM22.

Evidence base

- A1, Medway Local Plan 2041 (Regulation 22, December 2025), paragraph 10.6.2 and Policy DM22 (PDF pages 202–204; document pages 201–203), Policy T1: High Quality Design and Amenity (document pages 64–67), Policy S4: Landscape Protection and Enhancement (document pages 38–41), Policy S6: Kent Downs National Landscape (document pages 44–46), Policy DM9: Heritage Assets (document pages 76–78), Policy DM10: Conservation Areas (document pages 79–80), and Policy S24: Infrastructure Delivery (document pages 198–201), as relevant.
- National Planning Policy Framework (December 2024), paragraph 36 and Chapter 10, paragraphs 119–123.

Explanation

10.70.2 A1, Medway Local Plan 204, paragraph 10.6.2 (PDF page 202; document page 201), confirms the need for careful siting having regard to amenity, heritage and landscape. A proposal affecting a designated heritage asset or conservation area must also satisfy Policies DM9 and DM10 (document pages 76–80); a proposal affecting the Kent Downs National Landscape or wider landscape interests must satisfy Policies S6 and S4 (document pages 38–46); and design and amenity effects are addressed by Policy T1 (document pages 64–67). Policy DM22 does not disapply or override these safeguards.

Conclusion

10.70.3 The development plan, read as a whole, provides the necessary safeguards without duplicating every environmental test in DM22.

Proposed Main/Minor Modification

N/A

Reason for proposed Main/Minor Modification

N/A

10.71 Does the policy provide a clear framework for balancing connectivity benefits against environmental impacts?

Council's response

10.71.1 Yes. Policy DM22 establishes the connectivity objective and application evidence. Paragraph 10.6.2 (PDF page 202; document page 201) and Policies T1, S4, S6, DM9 and DM10 at document pages 38–46 and 64–80 provide the framework for assessing design, landscape and heritage effects. A3.3, Sustainability Appraisal of the Medway Local Plan 2025–2041 – Volume 3 of 3: Appendices of the Regulation 19 Sustainability Appraisal (June 2025), Appendix H, section H.9.6 (PDF pages 410–411; Appendix pages H120–H121), provides the policy-level sustainability assessment.

Evidence base

- A1, Medway Local Plan 2041 (Regulation 22, December 2025), paragraph 10.6.2 and Policy DM22 (PDF pages 202–204; document pages 201–203), Policy T1: High Quality Design and Amenity (document pages 64–67), Policy S4: Landscape Protection and Enhancement (document pages 38–41), Policy S6: Kent Downs National Landscape (document pages 44–46), Policy DM9: Heritage Assets (document pages 76–78), Policy DM10: Conservation Areas (document pages 79–80), and Policy S24: Infrastructure Delivery (document pages 198–201), as relevant.
- A3.3, Sustainability Appraisal of the Medway Local Plan 2025–2041 – Volume 3 of 3: Appendices of the Regulation 19 Sustainability Appraisal (June 2025), Appendix H,

section H.9.6, Policy DM22: Digital Communications (PDF pages 410–411; Appendix pages H120–H121).

Explanation

10.71.2 The division of function is clear: Policy DM22 establishes what connectivity outcome and evidence major development should provide, while the other policies in A1, Medway Local Plan 2041 assess the acceptability of the physical works and their effects. A3.3, Sustainability Appraisal of the Medway Local Plan 2025–2041 – Volume 3 of 3: Appendices of the Regulation 19 Sustainability Appraisal (June 2025), Appendix H, section H.9.6 (PDF pages 410–411; Appendix pages H120–H121), records positive effects for Policy DM22 and does not identify a policy-level adverse effect for biodiversity, landscape, natural resources, housing, health or cultural heritage. Site-specific effects remain to be assessed against the development plan at application stage.

Conclusion

10.71.3 The framework is clear when DM22 is read with the Plan as a whole.

Proposed Main/Minor Modification

N/A

Reason for proposed Main/Minor Modification

N/A

Relationship with Other Policies

10.72 How does Policy DM22 operate alongside Policies relating to design, heritage, landscape protection and infrastructure delivery?

Council's response

10.72.1 Policy DM22 establishes digital-connectivity requirements. Policy T1 (document pages 64–67), Policies S4 and S6 (document pages 38–46), and Policies DM9 and DM10 (document pages 76–80) address the design, landscape and heritage acceptability of physical works. Policy S24: Infrastructure Delivery (document pages 198–201) provides the wider framework for infrastructure capacity, phasing, contributions and collaborative delivery.

Evidence base

- A1, Medway Local Plan 2041 (Regulation 22, December 2025), paragraph 10.6.2 and Policy DM22 (PDF pages 202–204; document pages 201–203), Policy T1: High Quality Design and Amenity (document pages 64–67), Policy S4: Landscape Protection and Enhancement (document pages 38–41), Policy S6: Kent Downs National Landscape (document pages 44–46), Policy DM9: Heritage Assets

(document pages 76–78), Policy DM10: Conservation Areas (document pages 79–80), and Policy S24: Infrastructure Delivery (document pages 198–201), as relevant.

Explanation

10.72.3 The policies perform distinct but complementary functions within A1, Medway Local Plan 2041 (Regulation 22, December 2025). Policy DM22 identifies the digital outcome and evidence expected from major development (PDF page 204; document page 203). Policy S24 addresses infrastructure capacity, phasing, contributions and collaborative delivery (document pages 198–201). Policies T1, S4, S6, DM9 and DM10 assess design and environmental effects at the cited document pages. Applying the relevant policies together provides a coherent framework without repeating each test in DM22.

Conclusion

10.72.4 The policy relationships are coherent and do not create a conflict.

Proposed Main/Minor Modification

N/A

Reason for proposed Main/Minor Modification

N/A

10.73 Is there any duplication between Policy DM22 and national policy, Building Regulations requirements or other policies within the Plan?

Council's response

10.73.1 There is overlap, but no harmful duplication. B5, Medway Council Local Plan Viability Assessment Update (June 2025), paragraph 8.135 (PDF page 146; document pages 145–146), states that Part R has superseded the policy "to a large extent" for new homes. Policy DM22 nevertheless retains distinct planning functions concerning major commercial development, provider confirmation, FTTP, 5G and future-technology readiness, application evidence and alternative provision.

Evidence base

- A1, Medway Local Plan 2041 (Regulation 22, December 2025), paragraphs 10.6.1–10.6.10 and Policy DM22 (PDF pages 202–204; document pages 201–203).
- B2, Infrastructure Delivery Plan (December 2025), Digital Infrastructure: Quality and Capacity Review and Proposed Infrastructure (PDF pages 50–52; document pages 49–51).
- B5, Medway Council Local Plan Viability Assessment Update (June 2025), paragraph 8.135 (PDF page 146; document pages 145–146).

- National Planning Policy Framework (December 2024), paragraph 36 and Chapter 10, paragraphs 119–123.

Explanation

10.73.2 Part R addresses gigabit-ready physical infrastructure for new dwellings. B5, Medway Council Local Plan Viability Assessment Update (June 2025), paragraph 8.135 (PDF page 146; document pages 145–146), recognises that overlap and therefore attributes no additional cost to Policy DM22. Policy DM22 extends to major commercial development and addresses provider confirmation, 5G and future technologies, evidence with the application and fallback provision. The policy should therefore be applied to those distinct planning matters and not used to duplicate technical requirements controlled through the Building Regulations.

Conclusion

10.73.3 Policy DM22 is complementary to, rather than duplicative of, national policy and Part R, provided that it is applied to its distinct planning functions and is not used to duplicate technical matters controlled through the Building Regulations.

Proposed Main/Minor Modification

N/A

Reason for proposed Main/Minor Modification

N/A

10.74 Does the policy provide a sufficiently clear framework for developers, infrastructure providers and decision-makers?

Council's response

10.74.1 Broadly yes. Policy DM22 identifies the development to which it applies, the required outcomes, the evidence to accompany an application and the route where the preferred solution is not possible. The clarification proposed under questions 10.64 and 10.68 would remove the remaining ambiguity concerning feasibility and matters controlled by network providers.

Evidence base

- A1, Medway Local Plan 2041 (Regulation 22, December 2025), paragraphs 10.6.1–10.6.10 and Policy DM22 (PDF pages 202–204; document pages 201–203).

Explanation

10.74.2 Policy DM22 gives developers and decision-makers a defined threshold, stated connectivity outcomes, an evidence requirement and an alternative-provision route. Infrastructure providers are engaged through the provider-confirmation requirement and the supporting approach in paragraphs 10.6.9–10.6.10 (PDF page 204; document page 203). Consolidating the exception wording and expressly addressing third-party

provider control would make application more predictable without altering the policy objective.

Conclusion

10.74.3 The framework is sufficiently clear subject to the minor modification proposed under questions 10.64 and 10.68.

Proposed Main/Minor Modification

N/A

Reason for proposed Main/Minor Modification

N/A

Monitoring and Review

10.75 How will implementation of Policy DM22 be monitored throughout the Plan period?

Council's response

10.75.1 Implementation will be monitored through the level of 5G signal and FTTP coverage across Medway. A14, Medway Local Plan Monitoring Framework (Regulation 22 Submission, December 2025), Policy DM22 indicator (PDF page 17), sets an increase in 5G and FTTP connectivity as the target and identifies BDUK, Kent County Council and local broadband information as the data sources.

Evidence base

- A1, Medway Local Plan 2041 (Regulation 22, December 2025), paragraphs 10.6.1–10.6.10 and Policy DM22 (PDF pages 202–204; document pages 201–203).
- A14, Medway Local Plan Monitoring Framework (Regulation 22 Submission, December 2025), introductory monitoring provisions (PDF page 2) and Policy DM22 indicator, target and data sources (PDF page 17).

Explanation

10.75.2 A14, Medway Local Plan Monitoring Framework (Regulation 22 Submission, December 2025), Policy DM22 indicator (PDF page 17), directly links the level of 5G signal and FTTP coverage to Policy DM22 and sets increased connectivity across Medway as the target. Its introductory provisions (PDF page 2) explain that the indicators are intended for annual reporting and may be updated as new data sources become available. Application monitoring may also record evidence and provision secured through major development, but the submitted plan-level indicator is the coverage outcome.

Conclusion

10.75.3 The submitted Monitoring Framework provides a clear and proportionate basis for monitoring DM22.

Proposed Main/Minor Modification

N/A

Reason for proposed Main/Minor Modification

N/A

10.76 What indicators will be used to assess whether digital connectivity objectives are being achieved?

Council's response

10.76.1 The principal indicator is the level of 5G signal and FTTP across Medway, with a target of increased 5G and FTTP connectivity. This indicator, target and its data sources are specified in A14, Medway Local Plan Monitoring Framework (Regulation 22 Submission, December 2025), Policy DM22 indicator (PDF page 17).

Evidence base

- A1, Medway Local Plan 2041 (Regulation 22, December 2025), paragraphs 10.6.1–10.6.10 and Policy DM22 (PDF pages 202–204; document pages 201–203).
- A14, Medway Local Plan Monitoring Framework (Regulation 22 Submission, December 2025), introductory monitoring provisions (PDF page 2) and Policy DM22 indicator, target and data sources (PDF page 17).

Explanation

10.76.2 A14, Medway Local Plan Monitoring Framework (Regulation 22 Submission, December 2025), Policy DM22 indicator (PDF page 17), identifies BDUK, Kent County Council and local broadband information as the data sources. Tracking the level of 5G signal and FTTP coverage against the stated target provides a direct measure of whether connectivity is moving in the intended direction. The introductory monitoring provisions (PDF page 2) also allow new data sources and updated indicators or targets to be incorporated during the Plan period.

Conclusion

10.76.3 The indicator, target and sources are specific and capable of demonstrating the direction of travel.

Proposed Main/Minor Modification

N/A

Reason for proposed Main/Minor Modification

N/A

10.77 If expected improvements in digital connectivity do not occur, what mechanisms exist to review the policy approach?

Council's response

10.77.1 If expected improvements do not occur, the Council can use the Authority Monitoring Report and statutory Local Plan review process to consider whether implementation or policy changes are required. A14, Medway Local Plan Monitoring Framework (Regulation 22 Submission, December 2025), introductory monitoring provisions (PDF page 2), permits new data sources to be used and indicators and targets to be updated during the Plan period; the Policy DM22 indicator and target are set out on PDF page 17.

Evidence base

- A1, Medway Local Plan 2041 (Regulation 22, December 2025), paragraphs 10.6.1–10.6.10 and Policy DM22 (PDF pages 202–204; document pages 201–203).
- A14, Medway Local Plan Monitoring Framework (Regulation 22 Submission, December 2025), introductory monitoring provisions (PDF page 2) and Policy DM22 indicator, target and data sources (PDF page 17).

Explanation

10.77.2 A14, Medway Local Plan Monitoring Framework (Regulation 22 Submission, December 2025), introductory monitoring provisions (PDF page 2), confirms that new data sources may be used and indicators and targets updated during the Plan period. Failure to achieve the increased 5G and FTTP connectivity target identified for Policy DM22 (PDF page 17) would therefore be visible through monitoring. That evidence could inform further provider engagement, implementation guidance or review of Policy DM22 through the statutory plan-review process.

Conclusion

10.77.3 The monitoring and plan-review framework provides an appropriate proportionate mechanism for corrective action.

Proposed Main/Minor Modification

N/A

Reason for proposed Main/Minor Modification

N/A

Soundness

10.78 Is Policy DM22 positively prepared, justified, effective and consistent with national policy?

Council's response

10.78.1 Yes, subject to the limited clarification concerning technical feasibility and matters within a network provider's control. The policy objective and local justification are evidenced by A1, Medway Local Plan 2041 (Regulation 22, December 2025), paragraphs 10.6.1–10.6.10 and Policy DM22 (PDF pages 202–204; document pages 201–203), and B2, Infrastructure Delivery Plan (December 2025), Digital Infrastructure section (PDF pages 50–52; document pages 49–51). Sustainability effects are assessed in A3.3, Sustainability Appraisal of the Medway Local Plan 2025–2041 – Volume 3 of 3: Appendices of the Regulation 19 Sustainability Appraisal (June 2025), Appendix H, section H.9.6 (PDF pages 410–411; Appendix pages H120–H121); viability is addressed in B5, Medway Council Local Plan Viability Assessment Update (June 2025), paragraph 8.135 (PDF page 146; document pages 145–146); and monitoring is provided by A14, Medway Local Plan Monitoring Framework (Regulation 22 Submission, December 2025), Policy DM22 indicator (PDF page 17).

Evidence base

- A1, Medway Local Plan 2041 (Regulation 22, December 2025), paragraphs 10.6.1–10.6.10 and Policy DM22 (PDF pages 202–204; document pages 201–203).
- B2, Infrastructure Delivery Plan (December 2025), Digital Infrastructure: Quality and Capacity Review and Proposed Infrastructure (PDF pages 50–52; document pages 49–51).
- A3.3, Sustainability Appraisal of the Medway Local Plan 2025–2041 – Volume 3 of 3: Appendices of the Regulation 19 Sustainability Appraisal (June 2025), Appendix H, section H.9.6, Policy DM22: Digital Communications (PDF pages 410–411; Appendix pages H120–H121).
- B5, Medway Council Local Plan Viability Assessment Update (June 2025), paragraph 8.135 (PDF page 146; document pages 145–146).
- A14, Medway Local Plan Monitoring Framework (Regulation 22 Submission, December 2025), introductory monitoring provisions (PDF page 2) and Policy DM22 indicator, target and data sources (PDF page 17).
- National Planning Policy Framework (December 2024), paragraph 36 and Chapter 10, paragraphs 119–123.

Explanation

10.78.2 Policy DM22 is positively prepared because it supports improved connectivity and the economic and social objectives described in A1, Medway Local Plan 2041, paragraphs 10.6.1 and 10.6.6–10.6.7 (PDF pages 202–204; document pages 201–203). It is justified by the Medway-specific coverage evidence in paragraphs 10.6.4–10.6.7 and B2, Infrastructure Delivery Plan (December 2025), Digital Infrastructure section (PDF

pages 50–52; document pages 49–51), and by the sustainability assessment in A3.3, Sustainability Appraisal of the Medway Local Plan 2025–2041 – Volume 3 of 3: Appendices of the Regulation 19 Sustainability Appraisal (June 2025), Appendix H, section H.9.6 (PDF pages 410–411; Appendix pages H120–H121). It is effective because Policy DM22 specifies requirements, evidence, alternatives and exceptions for major development and A14, Medway Local Plan Monitoring Framework (Regulation 22 Submission, December 2025) provides a monitoring indicator (PDF page 17). B5, Medway Council Local Plan Viability Assessment Update (June 2025), paragraph 8.135 (PDF page 146; document pages 145–146), confirms that no additional development cost is attributed to the policy. It is consistent with the support for advanced communications in National Planning Policy Framework (December 2024), paragraphs 119–123, while the Plan's design and environmental policies remain applicable. The proposed clarification removes the remaining ambiguity over technical feasibility and provider control.

Conclusion

10.78.3 Subject to the limited minor modification identified in response to questions 10.64 and 10.68, Policy DM22 is positively prepared, justified, effective and consistent with national policy.

Proposed Main/Minor Modification

N/A

Reason for proposed Main/Minor Modification

N/A

10.79 Does the policy provide sufficient flexibility to support future advances in telecommunications and digital infrastructure over the Plan period?

Council's response

10.79.1 Yes. Policy DM22 expressly addresses 5G, gigabit-capable broadband, future technological advancements, alternative methods and evidence-based exceptions. A14, Medway Local Plan Monitoring Framework (Regulation 22 Submission, December 2025), introductory monitoring provisions (PDF page 2), allows new data sources to be used and indicators and targets to be updated during the Plan period.

Evidence base

- A1, Medway Local Plan 2041 (Regulation 22, December 2025), paragraphs 10.6.1–10.6.10 and Policy DM22 (PDF pages 202–204; document pages 201–203).
- A14, Medway Local Plan Monitoring Framework (Regulation 22 Submission, December 2025), introductory monitoring provisions (PDF page 2) and Policy DM22 indicator, target and data sources (PDF page 17).

Explanation

10.79.2 Policy DM22 is outcome-led rather than tied to a closed technical specification. Its references to future technological advancements, alternatives and evidence-based exceptions allow new solutions to be accommodated. A14, Medway Local Plan Monitoring Framework (Regulation 22 Submission, December 2025), introductory monitoring provisions (PDF page 2), complements that flexibility by allowing new data sources and updated indicators and targets. The clarification proposed under questions 10.64 and 10.68 would further ensure that changes in provider availability or technical feasibility can be addressed without weakening the connectivity objective.

Conclusion

10.79.3 Policy DM22 provides sufficient long-term flexibility.

Proposed Main/Minor Modification

N/A

Reason for proposed Main/Minor Modification

N/A

HOT FOOD TAKEAWAYS IN MEDWAY

A Guidance Note – **updated March 2026**

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Executive Summary

This guidance note has been produced to help tackle the issue of obesity through the built environment. It seeks to locate hot food takeaways in appropriate areas and avoid over-concentration of these uses in an effort to encourage people to eat more healthily. In accordance with the National Planning Policy Framework (NPPF), it seeks to ensure town centre viability and vitality (Ministry of Housing, Communities and Local Government, 2024). The issue of health has been addressed in both the NPPF, and the National Planning Practice Guidance (NPPG), and as such requires planning authorities to work with public health and to take account of the health status and needs of the local population to improve health and wellbeing (Ministry of Housing, Communities and Local Government, 2019). The guidance supplements the Medway Local Plan and its aspiration to support the health and wellbeing agenda, specifically Policy T27: *'Reducing Health Inequalities and Supporting Health and Wellbeing'*. The policy states that "Medway Council will maintain and improve the health and wellbeing of our residents, encouraging healthy lifestyles and tackling the causes of ill health and inequalities". This will be achieved by a range of measures including "Creating a healthy food environment by increasing opportunities for growing food, controlling the location of, and access to, unhealthy eating outlets, and improving the accessibility of retail facilities selling fresh food" (Medway Council, 2025).

Introduction

1.1 Obesity occurs when energy intake from food and drink consumption is greater than energy expenditure through the body's metabolism and physical activity over a prolonged period, resulting in the accumulation of excess body fat. Many factors can contribute to obesity, including sedentary lifestyles and excessive consumption of fast food. Fast food and ready meals are often high in calories, salt and fat (UK Health Security Agency, 2016).

1.2 The issue has been recognised nationally, and many local authorities have taken steps to exercise greater control over fast food outlets, particularly around schools and other places that attract large numbers of young people (PHE, 2020). This is because tackling the issue with younger people can prevent problems in later life.

1.3 In the case of schools the issue is with fast food consumption at lunchtimes and after school. Other places that attract large numbers of young people include playing fields and children's play spaces and some authorities have sought to control hot food takeaways within a certain distance of these.

1.4 Medway Council has considered the approaches that have been taken to combat obesity elsewhere through additional controls on hot food takeaways and has produced this guidance note. The advice in the note will be used in determining planning applications, taking into consideration other matters such as noise and litter, and in developing new policies for the location of development.

1.5 There has been some recent national policy changes with the National Planning Policy Framework (NPPF) Paragraph 97 stating that local planning authorities should refuse

applications for hot food takeaways and fast-food outlets (Ministry of Housing, Communities and Local Government, 2024):

a) within walking distance of schools and other places where children and young people congregate, unless the location is within a designated town centre; or

b) in locations where there is evidence that a concentration of such uses is having an adverse impact on local health, pollution or anti-social behaviour.

1.6 For the purposes of planning, a HFT is currently defined as "the sale of hot food where consumption of that food is mostly undertaken off the premises". They are categorised as 'sui generis', which means that they do not belong to any planning use class and do not benefit from any permitted development rights. It is the sui generis definition of a HFT that is the focus of this report. Until September 2020, hot food takeaway outlets were categorised within spatial planning as "Use Class A5", but they now fall under class "sui generis" (i.e. "in a class by itself") (appendix 1) (Town and Country Planning, 2020). The takeaway element of development that falls into retail Class E(b) is not explored (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) that includes restaurants.

1.7 Helping people to live well for longer, while giving them the freedom and opportunities to make their own decisions is a key factor for Public Health. It is within this, that concept of the precautionary principle can be applied to HFT. The precautionary principle arose from working traditions in law and medicine but can also be extended within the public health and planning context. Within urban planning, the precautionary principle mentions preventative action and has been defined as 'the principle permits the taking of preventative measures without having to wait until the reality and seriousness of the threat become fully known' (DEFRA, 2023). While this definition may relate to environmental issues, it is equally important in public health. It supports the 'prevention is better than cure' concept in that if healthy weight and food environments are the norm for our population, then there will be no need to combat the issues around unhealthy food, such as obesity and related illnesses that could be prevented.

1.8 Within Public Health this supports the need to take preventative action where it is known prevention is about helping people stay healthy, happy and independent for as long as possible. This means reducing the chances of problems from arising in the first place and, when they do, supporting people to manage them as effectively as possible. Prevention is as important at seventy years old as it is at age seven. Public Health therefore must take opportunities to have a positive impact on the population, using the methods and tools that are currently available.

National Context

2.1 Tackling obesity is one of the biggest health challenges facing the UK (DHSC, 2020). Currently one in four adults in England are obese (OHID, 2024). There is a clear link between increased body fat (obesity) and risk of medical conditions including type 2 diabetes, cancer, heart and liver disease. The UK-wide NHS costs attributable to overweight and obesity are projected to reach £9.7 billion by 2050, with wider costs to society estimated to reach £49.9 billion per year (PHE, 2017).

2.2 Obesity among 2–10-year-olds rose from 10.1% in 1995, to 13.9% in 2001. The prevalence of obesity among 11–15-year-olds was recorded in 2011 as 20.2% (NHS Digital, 2024). The 2023/24 National Child Measurement Programme (NCMP) showed that obesity prevalence among 4–5-year-olds was 9.6% and 22.1% among children aged 10–11-year-olds (NCMP, 2024).

2.3 There is a direct relationship between obesity and deprivation. Women in more deprived areas are more likely to be obese than those elsewhere (UKHSA, 2021). Obesity prevalence increases from 21.5% in the least deprived 20% of areas to 31.5% in the most deprived 20% (OHID, 2024).

2.4 Evidence has also shown associations between exposure to takeaway food outlets and body mass index, and groups most exposed to takeaway food outlets near home and along commuting routes have a higher mean body mass index than those least exposed. Exposure to takeaway food outlets in home, work and commuting environments combined is associated with marginally higher consumption of takeaway food and greater odds of obesity (BMJ, 2014).

2.5 Given this situation the 2018 UK Government strategy included an ambition to halve childhood obesity and significantly reduce the gap in obesity between children from the most and least deprived areas by 2030 (DHSC, 2018).

Medway Context

3.1 The situation in Medway is even more acute than the average picture nationally. An estimated 30 per cent of Medway's adult population and over 20 per cent of children (at the age of ten) are classified as obese (DHSC, 2025).

3.2 The National Child Measurement Programme 2023/24 data, showed Medway had rates above the England average. Medway obesity prevalence among 4–5-year-olds was 11.4% and 24.4% among children aged 10–11-year-olds (NCMP, 2024).

3.3 The Food Environment Assessment Tool (FEAT) uses food outlet locations from the Food Standards Agency's Food Hygiene Rating Scheme (FHRS) data. FHRS data contains information on food outlets submitted regularly by local authorities, who collect this data to facilitate food hygiene inspections. It is one of the most complete secondary sources of

food outlet data in England. In April 2025 the FEAT tool showed that Medway had 272 hot food takeaways. This is a 14% increase in the last ten years (FEAT, 2025).

3.4 The majority of these premises are located in the core retail areas, town centres, neighbourhood centres and local centres however some are more widely distributed.

3.5 The Medway Joint Local Health and Wellbeing Strategy 2024-2028, goal is to improve the physical and mental health and wellbeing of Medway residents and reduce inequalities. A specific priority includes supporting residents to live healthy lives and supporting people and families to access healthy food (Medway Council, 2024).

3.6 The Kent and Medway Integrated Care System Strategy published in 2024, committed to addressing health inequalities including smoking in pregnancy, breastfeeding, immunisation and childhood obesity. Specifically, the system target was that by 2028, the percentage of children in Year 6 who are healthy weight will be maintained at the current level of 63 per cent and severe obesity will have reduced from five per cent (Kent and Medway Integrated Care System, 2024).

3.7 The Medway Healthy Weight Network was formed in 2014, bringing together organisations across Medway such as charities, voluntary sector, public sector, NHS, private businesses, educational organisations and residents to work together to tackle the rising obesity levels. The network is overseen by the Medway Health and Wellbeing Board. The network includes the Medway Food Partnership who work with local businesses, public services and the not-for-profit sector to ensure everyone has access to sustainable and healthy food, build the public's education and skills around healthy food and create healthier communities and better futures for all residents. These networks are key elements of Medway's Whole System Obesity Approach.

3.8.1 The Medway Childhood Obesity Five Year Plan's (2025-2030), ultimate priority for the partners of the Medway Healthy Weight Network, is to see a reduction in childhood obesity. The specific targets include the proportion of children in Year R (age 4-5 years) that maintain a healthy weight will be the same or lower than the England average by 2026/27 and the proportion of children in Year 6 (age 10-11 years) with severe obesity will have reduced from 6.1% (Medway Council, 2024).

Responding to the Issue

4.1 The National Planning Policy Framework (NPPF), sets out the Government's economic, environmental and social planning policies for England. The policies in NPPF apply to the preparation of local and neighbourhood plans and to decisions on planning applications.

4.2 The NPPF requires public health to be considered in both plan-making and decision making and states the purpose of planning is to contribute to the achievement of sustainable development, with delivery of the social objective of sustainable development being

paramount to supporting health (Ministry of Housing, Communities and Local Government, 2024).

4.3 Section 8 of the NPPF 'Promoting healthy and Safe Communities' paragraph 96, requires planning policies and decisions to aim to achieve healthy, inclusive, and safe places which promote social interaction, that are safe and accessible, and enable and support healthy lives, especially where this would address identified local health and wellbeing needs, with specific reference to the provision of access to healthier food, allotments and layouts that encourage walking and cycling (Ministry of Housing, Communities and Local Government, 2024).

4.4 The National Planning Policy Framework (NPPF) Paragraph 97 states that local planning authorities should refuse applications for hot food takeaways and fast-food outlets (Ministry of Housing, Communities and Local Government, 2024):

a) within walking distance of schools and other places where children and young people congregate, unless the location is within a designated town centre; or

b) in locations where there is evidence that a concentration of such uses is having an adverse impact on local health, pollution or anti-social behaviour.

4.6 Addressing the wider determinants of health and wellbeing has been identified as the basis of the new public health service. The Marmot Review recommended strengthening the role and impact of ill-health prevention including by tackling obesity (Marmot, 2010). Local authorities are part of the response to tackling obesity with a whole systems approach, which should include integrated policies. Sustainable Community Strategies should be used as a critical planning tool to develop local strategies to reduce obesity. Medway has publicly stated its aspiration to become a Marmot place in April 2025.

4.7 National research has shown that the density of fast-food outlets is higher in deprived areas making it harder for people in these areas to access healthier food options (PHE, 2018).

Proximity to Schools

5.1 Evidence shows that once obesity is developed it is difficult to treat. If in adolescence obesity develops, it is likely to remain into adulthood (Simmonds, 2016). Having fast food outlets within walking distance of schools negates some of the independent health promotion initiatives implemented in schools and is a contributing factor in the rise of obesity in the area (Lorna K Fraser, 2010).

5.2 In an effort to establish appropriate healthy eating habits and reduce the rate of childhood obesity in the local population, the Council considers it appropriate to restrict the hours of operation of hot food takeaways within walking distance of schools.

5.3 A specific issue has been identified with teenagers leaving secondary schools at lunchtimes to access hot food outlets. In contrast, children in primary school do not typically leave school premises during school hours, but research indicates that the most popular time for purchasing food from shops is after school. A study by the National Institute for Health and Care Research (NIHR) found that teenagers often use their limited freedom to buy food they enjoy—typically fast food—during lunch breaks or after school, influenced by socialising and the availability of nearby outlets (Sarah Shaw, 2023).

5.4 In the UK, 27% of adults and 19% of children eat meals out of the home at least once a week, and takeaway food consumption peaks in young adults aged 19-29 years. Takeaway foods tend to contain high levels of fat, saturated fats, sugar, and salt, and lower levels of micronutrients, and therefore regular consumption of takeaway food over time has been linked to weight gain (OHID, 2017).

5.5 This impact is worsened by high exposure to hot food takeaways. Adults with increased exposure to hot food takeaways have increased takeaway consumption, and as such have a higher average body weight. This relationship is especially pronounced in groups with lower levels of education, as therefore is a contributor to health inequalities (UKCRC Centre for Diet and Activity Research (CEDAR), 2014).

Medway Public Health Hot Food Takeaway (HFT) Guidance

6.1 Given current levels of obesity, national and local policy context and evidence of good practice from other areas the following guidance now applies to all HFT applications.

6.2 The development of HFTs will not be permitted in wards where more than 10% of year 6 pupils are classified as obese. Where this is acceptable, the Council will only consider granting a planning permission where:

i. The location and design is acceptable and the proposed use does not detrimentally affect the vitality of the shopping area:
ii. There is no harm or loss of amenity to the living conditions of nearby residents, including that created by noise and disturbance from other users and their vehicles, odour and litter;
iii. And parking traffic generation is not a danger to other road users, public transport operators or pedestrians

6.3 Planning applications will be refused where HFTs and fast-food outlets are within walking distance of locations where children and young people congregate or locations where a concentration of uses is having an adverse impact on local health, population, or anti-social behaviour. This includes schools, youth centres, leisure centres and parks. Parks are categorised as playing areas, Area parks over 5 hectares in size and Neighbourhood Open Spaces over 2 hectares in size

6.4 Over provision of takeaways within a commercial frontage, local centres or in proximity to schools outside recognised centres are not appropriate - either in terms of the vitality and viability of centres or from a health perspective. Too many units together can undermine the main retail function of a centre and appear to promote hot food takeaways in preference to healthier food options.

6.5 Whilst hot food takeaways contribute to the mix of town centres, it is important that they do not dominate the local retail food offer in the area. An overabundance of hot food takeaways displaces other shop, and food options and impacts on the vitality and viability of designated town and neighbourhood centres. Because of this some communities in Medway have a limited choice of and access to fresh, nutritious food.

6.6 The clustering of hot food takeaways breaks up the continuity of the retail frontage and can detract from the primary retail function resulting in the loss of shops, which is to the detriment of local residents and the vitality and viability of the centre as a whole. To ensure that shopping areas are diverse and balanced, especially in designated centres, applications for hot food takeaways will be assessed for their cumulative impact.

6.7 Planning applications for new HFTs will be denied where the number of approved establishments, within the ward, equals or exceeds the UK national average, per 1,000 population. New applications will also be denied where it would result in a clustering of A5 uses to the detriment of the character and function or vitality and viability of a centre or local parade or if it would have an adverse impact on the standard of amenity for existing and future occupants of land and buildings.

6.8 Hot food takeaways will be permitted provided they satisfy this guidance. To mitigate their impact on the health of local communities a fee will be levied on each new unit which is permitted. This will be done through a standard legal agreement known as a section 106 agreement. New hot food takeaways of 100m2, where they are deemed appropriate development, would be charged a fixed fee of £1,530.08. This fee will contribute to the delivery of targeted interventions aimed at reducing childhood obesity within the ward. Initiatives will be developed in partnership with local stakeholders, including educational institutions, voluntary and community sector organisations, faith groups, physical activity providers, and youth services. Proposed activities may include the provision of nutritional education and resources, food growing schemes, improved access to existing facilities for children with additional needs, and the commissioning of structured physical activity programmes.

6.9 Any new (and existing) outlets will also be encouraged to adopt a wide range of cost-effective initiatives to improve the healthy eating level of food sold, including:

- The promotion of healthier menu options including lower fat, sugar and salt items, high fibre and increased fruit and vegetable options
- Cookery demonstrations and healthy eating advice in more deprived neighbourhoods and amongst specific target groups
- Healthy food promotions in conjunction with local markets and leisure centres

- Promotion of local food produce

Consultation and community support

7.1 During the local Reg 18 consultation on the Local Plan the comments and feedback received on Policy T27: *'Reducing Health Inequalities and Supporting Health and Wellbeing'* was overwhelmingly supportive from both public, organisations and Councillors. There were specific reference of support for the guidance on Hot Food Takeaways.

7.2 In October 2024, Medway's 5-year Childhood Obesity Plan (2024), was debated at Children and Young People Overview & Scrutiny Committee. Councillors endorsed the 5-year plan with emphasis on 'improving food choices' for children and young people across Medway (Medway Council, 2024). In addition, at the Health and Wellbeing Board in June 2025, support was provided from Councillors to explore more sustainable food options and tackle the increasing number of HFTs across Medway ((Medway Council, 2025)

Appendices

Appendix 1: Hot food takeaways – Use Classes Order

The Town and Country Planning (Use Classes) Order 1987 (as amended) puts uses of land and buildings into various categories known as 'Use Classes'. In general, planning permission is needed to change from one use class to another (Town and Country Planning, 2020).

Regulations which came into force from 1 September 2020 changed use classes including those relating to food premises such as hot food takeaways. Table 1 below provides an overview of the changes made, in relation to food retail premises only:

Table 1: Old versus the new Use Classes Order for food retail premises

Use Class Order before 1 September 2020	**Use Class Order from 1 September 2020**
A3 Café or restaurant	Class E Commercial, business and service
A4 Pub or drinking establishment	Sui generis
A5 Takeaway	Sui generis

According to guidance published by the Office for Health Improvement and Disparities (OHID), 'Sui generis' is a term used for premises that do not fall within a defined use class, and that cannot, generally, change to any other use, including other "sui generis" uses without obtaining express planning permission. In this way, OHID state that the change of the A5 hot food takeaway use class "allows local authorities to have greater control, through using the planning application process, to prevent the proliferation of hot food takeaways" (PHE, 2021).

It is acknowledged that 'unhealthy food outlets' may encompass a broader range of planning uses than sui generis hot food takeaways alone and could also include restaurants and retail units. The focus of this note and the ensuing policy recommendations are, however, focussed on managing the proliferation of sui generis hot food takeaway uses only.

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Additional health data in support of Matter 10 – Health, Communities & Infrastructure Hearing Statement

In relation to Questions 10.6 and 10.5

October 2026

The NPPF states that planning policies and decisions should aim to achieve healthy, inclusive, and safe places which enable and support healthy lifestyles, especially where this would address identified local health and wellbeing needs and reduce health inequalities between the most and least deprived communities.

This additional data is provided in support of Questions 10.5 and 10.6 of the Matter 10 (Health, Communities and Infrastructure) Hearing Statement.

Hot Food Takeaways

Full data, background and evidence is included within the Hot Food Takeaway Guidance Note, updated March 2026, appended to the Hearing Statement.

Off-Licences

There is continuing strong evidence of alcohol related harms where high densities of licensed premises, particularly off-licences, overlap with deprivation, alcohol-related hospital admissions, crime, anti-social behaviour and public nuisance. This is demonstrated through the Medway Cumalative Impact Assessment (CIA) report prepared under the Licencing Act 2003, which is due for review in 2027. The current CIA is available here:

https://www.gravesham.gov.uk/downloads/download/106/cumulative-impact-assessment

For Medway specifically, the CIA evidence linking alcohol outlet density with deprivation, alcohol-related hospital admissions, crime, street drinking, and anti-social behaviour provides a strong rationale for maintaining cumulative impact policies in areas experiencing the greatest harm.

The connection between alcohol and a variety of harms, such as crime and disorder, domestic abuse, harms to young people and over 60 health harms is well evidenced and accepted by the Government, National Institute Health and Care Excellence (NICE), The Office for Health Improvement and Disparities (OHID) and the World Health Organisation. The government's public health guidance recognises licensing regulation as part of a wider prevention approach to alcohol harms.

Off-licences are frequently linked to harms that differ from the night-time economy, with many of the harms taking place away from the point of sale.

Evidence commonly cited includes:

- street drinking
- anti-social behaviour
- alcohol-related litter
- public intoxication
- domestic abuse
- violence occurring in residential settings
- alcohol-related ambulance callouts
-

The Office for Health Improvement and Disparities (OHID) latest alcohol profile shows that nationally:

- alcohol-related admissions remain at historically high levels;
- alcohol-specific mortality continues to rise;
- harms are significantly worse in the most deprived communities.

Research used by local authorities across England, has demonstrated that deprived communities often experience:

- higher outlet density;
- greater exposure to off-sales alcohol;
- greater alcohol-related hospital admissions;
- greater alcohol-related mortality.
-

This aligns directly with Government and NHS priorities on reducing health inequalities.

Deprivation is relevant to the issue of alcohol outlet density and alcohol related harms. In 2014 Medway Public Health commissioned a study into alcohol use in Medway – 'Medway Alcohol: Insight'. This identified a link between alcohol related harms, hospital admissions, alcohol related crimes and deprived areas where there is a density of licensed premises. Deprivation is also relevant as alcohol harms are significantly worse in those communities which have higher levels of deprivation than those communities that are less deprived.

Medway experiences levels of deprivation that are higher than the national average, with pockets of severe deprivation concentrated within, and around, the main urban centres of Rochester, Chatham and Gillingham. There is extensive evidence which demonstrates that deprivation, alcohol outlet density, alcohol-related hospital admissions and alcohol related crime often co-exist within the same neighbourhoods, providing an important context for considering the cumulative impact of alcohol availability within Medway's town centres.

Medway experiences marked health inequalities, with significant differences in life expectancy between its most and least deprived communities. The Medway Joint Strategic Needs Assessment (JSNA) identifies deprivation as a key determinant of poor health outcomes. The most deprived areas for health in Medway run through:

- Rochester
- Chatham
- Luton
- Gillingham

Alcohol use is associated with over 60 medical conditions, from liver disease, heart disease and strokes to types of cancer, hypertension, and mental health issues. The top six wards which have the highest admission episodes for alcohol specific conditions are:

- Chatham Central and Brompton
- Gillingham South
- Luton
- Wayfield and Weeds Wood
- Gillingham North
- Fort Pitt

Evidence continues to show those areas with the highest concentration of licenced premises, particularly 'off' licenced premises in Chatham High Street and Luton Road, Gillingham High Street and Rochester High Street, suffer from the highest levels of alcohol related harms. These harms are health harms, crime, anti-social behaviour and nuisance.

Medway Council also has a Statement of Licensing Policy under the Licensing Act 2003 available here: https://www.gravesham.gov.uk/directory-record/177/medway-statement-of-licensing-policy, which guides decisions on alcohol sales, late-night refreshment and regulated entertainment licences. The current policy covers May 2023 to April 2028 and includes provisions on cumulative impact areas, stress areas, licensing objectives, planning considerations and enforcement.

This document, at Sections 5.38 onwards, recognises that there is evidence that many convenience stores, corner shops and newsagents have an over reliance on the sale of alcohol, particularly cheap beer, lager and cider known as 'super strength' products over 5.5% alcohol by volume (ABV). Over recent years Medway has become increasingly aware of the problems experienced in our local communities arising from the availability of alcohol for sale at local shops for consumption off the premises. The public face of these problems shows itself in congregations of street drinkers, consuming alcohol in public places causing nuisance, anti-social and intimidating behaviour at all times of the day and night. The hidden harms of the ready availability of cheap alcohol manifests itself in unacceptable rates of domestic abuse and alcohol health harms, such as alcohol related hospital admissions and ambulance callouts where alcohol has been deemed to be a contributory factor, particularly in the more deprived areas, and where there are concentrations of these type of premises.

Shops selling alcohol can be a focus of antisocial behaviour, disorder and disturbance, both in our town centres and residential neighbourhoods. They can cause problems including consumption of alcohol all day in public by groups of street drinkers who engage in antisocial behaviour, to the detriment of our residents and visitors.

Shisha Lounges

Smoking remains the biggest preventable cause of death and disease in England.[i] It damages and cuts lives short throughout the whole of the life course; from increasing the risks of stillbirths and childhood asthma, to cancers, circulatory, and respiratory diseases in adulthood, and dementia in older age.

Despite smoking being less widespread amongst the general population, it remains more common amongst people who are affected by social, economic, and health disadvantages. The extra expenditure on smoking can take families below the poverty line and limit the life chances of children, stopping them from reaching their potential for achievement and growth.[ii]

While smoking cigarettes is the most common way of using tobacco in the UK.[iii] The way people from different ethnic backgrounds use tobacco varies considerably. Some ethnic minorities are substantially more likely to use smokeless tobacco (in particular, South Asian Britons) and shisha pipes (in particular, Middle Eastern and South Asian Britons).

Shisha, also known as hookah, water pipe, narghille or hubble bubble, have traditionally been used to smoke tobacco in the Middle East. However, there has been a global resurgence of waterpipe smoking. Shisha bars have become particularly popular among young people from ethnic minority groups in the United Kingdom.[iv]

Shisha can be used to smoke a number of substances. Whilst they are largely used to smoke tobacco, which may be flavoured with fruits or sugar syrup, herbal mixtures are also commonly used. The latter do not contain nicotine, but smoking herbal shisha is as harmful to health as smoking tobacco shisha, as both involve burning charcoal and inhaling the smoke.[v]

There are several misconceptions regarding the use of shisha and their impacts on our health, with many people believing smoking shisha is less harmful than smoking cigarettes. Although shisha smoking has not yet been as extensively researched as cigarette smoking, the existing research suggests that it is associated with many of the same risks as cigarettes and may incur some unique health risks too.[v]

Shisha has been associated with a range of harmful health impacts, including both long and short term effects. In the short term, just 45 minutes of shisha use can significantly increase exposure to CO, plasma nicotine, increase heart rate and in frequent users,

common colds or bronchitis can develop. CO poisoning has also been noted among shisha users, an occurrence which is relatively uncommon in cigarette research.[v]

In the long-term, health conditions including cardiovascular damage, infections, cancer and metabolic syndromes are more likely to develop. Smoking shisha has also been reported to more than double one's risk of developing lung cancer, respiratory illnesses and gum disease.[v] Second-hand smoke from shisha also poses a serious risk to the health of non-smokers too.[v]

Data collected in 2023 shows that 15% of people of South Asian ethnicity, 8% of Black/African/Caribbean people, and 11% of those identifying as other or mixed ethnicity, use shisha pipes once a year or more. In comparison, usage in the white population is 2%.[vi] As with other non-smoked tobacco products, use of shisha is more heavily concentrated among smokers than among never smokers or ex-smokers.[vii] Since the smoking ban, Shisha use has increased by 210% in the UK.[viii]

In the 2026 ASH Smokefree GB Youth Survey on vaping among 11–17-year-olds in Great Britain, about one in twenty young people report having tried shisha (5%), most of whom have tried it only once or twice (3.4%). 0.3% of young people use shisha more than once a month. Less than half of young people (45%) have heard of shisha.[ix]

The Tobacco and Vapes Act will be a landmark step in creating a smoke-free UK. It will introduce a smoke-free generation by gradually phasing out the sale of tobacco products across the country: the bill makes it an offence to sell tobacco products, herbal smoking products and cigarette papers to anyone born on or after 1 January 2009. Children born on or after this date will never be able to be legally sold tobacco products, breaking the cycle of addiction and disadvantage. The products in scope include: waterpipe tobacco products (for example, shisha). [x]

The Khan review 'Making smoking obsolete' which is was Independent review into smokefree 2030 policies by Dr Javed Khan OBE, also raised concerns around shisha and suggested that alternative tobacco products such as shisha need enhanced enforcement.[xi]

Payday lenders, betting shops and amusement arcades

Gambling is increasingly recognised as a public health issue because its harm extends far beyond financial loss (Office for Health Improvement and Disparities, 2025).

Evidence shows that gambling can adversely affect mental health, contributing to stress, anxiety, depression, relationship breakdown, family conflict, debt, housing insecurity and reduced quality of life for individuals, families and communities. The National Institute for Health and Care Excellence (NICE) recognises gambling-related harm as a health condition requiring identification, assessment and treatment, and highlights the stigma, shame and barriers to seeking support experienced by those

affected. Gambling is also associated with an increased risk of suicide and suicidal thoughts.

The Office for Health Improvement and Disparities (OHID) has identified gambling as a significant public health issue because of evidence linking gambling-related harm to poorer mental health outcomes, debt, family breakdown, reduced wellbeing, homelessness and suicide. Harms extend beyond individuals experiencing gambling problems and can affect families, communities and wider society

Consequently, a growing body of evidence supports a population-level approach to reducing exposure to gambling-related harm, similar to other recognised public health risks.

Qualitative research consistently links gambling to significant financial harm, often affecting not only the gambler but also close family members. Children are also negatively affected by the financial instability caused by gambling related harm. Furthermore, The NHS identifies that gambling can harm many other areas of life, including mental health.

Many of Medway's Wards have high levels of deprivation and unemployment. Analysis by Public Health England in 2021 and the Problem Gambling Severity Index (PGSI) suggests that harmful gambling is associated with people who are unemployed and among people living in more deprived areas.

In Medway, we recognise the scale of the issue and alongside Policy T27 we are currently working on a Healthcare Needs Assessment (HNA) in respect of gambling which will include a qualitative study on lived experience of gambling related harm from the gambler and affected others. This is anticipated to be published in April 2027.

The Problem Gambling Severity Index (PGSI) categorizes individuals based on their gambling behaviour and the consequences of their gambling. These are categorised as:

- 0: Non-problem gambling
- 1-4: Low level of problems with few or no identified negative consequences
- 5-7: Moderate level of problems leading to some negative consequences
- 8 or more: Problem gambling with negative consequences and a possible loss of control

Survey data from the Gambling Survey for Great Britain (GSGB) shows that in Medway, of adults aged 18 over spending money on gambling, 2.3% fall within Category 8 or more (Local Authority-level estimates of gambling participation, NHIR Policy Research Unit).

Breakeven charity has also calculated referrals in Medway for gambling, shown in the table below.

Combined overview

New referrals	23'24	24'25	25'26	26'27*
Tier 2	25	85	51	2
Tier 3	46	38	32	7
Combined	**71**	**123**	**83**	**9**

Combined demand across complete years changed from 71 in 23'24 to 83 in 25'26.

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[i] Office for Health Improvement and Disparities (OHID). (2022) Smoking and tobacco: applying All Our Health. Published online April 5, 2022. https://www.gov.uk/government/publications/smoking-and-tobacco-applying-all-our-health/smoking-and-tobacco-applying-all-our-health

[ii] Action on Smoking and Health (ASH). (2019) Health Inequalities and Smoking. https://ash.org.uk/uploads/ASH-Briefing_Health-Inequalities.pdf#:~:text=Smoking%20remains%20the%20single%20biggest%20preventable%20cause%20of,hospital%20admissions%20in%20England%20were%20attributable%20to%20smoking.5

[iii] ASH (2024) Tobacco and Ethnic Minorities. Fact sheet.

[iv] ASH YouGov Research. SA sample: All figures, unless otherwise stated, are from YouGov Plc. The figures have been weighted and are representative of South Asian GB adults (aged 18+).

[v] ASH (2024) Tobacco and Ethnic Minorities. Fact sheet.

[vi] ASH YouGov Research. Main GB sample: All figures, unless otherwise stated, are from YouGov Plc. The figures have been weighted and are representative of GB adults (aged 18+).

[vii] ASH YouGov Research. Main GB sample: All figures, unless otherwise stated, are from YouGov Plc. The figures have been weighted and are representative of GB adults (aged 18+).

[viii] Kadhum et al., (2015) A review of the health effects of smoking shisha Clin Med (Lond).

[ix] ASH (2026) Use of vapes and other novel tobacco and nicotine products among young people in Great Britain. Fact sheet.

[x] DHSC (2024) Policy paper. Tobacco and Vapes Bill: creating a smoke-free UK and tackling youth vaping factsheet. Accessed: https://www.gov.uk/government/publications/the-tobacco-and-vapes-bill-creating-a-smoke-free-uk-and-tackling-youth-vaping/tobacco-and-vapes-bill-creating-a-smoke-free-uk-and-tackling-youth-vaping. Accessed: 13.10.26

[xi] Dr Javed Khan OBE. (2022). The Khan review Making smoking obsolete Independent review into smokefree 2030 policies. https://assets.publishing.service.gov.uk/media/62a0c3f38fa8f503921c159f/khan-review-making-smoking-obsolete.pdf

Planning Inspectorate

Appeal Decision

Site visit made on 7 October 2026

by Elizabeth Lawrence BTP MRTPI

an Inspector appointed by the Secretary of State

Decision date: 26 October 2026

Appeal Ref: 6014100
130 High Street, Gillingham, ME7 1AS

- The appeal is made under section 78 of the Town and Country Planning Act 1990 (as amended) against a refusal to grant planning permission.
- The appeal is made by Mr D Wilson against the decision of Medway Council.
- The application Ref is MC/26/0815.
- The development proposed is for change of use from shop (Class E) to betting office (Sui Generis).

Decision

1. The appeal is dismissed.

Preliminary matters

2. Since the appeal application was refused the National Planning Policy Framework 2024 has been replaced by the National Planning Policy Framework Plan-making and national decision-making policies August 2026 (Framework). Policies DM4, TC2, DP3.2 and HC6 of the newly published Framework are broadly consistent with paragraphs 49, 90, 96 and 102 of the 2024 Framework. As such the publication of the new Framework has not affected my ability to determine this appeal. For the avoidance of any doubt, I confirm that in this decision I have referred to the 2026 Framework.

3. In relation to the appeal proposal, policies S16, S19 & T27 of the Draft Medway Local Plan 2041 (Regulation 19) (DLP) are largely consistent with plan making policies E1 1.a.b., TC1 1.a.b. and HC1.1. of the Framework. Accordingly, having regard to policy DM4 of the Framework, I give them a moderate amount of weight.

Main Issues

4. The first main issue is the effect of the proposal on the retail function of the High Street. The second main issue is the effect of the proposal on the health and well-being of the local community.

Reasons

Retail function

5. The appellant's current betting office is located at the eastern end of High Street, which is not pedestrianised and where there is a concentration of non-retail uses. It is outside the central pedestrianised area of Gillingham's District Shopping Centre (District Centre). Conversely, the appeal premises occupy a prominent position within the central pedestrianised area which is dominated by Use Class 'E' uses.

The appeal premises were previously occupied by Holland & Barrett who vacated the premises in January 2026. The appellant is seeking to move their existing betting shop and associated license to the appeal premises and to upgrade the facilities they offer.

6. The appellant has pointed out that prior to 2020 betting shops fell within use class A2, which included uses that were acceptable within Town and District centres. However, within the new use classes betting shops and casino's etc, fall outside the new Class E uses class and are now classified as Sui-generis. This brought them under the control of local authorities. Amongst other things, this was done to prevent the clustering and overconcentration of such uses, taking account of their cumulative impact, legitimate local concerns and their likely impact on the vitality of centres.

7. The Medway Local Plan 2003 (MLP) identifies High Street Gillingham as an accessible District Centre that is centred on its linear High Street. It includes a broad range of units with potential for new investment in convenience floorspace. MLP Policy R5 supports a range of uses appropriate to a District Centre provided they support the vitality and viability of the centre as a whole. MLP Policy R17 allows for changes of use at ground floor level within and on the edge of the core area of Gillingham. This is provided the addition of the new use within any part of the District Centre would cumulatively not have a detrimental effect on the character and retail function of the District Centre or visual amenity.

8. Together and amongst other things DLP Policies S16 & S19 advise that the District Centres, including Gillingham, provide essential services and community uses to support sustainable living and creating efficiencies in linked trips. The council will maintain a balance of uses appropriate and reflective of the character, scale and role of the centres. Gillingham District Centre caters of the needs of residents. Opportunities for diversification and regeneration which includes the co-location of community facilities to improve accessibility and convenience are supported. Similarly, creating opportunities for a greater variety of uses, including culture, on the High Street that increases dwell time are supported.

9. The proposal would make full use of an existing vacant building in the District Centre. Whilst this weighs in favour of the proposal, the scheme would result in their current premises becoming vacant. The appellants existing premises sit on the edge of the centre in an area that is dominated by non-retail uses and situated outside the main pedestrianised retail area. Conversely the appeal premises occupy a prominent position well within the main pedestrianised retail area. Whilst no marketing details for the appeal premises have been provided retailers and in particular High Street retailers are more likely to be attracted to the appeal premises than the appellant's current premises.

10. Policy TC2 of the Framework states that substantial weight should be given to the benefits of supporting the overall vitality and viability of town centres. This includes where this can be achieved through the diversification of uses and retaining access to local shops and facilities for the community. Amongst other things policy HC6 of the Framework seeks to prevent the loss of key community facilities. In relation to shops evidence should be provided that reasonable steps have been taken to market the property for its existing use, for a period of at least 12 months.

11. The betting shop footfall and interviewing analysis submitted by the appellant, demonstrates a strong footfall and that that a significant proportion of customers visit other facilities. However, the survey was undertaken over 10 years ago; and weather conditions were not provided. It does not cover the full week; state how and why the shops referred to were chosen; or whether there were other betting shops in the centres concerned. It is also not stated in what ways the district centres in Birmingham and Southampton are comparable to Gillingham District Centre. Whilst this limits the weight I can give to the analysis, it is reasonable to assume that the proposed betting office would attract a good footfall and that most customers are likely to make dual trips occasionally or frequently.

12. As evidenced by the existing betting shops and slot machine/casino's premises in the District Centre, they are uses where shop fronts are typically dominated by posters/advertisements and views into the premises are largely restricted. Access to them is also restricted to adults. Conversely shops and many Class E town centre uses include a combination of varied shop window displays, advertisements and/or direct views into the units. They also attract a wider sector of the community and encourage people to dwell and browse from the street. The more diverse the range of shops and uses in the District Centre, the more people will likely be attracted to and remain within it.

13. Policy TC2 of the Framework states that substantial weight should be given to supporting the overall vitality and viability of the centre and improving and retaining access to shops and other facilities which provide day-to-day services for the community.

14. In May 2026 the council undertook a survey of the District Centre, which showed that 9% of the units within 100 metres of the appeal site are used for betting shops, or amusement arcade/casino uses. The proposed betting office would increase this percentage to 11%. Should the use of the appellants current premises change from a betting office to a Class E use, it would still result in a concentration of betting offices within this stretch of the main retail pedestrianised area. There would be three betting shops, and the proposed betting shop would also be located within approximately 50 metres of two amusement arcade/casino uses.

15. As a result of these factors the proposal would result in an over-concentration of betting shops and amusement/casino uses within the main retail and pedestrianised area of this part of the District Centre.

16. The proposal would also result in the loss of a retail unit located within a prime position within the District Centre. This would reduce and weaken the retail offer within the main retail area, which would have a negative impact on the overall vitality and viability of the District Centre. The appellant has pointed out that there are several vacant retail units in the District Centre, although I noted that most were located towards its periphery rather than the prime retail areas. The appeal site is located in a prime position in the town centre and little evidence has been submitted to demonstrate that it would not attract a new retail business.

19. For these reasons I conclude on the first main issue that the proposal would undermine and have an unacceptable impact on the retail function of the High Street. It would conflict with MLP Policy 17, DLP policies S16, S19 & T27 and policies TC2 & HC6 of the Framework.

Health and Wellbeing

20. The harm that can be caused to health and wellbeing by gambling is well documented. Gillingham has been described as including deprived neighbourhoods and as a community already facing significant social and economic challenges. Numerous concerns have been expressed regarding various harms that can be associated with gambling, and which already have an impact on the character and vitality of the District Centre and the wellbeing of the community.

21. The council has advised that the Gillingham Town Centre Masterplan & Delivery Strategy 2019 showed that retailers, shoppers and residents felt that the town centre was dominated by betting offices, charity shops and takeaways that were identified as not needed. Anti-social behaviour was identified as a massive problem. The Masterplan concludes that the centre has been under-performing over a period of time and highlights the importance of improving and nurturing the offer from the High Street. This is to meet the needs of the local community.

22. The Town Centre and Markets Manager has advised that one of the key aims of the Town Centre and Action Plan is to improve the look and feel of the District Centre, encouraging a diverse mix of businesses and services. This is to contribute to additional footfall and economic growth with supporting future social regeneration. As stated in the appeal documentation the town centre has a large student and family customer base, which was evident at the time of my site visit and reflected in the proximity of various community facilities and services.

23. DLP Policy T27 seeks to maintain and improve health and wellbeing, encourage healthy lifestyles and tackle the causes of ill-health and inequalities. Development that would have an unacceptable impact on health or wellbeing will not be permitted. The council will seek to manage the concentration and mix of specific premises to support healthier communities. In particular the location and concentration of a number of uses including betting shops will be carefully managed to avoid possible adverse impacts on health and wellbeing. Where the use is justified, acceptability will be informed by the location.

24. Policy DP3 2.a & f of the Framework similarly support healthy, mixed, vibrant and integrated communities and public spaces that are safe, secure, inclusive and accessible for all. Section 16 of the Framework promotes healthy communities and within this context policy HC6 of the Framework seeks the retention of key community facilities including shops.

25. The proposed betting shop would occupy a highly visible position in the town centre. It is a busy part of the High Street, with public seating and cafes with associated outside seating in the immediate vicinity. This together with the nature of the existing nearby shops, attracts a broad range of the community including families. young people and the elderly. It is also an area where people meet up and/or congregate. Accordingly, it is a good location to promote a business and attract new and existing customers.

26. As stated elsewhere in this decision, there is already a concentration of gambling establishments in the town centre as a whole. Excluding the appellants existing premises this includes a betting shop, a casino and a slot machine venue within 70 metres of the appeal site. Due to its location, both individually and cumulatively the proposed betting shop would promote, encourage and facilitate gambling and in

particular by potentially vulnerable people. This poses a material risk of having an unacceptable impact on their health and wellbeing, as well as that of their families and the local community. This is not a matter that could be satisfactorily dealt with by condition.

27. As a result of the loss of a retail unit within the prime retail area, the proposal would weaken the retain function of the District Centre. This would reduce its ability to meet the needs of the local community.

28. For these reasons, I conclude on the second main issue that the proposal would present an unacceptable risk of harm to the health and wellbeing of the local community. It would conflict with DLP Policy T27 and policies TC2 and DP3 2.a & f of the Framework.

Planning Balance

29. In favour of the proposal, the appeal premises are currently vacant, and the proposal would result in the maintenance of the property. For the reasons set out in paragraph 9 of this decision, these are benefits to which I give modest amounts of weight. I similarly give a modest amount of weight to both the local economic benefits of the proposal and the benefits for customers resulting from the proposed betting shop's more central position and enhanced internal facilities.

30. Conversely, I give substantial weight to the actual and potential harm that would be caused to both the vitality and viability of High Street and the health and wellbeing of the local community. This harm substantially outweighs the above benefits. Further, having regard to my conclusions on both main issues and all other matters raised the proposal would conflict with the development plan as a whole.

31. Finally, the proposal conflicts with the economic and social objectives of sustainable development as set out in the Framework. At the same time, the benefits of the proposal would be substantially outweighed by the adverse effects, when assessed against the national decision-making policies of the Framework.

Conclusion

32. For the reasons set out above, I conclude that the appeal should be dismissed.

Elizabeth Lawrence

INSPECTOR