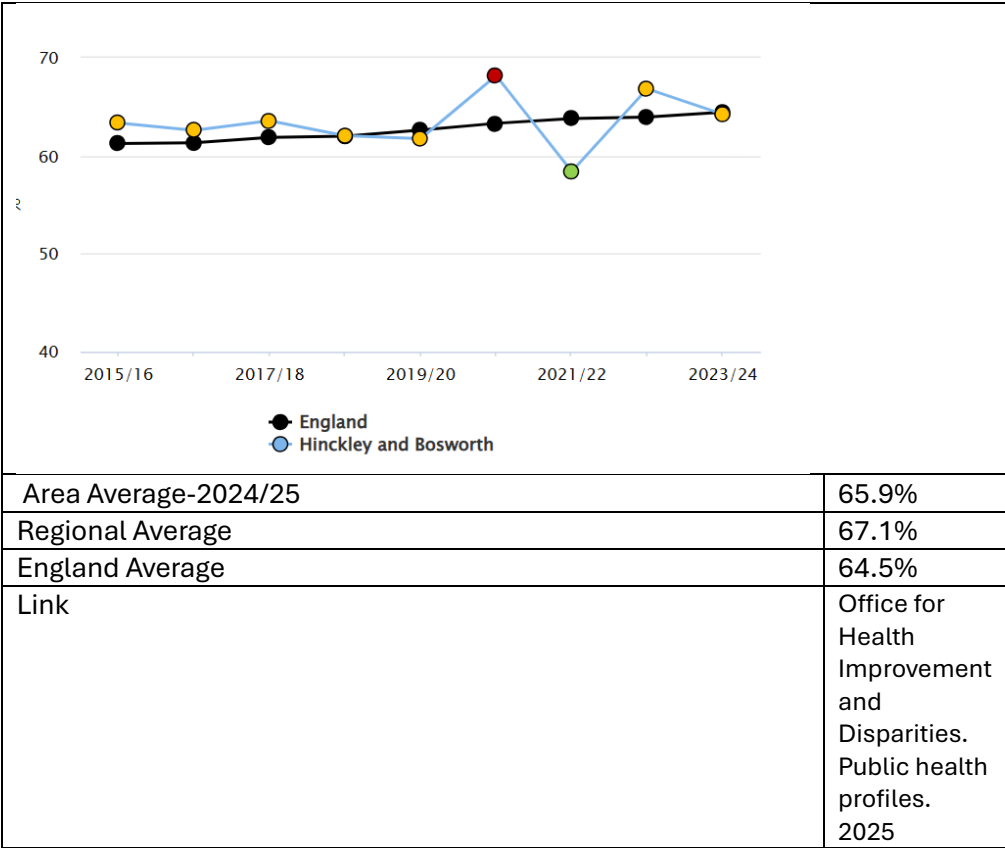


ADDITIONAL HFT APPLICATION RESPONSE INFORMATION HIGHLIGHTING HEALTH CONCERNS FOR THE AREA

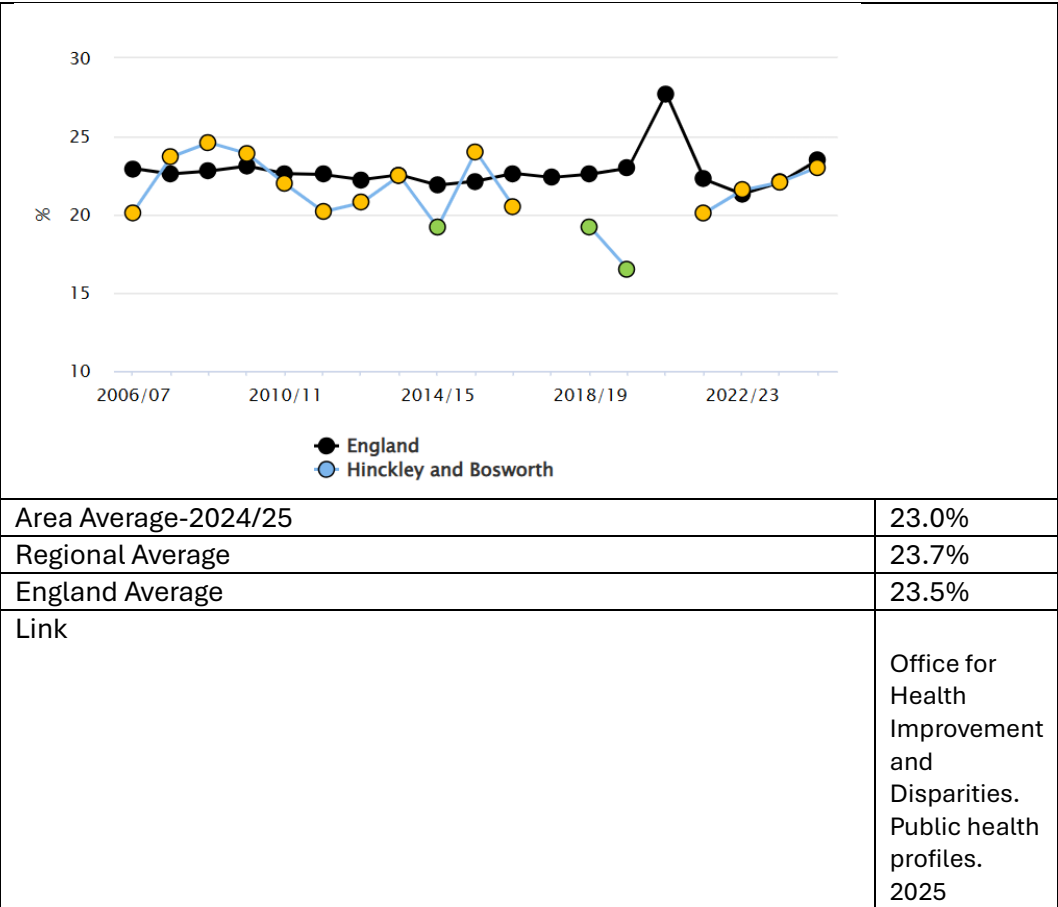
ADULTS OVERWEIGHT (Aged 18+)



● Better 95% ● Similar ● Worse 95% ● Lower 95% ● Similar ● Higher 95% ○ Not applicable ▲ Data quality concerns

Recent trends: — Could not be calculated ➡ No significant change ⬆ Increasing & getting worse ⬆ Increasing & getting better ⬇ Decreasing & getting worse ⬇ Decreasing & getting better ⬆ Increasing ⬇ Decreasing

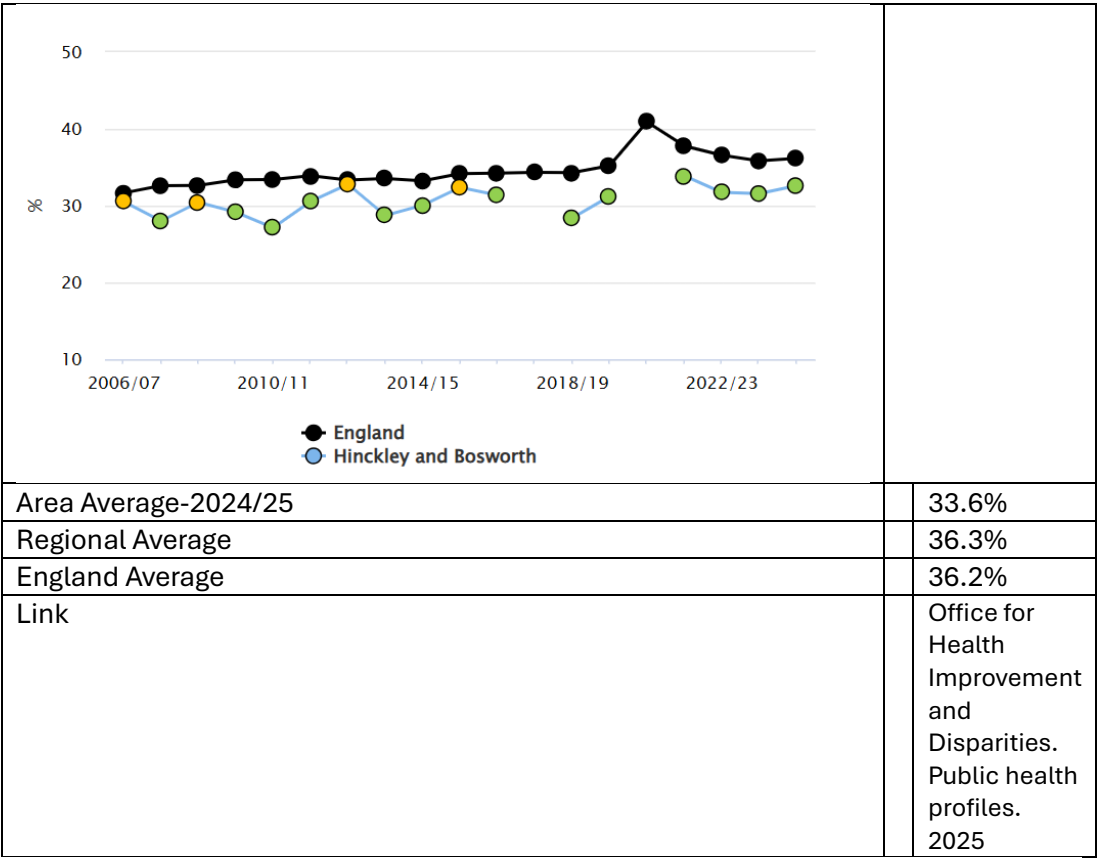
RECEPTION PREVALENCE OF OVERWEIGHT (INCLUDING OBESITY) (4-5 YEARS)



● Better 95% ● Similar ● Worse 95% ● Lower 95% ● Similar ● Higher 95% ○ Not applicable ▲ Data quality concerns

Recent trends: — Could not be calculated ➡ No significant change ⬆ Increasing & getting worse ⬆ Increasing & getting better ⬇ Decreasing & getting worse ⬇ Decreasing & getting better ⬆ Increasing ⬇ Decreasing

YEAR 6 PREVALENCE OF OVERWEIGHT (INCLUDING OBESITY)



● Better 95% ● Similar ● Worse 95% ● Lower 95% ● Similar ● Higher 95% ○ Not applicable ⚠ Data quality concerns

Recent trends: — Could not be calculated ➡ No significant change ⬆ Increasing & getting worse ⬆ Increasing & getting better ⬇ Decreasing & getting worse ⬇ Decreasing & getting better ⬆ Increasing ⬇ Decreasing

ADDITIONAL HFT APPLICATION RESPONSE INFORMATION HIGHLIGHTING HEALTH CONCERNS FOR THE AREA

Quality Outcomes framework: GP Recorded Prevalence in Leicestershire/Rutland, 2024/25 by [Business Intelligence Service](#)

Group	Disease Register		England	Leicestershire	Blaby	Charnwood	Harborough	Hinckley and Bosworth	Melton	North West Leicestershire	Oadby and Wigston
Cardiovascular	AF-Atrial Fibrillation	Prevalence (%)	2.2%	2.6%	2.6%	2.3%	3.0%	2.8%	3.2%	2.7%	2.4%
		Register 2024/25	1,427,589	20,027	2,677	4,753	2,915	3,165	1,732	3,214	1,571
	CHD-Coronary Heart Disease	Prevalence (%)	3.0%	3.0%	3.0%	2.7%	3.0%	3.1%	3.3%	3.0%	3.1%
		Register 2024/25	1,899,633	22,458	3,068	5,574	2,934	3,515	1,801	3,572	1,994
	HF-Heart Failure	Prevalence (%)	1.1%	1.5%	1.5%	1.4%	1.4%	1.6%	1.7%	1.5%	1.5%
		Register 2024/25	700,138	11,399	1,533	2,807	1,410	1,863	957	1,835	994
	HYP-Hypertension	Prevalence (%)	15.2%	17.1%	17.6%	15.3%	17.7%	17.9%	19.3%	17.5%	17.2%
		Register 2024/25	9,711,491	129,515	17,923	31,245	17,245	20,468	10,590	20,775	11,269
	LVSD-Heart Failure due to Left Ventricular Systolic Dysfunction	Prevalence (%)	0.8%	0.8%	0.7%	0.8%	0.8%	1.0%	1.0%	1.0%	0.7%
		Register 2024/25		6,362	861	1,495	741	1,132	535	1,136	462
	PAD-Peripheral Arterial Disease	Prevalence (%)	0.6%	0.5%	0.5%	0.5%	0.5%	0.6%	0.7%	0.5%	0.5%
		Register 2024/25	353,888	3,971	466	1,033	483	645	373	651	320
	STIA-Stroke and Transient Ischaemic Attack	Prevalence (%)	1.9%	2.0%	1.9%	1.8%	2.1%	2.2%	2.1%	2.0%	2.1%
		Register 2024/25	1,204,419	15,074	1,947	3,689	2,068	2,475	1,165	2,387	1,343
High Dependency	CAN-Cancer	Prevalence (%)	3.8%	4.1%	4.1%	3.5%	4.8%	4.5%	5.0%	4.0%	3.5%
		Register 2024/25	2,424,102	30,994	4,160	7,242	4,641	5,099	2,761	4,791	2,300
	CKD-Chronic Kidney Disease	Prevalence (%)	4.6%	5.5%	5.3%	4.8%	5.7%	6.1%	6.4%	5.5%	5.7%
		Register 2024/25	2,378,168	33,677	4,312	8,005	4,526	5,683	2,884	5,321	2,946
	DM-Diabetes Mellitus	Prevalence (%)	7.9%	8.1%	8.2%	7.9%	6.9%	8.3%	7.9%	8.0%	10.0%
		Register 2024/25	4,109,134	50,122	6,784	13,354	5,546	7,784	3,584	7,829	5,241
	NDH-Non-diabetic Hyperglycaemia	Prevalence (%)	9.2%	7.8%	7.3%	7.9%	8.5%	8.3%	9.4%	6.0%	8.3%
		Register 2024/25	4,713,729	47,759	5,928	13,187	6,708	7,674	4,224	5,756	4,282
	PC-Palliative Care	Prevalence (%)	0.6%	0.7%	1.0%	0.6%	0.7%	0.7%	0.8%	0.8%	0.8%
		Register 2024/25	356,543	5,500	1,024	1,214	686	751	427	904	494
Lifestyle	OB-Obesity	Prevalence (%)	13.9%	13.1%	12.1%	11.9%	12.1%	13.2%	16.4%	14.8%	13.8%
		Register 2024/25	7,119,370	80,126	9,812	19,909	9,519	12,205	7,322	14,239	7,120
Mental Health & Neurology	DEM-Dementia	Prevalence (%)	0.8%	0.9%	0.9%	0.8%	1.0%	0.9%	0.9%	0.7%	0.9%
		Register 2024/25	498,887	6,506	930	1,648	935	1,024	520	858	591
	DEP-New Depression	Prevalence (%)	14.3%	16.1%	17.7%	14.5%	15.8%	17.6%	18.4%	16.4%	14.4%
		Register 2024/25	7,317,368	98,740	14,391	24,172	12,455	16,280	8,225	15,789	7,428
	EP-Epilepsy	Prevalence (%)	0.8%	0.8%	0.8%	0.8%	0.8%	0.8%	0.9%	0.9%	0.8%

QOF Disease Prevalence (%): Lower Tier Local Authorities

Significance

■ Higher than the England Average
 ■ Similar to the England Average
 ■ Lower than the England Average
 ■ England
 ■ Not Compared

EVIDENCE SUMMARY

- Obesity in youth is a marker of increased likelihood of developing cardiovascular and metabolic diseases, such as type 2 diabetes, hypertension, dyslipidemia, and heart disease, due to a combination of risk factors. Several longitudinal studies confirm the strong association of paediatric obesity with the persistence of adult obesity and the future development of cardiovascular disease, diabetes, and increased risk of death (Chung et al 2018).
- Fast food is often rich in saturated fats, sugars and salt, which are risk factors for obesity and its co-morbidities like type 2 diabetes, cardiovascular diseases and hypertension (Public Health England, 2019). Food Foundation (2025) identified that 4 of 5 mostly commonly eaten meat-containing dishes from fast food outlets are processed and/or ultra-processed meat. Research has also shown that individuals residing in neighbourhoods with more fast food vendors have a higher BMI than those living in areas with fewer fast food vendors (Fraser et al., 2010). Meals purchased out-of-home, including foods from takeaway food outlets ('takeaways'), are typically energy dense and high in sugar and salt, but low in micronutrients, and tend to be served in large portions. Rogers et al (2024) following a research study, found that consumption of takeaway food is associated with lower diet quality, higher energy intake and body mass index (BMI), weight gain, and greater risk of obesity. This may be a result of passive over-consumption of takeaway foods, which bypass regular human satiety mechanisms. In turn, poor diet and excess weight are risk factors for diseases including type II diabetes and cardiovascular disease.
- BMJ (2024) report states that each 10% increase in the UPF proportion of total calorie intake increased the relative risk of all-cause mortality by 3%. In countries with the highest consumption of UPFs (UK and USA), where UPFs accounted for almost 55% of total calorie intake, UPF consumption was estimated to be responsible for 14% of premature deaths in 2018 (corresponding to 18 000 deaths in the UK and 124 000 deaths in the USA).
- The Town and Country Planning Association (TCPA 2024), recommends restrictions of hot food takeaways in areas of deprivation and those with high levels of overweight and obesity. Blaby District Council is amongst the 57% most deprived neighbourhoods in England according to the Index of Multiple Deprivation (IMD).
- National Planning Policy Framework (NPPF 2024), recommends planning policies and decisions should aim to achieve healthy, inclusive and safe places which enable and support healthy lives, through both promoting good health and preventing ill-health, especially where this would address identified local health and well-being needs and reduce health inequalities between the most and least deprived communities – for example through the provision of safe and accessible green infrastructure, sports facilities, local shops, access to healthier food, allotments and layouts that encourage walking and cycling.
- National Planning Policy Framework (NPPF 2024) also recommends that local planning authorities should refuse applications for hot food takeaways and fast food outlets:
 - 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.

ADDITIONAL HFT APPLICATION RESPONSE INFORMATION HIGHLIGHTING HEALTH CONCERNS FOR THE AREA

- The Royal Society for Public Health (2018) has shown in research that when fast food outlets are near schools, children tend to eat unhealthily and are more likely to grow up overweight or obese. London School of Economics (2021), in research that compared obesity results for schools sited very close to a fast food outlet (within 0.1 miles) with results for schools sited from 0.1 to 0.25 miles found that overall, siting a fast food outlet right next to a school produced a 5.2 per cent increase in obesity among students.
- While the proposed facility is near green spaces where children and young people may congregate. Increased exposure to unhealthy food options in community spaces where children congregate could reduce the effectiveness of these recreational areas in promoting active lifestyles.
- In addition, the high fat and salt content in fast food makes it addictive, and those who frequently eat it are more likely to develop poor eating habits in the future according to Swinburn et al, (2011).
- Furthermore, research has shown that late night takeaway shops are a cause of littering, noise pollution and anti-social behaviour (Graham & Homel, 2008). The overall impact of several takeaways in a given small geographic area can be detrimental to community safety and security.
- The environment we live in plays a crucial role in shaping our food choices. 'Obesogenic environments' are places where factors influence our nutrition and activity levels, leading to unhealthy habits and negative health effects According to Swinburn and Figger (1999) in the Foresight report 'Tackling Obesities: Future Choices: Unhealthy foods and drinks that are high in fat, salt, and sugar are often easier to find than healthier options. This highlights the need to create healthier food environments and 'healthy high streets' to help people make healthier choices in an easier way.

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ADDITIONAL HFT APPLICATION RESPONSE INFORMATION HIGHLIGHTING HEALTH CONCERNS FOR THE AREA

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