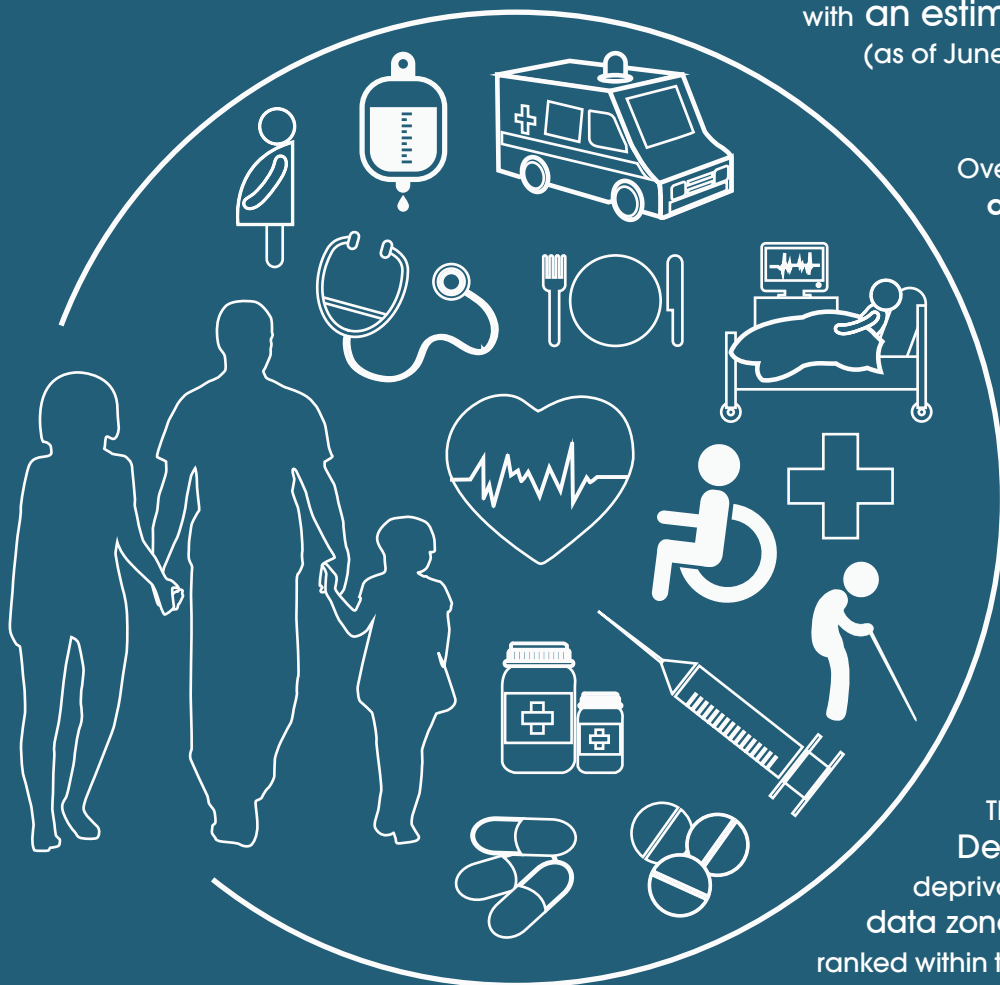


Health and Safety

Local Development Plan Topic Paper

Dundee is Scotland's **fourth largest** city with an estimated population of **147,720** (as of June 2021).



Overall **Dundee** is the **fifth most deprived** local authority area in Scotland, with **36.6%** of Dundee's population living in the **20% most deprived** data zones.

66% of Dundee's population is within the age range **16-64 years**.

Dundee has the **2nd lowest life expectancy** of **all** Scottish Local Authority areas.

The **Scottish Index of Multiple Deprivation (SIMD)** assesses deprivation levels. There are **188 SIMD** data zones in Dundee, of which **70** are ranked within the **20% most deprived** in Scotland.

Topic Paper – Health and Safety

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1. Introduction

This topic paper reviews evidence identified as relevant surrounding the topic of health and safety. This topic solely covers [National Planning Framework 4](#) (NPF4) **Policy 23 – Health and Safety**

The topic paper summarises all evidence and data identified and considers specifically its relevance to Dundee. The implications of this evidence and data have been considered and how this might inform the Proposed Plan. The conclusions set out are based on a professional judgement as to the land use planning implications of the data examined.

The topic paper also outlines consultation that has been undertaken thus far, in identifying evidence and datasets through a key stakeholder group and the current stage of public consultation.

2. Identification of Evidence/ Datasets

NPF4 Policy	Evidence/ Dataset and Source
Policy 23 Health and Safety	<u>National Planning Framework 4</u>
	<u>Dundee Local Development Plan 2019</u>
	<u>Place and wellbeing: integrating land use planning and public health in Scotland</u>
	<u>National Records of Scotland - Figures for Mid-Year Population Estimates for Scotland, mid-2021</u>
	<u>NHS Tayside Director of Public Health Annual Report 2023</u>
	<u>Dundee Health and Social Care Partnership: Strategic Commissioning Framework 2023-2033</u>
	<u>Dundee Health and Social Care Partnership: Strategic Needs Assessment September 2021</u>
	<u>Protecting People Annual Report Summary 2022-2023</u>
	<u>A Connected Scotland 2018</u>
	<u>Recovering our Connections 2023-2026</u>
	<u>National guidance on action to address suicides at locations of concern 2022</u>
	<u>Dundee Health and Social Care Partnership: Property Strategy 2022-2025</u>
	<u>Dundee Health and Social Care Partnership: General Practice Premises Strategy 2022</u>
	<u>Dundee Health and Social Care Partnership: General Practice Strategy 2024 to 2029</u>
	<u>Review of Retailing in Dundee 2023</u>
	<u>Scottish Parliament Information Centre: Fast Food Booming – A Cause for Concern?</u>
	<u>Dundee City Council: Local Food Growing Strategy</u>
	<u>Dundee City Council: Air Quality Action Plan 2011</u>
	<u>Dundee Local Development Plan 2019: Supplementary Guidance Air Quality and Land Use Planning</u>
	<u>Scottish Government: Cleaner Air for Scotland 2 - Towards a Better Place for Everyone</u>
<u>Dundee City Council: 2023 Air Quality Annual Progress Report</u>	
<u>Scottish Government: Dundee Agglomeration - Noise Action Plan 2014</u>	

3. Summary of Evidence/ Datasets

3.1 Policy Context

3.1.1 National Planning Framework 4

Improving health and wellbeing for the people and communities of Scotland is a fundamental outcome of the [National Planning Framework 4](#) (NPF4) national spatial strategy. The spatial strategy recognises that there are significant health and wellbeing inequalities in Scotland and that future development can help to address this through the delivery of sustainable, liveable and productive places. Accordingly, health and wellbeing is a cross-cutting outcome with multiple policy links, as listed below. Page 19 of NPF4 provides further detail and context surrounding the policy links.

- Policy 1 Tackling the climate and nature crises
- Policy 2 Climate mitigation and adaptation
- Policy 3 Biodiversity
- Policy 4 Natural places
- Policy 5 Soils
- Policy 6 Forestry, woodland and trees
- Policy 9 Brownfield, vacant and derelict land and empty buildings
- Policy 10 Coastal development
- Policy 11 Energy
- Policy 12 Zero waste
- Policy 13 Sustainable Transport
- Policy 14 Design, quality and place
- Policy 15 Local Living and 20 minute neighbourhoods
- Policy 16 Quality homes
- Policy 18 Infrastructure first
- Policy 19 Heat and cooling
- Policy 20 Blue and green infrastructure
- Policy 21 Play, recreation and sport
- Policy 22 Flood risk and water management
- Policy 23 Health and Safety

Policy 23 Health and Safety

Policy 23 has a particular focus on health and wellbeing. It intends to protect people and places from environmental harm, to mitigate risks arising from safety hazards, and to encourage, promote and facilitate development that improves health and wellbeing.

Successful outcomes through policy delivery would result in people's health being improved and health inequalities being reduced; human health and the environment being protected through safe places; and the delivery of health infrastructure through a planned approach.

The policy sets out the following specific requirements of Local Development Plans:

- LDP spatial strategies should seek to tackle health inequalities particularly in places which are experiencing the most disadvantage. They should identify the health and social care services and infrastructure needed in the area, including potential for co-location of complementary services, in partnership with Health Boards and Health and Social Care Partnerships.
- LDPs should create healthier places for example through opportunities for exercise, healthier lifestyles, land for community food growing and allotments, and awareness of locations of concern for suicide.
- LDP spatial strategies should maintain appropriate distances between sites with hazardous substances and areas where the public are likely to be present and areas of particular natural sensitivity or interest.

Implications for planning's Development Management are that development proposals which have a positive effect on health will be supported, e.g. proposals for health and social care facilities and infrastructure, and proposals that incorporate opportunities for exercise, community food growing or allotments. Development proposals should also be designed to take into account suicide risk.

At the same time, proposed development which is likely to have a significant adverse effect on health will not be supported, including considerations surrounding air quality, noise pollution, major accident hazard sites, major accident hazard pipelines, licensed explosive sites, and applications for hazardous substances consent. The agent of change principle applies, and Health Impact Assessments, Air Quality Assessments, and Noise Impact Assessments may be required. Advice from the Health and Safety Executive, Office of Nuclear Regulation, or Scottish Environment Protection Agency must be considered carefully in the determination of planning applications.

3.1.2 Dundee Local Development Plan 2019

Dundee City Council's current [Local Development Plan 2019](#) (LDP 2019) contains policies which respond to various health, wellbeing and safety concerns reflected in NPF4's Policy 23 Health and Safety. The policies have been identified below, including a note on the health and safety relevance.

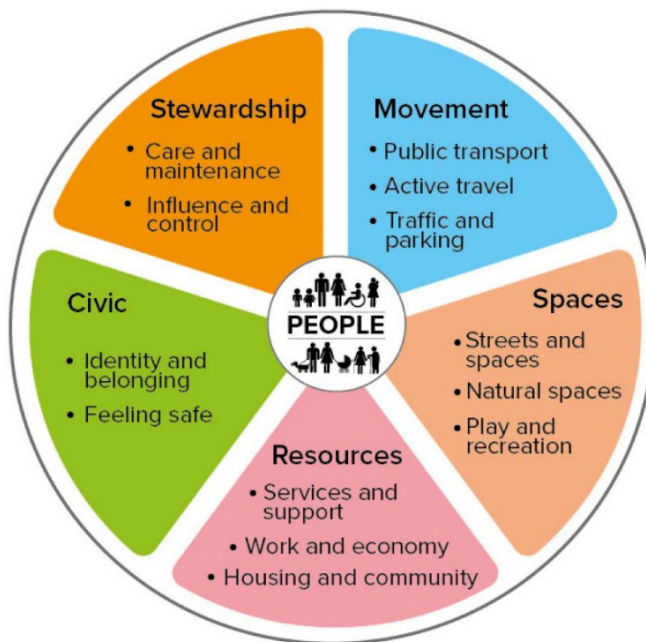
Figure 1: Local Development Plan 2019 Policy Links to Health and Safety

LDP 2019 Policy and Supplementary Guidance	Health & Safety Relevance
Policy 1: High Quality Design and Placemaking	Appendix 1: 2. Safe and Pleasant, and 3. Easy to Move Around and Beyond
Policy 10: Design of New Housing	Appendix 4: Cycle Provision and Amenity Provision
Policy 18: Community Facilities	Proximity to walking, cycling and public transport
Policy 20: Funding of On and Off Site Infrastructure Provision	Contributions to healthcare infrastructure improvements where new need is established
Policy 29: Outdoor Access and the Dundee Green Network	Protection and expansion of access to green infrastructure
Policy 39: Environmental Protection	Protection from pollution
Policy 40: Air Quality	Protection from pollution
Policy 42: Development of or next to Major Hazard Sites	Protection from major hazard sites
Policy 43: Waste Management Installations	Protection from pollution
Policy 45: Energy Generating Facilities	Protection from pollution
Policy 54: Safe and Sustainable Transport	Promotion and provision of walking, cycling and public transport
Air Quality - Supplementary Guidance	Protection from pollution

3.1.3 Place and Wellbeing Outcomes

Formed by the [Place and Wellbeing Collaborative](#), the [Place and Wellbeing Outcomes](#) provide a consistent and comprehensive set of outcomes that every place needs to enable those who live, work, and relax there to stay healthy and thrive. The outcomes centre around five key themes (as shown in the diagram below), which are underpinned by the principles of equality, net-zero emissions and sustainability. The outcomes help all stakeholders and sectors to focus decision making and implementation on a common set of evidenced features that make positive places. They provide a consistent foundation for measuring and a platform for learning about how we can all make changes in our systems, plans, policies, strategies and projects to support better places.

Figure 2: Place and Wellbeing Outcomes Diagram



Source: [Place and wellbeing: integrating land use planning and public health in Scotland](#)

3.2 Dundee's Health

3.2.1 Population Size, Composition, and Distribution

The summary presented throughout this section is compiled from the following evidence and data sources:

- [National Records of Scotland - Figures for Mid-Year Population Estimates for Scotland, mid-2021](#)
- [Dundee Health and Social Care Partnership: Strategic Needs Assessment September 2021](#)

Dundee is Scotland's fourth largest city with an estimated population of 147,720 as of June 2021. There are more females 76,500 (52%) than there are males 71,220 (48%). Overall, the estimated population has increased during the twenty years prior to 2021, however it has remained relatively constant between 2015 and 2020. Between 2020 and 2021, Dundee's population decreased marginally by -0.7% (1100 people) from 148,820 in June 2020. A trend of slight decreases in population is projected into the future, -0.3% to 2028, and -0.6% to 2043, Dundee's continuing drop in birthrates is a contributing factor.

Figure 3: Dundee Population Breakdown for 2021 and Change by Age Group Since 2011

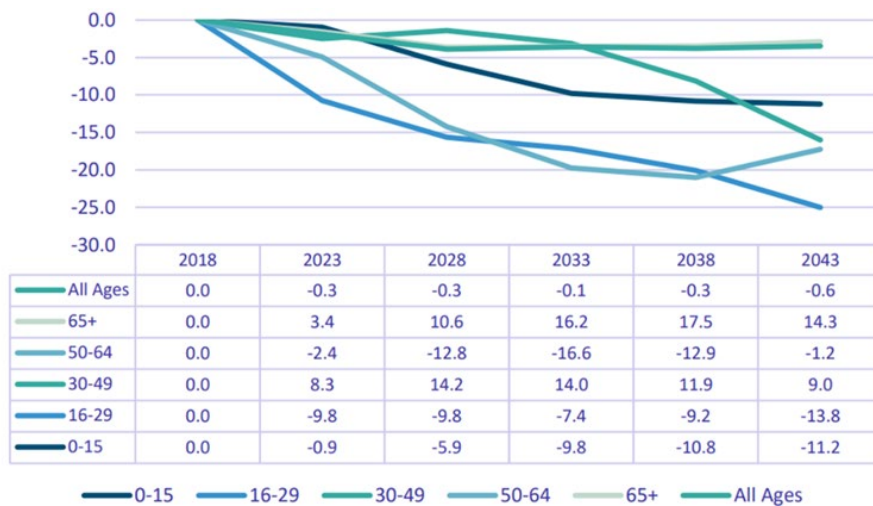
Age Range	Population 2021	Population Percentage	Percentage Change Since 2011	Scottish Average Percentage Change Since 2011
0 to 15 years	23,704	16%	0%	-0.5%
16 to 64 years	97,773	66%	-1%	0%
65+ years	26,243	18%	6%	20%

Source: [National Records of Scotland - Figures for Mid-Year Population Estimates for Scotland, mid-2021](#)

The notable difference in the increase since 2011 to 2021 of 65+ years, when compared to the Scottish average, is likely associated with Dundee's health inequalities. Nonetheless, this increase in the elderly population has significant implications for healthcare, particularly regarding the 75+ and 90+ age groups where there will be the largest increase in numbers that increasingly rely on unpaid family care, and health and social care services, as they become more frail. Conversely, the 16-64 age groups are projected to fall during the next 10 years, which may have an impact on the size of the city's working population and the economy in the medium term. Positively for Dundee, the largest proportion of its population are younger adults (aged 20-34 years), most likely a result of the significant student population, which has the potential to support the city's economic prospects.

The city's population projections to 2043 are set out in the table below. The significant increase in the elderly population and the decrease in new-born and young people is distinct.

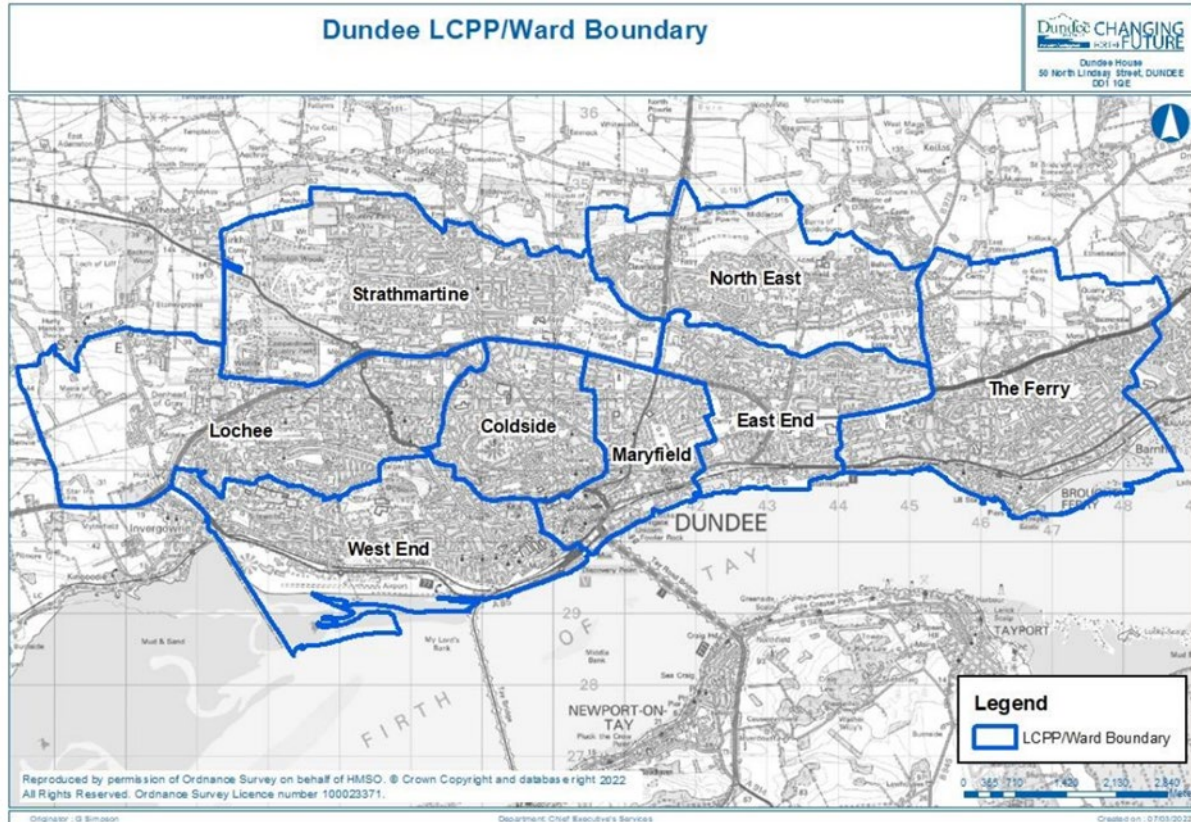
Figure 4: Dundee Projected Population by Age Group 2018 to 2043



Source: *DHSCP Strategic Needs Assessment 2021*

Geographically, Dundee’s population can be separated into various areas. Its eight Ward and Local Community Planning Partnerships (LCPPs) boundaries are commonly used, as set out in the map below. Each Ward/LCPP area has varying ethnic diversities. For data purposes the city is commonly broken down into 31 intermediate data zones (population thresholds of 2,500 - 6,000 household residents), and 188 data zones (population thresholds of 500 to 1,000 household residents).

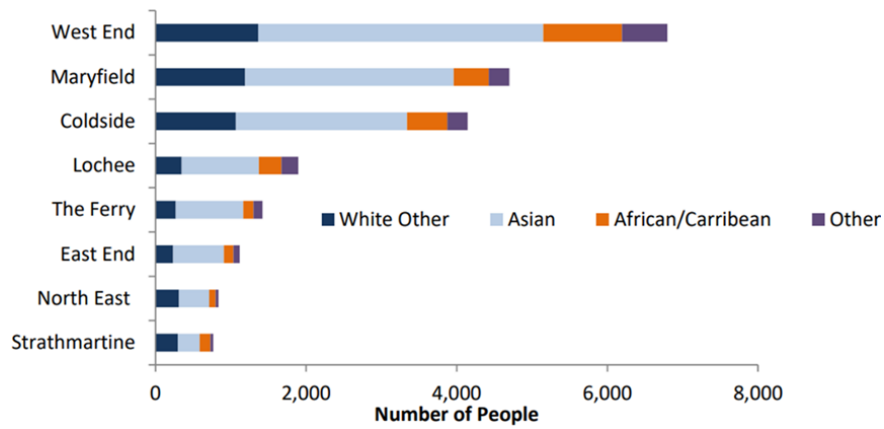
Figure 5: Dundee’s LCPP/Ward Boundaries.



Data on ethnicity is currently only available from the 2011 Census and therefore it has some limitations. Dundee’s population is predominately White British (89.4%) and 4.7% of people

class themselves as 'White Other'. This includes people who were originally from Eastern Europe or from Ireland. 4% are from Asian backgrounds and 1% are African or Caribbean.

Figure 6: Dundee City Ethnic Minority Breakdown by Ward Area – Aged Under 65



Source: [DHSCP Strategic Needs Assessment 2021](#)

3.2.2 Health Inequalities

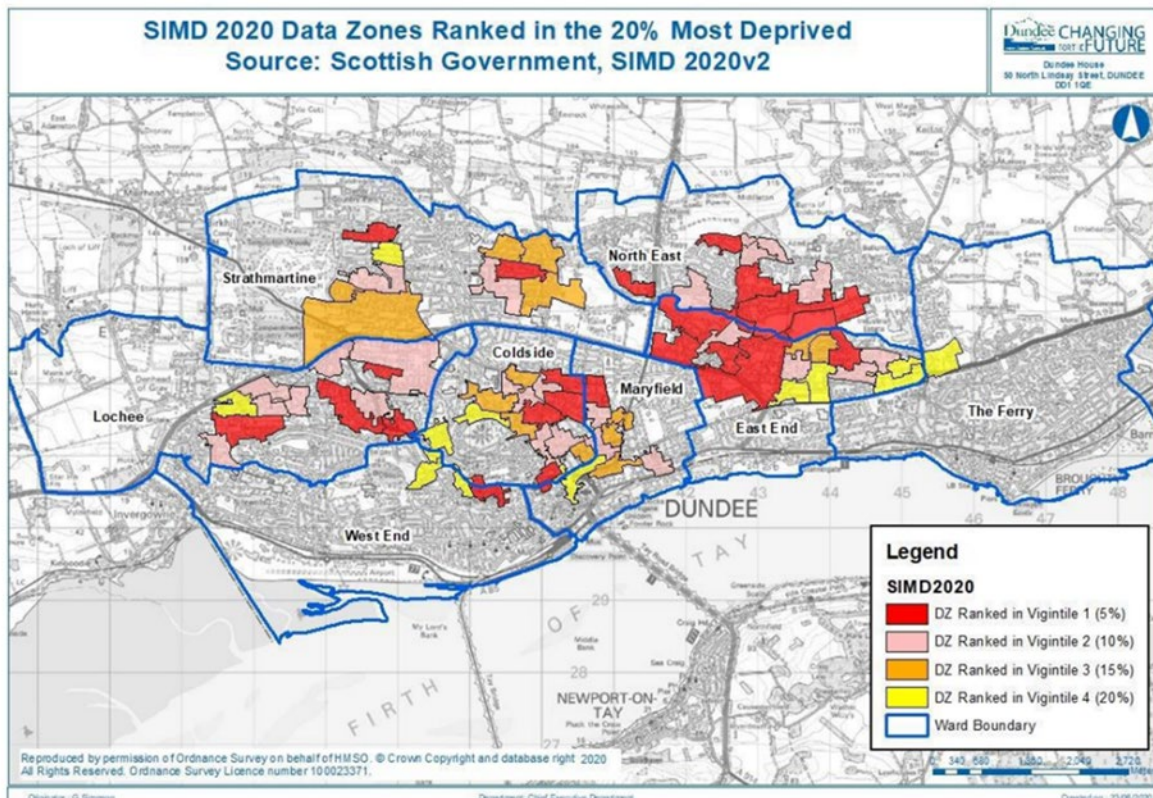
The summary presented throughout this section is compiled from the following evidence and data sources:

- [Dundee Health and Social Care Partnership: Strategic Needs Assessment September 2021](#)
- [Dundee Health and Social Care Partnership: Strategic Commissioning Framework 2023-2033](#)
- [NHS Tayside Director of Public Health Annual Report 2023](#)

Dundee does have high levels of poverty and other social issues that impact on people's health and wellbeing. Unfortunately, life expectancy for people in Dundee is getting shorter. There are also big differences between how healthy and well people are because of where they live in the city, how much money they have and due to who they are, for example, their ethnic origin, sexual orientation, disability or age. The city also has high levels of social issues that impact on the health and wellbeing of vulnerable people. This includes, drug and alcohol use, poor mental health, domestic abuse and others types of violence against women, and harm to other vulnerable adults and children.

The Scottish Index of Multiple Deprivation (SIMD) assesses deprivation levels based on seven domains: income, employment, education, health, access to services, crime and housing. A 2020 breakdown of Dundee's 20% most deprived areas is set out in the map below. There are 188 SIMD data zones in Dundee, of which 70 are ranked within the 20% most deprived in Scotland. 36.6% of Dundee's population lives in the 20% most deprived data zones (SIMD quintile 1). Overall Dundee is the fifth most deprived local authority area in Scotland, with only Inverclyde, Glasgow, North Ayrshire, and West Dunbartonshire having a higher population living in SIMD quintile 1.

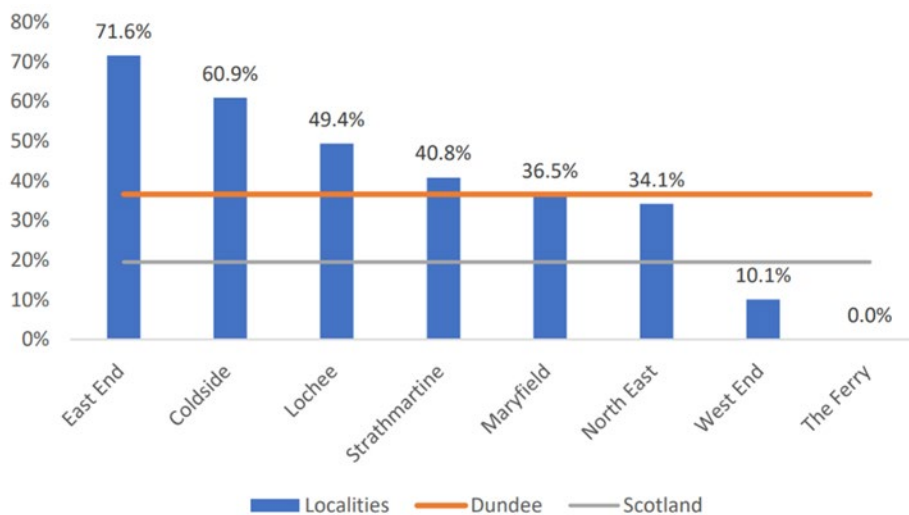
Figure 7: SIMD 2020 Data Zones Ranked in the 20% Most Deprived



Source: [DHSCP Strategic Needs Assessment 2021](#)

The following graph shows the percentage of people living in each Ward/LCPP ranked in the 20% most deprived data zones in Scotland. Four out of the eight locality areas are above the Dundee average of 36.6%. East End and Coldside are the localities within Dundee which have the highest percentage of their population living in data zones ranked the 20% most deprived. Six out of the eight locality areas are above the Scottish average (19.5%).

Figure 8: Percentage of Ward Populations in 20% Most Deprived Data Zones in Scotland 2020



Source: [DHSCP Strategic Needs Assessment 2021](#)

On a positive note, the percentage of the population living in the 20% most deprived data zone has reduced in Lochee and Strathmartine since 2016, Lochee from 53.8% to 49.4% and Strathmartine, significantly, from 49% to 40.8%.

Key Health Inequality Headline Figures

- Dundee has the 2nd lowest life expectancy of all Scottish Local Authority areas.
- The median age of people living in Dundee (38 years) is almost 10 years lower than people living in Angus and Perth & Kinross.
- Within the local authority areas in Tayside, men and women who live in Dundee City have the lowest life expectancy. Growth in life expectancy has generally stalled in Tayside and it is now starting to show a notable slowly decreasing trend in Dundee's male population.
- Males born in the most deprived areas of Dundee are likely to live 14.1 years fewer than in the least deprived. Females born in the most deprived areas of Dundee are likely to live 11.2 years fewer than in the least deprived.
- Healthy life expectancy is decreasing for Dundee males, with men born currently anticipated to live only 55.9 years in good health on average. While males living in Dundee not only have the lowest life expectancy in Tayside, they also spend the least amount of time living in good health.
- Premature mortality is three times greater in the most deprived areas in Tayside than the least deprived. Drug and alcohol-related deaths and suicide disproportionately impact people living in deprived areas.

- Dundee's Accident and Emergency attendance due to alcohol related harm is 4 times higher in the most deprived areas of the city, and its drug related hospital discharges are 20 times higher in the most deprived areas of the city.
- Dundee's East End, Lochee and Coldside wards have the highest prevalence of people with mental health conditions, physical disabilities, learning disabilities and sensory impairment. These wards also have the highest proportion of residents classified as income deprived.
- People who are affected by poverty or poor social circumstances or who have a Protected Characteristic can find it more difficult to access health and social care services. For example, the convenience and physical challenges for the elderly or those with a disability to access public transportation infrastructure, or prohibitive travel costs affecting people living in poverty.

3.2.3 Health and Social Care Needs

The summary presented throughout this section is compiled from the following evidence and data sources:

- [Dundee Health and Social Care Partnership: Strategic Needs Assessment September 2021](#)
- [Dundee Health and Social Care Partnership: Strategic Commissioning Framework 2023-2033](#)
- [NHS Tayside Director of Public Health Annual Report 2023](#)
- [Protecting People Annual Report Summary 2022-2023](#)
- [National guidance on action to address suicides at locations of concern 2022](#)
- [A Connected Scotland 2018](#)
- [Recovering our Connections 2023-2026](#)

General Health

- Due to inequalities, particularly deprivation, some people in Dundee have a need for higher levels of health and social care support at an earlier stage than people of the same age who live in more affluent parts of the city.
- Across all Local Community Planning Partnerships the average number of prescription drugs used to treat diabetes, hypertension and heart failure has increased since 2015/16. Importantly, most of the development of these conditions is preventable.
- Hospital admissions due to long-term conditions are higher for the most deprived areas of the city, especially for asthma, chronic obstructive pulmonary disease, and coronary heart disease.
- Since 2016 the number of admissions to hospital due to a stroke has been increasing. In 2016 there were 639 hospital admissions but this has steadily increased to 1,001 admissions in 2022.

Physical Activity and Child Healthy Weight

- Fewer than one fifth of Dundee Citizens reported that they undertook moderate physical activity for at least 30 minutes per day, 4+ days per week.
- 13.5% of Primary 1 age children in Dundee were at risk of becoming overweight and 11.3% were at risk of obesity.
- Dundee has the 8th lowest number of Primary 1 children in Scotland with a healthy body weight.
- Children living in the most deprived areas in Dundee are more than twice as likely to be at risk of obesity in comparison to those in the least deprived areas.
- Obesity in children and adults increases the risk of high blood pressure and high cholesterol which are risk factors for heart disease; Type 2 diabetes; breathing problems, such as asthma and sleep apnea; and joint problems such as osteoarthritis and musculoskeletal discomfort.
- Childhood obesity is also associated with psychological problems such as anxiety and depression; low self-esteem and lower self-reported quality of life; and social problems such as bullying and stigma.

Diabetes

- 5.5% of the Tayside population are living with type 2 diabetes.
- The incidence of type 2 diabetes has increased by 48% over the last ten years.

- It is estimated that 1 in 3 adults are at high risk of developing type 2 diabetes.
- Weight loss (and preventing weight gain) is central to the prevention, management and (in some cases) reversal of type 2 diabetes.

Housing and Homelessness

- Dundee has the 8th highest rate of homelessness applications in all Scottish Local Authority areas.
- Dundee has fewer owner occupiers and more people living in rented accommodation than the rest of Scotland.

Drugs and Alcohol

- Dundee has the 2nd highest drug death rate of all Scottish Local Authority areas.
- 38 drug deaths in 2022 (25.6 per 100,000 population).
- 37 alcohol-specific deaths in 2022 (24.9 per 100,000 population).
- Rates of hospital admission due to alcohol and drug use are high, with a higher proportion of people who need support living in the most deprived areas of the city.

Cancer

- The number of people living with or dying from cancer is rising. It is estimated that 1 in 2 people will be diagnosed with (but not necessarily die from) a cancer in their lifetime. The prevalence of cancer varies by deprivation and age group.
- High rates of cancer and of long-term and multiple health conditions has increased demand for palliative and end of life care. This includes enhanced support for unpaid carers providing end of life care, as well as bereavement support.

Elderly People

- Dundee expects to see a 38% increase in the population aged 75 years and over by 2043.
- Due to inequalities, particularly deprivation, many people in Dundee enter older age with pre-existing health conditions.
- Around 1 in 10 people aged 65 or over has dementia. Due to the pandemic the proportion of people who received a minimum of 12 months post diagnostic support after their diagnosis reduced from 97% to 68%.
- Dundee has the highest admissions to hospital rate for falls in all Scottish Local Authority areas. As at 2020 the rate was 30.7 per 1,000 people aged 65 and over.
- For people receiving home care services, an average of 45% had an emergency admission to hospital in the 28 days before the service started.
- In 2021/22 half of the people admitted to care homes had experienced an emergency admission to hospital within the 28 days beforehand.

Mental Health

- Dundee has the 5th highest rate in all Scottish Local Authority areas of adults (aged 16-64 years) who reported in the 2011 Census that they are living with a mental health condition.
- Isolation and reduced mobility during the pandemic for people who were already frail increased demand for support amongst those already receiving services and also for those who had not previously required support.
- 1 in 5 respondents to the Engage Dundee survey reported a worsening of existing mental health conditions, this was highest for people aged 25-34.

- In Dundee, in 2022, 29 people died by probable suicide, this is an increase of four people from 2021. The rate of suicide in Dundee was higher than the Scottish average and third highest in Scotland. Suicide rates for males are still twice as high as females however it is worth recognising that female deaths across Scotland in 2022 increased by 18 and males decreased by 9 on the previous year.

Public Health Scotland have produced online 'National guidance on action to address suicides at locations of concern', which includes guidance around [planning considerations](#). There may be organisational and/or public resistance towards proposed actions which address locations of concern, such as visual or aesthetic disruption to an iconic natural or historical site, a lack of awareness about intervention effectiveness, inconvenience to the public, or cost and cost-effectiveness. Overcoming this resistance may require community and key stakeholder consultation, which should emphasise the need to promote actions based on a moral and ethical duty to prevent deaths. Detailed guidance is also provided regarding [Integrating suicide prevention measures into infrastructure development](#).

Social Isolation and Loneliness

- Social isolation and loneliness (SIAL) is a public health issue within Scotland, with 1 in 10 people often feeling lonely.
- SIAL can potentially impact anyone at every age and stage of life, but specific groups within the population are at greater risk, including the young, elderly, disabled, deprived, digitally excluded, people living alone, people lacking access to green spaces, and those suffering from health and mental health issues.
- There is strong evidence that SIAL increases the risks of older adults developing physical health conditions such as cardiovascular disease and stroke, and mental health conditions such as cognitive decline, dementia, depression, anxiety, suicidal ideation and suicide. Regardless of age there is a risk of developing certain mental health problems, such as anxiety and depression, which is associated with increased thoughts of suicide.
- 'A Connected Scotland' is the Scottish Government's national strategy for tackling the issue, building social connections, and improving health and wellbeing.
- Everyone has a role to play in tackling this issue, including individuals, communities, local authorities, health boards and other community planning partners, third sector and social enterprise, and businesses.
- The planning system has a vital role to play in delivering high-quality, connected, places for people. High-quality buildings, infrastructure and spaces in the right locations helps provide choice over where to live, style of home, access to amenities and services, and choice to live more active, engaged, independent and healthy lifestyles. Such positive places help to support vibrant communities with opportunities for greater social interaction for people of all ages.
- Creating a network of 20 minute neighbourhoods can help tackle SIAL through better connected communities where people are able to meet the majority of their daily needs by walking, wheeling, cycling or sustainable transport.

Domestic Abuse and Violence Against Women

- Dundee has the highest prevalence rate of domestic abuse in all Scottish Local Authority areas.
- Third sector organisations in 2022/23 supported 2,191 women and 211 children and young people.

Carers

- 62% of adult carers supported by local carer services provide an average of 50 or more hours of care per week. 72% of carers reported poor mental health, and the same percentage said their physical health had got worse.
- As a result of the pandemic, 84% of carers reported negative impacts on physical, mental and social wellbeing, and 60% reported feeling socially isolated.
- From school data there are 742 young carers in Dundee.
- 65% of young carers supported by local carer services provide up to 19 hours of care per week.

3.2.4 Health Infrastructure

The summary presented throughout this section is compiled from the following evidence and data sources:

- [Dundee Health and Social Care Partnership: Strategic Commissioning Framework 2023-2033](#)
- [Dundee Health and Social Care Partnership: Property Strategy 2022-2025](#)
- [Dundee Health and Social Care Partnership: General Practice Premises Strategy 2022](#)
- [Dundee Health and Social Care Partnership: General Practice Strategy 2024 to 2029](#)

Health and Social Care services and supports are delivered from places that are owned by Dundee City Council and NHS Tayside but can also be buildings owned by the third and independent sector. Across the Dundee Health and Social Care Partnership services and supports are delivered from a wide range of different places, as outlined in the table below.

Figure 9: Dundee Health and Social Care Partnership - Service Delivery Locations

Property			
21 General Practices	4 Hospitals	4 Care Homes	4 Day Centres
1 Palliative Care Unit	2 Respite Units	1 Equipment Store	6 Office Bases
1 Records Store	7 other community-based service delivery sites	42 community-based venues used by social care teams	Shared sites of service delivery in Angus and Perth & Kinross
Service delivery sites in the third sector and independent sector			

Source: [DHSCP: Strategic Commissioning Framework 2023-2033](#) (Note: GP figure amended from 23 to 21 to reflect the recent closure of GP premises)

Following assessment of the properties, the key issues are that many areas are underserved when considering property alignment with population density and areas of deprivation, and the condition of many of the assets and premises are not fit-for-purpose. The long-term ambition is that health and social care services and supports will be delivered from places that are modern, accessible, sustainable, fit for purpose and are used to their maximum potential. There are some important factors that will make it challenging to do this:

- Dundee City Council and NHS Tayside are both working to reduce the number of premises they have in the city and the physical condition and design of some properties is not suitable for modern ways of delivering services.

- Limited money in Dundee City Council and NHS Tayside to invest in and improve community-based buildings from which health and social care services are delivered.

However, developments in digital technology and changes in the way that the health and social care workforce work are factors that will help to make better use of the buildings that are available to the Health and Social Care Partnership in the future.

Further detail on the property context, future plans and progress is set out in the [DHSCP Property Strategy 2022](#) and the [DHSCP Property Strategy Update 2023](#). The key objectives of the strategy are:

- To gain best value from our use of property.
- To ensure that health and social care services are provided in and from accessible, sustainable and fit-for-purpose, modern buildings.
- To ensure that health and social care services are provided from premises that create environments that support trauma informed ways of working and reducing inequalities (including protected characteristics, fairness and wider health and social work inequalities).
- To enhance provision of health and social care services in local communities.
- To ensure that health and social care services are provided from environments that ensure the wellbeing of our workforce.
- To rationalise our estate in order to reinvest savings into frontline services.

The key actions from the strategy include the need to:

- Agree a process for loans, leases and funded modifications.
- Agree a programme of works in relation to GP premises, within the context of their local community.
- Look at areas that are underserved and explore options.
- Build on existing work to use clinical space more creatively.
- Scope out the clinical space requirements for planned care provision in the community.
- Replace Constitution House.
- Scope out space requirements for community-based services.
- Scope out the need for clinical space within care homes and day services.
- Grow partnership shared work spaces and opportunities for coworking in Dundee as a key part of our premises strategy.
- Identify IT solutions to some of the barriers to partnership working.

In alignment with NPF4 policy 15, the [DHSCP General Practice Strategy 2024 to 2029](#) identifies 20 Minute Neighbourhoods as a key guiding principle in the delivery of their strategy. This means they intend to provide care closer to home and align with the green agenda by reducing the need to travel and thereby reducing travel costs for patients. The strategy also adopts a Place Based Care approach to the delivery of GP services. The ambition is to bring organisations across the city together around the population they serve. This provides a mechanism to share and combine resources and more importantly to make more effective use of the resources available. As an example, having Third Sector organisations in general practice providing dedicated skilled support in drug use recovery.

The General Practice Strategy is underpinned by various activities, which includes the following:

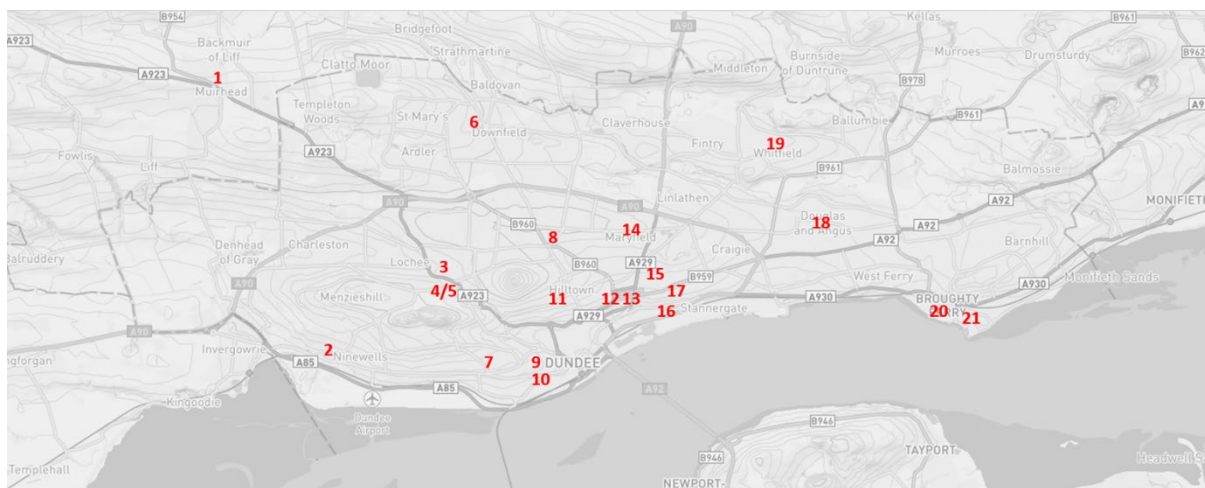
- **Focus on prevention, self-care, and early intervention:** acknowledging the impact of transformational changes across the city including air quality impact, and access to active travel infrastructure and green and blue spaces.
- **Address Inequality and Inequity:** engaging with children, particularly within deprived areas of the city, to influence and encourage active lifestyles and good dietary habits. Recognising good health is a community endeavour and includes access to healthy food, and other initiatives e.g., play streets and cycle lanes as outlined in Dundee’s City Plan.

The General Practice Strategy establishes four broad criteria to assess work programme priorities:

- Looking towards a community focused model delivering health and social care.
- Ensuring premises are of good quality and fit for purpose.
- Providing support to general practice to enable sustainability.
- Ensuring appropriate geographical coverage.

The geographical spread of Dundee’s 21 GP premises is uneven, with only 3 practices north of the Kingsway road (A90) and a group of practices concentrated within the Stobswell area, as shown in the map below.

Figure 10: Location of Dundee General Practice Premises



Practice	Cluster	List Size	Practice	Cluster	List Size	Practice	Cluster	List Size
1. Muirhead Medical Practice	C4	8312	8. Coldside Medical Practice	C3	9204	15. Terra Nova	C1	6410
2. Westgate	C4	12915	9. Tay Court Surgery	C4	10271	16. Princes Street	C2	9334
3. Lochee Health Centre	C3	4761	10. Nethergate Medical Centre	C4	9007	17. Taybank	C2	9373
4. Ancrum Medical Centre	C3	5207	11. Hillbank Health Centre	C3	8678	18. FMG – Douglas	C1	8755
5. Ancrum One	C3	5123	12. Erskine Practice	C1	8046	19. Newfield Surgery	C1	5563
6. Downfield Surgery	C3	8616	13. Mill Practice	C1	8689	20. Grove Health Centre	C2	6447
7. Hawkhill Medical Centre	C4	11070	14. Maryfield Medical Centre	C1	6746	21. Broughty Ferry H.C.	C2	9184

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Source: [DHSCP General Practice Premises Strategy 2022](#) (Note: GP figure and map amended from 23 to 21 to reflect the recent closure of GP premises.)

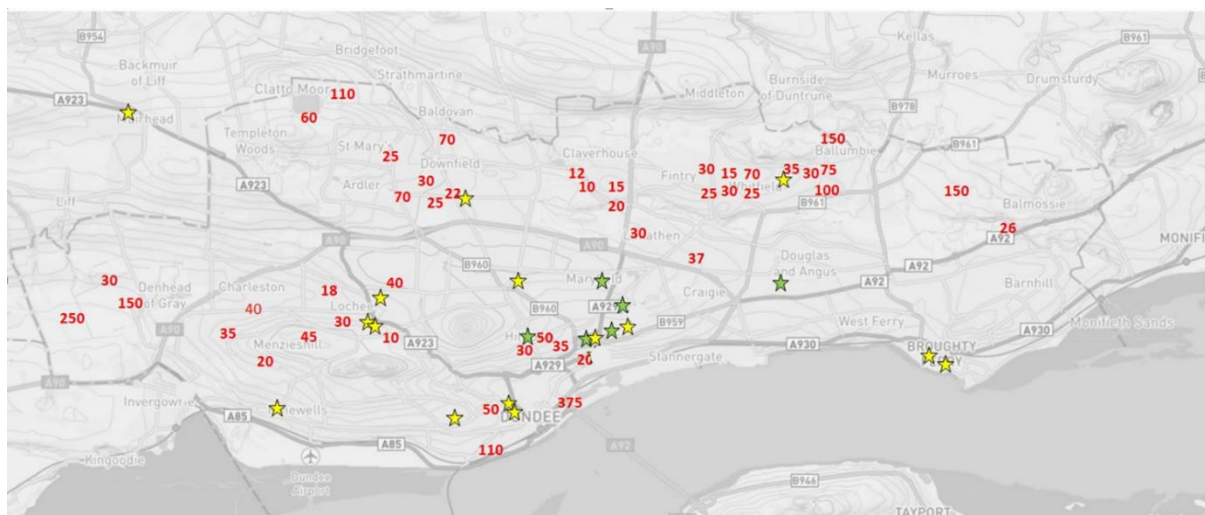
The current picture for Dundee’s GP premises highlights that around 50% of the practices do not consider their premises fit for their present needs, and a similar number highlight a lack of space hampers opportunities for change or innovation. There is a need for remedial work

to improve the space available and the amenity. This is compounded by increasing demand on services, by the closures of neighbouring practices and an increasingly older population with greater health needs. The premises tenure is also impacting on GP recruitment and retention as the profession seeks freedom from premises liability. The ambition for place based or community setting care is in contrast with the reality that many people in Dundee are not registered with the GP practice closest to their home and patients choose to travel across the city to attend GP appointments.

In line with national, regional and local policy, the DHSCP believes that by working together across organisations the population of Dundee can be healthier, with fewer inequalities and able to provide high quality, cost effective services that align with the needs of the city's population. This includes moving to a locality based model, where general practice is part of a wider health and social care eco system providing care to members of its community. With more services looking to move to primary care and increasing multi-disciplinary working, a key enabler will be GP premises that have fit for purpose space.

The map below shows the new housing planned for Dundee in relation to general practice locations and their space issue status. The boundaries between NHS and Council services are not coterminous.

Figure 11: Location of Dundee General Practice Premises with Space Issues



★	Practices without space issues in 2022
★	Practices with space issues in 2022
00	Number of houses planned to be built

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Source: [DHSCP General Practice Premises Strategy 2022](#) (Note: map amended to reflect the recent closure of GP premises.)

The General Practice Premises Strategy sets out the priorities, recommendations and actions to align premises with the vision for health and social care services that are the focal point within a community. From a strategic Planning perspective the key points to be aware of are:

- A strategic view on longer term need and viability of individual premises will be undertaken (property rationalisation).

- Over the next 5 years submit options that look at new-build premises in areas that are underserved.
- Over the next 5 to 10 years deliver potential new-build premises.
- Over the next 10 to 20 years:
 - To have reviewed the changing population and health requirements and put in place plans to meet needs.
 - To reduce the carbon footprint through the provision of services that is accessible to patients by foot or bicycle.

3.3 Dundee's Food Environment

3.3.1 Food Availability

To understand Dundee's food environment there are a broad range of sources that need to be considered, including:

- Supermarkets
- Mini-markets
- Convenience stores
- Corner shops
- A diverse community food network
- Community gardens and growing spaces (crossover with community food network)
- Allotments
- Fast food and takeaway outlets

The above sources provide a combination of food for cooking and food for direct consumption. In general terms, the availability of these food sources (both healthy and unhealthy) to Dundee residents is primarily influenced by location, transportation options, and affordability.

Dundee is generally well served by large supermarkets, predominantly located around the Kingsway (A90); and a variety of mini-markets, including LIDL, ALDI and Iceland etc., dispersed throughout the city. These sources provide a diverse array of foods, including healthy fresh food options, however accessibility and affordability determine who can use these sources.

With reference to the [Dundee Cycling Strategy 2019](#), Scottish Household Survey data shows that 44.8% of Dundee households do not have access to a car for private use and 45.9% of the adult population do not have a driving licence. Therefore, car-less residents, unable to reach these markets, are more likely to have to depend on what's local to them, which can vary significantly depending on where you live. This can result in a dependence upon corner shops, convenience stores and takeaway outlets. In such instances, food prices are often high, products are highly processed and unhealthy, and fresh fruit and vegetables are poor or non-existent. These locations are often referred to as '[food deserts](#)' as affordable, nutritious, fresh food is virtually unobtainable, or as '[food swamps](#)' where there is plenty of food available, but it is energy dense and nutrient poor.

Nonetheless, only considering the availability of commercial food does not provide the entire picture of food availability within an area. The following sections covering Dundee's community food network and growing opportunities provide further insight.

3.3.2 Dundee Community Food Network

Supermarkets and mini-markets are not the only source of fresh food in the city. With rising poverty, the cost of living crises, and a drive to reduce food waste, various alternative sources of food have emerged in Dundee. Faith in Community Dundee's [Dundee Community Food Network](#) provides a helpful database and map of alternative food sources, which include:

- Community Cupboard/Fridge
- Community Gardens
- Drop-In Café
- Food Parcel locations
- Foodbanks
- Larders
- Lunch/Supper Clubs
- Takeaway Hot Food Locations (not fast food takeaways)

For Dundee's most deprived residents the location of supermarkets, corner shops, convenience stores and takeaway outlets is becoming virtually irrelevant as they are fully dependent upon the city's Community Food Network. Most primary schools now also have some kind of food provision which is accessed by parents. These vital food sources are having an impact on the nature of Dundee's food environment, and, depending on which variables are considered, may determine whether you are living in a food desert/swamp or not. Further analysis through our in-house GIS Liveable Neighbourhoods Tool may help to clarify the situation. Our Liveable Neighbourhoods Tool is currently in production and will be developed as part of the Local Development Plan evidence base throughout 2024.

3.3.3 Food Growing Opportunities

Community engagement during preparation of Dundee's City Plan established community growing as a priority for local people in all wards. This is borne out in the plan as an action under the Building Stronger Communities theme by committing to expand community growing projects, and reflected in the vision statement of [Dundee's Local Food Growing Strategy](#) (LFGS):

“Dundee will build on its enviable resource of community growing spaces and allotments, working with communities, local people and organisations to enable them to access ‘grow your own’ opportunities, whilst recognising the value of such growing spaces in reducing food insecurity.”

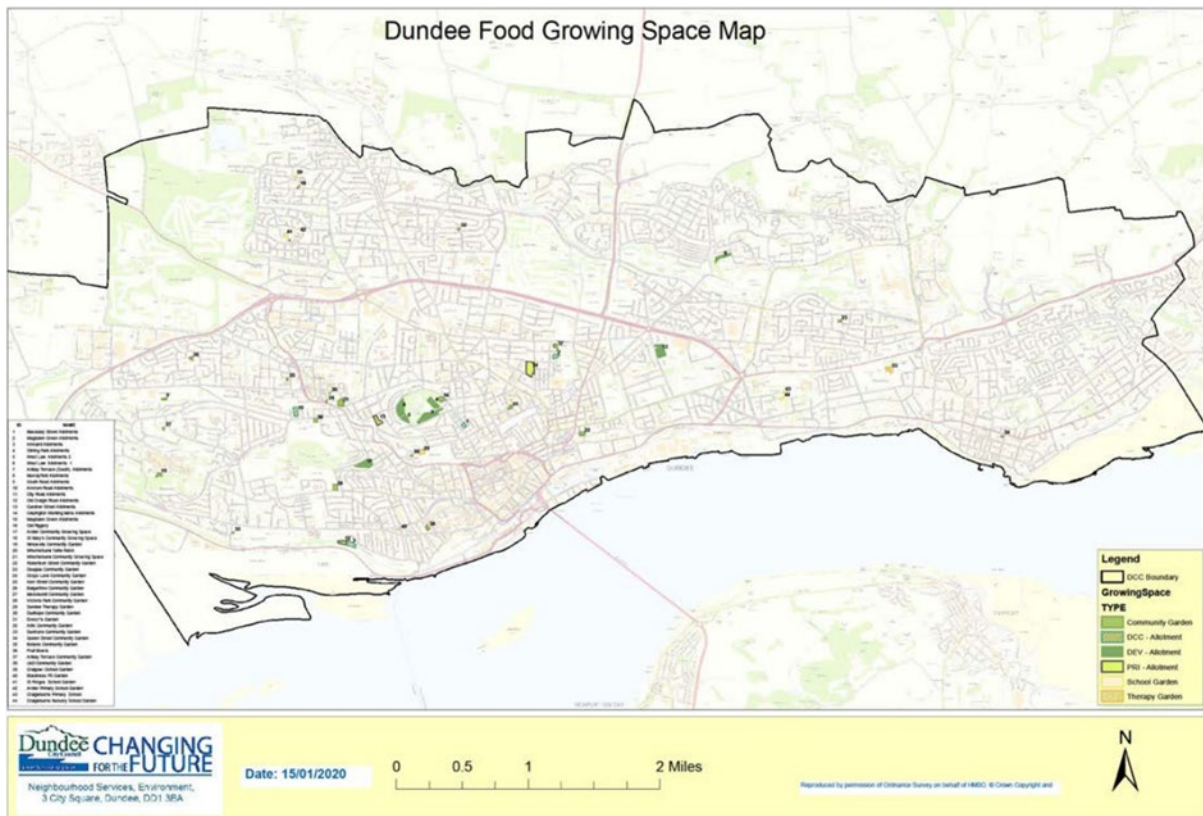
The LFGS aligns with NPF4 and several of the Scottish Government's National Outcomes and adheres to the 'grow your own' requirements set out in the Community Empowerment (Scotland) Act 2015. However, there are key challenges around space provision, participation, and scale when it comes to reducing food insecurity.

Over many years the City Council has developed a system of leased allotment sites managed by independent allotment associations, as well as directly managing a number of allotment sites. As of 26th February 2024, the waiting list for City Council allotments stands at 405 applicants, with a supply of only 78 plots. Therefore the City Council is not in compliance with the Community Empowerment Act [Part 9 Allotments](#) as our statutory duty to provide allotments is currently not being fulfilled. Additional allotment sites need to be identified to meet the demand. Dundee does also host several privately-run allotment sites that help support the city's needs.

There are many established community growing spaces in Dundee, often located in areas of deprivation and regeneration. The City Council's Environment team strive to promote the establishment of further community growing spaces in the more deprived parts of the city as well as promoting the grow-your-own approach in private spaces, school grounds, and community centres etc. The LFGS intends to explore further opportunities for community growing through the next LDP, specifically through policy to support growing spaces in new development. These moves towards ultra-local, seasonal, food production can help to supplement poor diet with nutritious food as well as having valuable impacts on social isolation, peer support, and mental health issues. Positive progress is being made and there are many more projects and initiatives in the pipeline, however the cultural shift towards own-grown food will take time to establish, particularly at scales and rates of uptake which will significantly reduce food insecurity.

The following map identifies the city's numerous growing spaces. You can view the map in further detail via the following [weblink](#). This data will help contribute towards the previously mentioned GIS Liveable Neighbourhoods Tool to help provide a better understanding of food availability in Dundee.

Figure 12: Dundee Food Growing Space Map



Source: [Dundee's Local Food Growing Strategy](#)

3.3.4 Food Outlet Clusters

Dundee’s recent [Review of Retailing in Dundee 2023](#) identified where fast-food takeaways were clustered in the city’s five District Centre areas. Notably there are 13 take-aways in the Hilltown District Centre, which is twice the average among the other District Centres, as shown in the table below.

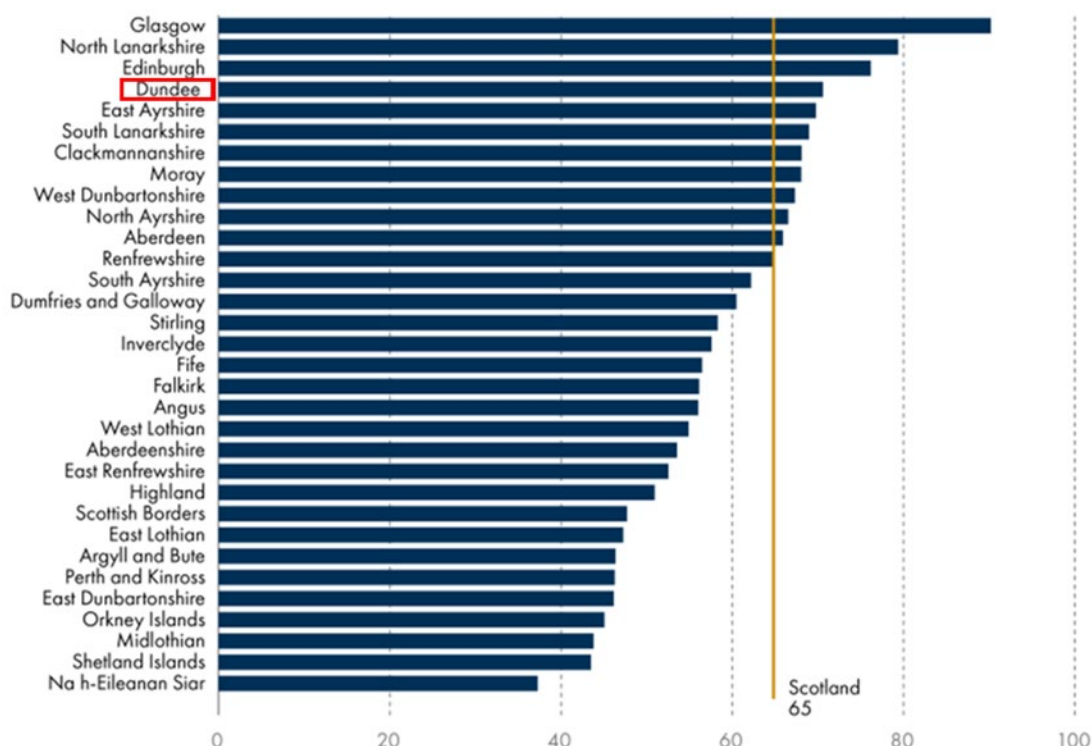
Figure 13: Number of Fast Food Takeaways within Dundee’s District Centres

Dundee District Centres	No. of Fast Food Takeaways
Albert Street	6
Broughty Ferry	7
Hilltown	13
Lochee	5
Perth Road	6

Source: [Review of Retailing in Dundee 2023](#)

The Scottish Parliament Information Centre’s article [Fast food booming – a cause for concern?](#) provides a national and Dundee perspective on the rise in takeaway outlets. Reference to Office of National Statistics (ONS) data from 2018 shows that Dundee had the 4th highest takeaway density in Scotland, as shown in the graph below. Takeaway outlets in the data are defined by the UK Standard Industrial Classification of Economic Activities 2007, which uses classification [56.10/3 Takeaway food shops and mobile food stands](#).

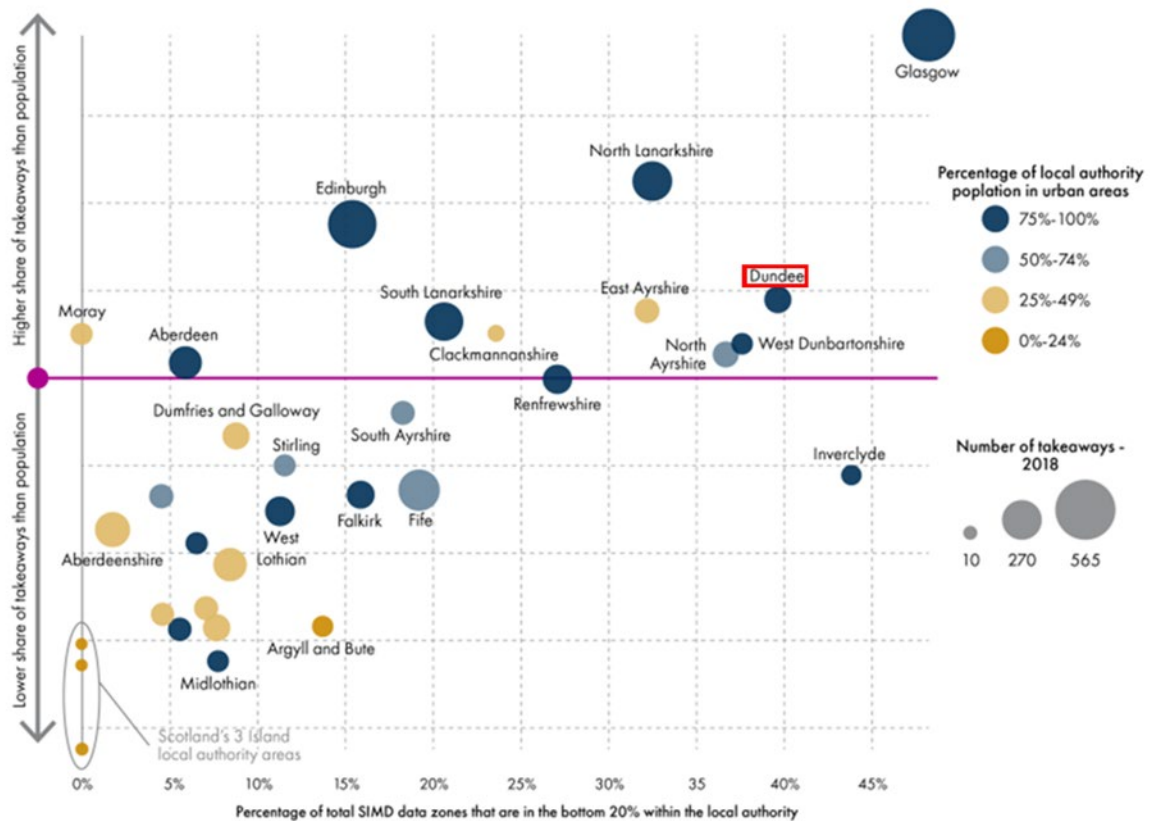
Figure 14: Takeaways per 100,000 Population by Scottish Local Authority Areas 2018



Source: [Fast food booming – a cause for concern?](#)

The article includes the chart below which demonstrates the correlation between takeaway intensity relative to population share and levels of deprivation within Local Authority areas, using the Scottish Index of Multiple Deprivation. This chart suggests that Local Authorities with relatively high proportions of data zones in deprivation are likely to have an over-representative share of takeaways relative to their national population share. Areas like Glasgow, North Lanarkshire, and Dundee have both an over-representative share of takeaways relative to population share and relatively high levels of deprivation.

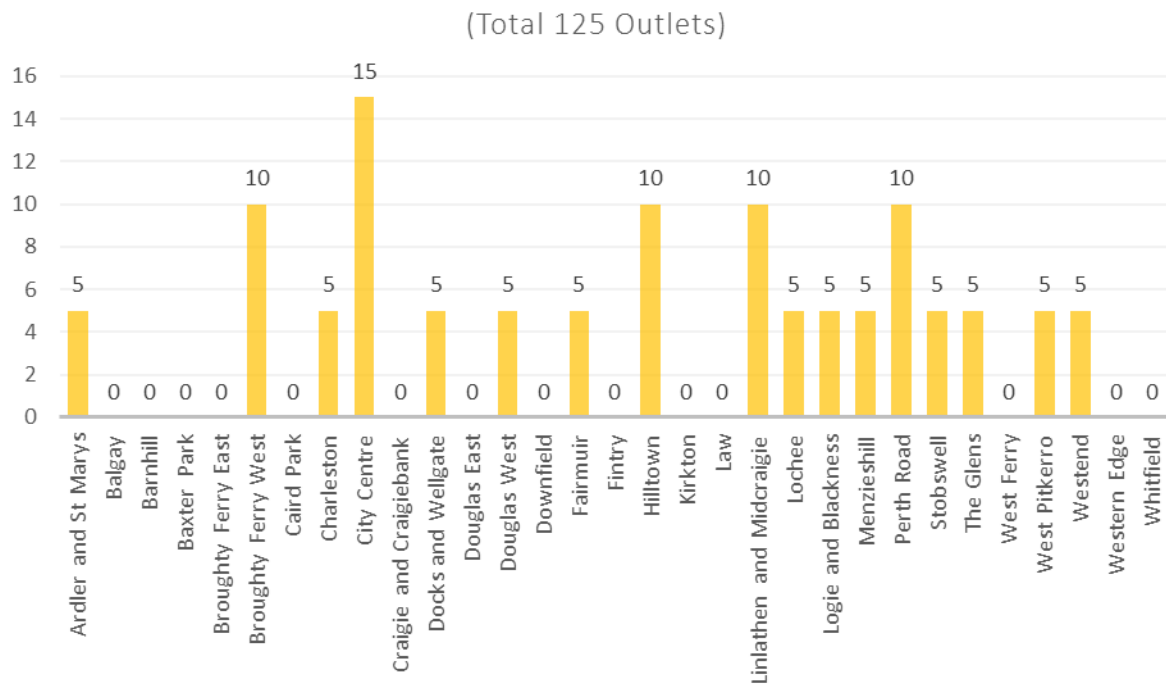
Figure 15: Relationship Between Takeaway Density, Population, and Deprivation within Scottish Local Authority Areas



Source: [Fast food booming – a cause for concern?](#)

Since this article was published, further ONS data on takeaways has been released up to 2023. From a city wide perspective Dundee had a total of 85 takeaways in 2010 and by 2023 the total rose to 125, an increase of 47%. The table below shows how the number of takeaways in 2023 is distributed across Dundee at Scottish Intermediate Zone level.

Figure 16: Number of Fast Food Takeaway Outlets in Dundee by Intermediate Data Zones 2023



Source: [Office of National Statistics Scotland](#)

The above data is useful to show where takeaway outlets are clustering, however, it is less relevant when considering direct consumption as the rise in delivery services means that people no longer rely on very local provision.

3.4 Potential pollutants

3.4.1 Major-Hazard Sites

There are several major-hazard sites within Dundee, which are predominantly located within the coastal docklands area to the east of the city centre. These sites correspond with the storage and processing of specific hazardous substances. To identify any potential risks associated with proposed development, the Health and Safety Executive (HSE) have established consultation zones around major-hazard sites. Any planning applications which fall within consultation zones require consultation with HSE prior to the determination of the application. Dundee City Council and HSE hold maps which identify all of the major-hazard sites and their consultation zones.

There are no major accident hazard pipelines in Dundee.

3.4.2 Pollution and Local Level Nuisance

The following sections cover the monitoring and control measures established for both city wide pollution concerns, and local level nuisance, associated with air quality, noise, odour, and light.

Air Pollution

To allow comprehensive monitoring and improvements to Dundee's air quality the whole of Dundee's local authority boundary is designated as an [Air Quality Management Area](#). The detailed measures carried out to assess, monitor, and improve air quality across the city are set out in Dundee City Council's [2011 Air Quality Action Plan](#). The 2011 Air Quality Action Plan is due to be reviewed and updated with new action measures during 2024.

Annual progress reports are produced, which set out the progress made on the broad range of measures within the 2011 Air Quality Action Plan, and report on the air quality monitoring carried out the previous calendar year and any developments or approved major planning applications that may have a future impact on air quality. All of the annual progress reports can be viewed online via this [link](#).

Our current Local Development Plan 2019 [Supplementary Guidance Air Quality and Land Use Planning](#) reflects the 2011 Air Quality Action Plan, and provides additional guidance on air quality issues in relation to proposed development. As with the 2011 Air Quality Action Plan the next version will be considered as a material consideration in the determination of planning applications.

[Cleaner Air for Scotland 2 - Towards a Better Place for Everyone 2021-2026](#)

The Cleaner Air for Scotland 2 strategy sets out the Scottish Government's air quality policy framework and establishes a series of actions to deliver further air quality improvements. The important role that placemaking and 20 minute neighbourhoods play in improving air quality is highlighted within the strategy. As well as creating places and communities that are healthier, more vibrant, and more sustainable, giving people the ability to meet most of their daily needs via safe routes for walking, cycling, and public transport options reduces car dependency and improves air quality.

Noise Pollution

The Environmental Noise (Scotland) Regulations 2006 establish the requirement to manage environmental noise. The legislation makes two key obligations:

- Strategic noise maps must be produced for major roads, rail, airports and industry; and
- Noise Action Plans are produced to manage noise.

Informed by Round 2 of Scotland's Noise mapping process, the Scottish Government's [Dundee Agglomeration Noise Action Plan 2014](#) established three Noise Management Areas and four Quiet Areas for Dundee, which are acknowledged in Dundee's current [Local Development Plan 2019](#) under Policy 39: Environmental Protection. No new Noise Management Areas or Quiet Areas were identified during Round 3 of the Noise Mapping process. Round 4 of the Noise Mapping process is currently underway. Further information can be found on [Scotland's Noise](#) website.

Odour Pollution

There is no local data on odour pollution. SEPA regulate a variety of activities and practices in a bid to reduce and prevent offensive odours. Further information can be found on the Scottish Environment Protection Agency's [Odour](#) webpage.

Light Pollution

There is no local data on the effects of light pollution on our night sky, and there are currently no measures in place for controlling or complaining about light pollution. Further information is available on the [Commission for Dark Skies](#) website.

Local Level Air, Noise, Odour and Light Nuisance

Local level air, noise, odour and light nuisance affecting existing or new receptors (e.g. residences, businesses, public and private spaces etc.) from new development or changes to existing development is investigated and mitigated through Dundee City Council's Planning Enforcement, and Development Management processes. For proposed development the 'agent of change' principle applies, whereby, if there is likely to be an effect on existing or new receptors the applicant is required to demonstrate both that they have assessed the potential impact and that the proposed design incorporates appropriate measures to mitigate this impact.

4.0 Implications for the Proposed Plan

The evidence presented demonstrates that Dundee is facing significant health challenges now and projected into the future, particularly regarding our aging population, deprivation, life expectancy disparity, various health conditions, drug deaths, social isolation, and infrastructure and service delivery. As previously outlined in section 3.1.1 NPF4, there are many direct and indirect health links associated with the implementation of various NPF4 policies, therefore, improving people's health throughout the city will require a multi-policy approach within the next LDP, and requirements such as the Open Space Strategy and Play Space Sufficiency Assessments will have a role to play.

Delivering on the Town Centre First principle is vital to producing a more vibrant, dense, resilient, and influential city centre within Dundee, which can contribute towards improving various health outcomes. This includes the benefits associated with walkable cities, better integration of people and community, and by tackling the isolation and loneliness associated with older people, particularly where housing types for the elderly are introduced and associated with complimentary, mixed-use, developments. Policy 21 of Dundee's current LDP 2019 established the town centre first approach, and policy 27 of the NPF4 strengthens the requirement further. Dundee's proposed plan, spatial strategy and masterplanning should further strengthen and adhere to the town centre first approach to help create a more healthy city. The recently published [City Centre Strategic Investment Plan 2050](#) (CCSIP) sets out how we wish to develop a more successful city centre and it is a material consideration in the determination of planning applications. The CCSIP will be integrated within the development of the proposed plan.

Self-Care is a strategic priority for the health service, which enables people to look after themselves independently from services, have more control of their health, and to improve their quality of life. Health professionals recognise that to support self-care we need to have *“more people, especially disadvantaged groups, accessing a wider range of health, wellbeing and healthy lifestyle activities across the city”*. Planning and the City Council as a whole can support this through development and infrastructure which facilitates self-care, particularly physical activity, access to green/blue spaces, exposure to nature, and creating environments which increase physical activity, social interaction, and community participation. This can be achieved through public realm improvements, such as the introduction of new active travel routes, new and enhanced green/growing spaces, improving access to leisure, sports, services, and nature, and locating new housing close to existing infrastructure (developing brown-field sites), which makes schools, services and leisure facilities more accessible, i.e. liveable neighbourhoods (20-minute neighbourhoods). The Proposed Plan's policy, spatial strategy and masterplanning will integrate the above spatial contributions to self-care.

In preparation for the next LDP, the Planning team is currently producing a GIS liveable neighbourhoods tool. The intention is to make this a public asset with a broad range of mapped services and amenities. This should be of use to healthcare officials for asset management planning, and it should help to better understand the nature of Dundee's food environment through the mapping of multiple food sources.

Specific Considerations:

Food Growing Space: Further allotment space considered to meet public demand, and consideration of policy support for growing spaces in new development, as suggested in Dundee's Local Food Growing Strategy. The suitability of food growing spaces would have to consider the possibility of land contamination.

Health Impact Assessment (HIA): Consider carrying out HIAs on all policies within the proposed plan. A policy requirement for HIAs on all national and major planning applications will also be considered.

Developer Contributions: Consideration of the potential for developer contributions to support health infrastructure, particularly associated with any new peripheral housing developments.

Agent of Change Principle: NPF4 only refers to noise in relation to the agent of change principle. Consideration should be given to the inclusion of air quality, odour and light nuisance in relation to agent of change.

Noise Impact Assessment: Consideration for introducing the automatic requirement for Noise Impact Assessment for proposed development in relation to designated Noise Management Areas and Quiet Areas.

Housing Standards: Consider more focused and defined requirements for amenity space associated with residential developments. An agreed approach to the required sound levels for external amenity areas should be considered.

5.0 Engagement and Consultation

Stakeholder Working Group

The initial stakeholder working group was developed through internal and external individuals with specific interest in health and safety. The group was restricted to internal Dundee City Council representatives and external contacts within Key Agency group topic experts. These topic experts have assisted in developing a robust evidence base for the topic paper.

Internal

- DCC Environment (Public Health)
- Children & Families Service (Health and Wellbeing)

External

- NHS Tayside
- Dundee health and Social Care Partnership
- Public Health Scotland