# City Plan 2040 - Draft Participation Statement

### Overview

This survey is asking you (or your organisation) on the best ways to keep you informed and to get you involved in City Plan 2040.

### Why Local Development Plans Matter

We are at the very early stage of preparing City Plan 2040 which will be our next local development plan after City Plan 2030.

A local development plan is an important planning document. It guides how Edinburgh changes and grows; and how we respond to key concerns such as providing good places to live and climate change.

It is the starting point for making decisions on whether to approve or refuse planning applications.

A local development plan can bring change but also opportunities so it is important that people, organisations and communities keep up to date and get involved as much as they can in helping to inform and prepare City Plan 2040.

### Need a different language or format?



Please email the Interpretation and Translation Service at its@edinburgh.gov.uk quoting reference 23-9245.

## Why your views matter

We are at the start of the City Plan 2040 process and there will be different stages at which you can get involved.

Edinburgh's most recent **Development Plan Scheme** <a href="https://www.edinburgh.gov.uk/downloads/file/25720/city-plan-2030-development-plan-scheme">https://www.edinburgh.gov.uk/downloads/file/25720/city-plan-2030-development-plan-scheme</a> can give you further information on the City Plan 2040 process.

The Development Plan Scheme contains a draft Participation Statement which is a summary of when and how the Council is likely to engage with people during the City Plan 2040 process.

The draft Participation Statement is within the Development Plan Scheme - read the **draft** <a href="https://www.edinburgh.gov.uk/downloads/file/25720/city-plan-2030-development-plan-scheme">https://www.edinburgh.gov.uk/downloads/file/25720/city-plan-2030-development-plan-scheme</a> - read the **draft** <a href="https://www.edinburgh.gov.uk/downloads/file/257

We are required by the Scottish Government to seek the views of the public on what the content of the Participation Statement should be and have regard to any views expressed.

We want as many people as possible to have the opportunity to have their say so it is important that we engage in ways that suit them.

This survey is asking you (or your organisation) on the best ways to keep you informed and to get you involved.

We will use the results of this survey to improve how we engage with people as we go through the City Plan 2040 preparation stages.

### Introduction

The Council uses this information to ensure responses to consultations are genuine and that each person is submitting only one response.

The Council may publish all responses received to this consultation, but will not publish individual names, email addresses or postcodes. We may publish the names of organisations.

We will use your email address to contact you to let you know the results of this consultation and the actions we are taking because of the consultation.

| 1 What is your name?                                       |
|--|
| Name   |
|  |
|  |
|  |
| 2 What is your email address?                              |
| Email  |
|  |
| Yes, I consent to being contacted about this consultation. |

| 3 What is your postcode?   |  |
|--|--|
| (Required)   |  |
|  |  |
|  |  |
|  |  |
|  |  |
| 4 If you're responding on behalf of an organisation, what's its name?  |  |
| Organisation   |  |
|  |  |
|  |  |
|  |  |
| 5 Have you or your organisation been involved in the local development   |  |
| plan process before?   |  |
| (Required)   |  |
| Please select only one item  |  |
| Yes  |  |
| ○ No   |  |
| ys to get involved   |  |
| 6 Out of the options listed, what are the best ways for you (or the people   |  |
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# Helping you to get involved

Edinburgh is made up of many different communities and it is important that we reach out and listen to those who find it more challenging to get involved.

As well as getting how we engage right, we want to make sure that the right support is in place too so there are no barriers for example, for people with disabilities or fror different backgrounds.

| 7 What do you think would help you, or the people you represent, to get<br>more involved? (Tick as many as you think would help).  |
|--|
| Please select all that apply   |
| The right support in place to help people to attend or to understand   |
| Information printed in different languages   |
| Information that is simpler to understand  |
| Information and resources that are in an accessible format   |
| Explain the importance of the local development plan and how it is relevant to people  |
| Better explanation of the local development plan process   |
| Show that it will make a difference, and everyone is being listened to   |
| Better communication on how to get involved and when – a clearer timetable of events   |
| Better publicity about the events and providing plenty of notice   |
| Different ways to get involved (i.e. depending on your time, digital knowledge etc)  |
| Make sure events are run over different days and times   |
| Is there anything else you think might help? (Please tell us here)   |
|  |
| Keeping you informed  These are the ways in which we plan to promote and raise awareness of how people can get involved in the local development plan process:  Website  Social media campaigns  Local advertising (for example, lamp post wraps)  Local media  Newsletters  Targeted advertising at local libraries, community centres/halls, special schools and faith locations  Targeted e-mails to stakeholders and interest groups including community councils  Notifying neighbours and owner/occupiers of sites included in the Proposed Plan  Project mailing lists  8 Have you any other ideas on how we can tell people about how they can get involved? Please tell us here |
|  |

| 9 What are the main planning issues that you or your organisation are<br>interested or concerned about? Please select up to three.  |
|---|
| Please select all that apply  |
| Impact of climate change  |
| Nature Nature   |
| Open space  |
| Play and sports facilities  |
| Providing more housing  |
| Location of new housing   |
| Housing to meet different needs i.e. older people, disabled people  |
| Affordable housing  |
| Design and how your area looks  |
| Having services and things you need in easy reach   |
| Getting about by walking, wheeling and cycling (active travel)  |
| Public transport  |
| Car use   |
| Space for business and industry   |
| Space for third sector and community organisations  |
| Retail  |
| Other (please enter)  |
| Cities (picase cities)  |
| About you  Responding as an individual  It would be good to know if we are reaching different communities, so we would like to ask some questions about yourself. If you do not wish to answer any of the |
| questions, you do not have to.  |
| Responding on behalf of an organisation   |
| We do not collect personal data for responses on behalf of an organisation. The next section is not applicable.   |
| 10 Do you want to tell us more about yourself?  |
| (Required)  Please select only one item   |
| Yes   |
| ○ No  |
| Not applicable  |
|   |
| About you   |
| Please tell us more about yourself.   |
| All of these questions are voluntary. If you do not wish to answer any of the questions, you do not have to.  |

# 11 What is your ethnic group?

 $\textbf{Choose one} \ \textbf{section} \ \textbf{from} \ \textbf{A} \ \textbf{to} \ \textbf{F}, \ \textbf{then tick one} \ \textbf{box which best describes} \ \textbf{your ethnic group or background}$ 

| A. White  |
|---|
| Please select only one item   |
| 1. Scottish   |
| 2. Other British  |
| 3. Irish  |
| 4. Polish   |
| 5. Gypsy / Traveller  |
| 6. Roma   |
| 7. Showman / Showwoman / Showperson                                   |
| 8. Other white ethnic group, please write in                          |
|   |
| B. Mixed or multiple ethnic groups                                    |
| Please select only one item   |
| 9. Any mixed or multiple ethnic groups, please write in               |
|   |
| C. Asian, Scottish Asian or British Asian                             |
| Please select only one item   |
| 10. Pakistani, Scottish Pakistani or British Pakistani                |
| 11. Indian, Scottish Indian or British Indian                         |
| 12. Bangladeshi, Scottish Bangladeshi or British Bangladeshi          |
| 13. Chinese, Scottish Chinese or British Chinese                      |
| 14. Other, please write in  |
|   |
| D. African, Scottish African or British African                       |
| Please select only one item   |
| 15. Please write in (for example, Nigerian, Somali)                   |
|   |
| E. Caribbean or Black   |
| Please select only one item   |
| 16. Please write in (for example, Scottish Caribbean, Black Scottish) |
|   |
| F. Other ethnic group   |
| Please select only one item   |
| 17. Arab, Scottish Arab or British Arab                               |
| 18. Other, please write in (for example, Sikh, Jewish)                |
|   |

| Please select only one item  |
|--|
| 19. Prefer not to say  |
|  |
|  |
| 42 What religion, religious denomination or hady do you heleng to? |
| 12 What religion, religious denomination or body do you belong to? |
| Please select only one item  |
| None   |
| Church of Scotland   |
| Roman Catholic   |
| Other Christian, please write in                                   |
| Muslim, write in denomination or school                            |
| Hindu  |
| Buddhist   |
| Sikh   |
| Jewish   |
| Pagan  |
| Another religion or body, please write in                          |
| Prefer not to say  |
|  |
|  |
|  |
|  |
| 13 What is your age?   |
| Please select only one item  |
| Under 16   |
| 16 - 24  |
| 25 - 34  |
| 35 - 44  |
| 45 - 54  |
| 55 - 64  |
| O 65 - 74  |
| 75 and over  |
| Prefer not to say  |
| O Froid flot to say  |
|  |

| lasting or expected to last 12 months or more?   |
|--|
| Please select only one item  |
| Yes  |
| ○ No   |
| Prefer not to say  |
|  |
| If answer 'Yes' (do you have a physical or mental health condition or illness lasting or expected to last 12 months or more):  |
| Do any of these conditions or illnesses affect you in any of the following areas?  |
|  |
| Please select all that apply   |
| Vision (for example blindness or partial sight)  |
| Hearing (for example deafness or partial hearing)  |
| Mobility (for example walking short distances or climbing stairs)  |
| Dexterity (for example lifting or carrying objects, using a keyboard)  |
| Learning or understanding or concentrating   |
|  |
| Memory   |
| Mental health  |
| Stamina or breathing or fatigue  |
| Socially or behaviourally (for example associated with autism spectrum disorder (ASD) which includes Asperger's, or  |
| attention deficit hyperactivity disorder (ADHD))  Other (please specify)   |
| Prefer not to say  |
| Freder not to say  |
|  |
|  |
|  |
|  |
|  |
| 15 Which of the following best describes your sexual orientation?  |
| <ul><li>15 Which of the following best describes your sexual orientation?</li><li>Only answer this question if you are aged 16 and over</li></ul>  |
|  |
|  |
| Only answer this question if you are aged 16 and over  |
| Only answer this question if you are aged 16 and over  Please select only one item   |
| Only answer this question if you are aged 16 and over  Please select only one item  Straight / Heterosexual  |
| Only answer this question if you are aged 16 and over  Please select only one item  Straight / Heterosexual  Gay or Lesbian  |
| Only answer this question if you are aged 16 and over  Please select only one item  Straight / Heterosexual  Gay or Lesbian  Bisexual  |
| Only answer this question if you are aged 16 and over  Please select only one item  Straight / Heterosexual  Gay or Lesbian  Bisexual  Other sexual orientation, please write in   |
| Only answer this question if you are aged 16 and over  Please select only one item  Straight / Heterosexual  Gay or Lesbian  Bisexual  Other sexual orientation, please write in   |
| Only answer this question if you are aged 16 and over  Please select only one item  Straight / Heterosexual  Gay or Lesbian  Bisexual  Other sexual orientation, please write in   |
| Only answer this question if you are aged 16 and over  Please select only one item  Straight / Heterosexual  Gay or Lesbian  Bisexual  Other sexual orientation, please write in   |
| Only answer this question if you are aged 16 and over  Please select only one item Straight / Heterosexual Gay or Lesbian Bisexual Other sexual orientation, please write in Prefer not to say   |
| Only answer this question if you are aged 16 and over  Please select only one item  Straight / Heterosexual  Gay or Lesbian  Bisexual  Other sexual orientation, please write in   |
| Only answer this question if you are aged 16 and over  Please select only one item Straight / Heterosexual Gay or Lesbian Bisexual Other sexual orientation, please write in Prefer not to say   |
| Only answer this question if you are aged 16 and over  Please select only one Item  Straight / Heterosexual  Gay or Lesbian  Bisexual  Other sexual orientation, please write in  Prefer not to say  16 What is your sex?                                |
| Only answer this question if you are aged 16 and over  Please select only one item Straight / Heterosexual Gay or Lesbian Bisexual Other sexual orientation, please write in Prefer not to say  16 What is your sex?  Please select only one item        |
| Only answer this question if you are aged 16 and over  Please select only one item Straight / Heterosexual Gay or Lesbian Bisexual Other sexual orientation, please write in Prefer not to say  16 What is your sex?  Please select only one item Female |

14 Do you have any physical or mental health conditions or illnesses

| There we use traits as a term to describe people whose gender identity is not the same as their sex registered at birth |
|---|
| Please select only one item   |
| ○ No  |
| Yes   |
| Prefer not to say   |
| If you would like to, please describe your trans status (for example non-binary, trans man, trans woman):               |
|   |
|   |
|   |
|   |
| 18 Do you have caring responsibilities?   |
| Please select only one item   |
| Yes   |
| ○ No  |
| Prefer not to say   |
| If yes, please tick all that apply.   |
| Please select all that apply  |
| Primary carer of a child/children (under 18)  |
| Primary carer of disabled child/children  |
| Primary carer of disabled adult (18 and over)   |
| Primary carer of an older person (65 and older)   |
| Secondary carer   |
|   |
|   |
|   |
| 19 How would you describe your home?  |
| Please select only one item   |
| Homeless  |
| O Private rental  |
| Council or Housing Association rental   |
| Owned   |
| Living with family/friends  |

17 Do you consider yourself to be trans, or have a trans history?

Only answer this question if you are **aged 16 or over**

Student accommodation

## What happens next?

Based on your feedback, we will make any necessary changes to our next Development Plan Scheme, which will include the Participation Statement. This will be reporte back to Planning Committee.

We will put the results of the survey and the next Development Plan Scheme on our website <a href="https://www.edinburgh.gov.uk/local-development-plan-guidance-1/city-plan 2030?documentId=12552&categoryId=20305">https://planningedinburgh.com</a> and mailing list </sfc/city-plan-2040-mailing-list>.

The next Development Plan Scheme will be put in all Council libraries and will be available at Reception, City Chambers, 253 High Street, Royal Mile, Edinburgh EH1 1Y

### Keep up to date with City Plan 2040

Check out our website: www.edinburgh.gov.uk/cityplan2040 <a href="https://twww.edinburgh.gov.uk/cityplan2040">https://twww.edinburgh.gov.uk/cityplan2040</a> Follow us on X (formerly Twitter) @planningedin <a href="https://twitter.com/planningedin">https://twitter.com/planningedin</a> Sign-up to our mailing list <a href="https://planningedinburgh.com">sign-up to our Blog: www.planningedinburgh.com</a> <a href="https://planningedinburgh.com">https://planningedinburgh.com</a>

### **Local Place Plans**

We will be putting out an invite to prepare Local Place Plans - these are community-led plans which focus on development and use of land in their area.

Visit the City Plan 2040 <a href="http://www.edinburgh.gov.uk/cityplan2040">http://www.edinburgh.gov.uk/cityplan2040</a> website for more information on Local Place Plans.