King
Street
Planning

Health Impact Assessment

Land off Bower Street, Manchester

Latos Manchester Limited

March 2026

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Email: info@kingstreetplanning.com

Address: M.01, Tomorrow Building, MediaCityUK, Salford, M50 2AB

Mobile: 07906 889511

1. Introduction

1.1. King Street Planning ("KSP") has been instructed by Latos Manchester Limited ("the Applicant") to prepare a Health Impact Assessment ("HIA") for a data centre development on land off Bower Street, Manchester, M40 2AF ("the site").

1.2. The HIA has been prepared at the request of Manchester City Council ("MCC") to assess the health related effects of the proposed development during the construction and operational phases of development. The HIA also identifies opportunities to enhance the health related benefits of the proposed development which have been secured by design or through mitigation measures established in the technical assessments.

The Site

1.3. The site is broadly rectangular in shape, bound by residential properties and Ten Acres Lane to the east; the Rochdale canal to the south; employment uses to the west; and Bower Street to the north, beyond which is further residential properties. The site itself comprises a mixture of scrub and hardstanding.

1.4. The area surrounding the site is characterised by a mix of residential, industrial and commercial uses. An aerial view of the site is provided in Figure 1.1 below.

Figure 1.1: Aerial view of the Site



1.5. The nearest sensitive human receptors are the residential properties located to the immediate east and those on the northern side of Bower Street.

Report Structure

1.6. The following chapters of the report comprise:

- **The Proposed Development** – An overview of the proposed development and the social, economic and environmental outcomes as a result of the site's delivery.
- **HIA Approach and Methodology** – Description of the approach and methodology which has been used to inform the HIA.
- **Planning Policy Context** – A review of national and local planning policy and guidance with respect to HIAs and the type of development proposed.
- **Baseline Conditions** – An overview of the baseline conditions on site and in the surrounding area.
- **Impact Assessment** – The HIA setting out the likely health related effects of the development during construction and operation.
- **Summary and Conclusions** – Brief summary of the report findings.

2. The Proposed Development

Quantum, Scale and Use

2.1. The proposed scheme, developed by Create Architecture, seeks to provide two data centre buildings and external plant amounting to 2,645sqm. 8 car parking spaces are provided on site with EV charging infrastructure.

2.2. The proposed site layout plan is illustrated in Figure 2.1.

Figure 2.1: Site Layout Plan



Access and Boundary Treatment

2.3. Pedestrian and vehicular access will be via Bower Street to the north. A security fence encompasses the development with an enhanced landscape strip buffer between this fencing and the public highway / adjacent residential properties.

3. Planning Policy

Local Planning Policy and Guidance

Manchester's Core Strategy Development Plan Document

3.1. A series of Citywide challenges are set out in the Core Strategy. These need to be overcome for the Council to achieve its sustainable community strategy, including:

- Reducing worklessness and deprivation.
- Improving the skills of residents to meet the job opportunities.
- Reducing contribution to and mitigating effects of climate change.
- Creating neighbourhood focus, facilities and identity.
- Providing a choice of high quality safe and sustainable lifetime homes and neighbourhoods for a growing population.
- Removing health inequalities and enabling more healthy lifestyles.
- Improving access to employment and education.
- Reducing congestion on the roads, improving the reliability of public transport and reducing overcrowding.
- Improving the quality of air and water.
- Reducing the area of contaminated land and facilitating the re-use of previously developed land.
- Continuing to ensure that development is of a consistently high quality.

3.2. All of the above challenges are in some way linked to the health and well-being of the residents in Manchester.

3.3. Policy SP1 'Spatial Principles' states that development in the City should make a positive contribution to the health, safety and well-being of residents. Paragraph 6.8 which supports Policy SP1 states that new development can play a role in improving health by:

- Providing pedestrian and cycling facilities.
- Good open space provision.
- Sustaining local facilities and networks.
- Good quality housing provision and choice.
- Good access for all to jobs and services.

3.4. Access to sustainable modes of transport is recognised as a positive mechanism to tackle the impacts of climate change, and thereby improving health.

3.5. Policy T1 ‘Sustainable Transport’ sets out the Council’s measures to deliver a sustainable, high quality, integrated transport system to encourage modal shift away from car travel to public transport, cycling and walking.

3.6. The importance of green infrastructure is recognised as a critical element for delivering sustainable economic prosperity. The attractiveness of the environment is in part what determines where firms choose to locate, and where the workforce chooses to live; workers with access to green infrastructure also tend to be healthier and more productive. Green infrastructure provides accessible areas for relaxation, recreation, exercise and sport and alternative sustainable transport routes. It reduces air pollution, improving the general health and well-being of communities (paragraph 12.51).

3.7. Policy DM1 ‘Development Management’ sets out a series of criteria which should be considered when designing new developments. Of specific relevance to human health are:

- Appropriate siting, layout, scale, form, massing, materials and detail.
- Impact on the surrounding areas in terms of the design, scale and appearance of the proposed development. Development should have regard to the character of the surrounding area.
- Effects on amenity, including privacy, light, noise, vibration, air quality, odours, litter, vermin, birds, road safety and traffic generation. This could also include proposals which would be sensitive to existing environmental conditions, such as noise.
- Accessibility: buildings and neighbourhoods fully accessible to disabled people, access to new development by sustainable transport modes.
- Community safety and crime prevention.
- Design for health.
- Adequacy of internal accommodation and external amenity space.
- Green Infrastructure including open space, both public and private.
- Flood risk and drainage.

Guide to Development in Manchester Supplementary Planning Document (April 2007)

3.8. Whilst the SPD is somewhat dated, some of the core messages and principles are still relevant today. The SPD intends to provide developers with guidance when bringing forward development within the City.

3.9. Chapter 9 is titled ‘Design for Health’ and sets out a series of objectives to ensure that development works to improve the health of Manchester’s residents. These objectives are:

- **Encourage active lifestyles –** place walking and cycling routes as a priority over cars. This can be assisted by providing secure cycle storage in all developments, and ensuring good quality facilities for cyclists.
- **Build opportunities for social interaction –** create environments where people can meet informally; promote local services; and ensure that people are adequately involved in developments in their area.
- **Improve housing quality –** new housing should be of a high standard of design. New dwellings should be designed and orientated to maximise natural light and provide views over aesthetically pleasing spaces, designing for safety, both in terms of reducing accidents and reducing the risk of crime.
- **Improve access to work –** all new development which include employment generating uses should consider the needs of those without cars, and should actively encourage access to the site by pedestrians, cyclists and public transport. Mixed-use development can also be a means of shortening journeys to work by bringing employment near to residential areas.
- **Ensure accessibility for all –** new development should ensure the needs of the more vulnerable road users such as pedestrians, disabled people, cyclists and those using public transport are considered during the planning process.
- **Promote local food production and access to healthy food –** encourage a diversity of shopping facilities in local centres.
- **Promote safety and a sense of safety –** new developments should use traffic calming measures to slow the speed of traffic and give priority to pedestrians and cyclists; design to ensure natural surveillance over public space; and provide safe places for children to play.
- **Promote social inclusion –** delivering development that provides a mix of housing tenures, whilst ensuring that development does not drive out those on low incomes by making property or services too expensive, and ensuring that people are not excluded because of age, disability, or lack of access to a car.
- **Improve the quality of the natural environment –** development should protect and enhance waterways and areas of green space.
- **Improve the quality and aesthetics of the built environment –** designing places to be intuitively understandable, integrating the natural environment into the built environment with trees and other planting schemes, and by providing gardens in residential developments.

Manchester Population Health Plan: 2018-2027

3.10. The plan focuses on delivering results in five aspects of life in Manchester:

- The first 1,000 days of a child's life
- Work and its positive impact on health
- Making social connections and changes that matter
- An age-friendly Manchester

- Action on preventable early deaths.

Places for Everyone

3.11. Places for Everyone ("PfE") is a plan of nine Greater Manchester districts (Bolton, Bury, Manchester, Oldham, Rochdale, Salford, Tameside, Trafford and Wigan). It was adopted in March 2024 and forms part of the statutory development plan.

3.12. PfE policy JP-P6 'Health' states:

> *To help tackle health inequality new development will be required, as far as practicable, to:*
>
> *A. Maximise its positive contribution to health and wellbeing, whilst avoiding any potential negative impacts of new development;*
>
> *B. Support healthy lifestyles, including through the use of active design principles making physical activity an easy, practical and attractive choice; and*
>
> *C. Be supported by a Health Impact Assessment for all developments which require to be screened for an Environmental Impact Assessment, and other proposals which, due to their location, nature or proximity to sensitive receptors, are likely to have a notable impact on health and wellbeing.*
>
> *Improvements in health facilities will be supported, responding to the changing needs and demands of both existing and new residents, including through:*
>
> *1. Requiring, where appropriate, the provision of new or improved health facilities as part of new developments proportionate to the additional demand that they would generate;*
>
> *2. Enabling the continued enhancement and successful operation of our hospitals; and*
>
> *3. Facilitating greater integration of health and social care, and the provision of integrated wellness hubs, including the co-location of health, community and wellness services.*

National Planning Policy Framework

3.13. The National Planning Policy Framework ("NPPF") (December 2024) sets out the Government's planning policies for England and how these should be applied. In order to achieve sustainable development, the

planning system has three overarching objectives, all of these contribute to the health of residents and the community. Paragraph 8 objectives are

> *"a) an economic objective – to help build a strong, responsive and competitive economy, by ensuring that sufficient land of the right types is available in the right places and at the right time to support growth, innovation and improved productivity; and by identifying and coordinating the provision of infrastructure;*
>
> *b) a social objective – to support strong, vibrant and healthy communities, by ensuring that a sufficient number and range of homes can be provided to meet the needs of present and future generations; and by fostering well-designed, beautiful and safe places, with accessible services and open spaces that reflect current and future needs and support communities' health, social and cultural well-being; and*
>
> *c) an environmental objective – to protect and enhance our natural, built and historic environment; including making effective use of land, improving biodiversity, using natural resources prudently, minimising waste and pollution, and mitigating and adapting to climate change, including moving to a low carbon economy.*

3.14. Chapter 8 of the NPPF seeks to promote healthy and safe communities. Paragraph 96 states that planning decisions should aim to achieve healthy, inclusive and safe places and beautiful buildings which:

> *"a) promote social interaction, including opportunities for meetings between people who might not otherwise come into contact with each other – for example through mixed-use developments, strong neighbourhood centres, street layouts that allow for easy pedestrian and cycle connections within and between neighbourhoods, and active street frontages;*
>
> *b) are safe and accessible, so that crime and disorder, and the fear of crime, do not undermine the quality of life or community cohesion – for example through the use of well-designed, clear and legible pedestrian and cycle routes, and high quality public space, which encourage the active and continual use of public areas; and*
>
> *c) 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.*

3.15. Paragraph 98 states that decisions should take into account and support the delivery of local strategies to improve health, social and cultural well-being for all sections of the community.

3.16. Open space and recreational opportunities are recognised as important infrastructure to support the health and well-being of communities.

3.17. Paragraph 110 is within the chapter relating to sustainable transport and states sustainable modes of travel can help to reduce congestion and emissions, and improve air quality and public health.

3.18. The design of new development is recognised as an important consideration to create places that are safe, inclusive and accessible, promote health and well-being, with a high standard of amenity for existing and future site users (para 135(f)).

3.19. Paragraph 198 relates to pollution and states that planning decisions should ensure that new developments are appropriate for its location, taking into account the likely effects of pollution on health, living conditions and the natural environment. In doing so, development should:

> *"a) mitigate and reduce to a minimum potential adverse impacts resulting from noise from new development – and avoid noise giving rise to significant adverse impacts on health and the quality of life72;*
>
> *b) identify and protect tranquil areas which have remained relatively undisturbed by noise and are prized for their recreational and amenity value for this reason; and*
>
> *c) limit the impact of light pollution from artificial light on local amenity, intrinsically dark landscapes and nature conservation."*

National Planning Practice Guidance

3.20. National Planning Practice Guidance ("NPPG") is an online guidance tool to assist the planning process, providing further detailed information which supports the policy basis in the NPPF. Paragraph 001 (ref. ID: 53-001-20190722) of the Achieving Health and Inclusive Communities section of the NPPG states:

> *"The design and use of the built and natural environments, including green infrastructure are major determinants of health and wellbeing. Planning and health need to be considered together in two ways: in terms of creating environments that support and encourage healthy lifestyles, and in terms of identifying and securing the facilities needed for primary, secondary and tertiary care, and the wider health and care system (taking into account the changing needs of the population)."*

Spatial Planning for Health

3.21. In June 2017 Public Health England published 'Spatial Planning for Health: An Evidence Resource for Planning and Designing Healthier Places'. The project aimed to identify the links between spatial planning and health based on the impacts of the built environment on health. The document reviewed evidence based on five key aspects of the built and natural environment:

- **Neighbourhood design** – Improving neighbourhood walkability and infrastructure designed to promote walking and cycling was found to be associated with numerous positive health outcomes, including increased physical activity levels and improved social engagement among older adults. Furthermore, areas of mixed land use, diverse housing types and high quality transport were found to be associated with increased physical activity levels, reduced risk of pedestrian injury and road traffic collisions, and increased social participation among older adults, among other positive health outcomes.
- **Housing** – Good quality housing and affordable housing was associated with a variety of positive health outcomes, including improved social outcomes among older adults, reduced injury among older adults and children and improved general physical and mental health. Among vulnerable groups (e.g., substance users, homeless, disabled), provision of affordable housing was associated with improved quality of life, mental health and clinical health-related outcomes.
- **Healthier food** – Provision of healthier and affordable food could be effective in improving dietary attitudes and behaviours. Urban growing was also found to be associated with improved attitudes towards healthy eating, increased opportunities for social connectivity and increased opportunities for physical activity.
- **Natural and sustainable environment** – Improvement to air quality, prioritisation of neighbourhood tree planting, and provision of open and green spaces, was associated with increased physical activity, increased environmental cooling, and improved general physical health outcomes. In addition, provision of infrastructure to support walking and cycling and increased access to buildings and facilities was associated with increased physical activity and improved social engagement among older adults.
- **Transport** – Infrastructure for walking and cycling, installation of traffic calming measures, and public realm improvements (e.g., street lighting) was associated with increased mobility, physical activity levels, reduced BMI and reduced risk of injury, among other positive outcomes. Furthermore, the provision of open and green space, high quality public transport and improved air quality was associated with numerous positive health outcomes, including: increased physical activity; improved cardiovascular outcomes; and improved social participation, among others.

Health Impact Assessment in Spatial Planning (October 2020)

3.22. The guide was prepared by Public Health England to support the preparation of HIAs in the planning system. The guidance described the health and well-being outcomes that are influenced through planning, and how these outcomes can be optimised through the planning process.

3.23. Table 3.1 summarises a list of considerations that HIAs can seek to review as part of the planning process.

Table 3.1: Wider Determinants of Health and Well-being Outcomes

Health Considerations	Wider Determinants of Health and Well-being			
	Access	Traffic and Transport	Socio-economic	Land Use
Reduce health inequalities	• Local public key services and facilities • Good quality affordable housing • Healthy and affordable food • Natural environment • Green spaces and public realm • Leisure, sport, recreation, play and physical activities within the environments	• Accessibility • Access to public transport • Opportunities for active travel (cycling and walking) • Links between communities • Community severance • Connections to jobs • Connections to services, facilities and leisure	• Employment, including skills development and training opportunities • Local business activity • Regeneration • Tourism and leisure industries • Community/ social cohesions and access to social networks • Community engagement	• Sustainable and efficient land use in urban and/or /rural settings • Quality of Urban and natural environments, such as air and noise pollution • Climate change impacts

Summary

3.24. This chapter has presented an overview of national and local planning policy with respect to health considerations and HIAs. The Council have requested a HIA to support the planning application due to the scale of the development, and as such, the following chapter sets out the HIAs methodology.

4. HIA Methodology and Approach

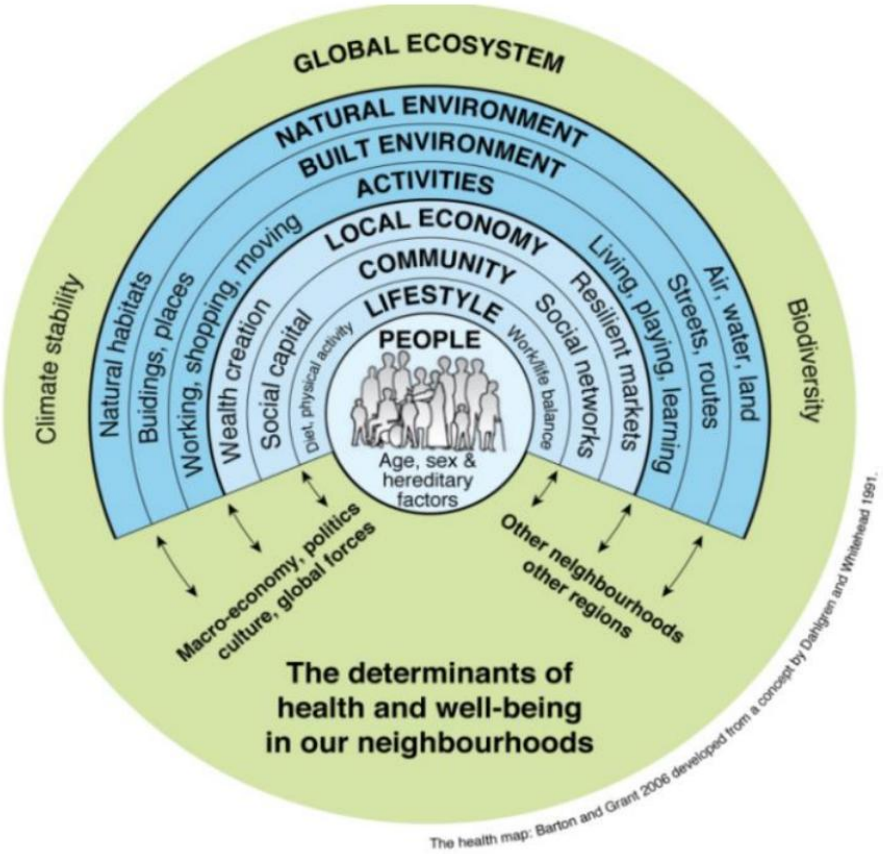
4.1. HIA is a systematic approach to identify the differential health and wellbeing impacts, both positive and negative, of projects and plans. The assessment of health is particularly concerned with the distribution of certain effects within a population, as different groups are likely to be affected in different ways. It therefore looks at how health and social determinants might be affected by a proposed development.

4.2. The aim of HIA is to support and add value to the decision-making process by providing a systematic analysis of the potential impacts, as well as recommending opportunities, where appropriate to, mitigate negative impacts and reduce health inequalities.

Determinants for Health

4.3. Dahlgren and Whitehead developed the determinants for health model which identified a range of influences on health, providing a broad overview of the links with the planning system. These are illustrated in Figure 4.1.

Figure 4.1: Determinants for Health



Methodology

4.4. MCC does not have a Supplementary Planning Document ("SPD") which provides guidance when undertaking HIAs, nor is there a standard methodology when undertaking HIAs. The NHS Healthy Urban Development Unit ("HUDU") have, however, prepared a series of guidance notes to guide the process of undertaking HIAs. These include the Rapid Health Impact Assessment Tool (Fourth Edition, October 2019); and Healthy Urban Planning Checklist (April 2017).

4.5. The HUDU checklist interprets the health determinants into a set of themes which can be used to assess development proposals:

- Healthy housing.
- Active travel.
- Healthy environment.
- Vibrant neighbourhoods.

4.6. The HUDU guidance recognises that there are generally three types of HIAs, desktop; rapid; and full. Based on the type of development proposed, its scale, the existing site conditions and the likely effects, it is considered the most appropriate HIA approach is a rapid appraisal.

Scope of the Assessment

4.7. Utilising the HUDU guidance and other relevant policy and guidance, the assessment has based on the following indicators:

- Pollutants and neighbourhood amenity.
- Accessibility and active transport.
- Crime reduction and community safety.
- Access to education, training and employment opportunities.
- Social cohesion and lifetime neighbourhoods.
- Minimising the use of resources.
- Climate change.
- Health inequalities.

4.8. The above health indicators have informed the planning and health issues which warrant consideration as part of the HIA.

Baseline

4.9. These themes include a series of assessment criteria which formed the basis of the HIA. As such, this HIA has undertaken a baseline assessment of the site and surrounding area. Due to the nature of the datasets available, the geographical scope of the assessment will comprise a mix of the site, the Lower Super Output Area ("LSOA") (Manchester 011B), ward data, MCC's administrative area, the North West Region and England. Once the baseline has been established, the impacts of the proposed development against the 12 themes set out above will be undertaken.

4.10. The receptor groups identified include:

- Construction workers.
- Existing off-site residents.
- Future site users.

Impact Assessment

4.11. Based on the theme assessment criteria and health and wellbeing issues identified their relevance to the proposed development is established. After which the potential health impact is determined which will either be positive; negative; neutral; or uncertain. The health impact will take into account any mitigation which is secured by design (embedded mitigation) or through further mitigation which is secured by condition on the decision notice.

Information Sources

4.12. The HIA has utilised the findings of technical assessments undertaken to support the planning application, and a suite of online government datasets, including (but not limited to):

- Air Quality Assessment.
- Crime Impact Statement.
- Planning Statement.
- Transport Assessment.
- Framework Travel Plan.
- Noise Assessment.
- Phase 1 Ground Investigation Report.
- Flood Risk Assessment & Outline Drainage Strategy.
- Ecological Surveys and Assessments.
- Arboricultural Impact Assessment.

4.13. No primary research or surveys have been undertaken, and the assessment is based on published information which is considered an appropriate level of assessment based on the proposals.

Limitations

4.14. The latest published data available has been used throughout this HIA. However, the baseline demographics are constantly evolving and therefore the impacts identified relate to the proposed development sought for approval and the current demographics established at the point this assessment has been completed.

5. Baseline Conditions

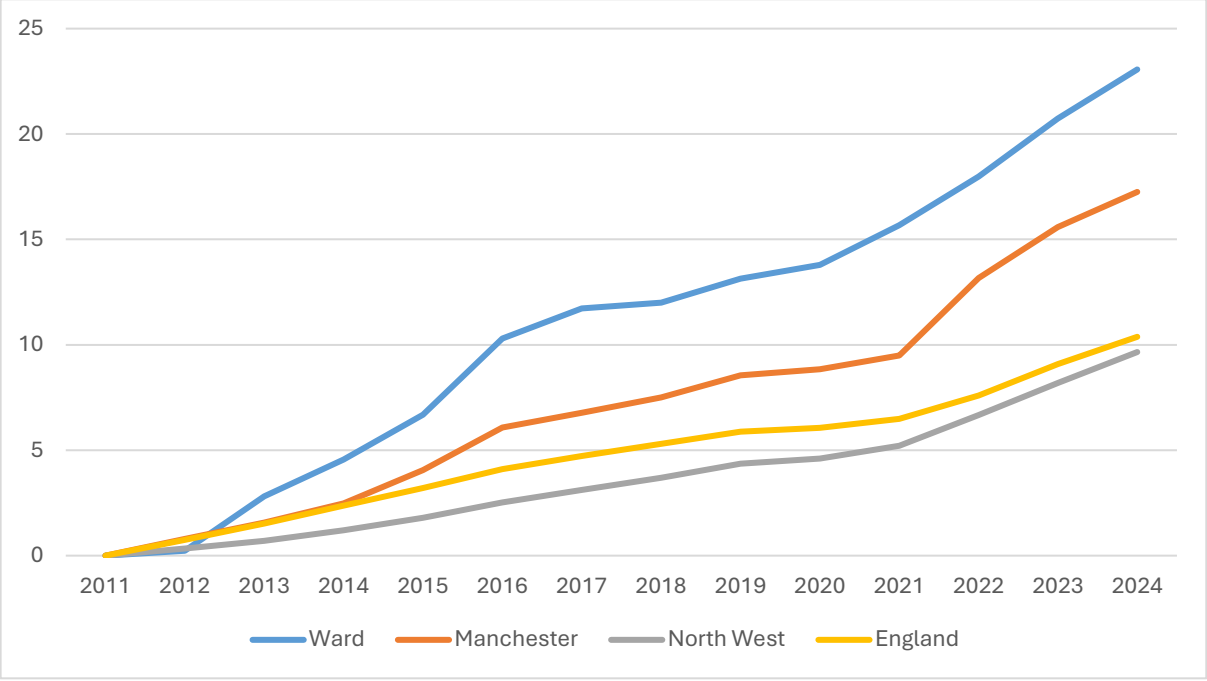
5.1. This chapter assesses the baseline conditions of residents in the local area across different spatial scales ranging from neighbourhood to national level. The various baseline profiles for the local area have been developed to inform the impact assessment presented in Chapter 6.

Population and Demographics

Population & Age Structure

5.2. In 2011 the resident population in Manchester was 502,902. This has increased to 589,670 in 2024, representing a 86,768 (17.25%) increase in residents over a ten year period. Comparatively, the North West increased from 7,056,000 to 7,737,414 (9.65%); and England from 53,107,200 to 58,620,101 (10.38%) over the same time period. The largest increases are seen at ward level which have increased by over 23% between 2011 and 2024, as illustrated in Figure 5.1.

Figure 5.1: Population Change, 2011 – 2021



5.3. Based on 2021 census data, there is broadly an even split of males and females in Manchester, 274,061 and 277,877 respectively. In 2021, Manchester had a population density of 4,773 residents per square km, an increase of 9.7% since the 2011 census. This is significantly above that of the North West (525.8) and England (433.5). Manchester is the most densely populated of the 39 local authority areas in the North West.

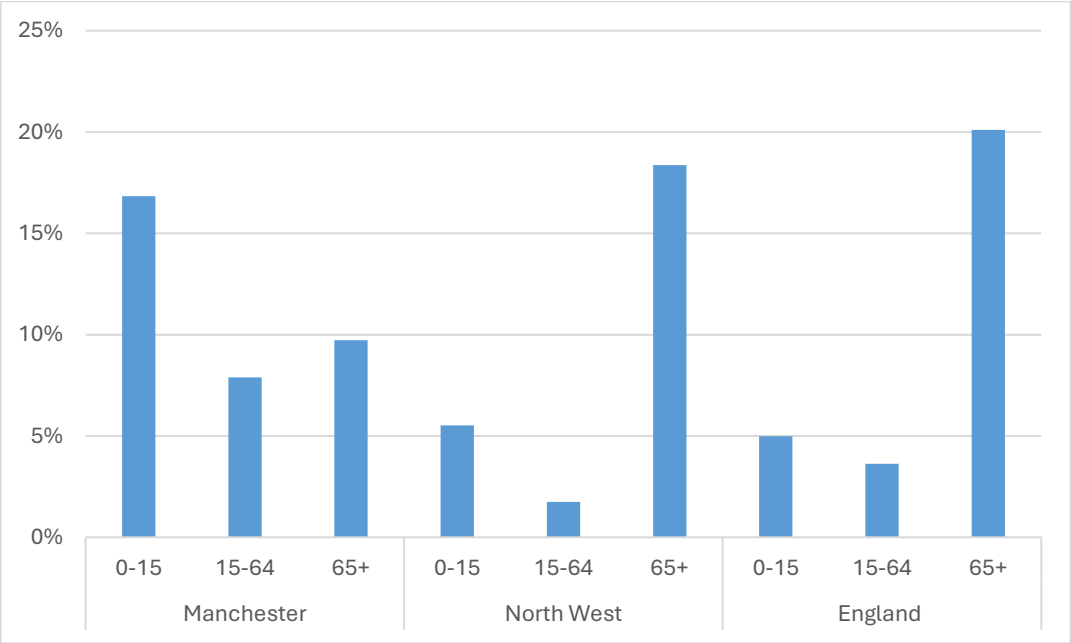
5.4. Manchester has seen a good deal more growth in the younger age brackets when compared with the regional and national population. There has been just under 17% growth in the 0-14 age bracket, whilst comparatively the working age population (15-64) only increased by 7.89% in Manchester. There is a markedly reduced proportion of growth in retirees (65+) in Manchester (9.72%) when compared with the North West (18.37%) and England (20.10%). This is detailed in Table 5.1 and further illustrated in Figure 5.2.

5.5. Manchester's proportionate increase in young people is likely testament to the strong levels of growth in the City over the past ten years, specifically through the provision of housing and employment to support new and growing families.

Table 5.1: Age Profile (2011 v 2021)

Age Range	2011	2021	No. change	% Change
Manchester				
0-15	91,815	107,283	15,468	**16.84%**
15-64	363,768	392,487	28,719	7.89%
65+	47,544	52,167	4,623	9.72%
Total	503,127	551,937	48,810	9.70%
North West				
0-15	1,236,664	1,305,134	68,470	5.53%
15-64	4,644,358	4,725,945	81,587	1.75%
65+	1,171,155	1,386,318	215,163	**18.37%**
Total	7,052,177	7,417,397	365,220	5.17%
England				
0-15	9,372,010	9,838,977	466,967	4.98%
15-64	34,979,917	36,249,768	1,269,851	3.63%
65+	8,660,529	10,401,303	1,740,774	**20.10%**
Total	53,012,456	56,490,048	3,477,592	6.55%

Figure 5.2: Percentage Change in Age Profile between 2011 and 2021



Health Characteristics of the Population

5.6. The health of residents in Manchester is generally worse than the national average. A detailed summary of various health related statistics are set out in Table 5.2 which allow the following conclusions to be drawn:

- The health of residents in Manchester is generally worse than the national average. The life expectancy for both males and females is below that of the North West and England. The trend is, however, improving over time.
- The mortality rate in Manchester is significantly above that of England, standing at c. 52% higher. Similarly the proportion of residents mortality attributed to cancer and cardiovascular diseases is significantly above that of the North West and England.
- Alcohol related conditions and smoking prevalence is worst in Manchester, but the authority has the lowest percentage of adults classified as overweight or obese, standing at c. 60.5%.
- Infant mortality rates are markedly higher in Manchester (6.5) when compared with the North West (4.6) and England (4.2).
- Poverty is higher in Manchester. c. 40% of households are within 'relative low income' households which have incomes below 60% of the mean average in that year. This is used to look at how changes in income for the lowest income households compare to change in incomes near the average. c. 36% of households are within 'absolute low income' households which have incomes 60% below the average in 2010/11, adjusted for inflation. It is used to look at how changes in income for the lowest income households compare to the changes in the cost of living.

Table 5.2: Manchester's Health Profile[1]

No.	Indicator	Manchester		North West (Value)	England (Value)
		Count	Value		
Life Expectancy and Causes of Death					
1.	Life expectancy at birth (Male, 1 year range) 2024	-	75.8	78.4	79.8
2.	Life expectancy at birth (Female, 1 year range) 2024	-	80.6	82.2	83.6
3.	Under 75 mortality rate from all causes 2024*	1,708	501.4	385.2	329.4
4.	Under 75 mortality rate from cardiovascular disease 2024*	385	115.3	90.1	74.3
5.	Under 75 mortality rate from cancer 2024*	499	154.4	127.4	117.9
6.	Suicide rate (Persons, 10+ yrs) 2022 - 24	195	13.4	13.6	10.9
Injuries and Ill Health					
7.	Killed and seriously injured (KSI) casualties on England's roads 2024	266	153.1*	90.5*	89.8*

[1] https://fingertips.phe.org.uk/profile/health-profiles (accessed 25 November 2024).

No.	Indicator	Manchester		North West (Value)	England (Value)
		Count	Value		
8.	Emergency Hospital Admissions for Intentional Self-Harm 2023/24*	670	105.9	126.2	117.0
9.	Hip fractures in people aged 65 and over 2023/24*	310	612	578	547
10.	Percentage of cancers diagnosed at stages 1 and 2, 2022	640	54.7%	55.8%	56.8%
11.	Estimated diabetes diagnosis rate 2018	-	77.2%	81.1%	78.0%
12.	Estimated dementia diagnosis rate (aged 65 and over) 2025	2,850	75.1	69.4	65.6
	Behavioural Risk Factors				
13.	Admission episodes for alcohol-specific conditions - Under 18s 2021/22 – 23/24	54	14.0	25.6	22.6
14.	Admission episodes for alcohol-related conditions (Narrow) 2023/24	2,249	536	501	504
15.	Smoking Prevalence in adults (18+) - current smokers (APS) 2024	-	15.6%	10.8%	10.4%
16.	Percentage of physically active adults 2023/24	-	64.7%	65.5%	67.4%
17.	Overweight (including obesity) prevalence in adults (18+ yrs) 2023/24	-	60.5%	66.7%	64.5%
	Child Health				
18.	Under 18s conception rate / 1,000, 2022	148	14.4	16.8	13.9
19.	Smoking status at time of delivery 2024/25	374	5.8%	6.5%	6.1%
20.	Baby's first feed breastmilk (previous method) 2018/19	-	-	-	-
21.	Infant mortality rate 2022-24	132	6.5	4.6	4.2
22.	Year 6 prevalence of obesity (including severe obesity) (10-11 yrs) 2024/25	1,810	26.9%	23.6%	22.2%
	Wider Determinants of Health				
23.	Children in relative low income families (under 16s) 2023/24	46,986	40.7%	27.8%	22.1%
24.	Children in absolute low income families (under 16s) 2023/24	41,564	36.0%	24.2%	19.1%
25.	Percentage of people in employment 2024/25	270,400	69.1%	73.7%	75.7%
26.	Violent crime - hospital admissions for violence (including sexual violence) 2020/21 - 22/23	875	46.6	43.2	34.2
27.	Winter mortality index Aug 2021 - Jul 2022	130	11.4%	8.2%	8.1%
28.	New STI diagnoses (excluding chlamydia aged under 25) per 100,000 2024	6,289	1,084	448	482
29.	TB incidence (three year average) 2022-24	441	25.3	7.6	8.5

* Mortality figures based on per 100,000 population

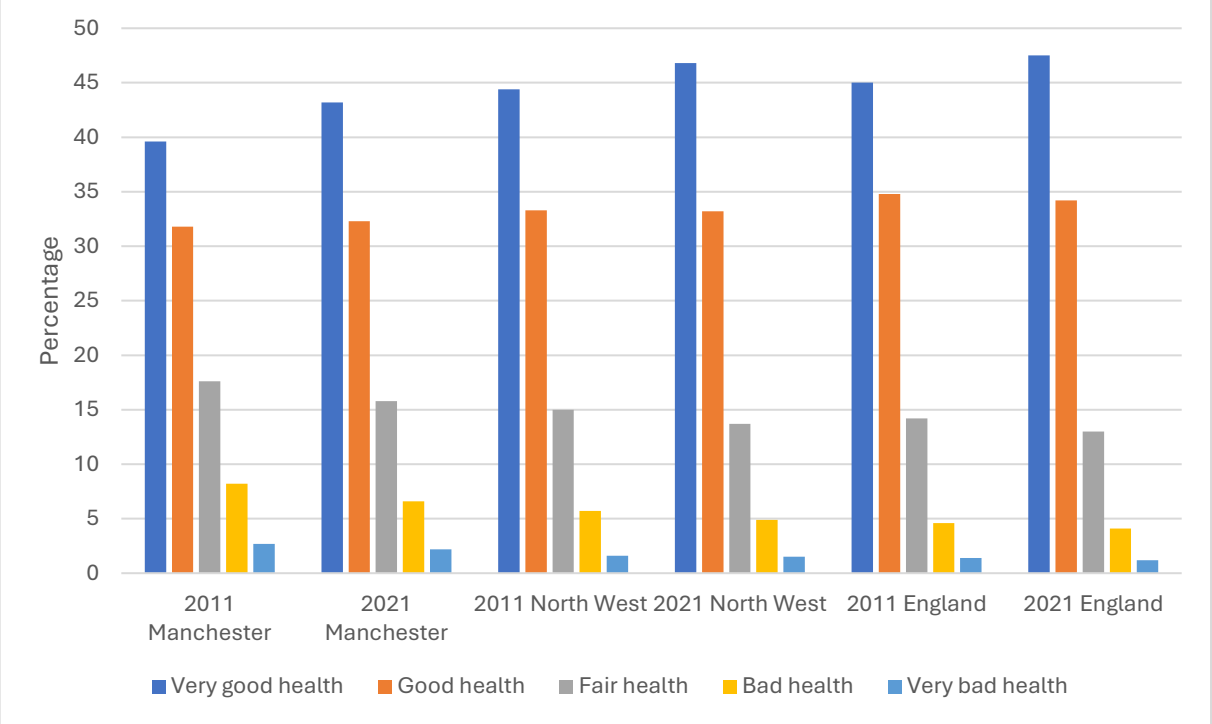
Indicator value types:

- 1,2 - Life expectancy, years.
- 3,4,5 - Directly age-standardised rate per 100,000 population aged under 75

- 6 - Directly age-standardised rate per 100,000 population aged 10 and over
- 7 - Crude rate per 100,000 population
- 8 - Directly age-standardised rate per 100,000 population
- 9 - Directly age-standardised rate per 100,000 population aged 65 and over
- 10 - Proportion - % of cancers diagnosed at stage 1 or 2
- 11 - Proportion - % recorded diagnosis of diabetes as a proportion of the estimated number with diabetes
- 12 - Proportion - % recorded diagnosis of dementia as a proportion of the estimated number with dementia
- 13 - Crude rate per 100,000 population aged under 18
- 14 - Directly age-standardised rate per 100,000 population
- 15,16,17 - Proportion
- 18 - Crude rate per 1,000 females aged 15 to 17
- 19,20 - Proportion
- 21 - Crude rate per 1,000 live births
- 22 - Proportion
- 23, 24,25 – Proportion.
- 26 - Directly age-standardised rate per 100,000 population
- 27 - Ratio of excess winter deaths to average of non-winter deaths
- 28 - Crude rate per 100,000 population aged 15 to 64 (excluding Chlamydia)
- 29 - Crude rate per 100,000 population

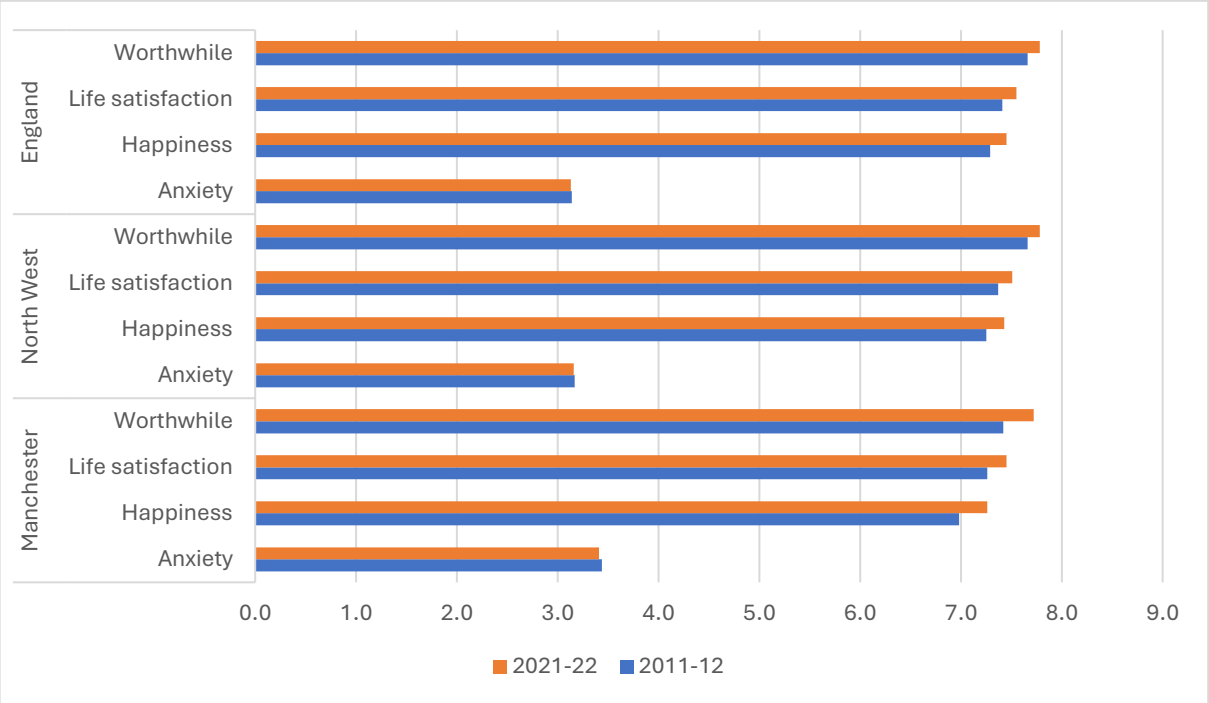
5.7. Despite the health issues highlighted in Table 5.2, the health of residents in Manchester has generally improved over the 10 year period since 2011. 43.2% of residents registered very good health, up from 39.6% in 2011. The level is still below that of the North West (46.8%) and England (47.5%) in the 2021 census. The increased proportion of residents experiencing good health has led to a corresponding decline in poor health. Only 8.8% of residents in 2021 recorded bad or very bad health in Manchester, down from 10.9% in 2011. This is still some way off that of the North West (6.4%) and England (5.3%) in 2021.

Figure 5.3: Health of Residents (2011 v 2021)



5.8. The Census measures personal well-being in the UK. This estimates life satisfaction, a feeling that the things done in life are worthwhile, happiness and anxiety. Each of these measures are scored out of 10, with 10 being the highest score. Manchester has consistently scored worse than the North West and England during the 2011 census, but only at a marginal rate as illustrated in Figure 5.4.

Figure 5.4: Personal Well-being (2011 v 2021)

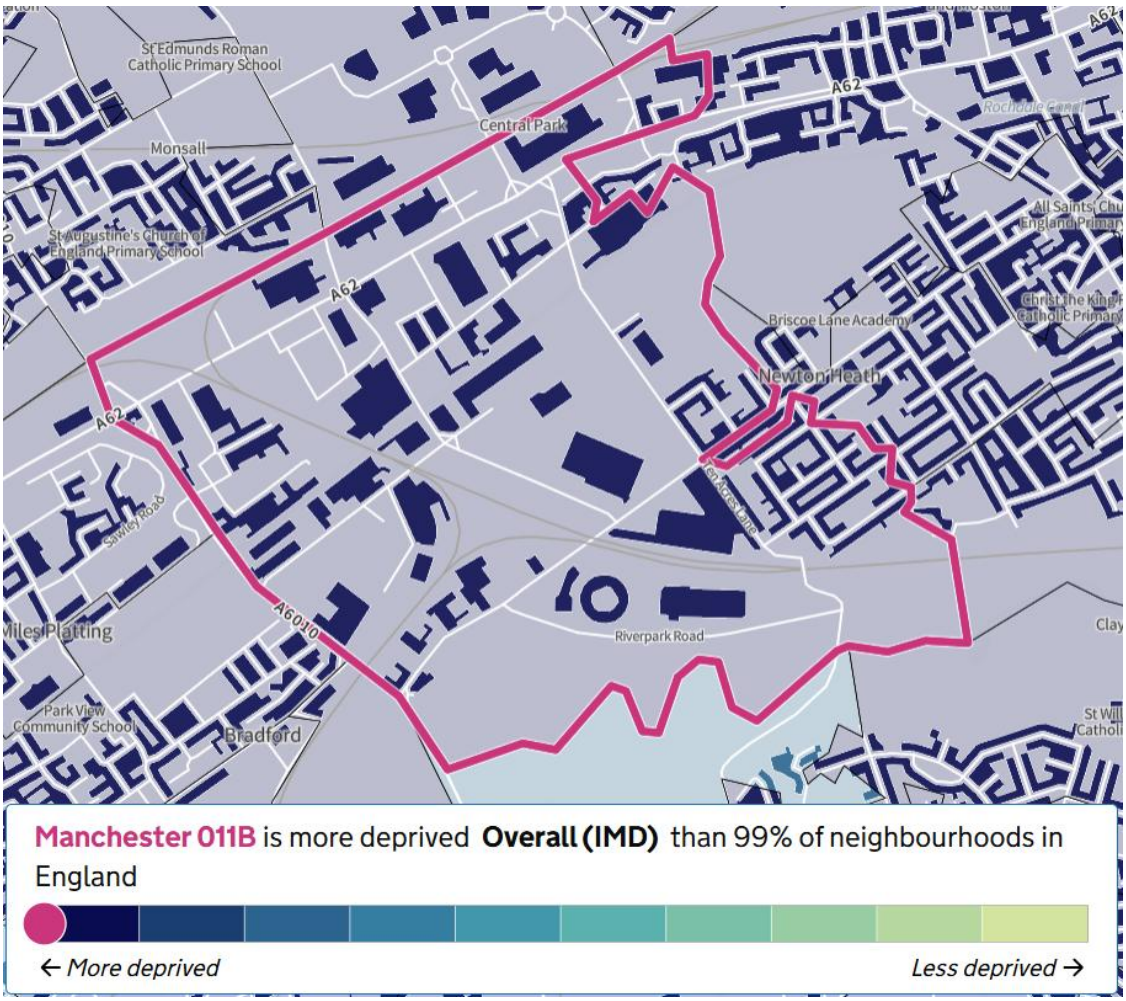


Deprivation

5.9. The latest indices of deprivation were released in 2025. The statistics measure relative levels of deprivation in 33,755 small areas or neighbourhoods called LSOAs. Deprivation is measured across seven domains including income; employment; health deprivation and disability; education, skills and training; crime; barriers to housing and services; and living environment.

5.10. The site is located in LSOA Manchester 011B and its extent is shown in the below figure. The Wakefield local authority district contains 214 other LSOAs. Only 4% of LSOAs in this area are more deprived than the 011B LSOA. Only 1% of neighbourhoods in England are more deprived (ranked 502 out of 33,755 neighbourhoods). Manchester 011B is most deprived in income, it is more deprived than 98% of neighbourhoods.

Figure 5.5: IMD 2019 Map



Economic Activity and Unemployment

5.11. Based on ONS data, around 295,700 residents in Manchester are economically active and in employment. Between 2014 and 2024, the number of economically active residents in employment increased from 228,400 to 263,600, a c. 15% increase. However, at present, the proportion of economically active residents in Manchester and in employment (73.6%) is behind that of the North West (74.2%) and England (75.8%).

5.12. Approximately 20,700 residents are considered economically active and unemployed in Manchester, representing 6.6% of the population. Again, this is above that of the North West (4.1%) and England (4.3%). Of those residents which are economically inactive, 9,300 want a job.

5.13. Manchester's largest occupation for its residents is defined as professional occupations, amounting to 111,100 residents (37.6%). This is considerably above that of the North West and England which sit at 26.8% and 27.2% respectively.

Table 5.3: Employment by Occupation (Oct 2024 – Sep 2025)

Occupation	Manchester No.	Manchester (%)	North West (%)	England (%)
Soc 2020 major group 1-3	**174,300**	**59.1**	**51.0**	**54.0**
1 Managers, directors and senior officials	25,100	8.5	9.9	11.7
2 Professional occupations	111,100	37.6	26.8	27.2
3 Associate professional occupations	38,200	12.9	14.0	15.0
Soc 2020 major group 4-5	**34,200**	**11.6**	**18.1**	**17.5**
4 Administrative & secretarial occupations	16,200	5.5	9.6	9.2
5 Skilled trades occupations	18,000	6.1	8.4	8.3
Soc 2020 major group 6-7	**41,400**	**14.0**	**15.7**	**14.1**
6 Caring, leisure and Other Service occupations	24,300	8.2	9.4	8.5
7 Sales and customer service occs	17,100	5.8	6.2	5.6
Soc 2020 major group 8-9	**45,200**	**15.3**	**15.3**	**14.4**
8 Process plant & machine operatives	15,900	5.4	5.9	5.6
9 Elementary occupations	29,300	9.9	9.3	8.8

5.14. In February 2026, 25,060 residents are claiming universal credit in Manchester. This amounts to 6% of the residents aged 16-64 and is above that of the North West (4.2%) and England (4.1%). Manchester has a higher level of job density, 1.21, when compared with the North West (0.82) and England (0.87).

Accessibility

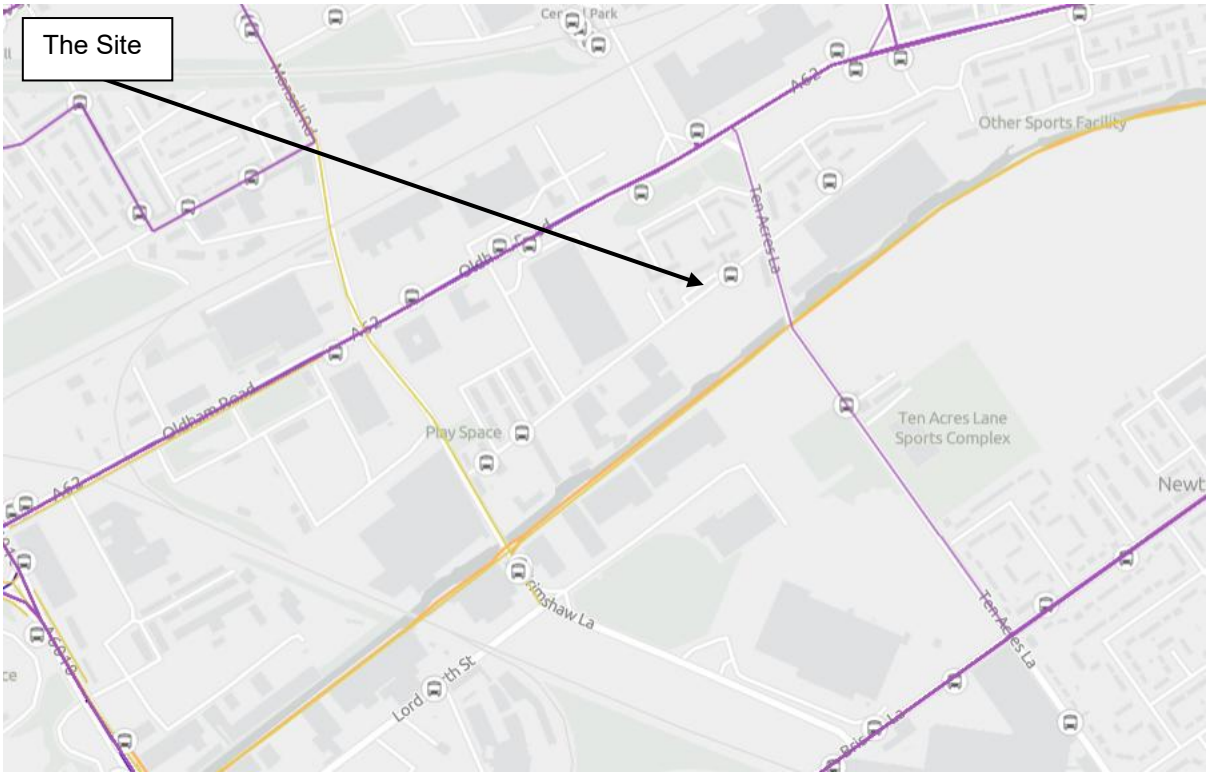
5.15. Bower Street is a 20mph street which has footways with widths over 2m wide which provide connections to pedestrian infrastructure on the Oldham Road corridor.

5.16. Access to the formal cycle network can be gained via the traffic free route along the Rochdale Canal and on road routes on Oldham Road.

5.17. The nearest bus stops to the Site are located on Oldham Road, 300m away. The nearest bus stops have flag poles, shelters, seating and timetable information. Controlled crossings are in place on Oldham Road to provide access to eastbound services.

5.18. Greater Manchester has also developed a tool known as Greater Manchester Accessibility Levels ("GMAL"). This provides a detailed and accurate measure of the accessibility of a location to both the conventional public transport network (i.e. bus, metrolink, rail) and Greater Manchester's Local Link (flexible transport service), taking into account walk access time and service availability. The GMAL is attributed a score between 1 and 8, with 1 being the lowest level of accessibility and 8 the highest level. The site is located within a GMAL 6. Figure 5.9 illustrates the various walking, cycling and public transport infrastructure available within the site's vicinity. The purple lines relate to bus routes whilst the yellow indicate cycle routes.

Figure 5.9: Sustainable Transport Infrastructure



5.19. There are also a number of gyms / fitness centres within walking distance of the site.

Crime

5.20. The Greater Manchester Police[2] record crime within the local area. The site is located within the Newton Heath area to record crime. There have been five crimes recorded over the past 12 months (February 2025 – January 2026) in Newton Heath.

Environmental Considerations

Air Quality Impact of the Proposed Development

5.21. An Air Quality Assessment ("AQA") has been undertaken by Merebrook Consulting in support of the planning application. The Site is not situated within an Air Quality Management Area ("AQMA"), but it is located approximately 180 m north of Manchester AQMA (Oldham Road, A62), declared by MCC in respect of annual mean concentrations of nitrogen dioxide.

5.22. The site is considered suitable for its intended use. DEFRA background maps, baseline concentrations of NO2, PM10 and PM2.5 across the site are predicted to be less than half of their respective annual mean AQOs.

5.23. During the construction phase, there would be localised air quality and dust effects. These are not anticipated to be significant and dust suppression measures in accordance with IAQM criteria will be set out within a Construction Environmental Management Plan.

5.24. During the operational phase, the proposed development incorporates eight car parking spaces. The scheme is not expected to result in a significant increase in vehicle movements on the local road network.

5.25. Recovered heat from the data centre will be re-used for water and space heating within the buildings. Excess heat can be made available for offsite, district/community heating schemes in future.

5.26. The data centre will include emergency generators to provide back-up power in the event of a power outage. The generators are intended to be fuelled using hydrogenated vegetable oil (HVO) but may have a secondary fuel option (gas or hydrogen).

5.27. The generators will be operated for testing and emergency use only, they will not be operated as Short-Term Operating Reserve (STOR) or Demand Response System (DRS).

[2] https://www.police.uk/pu/your-area/greater-manchester-police

5.28. The overall effect of the Proposed Development on local air quality is therefore judged to be 'not significant'.

Noise Impact of the Proposed Development

5.29. A Noise Assessment has been undertaken by SOL Acoustics in support of the planning application. A series of noise surveys have been undertaken on site to determine the likely sources of noise and the relevant levels. The nearest residential houses are as follows:

- Two storey housing on Bower Street, located c.15 metres to the north of the Facility.
- Two storey housing on Ten Acres Lane, located c.10 metres to the northeast of the Facility.
- Two storey housing on Makkah Close, located c.140 metres to the southeast of the Facility.

5.30. The potential noise effects associated with the proposed development include:

- Noise associated with the plant and site's normal operation activities.
- Noise associated with the plant and site's emergency operation activities.
- Noise associated with vehicular movements to and from the site.
- Construction phase noise effects.

5.31. The proposed operation of the site and the non-emergency plant will be continuous (24/7) with a night set-back duty for the proposed air cooled chillers.

5.32. The proposed Emergency Generator Sets will only run for short period of testing (during normal working hours Mon-Fri and limited to less than 18no hours per annum) and under emergency conditions.

5.33. Occasional HGV movements will occur at the proposed site however this is expected only to occur for the purposes of site maintenance (e.g. replacement of plant).

5.34. The assessment demonstrates that the total, aggregate environmental noise impact arising from the proposed operation of the normally operation plant, meets the maximum permissible noise impact requirements of MCC, providing that the plant items are attenuated to achieve the required acoustic specification.

5.35. The assessment demonstrates that the total, aggregate environmental noise impact arising from the proposed operation of emergency plant, meets the maximum permissible noise impact proposed herein, providing that the plant items are attenuated to achieve the required acoustic specification.

5.36. Given that the residual noise climate at the site comprises predominantly road traffic including HGV movements along Bower Street and Ten Acres Lane, and HGV movements associated with the proposed site are expected to be very infrequent, it is anticipated that the specific noise level generated will not be readily distinct in nature when compared to the residual noise climate and as such the risk of adverse impact is reduced and are not anticipated to be significant.

5.37. During construction, noise and vibration effects will be controlled and mitigated through a series of best practice measures secured via CEMP.

Ground Conditions Impact of the Proposed Development

5.38. A Phase I Geo-environmental Assessment has been undertaken by RWO in support of the planning application.

5.39. There are no landfills on site, or adjacent to it. A historical landfill is located c. 169m northeast of the site which received inert, industrial, commercial, household, special waste and sludge. There are further waste treatment and management sites in the local area, the nearest of which is c. 134m southwest of the site.

5.40. Based on the geological setting of the site, information provided by the Mining Remediation Authority (MRA) Interactive Viewer and CA/ MRA Consultant's Report, it is considered that the site is not at risk from historic coal mining activities. A UXO Risk Map has been obtained from Zetica Ltd (Zetica). This indicates that the site is in a moderate risk area, with respect to UXB.

5.41. Potential contamination could be associated with:

- Historic made ground associated with previous site usage (buildings in the east and recreational ground) contaminant such as heavy metals, PAHs, sulphates, asbestos.
- Off-site sources associated with nearby mills, dye works and quarries (heavy metals, PAHs, BTEX, MTBE).
- Nearby former backfilled reservoir (hazardous ground gas).
- Contamination aggressive to building materials in natural and made ground soils.

5.42. Potential contaminants include heavy metals, PAHs, TPH compounds, asbestos. The BGS information also shows that no artificial deposits are said to be underlying the site. However, given the history of the site there is likely to be some Made Ground of unknown, which may present a source of ground gas.

5.43. To mitigate the effects associated with existing ground conditions on and off site, a suite of further intrusive investigations will be undertaken. The scope of these surveys will be agreed with MCC and inform a

remediation strategy. Following the implementation of remedial measures which accord with best practica, it is not considered there would be ground condition effects that would effect human health receptors in the long term.

Flood Risk and Water Resource Impact of the Proposed Development

5.44. A Flood Risk Assessment and Drainage Strategy has been prepared by RWO.

5.45. The proposed development has been assessed in detail with respect to flood risk and surface water management. The site is located in Flood Zone 1, indicating a low risk of fluvial flooding, and all other potential sources of flooding—including pluvial, groundwater, sewer, and artificial sources—have been determined to pose a low or manageable risk.

5.46. A robust surface water management strategy has been developed to ensure the proposed development does not increase flood risk either on-site or to third-party land. This includes discharging to the Rochdale Canal in place at a controlled greenfield runoff rate of 8.7 l/sec, incorporating sustainable drainage systems (SuDS), and ensuring attenuation storage for critical storm events, including allowance for climate change.

Nuisance Effects associated with the Proposed Development

5.47. As set out above, a series of specialist environmental assessments have been undertaken in support of the planning application. These assessments consider the suitability of the proposed use based on its existing environment conditions.

5.48. The findings of these assessments has confirmed the site is suitable for its intended use and suitable mitigation measures can be employed during construction and operation to minimise effects to off and on-site receptors.

Summary

5.49. This chapter has reviewed the baseline conditions at the site and a series of wider geographical scales to understand the health and environmental conditions for existing and future residents in Manchester. The key observations are as follows:

- Generally the health of residents in Manchester is worse than that of the North West and England.
- The site is, however, sustainably located with immediate access to a range of services and amenities.
- There is an extensive sustainable transport network within the immediate vicinity of the site which connects to a series of transport hubs including bus and rail services.

- The site is not within an AQMA.
- The proposed development could lead to environmental effects associated with noise pollution; however, a suite of mitigation measures have been recommended and can be secured by planning condition.

6. Impact Assessment

6.1. The following impact assessment uses the HUDU Healthy Urban Planning Checklist. The potential health impacts are described as positive, negative, uncertain or neutral.

6.2. The health impacts identified relate to both existing human health receptors and future on-site receptors. Where a negative effect is identified, mitigation is suggested to reduce the impact where possible.

6.3. Mitigation comprises two types of measures:

- **Embedded mitigation** – this is mitigation measures which have been designed-in to the proposed development and secured through approval of the application plans.
- **Further mitigation** – This is mitigation which is secured by way of condition which includes measures set out in additional surveys and/or reports with the aim of reducing the likely effects associated with the proposed development.

Table 6.1: Health Impact Assessment

Issue	Key Criteria	Relevant to this Development	Potential Health Impact	Commentary and Recommended Mitigation
Healthy Housing				
Housing design	Does the proposal meet all the standards for daylight, sound insulation, private space and accessible and adaptable dwellings?	No	-	Housing not proposed as part of the development.
Accessible housing	Does the proposal provide accessible homes for older or disabled people?	No	-	
	Does the proposal ensure that every non-ground floor dwelling is accessible by a lift that can accommodate an ambulance trolley?	No	-	
Healthy living	Does the proposal provide dwellings with adequate internal space, including sufficient storage space and separate kitchen and living spaces?	No	-	
	Does the proposal encourage the use of stairs by ensuring that they are well located, attractive and welcoming?	No	-	
Housing mix and affordability	Does the proposal provide affordable family sized homes?	No	-	
Active Travel				
Promoting walking and cycling	Does the proposal promote cycling and walking through measures in a travel plan, including adequate cycle parking and cycle storage?	Yes	Positive	A Travel Plan has been prepared by SK Transport in support of the planning application. This recommends a series of measures to encourage the use of sustainable modes of travel which can be utilised by future site users. Sufficient levels of secure cycle parking has been provided and a travel plan will be monitored during the operation of the development.
Safety	Does the proposal include traffic management and calming measures and safe and well lit pedestrian and cycle crossings and routes?	Yes	Positive	The internal landscaping has been designed with pedestrians and cyclists, creating clearly distinguished zones for pedestrians and cyclists, keeping these receptors separate from the plant areas.

Issue	Key Criteria	Relevant to this Development	Potential Health Impact	Commentary and Recommended Mitigation
Connectivity	Does the proposal connect public realm and internal routes to local and strategic cycle and walking networks and public transport?	Yes	Positive	Safe and secure access to Bower Street is proposed as part of the development. The site will not be accessible to members of the public and, therefore, does not provide internal routes.
Minimising car use	Does the proposal seek to minimise car use by reducing car parking provision, supported by the controlled parking zones, car free development and car clubs?	Yes	Positive	The proposed development is anticipated to generate minimal vehicular movements. That aside, a covered cycle parking area is provided with capacity for eight bikes (four stands), this is sufficient to meet both staff and visitor cycle parking requirements.
Healthy Environment				
Construction	Does the proposal minimise construction impacts such as dust, noise, vibration and odours?	Yes	Positive	A Construction Environmental Management Plan ("CEMP") will be secured by condition on the decision notice. This will be agreed with the Council prior to commencing works on site and set out a series of best practice construction management and site controls to manage and mitigate construction phase effects.
Air quality	Does the proposal minimise air pollution caused by traffic and energy facilities?	Yes	Positive	An air quality assessment has been undertaken by Merebrook and confirmed that no significant air quality effects are anticipated. Best practice construction mitigation will be secured within the CEMP. During operation, the vehicular movements are minimal. With regards to climate change, the Energy and Environmental Standards Statement demonstrates a reduction against Part L through the use of solar panels.
Noise	Does the proposal minimise the impact of noise caused by traffic and commercial uses through insulation, site layout and landscaping?	Yes	Positive	A noise assessment has been undertaken which confirms the noise effects associated with the proposals. A suite of mitigation measures are proposed including appropriate site layout, attenuation measures and acoustic barriers to

Issue	Key Criteria	Relevant to this Development	Potential Health Impact	Commentary and Recommended Mitigation
				minimise the noise related impacts to existing residential receptors in the local area. The noise assessment demonstrates compliance with relevant British standards in both normal and emergency operating scenarios.
Open space	Does the proposal retain or replace existing open space and in areas of deficiency, provide new open or natural space, or improve access to existing spaces?	No	N/A	The site is private brownfield land. It does not contribute to local public open space provision, and due to security requirements, the proposed site will not be accessible to members of the public.
	Does the proposal set out how new open space will be managed and maintained?	No	N/A	-
Play space	Does the proposal provide a range of play spaces for children and young people?	No	N/A	-
Biodiversity	Does the proposal contribute to nature conservation and biodiversity?	Yes	Positive	The ecology assessment confirms there will be a net gain for biodiversity, this has been created through a series of habitat enhancement and creation measures to benefit local wildlife.
Local food growing	Does the proposal provide opportunities for food growing, for example by providing allotments, private and community gardens and green roofs?	No	N/A	-
Flood risk	Does the proposal reduce surface water flood risk through sustainable urban drainage techniques, including storing rainwater, use of permeable surfaces and green roofs?	Yes	Positive	A comprehensive sustainable drainage strategy has been prepared. This captures and stores surface water on site before discharging at a rate to be agreed with the LLFA / Council. A series of sustainable water management measures are proposed and will be secured through approval of the drainage plan.
Overheating	Does the design of buildings and spaces avoid internal and external overheating, through use of passive cooling techniques and urban greening?	Yes	Neutral	Overheating has been considered as part of the noise assessment to ensure the proposed offices achieve appropriate internal temperature combined with a suitable noise environment.

Issue	Key Criteria	Relevant to this Development	Potential Health Impact	Commentary and Recommended Mitigation
Vibrant Neighbourhoods				
Health services	Has the impact on healthcare services been addressed?	No	N/A	Given the nature of the proposed development, there are not anticipated to be impacts on social infrastructure.
Education	Has the impact on primary, secondary and post-19 education been addressed?	No	N/A	Addressed above.
Access to social infrastructure	Does the proposal contribute to new social infrastructure provision that is accessible, affordable and timely?	No	N/A	Addressed above.
	Have opportunities for multi-use and the colocation of services been explored?	No	N/A	Addressed above.
Local employment and healthy workplaces	Does the proposal include commercial uses and provide opportunities for local employment and training, including temporary construction and permanent 'end-use' jobs?	Yes	Positive	The proposals will create construction and operational phase jobs. In the long term, the proposals will create 4 long term jobs. During the construction phase the Applicant will submit a local labour agreement which seeks to provide job opportunities for local residents.
	Does the proposal promote the health and wellbeing of future employees by achieving BREEAM health and wellbeing credits?	Yes	Positive	A BREEAM Assessment has been undertaken and demonstrates the proposed development achieves a 'Very Good' rating.
Access to local food shops	Does the proposal provide opportunities for local food shops?	No	N/A	N/A
	Does the proposal avoid an over concentration or clustering of hot food takeaways in the local area?	No	N/A	N/A
Public realm	Does the design of the public realm maximise opportunities for social interaction and connect the proposal with neighbouring communities?	No	N/A	N/A
	Does the proposal allow people with mobility problems or a disability to access buildings and places?	Yes	Positive	The proposals ensure the proposed development is accessible for all and meets the necessary building regulation standards.

7. Summary and Conclusions

7.1. This HIA is submitted in support of a planning application for a data centre on land off Bower Street, Manchester.

7.2. The site comprises an excellent regeneration opportunity to provide critical infrastructure and jobs for Manchester. Generally, the health of residents in Manchester is worse than the England average. There are a number of health inequalities including a reduced life expectancy; areas of high deprivation; and increased levels of obesity in adults and children.

7.3. The site itself is in a mixed residential and commercial area. The technical assessments have demonstrated that through various mitigation measures the site is considered suitable its intended use, and would not result in long term adverse effects which cannot be suitably mitigated. Mitigation measures have been secured through the design or through a series of conditions which will be attached to the Decision Notice.

7.4. The HIA has been undertaken using a combination of the HUDU checklist. The findings of the assessment have demonstrated that the proposals comply with Policy JP-P6.