

Health Impact Assessment

Land at Scobell Street, Bury



Health Impact Assessment

Outline application for erection of up to 275 units with associated parking, landscaping and infrastructure works (access for consideration all other matters reserved)

Land at Scobell Street, Bury

Wain Estates

June 2025

OUR REF: M24/1205-01.RPT

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Introduction

Section 1

- 1.1 This **Health Impact Assessment** (“HIA”) has been prepared by **Tetlow King Planning** on behalf of the Applicant, Wain Estates to examine the potential health and wellbeing effects associated with a planning application at Land at Scobell Street, Bury (“the site”). The description of the Proposed Development is:

“Outline application for erection of up to 275 units with associated parking, landscaping and infrastructure works (access for consideration all other matters reserved”.

- 1.2 Policy JP-P6 ‘Health’ within the Places for Everyone Joint Development Plan Document (“DPD”) (March 2024) makes clear that in order to tackle health inequality, new developments are required to:

“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.”

- 1.3 The Council’s Validation Checklist updated in August 2024 to incorporate the adoption of the Places for Everyone DPD include a criteria for when a HIA is required, in response to Policy JP-P6. It states:

“Health Impact Assessment – To explain how the proposal relates in policy terms to Policy JP-P6: Health, and as they emerge the Local Plan and Supplementary Planning Documents.

Threshold:

- *All new developments required to be screened for an EIA.*
- *New developments that provide new or improved health facilities.*
- *Proposals which, due to their location, nature or proximity to sensitive locations, are likely to have a notable impact on health and wellbeing.*
- *And other developments if specified in pre-application advice.”*

- 1.4 The application is for up to 275 dwellings, adjacent to an existing built-up area, and it is therefore considered that undertaking a HIA is appropriate due to the nature of the proposed development, and its location in proximity to sensitive locations.
- 1.5 Policy JP-P6 also supports improvements to health facilities, in response to changing needs and demands of both existing and new residents through:
- “1. Requiring, where appropriate, the provision of new or improved health facilities as part of the 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.”*
- 1.6 The site falls within a larger residential allocation contained within the Places for Everyone Joint DPD, by virtue of Policy JP Allocation 9 ‘Walshaw’. This Policy makes clear that the wider allocation is expected to:
- “make provision for a new local centre in an accessible location which includes a range of appropriate retail, health and community facilities required to serve purely local needs and ensure that it is integrated within existing communities”.*
- 1.7 The site will therefore benefit from these new health and community facilities that will be delivered as part of the wider allocation, in addition to those that already exist.
- 1.8 Other than the above policy, there appears to be limited guidance on what is required within a HIA within the Council area. Regard has therefore been had to the ‘Health Impact Assessment in Spatial Planning’ guidance document prepared by Public Health England (“PHE”) (now Office for Health Improvement and Disparities) October 2020. This document is intended as a guide for all users of the planning system on the proper implementation of HIAs.

1.9 On page 9, clarification is given to who the intended audience of the guide is, including:

“planning applicants, consultants and others involved in the planning process to:

- *Consider a wide range of health and wellbeing impacts within the design processes for development projects prior to submission of planning applications to the local authority”.*

1.10 Paragraph 2.5 of the guidance sets out the three types of HIA, which include:

- Comprehensive – Most in-depth and most resource intensive, this type of HIA should be used in the most complex cases
- Rapid – Involving a brief assessment of health impacts, but supplemented by gathering of knowledge and further evidence from local stakeholders
- Desktop – Able to encompass a small number of participants using existing knowledge and evidence to undertake an assessment of health impacts

1.11 Figure 2 provides a flow chart for consideration of which assessment method is suitable in which situation. In accordance with this figure, and as there is no official trigger for the requirement of a HIA, but the development will result in a health impact, it is considered a desktop assessment is suitable in this instance.

1.12 Table 2 sets out a number of health considerations and wider determinants of health and wellbeing, which will be referred to within this HIA as relevant.

1.13 This HIA has therefore been undertaken in accordance with the above guidance.

Site and Surrounding Area

Section 2

Land at Scobell Street, Bury

- 2.1 The site is made up of several irregular shaped field parcels which form a wider network of fields divided by fragmented hedgerows and lines of trees. The fields are mostly made up of neutral grassland with small areas of mixed scrub, with a small area of woodland providing a buffer between the industrial area located to the south.
- 2.2 The site's western edge wraps around Copthorne Cattery and other associated buildings. Stables Country Club is located to the south. There are also several public footpaths crossing the site or passing along its boundaries.
- 2.3 The topography of the site rises gently from east to west.

Figure 2.1: Site Location



(Source: Google Maps)

Adjoining Land Uses

- 2.4 The site is adjoined to the north and west by existing residential development, wrapping around Copthorne Cattery also to the west. Immediately to the south is Stables Country Club, with further existing residential development beyond. The wider Walshaw allocation area extends into the fields to the east and south, abutting existing development on each of its borders.
- 2.5 Tottington Primary School lies in close proximity to the north beyond Scobell Street, with a sports club adjacent.

Policy Context

Section 3

National Health Policy

National Planning Policy Framework

3.2 Section 8 of the National Planning Policy Framework (NPPF, December 2024) sets out extensive policy objectives for the promotion of healthy and safe communities.

Paragraph 96 explains that planning policies and decisions should seek to promote:

- Social interaction through good design, layout and mix of uses;
- Achieve safe and accessible places where crime and the fear of crime do not undermine quality of life; and
- Enable and support healthy lifestyles through provision of community facilities, green infrastructure, access to healthy food, allotments and cycling and walking routes.

3.3 **Paragraph 98** adds further detail, emphasising the provision of shared spaces, community facilities, and considering local strategies for health, social and cultural well-being. It also stresses the importance of guarding against any unnecessary loss of existing valued facilities and services, ensuring that established facilities are retained and able to develop and modernise, and encourage an integrated approach to the location of housing, economic uses and community services.

Planning Practice Guidance (Healthy and Safe Communities)

3.4 The Planning Practice Guidance (“PPG”) sets out broad guidance for achieving healthy and safe communities. It states¹ that:

“A healthy place is one which supports and promotes healthy behaviours and environments and a reduction in health inequalities for people of all ages. It will provide the community with opportunities to improve their physical and mental health, and support community engagement and wellbeing.”

¹ Reference ID:53-003-20191101

3.5 The PPG also provides guidance to assist decision taking on specific schemes as well as detailed policymaking. It explains² that *“Planning policies and proposals may need to have particular regard to the following issues:*

- *proximity to locations where children and young people congregate such as schools, community centres and playgrounds;*
- *evidence indicating high levels of obesity, deprivation, health inequalities and general poor health in specific locations;*
- *over-concentration of certain uses within a specified area;*
- *odours and noise impact;*
- *traffic impact; and*
- *refuse and litter.”*

Other Relevant Considerations

3.6 The long-term strategy for improving population health in the UK was published in the Government’s White Paper *“Healthy Lives, Healthy People: Our strategy for public health in England”*³. The key themes arising from of the White Paper are as follows:

- 1) *Seizing opportunities for better health:* The new approach and system will:
 - have a strategic focus on the outcomes that matter most;
 - focus on doing what works to make the biggest difference;
 - harness efforts across society to tackle the issues at hand; and
 - put local government in a leadership role.
- 2) *A radical new approach:* The new approach will address the root causes of poor health and wellbeing and be responsive, resourced, rigorous and resilient.
- 3) *Health and wellbeing throughout life:* The Paper aims to shift power to local communities to enable them to reduce inequalities and improve the focus on the health of the local population.

² Reference ID:53-004-20190722

³ Department of Health (June 2010)

- 4) *A new public health system with strong local and national leadership:* The new approach will reform the public health system, with localism and devolved power at its heart.
- 5) *Making it happen:* The creation of Public Health England, transferring local health improvement functions to local government and giving local government further responsibilities will ensure partnership working across social care, the NHS and public health.

3.7 The Health and Social Care Act 2012 proposed to create an independent NHS Board, promote patient choice, and to reduce NHS administration costs. The key areas that the Act addresses are as follows:

- establishes an independent NHS Board, now known as NHS England, to allocate resources and provide commissioning guidance;
- increases GPs' powers to commission services on behalf of their patients through the establishment of Clinical Commissioning Groups;
- strengthens the role of the Care Quality Commission;
- develops Monitor, the body that currently regulates NHS foundation trusts, into an economic regulator to oversee aspects of access and competition in the NHS (Monitor has subsequently been incorporated within NHS England); and
- cuts the number of health bodies to help meet the Government's commitment to cut NHS administration costs by a third, including abolishing Primary Care Trusts and Strategic Health Authorities.

3.8 Public Health England was established in April 2013 to bring together public health specialists from more than 70 organisations into a single public health service. Between 2013 and 2021, PHE was responsible for:

- *“making the public healthier by encouraging discussions, advising government and supporting action by local government, the NHS and other people and organisations;*
- *supporting the public so they can protect and improve their own health;*
- *protecting the nation's health through the national health protection service, and preparing for public health emergencies;*

- *sharing our information and expertise with local authorities, industry and the NHS, to help them make improvements in the public's health;*
- *researching, collecting and analysing data to improve our understanding of health and come up with answers to public health problems;*
- *reporting on improvements in the public's health so everyone can understand the challenge and the next steps;*
- *helping local authorities and the NHS to develop the public health system and its specialist workforce.”⁴*

3.9 In October 2021, PHE's public health policy functions transferred to the newly-formed Office for Health Improvement and Disparities.

Bury Council area Health Policy

Places for Everyone Development Plan Document March 2024

- 3.10 The primary document controlling development within the Bury Council area is the Places for Everyone DPD adopted in March 2024, this has replaced the majority of saved policies contained within the previous Bury Unitary DPD (originally adopted in August 1997). Bury Council are currently working to prepare their own Local Plan that will align with the Places for Everyone DPD.
- 3.11 The vision of the DPD is “*to make Greater Manchester one of the best places in the world to grow up, get on and grow old*”, which includes being “*a place where people live healthy lives and older people are valued*”.
- 3.12 A number of strategic objectives are set out in the DPD, with Objective 10 being to “*promote the health and wellbeing of communities*”, which includes:
- “*Ensure new development is properly served by health care services that meet the needs of communities;*
 - *Improve access to healthy food options for all communities;*
 - *Reduce the health impacts of air pollution through accessibility of sustainable travel such as public transport, cycling and walking;*
 - *Maximise the health benefits of access to the natural environment and green spaces;*

⁴ <https://www.gov.uk/government/organisations/public-health-england/about>

- *Coordinate with and support the delivery of local and Greater Manchester wide health strategies*".

3.13 As outlined above, the key policy relating to health impacts of development is **Policy JP-P6** 'Health', which provides detail on instances where a HIA is required to support an application, as well as additional detail on the importance of health and the various methods of measuring it.

3.14 The explanatory text to Policy JP-P6 states:

"Good health is one of the key determinants of quality of life. As well as being of great importance in its own right, it also has significant impact on the ability of people to enjoy the immense range of opportunities across Greater Manchester and to make a positive economic contribution."

3.15 It continues to outline the existing health situation across Greater Manchester:

"Healthy life expectancy in Greater Manchester is currently three to four years below the national average for men and women. There are considerable inequalities of health outcomes within Greater Manchester, with average life expectancy in the least deprived areas being more than a decade longer than in the most deprived areas. The high prevalence of long-term conditions, such as cardiovascular and respiratory disease, means that Greater Manchester residents can expect to experience poor health at a younger age than in other parts of the country. Obesity, smoking and alcohol are all significant issues. An increase in the proportion of older people will be expected to exacerbate health pressures, although this is less of an issue than in many parts of the UK."

3.16 Finally, the text addresses HIAs directly, stating:

"The submission of Health Impact Assessments for development proposals will help ensure that the effects of development of both health and wellbeing are considered and responded to during the planning process. Health Impact Assessments should aim to enhance the potential positive aspects of a proposal while avoiding or minimising any negative impacts, with particular emphasis on disadvantaged sections of communities that may be affected."

3.17 There are various other policies that promote key aspects of health improvement, for instance Policy **JP-S5** 'Clean Air' looks to encourage developments to improve their air quality through various measures such as reducing car dependency and promoting electric vehicles.

3.18 **Policy JP-H3** ‘Type, Size and Design of New Housing’ requires all new dwellings to be built to accessible and adaptable Part M4(2) standards of Building Regulations, to support those with accessibility needs in the present and future, particularly with an ageing population.

3.19 **Policy JP-G6** ‘Urban Green Space’ seeks to encourage the protection of existing urban green spaces, as well as the provision of new urban green spaces, as:

“Whilst our extensive areas of open countryside are enormously important, the conurbation’s urban green spaces are of greater significance to many residents on a day-to-day basis and are the areas with which they have greatest contact. These places have most value to people at a local level.”

3.20 Policy JP-G6 makes clear that:

“Urban green spaces are essential to the liveability of urban areas, making a vital contribution to mental and physical health, and more generally to the overall quality of life. They can offer a moment of tranquillity within a busy area, and provide people with opportunities for recreation, social interaction, and to connect with nature. They often form part of the network of green transport routes, supporting more walking and cycling and less car use.

Significantly, they will become increasingly important as a result of climate change, helping to cool overheating urban areas, manage flood risk and enable wildlife to adapt. Other important environmental functions include the ability to mitigate air pollution and help manage water quality. They can be particularly vital for children, providing places to play and opportunities for community food-growing projects. Urban green space is therefore essential for environmental and social wellbeing, but it also makes a major contribution to economic growth and securing investment.”

3.21 The explanatory text to **Policy JP-P7** ‘Sport and Recreation’ includes a number of references to the importance of physical activity on mental and physical health. It states that:

“Sports participation in Greater Manchester is slightly lower than the national average. 72.9% of adults in Greater Manchester (16+) were ‘active’ or fairly ‘active’ as of May 2018. This represents an increase of 0.5 percentage points compared to May 2017, but is 1.9 percentage points below the England average...”

The Greater Manchester Strategy highlights that an active life can reduce anxiety, lift mood, reduce stress, promote clearer thinking and a greater sense of calm, increase self-esteem, and reduce the risk of depression. More generally, sport and recreation can be a major contributor to quality of life, and hence access to such opportunities is an important element of social inclusion.”

3.22 It goes on to state:

“Ensuring the continued availability of, and easy access to, a high-quality range of sport and recreation facilities, would therefore help to achieve key objectives such as improving the health of residents.”

3.23 Policy JP-P7 itself outlines a number of measures developments can take to support sport and recreation facilities, including *“creating a public realm that provides frequent opportunities for play and that all ages can enjoy together”, and “provide new and/or improved existing facilities commensurate with the demand they would generate”*. Emphasis is also placed on protecting and enhancing the public rights of way network, to provide safe and attractive routes to sports and recreation facilities, and provide everyday options for green travel.

3.24 **Policy JP-C6** ‘Walking and Cycling’ encourages developments to promote and prioritise alternative transport options to private cars, acknowledging that as well as having environmental benefits, that:

“Both walking and cycling have minimal costs and are open to people of all ages. So encouraging more people to walk and cycle will support greater social inclusion and independence. The increased physical exercise they bring, particularly in comparison to driving, will also help benefit peoples’ health and wellbeing.”

Local Profile

Section 4

Population Profile

- 4.1 This section provides a baseline overview of the population in Bury. It is envisaged that the residents of the proposed scheme will be typical of the existing population. Therefore, the following data provides a good basis from which to assess the likely health impacts of the proposed development.

Population

- 4.2 The site is located within the Tottington ward area. Figure 4.1 below shows the population of the ward according to the 2021 ONS Census returns.

Figure 4.1: Population

Year	Tottington	Bury	North West	England
2011	9,786	185,060	7,052,177	53,012,456
2021	10,073	193,851	7,417,393	56,490,045

Source: NOMIS: 2011 and 2021 Census: Age by Single Year

Age Structure

- 4.3 Figure 4.2 below shows the broad age groups of Tottington ward according to the 2021 ONS Census returns. Generally, the ward appears to have an older age profile than the district, regional and national levels, with a greater proportion 65 years and above.

Figure 4.2: Age Structure

Age	Tottington	Bury	North West	England
0-19	21.4%	24.6%	23.4%	23.1%
20-64	56.7%	57.1%	57.9%	58.5%
65+	22.0%	18.3%	18.7%	18.4%

Source: NOMIS, 2021 Census, Age by Single Year

Households

- 4.4 According to the 2021 Census, there are 4,232 total households within Tottington ward.

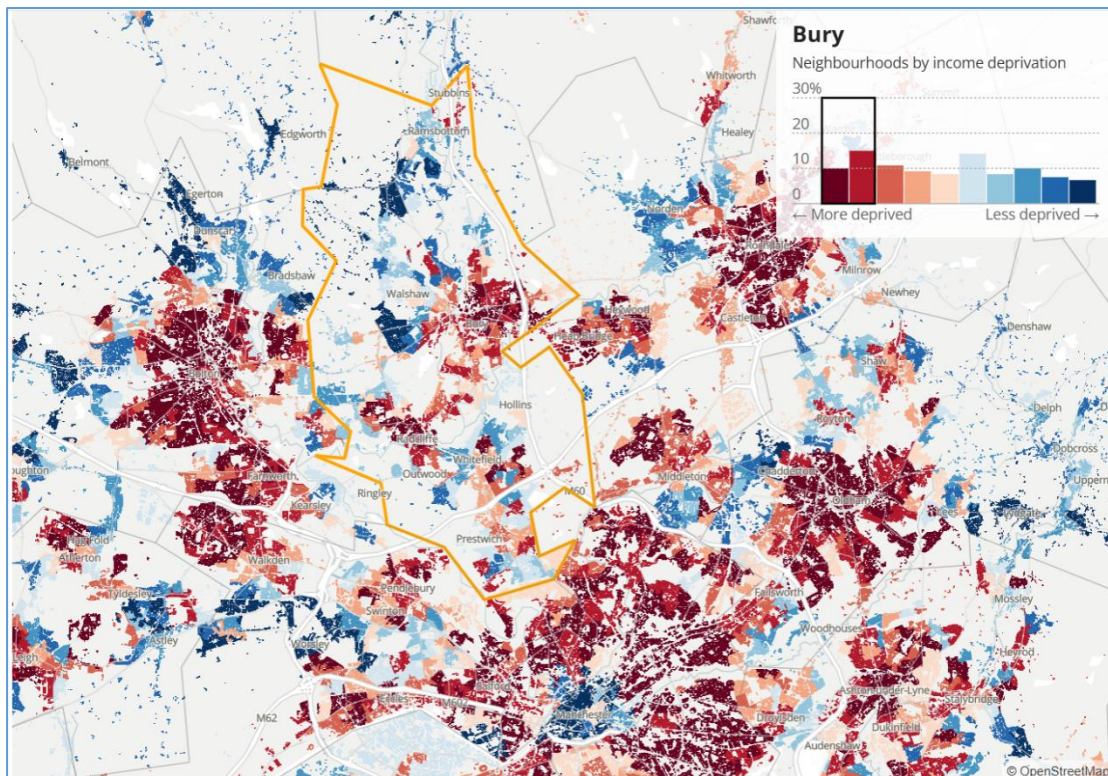
Ethnic Groups

- 4.5 According to the 2021 Census, the ethnicity of Tottington ward is predominantly white (95.8%). This is above the district and North West, with averages of 82.9% and 85.6% respectively. These levels are above the England average of 81%. The Asian, Asian British or Asian Welsh groups make up the second larger ethnic category within the ward with 1.7%, compared to an average of 10.6% in the district, 8.4% in the North West and 9.6% in England.

Deprivation

- 4.6 The Indices of Multiple Deprivation measures deprivation in local authority areas in England. According to ONS figures (2019) Bury is ranked 110th out of the 317 local authorities in England. With rank 1 being the most deprived and rank 317 being the least deprived, this indicates that the district is within the top 35% in terms of overall deprivation levels, compared to all other authorities in England. It is the least deprived of all its neighbouring LPAs (Manchester – 2nd; Blackburn with Darwen – 14th; Rochdale – 17th; Salford – 20th; Bolton – 47th; and Rossendale – 91st).
- 4.7 Of the 120 different neighbourhoods within Bury Council area, 30 were among the 20 percent most income deprived in England. The map below shows the main areas of income deprivation across the Council area are the town of Bury, Radcliffe to the south west, and the areas of Whitefield, Prestwich and Heaton Park further south. The least deprived areas are areas to the north such as Greenmount and Brooksbottom.

Figure 4.3: Bury Income Deprivation Map



Economic Activity

- 4.8 Figure 4.4 below shows the percentage of the total population that is economically active and economically inactive over the age of 16, according to the 2021 Census. It shows a slightly higher level of economic activity within Tottington Ward than the district, regional and national averages.

Figure 4.4: Levels of Economic Activity

	Tottington Ward	Bury	North West	England
Economically Active	5,213 (62%)	93,461 (60%)	3,547,247 (59%)	28,001,502 (61%)
Economically Inactive	3,152 (38%)	61,410 (40%)	2,478,388 (41%)	7,441,300 (39%)

Source: 2021 Census

Health Profile

Health Indicators

- 4.9 Figure 4.5 below shows people's self-assessment of their general state of health, according to the 2021 Census. The self-assessment statistics illustrate that 82.6% of residents in the Tottington ward consider themselves to be in at least 'good health', 1.4% higher than the Bury average of 81.2%; and 0.4% higher than the national average of 82.2%.

Figure 4.5: Self-assessment of General Health

	Tottington	Bury	North West	England
Very Good Health	50.1%	48.2%	47.7%	48.5%
Good Health	32.5%	33.0%	32.7%	33.7%
Fair Health	12.9%	13.3%	13.4%	12.7%
Bad or Very Bad Health	4.6%	5.5%	6.2%	5.2%

Source: 2021 Census

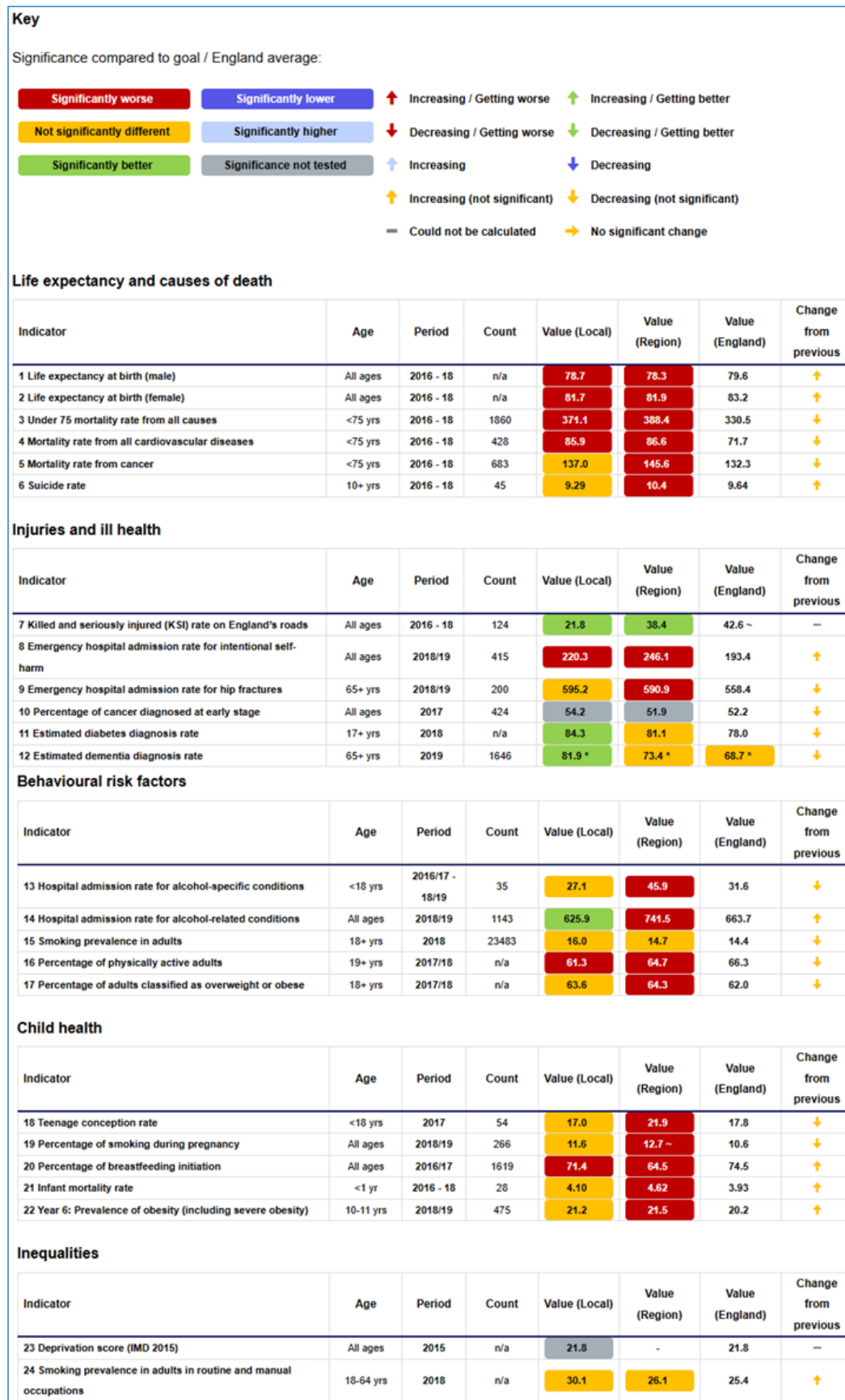
- 4.10 Public Health England's 2019 health profile for Bury⁵ summarises health in the district as follows:
- *"The health of people in Bury is varied compared with the England average. About 14.7% (5,615) children live in low income families. Life expectancy for both men and women is lower than the England average."*
 - *"Life expectancy is 12.6% years lower for men and 8.5 years lower for women in the most deprived areas of Bury than in the least deprived areas".*
 - *"In Year 6, 21.2% (475) of children are classified as obese. The rate for alcohol-specific hospital admissions among those under 18 is 27*. This represents 12 admissions per year. Levels of GCSE attainment (average attainment 8 score) and breastfeeding are worse than the England average."*
 - *"The rate for alcohol-related harm hospital admissions is 626*, better than the average for England. This represents 1,143 admissions per year. The rate for self-harm hospital admissions is 220*, worse than the average for England. This represents 415 admissions per year. Estimated levels of physically abusive adults*

⁵ Available online: <https://fingertips.phe.org.uk/static-reports/health-profiles/2019/E08000002.html?area-name=Bury>

*(aged 19+) are worse than the England average. The rates of new sexually transmitted infections and killed and seriously injured on roads are better than the England average. The rates of statutory homelessness, under 75 mortality rate from cardiovascular diseases and employment (aged 16-64) are worse than the England average.” (*Rate per 100,000 population).*

- 4.11 Figure 4.6 below is Public Health England’s health chart which demonstrates the differences between health indicators in Bury and the rest of England. The two areas of most concern in comparison to England are overall life expectancy life expectancy, emergency hospital admissions for intentional self-harm, percentage of physically active adults, average GCSE attainment, percentage of people in employment, and statutory homelessness rate.

Figure 4.6: Public Health England Health Chart (Bury Council)



Wider determinants of health							
Indicator	Age	Period	Count	Value (Local)	Value (Region)	Value (England)	Change from previous
25 Percentage of children in low income families	<16 yrs	2016	5615	14.7	18.0	17.0	↓
26 Average GCSE attainment (average attainment 8 score)	15-16 yrs	2018/19	92001	44.8	45.6	46.9	↓
27 Percentage of people in employment	16-64 yrs	2018/19	82000	71.4	73.8	75.6	↓
28 Statutory homelessness rate - eligible homeless people not in priority need	Not applicable	2017/18	181	2.23	1.07	0.79	↑
29 Violent crime - hospital admission rate for violence (including sexual violence)	All ages	2016/17 - 18/19	250	44.2	64.8	44.9	↑
Health protection							
Indicator	Age	Period	Count	Value (Local)	Value (Region)	Value (England)	Change from previous
30 Excess winter deaths index	All ages	Aug 2017 - Jul 2018	187	35.2	30.4	30.1	↑
31 New STI diagnoses rate (exc chlamydia aged <25)	15-64 yrs	2018	716	602.2	774.7	850.6	↓
32 TB incidence rate	All ages	2016 - 18	44	7.74	7.33	9.19	↓

Source: Public Health England, Local Authority Health Profile 2019, Bury

Health Care Provision

Section 5

Health Care Provision

- 5.1 The following outlines the existing situation regarding access to healthcare, in proximity to the site.

Doctors Surgeries

- 5.2 Figure 5.1 below shows the doctor's surgeries providing General Practitioners (GP) services, within two miles.

Figure 5.1: Nearby doctors' surgeries

Practice name	Distance from site ⁶	Accepting new patients	Number of patients on roll	Number of GPs	No. of GP's required to serve patients on roll
Tower Family Healthcare (Main Practice 16 Market Street; 3 other branch locations)	0.8 miles (16 Market Street Bury) 1.4 miles (Greenmount) 2 miles (Minden) 2.9 miles (Spring Lane)	Yes	49,000 (approx.)	36	27
Woodbank Surgeries	1.1 miles	Yes	4,739	5	2.6
Garden City Medical Centre	1.8 miles	Yes	4,696 (approx.)	5	2.6
Ribblesdale Medical Practice	1.8 miles	Yes	7,447	6	4.1
Peel GPs	1.8 miles	Yes	10,310	7	5.7

Source: <https://www.nhs.uk/Service-Search/>; Care Quality Commission (CQC) data (data taken from most recent CQC Inspection Reports where available).

⁶ Distance from postcode: BL8 3BP, located within site.

- 5.3 Figure 5.1 above shows that all facilities are currently accepting new patients. The Royal College of General Practitioners recommend a GP to patient ratio of 1 GP per 1,800 patients. The table shows that all health centres are meeting this target.

Dental Surgeries

- 5.4 Figure 5.2 below shows all dental surgeries within approximately 2 miles of the site, a number appear to be accepting new patients subject to availability. However, it is acknowledged availability is likely to be limited, given the national issue surrounding NHS dentistry, but this is not considered unique to this development location.

Figure 5.2: Nearby dental practices

Practice name	Distance from site ⁷	No. of dentists	Accepting new NHS patients
Tottington Dental Surgery	0.8 miles	3	No
Brandlesholme Road Dental Practice	0.9 miles	7	Children under 17 years (subject to availability)
Mill Lane Surgery	1.1 miles	3	Yes (subject to availability)
Synergy Dental Clinic	1.7 miles	5	Yes (subject to availability)
Mydentist, St Marys Place, Bury	1.7 miles	n/a	Yes (subject to availability)
Knowlsey Dental (Confidential Solutions Limited)	1.8 miles	n/a	Yes (subject to availability)
S Patel & Associates	1.9 miles	4	Yes (subject to availability)

Source: <https://www.nhs.uk/Service-Search/>; CQC data

Pharmacies and Opticians

- 5.5 Figure 5.3 below shows that there are several pharmacies within two miles for future occupiers of the proposed development.

⁷ Distance from postcode: BL8 3BP, located within site.

Figure 5.3: Nearby Pharmacies

Pharmacy	Distance from site ⁸
Cohens Chemist	0.8 miles
Manor Pharmacy	1 miles
Mile Lane Pharmacy	1.1 Miles
Gardners Chemist	1.4 miles
Manor Pharmacy	1.4 miles
Boots Pharmacy	1.7 miles
Tesco in store Pharmacy	1.7 miles
Cohens Chemist	1.8 miles
Boots Pharmacy	1.8 miles
Stratchen's Chemist	1.9 miles
Iq Pharmacy	1.9 miles
Bury Healthcare Pharmacy	1.9 miles
Moorgate Pharmacy	2 miles

Source: <https://www.nhs.uk/Service-Search>

Hospitals

- 5.6 Figure 5.4 below shows that there are two hospitals within an accessible distance for future occupiers of the proposed development.

Figure 5.4: Nearby Hospitals

Hospital	Distance from site ⁹
Cygnet Hospital Bury	1.4 miles
Fairfield Hospital	3.3 miles

Source: <https://www.nhs.uk/Service-Search>

⁸ Distance from postcode: BL8 3BP, located within site.

⁹ Distance from postcode: BL8 3BP, located within site.

Health Impact Assessment

Section 6

6.1 The potential health and wellbeing impacts of the proposed development are now assessed against the key health determinants contained within the 'Health Impact Assessment in Spatial Planning' document prepared by PHE (October 2020) (Annex 2: Health and Wellbeing Outcomes in Planning). Many of these determinants have design principles that overlap each other, they are as follows:

1) Reducing health inequalities

- Through housing design and affordability, access to health and social care services, access to open space and nature, residential amenity (pollution levels), accessibility, crime reduction and safety, access to healthy food, access to work, social cohesion, climate change.

2) Improving mental health and wellbeing

- Through housing design and affordability, access to open space and nature, residential amenity, crime reduction and safety, access to work, social cohesion, inclusive design.

3) Improve diet and weight

- Through housing design and affordability, access to health and social care services, access to open space and nature, accessibility and active travel, access to healthy food, access to work.

4) Improve physical health (musculoskeletal, respiratory, cardiovascular)

- Through housing design and affordability, access to health and social care services, access to open space and nature, accessibility, social cohesion.

5) Protect environmental health

- Through housing design and affordability, residential amenity, crime reduction and safety, climate change adaptability

6) Provide access to health and care infrastructure and services

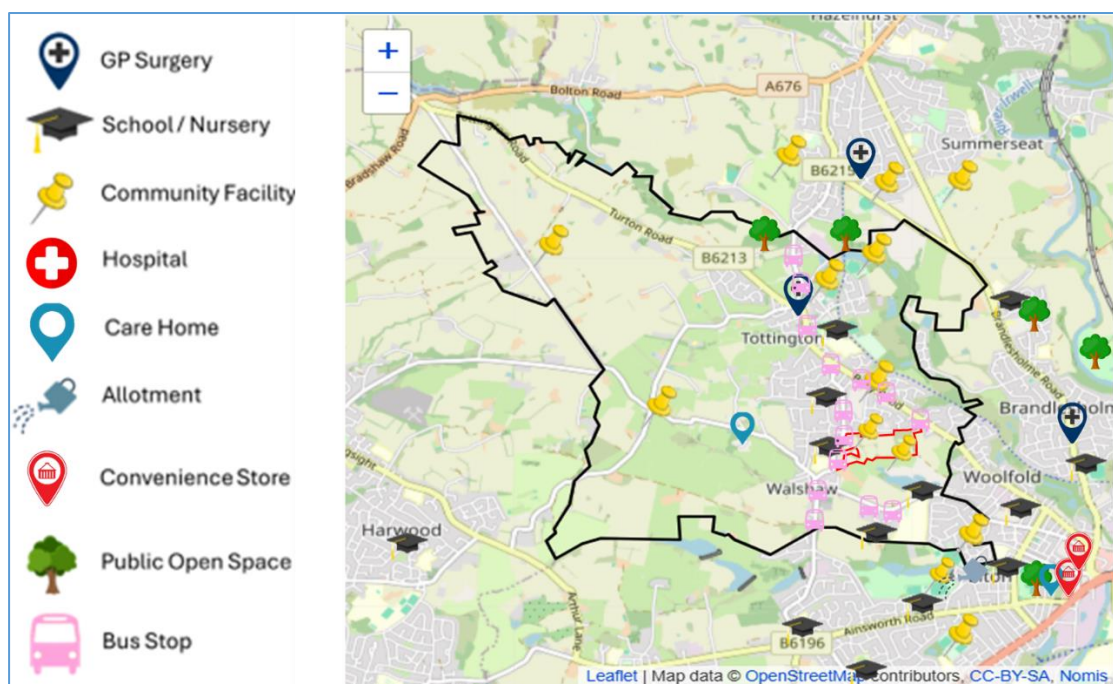
- Through access to health and social care services, accessibility, access to work.

6.2 Based upon the above areas, we have identified key health determinants of relevance to the proposed development and its context.

Site Baseline

6.3 Figure 6.1 below provides a baseline map showing the site context and surroundings.

Figure 6.1: Site Baseline Map



Source: NOMIS Ward Map Boundaries; Google Maps

6.4 The baseline map demonstrates that the site is located within a sustainable location with good access to services such as schools, GPs, convenience stores and a number of community facilities, many of which are sports clubs that promote physical exercise. The majority of the services are located within the Tottington area immediately north of the site, with others expanding further east closer to the Bury area, not all of which is covered in the above map but would include a greater number of services, such as a shopping centre and hospitals. The above demonstrates a great number of bus stop locations in proximity of the site, which would make travel into Bury by bus a realistic option.

6.5 The baseline map above demonstrates a lack of public open spaces in close proximity of the application site, particularly that would be easily accessible on foot.

- 6.6 This HIA utilises the spectrum appraisal approach put forward by Barton and Grant (2006)¹⁰ to assess the proposal against the chosen criteria. This tool is designed to recognise the determinants of health and the sustainable development agenda. This appraisal grades both the baseline (existing conditions) and the proposed development using a colour scheme which represents the scale of potential health impacts in relation to the chosen criteria, based on the principles within each determinant identified at paragraph 6.1 above.

Figure 6.2: Spectrum Appraisal Approach

✓✓	The health determinant is fully addressed
✓	The health determinant is generally addressed
—	The health determinant is partially addressed
✗	The health determinant is very poorly addressed
✗✗	The health determinant is not being addressed at all
	Determinant not applicable / neutral

Figure 6.3: Housing Design and Affordability

Criteria	Site baseline	Impact of proposal	Justification and HIA determinants addressed
Housing Design	n/a	✓	Crucial to any housing development is the ability to design it to a high standard, which has a number of benefits for potential future occupants as well as those already living in the vicinity. Whilst the application is currently only at outline, and the detail is therefore reserved for a future application, as is stated within the accompanying Design and Access Statement (“DAS”), the scheme has been informed by its surrounding context, in order to better integrate it into the existing built development, and at page 58 it is made clear that: <i>“the site will be designed to specifically protect and enhance people’s health, wellbeing, and quality of life, increasing their life expectancy.”</i> Page 60 of the DAS sets out the key urban design principles that should be followed when detailed design is sought, one of which is to <i>“draw reference</i>

¹⁰<https://uwe-repository.worktribe.com/output/1012683/testing-time-for-sustainability-and-health-striving-for-inclusiveness-rationality-in-project-appraisal>

			from local character in terms of building form and scale”. Page 61 continues that: <i>“The architectural response to the development should aim for high quality traditional architecture. Simple details and styles which reflect the traditional local character of Bury should be used in order to create a place that is distinctive and individual.</i> <i>Whilst adjacent mid to late twentieth century buildings provide less obvious precedents, landmark buildings represent an opportunity for occasional dwellings of high quality modern design, which embody principles of sustainable energy efficient design and reflect the adjacent characteristics of local character.”</i> Page 61 also makes clear that designs should not distinguish between market and affordable housing, which will enable greater integration and discourage social exclusion. Whilst detailed house design cannot therefore be analysed, and the impact cannot therefore be determined as fully addressed, it is clear that the applicant intends to develop a site with high quality overall design, that will have various benefits for health impacts of future and existing residents. Determinants addressed: 1 (reducing health inequalities), 2 (improving mental health and wellbeing), 3 (improve diet and weight), 4 (improve physical health) and 5 (protect environmental health)
Affordability	xx	✓✓	The scheme will provide 25% affordable housing, which is line with the requirement within Policy JP Allocation 9, which allocates the site. According to MHCLG data, Bury Council have delivered 323 gross new affordable dwellings in the period 2020/21 to 2023/24. According to the Bury Housing Needs and Demand Assessment (August 2020), Bury has an annual affordable housing need of 448 dwellings, over the 2020/21 to 2023/24 period, this would result in a total need for 1,792 new affordable homes. This means Bury have a significant shortfall of -1,469 affordable homes over this period. This shortfall would likely grow further if Right to Buy losses of affordable units were taken into account.

			Given the level of affordable shortfall identified above, provision of affordable dwelling, even at policy compliant levels, should be seen as a substantial public benefit. It is therefore considered that this principle is fully addressed in the current proposal. Determinants addressed: 1 (reducing health inequalities), 2 (improving mental health and wellbeing), 3 (improve diet and weight), 4 (improve physical health) and 5 (protect environmental health)
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Figure 6.4: Access to Health and Social Care

Criteria	Site baseline	Impact of proposal	Justification and HIA determinants addressed
Health Services	✓	✓	Figure 4.6 within this report demonstrates, one of the key health indicators of most concern in Bury is overall life expectancy, which indicates a likely increased requirement for health services. As evidenced in Section 5 of this report, all local doctors (within two miles) are accepting new patients and are operating below an acceptable patient per GP ratio (according to most recent available patient numbers). The local doctors' surgeries are accessible via walking, public transport or private car from the application site. There are also a number of larger hospitals in close proximity to the site within Bury to the east, again they have good public transport availability. The baseline map also indicates two care homes in proximity of the Site. There is good availability of dentist surgeries and pharmacies in accessible range of the site. While local dental surgeries appear to be accepting new NHS patients where availability allows, it is likely that availability will be low, but this is symptomatic of a wider national issue, and not unique to this location. As stated in Section 1 of this report, the site forms part of the wider 'Walshaw' residential allocation, one of the requirements of which is to provide a new, accessible, local centre including new health facilities. While it is not considered that the development is of a scale itself to justify the inclusion of a health facility on site, future residents

			would benefit from those provided as part of the wider allocation. Should the health authority require financial contributions to upgrade existing facilities, this can be provided through a planning obligation (subject to any request for such being appropriately justified and meeting the relevant statutory tests). Figure 4.6 also demonstrates that emergency hospital admissions as a result of intentional self-harm is a key concern in Bury, it is therefore important that there is sufficient access to relevant health and care facilities that can cater to this additional need. It is considered that the existing site conditions allow for this. Overall, it is considered that the existing provision of healthcare in the surrounding area would be sufficient to accommodate a new residential development on the site. The additional health facilities to be provided by the wider allocation should also be considered, as they will be available to occupiers of the current proposal. However, where justified, contributions to existing facilities may be provided through a Section 106 agreement. Determinants addressed: 1 (reducing health inequalities), 2 (improve mental health and wellbeing), 3 (improve diet and weight), 4 (improve physical health), 6 (provide access to health and care infrastructure and services)
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Figure 6.5: Access to Open Space and Nature

Criteria	Site baseline	Impact of proposal	Justification and HIA determinants addressed
Access to Open Space and Recreation	x	✓✓	The baseline map shows that at present, there is a lack of public open spaces within proximity of the site, with the closest locations to the north and east likely to be too far for future occupiers of the site to realistically travel on foot. It is therefore important that open spaces, and opportunities for recreation, are provided on-site. The accompanying DAS makes clear on page 36 that among the opportunities presented by the site is: <i>“Opportunity to provide an integrated network of public open spaces incorporating play facilities,</i>

		<i>extensive landscape, sustainable drainage areas and ecological habitats;</i> <i>Opportunity to retain existing PRow footpath route through the site and create new footpath connections through areas of open space, providing links with PRow in the wider context."</i> Page 38 sets out the green and blue infrastructure strategy, with the following set out with regard to open space specifically: • <i>"Existing trees and hedgerows will be retained and enhanced as far as possible.</i> • <i>Proposed planting will complement the existing vegetation and provide structural variation.</i> • <i>Flower rich grassland will provide habitat for insects/pollinators.</i> • <i>Grassland managed for will provide reptile habitat.</i> • <i>Native hedgerows will act as corridors along the residential edge."</i> All of the above will serve as de-urbanising features of the proposed development, serving to enhance the wellbeing of occupants. Page 39 outlines the recreation considerations: • <i>"There are two proposed play areas within the development. These should include a variety of play experiences to create a more holistic park that encourages more natural play.</i> • <i>They play areas are well overlooked by neighbouring properties and are located at easily accessible locations".</i> It is clear that the provision of open space is a key consideration within the design of the current proposal, and that given the lack of local open space opportunities, those provided within the scheme will enhance the existing provision for both future occupiers of the development and existing local residents. Increasing access to these areas will have knock on effects in terms of health (both physical and mental), as well as environmental benefits and potential for fostering greater community cohesion. It is therefore considered that this criterion is fully addressed by the proposal. Determinants addressed: 1 (reducing health inequalities), 2 (improving mental health and
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			wellbeing), 3 (improve diet and weight), 4 (improve physical health)
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Figure 6.6: Residential Amenity (including air quality and noise pollution)

Criteria	Site baseline	Impact of proposal	Justification and HIA determinants addressed
Housing Design	n/a	✓✓	One element of residential amenity is ensuring sufficient amenity space is provided for each dwelling, and also ensuring that there are no issues in terms of overlooking, loss of sunlight and privacy. Housing design has been considered in more detail in this assessment above at Figure 6.3, and while no detailed housing designs are available for review, the accompanying DAS is clear at page 48 that: <i>“The design of the plot should consider the position of buildings and their relationship to neighbouring plots and the public realm. Privacy, security, surveillance and shadowing are some of the key issues that need to be addressed.”</i> Page 58 sets out some of the sustainability considerations for the proposal, one of which is to provide ‘inclusive and accessible homes’: <i>“All dwellings should be constructed to the M4(2) accessible and adaptable standard assisting in the delivery of inclusive and accessible homes within the borough. Also ensure good access to daylight, good air quality and acoustic comfort. The scheme will provide access to safe green space.”</i> It is clear that the applicant intends to ensure residential amenity is protected through appropriate housing design. As there is no residential use at present, the baseline position cannot be addressed. Determinants addressed: 1 (reducing health inequalities), 2 (improving mental health and wellbeing), 3 (improve diet and weight), 4 (improve physical health) and 5 (protect environmental health)
Noise Pollution	✓	✓	The Council's Local Validation list outlines the instances where a specific Noise Assessment Report is required:

			<i>"For developments that could lead to a noise nuisance to nearby occupiers and/or amenity users and for development close to a permanent source of noise e.g. a main road or motorway."</i> Given the characteristic of the surrounding area is residential at present, and there are no major noise pollutants such as a motorway, A-road or railway in proximity to the site, it has not been deemed necessary to provide a specific noise report alongside this application. It is not considered that the proposed development would generate significant noise above and beyond the existing residential noise from the surrounding area. It is considered that the proposals will not adversely increase noise levels beyond their existing baseline, and this criteria is therefore fully addressed. Determinants addressed: 1 (reducing health inequalities), 2 (improving mental health and wellbeing), 5 (protect environmental health).
Air Quality	n/a	✓	Again, the Councils Local Validation list makes clear the instances where specific Air Quality Assessments are expected: <i>"To cover where a development because of its scale and nature is likely to have significant impacts on air quality particularly where such impact is likely to be particularly important, for example as follows:</i> <i>Where the development is being proposed inside or adjacent to an Air Quality Management Area (AQMA)</i> <i>Where it could in itself, result in the designation of an AQMA</i> <i>Where a development would conflict with or render unworkable elements of the Council's Air Quality Action Plan."</i> Given the site is not located within an AQMA, in line with the Councils validation requirements above, it has not been deemed necessary to produce a specific Air Quality Assessment. Despite this, the importance of good air quality to the health and wellbeing of the population is acknowledged and is addressed within the accompanying DAS.

			Within the sustainability section on page 58, the DAS states under 'health and wellbeing' that: <i>"The site will encourage social connections and physical activity, improving the mental and physical health of occupants respectively. It will also ensure good access to daylight, good air quality and acoustic comfort. The scheme will provide access to safe green space".</i> There are further references to air quality on page 66 of the DAS under 'Building for a Healthy Life' where the benefits of walking, cycling and public transport are outlined, with one of the benefits being improved air quality. The DAS explains that: <i>"The development is with range of local facilities and services within Bury as well as existing bus routes. Local shops are within easy walking distance with recreation ground".</i> While it has not been considered appropriate to produce a specific Air Quality Assessment, it is clear that the proposals understand the importance of promoting good air quality, and have incorporated this into design aspects of the proposal. It is therefore considered that this criteria is generally addressed. Determinants addressed: 1 (reducing health inequalities), 2 (improving mental health and wellbeing) and 5 (protect environmental health)
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Figure 6.7: Accessibility

Criteria	Site baseline	Impact of proposal	Justification and HIA determinants addressed
Transport & Accessibility	✓	✓✓	With regards to transport, the site lies adjacent to, and will take its primary accesses from, Scobell Street to the north and Church Street to the west. There are a number of bus stops along Church Street immediately adjacent the site, and along Bury Road in close proximity to the north east that offer regular buses into Bury town centre. Page 14 of the accompanying DAS outlines the masterplan approach to the site and the wider Walshaw allocation, including the 'guiding principles' that have informed the design methodology.

		Principle 2 'Infrastructure' is as follows: <i>"New transport infrastructure will enable new and existing residents to navigate the area smoothly and conveniently. A new link road will draw traffic away from Church Street / Bank Street / High Street, alleviating existing congestion issues and ensuring the proposed development does not adversely impact the local highway network."</i> Principle 4 'Active Travel' states: <i>"A number of green corridors and off road routes will be provided across Walshaw East, these will promote people moving across the site to utilise more active forms of travel whilst bolstering and enhancing existing green infrastructure."</i> It is clear from the above that the transport impact of the proposal for both future potential residents of the site as well as existing residents has been considered within the design from the outset. Page 43 of the DAS discusses 'Access and Movement' that begins by setting out the potential offered by the existing PRow to promote and enhance pedestrian permeability through the site. With regard to public transport, it states <i>"Bus route 469 runs along Tottington Road to the east of the site with a bus stop located with close proximity providing regular services to Bury town centre. The 480 bus route runs along Church Road and provides transport between Tottington and Bolton."</i> <i>The nearest public transport interchange is located in Bury town centre which is approximately a 15 minute bus or 12 minute cycle ride away. From here, regular trams provide easy access to Manchester City centre and beyond."</i> There is an existing PRow running through the site from west to north, with another running along the sites southern and eastern boundaries. These will be retained and provide opportunities for walking through the site and to the surrounding residential areas. Page 54 of the DAS outlines opportunities to promote pedestrian and cycle movement throughout and beyond the site. With regard to pedestrian access locations, it makes clear that these will be provided from the northern, western and southern site boundaries.
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		Focussing on pedestrian movement, it is made clear that: <i>“The key principle is to encourage filtered permeability throughout the site, connecting up with the existing network of Public Rights of Way (PRoWs). All movement routes provide access to the proposed vehicular link road running north-south.</i> <i>Further routes are proposed to extend into the public open space (POS) and provide further walking loops that allow for leisure, play and recreation, including dog walking and running.”</i> With regard to cycle movement, it is explained: <i>“On street cycling will be encouraged through the development due to the designed low vehicle speeds. The site is well located to connect to key local amenities and facilities by bicycle with Bury town centre being within a 10 minute cycle ride from the site.”</i> Cycle parking will be provided to ensure that all future residents have appropriate and secure storage to accommodate for bike ownership within the curtilage of their properties. For these reasons, it is considered that the current site baseline in terms of accessibility is high, but the proposed development improves upon its overall accessibility for the future and existing community. Determinants addressed: 1 (reducing health inequalities), 3 (improve diet and weight), 4 (improve physical health) and (provide access to health and care infrastructure and services)
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Figure 6.8: Crime Reduction and Safety

Criteria	Site baseline	Impact of proposal	Justification and HIA determinants addressed
Crime and Safety	-	✓✓	At present, the site is generally not utilised by the public, therefore there is little in terms of designing out crime and safety beyond what would normally be expected in such locations. As the proposal is currently only in outline, the specific design details are yet to be determined, however, page 60 of the accompanying DAS is clear that one of the key placemaking considerations will be to: <i>“ensure that plots and buildings are safe and secure, with risk of crime designed out”.</i> Although exact design cannot therefore be determined at this stage, it is considered that a safe a legible layout can be achieved on site. Overall, it is considered that the proposed development will have due regard to designing out crime and the fear of crime within the scheme. This criteria is therefore considered fully addressed Determinants addressed: 1 (reducing health inequalities), 2 (improving mental health and wellbeing), 5 (protect environmental health).

Figure 6.9: Access to Healthy Food

Criteria	Site baseline	Impact of proposal	Justification and HIA determinants addressed
Access to healthy food options	✓✓	✓✓	The accessibility of the site has been outlined in various Figures above, making clear that residents of the site will have various options for accessing the various services and facilities in close proximity. The baseline map makes clear that there are a number of convenience stores located in close proximity to the site, including within Tottington to the north and Bury to the south and east. These stores allow residents to purchase healthy food options. There is an allotment in close proximity to the south, which has potential to allow residents to

			grow their own food if they are able to acquire a plot. Overall, it is considered that a number of sources of healthy food are accessible from the site, so both the current position and proposed impact of this criteria are considered fully addressed. Determinants addressed: 1 (reducing health inequalities) and 3 (improve weight and diet).
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Figure 6.10: Access to work

Criteria	Site baseline	Impact of proposal	Justification and HIA determinants addressed
Access to employment	✓	n/a	The proposal does not include any employment floorspace to be delivered, therefore it is considered to have any direct impact upon employment opportunities. The sites current baseline position however is considered high in terms of access to employment opportunities. There are a number of schools, care homes and other facilities in the local area that will act as employment hubs as well as offering services. The site is in close proximity to Bury, accessible either by private car or public transport, and the M66 and M62 is also in close proximity to the east and south, providing potential linkages to employment opportunities further afield. It is considered that the site has a negligible impact on the currently good baseline position for this criterion. Determinants addressed: 1 (reducing health inequalities), 3 (improve weight and diet), 2 (improving mental health and wellbeing) and 6 (provide access to health and care infrastructure and services).

Figure 6.11: Social Cohesion and Community Facilities

Criteria	Site baseline	Impact of proposal	Justification and HIA determinants addressed
Social Cohesion and Interaction	x	✓✓	At present, the site is open agricultural fields, with the separate settlements of Tottington to the north and Bury to the south and east, therefore, it is not considered that any social cohesion or interaction is promoted in this area at present between these communities. The proposal forms part of a wider allocation that will develop a gap between these communities. The provision of on-site open space, connected by internal travel corridors and promoting the use of the existing PRow network, will allow users of the proposed development to interact with those currently living within Tottington and Bury, and ensure all facilities in both settlements are accessible for both those living in the development, and to those already in the area. The baseline map shows that the ward already possesses several community facilities, contained primarily within the areas of Tottington and Bury. These include several schools, sports clubs, community buildings, and the nearby Country Club. The improved pedestrian/cycle access, as well as the additional population generated by the development, will increase access to and use of these nearby services. However, it is not envisaged that the size of the development in this location will place an undue pressure on these surrounding facilities. The wider allocation will include a local centre that will provide new services and facilities to alleviate potential impacts, that existing residents, and residents of the current proposal, would have access to. It is therefore considered that development of the site itself will allow for greater cohesion between the communities to the north and to the south, as well as providing additional population to boost these communities and encourage integration, particularly when taken as part of a wider residential allocation. There are a number of schools in the local area which mean that families with children will be able to mix through education facilities. Overall, it is considered that at present, there is limited interaction possible through the site being

			undeveloped, but its development only creates additional opportunities for community cohesion and interaction. This community cohesion criteria is therefore considered fully addressed. Determinants addressed: 1 (reducing health inequalities), 2 (improving mental health and wellbeing) and 4 (improve physical health)
Community Facilities	✓✓	n/a	As outlined above, at present the site is in close proximity to a number of community facilities, that will be available to potential future occupiers of the development. While the proposal does not propose new facilities itself, it is considered that the additional population created will only serve to support the existing communities. This criteria is therefore considered fully addressed due to the existing baseline position of the site, and the proposals negligible impact. Determinants addressed: 1 (reducing health inequalities), 2 (improving mental health and wellbeing) and 4 (improve physical health)

Figure 6.12: Climate Change

Criteria	Site baseline	Impact of proposal	Justification and HIA determinants addressed
Landscape	✓	✓	The accompanying DAS is clear on page 14 that the wider Walshaw allocation “<i>will be characterised by how it integrates with its landscape setting and incorporates key features to create a genuine sense of identity and place</i>” Guiding principle 3 makes clear that the masterplan should be “<i>landscape led</i>”, with a landscape appraisal included at page 30, and a description of the surrounding landscape character at page 32. The current proposals outlined in the DAS from page 41 onwards includes many references to how the existing landscape has informed decisions to date. For instance, at page 56 it is made clear that the proposed SuDS features will be assimilated into the surrounding landscape through provision of appropriate riparian landscaping, and that the sloping topography of the site has been taken into consideration so as to minimise effect on surrounding areas. The site itself does not current fall within any specific protective landscape, therefore the

			current baseline position of the site is not considered exceptionally high, beyond being open green space. A Landscape and Visual Impact Assessment (“LVIA”) has been prepared to support the proposals, which sets out the baseline landscape value of the site, and determines the potential impact the proposed development would have. This should be read in conjunction with this HIA, but ultimately concludes: <i>“The overall assessment of the landscape and visual effects shows that The Site can successfully incorporate the proposed development adjacent to Walshaw settlement edge without significant long-term effects on the identified immediate and wider area landscape and visual receptors.”</i> This conclusion is drawn largely due to the fact that <i>“the Proposed Development has been designed with embedded mitigation. These proposals have been designed to take on board the recommendations of the relevant published landscape character guidance”</i>. Given the consideration given to ensuring the proposal successfully assimilates into the surrounding landscape, it is considered this criterion is fully addressed, this is supported by the conclusions of the accompanying LVIA. Determinants addressed: 1 (reducing health inequalities) and 5 (protect environmental health)
Trees	✓✓	✓✓	The site has a number of trees and hedgerows on site that contribute to its landscape character. Existing trees and their associated root protection areas are listed as a key constraint for the design proposals on page 36 of the DAS, with page 38 making clear that <i>“existing trees and hedgerows will be retained and enhanced as far as possible”</i>. The proposals themselves will provide additional tree planting alongside key road verges and parking areas in order to soften areas that would otherwise appear more urbanised. An Arboricultural Assessment (“AA”) has been produced to support the application, which identifies the trees within the site, assesses their quality and determines which are likely to be impacted by the outline proposals.

			The AA does acknowledge that: <i>“due to the irregular shape and size of the existing field parcels it is unfeasible that all existing internal hedgerows and groups are retained”</i>. It goes on to make clear that in order to: <i>“to facilitate development of the site a total of ten trees, seven groups and three hedgerows are shown to be affected at this outline stage”</i>. However, these <i>“are largely restricted to low quality specimens with only two individual trees identified as being removed being considered of moderate quality”</i>. Commenting on the loss of these two moderate quality trees, it states <i>“the loss of these two trees along with the low-quality material could be mitigated for through new tree and hedgerow planting which would come forward as part of a reserved matters application”</i>. The AA concludes by stating: <i>“the proposals are considered to meet the aims and objectives of local and national policy through the retention of a high proportion of the existing tree cover. The retention of this tree cover coupled with new tree planting to suitably mitigate for any tree loss, will meet many of the individual aspirations set out in the various policies.”</i> From the above, it is clear that the proposed development has taken into account the existing trees on site, and sought to protect those of high value. Given the nature of the site, the loss of some trees and hedgerows is unavoidable, however, this will be mitigated by protecting the existing trees of highest value, and through new planting incorporated into the development. Determinants addressed: 1 (reducing health inequalities) and 5 (protect environmental health)
Ecology	✓✓	✓✓	The application is supported by an Ecological Appraisal and Ecological Impact Assessment (drafted as part of the wider Environmental Statement) which should be read in conjunction with this HIA. This Ecological Appraisal identifies the likely important ecological features that may be impacted, and recommends enhancements that can be undertaken within the proposals to attain an overall gain in wildlife value. The proposals will

		incorporate these recommendations, which include: <i>“An ecological management plan will be produced and adhered to for all retained and created habitats in order for them to maintain existing value and/or realise enhanced value, making sure that management is appropriate and ongoing for the life of the development;</i> <i>The proposed development also provides an opportunity to increase the potential roosting prospects for bats through the erection of bat boxes. Woodcrete bat boxes (Schwegler or similar design) are recommended, to increase roosting opportunities;</i> <i>Hedgehog gaps should be incorporated within garden fences, to allow hedgehogs to move through the Site unimpeded;</i> <i>Deadwood piles could be created in areas of retained open space to provide a habitat niche for amphibians and small mammals as well as deadwood for invertebrates such as saproxylic beetles”.</i> The Ecological Impact Assessment then assesses these key features with regards to the overall expected impact from the proposed development, ultimately concluding: <i>“The impact assessment has identified that certain actions could result in adverse effects on these IEFs [Important Ecological Features] without mitigation. Inherent avoidance, mitigation and compensation measures and the implementation of a Construction Environmental Method Plan (CEMP), and Landscape and Ecology Management Plan (LEMP) are considered to ameliorate those significant effects identified to a residual level where no significant adverse effects are likely. Furthermore, such measures can potentially deliver considerable beneficial effects with respect to biodiversity net gain.</i> <i>Based on the impact assessment and consideration of the IEFs, it is concluded that the Proposed Development will conform to the legislative protection afforded to these IEFs and with national, regional and local planning policy requirements.”</i> A Biodiversity Net Gain assessment has also been undertaken which looks at the biodiversity
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			baseline credentials of the site, and looks at the potential implications for the proposed development. Ultimately it concludes: <i>“the development is capable of delivering a 13.86% gain in habitat units, 24.09% hedgerow gain and 39.30% watercourse gain”</i>. With the above taken into account, it is clear that the existing ecological baseline of the site has been assessed, and the implications of the proposed development are judged to be not significant. It has been demonstrated that the proposals are able to achieve a net gain in biodiversity. For these reasons, it is considered that this criterion is fully addressed. Determinants addressed: 1 (reducing health inequalities) and 5 (protect environmental health)
Flood Risk	✓✓	✓✓	The site is located wholly within Flood Zone 1, defined in the NPPF as having a less than 1 in 1000 annual probability of flooding. There are some areas of low to medium surface water flood risk, primarily following watercourses that flow through the site. A Flood Risk Assessment (“FRA”) and Outline Drainage Strategy has been prepared to accompany the proposed development, which concludes: <i>“Potential sources of flooding from water bodies and groundwater have been considered, found to be negligible and can be discounted.</i> <i>Risks associated with the watercourse network and surface water flooding will be addressed within the development layout and by appropriate setting of levels with the introduction of the development drainage system providing additional mitigation...</i> <i>... This FRA has therefore concluded that built development within the site boundary can be delivered so as not to be at risk of flooding from any source having regard to reasonably foreseeable potential changes in flood risk. On this basis the sequential and exception tests will not apply.”</i> It is clear that the site is not considered at a high level of flood risk, and any flooding or drainage risk has been assessed and can be appropriately mitigated within the proposed development. For

			this reason, it is considered this criterion has been fully addressed. Determinants addressed: 1 (reducing health inequalities) and 5 (protect environmental health)
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Recommendations

Section 7

7.1 The following measures are recommended to be implemented as this proposal moves forward to the implementation phase:

- Ensure a high-quality design scheme which promotes social interaction and ensures social cohesion is delivered;
- Ensure that the detailed design of the dwellings minimise crime by increasing natural street surveillance;
- Promote links to the open space provision on site and in the local area, to promote healthy lifestyles and social cohesion;
- Ensure the detailed proposals are mindful to create pedestrian links across the site, to the neighbouring communities particularly within Tottington ward, as this will reduce any community severance and promote integration;
- Raise awareness of local public transport links to mitigate traffic congestion and air/noise pollution arising from the proposal, although this is considered minimal;
- Ensure that appropriate measures are taken in respect of noise, flood risk ground contamination and ecology (to be secured by condition in consultation with relevant bodies including the Environmental Health department and the Environment Agency) to avoid any adverse effects upon health;
- Encourage local residents to engage with existing community facilities and groups to boost social integration; and
- Promote the use of existing shops and services in the local area to help safeguard their future and retain expenditure in the local area.

Conclusion

Section 8

- 8.1 This HIA accompanies an outline planning application for up to 275 dwellings, public open space, landscaping, sustainable urban drainage system, and the principle means of access, at Land at Scobell Street, Bury.
- 8.2 This HIA has been prepared in response to the requirements of Policy JP-P6 within the Places for Everyone Joint DPD, as well as the updated Local Validation Checklist (August 2024), which requires HIAs on developments which are likely to have a notable impact on health and wellbeing.
- 8.3 The assessment has looked at the provision of key facilities relating to health, for instance the existing provision of doctor's surgeries, dental surgeries, hospitals and pharmacies. The assessment indicates all health care services are within an accessible range and have capacity to accommodate new residents¹¹.
- 8.4 The assessment has also considered the baseline position of schools/nurseries, community facilities, care homes, allotments, convenience stores, public open spaces and public transport, all of which are considered to contribute to the health and wellbeing of current and future residents. Again, it is clear the site is in a sustainable location in this regard, with only existing provision of open spaces deemed low.
- 8.5 The health impacts of the proposed development have been assessed against the determinants contained within the 'Health Impact Assessment in Spatial Planning' document prepared by Public Health England (now Office for Health Improvement and Disparities) in October 2020. The key HIA indicators of relevance were:
- 1) Reducing health inequalities;
 - 2) Improving mental health and wellbeing;
 - 3) Improve diet and weight;
 - 4) Improve physical health (musculoskeletal, respiratory and cardiovascular);
 - 5) Protect environmental health;

¹¹ Dentists are subject to availability, which is likely to be low. This is symptomatic of a wider national issue, and not unique to this location.

- 6) Provide access to health and care infrastructure and services.
- 8.6 An assessment has been undertaken of how the proposal addresses each of these indicators, through ten planning principles identified in the PHE guidance:
- 1) Housing design and affordability;
 - 2) Access to health and social care;
 - 3) Access to open space and nature;
 - 4) Residential amenity (including air quality and noise pollution);
 - 5) Accessibility;
 - 6) Crime reduction and safety;
 - 7) Access to healthy food;
 - 8) Access to work
 - 9) Social cohesion and community facilities; and
 - 10) Climate change.
- 8.7 It has been demonstrated that the proposed development will largely have a positive impact on the health and wellbeing of existing and future residents in relation to overall health determinants outlined above.
- 8.8 Both Strategic Objective 5 (Reduce Inequalities and Improve Prosperity) and Strategic Objective 10 (Promote the Health and Wellbeing of Communities) of the Places for Everyone Joint DPD relate to providing adequate housing developments that reduce inequalities and promotes physical and mental wellbeing. This HIA demonstrates that the proposed development will contribute significantly towards achieving these objectives within Bury.
- 8.9 In conclusion, the outline proposal will have a positive impact upon on the health and wellbeing of occupants of the proposed development and the existing population of Bury, Tottington Ward, and other neighbouring settlements.