

PROPOSED INVERCARGILL CITY DISTRICT PLAN

Decision No. 30

Hospital Zone

Hearings Committee

Councillor Darren Ludlow (Chair)
Councillor Neil Boniface
Councillor Graham Sycamore
Keith Hovell

11 October 2016

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INTRODUCTION

We have been appointed by the Invercargill City Council to consider and issue decisions on the submissions lodged to the Proposed Invercargill City District Plan. In this decision we consider the submissions lodged in relation to the Hospital Zone provisions of the Proposed District Plan.

The Resource Management Act 1991 sets out various matters that impact on our considerations and deliberations. The key provisions are Sections 5 - 8, 32, 75 and 76 of the Act, and the Second Part of the First Schedule to the Act. The Section 42A Report prepared for the Committee considered these matters in detail and we have had regard to those matters. Where the statutory provisions are of particular significance we have referred to them within this Decision.

In this Decision, the following meanings apply:

"The Council" means the Invercargill City Council.

"Further Submitter" means a person or organisation supporting or opposing a submission to the Proposed Plan.

"FS" means Further Submission.

"Hearings Committee" means the District Plan Hearings Committee established by the Council under the Local Government Act.

"Operative Plan" or "Operative District Plan" means the Invercargill City District Plan 2005.

"Proposed Plan" or "Proposed District Plan" means the Proposed Invercargill City District Plan 2013.

"RMA" means the Resource Management Act 1991.

"SDHB" means the Southern District Health Board.

"Submitter" means a person or body lodging a submission to the Proposed Plan.

At the commencement of the hearings, Crs Boniface and Ludlow declared an interest as Directors of PowerNet Limited, Cr Sycamore declared an interest as a Director of Invercargill City Holdings Limited and Commissioner Hovell declared a conflict of interest in relation to submissions lodged by Cunningham Properties Limited. The Councillors and Commissioner took no part in deliberations in relation to the submissions of the submitters referred to.

THE HEARING

The hearing to consider the submissions lodged to the matters set out in this decision was held in the Council Chambers of the Invercargill City Council on 28 April 2015.

Section 42A Report

The Hearings Committee received a report from Joanna Shirley, Policy Planner with the Invercargill City Council. In her report, Mrs Shirley noted the Hospital Zone comprises approximately 40 hectares located between Elles Road, Kew Road and State Highway 1 providing for the operation and ongoing development of the Southland Hospital, which is locally and regionally important. She added that as well as providing for public health care services, the zone is also utilised for many health education and training programmes and non-clinical support service activities that are ancillary to the hospital's functions. She considers its ongoing operation is vital for the health and well-being of the community.

Mrs Shirley also explained that the Proposed District Plan makes specific provision for the Hospital Zone, but in general the provisions have been carried across from the Operative

District Plan without any major change. The provisions seek to protect the operational requirements of the hospital, while at the same time recognising that adverse effects can extend beyond the zone boundaries and need to be controlled. Mrs Shirley advised that the Southern District Health Board was the only submitter on this Section of the Plan, submitting in support of the zone and its provisions.

Mrs Shirley recommended some minor grammatical changes to the provisions in order to improve the readability of the Plan. She considered that these are minor amendments that will result in no consequence to the intention and outcome of the provisions and which can be made under Clause 16 (2) of the First Schedule to the RMA.

Submitters Attending the Hearing

Southern District Health Board

Shane Roberts, Work Group Leader for Property and Resource Management with Opus International, provided written evidence in which he advised that the SDHB submitted in support of the provisions of the Hospital Zone, and also the definition of Hospital Activity as notified, essentially as a "roll over" of the provisions in the Operative Plan. This is because these provisions have worked well to date and allow for the SDHB to provide health care for the residents of Southland without the need to seek unnecessary resource consents for activities that have minor or less than minor adverse effects. He also noted the zone provisions are not "carte blanche" and the SDHB is still required to comply with performance standards such as height and lightspill in order to protect the amenity of nearby residents.

Mr Roberts referred to the inclusion of the former Nurses' Home as a listed heritage building in the Proposed Plan. He explained that at the time the plan was open for submissions, the SDHB was seeking resource consent to demolish the Nurses' Home, Administration Building and Ross Corridor to redevelop that part of the Hospital Campus. This application was refused by the Council, and the SDHB made the decision not to appeal this to the Environment Court.

Mr Roberts then turned to the planner's recommendation on the heritage provisions which if adopted would require resource consent for the construction of a building on a Certificate of Title that contains a building listed in Appendix II.2. Given the large size of the area held in one of the Certificates of Title for the hospital, resource consent would be required under the heritage provisions for a structure in the Hospital Zone that is hundreds of metres away from the heritage buildings on site. He did not believe that was the intent of the recommendation.

Material Tabled at the Hearing

No material was tabled at the hearing.

MATTERS REQUIRING PARTICULAR CONSIDERATION

Heritage Buildings on the Hospital Site

The Committee noted that the SDHB did not lodge a further submission in relation to the original submission 115.11 by Heritage New Zealand seeking controls on buildings being erected within the surroundings of listed heritage items which gave rise to the recommendation referred to by Mr Roberts. However, as the SDHB did oppose the inclusion of a building on the list of heritage buildings in the Proposed Plan, the Committee accepted that this gave scope for the SDHB to give evidence in relation to this matter. The Committee has therefore had regard to the evidence of Mr Roberts in considering Submission 115.11 by Heritage New Zealand. That is discussed further in Decision 13 Heritage.

SECTION 32 MATTERS

Requirements

The Committee was advised by Mrs Shirley that Section 32 of the RMA establishes the framework for assessing objectives, policies and rules proposed in a Plan, and that a Report was released at the time of notification of the Proposed Plan in compliance with those provisions. The Committee was also advised that Section 32AA of the RMA requires a further evaluation to be released with decisions outlining the costs and benefits of any amendments made after the Proposed Plan was notified, with the detail of the assessment corresponding with the scale and significance of the environmental, economic, social, and cultural effects that are anticipated from the implementation of the changes made to the Proposed Plan.

As the Committee understands its obligations, it is required to:

- (i) Assess any changes made to objectives to determine whether they are the most appropriate way to achieve the purpose of the RMA.
- (ii) Examine any changes made to the policies and rules to determine whether they are the most appropriate way to achieve the objectives of the Proposed Plan. This includes:
 - Identifying the costs of the environmental, economic, social, and cultural effects that are anticipated from the implementation of the provisions (including effects on employment and economic growth)
 - Identifying other reasonably practicable options for achieving the objectives; and
 - Assessing the efficiency and effectiveness of the provisions in achieving the objectives.

The Committee however, is not required to assess in accordance with Section 32 of the RMA any changes to the issues and/or explanatory text of provisions.

Assessment

Mrs Shirley in her Section 42A Report recommended a number of minor grammatical changes to improve the readability of the Plan. No other amendments to the objectives, policies, or rules were recommended and Mrs Shirley advised us further evaluation under Section 32AA is not required. The Committee agrees with her advice and adopts it.

Dated at Invercargill this 11th day of October 2016

Councillor Darren Ludlow (Chair)

Councillor Neil Boniface

Councillor Graham Sycamore

Keith Hovell

APPENDIX 1 - DECISIONS BY SUBMISSION

SUBMISSION	DECISION		
GENERAL			
7.1 Southern District Health Board The submitter supports the Hospital Zone in the Plan and the provision of hospital activity as a permitted activity. The Hospital Zone provides for the Southern District Health Board to undertake its functions without the need to seek unnecessary resource consents whilst protecting the amenity of surrounding residential zones through performance standards. Retain the Hospital Zone and Section 3.28 of the Plan.	Amendments to District Plan None required. Reason: The submitter supports the Plan		
SECTION FOUR DEFINITIONS			
7.2 Southern District Health Board The submitter supports the proposed definition of "Hospital Activity". Retain the definition of Hospital Activity.	Decision 30/2 This submission is noted. Amendments to District Plan None required. Reason: The submitter supports the definition provisions and requests no change to it.		

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APPENDIX 2 – AMENDED DISTRICT PLAN PROVISIONS

SECTION TWO - ISSUES, OBJECTIVES AND POLICIES¹

2.27 HOSPITAL ZONE

2.27.2 Objectives

Objective 2: The identification, maintenance and enhancement of the amenity values of the amenity values of the Hospital Zone and its neighbourhood.

2.27.3 Policies

Policy 3 Odour: To ensure the absence of nuisance from objectionable odour.

Explanation: A variety of odours is an inevitable by-product of hospital activities and needs to be controlled.

Policy 6 Height of structures:

Explanation: The Hospital Zone is a large area of land which can accommodate large buildings. <u>but-However</u>, effects on residential; amenity (e.g. overlooking, shading, wind) need to be addressed.

Policy 9 Dilapidated structures and ill-maintained lands: To require that the buildings and surrounding land within the Hospital Zone are sound, well-maintained and tidy in appearance, recognising the adverse effects of dilapidated structures.

Policy 11 Car parking and vehicle manoeuvring²:

Explanation: The types of activities anticipated within the Hospital Zone are vehicle oriented, as opposed to pedestrian oriented. On-site car parking and efficient and convenient provision for service vehicles will be required as part of any activity carried out within this <u>site-zone</u>.

Policy 13 Weather protection: To ensure that natural wind effects on adjoining residential areas are not increased by buildings and structures in within the Hospital Zone.

2.27.4 Methods of Implementation

Method 3 Identify the amenity values for the Hospital Zone, include environmental standards to protect and enhance them, and implement through enforcement under the RMA, education, advocacy and collaboratingion with other Territorial Authorities.

¹ All changes made pursuant to Clause 16(2) of the First Schedule of the RMA unless otherwise stated

² Decision 20/44