

Section 32 Evaluation Report

Part 2: Special Purpose Hospital Zone and Special Purpose Tertiary Education Zone

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Table of acronyms

Abbreviation	Full term
CORZ	Special Purpose Corrections Zone
EW	Earthworks
HH	Historic Heritage
HOSZ	Hospital Zone
NES	National Environmental Standards
NES-AQ	National environmental Standard for Air Quality 2004
NES-ETA	National Environmental Standard for Electricity Transmission Activities 2009
NH	Natural Hazard
NPS	National Policy Statements
NPS-ET	National Policy Statement for Electricity Transmission 2008
NPS-UD	National Policy Statement for Urban Development 2020
ODP	Operative District Council
PDP	Proposed District Plan
PNRP	Proposed Natural Resources Plan
RMA	Resource Management Act 1991
RPS	Regional Policy Statement for the Wellington Region 2013
SASM	Sites and Significance to Māori
TEDZ	Tertiary Education Zones
WCC	Wellington City Council

1.0 Overview and Purpose

1.1 Introduction to the resource management issue/s

This section 32 evaluation report is focused on the Special Purpose Hospital and Tertiary Education Zones in the Proposed District Plan (PDP). The Hospital Zone applies to the four hospitals located within Wellington City. These hospitals comprise Wellington Regional Hospital | Ngā Puna Wai Ora, Southern Cross Hospital Wellington, Wakefield Hospital (all located in Newtown) and Bowen Hospital, located in Crofton Downs.

Wellington Regional Hospital | Ngā Puna Wai Ora is the public regional hospital in Wellington City. It also operates one of New Zealand's three Clinical Schools of Medicine. The Hospital was established on its current site in 1881. The Hospital is affiliated with the University of Otago and has the Wellington School of Medicine and Health Sciences situated adjacent to the main hospital building. The hospital is also a major employment and education hub for Wellington. The hospital employs around 5,700 staff.

Southern Cross, Wakefield and Bowen Hospitals are smaller, private hospitals. The purpose of the Special Purpose Hospital Zone is to enable the efficient and effective operation and development of these facilities.

The Special Purpose Hospital Zone seeks to ensure that the evolving health care needs of Wellington City, and the wider region, are supported by the efficient development of Wellington's hospital sites, whilst also recognising the visual character and amenity values of the surrounding environment. This zone provides for a range of hospital activities and ancillary activities, in addition to the special operational needs and functional needs of hospitals in general. All four hospitals provide a wide range of services and ancillary activities that are critical to the health and social wellbeing of communities throughout the Wellington Region.

The Tertiary Education Zone applies to Victoria University's Kelburn campus and Massey University's Mount Cook campus. As of early 2021, Victoria University and Massey University provided for a combined student population of over 25,000 students.

Victoria University is one of New Zealand's oldest and most tertiary institutions, having been founded in 1897. Te Herenga Waka—Victoria University of Wellington has over 22,000 students, including international students, as well as over 2,330 full-time equivalent staff. Massey University's Wellington campus was founded in 1999 when it merged with the Wellington Polytechnic to establish the College of Design, Fine Arts and Music.

The purpose of the Special Purpose Tertiary Education Zone is to enable the efficient and effective operation and development of these tertiary education facilities across both campus sites within the City. The zone reflects the importance of these existing institutions in providing for a diverse range of education, research and development activities and facilities, in addition to providing for their future growth.

These institutions provide a wide range of primary and ancillary activities that are important to the social, cultural and economic wellbeing of communities throughout the Wellington region. Ancillary activities are provided for in this zone as they play a key role in supporting the functions of the Universities. Iconic buildings on both sites are complemented by other learning, student support, recreation and accommodation facilities, and green spaces.

It is noted that the Tertiary Education Zone does not include the Victoria University Architecture School or Pipitea Campus that are located in the City Centre Zone, which is generally accommodating of a wide range of activities.

The proposed Hospital Zones and Tertiary Education Zones represent a shift in approach to the Operative District Plan's Institutional Precinct Zone, which is applied to Victoria University's Kelburn campus, Massey University's Mount Cook campus and Wellington Regional Hospital.

The inclusion of Bowen Hospital, Southern Cross Hospital Wellington and Wakefield Hospital also marks a shift from the Operative District Plan's zoning approach. Under the Operative District Plan, Bowen Hospital sits in the Outer Residential Zone, with Southern Cross and Wakefield Hospital are within the Inner Residential Zone.

2.0 Reference to other evaluation reports

This report should also be read in conjunction with the following evaluation reports:

Report	Relationship to this topic
Part 1: Context to s32 evaluation and evaluation of proposed Strategic Objectives	This report provides an overview of the PDP background and policy approach including the District Plan response to the National Policy Statement on Urban Development requirements. It also provides an evaluation of the Strategic Direction chapters of the PDP.
Subdivision	The purpose of the chapter to which this report relates is to assist the Council to carry out its functions under the RMA relating to the control of subdivision. Development activities subject to rules in the zone provisions may also be subject to the provisions of the Subdivision Chapter.
Earthworks	The purpose of the chapter to which this report relates is to assist the Council to carry out its functions under the RMA relating to the control of earthworks. Development activities subject to building and structure-related rules in the zone provisions are also subject to the provisions of the Earthworks Chapter.
Signs	Signs are a common feature of building and site development in the Hospital and Tertiary Education Zones. Proposed signs are subject to the provisions of the Signs Chapter.
Noise and Light	Noise and light generating activities are a common feature of building and site development in Hospital and Tertiary Education Zones and are subject to the provisions of the Noise and Light Chapters, respectively.
Wind	Large buildings and structures are common both the Hospital and Tertiary Education zones and have the potential to create wind effects for pedestrians and public space users. Provisions in the Wind Chapter therefore apply.
Temporary Activities	The Temporary Activities Chapter contains provisions to manage the effects of temporary activities, particularly in the Tertiary Education Zone.
Historic Heritage and Sites and Areas of Significance to Māori	The Hospital and Tertiary Education zoned sites (except for Wakefield Hospital) are subject to Historical and Cultural Values Overlays containing heritage buildings, sites and areas of significance to Māori, as well as being within the Waitangi Sites and Areas of Significance to Māori (lines).
Infrastructure and Transport	Provisions relating to infrastructure are located in the Infrastructure Chapter and infrastructure activities are generally exempt from the provisions in the Hospital and Tertiary Education Zones Chapters.

Report	Relationship to this topic
	<p>The Transport Chapter contains provisions relating to transport matters (such as trip generation and site access) that apply to hospital activities and tertiary education facilities.</p> <p>The Infrastructure chapter enables network utilities and manages potential adverse effects. National Grid Transmission lines traverse the southern portion of the Bowen Hospital site.</p>
Natural Environment	There are sites within the Hospital and Tertiary Education Zone that border Special Amenity Landscapes or have Significant Natural Areas within their parameters.
Natural Hazards	Five out of the six Hospital and Tertiary Education zoned sites are subject to natural hazard overlays including Ponding, Overland Flowpaths and Stream Corridors.
Contaminated Land and Hazardous Substances	The Contaminated Land Chapter manages subdivision, use and development of contaminated land and potentially contaminated land for the purposes of protecting human health.

3.0 Strategic Direction

The objectives in the Strategic Direction chapter of the PDP that are relevant to this to the Special Purpose Hospital Zone and the Special Purpose Tertiary Education Zone are:

<p>Anga Whakamua – Moving into the future</p> <p>AW-O2: <i>The relationship of Tangata Whenua with their lands and traditions is recognised and provided for, including:</i></p> <ol style="list-style-type: none"> <i>1. The use, development and expansion of Treaty Settlement land and any land that is subject to Deed of Settlement provisions relating to right of first refusal land, in a manner that recognises its commercial redress purposes; and</i> <i>2. The use and development of all other land to provide for the social, economic, commercial, and cultural aspirations of Tangata Whenua.</i>
<p>AW-O4: <i>The development and design of the City reflects mana whenua and the contribution of their culture, traditions, ancestral lands, waterbodies, sites, areas and landscapes, and other taonga of significance to the district's identity and sense of belonging.</i></p>
<p>Capital City</p> <p>CC-O1: <i>Wellington City continues to be the primary economic and employment hub for the region.</i></p>
<p>CC-O2: <i>Wellington City is a well-functioning Capital City where:</i></p> <ol style="list-style-type: none"> <i>1. A wide range of activities that have local, regional and national significance are able to establish.</i> <i>2. Current and future residents can meet their social, cultural, economic and environmental wellbeing.</i> <i>3. Mana whenua values and aspirations are visible, celebrated and an integral part of the City's identity.</i> <i>4. Urban intensification is delivered in appropriate locations and in a manner that supports future generations to meet their needs.</i>

5. *Innovation and technology advances that support the social, cultural, economic and environmental wellbeing of existing and future residents are promoted.*
6. *Values and characteristics that are an important part of the City's identity and sense of place are identified and protected.*

CC-O3: *Development is consistent with and supports the achievement of the following strategic objectives:*

1. *Compact: Wellington builds on its existing urban form with quality development in the right locations.*
2. *Resilient: Wellington's natural and built environments are healthy and robust, and we build physical and social resilience through good design.*
3. *Vibrant and Prosperous: Wellington builds on its reputation as an economic hub and creative centre of excellence by welcoming and supporting innovation and investing strategically to maintain our thriving economy.*
4. *Inclusive and Connected: Wellington recognises and fosters its identity by supporting social cohesion and cultural diversity, and has world-class movement systems with attractive and accessible public spaces and streets.*
5. *Greener: Wellington is sustainable and its natural environment is protected, enhanced and integrated into the urban environment.*
6. *Partnership with mana whenua: Wellington recognises the unique role of mana whenua within the city and advances a relationship based on active partnership.*

City Economy, Knowledge and Prosperity

CEKP-O5: *Strategically important assets including those that support Māori culture, tourism, trade, education, research, and health and cultural wellbeing are provided for in appropriate locations.*

Historic Heritage and Sites and Areas of Significance to Māori

HHSASM-O1: *Significant buildings, structures, areas, and sites that exemplify Wellington's historical and cultural values are identified, recognised and protected.*

HHSASM-O2: *Built heritage is resilient and has a sustainable long term use while ensuring heritage and cultural values are recognised and maintained.*

HHSASM-O3: *The cultural, spiritual and/or historical values associated with sites and areas of significance to Māori are protected.*

HHSASM-O4: *Sites of significance to Māori are identified and mana whenua's relationships, interests and associations with their culture, traditions, ancestral lands, waterbodies, sites, areas and landscapes, and other taonga of significance are recognised and provided for.*

HHSASM-O5: *Recognise that only mana whenua can identify impacts on their relationship with their culture, traditions, ancestral lands, waterbodies, sites, areas and landscapes and other taonga/sites of significance to Māori.*

Strategic City Assets and Infrastructure

SCA-O1: *Infrastructure is established, operated, maintained, and upgraded in Wellington City so that:*

1. *The social, economic, cultural, and environmental benefits of this infrastructure are recognised;*
2. *The City is able to function efficiently and effectively;*
3. *The infrastructure network is resilient in the long term; and*
4. *Future growth and development is enabled and can be sufficiently serviced.*

SCA-O2: *New urban development occurs in locations that are supported by sufficient development infrastructure capacity, or where this is not the case the development:*

1. *Can meet the development infrastructure costs associated with the development, and*
2. *Supports a significant increase in development capacity for the City.*

SCA-O3: *Additional infrastructure is incorporated into new urban developments of a nature and scale that supports Strategic Objective UFD-O6 or provides significant benefits at a regional or national scale.*

SCA-O4: *The adverse effects of infrastructure are managed having regard to the economic, social, environmental and cultural benefits, and the technical and operational needs of infrastructure.*

SCA-O6: *Infrastructure operates efficiently and safely and is protected from incompatible development and activities that may create reverse sensitivity effects.*

Sustainability, Resilience and Climate Change

SRCC-O1: *The City's built environment supports:*

1. *A net reduction in the City's carbon emissions by 2050;*
2. *More energy efficient buildings; and*
3. *An increase in the use of renewable energy sources; and*
4. *Healthy functioning of native ecosystems and natural processes.*

SRCC-O2: *Risks from natural hazards are:*

1. *Identified and understood;*
2. *Planned for through adaptation and mitigation measures to ensure the risks are low; and*
3. *Avoided where the risks are intolerable.*

SRCC-O3: *Subdivision, development and use:*

1. *Effectively manage the risks associated with climate change and sea level rise;*
2. *Support the City's ability to adapt over time to the impacts of climate change and sea level rise; and*
3. *Support natural functioning ecosystems and processes to help build resilience into the natural and built environments.*

SRCC-O4: *Land use, subdivision and development design integrates natural processes that provide opportunities for carbon storage, natural hazard risk reduction and support climate change adaptation.*

Urban Form and Development

UFD-O1 *Wellington's compact urban form is maintained with the majority of urban development located within the City Centre, in and around Centres, and along major public transport corridors.*

UFD-O6: *A variety of housing types, sizes and tenures, including assisted housing, supported residential care, and papakainga options, are available across the City to meet the community's diverse social, cultural, and economic housing needs.*

UFD-O7: *Development supports the creation of a liveable, well-functioning urban environment that enables all people and communities to provide for their social, economic, environmental, and cultural wellbeing, and:*

1. *Is accessible and well-designed;*
2. *Supports sustainable travel choices, including active and micro mobility modes;*
3. *Is serviced by the necessary infrastructure appropriate to the intensity, scale and function of the development and urban environment;*
4. *Is socially inclusive;*
5. *Is ecologically sensitive;*

- | |
|---|
| <p>6. <i>Is respectful of the City's historic heritage;</i>
 7. <i>Provides for community well-being; and</i>
 8. <i>Is adaptable over time and responsive to its evolving, more intensive surrounding context.</i></p> |
|---|

An evaluation of these objectives is contained in the companion Section 32 Evaluation Overview Report.

4.0 Regulatory and policy direction

In carrying out a s32 analysis, an evaluation is required of how the proposal achieves the purpose and principles contained in Part 2 of the RMA.

Section 5 sets out the purpose of the RMA, which is to promote the sustainable management of natural and physical resources.

Sustainable management 'means managing the use, development, and protection of natural and physical resources to enable people and communities to provide for their social, economic and cultural wellbeing and for their health and safety, while –

- (a) *sustaining the potential of natural and physical resources (excluding minerals) to meet the reasonably foreseeable needs of future generations; and*
- (b) *safeguarding the life-supporting capacity of air, water, soil, and ecosystems; and*
- (c) *avoiding, remedying, or mitigating any adverse effects of activities on the environment'.*

In achieving this purpose, all persons exercising functions and powers under the RMA also need to:

- Recognise and provide for the matters of national importance identified in s6
- Have particular regard to the range of other matters referred to in s7
- Take into account the principles of the Treaty of Waitangi/Te Tiriti o Waitangi in s8.

4.1 Section 6

The s6 matters relevant to this topic are:

Section	Relevant Matter
6®	<p><i>the protection of areas of significant indigenous vegetation and significant habitats of indigenous fauna</i></p> <p>This matter is relevant given Bowen Hospital has identified significant indigenous vegetation within its site.</p>
6®	<p><i>the relationship of Maori and their culture and traditions with their ancestral lands, water, sites, waahi tapu, and other taonga</i></p> <p>The Hospital Zone and the Tertiary Education Zone have established ecological, historical and cultural associations for the mana whenua of Te Whanganui a Tara (Wellington), Taranaki Whānui and Ngāti Toa Rangatira.</p> <p>The two Tertiary Zone sites and three of the four Hospital Zone sites are identified as having sites and areas of Significance to Māori. This includes the Kumutoto Awa, Waikoukou and Waitangi lines, Te Herenga Waka Marae, Puke Ahu – Ngā Tapuae o Kāhui Maunga, Te Rau Karamu Marae and Te O.</p> <p>Activities and development within the Hospital Zone and Tertiary Education Zone must recognise mana whenua as kaitiaki, alongside their relationship with the land. For the Hospital Zone this includes recognising the health benefits associated with the land and springs that the Wellington Regional Hospital Ngā</p>

	<p>Puna Wai Ora sits on, as well as the manaaki that Wellington Regional Hospital Ngā Puna Wai Ora provides.</p> <p>The Tertiary Education Zone seeks to manage adverse effects of activities and development within the zone at interfaces with sites and areas of significance to Māori.</p>
6(f)	<p><i>the protection of historic heritage from inappropriate subdivision, use, and development</i></p> <p>The Tertiary Education Zone contains Historic Heritage buildings and structures of local and national significance. Victoria University's Kelburn campus includes the Hunter Building, Robert Stout Building and the Gordon Wilson Flats.</p> <p>Massey's Mount Cook Campus includes the National/Dominion Museum and National Art Gallery (former), as well as the Tasman Street Brick Wall. The Tertiary Education Zone seeks to manage adverse effects of activities and development within the Zone at interfaces with heritage buildings and structures.</p> <p>The Tertiary Education Zone recognises the nationally and regionally significant values and function of the National War Memorial within the Massey University campus. This includes recognises the landmark status of the National War Memorial including Carillion, Tomb of the Unknown Warrior, Hall of Memories, pool, steps and forecourt.</p>
6(h)	<p><i>the management of significant risks from natural hazards.</i></p> <p>The Hospital and Tertiary Education Zone are also subject to Natural Hazard Overlays within the PDP.</p>

4.2 Section 7

The s7 matters that are relevant to this topic are:

Section	Relevant Matter
7(b)	<p><i>the efficient use and development of natural and physical resources</i></p> <p>This matter is relevant given the strategic value and importance of the physical resources that comprise the tertiary buildings and hospital facilities. These facilities are of local, regional and national significance, support the city and region's health and education sectors, and are fundamental to the growth and prosperity of the City.</p>
7(ba)	<p><i>the efficiency of the end use of energy</i></p> <p>This matter is reflected in the Hospital and Tertiary Education Zone provisions that promote compact urban form, enhances and creates new sustainable transport links and imposes considerations relating to building sustainability etc.</p>
7®	<p><i>the maintenance and enhancement of amenity values</i></p> <p>This matter is relevant given the relationship of the site with surrounding development, particularly residential and open space areas. All six sites are surrounded by residential environments, with Wellington Regional Hospital also sitting alongside the Town Belt Zone. Wellington Regional Hospital is a visually prominent site given the surrounding topography of Newtown. Massey University's Mount Cook Campus and Victoria University's Kelburn Campus are also visually prominent sites due to the topography and being visible as part of Wellington's skyline.</p>

7(f)	<i>maintenance and enhancement of the quality of the environment</i> Quality environment and design outcomes are an important aspect of the Hospital and Tertiary Education Zone provisions.
S7(g)	<i>any finite characteristics of natural and physical resources</i> This matter is reflected in the provisions which support the reduction of greenhouse gas emissions and incorporate sustainable energy use and incorporates green open space.
S7(i)	<i>the effects of climate change</i> This matter is reflected in the provisions to ensure that the universities and hospitals can be resilient to the natural hazards, which may be exacerbated by the effects of climate change

4.3 Section 8

The s8 principles of Partnership and Participation are relevant to this topic. Advice was given to the topic lead regarding which sites held cultural connections for Mana Whenua and how Mana Whenua wanted these reflected in the provisions. Mana Whenua have reviewed the provisions and provided feedback (refer to section 5.2.3).

In addition, the Council and Taranaki Whānui ki te Upoko o te Ika and Ngāti Toa Rangatira have worked in partnership to develop provisions to ensure that sites and areas of significance to Māori are identified and protected within these zones.

4.4 National Direction

4.4.1 National Policy Statements

There are five National Policy Statements (NPS) currently in force:

- NPS for Electricity Transmission 2008 (NPS-ET)
- New Zealand Coastal Policy Statement 2010
- NPS for Renewable Electricity Generation 2011
- NPS for Freshwater Management 2020
- NPS on Urban Development 2020 (NPS-UD)

The instrument and associated provisions relevant to this topic are the:

- NPS-ET
- NPS-UD

The NPS-ET is relevant to the Bowen Hospital site as transmission lines span the southern portion of this site. The impacts of this, and provisions for the operation of the transmission line infrastructure and activities around the transmission line infrastructure, are addressed through the Infrastructure Chapter and associated s32 analysis.

Hospitals, universities and tertiary education facilities are not directly referred to in the NPS-UD, but healthcare and schools are listed as examples of *social infrastructure* that fall within the definition of *additional infrastructure* utilised in the NPS-UD. Relevant NPS-UD objectives and policies are set out in the table below.

Under the NPS-UD, local authorities must be satisfied that the additional infrastructure to service the development capacity is likely to be available. The provisions contained in the Tertiary Education and Hospital Zones, ensure that Victoria University, Massey University, Wellington Regional Hospital and the three private hospitals continue to deliver current services in addition to providing for their future growth needs.

In addition, the need for student accommodation must be included in the Housing and Business Land Capacity Assessment (HBA) that the Council must prepare under the NPS-UD in terms of different types and forms of housing.¹ This is relevant for the Tertiary Education Zone given 'student accommodation' is included in the definition of 'Tertiary Education Facility'.

NPS-UD	Relevant Objectives / Policies
NPS-UD	<ul style="list-style-type: none"> • Objective 1: <i>New Zealand has well-functioning urban environments that enable all people and communities to provide for their social, economic, and cultural wellbeing, and for their health and safety, now and into the future.</i> • Objective 3: <i>Regional policy statements and district plans enable more people to live in, and more businesses and community services to be located in, areas of an urban environment in which one or more of the following apply: (b) area is well-serviced by existing or planned public transport</i> • Objective 4: <i>New Zealand's urban environments, including their amenity values, develop and change over time in response to the diverse and changing needs of people, communities, and future generations.</i> • Policy 1: <i>Contribution of planning decisions to well-functioning urban environments including whether they 'have or enable a variety of sites that are suitable for different business sectors in terms of location and site size'.</i> • Policy 2: <i>Tier 1 authorities (WCC is one), 'at all times, provide at least sufficient development capacity to meet expected demand ... for business land over the short term, medium term, and long term'.</i> • Policy 3: <i>In Tier 1 urban environments, and more specifically in metropolitan centre zones, district plans enable 'building heights and density of urban form to reflect demand for housing and business use in those locations, and in all cases building heights of at least 6 storeys' and also 'building heights of least 6 storeys within at least a walkable catchment of the following: (i) existing and planned rapid transit stops (ii) the edge of city centre zones (iii) the edge of metropolitan centre zones'</i> • Policy 4: <i>District plans applying to Tier 1 urban environments 'modify the relevant building height or density requirements under Policy 3 only to the extent necessary ... to accommodate a qualifying matter in that area'.</i> • Policy 6: <i>When making planning decisions that affect urban environments, decision-makers have particular regard to a number of matters.</i> • Policy 9: <i>Local authorities, in taking account of the principles of the Treaty of Waitangi (Te Tiriti o Waitangi) in relation to urban environments, must meet consultation obligations.</i> • Policy 10: <i>Tier 1, 2, and 3 local authorities: b. engage with providers of development infrastructure and additional infrastructure to achieve integrated land use and infrastructure planning.</i> • Policy 11: <i>Tier 1 authorities are limited in terms of their consideration of car parking matters.</i>

¹ NPSUD, section 3.23 'Analysis of housing market and impact of planning'. May 2022

4.4.2 Proposed National Policy Statements

In addition to the five NPSs currently in force there are also two proposed NPSs under development, noting that these are yet to be issued and have no legal effect and therefore have not been considered:

- Proposed NPS for Highly Productive Land
- Proposed NPS for Indigenous Biodiversity

Even though not having legal effect, it is noteworthy that neither are relevant to this topic.

4.4.3 National Environmental Standards

In addition to the NPSs there are nine National Environmental Standards (NES) currently in force:

- NES for Air Quality 2004 (NES-AQ)
- NES for Sources of Human Drinking Water 2007
- NES for Electricity Transmission Activities 2009 (NES-ETA)
- NES for Assessing and Managing Contaminants in Soil to Protect Human Health 2011
- NES for Telecommunication Facilities 2016
- NES for Plantation Forestry 2017
- NES for Freshwater 2020
- NES for Marine Aquaculture 2020
- NES for Storing Tyres Outdoors 2021

No NES are uniquely relevant where the Proposed District Plan's provisions relating to the Hospital or Tertiary Education zones are concerned, although the NES-AQ and NES-ETA are indirectly relevant as set out in the table below. Refer to the s32 evaluation reports for the Infrastructure and Transport and Contaminated Land and Hazardous Substances topics for a specific discussion on the relevance of NES.

NES	Relevant Regulations
NES-AQ	Institutions may be required to apply for resource consent to the Regional Council for discharges to air. However, these matters are dealt with under the Wellington Proposed Natural Resources Plan and not impact on the provisions of the PDP.
NES-ETA	The NES-ETA contains a range of regulations relevant to works on and around transmission infrastructure. The regulations have a direct bearing on the Bowen Hospital site, which has transmission lines span its southern portion. However, this is addressed by other provisions in the Infrastructure Chapter relating to setback standards from transmission electricity lines for building and structures (INF-S12).

4.4.4 National Planning Standards

The National Planning Standards provide for a range of zone options to be included in Part 3 – Area Specific Matters of the PDP. This includes site specific zoning under 'Special Purpose

Zones', and specifically catering to Hospitals and Tertiary Education. The purpose of these zones is as follows:

Zone	Description
Special Purpose Hospital Zone	<i>Areas used predominantly for the operation and development of locally or regionally important medical, surgical or psychiatric care facilities, as well as health care services and facilities, administrative and commercial activities associated with these facilities.</i>
Special Purpose Tertiary Education Zone	<i>Areas used predominantly for the operation and development of tertiary education facilities and associated activities.</i>

4.5 National Guidance Documents

There are no relevant national guidance documents are considered relevant to this topic.

4.6 Regional Policy and Plans

Regional Policy Statement for the Wellington Region 2013 (RPS)

The table below identifies the relevant provisions and resource management topics for Special Purpose Hospital and Tertiary Education Zones contained in the RPS.

<i>Air Quality</i>	
<i>Section</i>	<i>Relevant matters</i>
Objective 1 and 2 Policy 1 (M)	Objective 1: <i>Discharges of odour, smoke and dust to air do not adversely affect amenity values and people's wellbeing.</i> Objective 2: <i>Human health is protected from unacceptable levels of fine particulate matter.</i> Policy 1 requires odour, smoke and dust to be managed within district plans.
<i>Energy, infrastructure and waste</i>	
<i>Section</i>	<i>Relevant matters</i>

<p>Objective 10 Policy 7, 8 and 11 (M)</p>	<p><i>Objective 10: The social, economic, cultural and environmental, benefits of regionally significant infrastructure are recognised and protected.</i></p> <p>Policy 7 requires district plans to recognise the benefits from renewable energy and regionally significant infrastructure.</p> <p>Policy 8 requires district plans to protect regionally significant infrastructure.</p> <p>Policy 11 requires that district plans include policies and/or rules to provide for energy efficient alterations to existing buildings. The explanation of this policy details that improved energy efficiency can be achieved by:</p> <ul style="list-style-type: none"> • <i>Enabling everyday services – such as shops, schools, businesses and community facilities to be accessed by walking and cycling</i> • <i>Enabling easy access to public transport services</i> • <i>Locating and designing infrastructure and services to support walking, cycling or the use public transport</i> • <i>Enabling the efficient use of the sun as a source of power and heating</i> • <i>Incorporating renewable energy generation facilities – such as solar panels and domestic scale wind turbines</i>
Historic Heritage	
Section	Relevant matters
<p>Objective 15 Policies 21 and 22 (M) Policy 46 ®</p>	<p><i>Objective 15: Historic heritage is identified and protected from inappropriate modification, use and development.</i></p> <p>Policies 21 and 22 require district plans to <i>identify places, sites and areas with significant historic heritage values and protect historic heritage values, respectively.</i></p> <p>Policy 46 includes as a resource consent consideration the managing of effects on historic heritage value.</p>
Natural Hazards	
Section	Relevant matters
<p>Objectives 19, 20 and 21 Policy 29 (M) Policies 51 and 52 ®</p>	<p><i>Objective 19: The risks and consequences to people, communities, their businesses, property and infrastructure from natural hazards and climate change effects are reduced.</i></p> <p><i>Objective 20: Hazard mitigation measures, structural works and other activities do not increase the risk and consequences of natural hazard events.</i></p> <p><i>Objective 21: Communities are more resilient to natural hazards, including the impacts of climate change, and people are better prepared for the consequences of natural hazard events.</i></p> <p>Policy 29 requires district plans to contain provisions to <i>avoid inappropriate subdivision and development in areas at high risk from natural hazards.</i></p> <p>Policies 51 and 52 include as resource consent considerations the minimising of the risks and consequences of natural hazards the minimising adverse effects of hazard mitigation measures, respectively.</p>
Regional form, design and function	
Section	Relevant matters

<p>Objective 22</p> <p>Policy 54 ®</p> <p>Policy 55 ®</p> <p>Policy 57 ®</p> <p>Policy 58 ®</p>	<p>Objective 22: <i>A compact well designed and sustainable regional form that has an integrated, safe and responsive transport network and:</i></p> <p><i>(k) efficiently use existing infrastructure (including transport network infrastructure); and</i></p> <p><i>(l) essential social services to meet the region’s needs</i></p> <p>Policy 54 includes consideration of achieving the region’s urban design principles.</p> <p>Policy 55 includes consideration of maintaining a compact, well designed and sustainable regional form.</p> <p>Policy 57 includes considerations of integrating land use and transportation.</p> <p>Policy 58 includes consideration of co-ordinating land use with development and operation of infrastructure.</p>
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Resource management with tangata whenua	
Section	Relevant matters
Objectives 23, 24, 25, 26, 27 and 28 Policy 49 ®	<p>Objective 23: <i>The region's iwi authorities and local authorities work together under Treaty partner principles for the sustainable management of the region's environment for the benefit and wellbeing of the regional community, both now and in the future.</i></p> <p>Objective 24: <i>The principles of the Treaty of Waitangi are taken into account in a systematic way when resource management decisions are made.</i></p> <p>Objective 25: <i>The concept of kaitiakitanga is integrated into the sustainable management of the Wellington region's natural and physical resources.</i></p> <p>Objective 26: <i>Mauri is sustained, particularly in relation to coastal and fresh waters.</i></p> <p>Objective 27: <i>Mahinga kai and natural resources used for customary purposes, are maintained and enhanced, and these resources are healthy and accessible to tangata whenua.</i></p> <p>Objective 28: <i>The cultural relationship of Māori with their ancestral lands, water, sites, wāhi tapu and other taonga is maintained.</i></p> <p>Policy 49 includes as a resource consent consideration recognising and providing for matters of significance to tangata whenua.</p>

M = policies which must be implemented in accordance with stated methods in the RPS
R = policies to which particular regard must be had when varying a district plan

Regional Plans

There are currently five operative regional plans and one proposed regional plan for the Wellington region:

- Regional Freshwater Plan for the Wellington Region, 1999
- Regional Coastal Plan for the Wellington Region, 2000
- Regional Air Quality Management Plan for the Wellington Region, 2000 (RAQMP)
- Regional Soil Plan for the Wellington Region, 2000
- Regional Plan for discharges to the land, 1999
- Proposed Natural Resources Plan, appeals version 2021

The Proposed Natural Resources Plan (PNRP) replaces the five operative regional plans, with provisions in this plan now largely operative with the exception of those that are subject to appeal.

The RAQMP and the equivalent air quality provisions of the PNRP may be relevant to the Special Purpose Hospital Zone, in the event that activities on the sites require a discharge to air consent as part of their general operational requirements. However, as consent would be sought from the regional council it does not impact on the Hospital Zone provisions with the PDP.

4.7 Iwi Management Plan(s)

Currently, there are no Iwi Management Plans that are applicable to Wellington City.

4.8 Relevant plans or strategies

The following plans / strategies are relevant to this topic:

Plan / Strategy	Organisation	Relevant Provisions
Our City Tomorrow – He Mahere Mokowā mō Pōneke – A Spatial Plan for Wellington City 2021	Wellington City Council	<p>The Spatial Plan is essentially the ‘blueprint’ for how Wellington should grow and develop over the next 30 years.</p> <p>The plan recognises that growth needs to be supported by sustainable infrastructure and services and identifies the universities and Wellington Regional Hospital as strategic assets.</p>
Central City Spatial Vision	Wellington City Council	<p>Wellington Regional Hospital and the universities are identified as Anchors of Resilience. Anchors of resilience and as such <i>“are planned to be self-supporting places post events, like earthquakes”</i>.</p> <p>Anchors are <i>“strong, stable places and will have a constant presence in the future. They are already resilient, or are capable of being made to be. The hospital, Pipitea marae, parliament, a rebuilt Civic Centre/Te Ngākau, rebuilt port, Te Papa, and universities are examples.”</i></p>
Wellington Towards 2040: Smart Capital	Wellington City Council	<p>The document recognises that Wellington has <i>“significant tertiary education and research resources”</i>. This emphasises the need to grow the research sector, particularly the privately funded research and development sector which the document outlines as a gap in the country’s commercial profile.</p> <p>The document’s question of ‘why a connected city?’ highlights the need to scope out space for tertiary facilities within the City. This is demonstrated in the following quote from the document: <i>“a key benefit for Wellington of a large and influential tertiary education sector in the city is the opportunities it creates for linkages with knowledge intensive services in the city and the dissemination of knowledge between them.”</i></p>
October 2018 Recommended Programme of Investment	Waka Kotahi (Ministry for Transport), Greater Wellington Regional Council and Wellington City Council	<p>The programme outlines that the advancements will increase the public transport capacity to service the Wellington Regional Hospital. These actions will ultimately open up accessibility for Wellingtonians to reach essential services, and support the workers of the hospital and its associated activities.</p>
Wellington Resilience Strategy 2017	Wellington City Council	<p>One of the goal projects within the Strategy is to ensure emergency water supply for Wellington Hospital.</p>

		<p>The strategy notes that <i>“The Council will work with Wellington Water, the District Health Board and relevant Central Government agencies to agree on delivery methods and funding for the emergency water supply for Wellington Hospital and implement the project.”</i></p> <p>This project <i>“improves the likelihood that Wellington Hospital will be able to function after an earthquake and may also identify water efficiency opportunities for the day-to-day operation of the hospital.”</i></p>
Victoria University of Wellington: Investment Plan 2020-2022, approved 2019	University Council and Tertiary Education Commission	<p>The document sets out the Strategic Direction for Victoria University and outlines its long-term path.</p> <p>The plan notes that a campus master plan (see below) provides a long-term view of how building assets will be managed and prioritises capital spend on refurbishment and construction. Given the impact of the 2016 Kaikoura earthquake, ongoing repairs to buildings are still occurring. An additional decant building is being constructed to facilitate refurbishment of other buildings on campus.</p>
Victoria University of Wellington: 2020 Campus Master Plan: A vision to 2030	Victoria University of Wellington	<p>This master plan states that <i>“Our place in Wellington city as part of its landscape, community, and culture will continue to grow. Wellington city is fast becoming our campus. Achieving our vision to 2030 will expand our presence in Wellington and beyond”</i></p> <p>It also recognises the heritage buildings within the campus, stating: <i>“Over the next 10 years, we will restore and maintain the Hunter building—our oldest building dating from 1906. We will also focus on resilience of our built environment—for each of our major buildings we will develop 5-year plans for remedial and renewal works.”</i></p>
Massey University Investment Plan: 2019-2021	Massey University	This plan outlines new infrastructure projects at the Wellington campus, with the development of a nursing simulation suite.
Massey University Strategy 2022-2027	Massey University	This document states that sustainability and climate action are values weaved through the strategy.

4.9 Other relevant legislation or regulations

There is no other legislation or regulations relevant to this topic.

5.0 Resource Management Issues Analysis

5.1 Background

This part of the report identifies and analyses the key issues relevant to this topic.

5.2 Evidence Base – Research, Consultation, Information and Analysis undertaken

The Council has reviewed the operative District Plan, commissioned technical advice and sought assistance from various internal and external experts and utilised this, along with internal workshops and community feedback to assist with setting the plan framework. This work has been used to inform the identification and assessment of the environmental, economic, social and cultural effects that are anticipated from the implementation of the provisions. This advice includes the following:

Title	Author	Brief synopsis
<i>Issues & Options Report: Institutional Precincts Zone – March 2020</i>	Resource Management Group	<p>This report identified issues and options informed by a review of the Operative District Plan provisions and design guides, a review of a selection of resource consent applications, a series of meeting with the City's two tertiary education providers and the District Health Board (DHB), and a review of best practice for the management of institutional precincts adopted in other district and unitary plans.</p> <p>The findings of this report are referenced in the following sub-sections of this s32 evaluation.</p>
<i>Wellington Regional Housing and Business Development Capacity Assessment 2019</i>	Wellington City Council, Hutt City Council, Porirua City Council, Kapiti Coast District Council, Upper Hutt City Council, Wellington Water, property Economics, MR Cagney, Sense Partners, Eagle Technology	<p>This report presents the results of the Housing and Business Land Capacity Assessment (HBA) for the Wellington councils. It includes a section on 'Other Demand – Student Accommodation' which is relevant to the Special Purpose Tertiary Zone given that the zone provides for student accommodation.</p> <p>The report identifies the growth ambitions of Massey and Victoria Universities which will likely result in an increase in student numbers leading to a heightened pressure on accommodation.</p>

In addition to the material listed in the table above, the Council has also gathered geospatial information, mapping the locations and building heights of each institutional precinct and locations of the proposed Hospital and Tertiary Education zoned sites.

5.2.1 Analysis of Operative District Plan provisions relevant to this topic

For the purposes of this report the key provisions in the Operative District Plan (ODP) of relevance to this topic are summarised below.

Topic	Summary of relevant provisions
Institutional Precinct	<p>Victoria University, Massey University and Wellington Hospital were previously protected by Public Works designations. With the introduction of the RMA, the sites were no longer protected by designations.</p> <p>Therefore, to recognise their importance to the city and manage the special characteristics of these sites the ODP introduced an Institutional Precinct, which distinguished and managed these institutions common factors, such as:</p> <ul style="list-style-type: none"> • form and scale of development • scale and intensity of activities on site • impact on surrounding residential neighbourhoods • integrated management <p>Chapter 8 has nine objectives, which collectively seek to:</p> <ul style="list-style-type: none"> • avoid, remedy or mitigate of adverse effects of subdivision, natural and technological hazards and hazardous substances; • facilitate the exercise of tino rangatiratanga and kaitiakitanga; • promoting and maintaining a safe and healthy city, natural and physical resources in the precincts; • maintenance and enhancement of amenity values; and • enabling efficient access. <p>These objectives are implemented by a framework of 24 supporting policies that in general:</p> <ul style="list-style-type: none"> • provide for operation and development of the institutions; • permit development of the precincts for their primary purposes; • managed and mitigate adverse effects at the interface of the zones; • manage the effects of hazards and hazardous substances; • identify, define and protect sites and precincts of significance to tangata whenua and other Maori using accepted methods; and • enable the needs of tangata whenua and other Maori and the principles of Te Tiriti o Waitangi. <p>Chapter 9 contains the rules. There are four permitted activities that relate to the primary function of the precincts, which are:</p> <ul style="list-style-type: none"> • activities ancillary to the primary function; • subdivision, where conditions are met; • helicopter landing areas (from Wellington Hospital roof); and • upgrading and maintenance of existing formed roads. <p>The following rules relate to controlled activities:</p> <ul style="list-style-type: none"> • new buildings, and additions and alterations to existing buildings, subject to meeting standards and terms. <p>There are two exceptions to this general approach for building work, being:</p> <ul style="list-style-type: none"> • on the land at 320 the Terrace, any new buildings or additions and alterations to existing buildings are a restricted discretionary activity; • buildings and structures (including bridges) located above or over the street that exceed 25% of the road width are discretionary activities; and • the demolition of Gordon Wilson Flats is subject to a controlled activity rule, with control limited to construction noise effects, demolition management, amenity effects and the recording of the building before demolition. <p>Discretionary/non-complying activities as follows:</p> <ul style="list-style-type: none"> • subdivision and other activities that are not otherwise permitted, controlled or restricted discretionary are assessed as discretionary activities; and • otherwise innominate activities are non-complying activities.

Topic	Summary of relevant provisions
	<p>Other methods:</p> <p>The precincts are each subject to bespoke Design Guides in Volume 2 of the District Plan. These are important methods for implementing the overarching policy direction in combination with the rules in Chapter 9. Each guide includes:</p> <ul style="list-style-type: none"> • a description of the precinct; • a statement of the guide’s intent; • an analysis of the precinct’s key (urban design) contextual elements; • urban design ‘objectives’; • guidelines to assist with the implementation of the urban design objectives; and • location and height control plans. <p>During the course of reviewing the operative provisions for the purposes of preparing the Institutional Precinct Zone Issues and Options Report referred to in section 5.2 above, the following key issues were identified:</p> <ul style="list-style-type: none"> • the strategic importance of the City’s main tertiary education and health facilities is not well expressed; • aspects of the regulatory approach for activities should be revisited; • aspects of the regulatory approach for buildings should be revisited; • the approach to notification statements in the Institutional Precinct Zone and City-wide provisions should be revisited; • structure and language can be simplified, made more certain and made more helpful to decision-makers; and • the provisions should be adaptable to changing demands the institutions need to respond to. <p>These issues are discussed in more detail below in section 5.3.</p>

5.2.2 Analysis of other District Plan provisions relevant to this topic

Current practice has been considered in respect of this topic, with a review undertaken of the following district plans, as reported in the Institutional Precincts Zone Issues and Options Report referred to in section 5.2 above. It is noted that some but not all of these plans have been prepared in accordance with the National Planning Standards.

Plan	Local Authority	Description of approach
Operative Auckland Unitary Plan 2016 (inclusive of subsequent updates)	Auckland Council	<ul style="list-style-type: none"> • As a unitary plan, the Plan incorporates the RPS, which includes objectives and policies relating to urban growth and form, among other topics. • The Plan was developed before the advent of the National Planning Standards and is therefore not aligned with its requirements. • The following institutions are relevant: <ul style="list-style-type: none"> <i>Tertiary education facilities:</i> <ul style="list-style-type: none"> - University of Auckland (central city and medical school campuses), - Auckland University of Technology (central city campus) - Manukau Institution of Technology - Massey University - UNITEC <i>Hospital facilities:</i> <ul style="list-style-type: none"> - Auckland

Plan	Local Authority	Description of approach
		<ul style="list-style-type: none"> - Greenlane - Waitakere - North Shore - Middlemore • The tertiary education facilities are subject to a mix of zoning used (business or mixed-use zoning) in addition to precinct and sub-precinct provisions. • In some cases (e.g., MIT) institutions are catered for by a Special Purpose – Tertiary Education Zone. • UNITEC is subject to both an underlying zoning which includes in part the Special Purpose – Tertiary Education Zone, but also precinct-based provisions. • All major hospitals are catered for by a Special Purpose – Healthcare Facility and Hospital Zone. • Each zones features its own set of objectives and policies, with the precinct objectives focusing on more specific expectations around urban design. • The zones list specific activities that are permitted if compliant with the relevant standards. • It is not always clear what the consent status is of unlisted activities. • In some, but not all cases, it is explicitly stated that controlled or restricted discretionary activities will be considered without the requirements for notification or written approvals. • It is not clear why there is not a standardised approach to zoning for the Tertiary Education facilities. • Across the special zones and precincts, the standards relate to buildings, rather than the activities and the limits (such as building height) tend to differ to reflect their location and adjoining zoning. • No design guides apply, with new builds or additions requiring consent and guided by matters of discretion for assessment criteria. • The Plan’s provisions are currently under review by the Council with a view to achieving alignment with the requirements of the NPS-UD and the Resource Management (Enabling Housing Supply and Other Matters) Amendment Act with respect to residential provision. This review may affect the tertiary education facilities that are located within the mixed-use zone.

Plan	Local Authority	Description of approach
Operative Dunedin City District Plan 2018 (inclusive of minor amendment variation notified in 2019)	Dunedin City Council	<ul style="list-style-type: none"> • The Plan was developed before the advent of the National Planning Standards and is therefore not aligned with its requirements. • The following institutions are relevant: <ul style="list-style-type: none"> <i>Tertiary education facilities:</i> <ul style="list-style-type: none"> - The University of Otago - Otago Polytechnic <i>Hospital facilities:</i> <ul style="list-style-type: none"> - Dunedin - Wakari • All institutions are catered for by way of special purpose zones, depending on the nature of a particular proposal, city-wide provisions may also apply. • The tertiary education facilities are subject to the Major Facility – Campus Zone and the each of the hospitals are subject to their own zone, Major Facility – Dunedin Hospital and Facility – Wakari Hospital zone • There is an overarching strategic objective for ‘major facilities’ which recognises their importance for economic and social well-being, whilst acknowledging they may give rise to reverse sensitivity. • For the hospital special purpose zones, the objective and policy direction seek to enable to operation, now and in the future, whilst ensuring a reasonable standard of amenity, particularly for the surrounding residential areas. • For the campus zone, the objective and policy direction seeks to provide a broader range of the activities and imposes more built environment measures, such as height and setback controls, to ensure residential amenity, both within the zone and adjoining areas. • Across both Major Facility Zones, activity status tables and performance standards are separately provided for land uses and development activities, and are clearly structured so that it is clear which standards apply to each activity. • Activities are nested in a broader sense, such as ‘major facility activities’. • In the Major Facility – Campus Zone, new buildings and structures, and additions and alterations to buildings (independent of the activity they will be used for) are permitted and not subject to any performance standards. • Only when new buildings affect specified heritage values or ‘visible from an adjoining public place’ are consent requirements imposed (e.g., as a restricted discretionary activity). • Non notification paths are explicitly set out. • In situations where an institution sells off sites the Plan sets out what provisions will apply.

Plan	Local Authority	Description of approach
<p>Proposed Porirua District Plan 2020</p> <p>(An assessment of the Operative Porirua District Plan 1999 was also carried out in the Issues and Options paper)²</p>	<p>Porirua City Council</p>	<ul style="list-style-type: none"> • The following institutions are relevant: <ul style="list-style-type: none"> <i>Tertiary education facilities:</i> <ul style="list-style-type: none"> - Whitireia Porirua Campus <i>Hospital facilities:</i> <ul style="list-style-type: none"> - Kenepuru Community Hospital • The Kenepuru Hospital is located in a broader Industrial Zone. The Whitireia Campus is located in a broader City Centre Zone. • There are no strategic-level objectives or policies relating to these institutions, only oblique references to civic and educational activities within the City Centre. • Any activity able to comply with permitted activity standards within the zones and not otherwise listed are deemed permitted activities. • Standards relate to parking, earthworks, hazardous substances, height, height recession planes, loading, noise, screening, signs and yards.
<p>Operative Christchurch District Plan 2017</p>	<p>Christchurch City Council</p>	<ul style="list-style-type: none"> • Institutions are catered for by way of special purpose zones, hospital and tertiary education zones. • The following institutions are relevant: <ul style="list-style-type: none"> <i>Tertiary education facilities:</i> <ul style="list-style-type: none"> - University of Canterbury main campus and former teachers training college campus - Ara Institute – three campuses <i>Hospital facilities:</i> <ul style="list-style-type: none"> - Christchurch - Southern Cross - St Margarets - Burwood - Hillmorton - St Georges - Nurse Maude - Pegasus Health - Wesley Care • It is also of note that part of the Christchurch Hospital is covered by a designation. • The strategic objective direction relates to ‘community facilities’ and ‘education activities’, which are defined as including ‘health care facilities’ and ‘tertiary education’ respectively. • To note, the Special Purpose Hospital Zone includes public and private hospitals. • Each of the special purpose zones include their own objective and policy direction, with the Hospital Zone including a single focus on providing support to the efficient development of the hospital sites whilst recognising the amenity values of the surrounding areas. Whereas the focus is wider for the Tertiary Education Zone. • Each zone provides a list setting out what other provisions in the Plan apply.

² Institutional Precincts Zone: Issues and Options, dated March 2020, Appendix 2, page 11

Plan	Local Authority	Description of approach
		<ul style="list-style-type: none"> • Both zones provide broad nested activity definitions that are permitted. • For new buildings or additions, different built form standards apply depending on the precinct, and are controlled if they comply, whereas where buildings do not meet these standards in the Tertiary Education Zone, the activity status is restricted discretionary • Additional restricted discretionary standards apply within the Hospital Zone. • There are specific non-notification statements in both zones for certain activities. • The Plan's provisions are currently under review by the Council with a view to achieving alignment with the requirements of the NPS-UD with respect to parking standards in the Special Purpose Tertiary Education Zone.
Operative Palmerston North Plan 2018	Palmerston North City Council	<ul style="list-style-type: none"> • The following institutions are relevant: <i>Tertiary education facilities:</i> <ul style="list-style-type: none"> - Massey University Turitea Campus <i>Hospital facilities:</i> <ul style="list-style-type: none"> - Palmerston North Hospital • Institutions are catered for by way of a single special purpose Institutional Zone (albeit undifferentiated between hospitals and tertiary institutes). • City wide provisions also apply, depending on the nature of the proposal. • The Plan recognises, at a strategic level, the contribution of education and research institutions and seeks to support them, however, no similar strategic objective exists for health care facilities. • The Institutional Zone objective and policies seek to provide for future growth and complementary activities whilst minimising the adverse effects. • Institutional activities and 'associated' ancillary activities and community and leisure facilities and activities are a permitted activity provided that standards are met. • Activities that do not comply with the relevant standards are discretionary. • New buildings and additions are also permitted, subject to standards, and default to restricted discretionary activity status if they do not comply. • Unlisted activity default to non-complying activity status. • There are no activity-specific notification statements in the Institutional Zone.
Operative Hamilton City District Plan 2017	Hamilton City Council	<ul style="list-style-type: none"> • The following institutions are relevant: <i>Tertiary education facilities:</i> <ul style="list-style-type: none"> - University of Waikato <i>Hospital facilities:</i>

Plan	Local Authority	Description of approach
		<ul style="list-style-type: none"> - Waikato Hospital • Institutions are catered for by way of special purpose zones, namely the Knowledge and Major Facilities Zones, and precinct-level provisions also apply with respect to the university. • City-wide provisions may also apply, depending on the nature of a particular proposal. • Each zone includes distinct objective and policy directions, with the Knowledge Zone having a broader focus on development and expansion and the contribution of the positive benefits whilst managing the adverse effects, whereas the Major Facilities Zone has a narrow focus on the continued operation, providing a mix of activity while primarily focusing on the amenity values and public interface. • The Knowledge Zone provides for activities and buildings as permitted activities with the activity status defined at precinct level. • Where standards are not complied with, and not located in an 'interface area' the default activity status falls to controlled, otherwise it falls to restricted discretionary activity status. • In the Knowledge Zone, notification requirements are clearly set out. • In the Major Facilities Zone, no precinct applies and activity status is generally permitted. Buildings with an approved concept plan are also generally permitted, and where concept plans are not approved, restricted discretionary activity status is assumed. • No specific notification statements are included within the Major Facilities Zone.
Operative Tauranga City Plan 2013	Tauranga City Council	<ul style="list-style-type: none"> • The following institutions are relevant: <i>Tertiary education facilities:</i> <ul style="list-style-type: none"> - Toi-Ohomai Institution of Technology <i>Hospital facilities:</i> <ul style="list-style-type: none"> - Tauranga Hospital • These institutions are catered for by way of designations. • Due to the designations, the underlying zone provisions for both sites do not apply. • Although there is a zone for education centres within the plan, these only apply to those facilities not afforded the powers of designations.

Plan	Local Authority	Description of approach
<p>Proposed New Plymouth District Plan 2019</p> <p>(An assessment of the Operative New Plymouth District Plan 2005 was also carried out in the Issues and Options paper)³</p>	<p>New Plymouth District Plan</p>	<ul style="list-style-type: none"> • The following institutions are relevant: <ul style="list-style-type: none"> <i>Tertiary education facilities:</i> <ul style="list-style-type: none"> - Western Institution of Technology <i>Hospital facilities:</i> <ul style="list-style-type: none"> - Taranaki Base Hospital • The hospital is catered for by way of a special purpose zone, and also precinct-level provisions, whereas the polytechnic is subject to a medium density residential zone. • The Special Purpose – Hospital Zone objectives and policies recognise the regional importance of the hospital to the economic, health and social well-being of the district and includes a comprehensive policy direction on compatible and incompatible activities and external amenity considerations. • There is no explicit reference to Western Institution of Technology in Medium Density Residential Zone objectives and policies. • Within the Special Purpose – Hospital Zone, activities and building activities are generally permitted if they comply with standards and if not, they default to restricted discretionary activity status. General retail activities are provided for as discretionary activities. All other activities are classed as non-complying activities. • Within the Medium Density Residential Zone, ‘educational facilities’ are only permitted where all effects standards are compiled with, and the defaulting status is a restricted discretionary activity. • No specific notification statements apply in either zone.

These plans were selected because:

- They have been subject to relatively recent plan reviews that have addressed similar issues relating to this topic;
- The associated Councils are of a similar scale to Wellington City and are confronting similar issues relating to this topic.

A summary of the key findings follows:

- Some plans include strategic-level objectives that recognise the significance and value of tertiary and health care institutions.
- While most plans include institution-specific objectives and policies that cater for the development and operation of the institutions concerned and management of external

³ Institutional Precincts Zone: Issues and Options, dated March 2020, Appendix 2, page 23

amenity, only some plans go further in also focusing on internal amenity and/or integrated campus planning.

- In terms of broad spatial approaches, plans differ markedly in their catering for institutions (both between plans, as well as within the same plan), although there is a move toward institution specific zoning and, in some cases, additional precinct-level provisions, in second-generation plans.
- Some plans are easier to follow than others, in terms of the structure and complexity of activity tables and standards.
- Some plans provide for a broad range of activities and/or rely on broad definitions for institutional activities, whereas others are narrower in their provision and/or rely on references to 'ancillary' or 'associated' activities.
- With respect to coverage and relationship with other plan provisions, most institution-specific provisions in plans do not replicate city or district-wide provisions but may provide cross references to other potentially relevant sections.
- Most plans concern themselves, in part, with the maintenance of surrounding amenity, but most are silent in terms of internal (intra-site) amenity.
- Only some plans seek to control building design by automatically imposing a requirement for consent and, where they do, these requirements may be qualified by a new build's scale, proximity to external boundaries, or 'visibility'.
- No second-generation plans employ design guides to support institutional planning.
- Some plans provide future proofing for rationalisation or expansion (e.g., via alternative zonings).

5.2.3 Advice received from Taranaki Whānui and Ngāti Toa Rangātira

Under Clause 4A of Schedule 1 of the RMA local authorities are required to:

- Provide a copy of any draft policy statement or plan to any iwi authority previously consulted under clause 3 of Schedule 1 prior to notification;
- Allow adequate time and opportunity for those iwi authorities to consider the draft and to supply advice; and
- Have particular regard to any advice received before notifying the plan.

As an extension of this s32(4A) requires evaluation reports prepared in relation to a proposed plan to include a summary of:

- All advice received from iwi authorities concerning the proposal; and
- The response to that advice, including any proposed provisions intended to give effect to the advice.

The District Plan Review has included significant engagement with our mana whenua partners – Taranaki Whānui ki te Upoko o te Ika and Ngāti Toa Rangatira. This has included over 100 hui and wānanga attended by Council officers over the last 12 months. This has provided a much greater understanding of mana whenua values and aspirations as they relate to the PDP.

The PDP elevates the consideration of mana whenua values in resource management processes, including:

- A new Tangata Whenua chapter which provides context and clarity about who mana whenua are and what environmental outcomes they are seeking.
- A new Sites and Areas of Significance to Māori chapter that provides greater protection for sites and areas of significance than the current District Plan.
- Integrating mana whenua values across the remainder of the plan where relevant.

This is consistent with both the City Goal of ‘Partnership with mana whenua’ in the Spatial Plan; and the recently signed Tākai Here (2022), which is the new partnership agreement between the Council and our mana whenua partners, Rūnanga o Toa Rangatira, Taranaki Whānui ki Te Upoko o Te Ika and Te Rūnanganui o Te Āti Awa.

A full copy of the advice received is attached as an addendum to the complete suite of Section 32 reports as Addendum A – Advice received from Taranaki Whānui and Ngāti Toa Rangatira.

Taranaki Whānui and Ngāti Toa did provide written advice about inputs they wished to see in the Hospital Zone regarding the Wellington Regional Hospital site. The advice received and Council’s response to this advice is detailed in the table below.

Topic	Advice Received	Response
Greater emphasis on partnership with mana whenua within both the Hospital and Tertiary Education Zones sought.	August 2021	<ul style="list-style-type: none"> • Recognition and use of the sites te reo names within the Proposed Plan. • Recognition of partnership with mana whenua and their connections to the respective sites through: <ul style="list-style-type: none"> • Adding specific text to introduction of HOSZ and TERT. • Objective HOSZ-02 – Taranaki Whānui and Ngāti Toa Rangatira are acknowledged as the mana whenua of Te Whanganui ā Tara (Wellington) and their cultural associations to Wellington Regional Hospital Ngā Puna Wai ora, the manaaki that Wellington Regional Hospital Ngā Puna Wai Ora provides,

		<p>the land and the values of the network of awa are recognised in planning and developing Wellington Regional Hospital Ngā Puna Wai ora.</p> <ul style="list-style-type: none"> • Policy HOSZ-P3 Recognise and enable Taranaki Whānui and Ngāti Toa Rangatira cultural associations at Wellington Regional Hospital Ngā Puna Wai Ora by: <ul style="list-style-type: none"> ▪ Ensuring that use and development on the site recognises and has regard to the historical and contemporary relationship between mana whenua and this site, the land, network of awa and the manaaki that Ngā Puna Wai ora (Wellington Regional Hospital) activities provide; ▪ Managing new development adjoining scheduled sites of significance to Māori; and ▪ Collaborating on the design and incorporation of traditional cultural elements into public space on the site. • TEDZ-02 Taranaki Whānui and Ngāti Toa Rangatira are acknowledged as the mana whenua of Te Whanganui ā Tara (Wellington) and their cultural associations to these sites and the land are recognised in planning and developing the Tertiary Education Zone. • TEDZ-P3 Recognise and enable Taranaki Whānui and Ngāti Toa Rangatira cultural associations in the Tertiary Education Zone by: <ul style="list-style-type: none"> ▪ Ensuring that use and development in the Zone recognises and has regard to the historical and contemporary relationship between mana whenua and these sites and universities; ▪ Managing new development adjoining scheduled sites of significance to Māori; and ▪ Collaborating on the design and incorporation of traditional cultural elements into public space within the zone.
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		<ul style="list-style-type: none"> Further work is required by Council to work with Mana Whenua to understand their connections and values associated with the private hospitals (Bowen, Southern Cross and Wakefield).
Marae activities to be included as 'enabled activities' with the Tertiary Education Zone.		<ul style="list-style-type: none"> Marae activities and facilities are included as enabled activities within the definitions of 'Hospital Activities' and 'Tertiary Education Facility' and are permitted activities within the HOSZ and TEDZ chapters via TEDZ-R1 and HOSZ-R1. This recognises maraes as a critical function of both university campuses. Recognition of the Te Herenga Waka Marae at Victoria University's campus and Te Kuratini Marae at Massey's campus is given in the introduction to the Tertiary Education Zone. Acknowledgement of the Living Pā at Victoria University has also been made in the Tertiary Zone introduction. Council met with Victoria University's Deputy Vice-Chancellor (Maori) Prof Rawinia Higgins to understand more about the Living Pā.
Acknowledgement of mana whenua's connection to the Wellington Hospital site.		<ul style="list-style-type: none"> Within the Hospital Zone introduction, text has been included to acknowledge mana whenua's connection to the site. HOSZ-O2 and HOSZ-P3 recognise this connection to Ngā Puna Wai Ora Wellington Regional Hospital for Mana Whenua. Active engagement taken to understand Mana Whenua's connection with this site – both with Mana Whenua and Wellington Regional Hospital, and to translate this into the zone's introduction, HOSZ-O2 and HOSZ-P3.
Particular focus on the stream within the Wellington Hospital site.		<ul style="list-style-type: none"> This focus has been incorporated into the zone's introduction, HOSZ-O2 and HOSZ-P3.

No advice was received regarding the Tertiary Education Zone. Further work is needed by Council to understand Mana Whenua's connections with two university sites.

5.2.4 Consultation undertaken to date

The following is a summary of the primary consultation undertaken in respect of this topic:

Who	What	When	Relevant Issues Raised
Councillors and Council Steering Group	Draft Plan workshops	March and April 2021	<ul style="list-style-type: none"> Council officers briefed both an internal steering group and Councillors

Who	What	When	Relevant Issues Raised
			<p>regarding the Tertiary Education Zone and Hospital Zone.</p> <ul style="list-style-type: none"> Both groups were comfortable with proposed approaches and the alignment with the National Planning Standards structure. No key issues or concerns raised.
Technical Working Group	Group of planning and design professionals	April and May 2021	<ul style="list-style-type: none"> Council officers presented to a District Plan review technical working group. It was queried as to whether the private hospitals should be included in the Hospital Zone. No significant concerns were raised. Suggestions made regarding heights, height in relation to boundary, setback and landscaping standards. Suggestions made to streamline objectives and policies to reduce volume of these in each chapter. Approved of the approach to align the zone frameworks with National Planning Standards structure.
Landowners/Institutions: Massey University Te Herenga Waka, Victoria University of Wellington Capital and Coastal District Health Board Southern Cross Healthcare Ltd.	Engagement over the course of the District Plan review	2020-22	<ul style="list-style-type: none"> Continuous engagement has been undertaken with Massey University, Te Herenga Waka, Victoria University of Wellington and Capital and Coastal District Health Board (as the three original institutions) over the course of this district plan review. This has included engagement to inform the issues and options paper and Draft District Plan, engagement to discuss feedback on the Draft District Plan and discussions leading up to the Proposed District Plan notification. Feedback from the three institutions is included in Appendix 2 regarding their feedback on the Draft District Plan. Council met with a Southern Cross Healthcare Ltd representative in 2021 to discuss their Draft District Plan submission and the Hospital's desire to be included in the Hospital Zone. Southern Cross's submission and Vital Healthcare Ltd's (Bowen Hospital and Wakefield Hospital) submissions can be found in Appendix 2, where both all three private hospitals in Wellington seek to be included in the Hospital Zone.
Landowners/Institutions:	Feedback and discussions	Feedback period: 2	<ul style="list-style-type: none"> Seeking an increase permitted building GFA;

Who	What	When	Relevant Issues Raised
Massey University Te Herenga Waka, Victoria University of Wellington	on the Draft Tertiary Education Zone provisions	November to 14 December 2021	<ul style="list-style-type: none"> • Seeking adjustment of height plans; • Consider edge treatments within the overall site; • Clarify resilience requirements; • Redraft 'visible from a public space' requirement; and • Comfort with the National War Memorial provisions as no planned development.
Landowners/Institutions: - Capital and Coastal District Health Board - Vital Healthcare Property Trust (Bowen Hospital) - Southern Cross Healthcare Ltd.	Feedback on Hospital Zone	Feedback period: 2 November to 14 December 2021	<ul style="list-style-type: none"> • General support for the provisions; • Seek inclusion on 'Ewart Hospital' site; • Support for building height provisions, with some changes suggested; • Seek that 'residential accommodation' be included in the 'hospital activities' definition; • Concerns that the additions and alterations and construction rules assume a restricted discretionary activity status; • Request to retain controlled activity status with respect to the above and delete the requirement for consent if they 'visible from a public space'; • Concern regarding wind rules applying to building activity; and • Seek clear non-notification provisions.
Feedback on Draft Plan (Internal and external feedback)	Feedback on Draft Plan, through submissions and targeted discussions	Feedback period: 2 November to 14 December 2021	<p><i>Hospital Zone (two submissions received)</i></p> <ul style="list-style-type: none"> • General support for the Hospital Zone; • Requests to broaden the chapter introduction to reference additional hospital providers; • These that Strategic Objective SCA-03 also applies to hospitals; • General support for maximum height limits; • Requests for additional sites to be included in the zone in recognition of private hospital providers; • Request for the broadening of the 'hospital activities' definition to include residential accommodation for staff and healthcare consulting services; • Request for a new reverse sensitivity provision; • Request for refinement of the provision relating to mana whenua to refer to the site, rather than the entire zone; • Request for change of activity status for 'all other activities' from non-complying to discretionary; • Request for matters of discretion relating to urban design to refer to Centres and Mixed-Use Design Guide;

Who	What	When	Relevant Issues Raised
			<ul style="list-style-type: none"> • Request that the term 'not visible from public space' to be replaced by 'legal road'; • Request that the consent status for building additions and alterations to be controlled activity rather than restricted discretionary activity; • Request for the GLA threshold to be increased for permitted activities; and • Opposition to the some of the district-wide rules applying in this zone, such as wind and noise rules. <p><i>Tertiary Education Zone (seven submissions received)</i></p> <ul style="list-style-type: none"> • General support for 'educational facility' definition, with the addition of food, beverage and retail activities; • Suggested that the permitted building GFA be increased from 100m² to 10,000m²; • Amendments sought to the rule relating to additions and alterations to buildings and structures visible from public spaces. • Opposition to additions and alterations to buildings and structures being classed as a restricted discretionary activities and seek controlled activity status; • Support for building height control provisions and the height control diagram; • Suggested amendments to height in relation to boundary rule to limit more clearly the applications to only those boundaries that adjoin another zone; • Opposition to the wind rules applying to the zone; • Clarity sought regarding the wording of objectives and policies • Request for design guides to manage effects between sites and zones and to retain controlled activity status; • Request for student accommodation to be included within the tertiary precinct; and • Request for more emphasis on partnership with mana whenua.

A summary of specific feedback on this topic received during consultation on the Draft District Plan is contained in Appendix 2, including how it has been responded to in the PDP. Additional

detail concerning the wider consultation undertaken in preparing the PDP is contained in the companion Section 32 Evaluation Overview Report.

In summary, the key findings arising from the consultation undertaken on this topic, with reference to feedback on the draft plan provisions are:

- The inclusion of private hospital facilities within the Hospital Zone is appropriate as these facilities also comprise essential social infrastructure and are regionally significant.
- There is a consequential need to amend the introduction to the Hospital Zone to reflect the inclusion of private facilities.
- There is scope to review all provisions and include new provisions, where appropriate, to account for the inclusion of private hospitals.
- There is scope to reconsider the activity status for additions, alterations and construction of new buildings within the Hospital Zone.
- There is scope to amend the definitions of both 'hospital facilities' and 'educational facilities' to ensure ancillary activities are incorporated.
- There is scope to review the building height control provisions in general within both zones.
- There is scope to clarify Tertiary Education Zone policies and rules in relation to mana whenua consultation requirements.
- There is scope to add a new policy relating to the National War Memorial within the Tertiary Education Zone.

5.3 Summary of Relevant Resource Management Issues

Based on the research, analysis and consultation outlined above, including the findings of the Issues and Options Paper, the following issues have been identified:

Issue	Comment	Response
Issue 1: The strategic importance of the City's main tertiary education & health facilities is not well expressed.	<ul style="list-style-type: none"> • A review of resource consents undertaken for the Issues and Options Paper described the significance of the institution relevant to the respective proposals rather than the strategic importance for the city, with only one of ten decision reports reviewed substantively accounting for the institution's significance. • Hospital institutions have expressed a desire for more recognition to be given 	<ul style="list-style-type: none"> • Consideration for the objectives and policies ensuring the institutions' significance is acknowledged. • Policies and objectives should provide for the operation, maintenance and development of the institutions, subject to managing adverse environmental

Issue	Comment	Response
	<p>to their significance in policy development and decision-making terms.</p> <ul style="list-style-type: none"> Other district plans (e.g., for Auckland, Christchurch, Dunedin and Palmerston North) provide strategic support to key tertiary education and health facilities. 	<p>effects within the precincts and on adjoining areas.</p>
<p>Issue 2: Aspects of the regulatory approach for activities should be revisited.</p>	<ul style="list-style-type: none"> The consent review identified some vagaries with the operative Plan provisions, particularly the permitted activity requirement for activities to relate to the institutions only. Feedback from Council consent planners and institutions was that the regulatory approach to connectivity, parking and access should be more enabling. The desire of institutions for greater flexibility for activities that could be permitted in within the zones should be acknowledged. 	<p>Careful consideration of:</p> <ul style="list-style-type: none"> The need to accommodate the complexity of each site, and the extent to which sites may not be exclusively owned and/or occupied by the institution. The extent to which activities are considered 'primary', 'secondary', 'ancillary' or 'accessory' to the purpose of an institution. The extent to which activities are considered to be 'compatible', 'potentially compatible', or 'incompatible' with the purpose of an institution, internal amenity and/or the character and amenity of the surrounding environment. The level of certainty expected by surrounding occupiers, particularly if they involve sensitive uses (such as residential activity). The extent to which retailing and commercial activities, in particular, are supportive or undermining of a wider commercial or centres hierarchy. The need (or otherwise) to achieve commonality with, or distinction from related activity rules in other zones and areas.
<p>Issue 3: Aspects of the regulatory approach for buildings should be revisited.</p>	<ul style="list-style-type: none"> Address requirements that building additions, alterations and maintenance are the most common activities requiring consent and that the Plan's regulatory approach for managing these activities could be made less stringent. Review the application of design guides and their efficacy. Institutions signalled that building height controls were generally 	<p>Careful consideration as to whether:</p> <ul style="list-style-type: none"> The existing controlled / discretionary rule structure could be replaced by a new cascade based arrangement for built form standards. Use of design and appearance control/discretion matters can be reserved for only new larger buildings and additions which are

Issue	Comment	Response
	<p>suitable, though there were some site specific exceptions.</p> <ul style="list-style-type: none"> • There are a variety of approaches adopted in other district plans for new buildings and also additions and alterations, with the focus of other councils only on new buildings and additions to buildings (and not alterations), utilising a combination of activities status and control mechanisms. 	<p>visually prominent beyond the precinct.</p> <ul style="list-style-type: none"> • Overall area thresholds for additions (in m²) can be adopted and triggers based on increased percentage of existing floor area can be avoided.
<p>Issue 4: The approach to notification statements in the zone(s) and City-wide provisions should be revisited.</p>	<ul style="list-style-type: none"> • All applications under the operative provisions were processed without recourse to notification, either due to statements in the zone provisions precluding notification, or because the Council consent planner had exercised their discretion. • There is an opportunity to provide greater legibility in the wording of notification statements. • Some district plans (e.g., those for Hamilton, Auckland, Dunedin and Christchurch) include statements that potentially preclude notification of applications for specific activities, although these vary in terms of their degree of specificity. 	<ul style="list-style-type: none"> • The need for definitive phrasing for (non) notification statements should be employed, that provide no room for interpretation. • The consent status afforded to activities needs to be carefully considered. • Non-notification statements for controlled activities should be liberally employed to reflect the current thrust of the RMA. • The use of notification statements should be actively considered where restricted discretionary activities are concerned. • Circumstances where limited notification may be employed should be identified.
<p>Issue 5: Structure and language can be simplified, made more certain and made more helpful to decision-makers.</p>	<ul style="list-style-type: none"> • A review of applications found that the policy, rule and standard expression appears to be generally fit-for-purpose. • However, there is room for improvement, particularly with respect to the wording of rules relating to carparking, measurement of height, and the meaning of 'ancillary' activities. • The structure of the activity tables and standards can be difficult to determine compliance and consent status, and operative zone policy is not necessarily an aid to decision-making. • Other district plans sit on a spectrum in terms of the complexity of their institution-specific provisions. 	<p>Careful consideration of:</p> <ul style="list-style-type: none"> • The manner in which height limits are specified, located as they are in design 'guides' and with reference to unclear site plans. • The focus on defining building height by the number of stories, rather than more direct and certain references to height above ground. • The uncertain drafting of the standard for vehicle parking. • The use of 'ancillary' in describing the status of some activities, when this term remains undefined.

Issue	Comment	Response
<p>Issue 6: The provisions should be adaptable to changing demands the institutions need to respond to.</p>	<ul style="list-style-type: none"> • The consent review found that almost all applications were for activities located within the operative zone with one exception, relating to the development of a Victoria University study space in the Inner Residential Zone. • Feedback from the institutions indicates they are primarily interested in making the best use of their existing landholdings. • Victoria University is looking at expanding provision for student accommodation and early childhood centres, both within and outside the zone. • Massey University is planning a series of new building projects and may also look at leasing off-campus properties in future. • Institutions may look to further rationalise their holdings. • Other district plans expressly cater for alternative uses of sites (e.g., by way of substitute zoning) where rationalisation or relocation is a prospect, with most plans focusing on site-specific provisions for major campuses. 	<p>Careful consideration of:</p> <ul style="list-style-type: none"> • Campus boundaries in consultation with institutions. • The interests of each institution beyond the 'special purpose zoning'. • How broader, more generic zoning may cater for the institution's interests. • How the strategic policy relating to the institutions is further reinforced and how additional guidance could be provided to applicants, Council planners and the public, where off-campus developments are concerned. • How concept planning mechanisms can be incentivised through the consent status afforded to some activities. • How the creation of 'substitute' zoning provisions might apply in the event that institutions seek to partly or entirely vacate campuses. • In such cases, a surrounding or adjacent zone may represent the most appropriate substitute.
<p>Issue 7: The Hospital Zone should recognise and provide for the strategic importance of private hospital facilities as regionally significant infrastructure.</p>	<ul style="list-style-type: none"> • Southern Cross Hospital and Bowen Hospital both request that their sites be included within the Hospital Zone. 	<p>Careful consideration to:</p> <ul style="list-style-type: none"> • The extent of the Hospital Zone and whether it should include private hospital sites. • Whether the provisions should differentiate between the public and private hospitals in terms of activity status. • How the provisions provide for site specific matters given their differing surrounding locations/interfaces. • Whether the notification status requirements should differ between public and private hospitals.

6.0 Evaluation of the Proposal

This section of the report evaluates the objectives of the proposal to determine whether they are the most appropriate means to achieve the purpose of the RMA, as well as the associated policies, rules and standards relative to these objectives. It also assesses the level of detail required for the purposes of this evaluation, including the nature and extent to which the benefits and costs of the proposal have been quantified.

6.1 Scale and Significance

Section 32(1)(c) of the RMA requires that this report contain a level of detail that corresponds with the scale and significance of the environmental, economic, social and cultural effects that are anticipated from the implementation of the proposal.

The level of detail undertaken for this evaluation has been determined by assessing the scale and significance of the environmental, economic, social and cultural effects anticipated through introducing and implementing the proposed provisions (i.e., objectives, policies and rules) relative to a series of key criteria.

Based on this the scale and significance of anticipated effects associated with this proposal are identified below:

Criteria	Scale/Significance			Comment
	Low	Medium	High	
Basis for change		✓		<ul style="list-style-type: none"> Statutory obligation to address implications and obligations of National Planning Standards, NPS-UD and recent RMA amendments.
Addresses a resource management issue		✓		<ul style="list-style-type: none"> The intention (in part) is to provide additional clarity for the (non) notification to support the processes under sections 95A to 95G and of the RMA.
Degree of shift from the <i>status quo</i>	✓			<ul style="list-style-type: none"> Changes to existing operative plan zones are largely cosmetic to address the requirements of National Planning Standards, and primarily splitting the Institutional Precinct Zone into two special purpose zones. Changes to recognise and provide for the strategic importance of the hospitals and tertiary education represent a relatively minor directional shift from the <i>status quo</i>. Changes involving the inclusion of private hospitals within the Hospital Zone represents a more significant shift from the <i>status quo</i>.
Who and how many will be affected/ geographical scale of effect/s	✓			<ul style="list-style-type: none"> Owners and occupiers of properties surrounding the private hospital sites incorporated into the Hospital Zone may be affected due to the increase in permitted baseline development when compared to the operative Outer Residential Zone

Criteria	Scale/Significance			Comment
	Low	Medium	High	
				<p>(Bowen Hospital site) and Inner Residential Zone (Southern Cross and Wakefield Hospitals sites). However, the number of such parties relative to the City has a whole is limited.</p> <ul style="list-style-type: none"> Property owners/operators within the Hospital and Tertiary Education zones will have greater certainty of development opportunities associated with their institutions.
Degree of impact on or interest from iwi/ Māori		✓		<ul style="list-style-type: none"> Specific advice has been received from Taranaki Whānui and Ngāti Toa Rangatira regarding their connection to Wellington Regional Hospital and the need to reflect their connection to the site, as well as the site's natural history and stream network context (see section 4.2.3). Objectives HOSZ-O2 and TEDZ-O2 and policies HOSZ-P3 and TEDZ-P3 have incorporated this feedback and these have been designed to acknowledge Taranaki Whānui and Ngāti Toa Rangatira as the mana whenua of Te Whanganui ā Tara (Wellington). They recognise and acknowledge their cultural associations and affiliations with the two university sites and Wellington Regional Hospital. This is a more developed and specified approach than in the Operative District Plan, which does have existing policies.
Timing and duration of effect/s			✓	<ul style="list-style-type: none"> Changes effected by the proposed provisions will be experienced over the longer term (i.e., the operative life of the PDP).
Type of effect/s		✓		<ul style="list-style-type: none"> The recognition of the strategic importance of the hospital and tertiary education facilities better provides for their future needs, which will have a positive benefit for the wider community's health, economic and social wellbeing. The likelihood of increased development taking place is moderate, given the growing need for further hospital facilities, although to a lesser extent for tertiary education facilities given increasing technologies and distance learning opportunities possibly

Criteria	Scale/Significance			Comment
	Low	Medium	High	
				reducing the need for increased physical development.
Degree of risk and uncertainty	✓			<ul style="list-style-type: none"> • There is a low risk of adverse community reaction to the proposed provisions given the long-established nature of these facilities, with the possible exception with respect to the owners and occupiers of properties surrounding private hospital sites. • The degree of uncertainty associated with proceeding is low given the comprehensiveness of the information base and the fact that overall level of change is not a significant change from the <i>status quo</i>.

Overall, the scale and significance of the proposed provisions are considered to be low to moderate for the following reasons:

- The proposed provisions represent the refinement of a well-established framework to better provide for the needs of the hospital and tertiary education facilities, consequential separate zoning for each and attendant activity and building-based rules and standards, and some changes to address workability issues, to the benefit of resource users and the environment.
- Other changes to operative provisions represented by the proposal will provide more certainty for institutions given a greater direction for permitted activities and building development – as directed by national planning instruments.

Consequently, a high-level evaluation of these provisions has been identified as appropriate for the purposes of this report.

6.2 Quantification of Benefits and Costs

Section 32(2)(b) requires that, where practicable, the benefits and costs of a proposal are to be quantified.

Based on the assessment of the scale and significance of the proposed provisions in section 6.1, specific quantification of the benefits and costs in this report is considered neither necessary, beneficial nor practicable in relation to this topic for the following reasons:

- The identified provisions would not result in a more restrictive regime than the *status quo*;
- Some proposed provisions that are intended to provide greater development certainty or a more relaxed consenting pathway to respond to evidence demonstrating that relevant aspects of the *status quo* are resulting in unnecessary consenting requirements;
- Overall, the proposal would not result in a significant loss of development opportunity / potential above the *status quo*;

- The proposal does see a slightly more permissive regime, however, not in a manner that could result in significant adverse effects on s6 matters; and
- There is a reasonable level of certainty around the effects of those aspects of the proposal that would introduce additional, more onerous controls.

Instead, this report identifies more generally where any additional costs or cost may lie.

7.0 Zone Framework

Based on the issues analysis in section 5.3 of this report and the National Planning Standard zone options set out in section 4.4.5 the following zone framework has been selected in relation to this topic:

Zone	Reason/s
Special Purpose – Hospital Zone	<ul style="list-style-type: none"> • Close match in terms of the role and purpose of the ‘Institutional Precinct Zone’ but provides specifically for hospitals • This zone is applied to: <ul style="list-style-type: none"> - Wellington Regional Hospital Ngā Puna Wai Ora - Southern Cross Hospital - Wakefield Hospital - Bowen hospital
Special Purpose – Tertiary Education Zone	<ul style="list-style-type: none"> • Close match in terms of the role and purpose of the ‘Institutional Precinct Zone’ but provides specifically for Tertiary Education Facilities • This zone is applied to: <ul style="list-style-type: none"> - Victoria University’s Kelburn campus - Massey University’s Mount Cook campus

At the Draft District Plan stage, it is noted that the Special Purpose Hospital Zone only included Wellington Regional Hospital | Ngā Puna Wai Ora. The Southern Cross Hospital, Wakefield Hospital and Bowen Hospital have since been added as a response to feedback received from these institutions and the recognition of their strategic importance to health care.

The Victoria University’s Architecture School and Pipitea Campus were not included in the Tertiary Education Zone as the City Centre Zone, in which they are located, is considered appropriate given its broadly accommodating nature.

8.0 Overview of Proposal

The proposed provisions relevant to this topic are set out in detail in the ePlan version of the PDP and should be referenced to in conjunction with this evaluation report.

In summary, the proposed provisions include:

- Definitions
 - A set of relevant definitions, including:
 - Hospital Zone*
 - Hospital activities
 - Health care facility

Tertiary Education Zone

- Educational Facility
- Tertiary Education Facility
- Student Accommodation

- Objectives:

- *Hospital Zone*

- Four objectives that address the zone's purpose, acknowledge mana whenua, provide for the evolving demands, services and technological changes associated with health care facilities and seek to manage adverse effects

- *Tertiary Education Zone*

- Four objectives that address the zone's purpose, acknowledge mana whenua, address amenity and design considerations and seek to manage adverse effects

- Policies:

- *Hospital Zone*

- Five policies that seek to enable hospital activities, only allow compatible activities, recognise and enable cultural associations, require high quality urban form and development and encourage resilience for sustainability and natural hazards.

- *Tertiary Education Zone*

- Eight policies that seek to enable appropriate primary and ancillary activities, only allow compatible activities, recognise and enable cultural associations, provide for future and changing needs of the tertiary education sector, provide for a sense of place, require quality design and amenity outcomes, encourage resilience for sustainability and natural hazards and recognise the function of the National War Museum within Massey University Campus.

- A rule framework that manages land use and building and structure activities as follows:

Hospital Zone		
Rule ref.	Activity	Consent Status
Land Use Activities		
HOSZ-R1	Hospital activities	Permitted
HOSZ-R2	All other activities	Discretionary
Building and structure activities		
HOSZ-R3	Maintenance and repair of buildings and structures	Permitted
HOSZ-R4	Demolition or removal of buildings and structures	Permitted
HOSZ-R5	Additions and alterations to buildings and structures	Permitted if compliant, if not, controlled for Wellington Regional Hospital (precluded from public or limited notification if application is in respect of rule HOSZ-R5.2).
		Permitted if compliant, if not, restricted discretionary for Southern Cross Wellington Hospital, Bowen Hospital and Wakefield Hospital sites. (precluded from public or limited notification if application is in respect of rule HOSZ-R5.3).
HOSZ-R6	Construction of new buildings and structures	Permitted if compliant, if not, controlled for Wellington Hospital. (precluded from public or limited notification if application is in respect of rule HOSZ-R6.2).
		Permitted if compliant, if not, restricted discretionary for Southern Cross Wellington Hospital, Bowen Hospital and Wakefield Hospital sites. (precluded from public or limited notification if application is in respect of rule HOSZ-R6.3).
HOSZ-R7	Outdoor storage areas	Permitted if compliant, if not, restricted discretionary. (precluded from public or limited notification if application is in respect of rule HOSZ-R7.2)

Tertiary Education Zone		
Rule ref.	Activity	Consent Status
Land Use Activities		
TEDZ-R1 and TEDZ-R2	Tertiary education facility and Activities relating to the function of the National War Memorial including ceremonial activities	Permitted if compliant with requirements, restricted discretionary activity if not.
TEDZ-R3	All other activities	Restricted Discretionary
Building and structure activities		
TEDZ-R4	Maintenance and repair of buildings and structures	Permitted
TEDZ-R5	Demolition or removal of buildings and structures	Permitted if compliant, controlled if not.
TEDZ-R6	Additions and alterations to buildings and structures	Permitted if compliant, if not, restricted discretionary (precluded from public or limited notification).
TEDZ-R7	Construction of new buildings and structures	Permitted if compliant, if not, restricted discretionary.
TEDZ-R8	Outdoor storage areas	Permitted if compliant, if not, restricted discretionary (precluded from public or limited notification).

In addition to the rules above, there are a complementary sets of effects standards that address:

- Maximum height of buildings and structures – HOSZ-S1/TEDZ-S1
- Height in relation to boundary - HOSZ-S2/TEDZ-S2
- Building setbacks - TEDZ-S3
- Building coverage in relation to 320 The Terrace - TEDZ-S4

There are also a number of other objectives in the PDP that inform the provisions in the Hospital and Tertiary Education Zones. In summary, these objectives include:

- The Strategic Objectives referred to in section 3.0 of this report;
- NH-O1, recognising the risks from natural hazards, particularly the policies NH-P4-NP-P8 in relation to ‘hazard sensitive activities’ which include educational facilities and hospitals;
- HH-O1, recognising the historic heritage, HH-O2 relating to the protection of historic heritage and, HH-O3 recognising the need for sustainable long-term use, particularly HH-P10 the avoidance of demolition of heritage buildings;

- SASM-O1, SASM-O2, SASM-O3 which relate to the purpose, protection and kaitiakitanga of sites and areas of significance to Māori, which there are number of sites within both zones;
- EW-O1 addressing the management of earthworks, particularly EW-R1 in relation to earthworks within sites and areas of significance to Māori;
- NOISE-O2 relating to the protection of noise generating activities from reverse sensitivity effects and, particularly, NOISE-P3 requiring sound insulation for new sensitive activities in the Hospital and Tertiary Education zones; and
- WTBZ-O2 relating to managing the effects of the Hospital activities given the Wellington Regional Hospital has an interface with the Wellington Town Belt Zone, particularly WTBZ-P2, which allows for activities that a compatible with the values of the zone.

9.0 Evaluation of Proposed Objectives

9.1 Introduction

Section 32(1)(a) of the RMA requires that the evaluation report examine the extent to which the objectives of the proposal are the most appropriate way to promote the sustainable management of natural and physical resources.

An examination of the proposed objectives along with reasonable alternatives is included below, with the relative extent of their appropriateness based on an assessment against the following criteria:

1. Relevance (i.e., Is the objective related to addressing resource management issues and will it achieve one or more aspects of the purpose and principles of the RMA?)
2. Usefulness (i.e., Will the objective guide decision-making? Does it meet sound principles for writing objectives (i.e., does it clearly state the anticipated outcome?)
3. Reasonableness (i.e., What is the extent of the regulatory impact imposed on individuals, businesses or the wider community? Is it consistent with identified tangata whenua and community outcomes?)
4. Achievability (i.e. Can the objective be achieved with tools and resources available, or likely to be available, to the Council?)

9.2 Evaluation of Objectives

While not specifically required under s32, it is appropriate to also consider alternative objectives to those currently included in the PDP, so as to ensure that the proposed objective(s) are the most appropriate to achieve the purpose of the RMA.

For the purposes of this evaluation, the Council has considered two potential objectives:

1. The proposed objectives relating to the Hospital and Tertiary Education zones⁴
2. The current most relevant objective - the *status quo*

⁴ HOSZ-O1 to O4 and TEDZ-O1 to O4

Proposed Objectives HOSZ-01 to HOSZ-04 and TEDZ-01 to TEDZ-04

Four objectives that address the purpose of each zone, acknowledge the mana whenua of Te Whanganui ā Tara, provide for the evolving demands, services and technological changes associated with health care facilities and seek to manage adverse effects

General intent:

Status quo:

Nine objectives for the Institutional Precinct Zone which:

- promote efficient use and development (8.2.1)
- maintain and enhance amenity values (8.2.2)
- maintain and enhance physical character of adjacent streets (8.2.3)
- avoid, remedy and mitigate adverse effects of new subdivision (8.2.4)
- avoid, remedy and mitigate adverse of natural and technological hazards (8.2.5)
- manage effects of hazardous substances (8.2.6)
- enable efficient access (8.2.7)
- promote safe and healthy development (8.2.8)
- facilitate the exercise of tino rangatiratanga and kaitiakitanga (8.2.9)

Relevance:	Preferred objective	<i>Status quo</i>
Addresses a relevant resource management issue	Seek to provide for hospitals and tertiary education facilities as a 'physical resource' as well as 'avoiding, remedying or mitigating any adverse effects' in accordance with Part 2 obligations.	Seek to manage Institutional Precincts as a 'physical resource' as well as managing adverse effects on a broader level in accordance with Part 2 obligations.
Assists the Council to undertake its functions under s31 RMA	Provides objectives that articulate s31(1)(a) and (b) responsibilities with respect to integrated management, and managing effects in respect to hospitals and educational facilities in so far as they are businesses as well as strategic infrastructure.	Provides objectives that reasonably articulate and encapsulate the Council's s31(1)(a) and (b) responsibilities.
Gives effect to higher level documents	Assists the Council in giving effect to the National Planning Standards by aligning with the mandatory zoning framework. Gives effect to the RPS (Objective 10) in recognising and protecting regionally significant infrastructure.	Assists the Council in giving effect to the RPS in an indirect manner. The operative provisions do not align with the National Planning Standards.

Proposed Objectives HOSZ-01 to HOSZ-04 and TEDZ-01 to TEDZ-04		
Four objectives that address the purpose of each zone, acknowledge the mana whenua of Te Whanganui ā Tara, provide for the evolving demands, services and technological changes associated with health care facilities and seek to manage adverse effects		
<i>Usefulness:</i>		
Guides decision-making	Establishes a clear set of outcomes sought the Hospital and Tertiary Education zones.	Establishes a set of outcomes for the Institutional Precinct but does not distinguish between the two different types of institutions, which have different effects and needs. In addition, there is duplication of district-wide considerations, which would better sit at an overarching level.
Meets best practice for objectives	The objectives are specific and state what is to be achieved. They are framed as clear outcome statements, consistent with best practice.	The objectives are not specific and do not distinguish between the hospital and tertiary education activities/facilities in terms of what is to be achieved. They are framed as policies rather than outcome-based objectives.
<i>Reasonableness:</i>		
Will not impose unjustifiably high costs on the community/parts of the community	Should not impose unjustifiably high costs on property owners and developers. In some circumstances it should reduce costs as there are clearer consent paths and non-notification requirements for specific rules.	Has not imposed unjustifiably high costs on property owners and developers.
Acceptable level of uncertainty and risk	The objectives are specific, state what is to be achieved and are founded on a comprehensive information base, thereby minimising uncertainty and risk.	The objectives lack specific outcomes and are founded on outdated information base (not inclusive for instance of private hospital facilities), thereby increasing the level of uncertainty and risk associated with their retention.
<i>Achievability:</i>		
Consistent with identified tangata whenua and community outcomes	The objectives specifically acknowledge mana whenua and their cultural associations with Wellington Regional Hospital Ngā Puna Wai ora and sites within the Tertiary Education Zone, as well as reflecting the general aspirations of the public and stakeholders and tangata whenua.	The intent to support well-functioning Institutional Precincts and reflects the aspirations of the general public, stakeholders, tangata whenua.

<p>Proposed Objectives HOSZ-01 to HOSZ-04 and TEDZ-01 to TEDZ-04 Four objectives that address the purpose of each zone, acknowledge the mana whenua of Te Whanganui ā Tara, provide for the evolving demands, services and technological changes associated with health care facilities and seek to manage adverse effects</p>		
<p>Realistically able to be achieved within the Council's powers, skills and resources</p>	<p>The objectives can be achieved through ongoing management of consent processes, non-regulatory methods and monitoring of plan and consent outcomes and the state of the environment. Council has the relevant expertise in these respects.</p>	<p>The objectives can be achieved through ongoing management of consent processes, non-regulatory methods and monitoring of plan and consent outcomes and the state of the environment. Council has the relevant expertise in these respects.</p>
<p>Summary</p> <p>The above analysis suggests that the proposed objectives best align with the RPS and the National Planning Standards. By contrast, the <i>status quo</i> does not align with the National Planning Standards, which it predates.</p>		

10.0 Evaluation of Reasonably Practicable Options and Associated Provisions

10.1 Introduction

Under s32(1)(b) of the RMA, reasonably practicable options to achieve the objectives associated with this proposal need to be identified and examined. This section of the report evaluates the proposed policies and rules, as they relate to the associated objectives.

Along with the proposed provisions, the Council has also identified through the research, consultation, information gathering and analysis undertaken in relation to this topic to achieve the objectives.

The technical and consultation input used to inform this process is outlined in section 5 of this report.

10.2 Evaluation method

For each potential approach an evaluation has been undertaken relating to the costs, benefits and the certainty and sufficiency of information (as informed by section 5 of this report) in order to determine the effectiveness and efficiency of the approach, and whether it is the most appropriate way to achieve the relevant objectives.

This evaluation is contained in the following sections.

10.3 Provisions to achieve Objectives HOSZ-01 to HOSZ-04 and TEDZ-01 to TEDZ-04

For the purpose of this evaluation, the Council has considered the following potential options:

1. The proposed provisions
2. The *status quo*
3. A reasonable alternative involving a more permissive approach to providing for new buildings, alterations and additions within institutional sites that are not visible from a public space.

Proposed Objectives HOSZ-01 to HOSZ-04 and TEDZ-01 to TEDZ-04

Four objectives that address the purpose of each zone, acknowledge mana whenua of Te Whanganui ā Tara, provide for the evolving demands, services and technological changes associated with health care facilities and seek to manage adverse effects

Option 1: Proposed approach (recommended)	Costs	Benefits	Risk of Acting / Not Acting if there is uncertain or insufficient information about the subject matter of the provisions
<p>Policies:</p> <p>Five policies (HOSZ-P1 to P5) for the Hospital Zone and eight policies (TEDZ-P1 to P8), that seek to enable, manage or restrict activities commensurate with the zones' purpose, provide for future needs, create a sense of place, achieve good quality design and amenity outcomes, encourage resilience and recognise the National War Museum (Tertiary Education Zone).</p> <p>Rules:</p> <p>Rules that provide for activities compatible with the zones' purpose as permitted activities, which default to DA status for the HOSZ zone or RDA for the TEDZ zone.</p> <p>Maintenance and repair of buildings and structures are permitted activities for both zones.</p> <p>Demolition of buildings are permitted in both zones but only default to controlled in the TEDZ zone.</p> <p>Outdoor storage is permitted in both zones, defaulting to RDA.</p> <p>New buildings and structures are permitted activities subject to constraints on size (100m²) and they not being visible from public spaces. They are otherwise controlled activities on the Wellington Regional Hospital site, and restricted discretionary activities on</p>	<p>Environmental</p> <p>Direct costs: No direct environmental costs have been identified.</p> <p>Indirect costs: No indirect environmental costs have been identified.</p> <p>Economic</p> <p>Direct costs: Hospital and tertiary education facilities bear the costs of applying for and obtaining resource consent for activities not deemed to be permitted, including those building activities not visible from a public space. .</p> <p>Indirect costs: No indirect economic costs.</p> <p>Social</p> <p>No direct or indirect social costs have been identified.</p> <p>Cultural</p> <p>Direct costs: No direct cultural costs have been identified.</p> <p>Indirect costs: Mana whenua may face the costs of active engagement on consent applications.</p>	<p>Environmental</p> <p>Direct benefits: The Hospital and Tertiary Education Zones seek to ensure that potentially adverse effects both within sites and on surrounding sites, in terms of design and amenity outcomes, are addressed. This will be of benefit to both users of the facilities concerned (staff, students and patients) as well as neighbouring residents.</p> <p>Indirect benefits: No indirect environmental benefits have been identified.</p> <p>Economic</p> <p>Direct benefits: The provisions for each zone use a common, easy-to-follow structure that will be of benefit to plan users.</p> <p>The provisions relating to the HOSZ and TEDZ zones introduce provisions that are site-specific in nature that plan users will find relatively easy to work with. With respect to private hospitals, they will also provide for a greater level of permitted activities and buildings/structures that will allow greater certainty for the landowners and operators concerned. Ancillary and complimentary activities may be more enabled where any adverse or reverse sensitivity effects can be managed.</p> <p>Indirect benefits: No indirect economic benefits (e.g., on economic growth or employment) have been identified.</p> <p>Social</p> <p>No direct or indirect social benefits have been identified.</p> <p>Cultural</p> <p>Both the HOSZ and TEDZ zones have specific objectives and policies which acknowledge the cultural associations within the zones, potentially resulting in a greater degree of culturally sensitive development. In addition, Sites and Areas of Significance to Māori are identified, which will provide further protection of these site and areas.</p>	<p>It is considered that there is certain and sufficient information on which to base the proposed policies and methods as:</p> <ul style="list-style-type: none"> • the evidence base for acting is comprehensive; and • overall, the risk of not acting is considered to be greater than the risk of acting.

Proposed Objectives HOSZ-01 to HOSZ-04 and TEDZ-01 to TEDZ-04			
Four objectives that address the purpose of each zone, acknowledge mana whenua of Te Whanganui ā Tara, provide for the evolving demands, services and technological changes associated with health care facilities and seek to manage adverse effects			
private hospital sites or sites in the TEDZ Zone. Other Methods: For both zones there are a suite of standards relating to building development, such a maximum building height, height to boundary and building setbacks. The Centres and Mixed-Use Design Guide is employed as a matter a control (HOSZ zone) and a matter of discretion in both zones in relation to the construction of new buildings and structures.			
Effectiveness and efficiency	Effectiveness The proposal effectively implements the focus of the objectives on providing for the efficient and effective operation of regionally and nationally significant health and education facilities, whilst acknowledging the site associations of mana whenua and seeking to manage adverse effects at the interface with surrounding zones.		Efficiency In establishing a common, easy-to-follow structure for plan users, on the basis on an appropriate selection of zoning types mandated by the National Planning Standards, the proposal represents an efficient approach to structuring provisions. Conversely, wider, common cross-plan considerations relating to the historical and cultural values, natural hazards, sites and areas of significance to Māori, noise, transport and tangata whenua are efficiently hosted in district-wide plan chapters to reduce the level of duplication. The cross-references to Design Guides for the Centres and Mixed-Use Zones as matters of control or discretion represents an efficient use of 'other methods'.
Overall evaluation	This approach is considered to be most appropriate as it focuses on the resource management matters particular to hospital and tertiary education activities and establishes appropriate policy and consent settings and provides a common, easy-to-follow platform on that basis.		
Option 2: Status Quo	Costs	Benefits	Risk of Acting / Not Acting if there is uncertain or insufficient information about the subject matter of the provisions
Policies: Twenty-four policies for the single Institutional Precinct Zone that seek to implement the relevant objectives by providing for the primary function of the Wellington Hospital and the two universities, in addition to encouraging renewable energy, avoiding adverse effects on adjoining residential areas, promoting safety and	Environmental Direct costs: No direct environmental costs have been identified. Indirect costs: No indirect environmental costs have been identified. Economic Direct costs: The operative provisions do not provide for or recognise the regional significance of private hospital facilities, which are located on land that is currently zoned residential. Given there is increased pressure for residential development these facilities could be forced to relocate to	Environmental Direct benefits: The operative provisions activity status cascade enables effects and risks to be addressed. Indirect benefits: No indirect environmental benefits have been identified. Economic Direct benefits: Retention of the operative provisions would minimise initial uncertainty and any costs of comprehending change for property owners, developers, community and Council.	The risk of not acting is moderate, as the current provisions create unnecessary consenting barriers for future development, particularly for the private hospital facilities that are located within residential zones, which do not recognise, protect or provide for these facilities as a regionally significant health infrastructure.

Proposed Objectives HOSZ-01 to HOSZ-04 and TEDZ-01 to TEDZ-04
 Four objectives that address the purpose of each zone, acknowledge mana whenua of Te Whanganui ā Tara, provide for the evolving demands, services and technological changes associated with health care facilities and seek to manage adverse effects

<p>security, controlling the design and addressing access, natural and technological hazards and tangata whenua considerations.</p> <p>Rules:</p> <p>Rules that provide for activities compatible with the zones' purpose as permitted activities with defaults to either RDA or DA status. Activities that contravene the RDA or DA are NCA.</p> <p>There are a suite of standards associated with the rules, such as noise limits, vehicle parking standards, site access and building standards.</p> <p>Other Methods:</p> <p>There are also four design guides in relation to t design, external appearing, siting and provision of verandas:</p> <ul style="list-style-type: none"> • Victoria University Design Guide • Wellington Hospital Design Guide • Mount Cook Precinct Design Guide. • Te Aru Corridor Design Guide 	<p>less accessible locations if they are not identified and protected in their current locations. Therefore, this may contribute to higher development costs if the activity status threshold creating a more difficult consenting pathway.</p> <p>The operative provisions are difficult to follow for those plan users unfamiliar with them.</p> <p>Indirect costs: No indirect economic costs have been identified.</p> <p>Social</p> <p>Direct costs: The operative provisions have proved a less than ideal means of providing for the needs of providers of regionally significant health care infrastructure. This may have inhibited development potential and in turn, limited services to the public.</p> <p>Indirect costs: No indirect social costs have been identified.</p> <p>Cultural</p> <p>No direct or indirect cultural costs have been identified.</p>	<p>Indirect benefits: No indirect economic benefits have been identified.</p> <p>Social</p> <p>Direct benefits: Regular plan users have a degree of familiarity with the operative provisions.</p> <p>Indirect benefits: No indirect social benefits have been identified.</p> <p>Cultural</p> <p>Direct benefits: The operative provisions recognise and enable tangata whenua to exercise tino rangatiratanga and kaitiakitanga.</p> <p>Indirect benefits: No indirect cultural benefits have been identified.</p>	
<p>Effectiveness and efficiency</p>	<p>Effectiveness</p> <p>The <i>status quo</i> is not considered to be an entirely effective method of achieving the intent of the proposed objectives as they do not provide for all regionally significant hospital facilities. Further, site-specific aspects are not adequately managed by a single overarching zoning for the two distinctive types of institution (i.e., hospitals and universities).</p>		<p>Efficiency</p> <p>The <i>status quo</i> represents some efficiencies in the sense that it is familiar to regular plan users, however, it is hard to follow for new entrants and addresses matters best dealt with in district-wide chapters.</p>
<p>Overall evaluation</p>	<p>The <i>status quo</i> is no longer considered appropriate as it does not adequately provide for all regionally signification hospital facilities, does not adequately provide for site-specific matters, is hard-to-follow and does not align with the structural requirements of the National Planning Standards.</p>		

Proposed Objectives HOSZ-01 to HOSZ-04 and TEDZ-01 to TEDZ-04

Four objectives that address the purpose of each zone, acknowledge mana whenua of Te Whanganui ā Tara, provide for the evolving demands, services and technological changes associated with health care facilities and seek to manage adverse effects

Option 3: Alternative approach to provisions	Costs	Benefits	Risk of Acting / Not Acting if there is uncertain or insufficient information about the subject matter of the provisions
<p>Involving a more permissive approach to providing for new buildings, alterations and additions within sites that are not visible from a public space, i.e., remove the permitted activity requirement for additions and alterations to 'not [be] visible from a public space', or change this requirement to a more limited line of sight requirement, e.g. 'not visible from an adjoining legal formed road'. This approach is based on an assumption that the operators of such institutions and sites are best placed to value and provide for an appropriate level of internal amenity themselves.</p>	<p>Environmental</p> <p>Direct costs: A more permissive consenting path for new buildings, additions and alterations which are not visible from a public spaces or public roads may mean a reduction in 'internal' amenity within sites.</p> <p>Indirect costs: No indirect environmental costs have been identified.</p> <p>Economic</p> <p>Direct and indirect costs: No direct or indirect economic costs have been identified.</p> <p>Social</p> <p>Direct costs: A more permissive consenting path could lead to the construction of new buildings, additions or alterations that have adverse effects that users of these facilities (staff, students and patients) may have to bear, such as loss of access to daylight or outdoor space, which may have negative health and well-being impacts.</p> <p>Indirect costs: No indirect social costs have been identified.</p> <p>Cultural</p> <p>Direct costs: A more permissive consenting path could lead to the construction of new buildings, additions or alterations that reflect a lack of engagement with mana whenua, leading to culturally inappropriate outcomes.</p> <p>Indirect costs: No indirect cultural costs have been identified.</p>	<p>Environmental</p> <p>No direct or indirect environmental benefits have been identified.</p> <p>Economic</p> <p>Direct benefits: A more permissive consenting path for new buildings, additions and alterations would result in reduced consenting costs and delays for institutions.</p> <p>Indirect benefits: No indirect economic benefits have been identified.</p> <p>Social</p> <p>No direct or indirect social benefits have been identified.</p> <p>Cultural</p> <p>No direct or indirect cultural benefits have been identified.</p>	<p>There is some risk of acting in that there may be insufficient information with respect to the adverse effects on internal amenity and site users associated with an absence of controls on new builds, additions and alterations that are not visible from public spaces or adjoining legally formed roads</p>
<p>Effectiveness and efficiency</p>	<p>Effectiveness</p> <p>The proposal would be less effective in achieving the stated objectives as it provides minimal ability to manage adverse effects experienced within larger sites, given its focus on the interface with other zones.</p> <p>This option may not optimise the PDP's objectives for well-functioning urban environments.</p>		<p>Efficiency</p> <p>The costs of this proposal likely outweigh the benefits, given the risk of adverse effects arising for internal amenity and site users, overall, on the functioning urban environments. It is likely that in all but the largest sites, new builds, additions and alterations will in any case be visible from a public viewpoint, which means that the economic and operational benefits of narrowing the consenting pathway would be limited.</p>
<p>Overall evaluation</p>	<p>This proposal is not considered appropriate as it would be less effective and, ultimately, less efficient than the proposed option.</p>		

11.0 Conclusion

This evaluation has been undertaken in accordance with section 32 of the RMA in order to identify the need, benefits and costs and the appropriateness of the proposal having regard to its effectiveness and efficiency relative to other means in achieving the purpose of the RMA. The evaluation demonstrates that this proposal is the most appropriate option as it:

- focuses on the resource management matters particular to the hospital and tertiary education facilities, through the provision of 'tailor-made' zones that align with the National Planning Standards;
- recognises these institutions as regionally significant infrastructure;
- is responsive to the institutions' need to adapt to evolving demands, services and technological changes;
- provides for the diverse range of activities (primary and ancillary) that occur within the site,
- incorporates up-to-date resource management practice;
- establishes appropriate policy and consent settings and provides a common, easy-to-follow consenting platform on that basis;
- achieves an appropriate balance between enabling activities and seeking to ensure good outcomes in terms of both internal and external amenity; and
- recognises and provides for the associations of mana whenua in relation to the sites contained within both zones.

With respect to the second-to-last feature above, it is acknowledged that the proposal does present particular consent hurdles where additions, alterations and construction of new buildings not visible from a public space are concerned. However, these are not insurmountable (at most, a restricted discretionary activity status is imposed) and the approach ensures that the interests of site users and mana whenua can be accounted for.

All in all, the proposed Special Area – Hospital and Tertiary Education Zones and associated provisions provide for the on-going efficient and effective operation of the institutions concerned, which in turn supports the economic, health and social well-being of the district and region.

Appendix 1: Advice Received from Taranaki Whānui and Ngāti Toa Rangatira

Appendix 2: Feedback on Draft District Plan 2021

Hospital Zone – Draft District Plan Consultation

Topic	Submitter	Submission Point No.	Provision	Feedback	Change/s Sought		Proposed Change/s (Note: specific text changes sought are either <u>underlined</u> or struck through)	Response:	Final Changes made by Proposed Plan integration team:
Topic	Submitter	Submission Point No.	Provision	Feedback	Y	N	Response to submission point:		
General	Southern Cross Healthcare Ltd.	1124.1	N/A	<p>Southern Cross:</p> <p>a. supports the 21m height limit applied to the Site;</p> <p>b. seeks that the Site be rezoned Hospital zone; and</p> <p>c. supports the approach in Strategic Objective SCA-03 of providing for additional infrastructure but seeks amendments to ensure that this objective applies to hospitals.</p> <p>d. seeks that the Draft Plan be amended to recognise Hanson Street Hospital as essential social infrastructure for the Wellington Region with specific operational needs by rezoning the Site Special Purpose Hospital Zone (Hospital zone).</p>			<ul style="list-style-type: none"> Seeks that the site be rezoned from MDRZ to HOSZ. Seeks change to SCA-03 for applicability to include reference to Hospitals. 	<ul style="list-style-type: none"> No change. Strategic Direction objectives reviewed on basis of submission points. Point regarding SCA-03 noted. However, Hospital is not specified in the NPS-UD's 'additional infrastructure', as such Council doesn't see the need to change SCA-03. Strategically important assets that support wellbeing outcomes including health are caught under the umbrella of Strategic Direction Objective CEKP-04 Change made. Amendment made to incorporate all private hospitals (Bowen, Southern Cross and Wakefield) into the zone. See changes in row #3 below. 	N/A
General	Vital Healthcare Property Trust	919.1	N/A	<p>Vital Healthcare Property Trust is an NZX-listed fund that invests in high-quality healthcare related properties in New Zealand and Australia. Vital's tenants are hospital and healthcare operators who provide a wide range of medical and health services. Vital have two properties within Wellington City including the Bowen Hospital at 98 Churchill Drive, Crofton Downs and Wakefield Hospital at Florence Street, Newtown.</p> <p>Bowen Hospital is a two-level hospital facility and five-level specialist consulting building, located approximately 3km north of Wellington's CBD. Originally constructed in 1971, the facility has undergone upgrades and renovations including a recent \$34m development adding three operating theatres and consulting building housing consulting space, an endoscopy unit and chemotherapy clinic. Vital has recently completed the development of a radiation oncology unit at the site, which is an extension of the recently completed chemotherapy services at Bowen.</p>			N/A	No response needed. This is context detail for Council as part of request to rezone to Hospital Zone.	N/A

				Wakefield Hospital is the largest private hospital in the Wellington region, located on a 2.2ha site 5km south of Wellington's CBD. Vital has committed to a full redevelopment planned in stages to minimise disruption to ongoing business continuity. The completed development will result in a seismically resilient, modern and functional facility including 8 operating theatres, 47 beds, a 3,000 sqm medical consulting building and over 260 carparks.				
General – Zone application	Vital Healthcare Property Trust	919.1	N/A	<p>Vital are generally supportive of the Draft Plan and acknowledge the need to plan for growth and to address major planning and environmental issues facing the city. However, Vital request the following amendments are made to the Draft District Plan:</p> <ul style="list-style-type: none"> • The removal of the Significant Natural Areas (SNA) Overlay at Bowen Hospital at 98 Churchill Drive; • The rezoning of Bowen Hospital at 98 Churchill Drive and Wakefield Hospital at 30 Florence Street. 		Seeks that Bowen Hospital and Wakefield Hospital are rezoned to Special Purpose Hospital Zone.	<p>Amendment made to incorporate all private hospitals (Bowen, Southern Cross and Wakefield) into the zone. Existing provisions had to be reviewed in terms of appropriateness for private hospitals (i.e. Wellington Regional Hospital is different in terms of it being a public hospital) and new provisions drafted for the private hospitals to be site responsive.</p> <p>Introduction</p> <p>Amend introduction as follows:</p> <p><u>The Special Purpose Hospital Zone applies to the four hospitals located within Wellington City. These hospitals include Wellington Regional Hospital (Ngā Puna Wai ora), Southern Cross Hospital Wellington, Wakefield Hospital, which are located in Newtown, and Bowen Hospital which is located in Crofton Downs. Wellington Regional Hospital (Ngā Puna Wai ora) is the main public regional hospital. Southern Cross Wellington, Wakefield and Bowen hospitals are smaller, private hospitals.</u></p> <p>The purpose of the Special Purpose Hospital Zone is to enable the efficient and effective operation and development of these four hospital sites. Wellington Regional Hospital (Ngā Puna Wai ora) located in Newtown. The zone provisions provide for a range of hospital activities and ancillary activities and the Hospital's special operational needs and functional needs. Wellington Regional Hospital (Ngā Puna Wai ora) is the main public regional hospital in the Wellington Region.</p> <p>Wellington Regional <u>All Four</u> Hospitals provides a wide range of services and ancillary activities that are</p>	<p>Note: Change to how Wellington Regional Hospital is referenced (Wellington Regional Hospital Ngā Puna Wai Ora)</p> <p>Introduction</p> <p>The Hospital Zone applies to the four hospitals located within Wellington City. These hospitals include Wellington Regional Hospital Ngā Puna Wai Ora, Southern Cross Hospital Wellington, Wakefield Hospital, which are all located in Newtown, and Bowen Hospital which is located in Crofton Downs. Wellington Regional Hospital Ngā Puna Wai Ora is the public regional hospital in Wellington City. Southern Cross, Wakefield and Bowen hospitals are smaller, private hospitals.</p> <p>The purpose of the Hospital Zone is to enable the efficient and effective operation and development of these four hospital sites. The zone provisions provide for a range of hospital activities and ancillary activities and the Hospital's special operational needs and functional needs.</p> <p>This zone chapter seeks to ensure that the evolving health care needs of Wellington City, and the wider region, are supported by the efficient development of Wellington's hospital sites, whilst also recognising the visual character and amenity values of the surrounding environment. The zone manages the bulk, scale and location of built form and the location and management of activities around the site. Activities that are not compatible with the Hospital Zone functions or</p>

						<p>critical to the health and social wellbeing of communities throughout the Wellington Region.</p> <p>The Wellington Regional Hospital (Ngā Puna Wai ora) is also a major employment and education hub for Wellington. Ancillary activities provided for in this zone include but are not limited to pharmacies, cafes, offices and administrative activities and commercial activities. These ancillary activities play a key role in supporting the functions of the Hhospitals.</p> <p>Wellington Regional Hospital (Ngā Puna Wai ora) and the land on which it sits has long established historical and cultural associations for the mana whenua of Whanganui ā Tara (Wellington), Taranaki Whānui and Ngāti Toa Rangatira. Activities and development within the Hospital Zone must recognise mana whenua as kaitiaki, alongside their relationship with the land and the health benefits associated with the land and springs that the Hospital sits on, as well as the manaaki that Ngā Puna Wai ora (Wellington Regional Hospital) provides. Active engagement with mana whenua will assist in ensuring the mouri/mauri of this area of importance to mana whenua is not diminished through any potential adverse effects created by activities within the Zone.</p> <p>This zone chapter seeks to ensure that the evolving health care needs of Wellington City, and the wider region, are supported by the efficient development of Wellington’s hospital sites, whilst also recognising the visual character and amenity values of the surrounding environment. The zone manages the bulk, scale and location of built form and the location and management of activities around the site. Activities that are not compatible with the Hospital Zone functions or which are more appropriately located in other zones are discouraged.</p> <p>It is essential that the zone provides sufficient flexibility for the Hhospital to develop, undertake maintenance, upgrade, expand and/or adapt in the future. This is necessary to enable the Hhospitals to continue to cater to the diverse needs and comfort, safety and accessibility requirements of the users, employees and visitors to the Hhospitals.</p> <p>Objectives</p>	<p>which are more appropriately located in other zones are discouraged.</p> <p>All four hospitals provide a wide range of services and ancillary activities that are critical to the health and social wellbeing of communities throughout the Wellington Region.</p> <p>Wellington Regional Hospital Ngā Puna Wai Ora is also a major employment and education hub for Wellington. Ancillary activities provided for in this zone include but are not limited to pharmacies, cafes, offices and administrative activities and commercial activities. These ancillary activities play a key role in supporting the functions of the hospitals.</p> <p>Wellington Regional Hospital (Ngā Puna Wai Ora) and the land on which it sits has long established historical and cultural associations for the mana whenua of Whanganui ā Tara (Wellington), Taranaki Whānui and Ngāti Toa Rangatira. Activities and development within the Hospital Zone must recognise mana whenua as kaitiaki, alongside their relationship with the land and the health benefits associated with the land and springs that the Wellington Regional Hospital Ngā Puna Wai Ora sits on, as well as the manaaki that Wellington Regional Hospital Ngā Puna Wai Ora provides. Active engagement with mana whenua will assist in ensuring the mouri/mauri of this area of importance to mana whenua is not diminished through any potential adverse effects created by activities within the zone.</p> <p>It is essential that the zone provides sufficient flexibility for the hospitals to develop, undertake maintenance, upgrade, expand and/or adapt in the future. This is necessary to enable the hospitals to continue to cater to the diverse needs and comfort, safety and accessibility requirements of the users, employees and visitors to the hospitals.</p> <p>Objectives</p>
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						<p>Amend the objectives as follows:</p> <p>HOSZ-O1 Purpose</p> <p>Wellington Regional Hospital Ngā Puna Wai ora, <u>Southern Cross Hospital Wellington, Bowen Hospital and Wakefield Hospital</u> operates efficiently and effectively as a nationally and regionally and nationally significant hospitals and its <u>their</u> ongoing operation, function and development to support the economic, health and social well-being of the district and region is provided for.</p> <p>HOSZ-O2 Mana Whenua</p> <p>Taranaki Whānui and Ngāti Toa Rangatira are acknowledged as the mana whenua of Te Whanganui ā Tara (Wellington) and their cultural associations to Ngā Puna Wai ora Wellington Regional Hospital, the manaaki that Ngā Puna Wai ora provides, the land and the values of the network of Awa are recognised in planning and developing the Hospital Zone <u>Ngā Puna Wai ora Wellington Regional Hospital</u>.</p> <p>Policies</p> <p>Amend the policies as follows:</p> <p>HOSZ-P3 Mana Whenua</p> <p>Recognise and enable Taranaki Whānui and Ngāti Toa Rangatira cultural associations <u>at Ngā Puna Wai ora Wellington Regional Hospital</u> in the Hospital Zone by:</p> <ol style="list-style-type: none"> 1. Ensuring that use and development <u>on the site</u> in the Zone recognises and has regard to the historical and contemporary relationship between mana whenua and this site, the land, network of awa and the manaaki that Ngā Puna Wai ora Wellington Regional Hospital activities provide; 2. Managing new development adjoining scheduled sites of significance to tangata whenua; and 3. Collaborating on the design and incorporation of traditional cultural elements into public space <u>on the site</u> within the zone. 	<p>HOSZ-O1 Purpose</p> <p>Wellington Regional Hospital Ngā Puna Wai Ora, Southern Cross Hospital Wellington, Bowen Hospital and Wakefield Hospital operate efficiently and effectively as nationally and regionally significant hospitals and their ongoing operation, function and development to support the economic, health and social well-being of the district and region is provided for.</p> <p>HOSZ-O2 Mana whenua</p> <p>Taranaki Whānui and Ngāti Toa Rangatira are acknowledged as the mana whenua of Te Whanganui ā Tara (Wellington) and their cultural associations to Wellington Regional Hospital Ngā Puna Wai ora, the manaaki that Wellington Regional Hospital Ngā Puna Wai Ora provides, the land and the values of the network of awa are recognised in planning and developing Wellington Regional Hospital Ngā Puna Wai ora.</p> <p>HOSZ-P3 Mana Whenua</p> <p>Recognise and enable Taranaki Whānui and Ngāti Toa Rangatira cultural associations at Wellington Regional Hospital Ngā Puna Wai Ora by:</p> <ol style="list-style-type: none"> 1. Ensuring that use and development on the site recognises and has regard to the historical and contemporary relationship between mana whenua and this site, the land, network of awa and the manaaki that Ngā Puna Wai ora (Wellington Regional Hospital) activities provide; 2. Managing new development adjoining scheduled sites of significance to Māori; and 3. Collaborating on the design and incorporation of traditional cultural elements into public space on the site.
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						<p>HOSZ-P4 Urban Form, Quality and Amenity</p> <p>Deliver high-quality new development, alterations and additions, and public spaces within the <u>H</u>ospital sites to positively contribute to the distinctive form, quality and amenity of the Special Purpose Hospital Zone and adjoining zones by ensuring that, where relevant, it:</p> <p>...</p> <p>15. Has regard to the benefits and use of open space, landscaping and mature trees within the site on the streetscape, and on the character and visual amenity of the <u>H</u>ospital sites and adjoining areas.</p> <p>HOSZ-P5 Resilience</p> <p>Encourage new development within the <u>H</u>ospital sites that:</p> <ol style="list-style-type: none"> 1. Is sustainable, resilient and adaptable to change in use over time; and 2. Support Wellington Regional Hospital's <u>the hospitals</u> role and function as a resilience anchors during and after natural hazard events. <p>Rules:</p> <p>Amend the rules as follows to incorporate private hospitals:</p> <p>Rule 5: Additions and alterations to buildings and structures</p> <p>Add a third row to rule HOSZ-R5 to cater for private Hospitals' building additions and alterations as a Restricted Discretionary Activity – Council feels that an RDA status is appropriate for these private hospitals compared to Controlled for Wellington Regional Hospital due to site locations and their functions as private (not public hospitals), this approach is much more enabling then their current Operative District Plan (and Draft District Plan approach):</p>	<p>HOSZ-P4 Urban form, quality and amenity</p> <p>Deliver high-quality new development, alterations and additions, and public spaces within the hospital sites to positively contribute to the distinctive form, quality and amenity of the Hospital Zone and adjoining zones by ensuring that, where relevant, it:</p> <ol style="list-style-type: none"> 1. Has regard to the location of existing and potential future primary and ancillary hospital activities; 2. Responds to the local context, particularly where the site is located adjoining: <ol style="list-style-type: none"> a. A heritage building, heritage structure or heritage area; b. Sites and areas of significance to Māori c. A Residential zone; d. Open space zones; and e. Key pedestrian streets; 3. Responds to any identified significant natural hazard risks and climate change effects, including the strengthening and adaptive reuse of existing buildings; 4. Maintains and, where possible, enhances existing informal pedestrian and cycling routes and creates new links that increase access and connectivity; 5. Achieves good accessibility for people of all ages and mobility and encourages social interaction; 6. Provides a safe environment for people that promotes a sense of security and allows both formal and informal surveillance; 7. Integrates with existing and planned active and public transport activity movement networks, including planned rapid transit stops; 8. Incorporates high-quality visual and architectural quality design based on such factors as the form, scale, design and detailing of the building/structure or building additions/alterations; 9. Enhances the quality of the streetscape and the private/public interface; and 10. Has regard to the benefits and use of open space, landscaping and mature trees within the site on the streetscape, and on the character and visual amenity of the hospital sites and adjoining areas.
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HOSZ-R5 Additions and alterations to buildings and structures

3. Activity status: Restricted Discretionary

Where

- a. For the Southern Cross Wellington Hospital, Bowen Hospital and Wakefield Hospital sites compliance with any of the requirements of HOSZ-R5.1 cannot be achieved.

-

Matters of discretion are:

-

- 1. Any relevant matters in HOSZ-P3, HOSZ-P4 and HOSZ-P5;
- 2. The extent and effect of non-compliance with HOSZ-S1 and HOSZ-S2;
- 3. The Centres and Mixed-Use Design Guide;
- 4. Design, external appearance, siting and verandahs; and
- 5. The screening or integration of any service elements (roof plant, exhaust and intake units and roof equipment) that could be viewed from the road or public space, as part of the façade or roof of the building.

-

Notification status: An application for resource consent made in respect of rule HOSZ-R5.3 is precluded from being publicly notified

Rule 6: Construction of new buildings and structures

Add a third row to rule HOSZ-R6 to cater for private Hospitals' building construction activities as a Restricted Discretionary Activity – Council feels that an RDA status is appropriate for these private hospitals compared to Controlled for Wellington Regional Hospital due to site locations and their functions as private (not public hospitals), this approach is much more enabling than their current Operative District Plan (and Draft District Plan approach):

HOSZ-P5 Resilience

Encourage new development within the hospital sites that:

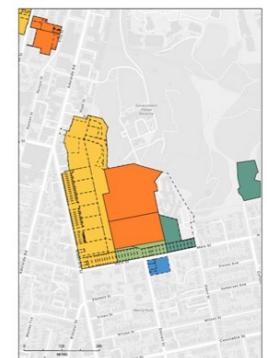
- 1. Is sustainable, resilient and adaptable to change in use over time; and
- 2. Supports the hospitals' roles and functions as resilience anchors and critical facilities after natural hazard events.

HOSZ-S1 Maximum height of buildings and structures

- 1. In relation to Wellington Regional Hospital | Ngā Puna Wai Ora, buildings and structures must not exceed the following maximum height limits above ground level:

Location	Limit
Height Control Area 1	17m
Height Control Area 2	25.5m
Height Control Area 3	34m
Height Control Area 4	50.5m
Height Control Area 5	21m

WELLINGTON REGIONAL HOSPITAL



KEY

- Height Control Area 1 (17.0m)
- Height Control Area 2 (25.5m)
- Height Control Area 3 (34.0m)
- Height Control Area 4 (50.5m)
- Height Control Area 5 (21.0m)
- Parcel Boundaries

3. **Activity status: Restricted Discretionary**

Where:

- a. For the Southern Cross Wellington Hospital, Bowen Hospital and Wakefield Hospital sites compliance with any of the requirements of HOSZ-R6.1 cannot be achieved.

Matters of discretion are:

- 1. Any relevant matters in HOSZ-P3, HOSZ-P4 HOSZ-P5;
- 2. The extent and effect of non-compliance with HOSZ-S1 and HOSZ-S2;
- 3. The Centres and Mixed-Use Design Guide;
- 4. Design, external appearance, siting and verandahs;
- 5. Integration of Crime Prevention Through Environment Design practices;
- 6. Landscaping;
- 7. The extent to which any service elements (e.g. roof plant, exhaust and intake units, and roof equipment) that could be viewed from the road or open space zone can be integrated as part of the façade or roof of the building;
- 8. Site access;
- 9. Loading and servicing; and
- 10. Internal traffic circulation.

Notification status: An application for resource consent made in respect of rule HOSZ-R6.3 is precluded from being publicly notified.

Standards

Amend the standards as follows:

HOSZ-S1 Maximum Height

2. In relation to Southern Cross Wellington Hospital, buildings and structures must not exceed the following maximum height limits above ground level:

Location	Limit
Height Control Area 1	21m

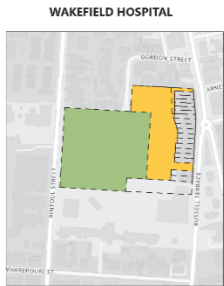


3. In relation to Bowen Hospital, buildings and structures must not exceed the following maximum height limits above ground level:

Location	Limit
Height Control Area 1	21



4. In relation to Wakefield Hospital, buildings and structures must not exceed the following maximum height limits above ground level:

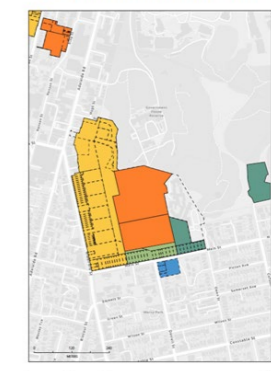
							<p>1. In relation to Wellington Regional Hospital (Ngā Puna Wai ora), the following maximum height limits above ground level must be complied with: [Height table] [Height Map]</p> <p>2. In relation to Southern Cross Hospital Wellington, the following maximum height limits above ground level must be complied with: [Insert heights table] [Insert heights map]</p> <p>3. In relation to Bowen Hospital, the following maximum height limits above ground level must be complied with: [Insert heights table] [Insert heights map]</p> <p>4. In relation to Wakefield Hospital, the following maximum height limits above ground level must be complied with: [Insert heights table] [Insert heights map]</p> <p>This standard does not apply to:</p> <ol style="list-style-type: none"> Satellite dishes, antennas, aerials, chimneys, flues and flag poles provided these do not exceed 1m in diameter and do not exceed the height limit by more than 1m measured vertically. Solar power and heating components provided these do not exceed the height limit by more than 500mm measured vertically. Lift overruns provided these do not exceed the height limit by more than 4m measured vertically. 	<table border="1"> <thead> <tr> <th>Location</th> <th>Limit</th> </tr> </thead> <tbody> <tr> <td>Height Control Area 1</td> <td>21m</td> </tr> <tr> <td>Height Control Area 2</td> <td>14m</td> </tr> </tbody> </table>  <p>5. Fences and standalone walls must not exceed a maximum height of 1.8 metres (measured above ground level).</p> <p>This standard does not apply to:</p> <ol style="list-style-type: none"> Satellite dishes, antennas, aerials, chimneys, flues and flag poles provided these do not exceed 1m in diameter and do not exceed the height limit by more than 1m measured vertically; or Solar power and heating components provided these do not exceed the height limit by more than 500mm measured vertically; or Lift overruns provided these do not exceed the height limit by more than 4m measured vertically. 	Location	Limit	Height Control Area 1	21m	Height Control Area 2	14m
Location	Limit													
Height Control Area 1	21m													
Height Control Area 2	14m													
General – Height requirements	Southern Cross Healthcare Ltd.	1124.1	N/A	<p>The Draft Plan proposes to apply a 21m height limit to the Site and the land located immediately north and east of the Site.</p> <p>Southern Cross supports this approach because it meets the intensification requirements of the NPS-UD and reflects the mixed used nature of the Site's surrounding environment. Specifically, Policy 3 of the NPS-UD</p>		N/A	<p>Support noted. A full review of heights appropriate to Southern Cross site was undertaken by Council with the urban design team.</p> <p>New maximum height limits set:</p>	<p>HOSZ-S1 Maximum height of buildings and structures</p> <p>2. In relation to Wellington Regional Hospital Ngā Puna Wai Ora, buildings and structures must not exceed the following maximum height limits above ground level:</p>						

requires that building heights of at least 6 storeys within at least a walkable catchment of existing and planned rapid transit stops, the edge of city centre zones, or the edge of metropolitan centre zones. The Site is within a 2-3 minute walk of the City Centre zone, being approximately 156m away.

- Height limits have been rounded to nearest 0.5m for simplicity.
- Updated height limits/maps for Wellington Regional Hospital:
 - o Moved height control area 2 and 4 80m to the South (towards Mein Street). So that Height Control Area 4 (50.5m) is extended and Height Control Area 2 (25.5m) is smaller.
 - o Rounded Height Control Area 1 from 16.8m to 17m, rounded up Height Control Area 2 from 25.2m to 25.5m, rounded height control area 3 up from 33.6m to 34m, rounded up Height Control Area 4 up from 50.4m to 50.5m and kept Height Control Area 5 as 25m.
 - o Add Ewart Hospital to Height Map (and Hospital Zone) and give it Height Control Area 1 height limit.
 - o Remove Te Hopai Resthome carpark from Hospital Zone and Height Map.
- Height limits given to Wakefield, Bowen and Southern Cross hospitals:
 - o Southern Cross Hospital – 21m as per Draft Plan (under DDP Residential Zoning) – given surrounding environment it felt appropriate to retain this height.
 - o Bowen Hospital – changed from Draft Plan 8m in GRZ to 21m. This was deemed appropriate given surrounds.
 - o Wakefield Hospital – 21m for bulk of site and then stepped down to 14m along Russel Tce to recognise character houses adjacent to this edge.

Location	Limit
Height Control Area 1	17m
Height Control Area 2	25.5m
Height Control Area 3	34m
Height Control Area 4	50.5m
Height Control Area 5	21m

WELLINGTON REGIONAL HOSPITAL



- KEY
- Height Control Area 1 (17.0m)
 - Height Control Area 2 (25.5m)
 - Height Control Area 3 (34.0m)
 - Height Control Area 4 (50.5m)
 - Height Control Area 5 (21.0m)
 - Parcel Boundaries

3. In relation to Southern Cross Wellington Hospital, buildings and structures must not exceed the following maximum height limits above ground level:

Location	Limit
Height Control Area 1	21m

SOUTHERN CROSS HOSPITAL



KEY
 ■ Height Control Area 1 (21m)
 - - Parcel Boundaries

4. In relation to Bowen Hospital, buildings and structures must not exceed the following maximum height limits above ground level:

Location	Limit
Height Control Area 1	21

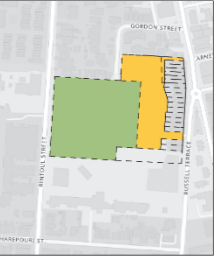
BOWEN HOSPITAL



KEY
 ■ Height Control Area 1 (21m)
 ■ Height Control Area 2 (14m)
 - - Parcel Boundaries

5. In relation to Wakefield Hospital, buildings and structures must not exceed the following maximum height limits above ground level:

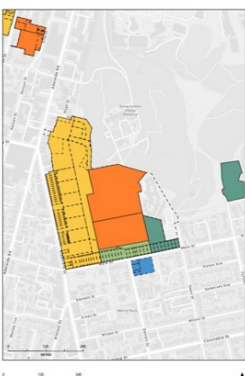
Location	Limit
Height Control Area 1	21m
Height Control Area 2	14m

								<p style="text-align: center;">WAKEFIELD HOSPITAL</p>  <p>KEY ■ Height Control Area 1 (23.0m) ■ Height Control Area 2 (19.0m) - - - Parcel Boundaries</p> <p>6. Fences and standalone walls must not exceed a maximum height of 1.8 metres (measured above ground level).</p> <p>This standard does not apply to:</p> <p>d. Satellite dishes, antennas, aerials, chimneys, flues and flag poles provided these do not exceed 1m in diameter and do not exceed the height limit by more than 1m measured vertically; or</p> <p>e. Solar power and heating components provided these do not exceed the height limit by more than 500mm measured vertically; or</p> <p>Lift overruns provided these do not exceed the height limit by more than 4m measured vertically.</p>
General – Zone application	Southern Cross Healthcare Ltd.	1124.1	N/A	<p>The National Planning Standards prescribe a special purpose hospital zone which provides for both public and private hospitals and healthcare facilities. The Hospital zone provided in the Draft Plan is inconsistent with this approach because it is site-specific for the Wellington Regional Hospital only.</p> <p>Southern Cross seeks that the Hospital zone be applied to the Site and amended to minimise the site-specific provisions for the Wellington Regional Hospital and enable its application to the Site. Attached as Appendix A is a marked-up version of the Hospital zone chapter of the Draft Plan containing suggested amendments by Southern Cross.</p>		Seeks that the site be rezoned from MDRZ to HOSZ.	<p>Changes made to incorporate all private hospitals (Bowen, Southern Cross and Wakefield) into the zone.</p> <p>However, existing provisions for the HOSZ zone need to be considered in terms of appropriateness for private hospitals (i.e. Wellington Regional Hospital is different in terms of strategic importance) and new provisions drafted for the private hospitals to be site responsive.</p> <p>See changes made in row #3 above.</p>	See changes made in row #3 above.

				<p>Rezoning the Site to Hospital zone is appropriate because:</p> <ul style="list-style-type: none"> a) it will ensure that the operational and functional needs of Hanson Street Hospital are enabled in an efficient manner; b) it will enable the ongoing operation and expansion of a surgical hospital to help meet the demand from a growing and aging population and provide economic, social, health and well-being benefits; c) the existing and proposed residential zoning of the Site is inappropriate for the hospital activities on the Site: <ul style="list-style-type: none"> i. the Site is proposed to be zoned Medium Density Residential Zone under the Draft Plan; ii. within the Medium Density Residential Zone, hospital activities are not provided for and would require resource consent as a discretionary activity, which indicates that they are not anticipated as appropriate activities within this zone; d) the proposed amendments to the Hospital zone provisions include maintaining the permitted height of 21m that is currently proposed in the Draft Plan, which means that any new buildings will be of a height that is consistent with the heights enabled in the surrounding environment, and the intensification required by the NPS-UD; and e) it appropriately aligns with the direction in the National Planning Standards. 			
Vital Healthcare Property Trust	919.1	N/A	<p>Bowen Hospital is zoned General Residential and Wakefield Hospital is zoned Medium Density Residential under the Draft District Plan. As noted earlier, Bowen Hospital has existed on the site for over 50 years, and Wakefield Hospital will shortly be comprehensively redeveloped. The 8m and 14m height limits proposed under the General Residential and Medium Density Residential zones (respectively) do not provide for the expansion or redevelopment of the sites which are necessary to meet growing community demands. The residential zones do not provide for hospital activities. There is also no intention for either of the sites to be returned to residential use in the near future.</p> <p>Vital oppose the proposed General Residential and Medium Density Residential zoning of Bowen Hospital and Wakefield Hospital (respectively) as it does not allow for the expansion or development of these existing community healthcare and hospital facilities. It is considered that the Special Purpose – Hospital zone</p>		Seeks that Bowen Hospital and Wakefield Hospital are rezoned to Special Purpose Hospital Zone.	<p>Changes made to incorporate all private hospitals (Bowen, Southern Cross and Wakefield) into the zone.</p> <p>However, existing provisions for the HOSZ zone need to be considered in terms of appropriateness for private hospitals (i.e. Wellington Regional Hospital is different in terms of strategic importance) and new provisions drafted for the private hospitals to be site responsive.</p> <p>See changes made in row #3 above.</p>	See changes made in row #3 above.

				(with modifications) would be more suitable and should apply to Bowen Hospital and Wakefield Hospital. Relief sought: That the Draft District Plan is amended so that the Special Purpose – Hospital zone (with modifications) apply to Bowen Hospital or Wakefield Hospital. If the rezoning of the sites to the Special Purpose – Hospital zone is not accepted, Vital request that: (1) A new zone providing for healthcare facilities, private hospitals and an appropriate maximum building height is created and applied to the sites; (2) Amend the Business – Local Centre zone to provide for healthcare facilities and private hospitals, and rezone Bowen Hospital and Wakefield Hospital to Business – Local Centre zone; or (3) Retain the existing zoning and apply a concept plan to each of the sites which would provide for healthcare facilities, private hospitals and bulk and location standards reflecting that required for private hospital activities (in particular, a greater building height).																
Capital and Coast District Health Board	852.1	N/A		A SPHZ for our Newtown Hospital Campus is supported.		N/A	Support noted. No changes needed.	N/A												
Capital and Coast District Health Board	852.1	N/A		Our Newtown Hospital Campus includes existing hospital buildings and health related activities (“Ewart Hospital”) at 2 and 2A Coromandel Street. This should be included in the SPHZ. Inclusion in the SPHZ is appropriate in view of its existing hospital use and the need for flexibility to cater for the rapidly changing needs of the community for health services.		Seeks that Ewart Hospital (2 and 2A Coromandel Street) is rezoned to HOSZ.	Agree with this change. Changes made to rezone Ewart Hospital from General Residential Zone to Special Purpose Hospital Zone. Changes made to change maximum height limits for Ewart Hospital site from 8m in the Draft District Plan, to 16.8m (the lowest height applying to the Hospital Zone).	HOSZ-S1 Maximum height of buildings and structures 3. In relation to Wellington Regional Hospital Ngā Puna Wai Ora, buildings and structures must not exceed the following maximum height limits above ground level: <table border="1"> <thead> <tr> <th>Location</th> <th>Limit</th> </tr> </thead> <tbody> <tr> <td>Height Control Area 1</td> <td>17m</td> </tr> <tr> <td>Height Control Area 2</td> <td>25.5m</td> </tr> <tr> <td>Height Control Area 3</td> <td>34m</td> </tr> <tr> <td>Height Control Area 4</td> <td>50.5m</td> </tr> <tr> <td>Height Control Area 5</td> <td>21m</td> </tr> </tbody> </table>	Location	Limit	Height Control Area 1	17m	Height Control Area 2	25.5m	Height Control Area 3	34m	Height Control Area 4	50.5m	Height Control Area 5	21m
Location	Limit																			
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Height Control Area 5	21m																			

Strategic Objectives	Southern Cross Healthcare Ltd.	1124.2	SCA-03	<p>Southern Cross supports the approach in Strategic Objective SCA-03 of providing for additional infrastructure, but seeks amendments to ensure that this objective applies to hospitals. Strategic Objective SCA-03 requires that “additional infrastructure is incorporated into new urban developments of a nature and scale that supports or provides significant benefits at a regional or national scale”.</p> <p>Southern Cross agrees that additional infrastructure should be supported through strategic direction. However, the definition of “additional infrastructure” in the Draft Plan currently includes “healthcare facilities” only. This appears to have been incorporated to be consistent with the definition of “additional infrastructure” in the NPS-UD. However, “healthcare activities” in the NPS-UD include “hospitals”, while in the Draft Plan “healthcare activities” have been defined to specifically exclude “hospitals”. It is therefore important to amend SCA-03 so that it applies to hospitals by either:</p> <p>(a) amending the definition of “additional infrastructure” to include “hospitals”; or</p> <p>(b) amending SCA-03 to include “hospitals”.</p> <p>Making either of these amendments will ensure that hospitals are recognised as social infrastructure that must be incorporated in urban developments to provide significant regional and potentially national benefits.</p>		Seeks changes to SCA-03	<p>Council reviewed Strategic Objectives following submission point. Point regarding SCA-03 noted but Hospital is not specified in the NPS-UD’s ‘additional infrastructure’, as such Council doesn’t see the need to change SCA-03. Strategically important assets that support wellbeing outcomes including health are caught under the umbrella of Strategic Direction Objective CEKP-04</p> <p>No changes made. Council determined that changes weren’t needed as hospitals are adequately covered.</p>	N/A
	William Guest	803.1	Strategic City Assets and Infrastructure	<p>The first sentence of the introduction is simply a cliché. The third sentence “It is important that the District Plan supports a coordinated approach to infrastructure planning” is surprising because there seems to be little evidence of coordination. Co-ordination with who or what? Hutt City Council? Karori residents? The fourth sentence talks about major infrastructure facilities of</p>		N/A	No changes made. See response above.	N/A

				regional and national importance – but misses out Wellington Hospital and its precinct. Turning to the Strategic Objectives:															
Mapping and Zone extent	Te Hopai Trust Board	114.1	Planning Maps	<p>The Te Hopai Trust Board (Trust Board) is the owner of Lot 1 DP 44405, which consists of 1.4363 hectares more or less. The property is identified on the attached aerial photograph (Attachment 1).</p> <p>The Trust Board's residential care facility has been established on the site since 1888. The land was dedicated by a special act of government.</p> <p>The DRAFT District Plan proposes to 'split' Trust Board's property into two separate zones: "General Residential" and "Special Purpose Hospital Zone" (refer Attachment 2). In the Trust Board's opinion there is no reasonable explanation or justification for splitting the property into two separate zones.</p> <p>It may be that the Council considers that the southern portion of the Trust Board's property is 'owned' by the C&HDHB - hence the "Special Purpose Hospital Zone".</p> <p>If that is the Council's understanding, then clearly it is a misunderstanding.</p> <p>The Trust Board's intention is to develop the southern portion of its property for residential purposes or aged care and not for hospital purposes. The intention is to provide long-term financial stability for the Trust Board's activity of providing long-term residential care for the elderly by creating an income stream from developing for lease, and potentially 'license to occupy', residential apartment-style accommodation, similar to the recent development of residential apartments by the Mary Potter Hospice at 48-52 Mein Street, Newtown.</p> <p>To this end, the Trust Board requests that its property is zoned "Medium Density Residential Zone" and not split into two different zones - "General Residential" and Special Purpose Hospital Zone".</p> <p>The Trust Board also requests that a single height limit apply to the full 1.4363ha property, and not split into two different building height 'zones' as proposed in the DRAFT.</p> <p>In support of the request for a Medium Density Residential Zoning, the Trust Board wishes to make the following points:</p> <p>1. The property was previously included within a single</p>	Te Hopai seek a rezoning of their site to MDRZ and a 21m height limit.	<p>Changes made. Agree with proposed amendments. Amend the mapping, zoning and height for this site. Apply the High Density Residential Zone and a 21m maximum height limit to this site.</p> <p>The current Medium Density Residential Zoned sites are becoming High Density Residential Zone hence the change to High Density and not Medium Density Zone as per submitter's request. The maximum height limit of 21m reflects the anticipated density in this zone and is more enabling for the Te Hopai Trust.</p> <p>Changes made:</p> <ul style="list-style-type: none"> - Removed the carpark from Hospital Zone and rezoned to High Density Residential Zone with 21m height limit (across the whole Te Hopai site). - This is akin with surrounding residential environment. 	<p>HOSZ-S1 Maximum height of buildings and structures</p> <p>3. In relation to Wellington Regional Hospital Ngā Puna Wai Ora, buildings and structures must not exceed the following maximum height limits above ground level:</p> <table border="1"> <thead> <tr> <th>Location</th> <th>Limit</th> </tr> </thead> <tbody> <tr> <td>Height Control Area 1</td> <td>17m</td> </tr> <tr> <td>Height Control Area 2</td> <td>25.5m</td> </tr> <tr> <td>Height Control Area 3</td> <td>34m</td> </tr> <tr> <td>Height Control Area 4</td> <td>50.5m</td> </tr> <tr> <td>Height Control Area 5</td> <td>21m</td> </tr> </tbody> </table> <p>WELLINGTON REGIONAL HOSPITAL</p>  <p>KEY</p> <ul style="list-style-type: none"> Height Control Area 1 (17.0m) Height Control Area 2 (25.5m) Height Control Area 3 (34.0m) Height Control Area 4 (50.5m) Height Control Area 5 (21.0m) Parcel Boundaries 	Location	Limit	Height Control Area 1	17m	Height Control Area 2	25.5m	Height Control Area 3	34m	Height Control Area 4	50.5m	Height Control Area 5	21m
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				<p>zone, the "Residential C Zone" (refer Attachment 3)t</p> <p>2. For some reason unknown to the Trust Board, when the current operative District Plan was promulgated in 1994 the property was split into two zones - with the northern half zoned "Inner Residential Area" and the southern half zoned "Institutional Precinct - Hospital". At that time, the Trust Board was not made aware of this change and it only became apparent when, in 2013, the Trust Board applied for resource consent for an expansion of its residential care facility (SR 282791 issued on 10 June 2013).</p> <p>3. In the Trust Board's opinion, even if the split zoning could be justified, and in the Trust Board's opinion it cannot be justified given the single ownership of the property, there can be no justification for 'down-zoning' the northern half of the property from the operative Inner Residential Area to "General Residential Zone", with the consequent drop in permitted building height from 10m to 8m.</p> <p>4. The building heights on the properties adjacent to Te Hopai range from 50.4m down to 16.8m. In the Trust Board's opinion, a 21m height would be more appropriate and consistent with the National Policy Statement - Urban Development (2020) which encourages intensification. An 8m building height (as indicated for the northern half of the property) would be a clear anomaly given the building heights applying to the immediately adjoining properties. Conversely, a 21m height limit would be consistent with the 21m building height proposed for the neighbouring residential properties in Mein Street and Owen Street.</p> <p>In summary, the Trust Board requests the following changes:</p> <ol style="list-style-type: none"> 1. a change of zoning to "Medium Density Residential Zone" for the Trust Board's 1.4363ha property; and 2. a 16m height limit across the 1.4363ha property. 2. a 21m building height standard to apply across the whole 1.4363ha property. 				
Definition	Capital and Coast District Health Board	852.1	<i>Hospital Activities</i>	<p>The definition of "Hospital Activities" is supported. However, it should at least be extended to include "residential accommodation for staff", a more broad inclusion of "residential accommodation" is preferred to provide additional flexibility. Until relatively recently there was a multi-storey apartment building on the campus that</p>		Changes made.	<p>Changes made. Agree with proposed changes sought. Amend the definition of 'Hospital Activities' as follows:</p> <p>Hospital Activities</p>	<p>Final definition – see changes in red. Use of the word 'ancillary' deleted from (i)-(xiii) to avoid unnecessary duplication and added the word 'sites' after hospital in (t):</p>

			<p>was used for staff (primarily nurses) as their permanent place of residence. In the future, this activity may need to be provided again.</p>			<p>means the use of land and/or buildings for the primary purpose of providing medical, surgical, mental health, oral health, maternity, geriatric and convalescent or hospice services to the community. This includes:</p> <ul style="list-style-type: none"> n. temporary living accommodation e.g. for families and carers of patients and for staff providing medical treatment; o. <u>residential accommodation for staff</u> p. secure facilities; q. mortuaries; r. spiritual facilities and s. any ancillary activity necessary for the functional needs and operational needs of the Hospital which includes: <ul style="list-style-type: none"> i. ancillary office; ii. ancillary commercial activity; iii. catering; iv. staff facilities; i. operation and maintenance support services including laundries, kitchens, cafeterias, refreshment facilities, generators, substation, storage facilities and workshops; ii. ancillary retail; iii. ancillary childcare; iv. ancillary business services; v. ancillary educational activities and facilities; vi. small scale ancillary community activity; vii. ancillary conference facility; viii. small-scale ancillary sport and recreation activities and facilities; and ix. car parking for staff, patients and visitors. <p>[Renumbering to allow a new list item as item 'o']</p>	<p>means the use of land and/or buildings for the primary purpose of providing medical, surgical, mental health, oral health, maternity, geriatric and convalescent or hospice services to the community. This includes:</p> <ul style="list-style-type: none"> a. medical and psychiatric assessment, diagnosis, treatment, rehabilitation and in-patient care services, including operating theatres; b. dispensaries; c. outpatient departments and clinics; d. medical research and testing facilities, including diagnostic laboratories; e. medical training and education; f. <u>healthcare consulting services;</u> g. emergency service facilities; h. helicopter facilities, including helicopter take-off, landing and associated service facilities; i. first aid and other health-related training facilities; j. rehabilitation facilities, including gymnasiums and pools; k. palliative facilities; l. hospice facilities; m. marae activities and facilities; n. <u>residential care services and facilities;</u> o. <u>temporary living accommodation e.g. for families and carers of patients;</u> p. <u>residential accommodation for staff;</u> q. secure facilities; r. mortuaries; s. spiritual facilities and t. any ancillary activity necessary for the functional needs and operational needs of the Hospital <u>sites</u> which includes: <ul style="list-style-type: none"> i. office; ii. commercial activity; iii. catering; iv. staff facilities; v. operation and maintenance support services including laundries, kitchens, cafeterias, refreshment facilities, generators, substation, storage facilities and workshops; vi. retail; vii. childcare; viii. business services; ix. educational activities and facilities; x. small-scale community activity;
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								<ul style="list-style-type: none"> xi. conference facility; xii. small-scale ancillary sport and recreation activities and facilities; and xiii. car parking for staff, patients and visitors.
<p>Definition</p> <p>[Additional email request from Southern Cross]</p>	<p>Southern Cross Healthcare Ltd.</p>	<p>N/A came via later correspondence</p>	<p><i>Hospital Activities</i></p>	<p>We confirm that Southern Cross supports the definition for 'hospital activities' in the Draft District Plan, but also requests that "healthcare consulting services" is also added to the list of activities that are included. For example, private hospitals often include specialist consulting suites for medical practitioners. Medical practitioners often work both in the public and private sectors, and have consulting rooms where they meet with patients prior to surgery. "Healthcare consulting services" would not fit within one of the other matters listed in the definition, while it is a typical activity within a hospital and should be provided for.</p> <p>Southern Cross also supports the inclusion of enabling ancillary activities, including a café.</p>		<p>Changes made</p>	<p>Changes made. See row above.</p> <p>means the use of land and/or buildings for the primary purpose of providing medical, surgical, mental health, oral health, maternity, geriatric and convalescent or hospice services to the community. This includes:</p> <ul style="list-style-type: none"> e. medical and psychiatric assessment, diagnosis, treatment, rehabilitation and in-patient care services, including operating theatres; f. dispensaries; g. outpatient departments and clinics; h. medical research and testing facilities, including diagnostic laboratories; i. medical training and education; j. Healthcare consulting services; k. emergency service facilities; l. helicopter facilities, including helicopter take-off, landing and associated service facilities; m. first aid and other health-related training facilities; n. rehabilitation facilities, including gymnasiums and pools; o. palliative facilities; p. hospice facilities; q. marae activities and facilities; r. residential care services and facilities; s. temporary living accommodation e.g. for families and carers of patients and for staff providing medical treatment; t. secure facilities; u. mortuaries; v. spiritual facilities and w. any ancillary activity necessary for the functional needs and operational needs of the Hospital which includes: <ul style="list-style-type: none"> v. ancillary office; vi. ancillary commercial activity; vii. catering; viii. staff facilities; ix. operation and maintenance support services including laundries, kitchens, cafeterias, refreshment facilities, generators, substation, storage facilities and workshops; x. ancillary retail; xi. ancillary childcare; xii. ancillary business services; xiii. ancillary educational activities and facilities; xiv. small scale ancillary community activity; xv. ancillary conference facility; xvi. small-scale ancillary sport and recreation activities and facilities; and xvii. car parking for staff, patients and visitors. 	<p>See above for changes to definition.</p>

Introduction	Southern Cross Healthcare Ltd.	1124.3	Introduction	<p>The purpose of the Special Purpose Hospital Zone is to enable the efficient and effective operation and development of the Wellington Regional Hospital (Ngā Puna Wai ora) <u>and Southern Cross Hospital Wellington, which are both</u> located in Newtown. The zone provisions provide for a range of hospital activities and ancillary activities and the Hospital's <u>hospitals'</u> special operational needs and functional needs.</p> <p>Wellington Regional Hospital (Ngā Puna Wai ora) is the main public regional hospital in the Wellington Region. <u>Southern Cross Hospital Wellington is a regionally significant hospital that provides a range of health services for the city and wider region, which includes supporting Wellington Regional Hospital (Ngā Puna Wai ora).</u>s</p> <p>Wellington Regional Hospital <u>and Southern Cross Hospital Wellington</u> provides a wide range of services and ancillary activities that are critical to the health and social wellbeing of communities throughout the Wellington Region.</p> <p>The <u>Wellington Regional Hospital</u> hospital is also a major employment and education hub for Wellington.</p> <p>Ancillary activities provided for in this zone include but are not limited to pharmacies, cafes, offices and administrative activities and commercial activities. These ancillary activities play a key role in supporting the functions of the Hospital <u>activities.</u></p> <p>Wellington Regional Hospital (Ngā Puna Wai ora) and the land on which it sits has long established historical and cultural associations for the mana whenua of Whanganui ā Tara (Wellington), Taranaki Whānui and Ngāti Toa Rangatira. Activities and development within the Hospital Zone must recognise mana whenua as kaitiaki, alongside their relationship with the land and the health benefits associated with the land and springs that the Hospital sits on, as well as the manaaki that Ngā Puna Wai ora (Wellington Regional Hospital) provides. Active engagement with mana whenua will assist in ensuring the mouri/mauri of this area of importance to mana whenua is not diminished through any potential adverse effects created by activities within the <u>Zonezone.</u></p> <p>This zone chapter seeks to ensure that the evolving health care needs of Wellington City, and the wider</p>		Changes sought.	Changes made. Agree with most of these changes and intent. See row #3 for changes. First two paragraphs have been re-worked.	N/A

				<p>region, are supported by the efficient development of Wellington's hospital sites, whilst also recognising the visual character and amenity values of the surrounding environment. The zone manages the bulk, scale and location of built form and the location and management of activities around the sites. Activities that are not compatible with the Hospital Zone functions or which are more appropriately located in other zones are discouraged.</p> <p>It is essential that the zone provides sufficient flexibility for the Hospital hospitals to develop, undertake maintenance, upgrade, expand and/or adapt in the future. This is necessary to enable the Hospital hospitals to continue to cater to the diverse needs and comfort, safety and accessibility requirements of the users, employees and visitors to the Hospital hospitals.</p>				
Objectives	Southern Cross Healthcare Ltd.	1124.5	HOSZ-01	Wellington Regional Hospital (Ngā Puna Wai ora) and <u>Southern Cross Hospital Wellington</u> operates efficiently and effectively as <u>nationally and</u> a regionally and nationally significant hospitals and its their ongoing operation, function and development to support the economic, health and social well-being of the district and region is provided for.		Changes sought.	Changes made. Agree with changes. See row #3 for changes.	N/A
	Southern Cross Healthcare Ltd.	1124.5	HOSZ-02	Taranaki Whānui and Ngāti Toa Rangatira are acknowledged as the mana whenua of Te Whanganui ā Tara (Wellington) and their cultural associations to Ngā Puna Wai ora (Wellington Regional Hospital), the manaaki that Ngā Puna Wai ora provides, the land and the values of the network of Awa are recognised in planning and developing the <u>Wellington Regional Hospital</u> Hospital Zone.		Changes sought.	Changes made. Agree with changes. See row #3 for changes.	N/A
	Southern Cross Healthcare Ltd.	1124.5	New provision proposed	<p><u>Current and future use of Wellington Regional Hospital (Ngā Puna Wai ora) and Southern Cross Hospital Wellington</u></p> <p><u>The safe and efficient operation, maintenance and repair, or upgrading and expansion of Wellington Regional Hospital (Ngā Puna Wai ora) and Southern Cross Hospital Wellington are not constrained or compromised by other activities.</u></p>		Changes sought.	<p>Noted but no change made. Previous reverse sensitivity policies in previous drafts were removed by the Integration Team on the basis that development around the Hospital will be assessed based on the surrounding zone objectives, policies and rules, and the hospital controls what uses can go within the zone as they own all the land. So reverse sensitivity not likely to be an issue.</p> <p>A lot of this proposed objective is covered by HOSZ-01 already.</p>	N/A
Policies	Southern Cross Healthcare Ltd.	1124.6	HOSZ-P3	<p>Mana Whenua</p> <p>Recognise and enable Taranaki Whānui and Ngāti Toa Rangatira cultural associations <u>at Wellington Regional Hospital</u> in the Hospital Zone by:</p> <p>1. Ensuring that use and development in the Zone <u>on the site</u> recognises and has regard to the historical and</p>		Changes sought.	Changes made. Agree with changes. See row #3 for changes.	N/A

				contemporary relationship between mana whenua and this site, the land, network of awa and the manaaki that Ngā Puna Wai ora (Wellington Regional Hospital) activities provide; 2. Managing new development adjoining scheduled sites of significance to tangata whenua; and 3. Collaborating on the design and incorporation of traditional cultural elements into public space within the zone <u>on the site</u> .								
	Southern Cross Healthcare Ltd.	1124.6	HOSZ-P4	Urban Form, Quality and Amenity Deliver high-quality new development, alterations and additions, and public spaces within the Hospital <u>hospital sites</u> to positively contribute to the distinctive form, quality and amenity of the Special Purpose Hospital Zone and adjoining zones by ensuring that, where relevant, it: ... 15. Has regard to the benefits and use of open space, landscaping and mature trees within the site on the streetscape, and on the character and visual amenity of the H ospital site and adjoining areas.		Changes sought.	Changes made. Agree with changes. See row #3 for changes.	N/A				
	Southern Cross Healthcare Ltd.	1124.6	HOSZ-P5	Resilience Encourage new development within the H ospital sites that: 1. Is sustainable, resilient and adaptable to change in use over time; and 2. Support Wellington Regional Hospital's <u>the hospitals'</u> role and function as <u>resilience anchors</u> during and after natural hazard events.		Changes sought.	Changes made. Agree with changes. See row #3 for changes. It's good resilience policy applies to all hospitals.	N/A				
Rules	Southern Cross Healthcare Ltd.	1124.7	HOSZ-R2	HOSZ-R2 All Other Activities 1. Activity status: Non-Complying <u>Discretionary</u>		Seeks that 'all other activities' are classed as Discretionary activities and not Non-Complying.	Change made. Understand the changes that are sought. The intent of the NC status was that Council see that these hospitals are very limited for space as is, particularly Wellington Regional Hospital and Council do not want other activities such as retirement homes, residential (not for staff), industrial etc. coming in and using prime hospital space which should be used for healthcare. However, Council believes changing to a Discretionary Activity will still safeguard these sites for primary and ancillary 'hospital activities' still. So Council is comfortable with proposed change.	<table border="1"> <thead> <tr> <th>HOSZ-R2</th> <th>All other activities</th> </tr> </thead> <tbody> <tr> <td></td> <td>1. Activity status: Discretionary</td> </tr> </tbody> </table>	HOSZ-R2	All other activities		1. Activity status: Discretionary
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Southern Cross Healthcare Ltd.	1124.8	HOSZ-R5	<p>HOSZ-R5 Additions and alterations to Buildings and Structures</p> <p>...</p> <p>2. Activity status: Restricted Discretionary</p> <p>Where:</p> <p>a. Compliance with the requirements of HOSZ-R5.1 cannot be achieved</p> <p>Matters of discretion are restricted to:</p> <p>Any relevant matters in HOSZ-P3, HOSZ-P4 and HOSZ-P5;</p> <p>1. The extent and effect of non-compliance with and relevant standard as specified in the associated assessment criteria for the infringed standard;</p> <p>2. The Centres and Mixed-Use Design Guide;</p> <p>3.2. The efficacy of landscaping proposed; and</p> <p>4.3. The extent to which any service elements (roof plant, exhaust and intake units and roof equipment) that could be viewed from the road or public open space zone can be integrated as part of the façade or roof of the building.</p> <p><u>For guidance on design outcomes, refer to the Centres and Mixed-Use Design Guide.</u></p> <p>Notification Status: An application for resource consent made in respect of rule HOSZ-R5.2 which results in non-compliance with HOSZ-S1 and HOSZ-S2 is precluded from being publicly notified.</p>		Southern Cross seek that the design guide is referred to via reference rather than a Matter of Discretion. It is assumed that Southern Cross seek that the Design Guide has less weight than it is proposed in the Draft Plan.	<p>No change. Disagree with the changes sought. The Centres and Mixed Use Design Guide is needed as a Matter of Discretion to ensure design review of adds and alts or construction of a new building resource consent applications.</p> <p>This is particularly important now that the design guide for the Hospital has been removed.</p>	N/A
Capital and Coast District Health Board	852.1	HOSZ-R5 and HOSZ-6	<p>We have previously expressed concern that the existing Institutional Precinct rules require resource consent for minor building additions and alterations if they are “visible from public spaces”. We are aware that Massey University and Victoria University of Wellington have expressed the same concerns. The problem stems from the District Plan definition of “public spaces” which is so wide that it includes anywhere within the campuses that is accessible by a pedestrian.</p> <p>The above problem can be addressed in HOSZ-R5 and HOSZ-R6 by replacing “public spaces” with “legal road” and adding “or are located 10m or more away from a legal road boundary”. This would strike a reasonable balance between retaining Council oversight of additions and alterations that could affect the streetscape but not catch additions and</p>		CCDHB seeks that the references to ‘not visible from public space’ in HOSZ-R5.1 and HOSZ-R6.1 be deleted and replaced by reference to legal road.	<p>No amendment sought. Whilst HOSZ-R5.1(ii) and HOSZ-R6.1(i) will capture a lot of additions and alterations or new construction and thus trigger the need for resource consent, WCC does not feel it is appropriate to remove this reference.</p> <p>The hospital site is visible from the Town Belt and any alterations or additions would be evident from the elevated town belt above the hospital. Likewise the hospital is visible to a large number of residential properties. Not having WCC design input on new adds and alts or construction could present high risk in terms of visual and dominance impacts.</p> <p>Just because its 10m away from a legal road, doesn't not mean it can't be witnessed at an elevated position from the Town Belt or a residential environment on a hill.</p>	

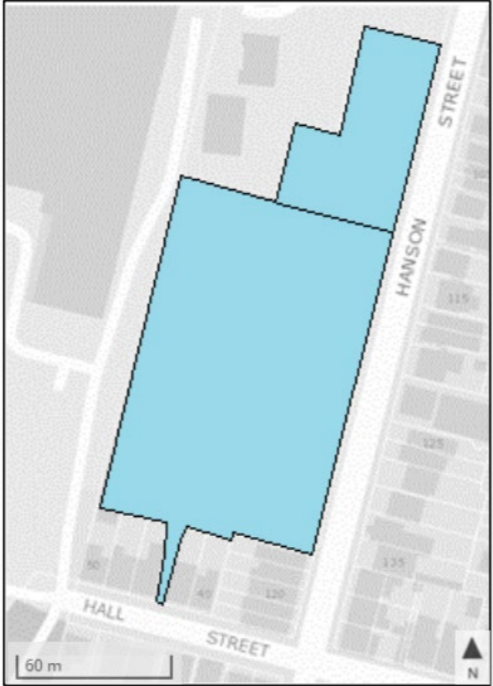
				d alterations that are well within the respective campuses.			Likewise Massey and Victoria University campuses are evident in Wellington's skyline and their buildings noticeable, so design review is necessary.	
Capital and Coast District Health Board	852.1	HOSZ-R5 and HOSZ-6	<p>The existing Operative Institutional Precinct provisions provide that the construction of new buildings, and additions and alterations that require resource consent, are assessed as a Controlled Activity with assessment limited to "design, external appearance, siting and verandahs" and "site access" for vehicles, and applications are non-notified/no written approvals required. In our experience, this has provided the Council with sufficient ability to control these aspects.</p> <p>It is relevant to note that new Hospital buildings, and additions and alterations to existing Hospital buildings at Hutt Hospital, that comply with the building height and location standards, are permitted activities i.e. they do not require resource consent. Accordingly, the existing Controlled Activity provisions that currently apply to our Newtown Campus are more onerous than for Hutt Hospital, and the DDP would make it significantly more onerous. We would therefore support the permitted status of Hospital Activities that comply with HOSZ-S1 and HOSZ-S2.</p> <p>We therefore oppose proposed rules HOSZ-R5.2 and HOSZ-R6.2 because:</p> <ul style="list-style-type: none"> • They would change the activity status of applications for resource consent for the construction of new buildings, and additions and alterations that require resource consent, from Controlled Activity to Restricted Discretionary. • They significantly extend the matters for assessment. There are so many and their scope so wide and unspecified that effectively what is proposed is an unrestricted discretionary assessment. • They extend the matters for assessment to effects beyond the Campus and therefore significantly expose applications to neighbours who will consider themselves to be adversely affected. • They appear to remove the provision for non-notified/no written approvals required. <p>HOSZ-R5.2 and HOSZ-R6.2 are therefore unnecessarily onerous and they will expose Hospital applications to significantly greater risk, delay, cost and uncertainty.</p> <p>There is no need for the Council to propose a stricter regime than currently exists. The existing Controlled Activity regime has been operative for 25 years and over that long time there have been no examples of Controlled Activity resource consents granted by the Council that we</p>		Change sought to reverse HOSZ-R5 and HOSZ-R6 back to the Operational District Plan approach of a Controlled Activity Status for adds, alts and construction of a new building.	<p>Changes made. The suggested activity change is supported as this aligns with direction given in the issues and options paper that there was no evidence to suggest that 'the Controlled Activity status for new building works has failed to implement the operative objectives and policies, or that greater regulatory stringency should be applied to overcome that'.</p> <p>The resource consent team are comfortable with retaining the Controlled Activity status for Wellington Regional Hospital (WRH), with design matters of control. This is particularly because WRH is bordered by roads and the Town Belt. However, retention of Restricted Discretionary Activity status for private hospitals is sought to be retained. This is because they are surrounded by residential zones, and they do not have the luxury of being bounded by roads like WRH.</p> <p>Changes made:</p> <ul style="list-style-type: none"> - Controlled Activity for Adds and Alts in Wellington Regional Hospital. - Restricted Discretionary for Adds and Alts in Private Hospitals - Controlled Activity status for Wellington Regional Hospital Construction of a new building - Restricted Discretionary Activity for construction of a new building at the private hospitals <p>HOSZ-R5 Additions and alterations to Buildings and Structures</p> <p>1. Activity status: Permitted</p> <p>Where:</p> <p>a. The proposed additions or alterations:</p> <ol style="list-style-type: none"> Do not alter the external appearance of the building or structure; or Are not visible from public spaces; and Compliance with Effects Standards HOSZ-S1 and HOSZ-S2 is achieved. 	<p>HOSZ-R5 Additions and alterations to buildings and structures</p> <p>1. Activity status: Permitted</p> <p>Where:</p> <ol style="list-style-type: none"> The additions or alterations: Do not alter the external appearance of the building or structure; or Are not visible from public spaces; or Do not increase the existing building footprint by more than 10%; and Compliance with Effects Standards HOSZ-S1 and HOSZ-S2 is achieved. <p>2. Activity status: Controlled</p> <p>Where:</p> <p>a. For the Wellington Regional Hospital Te Puna Wai Ora site compliance with the requirements of HOSZ-R5.1 cannot be achieved.</p> <p>Matters of control are:</p> <ol style="list-style-type: none"> Relevant matters in HOSZ-P3, HOSZ-P4 and HOSZ-P5; The Centres and Mixed-Use Design Guide; Design, external appearance, siting and verandahs; and The screening or integration of any service elements (roof plant, exhaust and intake units and roof equipment) that could be viewed from the road or public open space, as part of the façade or roof of the building. <p>Notification status: An application for resource consent made in respect of rule HOSZ-R5.2 is</p>	

			<p>are aware of that would (i) justify a greater level of control by the Council and (ii) justify exposing Hospital applications to the significantly greater risks, delays, costs and uncertainty.</p> <p>The Controlled Activity provisions were specifically included in the RMA to cater for critical activities like hospitals that were previously designated in District Plans and thus able to utilise the outline plan process so that proposed hospital works would have a high degree of certainty.</p> <p>We understand that a policy decision has been made at officer level to rid the District Plan of Controlled Activity rules. If this is the case, it is contrary to the RMA.</p> <p>We therefore seek retention of the existing Operative Controlled Activity regime for HOSZ-R5.2 and HOSZ-R6.2 matters with the existing two matters for control specified, and with a clear “non-notification” provision.</p>			<p>2. Activity status: Restricted Discretionary</p> <p>Where:</p> <p>a. Compliance with the requirements of HOSZ-R5.1 cannot be achieved</p> <p>Matters of discretion are restricted to:</p> <ol style="list-style-type: none"> 1. Any relevant matters in HOSZ-P3, HOSZ-P4 and HOSZ-P5; 2. The extent and effect of non-compliance with and relevant standard as specified in the associated assessment criteria for the infringed standard; 3. The Centres and Mixed-Use Design Guide; 4. The efficacy of landscaping proposed; and 5. The extent to which any service elements (roof plant, exhaust and intake units and roof equipment) that could be viewed from the road or public open space zone can be integrated as part of the façade or roof of the building. <p>Notification Status: An application for resource consent made in respect of rule HOSZ-R5.2 which results in non-compliance with HOSZ-S1 and HOSZ-S2 is precluded from being publicly notified.</p> <p>2. Activity status: Controlled</p> <p>Where:</p> <p>a. Compliance with the requirements of HOSZ-R5.1 cannot be achieved</p> <p>Matters of control:</p> <ol style="list-style-type: none"> 1. Relevant matters in HOSZ-P3, HOSZ-P4 and HOSZ-P5; 2. The Centres and Mixed-Use Design Guide; 3. Design, external appearance, siting and verandahs; 4. Landscaping; 5. The integration of any service elements (roof plant, exhaust and intake units and roof equipment) that could be viewed from the road or public open space, as part of the façade or roof of the building; 	<p>precluded from being either publicly or limited notified.</p> <p>3. Activity status: Restricted Discretionary</p> <p>Where</p> <p>a. For the Southern Cross Wellington Hospital, Bowen Hospital and Wakefield Hospital sites compliance with any of the requirements of HOSZ-R5.1 cannot be achieved.</p> <p>Matters of discretion are:</p> <ol style="list-style-type: none"> 1. Any relevant matters in HOSZ-P3, HOSZ-P4 and HOSZ-P5; 2. The extent and effect of non-compliance with HOSZ-S1 and HOSZ-S2; 3. The Centres and Mixed-Use Design Guide; 4. Design, external appearance, siting and verandahs; and 5. The screening or integration of any service elements (roof plant, exhaust and intake units and roof equipment) that could be viewed from the road or public space, as part of the façade or roof of the building. <p>Notification status: An application for resource consent made in respect of rule HOSZ-R5.3 is precluded from being publicly notified</p> <p>HOSZ-R6 Construction of new buildings and structures</p> <p>1. Activity status: Permitted</p> <p>Where:</p> <p>The new building or structure:</p>
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						<p>HOSZ-R6 Construction of new buildings and structures</p> <p>1. Activity status: Permitted</p> <p>Where:</p> <p>a. The new building or structure:</p> <p>i. Is not visible from a public space; and</p> <p>ii. Will have a gross floor area of less than 100m²; and</p> <p>b. Compliance with HOSZ-S1 HOSZ-S2 is achieved.</p> <p>2. Activity status: Restricted Discretionary</p> <p>Where:</p> <p>a. Compliance with any of the requirements of HOSZ-R6.1 cannot be achieved:</p> <p>Matters of discretion are restricted to:</p> <p>1. Any relevant matters in HOSZ-P3, HOSZ-P4, HOSZ-P5;</p> <p>2. The extent and effect of non-compliance with any relevant standard as specified in the associated assessment criteria for the infringed standards; and</p> <p>3. The Centres and Mixed-Use Design Guide;</p> <p>4. The efficacy of landscaping proposed; and</p> <p>5. The extent to which any service elements (e.g. roof plant, exhaust and intake units, and roof equipment) that could be viewed from the road or open space zone can be integrated as part of the façade or roof of the building.</p> <p>Notification Status: An application for resource consent made in respect of rule HOSZ-R6.2 which results in non-compliance with HOSZ-S1 and HOSZ-S2 is precluded from being publicly notified.</p> <p>2. Activity status: Controlled</p> <p>Where:</p> <p>b. Compliance with any of the requirements of HOSZ-R6.1 cannot be achieved:</p> <p>Matters of control:</p> <p>1. Relevant matters in HOSZ-P3, HOSZ-P4 and HOSZ-P5;</p> <p>2. The Centres and Mixed-Use Design Guide;</p>	<p>Is not visible from a public space; and</p> <p>Will have a maximum gross floor area of less than 500m²; and</p> <p>Compliance with HOSZ-S1 and HOSZ-S2 is achieved.</p> <p>Activity status: Controlled</p> <p>2. Where:</p> <p>For the Wellington Regional Hospital site, compliance with any of the requirements of HOSZ-R6.1 cannot be achieved:</p> <p>Matters of control are:</p> <p>Relevant matters in HOSZ-P3, HOSZ-P4 and HOSZ-P5;</p> <p>The Centres and Mixed-Use Design Guide;</p> <p>The extent and effect of non-compliance with HOSZ-S1 and HOSZ-S2;</p> <p>Design, external appearance, siting and verandahs;</p> <p>Integration of Crime Prevention Through Environment Design practices;</p> <p>Landscaping;</p> <p>The integration of any service elements (roof plant, exhaust and intake units and roof equipment) that could be viewed from the road or public open space, as part of the façade or roof of the building;</p> <p>Site access; and</p> <p>Loading and servicing; and Internal traffic circulation.</p> <p>Notification status: An application for resource consent made in respect of rule HOSZ-R6.2 is precluded from being limited notified.</p> <p>3. Activity status: Restricted Discretionary</p>
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						<ul style="list-style-type: none"> 3. <u>Design, external appearance, siting and verandahs;</u> 4. <u>Landscaping;</u> 5. <u>The integration of any service elements (roof plant, exhaust and intake units and roof equipment) that could be viewed from the road or public open space, as part of the facade or roof of the building;</u> 6. <u>Site access;</u> 7. <u>Loading and servicing;</u> 8. <u>Internal traffic circulation.</u> 	<p>Where:</p> <p>For the Southern Cross Wellington Hospital, Bowen Hospital and Wakefield Hospital sites compliance with any of the requirements of HOSZ-R6.1 cannot be achieved.</p> <p>Matters of discretion are:</p> <p>Any relevant matters in HOSZ-P3, HOSZ-P4 HOSZ-P5;</p> <p>The extent and effect of non-compliance with HOSZ-S1 and HOSZ-S2;</p> <p>The Centres and Mixed-Use Design Guide;</p> <p>Design, external appearance, siting and verandahs;</p> <p>Integration of Crime Prevention Through Environment Design practices;</p> <p>Landscaping;</p> <p>The extent to which any service elements (e.g. roof plant, exhaust and intake units, and roof equipment) that could be viewed from the road or open space zone can be integrated as part of the façade or roof of the building;</p> <p>Site access;</p> <p>Loading and servicing; and</p> <p>Internal traffic circulation.</p> <p>Notification status: An application for resource consent made in respect of rule HOSZ-R6.3 is precluded from being publicly notified.</p>
Capital and Coast District Health Board	852.1	HOSZ-R5 and HOSZ-6	We also support the principle that District Plan building and activity standards should be the means by which effects between sites and between zones should be managed, and that District Plan Design Guides and the associated assessment of design quality should be limited to on site design matters and should not include guidance that seeks to manage effects between sites and between zones. To do otherwise opens up scope for litigation, particularly around whether adjacent		Change sought	No direct change. The CCDHB's aspirations are noted. The Operative Plan provisions for Institutional Precincts are quite onerous of minimising and managing impacts on the surrounding zones. In the Draft and the new approach Council has tried to be more enabling of Hospital activities and development and focusing on internal effects. However, given Wellington Regional Hospital is surrounded by Open Space and Residential sites, consideration is still needed for ensuring effects do not extend beyond the	N/A

			neighbours to the Hospital are adversely affected by qualitative effects of Hospital building proposals.			boundary. The chapter seeks find a balance between enabling and mitigating effects.	
Capital and Coast District Health Board	852.1	HOSZ-R6.1	The maximum gross floor area in HOSZ-R6.1 is too low for the Hospital Campus. It is unlikely that this will enable the type of small scale new buildings that are anticipated by this rule, and we consider the revised HOSZ-R6.1 a i) proposed above to adequately meet the need for Council oversight of additions that could affect the streetscape.		Change sought to increase maximum gross floor area.	Agree that the Gross Floor Area limit is low. Consider changing HOSZ-R6 to: <u>HOSZ-R6 Construction of new buildings and structure</u> 1. <u>Activity status: Permitted</u> <u>Where:</u> <u>a. The new building or structure:</u> <u>i. is not visible from a public space; and</u> <u>ii. will have a maximum gross floor area of less than 500m²; and</u> <u>b. Compliance with HOSZ-S1 and HOSZ-S2 is achieved.</u> And Adds and Alts?	1. Activity status: Permitted Where: a. The new building or structure: i. Is not visible from a public space; and ii. Will have a maximum gross floor area of less than 500m ² ; and b. Compliance with <u>HOSZ-S1</u> and <u>HOSZ-S2</u> is achieved.
Southern Cross Healthcare Ltd.	1124.8	HOSZ-R6	HOSZ-R6 Construction of new buildings and structures 2. Activity status: Restricted Discretionary Where: a. Compliance with any of the requirements of HOSZ-R6.1 cannot be achieved: Matters of discretion are restricted to: 1. Any relevant matters in HOSZ-P3, HOSZ-P4, HOSZ-P5; 2. The extent and effect of non-compliance with any relevant standard as specified in the associated assessment criteria for the infringed standards; and 3. The Centres and Mixed-Use Design Guide; 4. <u>3.</u> The efficacy of landscaping proposed; and 5. <u>4.</u> The extent to which any service elements (e.g. roof plant, exhaust and intake units, and roof equipment) that could be viewed from the road or open space zone can be integrated as part of the façade or roof of the building.		Change sought	No change. Council disagrees with the changes sought. The Centres and Mixed Use Design Guide is needed as a Matter of Discretion to ensure design review of adds and alts or construction of a new building resource consent applications. This is particularly important now that the design guide for the Hospital has been removed.	N/A

				<p>For guidance on design outcomes, refer to the Centres and Mixed-Use Design Guide.</p> <p>Notification Status: An application for resource consent made in respect of rule HOSZ-R6.2 which results in non-compliance with HOSZ-S1 and HOSZ-S2 is precluded from being publicly notified.</p>				
Standards	Southern Cross Healthcare Ltd.	1124.9	HOSZ-S1	<p>HOSZ-S1 Maximum Height</p> <p>1. In relation to Wellington Regional Hospital (Ngā Puna Wai ora), the following maximum height limits above ground level must be complied with:</p> <p>2. In relation to Southern Cross Hospital Wellington, a maximum height limit of 21 meters above ground level must be complied with.</p> <p>SOUTHERN CROSS HOSPITAL WELLINGTON</p> 		Southern Cross are seeking that HOSZ-S1 applies to their site with a 21m height limit.	Changes made. See row #7. Agree with text changes sought. Amend to provide carve-out for Southern Cross. However, height limit is being reviewed and may vary from sought after 21m maximum.	N/A
	Capital and Coast District Health Board	852.1	HOSZ-S1	<p>The building height control provisions in HOSZ-S1 including the height control diagram is supported. However, the diagram should be extended to include 2 and 2A Coromandel Street within height control area 5 (21.0m), and the boundary between height control areas 2 and 4 should be moved 80m to the south.</p> <p>This is to include this area within height control area 4 (50.4m) so that it provides for the existing multi-storey buildings in this area, including the Central Services Building and the building occupied by Otago University medical activities.</p>		<ul style="list-style-type: none"> • CCDHB seeks that 2 and 2A Coromandel Street are given a maximum height control of 21m and that the Height Control Area 4 is extended on the Mein Street Edge. 	<p>Changes made, see row #7. Agree with the suggested extension by 80m of the Height Control Area 4 because this then adequately covers existing multi-storey development and doesn't split these existing developments. Doing so could make future additions and alterations difficult. This still leaves a 50+m separation between the new line and the road edge of Mein Street, providing a height step down buffer still.</p> <p>It has been agreed that for 2 and 2A Coromandel Street the maximum height limit will be 16.8m (the lowest proposed height for Wellington Regional Hospital under the Draft District Plan). This enables</p>	Changes made, see row #7.

							double the height that the Draft Plan currently enables for this area but also manages the impact on the adjacent open space and residential zones.											
Capital and Coast District Health Board	852.1	HOSZ-S2	The wording of HOSZ-S2 should be altered to clearly limit its application to only those boundaries that adjoin another Zone. This can be achieved by replacing “from all side and rear boundaries” with “from the adjoining boundary of a site not within the HOSZ”.			Wording change sought to ensure this standard only applies to when the boundaries adjoin other zones.	No change is needed as this standard only applies to sites that abut residential or open space sites as it is currently drafted, it does not apply to other Hospital Zoned sites anyhow.	N/A										
N/A	N/A	HOSZ-S2	N/A				<p>Changes made to HOSZ-S2:</p> <p>New recession planes and detail in table to reflect changes from the DDP to PDP across numerous chapters with regards to recession plane controls on MRZ, HRZ and Open Spaces (and to reflect the various Resi Zones heights).</p>	<p>Update to HOSZ-S2 to be consistent with other zones’ Height in relation to boundary wording, parameters etc. This was crafted by Tim (topic lead for Residential Zones).</p> <p>HOSZ-S2 Height in relation to boundary</p> <p>1. No part of any building or structure may project beyond the relevant recession plane shown below:</p> <table border="1"> <thead> <tr> <th>Location</th> <th>Recession Plane</th> </tr> </thead> <tbody> <tr> <td>Boundary adjoining any site within the MRZ with a height limit of 11m identified on the District Plan Maps</td> <td>60° measured from a height of 4m vertically above ground level</td> </tr> <tr> <td>Boundary adjoining any site within the MRZ with a height limit of 14m identified on the District Plan Maps</td> <td>60° measured from a height of 5m vertically above ground level</td> </tr> <tr> <td>Boundary adjoining any site within the HRZ</td> <td>60° measured from a height of 8m vertically above ground level</td> </tr> <tr> <td>Boundary adjoining any site within an Open Space Zone</td> <td>60° measured from a height of 5m vertically above ground level</td> </tr> </tbody> </table>	Location	Recession Plane	Boundary adjoining any site within the MRZ with a height limit of 11m identified on the District Plan Maps	60° measured from a height of 4m vertically above ground level	Boundary adjoining any site within the MRZ with a height limit of 14m identified on the District Plan Maps	60° measured from a height of 5m vertically above ground level	Boundary adjoining any site within the HRZ	60° measured from a height of 8m vertically above ground level	Boundary adjoining any site within an Open Space Zone	60° measured from a height of 5m vertically above ground level
Location	Recession Plane																	
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Boundary adjoining any site within the HRZ	60° measured from a height of 8m vertically above ground level																	
Boundary adjoining any site within an Open Space Zone	60° measured from a height of 5m vertically above ground level																	

								<p>2. In relation to the above, where the boundary forms part of a legal right of way, entrance strip, access site, or pedestrian access way, the height in relation to boundary applies from the farthest boundary of that legal right of way, entrance strip, access site, or pedestrian access way.</p> <p>This standard does not apply to:</p> <ul style="list-style-type: none"> a. A boundary with a road. b. Solar power or heating components provided these do not exceed the height in relation to boundary by more than 500mm. c. Chimney structures not exceeding 1.1m in width on any elevation and provided these do not exceed the height in relation to boundary by more than 1m. d. Satellite dishes, antennas, aerials, flues, and architectural features (e.g. finials, spires) provided these do not exceed 1m in diameter and do not exceed the height in relation to boundary by more than 1m measured vertically.
<p>Wind Chapter Rule application to Wellington Regional Hospital</p>	<p>Capital and Coast District Health Board</p>	<p>852.1</p>	<p>Wind rules</p>	<p>If it is intended that the wind provisions of the DDP are extended to cover the SPHZ, this is opposed.</p>		<p>Change sought.</p>	<p>Concern noted. However, this is addressed separately in the Wind Chapter and Wind Chapter and Wind Chapter DDP Submission table (attached to Wind Chapter S32 report). Council considers wind provisions are needed for the Tertiary and Hospital Zones but has applied a more enabling framework.</p>	<p>Updated references and wind rules added to the Wind chapter specific to HOSZ:</p> <p>Introduction:</p> <p>...</p> <p>For the Local Centre Zone, Neighbourhood Centre Zone, Metropolitan Centre Zone - excluding Height Control Area 1, Special Purpose Hospital Zone, and Special Purpose Tertiary Education Zone, a qualitative wind assessment is usually all that is required to show compliance with the wind standards. However, if a development is assessed to have a large negative impact on wind conditions, then a quantitative wind study may be required to enable the wind effects of the development to be fully understood.</p>

								<p>WIND-R1 Construction, alteration and additions to buildings and structures</p> <p>3. Activity status: Permitted</p> <p>Where development is adjacent to a public street:</p> <ol style="list-style-type: none"> a. New or altered buildings or structures are less than or equal to 12m in height above ground level; or b. Additions are less than or equal to 4m in height when measured from the highest point of the building or structure; or c. Rooftop additions are setback at least 3m from the building facades adjacent to public spaces and are less than 33% of the existing building volume; or d. Compliance with the following standards is achieved: <ol style="list-style-type: none"> i. WIND-S1; and ii. WIND-S2. <p>4. Activity status: Restricted Discretionary</p> <p>Where:</p> <ol style="list-style-type: none"> a. Compliance with WIND-R1.1 or WIND-R1.2 or WIND-R1.3 cannot be achieved <p>Matters of discretion are:</p> <ol style="list-style-type: none"> 1. The matters in WIND-P1, WIND-P2, WIND-P3 and WIND-P4; 2. The extent and effect of non-compliance with any relevant standard as specified in the associated assessment criteria for the infringed standard; 3. The extent of compliance with the quantitative wind study and qualitative wind assessment requirements included in {Link,11820,Appendix 8}; and
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								<p>4. The level of consistency with the Wind Chapter Best Practice Guidance Document (Appendix 14).</p> <p>Section 88 information requirements for applications:</p> <p>1. For the City Centre Zone, Stadium Zone, Port Zone, Multi-User Ferry Precinct, Inner Harbour Port Precinct, Waterfront Zone and Metropolitan Centre Zone – Height Control Area 1 and 2, applications under this rule must provide, in addition to the standard information requirements:</p> <ol style="list-style-type: none"> a. A wind report, which is based on the results of a quantitative wind study, must be submitted to show compliance with WIND-S1, WIND-S2, and WIND-S3; and b. The wind report must address the wind report information requirements set out in Appendix 8 WIND-A1 and: <ol style="list-style-type: none"> i. Be based on the results of testing that complies with the requirements given in Appendix 8 WIND-A1; ii. Show the effects of the proposed building upon all public spaces; iii. Compare the effects of the proposed building against the existing situation, except where the site is currently vacant. If the site is vacant, the proposed building must be compared against any building which existed on the site within the previous 5 years; iv. Where WIND-S1, WIND-S2, or
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								<p>where applicable WIND-S3, is not complied with, show how the proposed building most closely complies with these standards when compared to any other practical alternative building design (i.e. it is the optimum aerodynamic design for the site);</p> <p>v. Comply with the reporting requirements in Appendix 8 WIND-A1 and be consistent with the Wind Chapter Best Practice Guidance Document (Appendix 14); and</p> <p>vi. Be consistent with the proposed design in the resource consent application and any associated urban design analysis and landscaping proposals.</p> <p>2. For the Local Centre Zone, Neighbourhood Centre Zone, Metropolitan Centre Zone – excluding Metropolitan Centre Zone Height Control Area 1 and 2, Hospital Zone, and Tertiary Education Zone, applications under this rule must provide, in addition to the standard information requirements:</p> <p>a. A qualitative wind assessment, and certification must be submitted to show compliance with WIND-S1 and WIND-S2; and</p> <p>b. The qualitative wind assessment must:</p> <p>i. Be based on the expert opinion of a suitably qualified and experienced person; and</p>
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								<ul style="list-style-type: none"> ii. Consider the effects of the proposed building upon all public spaces; and iii. Detail the extent of compliance with WIND-S1 and WIND-S2; and iv. Comply with the reporting requirements in Appendix 8 WIND-A2 and be consistent with the 'rules of thumb' for estimating wind effects in the Wind Chapter Best Practice Guidance Document (Appendix 14); and v. Be consistent with the proposed design in the resource consent application and any associated urban design analysis and landscaping proposals.
Emission of noise from helicopter landing areas	Environmental Noise Analysis and Advice Service – Stephen Chiles	112.10	Noise-R6	<p>There is no rationale provided as to why this noise source should be permitted in the Hospital Zone with no controls. There is potential for significant harm to human health arising from helicopter noise.</p> <p>The noise effects of helicopters can often be significantly ameliorated by the specific location of a helicopter landing area and the flight paths. While both these matters can be constrained by aeronautical considerations and controls, the potential to avoid or minimise noise impacts on neighbours should at least be considered.</p> <p>It is submitted that helicopter landing areas in the Hospital Zone should be controlled activities with the matters of control being the location of the helicopter landing area within the site and the flight paths.</p>		Concern raised regarding noise rules applying to the Hospital Zone.	This applies to the Noise Chapter, with changes sought to the Noise Chapter itself. See Noise Chapter DDP submission table in Noise Chapter S32 report.	N/A

Internal review – Updates to P4	n/a	n/a	n/a	n/a			Changes to HOSZ-P4 through integration review	<p>Changes to Urban form, quality and amenity policy (P4) to align with changes made to Centres Zones with similar policies. Reflects decision to remove certain design guide matters (which have no rule hook in chapters) from policies, including:</p> <ul style="list-style-type: none"> • Visual interest of public space • Green house gas emissions • Water sensitive design • Storage. <p>The remaining deletions were because Council sought to streamline and make policy more compact.</p>	<p>Integration changes to HOSZ-P4:</p> <p>Urban Form, Quality and Amenity</p> <p>Deliver high-quality new development, alterations and additions, and public spaces within the <u>Hospital sites</u> to positively contribute to the distinctive form, quality and amenity of the Special Purpose Hospital Zone and adjoining zones by ensuring that, where relevant, it:</p> <ol style="list-style-type: none"> 1. Has regard to the location of existing and <u>potential</u> future primary and ancillary <u>hospital</u> activities; 2. Responds to the local context, particularly where the site is located adjoining: <ol style="list-style-type: none"> a. A scheduled site of significance to tangata whenua; b. A heritage building, heritage structure or heritage area; and c. A <u>Residential zone</u>; and d. or eOpen space zone. 3. Responds to any identified significant natural hazard risks and climate change effects, including the strengthening and adaptive reuse of existing buildings; 4. Maintains and, where possible, enhances existing informal pedestrian and cycling routes and creates new links that increase access and connectivity; 5. Achieves good accessibility for people of all ages and mobility and encourages social interaction; 6. Provides a safe environment for people that promotes a sense of security and allows <u>both formal and</u> informal surveillance; 7. Contributes to the visual interest of public space <u>within the zone</u>; 8. Incorporates green open space;
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								<p>9. Integrates with existing and planned active and public transport activity movement networks, including planned rapid transit stops;</p> <p>10. Connects with existing and planned public space;</p> <p>11. Supports reduction of greenhouse gas emissions by incorporating sustainable building technologies that increase energy efficiency;</p> <p>12. Incorporates water sensitive design measures;</p> <p>13. Incorporates high-quality visual and architectural quality design based on such factors as the form, scale, design and detailing of the building/structure or building additions/alterations;</p> <p>14. <u>Enhances the quality of the streetscape and the private/public interface; and</u></p> <p>14. Provides storage and/or service areas that are screened from public view; and</p> <p>15. Has regard to the benefits and use of open space, landscaping and mature trees within the site on the streetscape, and on the character and visual amenity of the Hhospital sites and adjoining areas.</p>
Internal review – Updates to HOSZ- R2	n/a	n/a	n/a	n/a		Changes to HOSZ-R2 through integration review	Decision made to revert the catch-all 'All Other Activities' rule from Non-Complying Activity Status to Discretionary Activity. This is to ensure future changes in activities, technology etc. can be provided for more easily than a NC status. However, this still sends a strong message with DA status.	<p>HOSZ-R2 All Other Activities</p> <p>1. Activity status: Non-Complying</p> <p>1. Activity status: Discretionary</p>

Tertiary Education Zone– Draft District Plan Consultation

Submission #	Submitter	Submission Point/s#	Submission Summary	Change/s Sought		Proposed Change/s (Note: specific text changes sought are either <u>underlined</u> or struck through)	Response	Final changes in ePlan
				Y	N			
1131	Waka Kotahi	1131.27	Supports retention of Policy 6.4			N/A	Support noted. No response needed.	N/A
1129	Ministry of Education Te Tahuu o Te Matauranga	1129.4	Supports definition of 'Educational Facility' as it is consistent with the definition included in the National Planning Standards.			N/A	Support noted. No response needed.	N/A
1129	Ministry of Education Te Tahuu o Te Matauranga	1129.19	Supports: <ul style="list-style-type: none"> • TERT-O1 • TERT-O3 • TERT-O4 • TERT-P1 • TERT-P2 • TERT-P4 • TERT-R1 • TERT-R2 			N/A	Support noted. No response needed.	N/A
403	Matthew Plummer	403.1	<p>Concerned that growth in Wellington's tertiary sector has been driven with little thought to where the students will live. Concerned regarding lack of student accommodation closer to Wellington's major tertiary campuses.</p> <p>Wellington needs more 'Halls of Residence' in Te Aro so student budgets aren't gobbled up by bus fares and heating bills for young people living some distance from their campuses in perfectly decent houses that should be enjoyed by families.</p>			N/A	<p>Concern noted. However, no change. The provisions support student accommodation requirements and the need to provide for a range of accommodation types under TEDZ-P4 and the definition of 'Tertiary Education Facilities', which includes student accommodation activities and the activity is thus permitted under TEDZ-R1 already.</p> <p>Student accommodation is enabled in other key zones like Residential Zones and the City Centre Zone under 'residential activities' policy and rules. Resource consent would be required for building construction or additions or alterations to existing buildings to enable this.</p>	N/A

857	Paula Warren	857.6	Concerned about the block size of development in the city– notes the Kelburn campus as an example.		N/A	No response needed. Not specific to Tertiary Zone.	N/A
876	Te Herenga Waka, Victoria University of Wellington - David Stevenson	876.1.	A Special Purpose Tertiary Education Zone for the Kelburn Campus is supported.		N/A	Support noted. No response needed.	N/A
		876.2.	The building height control provisions in TERT-S1 including the height control diagram is supported.		N/A	Support noted. No response needed.	N/A
		876.3.	The Special Purpose Tertiary Education Zone and the height control diagram should be extended to include the “McLean” site at 318 The Terrace. This site is owned by VUW and will be utilized for university purposes.		Diagram and mapping additions to include another of the university’s buildings.	No change due to current context and processes in play.	N/A
		876.4.	The definition of “Tertiary Education Facility” is supported. Would like to include “ancillary food, beverage and retail” to cover activities such as the existing University bookshop, existing food and beverage shops.		Definition addition.	<p>Change incorporated but only as an ancillary activity.</p> <p>means land or buildings used for tertiary education and research activities</p> <p>Includes:</p> <ul style="list-style-type: none"> a. classrooms, lecture theatres and other facilities dedicated to learning; b. staff and student facilities, including student and staff support services, student union offices, student and staff clubs and organisations; c. research and innovation facilities; d. marae activities and facilities; e. spiritual facilities; f. laboratories; g. libraries; h. sport and recreation activities and facilities; i. student accommodation activities j. any ancillary activity necessary for the effective operation of the University sites which includes: <ul style="list-style-type: none"> i. office activities; ii. commercial activities iii. food, beverage and retail activities; iv. staff facilities; v. operation and maintenance support facilities including laundries, printing and publishing, telecommunications and broadcasting, kitchens, cafeterias, refreshment facilities, generators, substations, plant and vehicle depots, storage facilities and workshops; vi. childcare services; vii. conference facilities; viii. community use of tertiary education facilities; ix. healthcare activities; x. entertainment facilities; 	N/A

						<ul style="list-style-type: none"> xi. light manufacturing; xii. car parking for staff, students and visitors; and xiii. emergency service facilities. 	
		876.5.	<p>Submitter is opposed to Wind objectives, policies and rules and the application of these wind effect rules to the Special Purpose Tertiary Education Zone.</p> <p>“We are unaware of any widespread and/or significant existing adverse wind effects that would justify extending Council control of wind effects to include the campus”</p>		<p>Provide information for Vic Uni re: Wind measures specific to the tertiary precinct.</p>	<p>Concern noted. However, this is addressed separately in the Wind Chapter and Wind Chapter and Wind Chapter DDP Submission table (attached to Wind Chapter S32 report). Council considers wind provisions are needed for the Tertiary and Hospital Zones but has applied a more enabling framework.</p>	<p>Updated references and wind rules added to the Wind chapter specific to TERT:</p> <p>Introduction:</p> <p>...</p> <p>For the Local Centre Zone, Neighbourhood Centre Zone, Metropolitan Centre Zone - excluding Height Control Area 1, Special Purpose Hospital Zone, and Special Purpose Tertiary Education Zone, a qualitative wind assessment is usually all that is required to show compliance with the wind standards. However, if a development is assessed to have a large negative impact on wind conditions, then a quantitative wind study may be required to enable the wind effects of the development to be fully understood.</p> <p>WIND-R1 Construction, alteration and additions to buildings and structures</p> <p>4. Activity status: Permitted</p> <p>Where development is adjacent to a public street:</p> <ul style="list-style-type: none"> e. New or altered buildings or structures are less than or equal to 12m in height above ground level; or f. Additions are less than or equal to 4m in height when measured from the highest point of the building or structure; or g. Rooftop additions are setback at least 3m from the building facades adjacent to public spaces and are less than 33% of the existing building volume; or h. Compliance with the following standards is achieved: <ul style="list-style-type: none"> i. WIND-S1; and ii. WIND-S2. <p>5. Activity status: Restricted Discretionary</p> <p>Where:</p>

							<p>a. Compliance with WIND-R1.1 or WIND-R1.2 or WIND-R1.3 cannot be achieved</p> <p>Matters of discretion are:</p> <ol style="list-style-type: none"> 5. The matters in WIND-P1, WIND-P2, WIND-P3 and WIND-P4; 6. The extent and effect of non-compliance with any relevant standard as specified in the associated assessment criteria for the infringed standard; 7. The extent of compliance with the quantitative wind study and qualitative wind assessment requirements included in {Link,11820,Appendix 8}; and 8. The level of consistency with the Wind Chapter Best Practice Guidance Document (Appendix 14). <p>Section 88 information requirements for applications:</p> <ol style="list-style-type: none"> 3. For the City Centre Zone, Stadium Zone, Port Zone, Multi-User Ferry Precinct, Inner Harbour Port Precinct, Waterfront Zone and Metropolitan Centre Zone – Height Control Area 1 and 2, applications under this rule must provide, in addition to the standard information requirements: <ol style="list-style-type: none"> a. A wind report, which is based on the results of a quantitative wind study, must be submitted to show compliance with WIND-S1, WIND-S2, and WIND-S3; and b. The wind report must address the wind report information requirements set out in Appendix 8 WIND-A1 and: <ol style="list-style-type: none"> i. Be based on the results of testing that complies with the requirements given in Appendix 8 WIND-A1; ii. Show the effects of the proposed building upon all public spaces; iii. Compare the effects of the proposed building against the existing situation, except where the site is currently vacant. If the site is vacant, the proposed building must be compared against any building which existed
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								<ul style="list-style-type: none"> iv. on the site within the previous 5 years; Where WIND-S1, WIND-S2, or where applicable WIND-S3, is not complied with, show how the proposed building most closely complies with these standards when compared to any other practical alternative building design (i.e. it is the optimum aerodynamic design for the site); v. Comply with the reporting requirements in Appendix 8 WIND-A1 and be consistent with the Wind Chapter Best Practice Guidance Document (Appendix 14); and vi. Be consistent with the proposed design in the resource consent application and any associated urban design analysis and landscaping proposals. <p>4. For the Local Centre Zone, Neighbourhood Centre Zone, Metropolitan Centre Zone – excluding Metropolitan Centre Zone Height Control Area 1 and 2, Hospital Zone, and Tertiary Education Zone, applications under this rule must provide, in addition to the standard information requirements:</p> <ul style="list-style-type: none"> a. A qualitative wind assessment, and certification must be submitted to show compliance with WIND-S1 and WIND-S2; and b. The qualitative wind assessment must: <ul style="list-style-type: none"> i. Be based on the expert opinion of a suitably qualified and experienced person; and ii. Consider the effects of the proposed building upon all public spaces; and iii. Detail the extent of compliance with WIND-S1 and WIND-S2; and iv. Comply with the reporting requirements in Appendix 8 WIND-A2 and be consistent with the 'rules
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							of thumb' for estimating wind effects in the Wind Chapter Best Practice Guidance Document (Appendix 14) ; and v. Be consistent with the proposed design in the resource consent application and any associated urban design analysis and landscaping proposals.
876.6.	Concerns about the use of the District Plan's definition of "public spaces" which is "so wide that it includes anywhere within the campuses that is accessible by a pedestrian".			<ul style="list-style-type: none"> • Submitter seeks an amendment to TERT-R5.1.ii Additions and Alterations to Buildings and Structures rule, in particular the reference to "are not visible from public spaces". • Submitter seeks an amendment to replace "public spaces" with "legal road" and adding "or located 10m away from a legal road boundary". 	Concern acknowledged. However, no change made as this will enable development with no input from WCC's urban design advisors. This potentially could mean buildings of inappropriate bulk, scale and design could be permitted which could potentially have an impact on neighbouring properties, the streetscape and Wellington's skyline. Both campuses are situated on hills and are highly visible.	N/A	
876.7.	Submitter seeks that the Operative District Plan provision relating to curtilage of the heritage listed Hunter Building is retained, so that works outside of the curtilage are not unnecessarily subject to the heritage rules of the Plan.			Heritage chapter to consider the retention of the heritage listing of the Hunter Building	Concern noted. The Operative District Plan's curtilage requirements have been retained. This is addressed separately in the Historic Heritage chapter.	N/A	
876.8.	The wording of TERT-S2 should be altered to clearly limit its application to only those boundaries that adjoin another Zone.			Changing the wording of TERT-S2. Suggests: "This can be achieved by replacing "from all side and rear boundaries" with "from the adjoining boundary of a site not within the TERT"."	No change. Council believes that the wording in TERT-S2 is sufficiently clear in that it only applies to boundaries within other zones (not within the site).	N/A	
876.9.	Submitter opposes TERT-R5.2 and TERT-R6.2. Would like the retention of the existing Operative Controlled Activity with the existing two matters for control specified, and with a "non-notification" provision. Supports the principle that building and activity standards should be the means by which effects between sites and between zones should be managed,			Want to retain the Operative DP's provisions which TERT-R5.2 and TERT-R6.2 replace. Wants to have consideration of what the Design Guides can control.	No change. Controlled Activity status was considered as per submission. However, Council is concerned that this would not provide for sufficient assessment opportunity by Council of the proposal if a Controlled Activity compared to a Restricted Discretionary activity. These sites are within the Wellington Skyline and visible from Open Spaces and Residential environments so having more discretion to manage built form, bulk, siting, design is important for Council to ensure good outcomes.	N/A	

			Believes that District Plan Design Guides and the associated assessment of design quality should be limited to on site design matters and should not include guidance that seeks to manage effects between sites and between zones.				
		876.10.	The existing Operative Institutional Precinct provisions provide that the construction of new buildings, and additions and alterations that require resource consent, are assessed as a Controlled Activity, assessment is limited to and “site access” for vehicles, and applications are non-notified/no written approvals required. Opposes proposed rules TERT-R5.2 and TERT-R6.2		Want to retain the Operative DP’s provisions which TERT-R5.2 and TERT-R6.2 replace.	No change. See above.	N/A
Massey University Engagement Feedback							
N/A	Massey University	n/a	With regards the definition of “Tertiary Education facilities activities (see below) maybe the solution is to take out the word “ancillary” and add the words “but not limited to” at the end of bullet point j. <small>means land or buildings used for tertiary education and research activities Includes: a. classrooms, lecture theatres and other facilities dedicated to learning; b. staff and student facilities, including student and staff support services, student union offices, student societies and innovation facilities; c. research and innovation facilities; d. marae activities and facilities; e. spiritual facilities; f. laboratories; g. libraries; h. sport and recreation activities and facilities; i. student accommodation activities; j. any ancillary activity necessary for the effective operation of the University sites which includes: i. office activities; ii. commercial activities; iii. staff facilities; iv. operation and maintenance support facilities including laundries, printing and publishing, telecommunication facilities, generators, substations, plant and vehicle depots, storage facilities and workshops; v. childcare services; vi. conference facilities; vii. community use of tertiary education facilities; viii. healthcare activities; ix. entertainment facilities; x. light manufacturing; xi. car parking for staff, students and visitors; and xii. emergency service facilities.</small>		N/A	No change. Council does not believe that this is necessary as use of the word ‘ancillary’ is widely undertaken in the Plan and is best practice.	N/A
			TERT-01 – clarity that this does not require Massey & Victoria to coordinate between themselves.		N/A	No change. This is not the intent of the objective and it does not read this way from Council’s perspective.	N/A
			Tert 03 – redraft to clarify no coordination between Massey and VUW		N/A	No change. This is not the intent of the objective and it does not read this way from Council’s perspective.	N/A
			TERT-P3 point 3. – clarify what this refers to.		Add a Matter of Discretion.	Change made. Add DR matter of discretion to TEDZ-R7.2: The outcomes of any consultation undertaken with Mana Whenua 2. Activity status: Restricted Discretionary	Change removed (so no end change). This has since been removed through integration as it was felt that this is inconsistent with drafting in the rest of the Plan and could potentially be overly onerous on the applicant and Mana Whenua.

					<p>Where:</p> <p>a. Compliance with any of the requirements of TERT-R76.1 cannot be achieved:</p> <p>Matters of discretion are restricted to:</p> <ol style="list-style-type: none"> 1. Any relevant matters in TERT-P3, TERT-P4, TERT-P5, TERT-P6, and TERT-P7 and TERT-P8; 2. The extent and effect of non-compliance with any relevant standard as specified in the associated assessment criteria for the infringed standards; 3. <u>The outcomes of any consultation undertaken with mana whenua;</u> 3. The Centres and Mixed-Use Design Guide; and 4. The extent to which any service elements (e.g. roof plant, exhaust and intake units, and roof equipment) that could be viewed from the road or open space zone can be <u>screened or</u> integrated as part of the façade or roof of the building. 	
				N/A	No change.	N/A
				N/A	No change – intentionally open for interpretation.	N/A
				N/A	No change – submitter's GFA is inappropriate/ far too large and would have serious implications on bulk and form outcomes, adverse effects on surrounding properties, impacts on the skyline etc.	N/A
				N/A	<p>No change to rules. However, a change has been made to policies with a new policy – TEDZ-P8 added to provide specific policy direction for National War Memorial:</p> <p>TEDZ-P8 National War Memorial</p> <p>Recognise the nationally and regionally significant values and function of the National War Memorial within the Massey University Mt Cook campus, including:</p> <ol style="list-style-type: none"> 1. The landmark status of the National War Memorial including the Carillon, Tomb of the Unknown Warrior, Hall of Memories, pool, steps and forecourt; 2. The unique relationship between the National War Memorial and Pukeahu National War Memorial Park; 3. The location for major ceremonial occasions and a place where people can visit for reflection and remembrance at any time; and. 	N/A

						4. The unobstructed ridgetop setting with associated open space, established trees and pedestrian networks.																							
						N/A	No change. The GFA is meant to be restrictive to control design outcomes	N/A																					
						N/A	No change. Meant to be restrictive to control design outcomes because both campuses are visible in the Wellington skyline and to open spaces and residential environments. Council has been more enabling re interior works and maintenance works.	N/A																					
					Heights have been re-assed with urban design team.		<p>Heights have been assessed and some increases made.</p> <p>Changed from:</p> <p>Vic Uni:</p> <table border="1"> <tr> <td>Height Control Area 1</td> <td>25.2 metres</td> <td>25.5 metres</td> </tr> <tr> <td>Height Control Area 2</td> <td>33.6 metres</td> <td>34 metres</td> </tr> <tr> <td>Height Control Area 3</td> <td>50.4 metres</td> <td>50.5 metres</td> </tr> <tr> <td>Height Control Area 4</td> <td>N/A</td> <td>21.0 metres</td> </tr> </table> <p>Massey Uni:</p> <table border="1"> <tr> <td>Height Control Area 1</td> <td>25.2 metres</td> <td>25.5 metres</td> </tr> <tr> <td>Height Control Area 2</td> <td>33.6 metres</td> <td>38 metres</td> </tr> <tr> <td>Height Control Area 3</td> <td>50.4 metres</td> <td>29.5 metres</td> </tr> </table>	Height Control Area 1	25.2 metres	25.5 metres	Height Control Area 2	33.6 metres	34 metres	Height Control Area 3	50.4 metres	50.5 metres	Height Control Area 4	N/A	21.0 metres	Height Control Area 1	25.2 metres	25.5 metres	Height Control Area 2	33.6 metres	38 metres	Height Control Area 3	50.4 metres	29.5 metres	N/A
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					TERT-R5 – visibility for “public spaces”, and the 100m2 GFA will be restrictive for Massey – need to be amended.																								
					Redraft ‘visible from a public space’ requirement because every building is!																								
					Height controls over the yellow shaded area and the green area over the proposed film studio, are too low for future development plans.																								

								<p>including the strengthening and adaptive reuse of existing buildings;</p> <ol style="list-style-type: none"> 4. Maintains and, where possible, enhances existing informal pedestrian and cycling routes and creates new links that increase access and connectivity; 5. Achieves good accessibility for people of all ages and mobility and encourages social interaction; 6. Provides a safe environment for people that promotes a sense of security and allows both formal and informal surveillance; 7. Contributes to the visual interest of public space; 8. Incorporates green open space; 9. Integrates with existing and planned active and public transport activity movement networks, including planned rapid transit stops; 10. Enhances the quality of the streetscape and the private/public interface; 11. Connects with existing and planned public space; 12. Supports reduction of greenhouse gas emissions by incorporating sustainable building technologies that increase energy efficiency; 13. Incorporates water sensitive design measures; 14. Requires storage and/or service areas that are screened from public view; and 15. Has regard to the benefits and use of open space, landscaping and mature trees within the site on the streetscape, and on the character and visual amenity of the Victoria University's Kelburn campus and Massey University's Mt Cook campus and adjoining areas. 				
Internal review updates to TEDZ-S2 HIRB	n/a	n/a	n/a	n/a	n/a	Changes made to TEDZ-S2	<p>Changes made to TEDZ-S2:</p> <p>New recession planes and detail in table to reflect changes from the DDP to PDP across numerous chapters with regards to recession plane controls on MRZ, HRZ and Open Spaces (and to reflect the various Residential Zones heights).</p>	<p>Update to TEDZ-S2 to be consistent with other zones' Height in relation to boundary wording, parameters etc.</p> <p>TEDZ-S2 Height in relation to boundary</p> <ol style="list-style-type: none"> 1. No part of any building or structure may project beyond the relevant recession plane below: <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 50%;">Location</th> <th style="width: 50%;">Recession Plane</th> </tr> </thead> <tbody> <tr> <td> </td> <td> </td> </tr> </tbody> </table>	Location	Recession Plane		
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