

**SUBMISSION ON THE QUEENSTOWN LAKES DISTRICT COUNCIL PROPOSED
DISTRICT PLAN 2015**

To: Queenstown Lakes District Council
Private Bag 50072
QUEENSTOWN 9348

Attention: Proposed District Plan Submission

From: Southern District Health Board
Private Bag 1921
DUNEDIN 9054

(Please note the different address for service)

The Southern District Health Board (the SDHB) hereby makes a submission on the Queenstown Lakes District Council (QLDC) Proposed District Plan (the Plan).

The SDHB is partially supportive and partially opposed regarding the Plan and would like to comment on a number of matters.

The Role of the SDHB

The SDHB was formed on 1 May 2010 and was created as the result of the merger of Southland and Otago DHBs. SDHB is the Government-funded organisation responsible for most publicly funded primary health and hospital services in the Southland and Otago regions of New Zealand. The former Southland DHB and Otago DHB were two of 21 district health boards that were established nationally on January 1, 2001 under the NZ Public Health and Disability Act 2000 (NZPHD). Southern DHB has a staff of approximately 4,500 and is governed by a Board made up of both publicly elected and government appointed members. The Board is accountable to the Minister of Health.

SDHB are responsible for planning, funding and providing health and disability services to a population of over 304,268 located south of the Waitaki River. SDHB's catchment area encompasses Invercargill City, Queenstown Lakes District, Gore, rural Southland, Clutha, Central Otago, Maniototo, Waitaki District and Dunedin City.

Lake District Hospital

Lake District hospital has been established on its current site since 1989 and is the only hospital servicing the Queenstown Lakes District Council area. The site and buildings are considered to be critical infrastructure for Queenstown.

Submission

Definitions

The proposed definition of Community Activity and the definition of Community Facility in the Proposed Plan as both definitions include hospital activities and other health and medical care activities.

The definitions as notified are as follows:

Community Activity as – “Means the use of land and buildings for the primary purpose of health, welfare, care, safety, education, culture and/or spiritual wellbeing. Excludes recreational activities. A community activity includes schools, **hospitals, doctors surgeries and other health professionals**, churches, halls, libraries, community centres, police stations, fire stations, courthouses, probation and detention centres, government and local government offices.”

Note: emphasis added.

The SDHB **supports** the definition of Community Activity

Community Facility is defined as: *In relation to a community facility sub-zone means the use of land and/or buildings for **Health Care services, Hospital activities, ambulance facilities, elderly person housing and carparking and residential accommodation ancillary to any of these activities.***

Note: emphasis added.

The wording to describe similar activities in each definition is confusing and not consistent. The Community Facility definition also refers to the “community facility sub-zone” this sub zone does not appear in the Proposed Plan and therefore the definition is considered redundant and does not relate to or define the term where it is mentioned in the Proposed Plan. The SDHB therefore **opposes** the term and definition of Community Facility and seeks this definition to be deleted **unless** a Community Facility Subzone (or similar) be included within the Proposed Plan and over the hospital site.

Proposed Low Residential Zone Relevant Objectives and Policies

The proposed underlying zone for the Lakes District Hospital Zone is Low Density Residential. This is a change from the Community Facility Sub Zone for the site in the Operative Plan which recognised and provided for hospital activities on the site subject to performance standards.

The change in the zoning has the following objectives and policies that seek to provide for community activities including hospitals in the Low Density Residential Zone. The SDHB support in part the following proposed objectives and policies subject to a couple of minor change.

The relevant Proposed Plan objectives and policies for Community Activities and facilities for the Low Density Residential Area are as follows:

Objective – 7.2.6 Provide for community activities ~~and facilities~~ that are generally best located in a residential environment close to residents.

Policies

7.2.6.1: Enable the establishment of community ~~facilities and~~ activities where adverse effects on residential amenity values such as noise, traffic, lighting, glare and visual impact can be avoided **remedied** or mitigated.

7.2.6.2: Ensure any community uses occur in areas which are capable of accommodating traffic, parking and servicing to a level which maintains residential amenity.

7.2.6.3: Ensure any community **activities** ~~uses or facilities~~ are of a design, scale and appearance compatible with a residential context.

Overall the SDHB **support** (subject to some minor wording changes) the objectives and policies listed above as they seem reasonable and set the background support to provide for Community Activities in the Low Density Residential Zone.

The suggested minor wording changes include:

- The removal of the works '~~and facilities~~' from the relevant objectives and policies listed above to ensure that the activities provided for and definition of Community Activities remains unambiguous; and
- The addition of the word '**remedied**' to policy 7.2.6.1 to ensure the effects of the development of any Community activity are addressed.

Proposed Low Density Residential Zone Rule 7.4.8

The objective and policies for Community Activities in the Low Density Residential Zone are very clear on what effects the Council are seeking to control. As a result the proposed "discretionary" activity status as suggested in rule 7.4.8 seems to be out of context with the policy context. As a result the SDHB **opposes** this activity status for Community Activities as any development of the hospital site will require resource consent.

The SDHB considers the proposed new zoning and in particular rule 7.4.8 does not recognise the critical importance of the Lakes District Hospital and its services to the Central Otago community. The Proposed Plan as notified will require the SDHB to gain resource consent for all developments on site with the associated cost of doing so. The cost of these applications will come out of the same funding used to deliver hospital and health services to the community. The SDHB consider this money would be better spent in the delivery of health and hospital services to the local community rather than potentially unnecessary resource consent applications.

As a result the SDHB consider the Proposed Plan as notified does not provide for the ongoing sustainable management of the Lakes District Hospital site.

SDHB therefore seeks to have the Community Activities become a permitted activity subject to performance standards within the Low Density Residential Zone and/or have a Community Facilities/ Activities Sub-Zone reinstated in the Proposed and over the Lakes District Hospital site similar to that in the Operative District Plan.

Summary of Relief Sought:

1. The SDHB supports the definition of Community Activity;
2. The SDHB seeks the deletion of the definition Community Facility and reference to this term in the Proposed plan unless a community facility sub-zone is reinstated in the proposed plan and over the hospital site;
3. The SDHB seeks the reinstatement of the Community Facility zone (or similar) within the Proposed Plan and over the Lakes District Hospital Site where subject to performance standards the development of the hospital site is a permitted activity; and /or.
4. Community Activities activity status is changed from discretionary to permitted in the Low Density Residential Zone;
5. Any consequential changes to fulfil the intent of this submission.

The SDHB does wish to be heard in support of its submission.

Signed  Date: 23 October 2015

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On behalf of the Southern District Health Board

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