

I hereby give notice that a hearing by commissioners will be held on:

Date: Friday 16 June 2023

Time: 9.30am

Meeting room: Reception Lounge Venue: Auckland Town Hall

Level 2

301 Queen Street, Auckland Central

PRIVATE PLAN CHANGE 75 HEARING REPORT

3A, 81A AND 119A CARRINGTON ROAD, MOUNT ALBERT (MASON CLINIC)

TE WHATU ORA – HEALTH NEW ZEALAND (WAITEMATĀ)

COMMISSIONERS

Chairperson Robert Scott
Commissioners Kim Hardy

Philip Brown

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Note: The reports contained within this document are for consideration and should not be construed as a decision of Council. Should commissioners require further information relating to any reports, please contact the hearings advisor.

WHAT HAPPENS AT A HEARING

Te Reo Māori and Sign Language Interpretation

Any party intending to give evidence in Māori or NZ sign language should advise the hearings advisor at least ten working days before the hearing so a qualified interpreter can be arranged.

Hearing Schedule

If you would like to appear at the hearing please return the appearance form to the hearings advisor by the date requested. A schedule will be prepared approximately one week before the hearing with speaking slots for those who have returned the appearance form. If changes need to be made to the schedule the hearings advisor will advise you of the changes.

Please note: during the course of the hearing changing circumstances may mean the proposed schedule may run ahead or behind time.

Cross Examination

No cross examination by the applicant or submitters is allowed at the hearing. Only the hearing commissioners are able to ask questions of the applicant or submitters. Attendees may suggest questions to the commissioners and they will decide whether or not to ask them.

The Hearing Procedure

The usual hearing procedure is:

- **The chairperson** will introduce the commissioners and will briefly outline the hearing procedure. The Chairperson may then call upon the parties present to introduce themselves. The Chairperson is addressed as Madam Chair or Mr Chairman.
- The applicant will be called upon to present their case. The applicant may be represented by legal counsel or consultants and may call witnesses in support of the application. After the applicant has presented their case, members of the hearing panel may ask questions to clarify the information presented.
- **Submitters** (for and against the application) are then called upon to speak. Submitters' active participation in the hearing process is completed after the presentation of their evidence so ensure you tell the hearing panel everything you want them to know during your presentation time. Submitters may be represented by legal counsel or consultants and may call witnesses on their behalf. The hearing panel may then question each speaker.
 - Late submissions: The council officer's report will identify submissions received outside
 of the submission period. At the hearing, late submitters may be asked to address the
 panel on why their submission should be accepted. Late submitters can speak only if
 the hearing panel accepts the late submission.
 - Should you wish to present written evidence in support of your submission please ensure you provide the number of copies indicated in the notification letter.
- **Council Officers** will then have the opportunity to clarify their position and provide any comments based on what they have heard at the hearing.
- The applicant or their representative has the right to summarise the application and reply to matters raised by submitters. Hearing panel members may further question the applicant at this stage. The applicants reply may be provided in writing after the hearing has adjourned.
- The chair will outline the next steps in the process and adjourn or close the hearing.
- If adjourned the hearing panel will decide when they have enough information to make a
 decision and close the hearing. The hearings advisor will contact you once the hearing is
 closed.

Please note

- that the hearing will be audio recorded and this will be publicly available after the hearing
- catering is not provided at the hearing.



A NOTIFIED PRIVATE PLAN CHANGE TO THE AUCKLAND UNITARY PLAN BY TE WHATU ORA – HEALTH NEW ZEALAND (WAITEMATĀ)

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Reporting officer, Elisabeth Laird, Planner

This private plan change seeks to re-zone 3A and 119A Carrington Road from Business – Mixed Use zone to Special Purpose – Healthcare Facility and Hospital zone and amend provisions and plans in the Wairaka Precinct.

APPLICANT: TE WHATU ORA – HEALTH NEW ZEALAND (WAITEMATĀ)

SUBMITTERS:		
Page 94	The Ministry of Housing and Urban Development	
Page 98	Auckland Transport	
Page 108	Geoffrey John Beresford and Joanna Louise Beresford	

FURTHER SUBMITTERS:	
Page 113	Geoffrey John Beresford and Joanna Louise Beresford



Hearing Report for Proposed Private Plan Change 75: Mason Clinic to the Auckland Unitary Plan (Operative in part)

Section 42A Hearing Report under the Resource Management Act 1991

Report to: Hearing Commissioners

Hearing Date/s:

File No:

File Reference

Report Author Elisabeth Laird

Report Approvers Celia Davison

Report produced 23 February 2023

Summary of Proposed Plan Change 75: Mason Clinic

Plan subject to change	Auckland Unitary Plan (Operative in part), 2016
Number and name of change	Proposed Plan Change 75: Mason Clinic to the Auckland Unitary Plan
Status of Plan	Operative in part
Type of change	Private Plan Change
Clause 25 decision outcome	Accept
Parts of the Auckland Unitary Plan affected by the proposed plan change	Planning maps and chapter I334 Wairaka Precinct
Was clause 4A complete	Yes
Date of notification of the proposed plan change and whether it was publicly notified or limited notified	Publicly notified on 26 May 2022.
Submissions received (excluding withdrawals)	3
Date summary of submissions notified	09 September 2022
Number of further submissions received (numbers)	1
Legal Effect at Notification	No legal effect at notification
Main issues or topics emerging from all submissions	Precinct description, buildings near road boundary, vehicle access and cumulative impact, active mode connections, social effects, interfaces, flood plains, open space, health and safety.

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Abbreviations

Abbreviations in this report include:

Abbreviation	Meaning
PPC 75	Proposed Private Plan Change 75
RMA	Resource Management Act 1991
AUP(OP)	Auckland Unitary Plan (Operative in Part)
RPS	Regional Policy Statement
AUPIHP	Auckland Unitary Plan Independent Hearings Panel

Attachments

Attachments		
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Appendix 2	Clause 23 requests and responses	
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Executive Summary

- 1. Proposed Private Plan Change 75 (PPC 75) to the Auckland Unitary Plan (Operative in Part) seeks to re-zone 3A and 119A Carrington Road from Business Mixed Use Zone to Special Purpose Healthcare Facility and Hospital Zone, and amend provisions and plans in the Wairaka Precinct Chapter I334 in the Auckland Unitary Plan (Operative in Part).
- 2. The private plan change process set out in Part 2 of Schedule 1 of the Resource Management Act 1991 ('RMA') was adhered to in developing PPC 75
- 3. Following receipt of all further information PPC 75 was accepted for processing under Clause 25 of Schedule 1 on 31 March 2022.
- 4. PPC 75 was publicly notified on 26 May 2022 and closed for submissions on 27 June 2022. The summary of submissions was notified on 09 September 2022 and closed for further submissions on 23 September 2022.
- 5. Four submissions were received, including one further submission.
- 6. In preparing for hearings on PPC 75, this hearing report has been prepared in accordance with section 42A of the RMA.
- 7. This report considers the private plan change request and the issues raised by submissions and further submissions on PPC 75. The discussion and recommendations in this report are intended to assist the Hearing Commissioners, the requestor and those persons or organisations that lodged submissions on PPC 75. The recommendations contained within this report are not the decisions of the Hearing Commissioners.
- 8. This report also forms part of council's ongoing obligations to consider the appropriateness of the proposed provisions, as well as the benefits and costs of any policies, rules or other methods, as well as the consideration of issues raised by submissions on PPC 75.
- 9. A report in accordance with section 32 of the RMA was prepared by the requestor as part of the private plan change request as required under clause 22(1) of Schedule 1 of the RMA. The information provided by the requestor in support of PPC 75 (including the s32 report and an Assessment of Environmental Effects) is attached in Appendix 1 to this report.
- 10. In accordance with the evaluation in this report, I consider that the provisions proposed by PPC 75 are not the most appropriate way of achieving the objectives of the Auckland Unitary Plan (Operative in Part) and the purpose of the RMA.
- 11. It is recommended that PPC 75 be approved with modification for the reasons set out in sections 12 to 14 of this report.

1. Purpose of the proposed private plan change

- 12. PPC 75 was lodged on 7 October 2021 and seeks to re-zone 3A and 119A Carrington Road from Business Mixed Use zone to Special Purpose Healthcare Facility and Hospital zone, and amend provisions and plans in the Wairaka Precinct.
- 13. The purpose of PPC 75 as outlined on page 24 of the Assessment of Environmental Effects (AEE).¹ is to:
 - "...facilitate the efficient future use, development and intensification of the land in the Plan Change Area, for a forensic healthcare activity, in an integrated and efficient manner. The Plan Change Request seeks to achieve this purpose by aligning the zoning and related Wairaka Precinct provisions, including incorporating the whole of the Plan Change Area within the envelope of Sub-precinct A of the Wairaka Precinct, and by introducing suitable provisions to provide for the future development of the Plan Change Area in an integrated manner."

14. The AEE also notes that:

"...the Mason Clinic is near to its full capacity, and will need to expand to service the growth in the demand for the forensic psychiatry services that is forecast by the WDHB in the next 10-20 years, and the broadening of the services provided at the Mason Clinic in respect of youth services and holistic rehabilitation facilities for non-custodial users, to meet changes in demands."²

2. Site description and background

15. The subject sites at 3A, 81A and 119A Carrington Road, Mt Albert comprise 6.78ha in total, and sit within the Wairaka Precinct. The sites are referred to in the requestor's documents as the Southern Site, the Mason Clinic Site, and the Northern Site, respectively. They sit between the "spine road" and the western boundary of the Precinct (the boundary with Te Auaunga / Oakley Creek).

¹ Report titled "Assessment of environmental effect & statutory assessment for the Mason Clinic, 3A, 81A and 119A Carrington Road, Mount Albert, Auckland" (**AEE**), by Anthony Blomfield of Bently & Co, dated December 2021 (review date). Attached in Appendix 1.

² AEE, page 8.

³ The "spine road" refers to main north-south road within the precinct. This road forms the eastern boundary of the plan change sites.



Figure 1: Aerial view of private plan change request area (blue outline) within Wairaka Precinct. Source: Auckland Council GeoMaps. Plan change area outline added by Elisabeth Laird.⁴

- 16. In accordance with s42A(1A) I do not propose to repeat information included in the requestor's application and under s42A(1B)(b) I adopt in part the description of the site and surrounds that part set out in paragraphs 4.1 to 4.7 of the requestor's AEE.⁵, with the caveat that the surrounding sites have seen significant change which is not reflected in the aerial photos (including Figure 1 on page 9 of the AEE) included in the requestor's AEE.
- 17. The topography of the Mason Clinic Site and the Southern Site gently slopes from east to west towards Oakley Creek / Te Auaunga. The Northern Site slopes from north-east to south-west.

⁴ Note: changes including building demolition and earthworks have occurred within the Wairaka Precinct since the GeoMaps aerial photos were taken.

⁵ AEE, pages 8-10.



Figure 2: Aerial view of 3A, 81A and 119A Carrington Road. Source: Auckland Council GeoMaps. Plan change area added by Elisabeth Laird.

- 18. I visited the site on 29 September 2022 and 12 January 2023.
- 19. The Northern Site is still vacant, but a number of trees along the boundary with 81A Carrington Road have been removed (based on comparisons between site visit and Google Streetview).
- 20. Trees and buildings have been removed from the part of 1 Carrington Road which sits between the Northern Site and the spine road, as shown in Figures 3 to 7 below.



Figure 3: Aerial photograph indicating approximate locations of tree and building removal, and where photos in Figures 4 to 7 were taken. Source: Auckland Council GeoMaps, annotations by Elisabeth Laird.



Figure 4: Photo looking across 1 Carrington Road and Northern Site from spine road. Source: Elisabeth Laird, site visit, 29 September 2022.



Figure 5: Photo from approximately same location as Figure 3. Source: Google Maps Streetview, image captured Oct 2017.



Figure 6: Photos of Northern site, from internal road boundary with 1 Carrington Road. Source: Elisabeth Laird, site visit 12 January 2023.



Figure 7: Photo looking across Northern Site, from approximately same location as photos in Figure 6. Source: Google Maps Streetview, image captured Nov 2015.

21. Immediately south of the Southern Site, the Wairaka Stream has been daylighted.⁶ with planting and a walkway which, when completed, ⁷ will connect the spine road to the Te Aaunga walkway. Within the Southern Site the stream is currently still piped, although the resource consent includes daylighting of the stream onto the Southern Site.

⁶ See land use resource consent LUC60373078 for details.

⁷ Walkway and planting is in place from Te Auaunga walkway to approximately 50m from the spine road, and the stream has been daylighted from the Pump House to the boundary with the Southern Site. The remainder of the walkway and pedestrian bridge connection to the spine road has not yet been built.

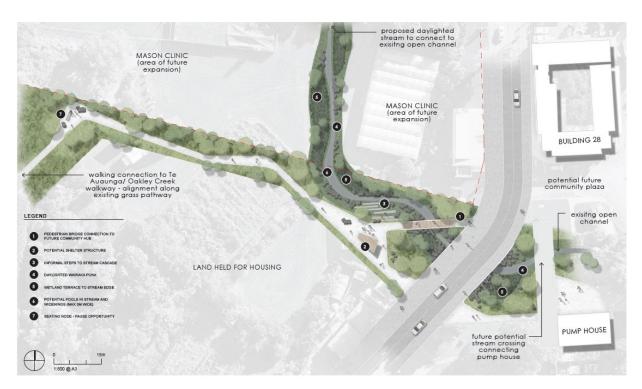


Figure 8: Landscape Plan for stream daylighting, showing walking path connection. Source: LUC60373078 approved plans, page 10.



Figure 9: Walking path on 119B Carrington Road, looking towards Te Auaunga. Source: Elisabeth Laird, site visit, 12 January 2023.



Figure 10: Walking path on 119B Carrington Road (under construction), looking towards spine road. Source: Elisabeth Laird, site visit, 12 January 2023.



Figure 11: Connection of new path to Te Auaunga walkway. Source: Elisabeth Laird, site visit 12 January 2023.

22. To the east of the plan change area, several buildings have recently been demolished.

2.1. Resource consents and other RMA applications

- 23. A number of resource consents have recently been granted in and around the plan change area.
- 24. Consent LUC60386272, referred to as the "backbone consent", includes the construction of four public roads (including the spine road), street landscaping, an urban open space, installing new and modifying existing infrastructure requiring earthworks, partial demolition of an historic heritage building and tree removals. In the vicinity of the plan change area, this includes the potential removal of a totara tree which is protected under the Wairaka Precinct provisions.⁸.
- 25. Consent LUC60373078 enables the daylighting of the Wairaka Stream on 1, 119A and 119B Carrington Road. Development is partially complete on 1 and 119B Carrington Road, including a walkway as mentioned above in paragraph 21, although the links to the spine road have not yet been constructed.
- 26. Consents have also been granted within the precinct for earthworks (LUC60388460 and DIS60388019) and a stormwater channel (LUC60376261).
- 27. A resource consent application (BUN60404594 / LUC60404595) has been approved for a new building as part of the Mason Clinic (on 3A Carrington Road, 81A Carrington Road & 1404 Great North Road). This includes the building, the corresponding activity it is to contain, ancillary site development, and stormwater infrastructure. The building is approved to be built in the area where

⁸ ID 26 in Table I334.6.7.1 – Identified Trees

- a shared path is shown on the operative Wairaka Precinct Plan 1, meaning that it will not be possible to have a shared path in this location
- 28. A private plan change request has been lodged by the Ministry of Housing and Urban Development (HUD) for the Wairaka Precinct on 22 December 2023. This request is to rezone land within the current Wairaka Precinct and to amend the provisions within the existing precinct, including a request to rename the precinct "Te Auaunga". It is referred to by HUD as the "Te Auaunga Plan Change". The lodged planning report states that the Te Auaunga Plan Change "takes account of, but excludes, the Mason Clinic site".9 and contains six key elements:
 - "(a) Rezoning of land acquired by HUD from Unitec from 'Special Purpose: Tertiary Education' to 'Business Mixed Use' (B-MU)...
 - (b) Proposed amendments to the precinct provisions to promote Māori economic development as a key objective for the precinct.
 - (c) Identification of areas within the precinct where additional height can be accommodated...
 - (d) In areas where higher buildings are allowed, additional development controls...
 - e) Detailed design criteria...
 - (f) Proposed amendments to the precinct provisions to equitably redistribute retail provision within the precinct..."¹⁰

3. Existing Plan Provisions

29. 81A Carrington Road is currently zoned Special Purpose – Healthcare Facility and Hospital. 3A and 119A Carrington Road are currently zoned Business – Mixed Use. They sit within the Wairaka Precinct, and 81A Carrington Road is Wairaka sub-precinct A:

⁹ Wairaka Precinct: Plan Change Request to Auckland Unitary Plan (including a request to change the precinct name to Te Auaunga) Planning Report including section 32 assessment. Produced by Tattico for HUD. Lodged 22 December 2023. (Wairaka Precinct: Plan Change Request Planning report) Paragraph 1.4, page 5.

¹⁰ Wairaka Precinct: Plan Change Request Planning report. Excerpts from paragraph 1.12, pages 6-7.



Figure 12: Auckland Unitary Plan operative zoning of Wairaka Precinct and surrounding area

- 30. Key provisions of the Business Mixed Use zone (in the context of this plan change) are:
 - that it provides for residential activity as well as predominantly smaller scale commercial activity
 - healthcare facilities are a permitted activity
 - hospitals are a discretionary activity
 - justice facilities are a discretionary activity
 - additions to buildings that are less than: (a) 25 per cent of the existing gross floor area of the building; or (b) 250m², whichever is the lesser, are permitted
 - a building height of 18m applies, unless otherwise specified by a Height Variation Control (or by rules in an overlay or precinct)
- 31. Key provisions of the Special Purpose Healthcare Facility and Hospital zone are:
 - that it enables a range of healthcare related and supporting activities
 - healthcare facilities and hospitals are permitted activities
 - Justice facilities (under Community Facilities see nesting table in Chapter J: Definition) are a permitted activity.
 - New buildings or additions to existing buildings that increase the building footprint by more than 20 per cent, that are visible from and located within 10m of a public road or an open space zone are a restricted discretionary activity.

- A range of building heights apply, depending on overall site size. The operative
 zoning on the Mason Clinic Site and its size of 3.94ha enables building heights up
 to 16m as a permitted activity and up to 25m as a restricted discretionary activity.
 The proposed re-zoning and total plan change site size of 6.78ha would enable
 building heights up to 26m as a permitted activity, and up to 35m as a restricted
 discretionary activity.
- 32. The Wairaka Precinct extends from the north western motorway at Point Chevalier in the north, through to Woodward Road in the south, and from Oakley Creek in the west to Carrington Road in the east. The purpose of the Wairaka Precinct is to provide for a diverse urban community, including the ongoing development and operation of the tertiary education facility, the development and operation of a range of community, recreation, and social activities, the development of a compact residential community, and commercial service activities.
- 33. Key provisions in the operative Wairaka Precinct are:
 - objectives, policies and other provisions which enable integrated development for the many activities provided for within the precinct, and for a range of infrastructure including stormwater and transport facilities
 - sub-precincts which provide for specific activities. Sub-precinct A provides for healthcare/hospital related purposes and accommodates the Mason Clinic.
 - the provision and enhancement of open spaces, cycling and pedestrian linkages from the Precinct to the wider area and neighbouring suburbs, including linkages between activities and open space nodes
 - transport provisions which minimise adverse effects on the safe and efficient operation of the network and amenity effects on existing residents, especially to the south of the Precinct
 - urban design provisions, including interfaces and setbacks between different activity types.
 - heights of up to 27m, as specified in standard 1334.6.4. Height.
 - expected quantum and locations of key open space (private), and indicative locations of walking paths and shared paths, as set out in Precinct Plan 1.
- 34. The plan change site is also subject to the following additional controls:
 - Natural Resources: Quality-Sensitive Aquifer Management Areas Overlay [rp] Auckland Isthmus Volcanic
 - Natural Resources: Significant Ecological Areas Overlay SEA T 6008, Terrestrial

4. Proposed Plan Change Provisions

- 35. PPC 75, as notified, seeks to:
 - re-zone 3A and 119A Carrington Road from Business Mixed Use zone to Special Purpose – Healthcare Facility and Hospital zone
 - extend sub-precinct A of the Wairaka Precinct to include 3A and 119A Carrington Road (and amend this on the precinct plans), amend some precinct provisions and introduce new precinct provisions, and remove the "key open space (private)" as

shown on 119A Carrington Road and the "shared path" as shown on 3A Carrington Road from I334.10.1 Wairaka: Precinct Plan 1

- Make changes to the precinct provisions as follows:
 - changes to the Precinct Description (I334.1) to better describe the nature of the Mason Clinic activity, and the provision of open space and connections
 - changes to the precinct objectives and policies to allow for intensification of the Mason Clinic
 - additional objectives and policies for sub-precinct A, including managing effects at boundaries, and recognising the functional and operational (including security) requirements of activities and development
 - o new activity table for sub-precinct A
 - changes to notification requirements for new buildings or additions to existing buildings in Sub-precinct A
 - new standards (including new landscape yard standards), matters of control/discretion and assessment criteria to achieve the outcomes sought by the objectives and policies.
- 36. Additionally, a number of existing errors in chapter I334 Wairaka Precinct (mainly provision numbering) are proposed to be corrected through this plan change.
- 37. The proposed rezoning of land at 3A and 119A Carrington Road is shown in Figure 13 and Figure 14 below.

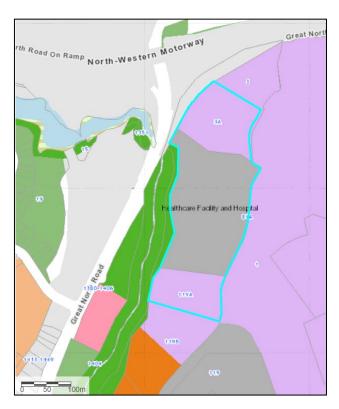


Figure 13: Operative zoning (plan change area outlined in blue)

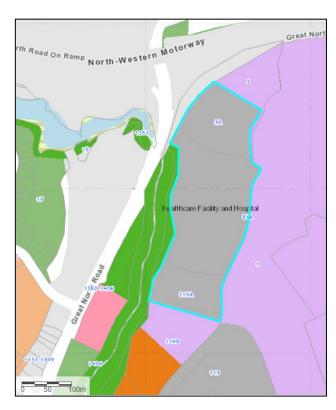


Figure 14: Proposed zoning (plan change area outlined in blue)

38. The current Wairaka: Precinct Plan 1 is shown in Figure 12 below. The proposed changes to Wairaka: Precinct Plan 1 (the extension of sub-precinct A, deletion of the key open space (private), and deletion of shared path) are shown in Figure 13 below.

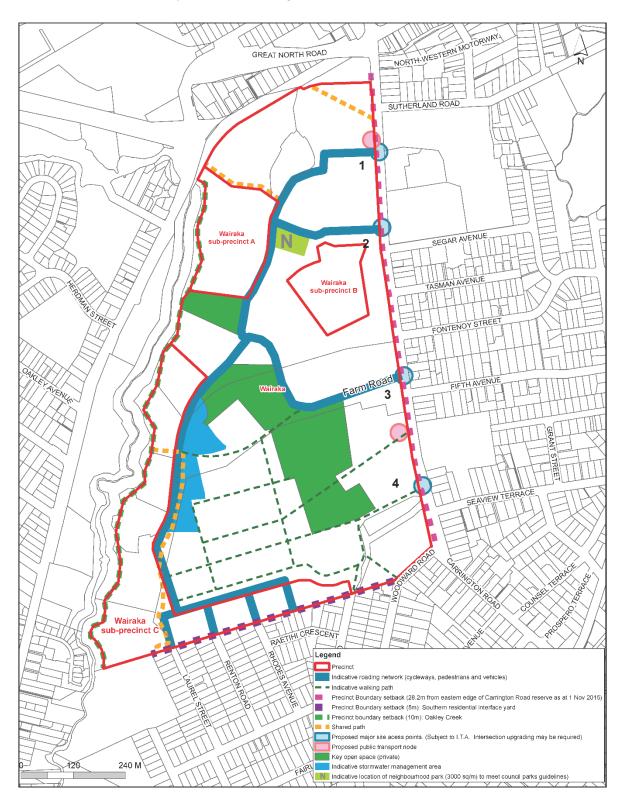


Figure 15: I334.10.1 Wairaka: Precinct plan 1. Source: Auckland Unitary Plan (Operative in Part).

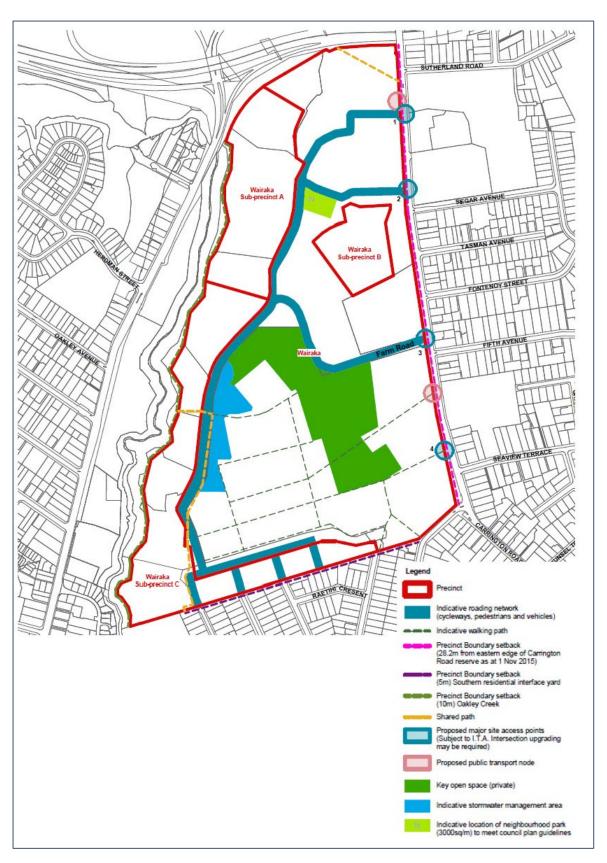


Figure 16: proposed amended Precinct Plan 1 with extended sub-precinct A, deleted open space and deleted shared path. Source: PPC 75 Proposed I334 Wairaka Precinct Provisions and Maps, 21 February 2022, page 41.

- 39. The final notified version of the proposed precinct provisions is the document "Proposed I334 Wairaka Precinct Provisions and Maps Pre-notification final 210222". Amendments were made to the proposed provisions by the requestor between the writing of the AEE and the writing of the clause 25 report, mainly to clarify and fix errors.
- 40. The proposed new activity table (Table I334.4.4 Wairaka Precinct sub-precinct A) is supported by the addition and/or amendment of standards (I334.6.10-I334.6.16), matters of control (I334.7.1.(3)), matters of discretion (I334.8.1(4)-(6)), and assessment criteria (I334.7.2(3); I334.8.2(1), (2), (4)-(6)).
- 41. There is some repetition in the following proposed provisions:
 - I334.8.1 Matters of discretion (6): there is repetition in the provisions under the three headings, including that several matters referred to in I334.8.1(6)(i) are already listed in I334.8.1(6)(a)-(h). In particular, "safety" is included in 3 places.
- 42. This repetition should not hinder the appropriate assessments being undertaken, but it is not in line with best practice plan writing.
- 43. In both proposed precinct plans there is a drawing error in the boundary of sub-precinct C. As a change to the boundary of sub-precinct C is clearly not intended to be part of this plan change, I have included a recommendation to correct these errors (see sections 12-15 of this report).
- 44. The requestor has provided the following specialists' documents to support their private plan change application.

Table 1: Information provided by the requestor for the private plan change

Document title	Specialist	Date
Civil Infrastructure Assessment	Aurecon	29 April 2021
Draft Wairaka Stormwater Management Plan	MPS	May 2021
Design and Architectural Assessment	Klein Architects	23 April 2021
Ecological Impact Assessment	Morphum	April 2021
Site Contamination Report	Aurecon	15 September 2020
Landscape and Visual Effects Assessment	Thomas Consultants	17 December 2021
Transport Assessment	Flow	April 2021
Supplementary transport assessment	Flow	15 December 2021
Correspondence from HUD	HUD	11 May 2021

¹¹ Attached in Appendix 1

5. Analysis of the section 32 report and any other information provided by the requestor

- 45. In accordance with s42A(1) of the RMA this report is prepared on information provided on any matter by the requestor. In accordance with s42A(1A) this report does not need to repeat information included in the requestor's application, and instead under s42A(1B) may—
 - · adopt all of the information; or
 - adopt any part of the information by referring to the part adopted
- 46. Having carefully reviewed the requestor's section 32 report I now set out those parts which I adopt and the parts which I disagree with.

5.1. Objectives of the proposal

47. The requestor's s32 assessment is contained within section 12 of their AEE report. and in the supporting document "Attachment 3 Section 32 Assessment". The assessment appropriately starts with an investigation of whether the objectives of the plan change are the most appropriate way to achieve the purpose of the RMA. In paragraph 12.4 the requestor states that:

"12.4 The Plan Change seeks to amend two objectives of the Wairaka Precinct, as follows:

1334.2 Objectives

- (3) A mix of residential, business, tertiary education, social facilities and community activities is provided, which maximises the efficient and effective use of land.
- (4) The <u>operation and intensification of the healthcare/hospital facility activity</u>, accessory activities and associated buildings, structures and infrastructure in Sub-precinct A (Mason Clinic) are provided for."¹⁴
- 48. The plan change also proposes to re-zone two sites from Business Mixed Use (B-MU) to Special Purpose Healthcare Facility and Hospital (SP-HFH), which would replace the B-MU zone objectives with those from the SP-HFH zone.
- 49. The requestor states that "The objectives of the Wairaka Precinct, as sought to be amended are consistent with, and are the most appropriate way to achieve, the purpose of the RMA. They will contribute to ensuring that the Wairaka Precinct appropriately recognises and provides for the efficient use, development and intensification of the Mason Clinic". 15.
- 50. In my view it is difficult to determine the most appropriate way to achieve the RMA's purpose without a comparison between the objective of the plan change with the status quo objectives. It is my view that the operative Wairaka Precinct objectives give effect to the provisions of the Regional Policy Statement (RPS) and all higher documents, so the question becomes which objectives (PPC 75 objectives or the operative objectives) give better effect.

¹² AEE, pages 69-78

¹³ Attached in Appendix 1

¹⁴ AEE, page 70

¹⁵ AEE, paragraph 12.7, page 71

- 51. The amended objective I334.2(3) adds the term "social facilities". Although this term is not used elsewhere in the Wairaka Precinct or in the underlying zones, it is used extensively in the RPS which states that: "Social facilities include public and private facilities which provide for services such as education, health, justice, corrections, community and cultural facilities.". The other terms used in objective I334.2(3) include "community activities". In Chapter J Definitions, community activities include both "correction facilities" and "healthcare facilities"... 17
- 52. In my opinion, the operative objective I334.2(3) adequately provides for the activities of the Mason Clinic. Additionally, this objective must be assessed in context objective I334.2(4) explicitly provides for the Mason Clinic. However, the addition of "social facilities" would still be consistent with the RPS and would achieve the purpose of the RMA.
- 53. In my opinion, the amended I334.2(3) would give effect to the RMA at least as well as the operative I334.2(3), and I can support the amendment.
- 54. The amended objective I334.2(4) makes a number of changes, the most significant of which is the insertion of the words "operation and intensification of".
- 55. The RPS states that growth needs to be provided for in a way that, among other things, "(2) supports integrated planning of land use, infrastructure and development; (3) optimises the efficient use of the existing urban area; (4) encourages the efficient use of existing social facilities and provides for new social facilities;". In my opinion, the amended objective I334.2(4) achieves this. I agree with the following benefits identified in the requestor's section 32 assessment: "This option will better enable the efficient development and growth of the Mason Clinic in the existing location which is an established and accepted component of the neighbourhood, and which effectively services the population catchment. The expansion of the facility in the manner proposed will avoid the need to fund the acquisition of other land, and the development of facilities in a new location, and will make efficient use of staffing and administration resources."
- 56. I agree that the amended I334.2(4) would give effect to the RMA at least as well as the operative I334.2(4). Additionally, it would better achieve the purpose of the plan change that is, to enable the efficient use, development and intensification of the Mason Clinic.
- 57. In my opinion, the amended objective I334.2(4) will give better effect to the RPS than the operative objective.

5.2. Provisions in the proposal

- 58. I have read the requestor's assessment of s32(1)(b) and in particular the alternative options set out in para 8.6 of their report. Considering the potential options for zoning the subject site, the requestor has considered:
 - Option 1: Retain the status quo (having the WDHB landholdings split over two zonings and the Wairaka Precinct/Sub-precinct A).

¹⁶ B2.9. Explanation and principal reasons for adoption, page 14 of chapter B2 Urban growth and form, AUP(OP).

¹⁷ Table J1.3.2 Community, AUP(OP)

- Option 2: Retain the underlying zoning, the extent of the Sub-precinct A boundaries and provisions, and remove the 'Key Open Space (Private)' and 'Shared path' elements from the Southern Site and Northern Site respectively.
- Option 3: Rezone the Northern and Southern Sites to Healthcare Zone, apply Sub-Precinct A to the whole of the Plan Change Area, retain the current provisions of the Healthcare Zone and Sub-Precinct A, and remove the 'Key Open Space (Private)' and 'Shared path' elements from the Southern Site and Northern Site respectively.
- Option 4: Rezone the Northern and Southern Sites to Healthcare Zone, apply Sub-Precinct A to the whole of the Plan Change Area, modify the provisions of Sub-Precinct A, and remove the 'Key Open Space (Private)' and pedestrian connectivity.
- Option 5: A further zoning option was considered, which also removed the open space and shared path elements. This included consideration of the zoning of the land as an alternative business zone (either a Business – Metropolitan Centre or Business – Town Centre zone), being the only other zones which provide for 'justice facilities' as a permitted activity.
- 59. The requestor considers that Option 5 is not appropriate for the reasons set out in paragraph 12.15 of the AEE in summary, that a Town Centre or Metropolitan Centre zoning would not be appropriate at this location or to best provide for the Mason Clinic activities. I agree with the assessment of Option 5.
- 60. The requestor considers that options 1 and 2 are not appropriate ways to achieve the objectives., In particular, that retaining the underlying zoning will not efficiently or effectively achieve Objectives I334.2(2), (3), (4), and (10). I agree with this assessment.
- 61. The requestor has assessed option 3 as being an improvement on options 1 and 2, but still limited in its effectiveness in achieving the objectives of the Wairaka Precinct as it does not put in place a common set of standards and assessment criteria across the plan change area, to manage effects within the Mason Clinic and relative to the wider precinct. The requestor also concludes that option 3 "will be less effective and efficient [than option 1] at achieving Objective I334.2(7) of the Wairaka Precinct which is concerned with providing a connected open space network and pedestrian/cyclist connections." A gree with these assessments, and in my opinion the removal of the key open space (private) from the Northern site will also hinder the achievement of I334.2(7), as well as I334.2(4).
- 62. The requestor states that option 4 "has been assessed to be the most efficient and effective option to achieve (and to be consistent with) the objectives of the Wairaka Precinct and the underlying Healthcare Zone, as well as the higher order provisions of the Regional Policy Statement, to provide for the efficient delivery of social facilities which will service the growing population of the Auckland region." ¹⁹

¹⁸ s32 Assessment, p.5

¹⁹ AEE, paragraph 12.31, p.77

63. The requestor has also assessed planning matters relating to the removal of key open space (private) in section 11 of their AEE. In paragraph 11.36, the requestor states that "open spaces and pedestrian connections to surrounding areas will be intrinsically provided for as part of the master-planning of the wider precinct development". and states in paragraph 11.35 that "the existing provisions of the Wairaka Precinct require these open space and connectivity outcomes to be considered for all restricted discretionary activity development (where it is 'in accordance' with the precinct plan)". The requestor proposes to add the following paragraph to the precinct description:

"The open space network for the precinct is provided for by way of a combination of identified areas, and indicative areas, including walking paths and shared paths (shown on Precinct plan 1) and future areas and walkways/shared paths which are to be identified and developed as a component of the future urban intensification envisaged." ²²

- 64. A letter from the Ministry of Housing and Urban Development (HUD) was also submitted as a supporting document to the plan change, which states the intention of the Crown and the Rōpū (as development partners) to provide equivalent private open space and an equivalent shared path connection through their developments within the Wairaka Precinct. This letter is attached in Appendix 1 to this report.
- 65. In my opinion, while the Wairaka Precinct description and policies (see I334.3(4), I334.3(15)-(17)) do make it clear that open space is an integral part of the precinct, the requirements to implement that at resource consent stage rely on the information in Wairaka Precinct Plan 1. This is clear in the activity table and assessment criteria. It is reasonable to assume that both applicants and reporting planners will refer to the Precinct Plan 1 to understand "the extent to which the location, physical extent and design of open space meets the demand of future occupants of the site. And also to assess other matters including subdivision. The staging of development and the location and form of building footprints and envelopes. In all of which require an assessment against the precinct plan and/or proposed open space network.
- 66. To include reference in the precinct description to "future areas" is, in my opinion, not sufficient to ensure that adequate open space will be provided at development stage. In particular, a statement of the overall quantum and general location of the key open space (private) required in the precinct is vital. Showing this visually in the proposed Precinct Plan 1 would be a consistent and easily understood way to include this information in the precinct provisions.
- 67. In my opinion, as set out in detail in sections 7.6 and 8.1 of this report, the removal of the key open space (private) and shared path from Precinct Plan 1 means that option 4 is inconsistent with certain objectives of the Wairaka Precinct. I do agree though with the assessment of the rest of the

²⁰ AEE, page 61

²¹ AEE, page 30

²² Proposed I334 Wairaka Precinct Provisions and Maps - Pre-notification final 210222, I334.1, page 2.

²³ See I334.4.1(A31), I334.4.1(A34), I334.7.2.(2) Subdivision, I334.8.1.(4), I334.8.2.(4)

²⁴ I334.8.2(4)(d)

²⁵ I334.7.2(2)

²⁶ I334.8.2(4)(g)

²⁷ I334.8.2(4)(h)

provisions in option 4. In particular that the re-zoning, adjustment of sub-precinct A boundaries, and the addition and amendment of provisions relating to sub-precinct A will "provide certainty as to the nature of the intended land use and built form outcomes... [including] its relationship and interface with neighbouring land". ²⁸, and will enable the effective "management of the effects of the activities and built development that is provided for within the Mason Clinic land on neighbouring land and the wider Wairaka Precinct.". ²⁹

- 68. In my view an additional option which identified alternative locations for the key open space (private) and shared path on Precinct Plan 1 should have been considered by the requestor.
- 69. Additionally, as mentioned in paragraph 43 above, in both proposed precinct plans there is a drawing error in the boundary of sub-precinct C. As a change to the boundary of sub-precinct C is clearly not intended to be part of this plan change, I have included a recommendation to correct these errors (see sections 12-15 of this report).

6. Hearings and decision-making considerations

- 70. Clause 8B of Schedule 1 of RMA requires that a local authority shall hold hearings into submissions on private plan changes.
- 71. Auckland Council's Combined Chief Executives' Delegation Register delegates to hearing commissioners all powers, duties and functions under the Resource Management Act 1991. This delegation includes the authority to determine decisions on submissions on a plan change, and the authority to approve, decline, or approve with modifications, a private plan change request. Hearing Commissioners will not be recommending a decision to the council, but will be issuing the decision
- 72. In accordance with s42A(1), this report considers the information provided by the requestor and summarises and discusses submissions received on PPC 75. It makes recommendations on whether to accept, in full or in part; or reject, in full or in part; each submission. This report also identifies what amendments, if any, can be made to address matters raised in submissions. This report makes a recommendation on whether to approve, decline, or approve with modifications PPC 75. Any conclusions or recommendations in this report are not binding to the Hearing Commissioners.
- 73. The Hearing Commissioners will consider all the information submitted in support of the proposed plan change, information in this report, and the information in submissions, together with evidence presented at the hearing.
- 74. This report has been prepared by the following author(s) and draws on technical advice provided by the following technical experts:

Table 2: Specialist input into s42A report

Area of expertise	Authors
Planning	Elisabeth Laird, Policy Planner, Central South Unit, Plans and Places, Chief Planning Office, Auckland Council

²⁸ s32 assessment, page 7

²⁹ s32 assessment, page 7

Technical expert – Parks Planning	Roja Tafaroji, Senior Parks Planner, Parks Planning, Parks & Community Facilities Department, Auckland Council	
Technical expert – Stormwater	Gemma Chuah, Principal - Resource Management, Healthy Waters, Infrastructure and Environmental Services, Auckland Council	
Technical expert – Urban Design	Mustafa Demiralp, Principal Urban Designer, Tāmaki Makaurau Design Ope, Plans and Places, Chief Planning Office, Auckland Council	
Technical expert – Landscape	Bridget Gilbert, Landscape Architect, Bridget Gilbert Landscape Architecture Limited	
Technical expert – Traffic and transport	Andrew Temperley Senior Transport Planner, Traffic Planning Consultants Ltd	
Technical expert – Water infrastructure	Kerryn Swanepoel, Development Programme Lead, Major Developments, Watercare Services Limited	

75. The technical reports provided by the above experts are attached in Appendix 4 to this report.

7. Statutory and policy framework

- 76. Private plan change requests can be made to the Council under clause 21 of Schedule 1 of the RMA. The provisions of a private plan change request must comply with the same mandatory requirements as Council initiated plan changes, and the private plan change request must contain an evaluation report in accordance with section 32 and clause 22(1) in Schedule 1 of the RMA.
- 77. Clause 29(1) of Schedule 1 of the RMA provides "except as provided in subclauses (1A) to (9), Part 1, with all necessary modifications, shall apply to any plan or change requested under this Part and accepted under clause 25(2)(b)".
- 78. The RMA requires territorial authorities to consider a number of statutory and policy matters when developing proposed plan changes. There are slightly different statutory considerations if the plan change affects a regional plan or district plan matter.
- 79. PPC 75 proposes changes to mapping (zoning) and provisions at the district plan level only.
- 80. The following sections summarises the statutory and policy framework, relevant to PPC 75.

7.1. Resource Management Act 1991 – Regional and district plans

Plan change matters – regional and district plans

81. In the development of a proposed plan change to a regional and/ or district plan, the RMA sets out mandatory requirements in the preparation and process for the proposed plan change. Table 3 below summarises matters for plan changes to regional and district plan matters.

Table 3: Plan change matters relevant to regional and district plans

Relevant Act/Policy/Plan	Section	Matters
	Part 2	Purpose and intent of the Act

Resource Management Act 1991	Section 32	Requirements preparing and publishing evaluation reports. This section requires councils to consider the alternatives, costs and benefits of the proposal
	Section 80	Enables a 'combined' regional and district document. The Auckland Unitary Plan is in part a regional plan and district plan to assist Council to carry out its functions as a regional council and as a territorial authority
	Schedule 1	Sets out the process for preparation and change of policy statements and plans by local authorities

- 82. The mandatory requirements for plan preparation are comprehensively summarised by the Environment Court in Long Bay-Okura Great Park Society v North Shore City Council, Environment Court Auckland A078/2008, 16 July 2018 at [34] and updated in subsequent cases including Colonial Vineyard v Marlborough District Council [2014] NZEnvC 55 at [17]. When considering changes to district plans, the RMA sets out a wide range of issues to be addressed. The relevant sections of the RMA include sections 31-32 and 72-76 of the RMA.
- 83. The tests are the extent to which the objective of PPC 75 is the most appropriate way to achieve the purpose of the Act (s32(1)(a)) and whether the provisions:
 - accord with and assist the Council in carrying out its functions (under s 31) for the purpose of giving effect to the RMA;
 - accord with Part 2 of the RMA (s 74(1)(b));
 - give effect to the Auckland Unitary Plan (Operative in Part) (AUP(OP)) regional policy statement (s 75(3)(c));
 - give effect to any national policy statement (s 75(3)(a));
 - have regard to the Auckland Plan 2050 (being a strategy prepared under another Act (s 74(2)(b)(i));
 - have regard to the actual or potential effects on the environment, including, in particular, any adverse effect (s 76(3));
 - are the most appropriate method for achieving the objectives of the AUP(OP), by identifying other reasonably practicable options for achieving the objectives (s 32(1)(b)(i)); and by assessing their efficiency and effectiveness (s 32(1)(b)(ii)); and:
 - identifying and assessing the benefits and costs of environmental, economic, social, and cultural effects that are anticipated from the implementation of the provisions, including the opportunities for:
 - economic growth that are anticipated to be provided or reduced (s 32(2)(a)(i)); and
 - employment that are anticipated to be provided or reduced (s 32(2)(a)(ii));
 - if practicable, quantifying the benefits and costs (s 32(2)(b)); and
 - assessing the risk of acting or not acting if there is uncertain or insufficient information about the subject matter of the provisions (s 32(2)(c)).

84. Under section 74(1)(e) the decision maker must also have particular regard to the section 32 evaluation report prepared in accordance with s 32 (s 74(1)(e)).

7.2. Resource Management Act 1991 – District matters

85. There are mandatory considerations in the development of a proposed plan change to district plans and rules. Table 3 below summarises district plan matters under the RMA, relevant to PPC 75.

Table 4: Plan change - District plan matters under the RMA

Relevant Act/ Policy/Plan	Section	Matters
Resource	Part 2	Purpose and intent of the Act
Management Act 1991	Section 31	Functions of territorial authorities in giving effect to the Resource Management Act 1991
	Section 73	Sets out Schedule 1 of the RMA as the process to prepare or change a district plan
	Section 74	Matters to be considered by a territorial authority when preparing a change to its district plan. This includes its functions under section 31, Part 2 of the RMA, national policy statement, other regulations and other matter
	Section 75	Outlines the requirements in the contents of a district plan
	Section 76	Outlines the purpose of district rules, which is to carry out the functions of the RMA and achieve the objective and policies set out in the district plan. A district rule also requires the territorial authority to have regard to the actual or potential effect (including adverse effects), of activities in the proposal, on the environment

7.3. National Policy Statements

- 86. The relevant national policy statements (NPS) must be considered in the preparation, and in considering submissions on PPC 75.
- 87. Table 6 below summarises the national policy statements that apply to PPC 75.

Table 5: National Policy Statements relevant to PPC 75

Relevant Act/Policy/Plan		
National Policy Statement on Urban Development 2020		
National Policy Statement on Freshwater Management 2020		

- 88. A recent Environment Court decision (Eden-Epsom Residential Protection Society Incorporated v Auckland Council [2021] NZEnvC 082) held that Objectives 2, 5, 7 and Policies 1 and 6 are relevant to the consideration of the merits of a private plan change request, and other objectives and policies that do not refer to 'planning decisions' do not have to be given effect to at this point in time.
- 89. The requestor has assessed the plan change against the National Policy Statement on Urban Development 2020 (NPS-UD) and concludes that:
 - "8.18 While the change proposed to the zoning of the Northern and Southern Sites will reduce the extent of land zoned Mixed Use, this is not inconsistent with the outcomes intended by the NPS-

- UD. The Plan Change will provide for the efficient utilisation of the land for social infrastructure which services the health and wellbeing needs of the Auckland region and the North Island as they grow and intensify, in a manner which contributes to the well functioning urban environment. The intensification of the Mason Clinic as an integrated facility is efficient and avoids the need to develop 'scattered' landholdings for the same purpose.
- 8.19 The proposed car parking standard for the activities provided for within Sub-precinct A is consistent with the requirement of the NPS-UD for minimum parking standards to be removed from district plans.
- 8.20 For the reasons described above, the Plan Change is aligned with the objectives and policies of the NPS-UD.".30
- 90. I agree with this assessment, and in my view the plan change is not in conflict with the NPS-UD.
- 91. The requestor has also assessed the plan change against the National Policy Statement on Freshwater Management 2020 (NPS-FM):
 - "8.24 The Plan Change has been developed and assessed with reference to the relevant objective and policies of the NPS-FM, and is considered to be consistent with the outcomes that are sought in respect of freshwater management. The proposal to change the zoning and related standards which apply to the Plan Change Area do not fundamentally change the extent of development that could otherwise occur within the site (with respect to the extent of roofed and paved surfaces), and which might otherwise lead to differences in the quantity, flow or quality of stormwater discharges from the site. All future development of the site will be subject to the requirements of the Wairaka Precinct Stormwater Management Plan, which is intended to manage stormwater to maintain and enhance the freshwater ecosystems which receive stormwater discharges from the subject area." 31
- 92. Ms Gemma Chuah, Healthy Waters specialist on behalf of council, has noted that: "The key concept in the NPSFM is to give effect to te mana o te wai. The plan change will not change the way in which stormwater is managed across the site so will not change the way in which stormwater affects the mama or the mauri of the Wairaka Stream or Oakley Creek / Te Auaunga awa." 32
- 93. I agree with Ms Chuah's assessment, and in my view the plan change is not in conflict with the NPS-FM.

7.4. National environmental standards or regulations

- 94. Under section 44A of the RMA, local authorities must observe national environmental standards in its district/ region. No rule or provision may be duplicate or in conflict with a national environmental standard or regulation.
- 95. Table 7 below summarises the national environmental standards that apply to PPC 75.

³⁰ AEE, page 39

³¹ AEE, page 41

³² Private Plan Change PC75 – WDHB Mason Clinic – 3A, 81A AND 119A CARRINGTON ROAD, MOUNT ALBERT – Healthy Waters stormwater and flooding assessment for S42A report. By Gemma Chuah, 22 February 2023. (**Healthy Waters assessment**). Paragraph 7.1, pages 4-5.

Table 6: National environmental standards relevant to PPC 75

Relevant Act/Policy/Plan

National Environmental Standards for Freshwater 2020

National Environmental Standards for Assessing and Managing Contaminants in Soil to Protect Human Health 2011

- 96. The requestor has assessed the plan change against the National Environmental Standards for Freshwater 2020 ("NES-FW"):
 - "8.27 With regards to the proposal, the relevant standards of the NES-FW relate to the drainage of natural wetlands, and the protection of urban and rural streams from in-filling. The zoning, land uses and activities that will be enabled by the Plan Change do not involve the drainage of natural wetlands or the infilling of streams. The Plan Change Area is confirmed... to not contain a natural wetland, and the outcomes enabled by the Plan Change do not pose risks to freshwater and freshwater ecosystems." ³³
- 97. The requestor also notes in paragraph 8.28 of the AEE that they intend to daylight the (currently piped) section of the Wairaka Stream which is on the Southern Site. I note that the plan change does not require this to happen, so have not considered stream daylighting as a positive effect of the plan change (see assessment in section 8 below). However, I agree with the requestor's statement that "the Plan Change Request will not affect the outcome being implemented in the future." ³⁴
- 98. In my view, the plan change is consistent with the NES-FW.
- 99. The requestor has assessed the plan change against the National Environmental Standards for Assessing and Managing Contaminants in Soil to Protect Human Health 2011 (NES-CS):
 - "8.30 A Site Contamination Report has been prepared by Aurecon... which confirms that the Plan Change Area was historically used for horticulture, together with a variety of other activities (fuel storage, fill, building demolition waste) which have the potential to have resulted in contamination in soil. Intrusive soil testing has been undertaken within the Northern Site (which is expected to be developed first), which has confirmed generally low concentrations of various contaminants. The Site Contamination Report confirms that, subject to a Contaminated Site Management Plan being prepared to manage all ground disturbance works, the site is suitable for the proposed development and land use to occur in the future.
 - 8.31 It is appropriate for the requirements of the NES-CS to be satisfied through subsequent resource consent processes for the future development of the subject site, relative to the scope of works involved. The Plan Change Request is not implicated by the NES-CS." ³⁵
- 100. I agree with this assessment and note that the plan change does not propose to change any provisions relating to subdivision or earthworks. NES-CS requirements can be addressed at resource consent stage.

³³ AEE, page 41

³⁴ AEE, page 42

³⁵ AEE, page 42

7.5. Auckland Unitary Plan

101. For a plan change, the relevant policy statement and plans must be considered in the preparation of the plan change and in the consideration of submissions. Table 8 contains the relevant sections of the RPS and DP applicable to PPC 75.

Table 7: Relevant regional policy statements and district provisions of Auckland Unitary Plan

Relevant Act/Policy/Plan	Section	Matters
Auckland Unitary Plan – Regional Policy Statement	B2.2	B2.2.1. Urban growth and form B2.3.1. Quality built environment B2.4.1. Residential growth B2.8.1. Social facilities
Auckland Unitary Plan – district provisions	I334 Wairaka Precinct	
Auckland Unitary Plan – district provisions	Zoning maps	

- 102. The high-level consistency of the PPC 75 with the RPS was assessed during the clause 25 process.³⁶ That process did not include a detailed assessment of effects on the environment, and I have not added one to this section as it is covered more appropriately in section 8 of this report.
- 103. In summary, I looked at the following parts of the plan change and came to the conclusions stated below:

Table 8: Summary of high-level assessment of PPC 75 against Regional Policy Statement

Part of plan change	Conclusion
the proposal to intensify the Mason Clinic site	would support RPS objectives on urban growth and form, a quality built environment, residential growth, and social facilities.
the proposal to re-zone 3A and 119A Carrington Road from Business – Mixed Use zone to Special Purpose – Healthcare Facility and Hospital zone	would support RPS objectives on urban growth and form, a quality built environment, residential growth, and social facilities.
the proposal to extend Sub-precinct A (on Precinct Plan 1 and Precinct Plan 2)	would support integrated planning on the subject site and also across the precinct. This proposed change to Precinct Plan 1 and Precinct Plan 2 would be consistent with the RPS and with Part 5.
the proposal to amend the precinct provisions to enable integrated development of the Mason Clinic site/sub-precinct A	consistent with Part 5. Integrated development is an important aspect of the RPS and Part 5, and the objectives and policies of the precinct clearly include integrated development.

³⁶ Auckland Unitary Plan (Operative in Part) - Private Plan Change request from the Waitemata District Health Board at Wairaka Precinct (Unitec) RMA Clause 25 decision. Item 15 on March 31 2022 Planning Committee Agenda. https://infocouncil.aucklandcouncil.govt.nz/Open/2022/03/PLA 20220331 AGN 10166 AT WEB.htm

the proposal to change Precinct Plan 1 by removing the 'open space (private)' use from 119 Carrington Road in the precinct provisions, and removing the shared path from 3A Carrington Rd. the proposal to remove the "key open space (private)" use from 119A Carrington Road and the shared path from 3A Carrington Rd, without providing for replacement locations, is inconsistent with the provisions of the Wairaka Precinct and may be inconsistent with the RPS.

- 104. At the clause 25 assessment, I considered these issues in the round with other RPS policies and objectives to provide for social facilities and justice facilities, and with the letter provided from HUD. ³⁷ I considered that on a coarse assessment, the plan change was generally consistent with the RPS and therefore with Part 5.
- 105. However, the removal of the key open space (private) and shared path are significant issues that need to be considered in detail by the council's Independent Hearings Commissioners. Open spaces and connections are an integral part of the Wairaka Precinct, as discussed below.
- 106. PPC 75 is, in my opinion, inconsistent with the objectives and policies of the Wairaka Precinct for the reasons set out below.
- 107. The provision of open space and connections in Wairaka Precinct is an integral part of the precinct and is specifically referenced in I334.1. Precinct Description:

"There are also particular attributes of the Wairaka Precinct, which contribute to the amenity of the precinct and the surrounding area and are to be retained through the development of the precinct. These include:

. . .

- an open space network linking areas within the Wairaka Precinct and providing amenity to neighbouring housing and business areas;
- a network of pedestrian and cycleway linkages that integrate with the area network:

... "

- 108. The provision of adequate open space to complement proposed development is a key part of achieving integrated management of the natural and physical resources of the region. This is set out in the objectives and policies of the Wairaka Precinct which cascade from the RPS.³⁸ and include:
 - I334.2(7): Open spaces, cycling and pedestrian linkages from the Precinct to the wider area and neighbouring suburbs, including linkages between activities and open space nodes, are provided for and enhanced.
 - I334.3(4) Promote comprehensive planning by enabling integrated development in accordance with the precinct plan that provides for any of the following:

³⁷ Attached in Appendix 1.

³⁸ B2.7.1(1): Recreational needs of people and communities are met through the provision of a range of quality open spaces and recreation facilities. B2.7.2(2): Promote the physical connection of open spaces to enable people and wildlife to move around efficiently and safely. B2.7.2(7) Avoid, remedy or mitigate significant adverse effects of land use or development on open spaces and recreation facilities

- (i) Identification and protection of significant landscape features, the adaptation of the scheduled historic buildings, identified trees and open space network;
- (j) Public road and open space access to the Oakley Creek reserve;
- I334.3(16) Provide public connections to Oakley Creek from Carrington Road through public roads and open space, giving quality public access to this ecological area.
- I334.3(17) Require development to maintain and provide a varied and integrated network of pedestrian and cycle linkages, open space and plazas within the precinct.
- I334.3(18) Require the key pedestrian and cycle linkages through the precinct to be direct and convenient, well designed, safe and improve connectivity for all users.
- 109. It is also noted that the specific location and quantum of open space in the precinct went through a robust assessment process as part of the Auckland Unitary Plan Independent Hearings Panel (AUPIHP) process, and were intended to provide particular outcomes around connections, amenity and landscape. This includes giving effect to Wairaka Precinct policy I334.3(16) to provide public connections to Oakley Creek from Carrington Rd through public roads and open space, giving quality public access to this ecological area. Similarly, the shared path across 3A Carrington Road shown on Precinct Plan 1 went through a robust hearings process.
- 110. Relevant AUPIHP evidence provided on behalf of Unitec by Ms de Lambert (landscape) and Mr Duthie (planning) is set out below:

"In our opinion, the amended Precinct Plan." is appropriate from an urban design and landscape perspective and provides for an appropriate quantum and quality of open space. The open space is designed... to protect the site's important established amenity, respond to its landscape attributes, including topography and views and to establish a desirable level of amenity for the future residents and users of the Precinct." 40

"5.22 The critical aspects of the Precinct Plan are that it identifies:

- (a) Proposed public roads.
- (b) Key open spaces and the required future neighbourhood park in the north.
- (c) Key connections through the site, particularly new cycleways, shared path and integrated walkway connection.

³⁹ Precinct plan submitted by Unitec. "080 UNITEC - Precinct Plan. Uploaded to IHP site on 25/02/2016". This plan subsequently became the operative Wairaka Precinct Plan 1.

⁴⁰ Joint statement of rebuttal evidence of Rachel Virginia de Lambert and Bob Earl on behalf of Unitec (visual, landscape and urban design). Topic 080 - rezoning and precincts (general) – Wairaka Precinct. 26 January 2016. Paragraph 3.2, page10.

- (d) Key setbacks from the Precinct boundary, namely Oakley Creek, the southern residential boundary and the Carrington Road frontage.
- (e) Proposed interchanges on Carrington Road. These are important to the community and United and will ensure that there are sufficient access points to distribute traffic around the Wairaka Precinct, but not so many access points as to disrupt traffic flow along Carrington Road."⁴¹
- 111. The conclusion of Mr Duthie's evidence is:
 - "12.1 In my opinion the proposed Precinct provisions, as modified at mediation, set an appropriate planning framework for the Wairaka Precinct:

. . .

- (g) The Precinct Plan and site specific rules determine the key open space, roading, transport connections and special yards for Wairaka.
- 12.2 In my opinion the proposed provisions will enable quality development of the Precinct, while protecting the special environment of Wairaka with its heritage building, Oakley Creek, trees and parkland setting."⁴²
- 112. This evidence is important in order to understand the reasoning behind the identification of key open space (private) on the precinct plan, and the role of the precinct plan in the planning and development of Wairaka Precinct.
- 113. As set out in sections 12 to 15 of this report, in my opinion the plan change should include alternative locations for the key open space (private) and shared path on Wairaka Precinct Plan 1.
- 114. In my view the rest of PPC 75, and its overall purpose of intensifying and expanding the Mason Clinic, are consistent with the relevant RPS and plan provisions, as set out in Table 9 above.

7.6. Other relevant legislation

- 115. In considering a plan change, a territorial authority must have considered any regulation that is relevant to a regional or district plan change.
- 116. There is no other legislation relevant to this plan change.

7.7. The Auckland Plan

- 117. In considering a plan change, a territorial authority must have regard to plans and strategies prepared under other Acts.
- 118. The Auckland Plan, prepared under section 79 of the Local Government (Auckland Council) Act 2009 is a relevant strategy document that council should have regard to in the preparation of PPC 75.
- 119. The requestor sets out the Auckland Plan's relevance to PPC 75 in their AEE:

⁴¹ Statement of evidence of John Robert Duthie on behalf of Unitec (planning). Topic 080 - rezoning and precincts (general) – Wairaka Precinct. 18 December 2015. Paragraph 5.22, page18.

⁴² Statement of evidence of John Robert Duthie on behalf of Unitec (planning). Topic 080 - rezoning and precincts (general) – Wairaka Precinct. 18 December 2015. Paragraphs 12.1-12.2, page 40.

- "9.1 The Auckland Plan 2050 is a long-term spatial plan that sets out the strategic direction for the development of Auckland, which is to create a quality, compact city. The Auckland Plan 2050 identifies the challenges that Auckland faces, which include high population growth and environmental degradation.
- 9.2 The Auckland Plan 2050 recognises the importance of the health and wellbeing of people and communities, and the necessity to improve access to healthcare services and other infrastructure to address inequality and disparities of the quality of health experienced by different communities in Auckland.
- 9.3 The Plan Change will provide for the efficient development, growth and intensification of the Mason Clinic facilities, which will improve the level and quality of healthcare services that are provided to the Auckland region (and other regions). The Plan Change is consistent with the strategic directions of the Auckland Plan 2050 to create a quality, compact city which is serviced by necessary infrastructure (including social infrastructure) and community services."⁴³
- 120. The requestor's assessment of PPC 75 against the Auckland Plan is at a very high level. I have summarised the relevant sections of the Auckland Plan in paragraphs 117 to 119 and Table 10 below.
- 121. A key part of the Auckland Plan is the Development Strategy which sets out how Auckland will grow and change over the next 30 years, and identifies Development Areas which have the potential to achieve higher levels of growth.
- 122. The plan change area, and in fact the entire Wairaka Precinct, are located within the Mt Albert Development Area.



Figure 17: Excerpt from Auckland Plan 2050: Development Strategy. June 2018. Page 270.

123. As well as the Development Strategy, I have considered the outcomes, directions and focus areas identified in the Auckland Plan. Those relating to growth, redevelopment, housing, infrastructure (including social infrastructure), urban places and public space, and the environment are particularly relevant to the Wairaka Precinct and thus to PPC 75.

⁴³ AEE, page 42-43

Table 9: Relevant sections of the Auckland Plan 2050

Relevant Act/ Policy/Plan	Section	
Auckland Plan 2050	Development Strategy	
Relevant Act/ Policy/Plan	Outcome	Direction / Focus area
Auckland Plan 2050	Belonging and participation	Focus area 1: Create safe opportunities for people to meet, connect, participate in, and enjoy community and civic life
		Focus area 2: Provide accessible services and social and cultural infrastructure that is responsive in meeting Aucklanders' evolving needs
	Homes and places	Direction 1: Develop a quality compact urban form to accommodate Auckland's growth and support a low carbon future
		Direction 2: Accelerate the construction of quality homes that meet Aucklanders' changing needs and preferences
		Direction 4: Provide sufficient public places and spaces that are inclusive, accessible and contribute to urban living
		Focus area 1: Accelerate quality development at scale that improves housing choices
		Focus area 4: Invest in and support Māori to meet their specific housing aspirations
		Focus area 5: Create urban places for the future
	Transport and access	Focus area 4: Make walking, cycling and public transport preferred choices for many more Aucklanders
	Environment and cultural heritage	Direction 3: Use Auckland's growth and development to protect and enhance the natural environment
		Direction 4: Ensure Auckland's infrastructure is future-proofed
		Focus area 2: Focus on restoring environments as Auckland grows
		Focus area 3: Account fully for the past and future impacts of growth

- 124. The proposed re-zoning in PPC 75 would remove a significant portion of residential/business land from the precinct, which could be considered inconsistent with a number of the directions and focus areas in the "Homes and places" outcome. However, the Auckland Plan also prioritises "Provid[ing] accessible services and social and cultural infrastructure that is responsive in meeting Aucklanders' evolving needs", 44 which would be supported by the continuing operation and intensification of the Mason Clinic services.
- 125. As discussed in relation to the AUP in section 7.5 of this report, most of the proposed provisions will also support integrated development and infrastructure across the Wairaka Precinct.

⁴⁴ Auckland Plan, Belonging and participation outcome, Focus area 2.

126. The proposals to remove a significant proportion of key open space (private) and a shared path from Wairaka Precinct Plan 1 would, in my opinion, not be consistent with the Auckland Plan. As set out in Table 9, the Auckland Plan specifically addresses the need to provide sufficient spaces to support urban living, account for the impacts of growth, use development to enhance the environment, and provide transport choices (especially walking and cycling).

7.8. Any relevant management plans and strategies prepared under any other Act

127. Other relevant plans and strategies considered under PPC 75 are summarised in Table 11 below.

Table 10: Any relevant management plans and strategies prepared under any other Act

Relevant Act/Policy/Plan	Section	Matters
Albert-Eden Local Board Plan 2020	Outcome five: Parks and community facilities meet a wide range of needs	We will advocate for adequate open space and community services where there will be largescale developments at the ex-Unitec Institute of Technology site in Mt Albert (p.29)
Albert-Eden Climate Action Plan, September 2022	Natural environment actions	Advocate for open space opportunities within development of the Unitec site (p.18)

- 128. The requestor has not assessed the plan change against the Albert-Eden Local Board Plan 2020, although an assessment was done against the Local Board Plan 2017. The Albert-Eden Climate Action Plan was adopted after the plan change was notified, so the requestor will not have had the chance to assess it. The requestor may wish to address these plans in their evidence.
- 129. Both these local board plans specifically identify the ex-Unitec site (i.e. the Wairaka Precinct) as providing opportunities for open space as it is developed. This is consistent with the objectives and policies of the Precinct in the AUP(OP), and with the local board's advocacy role in achieving open space outcomes for their community.
- 130. Considering that both these plans advocate for open space in the Wairaka Precinct, it is my view that the removal of a significant proportion of key open space (private) from Wairaka Precinct Plan 1 would not be consistent with either the Albert-Eden Local Board Plan 2020 or the Albert-Eden Climate Action Plan.

8. Assessment of effects on the environment

- 131. Clause 22 of Schedule 1 to the RMA requires private plan changes to include an assessment of environmental effects that are anticipated by the Plan Change, taking into account clause 6 and 7 of the Fourth Schedule of the RMA.
- 132. An assessment of PPC 75's actual and potential effects on the environment ("AEE") is included as section 11 in the report titled "Assessment of environmental effect & statutory assessment for the Mason Clinic, 3A, 81A and 119A Carrington Road, Mount Albert, Auckland" (AEE), by Anthony Blomfield of Bently & Co, dated December 2021 (review date).
- 133. The AEE identifies and evaluates the following actual and potential effects:
 - · landscape and visual effects;
 - urban design and amenity effects, and the provision of an open space network;
 - infrastructure;

- transportation;
- · ecological effects; and
- the effects of natural hazards.
- 134. In my view, the requestor's AEE covers many of the positive and adverse effects. There are effects where I disagree with the conclusions of the AEE and I will give reasons why. There are also additional effects which, in my opinion, need consideration. To this end I have categorised my assessment of effects using the headings below rather than the requestor's headings. In these sections I set out the requestor's assessment, the council's expert's views and my own conclusions on each effect. In my view, the following headings cover the environmental effects relevant to the proposed private plan change:
 - Landscape, visual amenity and open space
 - Active mode connections
 - Urban Design
 - Transport
 - Stormwater and flooding
 - Water infrastructure
 - · Ecological effects

8.1. Landscape, visual effects and open space

- 135. The requestor states in paragraphs 11.20-11.23 that the visual effects of the form of development (that will be enabled by PPC 75) are assessed to be "very low". And that some of the visual effects will be positive, including the effects of the "landscaped buffers at the northern, western and southern boundaries, and the consideration of built form, design and landscaping at the eastern frontage". 45 and effects of the daylighted Wairaka Stream to the south of the plan change area.
- 136. The effects of the removal of the key open space (private) and the daylighted Wairaka Stream have been assessed by our landscape expert. The effects of built form, design and interfaces have been assessed by our urban design expert.
- 137. The requestor states in paragraph 11.16 of the AEE that "removal of the open space and shared path will be acceptable from a landscape and visual perspective", and in paragraph 11.24, that removal of the open space (private) feature will have "not [significant]" and "very low" adverse visual and landscape effects in the short and long-term, respectively. The requestor concludes in paragraph 11.26 that "Overall, the level of change that is enabled by the Plan Change, and the resulting landscape and visual effects, are considered to be appropriate..." ⁴⁶.
- 138. Ms Bridget Gilbert, the landscape expert on behalf of council, has considered the above report and the further information found in the documents listed below:

⁴⁵ AEE, paragraph 11.24, page 56.

⁴⁶ AEE, paragraph 11.26, page 57.

- The plan change documents and Clause 23 response information.⁴⁷
- Submissions and Further Submissions.
- Evidence prepared in relation to the Wairaka Precinct for the Auckland Unitary Plan hearing.
- The Stream Daylighting consent documents (LUC60373078).
- The Carrington Backbone Works Project documents (LUC60386272).
- 139. In Ms Gilbert's initial assessment of PPC 75, as part of the clause 25 assessment, she concluded that: "the proposed plan change should clearly articulate the location, extent, and broad 'purpose' of the open space resource that will be provided to compensate the loss of Key Open Space (Private) by the Wairaka Stream. Without this information, I consider that the proposed removal of the Key Open Space (Private) by the Wairaka Stream will detract from the landscape character and visual amenity values contemplated by the Wairaka Precinct, with adverse effects rated as at least 'moderate-high' (more than minor) to 'high' (significant)." ⁴⁸
- 140. Since then, stream daylighting and associated landscape works have been partially completed to the south of the PC75 site. Ms Gilbert has assessed that this work "goes some way to mitigating the loss of Open Space (Private) proposed by PC75, as it provides a high amenity connection between Te Auaunga / Oakley Creek and the main north-south route through Wairaka Precinct (refer Figure 2 below). Importantly, this attractive green connection is aligned to link with the network of Open Space (Private) extending though the centre of the Wairaka Precinct." 49
- 141. Ms Gilbert goes on to note that "However, it does not provide an 'open area' that might be used for such things as informal play / kick-around area, community gardens etc., which I consider could have been reasonably contemplated by the Open Space (Private) on the Wairaka Precinct Plan 1. Having undertaken a site visit, a review of the Backbone Consent documents, and a review of the Wairaka Precinct Plan 2 (which identifies the Protected Trees across the precinct refer Figure 3), it would seem logical that the flat land to the east of Building 28 is well suited for open space uses due to its proximity to the open space network and central location adjacent to character buildings (Buildings 28 and 33, as described in the Backbone Consent documents, and noting that the latter is the Pump House). I consider that a sizeable area of open space in this location would, in combination with the recently completed stream daylighting and landscape works, mitigate the loss of Open Space (Private) that is proposed." ⁵⁰
- 142. Ms Gilbert has proposed the following location for a replacement area of open space:

⁴⁷ Including the report titled "Mason Clinic – Landscape & Visual Effects Assessment: 3A, 81A and 119A Carrington Road, Pt Chevalier; Waitemata District Health Board", by Geraldine Bayly for Thomas Consultants, dated 17 December 2021.

⁴⁸ "Landscape Peer Review, Private Plan Change 75: Mason Clinic (3A, 81A & 119A Carrington Road, Mt Albert)", by Bridget Gilbert, 24 January 2023. (**Landscape Peer Review**). Appendix A, paragraphs 1.18-1.19, page 13.

⁴⁹ Landscape peer review, paragraphs 5.4-5.5 page 5.

⁵⁰ Landscape peer review, paragraphs 5.6-5.7, page 5.

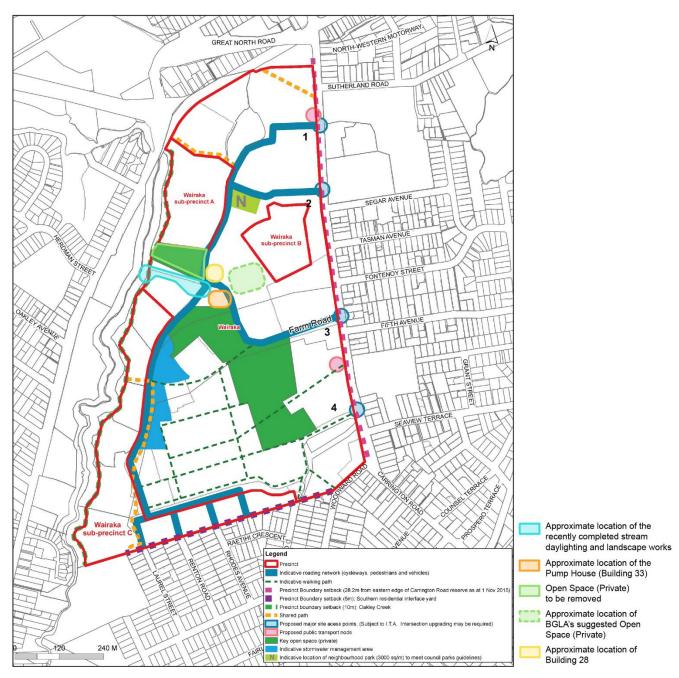


Figure 18: Wairaka Precinct Plan 2 Protected Trees with Bridget Gilbert's recommendation for an alternative location for key open space (private). Source: Landscape peer review.

143. Mr Demiralp, council's urban design expert, has also noted that the current location of the key open space (private) on the Southern Site "is not desirable from a Crime Prevention through Environmental Design (CPTED) perspective. This is due to an insufficient level of passive surveillance to the open space area by the Mason Clinic activity which adjoins the northern boundary and, the densely vegetated Oakley Creek adjoining the western boundary". 51, and supports an "alternative location for open space which can appropriately integrate with future residential activity

⁵¹ Urban Design Assessment – Private Plan Change Proposal for the Mason Clinic, Mount Albert, by Mustafa Demiralp, 16 February 2023. (**Urban Design Assessment**). Page 12.

[that] would enable better safety and utilisation of this space due to surveillance and proximity from surrounding residential activity." ⁵²

- 144. Ms Roja Tafaroji, the Parks Planning expert on behalf of council has considered the requestor's AEE and the further information found in the documents listed below:
 - Mason Clinic- Landscape & Visual Effect Assessment, revision 4.0 prepared by Thomas Consultants, dated December 2021
 - Design and Architectural Assessment, prepared by Klein Limited, dated April 2021
 - Ecological Impact Assessment, prepared by Morphum Environmental Limited, dated April 2021
 - Consultation Letter to Mana Whenua, prepared by Bentley & Co, dated March 2021
 - Attachment 2 Proposed Wairaka Precinct Provisions and Maps
 - Attachment 3 Section 32 Assessment
 - Attachment 10 Local Board Presentations and Notes
- 145. Ms Tafaroji notes that "The key open space indicated on Wairaka Precinct Plan was intended to be private. Parks Planning have concerns with privately owned reserves due to the potential confusion over their ownership and maintenance. For the purpose of clarity around the use and management of the open space, Parks Planning supports the retention of the private open space for Mason Clinic and its associated activities. However, it does not contribute to the open space provision within the precinct and the wider area as required by the precinct plan for public use by the community." ⁵³
- 146. Despite these concerns, Ms Tafaroji made the following assessment:
 - 6.2 As part of the additions to the precinct plan, under the section for Precinct Description (I334.1), there is a reference to "open space network" to be provided "by way of combination of identified areas, and indicative areas, including walking paths and shared paths" and to "be identified and developed as a component of the future urban intensification envisaged". While the reference clearly highlights the necessity of an "open space network" within the precinct, the amendments to the plan fail to demonstrate the (indicative) location of the above-mentioned open spaces (shared paths and walkways) apart from the ones which are already provided by the current precinct plan. This indication is also not reinforced by the policies and assessment criteria through the amended precinct plan.
 - 6.3 Considering the future intensification within the precinct area as well as in the wider environment, I suggest that an enforcement mechanism is required to be provided and noted in the plan to ensure an integrated approach providing the open space network required by the precinct plan.⁵⁴
- 147. Ms Tafaroji concludes that she can "only support the proposed PPC75 subject to the adequate provision of open space and connected open space network through accommodation of an open

⁵² Urban Design Assessment, page 12

⁵³ Private Plan Change – PPC75 for Mason Clinic – Parks Planning Assessment, by Roja Tafaroji, 16 November 2022. (**Parks Planning Assessment**). Paragraph 5.4, page 7

⁵⁴ Parks Planning Assessment, paragraphs 6.2 – 6.3, page 8

space and shared path within the precinct. This is to ensure that PPC75 aligns with policies of the precinct plan for pedestrian and cycling access (I334.3.(17), (18) and (19)). The indication of the future location of these open spaces needs to be demonstrated on an amended version of the precinct plan. Also, an enforcement mechanism is required to ensure the replacement of the open spaces will be implemented. The PPC75 also gives effect to the integration of open spaces via riparian margins that can be considered safe.".⁵⁵

148. I agree with Ms Gilbert's, Ms Tafaroji's and Mr Demiralp's assessments included above.

149. In my view:

- the quantum and location of 'key open space (private)' in the Wairaka Precinct was deliberately established through the IHP process in order to adequately meet the needs of future residents and users of the precinct
- moving the key open space (private) out of a future expansion area for the Mason Clinic) is appropriate, as there is a conflict between the intended community and connective use of the open space and the secure nature of the Mason Clinic.
- without an appropriate alternative location and quantum of key open space (private) being provided through this plan change, the removal of the key open space (private) will detract from the landscape character and visual amenity values contemplated by the Wairaka Precinct, causing significant adverse effects on the Wairaka Precinct as a whole
- without specific locations and quantum of key open space (private) being shown on the precinct plan, the proposed provisions are not sufficient to ensure that adequate open space will be provided as part of development
- the daylighting and landscape works on 119B Carrington Road partially mitigate
 the adverse effects of the removal of the key open space (private) in particular,
 the effect of the loss of a walking connection through open space to Te Auaunga /
 Oakley Creek
- a replacement/alternative area of open space in the location Ms Gilbert has
 recommended (see Figure 16 above), and of a similar size to the removed key
 open space (private) would mitigate the adverse effects of the loss of a large flat
 area of open space. The recommended location would also enable better passive
 surveillance of open space from future development and roads within the precinct.
- 150. I note that in HUD's recently lodged private plan change request, an area of open space is shown in approximately the same location as recommended by Ms Gilbert. ⁵⁶
- 151. The overall amount of open space shown in the HUD plan change proposal appears to be less than the 'key open space (private)' shown on the operative Wairaka Precinct Plan 1. However, HUD's plan change request is still in its early stages of being processed, so I cannot anticipate specifically how the balance of open space committed to in the letter from HUD will be provided, or how open

⁵⁵ Parks Planning Assessment, paragraph 9.1, page 9

⁵⁶ Te Auaunga Plan Change, Appendix 1 - Requested Plan Change. "I334.10.1 Te Auaunga: Precinct plan 1", page 48.

space issues will be resolved across the wider precinct. In my opinion though, the inclusion of open space in the recommended location, through Plan Change 75, would not be contrary to HUD's proposal.

8.2. Active mode connections

- 152. The plan change proposes to remove two key connections from the Wairaka Precinct: the "shared path" along the boundary of the Mason Clinic and the Northern Site, and the connection through the "key open space (private)" to Te Auaunga on the Southern Site. This report first assesses the removal of the shared path, then the removal of the connection through open space.
- 153. In paragraphs 11.34 and 11.18 of the AEE the requestor states that the "the existing location of the shared path traversing the Northern Site is not practical".⁵⁷ and "could be readily accommodated further to the north, and would provide a more logical connection to the bicycle path at a level location." ⁵⁸
- 154. Council's urban design expert, Mr Demiralp, has assessed the proposal to delete the shared path and "consider[s] that it is not feasible to locate this public accessway through a privately owned secure healthcare facility nor is it desirable from a CPTED perspective due to insufficient surveillance from the adjoining Mason Clinic site." ⁵⁹ Further comments in response to submissions are provided in section 11 below.
- 155. I agree with the requestor and Mr Demiralp that the current location of the shared path is not compatible with the proposed expansion of the Mason Clinic.
- 156. This is similarly reflected in the decision on resource consent LUC60404595, which states that "The location of the path will compromise the integrated operation and functioning of the proposed Mason Clinic activity and the security and safety of the users and public respectively." ⁶⁰
- 157. The requestor also states that, similarly to the removal of the key open space (private), the "pedestrian connections to surrounding areas will be intrinsically provided for as part of the master-planning of the wider precinct development.".⁶¹ Other than this, the requestor did not provide a transport assessment of the removal of the shared path, nor of the removal of the intended connection through the key open space (private) to Te Auaunga / Oakley Creek.
- 158. The requestor's conclusion has been assessed by council's parks planning and transport experts.
- 159. As stated above, Ms Tafaroji has noted the importance of a shared path network as part of the Wairaka Precinct, and can "only support the proposed PPC75 subject to the adequate provision of open space and connected open space network through accommodation of an open space and shared path within the precinct." ⁶²

⁵⁷ AEE, page 60

⁵⁸ AEE, page 55

⁵⁹ Urban Design Assessment, page 12

⁶⁰ LUC60404595 decision and consent conditions, page 6

⁶¹ AEE, paragraph 11.36, page 61

⁶² Parks Planning Assessment, paragraph 9.1, page 9

- 160. Mr Andrew Temperley, the transport expert on behalf of council has considered the AEE and supporting documents, and the submissions and further submissions.
- 161. Mr Temperley supports "active mode connections identified in the Wairaka Precinct Plan [being] retained and future proofed for future delivery." ⁶³
- 162. Given the above expert opinions, development context, and the objectives and policies of the Wairaka Precinct, it is my view that a replacement shared path connection between the spine road and Te Auaunga / Oakley Creek needs to be shown on Wairaka Precinct Plan 1.
- 163. This path could be either to the north or south of the plan change sites, but I agree with the requestor's statement that a location to the north would provide a useful link to the cycleway. There is a reasonable expectation that the final location may be adjusted as the wider precinct is developed, but the shared path needs to be on the precinct plan to ensure that a connection will be provided.
- 164. The decision document for resource consent LUC60404595 also states that "Alternative routes are being investigated on adjacent land owned by the Ministry of Housing and Urban Development ("MHUD") via a Plan Change lodged by MHUD.".⁶⁴ This suggests that including an alternative shared path location through the PPC 75 process would be consistent with the HUD plan change, even if the precise location/route is later amended through the HUD plan change.
- 165. With regards to the connection through open space to Te Auaunga, Policy I334.3(16) states "Provide public connections to Oakley Creek from Carrington Road through public roads and open space, giving quality public access to this ecological area." As the key open space (private) on the Southern Site is the only open space shown on Precinct Plan 1 which joins the spine road and Te Auaunga / Oakley Creek, it is reasonable to infer that part of the purpose of this open space is to provide a public connection.
- 166. As discussed in section 2 of this report, a walkway is being constructed on 119B Carrington Road, as part of the Wairaka Stream daylighting works. As set out in paragraph 138, this walkway (when complete) will provide a walking connection through a landscaped area to Te Auaunga / Oakley Creek.
- 167. In my opinion, this new walkway will fulfil the public connection function (but not the open space function) of the key open space (private) that is proposed to be removed from the Southern Site.

8.3. Urban design

- 168. Effects of additional scale of buildings: in paragraphs 11.14 and 11.25 of the AEE the requestor concludes that the change in permitted height to 18-26m (from 16m on the Mason Clinic Site, and from 18-27m on the Northern and Southern Sites) will be compatible with the scale of development that is enabled within the Precinct.
- 169. Mr Demiralp concludes that there are "various elements in the proposed provisions and the assessment criteria on the proposed precinct plan to help manage the building bulk, and appearance and create positive streetscapes. Although it appears that additional height will not be sought by the

⁶³ Proposed Plan Change 75, Mason Clinic, Carrington Road, Mount Albert – Transportation Assessment. By Andrew Temperley, Traffic Planning Consultants. Dated 15 November 2022. (**Transportation Assessment**). Paragraph 1.6, page 2.

⁶⁴ LUC60404595 decision and consent conditions, page 11

- Mason Clinic, [he believes that] the adverse effects can be managed with quality design responses." ⁶⁵
- 170. I agree with this assessment on the effects of building bulk and scale enabled by the proposed plan change.
- 171. With regards to interfaces with other activities and the boundaries of sub-precinct A, the requestor states that "the proposed northern and southern boundary yard and landscaping standards will ensure that future development of the Mason Clinic has positive amenity outcomes, in terms of the site's relationship with neighbouring properties, the streetscape, and the users of the Mason Clinic. They also note that "the development that will be enabled by the Plan Change will incorporate landscaped buffers at the northern, western and southern boundaries, and the consideration of built form, design and landscaping at the eastern frontage." ⁶⁷
- 172. Mr Demiralp has assessed the proposed boundary and interface provisions in detail in his report. Other than two amendments recommended in response to submissions (discussed in section 11-14 below), he is "satisfied that the proposed plan change provisions will manage interfaces to all boundaries and will be appropriately integrated with future residential development within the Wairaka area." ⁶⁸
- 173. I agree with Mr Demiralp's assessment of the effects of the proposed boundary and interface provisions.
- 174. In my view, the mitigation put in place to manage the urban design effects of the proposed plan change can be supported subject to the amendments set out in sections 11-14.

8.4. Transport

- 175. In paragraph 11.55 of the AEE the requestor concludes that: "the potential transport effects of the changes proposed by the Plan Change are comparable with or less than those effects that would be generated by the development of the land for an activity provided for under the status quo. The proposed standards, matters of discretion and assessment criteria which apply to the consideration of new development within Sub-precinct A, together with the existing Auckland-wide provisions which apply to transportation matters generally, will effectively manage the transport effects of development, relative to the capacity of the transport network, and the outcomes that are anticipated by the Wairaka Precinct." ⁶⁹
- 176. Mr Temperley, the transport expert on behalf of council, has considered the above report and the supporting reports including:
 - Integrated Transport Assessment (ITA) for Wairaka Precinct
 - Mason Clinic Proposed Private Plan Change Transport Assessment

⁶⁵ Urban Design Assessment, page 20.

⁶⁶ AEE, paragraph 11.15, page 55

⁶⁷ AEE, paragraph 11.23, page 56

⁶⁸ Urban Design Assessment, page18

⁶⁹ AEE, page 66

- Further transport assessment provided in response to Clause 23 request
- 177. Mr Temperley has also provided comment on the submissions, which is included in section 11 below.
- 178. He concludes that PPC 75 is acceptable and that the transportation related effects of the development which it enables can be reasonably accommodated on the adjoining Wairaka Precinct and public road networks, subject to the following provisions:
 - "Assessment of the impact of cumulative trip generation on Carrington Road resulting from wider development within and adjoining the Wairaka Precinct and confirmation of trigger points identified for transport improvements within the Wairaka Precinct and to Carrington Road.
 - The provision of acceptable access arrangements with the adjoining north-south road through the Precinct, for which improvement works have recently been consented and are currently underway.
 - We additionally support AT comments to ensure that provisions are made for active mode connections identified in the Wairaka Precinct Plan to be retained and futureproofed for future delivery."⁷⁰
- 179. These recommendations, and the relevant submissions, are discussed in detail in section 11 of this report.

8.5. Water infrastructure

180. The requestor concludes in section 11 of the AEE that:

"11.58 The Aurecon assessment compares the anticipated loading on the wastewater and water supply networks generated by the level of activity that is proposed to be enabled within the Mason Clinic, with that of a level of development that could be reasonably expected to occur on the Northern and Southern Sites under the 'status quo', which has been calculated using the residential development densities proposed by HUD for the balance of the development land within the Wairaka Precinct. This assessment finds that the demands for wastewater and water infrastructure is less than that of potential residential development of the Northern and Southern Sites, and comparable with the development of the Northern Site only (in the scenario where the Southern Site is developed as an open space and does not generate demand for services). In this respect, the intensity of development enabled by the Plan Change will generate less demand on infrastructure compared with that of a development enabled under the status quo."⁷¹

- 181. Kerryn Swanepoel, Major Development Programme Lead at Watercare, has provided updated information regarding the serviceability of the Wairaka Precinct:
 - Wastewater:
 - The Wairaka Precinct is constrained for its ultimate proposed development ahead of the delivery of the Central Interceptor.

⁷⁰ Transportation Assessment, page 10

⁷¹ AEE, page 67

 The Orakei Sewer that traverses the site is at capacity. There are limited connections available ahead of Central Interceptor delivery in 2026 and the duplication of the Orakei sewer.

Water:

- The network that the Mason Clinic is currently connected to is difficult to access. There is a risk of resilience issues with only one single feed into the site. The Mason Clinic may want to consider a connection to the future backbone water network through the Wairaka Precinct once it is constructed.
- 182. Given the above, it is my view that while there are constraints across the Wairaka Precinct with regards to water and wasterwater servicing, these issues can be addressed at resource consent stage.

8.6. Stormwater and flooding

183. In section 11 of the AEE the requestor concludes that:

"11.60 The outcome sought by the Plan Change will not implicate the management of stormwater to the receiving environment, or implicate overland flow. Consistent with the status quo, the resource consent requirements for future building development are required to address matters concerning the location and capacity of infrastructure servicing. Similarly, the Plan Change Request does not affect the provisions of the Unitary Plan which relate to discharges of contaminants to water (Te Auaunga) and discharges associated with the creation of impervious surfaces.

11.61 The infrastructure networks may require upgrades in the future, particularly as significant redevelopment occurs within the balance of the Wairaka Precinct, and this will be appropriately managed through the resource consent process. Similarly, mechanisms (Stormwater Management Plan requirements) exist within the Wairaka Precinct provisions to ensure the integrated management of stormwater from all development. As discussed above a Stormwater Management Plan has been submitted to the Council for inclusion within the Network Discharge Consent"⁷²

- 184. The requestor also notes that "The proposed rezoning of these properties to a Healthcare Zone [from Mixed Use which includes residential activities], and the aspiration to develop this land for healthcare purposes, does not fundamentally introduce or increase the risk of people or property to the effects of natural flooding hazards." And that the Stormwater Management Plan (SMP) "specifies a range of comprehensive stormwater network upgrades which are designed to increase the capacity of the stormwater infrastructure to convey flows from the 10- and 100-year flood event, and these upgrades will be jointly implemented by the development stakeholders of the Wairaka Precinct as part of future development to lessen the extent and the impacts of these flooding hazards". **
- 185. The flooding hazards which apply to the plan change site include a flood plain across the centre of the Southern Site, associated with the route of the Wairaka Stream. The deletion of the key open

⁷² AEE, page 68

⁷³ AEE, paragraph 11.62, p.68

⁷⁴ AEE, paragraph 11.64, p.69

- space (private) from this site could be considered to increase the flood risk to people and property, since it was not previously anticipated that development would occur on this site.
- 186. However, as noted by the requestor, the re-zoning from Business Mixed Use to Special Purpose Healthcare Facilities and Hospitals does not in itself increase the risk, as both these activities allow for vulnerable activities. Additionally, the proposed zoning would provide more restrictive measures for maximum impervious areas on 3A and 119A Carrington (from 100% to 80%), which is an improvement.
- 187. Ms Gemma Chuah, the Healthy Waters specialist on behalf of council, has considered the requestor's AEE and supporting documents and has concluded that:
 - "10.1 There are not likely to be any adverse effects in relation to stormwater or flooding arising from the plan change.
 - 10.2 Specific details of stormwater management in relation to development within the plan change area can be addressed through resource consent and engineering plan approval processes.
 - 10.3 Overall Healthy Waters can support the plan change without modification."⁷⁵
- 188. I agree with Ms Chuah's assessment.

8.7. Ecological effects

- 189. In section 11 of the AEE the requestor sets out the conclusions from their ecological expert:
 - "11.41 The Ecological Assessment considers that the rezoning of the Northern and Southern Sites, and the corresponding application of Standard H25.6.4 (maximum impervious area 80%) of the Healthcare zone, which is more restrictive than the status quo standard, is an improvement over the existing provisions, and will better maintain the ecological value of the receiving environments relative to the status quo.
 - 11.42 In respect of the open space, the Ecological Assessment concludes that while any ecological contribution that the open space would provide is uncertain (as there are no standards associated with the potential use and development of this area), any potential impacts that will arise from its removal from the Southern Site will be offset by the equivalent provision within the wider Wairaka Precinct.
 - 11.43 The Ecological Assessment also concludes that the introduction of specific landscaped yard standards to the northern and southern boundaries of the Plan Change Area will provide some habitat function for native fauna, which is an overall benefit to the ecological values of the subject site.
 - 11.44 The re-zoning of the Southern Site will consequently include a 5m Riparian Yard control, consistent with that which currently applies along the length of the Wairaka Stream within the Mason Clinic Site. The Landscape Assessment confirms that a 5m yard will provide sufficient width for suitable riparian planting, including trees which will provide canopy cover over the stream. The Ecological Assessment concludes that the 5m control in association with future daylighting of the stream will contribute to an improvement of the freshwater ecology, relative to the existing physical

⁷⁵ Healthy Waters assessment, page 5.

situation, and that a 5m control will contribute to the ecological habitat values within the Plan Change Area."⁷⁶

. . .

- "11.46 Overall, the Ecological Assessment finds that the level of effects from the proposed form of development that will be enabled by the Plan Change are "low net gain", and that the Plan Change does not fundamentally change the appreciable ecological values." ⁷⁷
- 190. The requestor also states that "In addition, and for clarity, the 5m riparian yard will only apply once daylighting of the Wairaka Stream occurs. Therefore, there is no 'reduction' in the riparian margin (from the 10m margin provided in the underlying zone) as there will be an overall benefit from daylighting the stream." Daylighting the stream is not proposed as a requirement in the plan change, although it has been consented under LUC60373078. As the requestor has indicated that the development of the Southern Site will be at a later stage, it is not clear when or if the stream will be daylighted. Thus I have not been able to take the potential daylighting benefits into consideration.
- 191. I agree with the Morphum assessment of the ecological effects, and thus with the requestor's conclusions (excluding the effects of stream daylighting).

9. Consultation

192. The following consultation was undertaken for PPC 75.

9.1. Mana Whenua

- 193. The requestor has sent correspondence about the private plan change request to 14 mana whenua groups which were identified as having interests in the Wairaka Precinct area. No formal responses were received. These groups are listed below:
 - Ngāi Tai ki Tāmaki
 - Ngāti Te Ata
 - Te Kawerau ā Maki
 - Te Ākitai Waiohua
 - Ngāti Maru
 - Ngāti Pāoa Iwi Trust
 - Ngāti Pāoa Trust Board
 - Ngāti Tamaterā
 - Ngāti Whātua Ōrākei
 - Te Rūnanga o Ngāti Whātua
 - Ngāti Whātua o Kaipara

⁷⁶ AEE, p.62-63

⁷⁷ AEE, p.64

⁷⁸ AEE, paragraph 11.45, p.63

- Te Ahiwaru Waiohua
- Waikato Tainui
- Ngati Tamaoho
- 194. Additional consultation, in the context of mana whenua as development partners in the precinct, has been undertaken by the requestor with Marutūāhu Rōpū, Waiohua-Tamaki Rōpū, and Ngāti Whātua Rōpū.
- 195. The council sent a copy of the proposed change to all iwi authorities in accordance with clause 5(4) as part of the notification process.
- 196. No submission was received from any mana whenua on full notification of the plan change. No iwi resource management groups recommended needing a decision maker in accordance with clause 4A of Schedule 1 of the RMA.

9.2. Local Board

- 197. The Albert-Eden Local Board were advised of proposed private plan change in May 2020, and the requestor has made regular presentations since then at local board workshops.
- 198. I presented to the Albert-Eden Local Board in September 2020 following the close of submissions. Further submissions were still open at this point, but this timing was in order to report to the final local board business meeting before the local body elections. At that meeting I outlined the nature of submissions and the main themes in contention.⁷⁹
- 199. At the 20 September 2022 business meeting of the Albert-Eden Local Board the following resolution was passed:

That the Albert-Eden Local Board:

- a) provide the following local board views on private plan change 75 by Waitematā District Health Board for 3A, 81A and 119A Carrington Road, Mt Albert:
 - i) support the services provided by the Mason Clinic and its staged redevelopment.
 - ii) support the proposal to rezone the northern and southern site of Sub-Precinct A to Special Purpose Healthcare Facility and Hospital.
 - iii) support standards be included to manage the boundary and interface between the activities occurring in Sub-Precinct A and the rest of the Wairaka Precinct, for both construction and expansion of the Mason Clinic and its ongoing operations.
 - iv) do not support the deletion of 'Key open space (private)' and 'Shared path' from the Precinct provisions without providing for them elsewhere in the either Sub-Precinct A or the wider Wairaka Precinct however note the difficulties associated with the latter given it is not owned by the applicant.

⁷⁹ Local board views on private plan change 75 for 3A, 81A and 119A Carrington Road, Mt Albert (Mason Clinic). Item 14 on agenda for 20 September 2022 Albert-Eden Local Board business meeting. https://infocouncil.aucklandcouncil.govt.nz/Open/2022/09/AE 20220920 AGN 10199 AT WEB.htm

- v) request provision is made for connections between open space within the precinct and Te Auaunga/Oakley Creek, and for safe walking and cycling routes to the Mason Clinic site.
- vi) request that resource consents are publicly or limited notified to allow for the opportunity of public input, given the nature of the activities on the site and the long-term time scale of the construction and expansion of the existing facility as well as the imminent significant residential development on the adjacent site known as the Carrington Development.
- vii) highlight the importance the current provision of open space in the Sub-Precinct A site plays in providing for natural soakage and runoff and the negative impact the increase in impervious surfaces may have on groundwater and the adjacent Ta Auaunga -Oakley Creek.
- b) appoint the Chair and Deputy Chair to speak to the local board views at a hearing on private plan change 75.
- c) thank Fiona Sprott Team Leader Planning South/Central, and Elisabeth Laird Policy Advisor, for their attendance to speak to the report. 80

10. Notification and Submissions

10.1. Notification details

200. Details of the notification timeframes and number of submissions received is outlined below:

Date of public notification for submissions	26 May 2022
Closing date for submissions	27 June 2022
Number of submissions received	3
Date of public notification for further submissions	9 September 2022
Closing date for further submissions	23 September 2022
Number of further submissions received	1

201. There were no late submissions. Copies of the submissions are attached in Appendix 3 to this report.

11. Analysis of submission and further submissions

- 202. The following sections address the submissions received on PPC 75. It discusses the relief sought in the submissions and makes recommendations to the Hearing Commissioners.
- 203. Submissions that address the same issues and seek the same relief have been grouped together in this report under the following topic headings:
 - Submissions supporting PPC 75 with the amendments requested
 - Submissions opposing PPC 75 in its entirety

⁸⁰ Resolution number AE/2022/171

11.1. Submissions supporting PPC 75 with the amendments requested

Sub. No.	Name of Submitter	Summary of the Relief Sought by the Submitter	Further Submissions	Planner's Recommendations
1.1	The Ministry of Housing And Urban Development Attn: Francelle Lupis	Ensure that the Precinct description has an appropriate level of detail and acknowledges role of Precinct provisions in addressing interfaces between Mason Clinic and surrounding activities.	Supported in part by FS01 Geoffrey John Beresford and Joanna Louise Beresford	Accept.
1.2	The Ministry of Housing And Urban Development Attn: Francelle Lupis	Amend proposed activity 53 to provide that additions to existing buildings that would increase the building footprint by more than 20 % or 200m2 GFA (whichever is lesser) that are located within 10m of the eastern boundary are restricted discretionary activities.	Supported in part by FS01 Geoffrey John Beresford and Joanna Louise Beresford	Accept.
2.1	Auckland Transport Attn: Chris Freke	Amend the Plan Change to include: provisions which assess the cumulative impact of trips on Carrington Road and access, using the framework within the MHUD ITA; information requirements to assess additional trips generated from any development in sub-precinct A; provisions that address any upgrades to the Gate 1 or 2 - Carrington Road intersections necessary to support the development enabled by this Plan Change.	Supported in part by FS01 Geoffrey John Beresford and Joanna Louise Beresford	Accept in part – recommend that this is done via HUD plan change.
2.2	Auckland Transport Attn: Chris Freke	Amend the Plan Change to include provisions that require upgrades on the site frontage with the internal road network to include safe walking facilities and provision for separated cycling facilities prior to or, in conjunction with, development.	Supported in part by FS01 Geoffrey John Beresford and Joanna Louise Beresford	Reject.
2.3	Auckland Transport Attn: Chris Freke	Require more information from the applicant about the accessibility of the site for active modes from Carrington Road based on the current layout and speed environment, and amend the Plan Change appropriately. Amend the Plan Change to include provisions to address any upgrades to the internal roading network necessary to support the development ahead of any MHUD upgrades being delivered. This should include safe walking and cycling routes to the Mason Clinic.	Supported in part by FS01 Geoffrey John Beresford and Joanna Louise Beresford	Reject.
2.4	Auckland Transport Attn: Chris Freke	Amend Wairaka: Precinct Plan 1 to provide for appropriate alternative alignment(s) for any deleted active mode connections to Oakley Creek and the regional cycleway, including one in place of the formerly proposed reserve.	Supported in part by FS01 Geoffrey John Beresford and Joanna Louise Beresford	Accept.
2.5	Auckland Transport Attn: Chris Freke	Require more information from the applicant regarding the justification for deleting the indicative walking path connection through the open space lot to Farm Road. Amend the Wairaka: Precinct Plan 1 to reinstate the pedestrian connection or provide an appropriate alternative.	Supported in part by FS01 Geoffrey John Beresford and Joanna Louise Beresford	Accept in part – path has been provided so no changes recommended.

Discussion

- 204. Submission point 1.1: This submission point is supported by Mr Demiralp, council's urban design expert. In my view, as the precinct contains a wide variety of activities it would be helpful to acknowledge in the precinct description that the interfaces between activities are managed through provisions. Suggested wording to insert in I334.1 is included in section 12 of this report. In my opinion, this wording should be kept at a high level to be consistent with the other information in the precinct description.
- 205. Submission point 1.2: I agree with the amendment suggested in the submission. This change would be consistent with activities and rules in the underlying zone (see H25.4.1(A20)) and is supported by council's urban design expert. Mr Demiralp states that "This request is considered reasonable, any extension of these buildings that are above 20% of the GFA will be significant additions that would have an impact on the built form and the streetscape". 81 Some consequential changes to related precinct provisions would also be needed, and these are set out in section 12 of this report.
- 206. Submission point 2.1: Council's transport expert supports this submission point and recommends "provisions for assessment of the impact of cumulative trip generation on Carrington Road resulting from wider development within and adjoining the Wairaka Precinct area, with respect to key trigger points for upgrades to Carrington Road." 82 In my opinion, it would be more appropriate for these provisions to be added as part of the HUD plan change for the wider Wairaka precinct, to ensure that the transport provisions are sufficient for any changes they may propose.
- 207. Submission points 2.2 and 2.3: I am addressing these submission points together as they both relate to the provision of walking and cycling access to the Mason Clinic along the spine road. During the clause 23 assessment, I and council's transport expert looked at the information provided and considered that it was adequate to assess the transport aspects of the plan change including walking and cycling accessibility. Although due to the function of the Mason Clinic we are not expecting members of the public to need walking and cycling access through the site, however, active transport options should be available for staff and visitors to get to the Clinic. This would be in line with the precinct's objectives and policies. ⁸³ Council's transport expert supports the "proposed requirement for upgrades to internal road upgrades to be in place including walking and cycling provisions." ⁸⁴
- 208. Taking all this into consideration, I agree that active mode access to the Mason Clinic from Carrington Road is important. Since the plan change was lodged, resource consent has been granted for the development of internal roads and associated infrastructure within Wairaka Precinct (referred to as the "backbone works"). The resource consent decision states that "The roads have been designed to cater for all road users and modes of transport with separate dedicated pedestrian and cycle ways". 86, and these are shown on the approved plans. 87 Based on this consent, it is my view that

⁸¹ Urban Design Assessment, page 19

⁸² Transportation assessment, page 6

⁸³ See I334.2(7), I334.3(4), (17), (18), (19), (20)

⁸⁴ Transportation assessment, page 6

⁸⁵ LUC60386272

⁸⁶ LUC60386272 decision and consent conditions, page 7

⁸⁷ LUC60386272 approved plans, 3126447-CA-3100

walking and cycling routes from Carrington Road to the plan change site will be provided as part of that development. Additionally, I note that the precinct provisions require walking and cycling networks to be considered as part of the resource consent assessments for new development, 88 which will apply to the Mason Clinic as it is redeveloped. In my opinion, it is not necessary to add new provisions to specifically address access to the Mason Clinic.

- 209. Submission point 2.4: Council's transport and Parks Planning experts both support this submission point and recommend that an alternative location be provided for the shared path that is proposed to be deleted from Precinct Plan 1. I also support this submission point and agree that an alternative shared path should be shown on the proposed Precinct Plan 1. I note that in the decision for resource consent LUC60404595, Auckland Transport's position on the path is stated as "Auckland Transport accept that the Mason Clinic is not an appropriate site for members of the public to traverse due to the nature of the activity. They do not oppose removal of the shared path as part of this proposal noting that its removal is contingent on the implementation of an alternative route." ⁸⁹ I have discussed the importance of the shared path being shown on the precinct plan, and potential locations, in section 8 of this report.
- 210. Submission point 2.5: As discussed above in section 8 of this report, part of the reason for the location of the key open space (private) on 119A Carrington Road was to enable access through that open space to Te Auaunga / Oakley Creek. I agree with the submitter that a connection should be provided in this general area. Having undertaken site visits, I consider that the walkway being constructed on 119B Carrington Road will provide (when complete) an appropriately located walking connection to Te Auaunga through a landscaped area. For this reason, in my opinion it is not necessary to amend Precinct Plan 1 in this case as this connection is in the process of being built.

Recommendations on submissions

- 211. That submission **1** be accepted for the following reasons:
 - 1.1: Accept. It would be helpful to acknowledge in the precinct description that the interfaces between activities are managed through provisions.
 - 1.2: Accept. The requested change to when restricted discretionary activity status applies to buildings within 10m of the eastern boundary is consistent with the underlying zoning and is supported by council's urban design expert.
- 212. That submission **2** be accepted in part for the following reasons:
 - 2.1: Accept in part. It is important to assess cumulative trips, but would be more appropriate for provisions addressing cumulative impact of vehicle trips to be added as part of the HUD plan change for the wider Wairaka precinct to ensure that the transport provisions are sufficient for any changes they may propose.
 - 2.2 and 2.3: Reject. Walking and cycling facilities are expected to be provided as part of the "backbone works" consent. Precinct provisions for new development also require consideration of walking and cycling networks. It is not necessary to add new provisions to specifically address access to the Mason Clinic.

⁸⁸ See I334.7.1(3)(e), I334.7.2(3)(c), I334.8.1(4)(a), (c), I334.8.1(6), I334.8.2(4)(a), (c), I334.8.2(6).

⁸⁹ LUC60404595 decision and consent conditions, page 11

- 2.4: Accept. An alternative location for the deleted shared path / active mode connection needs to be shown on Precinct Plan 1 to ensure that the connection is provided during development of the wider precinct.
- 2.5: Accept in part. A connection to Te Auaunga / Oakley Creek is needed in the general location of the deleted key open space (private), and will be provided by the walkway on 119B Carrington Road.
- 213. The amendments discussed above in response to submissions are set out in Appendix 5 to this report, and discussed below in sections 12 and 13 of this report.

11.2. Submissions opposing PPC 75 in its entirety

Sub.	Name of	Summary of the Relief Sought by the Submitter	Further	Planners
No.	Submitter		Submissions	Recommendations
3.1	Geoffrey John Beresford and Joanna Louise Beresford	Decline the plan change. Concerns about: definition of activities permitted on site; social impacts (including public safety) due to expansion of forensic psychiatry services, cumulative number of health services in area, possible relocation of other services to the Mason Clinic site; interfaces, planting, building height, noise; consistency with NPS UD; reduction of riparian margins and development in flood plains; adequacy of section 32 analysis; deletion of open space and shared path; controlled activity status and nonnotification of certain activities; adequacy of assessment criteria managing public health and safety.	No	Accept in part

Discussion

214. This submission opposed the plan change in its entirety, for a number of reasons. The submitters sought "that the Change be withdrawn or, if necessary, disallowed unless amendments are made to address the concerns in this submission." ⁹⁰. I agree with some of the concerns raised, as discussed in Table 12 below, and have recommended changes rather than withdrawal or rejection of the plan change.

Table 11: Discussion of submission 3

Submission details	Discussion
5.The reasons for the submission are that the Change, as notified:	I disagree with this statement. See section 7.5 of this report and the clause 25 report for my assessment.
(a) Is contrary to the sustainable management of natural and physical resources does not amount to or promote the efficient use and development of resources, and is otherwise contrary to the purpose and principles in Part 2 of the Resource Management Act 1991 (the Act).	

⁹⁰ Submission 3.1

(b) Is inconsistent with objectives, policies and other provisions in the AUP and other relevant planning instruments.	I agree in part. The plan change as proposed is inconsistent with some objectives and policies of the Wairaka Precinct (regarding open space and connections) but is generally consistent with the RPS. See sections 5, 7.5 and 8 of this report for my assessment.
(c) Does not warrant approval in terms of section 32 of the Act.	I disagree with this statement. See section 5 of this report for my assessment.
(d) Is unnecessary and counterproductive to the sustainable management of Wairaka Precinct.	I disagree with this statement. See sections 5, 7 and 8 for my assessment.
(e) Will generate significant adverse effects on the environment in particular in terms of traffic, noise, social impacts and on the ability to comprehensively redevelop the Wairaka Precinct for high quality residential development.	I agree that additional effects may result from additional development capacity enabled by this plan change. The permitted height is proposed to change to 18-26m (from 16m on the Mason Clinic Site, and from 18-27m on the Northern and Southern Sites). As discussed in section 8 of this report, this is a similar building scale to that which is already enabled on these sites. However, I note that all new buildings will require a resource consent. Assessments of effects including traffic, noise, etc will be carried out as part of the resource consent process which, in my opinion, is more appropriate than at the plan change level.
6.In particular, but without limiting the generality of the above:(a) The Change will enable significant adverse effects on the environment including on the social well-being of the existing and proposed residential community.	This is a very general statement. I have addressed the specific effects mentioned below.
(b) The Plan Change is sought to service anticipated demand in forensic psychiatric services and broaden the services provided at the Mason Clinic in respect of youth services and holistic rehabilitation facilities for non-custodial users. The Change approximately doubles the site area zoned for the Mason Clinic and is intended to enable the expansion of the Mason clinic to a GFA of around 10,000 square metres, nearly double that of the existing facilities. The proposed expansion and broadening of the services changes the public safety risk and requires an overall assessment of the level of security and whether the activity remains appropriate in this location.	The Mason Clinic is a permitted activity in the Special Purpose – Healthcare Facility and Hospital Zone. Operational safety and the safety of the public is currently managed by the facility. The plan change includes provisions to manage the interfaces and to assess development with regards to safety at resource consent stage, which in my opinion is more appropriate than at the plan change stage.
(c) The Change enables the expansion and intensification of the existing Mason Clinic but fails to assess the cumulative effects on social well-being of expanding the facility given the concentration of other WDHB / Mental Health facilities in the block bounded by Sutherland Road Carrington Road and Segar Avenue and on Seaview Terrace.	In my opinion, the existence of multiple healthcare facilities in an area should not be assumed to cause adverse cumulative effects on social wellbeing. Ensuring that these facilities and services are available and accessible to service users will have positive effects and is in line with the Auckland Plan as discussed in section 7.7 of this report.
(d)The Change does not adequately assess or mitigate the Social Impacts of the proposed expansion and cumulative effects of locating the expanded facility in this area. The Mason Clinic isa regional facility providing forensic psychiatric services for the WDHB and the upper North Island. The Plan Change fails to recognise that the burden of the proposed expansion falls disproportionately on the local community or to mitigate	In my opinion, the expansion of healthcare services does not cause adverse cumulative effects on social wellbeing, although the expansion of the facility providing those services may have some adverse impacts. The effects associated with a larger healthcare facility, such as safety, noise and traffic will be assessed through the resource consent process and will be managed adequately by the

those adverse effects. Further, there is nothing in the Change to ensure that other WDHB / Mental Health facilities are not relocated and consolidated to the site

proposed provisions (subject to the recommended amendments), in my opinion.

In my opinion, it is also not appropriate to limit the type of healthcare services which could occur on a site zoned Special Purpose – Healthcare Facility and Hospital unless such a restriction was related to specific effects of particular services. For example, higher traffic due to outpatient services compared to inpatient. However, the zone and precinct provisions provide an opportunity for effects such as traffic to be assessed at resource consent stage.

(e)The Plan Change seeks to provide for "justice facilities" across the entire site. However, the AUP definition is very broad being a "facility used for judicial, court, or tribunal purposes, and/or activities including collection of fines and reparation, administration and support, together with custodial services as part of the operation of New Zealand's justice system." Given the very particular forensic psychiatric activity sought to be enabled by the plan change there needs to be a more specific definition of the activities allowed on the site rather than reliance on the AUP definition.

I acknowledge the concern raised by this submission point. I note that the plan change does not propose to add "justice facilities" to any of the Wairaka Precinct activity tables, and instead is proposing to rely on the existing inclusion of "justice facilities" within the Special Purpose – Healthcare Facility and Hospital Zone (nested under "community facilities" in Chapter J Definitions). In my opinion, the description, objectives and policies of that zone make it clear that the purpose is for healthcare facilities, not for other types of justice facilities.

Chapter H25 Special Purpose – Healthcare Facility and Hospital Zone and Chapter J Definitions are not within scope of PPC 75.

(f)The Change refers to providing a mixture of publicly accessible and secure facilities controlled at different security levels, however, there is nothing to ensure that security and public safety measures on the site are adequate. Rather, the Change expresses a desire to rely on building layout, existing vegetation and to reduce yards and minimise boundary fencing. The Plan Change does not include requirements to retain and maintain existing planting relied on for mitigation and security.

I note that the plan change proposes to introduce matters of control for all new buildings and additions to buildings (other than those alterations permitted in I334.4.4.(A52)) which include "functional and operational (including security) requirements" and "safety".

In the assessment criteria "safety" is assessed as "Whether the design recognises the functional, operational, and security requirements of the intended use of the building, and addresses the safety of the surrounding residential community and the public realm". 91, which in my opinion appropriately identifies whose safety is to be assessed.

I note that the references to "safety" in the matters and assessment criteria for buildings within 10m of the eastern boundary (I334.8.1(6) and I334.8.2(6) could be better expressed. In particular, I334.8.1(6) includes "safety" as a matter of discretion three times. In my opinion, this affects the clarity and simplicity of the Auckland Unitary Plan, but should not prevent an adequate assessment of safety for relevant developments.

I note that the plan change proposes landscaped setbacks to the northern and southern boundaries (see proposed standard I334.6.14) which are not required under the operative precinct provisions. I consider that these provisions adequately provide for planting along these interfaces.

⁹¹ Proposed provisions, I334.7.2(3)(b)

(g)The section 32 analysis does not adequately assess other reasonably practicable alternatives but instead relies on the WDHB having determined that it will be most efficient to expand and intensify the existing Mason Clinic, rather than relocating the facilities elsewhere, or to develop multiple facilities across separate landholdings. Assessment of options (such as relocation and use of the site for residential purposes) needs to be undertaken in the context of the planned comprehensive urban development of the Precinct.

The existing Mason Clinic site is included in the Wairaka Precinct with the expectation that it would remain there for the long term. Although the WDHB may wish to take into account the option of relocating entirely, it is not an option that I consider necessary for this plan change.

(h)The Plan Change, in providing for the expansion of the facility, is inconsistent with the NPS-UD 2020, which seeks to create well-functioning urban environments and provide for more intense residential development close to centres and rapid transit stations.

I disagree with this statement. See section 7.3 for my assessment.

(i)The Change proposes to delete the open space and shared path components from the Wairaka Precinct Plan 1 that apply to the sites, which are intended to provide important connections when the Wairaka Precinct is comprehensive developed for residential purposes. There is no plan in place for replacing these connections and open space and they ought to remain in place until replacements are secured.

I agree with the concern raised by this submission point. However, I also support the views of our experts that the current locations of the key open space (private) and the shared path are not compatible with the expansion of the Mason Clinic. In my opinion, showing alternative locations for the open space and shared path on Precinct Plan 1 will help ensure that replacements are provided as the precinct is developed.

(j)The Plan Change sets out that the functional and operational needs of the facility will limit the height to two to three stories but fails to limit the height of the buildings accordingly, which will generate significant adverse effects on the surrounding environment

I agree that additional effects may result from additional development capacity enabled by this plan change. The permitted height is proposed to change to 18-26m (from 16m on the Mason Clinic Site, and from 18-27m on the Northern and Southern Sites). As discussed in section 8 of this report, this is a similar building scale to that which is already enabled on these sites. However, I note that all new buildings will require a resource consent. Assessments of effects will be carried out as part of the resource consent process which, in my opinion, is more appropriate than at the plan change level.

(k)The Plan Change provides for development within the flood plain of a large catchment, in which significant urbanisation is enabled via existing planning provisions. There is no basis for reduced riparian margins and there needs to be a requirement that consented stormwater works are implemented in advance of any redevelopment on the site.

I acknowledge the concerns raised by this submission point. Although the riparian margins will be reduced due to the rezoning, it has been noted by our stormwater expert that the rezoning will introduce some restrictions on impervious surface which will be an improvement. A stormwater management plan has been developed for the Wairaka Precinct, and all subdivision and development of the land in the precinct must be consistent with the approved stormwater management plan.

(I)The Plan Change seeks controlled activity status for certain activities and non-notification of restricted discretionary activities. The extent of proposed controlled activity status and the inclusion of the non-notification rule are inappropriate. The Council and community need the ability to respond to proposals as the surrounding environment changes.

The proposed non-notification of buildings within 10m of the eastern boundary (i.e. within 10m of the spine road) and the proposed controlled activity status for new buildings are in line with the underlying Special Purpose – Healthcare Facility and Hospital Zone provisions. The RD activity status and matters of discretion and assessment criteria for buildings within 10m of a road will ensure that the relevant effects are assessed during the resource consent process. In the Special Purpose – Healthcare Facility and Hospital Zone, new buildings are permitted. The

	proposed controlled activity status provides matters of discretion and assessment criteria which the buildings will need to be assessed against.
(m) Assessment criteria (for controlled activity status) regarding safety and security, and the functional and operational requirements of the site, do not adequately recognise the risks posed by the special forensic psychiatry function of the facility. If the Change is approved, the assessment criteria and other provisions need to be strengthened to ensure public health and safety and to enable Council consent processing officers to assess whether a future proposal will satisfactorily achieve these outcomes	As discussed in sections 4 and 5 of this report, the matters of discretion and assessment criteria relating to "safety" could be amended to be clearer, but do enable an assessment of safety to be undertaken.

Recommendations on submissions

- 215. That submission 3 be accepted in part for the following reasons:
 - alternative key open space (private) and shared path should be shown on Precinct
 Plan 1
- 216. The recommended amendments are set out in Appendix 5 to this report and discussed below in section 14 of this report.

12. Potential Changes

- 217. The amendments I propose are set out in full in Appendix 5 to this report and relate to the following points:
 - Precinct description acknowledging that the interfaces between activities are managed through precinct provisions
 - · Activity status of buildings within 10m of the eastern boundary
 - Providing alternative location for shared path / active mode connection on Precinct Plan 1
 - Providing alternative location for open space on Precinct Plan 1
 - Correcting boundary of sub-precinct C on Precinct Plan 1 and Precinct Plan 2
- 218. The rationale for my amendments are to give better effect to the RPS and precinct objectives set out in Table 12 below, and to correct an error as set out in Table 13. The scope for making the changes is also included in the tables.

Table 12: Potential changes within the scope of submissions

Amendment:	To give better effect to:	Scope:	Comment:
Insert sentence into precinct description which acknowledges that interfaces between activities are managed by precinct provisions.	I334.2(8), I334.2(10), I334.3(4), I334.3(27), I334.3(34A)	Sub 1.1	
Amend the size at which buildings within 10m of the eastern boundary trigger a restricted discretionary activity status –from 25% / 250m² to 20% / 200m²	I334.2(8), I334.2(10), I334.3(13), I334.3(34A)	Sub 1.2	Will ensure that restricted discretionary activity status is in line with underlying zone provisions, and that the buildings go through the appropriate urban design assessments as part of the resource consent process.
Provide alternative location for shared path / active mode connection on Precinct Plan 1	1334.2(7), 1334.3(4), 1334.3(16), 1334.3(17), 1334.3(18). B2.7.2(2),	Subs 2.4 and 3.1	Will ensure that an alternative shared path connection is included on Wairaka Precinct Plan 1 and that this connection will be provided as part of future development.
Provide alternative location for open space on Precinct Plan 1	I334.2(7), I334.3(4), I334.3(16), I334.3(17), B2.7.1(1), B2.7.2(2), B2.7.2(7)	Sub 3.1	Will ensure that alternative key open space (private) is included on Wairaka Precinct Plan 1 and that this open space will be provided as part of future development.

Table 13: Potential changes within the scope of the plan change

Amendment:	To give better effect to:	Scope:	Comment:
Correct the boundary of sub-precinct C on Precinct Plan 1 and Precinct Plan 2	Plan change	Plan change	A change to the boundary of sub-precinct C is clearly not intended to be part of this plan change. This is a drawing error that should be fixed.

13. Section 32AA Analysis of Recommended Changes

- 219. The changes recommended above require an additional assessment in accordance with S32AA of the RMA.
- 220. This further evaluation is only made in respect of the changes I have proposed in Appendix 5 to this report and discussed above and is at a level of detail which, in my opinion, corresponds to the scale and significance of the proposed changes.

13.1. Amendment to precinct description

- 221. The change proposed is: Insert sentence into precinct description which notes that interfaces between activities are managed by precinct provisions.
- 222. This sentence would acknowledge the importance of managing interfaces between activities in this complex and multi-use precinct. In my opinion, this would better achieve the purpose of the RMA as it would support the integrated nature of the precinct and support the objectives and policies which address the interfaces between different activities (including effects of development on streetscapes and pedestrian amenity).

13.2. Amendment to activity status

- 223. The change proposed is:
 - To reduce the size at which buildings within 10m of the eastern boundary trigger a restricted discretionary activity status. The reduction would be from (the lesser of) 25% / 250m² to (the lesser of) 20% / 200m².
- 224. The change to the activity status trigger would require consequential changes to the following provisions: I334.4.4(A53), I334.5(1A), I334.8.1(6), I334.8.2(6). Specific wording is set out in Appendix 5 to this report.
- 225. In my opinion, this change would better achieve the purpose of the RMA as it would be more effective in ensuring a robust assessment of new buildings and additions to buildings near the eastern boundary, i.e. the road boundary. It would be consistent with the underlying zone's activity status of the development of buildings within 10m of a road, which has been through the AUPIHP process and is considered appropriate for the Special Purpose Healthcare Facility and Hospital (SP-HFH) zone. It would also provide consistency in planning provisions between the zone and the precinct. Wairaka Precinct is intended to enable high density residential development in addition to tertiary, healthcare and commercial activities, and so it is appropriate that a level of assessment at least as strict as that in the underlying SP-HFH zone is applied to development at the interfaces between the Mason Clinic and surrounding activities.
- 226. Additional interface provisions have been appropriately provided for on the northern and southern boundaries by the plan change. The assessment criteria supporting I334.4.4(A53) are also, in my opinion, appropriate to manage the effects at the eastern boundary. This change to the activity status trigger at the eastern boundary would, in my opinion, be consistent with the overall purpose of the plan change and support the successful integrated development of the Wairaka Precinct.

13.3. Amendments to Wairaka Precinct Plan 1

227. The changes proposed are:

- To provide an alternative location on Precinct Plan 1 for the key open space (private) that is being removed from 119A Carrington Road (the Southern Site).
 The recommended location is set out in Appendix 5 attached.
- To provide an alternative location on Precinct Plan 1 for the shared path that is being removed from 3A Carrington Road (the Northern Site). The recommended location is set out in Appendix 5 attached.
- · Correct the boundary of sub-precinct C
- 228. In my opinion, the first two changes would better achieve the purpose of the RMA as they would be consistent with objectives and policies I334.2(7), I334.3(4), I334.3(16), I334.3(17) and I334.3(18) of the Wairaka Precinct. The changes would ensure that an appropriate quantum and location of open space is provided as the Wairaka Precinct is developed, and that a shared path / active mode connection is provided in an appropriate location.
- 229. Providing the key open space (private) and the shared path in alternative locations would also ensure that the Mason Clinic can expand and intensify as proposed, without conflicts between the secure nature of the Clinic and the public nature of the open space and shared path. As discussed in section 8 above, the operative locations of these features would not be appropriate from an urban design and CPTED perspective as the Mason Clinic expands, and would be better located elsewhere in the Precinct.
- 230. Also, in my opinion the recommended locations for the key open space (private) and the shared path would not be contrary to the HUD plan change for the wider Wairaka Precinct.
- 231. In my opinion, the change to correct the boundary of sub-precinct C would better achieve the purpose of the plan change. It is clear that changing the boundary of sub-precinct C was not intended to be part of this plan change. Correcting this drawing error now will avoid the need to correct it at a later date, and ensure that the precinct provisions can be correctly applied.

13.4. Amendment to Wairaka Precinct Plan 2

- 232. The amendment proposed is to correct the boundary of sub-precinct C.
- 233. In my opinion this change would better achieve the purpose of the plan change. It is clear that changing the boundary of sub-precinct C was not intended to be part of this plan change. Correcting this drawing error now will avoid the need to correct it at a later date, and ensure that the precinct provisions can be correctly applied.

14. Conclusions

- 234. Having considered all of the information provided by the requestor, carried out an assessment of effects, reviewed all relevant statutory and non-statutory documents and made recommendations on the submissions, I recommend that PPC 75 should be approved, subject to the amendments to the text/planning maps of the Auckland Unitary Plan as set out in Appendix 5 to this report and discussed in sections 12 and 13 of this report.
- 235. PPC 75, with its recommended amendments will:
 - assist the council in achieving the purpose of the Resource Management Act 1991
 - give effect to the National Policy Statement on Urban Development 2020 and National Policy Statement on Freshwater Management 2020

- be consistent with the Auckland Unitary Plan Regional Policy Statement
- be consistent with the objectives and policies of the Auckland Unitary Plan Wairaka Precinct
- be consistent with the Auckland Plan
- give effect to themes in relevant local board plans.

15. Recommendations

- 236. That, the Hearing Commissioners accept or reject submissions (and associated further submissions) as outlined in this report.
- 237. That, as a result of the recommendations on the submissions, the Auckland Unitary Plan be amended by:
 - The changes proposed by PPC 75, to the Auckland Unitary Plan
 - the inclusion of the amendments set out in **Appendix 5** to this report.

16. Signatories

	Name and title of signatories
Authors	6Cord
	Elisabeth Laird Policy Planner, Central South, Plans and Places
Reviewer / Approved for release	C. Danson
	Celia Davison, Planning Manager Central South, Plans and Places

17. Appendices

- Appendix 1 Plan Change 75 (Mason Clinic), as notified with appendices
- Appendix 2 Summary of submissions and further submissions
- Appendix 3 Clause 23 requests and responses
- Appendix 4 Council expert reports
- Appendix 5 Recommended changes to PPC 75

Appendix 1 – Plan Change 75 (Mason Clinic), as notified with appendices

List of documents in Appendix 1:

- WDHB Mason Clinic PPCR Stat Assessment and AEE Cl23 update clean
- Attachment 1 Records of Title
- Proposed I334 Wairaka Precinct Provisions and Maps Pre-notification final 210222
- Attachment 3 Section 32 Assessment
- Attachment 4 Civil Infrastructure Assessment
- Attachment 5 Draft Wairaka Stormwater Management Plan
- Attachment 6 Design and Architectural Assessment
- Attachment 7 Ecological Impact Assessment
- Attachment 8 Site Contamination Report
- Attachment 9 Consultation Letter to Mana Whenua
- Attachment 10 Local Board Presentations and Notes
- Updated LVEA clean version
- Attachment 12 IHP Recommendation Report Topic 055
- Attachment 13 Transport Assessment
- Supplementary Transport Assessment
- Attachment 14 Correspondence from HUD

ATTACHMENT TWO CLAUSE 23 REQUESTS AND RESPONSE

From: Elisabeth Laird

To: Anthony Blomfield

Cc: Craig Mcgarr; Fiona Sprott

Subject: Clause 23 further information request - Mason Clinic private plan change

Date:Friday, 5 November 2021 12:20:00 PMAttachments:MasonClinic c23 20201105.pdf

Kia ora Anthony,

Please find attached our clause 23 further information request.

As well as the requests, I have also noted some items that you may want to look at for clarity/general tidying up.

Let me know if you need any clarification on any of the questions or comments.

Ngā mihi, Elisabeth

Elisabeth Laird (she/her/ia) | Planner Central & South team, Plans & Places Auckland Council – Te Kaunihera o Tāmaki Makaurau

Phone: +64 (0)21 717 335

Email: elisabeth.laird@aucklandcouncil.govt.nz

Work days: Monday - Thursday

Clause 23 further information requests

Topic	Gap	Request for Information	Why this is needed
Traffic	Insufficient Assessment around potential long-term transport outcomes resulting from Rezoning	In terms of the trip generation potential which could result from the rezoning and future development of the PPC area, the TA's trip generation analysis considers staged scenarios based on forecast increases in the number of beds within the existing activities over a 30-year period. It confirms that the proposed new zone (Special Purpose – Healthcare Facility and Hospital Zone) does allow for urban intensification, however it does not elaborate on the wider scope of activities which could be permitted within this zoning.	To understand potential long- term transport effects which could result from the rezoning, including the potential for intensification within the existing Special Purpose –
		Table H25.4.1 (Activity Table) of the Auckland Unitary Plan (H25 Zone) outlines a number of activities which are permitted, discretionary or restricted discretionary within the Special Purpose – Healthcare Facility and Hospital Zone, which are not considered within the TA. These include a number of different types of accommodation, a number of different types of community facilities, various permitted alterations and conversions to buildings and new parking buildings.	Healthcare Facility and Hospital Zone encompassing the Mason Clinic.
		It is further noted that the zone permits building heights of up to 26 metres for sites greater than 4 ha in area, which could equate to a building of up to 6 storeys in height. This compares with existing building heights within the Mason Clinic complex of 1 to 2 storeys in height.	
		We request a further assessment from the applicant of a range of potential land-use scenarios permitted within the zone, which could eventuate over time and which could include others of these activities, and their effects upon traffic patterns and generation.	
		We acknowledge that any proposed land-use activity would be subject to a more detailed Transport Assessment at a later stage, but assessment of different trip generation scenarios at this stage could still serve to inform consideration of wider transportation effects and proposals, such as the Carrington Road upgrade.	
Traffic	Insufficient Information around staging and phasing of transport	The TA and accompanying background information refer to a number of transport improvements which are key to supporting the transport outcomes sought through the PPC. These include the following:	To ensure that the desired transport outcomes from development within the PPC can be achieved in a timely
	improvements	Upgrade of Precinct north-south road past the eastern boundary of the Mason Clinic	manner without resulting in
		 Upgrade of Gate 2 road (between Carrington Road and the Mason Clinic), including provisions for pedestrians, cyclists and active modes, which are currently lacking. 	adverse effects on the adjoining transport network
		Carrington Road Upgrade (by Auckland Transport), facilitating improved access by sustainable modes of travel	over an interim or long-term period. In particular, it is noted that transport proposals external to the Mason Clinic

		Potential signalisation of Carrington Road / Gate 2 (if not included above) However, no detail is provided in terms of phasing or trigger points, at which the above improvements would be needed, in order to support the staging or progression of development within the Mason Clinic site following the Plan Change. We request further such detail. In particular, Appendix A of the TA indicates that the north-south precinct Road could include a direct access to a new northern parking building at the northern end of the site. Such an arrangement would thus appear to be dependent on improvements to the north-south road being in place.	site are dependent on other parties for their delivery, i.e. Auckland Transport, Ministry of Housing and Urban Development.
Traffic	Confirmation of new strategic access arrangements into the Mason Clinic Site within the Wairaka Precinct	 Building on information provided in Appendix A of the TA, which discusses Access options for the newly expanded Mason Clinic site, we would recommend requesting a plan (potentially still broken down by options 1 and 2) to confirm strategic access arrangements to the site, including following: Expected new vehicle access points from the north-south road to the expanded Mason Clinic site Confirmation of vehicle access provisions from within the existing Mason Clinic Site to gain access to the northern and southern extension areas Confirmation as to whether existing vehicle access points from the north-south road will be retained in their current form Confirmation of key walking and cycling routes to the Mason Clinic site, both from within the Waikara Precinct and externally, from Carrington Road in particular. Chapter 4 of Stantec's ITA for the Wairaka Precinct refers to key standards for the Main internal streets within the precinct, from which item 7 refers to: Limited vehicle crossings - Vehicle crossings are not prohibited, but any vehicle crossings shall lead to a smaller number of joint car parking or servicing areas. Therefore, if new vehicle crossings are to be provided from the north-south precinct road to serve the expanded Mason Clinic Site, the applicant should assess whether an overall increase in the number of crossings is commensurate with the scale of new development. Alternatively, is there a case to consider closure, reconfiguration or access limitations at existing vehicle crossing points to the site, in the event of new alternative access points being provided? 	To confirm that strategic access arrangements to the newly expanded Mason Clinic site operate efficiently and effectively, are consistent with the strategic approach and rules of the Wairaka Precinct and integrate with AT's proposed improvements to Carrington Road.
Landscape and visual assessment	Insufficient certainty around replacement and location of open space	Section 5.3.4 of the Landscape & Visual Effects Assessment (LVEA) by Thomas Consultants seems to make conclusions based on the "Key Open Space (private)" being replaced and in a suitable location (including a shared walkway connection through to Te Auaunga/Oakley Creek). The report states that "The removal of this proposed open space from the location as identified on the Precinct Plan to another location somewhere else within the Wairaka Precinct could still include these	To better understand the nature of the request in respect of the effects on the

		desirable attributesProvided there is still some form of shared walkway connection between the activities within the Wairaka Precinct and the Te Auaunga Oakley Creek Walkway and reserve, the compliance with the objectives and policies of the Wairaka Precinct and the benefits of having an open space, as mentioned above, could still be retained."	environment of removal of the open space.
		This Plan Change is not proposing relocation of the Key Open Space (Private), it is proposing removal of that space from the Precinct Plan.	
		A full landscape assessment of the removal of the Key Open Space (Private) without reliance on replacement, which is not a feature of this plan change, is required. As this is a significant matter dealt with in this plan change, sufficient detail should be supplied to deal with this matter, in accordance with clause 22(2) of Schedule 1 of the RMA.	
		The removal of the Key Open Space (Private) is not mentioned in the LVEA conclusion (pp.52-53 section 6), it is therefore difficult to reconcile those conclusions with statements in the AEE (para. 11.16, p.55).	
		Without certainty on where (and when) the replacement open space will be provided elsewhere in the precinct, it is difficult to understand how the conclusion that "the proposed plan change will result in a positive outcome in terms of landscape and visual effects" has been reached.	
		Please provide further information on how the conclusions in sections 5.4.3 and 6 of the LVEA and para 11.21 of the AEE regarding the removal of open space have been reached.	
Landscape and visual	Expert report relies on scenario not	The LVEA states that the proposed reduction of riparian margins from 10m to 5m (through the proposed zone change) would have positive effects (p.34):	To better understand the nature of the request in
assessment	included in proposal	"The conclusion is that the proposed changes as a result of the plan change on the Wairaka Creek and environs including the daylighting of the stream and the reduction of the riparian yard from 10m to 5m will result in potential landscape and visual effects that are overall positive and in keeping with the objectives and policies of the AUP:OP."	respect of the effects on the environment of the reduction in riparian margins.
		but we note that the proposed plan change does not actually require the daylighting of the Wairaka Stream. An assessment of the reduction in riparian margins that does not compare an un-daylighted 10m margin to a daylighted 5m margin is required. Please also advise if the AEE's conclusions regarding the reduction of the riparian margin have relied on the LVEA.	
Planning	Insufficient information about Precinct Plan 2	Please explain the conflict between the amended sub-precinct A boundary on Precinct Plan 1 and the non-amended sub-precinct A boundary on Precinct Plan 2 (in Attachment 2 Proposed Wairaka Precinct Provisions and Maps).	To better understand the efficiency and effectiveness of the request.

Planning	Insufficient	Please explain the effects of not excluding sub-precinct A from "Table I334.4.1 Wairaka Precinct (all	To better understand the
	information about	of precinct except for sub-precinct B and C)" in Attachment 2 Proposed Wairaka Precinct Provisions	adverse effects of the activities
	Table I334.4.1	and Maps.	in sub-precinct A not being
			excluded from the activity
			table.

Other things to look at

Reference	Comment
Table I334.4.4 (proposed activity	Consider specifying an activity status for additions and alterations that are greater than the Permitted size but not within 10m of the eastern boundary. This could be a controlled activity to be in line with the activity status for new buildings.
table)	e.g. Additions to buildings that are more than: (a) 25 per cent of the existing gross floor area of the building; or (b) 250m² GFA, whichever is the lesser.
lwi engagement	Suggest you engage also with Ngāti Tamaoho (has interests over part of Wairaka Precinct, though not directly over Mason Clinic site), unless have evidence that they have been engaged via the Rōpū.
	Suggest you engage with Ngāti Whātua Rōpū at the same level of detail that you have engaged with Marutūāhu Rōpū and Waiohua-Tamaki Rōpū.
Matters of	Consider deleting matters
discretion	(b) safety;
1334.8.1.(6)	(c) functional and operational (including security) requirements;
	(h) safety
	as they are duplicates of matters in I334.7.1.(3) which apply to all buildings (as referenced in I334.8.1.(6)(i)).
Assessment criteria	If this assessment criteria applies to development infringing either (but not necessarily both) standards referenced, consider changing "and" to "or".
1334.8.2.(5)	(5) For development that does not comply with Standard I334.6.14 (3): Boundary setback in respect of buildings within Sub-precinct A and or Standard I334.6.10: Height in relation to boundary.
Definition of "functional and operational (including security) requirements"	Variations on the phrase "functional and operational (including security) requirements" are used throughout the proposed provisions. Please can this be clarified in the proposed provisions or in supporting/explanatory text. I note that additional detail is given in paragraph 5.2 of the AEE, but has not been included in the proposed provisions.



17 December 2021

Anthony Blomfield E-mail: ablomfield@bentley.co.nz Job No: 19023.3

Auckland Council Via Email

Attention: Elisabeth Laird

Dear Elisabeth

RE: Mason Clinic Plan Change Request - Response to Clause 23 Request

Further to the request for information pursuant to Clause 23 of Schedule 1 of the RMA, received 5 November 2021, a response is included with this letter.

Note that the Landscape and Visual Effects Assessment and the Assessment of Environmental Effects have been updated in response to the requests. We have provided 'track change' and 'clean' versions of each report to enable an understanding of the changes made, and to enable 'clean' versions to be provided with notification documents.

I would be grateful if you could let me know if the requests are satisfactorily addressed. I am happy to assist with any further queries.

Yours faithfully,

BENTLEY & CO. LTD

Anthony Blomfield

Resource Management Planner

WDHB Mason Clinic Plan Change Request

Clause 23 Further Information Request

Topic	Request for Information	Bentley & Co comments / action	<u> </u>			
Traffic	In terms of the trip generation potential which could result from the rezoning and future			namely the changes to the provisions relating to land use activities, and		
	development of the PPC area, the TA's trip generation analysis considers staged	to the scale of development.		,		
	scenarios based on forecast increases in the number of beds within the existing activities	-				
	over a 30-year period. It confirms that the proposed new zone (Special Purpose –	Land Use				
	Healthcare Facility and Hospital Zone) does allow for urban intensification, however it	The proposal is to retain the curre	ent zoning of the central Mason (Clinic Site, and rezone the Northern and		
	does not elaborate on the wider scope of activities which could be permitted within this		-	Special Purpose – Healthcare Facility and		
	zoning.		•	tes will also be incorporated within Sub-		
	Table H25.4.1 (Activity Table) of the Auckland Unitary Plan (H25 Zone) outlines a number	precinct A of the Wairaka Precinc	t, which is specific to the Mason	Clinic.		
	of activities which are permitted, discretionary or restricted discretionary within the	Conorally, the proposal will not a		los for other land was someries. The activities		
	Special Purpose – Healthcare Facility and Hospital Zone, which are not considered within the TA. These include a number of different types of accommodation, a number of			les for other land use scenarios. The activities rovided for in the Mixed Use zone, and		
	different types of community facilities, various permitted alterations and conversions to	1	•	ne. The table below provides a comparison of		
	buildings and new parking buildings.	1 ** *	-	Healthcare Zone and the Mixed Use Zone.		
	It is further noted that the zone permits building heights of up to 26 metres for sites	,	, , , , , , , , , , , , , , , , , , ,			
	greater than 4 ha in area, which could equate to a building of up to 6 storeys in height.	<u>Legend</u>				
	This compares with existing building heights within the Mason Clinic complex of 1 to 2	Red – more onerous activity statu	ıs			
	storeys in height.	Green – less onerous activity stat	us			
	We request a further assessment from the applicant of a range of potential land-use	White – same activity status				
	scenarios permitted within the zone, which could eventuate over time and which could		-	se provided for (Mixed Use Zone – Non-		
	include others of these activities, and their effects upon traffic patterns and generation.	complying; Healthcare Zone - Dis	cretionary)			
	We acknowledge that any proposed land-use activity would be subject to a more detailed Transport Assessment at a later stage, but assessment of different trip	Activity	Mixed Use Zone	Healthcare Zone		
	generation scenarios at this stage could still serve to inform consideration of wider	Accommodation	Wilked Ose Zolle	Healthcare Zone		
	transportation effects and proposals, such as the Carrington Road upgrade.	Dwellings	P	D		
		Dwellings accessory to	N/A (provided for as	P		
		healthcare facilities	'dwellings')			
		Conversion of a building or	RD	N/A (same activity status as		
		part of a building to dwellings,		the residential activity)		
		residential development,				
		visitor accommodation or				
		boarding houses	_			
		Integrated residential	P	D		
		development ('Retirement				
		villages' in Special Purpose – Healthcare Zone)				
		Supported residential care	P	P		
		Visitor accommodation and	P	RD		
		boarding houses				
		Commerce				
		Commercial services	Р	D*		
		Conference facilities	D	D*		
		Department stores	D	D*		
		Drive-through restaurants	Р	D*		
		Entertainment facilities	Р	D*		
		Cinemas	NC	D*		
		Food and beverage		D*		

Garden Centres	D	D*
Marine retail	D	D*
Motor vehicle sales	D	D*
Offices up to 500m2 GFA per	Р	D*
site		
Offices greater than 500m2	D	D*
GFA per site		
Retail up to 200m2 GFA per	Р	D*
tenancy		
Retail greater than 200m2 GFA	D	D*
per tenancy		·
Service stations	RD	D*
Supermarkets up to 450m2	Р	D*
GFA per tenancy		
Supermarkets 450m2 to	RD	D*
2000m2 GFA per tenancy	_	
Supermarkets greater than	D	D*
2000m2 GFA per tenancy	_	
Trade suppliers	D	D*
Community		
Artworks	Р	Р
Care centres	Р	Р
Community facilities	Р	P
Education facilities	Р	Р
Emergency services	RD	D*
Healthcare facilities	Р	Р
Hospitals	D	Р
Justice facilities	D	D*
Recreation facility	Р	D*
Tertiary education facilities	P	P (accessory to healthcare)
		D* (non-accessory)
Informal recreation and leisure	NC*	Р
Organised sport and recreation	NC*	P
Information facilities	NC*	Р
Public amenities	NC*	P
Industry		
Industrial activities	NC	D*
Industrial laboratories	Р	D*
Light manufacturing and	P	D*
servicing		
Repair and maintenance	Р	D*
services		
Storage and lock-up facilities	D	D*
Waste management facilities	NC	D*
Warehousing and storage	Р	D*
Mana whenua		
Marae complex	Р	D*

The only activities which have a less onerous activity status in the Healthcare Zone are:

1. Cinemas (not provided for in Healthcare Zone)

- 2. Hospitals
- 3. Informal recreation and leisure
- 4. Organised sport and recreation
- 5. Information facilities
- 6. Public amenities
- 7. Industrial activities (not provided for in Healthcare Zone)
- 8. Waste management facilities (not provided for in Healthcare Zone)

From the list above, activities 3-6 are provided for by the Healthcare Zone as integrated, ancillary elements, and do not contribute to the level of traffic generated to the site or facilities. While the Healthcare Zoning provides for these activities, they are not the principal function of the zone, and therefore it is fanciful to consider that the Plan Change Area would be developed exclusively for such activity.

Activities 1, 7 and 8 are classified as non-complying activities in the Mixed Use Zone, and are not otherwise provided for in the Healthcare Zone which have a default discretionary activity status. The nature of these activities are not related to the primary purpose of the Healthcare Zone, and are considered to be fanciful in the context of the Plan Change Request. As discretionary activities which are unrelated to the purpose of the Healthcare Zone, traffic generation effects would be appropriately assessed at the resource consent stage.

'Hospital' is the only material activity which is provided with a more enabling activity status in the Healthcare Zone when compared with the Mixed Use zone. The Transport Assessment and Statutory Assessment addresses the potential traffic generation effects in relation to the proposed Mason Clinic 'hospital' activity.

The site is not well suited for a 'standard' hospital facility, due to its current access arrangements (which rely on easement rights over private land), its geographical isolation, the lack of frontage to key transport routes or proximity to frequent public transport services, and its limited spatial area of less than 7 hectares (compared with the other key public hospitals in Auckland which comprise a land area between 11.7 to 20 hectares).

The subject site is demonstrably well suited as a specialised healthcare facility (the Mason Clinic). Healthcare facilities are permitted activities in both the Healthcare Zone and the Mixed Use zone, and therefore the Plan Change will not result in a different level of traffic generation than that which is otherwise enabled by the status quo.

Scale of Development

With regards to scale of development, the Plan Change seeks to:

- Continue to require resource consent for all physical development (apart from small additions to existing buildings);
- Increase the height limit of the central Mason Clinic Site from 16m to 26m; and
- Decrease the height limit of the Northern and Southern Sites from 27m to 26m.

The Healthcare Zone which applies to the central Mason Clinic Site enables development up to 16m as a permitted activity, and up to 26m as a restricted discretionary activity. There are no corresponding matters of discretion for development between 16-26m which relate to traffic generation effects. Therefore, the nature of the effects of building scale that are to be assessed are no different between the status quo, and the provisions sought by the Plan Change.

Traffic

The TA and accompanying background information refer to a number of transport improvements which are key to supporting the transport outcomes sought through the PPC. These include the following:

 Upgrade of Precinct north-south road past the eastern boundary of the Mason Clinic The response below addresses the two components of this request, namely upgrades to the external road network, and upgrades to the roading network internal to the Wairaka Precinct.

External transport network upgrades

Section 5.2.4 of the Transport Assessment assesses the potential short-term and long-term traffic effects of the plan change, in isolation of any other development within the Wairaka Precinct. This assessment assumes a

- Upgrade of Gate 2 road (between Carrington Road and the Mason Clinic), including provisions for pedestrians, cyclists and active modes, which are currently lacking.
- Carrington Road Upgrade (by Auckland Transport), facilitating improved access by sustainable modes of travel
- Potential signalisation of Carrington Road / Gate 2 (if not included above) However, no detail is provided in terms of phasing or trigger points, at which the above improvements would be needed, in order to support the staging or progression of development within the Mason Clinic site following the Plan Change.

We request further such detail. In particular, Appendix A of the TA indicates that the north-south precinct Road could include a direct access to a new northern parking building at the northern end of the site. Such an arrangement would thus appear to be dependent on improvements to the north-south road being in place.

20% reduction in traffic volumes along Carrington Road in the long-term taking into account upgrades to the road to accommodate bus and cycle lanes. This assessment confirms that <u>no external transport network upgrades</u> are required to accommodate the proposed development of the Mason Clinic, either in the short term or long term.

The development of the Precinct overall (by the respective Ropu) is expected to require transport network upgrades, as identified in the Stantec Integrated Transport Assessment. The timing of these upgrades are not affected by the Plan Change Request.

Access and internal road upgrades

A resource consent application (reference BUN60386270) has been lodged by the Marutūāhu Rōpū and the Waiohua-Tāmaki Rōpū to undertake upgrades to the internal roads.

The Transport Assessment provides an assessment of the ability to provide access to the site in the future following the upgrade of the internal north-south road which is planned by other parties, and which currently sets the basis for the planning for the layout of the site. This assessment has been provided to demonstrate that the intended layout of development within the Plan Change Area is achievable.

Flow Transportation Specialists have prepared a supplementary assessment (**Attachment 1** to this response) which confirms that in the event the north-south road is not upgraded (and the existing one-way layout was maintained), the layout and development of the Site will be adjusted to respond to the road network.

There are suitable existing and proposed provisions to enable and require consideration and assessment of access arrangements for the ongoing development of the Site. There are no upgrades to the internal road or access arrangements that are required to be provisioned for within the provisions of the Wairaka Precinct.

There are a range of factors that may influence the 'strategic' access arrangements to the Mason Clinic, including the upgrade of the north-south spine road (including timing and staging of these works), funding, and the design, function, staging and delivery of intended facilities at the Mason Clinic. As set out in the Transport Assessment, the redevelopment of the Mason Clinic is expected to occur in stages over a period of approximately 30 years. It is not possible to determine at this stage whether the number or location of vehicles crossings is appropriate, or could be reduced. This is more appropriately addressed by the resource consent process.

The Transport Assessment assesses a likely development scenario for the Mason Clinic, and the access arrangements that would be most suitable for that scenario based on the intended upgrade options to the north-south road which forms the current basis for the planning of the future development of the Mason Clinic site (as the roading upgrade works are subject to a current resource consent application).

As per the responses above:

- The Plan Change Request does not seek to fundamentally change the nature or scale of land use or development within the Plan Change Area relative to the range of activities that are enabled by the existing zoning/precinct provisions;
- The existing provisions of the Wairaka Precinct require an assessment (via matters of discretion) of the suitability of access. The 'status quo' utilises the resource consent process to enable an assessment of access effects;
- The Plan Change seeks to apply matters of control/discretion to all new development, which are consistent with the matters of discretion that currently apply to new development within the Wairaka Precinct. It is appropriate for these matters to be addressed through resource consent processes, consistent with the status quo.
- The Plan Change does not introduce or provide for a scenario which would require new distinct provisions for transport network upgrades.

Traffic

Building on information provided in Appendix A of the TA, which discusses Access options for the newly expanded Mason Clinic site, we would recommend requesting a plan (potentially still broken down by options 1 and 2) to confirm strategic access arrangements to the site, including following:

- Expected new vehicle access points from the north-south road to the expanded Mason Clinic site
- Confirmation of vehicle access provisions from within the existing Mason Clinic
 Site to gain access to the northern and southern extension areas
- Confirmation as to whether existing vehicle access points from the north-south road will be retained in their current form
- Confirmation of key walking and cycling routes to the Mason Clinic site, both from within the Waikara Precinct and externally, from Carrington Road in particular.

Chapter 4 of Stantec's ITA for the Wairaka Precinct refers to key standards for the Main internal streets within the precinct, from which item 7 refers to:

Limited vehicle crossings - Vehicle crossings are not prohibited, but any vehicle crossings shall lead to a smaller number of joint car parking or servicing areas.

Therefore, if new vehicle crossings are to be provided from the north-south precinct road to serve the expanded Mason Clinic Site, the applicant should assess whether an overall increase in the number of crossings is commensurate with the scale of new development. Alternatively, is there a case to consider closure, reconfiguration or access limitations at existing vehicle crossing points to the site, in the event of new alternative access points being provided?

Landscape and	Section 5.3.4 of the Landscape & Visual Effects Assessment (LVEA) by Thomas	The LVEA and AEE have been updated to address this request. A 'track change' and 'clean' version of each
visual	Consultants seems to make conclusions based on the "Key Open Space (private)" being	report is provided to understand the adjustments that have been made. These are appended as Attachments 2
assessment	replaced and in a suitable location (including a shared walkway connection through to Te	to 5 to this response.
	Auaunga/Oakley Creek). The report states that "The removal of this proposed open space	
	from the location as identified on the Precinct Plan to another location somewhere else	
	within the Wairaka Precinct could still include these desirable attributesProvided there	
	is still some form of shared walkway connection between the activities within the	
	Wairaka Precinct and the Te Auaunga Oakley Creek Walkway and reserve, the	
	compliance with the objectives and policies of the Wairaka Precinct and the benefits of	
	having an open space, as mentioned above, could still be retained."	
	This Plan Change is not proposing relocation of the Key Open Space (Private), it is	
	proposing removal of that space from the Precinct Plan.	
	A full landscape assessment of the removal of the Key Open Space (Private) without	
	reliance on replacement, which is not a feature of this plan change, is required. As this is	
	a significant matter dealt with in this plan change, sufficient detail should be supplied to	
	deal with this matter, in accordance with clause 22(2) of Schedule 1 of the RMA.	
	The removal of the Key Open Space (Private) is not mentioned in the LVEA conclusion	
	(pp.52-53 section 6), it is therefore difficult to reconcile those conclusions with	
	statements in the AEE (para. 11.16, p.55).	
	Without certainty on where (and when) the replacement open space will be provided	
	elsewhere in the precinct, it is difficult to understand how the conclusion that "the	
	proposed plan change will result in a positive outcome in terms of landscape and visual	
	effects" has been reached.	
	Please provide further information on how the conclusions in sections 5.4.3 and 6 of the	
	LVEA and para 11.21 of the AEE regarding the removal of open space have been reached.	
Landscape and	The LVEA states that the proposed reduction of riparian margins from 10m to 5m	The LVEA and AEE have been updated to address this request. A 'track change' and 'clean' version of each
visual	(through the proposed zone change) would have positive effects (p.34):	report is provided to understand the adjustments that have been made. These are appended as Attachments 2
assessment	"The conclusion is that the proposed changes as a result of the plan change on the	to 5 to this response.
	Wairaka Creek and environs including the daylighting of the stream and the reduction of	
	the riparian yard from 10m to 5m will result in potential landscape and visual effects that	The changes clarify the original conclusion, which is that the proposed 5m riparian yard standard (consistent
	are overall positive and in keeping with the objectives and policies of the AUP:OP."	with the standard that applies in the Healthcare Zone for the Mason Clinic Site) will continue to achieve a
	but we note that the proposed plan change does not actually require the daylighting of	positive landscaped interface with the Wairaka Creek in the event that it is daylighted.
	the Wairaka Stream. An assessment of the reduction in riparian margins that does not	
	compare an un-daylighted 10m margin to a daylighted 5m margin is required. Please also	
	advise if the AEE's conclusions regarding the reduction of the riparian margin have relied	
	on the LVEA.	
Planning	Please explain the conflict between the amended sub-precinct A boundary on Precinct	A proposed amendment to Precinct Plan 2 has been prepared and is included in the updated version of the
	Plan 1 and the non-amended sub-precinct A boundary on Precinct Plan 2 (in Attachment	'Proposed Wairaka Precinct Provisions and Maps' (track version as Attachment 6 , clean version as Attachment
	2 Proposed Wairaka Precinct Provisions and Maps).	7).
Planning	Please explain the effects of not excluding sub-precinct A from "Table I334.4.1 Wairaka	This is an error and has been corrected in the appended updated version of the 'Proposed Wairaka Precinct
	Precinct (all of precinct except for sub-precinct B and C)" in Attachment 2 Proposed	Provisions and Maps' (track version as Attachment 6 , clean version as Attachment 7).
	Wairaka Precinct Provisions and Maps.	,

Other things to look at

Reference	Comment	Bentley & Co Comment / Action
Table I334.4.4 (proposed	Consider specifying an activity status for additions and alterations that are greater than the Permitted size but	Rule (A49) has been adjusted to:
activity table)	not within 10m of the eastern boundary. This could be a controlled activity to be in line with the activity status	All new buildings, and additions to existing buildings unless otherwise
	for new buildings.	specified below - C
	e.g. Additions to buildings that are more than: (a) 25 per cent of the existing gross floor area of the building; or	
	(b) 250m² GFA, whichever is the lesser.	The rule will apply, unless the additions are provided for as a Restricted
		Discretionary activity under Rule (A53).
		The opportunity has been taken to make a minor adjustment to Rule (A53)
		to align the thresholds for the size of building additions with those in Rule (A52).
Iwi engagement	Suggest you engage also with Ngāti Tamaoho (has interests over part of Wairaka Precinct, though not directly over Mason Clinic site), unless have evidence that they have been engaged via the Rōpū.	A letter will be sent to Ngati Tamaoho for completeness.
	Suggest you engage with Ngāti Whātua Rōpū at the same level of detail that you have engaged with Marutūāhu	The WDHB presented the proposal for the plan change to members of the
	Rōpū and Waiohua-Tamaki Rōpū.	Ngāti Whātua Rōpū at a meeting in July 2020 (along with members of the
		Waiohua-Tamaki Rōpū). Subsequent consultation has been at the mana whenua level.
Matters of discretion	Consider deleting matters	While these matters of discretion are repeated relative to the cross-
1334.8.1.(6)	(b) safety;	referenced matters of control, they are included at the request of HUD.
	(c) functional and operational (including security) requirements;	Retaining the list of matters of discretion as proposed will not be
	(h) safety	inefficient, as an application can readily assess duplicated matters of
	as they are duplicates of matters in I334.7.1.(3) which apply to all buildings (as referenced in I334.8.1.(6)(i)).	control or discretion.
Assessment criteria	If this assessment criteria applies to development infringing either (but not necessarily both) standards	This amendment has been made in the updated Precinct Provision and
1334.8.2.(5)	referenced, consider changing "and" to "or".	Maps attachment (track version as Attachment 6 , clean version as
	(5) For development that does not comply with Standard I334.6.14 (3): Boundary setback in respect of buildings	Attachment 7).
	within Sub-precinct A and <u>or</u> Standard I334.6.10: Height in relation to boundary.	
Definition of "functional and	Variations on the phrase "functional and operational (including security) requirements" are used throughout the	Additional text has been added to the Precinct Description in the amended
operational (including security)	proposed provisions. Please can this be clarified in the proposed provisions or in supporting/explanatory text. I	version of the Precinct Provisions and Maps attachment (track version as
requirements"	note that additional detail is given in paragraph 5.2 of the AEE, but has not been included in the proposed	Attachment 6, clean version as Attachment 7).
	provisions.	

ATTACHMENT THREE

SUMMARY OF SUBMISSIONS AND FURTHER SUBMISSIONS



AUCKLAND UNITARY PLAN OPERATIVE IN PART

PROPOSED PLAN CHANGE 75 (Private): Mason Clinic

SUMMARY OF DECISIONS REQUESTED

Enclosed:

- Explanation
- Summary of Decisions Requested
- Submissions

Explanation

- You may make a "further submission" to support or oppose any submission already received (see summaries that follow).
- You should use Form 6.
- Your further submission must be received by 23 September 2022.
- Send a copy of your further submission to the original submitter as soon as possible after submitting it to the Council.

Summary of Decisions Requested



	Plan Change 75 (Private): Mason Clinic					
	Summary of Decisions Requested					
Sub #	Sub Point	Submitter Name	Address for Service	Theme	Summary	
1	1.1	The Ministry of Housing And Urban Development Attn: Francelle Lupis	francelle@greenwoodroche.com	Support the plan change with the amendments requested	Ensure that the Precinct description has an appropriate level of detail and acknowledges role of Precinct provisions in addressing interfaces between Mason Clinic and surrounding activities.	
1	1.2	The Ministry of Housing And Urban Development Attn: Francelle Lupis	francelle@greenwoodroche.com	Support the plan change with the amendments requested	Amend proposed activity 53 to provide that additions to existing buildings that would increase the building footprint by more than 20 % or 200m2 GFA (whichever is lesser) that are located within 10m of the eastern boundary are restricted discretionary activities.	
2	2.1	Auckland Transport Attn: Chris Freke	chris.freke@at.govt.nz	Support the plan change with the amendments requested	Amend the Plan Change to include: provisions which assess the cumulative impact of trips on Carrington Road and access, using the framework within the MHUD ITA; information requirements to assess additional trips generated from any development in subprecinct A; provisions that address any upgrades to the Gate 1 or 2 - Carrington Road intersections necessary to support the development enabled by this Plan Change.	
2	2.2	Auckland Transport Attn: Chris Freke	chris.freke@at.govt.nz	Support the plan change with the amendments requested	Amend the Plan Change to include provisions that require upgrades on the site frontage with the internal road network to include safe walking facilities and provision for separated cycling facilities prior to or, in conjunction with, development.	
2	2.3	Auckland Transport Attn: Chris Freke	chris.freke@at.govt.nz	Support the plan change with the amendments requested	Require more information from the applicant about the accessibility of the site for active modes from Carrington Road based on the current layout and speed environment, and amend the Plan Change appropriately. Amend the Plan Change to include provisions to address any upgrades to the internal roading network necessary to support the development ahead of any MHUD upgrades being delivered. This should include safe walking and cycling routes to the Mason Clinic.	
2	2.4	Auckland Transport Attn: Chris Freke	chris.freke@at.govt.nz	Support the plan change with the amendments requested	Amend Wairaka: Precinct Plan 1 to provide for appropriate alternative alignment(s) for any deleted active mode connections to Oakley Creek and the regional cycleway, including one in place of the formerly proposed reserve.	



	Plan Change 75 (Private): Mason Clinic						
	Summary of Decisions Requested						
Sub#	Sub Point	Submitter Name	Address for Service	Theme	Summary		
2	2.5	Auckland Transport Attn: Chris Freke	chris.freke@at.govt.nz	Support the plan change with the amendments requested	Require more information from the applicant regarding the justification for deleting the indicative walking path connection through the open space lot to Farm Road. Amend the Wairaka: Precinct Plan 1 to reinstate the pedestrian connection or provide an appropriate alternative.		
		Geoffrey John Beresford and			Decline the plan change. Concerns about: definition of activities permitted on site; social impacts (including public safety) due to expansion of forensic psychiatry services, cumulative number of health services in area, possible relocation of other services to the Mason Clinic site; interfaces, planting, building height, noise; consistency with NPS UD; reduction of riparian margins and development in flood plains; adequacy of section 32 analysis; deletion of open space and shared path; controlled activity status and non-notification of certain activities; adequacy of assessment		
3	3.1	Joanna Louise Beresford	joanna.l.beresford@gmail.com	Oppose the plan change	criteria managing public health and safety.		

Submissions

GreenwoodRoche

PROJECT LAWYERS

Auckland Council Level 24, 135 Albert Street Private Bag 92300 Auckland 1142

Attn.: Planning Technician

unitaryplan@aucklandcouncil.govt.nz

To: Auckland Council

Submission on: Plan Change 75 (Private): Mason Clinic

From: The Ministry of Housing And Urban Development

Date: 27 June 2022

1 INTRODUCTION

- 1.1 This is a submission on behalf of the Land for Housing Programme within Te Tūāpapa Kura Kāinga the Ministry of Housing and Urban Development (*HUD*) on a change proposed by Waitemata District Health Board (*WDHB*) to the Auckland Unitary Plan (Operative in Part) (*AUP*) that was publicly notified on 26 May 2022 (*Plan Change* or *PC 75*). WDHB proposes to rezone 3A and 119A Carrington Road from Business Mixed Use zone to Special Purpose Healthcare Facility and Hospital zone, and amend provisions and plans in the Wairaka Precinct, in order to provide for the future expansion of the Mason Clinic.
- 1.2 The Crown owns approximately 29 hectares of land within the Wairaka Precinct, comprising the properties at Carrington Road known as 1-99, 119B and part of 139 Carrington Road, including parts of the former Unitec Institute of Technology (*Unitec*) campus (*Housing Development Land*). HUD administers the Housing Development Land for State housing purposes.
- 1.3 The Housing Development Land is also right of first refusal land under the Ngā Mana Whenua o Tāmaki Makaurau Collective Redress Deed and Act 2014 and the Marutūāhu Rōpū, Ngāti Whātua Rōpū and Waiohua-Tāmaki Rōpū are the rights holders of the opportunity to develop this land for housing.
- 1.4 HUD supports PC 75, subject to the relief sought set out in HUD's submission below.
- 1.5 HUD could not gain an advantage in trade competition through this submission.

Background to the Wairaka Precinct

- 1.6 The Wairaka Precinct was one of several bespoke precincts created through the Proposed AUP process to enable development that would recognise local differences by providing detailed place-based provisions for identified areas.
- 1.7 Unitec was the original landowner of the majority of the land, some 53 hectares, within the Wairaka Precinct. Unitec, and later its development subsidiary the Wairaka Land Company,

- had significant involvement in the development of the Wairaka Precinct through the Proposed AUP process.
- 1.8 The vision for the Wairaka Campus, as promoted through the Proposed AUP process, was to re-shape and transform the Precinct into a high quality educational, commercial, recreational, residential and multipurpose place by providing for a range of activities to occur in harmony and in recognition of the site's strategic location, adjacent to the key transport links of Carrington and Great North Roads, Mt Albert and Pt Chevalier town cetnres, and public open spaces.
- 1.9 The Precinct provisions were drafted in order to achieve that vision, creating an enabling and supportive planning framework.
- 1.10 When considering the Wairaka Precinct provisions, and any proposed amendments to them, it is important to understand this historic context and the vision that was ultimately captured in the Precinct description for the Wairaka Precinct to:1
 - ... provide for a diverse urban community, including the ongoing development and operation of the tertiary education facility, the development and operation of a range of community, recreation, and social activities, the development of a compact residential community, and commercial service activities.

2 SUBMISSION

General

- 2.1 As identified in the correspondence from HUD to Council,² the Crown has committed to supporting WDHB's application to rezone the Mason Clinic Land and to support WDHB's request for:
 - (a) the removal of the 'key open space' (private) area from Wairaka Precinct plan 1 (currently located on the western edge of the Precinct adjacent to the existing public reserve in Te Auaunga/Oakley Creek and to the south of the existing Wairaka subprecinct A); and
 - (b) the removal of the 'Shared path' from Wairaka Precinct plan 1 (currently located on the border of the northern boundary of the existing Wairaka sub-precinct).
- 2.2 HUD will propose replacement open space and walking and cycling connections within the Wairaka Precinct.
- 2.3 HUD continues to support the Plan Change.
- 2.4 The purpose of this submission is to ensure those matters agreed between WDHB and HUD during ongoing consultation continue to be reflected in the Plan Change and the Wairaka Precinct provisions.

¹ AUP, I334.1 Wairaka Precinct Description.

Attached to the PC 75 request as Attachment 14.

Proposed provisions

2.5 As identified by WDHB in its request for PC 75, regular consultation has taken place between WDHB and HUD during WDHB's preparation of PC 75. That consultation included discussion on the proposed amendments to the Wairaka Precinct provisions.

Precinct description

- 2.6 PC 75 proposes a number of amendments to the Wairaka Precinct description. This includes a description of the Mason Clinic and the activities it is intended to accommodate.
- 2.7 HUD considers it appropriate to provide recognition of the Mason Clinic in the Precinct description; however, the extent of the description of the Mason Clinic's activities in the Precinct description as proposed by PC 75 creates a corresponding focus on these activities that should remain balanced alongside the other activities enabled within the Precinct provisions.

Activity table

2.8 PC 75 proposes a new restricted discretionary activity A53 as follows:

New buildings or additions to existing buildings that increase the building footprint by more than 25 per cent or $250m^2$ GFA (whichever is lesser), that are located within 10m of the eastern boundary.

- 2.9 As identified in the PC 75 request, specific provisions have been proposed relating to the management of effects of future built form at the common boundary with the Housing Development Land and at the street frontage interface at the eastern side of the Mason Clinic.³
- 2.10 The matters of discretion and assessment criteria for buildings at this boundary, as agreed between WDHB and HUD, are concerned with ensuring high quality design and amenity and safety, which are particularly relevant to the interface between the Mason Clinic land and Housing Development Land.
- 2.11 HUD considers these criteria are appropriately triggered for buildings on the eastern boundary where additions to existing buildings would increase the building footprint by more than 20 % or 200m² GFA (whichever is lesser).
- 2.12 The 20 % standard also mirrors that which is provided for in the underlying Special PurposeHealthcare Facility and Hospital Zone to manage effects of buildings located in proximity to a public road or open space zone.

3 RELIEF SOUGHT

- 3.1 HUD seeks a decision that supports the Plan Change with any modifications considered necessary to give effect to the overall objectives of the Wairaka Precinct, including:
 - (a) Ensure that the detail provided on the Mason Clinic and its activities in the Precinct description is commensurate with the variety of activities which the Wairaka Precinct is intended to accommodate and acknowledges the role of the Precinct provisions in ensuring that the effects of the Mason Clinic buildings are appropriately addressed at

PC 75 Request: Assessment of Environmental Effects, section 10.1.

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4

critical interfaces between the specialist healthcare facility and surrounding housing and other mixed use activity.

1.1

(b) Amend proposed activity 53 to provide that additions to existing buildings that would increase the building footprint by more than 20 % or 200m² GFA (whichever is lesser) that are located within 10m of the eastern boundary are restricted discretionary activities.

1.2

- (c) Such further, alternative or other consequential amendments as may be necessary to fully give effect to the relief sought in this submission.
- 3.2 HUD wishes to be heard in support of its submission.

DATED this 27th day of June 2022

Francelle Lupis

Counsel for the Ministry of Housing and Urban Development

Address for Service:

Greenwood Roche PO Box 106006 Auckland 1143

Attention: Francelle Lupis

Email: francelle@greenwoodroche.com

Phone: 021 333 267



20 Viaduct Harbour Avenue, Auckland 1010 Private Bag 92250, Auckland 1142, New Zealand Phone 09 355 3553 Website www.AT.govt.nz

27/06/2022

Plans and Places **Auckland Council** Private Bag 92300 Auckland 1142

Attn: Elisabeth Laird

Email: unitaryplan@aucklandcouncil.govt.nz

SUBMISSION ON PROPOSED PRIVATE PLAN CHANGE 75: MASON CLINIC

Please find attached Auckland Transport's submission on Proposed Private Plan Change 75: Mason Clinic to the Auckland Unitary Plan (Operative in Part).

Should you have any queries in relation to this submission, please contact +64 27 466 1119 or at chris.freke@at.govt.nz.

Yours sincerely

Sam McGough

Planner, Land Use Policy and Planning North / West

cc:

Waitematā District Health Board C/- Bentley & Co Limited

Via email: <u>ablomfield@bentley.co.nz</u>

SUBMISSION BY AUCKLAND TRANSPORT ON PROPOSED PRIVATE PLAN CHANGE 75 – MASON CLINIC

To: Auckland Council

Private Bag 92300 Auckland 1142

Submission on: Proposed Private Plan Change 75 from the Waitematā District

Health Board to amend the provisions of the Auckland Unitary Plan (Operative in part) which apply to the Mason Clinic site located in

the Wairaka Precinct.

From: Auckland Transport

Private Bag 92250 Auckland 1142

1. Introduction

1.1 The Waitematā District Health Board ('the applicant') has lodged a Proposed Private Plan Change ('PPC 75' or 'the Plan Change') to the Auckland Unitary Plan: Operative in Part ('AUP(OP)'). The Plan Change seeks to amend the provisions of the AUP(OP) which apply to the Mason Clinic site located in the Wairaka Precinct, Carrington Road, which has been expanded to include recently purchased sites to the north and south of the existing site.

- 1.2 The documents provided with the Plan Change application notes that the Plan Change seeks to rezone the Northern Site and Southern Site to Special Purpose Healthcare Facility and Hospital Zone and adjust the boundaries of the Wairaka subprecincts to include the Northern Site and Southern Site within Sub-precinct A. The Plan Change also seeks to adjust the existing Wairaka Precinct provisions to better provide for the expansion of the Mason Clinic.
- 1.3 Auckland Transport is a Council-Controlled Organisation of Auckland Council ('the Council') and the Road Controlling Authority for the Auckland region. Auckland Transport has the legislated purpose to contribute to an 'effective, efficient and safe Auckland land transport system in the public interest'. Auckland Transport is responsible for the planning and funding of most public transport; promoting alternative modes of transport (i.e., alternatives to the private motor vehicle); operating the local roading network; and developing and enhancing the local road, public transport, walking and cycling network for the Auckland region.
- 1.4 Auckland Transport is not a trade competitor for the purposes of section 308B of the Resource Management Act 1991.

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¹ Local Government (Auckland Council) Act 2009, section 39.

2. Transport Infrastructure

- 2.1 Auckland Transport has reviewed this Plan Change to ensure it is aligned to the framework that the existing Precinct Plan provides with its intent and identified outcomes. This includes consideration of the Precinct Plan description, objectives, policies, and assessment framework.
- 2.2 Development of existing urban areas generates transport effects that need to be considered to ensure adverse effects are avoided, remedied and/or mitigated. Cumulative adverse effects on the transport network can also result from multiple developments that may individually have minor effects but in combination with others result in significant effects. This may include the need for investment in transport infrastructure and services to support construction, land use activities and the communities that will utilise these areas. Auckland Transport's submission seeks to ensure that the transport related matters raised by PPC 75 are appropriately considered and addressed as part of achieving a well-functioning urban environment.
- 2.3 At the regional level, the Wairaka Precinct is currently one of the largest contiguous brownfield developments on the Isthmus, with its own internal transport network and its interface with the external network. The transport effects of PPC 75 should, therefore, be considered in conjunction with the potential effects from other developments being progressed, including in the Wairaka Precinct, in the context of the broader network. Key considerations within the Wairaka Precinct, for example, includes:
 - 26.5ha of Crown land held for housing purposes and intended for medium to high density residential development initially targeting 2,500 dwellings.
 - 4.4ha of land owned by Ngāti Whātua Ōrākei in the southern and western portion
 of the Precinct is targeted for medium and high-density residential development
 with an expected yield, when combined with the Crown land holdings in the South,
 of around 500 units.
 - United Institute of Technology ('United') with their 21ha that is currently used as
 a tertiary education campus and associated business park. United has a previous
 Integrated Transport Assessment for their campus consolidation, now in part
 superseded. It is based on:
 - i. growing the campus to 12,000 FTEs;
 - ii. the construction of two parking buildings; and
 - iii. operational changes to the campus with a key focus on public transport and the spreading of teaching time, to achieve a wider distribution of travel time.
- In reviewing this Plan Change, Auckland Transport has had regard to the Integrated Transport Assessment (ITA) dated June 2020, completed on behalf of the Ministry of Housing and Urban Development ("MHUD") for their proposals associated with the Wairaka Precinct and the Precinct overall, reviewed by the Council at the time. Auckland Transport has also reviewed the ITA dated April 2021, provided in support of this Plan Change proposal. The ITA completed for the Wairaka Precinct identifies the known existing and planned development within the Precinct at its date of issue and includes stated assumptions about other development within the study area. The relevant projects include, but are not limited to, the construction of a new, upgraded,



traffic signal-controlled intersection at or near the vicinity of the current Unitec Gate 2 on Carrington Road and the upgrade of Carrington Road as identified in the Regional Land Transport Plan (2021-2031). The upgrade of Carrington Road includes the provision of intersection improvements, bus lanes and new bus facilities to support the Unitec precinct redevelopment in Mt Albert with the bulk of the funding allocated between 2026 and 2031.

3. Specific parts of the Plan Change that this submission relates to

- 3.1 The specific parts of the Plan Change that this submission relates to are set out in Attachment 1. In keeping with Auckland Transport's purpose, the matters raised relate to potential effects on the transport network (internal and external) and how the development enabled by the Plan Change will integrate with transport infrastructure and facilities.
- 3.2 Auckland Transport has no opposition to the Plan Change in principle however there are a number of outstanding transport issues needing to be addressed. This position is subject to:
 - The potential transport effects of the Plan Change are appropriately assessed and mitigated.
 - Auckland Transport's concerns as outlined in this submission, including in Attachment 1, are resolved. To align with submission requirements, these have been identified as matters Auckland Transport is opposing.
- 3.3 Auckland Transport is available and willing to work through the matters raised in this submission with the applicant.

4. Decisions sought by Auckland Transport

- 4.1 The decisions which Auckland Transport seeks from the Council are set out in **Attachment 1**.
- 4.2 In all cases where amendments to the Plan Change are proposed, Auckland Transport would consider alternative wording or amendments which address the reason for Auckland Transport's submission. Auckland Transport also seeks any consequential amendments required to give effect to the decisions requested.



- 5. Appearance at the hearing:
- 5.1 Auckland Transport wishes to be heard in support of this submission at a hearing.
- 5.2 If others make a similar submission, Auckland Transport will consider presenting a joint case with them at the hearing.

Name: Auckland Transport

Signature:

Christina Robertson

Group Manager, Growth and Urban Planning Integration

Date: 27 June 2022

Contact person: Chris Freke,

Principal Planner, Growth & Urban Planning Integration Unit

Sam McGough

Planner, Growth & Urban Planning Integration Unit

Address for service: Auckland Transport

Private Bag 92250 Auckland 1142

Telephone: +64 27 466 1119

Email: Chris.Freke@at.govt.nz



2 1

Attachment 1

Topic	Support / Oppose	Reason for submission	Decision requested
Plan Change as a whole	Support in part	Auckland Transport supports the purpose of the Plan Change to provide for the expansion of the Mason Clinic through adjustments to the current sub precinct boundaries and changes to the Wairaka precinct provisions. However, the submission seeks a number of transport related amendments to the proposed provisions.	Approve the Plan Change subject to the matters set out in this submission being addressed and resolved to Auckland Transport's satisfaction.
Vehicle Access	Oppose	The Integrated Transport Assessment (June 2020) completed by the Ministry of Housing and Development ('MHUD ITA') for the wider Wairaka Precinct identifies the need to signalise at least one intersection on Carrington Road. The traffic modelling undertaken for the MHUD development includes the signalisation of Gate 2 (just north of Segar Avenue) and Gate 3 - Farm Road. The MHUD ITA which applies to the whole precinct was certified on the basis that traffic signals be provided on Carrington Road after a certain level of development occurred within the precinct. It assumed that there would be negligible change in demand from the existing Mason Clinic site. The development enabled by this Plan Change will contribute traffic and other transport demand onto Carrington Road beyond that previously assumed. It therefore needs to be subject to the same requirements	Amend the Plan Change to include provisions which assess the cumulative impact of trips on Carrington Road and access, using the framework within the MHUD ITA. Amend the Plan Change to include information requirements to assess additional trips generated from any development in sub-precinct A, to determine whether additional mitigation is required to support the proposed level of development and inclusion of appropriate mechanisms to ensure any such mitigation is provided. Amend the Plan Change to include provisions that address any upgrades to the Gate 1 or 2 - Carrington Road intersections necessary to support the development enabled by this Plan Change. This could include appropriate staging triggers in the precinct provisions.

2.1

Торіс	Support / Oppose	Reason for submission	Decision requested
		that apply to other developments within the Precinct which also use the current priority access intersections with Carrington Road. The precinct should include provisions which assess the cumulative impact of trips on access to and from Carrington Road using the framework outlined in Sections 5.8 and 5.11 in the MHUD ITA, to determine if any further mitigation is required to be in place to support the proposed level of development. In addition, the precinct provisions should include information requirements to assess additional trips generated from any development in sub-precinct A and inclusion of appropriate mitigation mechanisms. This is to ensure the Carrington Road entrances for the Precinct will have sufficient capacity and safety to accommodate the forecasted increase of vehicular traffic flows.	
Frontage Upgrade	Oppose	Section 2.3 of the MHUD ITA (June 2020) notes the existing internal roads generally have footpaths, though these are often narrow, only on one side of the road and have no separation buffer between the carriageway and the footpath space. The MHUD ITA proposed to upgrade the internal road network, prioritising walking and cycling networks, including separated cycle facilities on key routes. The applicant is reliant on these transport upgrades to support active mode travel to the Plan Change site. At this stage, there is no certainty the upgrades to the	Amend the Plan Change to include provisions that require upgrades on the site frontage with the internal road network to include safe walking facilities and provision for separated cycling facilities prior to or, in conjunction with, development.



Topic	Support / Oppose	Reason for submission	Decision requested	
		internal road network will be delivered as part of the MHUD development proposals. If these measures are not implemented or are deferred to later stages, this is likely to restrict the accessibility of the site for active mode users.		
		Safety and accessibility are particularly important considerations for active mode infrastructure. The precinct provisions should include a requirement to upgrade the site 'frontage' with the internal road network to ensure the site is safe and accessible for all road users, clearly identifying the works required to provide a safe walking and cycling connection to the Plan Change site.		
Active Mode Access	Oppose	The Integrated Transport Assessment (April 2021) completed to support the Plan Change (PPC 75 ITA) is lacking detail on the existing walking and cycling accessibility to the Plan Change site from Carrington Road or the regional cycleway. If the MHUD upgrades on the internal road network are not implemented, the existing network is limited for active mode users. Objective 8 of the Precinct Plan identifies the need to provide cycling and pedestrian linkages from the Precinct to the wider area. The Plan Change should consider the safety and accessibility of the site for pedestrians and cyclists based on the existing layout and speed environment, to determine if any further mitigation is required.	Require more information from the applicant about the accessibility of the site for active modes from Carrington Road based on the current layout and speed environment, to determine whether additional mitigation is required and then amend the Plan Change for inclusion of appropriate mechanisms in the Precinct Plan to ensure any such mitigation is provided. The additional assessment should consider the safety effects for active mode users. Amend the Plan Change to include provisions to address any upgrades to the internal roading network necessary to support the development ahead of any MHUD upgrades being delivered. This should include safe walking and cycling routes to the Mason Clinic.	22



Topic	Support / Oppose	Reason for submission	Decision requested
Active Mode Connection	Oppose	The existing Wairaka: Precinct Plan 1 identifies a shared path and open space running along the northern and southern boundaries of sub-precinct A. The connections provide two important links for active mode users between Carrington Road, Oakley Creek and the regional cycleway. Policies 4(J) and (K) of the Precinct Plan seek to provide for open space access to Oakley Creek and, pedestrian and cycle connections to Point Chevalier, Waterview and Mt Albert. The applicant's proposed amendments to the Wairaka: Precinct Plan 1 remove these connections and the remaining connections to Oakley Creek and the regional cycleway are further north and south of sub-precinct A. Attachment 14 of the Plan Change documentation includes correspondence between the applicant and MHUD. The document indicates MHUD's intention to deliver equivalent open space and shared path proposals either through a separate Plan Change or by way of resource consent. There is no guarantee the transport interventions identified in MHUD's development proposals will be delivered or be delivered prior to this Plan Change proposal being approved. As such, the Precinct Provisions should be revised to include appropriate alternative alignments to Oakley Creek and the regional cycleway as part of this Plan	Amend Wairaka: Precinct Plan 1 to provide for appropriate alternative alignment(s) for any deleted active mode connections to Oakley Creek and the regional cycleway, including one in place of the formerly proposed reserve.



Topic	Support / Oppose	Reason for submission	Decision requested	
		Change. One of these active mode connections should be in place of the formerly proposed reserve.		2
Walking Path connection to Farm Road	Oppose in part	The existing Wairaka: Precinct Plan 1 identifies an indicative internal walking path network that connects through the key open space to Farm Road. The applicant's proposed amendments to the Wairaka: Precinct Plan 1 removes this connection through to Farm Road as the walking path appears to stop at the open space lot. This walking path supports connectivity within the Precinct and provides an important active mode connection from the internal network to Farm Road. Auckland Transport seeks to understand the justification for the apparent removal of this connection and reinstatement of the connection if required.	Require more information from the applicant regarding the justification for deleting the indicative walking path connection through the open space lot to Farm Road. Based upon this information, amend the Wairaka: Precinct Plan 1 to reinstate the pedestrian connection through the open space lot to Farm Road if required or provide an appropriate alternative.	2



RESOURCE MANAGEMENT ACT 1991

SUBMISSION ON PRIVATE PLAN CHANGE 75 (MASON CLINIC) TO THE AUCKLAND UNITARY PLAN (OPERATIVE IN PART)

Clause 6 of First Schedule, Resource Management Act 1991

TO: Auckland Council,

By Email: <u>unitaryplan@aucklandcouncil.govt.nz</u>

SUBMITTERS: Geoffrey John Beresford and Joanna Louise

Beresford at the address for service set out below.

- 1. This is a submission on Private Plan Change 75 to the Auckland Unitary Plan (Operative in Part), (**the Change**) requested by the Waitematā District Health Board (**WDHB**). The Change proposes to rezone 3A and 119A Carrington Road from Business Mixed Use zone to Special Purpose Healthcare Facility and Hospital zone, and to amend provisions and plans in the Wairaka Precinct to provide for the intensification and expansion of the Mason Clinic. The Change includes proposals to remove requirements for open space and a shared path from the site.
- 2. The Submitters are trustees of The GJ and JL Beresford Family Trust, which owns residential property at 5 Seaview Terrace, Mt Albert, Auckland.
- 3. The Submitters could not gain an advantage in trade competition through this submission and in any event are directly affected by an effect of the subject matter of the submission that (a) adversely affects the environment; and (b) does not relate to trade competition or the effects of trade competition.
- 4. This submission opposes the Change in its entirety.

5.

The reasons for the submission are that the Change, as notified:

(a) Is contrary to the sustainable management of natural and physical resources does not amount to or promote the efficient use and development of resources, and is otherwise contrary to the purpose and principles in Part 2 of the Resource Management Act 1991 (the Act).

- (b) Is inconsistent with objectives, policies and other provisions in the AUP and other relevant planning instruments.
- (c) Does not warrant approval in terms of section 32 of the Act.
- (d) Is unnecessary and counterproductive to the sustainable management of Wairaka Precinct.
- (e) Will generate significant adverse effects on the environment in particular in terms of traffic, noise, social impacts and on the ability to comprehensively redevelop the Wairaka Precinct for high quality residential development.
- 6. In particular, but without limiting the generality of the above:
 - (a) The Change will enable significant adverse effects on the environment including on the social well-being of the existing and proposed residential community.
 - (b) The Plan Change is sought to service anticipated demand in forensic psychiatric services and broaden the services provided at the Mason Clinic in respect of youth services and holistic rehabilitation facilities for non-custodial users. The Change approximately doubles the site area zoned for the Mason Clinic and is intended to enable the expansion of the Mason clinic to a GFA of around 10,000 square metres, nearly double that of the existing facilities. The proposed expansion and broadening of the services changes the public safety risk and requires an overall assessment of the level of security and whether the activity remains appropriate in this location.
 - (c) The Change enables the expansion and intensification of the existing Mason Clinic but fails to assess the cumulative effects on social well-being of expanding the facility given the concentration of other WDHB / Mental Health facilities in the block bounded by Sutherland Road Carrington Road and Segar Avenue and on Seaview Terrace.
 - (d) The Change does not adequately assess or mitigate the Social Impacts of the proposed expansion and cumulative effects of locating the expanded facility in this area. The Mason Clinic is a regional facility providing forensic psychiatric services for the WDHB and the upper North Island. The Plan Change fails to recognise that the burden of the proposed expansion falls disproportionately on the local community or to mitigate those adverse effects. Further, there is nothing in the Change to ensure that other WDHB / Mental Health facilities are not relocated and consolidated to the site
 - (e) The Plan Change seeks to provide for "justice facilities" across the entire site. However, the AUP definition is very broad being a "[f]acility used for judicial, court, or tribunal purposes, and/or activities including collection of fines and reparation, administration and support, together with custodial services as

3.1

3.1

part of the operation of New Zealand's justice system." Given the very particular forensic psychiatric activity sought to be enabled by the plan change there needs to be a more specific definition of the activities allowed on the site rather than reliance on the AUP definition.

- (f) The Change refers to providing a mixture of publicly accessible and secure facilities controlled at different security levels, however, there is nothing to ensure that security and public safety measures on the site are adequate. Rather, the Change expresses a desire to rely on building layout, existing vegetation and to reduce yards and minimise boundary fencing. The Plan Change does not include requirements to retain and maintain existing planting relied on for mitigation and security.
- (g) The section 32 analysis does not adequately assess other reasonably practicable alternatives but instead relies on the WDHB having determined that it will be most efficient to expand and intensify the existing Mason Clinic, rather than relocating the facilities elsewhere, or to develop multiple facilities across separate landholdings. Assessment of options (such as relocation and use of the site for residential purposes) needs to be undertaken in the context of the planned comprehensive urban development of the Precinct.
- (h) The Plan Change, in providing for the expansion of the facility, is inconsistent with the NPS-UD 2020, which seeks to create wellfunctioning urban environments and provide for more intense residential development close to centres and rapid transit stations.
- (i) The Change proposes delete the open space and shared path components from the Wairaka Precinct Plan 1 that apply to the sites, which are intended to provide important connections when the Wairaka Precinct is comprehensive developed for residential purposes. There is no plan in place for replacing these connections and open space and they ought to remain in place until replacements are secured.
- (j) The Plan Change sets out that the functional and operational needs of the facility will limit the height to two to three stories but fails to limit the height of the buildings accordingly, which will generate significant adverse effects on the surrounding environment.
- (k) The Plan Change provides for development within the flood plain of a large catchment, in which significant urbanisation is enabled via existing planning provisions. There is no basis for reduced riparian margins and there needs to be a requirement that consented stormwater works are implemented in advance of any redevelopment on the site.

3.1

- (I) The Plan Change seeks controlled activity status for certain activities and non-notification of restricted discretionary activities. The extent of proposed controlled activity status and the inclusion of the non-notification rule are inappropriate. The Council and community need the ability to respond to proposals as the surrounding environment changes.
- (m) Assessment criteria (for controlled activity status) regarding safety and security, and the functional and operational requirements of the site, do not adequately recognise the risks posed by the special forensic psychiatry function of the facility. If the Change is approved, the assessment criteria and other provisions need to be strengthened to ensure public health and safety and to enable Council consent processing officers to assess whether a future proposal will satisfactorily achieve these outcomes.
- 7. The Submitters seek that the Change be withdrawn or, if necessary, disallowed unless amendments are made to address the concerns in this submission.
- 8. The Submitters wishes to be heard in support of their submission. If other parties make a similar submission, the Submitter would consider presenting a joint case with them at any hearing.

DATED 27 June 2022

GJ and JL Beresford

Address for service of the Submitters: 5 Seaview Terrace, Mt Albert, Auckland 1025; Phone 021 114 1277; joanna.l.beresford@gmail.com

RESOURCE MANAGEMENT ACT 1991

FURTHER SUBMISSION ON PRIVATE PLAN CHANGE 75 (MASON CLINIC) TO THE AUCKLAND UNITARY PLAN (OPERATIVE IN PART)

Clause 8 of the First Schedule

TO: Auckland Council,

By Email: <u>unitaryplan@aucklandcouncil.govt.nz</u>

SUBMITTERS: Geoffrey John Beresford and Joanna Louise Beresford at the

address for service set out below.

- The Submitters made a submission, Submission No. 3, on Proposed Private Plan Change 75 (Mason Clinic) to the Auckland Unitary Plan Operative in Part ("the Proposed Change"). The Submitters make further submissions in opposition to, or in support of, the relief sought in the primary submissions of other submitters as set out in **Attachment 1**.
- 2. Where submissions are supported or opposed, it is to the extent that it is consistent with the relief sought by the Submitters in their primary submission. The specific parts of the submission supported or opposed are addressed, and the specific reasons for the Submitters' position are set out in **Attachment 1**.
- 3. The general reasons for this further submission are:
 - (a) In the case of submissions opposed, the submissions do not promote the sustainable management of natural and physical resources and are otherwise inconsistent with the purpose and principles of the Act; and rejecting the relief sought in the submissions would more fully serve the statutory purpose than would implementing that relief.
 - (b) In the case of those submissions supported, the submissions promote the sustainable management of natural and physical resources and are consistent with the purpose and principles of the Act; and allowing the relief sought would more fully serve the statutory purpose than would disallowing that relief.
- 4. The Submitters wish to be heard in support of this further submission.

5. If other parties make similar submissions, the Submitters would consider presenting a joint case with them at any hearing.

DATED: 21 September 2022

GJ and JL Beresford

Address for service of the Submitters: 5 Seaview Terrace, Mt Albert, Auckland 1025; Phone 021 114 1277; joanna.l.beresford@gmail.com

Attachment 1: Further submission details

Further Submission Details										
Details of origina	l submission	that further s	ubmission is being made on	Details of further submission						
Original submitter	Submission number	Original submitter position	Relief sought as stated in the summary of submissions	Support or oppose	Reasons for support or opposition	Allow or Disallow (if plan change approved				
The Ministry of Housing and Urban Development	1.1	Support the plan change with the amendments requested	Ensure that the Precinct description has an appropriate level of detail and acknowledges role of Precinct provisions in addressing interfaces between Mason Clinic and surrounding activities.	Support in part	If the plan change is approved, is appropriate that the Precinct provisions adequately address interface issues to ensure that any future development proposals are well integrated.	Allow				
The Ministry of Housing and Urban Development	1.2	Support the plan change with the amendments requested	Amend proposed activity 53 to provide that additions to existing buildings that would increase the building footprint by more than 20 % or 200m2 GFA (whichever is lesser) that are located within 10m of the eastern boundary are restricted discretionary activities.	Support in part	If the plan change is approved, it is appropriate that any additions to existing buildings are restricted discretionary activities. The Council should retain discretion over the built form of the site in relation to the interface with future residential development proposals.	Allow				
Auckland Transport	2.1	Oppose	Amend the Plan Change to include: provisions which assess the cumulative impact of trips on Carrington Road and access, using the framework within the MHUD ITA; information requirements to assess additional trips generated from any development in sub-precinct A; provisions that address any upgrades to the Gate 1 or 2 - Carrington Road intersections necessary to support the development enabled by this Plan Change	Support in part	If the plan change is approved, it is appropriate that the Mason Clinic is required to assess and address the cumulative traffic effects generated by its development proposal.	Allow				
Auckland Transport	2.2	Oppose	Amend the Plan Change to include provisions that require upgrades on the site frontage with the internal road network to include safe walking facilities and provision for separated cycling facilities prior to or, in conjunction with, development.	Support in part	If the plan change is approved, it is appropriate that the adjacent road network is future proofed to provide for active transport modes.	Allow				
Auckland Transport	2.3	Oppose	Require more information from the applicant about the accessibility of the site for active modes from Carrington Road based on the current layout and speed environment, and amend the Plan Change appropriately. Amend the Plan Change to include provisions to address any upgrades to the internal roading network necessary to support the development ahead of any MHUD upgrades being delivered. This should include safe walking and cycling routes to the Mason Clinic.	Support in part	If the plan change is approved, it is appropriate that the adjacent road network is future proofed to provide for active transport modes.	Allow				

Auckland Transport	2.4	Oppose	Amend Wairaka: Precinct Plan 1 to provide for appropriate alternative alignment(s) for any deleted active mode connections to Oakley Creek and the regional cycleway, including one in place of the formerly proposed reserve.	Support in part	Consistent with the relief sought in the Subnet to primary submission at 6(i).	Allow
Auckland Transport	2.5	Oppose in part	Require more information from the applicant regarding the justification for deleting the indicative walking path connection through the open space lot to Farm Road. Amend the Wairaka: Precinct Plan 1 to reinstate the pedestrian connection or provide an appropriate alternative.	Support in part	Consistent with the relief sought in the Submitters' primary submission at 6(i).	Allow

ATTACHMENT FOUR COUNCIL EXPERT REPORTS



Memo (technical specialist report to contribute towards Council's section 42A hearing report)

22 February 2023

To: Elisabeth Laird, Policy Planner, Plans and Places, Auckland Council

From: Gemma Chuah, Principal - Resource Management, Healthy Waters, Auckland

Council

Subject: Private Plan Change PC75 – WDHB Mason Clinic – 3A, 81A AND 119A

CARRINGTON ROAD, MOUNT ALBERT - Healthy Waters stormwater and

flooding assessment for S42A report.

1.0 Introduction

1.1 I have undertaken a review of the private plan change, on behalf of Auckland Council in relation to stormwater and flooding effects.

- 1.2 This memo provides a Healthy Waters network operator and stormwater management review of the proposed private plan change 75 to the Auckland Unitary Plan (AUP) to rezone land at 3A and 119A Carrington Road from Business Mixed Use Zone to Special Purpose-Healthcare Facility and Hospital Zone and amend the Wairaka Precinct.
- 1.3 I am a Principal Resource Management in the Healthy Waters Department of Auckland Council. I hold a Bachelor of Science (Hons) degree from the University of Canterbury, and I am a member of Water New Zealand. I have been employed by Auckland Council for twelve years. In my current role I am responsible for providing technical and planning input from Healthy Waters perspective into plan changes and resource consent applications and for coordinating the implementation of Healthy Waters' regionwide network discharge consent.
- 1.4 Initial review of this plan change for Healthy Waters was undertaken by Eseta Maka Fonokalafi, Senior Healthy Waters Specialist. I have considered her assessment and incorporated it into my own where I agree with her conclusions.

2.0 Site Characteristics and Key Stormwater matters

- 2.1 The site is located to the east of Oakley Creek / Te Auaunga with a total site area of 67,794 m² (Figure 1). The Wairaka stream runs through the site and is piped in sections.
- 2.2 The site is subject to a 1% Annual Exceedance Probability (AEP) floodplain and several overland flow paths as shown in figure 2.
- 2.3 The change in zone for the northern and southern areas from Business Mixed Use to Special Purpose - Healthcare will introduce a maximum impervious area standard of 80%. The existing Business – mixed use zone does not have a maximum impervious area so

- could be developed to 100% impervious area.
- 2.4 An approved Stormwater management plan is in place across the Wairaka Precinct which addresses the management of stormwater, flooding and overland flow paths in relation to development of the precinct.
- 2.5 The Auckland Isthmus Volcanic Aquifer underlies all sites and is identified as a Quality Sensitive Aquifer Management area.
- 2.6 1.6 Site 81A and 119A Carrington are subject to Significant Ecological Areas Overlay SEA_T_6008, Terrestrial which identifies this site as having significant indigenous vegetation or significant habitats of indigenous fauna



Figure 1. Site location and plan change area.

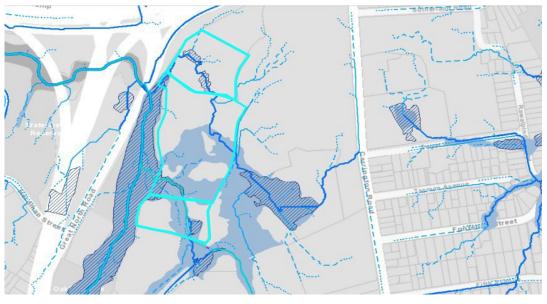


Figure 2. Overland Flow paths and Floodplain (solid blue) and flood prone areas (blue hatch) areas

3.0 Assessment of stormwater effects

Riparian margins

- 3.1 The change in zone for the northern and southern areas from Business Mixed Use to Special Purpose - Healthcare will change the riparian margin set back standard from 10m to 5m. This change will only affect the sections of Wairaka Stream with the southern area.
- 3.2 In relation to stormwater the primary purpose of riparian margins is to provide flood conveyance. The stream is currently piped for the majority of this area. The reduction in riparian margin will not affect the capacity of the stream to convey stormwater.

Infrastructure capacity

- 4.0 The applicant's infrastructure assessment identifies that the existing drainage is not fit for purpose to support the long-term development of the precinct. The approved Stormwater SMP outlines where upgrades are required as part of the stormwater network that services the overall Wairaka Precinct.
- 4.1 Condition and capacity assessments of the existing private stormwater pipes will need to be undertaken before any are vested to Auckland Council. It is appropriate that the details relating to this should be managed as part of resource consent and engineering plan approvals.
- 4.2 It is noted that the change in zone reduces the maximum impervious area to 80% from 100% and therefore reduces the amount of stormwater generated from those impervious surfaces.

Flooding and overland flow paths

- 4.3 Parts of the site are located in the 1% AEP flood plain and there are overland flow paths which cross the site.
- 4.4 Management of flooding is considered in the approved SMP with the preferred approach being to 'pass the flows forward' rather than to provide attenuation, this is due to the location at the bottom of the catchment and the timing of flood peaks. This means that no space needs to be set aside for flood attenuation. The change in zone will not change this approach.
- 4.5 Development in and adjacent to the existing floodplain will need be considered carefully through the design and resource consent phases. This will be controlled by the existing rules in the AUP. As required by the objectives and policies of AUP Chapter E36, development will need to avoid increasing risk to natural hazards in particular for vulnerable activities. This will need to be reflected in the design and location of buildings

across the site.

Water quality

- 4.6 The existing precinct standards require that all stormwater management must be in accordance with the SMP. The SMP requires that water quality mitigation will be provided for main connector roads and for any high contaminant generating car park areas. Water quality mitigation is similarly required by the AUP Chapter E9 for high contaminant generating car park areas.
- 4.7 The proposed plan change will not have any effect on water quality from stormwater runoff.

Stream hydrology and erosion

- 4.8 The proposed plan change area is not within a Stormwater Management Area Flow (SMAF).
- 4.9 As established in the approved SMP, due to the characteristics of the stream morphology and the location of the site in the lowest reaches of the catchment there is no benefit to providing hydrology mitigation from development within the Wairaka Precinct.

5.0 Proposed precinct provisions

5.1 The changes to the Wairaka precinct do not include changes to any of the provisions which relate to stormwater matters. Standard I334.6.3 Stormwater which requires consistency with the approved SMP will continue to apply to the whole of the site.

6.0 Consistency with Auckland Unitary Plan

- 6.1 The relevant objectives and policies of the AUP to the management of stormwater and flooding include those in Chapters B7.4, E1 and E36. These in particular relate to maintaining and enhancing streams, water quality and freshwater values. The policies require that new effects from stormwater are avoided and existing effects are progressively reduced.
- 6.2 Overall, the proposed changes will not affect the management of stormwater or the effects of stormwater runoff from the site. The precinct requires that the approved stormwater management plan is followed and this addresses water quality effects. Therefore, the precinct remains consistent will the relevant policies.

7.0 National Policy Statement Fresh Water 2020

7.1 The key concept in the NPSFM is to give effect to te mana o te wai. The plan change will

not change the way in which stormwater is managed across the site so will not change the way in which stormwater affects the mama or the mauri of the Wairaka Stream or Oakley Creek / Te Auaunga awa.

8.0 Submissions

8.1 Submission 3 raises concerns about flooding and stormwater management. These issues have been discussed above. The approved stormwater management plan for the whole precinct considers in an integrated way, the best approach for managing these stormwater issues and in accordance with the precinct rules must be complied with for all development within the precinct.

9.0 Other matters

Healthy Waters Regionwide Stormwater Network Discharge Consent

9.1 All stormwater discharges to the public stormwater network must be consistent with Healthy Waters Regionwide Network Discharge Consent (NDC). A stormwater management plan for the whole of the Wairaka Precinct has been adopted into the NDC. As long as development is in accordance with the requirements of the SMP it will be consistent with the NDC.

10.0 Conclusions

- 10.1 There are not likely to be any adverse effects in relation to stormwater or flooding arising from the plan change.
- 10.2 Specific details of stormwater management in relation to development within the plan change area can be addressed through resource consent and engineering plan approval processes.
- 10.3 Overall Healthy Waters can support the plan change without modification.

Landscape Peer Review

Private Plan Change 75: Mason Clinic (3A, 81A & 119A Carrington Road, Mt Albert)

9 February 2023 | FINAL

1 Introduction

- 1.1 Bridget Gilbert Landscape Architecture Limited (BGLA) has been requested by Auckland Council (Council) to Undertake a Landscape Peer Review of the Landscape and Visual Effects Assessment (Landscape Report) prepared by Thomas Consultants in support of a Private Plan Change (PC75) to:
 - a) Rezone land within the Wairaka Precinct to the north and south of the existing Mason Clinic facility from Business – Mixed Use (BMU) to Special Purpose – Healthcare Facility and Hospital Zone (HFH).
 - b) Apply Sub-precinct A of the Wairaka Precinct to the combined sites.
 - c) Delete the open space and shared path components from the Wairaka Precinct Plan 1 that apply to the sites.
 - d) Amend the objectives and policies of the Wairaka Precinct to better reflect the nature of the Mason Clinic activity and provide for its ongoing development and intensification, having regard to the environmental attributes and amenity of the anticipated future urban development of the surrounding land.
 - e) Introduce appropriate standards to guide future development.
 - f) Introduce new matters of discretion/control and assessment criteria for the consideration of new building development for Sub-precinct A.
- 1.2 A peer review is an evaluation of work by another expert with similar competencies. It is not a reassessment but rather a tool to maintain quality standards, improve performance, and provide credibility. With this in mind, the focus of this peer review is to:
 - Confirm whether the assessment methodology used in the Landscape Report has been prepared in accordance with industry best practice.
 - b) Confirm whether the information provided is adequate to enable a clear understanding of the landscape and visual effects of the plan change.
 - Provide comment as to whether the findings of the Landscape Report with respect to landscaperelated effects are credible and justified.
 - d) Make recommendations with respect to landscape-related provisions where appropriate (should Council be minded to approve the plan change).

- 1.3 On this basis, and in the interests of brevity, my Landscape Review focusses on points of disagreement.
- 1.4 My peer review focuses on the effects of the proposed removal of (private) open space (including a walkway connection to Farm Road). I understand the Council urban design expert will be addressing more detailed aspects such as interfaces, building height, streetscape design, etc., and Council's ecology expert will be addressing such matters as riparian planting widths, etc.
- 1.5 A summary of my expert qualifications and relevant experience is attached in Appendix B.
- 1.6 I confirm that my Landscape Review comments have been prepared in accordance with the Environment Court's Code of Conduct for Expert Witnesses as specified in the Environment Court's Practice Note 2014. This Landscape Review is within my area of expertise, except where I state that I rely upon the evidence of other experts. I have not omitted to consider any material facts known to me that might alter or detract from the opinions expressed.
- 1.7 The following documents have been relied on in the preparation of my Landscape Review:
 - a) The plan change documents and Clause 23 response information.
 - b) Submissions and Further Submissions.
 - c) Evidence prepared in relation to the Wairaka Precinct for the Auckland Unitary Plan hearing.
 - d) The Stream Daylighting consent documents.
 - The Carrington Backbone Works Project documents (including plans and decision).
- 1.8 I am familiar with the site and local area and have been involved in a number of healthcare-related projects over the years in New Zealand and the UK.
- 1.9 I undertook a site visit with Ms Laird (Council planner) on 29 September, during which I walked around the site and local area, including viewing the recently constructed stream daylighting and associated landscape works in the vicinity of the site; the renovations underway; and, in the vicinity of Building 28, roading works and the various protected trees near the Pump House (under the Wairaka Precinct provisions refer Figure 3 shortly).

Clause 23 Request for Further Information

2.1 Two landscape-related matters were raised in the Clause 23 Request for Further Information (Clause 23 RFI)¹ as follows:

Insufficient certainty around replacement and location of open space

Section 5.3.4 of the Landscape & Visual Effects Assessment (LVEA) by Thomas Consultants seems to make conclusions based on the "Key Open Space (private)" being replaced and in a suitable location (including a shared walkway connection through to Te Auaunga/Oakley Creek). The report states that "The removal of this proposed open space from the location as identified on the Precinct Plan to another location somewhere else within the Wairaka Precinct could still include these desirable attributes...Provided there is still some form of shared walkway connection between the activities within the Wairaka Precinct and the Te Auaunga Oakley Creek Walkway and reserve, the compliance with the objectives and policies of the Wairaka Precinct and the benefits of having an open space, as mentioned above, could still be retained."

Prepared by Council's Reporting Planner.

This Plan Change is not proposing relocation of the Key Open Space (Private), it is proposing removal of that space from the Precinct Plan.

A full landscape assessment of the removal of the Key Open Space (Private) without reliance on replacement, which is not a feature of this plan change, is required. As this is a significant matter dealt with in this plan change, sufficient detail should be supplied to deal with this matter, in accordance with clause 22(2) of Schedule 1 of the RMA.

The removal of the Key Open Space (Private) is not mentioned in the LVEA conclusion (pp.52-53 section 6), it is therefore difficult to reconcile those conclusions with statements in the AEE (para. 11.16, p.55).

Without certainty on where (and when) the replacement open space will be provided elsewhere in the precinct, it is difficult to understand how the conclusion that "...the proposed plan change will result in a positive outcome in terms of landscape and visual effects..." has been reached.

Please provide further information on how the conclusions in sections 5.4.3 and 6 of the LVEA and para 11.21 of the AEE regarding the removal of open space have been reached.

Expert report relies on scenario not included in proposal

The LVEA states that the proposed reduction of riparian margins from 10m to 5m (through the proposed zone change) would have positive effects (p.34):

"The conclusion is that the proposed changes as a result of the plan change on the Wairaka Creek and environs including the daylighting of the stream and the reduction of the riparian yard from 10m to 5m will result in potential landscape and visual effects that are overall positive and in keeping with the objectives and policies of the AUP:OP."

But we note that the proposed plan change does not actually require the daylighting of the Wairaka Stream. An assessment of the reduction in riparian margins that does not compare an un-daylighted 10m margin to a daylighted 5m margin is required. Please also advise if the AEE's conclusions regarding the reduction of the riparian margin have relied on the LVFA.

- 2.2 A response to the Clause 23 RFI was provided by the requestor and helpfully includes 'tracked change' and 'clean' versions of the Landscape Report and AEE addressing these (and in the case of the AEE, other) matters. My peer review comments are based on these 'updated' documents.
- 2.3 The requestor has also confirmed that the 'Reference Plan' mentioned on page 46 of the Updated Landscape Report (dated 17 December 2021) is the plan on page 2 of the HUD United Reference Plan and Strategic Framework document, dated June 2020.

3 Submissions and Further Submissions

3.1 I have reviewed the Public Submissions and Further Submissions on PC75. Issues raised that are of relevance to this review are limited to concerns with respect to the loss of open space and shared path connection through the open space lot to Farm Road.

4 Landscape Assessment Methodology

4.1 I confirm that the landscape assessment methodology that has been applied in the Updated Landscape Report is consistent with landscape assessment best practice.

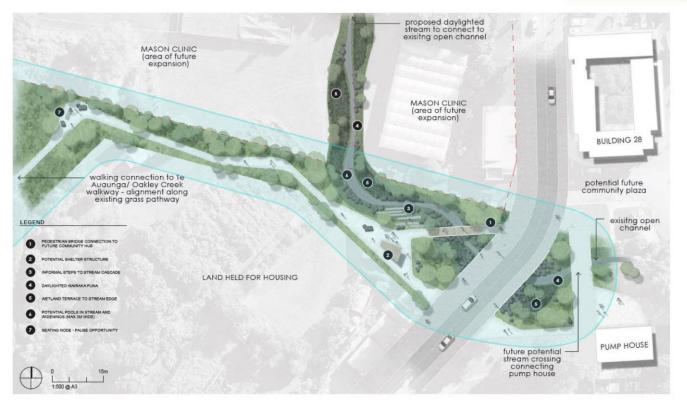
- 4.2 The Updated Landscape Report and the Updated AEE generally provides a thorough description of the existing environment (including the site, wider context, and consented environment), relevant statutory context, and proposed plan change.
- 4.3 I confirm that the information provided is adequate to enable a clear understanding of the landscape and visual effects of the plan change with the exception of one aspect. This relates to the compensation of the Open Space (Private) area as part of the proposed plan change, which I discuss in more detail shortly.

5 Evaluation of Landscape-Related Effects

- 5.1 My initial review of the PC 75 in May 2022 (prior to notification) identified a series of concerns in relation to the loss of the Open Space (Private). My initial review comments provided to Council are attached as **Appendix A**.
- 5.2 In summary it was my view at that time, that without a clear idea of the location, extent and broad 'purpose' of the open space resource that will be provided to compensate the loss of the Open Space(Private), the proposed removal of the Open Space (Private) by the Wairaka Stream would detract from the landscape character and visual amenity values contemplated by the Wairaka Precinct, with adverse effects rated as at least 'moderate-high' (more than minor) to 'high' (significant).
- 5.3 Since that time, much of the stream daylighting and associated landscape works to the south of the PC75 site have been completed. That work comprises a high-quality landscape outcome that integrates (amongst other features), a shared path connection between Te Auaunga / Oakley Creek and the main route through Wairaka Precinct and attractive seating areas refer Figure 1 below.

LANDSCAPE PLAN





BOFFA MISKELL | WAIRAKA PUNA DAYLIGHTING : LANDSCAPE CONCEPT DESIGN | LANDSCAPE PLAN

Figure 1: Consented Landscape Plan for stream daylighting and associated landscape work (which has now been implemented).

- 5.4 In my opinion, this recently completed work goes some way to mitigating the loss of Open Space (Private) proposed by PC75, as it provides a high amenity connection between Te Auaunga / Oakley Creek and the main north-south route through Wairaka Precinct (refer Figure 2 below).
- 5.5 Importantly, this attractive green connection is aligned to link with the network of Open Space (Private) extending though the centre of the Wairaka Precinct.
- 5.6 However, it does not provide an 'open area' that might be used for such things as informal play / kickaround area, community gardens etc., which I consider could have been reasonably contemplated by the Open Space (Private) on the Wairaka Precinct Plan 1. Having undertaken a site visit, a review of the Backbone Consent documents, and a review of the Wairaka Precinct Plan 2 (which identifies the Protected Trees across the precinct refer Figure 3), it would seem logical that the flat land to the east of Building 28 is well suited for open space uses due to its proximity to the open space network and central location adjacent to character buildings (Buildings 28 and 33, as described in the Backbone Consent documents, and noting that the latter is the Pump House).
- 5.7 I consider that a sizeable area of open space in this location would, in combination with the recently completed stream daylighting and landscape works, mitigate the loss of Open Space (Private) that is proposed.
- 5.8 The requestor is encouraged to seek agreement from the landowner to map an Indicative Extent of Open Space in this part of the Wairaka Precinct that the existing arrangement of character buildings, roading

- infrastructure, and building works would appear to signal as likely. This indicative mapping would form part of PC 75 and provide greater comfort that the loss of Private Open Space (Private) will be fully mitigated in time.
- 5.9 For completeness (and drawing from the discussion set out in my initial review attached as Appendix A), I consider that without a clear idea of the location, extent and broad 'purpose' of the alternate open space resource that will be provided to compensate the loss of the Open Space (Private), the proposed removal of the Open Space (Private) by the Wairaka Stream will detract from the landscape character and visual amenity values contemplated by the Wairaka Precinct, with adverse effects rated as at least 'moderatehigh' (more than minor).

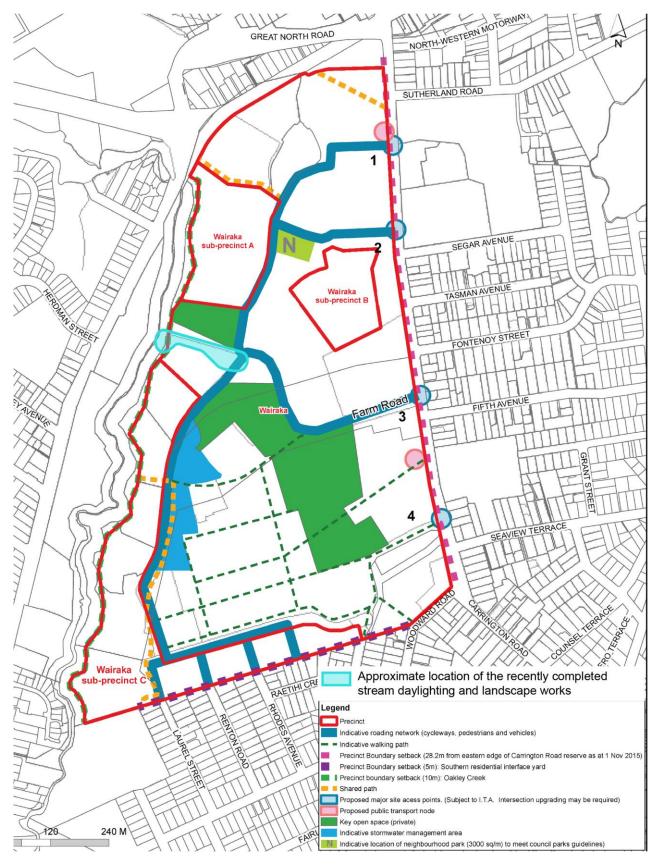


Figure 2: Wairaka Precinct Plan 1 (with BGLA approximate annotation of daylighting works shown in light blue graphic).

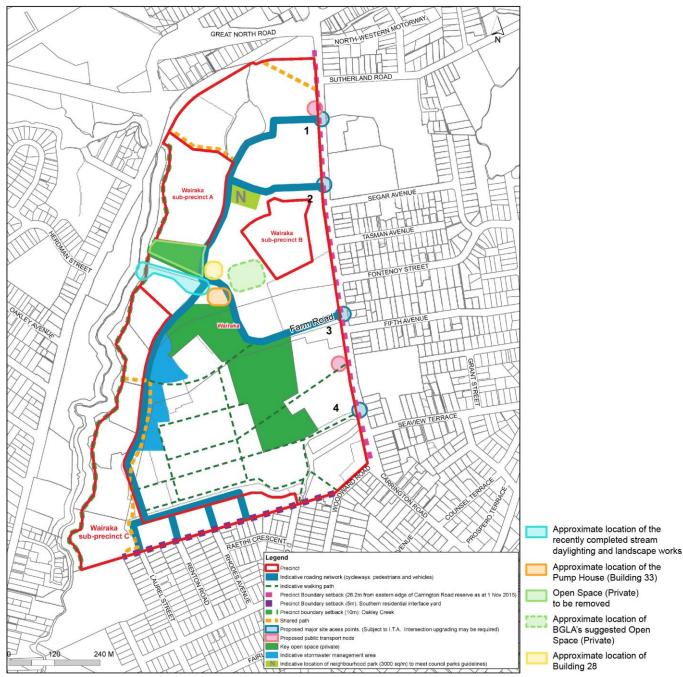


Figure 3: Wairaka Precinct Plan 2 Protected Trees with the approximate location of BGLA's suggested Open Space (Private) shown in green dashed outline graphic.

6 Conclusion

6.1 In conclusion, I consider that for the proposed removal of the Open Space (Private) to be appropriate from a landscape perspective, the requestor needs to identify the location, extent and broad 'purpose' of the alternate open space resource that will be provided to compensate the loss of the Open Space (Private).

Bridget Gilbert

Landscape Architect

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APPENDIX A:

BGLA Initial Review Comments, May 2022

1 Removal of Key Open Space (Private) by the Wairaka Stream

- 1.1 The proposed plan change anticipates that the loss of Key Open Space (Private) will be compensated by the integration of open spaces as part of the residential development throughout the balance of the Wairaka Precinct land.
- 1.2 The Updated Landscape Report concludes that:

"The removal of the 'open space (private)' and 'shared path' features will be remedied as the development of the Wairaka Precinct evolves, which is required to address the provision of such features. Not providing for these features will not significantly detract from the landscape characteristics and anticipated outcomes for the area, noting that a walkway connection at the south of the Plan Change Area has been consented, and there is sufficient area elsewhere within the precinct to achieve these outcomes and provisions which will ensure that functional and well-integrated open space is achieved.

Overall, the proposed plan change will result in a positive outcome in terms of landscape and visual effects and I therefore support this plan change application."

- 1.3 In support of this conclusion with respect to the loss of Key Open Space (Private), the Updated Landscape Report outlines a number of 'moderating' or 'mitigating' factors:
 - a) A new Mason Clinic will integrate open space for residents and day visitors across the facility (rather than in the southern part of the HFH site).
 - b) The location of the existing Key Open Space (Private) along the western side of Wairaka Precinct, bordered to the north by the Mason Clinic and the east by a road, is less than favourable with respect to providing amenity for the balance of the precinct.
 - c) A commitment from the Ministry of Housing and Urban Development (HUD) (AEE Attachment 14), to provide for an "equivalent private open space" within its land, either through a separate plan change or by way of resource consent applications.
 - d) The requirement for future development in the balance of the Wairaka Precinct to provide open spaces which are: prominent and accessible by pedestrians; and of a number and size that is in proportion to the future intensity of the precinct and surrounding area.
- 1.4 While I agree that a **new Mason Clinic is likely to integrate open space across its site** that will benefit the residents and day visitors, I understand from the AEE Attachment 6 Design and Architecture Assessment that there are specific operational and design requirements of a healthcare facility of this nature. One of those outcomes is the likelihood that the buildings will be designed to provide a secure perimeter, avoiding the need for high fencing.² For this reason, I consider that any new 'open space' within proposed Sub precinct A is likely to offer little in terms of benefit to the landscape character and visual

² AEE Attachment 6 [3.2.4].

- amenity values of the broader Wairaka Precinct. This could not be said of the existing Key Open Space (Private) arrangement in the Wairaka Precinct Plan.
- 1.5 With respect to the assertion that the (current) location of the Key Open Space (Private) is less than favourable with respect to providing amenity for the broader precinct, I have reviewed the landscape, urban design, and planning evidence prepared on behalf of Unitec for the Auckland Unitary Plan Independent Hearing. I understand that the open space strategy for the precinct (and which culminated in the Wairaka Precinct Plan) was the subject of a two-year master planning process by Boffa Miskell and Occulus, based on the following key urban design principles:
 - a) A site-responsive design which has sought to celebrate the natural and cultural assets of the Unitec site:
 - b) Creating a strong relationship between development density and access to public transport (both train and bus);
 - c) Improving the site's current degraded open space and infrastructure in tandem with new development;
 - d) The development of three distinct but linked villages / hubs;
 - e) The inclusion of a range of housing types including affordable housing; and
 - f) The creation of a much more usable and activated public realm.
- 1.6 The location of open space and development areas sought to give effect to these key principles, including:
 - a) Maintaining views from the public realm;
 - b) Creating a connected open space system;
 - c) Protecting existing significant trees;
 - d) Responding to topography and protecting existing steeper, more vulnerable land; and
 - e) Maximising amenity for new development.3
- 1.7 Ms de Lambert and Mr Earl gave evidence that it was their view, from an urban design and landscape perspective, that the Wairaka Precinct Plan provides for an appropriate quantum and quality of open space⁴. Mr Duthie's rebuttal evidence provided detail with respect to the purpose of open space areas within the Wairaka Precinct, explaining that the Key Open Space (Private) adjacent to the Wairaka Stream (approximately 1.1ha) is intended to allow for the daylighting of the stream to the south of the (existing) Mason Clinic.⁵
- 1.8 This evidence comes as no surprise to me. From a landscape perspective, best practice master planning seeks to enhance natural landscape features and optimise the unique and high-quality amenity they provide to high-density urban environments⁶. On brownfield sites, the daylighting of streams is a

AUPIHP Topic 080: Joint Statement of Rebuttal Evidence of Rachel de Lambert and Bob Earl on behalf of Unitec (Visual, Landscape and Urban Design) 26 January 2016 [2.5], [2.6].

⁴ Ibid [3.2].

MUPIHP Topic 080: Statement of Rebuttal Evidence of John Duthie on behalf of United (Planning) 26 January 2016 [2.17].

For example, stream corridors in urban environments provide a high-amenity route for walkways and cycleways; enhance the public's appreciation of the natural environment; enhance biophysical values; and provide an attractive outlook for adjacent buildings.

- reasonably commonplace design imperative, with generous open space areas configured adjacent daylighted streams.⁷
- 1.9 Further, based on my experience of similar healthcare facilities in which there is a tendency to create a relatively spacious campus-style setting where practicable, to provide for patient well-being and manage potential reverse sensitivity issues, I cannot help but think that the Key Open Space (Private) along the south side of the Mason Clinic, together with the generously proportioned green space of the Oakley Creek corridor along the western side, were intended to create at least a partial green 'buffer'. However, I acknowledge that there does not appear to be evidence in support of this observation in either the IHP or plan change material.
- 1.10 I understand that consent has been granted for the daylighting of the Wairaka Stream, which includes the restoration of the stream banks, the incorporation of steps to the stream edge, and a walkway/cycleway connection to Te Auaunga/Oakley Creek walkway on the HUD land. I also note that the portion of daylighted stream within the WDHB land will not be publicly accessible.
- 1.11 I am advised by Ms Laird that it is reasonable to expect that this consent will be implemented on the HUD Land (delivering the walkway link and daylighting of the southern portion of the stream course) and will form part of the receiving environment; however, such an outcome is less certain on the Mason Clinic land, as the requestor has indicated that the timing of stream daylighting is dependent on funding. I note that the daylighting of the stream is not shown on the proposed Precinct Plan provided by the requestor; and AEE Attachment 6 advises that the alignment of the stream running diagonally across the southern part of the plan change land as creating some inefficiencies in terms of land use.⁸
- 1.12 In my opinion, the loss of Key Open Space (Private) in this part of the Wairaka Precinct has the potential to undermine a fundamental open space objective for the broader precinct; i.e., the comprehensive daylighting of the Wairaka Stream and integration of that landscape feature into a generously configured and publicly accessible open space area which links with Te Auaunga (Oakley Creek). I consider that such an outcome is undesirable from a landscape perspective.
- 1.13 For these reasons, I disagree with the Updated Landscape Report that the current location of the Key Open Space (Private) is less than favourable with respect to providing amenity for the broader precinct.
- 1.14 However, even if the entire stream is daylighted in due course, the removal of the Key Open Space (Private) will detract from the quantum and, potentially, the quality of open spaces at Wairaka (noting that the portion of the daylighted stream on the WDHB land will not be publicly accessible).
- 1.15 While I appreciate that alternate open space areas <u>could</u> be provided in the balance of the precinct area that are of a similar scale and/or amenity to that anticipated by the Key Open Space (Private) adjacent to the Wairaka Stream, the plan change provisions provide no certainty in this regard.
- 1.16 With respect to the commitment from HUD (AEE Attachment 14), this advises that replacement open space will be provided separate to this plan change process. As this sits outside the plan change, I have not looked at it as compensation for the loss of the Key Open Space (Private).
- 1.17 Further, the requirement for future development in the precinct to provide open spaces which are prominent and accessible by pedestrians, and of a number and size that is in proportion to the future intensity of the precinct and surrounding area, does not, in my view, provide sufficient certainty that the loss of the Key Open Space (Private) resource by the Wairaka Stream will be adequately

Christchurch's Avon River precinct is an example of comprehensive stream restoration realised at a grand scale.

⁸ AEE Attachment 6 [2.2.2 (d)].

- compensated in the balance of the Wairaka Precinct. I consider that the 'private' nature of this open space resource may exacerbate my concerns in this regard.
- 1.18 In my opinion, the importance of high-quality open space in high-density urban developments such as that provided for at Wairaka means that the proposed plan change should clearly articulate the location, extent, and broad 'purpose' of the open space resource that will be provided to compensate the loss of Key Open Space (Private) by the Wairaka Stream.
- 1.19 Without this information, I consider that the proposed removal of the Key Open Space (Private) by the Wairaka Stream will detract from the landscape character and visual amenity values contemplated by the Wairaka Precinct, with adverse effects rated as at least 'moderate-high' (more than minor) to 'high' (significant)⁹.
- 1.20 For these reasons, I disagree with the Updated Landscape Report that the proposed plan change will result in a positive outcome in terms of landscape and visual effects.

2 Shared Path

- 2.1 For completeness, with respect to the removal of the Shared Path along the north side of the existing Mason Clinic, I do not consider that this suggests the same difficulties with respect to landscape effects, to that posed by the removal of the Key Open Space (Private) by the Wairaka Stream. My reasons for reaching this conclusion are as follows:
 - a) The Wairaka Precinct provisions clearly signal the need for a network of pedestrian and cycleway linkages that integrate with the area network.
 - b) Shared Path routes take up a considerably smaller area of land compared to the approximately 1.1ha of Key Open Space (Private) land by the Wairaka Stream, making it far more likely that future intensive residential development throughout the balance of the Wairaka Precinct will accommodate a shared path.
 - c) The strong commitment by Council and AT to delivering a network of shared paths in consenting projects. Such a commitment is not currently evident in relation to the provision of open space due to Council budget constraints. This 'factor' was effectively acknowledged in the development of the Wairaka Precinct provisions such that, of the 9.4ha (or 17.7%) of the Unitec site proposed as open space, only 0.3ha of the land is identified as reserve land (intended to be vested) with 9.1ha identified as either 'private' open space or stormwater-related open space.

Using a 7-point effects rating scale: very low/low/moderate-low/moderate/moderate-high/high/very high. Applying RMA terminology, a rating of minor generally corresponds to a moderate-low rating. A significant rating applies to high and very high.

Appendix B:

Bridget Gilbert: Qualifications and Experience

Bridget holds the qualifications of Bachelor of Horticulture from Massey University and a postgraduate Diploma in Landscape Architecture from Lincoln College, is an associate of the Landscape Institute (UK) and a registered member of the New Zealand Institute of Landscape Architects.

Bridget has practised as a Landscape Architect for over twenty-five years in both New Zealand and the UK. Upon her return to New Zealand, Bridget worked with Boffa Miskell Ltd in their Auckland office for seven years. She has been operating her own practice for the last seventeen years, also in Auckland.

During the course of her career, Bridget has been involved in a wide range of work in expert landscape evaluation, assessment, and advice throughout New Zealand, including:

- landscape assessment in relation to Regional and District Plan policy;
- preparation of structure plans for rural, coastal, and urban developments;
- conceptual design and landscape assessment of infrastructure, rural, coastal, and urban development; and
- detailed design and implementation supervision of infrastructure, rural, coastal, and urban projects.

Of particular relevance to Bridget's landscape peer review role in the Mason Clinic plan change, Bridget has been involved in a number of healthcare projects in New Zealand and the UK, including most recently, the PPC 21 Brightside Hospital appeal. Bridget has also been involved in plan changes and appeals in relation to the rezoning of open space land. This includes the *Golf 2012* appeal in relation to open space (private) golf course land at Matarangi.

Bridget is currently a panel member of the Auckland Urban Design Panel (with a Chair endorsement).

Bridget is also an Independent Hearing Commissioner for Auckland Council.

In addition, Bridget was appointed as one of three peer reviewers of the *Te Tangi a te Manu Aotearoa* Landscape Assessment Guidelines under the direction of the New Zealand Institute of Landscape Architects. This work has given Bridget an up-to-date insight into landscape assessment best practice.

Parks Memo (technical specialist report to contribute towards Council's section 42A hearing report)

16 November 2022

To: Elisabeth Laird, Policy Planner, Plans and Places, Auckland Council

From: Roja Tafaroji, Senior Parks Planner, Auckland Council

Subject: Private Plan Change - PPC75 for Mason Clinic - Parks Planning Assessment

1.0 Introduction

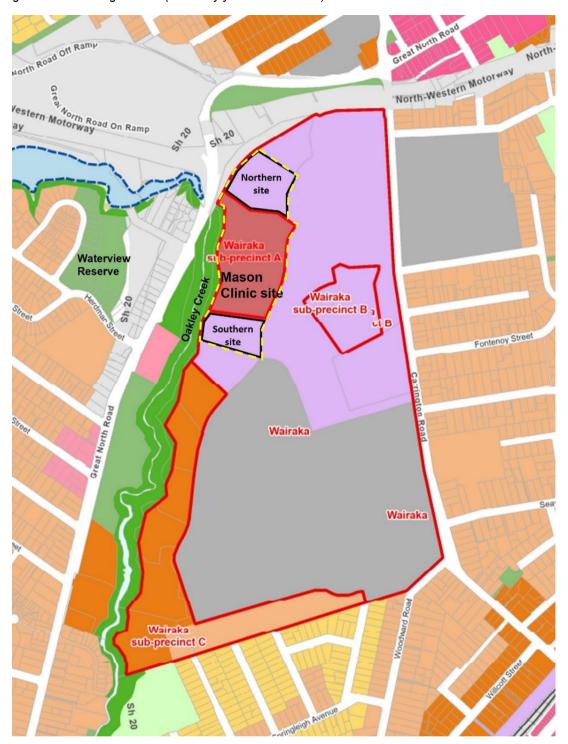
- 1.1 I have undertaken a review of the private plan change, on behalf of Auckland Council in relation to Parks and Community Facilities (PCF) effects.
- 1.2 I hold a PhD degree in Planning from The University of Auckland, a Master of Urban Design from Iran University of Science and Technology, and a Bachelor of Architecture from Guilan University. I have more than 15 years of experience as an architect, urban designer, researcher, service and asset planning analyst, urban planner and parks planner in both Iran and Aotearoa New Zealand.
- 1.3 In writing this memo, I have reviewed the following documents:
 - Assessment of Environmental Effects & Statutory Assessment, prepared by Bentley & Co, dated October 2021
 - Mason Clinic- Landscape & Visual Effect Assessment, revision 4.0 prepared by Thomas Consultants, dated December 2021
 - Design and Architectural Assessment, prepared by Klein Limited, dated April 2021
 - Ecological Impact Assessment, prepared by Morphum Environmental Limited, dated April 2021
 - Consultation Letter to Mana Whenua, prepared by Bentley & Co, dated March 2021
 - Attachment 2 Proposed Wairaka Precinct Provisions and Maps
 - Attachment 3 Section 32 Assessment
 - Attachment 10 Local Board Presentations and Notes
- 1.4 I have then assessed the Applicants' proposed open space amendments and provisions within the precinct plan and provide advice on whether these provisions are consistent with the regulatory framework for Parks and Community Facilities assessment, as set out within the below regulatory mechanisms:
 - The Resource Management Act 1991, which at s229 and 230 requires the provision of esplanade reserves for the purposes of protecting conservation values and enabling public access and recreational use to or along any sea, river, or lake.
 - The National Policy Statement Urban Development (NPSUD) which at Policy 2.2, requires urban environments have good accessibility for all people between housing, jobs, community services, natural spaces, and open spaces, including by way of public or active transport.
 - The Auckland Regional Policy Statement, which at B2.7.1 and B2.7.2 requires that recreational needs of people and communities are met through the provision of a range of quality, connected, accessible open spaces and recreation facilities.
 - The Auckland Unitary Plan framework, in particular:

- Open Space Zone Objective H7.2.(1) Recreational needs are met through the provision of a range of quality open space areas that provide for both passive and active activities and (2) The adverse effects of use and development of open space areas on residents, communities and the environment are avoided, remedied or mitigated.
- Subdivision Urban Objective E38.2.3 Land is vested to provide for esplanades reserves, roads, stormwater, infrastructure and other purposes.
- Wairaka Precinct Plan Objective I334.2(7), and policies I334.2(4).i, j and k, Open Space Policies I334.2(15), (16), and Pedestrian and cycle access, street quality and safety Policies 1334.2(17), (18), (19)
- In addition to this, the Albert Eden Greenways Plan sets out the greenway network for the area.

2.0 Background and context

- 2.1 As outlined in the applicant's AEE report, in 2018, WDHB undertook a business case process to explore opportunities and options to provide further services and facilities to what has been provided by the existing Mason Clinic at Unitec grounds. Following this business case process, WDHB purchased the northern site (3A Carrington Road) and the southern site (119A Carrington Road) to enable the potential expansion of the facility.
- 2.2 WDHB has involved MHUD as the adjacent landowner since purchasing of the northern site and the southern site, which has contributed to developing the current Private Plan Change (PPC75).
- 2.3 The Mason Clinic site (81A Carrington Road) currently owned by WDHB is zoned as Special Purpose- Healthcare Facility and Hospital while being within Wairaka precinct and noted as Wairaka sub-precinct A. The site is also subject to an SEA overlay.
- 2.4 Both the northern and southern sites which were purchased by WDHB are zoned as Business-Mixed Use, also both sites are within Wairaka Precinct. Under Wairaka Precinct Plan, there is an indicative shared path on the northern site, and the southern site is shown as a key open space (private).
- 2.5 The Mason Clinic site and the southern site are both under flooding and overland flow path restrictions. Also, overland flow path streams are indicated on the northern site.
- 2.6 Oakley Creek and Waterview Reserve are amongst the adjacent green open spaces to the west of the combined sites.

Figure 1. Plan Change 75 site (shown by yellow dashed line) in relation to the Wairaka Precinct and AUP zoning



- 2.7 Ash Richards, the previous Senior Parks Planner in Parks Planning team, was requested by Auckland Council in October 2021 to review the application as part of the Private Plan Change 75 (PPC75) request to determine whether the information provided was sufficiently detailed and accurate to understand the provision of open space and amenity effects of the proposal, and to outline whether any further information was required in accordance with the expectations of Schedule 1, Clause 23 of the RMA. In December 2021, Ash Richards provided a further information request pursuant to Clause 25 of the RMA. I adopted the initial assessment and information provided by Ms. Richard to inform my assessment in this report.
- 2.8 In particular, Ms. Richards requested further assessment in regard with the removal of the shared path and its anticipated outcomes outlined within both the Environmental Effect Assessment (AEE) report and Landscape and Visual Effect Assessment (LVEA) report.

Subsequently, the applicant provided updated AEE and LVEA reports along with other supporting documents presenting assessment and outlining the rational behind removal of the above mentioned private open space and shared path with recommendations and support from MHUD to accommodate those spaces within their land in the future. while the assessment provided was satisfactory, the recommendations for replacement of those open spaces did not provide clear indication of future locations.

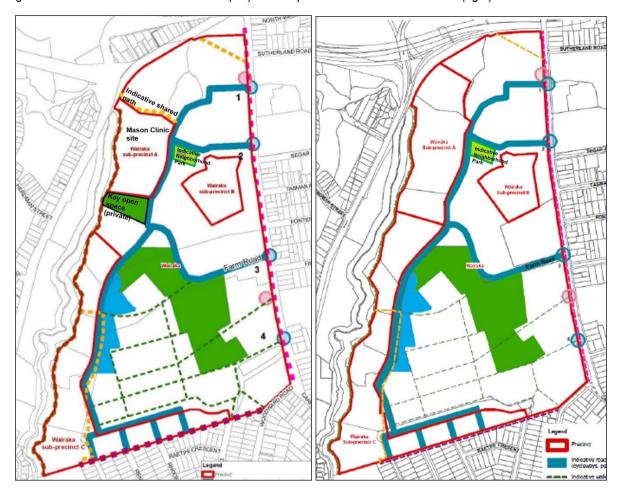
3.0 Key Parks and Community Facilities Issues

- 3.1 This assessment covers the proposed removal of the private open space and the indicative shared path connection within the combined sites as well as the boundary treatment adjoining the open space resulted by the above proposed plan change on approximately 6.8 hectares of land (combined sites) on 3A, 81A and 119A Carrington Road, Mount Albert by Waitematā District Health Board (WDHB) to:
 - apply a consistent Special Purpose- Healthcare Facility and Hospital zone to the combined sites:
 - apply the Sub-precinct A of the Wairaka Precinct to the combined sites;
 - remove Key open space (private) and shared path components from the Wairaka Precinct Plan 1 that apply to the sites;
 - introduce an amended version of Wairaka Precinct plan within the Auckland Unitary Plan Operative in Part (AUP-OP).

Open space provision and pedestrian/cycling connectivity within Wairaka Precinct

3.2 Private Plan Change 75 proposes for removal of key open space (private) on the southern site as well as the removal of an indicative shared path on the northern site as identified in the current Wairaka Precinct Plan 1 (see Figure 2, image on the left).

Figure 2. Current Wairaka Precinct Plan 1(left) and Proposed Wairaka Precinct Plan 1(right)



- 3.3 The Wairaka Precinct plan outlines particular attributes to contribute to the amenity of the precinct and the surrounding area which should be retained throughout the development of the precinct. These include the following:
 - The significant ecological area of Oakley Creek;
 - An open space network linking areas within the Wairaka Precinct and providing amenity to neighbouring housing and business areas;
 - A network of pedestrian and cycleway linkages that integrate with the area network;
 - Retention of the open space storm water management area which services Wairaka and adjacent areas, and the amenity of the associated wetland;
 - The Wairaka stream and the landscape amenity this affords, and
 - The Historic Heritage overlay of the former Oakley Hospital, and identified trees on site.

Open space boundary treatment_ Riparian yard setback

- 3.4 According to the boundary setback requirements of Wairaka Precinct Plan (1334.6.6(2)), buildings on land adjoining Open Space Conversation zoned land outside the precinct must be set back a minimum width of 10m from the external precinct boundary. Also, AUP Yards requirement for Business-Mixed Use zone (H13.6.5.1) requires 10m riparian setback from the edge of all permanent and intermittent streams.
- 3.5 The rezoning component of this private plan change, from Business-Mixed Use to Special Purpose- Healthcare Facility and Hospital zone (SPHFHZ), involves reduction of the required riparian yard setback from 10m to 5m.

3.6 The SPHFHZ and Business-Mixed Use zones both apply a height in relation to boundary standard relative to the interface with an Open Space – Conservation zone, which applies at the western boundary of the plan change area.

4.0 Applicant's assessment

Open space provision and pedestrian/cycling connectivity within Wairaka Precinct

- 4.1 The AEE report prepared by Bentley and Co comments, at page 25, 6.10, the applicant notes that "with reference to the functional and operational requirements of the Mason Clinic activity (described in section 5.2), the requirement for open space (in the form of common, secure outdoor courtyards and recreational/amenity areas) will be integrated with the future layout of the Mason Clinic. The nature of the Mason Clinic is such that private open spaces are required to be securely managed, rather than being open to other users".
- 4.2 In regards with removal of the shared path within the northern site and its relocation, the applicant indicates that an equivalent outcome could be achieved by accommodating the path further to the north as it "would provide a more logical connection to the bicycle path a level location".
- 4.3 The applicant explained the removal of both the open space and the shared path to be necessary for enabling the development of the site as part of the Mason Clinic.
- 4.4 In a letter from MHUD in regard with the open space provisions and shared path in Private Plan Change 75, dated May 2021, MHUD reminded that as the owner of the adjacent land (Housing Development Land) within the precinct, they support removal of these open spaces within the current plan change area and their accommodation within Housing Development Land either through another plan change or by way of resource consent applications as part of the development of the Housing Development Land.

Open space boundary treatment_ Riparian yard setback

- 4.5 In regards with the joint boundary on the western side of the combined sites with Oakley Creek which is in as Open space- Conservation zone, the applicant has provided the followings:
- 4.6 The provisions relating to the operative setbacks on the western boundary of this precinct remain the same, with a 10-metre building setback to the Open Space Conservation zoned land and planting requirements as required under the precinct plan ((1334.3.(27)(b) and 1334.6.6.(2)).
- 4.7 In regards with the reduction of the riparian setback due to the rezoning from Business-Mixed Use to SPHFHZ, the applicant's ecological assessment suggests that the 5-metre riparian yard will continue to achieve a positive landscaping interface with Oakley Creek when it is daylighted.
- 4.8 The SPHFHZ and Business- Mixed Use zones both apply a height in relation to boundary standard relative to the interface with an Open Space Conservation zone, which applies at the western boundary of the plan change area. This will be retained by this plan change.
- 4.9 This report does not provide further assessment on this matter as it is for Plans and Places department to obtain advice from certain experts and to assess accordingly.

5.0 Assessment of open space removal effects and management methods

5.1 For the purpose of this assessment, I consider the receiving environment of the plan change area to be the area within Wairaka precinct as well as the existing adjacent open spaces (Te Auaunga

and Oakley reserve) considering their associated AUP zoning, overlays and development restrictions as described in section 2.

AUP and Precinct Plan requirements

- 5.2 In Wairaka Precinct Plan, objective I334.2(7), and policies I334.2(4)i, j and k, and I334.2(15), (16), (17), (18), (19) outline desired outcomes, approaches and requirements to ensure the appropriateness of the open space and pedestrian connections within the precinct as well as with the wider environment.
- 5.3 In AUP, policies H25.3.(3) and (6) of Special Purpose Healthcare Facility and Hospital Zone, also, requires the new developments to ensure the maintenance and enhancement of amenity values of the adjacent sites being open space in this case.
- 5.4 The key open space indicated on Wairaka Precinct Plan was intended to be private. Parks Planning have concerns with privately owned reserves due to the potential confusion over their ownership and maintenance. For the purpose of clarity around the use and management of the open space, Parks Planning supports the retention of the private open space for Mason Clinic and its associated activities. However, it does not contribute to the open space provision within the precinct and the wider area as required by the precinct plan for public use by the community.
- 5.5 While being outside the current plan change area, an indicative neighbourhood park will still be located within the Wairaka Precinct plan (see Figure 2). Zoning changes and precinct provision changes continue to support the provision of this park.
- 5.6 Maylene Barret, Principal Parks Provision Specialist, reviewed the proposal and raised no concern from the perspective of open space provision as the required open space to be removed was intended to be private in the precinct plan. Ms. Barret also noted that "the public open space needs for the wider area will be provided within the Unitec Carrington land".
- 5.7 The indicative shared path on Wairaka Precinct Plan was to contribute to an integrated development of networks within the precinct as well as with the open spaces and street networks within the wider area.
- 5.8 The removal of the shared path proposed by PPC75, however, is based on enabling the development of expanded healthcare facility and services for Mason Clinic on the combined sites.
- 5.9 Considering the future potential intensification and development within the precinct and the wider area, an integrated approach towards the development could only be achieved by promoting comprehensive planning for access to open spaces such as Oakley Creek reserve; or pedestrian and cycle connections to Point Chevalier, Waterview and Mt Albert.
- 5.10 Among the proposed amendments to Wairaka Precinct Plan, the applicant notes below:
 - "The open space network for the precinct is provided for by way of a combination of identified areas, and indicative areas, including walking paths and shared paths (shown on Precinct plan 1) and future areas and walkways/shared paths which are to be identified and developed as a component of the future urban intensification envisaged,"
- 5.11 The above statement proposed on the precinct plan is to ensure the implementation of the plan through "provision of open space and a roading network, including access from the east to the important Oakley Creek public open space, walking and cycling connections linking east to west to Waterview and areas further west to Point Chevalier/Mount Albert, north to south to Mount Albert to Point Chevalier, and linkages to the western regional cycle network".

- 5.12 The proposed removal of the indicative shared path, however, does not align with the above approach as the potential pedestrian and cycling connection will be removed from this plan change area as a result of this proposal.
- 5.13 Although not being included as part of the original application for PPC75, MHUD have an agreement with WDHB to provide for "an equivalent open space within its land development" within Wairaka Precinct area either through a separate plan change or by way of resource consent applications to enable the development of the Housing Development Land.
- 5.14 The replacement locations for either the open space or the shared path, however, have not been identified in this PC or confirmation provided to secure these.

6.0 assessment of the applicant's amendments on Wairaka Precinct Plan

- 6.1 The applicant provided amendments to the current Wairaka Precinct Plan to modify it for the expansion of the Mason Clinic healthcare facilities and activities on the site. From an open space provision point of view, the amendments provided seem to be acceptable and I only have the following matter to raise:
- 6.2 As part of the additions to the precinct plan, under the section for **Precinct Description (1334.1)**, there is a reference to "open space network" to be provided "by way of combination of identified areas, and indicative areas, including walking paths and shared paths" and to "be identified and developed as a component of the future urban intensification envisaged". While the reference clearly highlights the necessity of an "open space network" within the precinct, the amendments to the plan fail to demonstrate the (indicative) location of the above-mentioned open spaces (shared paths and walkways) apart from the ones which are already provided by the current precinct plan. This indication is also not reinforced by the policies and assessment criteria through the amended precinct plan.
- 6.3 Considering the future intensification within the precinct area as well as in the wider environment, I suggest that an enforcement mechanism is required to be provided and noted in the plan to ensure an integrated approach providing the open space network required by the precinct plan.

7.0 Submissions

- 7.1 A total of 3 submissions and 1 further submission were received in response to the proposed plan change. Two (2) of the submissions are in support (in whole or in part) and 2 (of a same private submitter) are in opposition. Those in support are acknowledging the need for the expansion of the Mason Clinic through adjustments to the current sub precinct boundaries and changes to the Wairaka precinct provisions and include submissions by MHUD and Auckland Transport. The loss of an active mode connection (pedestrian and cycling shared path) has primarily been the key reason for opposition by the private submitter as well as Auckland Transport.
- 7.2 The Change proposes to delete the open space and shared path components from the Wairaka Precinct Plan 1 that apply to the sites, which are intended to provide important connections when the Wairaka Precinct is comprehensively developed for residential purposes. There is no plan in place for replacing the connections and open space and they ought to remain in place until replacements are secured.
- 7.3 All the above submissions refer to open space provision and amenity effects. Submitter 3, with 2 submissions, specifically requested that the loss of open space and shared path should not be considered as there is no plan in place for replacing these connections and open space and they ought to remain in place until replacements are secured. I do agree, there is a collaboration of

ownership between WDHB and MHUD. Both owners have already agreed to meet the requirements of the precinct by providing replacements for both the open space and the shared connection and this should be considered. However, an enforcement mechanism is required to ensure this agreement will secure the implementation.

8.0 Conclusions and recommendations

- 8.1 I conclude that for the PPC75 application it would be expected that a precinct plan be prepared to secure the provision of future open spaces as well as pedestrian and cycling connection within the precinct and within the wider environment where land is vesting in council as the future asset owner that forms part of open spaces. This will enable Council to secure adequate parkland for new communities in the future, enabling open space connectivity, enable integration of a variety of open spaces and enable access to amenities. In addition to the above, this report must read together with Urban Design and Landscape Effects which is not for Parks Planning to comment on.
- 8.2 While the removal of the private open space does not affect the open space network within the wider area, the PPC75 has not demonstrated how it will achieve open space integration and micro-mobility that is safe and maintainable as anticipated for by the precinct plan. It is recommended that the precinct plan be amended to demonstrate the replacement locations for the removed open space and the shared path within the precinct area. It has been already agreed by MHUD, as the owner of the Housing Development Land, to accommodate these open spaces within their land as part of their future housing developments. An enforcement mechanism is required to put in place the implementation of this replacement.

9.0 Conclusion

9.1 Overall, in my opinion, I only support the proposed PPC75 subject to the adequate provision of open space and connected open space network through accommodation of an open space and shared path within the precinct. This is to ensure that PPC75 aligns with policies of the precinct plan for pedestrian and cycling access (I334.3.(17), (18) and (19)). The indication of the future location of these open spaces needs to be demonstrated on an amended version of the precinct plan. Also, an enforcement mechanism is required to ensure the replacement of the open spaces will be implemented. The PPC75 also gives effect to the integration of open spaces via riparian margins that can be considered safe.

Prepared by:

Roja Tafaroji

Senior Parks Planner, Parks & Community Facilities



Ref: 21441

Memo (technical specialist report to contribute towards Council's section 42A hearing report)

To: Elisabeth Laird, Planner – Central South, Plans and Places, Auckland

Council

From: Andrew Temperley, Traffic Planning Consultants

Date: 15 November 2022

Subject: Proposed Plan Change 75, Mason Clinic, Carrington Road, Mount Albert

- Transportation Assessment

1.0 Introduction

- 1.1 We have undertaken a review of the Private Plan Change (PPC) at the above location, on behalf of Auckland Council in relation to traffic and transportation effects.
- 1.2 In writing this memo, I have reviewed submissions from the following parties:
 - Ministry of Housing & Urban Development (HUD)
 - Auckland Transport (AT)
 - Geoffrey John Beresford and Joanna Louise Beresford
 - Geoffrey John Beresford and Joanna Louise Beresford (further submission)
- 1.3 By way of summary of the detail contained within this report, the first two of the above respondents support the PPC with requested amendments, while the latter respondent opposed the PPC in their first submission but supported submitter comments made by the other two submitters in their further submission.
- 1.4 With regards to transportation related matters raised in the four submissions, AT's submission is of the most interest, as the only submission which includes specific discussion in relation to transportation issues. The remaining three submissions do not include specific comments related to transportation but do refer to urban intensification, which in a broader context would impact upon transportation effects.
- 1.5 Overall, we consider that, the PPC is acceptable and that the transportation related effects of the development which it enables can be reasonably accommodated on the adjoining Wairaka Precinct and public road networks, subject to the following provisions:
 - Assessment of the impact of cumulative trip generation on Carrington Road resulting from wider development within and adjoining the Wairaka Precinct and confirmation of trigger

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points for identified for transport improvements within the Wairaka Precinct and to Carrington Road.

- The provision of acceptable access arrangements with the adjoining north-south road through the Precinct, for which improvement works have recently been consented and are currently underway.
- 1.6 We additionally support AT comments to ensure that provisions are made for active mode connections identified in the Wairaka Precinct Plan to be retained and future proofed for future delivery.

2.0 Key Transportation Issues

- 2.1 The applicant proposes the PPC to enable the intensification of the existing Mason Clinic, located at 3A, 81A and 119A Carrington Road in Mount Albert, through the rezoning of land to the north and south of the existing Mason Clinic Activity from Business Mixed Use Zone to Special Purpose Healthcare Facility and Hospital zone.
- 2.2 The Mason Clinic is located within the Wairaka Precinct, within which the United Institute of Technology forms the dominant land use activity. In addition, the Ministry of Housing and Development (MHUD) has plans for future residential development of 2,500 dwellings on adjoining land to the south of the PPC area. This future residential development would be expected to have a significantly higher trip generation potential than that of the PPC area, with similar trip distribution patterns on the adjoining transport network.
- 2.3 The Wairaka Precinct is bordered by Carrington Road to the east, the SH16 North-western Motorway to the north and Oakley Creek to the west. The Precinct is served by its own network of privately operated internal roads, which due to the topography of the site, are subject to sections of tight horizontal and vertical alignments. In addition, the provision of footways and other facilities for active modes of travel is inconsistent throughout the site's internal network.
- 2.4 As noted earlier, improvements to the Wairaka Precinct's internal transport network are already consented, which includes an upgrade to the north-south spine road fronting the Mason Clinic.
- 2.5 Based on the geographical context and constraints of the precinct, the Mason Clinic is substantially reliant on Carrington Road for transportation connections to the wider public road, public transport and walking and cycling networks.
- 2.6 Carrington Road provides access to the Wairaka Precinct via four intersections, of which three are currently priority controlled and the fourth is signal controlled. Traffic generated by the activities enabled by the Plan Change would access Carrington Road primarily via the two northernmost priority intersections to the Precinct (identified as Gate 1 and Gate 2).



- 2.7 Carrington Road is classed as an arterial road in the Auckland Unitary Plan Operative in Part (AUP-OIP) and thus has a prominent function to facilitate through traffic movements. In its current form it provides a single traffic lane in either direction and caters for daily traffic volumes of 14,000 to 16,000 vehicles. Carrington Road is also the location of the closest bus stops to the PPC area and it provides access to Mount Albert train station.
- 2.8 AT currently has plans to upgrade Carrington Road in the vicinity of the Wairaka Precinct, during the 2018 2028 period of the Regional Land Transport Programme, with provisions for bus priority and improved pedestrian and cycling facilities. The upgrade would also include signalisation of the priority intersection at Gate 2 of the Wairaka Precinct.
- 2.9 As the intersection of Carrington Road / Gate 2 forms the main point of impact for trips generated by the Mason Clinic and MHUD housing development, the timing of its signalisation would be key to mitigating future cumulative transport effects. Other improvements along the Carrington Road corridor would also play an important role in catering for future cumulative transport effects of the Mason Clinic and MHUD housing.
- 2.10Given the high-level nature of the development proposal associated with the PPC, it does not include detailed parking and access layouts within the site. Assessment of these arrangements against the requirements of the Auckland Unitary Plan Transport Chapter (E27) would thus be expected to take place at a later stage in the development of the proposal.

3.0 Applicant's Assessment

- 3.1 The scope of transportation assessment to support the PPC is provided primarily by an Integrated Transport Assessment (ITA) for the Wairaka Precinct, prepared by Stantec for the Ministry of Housing and Urban Development (HUD) and dated June 2020. The ITA is required to fulfil the Auckland Unitary Plan rules, prior to consents being obtained for further development within the precinct, which will be subject to their own separate Transportation Assessments.
- 3.2 The scope of the ITA covers existing transport environment and context, road safety, planning policy context, proposed development and staging, future car parking, future transport environment and upgrades, assessment and traffic modelling of adjoining road network and trip generation and distribution.
- 3.3 The ITA makes the following conclusions:
 - The Proposed development of the Precinct will comply with the Precinct objectives, policies and rules, as set out in the Unitary Plan and will promote best practice in integrating transport and land use in a suburban setting, enabling more residential development with reduced travel demands and shorter trip distances.



- The Proposed development of the Precinct will encourage sustainable modes of travel, however the ITA conclusions acknowledge that additional congestion will still be expected on the surrounding transport network, resulting from additional private vehicle travel.
- The traffic modelling confirms that the proposed upgrades will significantly reduce external impacts by improving safety and convenience for active modes and improving public transport reliability and journey times.
- The proposed Carrington Road upgrade has been identified as a key external project requiring cooperation between landowners, developers and AT to ensure delivery of improvements to support future development
- To enable longer-term development in the Precinct, it is considered likely that further strategic change would be required, which could include public transport improvements along State Highway 16 and arterial roads such as Great North Road and New North Road, as well as parking strategies.
- 3.4 While the scope of the applicant's methodology and analyses within the ITA is reasonable, following an initial review of the ITA, TPC requested further information in relation to a number of matters, which are discussed in the next section. These included elaboration on the potential future transport impacts of the PPC and deliverability and phasing of transport improvement and upgrade works which are dependent on other parties.

4.0 Assessment of Transportation effects and management methods

- 4.1 Following review of the applicant's ITA, TPC requested further information in relation to a number of transportation related matters, which are summarised below along with the applicant's response:
 - Further Assessment around potential long-term transport outcomes resulting from Rezoning, as a result of other potential land-use activities which would be permitted under the Special Purpose – Healthcare Facility and Hospital zone

Further information was accordingly provided by the applicant considering alternative landuse scenarios. This included acknowledgement that the PPC seeks to increase permitted height limits within the central Mason Clinic Site, thus enabling a more intense land use within the site.

Overall, TPC accept that the proposed land use scenario as assessed by the applicant's ITA is representative of what could be expected to occur in practice, given the existing activity and context.



 Insufficient Information around staging and phasing of transport improvements, including north-south precinct road past Mason Clinic, Upgrade of Gate 2 Road, signalisation of Gate 2 Road / Carrington Road and the Carrington Road Upgrade by AT.

While the ITA's analysis proposes that the transport effects of the development of the Mason Clinic can be accommodated on the adjoining transport networks with no internal or external road network upgrades, this assessment does not take account of cumulative effects from wider development within and adjoining the wider precinct area. There is limited detail available in relation to the timing of future development and supporting transport improvements, with the ITA assuming (in agreement with AT) a 20% reduction in vehicular traffic along Carrington Road following the proposed upgrade works, as a result of modal shift.

TPC hence support the assessment of cumulative transport effects as part of a future resource consent application within the PPC area.

The applicant's Clause 23 Response confirms that upgrades to internal roads are the subject of a separate resource consent application [lodged by the Marutūāhu Rōpū and the Waiohua-Tāmaki Rōpū], the timing of which will not be affected by the PPC.

Separate correspondence with AT confirmed that some trigger points had previously been agreed for transport improvements as a result of development of MHUD land, based around numbers of new households triggering particular improvements, as discussed below.

 Confirmation of new strategic access arrangements into the Mason Clinic Site within the Wairaka Precinct

The applicant's Caluse 23 Response confirms that there are a number of factors influencing the staged redevelopment of the Mason Clinic site, which make it difficult to determine strategic access arrangements at this stage, including the timing of key elements of roading improvements, funding and the delivery of key stages of development.

• Lack of discussion around options to mitigate against poor Level of Service at Carrington Road / Gate 2 intersection

Correspondence with AT confirmed a previously agreed trigger of the development of 600 households on MHUD land as a precursor to the signalisation of Carrington Road / Gate 2. For comparison, the traffic generation potential of the Mason Clinic based on anticipated growth potential was considered to be the equivalent of less than 100 residential households.



4.2 Following the provision of further information above by the applicant and AT, TPC considered that sufficient information is now available in relation to the trip generation potential and consequent transport effects associated with the PPC.

5.0 Submissions

5.1 Key matters raised in AT's submission are summarised as follows:

Submitter	Position	Transportation related	TPC Comments	
Auckland Transport (AT)	Support in part	AT supports the purpose of the Plan Change, but seeks a number of transport related amendments to the proposed provisions.		
	Oppose	Request for amendment to assess cumulative transport effects on Carrington Road, to determine whether additional mitigation is required, as opposed to trigger based on a certain level of development	As noted in our Clause 25 Response, TPC support provisions for assessment of the impact of cumulative trip generation on Carrington Road resulting from wider development within and adjoining the Wairaka Precinct area, with respect to key trigger points for upgrades to Carrington Road.	
	Oppose	Request for amendment to require upgrades within the precinct road network to include safe walking and cycling facilities and provision for separated cycle facilities prior to, or in conjunction with development. Footpaths along Internal precinct roads are in places narrow and inconsistent, and do not include provision for separated cycling facilities. TPC support requirement for up internal road upgrade place including was cycling provisions. We that upgrade works to Wairaka Precinct Requirement for up internal road upgrade place including was cycling provisions. We that upgrade works to Wairaka Precinct Requirement for up internal road upgrade place including was cycling provisions. We that upgrade works to Wairaka Precinct Requirement for up internal road upgrade place including was cycling provisions. We that upgrade works to Wairaka Precinct Requirement for up internal road upgrade place including was cycling provisions. We that upgrade works to Wairaka Precinct Requirement for up internal road upgrade place including was cycling provisions. We that upgrade works to Wairaka Precinct Requirement for up internal road upgrade place including was cycling provisions. We that upgrade works to Wairaka Precinct Requirement for up internal road upgrade place including was cycling provisions. We that upgrade works to Wairaka Precinct Requirement for up internal road upgrade place including was cycling provisions. We that upgrade works to Wairaka Precinct Requirement for up internal road upgrade place including was cycling provisions.		



Submitter	Position	Transportation related issues	TPC Comments
Auckland	Oppose	More assessment required for access by	TPC support
Transport		active modes, from Carrington Road or the	provisions to
(AT)		Regional Cycleway. If the MHUD upgrades on	ensure that full
Continued		the internal road network are not	connectivity for
		implemented, the existing network is limited	active mode
		for active mode users.	users is achieved,
			in accordance
		Objective 8 of the Precinct Plan identifies the	with the
		need to provide cycling and pedestrian	provisions of the
		linkages from the Precinct to the wider area.	Wairaka Precinct
			Plan.
		The PPC should consider the safety and	
		accessibility of the site for pedestrians and	
		cyclists based on the existing layout and	
		speed environment, to determine whether	
		additional mitigation is required, and then	
		amend the Plan Change for inclusion of	
		appropriate mechanisms in the Precinct Plan	



Submitter	Position	Transportation related issues	TPC Comments
Auckland Transport (AT) Continued	Oppose	The existing Wairaka Precinct Plan identifies a shared path and open space running along the northern and southern boundaries of sub-precinct A, which provide an important link of active mode users between Carrington Road, Oakley Creek and the regional cycleway. The applicant's proposed amendments to the Wairaka: Precinct Plan 1 remove these connections. While Attachment 14 of the Plan Change documentation includes correspondence with the MHUD indicating the intention of the MHUD to deliver equivalent open space and shared path proposals, either through a separate Plan Change or Resource Consent, there is no guarantee that MHUD's development proposals will be delivered, or delivered prior to this PPC being approved. AT therefore recommend that the Precinct Provisions should be revised to include alternative appropriate alignments to connect to Oakley Creek and the regional cycleway as part of this Plan Change. One of these active mode connections should be in	TPC support provisions for appropriate alternative alignments, to ensure consistency with strategic route alignments identified in the Wairaka Precinct Plan.
	Oppose in part	place of the formerly proposed reserve. Walking Path Connection to Farm Road – Require more justification for deleting the indicative walking path connection through the open space lot to Farm Road, as indicated on the applicant's proposed amendments to the Wairaka: Precinct Plan 1, which removes this connection. This walking path supports connectivity within	TPC support appropriate provisions for active mode network connections that are consistent with the Wairaka
		the precinct and provides an important active mode connection from the internal network to Farm Road.	Precinct Plan.



5.2 Key matters raised in the submissions from other submitters are summarised below:

Submitter	Position	Transportation related	TPC Comments
		issues	
Ministry of Housing & Urban Development (MHUD)	Support with requested amendments	Ensure that the Precinct description has an appropriate level of detail and acknowledges role of Precinct provisions in addressing interfaces between Mason Clinic and surrounding activities	
		Amend proposed activity 53 to provide that additions to existing buildings that would increase the building footprint by more than 20 % or 200m2 GFA (whichever is lesser) that are located within 10m of the eastern boundary are restricted discretionary activities	While the two responses do not directly or specifically refer to transportation effects associated with the plan change, the effects of potential land-use intensification, as inferred through potential for an increase building height,
Geoffrey John Beresford and Joanna Louise Beresford [Original Submission]	Oppose the plan change	Concerns about: definition of activities permitted on site; social impacts (including public safety), due to expansion of forensic and psychiatric services, cumulative number of health services in area, possible relocation of other services to the Mason Clinic site; interfaces, planting, building height, noise; consistency with NPS UD; reduction of riparian margins and development in flood plains; adequacy of section 32 analysis; deletion of open space and shared path; controlled activity status and nonnotification of certain activities; adequacy of assessment criteria managing public health and safety.	could result in increased traffic generation and associated adverse effects. Further clarification on this matter was sought through the Section 23 Further Information Request. The Section 23 Response confirms that the PPC enables a height increase within the central Mason Clinic site from 16 metres (permitted) to 26 metres (discretionary). As the height increase would be a discretionary activity, this would be subject to transportation assessment as part of the Resource Consent process.



Submitter	Position	Transportation related issues	TPC Comments	
Geoffrey	Support	Submitter supports all of Ministry of	TPC Comments on	
John	in Part	Housing & Urban Development's	MHUD Submission	
Beresford		submission points, as noted above.	recorded above	
and Joanna	Support	Submitter supports all of AT's submission	TPC Comments on AT	
Louise	in Part	points, as noted above.	Submission recorded	
Beresford			above.	
[Further				
Submission]				

6.0 Conclusions and recommendations

- 6.1 Overall, TPC consider that the PPC is acceptable and generally consistent with the policy objectives of the Auckland Unitary Plan and Wairaka Precinct Plan and that the transportation effects of the development which it enables can be reasonably accommodated on the adjoining Wairaka Precinct and public road networks, subject to the following provisions:
 - Assessment of the impact of cumulative trip generation on Carrington Road resulting from wider development within and adjoining the Wairaka Precinct and confirmation of trigger points for identified for transport improvements within the Wairaka Precinct and to Carrington Road.
 - The provision of acceptable access arrangements with the adjoining north-south road through the Precinct, for which improvement works have recently been consented and are currently underway.
 - Provisions for active mode connections identified in the Wairaka Precinct Plan to be retained and futureproofed for future delivery. In the event of any changes to identified routes, we would request that alternative routes provide the same strategic connections and thus fulfil the same function.





PRIVATE PLAN CHANGE REQUEST - CI25 REPORT

To: Elisabeth Laird, Policy Planner

For: Plans & Places Department, Central South Unit

From: Mustafa Demiralp, Principal – Urban Design

Date: 16 February 2023

Address: 3A, 81A, 119A Carrington Road Mount Albert

Application: Private Plan Change Request by Waitematā District Health Board (WDHB) for

the Mason Clinic site, Wairaka Precinct

Dear Elisabeth,

Re: Urban Design Assessment – Private Plan Change Proposal for the Mason Clinic, Mount Albert

Thank you for the opportunity to review the private plan change request by Waitematā District Health Board (WDHB).

I have been engaged by Auckland Council's Plans and Places department to provide an urban design assessment for the private plan change proposal of the Mason Clinic in January 2021. Up this date an assessment has been carried out by Georgia Pieri, a specialist urban designer from Tamaki Makurau Design Ope, the urban design division of Auckland Council. Mrs Pieri began drafting this report until she had to take maternity leave. After this application has been handed over to me by Mrs Pieri, I made some minor changes and amendments based on my interpretation.

The proposal seeks to amend the provisions of the Auckland Unitary Plan, Operative in Part (AUPOP) which apply to the Mason Clinic site within the Wairaka Precinct, together with rezoning the land to the north and south of the Mason Clinic site from Business Mixed Use to Special Purpose Healthcare Facility and Hospital zone and, to apply the Sub-Precinct A to the combined sites.

This memo is to assist you with your section 42A recommendation report from an urban design perspective. I have reviewed the relevant application material and, I am familiar with the site and surrounding context.

1.0 BACKGROUND

Wairaka Precinct:

The Wairaka Precinct is 64.5ha in area and extends from the north-western motorway at Point Chevalier in the north, through to Woodward Road in the south, and from Oakley Creek in the west to Carrington Road in the east¹ (see Figure 1).



Figure 1: Wairaka Precinct outlined in red.

- The Precinct is occupied by the Mason Clinic, Unitec Institute of Technology (Unitec), Taylors Laundry facility and includes several areas of open spaces.
- There are specific attributes of the Precinct which contribute to its character and amenity including Oakley Creek, the open space stormwater management areas, the Wairaka Stream, and the historic heritage associated with the former Oakley Hospital and identified trees on site (see Figure 2).

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 $^{^{1}}$ AUPOP, Chapter I334 Wairaka Precinct, Section I334.1 Precinct Description

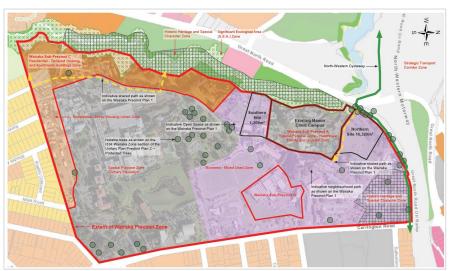


Figure 2: zoning and natural / built heritage attributes of Wairaka Precinct.

Plan Change Site and Statutory Context:

- A full description of the site is outlined in section 4 of the AEE². In summary, I note the following:
 - The Plan Change area is 6.78ha and is made up of three separate land parcels located at the western side of the Wairaka Precinct.
 - The Oakley Creek and Te Auaunga walkway are located immediately adjacent to the western boundary of the plan change area.
 - The eastern boundary forms the 'frontage' of the site and adjoins a private northsouth spine which will form part of the roading network for the Precinct³.
 - The northern site is currently vacant and contains several protected trees along its western boundary.⁴. The southern site contains buildings associated with United which are to be removed.
 - The Mason Clinic site is subject to Sub-Precinct A which has an underlying Special Purpose Healthcare Facility and Hospital zone to accommodate the Mason Clinic. The sites immediately north and south of the Mason Clinic site are zoned Business Mixed Use and are not subject to Sub-Precinct A (see Figure 3).

⁴ AUPOP, Chapter I334 Wairaka Precinct, section I334.10.2 Wairaka Precinct Plan 2 – Protected Trees

² Assessment of Environmental Effects (AEE), Section 4, Bentley & Co, December 2021, p. 9-22

³ AUPOP, Chapter I334 Wairaka Precinct, Section I334.10.1, Precinct Plan 1

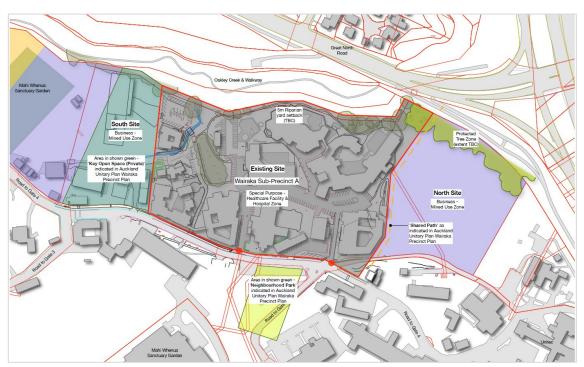


Figure 3: site analysis map

Mason Clinic:

- A full description of the Mason Clinic is outlined in section 3.5 of the AEE. In summary, I note the following:
 - The Waitematā District Health Board (WDHB) owns and operates the Mason Clinic. The Mason Clinic is a forensic psychiatric healthcare facility which has been operating in its current location since 1992.
 - The Mason Clinic provides a mixture of activities including healthcare, a justice facility, and a hospital. It is a facility which provides a range of short and long-term accommodations for people with disabilities and is managed at different security levels. For instance, high-security facilities are for people who have committed a criminal offence where users are contained within buildings and, low-security facilities where users can come and go freely.
 - All the existing facilities are contained within the Mason Clinic site located at 81A Carrington Road. Several of the buildings have become dilapidated and are no longer fit for purpose nor provide quality onsite living environments that meet WDHB's standards. The facility is nearly at full capacity and will need to expand to service the growth in demand for forensic psychiatric services forecast by the WDHB over the next 20-30 years.
 - The WDHB has recently purchased two additional land parcels located to the north and south of the Mason Clinic site which is currently subject to the Business Mixed Use zone. These parcels are impacted by a Key Open Space (Private) feature on the southern site and, a 'Shared Path' feature on the northern site. These features are shown on Precinct Plan 1 for the Wairaka Precinct of the AUPOP.

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⁵ Assessment of Environmental Effects (AEE), Section 3, Bentley & Co, December 202, p. 8

- The WDHB is seeking to amend the provisions of the AUPOP to apply Sub-Precinct A to all three sites to enable the expansion and intensification of the Mason Clinic.





Figure 4: top image – plan view of existing Mason Clinic site, bottom – photo of existing Mason Clinic site.

Future Redevelopment of the Precinct:

- It is understood that the Crown owns 26.5ha of land within the Wairaka Precinct. This applies to the land to the north, east and south of the plan change area and is planned to be comprehensively re-developed for housing by the Ministry of Housing and Urban Development (MHUD) in partnership with iwi.
- The redevelopment of the Precinct is intended to accommodate between 2500 3000 new dwellings across 9 neighbourhoods (see *Figure 5*).

- The United facilities will be consolidated into one area at the southern portion of the Precinct.
- Specific attributes contributing to the amenity of the area including the Oakley Creek,
 Stormwater management and wetland areas, Wairaka Stream, protected trees and, features of the Precinct subject to a historic heritage overlay are to be retained.





Figure 5: indicative view by HUD showing future residential redevelopment of Wairaka Precinct at the north-eastern end of the Precinct.

Consultation:

The WDHB has undertaken consultation with Mana Whenua, the Crown and the Albert-Eden Local Board regarding the Private Plan Change application. Details of this are outlined in Section 10 of the AEE.⁶ and are not repeated here. However, it is important to note that there appears to be no direct opposition by these parties. The Crown has provided written support for the application to re-zone the Mason Clinic land.⁷

⁶ Assessment of Environmental Effects (AEE), Section 10, Bentley & Co, December 2021, p. 49-51

⁷ Attachment 14, letter of correspondence by the Ministry of Housing and Urban Development, dated 11.05.2021

2.0 PROPOSED PRIVATE PLAN CHANGE:

- A full description of the plan change request is outlined in section 6 of the AEE.8. In summary, the proposed plan change seeks to:
 - a) Apply a consistent Special Purpose Healthcare Facility and Hospital zone (Sub-Precinct A) to the combined sites.⁹.
 - b) Delete the open space (private) and shared path components from the Wairaka Precinct Plan 1 that apply to the sites.
 - c) Amend the objectives and policies of the Wairaka Precinct to better reflect the nature of the Mason Clinic activity and provide for its ongoing development and intensification.
 - d) Introduce a requirement for a 5m landscaped yard at the northern and southern boundaries of the plan change area, with consent required for a non-complying activity to infringe this standard.
 - e) Insert a requirement for a 3m + 45 degree height in relation to boundary standard from the northern and southern boundaries to manage the built form relationship with adjoining land (anticipated to be urban residential development).
 - f) Insert a requirement for a 5m yard at the north-western boundary adjoining the boundary with the north-western motorway to provide a landscaped buffer to the motorway. (Boundary adjoining the strategic transport corridor) (I334.6.14.3)
 - g) Introduce a 10m wide area adjacent to the eastern boundary within which new buildings or additions to buildings that increase the footprint by more than 25% or 250m2 GFA (whichever is the lesser) are a Restricted Discretionary activity, with assessment criteria introduced to address design and appearance of buildings and landscaping.
 - h) Apply a controlled activity status to all new buildings on other parts of the Plan Change area, with matters of control to address design, amenities, the appearance of buildings and landscaping.
 - i) The re-zoning of the northern and southern sites will consequently apply other standards to the development of this land (and the Mason Clinic Site) including a height control of up to 26m as a permitted activity for sites with a land area of over 4 hectares. This will increase the height standard for the Mason Clinic from 16m (permitted) to 26m and, will reduce the height standard that applies to the northern and southern sites from 27m to 26m.
- The Plan Change does not seek to amend any of the following provisions or overlays:
 - a) The provisions of the Special Purpose Healthcare Facility and Hospital zone.
 - b) The 10m building setback which applies to the western boundary of Sub-Precinct A where it adjoins Open Space zoned land.

⁸ Assessment of Environmental Effects (AEE), Section 6, Bentley & Co, October 2021, p. 23-33.

⁹ 3A, 81A, 119A Carrington Road, Mt Albert.

- c) The Significant Ecological Area overlay which applies to the Open Space zoned land to the west.
- d) The protected status of trees along the western boundary of the Precinct.
- e) A maximum impervious area control of 80% of the site area; and
- f) A 5m riparian yard standard (Wairaka Stream).

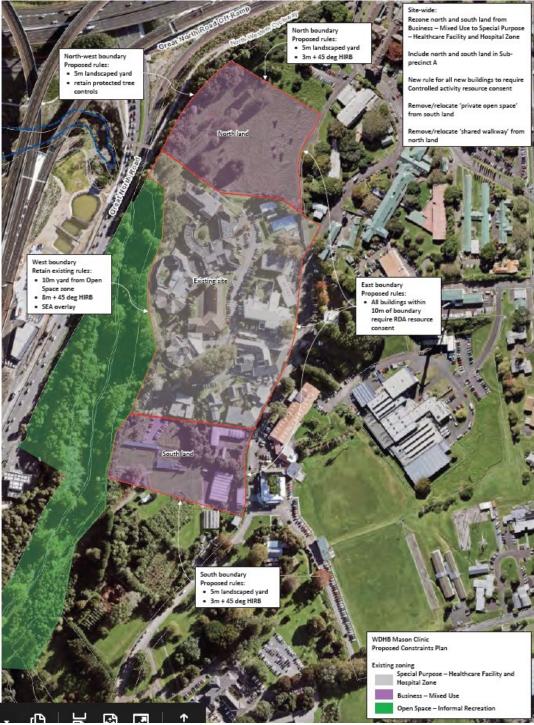


Figure 6: proposed plan change provisions

3.0 SUMMARY:

Following a review of the application, I consider that the private plan change proposal to enable the expansion and intensification of the Mason Clinic facility can be supported from an urban design perspective, subject to certain amendments. The reasons for this are outlined in the following assessment.

4.0 URBAN DESIGN ASSESSMENT:

Location, and Strategic Context:

- It is understood that the Mason Clinic serves the populations of four district health boards including Northland, Waitematā, Auckland and Counties Manukau which collectively have a current population of 1.9 million people.¹⁰. Therefore, users, staff and visitors associated with this facility are widespread across the region.
- I agree that enabling the expansion of the Mason Clinic facility at its current location within the plan change area is more efficient than spreading facilities elsewhere in the region, across disconnected sites. This would lead to 'satellite' facilities which would lead to inefficient operations.¹¹ and make it harder for people to access these facilities.
- The plan change area is in a central location and well-connected to the motorway, public transport facilities, cycling networks, and nearby town centres including Point Chevalier and Mount Albert. This will support convenient access to this facility.
- The plan change area is uniquely located to support the insular nature and the specific privacy and security requirements of the Mason Clinic activity. The plan change area is situated in a discreet location, separated from the wider neighbourhood physically, visually, and geographically by intervening land within the Precinct, Carrington Road, Oakley Creek, and the motorway network.
- Overall, I agree that enabling the expansion of the Mason Clinic activity within the plan change areas is a logical progression of the existing situation and signals a clearer outcome for this land.

Precinct Character and Identity:

- The Wairaka Precinct is set up to provide for a diverse urban community with the opportunity for people to live, work and learn within the Precinct while enjoying the high amenity of the Wairaka environment.¹².
- The Precinct accommodates an eclectic mix of activities including the Mason Clinic, Taylors Laundry, and the United Tertiary Education Facility. The plan change proposal to enable the expansion of the Mason Clinic facility will be consistent with the Precinct outcomes which is

¹⁰ Assessment of Environmental Effects (AEE), Section 3, Bentley & Co, December 2021, p. 8

 $^{^{\}rm 11}$ Design and Architectural Assessment, Section 3.0, Klein Architects, 23 April 2021, p. 12

¹² AUPOP, Chapter I334, Section I334.1 Wairaka Precinct Description.

to enable a wide range of activities.¹³ and, will better provide for the healthcare activity that the AUPOP envisages as part of a diverse urban community.

- In addition to this, the northern and western areas of the Wairaka Precinct are characterised by the presence of existing and former forensic psychiatric facilities, which arguably contribute to a sense of place and add to the diversity, character, and identity of the Wairaka Precinct.
- The northern area of the Precinct contains the Oakley Hospital Main Building which was a former psychiatric hospital that opened in 1865. The Oakley Hospital closed when forensic psychiatric services moved to the Mason Clinic, which has been operating at its current location since 1992. The Oakley Hospital Closed when forensic psychiatric services moved to the Mason Clinic, which has been operating at its current location since 1992. The Oakley Hospital Closed when forensic psychiatric services moved to the Mason Clinic, which has been operating at its current location since 1992.
- While the operation of the Oakley Hospital no longer remains, the Main Building is protected as a Historic Place Category 1 building.¹⁶. The land to which the former hospital was situated is subject to a historic heritage and special character overlay under the AUPOP. The buildings will be adapted to accommodate different uses however, their presence add to a sense of place and have been identified as historic heritage to be retained within the Precinct.
- The proposal to enable the expansion of the Mason Clinic facility will also add to a sense of place through reflecting the distinctive character, heritage, and identity of the northern and western areas of the Precinct which have long been affiliated with forensic psychiatric facilities

Proposed Deletion of the Key Open Space (Private) and, Shared Path Components from Precinct Plan 1:

- The Wairaka Precinct Plan 1 sets out the spatial arrangement of the Precinct which focuses on the open spaces, cycleways, pedestrian and roading networks within the Precinct, which will provide connections to the wider area including Waterview, Point Chevalier, Mount Albert, the western regional cycle network, as well as access to Oakley Creek which provides an important public open space amenity.
- The open spaces and walking / cycling connections are recognised by the AUPOP as important attributes which contribute to the amenity of the Precinct and are to be retained as part of future redevelopment envisaged for the Precinct.
- The plan change area contains two elements identified within Wairaka Precinct Plan 1. These elements comprise part of the southern site identified on Precinct Plan 1 as 'key open space (private) and, part of the Northern site on Precinct Plan 1 as a 'shared path'. These elements are proposed to be deleted as part of the plan change proposal (see below):

¹³ AUPOP, Chapter I334, Policy I334.3(1)

¹⁴ Te Ara Encyclopaedia of New Zealand https://teara.govt.nz/en/photograph/36462/carrington-hospital-1986.

¹⁵ Assessment of Environmental Effects (AEE), Section 3, Bentley & Co, December 2021, p. 8

¹⁶ Heritage New Zealand Pouhere Taonga Act 2014.

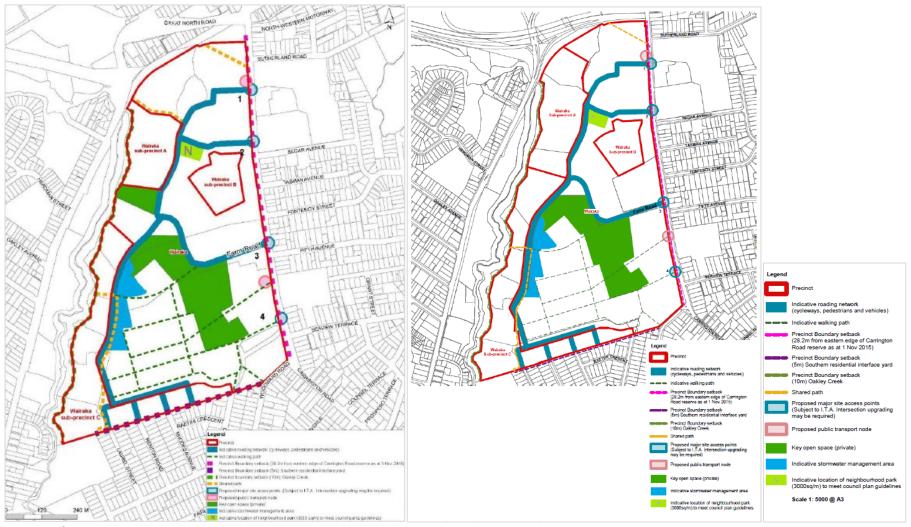


Figure 7: Left Image – Existing Wairaka Precinct Plan 1 provisions, Right Image – Proposed Wairaka Precinct Plan 1 provisions

- I am of the view that the proposed removal of these features from the plan change area is to be considered by Council's Landscape Specialist and Planner who are best placed to provide further comments on it. However, I make the following comments in response to the Design and Architecture Assessment.¹⁷:
 - As previously noted, the Precinct will undergo urban residential intensification led by the Ministry of Housing and Urban Development (MHUD) and iwi. The applicant's design and architecture statement consider that the open space and shared path features proposed to be deleted will be implemented at a suitable time via legal or resource consenting mechanisms which will enable the location, design, and layout of these features to be developed in an integrated way with the layout of future urban intensification.¹⁸.
 - In response to this I note that the relocation of the open space and shared path features are not being proposed as part of this application. However, I consider there are benefits to the removal of these features from the plan change area as it will allow for the expansion and intensification of the Mason Clinic facility to occur in this location.
 - In addition, I note the area identified for open space within the plan change area is not desirable from a Crime Prevention through Environmental Design (CPTED) perspective. This is due to an insufficient level of passive surveillance of the open space area by the Mason Clinic activity which adjoins the northern boundary and, the densely vegetated Oakley Creek adjoining the western boundary.
 - Effective surveillance and maximising visibility are central to the principles of CPTED and a safe design outcome. Places that could be vulnerable to crime should be overlooked by buildings that are busy at all times and, where windows and activities in buildings are directed to overlook open spaces.¹⁹. An alternative location for open space which can appropriately integrate with future residential activity would enable better safety and utilisation of this space due to surveillance and proximity from surrounding residential activity.
 - In addition, the design and architecture assessment ²⁰ states:

'Key open space (private)' is not appropriate or needed on the Mason Clinic site as sufficient outdoor space is (and will be) provided within the facilities and central shared areas of the Mason Clinic itself with important therapeutic and security considerations catered for. The requirements of the Mason Clinic include the need to have secure internal courtyards which are integrated with individual buildings.

- The proposal to delete the shared cycle / pedestrian path is also supported from a design perspective. I consider that it is not feasible to locate this public accessway through a privately owned secure healthcare facility nor is it desirable from a CPTED perspective due to insufficient surveillance from the adjoining Mason Clinic site.
- While there may be a logical reason in providing the shared path through the plan change area as it is envisaged to be connected to the Great North Road overbridge and western regional cycling network, additional provisions have been made within the Precinct to enable connectivity between the site and surrounding areas. These are located to the

 $^{^{17}}$ Design and Architectural Assessment, Klein Architects, 23 April 2021

¹⁸ Design and Architectural Assessment, Section 5, Klein Architects, 23 April 2021, p. 16

¹⁹ Ministry of Justice, Seven Qualities of Safer Places, November 2005 accessed:

https://www.justice.govt.nz/assets/Documents/Publications/cpted-part-1.pdf

²⁰ Design and Architectural Assessment, Section 4, Klein Architects, 23 April 2021, p.14

north of the Precinct where an east-west connection from Great North Road through to Carrington Road could be provided as well as at the location of the existing pedestrian and cycle overbridge, which is further south of the plan change area, connecting the Waterview residential catchment to the Wairaka Precinct at Great North Road (see *Figure 7* above).

- These additional points of shared path connections could help mitigate the removal of this deleted shared path connection. A more in-depth assessment will be provided by the council's transport specialist.
- Precinct Plan 1 envisages these paths will connect to a series of indicative walking, cycling and roading connections within the Precinct which provide access to the wider area.

Operational and Functional Design Requirements Specific to the Mason Clinic activity:

- As mentioned, the Mason Clinic is a psychiatric healthcare facility which caters to a range of high, medium, and low-risk users including people who have committed a criminal offence and need to be contained within high-security areas and, low-security facilities where people can come and go freely.
- Due to the nature of the activity and the need to protect the privacy and security of users and members of the public, there are specific operational and design requirements of the Mason Clinic activity. These are outlined in section 3 of the Design and Architecture assessment.²¹ In summary, I note the following:
 - The permitted height on sites which are greater than 4ha is 26m. The proposal to re-zone the plan change area will enable the building height on the Mason Clinic site to increase from 16m to 26m and, building heights on the northern and southern sites will come down from 27m to 26m.
 - Despite the potential height increase, it is understood that the current model for the type
 of psychiatric facility cannot operate with buildings greater than 1-2 storeys as this
 minimises vertical movement, optimises safety and facilitates good access to outside,
 natural light and air. Therefore, the expansion of the clinic is currently reliant on the ability
 to expand at the ground and first levels.
 - Buildings typically include internal courtyard areas to provide indoor and outdoor access and effective observation to these areas.
 - Buildings themselves will provide secure perimeter areas, avoiding the need for high fencing at boundaries performing the security function.
 - Buildings and landscaping require special attention to safety and security features including anti-climb and anti-ligature design.
 - Buildings are typically internally focused with very little interplay between the activities inside and outside of the building.
- Overall, while the function and activity of the Mason Clinic is insular in nature and, activities within buildings cannot interface directly with surrounding streets or public open spaces, I am satisfied

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²¹ Design and Architectural Assessment, Section 3, Klein Architects, 23 April 2021, p. 12

that the proposed plan change provisions will manage interfaces to all boundaries and will be appropriately integrated with future residential development within the Wairaka area. The reasons for this are outlined below:

Eastern Boundary Interface:

- The eastern boundary of the plan change area forms the 'frontage' of the Mason Clinic site and adjoins a private north-south spine. The north-south spine is identified by the Wairaka Precint Plan 1 to form part of the public roading network, facilitating pedestrian, cyclist, and vehicle movement throughout the Precinct. The north-south spine provides key north to south and east to west connectivity within the Precinct and to the surrounding area.
- The plan change area will comprise a large proportion of this road with a frontage of 470m in length.
- In urban design terms, the way a street looks, and feels is critical to creating a safe and attractive environment that draws people to an area. The character of a street is determined by everything from the front of the building forwards.²². For instance, there are heavy arguments in favour of ensuring active and interesting ground floors along important walking routes. When there are no interesting edges i.e., when ground floors are closed and monotonous, walks seem long and impoverished in terms of experience.²³.
- Activities that overlook the street can help enhance the safety of the street. Typically, windows facing the street provide opportunities for 'passive surveillance', or 'eyes on the street' which helps reduce opportunities for crime.²⁴. In addition, ground floor building design has a large impact on the life and appeal of public spaces. It is from the lower floors that people inside can follow what is going on outside and vice versa. Light streaming from windows of shops, offices and dwellings at night helps to increase the feeling of safety in the street.²⁵.
- The functions and operations which are specific to the Mason Clinic facility are not likely to directly interface with the street and surrounding community. For instance, the buildings associated with the Mason Clinic are typically internally focused with very little interplay between the activities inside and outside of the building reducing opportunities for passive surveillance and activity at the ground floor.
- Despite this, I am confident that, subject to an amendment in response to submissions, the proposed provisions will enable design measures to be adopted to manage the way in which the Mason Clinic will respond to the future roading and pedestrian environment from the eastern boundary (frontage) of the site.

The proposed additions to the Wairaka Precinct policy framework require new buildings (including significant additions to buildings) that adjoin the eastern boundary to be designed to contribute to the maintenance and enhancement of amenity values of the streetscape while enabling the efficient use of the Sub Precinct for the Mason Clinic.

²² Auckland Design Manual, Mixed Use Development Design, Section 3- street to front door accessed:

https://www.aucklanddesign manual.co.nz/sites-and-buildings/mixed-use #/sites-and-buildings/mixed-use/guidance/streettofrontdoor #/sites-and-buildings/mixed-use/guidance/street-use/guidance

²³ Jan Ghel Cities For People, Chapter 3, pp. 63-11, published 2010

²⁴ Auckland Design Manual, Design Elements Guide R4 – Passive Surveillance accessed:

https://content.aucklanddesignmanual.co.nz/regulations/design-for-the-rules/Documents/Design_Element_R4-Passive_Surveillance.pdf ²⁵ Jan Ghel Cities For People, Chapter 3, pp. 63-11, published 2010

- The activity status of buildings within 10m of the eastern boundary is proposed to be managed by a new activity (A53). I have addressed this provision in my response to submissions.
- Additional matters of discretion and assessment criteria are proposed to assess whether the design contributes to a high-quality amenity outcome and, whether the design recognises the functional, operational and security requirements of the intended use of the building while addressing the safety of the surrounding residential community and public realm. This includes:
 - The extent to which the building and associated landscaping contributes to a high quality amenity outcome when viewed from neighbouring land and buildings, including the appearance of the roofscape
 - Whether the design recognises the functional, operational, and security requirements of the intended use of the building, and addresses the safety of the surrounding residential community and the public realm
 - The effectiveness of screening and/or landscaping on the amenity of the streetscape.
 - Limiting the adverse visual effects of any blank walls along the street frontage.
 - The extent to which design features can be used to break up the bulk of the building for example varying building elevations, setting parts of the building back and the use of architectural features to achieve a high-quality outcome, without compromising the functional requirements of the use of the building
 - The extent to which buildings that do not comply with the bulk and location and amenity controls demonstrate that the ground floor of a building fronting a street or public open space provides interest for pedestrians and opportunities for passive surveillance of the public realm.
- I am of the view that the proposed provisions will be sufficient to ensure the right balance between enabling the functional operation of the Mason Clinic activity and a positive built-form response to the street can occur. For instance:
 - Architectural strategies including modulation, articulation, texture, and details (materiality, colour schemes and architectural devices such as fins) can help to break up the scale of buildings and add visual interest and vertical rhythm to façades.
 - The integration of lighting along the façades of buildings and/or along the streetscape can have a great impact on orientation, security, and visual quality in dark hours.²⁶.
 - Landscaping can be used to soften building edges and bring amenities to the public realm.
 - The provision of high, narrow windows and/or frosted glazing can provide interest for pedestrians and a perception of surveillance.
 - Additionally, accessory buildings such as administration offices can be located along the street frontage to provide a level of activity (see below):

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 $^{^{\}rm 26}$ Jan Ghel Cities For People, Chapter 3, pp. 63-11, published 2010







Figure 8: Existing Mason Clinic buildings located along the eastern boundary showing different ways in which windows can provide privacy and outlook when adjacent to the street including through the use of screens, frosted glazing and high-level window placement. Boundary fencing is low to improve passive surveillance. Hedge planting and trees soften the building edge and increase the amenity of the public realm.

- In terms of edge treatments, the Mason Clinic site contains an existing chain link fence around the boundary that is largely screened by hedge planting. It is understood that this is to prevent members of the public from accessing the facility rather than users leaving. As mentioned, the buildings themselves perform a security function by providing secure perimeter areas avoiding the need for high fencing and a profusion of visible bars, fencing, signage, cameras, barbed wire etc can often signal insecurity and fear of crime.
- Additional measures including soft landscaping (trees, shrubbery, and low-level planting) will help to address blank walls and ensure visual interest and aesthetic qualities along the streetscape. These measures will also help to provide clear delineation between private and public areas, which is crucial for protecting the private realm, and keeping activities within the clinic at a comfortable 'arm's length' 27 from the public realm.
- Overall, I consider there are design measures such as those listed above that can manage the interface to the street along the eastern boundary. The proposed controls, matters of discretion and assessment criteria provide the opportunity for this to be assessed as part of a future resource consent application.

Northern and Southern Interfaces:

- The northern and southern sites of the plan change area adjoin the Business Mixed use zone which enables a mix of residential and commercial activities.
- There is no requirement for buildings to be setback from external boundaries within the Business Mixed Use zone apart from when boundaries adjoin a residential, Māori Special Purpose zone or when adjoining lakes, streams, or coastal edges.²⁸.
- The proposal seeks to manage the sensitive nature of the Mason Clinic activity with future residential and / or commercial redevelopment at the northern and southern boundaries of the plan change area by introducing a 5m landscaped setback and requiring a combination of specimen trees, shrubs, and lower-level planting to provide for privacy and screening.
- In combination with the setback rule, the proposal also seeks to introduce a Height in Relation to Boundary (HIRB) standard for buildings adjacent to the northern and southern boundaries of the plan change area.
- Overall, I agree with the following statement within the Design and Architectural assessment.²⁹:

While the planned operational requirements for the Mason Clinic will tend to result in lower-scale buildings (2-3 storeys), this control will manage the effects of larger-scale built forms in the future should they be considered appropriate. The control will require buildings to be progressively set back from the boundaries of the site which adjoin the Mixed Use zone. In combination with the setback and landscape standards, this will effectively manage the potential effects of dominance, shading and privacy/overlooking at the interface with residential development. This rule is considered to be a better option to manage potential effects in the future, compared with the existing rules which do not apply any control on the scale of buildings relative to their proximity to boundaries.

²⁷ Jan Ghel Cities For People, Chapter 3, pp. 63-11, published 2010

²⁸ AUPOP, Chapter H13, Standard H13.6.5 Yards

 $^{^{29}}$ Design and Architectural Assessment, Section 4, Klein Architects, 23 April 2021, p. 15

Western Interface to Oakley Creek:

- Existing vegetation and the topography located along the western edge of the Mason Clinic site provides a strong impermeable and lineal buffer between the plan change area to Oakley Creek, Great North Road and the North-Western motorway. In other words, Oakley Creek provides a heavily vegetated back drop to the entire western boundary of the site.
- The existing Precinct Boundary setback of 10m from Oakley Creek will apply to the length of the western boundary of the plan change area to preserve the ecological values associated with Oakley Creek.
- Additionally, the proposal seeks to insert a 5m building setback control adjoining the western boundary with the North-Western motorway corridor to maintain and preserve the heavily treed frontage along this edge of the Wairaka Precinct.

5.0 Conclusion:

- In summary I note the following:
 - The private plan change proposal will enable the expansion and intensification of the Mason Clinic facility in its current location which is centrally located and well-connected to support convenient access to this facility. The plan change area is also uniquely located to support the insular nature and the specific privacy and security requirements of the Mason Clinic activity.
 - The proposal will be consistent with the Precinct outcomes which is to enable a wide range of activities to add to the diversity, character, and identity of the Wairaka Precinct.
 - I consider that there are benefits to the removal of the Key Open Space (Private) and Shared Path features from the Wairaka Precinct Plan 1 as it will allow for the expansion and intensification of the Mason Clinic facility to occur in this location. The current location of these features is not considered to be desirable from a Crime Prevention through Environmental Design (CPTED) perspective.
 - While it is noted that the proposal does not seek to relocate these features, I agree with
 the Design and Architecture Assessment that an alternative location for open space can
 be appropriately integrated with a future residential activity which would enable better
 safety and utilisation of these spaces due to surveillance and proximity from surrounding
 residential activity.
 - Similarly, the proposal to delete the shared cycle / pedestrian path can also be supported from a design perspective. Providing this public accessway through a privately owned secure healthcare facility is not a desirable outcome from a CPTED perspective due to insufficient surveillance from the adjoining Mason Clinic site.
 - While the function and activity of the Mason Clinic are insular in nature and, activities within buildings cannot interface directly with surrounding streets or public open spaces, I am satisfied that (subject to amendments in response to submissions) the proposed plan change provisions will manage interfaces to all boundaries and will be appropriately integrated with future residential development within the Wairaka area.

Overall, for the reasons summarised above and discussed in this memorandum, I consider that the proposal to amend the provisions of the Auckland Unitary Plan, Operative in Part (AUPOP) which apply to the Mason Clinic site within the Wairaka Precinct, together with re-zoning the land to the north and south of the Mason Clinic site from Business Mixed Use to Special Purpose Healthcare Facility and Hospital zone and, to apply the Sub-Precinct A to the combined sites, can be supported from an urban design perspective, subject to the amendments set out below in response to submissions.

6.0 Submission:

The private plan change 75 has received three separate submissions.

1. Ministry of Housing and Urban Development (MHUD) Relief Sought:

- a. Ensure that the detail provided on the Mason Clinic and its activities in the Precinct description is commensurate with the variety of activities which the Wairaka Precinct's intended to accommodate and acknowledges the role of the Precinct provisions in ensuring that the effects of the Mason Clinic buildings are appropriately addressed at critical interfaces between the specialist healthcare facility and surrounding housing and other mixed-use activity.
- b. Proposed activity 53 to provide that additions to existing buildings that would increase the building footprint by more than 20 % or 200m2 GFA (whichever is lesser)that are located within 10m of the eastern boundary are restricted discretionary activities.
- c. Such further, alternative or other consequential amendments as may be necessary to fully give effect to the relief sought in this submission.

The relief sought by the MHUD is reasonable considering the specific usage of the Mason Clinic. In my view, there are multiple points in the proposed provisions and the precinct assessment criteria to ensure the critical interfaces of Mason Clinic will be addressed appropriately. Some of those points were mentioned in PG 15 of this report. In addition to these, a sentence can also be included in the Precinct Definition as requested. This sentence could clearly identify the design principles that should be considered to address the critical interfaces of Mason Clinic.

I would support the proposed amendment to the assessment criteria on the item (b) 'additions to existing buildings that would increase the building footprint by more than 20 % or 200m2 GFA (whichever is lesser) that are located within 10m of the eastern boundary are restricted discretionary activities.' This request is considered reasonable, any extension of these buildings that are above 20% of the GFA will be significant additions that would have an impact on the built form and the streetscape.

2. Auckland Transport

The Auckland transport noted that the removal of the shared path will compromise the overall connectivity provision of the Precinct. As noted before, removing the shared path would have implications for the overall connectivity vision. I will leave further comments on these to the council's transport specialist that if this could be managed by relocation of this path to an alternative location or if the other two locations provided to the north and south would help mitigate the removal of this path.

From an urban design perspective, connectivity is always a sought-after outcome, however, the location of this pathway is not considered ideal. If this shared path could be located in a more suitable and prominent location, that would be a more desirable outcome. As noted, having this public accessway through a privately owned secure healthcare facility with insufficient surveillance from the adjoining Mason Clinic site is not considered a positive outcome.

3. Geoffrey John Beresford and Joanna Louise Beresford

This submission in general does not have many aspects concerning urban design. The following point on the building height and its significant adverse effects were mentioned.

(j)The Plan Change sets out that the functional and operational needs of the facility will limit the height to two to three stories but fails to limit the height of the buildings accordingly, which will generate significant adverse effects on the surrounding environment.

The building height is based on the underlying zone provisions and, with the extension of the Special Purpose Healthcare Facility and Hospital zone site over 4h. The building height will be increased from 16m (permitted) to 26m (permitted) (H25.6.1) as a part of the zone provision. Although it is understood that the Mason Clinic will not be looking to utilise this height as dictated by their functional requirement, In my view, the Wairaka Precinct is suitable for additional height provisions. The precinct is in a very central location that is connected to the transport corridors. And as a super urban block, it is surrounded by motorways, arterial roads as well as Oakley Creek, and separated from surrounding residential zones with these elements. With these qualities, I consider the Wairaka Precinct as a suitable location for intensification.

As noted previously on PG 15 of this report, there are various elements in the proposed provisions and the assessment criteria on the proposed precinct plan to help manage the building bulk, and appearance and create positive streetscapes. Although it appears that additional height will not be sought by the Mason Clinic, I believe the adverse effects can be managed with quality design responses.

Also taking the submission into consideration, my position remains the same and the plan change application still **can be supported** from an urban design perspective.

Mustafa Demiralp | Principal - Urban Design

Tāmaki Makaurau Design Ope

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aucklandcouncil.govt.nz

ATTACHMENT FIVE RECOMMENDED CHANGES

1334. Wairaka Precinct

I334.1. Precinct Description

The Wairaka Precinct extends from the north western motorway at Point Chevalier in the north, through to Woodward Road in the south, and from Oakley Creek in the west to Carrington Road in the east, where the Unitec Institute of Technology (Unitec), the Crown, Waitemata District Health Board, one private landowner, and Ngati Whatua Orakei own contiguous blocks of land that make up the site.

The purpose of the Wairaka Precinct is to provide for a diverse urban community, including the ongoing development and operation of the tertiary education facility the development and operation of a range of community, recreation, and social activities, the development of a compact residential community, and commercial service activities, open space, and the development of a range of healthcare related and supporting activities to cater for the special and diverse requirements of the users, employees and visitors to the Mason Clinic. Business and Innovation activities are to be enabled, including activities which benefit from co-location with a major tertiary education institute. The Precinct enables new development to create an urban environment that caters for a diverse population, employees and visitors in the area and that integrates positively with the Point Chevalier, Mt Albert and Waterview communities.

The Wairaka Precinct will provide for a variety of housing typologies that help cater for Auckland's growth and the diverse community that will establish in this location. It will also provide a heart to the community, focused around the campus but with a range of community, commercial and social services. It will provide the opportunity for people to live, work, and learn within the Precinct, while enjoying the high amenity of the Wairaka environment. The interfaces between different activities are a key part of providing this amenity, and will be managed by provisions including setbacks and landscaping.

The Wairaka Precinct provides for an urban community within which there is a high quality tertiary education institution.

The location and extent of a major tertiary education institution (Unitec) at Wairaka Precinct is significant to the region. The precinct is 64.5ha, and comprises twelve land titles and four owners. Unitec owns 83 per cent of the total land. In addition medical and light industrial activities also occur on the site.

The Wairaka Precinct provides overall objectives for the whole area, and three subprecincts:

- Sub-precinct A provides for healthcare/hospital related <u>purposes</u> <u>activities</u> and is intended to accommodate the intensification of the Mason Clinic
- Sub-precinct B provides for light manufacturing and servicing associated with laundry services and is intended to accommodate the current range of light industrial activities
- Sub-precinct C to the south and west of the precinct provides for a broad range of residential activities, together with supporting uses, activities appropriately located to a major tertiary education institution.

The Mason Clinic contains a mix of activities including healthcare activity, justice facility and hospital. It is a facility which provides for a range of care, and short and long term accommodation for people with disabilities (including mental health, addiction, illness or intellectual disabilities), together with provision for custodial, tribunal, justice, and forensic services, and a range of health related accessory activities. The activities the Mason Clinic accommodates requires buildings which have a range of particular functional and operational requirements, including the incorporation of publicly accessible and secure facilities and areas for staff, visitors and the people

(A43)	Any development not otherwise listed in Table I334.4.3 that is not generally in accordance with the precinct plan	D
(A44)	Any vacant lot subdivision proceeding in accordance with the precinct plan and which creates lots consistent with the zone boundaries	С
(A45)	Any vacant lot subdivision that is not generally in accordance with the precinct plan	D
(A46)	Parking buildings within Residential - Mixed Housing Urban Zone	NC
(A47)	Parking buildings within the Residential - Terrace Housing and Apartment Buildings Zone for any uses other than serving the residents of that zone	NC
(A48)	Buildings that exceed the Standard I334.6.4 Height	D

Table 1334.4.4 Wairaka Precinct sub-precinct A

Activity	Activity status	
Develo		
(A49)	All new buildings, and additions to existing buildings unless otherwise specified below	<u>C</u>
(A50)	<u>Demolition</u>	<u>P</u>
(A51)	Internal alterations to buildings	<u>P</u>
(A52)	Additions to buildings that are less than: (a) 25 per cent of the existing gross floor area of the building; or (b) 250m² GFA whichever is the lesser	<u>P</u>
(A53)	New buildings or additions to existing buildings that increase the building footprint by more than 2520 per cent or 250200m² GFA (whichever is the lesser), that are located within 10m of the eastern boundary	<u>RD</u>
(A54)	New buildings or additions to buildings not complying with 1334.6.14 (2)	<u>NC</u>
(A55)	Any development not otherwise listed in Table 1334.4.4 that is generally in accordance with the precinct plan	<u>RD</u>
(A56)	Any development not otherwise listed in Table 1334.4.4 that is not generally in accordance with the precinct plan	<u>D</u>

1334.5. Notification

(1) An application for resource consent for a controlled activity listed in Tables I334.4.1, and I334.4.3, and I334.4.4 Activity table above will be considered without public or limited notification or the need to obtain written approval from affected parties unless the Council decides that special circumstances exist under s95A(4) of the Resource Management Act 1991.

(1A)Any application for resource consent for new buildings or additions to existing buildings in Sub-precinct A that increase the building footprint by more than 2520

per cent or 250200m² GFA (whichever is the lesser) that are located within 10m of the eastern boundary of the Sub-precinct will be considered without public or limited notification or the need to obtain the written approval from affected parties unless the Council decides that special circumstances exist under section 95A(4) of the Resource Management Act 1991.

- (2) Any other application for resource consent for an activity listed in Tables I334.4.1, I334.4.2, and I334.4.3 and I334.4.4 Activity table which is not listed in Standard I334.5(1) above will be subject to the normal tests for notification under the relevant sections of the Resource Management Act 1991.
- (3) When deciding who is an affected person in relation to any activity for the purposes of section 95E of the Resource Management Act 1991 the Council will give specific consideration to those persons listed in Rule C1.13(4).

1334.6. Standards

The standards applicable to the overlays, zones and Auckland-wide provisions apply in this precinct.

All activities listed as permitted, controlled or restricted discretionary in Tables 1334.4.1, 1334.4.2 and 1334.4.3 Activity tables must comply with the following standards.

1334.6.1. Floodlights

- (1) Where floodlights are located adjacent to a residential zone, the hours of operation must not extend beyond:
 - (a) 10pm Monday to Saturday; and
 - (b) 7.30pm Sunday and Public Holidays.
- (2) Floodlights must comply with the lighting standards in <u>E24.6</u> Auckland-wide Standards Lighting.

1334.6.2. Retail thresholds

- (1) The following thresholds apply in this precinct:
 - (a) The total gross floor area of retail (including food and beverage and supermarket) must not exceed 6500m² for the whole precinct:
 - (b) the total gross floor area of retail (including food and beverage) within the Business Mixed Use Zone must not exceed 4500m²; and
 - (c) The total gross floor area of retail (including food and beverage) within the Special Purpose Tertiary Education Zone must not exceed 3000m².
- (2) The total gross floor area of retail (including food and beverage) in the Historic Heritage Place must not exceed 1000 m² subject to Standard I334.6.2(1)(a) above.

- (x) Boundary setback in respect of buildings within Sub-precinct A adjoining Strategic Transport Corridor zoned land outside the precinct landscape amenity;
- (xi) <u>Height in relation to boundary visual dominance, overlooking, shading and privacy.</u>
- (6) New buildings or additions to existing buildings within Sub-precinct A that increase the building footprint by more than 2520 per cent or 250200m² GFA (whichever is the lesser), that are located within 10m of the eastern boundary:

Where buildings do not abut the street frontage

- (a) the effectiveness of screening and/or landscaping on the amenity of the streetscape;
- (b) safety;
- (c) <u>functional and operational (including security) requirements;</u>

Where buildings do abut the street frontage

- (d) the effectiveness of screening and/or landscaping (if any);
- (e) the maintenance or enhancement of amenity for pedestrians using the adjoining street;
- (f) measures adopted for limiting the adverse visual effects of any blank walls along the street frontage;
- (g) measures adopted to provide for the visual interest at the street frontage, while ensuring the security, and functional and operational requirements of the Mason Clinic;
- (h) safety

Matters applying to all buildings

(i) Those matters contained in I334.7.1.(3).

1334.8.2. Assessment criteria

The Council will consider the relevant assessment criteria below for restricted discretionary activities, in addition to the assessment criteria specified for the relevant restricted discretionary activities in the zones, Auckland-wide or overlay provisions:

- (1) Retail (including food and beverage) comprising up to one tenancy between 201m2 and 300m2 gross floor area adjacent to, and accessed from, Farm Road and or adjacent to the bus hub or Oakley Hospital building
 - (a) Building interface with any public places;
 - (i) the extent to which buildings have clearly defined public fronts that address the street and public open spaces to positively contribute to those public spaces and pedestrian safety;

- (viii) where the requirements of the outlook control are met, whether such buildings adversely affect the amenity of any complying new/ existing development on an adjoining site,
- (5) For development that does not comply with Standard I334.6.14 (3):

 Boundary setback in respect of buildings within Sub-precinct A or Standard I334.6.10: Height in relation to boundary.

For buildings which infringe Standard I334.6.14(3) Boundary Setback

- (a) the extent to which a landscaped buffer between buildings and activities and adjoining land is maintained to mitigate adverse visual effects;
- (b) <u>landscaping that is maintained is of sufficient quality as to make a positive</u> <u>contribution to the amenity of the outlook to the site from neighbouring</u> <u>land;</u>
- (c) whether the design recognises the functional and operational requirements of the intended use of the building, including providing for security.

For buildings which infringe Standard I334.6.10 Height in relation to boundary

- (d) the extent to which buildings that exceed the height in relation to boundary standard demonstrate that the height, location and design of the building allows reasonable sunlight and daylight access to adjoining sites, particularly those with residential uses;
- (e) the extent to which such buildings are consistent with the policies in the Special Purpose Healthcare Facility and Hospital Zone, the Wairaka Precinct General, and the Wairaka Precinct Sub-precinct A; and
- (f) the extent to which buildings as viewed from adjoining sites are designed to reduce visual dominance effects, overlooking and shadowing and to maintain privacy.
- (6) New buildings or additions to existing buildings within Sub-precinct A that increase the building footprint by more than 2520 per cent or 250200m² GFA (whichever is the lesser), that are located within 10m of the eastern boundary.

Where buildings do not abut the street frontage

- (a) the extent to which the visual effects of the building are screened by landscaping, comprising the planting of a mixture of closely spaced trees, shrubbery and ground cover;
- (b) the extent to which the design of the building and the design of the interface between the building and the adjacent street contributes to a high quality visual amenity (including safety) outcome when viewed from the street while meeting the operational and functional requirements (including security) of the use of the building.

Where buildings do abut the street

