

Section 32 Report

Whaitua motuhake/ Special Purpose (Hospital) Zone

prepared for the

Proposed Waimakariri District Plan

18 September 2021



WAIMAKARIRI
DISTRICT COUNCIL

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1. EXECUTIVE SUMMARY

The existing Rangiora and Oxford hospital sites contain locally significant hospital and health care facilities and ancillary activities and facilities that make an important contribution to the economic, social and cultural well-being of the District. The operative Canterbury Regional Policy Statement (RPS) defines 'critical infrastructure' as including 'public healthcare institutions including hospitals'. As such, Rangiora and Oxford hospitals are significant physical resources in the District that must be sustainably managed.

However, neither this contribution nor the specialised nature of these facilities and activities are explicitly recognised in the Operative District Plan. Instead they are managed within the more generic Residential 2 zone provisions. This non-specific approach has the potential to pose problems to the on-going use and development of these hospital sites, particularly where the zone and provisions do not specifically recognise their specialised operational and developmental needs.

The key resource management issues that need to be addressed in relation to the hospital sites are:

- A. A lack of specific recognition of the specialised nature of hospital and health care facility and ancillary activities and facilities and the important contribution such services make to the District;
- B. Ensuring that these activities and facilities are afforded sufficient operational and development flexibility to meet their current and future needs;
- C. Managing the actual or potential effects of any future hospital and health care facility and ancillary activities and facilities on adjacent activities, particularly where a hospital site adjoins a residential site.

To address these issues, the following key changes are proposed:

- (a) Introduction of a **Special Purpose (Hospital) Zone** to cater for areas used predominantly for the operation and development of locally or regionally important medical, surgical or psychiatric care facilities, as well as health care services and facilities, administrative and commercial activities associated with these facilities;
- (b) Provisions that provide for the efficient, on-going use and development of Rangiora hospital and Oxford hospital and ancillary health care activities and facilities, while ensuring that environmental effects are managed.

Should hospital use of the Rangiora and Oxford hospital sites be discontinued, an alternative residential zoning would apply, including policy support for residential development.

The proposed zone aligns with the National Planning Standards 2019. The zone and provisions are anticipated to result in reduced operational and development related compliance costs. The proposed approach will provide direction and guidance to decision makers regarding the intended outcomes for the **Special Purpose (Hospital) Zone**. The proposed approach will sustain the potential of the hospitals as physical resources for current and future generations, maintain amenity values and quality of the environment, and achieve Part 2 of the RMA.

In this report, the **Special Purpose (Hospital) Zone** provisions are evaluated as a package.

2. OVERVIEW AND PURPOSE

2.1 Purpose of Section 32 RMA

The overarching purpose of Section 32 of the Resource Management Act 1991 (RMA) is to ensure that plans are developed using sound evidence and rigorous policy analysis, leading to more robust and enduring provisions.

Section 32 reports are intended to clearly and transparently communicate the reasoning behind plan provisions to the public. The report should provide a record of the evaluation process, including the consultation, technical work, methods, assumptions and risks that informed that process. A robust report can prove highly useful to decision makers, particularly where it clearly communicates the analysis undertaken to identify the most appropriate way to achieve the purpose of the RMA.

The District Council is required to undertake an evaluation of any proposed District Plan provisions before notifying those provisions. The Section 32 report provides the reasoning and rationale for the proposed provisions (including compared to any relevant operative provisions) and should be read in conjunction with those provisions.

2.2 Topic Description

2.2.1 Scope of Special Purpose (Hospital) Zone Chapter

The ***Special Purpose (Hospital) Zone*** contains areas used predominantly for the operation and development of locally or regionally important medical, surgical or psychiatric care facilities, as well as health care services and facilities, administrative and commercial activities associated with these facilities.

There are two existing hospital sites in the District, in Rangiora and Oxford, which are proposed as ***Special Purpose (Hospital) Zone***. The Canterbury District Health Board (CDHB) owns and proposes to retain both sites. More hospital or health care related development on the sites is contemplated in future, particularly on the Rangiora hospital site. Any future activities or development on these sites requires sufficient flexibility to enable these sites to develop in response to the health needs of the District. Specific new ***Special Purpose (Hospital) Zone*** provisions are provided for existing and potential future hospital and health care facility and ancillary activities and facilities on these hospital sites.

For any part of any ***Special Purpose (Hospital) Zone*** site no longer required for hospital and health care facility and ancillary activities and facilities, use or re-development for other purposes will be determined in accordance with the provisions of an alternative zoning for that site, which in the case of both the Rangiora and Oxford hospital sites will be the ***General Residential Zone***, instead of the provisions of the ***Special Purpose (Hospital) Zone***.

In this report, the ***Special Purpose (Hospital) Zone*** provisions are evaluated as a package.

2.2.2 Relationship of the Special Purpose (Hospital) Zone Chapter to other parts of the District Plan

The structure of district plans mandated by the National Planning Standards (see Section 3.2 below) is based around each topic or zone being in its own stand-alone chapter with its own provisions.

The content and nature of the ***Special Purpose (Hospital) Zone*** chapter is outlined in Section 2.2.1 above.

Provisions for other matters of potential relevance to the **Special Purpose (Hospital) Zone**, such as signs, noise, lighting, energy and infrastructure or transport, lie within the respective chapters for the specific subject.

2.3 Significance of this Topic

The existing Rangiora and Oxford hospital sites contain locally significant hospital and health care facility and ancillary activities and facilities that make an important contribution to the economic, social and cultural well-being of the District. The RPS defines ‘critical infrastructure’ as including ‘public healthcare institutions including hospitals’. As such, Rangiora and Oxford hospitals are significant physical resources in the District that must be sustainably managed.

2.4 Current Objectives, Policies and Methods

The Rangiora and Oxford hospital sites are managed under the Residential 2 zone provisions. This means there are no provisions that specifically recognise the specialised role and operational requirements of these sites. Any future hospital or health care facility and ancillary activities and facilities on these sites would likely have to be facilitated by resource consent on a case-by-case basis. While this may provide a level of protection to adjoining residents through consideration of any future development on the hospital sites proposed by resource consent application, for the CDHB this approach is piecemeal, uncertain, and potentially time-consuming and costly. Given that Rangiora and Oxford hospital sites are existing, it may not be unreasonable to anticipate potential further development which would benefit the community from a local health care perspective. The zoning of these hospital sites in the Operative District Plan doesn’t reflect the use of these sites nor does it anticipate future development of the hospital sites. As a result, the Operative District Plan is not providing the best outcomes for the CDHB or the community.

A summary of potentially relevant key Residential zone and District-wide objectives, policies and methods in the Operative District Plan that currently apply to the Rangiora and Oxford hospital sites is contained in the following table. It is noted that these are couched in the context of residential activity rather than hospital or health care facility and related activities and facilities.

Operative Plan Section	Objectives	Policies	Rules/Standards
<i>Residential Zones</i>	<i>17.1.1 Residential Zones that provide for residents’ health, safety and wellbeing and that provide a range of living environments with distinctive characteristics.</i>	<i>17.1.1.1 Maintain and enhance the characteristics of Residential Zones that give them their particular character and quality of environment....</i>	<ul style="list-style-type: none"> • Noise • Glare • Hazardous substances • Signs • Density • Height • Setbacks • Recession planes • Access and parking
<i>Health, Safety and Wellbeing</i>	<i>12.1.1 Maintain the amenity values and a quality of environment appropriate for different parts of the District which protects the health, safety and wellbeing of present and future generations, and ensure that any potential</i>	<i>12.1.1.1 Structures Maintain and enhance the positive contribution that buildings and structures, and the spaces between them, make to the character and amenity of urban areas where people reside, the</i>	In addition to the above: <ul style="list-style-type: none"> • Site coverage • Landscaping/screening • Noise

	<i>adverse environmental effects from buildings and structures, signs, glare, noise and hazardous substances are avoided or mitigated.</i>	<i>neighbourhood and streetscape.</i>	
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2.5 Information and Analysis

District Plan Effectiveness assessment and reporting was undertaken prior to the commencement of the District Plan Review. However, this did not specifically address the Rangiora or Oxford hospitals. It did address the Residential 2 zone, which is relevant in the context that the Rangiora and Oxford hospital sites are zoned Residential 2 in the Operative District Plan, however it did not specifically include reference to the Rangiora and Oxford hospital sites or provision for hospital or health care facility and ancillary activities and facilities in the zone generally.

2.6 Consultation Undertaken

Consultation has been undertaken as part of this District Plan Review process with key internal and external stakeholders. The consultation undertaken and nature of involvement and the feedback received is summarised below.

2.6.1 Issues and Options

Comments were received from 75 persons or organisations in response to ‘District Plan Review Issues and Options’ papers in 2017. The ‘Issues and Options’ papers did not specifically include the Rangiora and Oxford hospital sites. There was a Residential ‘Issues and Options’ paper, which is relevant in the context that these hospital sites are zoned Residential 2 in the Operative District Plan, however this paper did not specifically include reference to the Rangiora and Oxford hospital sites. No comments were received in relation to the Rangiora and Oxford hospital sites or in regard to provision for hospital or health care facility and ancillary activities and facilities generally.

2.6.2 Canterbury District Health Board

An important external stakeholder is the Canterbury District Health Board (CDHB), as owner of both the Rangiora and Oxford hospital sites.

A meeting was held with the CDHB to explore options for the future management of Rangiora and Oxford hospitals under the proposed District Plan.

The CDHB expressed a preference for the hospital sites to have a **Special Purpose (Hospital) Zone**. The CDHB wanted this to be based on the provisions and related definitions for ‘Suburban’ hospital sites in the operative Christchurch District Plan, albeit with a simpler set of provisions given a lower level of development around the Rangiora and Oxford hospital sites as compared to the ‘Suburban’ hospital sites in Christchurch. The CDHB suggested standards regarding building setbacks from road and internal boundaries, height, outdoor storage, landscaping and fencing would be appropriate. The CDHB also requested that, should hospital use of the sites be discontinued, an alternative residential zoning would apply, including policy support for residential development.

2.6.3 WDC Internal Stakeholders

Several parts of the District Council have been consulted as internal stakeholders in the development of the **Special Purpose (Hospital) Zone** provisions.

An overview of the proposed provisions and definitions was provided to the District Council's Technical Advisory Group. Drafts of the zone provisions and definitions were provided to the District Council's Plan Implementation Unit (or resource consents team) for review and comment including 'make it or break it' evaluation. The zone provisions and definitions were also provided for technical planning review to the District Council's District Plan Review Internal Review Group and to an External Reviewer. The District Council's District Planning and Regulation Committee were provided with briefings and the draft zone provisions and definitions.

2.7 Iwi Authority Advice

Clause 3(1)(d) of Schedule 1 of the RMA sets out the requirements for local authorities to consult with iwi authorities during the preparation of a proposed plan. Clause 4A requires the District Council to provide a copy of a draft proposed plan to iwi authorities and have particular regard to any advice received. This section summarises the consultation feedback/advice received from the iwi authority relevant to the **Special Purpose (Hospital) Zone**, and the District Council's consideration of, and response to, that feedback/advice (as required by Section 32(4A)(b) RMA).

While consultation has been undertaken with Te Ngāi Tūāhuriri Rūnanga regarding a range of District Plan matters, no specific feedback was provided with respect to the **Special Purpose (Hospital) Zone** or the Rangiora or Oxford hospital sites. Consultation with Te Ngāi Tūāhuriri Rūnanga regarding the wider District Plan Review is on-going.

2.8 Reference to other relevant Section 32 Evaluations

The following other evaluations that may be relevant to this Section 32 report include Section 32 reports for the following chapters of the proposed District Plan:

(a) **Residential zones, particularly for the General Residential Zone;**

This is relevant as, should hospital use of the Rangiora and Oxford hospital sites be discontinued, an alternative residential zoning would apply, namely the **General Residential Zone**, including policy support for residential development.

(b) **Transport;**

This is relevant in terms of design of the traffic aspects of any future development on the hospital sites.

(c) **Energy and infrastructure;**

This is relevant in terms of provision of energy and infrastructure for any future development on the hospital sites.

(d) **Noise;**

(e) **Light;**

(f) **Signs;**

With regard to (d) to (f) above, these are relevant in terms of how any environmental effects of these matters arising from any future development on the hospital sites will be managed.

(g) **Hazardous substances;**

This is relevant in terms of how the storage and use of any hazardous substances on the hospital sites will be managed.

(h) **Earthworks;**

This is relevant in terms of the applicable earthworks requirements for any future development on the hospital sites.

3. STATUTORY AND POLICY CONTEXT

3.1 Resource Management Act 1991

Section 5 of the RMA sets out the purpose of the RMA, which is to promote the sustainable management of natural and physical resources. In achieving this purpose, authorities need to recognise and provide for matters of national importance identified in Section 6, have particular regard to other matters listed in Section 7, and take into account the principles of the Treaty of Waitangi (Te Tiriti o Waitangi) under Section 8.

The existing Rangiora and Oxford hospital sites contain locally significant hospital and health care facility and ancillary activities and facilities that make an important contribution to the economic, social and cultural well-being of the District. The RPS defines 'critical infrastructure' as including 'public healthcare institutions including hospitals'. As such, these hospitals are significant physical resources in the District that must be sustainably managed.

3.1.1 Section 6

There are no Section 6 matters relevant to this topic.

3.1.2 Section 7

The Section 7 matters relevant to this topic are:

(b) the efficient use and development of natural and physical resources

(d) the maintenance and enhancement of amenity values

(f) maintenance and enhancement of the quality of the environment

The provisions of the **Special Purpose (Hospital) Zone** will ensure the evolving health needs of the District are supported by the efficient on-going use and development of hospital and health care facility and ancillary activities and facilities on the existing Rangiora and Oxford hospital sites. That use and development will be undertaken in a way that recognises the amenity values of adjacent areas, by managing hospital site specific environmental effects on adjacent sites.

3.1.3 Section 8

Section 8 of the RMA requires the District Council to take into account the principles of the Treaty of Waitangi (Te Tiriti o Waitangi). Mana whenua, through iwi authorities have been consulted as part of the district plan review process and the obligation to make informed decisions based on that consultation is noted. Section 74(2A) further requires councils to take into account relevant Iwi Management Plans and their bearing on the resource management issues of the District.

While consultation has been undertaken with Te Ngāi Tūāhuriri Rūnanga regarding a range of District Plan matters, no specific feedback was provided with respect to the **Special Purpose (Hospital) Zone** or the Rangiora or Oxford hospital sites. Consultation with Te Ngāi Tūāhuriri Rūnanga regarding the wider District Plan Review is on-going.

3.2 National Instruments

The following national instruments are relevant to this topic.

3.2.1 National Planning Standards 2019

The first set of National Planning Standards came into force on 3 May 2019 and minor amendments were incorporated in November 2019. The purpose of the National Planning Standards is to improve consistency in plan and policy statement structure, format and content.

Of particular relevance is Table 13 (zone names and descriptions) of the Zone Framework Standard which directs that the District Plan must, where relevant, contain a Special Purpose Zone consistent with the following description:

Hospital Zone

Areas used predominantly for the operation and development of locally or regionally important medical, surgical or psychiatric care facilities, as well as other health care services and facilities, administrative and commercial activities associated with these facilities.

The National Planning Standards mandate the use of this zone for hospital sites.

There are two existing hospital sites in the District, in Rangiora and Oxford, which are proposed as ***Special Purpose (Hospital) Zone*** and the purpose of the zone is stated in the zone chapter and is consistent with the National Planning Standards.

3.3 Regional policy statement and plans

Under Section 75(3)(c) of the RMA, a District Plan must give effect to the relevant or applicable regional policy statement or plan.

The RPS contains provisions that may be of relevance.

Chapter 5 'Land Use and Infrastructure' states that the primary focus of the chapter is on 'regionally significant infrastructure'. However, the RPS definition of 'regionally significant infrastructure' does not include hospitals.

Chapter 6 concerns the 'Recovery and Rebuilding of Greater Christchurch'. Under the RPS, Greater Christchurch includes Rangiora, Kaiapoi, Woodend, Pegasus and part of the rural area of the District.

In Chapter 6, Objective 6.2.1.9 seeks to 'integrate strategic and other infrastructure and services with land use development'. The RPS definition of 'strategic infrastructure' does not include hospitals. 'Other infrastructure' includes 'regionally significant infrastructure', the RPS definition of which, as mentioned above, also does not include hospitals. 'Other infrastructure' also includes 'critical infrastructure'; the RPS defines 'critical infrastructure' as including 'public healthcare institutions including hospitals'.

The purpose of the ***Special Purpose (Hospital) Zone*** is to contain areas used predominantly for the operation and development of locally or regionally important medical, surgical or psychiatric care facilities, as well as health care services and facilities, administrative and commercial activities associated with these facilities. Two existing hospital sites in the District, in Rangiora and Oxford, are proposed as ***Special Purpose (Hospital) Zone***. The existing Rangiora and Oxford hospital sites contain locally significant hospital and health care facility and ancillary activities and facilities that make an

important contribution to the economic, social and cultural well-being of the District. The provisions of the ***Special Purpose (Hospital) Zone*** will ensure the evolving health needs of the District are supported by the efficient on-going use and development of hospital and health care facility and ancillary activities and facilities on the existing Rangiora and Oxford hospital sites. That use and development will be undertaken in a way that recognises the amenity values of adjacent areas, by managing hospital site specific environmental effects on adjacent sites.

The use and development of the Rangiora and Oxford hospital sites will therefore be provided for through the ***Special Purpose (Hospital) Zone*** and provisions as 'critical infrastructure' and will be integrated with adjacent land use.

The proposed ***Special Purpose (Hospital) Zone*** and provisions will therefore be consistent with the RPS.

There are no regional plans of specific relevance to this topic.

3.4 Iwi Management Plan

The Mahaanui Iwi Management Plan 2013 contains no objectives or policies of direct relevance to the Rangiora or Oxford hospital sites or in general to the provision of hospital or health care facilities in the District.

3.5 Any relevant management plans and strategies

3.5.1 Waimakariri District Development Strategy 2018-2048

Between the 2013 and 2018 census, the population of the District rose from 49,989 to 59,502, a 19 per cent increase. That was on top of a 16.7 per cent lift between 2006 and 2013 from 42,834 people. The Waimakariri 2018-2048 District Development Strategy estimates the population of the District may grow by a further approximately 37,000 people by 2048. This implies a need to enable or provide for a potential increase in demand for hospital or health care facility and ancillary activities and facilities in the District, which may necessitate a need for additional activities and facilities on the Rangiora and Oxford hospital sites.

3.5.2 Rangiora Town Centre Strategy 2010 and Oxford Town Centre Strategy 2014

The Oxford Town Centre Strategy 2014 and the Rangiora Town Centre Strategy 2010 are of potential relevance due to the existing hospitals in each town. However these strategies contain no provisions relating to the Rangiora or Oxford hospital sites or in general to the provision of hospital or health care facility and ancillary activities and facilities in the District.

3.6 Any other relevant legislation or regulations

3.6.1 Health Act 1956 and New Zealand Public Health and Disability Act 2000

Other legislation and regulations which are of potential relevance to the ***Special Purpose (Hospital) Zone*** and have been taken into account in reviewing and preparing the zone-specific provisions include the Health Act 1956 and New Zealand Public Health and Disability Act 2000.

The CDHB is required under the Health Act 1956 and New Zealand Public Health and Disability Act 2000 to:

- (a) Improve, promote and protect the health of people and communities;

- (b) Promote the integration of health services, especially primary and secondary care services;
- (c) Seek the optimum arrangement for the most effective and efficient delivery of health services to meet local, regional and national needs; and
- (d) Promote effective care or support of those in need of personal health services or disability support.

There are no current provisions that specifically recognise the specialised role and operational requirements of the Rangiora and Oxford hospital sites. Any future development of hospital or health care facility and ancillary activities and facilities on these sites would likely have to be facilitated by resource consent on a case-by-case basis.

While this may provide a level of protection to adjoining residents through consideration of any future development on the hospital sites proposed by resource consent application, for the CDHB this approach is piecemeal, uncertain, and potentially time-consuming and costly. Given that Rangiora and Oxford hospital sites are existing, it may not be unreasonable to anticipate potential further development which would benefit the community from a local health care perspective. The zoning of these hospital sites in the Operative District Plan doesn't reflect the use of these sites nor does it anticipate future development of the hospital sites. As a result, the Operative District Plan is not providing the best outcomes for the CDHB or the community.

The provisions of the ***Special Purpose (Hospital) Zone*** will ensure the evolving health needs of the District are supported by the efficient on-going use and development of hospital and health care facility and ancillary activities and facilities on the existing Rangiora and Oxford hospital sites. That use and development will be undertaken in a way that recognises the amenity values of adjacent areas, by managing hospital site specific environmental effects on adjacent sites.

3.7 Any plans of adjacent territorial authorities

The District Council is required to have regard to the extent to which the District Plan needs to be consistent with the plans and proposed plans of adjacent territorial authorities under Section 74(2)(c) of the RMA.

3.7.1 Christchurch District Plan

The operative Christchurch District Plan contains a '*Specific Purpose (Hospital) Zone*'. Six types of Specific Purpose (Hospital) zone are provided, consisting of the following:

- *Suburban*
- *Suburban Services*
- *Inner Urban*
- *Christchurch Hospital*
- *Former Christchurch Women's Hospital*
- *Montreal House*

The activities enabled or provided for are generally the same across all types of hospital zones, however built form standards are different for each type of zone, depending upon the scale and location of facilities.

As discussed in Section 2.6.2 above, in consultation, the CDHB expressed a preference for the Rangiora and Oxford hospital sites to have a ***Special Purpose (Hospital) Zone*** based on the provisions and related definitions for '*Suburban*' hospital sites in the operative Christchurch District Plan, albeit with

a simpler set of provisions given a relatively lower level of development around the Rangiora and Oxford hospital sites as compared to the 'Suburban' hospital sites in Christchurch.

The Christchurch 'Suburban' hospital zone provides for the following activities, in summary:

- Hospital;
- Emergency services facilities;
- Health care facility;
- Integrated family health centre (included in the definition for health care facility);
- Care facility (day care facility is included in the definition for health care facility).

The Christchurch 'Suburban' hospital zone includes the following standards, in summary:

- Building setbacks from road and internal boundaries of 5-10m (depending on the circumstances);
- Building height of up to 20m (depending on the circumstances);
- An exemption to maximum building height for lift shafts, mechanical plant and other such ancillary equipment of up to 4m above maximum building height;
- Landscaping strips 10m in width;
- Fencing up to 1.2m high;
- Outdoor storage (not located within the landscaping strips and screened).

By comparison, the methods proposed for the Waimakariri **Special Purpose (Hospital) Zone** are summarised in section 5.4 below.

The CDHB also requested that, should hospital use of the sites be discontinued, an alternative residential zoning would apply, including policy support for residential development. For both sites, this will be the provisions of the **General Residential Zone**, instead of the provisions of the **Special Purpose (Hospital) Zone**.

The Waimakariri **Special Purpose (Hospital) Zone** chapter has been drafted on this basis.

The Waimakariri **Special Purpose (Hospital) Zone** chapter is therefore generally consistent with the operative Christchurch District Plan. Together, both plans will enable the CDHB to maintain consistent district plan administration over its sites in the Christchurch and Waimakariri districts.

3.7.2 Proposed Selwyn District Plan

A proposed new Selwyn District Plan was publicly notified on 5 October 2020. Apart from the listing of the Darfield (Cottage) Hospital, and Ellesmere County hospital in Leeston, as heritage buildings, the proposed Selwyn District Plan does not appear to make specific provision for hospitals. A health care facility in zones such as the General Rural zone or Large Format Retail zone is a non-complying activity.

3.7.3 Hurunui District Plan

Hurunui District Council recently completed a review of its district plan which became operative on 21 June 2018.

Apart from recognising and providing for the Queen Mary Hospital as a heritage site, the operative Hurunui District Plan makes no specific provision for hospitals. 'Healthcare facilities' are generally permitted in Residential and Business zones. In Residential zones 'hospital' is a non-complying activity.

However, the recently completed Hurunui district plan review just pre-dated the National Planning Standards, and under Section 17 of the National Planning Standards the Hurunui District Council must commence another review of its district plan within the next 7 years.

4. KEY RESOURCE MANAGEMENT ISSUES

The scope of the *Special Purpose (Hospital) Zone* chapter is discussed in Section 2.2.1 above.

The existing Rangiora and Oxford hospital sites contain locally significant hospital and health care facility and ancillary activities and facilities that make an important contribution to the economic, social and cultural well-being of the District. The RPS defines 'critical infrastructure' as including 'public healthcare institutions including hospitals'. As such, these hospitals are significant physical resources in the District that must be sustainably managed.

However, neither this contribution nor the specialised nature of these facilities and activities are explicitly recognised in the Operative District Plan. This non-specific approach has the potential to pose problems to the on-going use and development of these hospital sites, particularly where the zone and provisions do not specifically recognise their specialised operational and developmental needs.

The key resource management issues that need to be addressed in relation to hospitals are:

- (a) A lack of specific recognition of the specialised nature of hospital and health care facility and ancillary activities and facilities and the important contribution they make to the District;
- (b) Ensuring that these activities and facilities are afforded sufficient operational and development flexibility to meet their current and future needs;
- (c) Managing the actual or potential effects of any future hospital and health care facility and ancillary activities and facilities on adjacent activities, particularly where a hospital site adjoins a residential site.

5. OVERVIEW OF PROPOSED OBJECTIVE, POLICIES AND METHODS

The proposed provisions are set out in the *Special Purpose (Hospital) Zone* chapter of the proposed District Plan. **These provisions should be referred to in conjunction with this evaluation report.** The proposed provisions are summarised below.

5.1 Strategic Directions

In the proposed District Plan, Strategic Direction SD-03 seeks, in summary, that 'infrastructure', including 'critical infrastructure', is able to operate efficiently and effectively, and development and upgrading is enabled whilst managing adverse effects on the surrounding environment and managing adverse effects of activities on infrastructure, having regard to the social, cultural and economic benefit, functional need and operational need of infrastructure.

As mentioned previously, the RPS definition of 'critical infrastructure' includes hospitals.

The inclusion and provisions of the *Special Purpose (Hospital) Zone* and provisions will address the key resource management issues in relation to the existing Rangiora and Oxford hospital sites in the District as identified in Section 4 above, and will therefore be consistent with and give effect to these Strategic Directions.

5.2 Zone

The nature and purpose of the **Special Purpose (Hospital) Zone** is area specific and is summarised in Sections 2.2 and 3.2.1 above.

5.3 Proposed Objective and Policies

A proposed objective and policies are set out in the **Special Purpose (Hospital) Zone** chapter. **Those provisions should be read in conjunction with this evaluation report.**

In summary, an objective and policies are proposed that will ensure the evolving health needs of the District are supported by the efficient on-going use and development of hospital and health care facility and ancillary activities and facilities on the existing Rangiora and Oxford hospital sites. That use and development will be undertaken in a way that recognises the amenity values of adjacent areas, by managing hospital site specific environmental effects on adjacent sites.

Should use of the sites by hospital and health care facility and ancillary activities and facilities be discontinued, there are also policies proposed that will enable use of the sites to be determined by an alternative residential zoning which, for both sites, will be the provisions of the **General Residential Zone**, instead of the provisions of the **Special Purpose (Hospital) Zone**.

5.4 Proposed Methods

Rules and definitions are proposed that will enable the following on the existing Rangiora and Oxford hospital sites:

- Hospital;
- Health care facility;
- Care facility (day care facility is included in the definition for health care facility but the definition of care facility is broader); and
- Integrated family health centre (included in the definition for health care facility but separate definition provided for this activity).

Should hospital use of the Rangiora and Oxford hospital sites be discontinued, there is also a proposed rule that will enable use of the sites to be determined by an alternative residential zoning, including policy support for residential development.

For hospital and health care facility and ancillary activities and facilities on the hospital sites, standards are proposed for the following, in summary:

- Minimum building setbacks from road and internal site boundaries (5m);
- Maximum building height (up to 15m);
- An exemption to maximum building height for lift shafts, mechanical plant and other such ancillary equipment of up to 4m above maximum building height;
- Landscaping strips (3m in width);
- Fencing (up to 1.2m high on a road boundary and visually permeable; up to 1.5m high on an internal boundary; no security fencing to be used as boundary fencing);
- Height in relation to boundary (recession planes); and
- Outdoor storage (not located within the building setbacks from road and internal site boundaries or within the landscaping strips, and screened).

Matters of discretion are proposed to guide the District Council's exercise of discretion regarding activities and development on the hospital sites requiring resource consent.

The **Special Purpose (Hospital) Zone** and provisions provide a framework that will ensure the evolving health needs of the District are supported by the efficient on-going use and development of hospital and health care facility and ancillary activities and facilities on the existing Rangiora and Oxford hospital sites. That use and development will be undertaken in a way that recognises the amenity values of adjacent areas, by managing hospital site specific environmental effects on adjacent sites. If proposed activities, facilities or structures fall within relevant definitions, rules and standards, resource consent will not be required. If rules or standards are breached, any subsequent resource consent application may enable input from neighbours and potentially additional mitigation of effects.

6. SCALE AND SIGNIFICANCE EVALUATION

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

The level of detail undertaken for the subsequent evaluation of the proposed objectives, policies and methods has been determined by this scale and significance assessment.

In particular, Section 32 (1)(c) of the RMA requires that:

- A. Any new proposals need to be examined for their appropriateness in achieving the purpose of the RMA;
- B. The benefits and costs, and risks of new policies and methods on the community, the economy and the environment need to be clearly identified and assessed; and
- C. All advice received from iwi authorities, and the response to the advice, needs to be summarised.

Further, the analysis has to be documented to assist stakeholders and decision-makers understand the rationale for the proposed objectives, policies and methods under consideration.

In making this assessment regard has been had to a range of scale and significance factors, including whether the provisions:

- (a) *Are of regional or district wide significance:*

The **Special Purpose (Hospital) Zone** and provisions provide a framework that will ensure the evolving health needs of the District are supported by the efficient on-going use and development of hospital and health care facility and ancillary activities and facilities on the existing Rangiora and Oxford hospital sites. That use and development will be undertaken in a way that recognises the amenity values of adjacent areas, by managing hospital site specific environmental effects on adjacent sites. The zone and provisions will formalise the existing and future use of the sites, maintain amenity values and quality of the environment, and will contribute positively to the well-being of the District.

- (b) *Involve a matter of national importance in terms of Section 6 of the RMA:*

There are no Section 6 matters relevant to this topic, as outlined in Section 3.1.1 above.

- (c) *Involve another matter under Section 7 of the RMA:*

The zone provisions will achieve relevant Section 7 matters, as outlined in Section 3.1.2 above.

- (d) *Raise any principles of the Treaty of Waitangi (Te Tiriti o Waitangi) under Section 8 of the RMA:*

Consultation has been undertaken with Te Ngāi Tūāhuriri Rūnanga as part of the district plan review process regarding a range of District Plan matters, and is ongoing. Relevant provisions of the Mahaanui Iwi Management Plan 2013 have been considered, as outlined in Sections 3.1.3 and 3.4 above.

- (e) *Address an existing or new resource management issue:*

The **Special Purpose (Hospital) Zone** is a new zone. The zone provisions will address the key resource management issues outlined in Section 4 above, and will sustain the potential of the Rangiora and Oxford hospitals as physical resources for current and future generations, and maintain amenity values and quality of the environment.

- (f) *Adversely affect people's health and safety:*
(g) *Adversely affect those with particular interests including Maori:*
(h) *Adversely affect a large number of people:*
(i) *Result in a significant change to the character and amenity values of local communities:*
(j) *Result in a significance change to development opportunities or land use options:*
(k) *Limit options for future generations to remedy effects:*

With respect to (f) to (k) above, the **Special Purpose (Hospital) Zone** will provide for the efficient, on-going use and development of Rangiora hospital and Oxford hospital and ancillary health care activities and facilities, while ensuring that environmental effects are managed. This will sustain the potential of hospital and health care facility and ancillary activities and facilities as physical resources for current and future generations, maintain amenity values and quality of the environment, and contribute positively to community well-being.

- (l) *Whether the effects have been considered implicitly or explicitly by higher order documents:*

The National Planning Standards mandate the use of a **Special Purpose (Hospital) Zone** in new district plans for hospitals, as outlined in Section 3.2.1 above. The establishment of the **Special Purpose (Hospital) Zone** and provisions will be consistent with the RPS, as outlined in Section 3.3 above.

- (m) *Include regulations or other interventions that will impose significant costs on individuals or communities:*

The changes could result in reduced compliance costs for the CDHB as the hospital sites will be managed under a zone and provisions fit for purpose, and will better enable or provide for the hospital and health care facility and ancillary activities and facilities that currently occur there and which may be developed further in future.

Policies and methods have been evaluated as a package, as together they address a particular issue and seek to meet a specific objective.

6.1 Evaluation of Scale and Significance

	Low	Medium	High
Degree of change from the Operative Plan			✓
<p>The proposed zone is a new zone for the District Plan and is specifically tailored to hospital and health care facility and ancillary activities and facilities. This represents a significant departure from the current approach of the Operative District Plan where the Rangiora and Oxford hospital sites are currently managed under the more generic Residential 2 zone provisions.</p> <p>However, the zone and provisions will formalise the existing and future use of the sites, maintain amenity values and quality of the environment, and will contribute positively to the well-being of the District. The new zone contains provisions that essentially recognise what has and will likely continue to actually happen on the ground. In that respect, while the topic is significant, there are no significant consequences that are likely to arise from its implementation.</p>			
Extent of effects on matters of national importance	✓		
<p>The proposed zone and provisions will achieve the relevant parts of Part 2 of the RMA, as discussed in Section 3.1 and in the discussion above.</p>			
Scale of effects geographically (local, district wide, regional, national)	✓		
Scale of effects on people (how many will be affected – single landowners, multiple landowners, neighbourhoods, the public generally, future generations?)	✓		
Scale of effects on those with specific interests, e.g., mana whenua, industry groups, stakeholders	✓		
<p>The proposed <i>Special Purpose (Hospital) Zone</i> will largely have a localised effect, with those potentially affected by the provisions being the CDHB and adjoining landowners. Use and development will be undertaken in a way that recognises the amenity values of adjacent areas, by managing hospital site specific environmental effects on adjacent sites.</p> <p>However, the zone and provisions will formalise the existing and future use of the sites, maintain amenity values and quality of the environment, and will contribute positively to the well-being of the District. The new zone contains provisions that essentially recognise what has and will likely continue to actually happen on the ground. In that respect, while the topic is significant, there are no significant consequences that are likely to arise from its implementation.</p>			
Degree of policy risk – does it involve effects that have been considered implicitly or explicitly by higher order documents? Does it involve effects addressed by other standards/commonly accepted best practice? Is it consistent, inconsistent or contrary to those?	✓		
<p>As discussed in Section 3 above, there is little policy risk as the provisions are in accordance with or give effect to the RMA, National Planning Standards and RPS. The provisions of the Mahaanui Iwi Management Plan 2013 have been recognised and taken into account. The provisions are generally consistent with the District Plans of adjacent local authorities.</p>			
Likelihood of increased costs or restrictions on individuals, communities or businesses	✓		
<p>The changes could result in reduced compliance costs for the CDHB as the hospital sites will be managed under a zone and provisions fit for purpose, and will better enable or provide for the hospital and health care facility and ancillary activities and facilities that currently occur there and which may be developed further in future. Use and development</p>			

will be undertaken in a way that recognises the amenity values of adjacent areas, by managing hospital site specific environmental effects on adjacent sites.

6.2 Summary – Evaluation of Scale and Significance

Overall, the scale and significance of the proposed ***Special Purpose (Hospital) Zone*** and provisions is assessed as **low**. Given this, the level of detail in this report corresponds with the scale and significance of the environmental, economic and cultural effects anticipated from implementation of the proposed provisions.

7. EVALUATION OF PROPOSED OBJECTIVES

Section 32(1)(a) of the RMA requires the District Council to evaluate the extent to which the objective is the most appropriate way to achieve the purpose of the RMA. The level of detail undertaken for the evaluation of the proposed objective has been determined by the preceding scale and significance assessment.

Below is an evaluation of the proposed objective that have been identified as the most appropriate to address the resource management issue(s) and achieve the purpose of the RMA, against the relevant objectives in the Operative District Plan.

7.1 Evaluation of Proposed Objectives

Relevant Existing Objectives	Appropriateness to achieve the purpose of the RMA
<p>Residential Zones</p> <p>Objective 17.1.1: Residential Zones that provide for residents’ health, safety and wellbeing and that provide a range of living environments with distinctive characteristics.</p> <p>Health, Safety and Wellbeing</p> <p>Objective 12.1.1: Maintain the amenity values and a quality of environment appropriate for different parts of the District which protects the health, safety and wellbeing of present and future generations, and ensure that any potential adverse environmental effects from buildings and structures...are avoided or mitigated.</p>	<p>Relevance:</p> <p>Both the Rangiora and Oxford hospital sites are currently zoned Residential 2 in the Operative District Plan and are subject to relevant Zone and District-wide objectives.</p> <p>This means there are no current objectives that specifically recognise, enable or provide for the hospital and health care facility and ancillary activities and facilities that currently occur there and which may be developed further in future.</p> <p>As a result, the existing approach is less relevant than the proposed approach. Under the proposed approach, the hospital sites will be managed under a zone and provisions fit for purpose. The proposed approach directly enables, provides for or manages the hospital and health care facility and ancillary activities and facilities that currently occur there and which may be developed further in future. The new zone contains provisions that essentially recognise what has and is likely to continue to actually happen on the ground.</p> <p>Reasonableness:</p> <p>The non-specific approach of the current objectives has the potential to pose problems to the on-going use and development of the hospital sites, particularly where the zone and provisions do not specifically recognise their specialised operational and developmental needs.</p> <p>The lack of clearly expressed outcomes for the hospital sites creates ambiguity and uncertainty. This reduces the utility of the objectives and could lead to unintended environmental and economic consequences for the hospitals. This, in turn, could impose unreasonable costs on the CDHB, as well as unanticipated remedial costs on the wider community if effects are inappropriately managed.</p> <p>Overall, the existing approach is less reasonable than the proposed approach.</p>

Relevant Existing Objectives	Appropriateness to achieve the purpose of the RMA
	<p>Achievability:</p> <p>The existing objectives fail to address the resource management issues relevant to the Rangiora and Oxford hospital sites. In particular, they do not specifically recognise or address the specialised nature of hospital and health care facility and ancillary activities and facilities and their role and significance in the District. Consequently, the current framework of objectives provides insufficient direction and guidance to decision makers regarding the intended outcomes and specific activities and effects to be managed in relation to these activities and facilities.</p> <p>Although the generic focus of the objectives on the overall amenity values and character of the existing Residential 2 zoning of the hospital sites generally achieves the purpose of the RMA, the contribution that the hospitals make towards the social, cultural and economic well-being of the District, and the health and safety of its residents, is not expressly recognised.</p> <p>In light of the above, the existing objectives are not considered appropriate in achieving the purpose of the RMA in relation to the management of the hospital sites.</p>

Proposed Objective	Appropriateness to achieve the purpose of the RMA
<p><i>Special Purpose (Hospital) Zone</i></p> <p>HOSZ-O1: Hospitals and ancillary health related activities</p> <p>The evolving health needs of the District are supported by the efficient development of hospital and ancillary health related activities on hospital sites in a way that recognises the amenity values of adjacent sites and manages environmental effects.</p>	<p>Relevance:</p> <p>Rangiora and Oxford hospitals are significant resources in the District. The proposed objective clearly sets out the outcomes anticipated by the proposed District Plan with respect to the <i>Special Purpose (Hospital) Zone</i>, and address the key resource management issues identified in Section 4 of this report.</p> <p>The proposed objective specifically addresses the key resource management issues identified in Section 4 above.</p> <p>The proposed objective is relevant as it specifically recognises, enables or provides for and manages the hospital and health care facility and ancillary activities and facilities that currently occur there and which may be developed further in future.</p>

Proposed Objective	Appropriateness to achieve the purpose of the RMA
	<p>The proposed objective formalises the existing and future use of the hospital sites, and recognises what has and will likely continue to actually happen on the ground, which will contribute positively to the well-being of the District.</p> <p>Reasonableness:</p> <p>The provisions are generally consistent with approaches adopted for the zoning of hospital sites in the district plans of adjacent local authorities.</p> <p>The proposed objective will provide direction and guidance to decision makers regarding the intended outcomes and activities and effects to be managed in relation to the hospital sites.</p> <p>The changes could result in reduced compliance costs for the CDHB as the hospital sites will be managed under a zone and provisions fit for purpose, and will better enable or provide for the hospital and health care facility and ancillary activities and facilities that currently occur there and which may be developed further in future.</p> <p>Achievability:</p> <p>The proposed provisions will enable the hospital sites to be used efficiently, such as by having flexibility to develop and adapt. These efficiencies will contribute to economic well-being. Ensuring that future activities and facilities are managed in relation to the surrounding environment, particularly given that the hospitals are next to predominantly residential areas, will help to maintain amenity values and the quality of the environment. In turn this will help provide for the social and cultural well-being of the community.</p> <p>The objective specifically and clearly sets out the outcomes anticipated for the zone, and specifically recognises the contribution the hospitals make to social, cultural and economic well-being in the District, and that they have unique operational requirements.</p> <p>In light of the above, the proposed objective is considered appropriate in achieving the purpose of the RMA in relation to the hospital sites.</p>

7.2 Summary - Evaluation of Proposed Objectives

The proposed objective achieves the purpose of the RMA as it recognises the social, cultural and economic contribution that the Rangiora and Oxford hospitals make in the District and reflects a clear statement of intent regarding their on-going use and development. It aligns with the direction set in the National Planning Standards. The proposed objective provides certainty as to the outcomes anticipated under the proposed District Plan provisions and aligns with national planning direction and contemporary planning practice applied elsewhere. The proposed objective will better sustain the potential of hospital and health care facility and ancillary activities and facilities as physical resources for current and future generations, maintain amenity values and quality of the environment, and contribute positively to community well-being.

8. EVALUATION OF PROPOSED POLICIES AND METHODS

Section 32 (1)(b) of the RMA requires an evaluation of whether the proposed policies and methods (such as rules, standards, definitions and assessment matters) are the most appropriate way to achieve the proposed objective by identifying other reasonably practicable options, assessing the efficiency and effectiveness of the proposed policies and methods in achieving the objective, and summarising the reasons for deciding on the proposed policies and methods.

The level of detail undertaken for the evaluation of the proposed policies and methods has been determined by the preceding scale and significance assessment.

The assessment must identify and assess the benefits and costs of environmental, economic, social and cultural effects that are anticipated from the implementation of the proposed policies and methods, including opportunities for economic growth and employment.

The assessment must, if practicable, quantify the benefits and costs and assess the risk of acting or not acting if there is uncertain or insufficient information available about the subject matter.

Policies and methods have been evaluated as a package, as together they address a particular issue and seek to meet a specific objective.

An evaluation of the proposed policies and methods is summarised in the following table.

8.1 Evaluation of Proposed Policies and Methods

Policy and method options to achieve the District Plan objective/s relating to the Rangiora and Oxford hospital sites	Benefits environmental, economic, social and cultural effects anticipated	Costs environmental, economic, social and cultural effects anticipated	Efficiency and Effectiveness	Risk of acting / not acting if there is uncertain or insufficient information about the subject matter of the provisions
<p>Option A: Proposed Approach</p> <p>(a) Specific zone that recognises existing locally significant hospitals, provides for their efficient, on-going use and development, and ensures adverse effects are managed;</p> <p>(b) An objective, policies, rules, standards, definitions and matters of discretion tailored to the operational requirements of the sites that manage the effects of hospital and ancillary health related activities and on-going use and development.</p>	<p>Environmental: Economic: Social: Cultural:</p> <p>(a) Directly recognises and enables the continued, functional use of the hospital sites for their primary purpose;</p> <p>(b) Tailored rules, standards, definitions and assessment matters provide a framework to manage facilities, efficient site development and potential adverse effects on neighbouring properties;</p> <p>Environmental:</p> <p>(c) Provides increased certainty and clarity regarding the nature and scale of on-site activity and potential development anticipated;</p>	<p>Environmental: Social: Cultural:</p> <p>(a) Adjacent property owners may have concerns about the perceived adequacy of the approach to manage potential adverse effects of activities and development on the hospital sites.</p>	<p>(a) The benefits of the approach significantly outweigh the costs;</p> <p>(b) The proposed approach is effective as it recognises the important contribution these facilities make to the District and explicitly respond to the operational and development requirements of the CDHB, including clearly identifying activities that are permitted along with relevant thresholds that trigger the need for resource consent. This, in turn, offers increased clarity and certainty to the CDHB as well as the community, and provides flexibility to enable the facilities to potentially develop while ensuring that effects on adjacent sites are managed;</p> <p>(c) The proposed approach is also an efficient method of achieving the objective as it may result in reduced operational and</p>	<p>(a) It is considered that there is sufficient information on which to base the proposed policies and methods;</p> <p>(b) The risk of not acting is that the operation and potential future development of the facilities might be unduly restricted or additional compliance costs may be incurred;</p> <p>(c) The risk of not acting is that the District Plan will not align with the National Planning Standards with respect to a <i>Special Purpose (Hospital) Zone</i>;</p> <p>(d) The risk of not acting is a lack of clear direction to the community and decision makers in the outcomes expected in respect of the operational requirements of the hospital sites.</p>

Policy and method options to achieve the District Plan objective/s relating to the Rangiora and Oxford hospital sites	Benefits environmental, economic, social and cultural effects anticipated	Costs environmental, economic, social and cultural effects anticipated	Efficiency and Effectiveness	Risk of acting / not acting if there is uncertain or insufficient information about the subject matter of the provisions
	<p>Economic: Social: Cultural:</p> <p>(d) Provides the hospital sites with increased flexibility to potentially develop;</p> <p>(e) Provides the community with increased certainty regarding the development of hospital and ancillary health facilities;</p> <p>(f) Potential increases in economic and social well-being through enabling managed potential expansion of hospital and health care facility and ancillary activities and facilities, with potential enhanced access to health services and additional employment opportunities;</p> <p>Economic:</p> <p>(g) Many standard operational activities would be permitted;</p> <p>(h) Potential reduction in time/cost to the applicant and District Council and community</p>		development related compliance costs.	

Policy and method options to achieve the District Plan objective/s relating to the Rangiora and Oxford hospital sites	Benefits environmental, economic, social and cultural effects anticipated	Costs environmental, economic, social and cultural effects anticipated	Efficiency and Effectiveness	Risk of acting / not acting if there is uncertain or insufficient information about the subject matter of the provisions
	of preparing and processing resource consent applications.			
Opportunities for economic growth and employment				
There is likely to be increased potential for the development of hospital and health care facility and ancillary activities and facilities on the hospital sites. This may generate additional economic activity and employment opportunities that may stimulate economic growth, with access to improved health services benefitting the community.				
Quantification				
Section 32(2)(b) requires that if practicable the benefits and costs of a proposal are quantified.				
Given the assessment of the scale and significance of the proposed changes above it is considered that quantifying costs and benefits would add significant time and cost to the Section 32 evaluation process. The evaluation in this report identifies where there may be additional cost(s), however the exact quantification of the benefits and costs discussed was not considered necessary, beneficial or practicable, particularly given the provisions are area specific and apply only to two sites in the District.				
Policy and method options less appropriate to achieve the objective/s				
Option B: Status Quo	Environmental:	Environmental:	(a) The costs of the approach significantly outweigh the benefits and are therefore is not as efficient or effective;	(a) It is considered that there is sufficient information to not maintain this approach;
(a) Non-specific policies and methods relating to the current Residential 2 zoning of the hospital sites, focused on managing a generic range of activities and effects on residential activity.	(a) Although not hospital specific, the current plan provisions enable the effects associated with activities and development on the hospital sites to be generically managed;	Economic: Social: Cultural:		
	Economic: Social: Cultural:	(a) Provides insufficient clarity and certainty to the CDHB and community regarding the scale and nature of potential future development of the hospital sites;	(b) The existing approach fails to specifically recognise and provide for the operational requirements of hospitals and health care facilities, including clearly identifying activities and development that are permitted along with relevant thresholds that trigger the need for resource consent. This, in turn, offers reduced clarity and certainty to the CDHB as well as the community, and a less	(b) The risk of retaining the status quo is that the current and potential future hospital and health care facility and ancillary activities and facilities on the hospital sites would continue to be inadequately addressed by this option, potentially resulting in these facilities being used and developed in a way that is inconsistent with their primary function and having an unintended negative impact on their efficient operation and development;
	(b) The CDHB, community and District Council staff are familiar with current provisions, potentially resulting	(b) Potential limitations on benefit to the community due to retention of provisions that are unresponsive to the current and potential future use of the hospital sites and		

Policy and method options to achieve the District Plan objective/s relating to the Rangiora and Oxford hospital sites	Benefits environmental, economic, social and cultural effects anticipated	Costs environmental, economic, social and cultural effects anticipated	Efficiency and Effectiveness	Risk of acting / not acting if there is uncertain or insufficient information about the subject matter of the provisions
	<p>in reduced costs for preparing and processing resource consent applications;</p> <p>(c) May provide greater recognition of residential character and amenity around the hospital sites.</p>	<p>the operational and development needs/demands of the CDHB;</p> <p>Economic: Social: Cultural:</p> <p>(c) Compliance costs associated with imposition of unforeseen and potentially unnecessary restrictions on development of hospital and health care facility and ancillary activities and facilities;</p> <p>Environmental:</p> <p>(d) Limited, non-hospital and health care facility specific range of assessment matters currently available, thereby potentially affecting the relevant matters that the District Council can consider when processing a resource consent.</p>	<p>effective means of providing for current and potential future hospital and health care facility and ancillary activities and facilities and managing their actual or potential adverse effects, particularly on adjacent properties. It also fails to recognise the important contribution these facilities make to the District;</p> <p>(c) This option is also likely to result in less efficient use and development of these facilities and incur more operational and development related compliance costs than the proposed approach.</p>	<p>(c) The risk of acting by retaining the status quo is that the District Plan will not align with the National Planning Standards with respect to a <i>Special Purpose (Hospital) Zone</i>;</p> <p>(d) The risk of acting by retaining the status quo is a lack of clear direction to the community and decision makers in the outcomes expected in respect of the operational requirements of the hospital sites.</p>
Opportunities for economic growth and employment				

Policy and method options to achieve the District Plan objective/s relating to the Rangiora and Oxford hospital sites	Benefits environmental, economic, social and cultural effects anticipated	Costs environmental, economic, social and cultural effects anticipated	Efficiency and Effectiveness	Risk of acting / not acting if there is uncertain or insufficient information about the subject matter of the provisions
	There may be less potential for additional economic activity and employment opportunities, due to the potential for undue restrictions on hospital and health care facility and ancillary activities and facilities on the hospital sites, and additional resource consent requirements, delays, additional compliance costs and uncertainty of outcome.			

8.2 Summary - Evaluation of Proposed Policies and Methods

The proposed policies and methods (Option A) are the most appropriate option to achieve the objective relating to the Rangiora and Oxford hospitals. The benefits of Option A significantly outweigh the costs.

This is because the existing regulatory approach to managing these facilities in the Operative District Plan (Option B) is generic to a Residential zone and lacks sufficient specificity and clarity to effectively and efficiently manage hospital and health care facility and ancillary activities and facilities on the hospital sites. The costs of Option B significantly outweigh the benefits.

Consequently, an alternative approach is proposed (Option A) that more explicitly recognises the specialised nature of hospital and health care facility and ancillary activities and facilities on the hospital sites, and their contribution to the District, and enables more flexible use and development while managing environmental effects.

9. SUMMARY

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

- (a) The ***Special Purpose (Hospital) Zone*** and provisions are in accordance with or give effect to the RMA, the National Planning Standards, and the RPS. The provisions recognise and take into account the Mahaanui Iwi Management Plan 2013. The zones and provisions are generally consistent with the District Plans of adjacent local authorities;
- (b) A specific objective, policies, rules, standards, definitions and matters of discretion enable, provide for or manage hospital and health care facility and ancillary activities and facilities on the Rangiora and Oxford hospital sites, while ensuring that environmental effects are managed;
- (c) The proposed approach will provide direction and guidance to decision makers regarding the intended outcomes for the ***Special Purpose (Hospital) Zone***;
- (d) The proposed approach will sustain the potential of hospital and health care facility and ancillary activities and facilities on the Rangiora and Oxford hospital sites as physical resources for current and future generations, maintain amenity values and quality of the environment, and achieve Part 2 of the RMA.

Overall, it is considered that the set of proposed provisions is the most appropriate given that the benefits outweigh the costs, and there are considerable efficiencies to be gained from adopting the proposed provisions. The risks of acting are also clearly identifiable and limited in their extent.