

24 July 2025

Hutt City Council
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 New Zealand

Delivered by email: district.plan@huttcity.govt.nz

Attention: District Plan Team

Tēnā koutou,

Health New Zealand – Proposed District Plan Further Submission

Further Submitter Name	Health New Zealand Te Whatu Ora (Health NZ)
Primary Submission No	518
Address of Service	land-planning@tewhatauora.govt.nz Attention: Helen Hamilton
Date	24 July 2025

Further Submission Information:

Health NZ has an interest greater than the interest that the general public has, as it made a primary submission on the PDP (S518), and the submission points identified within these further submissions specifically affect Health NZ interests in the Hutt Valley and wider region.

Health NZ could not gain an advantage in trade competition through these further submissions.

The specific original submission points of the PDP that Health NZ further submissions relate to are attached.

Health NZ supports or opposes the specific submission points as listed in the attached table.

The decisions that Health NZ wishes HCC to make to ensure the issues raised by Health NZ are dealt with are also provided in the attached table.

Health NZ wishes to be heard in support of these further submissions.

Erratum:

Health NZ identified the following error in the summary of submissions in relation to its own submission points:

- Submission Point 518.8 – Strategic Direction relates to the *Whole Chapter* (as relevant to considering the appropriate location of the relief sought).

Clarification – Health NZ Landholdings | Hutt Hospital Campus:

Health NZ notes that the SPHZ has been mapped to include land at 67a Pilmuir Street. Health NZ is taking this opportunity to clarify that it no longer owns these landholdings – therefore they are no longer part of the Hutt Hospital Campus. Health NZ expresses no opinion as to their inclusion in the proposed SPHZ.

Ngā mihi nui,

**Paulette Sorensen**

**Group Manager - Land
Infrastructure and Investment**

Attachment 1: Health NZ Further Submission Table

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Submission Points	Submitter Name	Plan Reference	Support / Oppose	Reasons	Relief Sought
PART 1 – INTRODUCTION AND GENERAL PROVISIONS					
246.2	Horokiwi Quarries Ltd	Definitions: “Functional Need”	Oppose in part	Health NZ opposes the relief sought to the extent that it sought unmodified adoption of the definition as notified.	Amend as sought in Health NZ submission
374.3	Fire and Emergency New Zealand				
311.6	Connexa, Chorus, FortySouth and Spark				
442.05	KiwiRail Holdings Ltd				
471.24	BP Oil New Zealand Ltd, Mobil Oil New Zealand Ltd and Z Energy Ltd (the Fuel Companies)				
195.31	Vital Healthcare Property Limited	Definitions: “Health care activity”	Oppose in part	Health NZ opposes the relief sought to the extent that it limits relief sought in amending the definition and delineation of ‘health care activity’ and ‘hospital’ in the PDP and therefore the function, legibility and administration of the SPHZ (and contemporaneous general and	Amend as sought in Health NZ submission

				district wide) provisions in relation to the public health system.	
311.7	Connexa, Chorus, FortySouth and Spark	Definitions: "Infrastructure" and "Regionally Significant Infrastructure"	Oppose in part	Health NZ opposes the relief sought to the extent that it limits relief sought in amending the definition in relation to the public health system	Amend as sought in Health NZ submission
311.10					
399.7	Ministry of Education	New Definition – Additional Infrastructure	Support in part	<p>Health NZ supports the requested relief to the extent that it:</p> <ul style="list-style-type: none"> - Allows for social infrastructure to be included (albeit it needs amendment to inclusively provide for the public health system) - Accords with the approach proposed in the draft NPS Infrastructure that is (at the time of writing) being consulted on as part of the Government's Phase 2 of the RMA Reform programme (acknowledging that the proposed national directions are subject to further change) 	<p>Health NZ has sought relief regarding the definitions on infrastructure and RSI in its primary submission on the PDP. At the time of writing RM reform has not settled the future legislative framework (Phase 3) nor determined the currently draft NPS: Infrastructure prepared under the existing RMA framework (Phase 2).</p> <p>Health NZ seeks decisions that carefully consider the relief sought by Health NZ in conjunction with this</p>

					<p>relief and the transitioning of the RMA system that will become clearer through the hearing of submissions on the PDP. Health NZ supports decisions that appropriately recognise, protect and enable the public health system and result in an appropriately designed and practically functioning PDP (particularly the SPHZ and interrelated provisions).</p> <p>Health NZ acknowledges that relief that differs to that as set out in its primary submission on this (and related) matter(s) may sufficiently achieve the outcomes sought.</p> <p>Health NZ would be pleased to work with Council officers and other relevant submitters –</p>
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					including the Ministry of Education - on collaboratively resolving these matters (this approach would impact the provisions proposed in the SPHZ).
404.01 404.05	New Zealand Defence Force	Definitions: “Infrastructure” “Regionally Significant Infrastructure”	Support in part	Health NZ supports the NZDF’s requested relief to the extent that it is philosophically aligned with the outcomes sought in related primary submission points by Health NZ.	In considering the relief sought the NZDF, careful consideration is given to the related principled position made by Health NZ in relation to the public health system and its own statutory responsibilities under the Pae Ora (Health Futures) Act 2022 (noting the amendment to the Pae Ora Act that was introduced to the House 22 July 2025 that sought to include infrastructure delivery as one of the core objectives [responsibilities] of Health NZ).

					Health NZ also acknowledges the points made in relation to further submission on MoE submission point 399.7 and the potential alternative relief that could deliver the intent of relief sought).
452.9	Wellington Regional Council	New Definition – “maintain / maintenance and repair (in relation to structure or infrastructure or renewable energy...)	Support in part	Health NZ conditionally supports the relief as set out in this further submission.	To the extent that the Hutt Hospital is included in the definition of “infrastructure” (as sought by Health NZ) and the relief sought at this submission point does not unreasonably control or restrict the Hutt Hospital – particularly as it relates to the higher Build Code compliance requirements (i.e. Importance Level 4 for Hospitals) that apply to maintenance and repair of

					the hospital – Health NZ supports the relief sought.
323.013	Enviro NZ	Definition – “Operational Need”	Oppose in part	Health NZ opposes the relief sought to the extent that it sought unmodified adoption of the National Planning Standards definition.	Health NZ seeks a decision that amends the proposed definition as set out in its primary submission.
414.4	Powerco Limited				
374.7	Fire and Emergency New Zealand	Definition – “Operational Need”	Oppose in part	Health NZ opposes the relief sought to the extent that it sought unmodified adoption of the definition as notified.	Health NZ seeks a decision that amends the proposed definition as set out in its primary submission.
442.12	KiwiRail Holdings Limited				
471.46	BP Oil New Zealand Ltd, Mobil Oil New Zealand Ltd and Z Energy Ltd (the Fuel Companies)				

PART 2 – DISTRICT WIDE MATTERS					
374.33	Fire and Emergency New Zealand	Transport – Trip Generation TR-R3	Oppose in part	<p>This relief seeks that the provisions (and presumably Table 8 in the case of FENZ) are retained as notified and/or amended as specified.</p> <p>Health NZ's primary submission sets out the reasoning and relief in the related rules to ensure that unreasonable traffic provisions do not apply to the Hutt Hospital. Health NZ does not control the complex societal reasons why community demand for the public health system exists – instead the provision of the public health facilities like the Hutt Hospital are a service provision – designed to meet evolving needs. Therefore, High Trip Generating Activity Thresholds should not apply to Hospital and related Healthcare Activities activity at the Hutt Hospital as they are not 'at source' (or point of generation).</p>	Health NZ seeks a decision that delivers relief sought in its primary submission – excluding these provisions from applying to the Hutt Hospital in the SPHZ.
385.44 385.47	NZ Transport Agency Waka Kotahi				
399.26	Ministry of Education				
452.66	Wellington Regional Council	Transport – Trip Generation TR-R3	Oppose in part	<p>The relief sought is that the provision is retained as notified for consistency with PRPS Policy CC.2 for High Trip Generating Activities (HTGAs). Health NZ's primary submission sets</p>	Health NZ seeks careful consideration of the relief sought and reasons given by Health NZ in its primary

				<p>out the why public healthcare and hospital activity is not the generator of trips for healthcare (but instead a response to existing need – without which the need / demand will not ‘disappear’ it will disperse in other ways e.g. acute ED visits and at local primary health clinics) – instead there are a complex series of factors not controlled by Health NZ and the provision of public health services. Therefore, the relief sought by Health NZ is not incongruent with policy and policy positions seeking to control the activities that – at source - <i>generate</i> trips.</p>	<p>submission (and the evidence cited in the primary submission as filed in relation to FNDC PDP traffic matters) because it is common to misunderstand what drives health service demand (and therefore trip generation) and impose District Plan controls on public health sector hospitals when they are not the source of trip generation.</p> <p>Note: Health NZ is pursuing this distinction about what complex societal factors generate health services demand in the community in its approach to RM Reform.</p>
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215.04	NZ Helicopter Association	NOISE - Note	Support in part	<p>These submission points seek modification to other clauses of this note – except (c).</p> <p>Health NZ supports the relief sought to the extent that clause (c)– which allows for aircraft (including helicopters) being used for (medical) emergencies – is retained as notified. This allows medical emergency flights to continue to not be controlled by the NOISE provisions of the PDP.</p>	<p>Health NZ seeks that clause (c) is retained as drafted to enable medical emergency flights to operate without being controlled by the PDP.</p>
374.62	Fire and Emergency New Zealand			<p>NOISE – R9 (Noise from Aircraft at helicopter landing areas)</p>	<p>Oppose in part</p>
314.91	Laura Skilton				

PART 3 – AREA SPECIFIC MATTERS					
195.2b	Vital Healthcare Property Limited	HOSZ – Hospital Zone (Whole Chapter)	Support in part	This submission point supports the chapter with no relief sought. Health NZ has sought amendments to the SPHZ provisions and therefore is supportive of the relief to the extent that relief granted does not undermine the relief sought in Health NZ's submission.	Amend the SPHZ provisions as sought in Health NZ's submissions.
449.53 449.57 449.61 449.65 449.69 449.73	Urban Edge Planning Ltd	HOSZ – Hospital Zone (Urban design policies)	Oppose in part	<p>These submission points seek various amendments to urban design policies applying to the SPHZ.</p> <p>In relation to public health, Health NZ's submission provides various information and context about public health service demand / service provision / funding and the statutory responsibilities of Health NZ under the Pae Ora (Healthy Futures) Act 2022 (Pae Ora Act). Furthermore, on 22 July 2025 an amendment to the Pae Ora Act was introduced to the House that – amongst other things – introduces an infrastructure delivery objective as one of the core responsibilities of Health NZ.</p> <p>Health NZ is funded to meet its statutory functions regarding infrastructure and public</p>	In relation to public health service provision within the SPHZ, Health NZ seeks that decisions remove extraneous SPHZ provisions – such as those imposing urban design expectations on public health infrastructure like the Hutt Hospital.

				<p>health service provision to meet community needs. Funding decisions regarding the Health Estate (including the Hutt Hospital) are driven by community need, operational / functional requirements, safety, accessibility and cost-effectiveness – urban design outcomes are not an objective / core function of Health NZ, and it is not appropriate for public sector health funding to be required to be diverted away from health service provision to meet urban design aspirations. Health NZ is not opposed to urban design outcomes by the appropriate agencies and landowners – simply Health NZ is required to meet its core statutory functions and responsibilities and prioritise its funding for health sector outcomes.</p>	
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