

**BEFORE THE CHRISTCHURCH REPLACEMENT DISTRICT PLAN
INDEPENDENT HEARINGS PANEL**

IN THE MATTER: of the Resource Management Act 1991 and the Canterbury Earthquake (Christchurch Replacement District Plan) Order 2014

AND

IN THE MATTER: of the Proposed Christchurch Replacement District Plan (Proposal 14: Residential)

SUBMISSION: The Order of St John, South Island Region Trust Board (Submitter 785)

STATEMENT OF EVIDENCE OF ROCHELLE KIM HARDY

20 MARCH 2015

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1. INTRODUCTION AND QUALIFICATIONS

1. My name is Rochelle Kim Hardy. I hold the qualifications of a Bachelor Arts (Art History) from Canterbury University and a Master of Science (Integrated Environmental Management) from Bath University. I am an associate member of the New Zealand Planning Institute.
2. I have been employed by Aurecon New Zealand Limited since 2013 and hold the position of Senior Environmental Planner.
3. I have sixteen years' experience in resource management both in the public and private sector. During this time I have undertaken consenting work and completed assessments of environmental effects for large and small-scale projects for a range of activities and clients. I have provided advice on regional and district plan reviews for the private and public sector. I have also worked in recovery planning in a previous role with the Canterbury Earthquake Recovery Authority and provided strategic advice on integrated land use and transport planning here and in Australia.
4. I have been engaged by The Order of St John, South Island Region Trust Board (St John) to assist in its review of the Christchurch Replacement District Plan (the Replacement Plan) Proposals. In this capacity I have:
 - a. assisted with the preparation of St John's submission;
 - b. engaged with the Canterbury Recovery Authority (CERA) on relief sought;
 - c. engaged with the New Zealand Fire Service (NZFS) on relief sought;
 - d. attended mediation with CCC on 18 March 2015.
5. I am familiar with St Johns role and responsibilities, having provided planning advice to St John for the past 12 months. I also have a good understanding of emergency service responsibilities and operations in general as I provide planning advice to NZFS with regard to its network redevelopment programme in Christchurch and their volunteer services in Canterbury.

2. CODE OF CONDUCT

6. I confirm that I have read the Code of Conduct for Expert Witnesses contained in the Environment Court's 2014 Practice Note. I have complied with the Practice Note when preparing my written statement of evidence and will do so when I give oral evidence before the hearings panel.

7. My evidence is within my area of expertise, except where I state otherwise. I have not knowingly omitted to consider material facts of information that might alter or detract from the opinions that I express. I am familiar with the Code of Conduct for Expert Witnesses and I agree to comply with this code.

3. SCOPE OF EVIDENCE

8. I have been asked to present planning evidence on behalf of St John on its submission to the Chapter 14 – Residential Proposal of the Christchurch Replacement District Plan.
9. I first provide background to St John and its role as an emergency service and health service provider; the impacts of the Canterbury Earthquakes on its facilities; and its planned network redevelopment and reconfiguration.
10. My evidence then addresses St John's submissions on Proposal 14 and subsequent track changes provided by CCC, with specific reference to rules regarding ambulance stations and emergency services in residential zones.
11. In preparing this evidence I have reviewed the following:
 - a. Land Use Recovery Plan (LURP);
 - b. Resource Management Act 1991 (RMA);
 - c. Canterbury Earthquake (Christchurch Replacement District Plan) Order in Council 2014;
 - d. Hearing Panel's decision on the Strategic Directions Chapter; and
 - e. The submission of the New Zealand Fire Service¹;
 - f. Parts of the Section 32 Evaluations;
 - g. Residential Proposal (as notified) and the track-change version dated 9 March 2015.
12. I have read the Proposal 14 evidence of
 - a. Adam Blair, for Christchurch City Council, and
 - b. Andrew MacLeod, for Christchurch City Council, and
 - c. Evidence of other submitters presented during the Strategic Proposal hearing notably that of Ms. McLeod and Mr. Merry of the New Zealand Fire Service.

¹ I note that I co-authored the submission of NZFS on the DPR Proposals and was involved in early engagement with the Crown on the same.

4. EXECUTIVE SUMMARY

1. The Order of St John established in New Zealand in 1885. The provision of ambulance services remains a core activity and St John provides approximately 90% of ambulance services in New Zealand.
2. St John is developing a 'hub and spoke' model for its network of operational facilities, and is committed to a rebuild programme and property strategy to ensure it will be closer to patients and their homes, and continue to be able to respond and care for our community in their time of need.
3. It is critically important for St John to remain flexible and responsive to community needs. St John has an integral role in the health sector, and as such needs to have a collaborative and flexible approach to buildings and locations.
4. In its submission St John sought better recognition of, and provision for, emergency services including a permitted activity status for emergency service facilities in all residential zones.
5. I consider the relief sought in St John's submission, and through subsequent mediation is appropriate and necessary to achieve the Objectives included in the Strategic Directions and provide a policy approach that appropriately provides for emergency service facilities in residential zones.
6. The framework **agreed in mediation** includes the retention of permitted activity status for emergency service training facilities in residential zones and a single activity status for emergency service facilities in all residential zones.

5. RESIDENTIAL PROPOSAL

5.1. Background to the Submission by St John

7. The Order of St John established in New Zealand in 1885 and is now one of the largest civilian service organisations in New Zealand. Although St John provides a broad role in healthcare, the provision of ambulance services remains a core activity and St John provides approximately 90% of ambulance services in New Zealand.
8. The emergency ambulance services facilities in Christchurch were significantly affected by the Canterbury Earthquakes. In addition, shifts in population and changing community needs continue to impact the emergency service. St John needs the flexibility to respond to population changes and provide a network of stations that meet the health and safety needs of the Christchurch community. An enabling planning framework will obviously provide some of this flexibility.

9. St John is currently based in a number of temporary locations across Christchurch. The only permanent base remains the ambulance station at Redwood. St John Central City site has been demolished. Part of the site has been redeveloped as a Training Hub for both the Clinical Development team (who oversee training of Ambulance personnel) and the St John Training team (who provide first aid training to the public and organisations).
10. As the Panel is aware, St John will be one of the agencies located in the new Christchurch Justice and Emergency Services Precinct. I note that the Precinct will accommodate senior management and administration staff, the Ambulance Communications Centre, and be the regional headquarters for St John South Island Region. Ambulances will not be based at the Precinct.
11. It is critically important for St John to remain flexible and responsive to community needs. St John has an integral role in the health sector, and as such needs to have a collaborative and flexible approach to buildings and locations allowing the organisation to operate in a way which is best for patients, best for colleagues in the health sector and other emergency services, and therefore best overall for the community.
12. St John is implementing a 'hub and spoke' model for its network of operational facilities, and is committed to a \$7.7 million rebuild programme and property strategy in Christchurch. This will ensure St John is closer to patients and their homes, and can continue to respond and care for our community in their time of need.

1. ST JOHN'S SUBMISSION TO THE RESIDENTIAL PROPOSAL

13. In the context of Proposal 14 as notified, St John sought:
 - a. a policy approach that appropriately provides for emergency service facilities in residential zones;
 - b. the retention of permitted activity status for emergency service training facilities in residential zones;
 - c. permitted activity status for emergency service facilities in all residential zones (and defaulting to restricted discretionary status where built form standards cannot be met).
14. I acknowledge the considerable progress made through the hearings and decisions on the Strategic Directions and Strategic Outcomes Proposal. The Strategic Outcomes and Strategic Directions confirm the importance of emergency services through a

specific objective and provide clear direction on the requirements to provide for and enable these community facilities.

15. The decision version of the Strategic Directions and Strategic Outcomes proposal include clear objectives relating to community facilities (including emergency services) (in particular, Objectives 3.3.1 and 3.3.11).
16. Objective 3.3.11 explicitly supports the recovery and re-establishment of community and education activities in existing and planned areas to meet community needs. In my opinion these strategic objectives are not fully reflected in the Residential Chapter (notified and proposed changes version).

2. OBJECTIVES AND POLICIES

17. In its submission, St John expressed concern with the objectives and policies for non-residential activities, and particularly emergency service facilities. St John sought amendments to the objectives and policies to recognise the necessity of emergency services in residential zones.
18. St John's submission was consistent with that of the New Zealand Fire Service. St John is satisfied that the critical importance of emergency services is now included in the Strategic Directions and Strategic Outcome Chapter following hearings on these matters.
19. I consider this outcome to provide sufficient reasoning to seek specific objectives and policies in the residential chapter.
20. The need for this broader recognition of emergency services was discussed at mediation with the CCC on 18 March 2015. Subsequent dialogue with the Crown and a number of other submitters has sought to revise the relevant objectives and policies.

Objective 14.1.7 – Non-Residential activities

21. During mediation it was agreed that Objective 14.1.7 could be improved to differentiate between community facilities that are 'typical' of residential areas, and those that are less appropriate, or more intensive.
22. I agree that community facilities such as emergency service are generally expected and necessary in residential areas.
23. Unfortunately, due to time constraints the draft amendments could not be finalised and agreed amongst the parties. I expect to continue to work with CCC, the Crown and other submitters to agree an appropriate and effective policy and rule framework.
24. Attachment A provides a draft version that would be acceptable relief for St John.

Policy 14.1.7.2 – Local community facilities and services

25. With regard to the 9 March version of the Proposal, I consider the amendments to Policy 14.1.7.2 go some way to addressing the need to enable and relocate community facilities and services in residential areas.
26. St John services are not limited to the ‘local’ community. St John may be required to respond to emergencies in other areas, or in the case of civil emergencies as experienced during the Canterbury Earthquakes.
27. I uphold that the term ‘local’ should be removed from the policy title, as this is inconsistent with the Policy itself which includes local and “wider community needs”.

Policy 14.1.7.2A – (New Clause)

28. It is my understanding that the aim of proposed new policy 14.1.7.2A is to recognise the appropriateness of certain non-residential activities, including emergency services.
29. Based on the dialogue during mediation it would seem appropriate that Policy 14.1.7.2A remains focussed on enabling community facilities rather than listing adverse effects of the associated activities. My reasoning for this is that the effects listed are matters addressed in specific objectives and policies and rules in Proposal 14 and other Chapters of the Replacement Plan.
30. The Panel has clearly stated that it “anticipates that it [Objective 3.3.13 - Emergency services and public safety] will be reflected in associated Plan policies and rules, in relevant chapters of the Plan. I consider it appropriate to reword the Policy to emphasise certain community facilities are typically found in, and required by, residential areas.

31. Policy 14.1.7.3 – Existing non-residential activities

32. In its submission, St John sought the deletion of Policy 14.1.7.3 on the basis that the Policy provides little certainty on what aspects of redevelopment will be limited.
33. Following mediation on 18 March, I believe there is some merit in retaining this policy to support the revised Objective 14.1.7, and, more specifically, to provide for the redevelopment of community facilities such as emergency services. I also consider these changes would support the intent of *Objective 3.3.13 - Emergency services and public safety* by allowing **recovery of, and provision for, comprehensive emergency services throughout the city.**

2.1. Rules

34. St John's submission sought the retention of permitted activity status for emergency service training activities as included in the notified Proposal and set out in the activity status tables that apply to the residential zones². The same relief is also sought by the New Zealand Fire Service ("NZFS").
35. St John also sought permitted activity status for "emergency service facilities" in all residential zones.
36. On 3 March 2015 Mr Blair (CCC) contacted me to discuss inclusion of ambulance stations as a permitted activity in the track change version. This is reflected in the 9 March 2015 version which includes "ambulance stations" as a permitted activity and includes a new definition of the same. I note that separate provisions have also been made for Fire Stations.
37. I have considered the merits of the activity specific standards in the 9th March version that apply to ambulance stations and fire stations and discussed this with NZFS and Mr Blair during mediation. I have also discussed the split provisions for emergency services (one for ambulance and one for fire stations) with Ms McLeod and Mr Merry for the NZFS, on behalf of St John. It was concluded that a more consistent approach would be to include a single permitted activity (emergency services) as per submissions from both organisations and the Crown. This was presented at the mediation and considered an acceptable approach by Mr Blair.
38. I consider the single status more appropriate for three reasons:
1. It is consistent with *Objective 3.3.13 - Emergency services and public safety*
 2. It is generally more supportive of the co-location of facilities, as per *Objective 3.3.11 – Community facilities and education activities*
 3. It is more consistent with the *Statement of Expectations* with regard to reducing prescriptiveness of development controls
39. The single activity approach provides for consistent treatment of emergency service facilities.
40. I have also considered the evidence of Mr Macleod. I agree with his comments that the changes from the notified version of the chapter, with the listing of various non-residential activities as permitted activities across the chapter, are more enabling.

² Rule 14.2.2.1(P11), Rule 14.2.3.1(P11), Rule 14.4.2.1(P9), Rule 14.5.2.1 (P9) and Rule 14.6.2.1(P10).

41. I also agree that non-residential activities require appropriate controls in order to avoid adverse effects on residential activities, and primacy is given to residential activities in these zones. Accordingly, I have considered whether the standards in the 9 March version, or any other standards, would be necessary or appropriate. It is my opinion that the effects of emergency service facilities, particularly in terms of the scale and intensity referred to by Mr Macleod, can be appropriately managed by the Built Form Standards that apply to the residential zones.
42. Further, I do not consider the standard restricting siren usage to be necessary or appropriate. Ambulance drivers avoid using sirens between the hours of 10.00pm and 7.00am in residential areas, unless traffic volumes necessitate the need to use such warning devices. On average, only 40% of ambulances have the siren on when leaving the site.
43. With regard to appropriateness, the use of sirens is permitted under the Land Transport (Road User) Rule 2004, which includes an exemption under 7.4. Noise³. Furthermore, the Replacement Plan will address issues relating to noise under the General Rules Proposal (where appropriate).
44. On this basis, I consider it reasonable to exclude any standards from these activities and rely on provisions contained in built form standards and other relevant Chapters.

3. CONCLUSION

45. I consider it appropriate to include an objective and policy framework in Proposal 14 that recognises the importance of community facilities in residential areas, while distinguishing them from those that are less appropriate or more intensive.
46. I consider a single activity approach provides for consistent treatment of emergency service facilities. In my view, this approach is appropriate and necessary given that it provides or supports co-location of facilities, (Objective 3.3.11), reduces duplication and prescriptiveness of development controls, and provides for emergency services and public safety (Objective 3.3.13).



Rochelle Kim Hardy, 20 March 2015

³ **Section 7.4 Noise**

(4) Without limiting any enactment other than this rule, the following are authorised:
(a) the use of sirens fitted to emergency vehicles being used on urgent occasions...

ATTACHMENT A: RELIEF SOUGHT- PROGRESS AS AT 20 MARCH 2015

Objective 14.1.7 Non-Residential and Community activities

~~Residential activities remain the dominant activity in residential zones and any non-residential activities meet only local community needs and are compatible with, and can be accommodated within, residential areas while providing for:~~

- ~~a. Providing for community facilities non-residential activities, which by their nature and character are anticipated within residential zones,~~
- ~~b. Ensuring that the level of amenity that exists in residential areas is retained by avoiding, remedying or mitigating the adverse effects of more intensive non-residential activities.~~

14.1.7.2A

~~Recognise that schools, community facilities support activities, and emergency services, which may have adverse effects including traffic generation, car parking and noise, typically need to be located in residential areas.~~

14.1.7.3 Policy – Existing non-residential and community activities

~~Enable existing non-residential and community activities to continue and enable limit further onsite redevelopment of non-residential activities and expansion provided the effects on residential coherence, character and amenity are avoided, remedied or mitigated.~~

For all residential zones:

Activity		Activity Specific Standard
P27	Fire stations	a...
P28	Ambulance Stations	a...
<u>PXX</u>	<u>Emergency Service Facilities</u>	<u>NIL</u>