

Feedback to Fast Track Expert Panel - Ōhoka Residential Subdivision

Contact Details:	
Organisation name	Ministry of Health
Name	Suz Halligan, Chief Advisor (Environmental and Border Health)
Work phone	██████████
Email	██

Purpose of report

1. This report provides public health advice relating to the application for resource consent for the Ōhoka Residential Subdivision under the Fast-track Approvals Act 2024.

Summary

2. The application is to develop 152 hectares into approximately 879 residential allotments, and allotments to accommodate a retirement village, a commercial/mixed use centre, a school, recreational facilities and associated infrastructure. The development also includes a 7.5-hectare allotment for a polo ground, supporting access lots, and land to be vested for roading, reserves, and utility purposes.
3. This project has implications for the wider determinants of health and for the capacity of local infrastructure and services. This feedback is to ensure that public health is considered alongside environmental, planning and economic factors.
4. For this proposal to provide an environment that can successfully function as a community and have good health outcomes, it needs to consider the following aspects:
 - a. construction public health effects
 - b. air quality
 - c. biodiversity
 - d. stormwater
 - e. drinking water, waste collection and wastewater
 - f. transportation
 - g. natural hazards
 - h. contaminated land.
5. The National Public Health Service as a part of Health New Zealand were consulted and contributed regional public health considerations to this briefing.

Context

6. Good planning creates places that support health, wellbeing, productivity and resilience by shaping housing, transport, infrastructure, environmental quality, access to services and opportunities for social and cultural participation.

7. How developments are located, designed and integrated are key aspects that impact health. Health-oriented urban planning also delivers multiple co-benefits by reducing disease burden, health inequities and demand on health services, strengthening social cohesion, climate mitigation and resilience, protecting ecosystems, enhancing mobility and safety, and creating more inclusive, productive, and liveable communities. (see appendix for summarised evidence impact table).
8. Appendix 1 provides the health impacts related to urban and rural planning decisions.

Ōhoka subdivision proposal

9. The application is to develop approximately 879 residential allotments, a large allotment for a retirement village, and two super lots to accommodate a small local centre over an area of approximately 1.5 hectares. The development also includes a 7.5-hectare allotment for a polo ground, supporting access lots, and land to be vested for roading, reserves, and utility purposes.

Public health considerations for the Ōhoka subdivision proposal

10. Well-functioning urban and rural environments can positively shape the conditions in which people live, work, learn, travel and participate in community life.

Drinking-water

11. The Groundwater and Water Supply Assessment concludes that the development can be serviced by a new deep community water supply (beyond Stage 1 of the subdivision which would connect to the existing supply), with up to approximately five new deep bores anticipated to meet future demand. However, the site's shallow groundwater and groundwater discharge characteristics need to be considered.
12. Other public health concerns that require consideration and mitigation are:
 - a. contamination of groundwater during earthworks
 - b. contaminant mobilisation from contaminated soils
 - c. bore contamination during drilling
 - d. effects of dewatering on private and community water supplies
 - e. long-term effects on groundwater flow paths.
13. Contamination of a community drinking-water supply has the potential to expose the local population to a range of contaminants such as pathogens, chemicals, metals, or hydrocarbons. This risk will need to be managed appropriately.

Wastewater

14. Effluent is proposed to be reticulated to the Rangiora Wastewater Treatment Plant (WWTP) via a local pressure sewer network. All new lots will be supplied with appropriate connections to the wastewater mains.
15. The proposal relies on:
 - a. connection to the Rangiora WWTP
 - b. a new pump station

- c. low-pressure sewer systems
 - d. shared network infrastructure.
16. Ongoing assessment of the wastewater servicing capacity is required to ensure it is sustainable given that the proposed development will substantially increase the wastewater loading in the network.
 17. The Assessment of Environmental Effects (AEE) acknowledges the existing system experiences surges during rare groundwater resurgence events. These surges also need to be considered during the planning phase of the development.

Stormwater

18. Stormwater management will be undertaken using primary and secondary networks and stormwater management areas. Treatment and ongoing monitoring will be in place. The proposed infrastructure is extensive and will likely represent an improvement over current dairy farming nutrient and E.coli inputs into the local ecosystem.
19. During the construction phase, there is a risk that sediment-laden stormwater runoff from exposed earthworks, stream modifications, dewatering activities, and disturbed contaminated soils could enter nearby drains, wetlands, and spring-fed waterways. This will result in increased turbidity, reduced water quality, and potential contamination of receiving waters.
20. These risks will need to be managed appropriately, especially given the site's shallow groundwater and the potential risks that contamination poses to down gradient drinking-water supplies.

Contaminated land

21. Detailed site investigations have identified localised contamination associated with existing and former buildings, burn piles and a historic rail yard. Overall, the reports conclude that the site is suitable for the proposed development subject to a remediation action plan, appropriate management of identified hotspot soils, and subsequent site validation.
22. **Recommendation:** Ensure the proposed Remediation Action Plan, management of identified hotspot soils, and Site Validation Reports are undertaken, and that appropriate remediation of the site is carried out prior to residential occupation.

Flooding

23. A flood report has been commissioned to assess the flood effects of the proposed development. The assessment utilises hydraulic modelling that was calibrated and validated against three significant historical flood events within the area to assess potential flood events under pre-development and post-development conditions.
24. This modelling indicates relatively low flood hazard across the site and limited offsite effects. Finished floor levels and stormwater infrastructure are proposed to manage flooding risks.

Transportation

25. We note that Ōhoka subdivision on Mill Road currently does not have any public transit stops or routes. Consideration should be given to ensuring a fit-for-purpose transport infrastructure across all modes (including walking, cycling and public transport) to both promote and protect public health outcomes.

Community resilience and infrastructure

26. Community resilience should be considered, given that the proposed development could introduce approximately 2000 new residents and up to 250 retirement village units to the area.
27. Potential effects include increased demand for:
 - a. primary healthcare
 - b. aged care support
 - c. mental health services
 - d. pharmacies
 - e. emergency services.
28. The AEE does address some community resilience and infrastructure issues but provides limited discussion around health service capacity. The implications for health service capacity need to be taken into account.

Additional construction phase concerns

29. The other construction-phase public health risks associated with the proposed subdivision relate to dust, traffic safety, and noise for neighbouring properties.
30. None appear unmanageable, but they will require active monitoring, compliance oversight, and appropriate conditions to ensure the potential impacts are acceptable.

Appendix 1 – Health impacts related to urban and rural planning¹

Urban and rural environment	Health Impact
Housing quality (warm, dry, ventilated housing)	Reduces asthma, respiratory illness, infectious disease transmission, injuries, and exposure to mould and dampness.
Walkable, compact neighbourhoods	Supports physical activity and active travel, reduces stress associated with long commutes, supports mental wellbeing.
Connected local amenities and services	Improves access to healthcare, recreation and daily needs, and supports physical and mental health.
Inclusive public spaces	Promote physical activity, social interaction, mental wellbeing and health equity.
Age-friendly urban environments	Supports healthy child development, healthy ageing, mobility and social participation.
Child-friendly urban environments	Supports healthy child development, physical activity and lifelong health trajectories.
Public transport-oriented development	Promotes active travel, reduces sedentary behaviour and transport-related air pollution exposure.
Vision Zero road design	Reduces road traffic injuries and fatalities.
Reduced traffic noise exposure	Lowers risks of cardiovascular disease, sleep disturbance, and cognitive impairment.
Air pollution reduction measures (e.g. public transport, emission controls)	Reduces cardiovascular disease, chronic respiratory disease, lung cancer, asthma and COPD.
Green and blue spaces	Improved mental health, prevention of cardiovascular disease, stress reduction, reduced exposure to heat and contributes to healthier ecosystems.
Urban tree canopy and green corridors	Improves air quality, mitigates heat exposure, supports physical activity and wellbeing.
Nature-based solutions and climate-resilient design	Reduces heat-related illness, climate-related risks, and supports mental and physical health.
Safe drinking water, sanitation and wastewater management	Reduces diarrhoeal disease, hepatitis A/E, and other water-borne diseases.
Urban food systems and healthy food access	Reduces obesity, Type II diabetes and nutrition-related NCDs, and addresses food insecurity and malnutrition.

¹ Reference: Integrating Health in Urban and Territorial Planning: [A Sourcebook \(World Health Organisation\)](#)