
COLVILLE COMMUNITY FACILITIES PROJECT

FEASIBILITY STUDY REPORT

Prepared for
Management Team
Colville Community Facilities Project

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April 2017



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EXECUTIVE SUMMARY

This document is a report of a feasibility study carried out between October 2016 and April 2017, by Momentum Research and Evaluation Limited for the Colville Community Facilities Project (CCFP).

BACKGROUND

The Colville Community Health Trust (CCHT) and the Colville Social Service Collective (CSSC) are two trusts based in Colville who provide services to the Northern Coromandel Peninsula. The Trusts are working together to progress the development of a community facility or facilities to “address the health and wellbeing, housing, education, and recreational needs” of the communities of the Northern Coromandel Peninsula.

FEASIBILITY STUDY

As part of progressing the facility development, a feasibility study was commissioned. The aim of the feasibility study, which had 13 research areas and 43 research questions, was to *collect, collate and report on information regarding the feasibility of the proposed building developments*. The feasibility study included:

- analysis of Census statistics, demographic data, websites and documents;
- four community workshops attended by a total of 119 people;
- a community survey completed by 115 people;
- face to face and phone interviews with 31 people from the community and 17 stakeholders from inside and outside of the community;
- a focus group interview and survey with 20 children and young people and an online survey of 11 young people from the community;
- surveys of 18 users groups, 12 potential users groups and 8 medical students who had completed placements at Colville Community Health Clinic (CCHC);
- a survey of 64 visitors to the area;
- a meeting with 8 staff and trustees from the local school and three meetings with CSSC, CCHT and CCHC staff, trustees, and Project management team members.

OVERALL FINDINGS

The overall finding of the feasibility study was that the CCFP is a feasible solution to the identified demographic and isolation needs in the area.

The Northern Coromandel area is one of high need with a New Zealand Deprivation Index (NZDI) score of 8 and the current health and social services, whilst valued and valuable to the community, are operating from less than ideal premises. There is evidence that the needs in the area will continue to increase as the population ages and the opportunities for the younger generations such as employment and housing continue to decrease.

If enabled, the CCFP would allow people of all ages to stay in the community, provide for the needs of the community and strengthen the economic and social fabric of the community. It would meet the current and future needs of all ages and stages, by providing infrastructure and access to health and wellbeing services, including medical services, education and employment opportunities, social services and housing and accommodation options. As well, as the local iwi work towards finalising of Treaty

settlements, this project has the capacity to include and work with iwi towards meeting their own aspirations.

There is significant support for the project from the community and other stakeholders, with no known resistance at this stage. The two Trusts, CSSC and CCHT, who have a Memorandum of Understanding (MOU) for the CCFP, are both well established and held in high regard by the community and findings show that the Project is being well-planned and well-managed with clear direction and feasible timeframes.

The Project fits within a number of local and national policies and strategies across a range of sectors. The Project would be an ideal exemplar project for, for example, Health to showcase their *Future Direction* strategy and how its aims and strategic themes could be put into practice in a remote rural setting. At the local District Health Board (DHB) level, the CCFP would be ideal for trialing a number of the Waikato DHB strategic plan priorities. As well, supporting the Project would enable the Thames Coromandel District Council (TCDC) to demonstrate meeting a number of the aims, aspirations and visions in their various plans and strategies.

The next steps for the CCFP are to finalise a site or sites for the facilities in order to progress to the next stages of development planning, financial planning and consents processes, and as well as to continue to consolidate support and funding.

EXTENDED SUMMARY OF KEY FINDINGS

The following is a summary of the key findings specific to each of the 13 research areas.

Areas to Address	Key Findings
The Trusts' backgrounds, aims and objectives and how they are working together.	<p>CCHT and the CSSC are two well-established trusts with a history of working together who are based in Colville Village and provide health and social services to the Northern Coromandel Peninsula.</p> <p>ABOUT CSSC</p> <ul style="list-style-type: none"> ➤ Established in 1997. ➤ Vision: 'communities in the Northern Coromandel Peninsula which are strong, vibrant and supportive, despite isolation.' ➤ Mission: 'to enable a range of services and opportunities to ensure the continued wellbeing/hauora of the communities of the Northern Coromandel Peninsula.' ➤ Has eight staff (3.87 FTEs) with another part-time (.6 FTE) position due to be filled; ➤ Has a Trust of five trustees who are all volunteers. ➤ Provides the following services: a community newsletter; a drop in centre for advice and information; an 'op shop', a library; access to phone, internet and computers; a meeting space (caravan) for hire; a youth group; an older persons' support group; and co-ordination of community events and festivals. ➤ Is the lead agency and/or in partnership with other organisations for the following projects: Colville Harbour Care; Colville and Beyond; Colville Village Water Supply; Cape Colville Community Buffer; and Community Development projects. <p>ABOUT CCHT</p> <ul style="list-style-type: none"> ➤ Established in 2005. ➤ Vision: 'A strong, healthy, vibrant, safe supportive and knowledgeable community, that is self reliant.' ➤ Mission: 'To provide health and wellness focused services and facilities, which meet the needs of Colville; that are holistic, accessible, people friendly, sustainable and progressive.'

Areas to Address	Key Findings
	<ul style="list-style-type: none"> ➤ Role: to prioritise, fund purchase and manage infrastructure to allow a viable medical practice and health services to operate; that is the community, via the CCHT, provides the infrastructure (e.g. equipment, vehicles, buildings) and the various health services lease what they need to operate (e.g. workspace, equipment, vehicles) from the CCHT. ➤ Has two part-time employees to undertake the day to day running of the Trust. ➤ Provides the following services: Colville Community Health Centre (CCHC); Colville Rural Nursing (CRN); St John's First Response and PRIME¹; Naturopath; Massage Therapist; Medical Herbalist; Herbal dispensary; Visiting specialists; and IV treatment options (e.g. fluids and antibiotics). <p>Currently both CSSC and CCHT lease privately-owned houses within Colville Village from which they operate. Both facilities are not purpose-built and are not 'ideal' working spaces, and both services are 'out growing' the spaces they are in.</p> <p>WORKING TOGETHER</p> <p>In 2016 the two Trusts entered into a partnership to progress the building development project (the Project). A MOU between the two Trusts was signed in 2016 and the CCFP was born.</p> <p>The feasibility study identified that the visions of the Project and the two Trusts are well-aligned and that the Project will support and strengthen the capability of the two Trusts to meet their own visions for their communities.</p>
The proposed project, uses and users of the facilities.	<p>The proposed project is to build a community facility of facilities that "enables the provision of a range of health, welfare and education services" to the Northern Coromandel communities.</p> <p>The proposed use of the facility or facilities is a community facility which will house the existing community health and social service providers, and provide space for other practitioners and services to meet identified community needs. The Project also includes the development of social and/or community and affordable housing, and accommodation options for students, staff, visiting practitioners and respite care.</p> <p>The proposed users of the facilities are: service providers who are currently providing services from the CCHT and CSSC; other service providers who would be able to offer services in the area, if there was the facility to do so; and community members and/or visitors who make use of the services that are offered.</p>
The Project vision, aims and objectives and whether it is understood by the trustees.	<p>The vision for the Project is: 'Northern Coromandel communities that have the infrastructure to support the provision of services and opportunities which contribute to their long-term wellbeing and sustainability.' The mission is: 'To develop and build community facilities which enable ongoing community access to a wide range of services and accommodation options.'</p> <p>In terms of aims and objectives, the CCFP MOU outlines goals and stages for the Project which include: supporting the feasibility study; raising awareness and support for the facility; achieving funding; constructing the facilities and ensuring a long term management plan.</p> <p>There is evidence from written documentation and interviews that the Trustees are aware of, understand and are committed to, the vision, mission and aims and objectives of the proposed project</p>

¹ PRIME (Primary Response In Medical Emergencies).

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The Project outcomes and link with Trusts' outcomes.	The overall outcome that the Project is aiming for is to build a community facility or facilities that "enables the provision of a range of health, welfare and education services" to the Northern Coromandel communities. There is evidence that the two Trusts are in agreement that this outcome is one which is complementary to their own outcomes.
Strengths and capacity of the Trusts to deliver the Project.	The Trusts have the capacity to undertake this Project. The trustees of both CCHT and CSSC have a mix of relevant skills and experiences, strong links and relationships with key agencies and supporters and an MOU which provides a framework for the relationship between the Trusts.
Identified conflicts of Interest	The visions, missions, goals and desired outcomes of the Trusts are in sync with those of the Project, and there are no known conflicts of interest between Trusts, service providers and/or the various local community groups and organisations, that would adversely affect the Project.
Evidence to support the need for the Project including the geographic area, iwi, demographic trends, the nearest similar facilities, community stories, service provider stories and whether the Project will meet the identified needs.	<p>GEOGRAPHIC AREA</p> <p>The Project area, the Northern Coromandel is situated at the top half of the Coromandel Peninsula, in the Thames Coromandel District, part of the Waikato Region. The area that the Trusts service is from Papa Aroha on the west coast, north to Port Jackson and Port Charles and down to Tuataewa on the east coast</p> <p>Iwi</p> <p>The Northern Coromandel area is within the rohe of Hauraki iwi. The iwi of the Hauraki Collective are still working through the Treaty settlement process which is likely to become finalised within the next few years. The implications for the current Project are that the final settlement/s are very likely to include Moehau maunga and other areas within the Northern Coromandel, and as such it is important that the Project recognises and takes into account what this may mean for the community and the uses for which the facilities may be needed, both now and into the future.</p> <p>DEMOGRAPHICS</p> <p>The 2013 Census and other statistics paint a picture of the Northern Coromandel as an area of high deprivation, a higher than average older population, a decreasing younger working age population, lower median incomes, a higher percentage in part time, rather than full time work and a lack of access to telecommunications. There is a high percentage of unoccupied dwellings and the area is subject to peak population increases which place pressure on infrastructure. Recent studies indicate that there is a lack of affordable housing in the area and that the quality of the available rental accommodation has decreased over time.</p> <p>SIMILAR FACILITIES</p> <p>There are no other primary care health clinics or social service facilities in the Project area. There is no social housing or community housing in the Project area, and the accommodation that is there, is subject to availability. The next nearest service centre which has similar facilities is Coromandel town which is a significant distance away from the area, over less than ideal roads. The nearest secondary care health service is Thames Hospital, 109 kilometres (2hrs 22mins drive) from Port Jackson or 98 kilometres (2hrs 9mins drive) from Port Charles. Tertiary health services are provided by Waikato Hospital in Hamilton and/or Auckland. Waikato Hospital is 211 kilometers (3hrs 42mins drive) from Port Jackson or 201 kilometres (3hrs 30mins drive) from Port Charles.</p> <p>COMMUNITY STORIES</p> <p>Overall the findings from the community, youth and visitor workshops, surveys, meetings and interviews indicates that the Northern Coromandel area is one which people enjoyed living in or visiting due to the beauty of the natural environment and the activities that are available. Despite the positive opportunities the area is also recognised as having</p>

Areas to Address	Key Findings
	<p>significant needs in the areas of health, housing, employment, social and personal wellbeing, education and access to telecommunications.</p> <p>Stories highlighted issues of location and distance, having to travel for medical appointments, a lack of sufficient employment opportunities, limited and/or sub-standard housing options, a lack of social and affordable housing, slow or limited internet access, lack of cell phone coverage and a lack of social, education, training and professional development opportunities for all ages.</p> <p>Whilst the health and social services that are currently provided by the CCHT, CCHC and CSSC are highly valued by the community, stakeholder and visitor respondents and interviewees, there is the view that more is needed and that the facilities that the groups are operating from need improvement for the benefit of both staff and service users.</p> <p>SERVICE PROVIDER STORIES</p> <p>Overall, the findings from user group and student surveys, stakeholder interviews, observations and documents indicate that the current CCHT and CSSC facilities are far from ideal and that the current users essentially 'make do' and 'work around' the limitations in order to provide the services they do.</p> <p>The observation and document review highlighted specific challenges for remote rural services such as extra costs to access training and the need to ensure that staff have the requisite skills to manage a variety of medical situations. The peak population of visitors also puts a strain on the infrastructure of the current health services which are not fully funded to meet this need.</p> <p>Feedback from the medical students indicated that they valued the learning opportunities, the knowledge and the approachability of staff at the CCHC, however the provision of more suitable facilities, larger spaces, reliable internet access and accommodation options would greatly enhance the students' learning opportunities.</p> <p>The majority of potential user groups who were surveyed indicated that they would consider providing services and/or using the proposed facility to promote their organisation hold meetings, and provide training and activities for all ages. In terms of the proposed new facilities survey respondents and interviewees indicated that privacy, a range of different spaces, key equipment, internet access, and appropriate storage spaces and accommodation options were important for staff, students, providers and clients.</p> <p>MEETING THE NEEDS</p> <p>Overall, comparison between the proposed project and the information from the workshops, surveys, interviews, observations and meetings indicates that the proposed facilities would meet the identified health and wellbeing needs of the community.</p>
Community benefits of the Project.	<p>Overall, the findings indicate that the Project would be of significant benefit to the community. It would be a solution to the identified demographic and isolation issues of the area by enabling people of all ages to stay in the community, providing for the health and wellbeing needs of the community, and strengthening the economic and social fabric of the community. It would provide infrastructure and access to health and wellbeing services, including medical services, education and employment opportunities, social services and housing and accommodation options.</p>
Community and service provider support for the	<p>Overall, the findings from community, user group and visitor surveys, community and stakeholder interviews, youth focus group and documents indicate that the proposed Project is supported by the community, visitors and service providers. The Trusts and the</p>

Areas to Address	Key Findings
Project, similar models and their success factors and Project fit with local and national policies, plans and strategies.	<p>people within them are held in high regard and the Project is seen as being well-planned, well-supported and well-managed.</p> <p>The proposed Project is a holistic approach of 'one facility or group of facilities having multiple and complementary roles' which recognises the variety of needs of the community across the sectors of social, health, economic, housing and education and aims to meet these needs. There are a number of different facets to the Project and there are examples of different successful models related to these factors. These include, for example, a community trust providing the infrastructure for health services (e.g. Great Barrier Island Community Health Trust) and different housing models including social housing, community housing, assisted ownership and co-housing.</p> <p>Community ownership and community support were two factors identified as key to the success of the health services on Great Barrier Island and the proposed Project has these factors already in place. In terms of supporting factors, involving the local Council from the outset is a key factor, to ensure that the plans and developments will meet planning and consent requirements. As well, setting up appropriate legal structures will be important in order to enable the facilities to operate.</p> <p>The Project fits within a number of local and national policies and strategies across a range of sectors, including but not limited to: <i>The New Zealand Health Strategy: Future Direction 2016</i>, <i>The Health of Older People Strategy (draft) 2016</i>, <i>The Waikato District Health Board (WDHB) Strategy 2016-2026</i> and a number of TCDC plans and strategies. A review of the various strategies indicates that this Project would be an ideal exemplar project for, for example, both Health and/or the WDHB to showcase their strategies and how the aims and strategic themes could be put into practice in a remote rural setting. As well, supporting the Project would enable the TCDC to demonstrate meeting a number of the aims, aspirations and visions in their various plans and strategies.</p>
Proposed sites and level of support from neighbours.	<p>PROPOSED SITES</p> <p>To date, four possible sites have been identified both inside and outside the Colville Village; one of the sites is Council-owned and the others are privately-owned. The Project team reports that the TCDC has indicated their support for considering land gifting and/or land swap options which may result in other site options becoming available. Findings from the community survey and community and stakeholder interviews indicate that the preferred location for the proposed facility is 'in or near Colville,' as this the central hub of the community.</p> <p>SUPPORT FROM NEIGHBOURS</p> <p>Given that there is no one confirmed site, it was not possible to determine the impact on 'immediate' neighbours for all the possible sites. The Project team have reported that in terms of the 'cemetery site' the immediate neighbours are supportive; that one site in the Village was objected to by an immediate neighbour although the reasons for this were unclear; other sites in the Village have not been objected to; and for the site outside the Village, discussions with the owner are in 'the early stages' and as such no neighbours have been consulted as yet.</p>
Economic status of the Trusts and opportunities for further funding.	<p>FINANCIAL CONSIDERATION</p> <p>CCHT operates primarily via income from grants, hireage/rental fees, donations, fundraising and interest on investments. Accounts are audited regularly and a review of these for the past five years has shown no major concerns. Both Trusts are able to meet their operational and maintenance costs through the income they receive, and neither are in a deficit situation.</p> <p>The funding of the project is likely to be from a mixture of funding grants (including both</p>

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	government and philanthropic grants), sponsorship or donations (including in-kind support) and income-generating activities. The project needs to access funding for building and development, and then be able to access funding for ongoing costs of running facilities, and the Trusts are aware of these factors.
Strategies and plans for management and maintenance of the proposed facilities.	<p>MANAGEMENT AND MAINTENANCE PLANNING</p> <p>The Project team reports that in terms of the management strategies for the proposed facilities, the intention is to form a new Trust. The Trust will develop a vision for the facilities and be responsible for governance. The assets (e.g. land, building, recreation facilities, relevant amenities and any innovations) will be retained as community assets, overseen by the Trust.</p> <p>In terms of revenue and ongoing expenses, whilst a detailed assessment of the ongoing costs is not possible until the designs are finalised, the Project team is aware that there will be a need to ensure that finances will cover management, annual costs and ongoing facilities' maintenance and insurances. Moving forward the Project team will undertake sound financial forecasting based on the actual planned facilities, and ensure there are risk management planning, policies and procedures for all aspects of the facilities, including, as needed different procedures for management of the different aspects.</p> <p>Overall, in terms of the potential effectiveness of the management and maintenance strategies and plans, a review of the skillsets and experience of the current trustees of CSSC, CCHT and the CCFP Project Team indicates that there is significant experience and skills, recognition of any 'gaps' and a willingness to seek guidance as needed. A review of what is planned to date in terms of the way that the facilities will be governed, financed and run indicates that they are thoroughly considering all options.</p>
Meeting environmental sustainability requirements, likelihood of gaining resource consent and proposed Project timeframes.	<p>ENVIRONMENTAL CONSIDERATIONS</p> <p>As there is no specific building design and/or site plan as yet, the feasibility study is unable to state specifically, how the Project could meet environmental sustainability requirements and/or principles. However, the Project team have indicated a commitment to including environmentally sustainable practices into the facilities, have begun the process of developing environmental principles and philosophies for the Project, and have already received a number of commitments from various environmental experts and consultants.</p> <p>The Project team also intends to seek sponsorship and supportive relationships with providers of technologies that contribute to sustainable design. There are a number of resources, guides and certification programmes that could be considered for incorporation into the design and build, including 'the living building challenge' and 'green star certification' for example, both of which provide guidelines for developing and building facilities that meet certain environmental standards.</p> <p>RESOURCE CONSENT</p> <p>It is highly likely that resource consent will have to be sought for some or all aspects of the proposed Project. The combination of which site is chosen and the desired activities will be the key factors in determining whether the facility is or is not a 'permitted activity', what consents are required, whether re-classification of the land is needed or possible and what size and type of facilities and activities will be able to operate from the site.</p> <p>There are also other resource consent considerations that may be required depending on the site and the activity. For example there are parking requirements and again these differ depending on the activity, and depending on the chosen site, there may other considerations including upgrading of roads and the provision of other services.</p>

Areas to Address	Key Findings
	<p>The Project team report that the TCDC has indicated that they will support the CCFP to navigate the resource consent process.</p> <p>PROJECT TIMEFRAMES</p> <p>The Project team has divided the development of the facilities into four stages with the designated community facility being 'Stage1' followed by the accommodation and housing developments as Stages 2-3, and targeted youth recreational opportunities as Stage 4. The proposed timeframe is to complete the planning, confirm the site or sites, develop concept drawings and have an overall design for all the stages by April 2018. Construction of the community facility would start in September 2018 and be complete by June 2019. Construction of Stages 2 and 3 is planned for completion by December 2020, with Stage 4 being developed following that.</p> <p>The proposed timeframe is feasible, and the extent to which it can be met is dependent on the processes (e.g. consents, classifications) that are required and as well the extent to which funding can be secured to pay for the various stages.</p>

