

NAPIER HOSPITAL HILL SITE ISSUES

ISSUE 1: IN THE BEGINNING...

There was Napier Hill, surrounded by marsh and water.

Napier township developed after the land was ceded by Maori to Donald McLean in 1851. He made an enduring promise of a Government hospital as one of the benefits of the town.¹

The first Napier hospital, a barrack hospital, was just the fourth in the country, after Auckland, Wellington and Dunedin.²

Comment: a 'hospital' in Victorian times meant what we would call a 'community' hospital. Such a facility has always been central to Napier's existence.

ISSUE 2: NAPIER INVOLVEMENT AND THE TRUST ON THE SITE

The first hospital on the present Hill site, Napier's third,³ opened in 1880. It opened debt free, entirely paid for by local citizens.⁴ The Mayor was an ex-officio member and first chair of the management committee.⁵ Funding derived largely from rates, and Napier contributed the lion's share of both money and administration.⁶

Land, vested in the borough of Napier, was permanently set aside in trust for a hospital and grounds by Act of Parliament.⁷

Comment: the city council and people of Napier have a deep, long-standing interest in and benefit from the Trust. It should not be altered without their involvement and opportunity to be heard. The Hill site is a Napier issue as much as a health issue.

ISSUE 3: THE CLOSURE OF NAPIER HOSPITAL

In 1995, following a hotly contested debate between Hastings and Napier, it was decided that the regional hospital should be in Hastings.

Napier people were assured, by both political and health authorities from the highest level down, that after its establishment

- they would have two-thirds of the services they had previously enjoyed
- these would include accident services, day surgery and maternity.⁸

Comment: it would be pointless for Napier to be in competition with Hastings. The Napier Public Health Action Group [NPHAG] does not, repeat NOT, seek duplication of a regional hospital in Napier. It DOES seek fulfilment of the assurances given when our hospital was closed – a public community hospital offering real treatment of cases not requiring high tech equipment.

ISSUE 4: ABANDONMENT OF THE HILL SITE

Napier was told that when the hospital was closed, the city's new services would be delivered from the hill site.⁹ That made sense. It was held in trust for the purpose, rent free and rate free.

After a farcical 'consultation', when over 91% of 6800 written submissions were ignored,¹⁰ it was announced that instead, a new building would open at Wellesley Road. However, unlike the publicly-owned rent- and rate-free site on the hill, this new facility proved to be privately-owned and rented, no longer permanently secure.

Comment: at no stage were Napier people told that the result would be that they would now pay for the same health services that can be obtained free in Hastings. That is the 2006 reality.

ISSUE 5: WELLESLEY ROAD HEALTH CENTRE, 2000-2006

Wellesley Road was supposed to be a 'community hospital' or 'sub-acute unit', half way between a health centre and a full-blooded hospital,¹¹ our 'accident and emergency' centre.

It is none of these. And each and every year since it opened, real services from Wellesley Road have declined.¹² Could services from this rental site have been set up with eventual closure in mind?

Comment: a community hospital is the minimum needed in any city of over 55,000 people. Wellesley Road fulfils few of the original intentions. Badly designed, it has become an expensive glorified doctors' facility for sending people to Hastings.

ISSUE 6: HILL SITE FOR SALE

'For Sale' signs have been posted, for sale by tender closing 11 August.¹³

NPHAG (like the City Council) has legal advice that the land is still under trust to be used for hospital and grounds and so should not be otherwise saleable.

Chris Tremain MP came up with a new vision for how the site might be used to benefit Napier health, but DHB and Government responses have been negative.

A claim before the Waitangi Tribunal, WAI 692, continues to seek a bicultural health centre in Napier.¹⁴ Its preferred location is Arohina, on the Hill site. The Government does not want that.

NPHAG is now seeking a Judicial Review on the crucial legal question of whether the land is still in trust, a trust only removable through legislation, as Master Gendall ruled in 2004.¹⁵ Its aim is either to see health services restored to the hill, or to allow the people of Napier the opportunity to voice their health concerns before Parliament.

ISSUE 7: FAILURE TO CONSULT ON THE SALE OF THE SITE

Legislation passed in 2000 means that before the land can be sold, the Minister ‘must’ be satisfied that the District Health Board is ‘as a result of consultations with its resident population, aware of the views within the population about the proposed sale’.

The DHB has carried out no such consultation. It seems simply to have assumed that it can sell off the property as if it was its own to reduce its operating deficit.

Comment: the failure to consult on the sale of the site is particularly objectionable since it comes after the double failures to consult Napier meaningfully in the 1990s, first on the site decision on the new hospital,¹⁶ then on the move to Wellesley Road. NPHAG is challenging this latest failure to consult through the High Court.

ISSUE 8: LOOKING TO THE FUTURE

Napier is a substantial, growing city. It is also a retirement centre.¹⁷ By 2016 there will be 27% more people aged over 65.¹⁸

There is a vital need for real, ongoing public health services at a Napier base – not just an assessment centre for sending people to Hastings. We have growing health needs, an ageing population, an inadequate population base for efficient comprehensive public transport, and a 45 km return trip to Hastings at a time of rising fuel prices. In parts of Napier nearly one house in five has no vehicle.

Comment: past vision and commitments, present reality and future needs all underline that Government and the DHB must fulfil their obligations agreed when Napier Hospital was closed.

NPHAG INVITES YOUR SUPPORT FOR THE LEGAL BATTLE.

WHEN IT IS WON, IT URGES YOU TO MAKE YOUR VIEWS KNOWN BEFORE PARLIAMENT AND ALSO IN ANY CONSULTATIONS WHEN YOU HAVE THE CHANCE.

[This statement of the issues has been prepared by Dr Robin Gwynn MA PhD JP on behalf of the Napier Public Health Action Group (Inc.), P.O. Box 471, Napier. Fully footnoted copies giving precise chapter and verse for every statement made can be consulted at the Napier and Taradale Public Libraries or obtained from the author on email by request to gwynn@paradise.net.nz. Copies are being supplied to local politicians, the DHB, and the media, so that no-one can claim ignorance of the real issues. They are of such importance for the future of Napier that they must be resolved before closure can be reached for an unhappy chapter in the city’s history.]

FOOTNOTES

¹ Waitangi Tribunal, *The Napier Hospital and Health Services Report*, (2001), p.xxvii. The Tribunal ruled this was an enduring promise, made on behalf of the Government as part of the Ahuriri land transaction.

² Geoff Conly, *A Case History*, (Hawke's Bay Area Health Board, 1992), p.2. A site for a hospital was included in Alfred Domett's plan for Napier in 1855 (Conly, p.6).

³ The first was in Onepoto Gully, the second in Sealy Road (Conly, pp.2, 7).

⁴ Conly, p.24.

⁵ Conly, pp.19, 21.

⁶ Conly, pp.40, 59.

⁷ Under section 144 of the Land Act 1877 (cited in *NZ Gazette* 1879: 72-73).

⁸ The Social Services Committee of the House of Representatives reported in 1996 that Napier's then hospital would be reconfigured as "a community hospital providing a range of out patient, accident and medical services, continued and day care for the elderly, Maori health facilities, low risk maternity and day surgery". Letters from the Prime Minister and Minister of Health, now in the possession of the Napier Public Health Action Group, stated that 'more than 65% of present patients' would continue to attend Napier hospital or be serviced at home from that base.

⁹ Peter Wilson, Chairman of Healthcare Hawke's Bay, stated in the High Court of Napier that it accepted it 'had a commitment to maintain services on the Napier site' (*Daily Telegraph*, 8 November 1994). Both Prime Minister Jim Bolger and Minister of Health Jenny Shipley wrote many letters to Napier residents stating that 'Napier Hospital will remain as an active community hospital'. See also Robin Gwynn, *The Denial of Democracy*, (Cosmos Publications, 1998), chapter entitled 'Hospigate'.

¹⁰ 6,211 out of 6,804 written submissions (an extraordinarily high total number) opposed moving off the Hill site (*Hawke's Bay Herald-Tribune*, 19 December 1997). Three packed public meetings gave the same message (*Daily Telegraph*, 25-27 November 1997).

¹¹ After the Wellesley Road centre had been agreed by the National Government in the late 1990s, they defined it as a "sub-acute unit", and they defined sub-acute units as in between "Health centres" and "secondary hospitals" and as providing "inpatient medical beds and day surgery" (National's *Hospital Services Plan*, September 1998, pp.11, 15). The unequivocal intent of the documents produced and statements made was to clarify that Napier was to have a Community Hospital at a level superior to the services provided in Waipukurau and Wairoa, where there were to be "health centres" – which is no more than one would expect, given Napier's population.

¹² In 2004-5, for example, the total number of clinics in Napier declined by 102 to 1197, while those in Hastings increased by 369 to 7943. There were no Napier clinics in Assessment, Treatment and Rehabilitation, nor in Maternity; all were done in Hastings. (*Napier City Council Health Services Advocacy Committee meeting agenda*, 27 May 2005, pp.2,13).

¹³ The tender document, issued 'on the instructions of the Crown Health Financing Agency', is available from Bayleys Real Estate.

¹⁴ The claimants' Statement of Position was presented to Napier people and well received at public meetings held in 2002. Negotiations between Crown and claimants are continuing.

¹⁵ In the High Court of New Zealand, Napier Registry, 30 March 2004. Master Gendall concluded (clauses 30-31) that 'the title is being transferred subject to the trust, and the perpetual caveat in s129(5) LTA guards against any future dealings manifestly inconsistent with the trust. The only situation in which the property can be transferred without the trust, therefore, is if Parliament legislates to remove it or to alter its terms'.

¹⁶ The Waitangi Tribunal found there was 'a pattern of non-consultation' (*Napier Hospital and Health Services Report*, p.330).

¹⁷ The 2001 census showed that 15.2% of Napier's population was aged 65 or over, well above the national average.

¹⁸ Estimate in *Napier/Hawke's Bay Economic Monitor*, December 2005.