

# APPENDIX ONE

## Social Infrastructure Profiles

The following worksheets provide more detail on the number and range of different types of social infrastructure currently found in the city. They also provide an initial assessment of future needs, at a city-wide level, based on forecast increases in the resident population of the city. Hard information on social infrastructure provision is not easy to obtain, and in many cases employment in the various different types of social infrastructure categories is the only available indicator of demand.

Important sources of data are:

- 2003 Quality of Life Report
- 2005 Business Demography Database (Statistics New Zealand)
- Waitakere City Council website (e.g. Directory of community facilities).

Where data is available, the worksheets list:

Current level of provision, for example the current number of people employed in the relevant sector, the amount of floor space provided or number of facilities, or in the case of schools, the number of pupils. In most cases, current levels of provision are translated into a standard like the number of people employed per 1,000 residents. This enables comparison to levels of provision in other cities, or for the Region as a whole.

Participation rates, where these are known. The participation rate refers to the % of the population who use services and facilities. In many cases, participation rates may go up as services become more accessible and of better quality, adding to demand. Currently many people may travel out of the city to access services that are not available within the city, or are of a higher standard.

Future needs, based on the size of the future population, and any anticipated changes in participation rates. These are only coarse assessments of future needs and are obviously subject to a range of uncertainties and risks.

Council provided – data

Data 1						
Community Facilities						
Name:	Strategy					
Source:	Waitakere City					
Date:	2003					
Type of facility	Square meters per 2003	Square meters per 2016	Total floorspace 2003	Number of facilities	Average floorspace (m2)	
Rec centres	96.7	82	17,924	2	8,962	
Community centre	39.3	38	7,285	4	1,821	
Community halls	12.3	11.2	2,280	15	152	
Community houses	8.9	9.7	1,650	4	412	
Aquatic facilities	44.7	57.4	8,286	2	4,143	
<b>Total</b>	<b>201.9</b>	<b>198.3</b>	<b>37,424</b>	<b>27</b>	<b>13,866</b>	

Data 2			
Community facilities			
Name:	Directory		
Source:	Waitakere City		
Date:	2004		
Type of facility	Number	Rate (people per facility)	
Community / Leisure centres	8	23,743	
Local Hall / House / facility	48	3,957	

Data 3 – Libraries			
Waitakere City Library Strategy			
Name:	Waitakere City Council		
Source:	2002		
Date:	Number of libraries		
Hub	3	(New Lynn, Henderson, Massey)	
Community	4	(Titirangi, Te Atatu, Glen Eden, Ranui)	
Rate of provision	7	27,789	
Data 4 – Libraries			
Name:	Library Standards		
Source:	LIANZ		
Date:	1996		
Standard	Square metres per 1000 People		70

## Projections

<b>Libraries</b>							
	Source population 2006	Source Population 2021	Rate of provision 2006	Rate of provision 2021	Number 2006	Number 2021	Increase 2006 to 2021
Number	199,100	252,000	27,789	28,000	7	9	2
Square metres	199,100	252,000	70	70	13,900	17,600	3700
<b>Community facilities</b>							
<b>Centre-based</b>							
	Source population 2006	Source Population 2021	Rate of provision 2006	Rate of provision 2021	Area 2006	Area 2021	Increase 2006 to 2021
Square metres	199100	252,000	136	120	27,100	30,200	3,100
Number	199100	252,000	24,900	25,000	8	10	2
<b>Local Meeting Spaces</b>							
Square metres per 1000	199,100	252,000	21.2	20.9	4,200	5,300	1,100
Number of facilities	199,100	252,000	4,100	4,000	49	63	14

## Health - data

<b>Data 1</b>	
Name:	GPs per 100,000 people
Source:	Quality of Life 2003
Date:	2003
GPs per 100,000 in WCC	61
GPs per 100,000 in all cities	87

<b>Data 3</b>		
Name:	A&M Clinics	
Source:	White Pages	
Date:	2006	
WCC	2	99,550
ARC	19	70,374

Data 2							
Name:	Business Demography						
Source:	Statistics New Zealand						
Date:	2004						
Type of facility	2001 Number of Units	Total Employees	2004 Number of Units	Number of Em- ployees	ARC Number of Units	Number of Em- ployees	
O861300 Nursing Homes	3	130	3	120	23	680	
O862100 General Practice Medical Services	92	280	94	390	1140	3,020	
O862200 Specialist Medical Services	12	40	22	40	723	1,400	
O862300 Dental Services	53	140	54	170	575	1,510	
O863100 Pathology Services	10	35	11	40	91	830	
O863200 Optometry and Optical Dispensing	12	40	16	45	172	440	
O863300 Ambulance Services	1	0	2	20	23	610	
O863500 Physiotherapy Services	19	15	23	30	287	380	
O863600 Chiropractic Services	18	12	18	20	167	190	
O871000 Child Care Services	32	240	40	320	307	2,710	
O872100 Accommodation for the Aged	17	490	17	570	193	6,200	
O872200 Residential Care Services nec	17	200	25	300	133	2,450	
O872900 Non-Residential Care Services nec	36	520	41	550	363	4,730	
People per GP practice	1,915		2,021			1,173	
Employees per 1,000 people		629		487			
Other medical	1,421		1,319			1,035	
Employees per 1,000 people		625		551			
Care/ Accommodation	2,414		2,209			1,878	
	73		86				

Projections

Type of Service	Source Population 2006	Source Population 2021	Rate of provision 2006	Rate of provision 2021	Number of facilities	Number of facilities 2021	Increase 2006 - 2021
GPs (based on per 100,000)	199,100	252,000	61	80	121	202	80
GP Practices	199,100	252,000	2,118	2,000	94	126	32
Other Medical							
Number of facilities	199,100	252,000	1,383	1,200	144	210	66
Residential Care							
Number of facilities	199,100	252,000	2,209	2,000	90	126	36

Government, Emergency, Welfare agencies - data

Data 1								
Name:	Business Demography							
Source:	Statistics New Zealand							
Date:	2005							
Police / Courts / Emergency	WCC Employees 2001	Employees 2004	Pop 2001	Pop 2004	Employees per 1000		Employees	Per 1000
Q963100 Police Services	250	270	176,200	189,940	1.42	1.42	3,150	
Q963200 Corrective Centres	50	45	176,200	189,940	0.28	0.24	1,030	
Q963300 Fire Brigade Services	40	60	176,200	189,940	0.23	0.32	610	
O863300 Ambulance Services	20	20	176,200	189,940	0.11	0.11	610	
M812000 Justice	50	6	176,200	189,940	0.28	0.03	100	
Total	410	401	176,200	189,940	2.33	2.11	5,500	4.11
Central Government								
M811100 Central Government Administration	450	680	176,200	189,940	2.55	3.58	7,020	5.25
Central Government								
M811300 Central Government Administration	410	530	176,200	189,940	2.33	2.79	4,010	3.00
O872900 Non-Residential Care Services nec		660		189,940		3.47	4,730	3.54
<i>This sub-class consists of units mainly engaged in providing welfare services</i>								

Projections

Police / Emergency / Justice								
		Source Popula- tion 2021	Rate of pro- vision 2006	Rate of provi- sion 2021	Number of peo- ple 2006	Number of people 2021	Increase 2006 to 2021	Floor Area Needed (sqm)
Source Population 2006	199,100	252,000	2.11	2.1	420	529	109	5,440
Central & Local Govt								
		Source Popula- tion 2021	Rate of pro- vision 2006	Rate of provi- sion 2021	Number of peo- ple 2006	Number of people 2021	Increase 2006 to 2021	Floor Area Needed (sqm)
Source Population 2006	199,100	252,000	6.37	6.5	1,268	1,638	370	9,240
Welfare Services								
		Source Popula- tion 2021	Rate of pro- vision 2006	Rate of provi- sion 2021	Number of peo- ple 2006	Number of people 2021	Increase 2006 to 2021	Floor Area Needed (sqm)
Source Population 2006	199,100	252,000	3.47	3.54	692	891	200	6,990

**Education Data**

**Data 1**

Name: Population Projections  
 Source: Statistics New Zealand  
 Date: 2005

	% of population in 2006	% of population in 2021
Pre-school (0-4)	8.0%	7.1%
Primary / Intermediate (5-12)	12.3%	10.9%
Secondary (13-17)	7.7%	6.8%
Post Secondary (20-65)	59.5%	58.7%

**Data 2**

Name: School Roll Data  
 Source: Ministry of Education  
 Date: 2005

Type of School	Number	Total Roll	Average roll per school	Participation rate
Early Childhood	146	7,200	49	0.45
Primary – national	1,179	175,721	149	
Primary – local (contributing and full)	48	18,815	392	4,148
Intermediate – local	5	3,500	700	0.9
Secondary – local	8	10,260	1,283	0.67

**Data 3**

Name: Business Demography  
 Source: Statistics New Zealand  
 Date: 2005

	WCC		ARC	
Base data 2005	Units	People Employed	Units	People Employed
Pre School	95	530	307	2,710
Childcare Service	40	320	584	3,810
Total Early Childhood	135	850	891	6,520
Rate	1,475		1,501	

**Data 4**

Name: Participation Rates  
 Source: Various  
 Date: Various

	WCC	Nationally	
Early Childhood – Q of L	54.5	63.9	Source: Q of L
Early Childhood – MoE Roll (WCC)	0.45		Source: MoE
Secondary			Source: MoE
% of over 16s participating	6.6	5.6	Source: Q of L

## Projections

Pre School									
	Source Population 2021	Participation rate (2001)	Participation rate 2021	Number of partici- pants 2006	Number of partici- pants 2021	Increase	Average Unit of provision	Number of additional centres	
Source Population 2006	16,020	17,910	44.94%	50.00%	7,200	8,955	1,755	50	35
Primary / Intermediate									
	Source Population 2021	Participation rate (2001)	Participation rate 2021	Number of partici- pants 2006	Number of partici- pants 2021	Increase	Average Unit of provision	Number of additional classrooms	
Source Population 2006	24,402	27,360	100.0%	100.0%	24,402	27,360	2,958	25	120

Local Retail / Workplaces

Data 1					
Name:	Business Demography				
Source:	Statistics New Zealand				
Date:	2001 / 2005				
	WCC 2001 176,200		WCC 2005 189,940		ARC 2005 1,337,100
G511020 Groceries and Dairies	91	1936	115	75	923
G512100 Fresh Meat, Fish and Poultry Retailing	21	8,390	25	190	245
G512200 Fruit and Vegetable Retailing	26	6,777	28	150	214
G512400 Bread and Cake Retailing	44	4,005	57	170	424
G512510 Fish & Chips, Hamburger and Ethnic Food, Takeaway Stores	61	2,889	84	100	606
G512590 Other Takeaway Food Stores (including sand- wiches and savouries) nec	63	2,797	78	160	571
G524300 Newspaper, Book and Stationery Retailing	39	4,518	31	250	331
G525100 Pharmaceutical, Cosmetic and Toiletry Retailing	42	4,195	47	360	404

Data 2							
Name:	Typical Catchments						
Source:	Statistics New Zealand	Waitakere	Region				
Date:	2001 / 2005	2001	2005		2005		
		Number of centres	Average catchment (number of people)	Number of centres	Average catchment (number of people)	Number of centres	Average catchment (number of people)
Corner shops		72	2,459	92	2,057	700	1,910
Local centre		34	5,122	37.6	5,052	324	4,132

### Projections

Corner shops							
Source population 2006	Source population 2021	Rate of provision 2006	Rate of provision 2021	Number of centres 2006	Number of centres 2021	Increase 2006-2021	
199,100	252,000	2,500	2500	80	101	21	
Local centres							
	Source population 2021	Rate of provision 2006	Rate of provision 2021	Number of centres 2006	Number of centres 2021	Increase 2006-2021	
	199,100	5,000	5,000	40	50	11	

# APPENDIX TWO

## Typical Growth Planning Processes

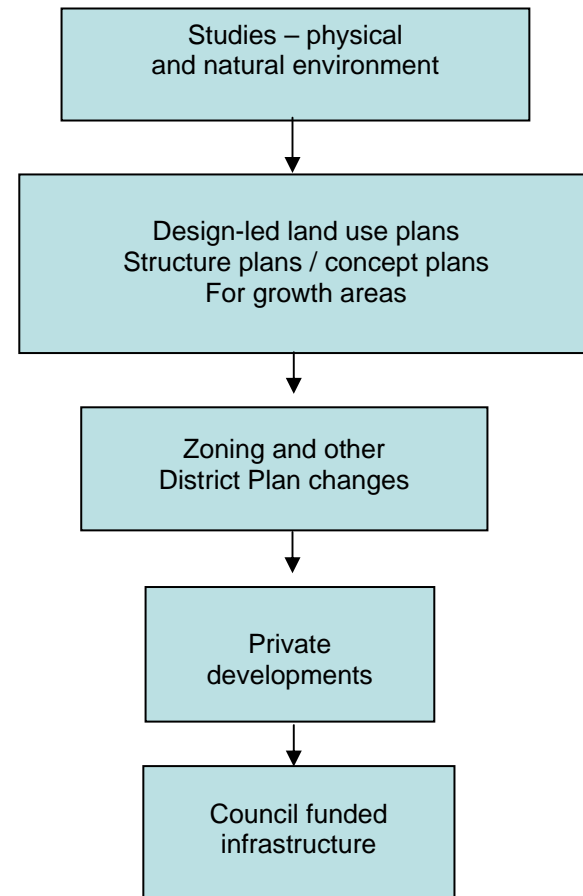
The diagram on the right sets out the normal process followed for the planning of areas subject to growth. Generally a high-order planning document like the Auckland Regional Growth Strategy has identified that a centre will need to grow and expand in the future to cope with additional houses and jobs.

Once a centre is identified, 2 to 3 months before a planning exercise gets underway, a range of background studies are prepared about the constraints and opportunities that apply to the identified area. Social issues may be covered, but often in a general way.

Development of the land use plans generally involves intensive design charettes where over 3 to 5 days there is a concentrated effort to develop land use plans and concepts. Social infrastructure will be one issue considered alongside a range of other issues. There is usually some form of public involvement, through public meetings and focus groups.

After the land use concepts have been debated by the community and agreed to by the Council, there may be changes to the District Plan to enable the type of development sought. This usually involves a further round of submissions, and possibly appeals to the Environment Court.

Private development then starts to occur, and with it increased demands on infrastructure. The planning to date may or may not have anticipated these demands, and infrastructure providers start to respond to these demands in a variety of ways.



# APPENDIX THREE

## SOCIAL INFRASTRUCTURE PLANNING FRAMEWORK: LITERATURE REVIEW

Waitakere City Council has requested the development of a social infrastructure planning framework to assist with the delivery of social infrastructure in areas subject to growth.

The project is in two stages:

First Stage: Develop a draft social infrastructure planning framework, integrated with growth planning to provide a:

- High level framework of typical infrastructure needs for different types of centres/growth areas
- Develop a process to define and plan for the particular needs associated with individual centres

Second Stage: Apply the framework to New Lynn and Massey/Westgate area and review and modify the framework accordingly.

As part of the first stage the brief requested a “best practice literature review”. As discussed with Waitakere City Council the consultant team found very limited evidence of well developed social infrastructure frameworks existing in other places. The exception was Melbourne where several councils are using similar methodologies assisted by a Melbourne-based consultant group “collaborations.” A consultant from collaborations visited Waitakere City in 2005 and facilitated some workshops that assisted in the development of the project brief for this project. This short literature review summarises the Melbourne examples.

The only other relevant source of information that was found was a project brief for the development of London Thames Gateway Social Framework. The brief included the development of guiding principles; a social framework model; a social framework model delivery plan; a review of agency involvement and engagement; workforce and local economic development content (how best to use social infrastructure to achieve local economic development); and application of the model to six pilots. The total budget for the framework was 300,000 pounds. This work is clearly on a grand scale, although the findings, when available may be of interest for Waitakere.

### **The Social Planning Framework: City of Melbourne – Planning for People, Place and Communities (undated)**

This social planning framework sets the scene for some of the more detailed assessments carried out for particular localities. The scope of the framework is wider than social infrastructure planning, however it describes some tools that have been developed for the purpose of applying them to social infrastructure planning.

The framework highlights the importance of social capital and it aims to “strengthen, develop and measure the social capital within our community.” It is argued that communities high in social capital are characterized by community resilience, high levels of trust, tolerance of diversity and community capacity.

With respect to the Waitakere City Council project the most relevant part of the framework is the description of the “Neighbourhood Social Infrastructure Tool” (NSIT). This tool has been used in subsequent locality based planning.

NSIT involves a set of planning triggers which may help identify needs on a neighbourhood basis. The framework explains the tools purpose which is to guide the planning and provision of social infrastructure. It is methodology for auditing social infrastructure on a neighbourhood basis – providing an empirical basis to gauge priorities and aspirations of local neighbourhoods.

Although the tool is described as “empirical” the NSIT uses a combination of qualitative and quantitative measures or triggers. The examples below illustrate this and demonstrate that application of the tool is often descriptive (i.e. describing a need/gap/issue) rather than definitive .

### **Southbank/St Kilda Road Neighbourhood Audit**

This was a joint study across two jurisdictions in the Southbank/St Kilda Rd area to audit existing social infrastructure against emerging needs to identify priorities for the area. “Collaborations” was commissioned to undertake the study.

The City of Melbourne’s social framework was applied to the study area – including the use of the NSIT - with some modifications to take into account that the City’s approach used triggers that may not reflect the priorities of the “City of Port Phillip”.

The approach involved collecting a range of data and undertaking some research. Key aspects included:

1. Development of a current community profile
2. Future trends demographic modeling
3. Focus/discussion groups
4. Telephone survey
5. Facility mapping (to assess current supply). This was relatively sophisticated and involved geographical mapping of facilities; assessment of accessibility to those facilities; and qualitative assessment of the services provided within those facilities
6. Resident briefings
7. Audit assessment (application of the NSIT) – using information from 1-6 above

The audit assessment was undertaken for ten main types of facilities under the headings of:

- Community information sources
- Community meeting spaces and focal points
- Local transport
- Recreation and Leisure
- Library Services
- Family and Children Services
- Youth Services
- Services for Older Adults
- Cultural Development

Through the audit assessment several types of planning triggers were used. These include:

- Population thresholds – for example for recreation and leisure a trigger is “four publicly assessable facilities per 1000 persons per demographic user group.” There are very few of these type of triggers in this particular study.
- Accessibility measures – for example a library services trigger is “public libraries located in key activity centres within 400 metres of a public transport connection.” This was a more common type of trigger in this particular study.
- General triggers – for example for services for older adults a trigger is “number of individuals aged 70 years and older.” This trigger was also used frequently in this study. Note that it does not indicate anything specific about need but is just a trigger for identifying that there may be some specific needs depending on the number of people in this category.

While the approach is of interest in many ways the framework is sketchy and incomplete. Examples include:

- The underlying model and the way the information and research has been applied is not always explicit
- The analysis appeared to have been driven more by the current community profiles rather than future likely profiles – this is probably a reflection of the difficulty in predicting what the future population characteristics will be
- As noted the triggers are a mix of population thresholds; accessibility criteria; and general triggers that help flag an issue.
- As a result the application of the triggers helps identify issues and gaps but does not produce definitive answers in terms of the social infrastructure needs of the area. Significant additional work would have been required to turn this into a blueprint for social infrastructure planning.

Available funding does not appear to be an overt consideration

#### **Mornington Peninsula Shire Council: Sustainable Communities Planning Framework Part 1: The Framework – Part 1 of 2, 2004**

Mornington Peninsula also contracted “collaborations” to undertake this work. It is similar to the City of Melbourne work although more developed in some areas. It is also broader than town centre planning as it includes tools for social impact assessment and other purposes.

The framework was developed under the umbrella of **Melbourne 2030** – a strategic vision for the Melbourne region which is committed to sustainable development. Social sustainability is defined as building social capital or creating net social value. The converse – depletion of social capital (trust, cooperation and reciprocity) is believed to create social deficits; - unemployment; poor health; limited access to education; loss of hope for the future. This in turn compromises the strength and well-being of existing and future communities.

A key development in this framework from the earlier work is the use of a hierarchy of town centres together with a description of the role/function and types of activities each different type of centre is likely to have.

The three types of centres defined are:

**Local** – up to 1000 residents. This township type is likely to have:

- Local store
- Local open space
- Public transport stop

**Service centre** – 1000-10,000 residents. This township type is likely to have :

- Local store
- Local open space
- Tourist and resident information point
- Meeting space
- Public transport stop
- General health practitioners
- Maternal and child health centre
- Childcare
- Preschool
- Primary schools
- Community education options
- Sporting clubs

**Major activity centre** – usually 10,000+ . This township type is likely to have:

- Local open space
- Information point staffed
- Meeting space
- Public transport options
- General health practitioners
- Specialist health practitioners
- Hospital
- Maternal health centre
- Childcare
- Preschool
- Primary schools
- Secondary school
- Community education
- Further education
- Sporting club
- Library
- Youth services
- Home care services
- Council/civil role
- Regional shopping centre
- Regional recreational facilities

It is not entirely clear from this framework how the list was derived however it has been informed in part from the application of a set of triggers for each infrastructure type (similar to the Southbank/St Kilda Rd example above). The report makes it clear that demographic factors are only one driver of service need with other drivers including social expectations; work patterns; cultural tradition; technology and leisure preferences. As a result the triggers are again a mix of population thresholds, accessibility measures, general triggers and in this case satisfaction measures.

For example one of the ten social infrastructure types is “Health”. Eight “sub-types” are defined. These are – hospital; community health centre; GPs; ancillary health (physio); mental health; prevention/health promotion; dental; complementary health.

For a local township the triggers are:

- Information regarding health services available at local service outlets;
- Resident satisfaction with current access to services. Not that this does not state what the satisfaction level should be or what should happen if satisfaction is low – it is merely a trigger to help assess whether provision is adequate

For a service centre the triggers are:

- One GP for every 2000 residents
- Number of health services providers per service type within a ten minute drive. Again this trigger says nothing about level of provision – it’s simply information that should be collected that may, when combined with other analysis, help identify a gap or a need.

For a major activity centre the triggers are:

- Location of health services in key activity centres within 800 metres of a public transport connection and co-located with complementary services and facilities. (An accessibility measure rather than a level of service measure)
- Ratio of hospital beds to population – currently 3.1:1000 acute beds and 1.5:1000 public hospital beds in major cities. This trigger says nothing about whether the current level of provision is adequate.

### **Moreland City Council: Social, Cultural and Leisure Needs Assessment for Central Coburg: Final Report March 2005**

This example (also “collaborations”) is a needs assessment for a particular activity centre – Coburg. It was undertaken as part of the development of Central Coburg 2020 Structure Plan. The assessment was undertaken by applying a framework similar to the framework described in the previous study. The triggers across the 9 infrastructure areas were very similar.

In applying the framework three different future population and development scenarios were tested - limited development, medium development and high levels of development. The commentary accompanying the application of each trigger shows that other information was used to supplement the analysis. Continuing the health example the analysis found:

- Coburg would need 3 more GPs by 2021 based on the trigger of 1 GP for every 2000 residents
- Application of the trigger suggests current under-provision and this is supported by anecdotal evidence that most GPs are operating near capacity and have a catchment larger than the suburb
- 75% of health services meet the accessibility standard of within the centre and within 800 metres of passenger transport
- Potential exists for co-location
- The measure of diversity of services and providers was applied however it is not clear from the report what this revealed about future need
- Satisfaction with services was tested for three household types – family households were more satisfied than other household types
- Four different ways of accessing information about health services were identified

This is just an example – 10 infrastructure/service types were tested in total. The overall assessment for health was that it was an area that required further development to meet future demand as well as current unmet demand. Note that compared to the apparently detailed analysis that was carried out the findings are relatively high level – there is still a major step between the application of this framework and the identification in specific terms of what is needed for the centre.

This is not meant by way of criticism but illustrates the challenges involved in this type of exercise and the difficulty of drawing on best practice to inform a Waitakere framework.

The other contribution of the Coburg report is a short section on models of provision based on the concept of grouping certain activities. This is based on the idea of moving away from single-purpose standalone facilities to encourage a more integrated approach to service and facility planning. Four hubs are suggested. These are:

- Local hub – with walkable access to local open space; local meeting space. Access to information and access to primary schools.
- Information and learning hub – with access to information, library service, meeting space, community education and post compulsory education
- Cultural and spiritual hub – with spaces for reflection; meeting spaces; performance space; exhibition space; large events area; and spaces that represent cultural and spiritual diversity.
- Health and well-being hub – health services; outreach services; community support; legal services; affordable recreational/leisure opportunities; family focus.

For each hub type generic, lifestyle and access attributes are defined and approximate floor space identified. For example for the health and wellbeing hub 5000-7500 square metres floor space might be required. Generic attributes were defined as including:

- Community information
- Health services
- Medicare
- Housing support
- Legal support
- Meeting space
- Sessional services space
- Outdoor relaxation space
- Space for social interaction

Lifestage attributes include:

- Childcare
- Family and aged person friendly
- Recreation space such as adventure playground
- Youth friendly spaces

Locational attributes include:

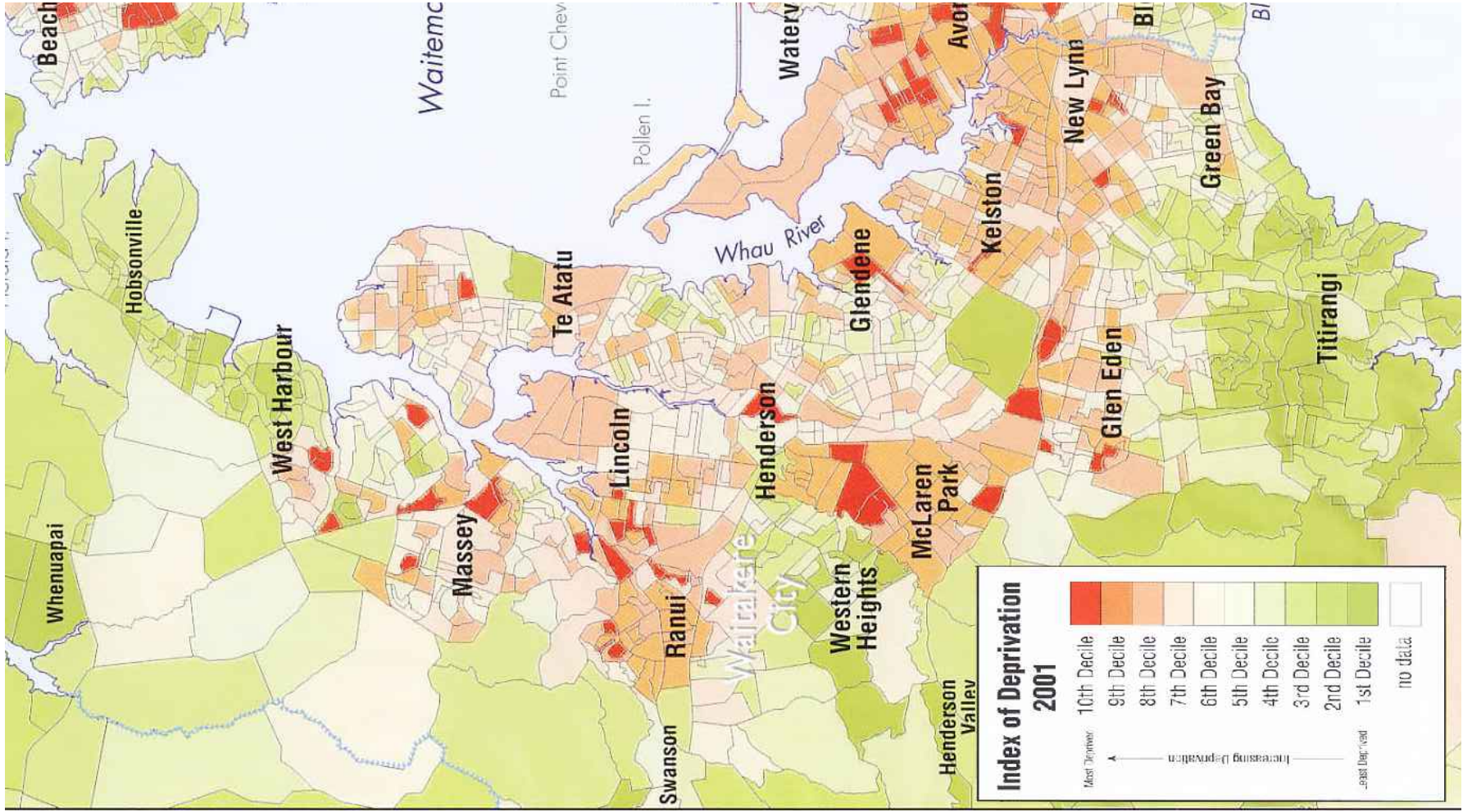
- Co-location
- Access to open space and indoor space
- Ability for cross referral
- Access to multi-modal passenger transport
- Disabled access
- Street frontage
- Integrated into retail centre

## **Conclusions**

The lack of best practice international examples suggests that Waitakere could be one of the leaders of work in this area. The best examples found relate to the Melbourne region. Whilst they provide some useful guidance for the types of tools that Waitakere should develop, an analysis of the underlying methodologies suggests some gaps. The methodologies such as application of planning triggers; and development of town centre typologies and associated needs, have the appearance of providing a rigorous framework. The reality is, however, that they are exploratory in nature and more useful in identifying the types of questions that need to be asked and the types of information that are needed in order to start to answer the questions. As noted above this is not intended as a critical comment but does help highlight the challenges in developing robust framework.

# APPENDIX FOUR

Catchment socio economic characteristics



# APPENDIX FIVE

## Lessons Learnt to date

The draft Social Infrastructure Framework was applied through its application to the northern urban growth area within Waitakere City Council. This process identified the following issues which have been taken into account in the current revision of the Framework:

1. The value of providing good information that is presented in a coherent way, and of constantly updating people and organisations involved about progress and developments
2. The benefits of setting up processes and workshops that bring people and providers together to discuss common needs and issues
3. A lack of understanding amongst planning professionals about the nature of social infrastructure and its differences from other forms of infrastructure (like roads and waste water pipes)
4. The lack of data about current conditions, let alone the difficulties of preparing accurate forecasts of future needs, and how to effectively plan for future needs, given these uncertainties and current planning process that place an emphasis on quantitative standards relating to future levels of provision
5. The different phases involved in the development process, and the need to understand what tasks and processes are important to these phases, with phases involving:
  - Visioning type exercises
  - Structure planning and developing and defending district plan provisions

- Research and develop levels of provision of Council infrastructure that are appropriate to intensively developed centres.
  - 
  - Preparing more detail precinct and asset-based plans and co-ordinating with other infrastructure providers who may not be at the same stage in the planning process
  - Identifying funding streams
  - Resource consent stages, including assessing development proposals against criteria
  - Development stages – scoping, designing and building infrastructure, and/or setting up networks
  - On going maintenance and expansion of services, facilities and programmes.
6. The length of the processes involved (which may well extend over a decade or more) and as a result, the particular need to foster and maintain partnerships and relationships that will endure changes in staff, personnel and policy
  7. The need for some regional-level co-ordination to avoid repetition of effort at the local-level.

These lessons have led to a restructuring of the Framework around the core themes of:

- The nature of social infrastructure
- The need for good data and information
- Processes to promote integrated planning
- Partnerships and collaboration to deliver and sustain social infrastructure.