

SUBMISSION TO DCC 9 YEAR PLAN CONSULTATION

1. In May 2018, Council allocated \$20m to the Harbourside Bridge project. This decision was made on the basis of various reports and comments available to Council at the time, some of which amounted to “spin”, and at least one of which was WRONG.
This project should be cancelled forthwith.

Comments that the adjacent existing bridges “are not suitable for cyclists” are not true. Both the Jetty Street bridge and the station footbridge carry cyclists every day; however they are not *optimised* for cyclists.

A graphic provided by Council depicted the proposed bridge, but neither of the adjacent bridges, together with a broad green arrow depicting cyclists descending from the hill suburbs in order to cross the proposed bridge – a least likely scenario.

Councillors would have been most interested in the number of users of the proposed bridge; they were provided with the report: “ESTIMATE OF DAILY USERS OF THE CITY TO HARBOUR PEDESTRIAN BRIDGE IN DUNEDIN” dated 8 May 2015, which only gave estimates of *cyclists* using the bridge, supposedly using the methodology of “Land Transport New Zealand Research Report 340 - Estimating Demand for New Cycling Facilities in New Zealand”.

To be charitable, it is clear the report writer had no understanding of either the Report 340, or Dunedin geography.

One Councillor present at the time told me “We thought the figures were a bit high”.

The two harbourside cycleways enter the city from the eastern end of the harbour, and each then turns towards the centre of the city; they cross each other at St Andrew Street, and continue on. The crux of the Dunedin cycleway system therefore was, and is, the Anzac Avenue/St Andrew Street junction, NOT the proposed bridge.

Report 340 estimates the number of additional cyclists using an existing route, when an improvement is made to that route (e.g. adding a cycle lane to an existing road). This calculation is based on existing usage; however there is no existing road at the site, and no cycle traffic would be constrained to use the proposed bridge.

The spreadsheet contained in the report represents cycle traffic from both harbourside routes entering the city to the east of the railway lines. However in 2015, the bridge across the mouth of the Leith did not exist, so there would be no logical reason for any of this northern traffic to use the proposed bridge – it would already be on the city side of the tracks and the small fraction needing to access the harbourside would naturally cross at one of the three northernmost crossings. Later, when the Leith crossing was completed, this northern traffic could make the harbourside/city decision at the fork in the track on the northern side of the Leith bridge.

The Portsmouth Drive spreadsheet figure of 80% is clearly optimistic. The tertiary education centres, supermarkets and takeaway outlets of the northern central city would be the destination of a very high proportion of all cyclists, none of whom would naturally use the proposed bridge. The businesses of the harbourside would be the destination of some others. Relatively few cyclists would use the proposed bridge to access the shops and offices of the southern central city.

The estimate of “up to 2000 cyclists per day after 5 years”, while it cannot be disproved, would be unlikely even from the incorrect high starting point of 419. Clearly this suggests almost 5 times as many, over just 5 years.

2. All projects based on reports containing words like “the New Dunedin Hospital (NDH)” or “construction of the NDH” should be halted and re-evaluated forthwith, with all such references deleted.

There is no evidence that any re-design of the city transport system is required as a result of the NDH; indeed several minor improvements to safety and efficiency will occur due to the relocation of just 400m along Cumberland Street – State Highway 1.

During construction HGVs have, and will, easily enter and leave the sites, just as articulated milk tankers and other HGVs served the Cadbury factory – all aided by the “green wave” of the one-way system. Cars can access the sites in the same way as in earlier years.

The one-way mode means that no vehicle will have any pedestrian or cyclist in its blind spot (LHS) as it enters the NDH – an improvement on the rear (SH1) entrance to the present hospital building.

The most measurable system change will be the reduction of traffic between the SH1 pair and Great King Street, in order to access the existing hospital main entrances – mostly via Hanover and Frederick Streets.

Much discussion has been had in relation to pedestrians, despite the fact of pedestrian phases already existing at all relevant junctions.

Clearly there will be fewer pedestrians in the NDH area, since it will be removed by one block from the George Street surround and the Medical School.

There will be one less junction between the Bus Hub and the NDH, than at present. Furthermore, those unable to find and/or afford car-parks in the area will have to cross one less state highway to reach parking to the east.

Nine out of ten pedestrians who access the NDH blocks will have come from a vehicle which brought them to the city – the remainder will have walked from home or accommodation. This means that NDH has the answer to any perceived pedestrian problem in its own hands: with more than twice the land area available at the NDH than the existing site, on-site car-parking could be provided for the majority.

Proposals to turn St Andrew Street into a pedestrian-only area should be rejected. Major traffic disruption would be caused by the loss of one of the busiest east-west corridors in the central city – which should also remain the “official” SH88.

While it is reasonable for northbound traffic to use Frederick Street, it is bad practice to use this residential street for heavy traffic. Furthermore NDH pedestrians do not need to access this street: on any one day, almost all pedestrians to the NDH will access one block or the other – not both. The remainder could use the overhead link.

3. All work on the eastern city bypass route should be halted until such time as the bottleneck – the short section of Andersons Bay Road between Strathallan Street and SH1 – is extensively modified. There is no logic in SH1 through-city traffic diverting to the eastern bypass route.

There are already tail-backs from this bottleneck along Strathallan Street and Andersons Bay Road, which have been completely ignored in planning this project. Existing traffic between the bypass and SH1 includes that from:

- a. SH88, harbourside commercial & freight and south Dunedin freight hubs & commercial.
- b. Areas between Concord and Andersons Bay, accessing the city.
- c. The whole of the Peninsula.

This project threatens to make Andersons Bay Road as congested as King Edward St already is.

4. A proposal to build another bridge between Hanover Street and the harbourside (DCC workshop October 2023; ODT 2.1.2024) appears based on two questionable ideas.

The NDH: the NDH blocks are surrounded on 3 sides by state highways. Traffic at the St Andrew Street rail crossing is one block away, and therefore of negligible effect – even if it cannot negotiate the Ward Street Bridge.

The Ward Street Bridge: The carriageways on this bridge are actually wider than those on the adjacent SH88; however the 4 corners are tight.

The simple, cheap and effective remedy would be to relocate the footpaths at each corner to positions *behind* their current locations – that is to say “cut the corner” – to enable easing of the corners of the carriageways. This method appears to have worked well at the Andersons Bay Road/Strathallan Street corner.

5. The Albany Street cycleway is an answer in search of a problem, and should not be proceeded with. While the tertiary area is a destination for many cyclists, this cycleway is not likely to be well patronised, and is more likely to become a challenge to those crossing it, than an assistance to those using it.

Cyclists coming from the south harbour cycleway would most likely prefer to approach the tertiary area from the St Andrew Street rail crossing and the quiet residential streets such as Leith, Hyde and Clyde – and not have to cross a cycleway.

Cyclists coming from the hill suburbs can take any of a number of crossings of George Street and the one-way pair – the western end of the proposed cycleway is superfluous.

Cyclists coming from the north harbour cycleway would find Union Street a more convenient route to the tertiary area, rather than going south to Albany Street, only to then return northward.

There is room here for Council to persuade the University to divert some of its passion for providing car-parks into painting some green cycle paths around campus, and Council to do the same on suitable minor roads between Union and Albany streets. A cycle ride beside the Leith would make ideal preparation for any tertiary lecture.

Other campus cycleway candidates would be Leith Walk, Union Street and Castle Street.

6. SUMMARY OF CONSIDERATIONS

Typical DCC project proposals include a Summary Of Considerations, which tick-box how good a project is, with hardly anything worse than "neutral".

This is not realistic in a country where annual incomes only rise at around 5% pa, and the typical rates rise is 10% pa.

I urge DCC to fix this anomaly.

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(DCC Ratepayer)

