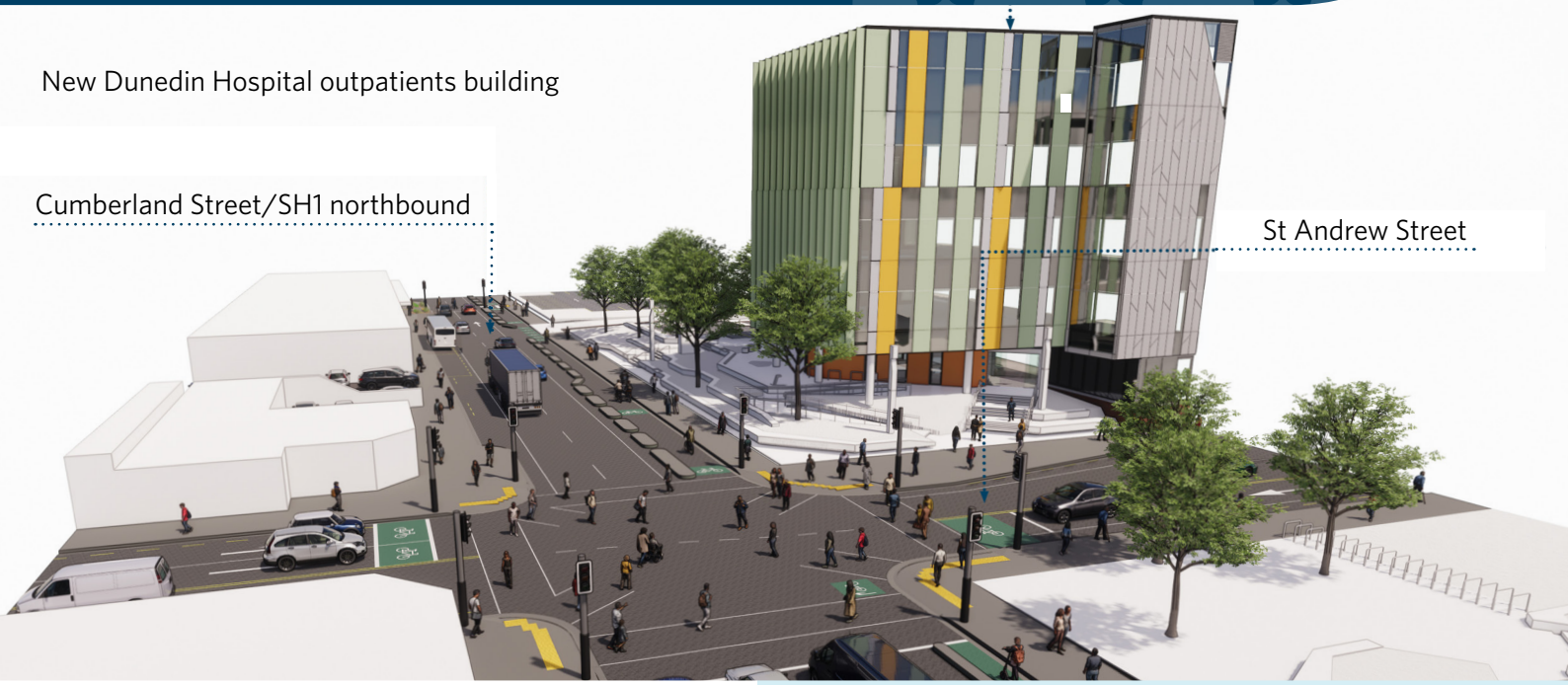
Dunedin improvements



We've developed a proposal to support the successful integration of State Highway 1 (SH1) and State Highway 88 (SH88) with the new Dunedin Hospital and central city, and ensure the safe and efficient operation of SH1.

Our July engagement focused mainly on SH88, including planned enhancements to pedestrian safety near the new hospital, and moving SH88 from St Andrew Street to Frederick Street.

179 people gave feedback through our online survey and a further 14 by email.

Whats being proposed

- New Barnes Dance crossing (where all pedestrians cross the road at once) at the SH88 St Andrew Street/SH1 Cumberland Street intersection to help people reach the main new hospital public entrances safely.
- Remove the westbound right turn from SH88 St Andrew Street onto SH1 Cumberland Street to make space and time for the increased number of pedestrians, including people with mobility needs, to cross the road.
- Two new signalised pedestrian crossings on SH1 outside the Woolworths and the Centre City New World supermarkets.
- Changes to St Andrew Street and other nearby streets to help people driving, walking and cycling, and emergency vehicles, move safely and smoothly around the hospital and surrounding area.
- Left in and left out only turns are proposed to increase safety at the St Andrew/Leith Street and Frederick/Leith Street intersections.
- Move SH88 from St Andrew to Frederick Street.

Main feedback themes

We received a range of feedback from the public, affected parties and stakeholders. Community feedback reflected a mix of support and concern on the proposed changes around the New Dunedin Hospital. Many respondents acknowledged the importance of improving pedestrian safety and accessibility, particularly for vulnerable users, but were concerned about potential impacts on traffic flow, parking availability, and access for emergency services and freight vehicles.

Pedestrian safety and accessibility

Pedestrian safety was a central concern and a key driver of support for many of the proposed changes. Overall respondents saw the Barnes Dance crossings and mid-block signalised crossings, particularly near the New Dunedin Hospital, as necessary to accommodate more pedestrians in this area and to protect vulnerable users. There was support for infrastructure prioritising safe, accessible movement for pedestrians and cyclists. Other suggestions included overpasses or underpasses to separate pedestrian and vehicle flows.

Parking availability and access

Parking changes, especially removals near the hospital and city centre, drew the strongest opposition. Many respondents expressed frustration over the cumulative loss of parking in Dunedin, citing impacts on hospital access, local businesses, and people with mobility challenges. The removal of short-term and all-day parking on St Andrew and Frederick Streets being viewed as particularly problematic.

Suggestions included building multi-level parking facilities, converting all-day parks to short-term spaces, and ensuring any removed parking is replaced nearby.

Traffic flow and intersection design

There was mixed feedback on traffic flow and intersection design proposals. While there was support for simplifying intersections and improving signal timing, other respondents were concerned about increased congestion and reduced access. There was strong opposition to the proposed removal of the right turn from St Andrew Street onto SH1, with opponents citing its importance for emergency services and making it easy for drivers to move about this area. Respondents called for better traffic modelling, trialling changes before they are made permanent, and retaining key turning movements.

Public transport and bus stop changes

Proposals to reduce the number of bus stops on SH1 received mixed feedback. While some respondents supported the changes for improving traffic flow and emergency vehicle access, others were concerned about reduced accessibility for public transport users, particularly those with mobility issues. The proximity of the remaining stops to the bus hub was noted, but many felt that reducing stops could discourage public transport use. Suggestions included relocating rather than removing stops, improving signage, and ensuring that changes do not increase walking distances for vulnerable users.

Freight and emergency services access

Freight and emergency access were recurring concerns, particularly in relation to the removal of turning lanes and moving SH88 to Frederick Street. Respondents questioned whether Frederick Street could safely accommodate heavy vehicles due to its narrow layout and proximity to residential and university areas. Emergency services access was a key issue, with concerns the changes may delay response times, and a call for retaining key turning movements for emergency services vehicles.

Conclusion

Overall, feedback was mostly supportive of the proposed improvements, particularly those relating to safety and accessibility. It also recognised the value of a Barnes Dance pedestrian crossing for safe pedestrian access to the new hospital. There was less support for changes required to make this possible (the removal of the right-hand turn at that intersection). New layouts along key streets to provide safety and efficiency benefits were well received, but not the parking removals to implement them.

This feedback will contribute to the ongoing development and refinement to this plan, so it delivers the best transport outcomes for the new hospital, inner city, and wider Dunedin community. We intend to finalise the plan by the end of 2025 and apply for funding for the next stage in early 2026.

The full project engagement report can be found at: www.nzta.govt.nz/projects/sh1-sh88-dunedin-safety-improvements/publications