

3 September 2025

Queenstown Lakes District Council  
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Tēnā koe

## Queenstown Lakes District Council's Draft Dangerous and Insanitary Buildings Policy

1. This technical advice on the *Queenstown Lakes District Council's Draft Dangerous and Insanitary Buildings Policy 2025* has been compiled by the National Public Health Service (NPHS) Te Waipounamu, Health New Zealand – Te Whatu Ora. NPHS Te Waipounamu provides public health services in the South Island, including the Queenstown Lakes District.
2. NPHS Te Waipounamu recognises its responsibilities to improve, promote and protect the health of people and communities of Aotearoa New Zealand under the *Pae Ora (Healthy Futures) Act 2022* and the *Health Act 1956*.
3. Pae Ora requires the health sector to protect and promote healthy communities and health equity across different population groups by working together with multiple sectors to address the determinants of health.
4. NPHS Te Waipounamu is focused on the achievement of equitable health outcomes. We use the Ministry of Health's definition of equity:

*In Aotearoa New Zealand people have differences in health that are not only avoidable, but unfair and unjust. Equity recognises different people with different levels of advantage require different approaches and resources to get equitable health outcomes.*<sup>1</sup>
5. This technical advice sets out matters of interest and concern to NPHS Te Waipounamu. Our recommendations are based on evidence about public health and equity, as well as the experience of public health officers.

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<sup>1</sup> Ministry of Health – Manatū Hauora (2024, July 2). Achieving equity. <https://www.health.govt.nz/about-ministry/what-we-do/achieving-equity>

## Specific Comments

6. There are many potential health implications associated with people living in insanitary or dangerous conditions. Territorial authorities have a range of legislative tools available under the *Building Act 2004* and *Health Act 1956* to reduce these risks.
7. NPHS Te Waipounamu commends Council for reviewing and strengthening its Dangerous and Insanitary Buildings Policy. We note the Policy's clear purpose, scope, and recognition of obligations under the *Building Act 2004*. We also note that the Policy acknowledges the *Health Act 1956* in the Relevant Legislation section and recognises the role of health and social services when vulnerable persons are involved.
8. NPHS Te Waipounamu endorses the use of a risk-based prioritisation framework (Section 7, Priority) and the intent to engage building owners proactively before conditions become dangerous or insanitary. We also support the stated commitment to interagency engagement with Fire and Emergency New Zealand (FENZ), New Zealand Police, and other professional advisers.
9. NPHS Te Waipounamu commends Council's commitment in the Policy to engage with building owners where buildings are identified to not yet meet the criteria and to work with them to improve their building's conditions before they become dangerous and insanitary.

## Recommendations

10. NPHS Te Waipounamu recommends that the Policy includes specific references in Section 8 (Relevant Legislation) and Section 7 (Policy – Assessment) to *Health Act 1956* Sections 29, 41, 42, and 126.
  - **Section 29** defines nuisances that may relate to overcrowding, insanitary conditions, and dwellings unfit for human habitation. This includes conditions such as severe domestic squalor or hoarding where hygiene and safety are compromised, as well as insanitary or pest-attracting conditions on surrounding land.
  - **Sections 41 and 42** provide for cleansing orders, repairs, or closure of dwellings due to insanitary conditions likely to cause injury to health.
  - **Section 126** addresses infirm and neglected persons. This provision should only be considered when no other feasible interventions are available, given the high legal threshold and the requirement for a District Court order.
11. Although a Medical Officer of Health may invoke section 126 to deal with situations where infirm and neglected persons or domestic squalor are involved, this power must be exercised with restraint and only when the Medical Officer of Health believes a person's health and

wellbeing are at serious risk from their living conditions, and all other practical measures have been exhausted.

12. The primary aim is to maintain the person's independence wherever possible without compromising their own health or public health. In most cases, nuisance conditions or substandard housing should first be addressed using other appropriate legislative and regulatory tools, rather than through invoking section 126.
13. NPHS Te Waipounamu recommends that the Policy includes details regarding responses and actions in relation to environmental interventions by Council, for example cleansing orders, and the abatement of nuisance conditions under the Health Act 1956.
14. NPHS Te Waipounamu commends Council's commitment to engage with stakeholders. In addition to FENZ and Police, we recommend explicitly including public health services (Medical Officers of Health and Health Protection Officers), primary health care providers, mental health services, and social support agencies (e.g., Age Concern) as potential partners in managing complex insanitary building cases.
15. NPHS Te Waipounamu recommends that the Policy usefully expand on the role of Environmental Health Officers (EHOs) in identifying and addressing insanitary and nuisance conditions under both the *Building Act 2004* and *Health Act 1956*, and in referring matters to the Medical Officer of Health where further action is warranted.

## Conclusion

16. NPHS Te Waipounamu does not wish to be heard with respect to this advice.

Ngā mihi,



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