Carrington Road upgrade archaeological assessment

report to Beca and Auckland Transport

Leela Moses



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Prepared by:

Leela Moses

Reviewed by:

M.C. Cull

Matthew Campbell

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1 Introduction

Auckland Transport (AT) proposes upgrading Carrington Road into a multi-modal urban road corridor to provide for bus priority, improved walking and cycling facilities, stormwater management, place-making and safety improvements to enable the housing outcomes of the local housing development, the Carrington Residential Development, support growth and intensification in the surrounding area, and achieve AT's long-term strategic network objectives for the corridor. In conjunction, Watercare Services Limited (Watercare) proposes to concurrently construct a watermain along Carrington Road. Carrington Road runs alongside the historically significant Carrington Hospital precinct. The proposed works are in a dense archaeological landscape. There are five archaeological sites along or adjacent to the road relating to both pre-European Māori and 19th century land use (R11/3552, R11/3560; R11/3561, R11/3552, R11/298 and R11/526). The Carrington (Oakley) Hospital Main Building is scheduled as a Category A Historic Heritage Place in the Auckland Unitary Plan (Item 1618). Te Auaunga is also scheduled as a Category B Historic Heritage Place in the Auckland Unitary Plan (Item 1583). An archaeological assessment of effects is required in support of resource consent applications to Auckland Council and archaeological authority applications to Heritage New Zealand Pouhere Taonga (HNZPT). Liam Winter of Beca, on behalf of Auckland Transport commissioned this assessment from CFG Heritage Ltd.

1.1 Statutory requirements

All archaeological sites, whether recorded or not, are protected by the provisions of the Heritage New Zealand Pouhere Taonga Act 2014 and may not be destroyed, damaged or modified without an authority issued by Heritage New Zealand Pouhere Taonga (HNZPT).

An archaeological site is defined in the Heritage New Zealand Pouhere Taonga Act as:

- (a) any place in New Zealand, including any building or structure (or part of a building or structure), that—
 - (i) was associated with human activity that occurred before 1900 or is the site of the wreck of any vessel where the wreck occurred before 1900; and
 - (ii) provides or may provide, through investigation by archaeological methods, evidence relating to the history of New Zealand; and
- (b) includes a site for which a declaration is made under section 43(1).

The Resource Management Act 1991 (RMA) requires City, District and Regional Councils to manage the use, development, and protection of natural and physical resources in a way that provides for the wellbeing of today's communities while safeguarding the options of future generations. The protection of historic heritage from inappropriate subdivision, use, and development is identified as a matter of national importance (Section 6f).

Historic heritage is defined as those natural and physical resources that contribute to an understanding and appreciation of New Zealand's history and cultures, derived from archaeological, architectural, cultural, historic, scientific, or technological qualities.

Historic heritage includes:

- historic sites, structures, places, and areas
- archaeological sites;
- sites of significance to Maori, including wahi tapu;
- surroundings associated with the natural and physical resources (RMA Section 2).

These categories are not mutually exclusive and some archaeological sites may include above ground structures or may also be places that are of significance to Maori.

Where resource consent is required for any activity the assessment of effects is required to address cultural and historic heritage matters.

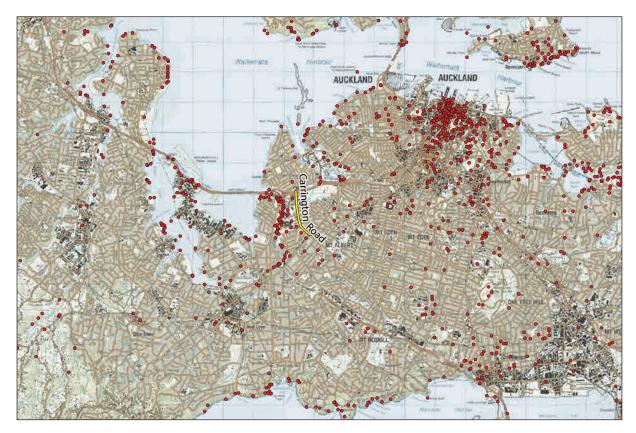


Figure 1. Location of proposed works in relation to recorded archaeological sites.

2 Methodology

The following digital resources were consulted:

- Archaeological site records were accessed from the New Zealand Archaeological Association (NZAA) Site Recording Scheme (SRS) through ArchSite (http://archsite.org.nz).
- The Heritage New Zealand Pouhere Taonga (HNZPT) digital library was searched for relevant reports on previous archaeological investigations (https://dl.heritage.org.nz/greenstone3/library/collection/pdf-reports/).
- Auckland Council Geomaps and Cultural Heritage Inventory (CHI) were checked for heritage sites and extents.
- The HNZPT New Zealand Heritage List / Rārangi Kōrero was accessed for information on listed heritage sites.
- Modern aerial images and land parcel information were accessed from Land Information New Zealand (LINZ) data service (https://data.linz.govt.nz/data).
- Historic aerial imagery was accessed from Retrolens (https://retrolens.nz/)
- Historic maps and plans held by LINZ were accessed using QuickMap.
- Digital NZ was searched for records of old maps and plans.
- The National Library/Alexander Turnbull Library was searched for historic photographs of the site (https://natlib.govt.nz/)
- SmartMaps was used to access Manaaki Whenua Landcare Research soil data (https://smap.landcareresearch.co.nz/maps-and-tools/app/).

Map data was incorporated into the project GIS. Site assessment was undertaken by Leela Moses of CFG Heritage 5 November 2024. This was primarily a visual inspection of the ground surface and any areas of exposed subsoils.



Figure 2. Project overview including Carrington Road Improvements and the Point Chevalier Watermain.

3 Background

The proposed road upgrade works from Great North Road in Point Chevalier, along Carrington Road, to New North Road in Mt Albert. The study area is within the Auckland Volcanic field, a well-preserved volcanic landform covering about 100 km2 of the Auckland urban area. It forms a gently rolling surface with numerous volcanic cones rising above it. Lava caves and tunnels are common features within some of the Auckland flows (Edbrooke 2001: 8).

The study area is located within the Western Springs catchment. The catchment area is approximately 7.5 x 3 km. The highest points in the catchment are Maungawhau / Mt Eden, Owairaka / Mt Albert and Te Tātua-a-Riukiuta / Three Kings, from which water feeds down the valley and creek systems in a north westerly direction and discharges at the Meola Reef (Berry 2007: 29). Much of this area was modified through Public Works drainage programmes of the early 20th century, especially areas of Te Auaunga / Oakley Creek during the Depression era of the 1930s.

3.1 Project description

Carrington Road is a 1.6 km-long arterial road on the Auckland isthmus which connects New North Road at the Mt Albert Town Centre in the south; and Great North Road at the Point Chevalier Town Centre in the north. Auckland Transport (AT) has proposed the Carrington Road Improvements Project (CRIP) to serve planned growth and intensification in the area; and to achieve the long-term

strategic network outcomes for the corridor, particularly a higher level of service for active modes and public transport.

To these ends, the CRIP comprises the following road upgrades which include a section of widening on the western side of the road between Woodward Road and State Highway 16 (SH16):

- Bus/special vehicle lanes (TBC) for most of the corridor length in both directions, and new/ relocated bus stops;
- Improved walking and cycling facilities along the entire corridor length in both directions, new midblock crossings, and a new pedestrian bridge to supplement the existing Mt Albert Rail Bridge;
- Upgraded intersections along the entire corridor length, including four new/upgraded signalised intersections,
- New stormwater management infrastructure, including treatment and conveyance swales on Segar Avenue; and
- Public realm placemaking/landscaping, and new street trees.

In conjunction, Watercare Services Limited (Watercare) has proposed the Point Chevalier Watermain No. 2 Project (the Watermain) along Carrington Road. The Watermain is a Ø750mm concrete-lined steel (CLS) pipeline approximately 1km in length between Seaview Terrace and Sutherland Road, and forms part of a wider scheme to improve supply, maintain levels of service, and provide resilience to both the Point Chevalier and Khyber water supply zones. The design and planning for the Watermain has been expedited to realise efficiencies with the CRIP, and to enable the projects to be constructed concurrently.

Unless otherwise noted, the CRIP and Watermain projects are referred to collectively in this report as 'the Project'. The Project extent is shown at Figure 2. A full Project Description can be found in Section 3 of the Assessment of Effects on the Environment (AEE) report.

3.2 Pre-European Māori

The Tāmaki region was an important and highly populated area during the pre-European period. The central fertile field of volcanic loams supported large crops of kūmara, and the land was heavily gardened. The volcanic cones, including Ōwairaka, responsible for this highly fertile soil featured some of the most impressive pā in the North Island. The narrow isthmus separating the Waitematā and Manukau Harbours provided important portages between the two harbours, which also supplied plentiful marine resources (Glover 2023).

Pre-European Māori settlement of the area was primarily around the pā at Owairaka / Mt Albert, Te Whau / Blockhouse Bay and Te Auaunga/ Oakley Creek. The maunga was a defended pā site and the remains of some of the terraces, pits and midden are still visible today. The lower slopes were likely used for gardens and kāinga (Glover 2023). Te Auaunga / Oakley Creek runs between Puketāpapa / Mount Roskill and the Whau River portage, and served as a source for native crayfish, raupo, eel, weka and flax (Reidy 2007).

The Whau River was an important feature for local Māori, and was used as a portage and food source. This portage, linking the Waitemata Harbour with the Manukau Harbour, worked as part of a larger network of portages in operation around northwest Auckland (Hooker 1997). It was also a seasonal hunting ground for the migratory bar-tailed godwit which, heavy with fat for their migration to Siberia, were only able to gain enough altitude to skim over the trees of the portage where they would be ambushed and struck down by hunters hiding in the canopy (Sewell 1984: 3).

Close to the project area, within what is now Te Whare Wānanga o Wairaka campus (Unitec Owairaka), is a spring fed stream that is known alternately Te Wai Inu Roa o Wairaka, Te Puna Waiora o Wairaka and Te Waimimi o Wairaka and would have been a vital natural resource. Early Māori occupants of the Ōwairaka (Mount Albert) area utilised Oakley Creek and its catchment to support settlement, and gathered fresh water, crayfish, eels, and shellfish from the wider area. Abundant crops of flax and raupo around the waterway were commonly used to make clothing, roofing and matting, and stands of native timber, particularly karaka, facilitated the construction of whare, storage houses and defensive palisading (Matthews and Matthews 2009).

3.3 19th century

European settlement spread outwards from central Auckland from 1840 onwards, with settlement initially focussed on the waterways and coastlines. Farming was undertaken with the rich soils, and various industries including pottery and brick making, flour milling, and tanning took place along the rivers (Farley and Clough 2016).

In 1859 John Thomas, a flour miller from Devon, bought 8 acres of land along Oakley Creek and secured the water rights up to the waterfall (Farley et al. 2017). Thomas established a flour mill on the south side of the Oakley Creek, which traded as the Star Mills although it was generally known as Thomas's Mill. In 1879 the Garrett Brothers purchased the property and established a tannery.

The North Auckland Railway Line, spanning Auckland to Opua, began construction in 1870, with the first passenger trains running Easter Monday March 1880 (Glover 2020; Dunsford 2016). The railway through the heart of Mt Albert, whose station opened in 1880, helped shape the area, drawing investment to the area (Dunsford 2016).

3.4 Carrington Hospital

In 1846 the Lunatics Act was passed, enabling the confinement of those deemed 'insane', either in the city gaol, or at detached structure quickly built at Grafton Hospital. This structure was not fit for purpose, and quickly became overcrowded. Plans for a purpose-built asylum, modelled on the great lunatic asylums of Britain, were made. Criteria for the site reflect the moral and cultural attitudes of the time. These included practical aspects such as soil type, elevation, land size and water supply, but also undulating grounds, distance from loud or offensive industries, features which were presumably seen as important for the patient's useful employment and wellbeing (*Colonist*, 31 March 1863: 3; Finer 2023). The site at Whau was selected in 1863, with construction completed in March 1867on the neighbouring property across Te Auaunga/ Oakley Creek at Allotments 30, Parish of Titirangi (*New Zealand Herald*, 6 September 1866: 3). Later in 1879, the Crown purchased Allotments 31, 32 and 33, Parish of Titirangi, from Joseph Howard for the sum of £4200 (Deeds Index A2/129-131, Archives New Zealand) for the purpose of establishing a farm to feed the patients and provide work for them. These properties and the hospital were recorded in SO 1992 from 1879.

Known variously as the Whau Asylum, Auckland Asylum, Oakley Hospital, Avondale Asylum, and Carrington Hospital, the hospital and its construction were a source of pride for Aucklanders. The asylum was a grand structure, built in the style of those in Great Britain, with the initial design sent from England. All the materials, however, were sourced locally, including brick manufacture by Dr Pollen on the banks of the Whau River, scoria from local quarries, wood from the Titirangi Ranges, and other materials from across the colony. The construction was also carried out by local workers. An article in the New Zealander stated "for the information of those persons who contend that if we want to raise a structure of any pretensions either to strength or beauty we must go abroad for the materials, as we cannot get them at home... everything connected with this asylum is indigenous to New Zealand, and was all formed and moulded by Auckland men" (New Zealander, 1 December 1865: 3; Finer 2023). The reporter also noted with pride that it was, at its completion, the largest and grandest brick building in the colony, as well expressing the pride of the community at the care being taken of the patients.

In addition to being a source of pride, the asylum was a part of the local community. Regular entertainments were hosted with plays, recitation, music and dancing open to the public. Newspaper articles comment on the success of these evenings, "the dining-room being, in fact, crowded by lady and gentleman visitors from Auckland, and the gentry of the neighbourhood" (*Daily Southern Cross*, 25 June 1869: 3). The curious were also, at times, able to tour the facility. In these cases, the inmates, their treatment and appearance were themselves presented as a form of entertainment (*Daily Southern Cross*, 1 December 1869: 4; Finer 2023).

In 1877 an Inspector was appointed to investigate and review the state of the colony's asylums. The Skae report found all asylums overcrowded and under resourced, including the Whau Asylum, where a structure designed for 50 patients housed 165. The report noted that despite 26 acres being attached to the asylum, only three or four were being cultivated. Only a small number of the patients



Figure 3. 1940 aerial photograph showing Carrington Hospital, with the works footprint in green.

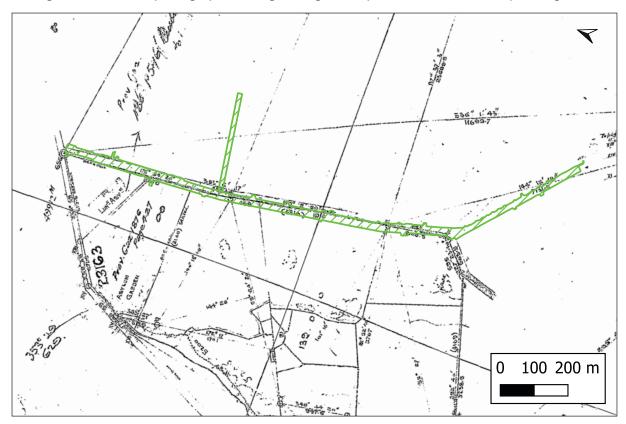


Figure 4. SO 1992 drawn 31 July 1879, with the works footprint in green.

were employed, and recreation was severely limited, with open courts and day rooms being used instead to house patients. Many patients were restrained for large periods of time, including overnight (*New Zealand Herald*, 7 April 1877: 3).

Water supply for cooking, bathing and cleaning was primarily obtained from two sources; a large number of cisterns within the roof structure of the building, and from a well (*New Zealander*, 1 December 1865: 3). The supply of water appears to have been satisfactory for some years, however it was noted that the 5 acres of land near the creek (Oakley Creek) had a good spring of water, and it would be advantageous to purchase the land (*AJHR*, 1883 H3: 6). A reservoir and pumping-station was completed in 1897 (AJHR, 1898 H7: 5), however by 1900 it became apparent that the rapidly expanding Auckland region's water supply was causing concern and the Asylum agreed to pump excess water to Western Springs (*New Zealand Herald*, 23 February 1900: 3). Later in 1904, a larger pumping station was built to cater for greater demand for water supply. Ultimately in early 1909 the Mount Albert Road Board sought to take over control of the springs from the Public Works Department in exchange for supplying water to the Asylum at no more than £150 (*Auckland Star*, 6 January 1909:9), which was agreed to in 1910.

3.4.1 Hospital farm

The larger portion of the Hospital site was taken up with a farm, intended to both supply the hospital, and to encourage outdoor activity for the patents. The farm had gardens, a piggery, auxiliary accommodations, and a network of stone walls. Many of the farm buildings can still be seen in aerial photographs from 1940 of the hospital grounds, including the piggery built in the 1880s, and swill store (Figure 3). The Auxiliary Asylum building was established in 1884 due to a need for greater accommodation capacity for patients, but later destroyed by fire in 1894 (*Auckland Star*, 21 December 1894: 4). A replacement building, Auxiliary No.1, was built in 1896 and is currently used by Unitec (*Appendices to the Journal of the House of Representatives [AJHR]*, 1897 H7: 2). By 1926 it was renamed Oakleigh Hall, and was used as a 'parole villa' for 150 men (*AJHR*, 1926 H7: 9). A number of other buildings were constructed on the hospital grounds, including the farm managers house (1882), workshops (1880s), accommodation for the Medical Superintendent in 1909 (later used to house female patients) and 1930 (Penman House), Auxiliary No.2 (1913) and Auxiliary No.3 (1915).

3.5 Archaeological background

Several archaeological reports have been completed for the wider area around Waterview, several of which have focused on the Oakley Creek surrounds, including the hospital and related areas.

In 1987 Calyton Fredericksen conducted an archaeological survey of the Oakley Psychiatric Hospital Grounds (Fredericksen 1987). This involved the survey of 2 relatively small areas within the Hospital grounds, survey Blocks A and B. From this a stone wall was identified as dating to the 19th century, now recorded as R11/2980, located approximately 200 m west of the proposed road upgrades. Block B was found to have a terrace, two depressions, a European stone alignment and a shell scatter. One of the depressions appeared to be natural, the other had concrete chunks in the fill. The stone alignment was aligned with the fence, and he determined that this was probably modern and associated with building the adjacent road. The terrace he determined has mixed soils probably from pre-European Māori gardening. The shell scatter he determined was about 2m x 2m and was archaeological, this is now recorded as R11/1387.

Between 2000 and 2021 Brent Druskovich completed a number of field surveys and monitoring works near Oakley Creek. From 2000 to 2010 several surveys were conducted as part of preliminary investigations for the Waterview Connection project (Druskovich 2010), several bridge replacements were monitored along the Oakley Creek walkway (Druskovich 2009b), works associated with the upgrade of facilities around the Oakley Creek waterfall were monitored (Druskovich 2011), and community planting as part of the Revegetation Programme for the Oakley Creek Walkway was monitored (Druskovich 2015; Druskovich 2022). During these, a number of new sites were recorded, including several drystone retaining walls (R11/2473, R11/2500), a drystone walled race (R11/2205) and several bridges and a drystone wall (R11/2373). In addition, site R11/524 was impacted to a minor

extent by the planting, and a midden sample was subsequently taken for analysis and a radiocarbon date collected. This returned a result of cal AD 1454–1651 (Druskovich 2015).

In 2010 Clough and Associates completed an assessment of effects report as part of the Waterview Connection project. Later in 2012 Richard Shakles et al. undertook a field survey in the Oakley Creek/Waterview area as part of the Central Interceptor project but no new archaeological sites were recorded during the survey. Rod Clough and Zarah Burnett completed an archaeological assessment of the Waterview Shared Path proposal in 2015. This identified a stone wall (R11/2979) that was previously unrecorded as an archaeological site despite being subject to a heritage Covenant. The final report for the Waterview Shared Path was completed in 2017 (Farley et al 2017). The affected sites were a drystone wall (R11/2979) and a midden (R11/1387), and these excavations revealed deep deposits connected with the demolition of hospital and farm buildings, as well as rubbish disposal on the banks above Te Auauangi/ Oakley Creek, as well as intact pre-European Māori occupation on the flats above. In 2015 Russell Foster carried out an archaeological assessment of the Unitec grounds south of Farm Road. This identified a number of archaeological sites within that area and noted that just one site, R11/1387, was to be affected by the proposed development.

Clough and Associates undertook a number of surveys as part of the Wairaka Precinct Due Diligence. The area was covered in community gardens, landscape supplies, buildings and paved walkways. The report considered it likely that subsurface deposits relating to pre-European Māori occupation would be present at the site (Farley et al. 2017).

It is notable that although pre-European Māori sites are concentrated along Oakley Creek, with 19th century sites more common the further you go from the stream, several midden sites have been recorded further inland. This includes R11/298, a midden with hangi stones and a piece of obsidian, recoded just 120 m from the proposed road upgrade, and R11/526, located 130 m from the proposed road upgrade.

CFG Heritage are working extensively inside the Carrington Hospital precinct, with various projects in either assessment, application or investigation phases. Assessment for the Te Whenua Ha Ora development project included survey of the current community gardens and surrounds, an area abutting Oakley Creek. It found midden scatter across the site, suggesting an insitu deposit deposits has been disturbed by the gardening. It also noted that toki and other material had been found in the garden area (Moses 2023). Assessment for the Unitech Open Spaces project examined several areas dispersed across the Carrington Hospital Precinct. These included two areas directly abutting the proposed road upgrades - in front of Building 1 and a large block at Gate 3 (Figure 5). Both were found to have a potential for previously unidentified archaeological deposits related to both 19th century hospital and farm activities, and pre-European Māori activities. The area around Building 1, the main Carrington Hospital building, presented a particular risk, despite extensive modification.

During the Carrington Early Works project at Outfall 6, approximately 600 m west of the proposed works, a number of both pre-European Māori and 19th century features were identified. These included a shell midden, two firescoops, a much larger and deeper fire feature and associated rakeout, all recorded as part of R11/3313. Additionally, seven 19th century features connected with the historic 19th and early 20th century occupation and farming of the Carrington Psychiatric Hospital grounds were recorded. These included a brick-drain with access point, a brick chimney or incinerator, a brick road or driveway, a stone-lined drain, basalt stone kerbing, and two ceramic drainage pipes which were recorded as R11/3376 (Ussher 2021). The brick and stone features represent the development of infrastructure for drainage and accessways to Te Auaunga Creek. Despite extensive archival research, there are no available plans showing any of these features. Aerial photography from 1930 and 1940 confirms the presence of a small number of features at this time. A basic chronology of construction can be surmised based on this information, the markers marks on the bricks and ceramic pipes, alignments of the various trenches and features, and their relationships with one another stratigraphically:

- 1. Brick drain: 1880–1900
- 2. Brick road / drive and kerbstones: 1890-1900
- 3. Stone-lined drain: 1879–1920 onwards
- 4. Ceramic pipes and sump: 1910 onwards
- 5. Dumping of material on hillside above Te Auaunga Creek: late 1800s-mid-1900s.

Assessment by Ella Ussher (2021) identified both pre-European Māori and later 19th century archaeological sites. These included shell midden site R11/3313, Oakley / Carrington Hospital outbuildings R11/3365, drystone retaining wall R11/2473, and the Oakley / Carrington Hospital which is scheduled in the AUP as Historic Heritage Place (# 1618), as well as the asylum farm milking sheds site R11/3336 and piggery R11/2983, and shell midden site R11/524 (Ussher 2021a, 2021b, 2021c, 2022).

Five new archaeological sites were recorded during monitoring for the Carrington Backbone works project (Figure 6). Pathway construction next to the Mt Albert Pump Station and directly adjacent to R11/3336 (former Carrington Hospital milking shed), uncovered a 19th century midden, including shell, ceramics and tobacco pipe stems (R11/3551), located 80 m northwest of the proposed works. 100 m northwest of the proposed works, underneath a 19th century road, was a pre-European Māori shell midden (R11/3528). Investigation of this midden found that it appeared to be the remains of a large feature with dark fill, and lenses of shell midden. The feature currently measures approximately 4.5 x 2.5 m, though its size and shape have probably been extensively modified over the last 150 years. It was vertically truncated, with several different road building events covering the feature, as well as having several service trenches cut through the feature. A partial primary crouched burial, part of which had been removed at some stage by a service trench, was uncovered beneath the midden. The resulting feature is therefore a collection of in situ and disturbed deposits crisscrossed with modern services. The 19th century road overlying the midden, which was also visible underneath the modern road in several other service trenches and pits across the area, was recorded as R11/3553. An additional shell midden (R11/3550) was recorded beneath a modern road 130 m west of the proposed works. A tobacco pipe stem was found in the direct vicinity of the midden, but their relationship is unclear.

Monitoring of earthworks around Building 1 (the 19th century portions of which are recorded as R11/3561) have also identified a diverse range of 19th and early 20th century features (Figure 5). The widening of Gate 1 and the removal of a carpark to construct a new road directly abutting the proposed road upgrades, found the area to have a standard layer of metal and asphalt over clay subsoils. A large number of square and rectangular postholes, some with untreated wooden posts visible, were recorded as R11/3552, probably relating to the 19th century Carrington Hospital laundries (Figure 7). Historic aerial photographs indicate that these may have been to support washing lines, as they were located near the 19th century laundries which were later converted to patient rooms (Pearson, 2014). There were also a number of concrete steam tunnels, which operated at the hospital from the 19th and into the 20th centuries, and had later been used as trenches for modern services. A number of rough basalt lined drains were identified, though their function and age have not yet been determined (Figure 8). The age of these features has not yet been determined. The known extent of R11/3552 was destroyed for the construction of Gate 1.

Trenching for services was also carried out running parallel to Carrington Road, including cutting under the Airing Court wall (R11/3560). This trench, measuring 4 m wide by 160 m long, showed that subsurface deposits vary considerably across the areas, ranging from topsoil directly over natural clay subsoils, to areas built up with older demolished material, including bricks dated to the 19th century, and areas with early 20th century services. The full trench was dug up to the base of the Airing Court wall, with a narrower cut drilled underneath the northern section of the wall itself, where it cut west towards the main hospital building (Figure 9). Trenching under the showed it to have relatively shallow foundations, reaching approximately 500 mm, with some broken brick mixed into the underlying clay fill (Figure 10 and Figure 11).

Somewhat further from the proposed road upgrades, extensive works have been carried out behind Building 1 (Figure 5). Removal of the 20th century additions to the building, and general trenching, show an area with extensive layers of use and reuse. Much of the area was built up using demolition material. This material consists largely classic Carrington bricks, though an occasional W. Hunt brick indicates that the demo material dates to the 19th century. In some areas evidence of older surfaces or pathways were visible. Occasional pieces of material culture, including ceramics and clay tobacco pipe stems, were also present in the demo material. This area included R11/3365, Carrington Hospital outbuildings which were recorded on the basis of 19th century plans. No evidence of in situ foundations or remains of these structures was identified and the site has been recorded as destroyed.

Outside of the Carrington Hospital Precinct and Owairaka, a number of other sites have been recorded in the Cultural Heritage Inventory within 100 m of the proposed works, though none will



Figure 5. Locations of previous or ongoing CFG Heritage works directly abutting proposed road upgrades.



Figure 6. Archaeological sites recorded or updated during Carrington Backbone works.



Figure 7. Example of a posthole with wood at Gate 1 on the Carrington Backbone project.



Figure 8. Excavated section of a stone lined drain near Gate 1 on the Carrington Backbone project.



Figure 9. Map of the trenching along the Airing Court wall (R11/3560) during the Carrington Backbone project.



Figure 10. South facing view of the trench approaching the Airing Court wall (R11/3560).



Figure 11. Close up view of trench at the base of the Airing Court wall (R11/3560).

be directly impacted by the works. At the Point Chevalier end of the project, a row of early 20th century shops (Items 22042, 22041, 22040, 18466, 22039 and 18668) extend from 15 to 17 m from the proposed works. These are largely interwar shopfronts, with the exception of the Ambassador Theatre (item 18466), which is also scheduled in the AUP as Item 1880, Category B. This theatre was designed by prominent Auckland architect A. Sinclair O'Conner and constructed in 1930. Its façade is in the Stripped Classical style typical of the Inter-war period, and its façade height is equivalent to the three-storey building of the time (Reynolds and Associates: 2014).

Further to the south, the Carrington Hospital superintendent's residence (Penman House) is listed as CHI Item 20324. The proposed works extend to within 10 m of this structure. A fencible cottage is recorded as CHI item 3175, some 75 m from the proposed works.

At the Mt Albert end of the proposed road upgrades, two sites are listed in the CHI. Item 3173 Edward Allen's House (Allendale) is also scheduled as Category B as Item 1734 in the AUP. The house is part of the original allotment purchased by Mr. Allen in 1863. The original farmhouse appears to have been constructed in simplified Carpenter Gothic style, possibly similar to the early stages of Alberton (which was contemporary with Allen's house) but the only photograph available is one apparently taken from the front, which features in Dick Scott's Old Mt Albert history. The house was the location of early meetings of the Mt Albert Highway District, when the district included both Mt Albert and Avondale areas (Trutman 2008).

Approximately 100 m Southeast of the proposed works is the Mt Albert Train Station. The station and railway line were initially constructed in 1880, and is recorded as archaeological site R11/3319, and CHI item 19375.

4 Field assessment

The proposed works will take place largely inside the existing road reserve, with some works extending into properties to the west. This field assessment has focused on areas of concern, par-

ticularly where the works run alongside heritage buildings listed in the CHI, as well as the former Carrington Hospital and Hospital Farm.

At the southernmost extent of the project, the proposed works run alongside the Mt Albert rail station overpass. The entire area is concreted, with limited visibility of the tracks (Figure 12).

Further to the north, alongside the former Hospital Farm area, a footpath is surrounded by overgrown vegetation, with recent topsoil stripping in some areas due to other development projects. Where subsoils are visible they are largely clays fills, with evidence of older demolition materials mixed throughout. It is unclear where natural subsoils have been exposed, if at all (Figure 13 and Figure 14). Very little ground surface is visible due to berms, footpaths and ongoing construction. Where the proposed road upgrades will impact the brick walls related to Carrington Hospital Building 1, (Figure 15 and Figure 16), no additional archaeological material was visible. Sections of the walls, particularly the taller Airing Court wall (R11/3560), date to the 19th century and are therefore archaeological. The lower brick wall (Figure 17) is a more recent 20th century addition.

The northern most section of the works runs across a motorway overpass, extending to the intersection of Carrington Road and Great North Road. Although the proposed road upgrades extend to without 16 m of CHI item 22042 (Historic Structure at 1234 Great North Road), there is no evidence of archaeological material inside the works area (Figure 18).



Figure 12. Southeast facing view of the Mt Albert rail overpass.



Figure 13. South facing view from Farm Road, along the former Carrington Hospital Farm.



Figure 14. North facing view along the former Carrington Hospital Farm.



Figure 15. Southern end of Airing Court wall (R11/3560).



Figure 16. North facing view along the 19th century Airing Court wall (R11/3560).



Figure 17. North facing view of 20th century wall running along the edge of the Building 1 (R11/3561).

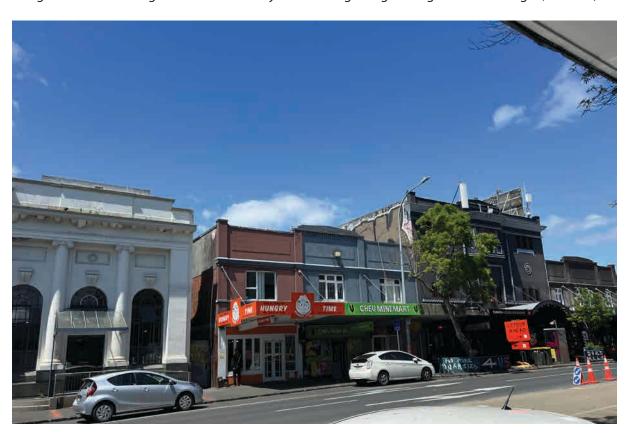


Figure 18. Southeast facing view of CHI listed buildings on Great North Road.

5 Assessment

5.1 Assessment against AUP(OP) Chapter D17

The proposed road upgrades extend inside the scheduled extent of the Oakley Hospital Main Building (ID 1618), which is scheduled in the Auckland Unitary Plan (AUP) as a Category A Historic Heritage Place.

The Heritage values of Oakley Hospital Main Building (ID 1618) are: A -Historic, B – Social, F – Physical attributes, G – Aesthetic, and H – Context. Listed exclusions in Schedule 14.1 Schedule of Historic Heritage are all buildings and structures constructed after 1905, whether attached to the Oakley Hospital Main Building or freestanding; all vegetation within the extent of place; all post 1905 modifications to the interior of the Oakley Hospital Main Building.

The Airing Court Wall (R11/3560) is inside the Oakley Hospital Main Building (item 01618) scheduled extent, and although it is not specifically listed as a primary feature, it was constructed prior to 1905 and is therefore not excluded.

The relevant activities in Table D17.4.1 are:

- (A1) Demolition or destruction of 70% or more by volume or footprint (whichever is greater) of any feature within the scheduled extent of Category A places is a Non-Complying activity.
- (A9) Modifications to, or restoration of, buildings, structures, fabric or features of a scheduled historic heritage place, is a Restricted Discretionary activity.
- (A10) New buildings or structures within the scheduled extent of Category A places is a discretionary activity.

Moreover, the Project also triggers restricted discretionary activity consent under E26.6.3.1(A115) for works within 20m of a scheduled historic heritage place.

5.2 Assessment of values

The following assessment of archaeological values is based on the criteria set out in the HNZPT (2019). This assessment relates only to potential archaeological values. Other interested parties, in particular mana whenua, may hold different values regarding the effects of the project.

5.2.1 R11/3560, Airing Court wall

Condition The Airing Court wall is currently largely overgrown with vines. However, the visible

portions of the wall appear to be in good condition.

Rarity The Airing Court wall is the last remaining full height brick wall associated with the

hospital.

Context The Airing Court wall is part of the wider context of the Oakley Creek Hospital.

Information There is the potential for scientific information to be recovered by archaeological

means if archaeological material is uncovered during works.

Amenity The Airing Court wall is visible from the road and is one of the public facing portions

of the Oakley Hospital. It was high Amenity value.

Cultural Any potential subsurface historic deposits relate to the historic occupation of the

property.

5.3 Assessment of effects

5.3.1 Earthworks

Earthworks extents for the project will entail the removal of existing road and footpath surfaces down to basecourse, with additional trenching down to 4.1 m metres for services. Along the western edge of the route, works will extend up to 7–8 m beyond the road reserve boundary. Along the eastern edge of the route, works are confined to within the existing road reserve. Given the extent

of the proposed earthworks, any archaeological sites inside the proposed works corridor are likely to be destroyed.

5.3.2 Carrington Hospital Precinct

The proposed works extending from the Carrington Road motorway overpass to the intersection of Carrington Road and Woodward Road, runs alongside the former Carrington Hospital and associated Hospital Farm. The Carrington Hospital and associated farm make up an extensive archaeological landscape, with sites relating to both pre-European Māori and 19th century European land use common. In particular, the northernmost portion of the proposed road widening extends into the scheduled extent of Oakley (Carrington) Hospital Main Building (ID 1618, Category A), although outside the extent of archaeological site R11/3561 (Carrington Hospital Main Building) This will involve the complete removal of 65 m of the 19th century brick Airing Court wall (R11/3560) inside this extent, as per proposed Condition 17 (b)(iii)(A). The removal of the standing wall structure is assessed as part of the built heritage impact assessment undertaken by Dave Pearson Architects for this project (DPA Architects 2025). This will have a moderately negative impact on the heritage values of the place, and also has the potential to negatively impact previously unrecorded subsurface archaeological deposits that may be present (Figure 24). Earthworks inside the scheduled extent of the Carrington Hospital Main Building are described in more detail below, however all are likely to reach depths where any archaeological deposits present will be negatively impacted or destroyed.

Beyond the main hospital building, the works will either be directly adjacent to, or inside the former Hospital farm grounds. The farm included an extensive network of stone walls, farm buildings, and also residences for farm workers, and hospital staff, with the Chief Medical Doctors house, Penman House (CHI item 20324), located just 24 m from the proposed works. Although no previously recorded archaeological sites will be impacted beyond the Main Hospital Building, ongoing works in the wider hospital precinct indicate that there is a high risk for previously unrecorded archaeological



Figure 19. Earthworks proposed alongside and inside the former Carrington Hospital precinct / farm.

deposits, both pre-European Māori and 19th century, to be present where soils are unmodified, or where the ground has been built up. Proposed earthworks along Carrington Precinct will extent up to 7–8 m inside the precinct, and will reach depths of up to 4.1 m. There is therefore a risk potential to impact previously unrecorded subsurface archaeological deposits which may be present (Figure 19).

5.3.3 Earthworks inside the scheduled extent of item 1618

The 65 m long Airing Court wall (R11/3560) will be entirely demolished, and the area under the wall will be stripped to a depth of up to 0.8 m. Removal of the wall will be carried out in such a way as to preserve as many as possible of the bricks for reuse.

The 20th century low brick wall will be removed, and the area under the wall cut to a depth of up to 0.8 m.

Road widening is proposed inside the scheduled extent of Carrington Hospital Main building, for both raised and at grade cycle lanes, new footpaths, new shared paths, and new green spaces, as well as a new bus stop. Road widening works will extend along the length of the scheduled hospital extent, approximately 185 m, extend up to up to 8 m inside the Carrington Hospital site, and will generally reach depths of 1.3 m. Proposed road widening will narrow down near the corner of Gate 1 to avoid impacting the Carrington Main building (Figure 20 and Figure 26).

Underneath the new and existing footpath, running along the boundary of the Carrington Hospital site, trenching will be required to install a 750 mm diameter watermain, stormwater pipes and manholes, and several power and communications ducts. The proposed trench will run across the length Carrington Hospital Main Building site. The trench will be at 1.6 m wide, widening to 4 m for chambers and manholes, including one alongside the site (Figure 22).



Figure 20. Road widening works inside the scheduled extent of the Carrington Main Building (item #1618).



Figure 21. Location of the 19th century Airing Court wall (R11/3560) and 20th century brick wall.

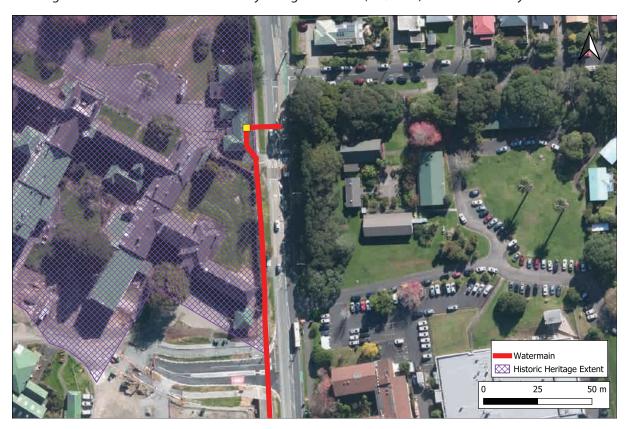


Figure 22. The proposed utilities trench beside the Carrington Hospital main building (R11/3561).

An existing bus stop positioned just outside the scheduled extent of the Carrington Hospital main building will be removed. A new bus stop will be constructed on the new footpath, since the scheduled extent. The bus stop will include a full width shelter and bins, measuring approximately 5 x 2 m.

5.3.4 Woodward Road to Prospero Terrace

The proposed works along this portion of Carrington Road runs past residential properties. One shell midden (R11/526) is recorded within 130 m of the proposed works, with fencible cottage (CHI item 3175) located within 75 m of the proposed works. Neither will be impacted by the proposed works although their presence indicates that archaeology may be present outside of the direct Hospital precinct. It is possible that previously unrecorded archaeological deposits, both pre-European Māori and 19th century, may be present where soils are unmodified, or where the ground has been built up. There is therefore a low risk that previously unrecorded subsurface archaeological deposits may be impacted.

5.3.5 Mt Albert Train Station

The proposed works terminate alongside the Mt Albert Train station and overpass. The station itself is recorded as archaeological site R11/3319. The rail line is known to have been constructed in 1880. Station R11/3319 is recorded some 150 m west of the current overpass, with the existing station extending up to 50 m from the overpass. The proposed works in this area include construction of an extension of the existing overpass, to accommodate a cycle lane, and new footpath. The extension will be constructed on the eastern side to the existing overpass, away from R11/3319. Construction will require the installation of two 1 m diameter columns to support the addition, which will also be attached to the existing overpass (Figure 23). There is therefore a low risk that archaeological deposits related to the early operations of the Mt Albert railway line and station may be impacted.

5.4 Mitigation of effects

In order to avoid damaging the Carrington Hospital Main Building, a localized narrowing of the corridor (from 28.2 m to approximately 25 m), with localized realignment to the east, has been incorporated (Figure 26) in to the design. Narrowing the corridor beyond this, and without further widening on the eastern side of Carrington Road, would result in the road remaining at its current width of ~20.5m, which is insufficient to accommodate the transport outcomes sought in this location. This would result in the loss of a number of important features of the proposed road widening, potentially including the bus lanes, which are central to the purpose of the project. As detailed in section 3.1.5 of the AEE, all viable options include the removal of the wall, even with localized narrowing and realignment.

Prior to demolition of the Airing Court Wall (R11/3560), the structure will be recorded to a minimum standard HNZPT Level 2 (HNPZT 2018). Additional mitigation of effects to standing structures (Airing Court Wall), are largely addressed separately in the built heritage impact assessment prepared for this project (DPA Architects 2024), and in the requirements of the proposed conditions of consent. Potential mitigation includes the construction of a section of brick paving in the cycle lane, following the alignment of the Airing Court wall (R11/3560) and constructed using the wall's bricks. Interpretive panels could also be constructed, describing the history of the wall and its use, in the context of the wider history of the asylum.

During demolition of the wall, and during earthworks in all areas identified as high risk (Figure 25), monitoring of earthworks by a qualified archaeologist, and recording exposed features and stratigraphic profiles, with sampling where required, and allowing sufficient time for archaeological investigation when necessary, is an appropriate level of mitigation.



Figure 23. Works proposed near the Mt Albert Train Station.



Figure 24. Locations of the areas described in assessment of effects.



Figure 25. Map of the project showing general levels of risk of impacting archaeological sites.

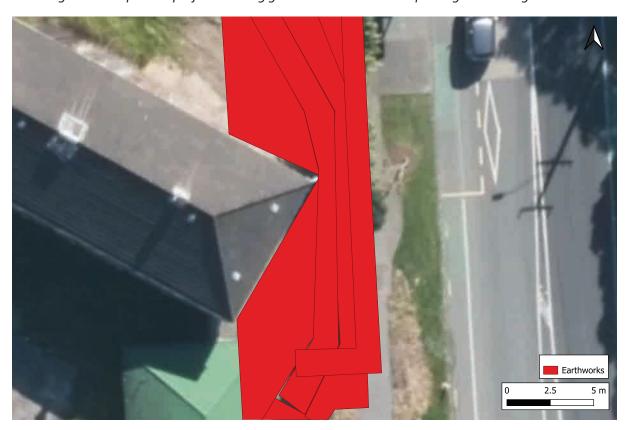


Figure 26. Localised narrowing of the project to avoid damaging the Carrington Hospital Main Building.

6 Recommendations

These recommendations are only made based on the archaeological potential that has been outlined above. Any other values associated with special interest groups, including tangata whenua, can only be determined by them. It is recommended that:

- an authority to destroy, damage or modify R11/3560 and R11/3552, as well as any previously unrecorded pre-European Māori and 19th century archaeological deposits that may be discovered during earthworks be applied for from Heritage New Zealand Pouhere Taonga (HNZPT) under Section 45 of the Heritage New Zealand Pouhere Taonga Act 2014;
 - note that this is a legal requirement;
 - the authority application should be accompanied by an Archaeological Management Plan that outlines where an archaeologist must be present for earthworks, contractor briefings, responsibilities of parties and contact details;
 - no authority should be applied for without consultation with the appropriate tangata whenua authorities; evidence of consultation, and views expressed, will be required by HNZPT, and will be considered when deciding about the granting of the authority
 - note that the application process may take 20–40 working days from the date of acceptance, and following issue there is a period of 15 working days during which earthworks cannot commence to allow for appeals to the Environment Court;
- in the event of kōiwi (human remains) being uncovered during any future construction, work should cease immediately and mana whenua should be contacted so that suitable arrangements can be made;
- since archaeological survey cannot always detect sites of traditional significance to Māori, or wahi tapu, the appropriate mana whenua authorities should be consulted regarding the possible existence of such sites, and the recommendations in this report.

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