## Additional Points for Submission to the Legco Panel on Housing in relation to the proposal for the Divestment ("Divestment Proposal") of the Housing Authority's ("HA") retail and car parking facilities ("RC")

On behalf of the members of the Practicing Estate Doctors' Association ("PEDA") it is hereby submitted that the HA's premises loased to medical practitioners as medical clinics ("Clinic") should not be included in the practitioners as medical clinics ("Clinic") should not be included in the practitioners as medical clinics ("Clinic") should not be included in the practiciners of the facilities in the Divestment Proposal for the following reasons:

it is noted that from the consultation paper that (so far) the premises that will be excluded from the Divestment Proposal are premises that are in poor location(s), of small scale, old age, or in obsolescent condition, it has been suggested that, in addition, obsolescent condition, it has been suggested that, in addition, certain other premises are not to be included in the Divestment certain other premises are not to be included by tenants that Proposal, such as, premises that are occupied by tenants that provide services to the community of the residents of the HA's estates, for example, [premises occupied by kindergartens].

The medical practitioners of the Clinics provide medical services to the community of the HA's estate residents. It is needless to stress the importance of such services, however, the importance of the role of the Clinics in the community, and the services provided by such Clinics must be highligted. The policies adopted by HA in relation to the Clinics ensures that, among other things, a sufficient number of Clinics are situated in a HA complex, not an under supply, nor an over supply of Clinics, in a HA complex serving the nearby HA residential estate(s) and thereby promoting a healthy competitive market and ensuring the quality of the medical services provided. So far, the Divestment Proposal does not address this issue. In the absence of such policies or considerations, and where the Clinics are treated as mere retail premises, the negotiation, and the grant, of the leases are likely to be dictated by pure commercial objectives. This would, ultimately, lead to a disruption, in terms of both quality and quantity, to the medical services provided to the community of the residents of the HA's estates and the potential disruption to the user of the services of the "RC" is, we note, one of the main concerns of the Divestment Proposal.

Given the role of, and the services provided by, the Clinics, it is important that the Clinics should not be regarded and treated as mere retail premises under the Divestment Proposal.

- (ii) It is in the interests of the users of the medical services that there be a continuity of, the medical services provided by the relevant doctor, and the doctor patient relationship. As such, it will be reasonable for the users of the medical services (ie. the community of the residents of the IHA's estate) to expect that the medical services offered to them after the implementation of the Divestment Proposal will be largely uninterrupted. It is difficult (if at all possible) to envisage how a commercial listed entity will be able to take into such social considerations, or implement the existing considerations adopted by HA in the negotiation and the grant of the leases.
- it is noted that one of the objectives of the Divestment Proposal is to streamline the operations of the HA and to vest the commercial properties onto a commercial entity in order to maximize the return and revenue to the HA. However, if the Clinics are to be included under the Divestment Proposal, we ask the HA the following: how can the HA achieve the commercial objectives effectively through the commercial listed entity and how the interests, and medical needs, of the community of the HA's residential estate will be looked after under the Divestment Proposal.