

## **LegCo Panel on Health Services**

### **3MJ –Provision of Additional Lifts and Associated Works at Block S of United Christian Hospital**

#### **Purpose**

This paper briefs members on the proposal to provide additional lifts and associated works at Block S of United Christian Hospital (UCH).

#### **Background**

2. The existing lift service at Block S in UCH is insufficient for meeting its present day requirements.
3. Block S of UCH houses major components of the hospital's acute services, including accident and emergency, operating theatres, diagnostic radiology, pathology and in-patient wards. It is a 20-storey building currently served by four lifts for visitors' use, four lifts for staff and service use, and a lift solely for the transport of sterile supplies. Lift provision has all along been insufficient at the hospital. The hospital management has received constant complaints both from staff and patients about the gross inadequacy of the lift service. A visitors' satisfaction survey carried out by UCH in December 2000 revealed that of the 1,371 people interviewed, 57% rated the lift service as "poor" or "very poor", and over half of the respondents complained about long waiting time. Long waiting time also results in overcrowding of the lift lobby.
4. The following figures demonstrate that the lift provision in Block S of UCH is grossly under-provided -

<u>Name of Hospital</u>	<u>Number of beds</u>	<u>Number of lifts<sup>1</sup></u>
Block S, UCH (present status)	1 021	8
North District Hospital	618	13
Tseung Kwan O Hospital	458	12
Pok Oi Hospital (upon completion of redevelopment)	622	17

5. The UCH management has tried to introduce measures to alleviate the problem. For instance, some visitors' lifts have been designated to serve the upper floors and others, the lower floors so that each lift would stop on fewer floors and thus reducing the time for a return trip. However, the situation is still unsatisfactory and some passengers have to wait for as long as ten minutes for their turn to take a lift. The situation is worse when any of the lifts is out of service.

6. The inadequate provision of lifts has adversely affected the efficient operation of UCH. The hospital management has to deploy staff to operate the staff/service lifts to set priorities for patients' transportation and meet the tight schedule for transporting meal trolleys, drugs, dead bodies, specimens, rubbish, etc. Such manual operation of lifts puts additional strain on the hospital's tight manpower resources.

### **Provision of 4 additional lifts and associated works at Block S**

7. We propose to construct 4 additional lifts at Block S of UCH to solve the problem. The scope of the project will comprise -

- (a) construction of a new core with 4 additional lifts serving G/F to 14/F, linkage connections to the ward tower on 3/F to 14/F and other miscellaneous areas such as additional fire escape staircase, lift machine room, etc;
- (b) reinstatement and refurbishment of rooms affected by new connections to the new lift core;
- (c) modification to the existing road within the UCH compound with associated external works to accommodate

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<sup>1</sup> This excludes any lifts for the transport of sterile supplies.

the construction of the new lift core outside Block S; and

- (d) provision of all necessary building services such as air-conditioning system and fire services equipment for the additional accommodation.

We plan to start works in August 2004 for completion in December 2006.

8. With the provision of four additional lifts, the maximum waiting time can be reduced from 10 minutes to 3 minutes during peak hours, while the average waiting time can be reduced from around 1.5 minutes to around 1 minute during non-peak hours.

9. We estimate the cost of the project be around \$70 million in money-of-the-day prices. The Board of United Christian Medical Service has undertaken to contribute \$6.8 million in MOD prices towards the capital cost of the project. We therefore propose a commitment of about \$63 million for this project. We plan to seek the endorsement of the Public Works Sub-committee of the Finance Committee to upgrade the project to Category A in June 2004.

### **District Consultation**

11. The Hospital Authority consulted the Kwun Tong District Council on 2 March 2004 regarding the proposal. Members of the Council supported the project.

### **Advice sought**

12. Members are invited to note the content of this paper.

Health, Welfare and Food Bureau  
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