# For discussion on 15 April 2013

## **Legislative Council Panel on Health Services**

#### **Establishment of Centre of Excellence in Paediatrics**

#### **Purpose**

This paper updates Members on the development of the Centre of Excellence in Paediatrics (CEP) and seeks Members' support for the funding proposal.

#### **Background**

- 2. At present, tertiary and specialised medical services in Hong Kong are mainly provided by the public sector and concentrated in specific designated public hospitals including the two teaching hospitals and other major acute hospitals managed by the Hospital Authority (HA). We do not have a dedicated children hospital. The experiences of children hospitals in other international cities suggest that there are merits of concentrating the caseload of rare paediatric diseases in such a centre. A centralised facility will also facilitate training and research in specific fields and specialties.
- 3. The Administration announced in 2007 to study the establishment of the CEP to further enhance the quality of paediatric services in Hong Kong. We then set up a Steering Committee in 2008 comprising medical and healthcare professionals, academics, patient groups and non-government organisations (NGOs) to examine the scope of services, the operational model and the physical infrastructure of the CEP project.
- 4. After identifying a suitable site in Kai Tak Development and mapping out the blueprints (see site plan at **Annex**), we consulted the Task Force on Kai Tak Harbourfront Development of the Harbourfront Commission on the proposed development of the CEP on 16 January 2012. We also consulted the Wong Tai Sin District Council (DC), the Kwun Tong DC as well as the Food, Environment and Health Committee of the Kowloon City DC on 17 January, 2 February and 9 February 2012 respectively. On 12 March 2012,

we briefed the Panel on the proposed development of the CEP vide LC Paper No. CB(2)1286/11-12(07). Panel Members overall supported the proposal.

#### **Centre of Excellence in Paediatrics**

- 5. The proposed CEP aims to raise the professional standards and quality of clinical services to children patients suffering from complex and serious illnesses and to enhance the standards of research and training through cross-fertilisation of expertise in the specialty of paediatrics. To this end, the CEP will perform the following key functions
  - (a) Clinical services: The CEP will concentrate low-volume-cumhigh-complexity cases for tertiary care by experienced teams in a home-like, age-appropriate and child-friendly environment and facilities that promote parental engagement. The CEP will cater for children and adolescents up to 18 years old; and
  - (b) **Medical research and professional training:** Concentration of patients and expertise will also foster training and research which are important to the development of the paediatric discipline. To ensure clinical excellence and continued advancement, training and research will be a component of the CEP to promote and advance paediatric basic medical, epidemiological and clinical research.
- Currently, there are 13 public hospitals providing secondary and tertiary services in paediatrics specialties, with several designated tertiary referral centres on oncology, cardiology, nephrology and infectious diseases. With the establishment of the CEP, paediatric services in public hospitals will be re-organised into a hub-and-spoke model which should help to link up community care, primary, secondary and tertiary paediatric services more effectively, thereby establishing a well-coordinated and connected paediatric service network. Upon commissioning, the CEP will be the key player of the paediatric network in HA by serving as principally a tertiary territory-wide referral centre for diagnosing and treatment of complex cases requiring multidisciplinary management or surgical intervention in addition to secondary care; whereas other public hospitals with paediatric departments will continue to provide acute paediatric services, secondary care services and community care in their respective communities. HA will also work closely with the paediatrician community in both the private and public sectors. guidelines, common clinical protocols and practical shared care model will be developed accordingly.

- 7. Similar to other specialised facilities providing territory-wide services such as Hong Kong Red Cross Blood Transfusion Service and Hong Kong Eye Hospital under HA, the CEP will obtain management and administrative support from the Kowloon Central Cluster. Details of the recurrent funding and staffing arrangements for the CEP operation will be worked out after the HA has finalised its detailed service reorganisation plan for paediatrics services and facilities.
- 8. As a public hospital within the HA system, a hospital governing committee will be formed upon commissioning of the CEP in accordance with the HA Ordinance. The membership of the governing committee will include community and clinician leaders, academics and representatives of the non-governmental organizations.

## **Proposed scope of the project**

- 9. The proposed CEP will provide mainly tertiary services. It will also take emergency transfer cases and provide some secondary service so as to render a comprehensive range of subspecialty services. The major services and facilities to be provided at the CEP include -
  - (a) in-patient and day-patient services with 468 beds, including general wards, neo-natal intensive care unit, paediatric intensive care unit, special care baby unit, day beds for general surgeries/procedures, and a private ward;
  - (b) ambulatory care services including specialist outpatient clinics, ambulatory surgery/day procedure centre, integrated rehabilitation centre and child development assessment service;
  - (c) community care services, including patient education and resource centre, and community health education, and medical social service;
  - (d) supporting diagnostic and treatment facilities, including radiology (with magnetic resonance imaging, computed tomography scanner, angiography, interventional radiology and ultrasonography), electro-diagnostic studies laboratories, operating theatres, cardiac catheterisation laboratory and clinical pathology laboratories;
  - (e) medical research, teaching and training facilities to provide specific support for pursuing basic and translational research in paediatrics as well as teaching and research activities, including clinical

- research centre, simulation skill laboratory, lecture theatre, meeting and conference facilities;
- (f) support facilities and services to cater for the special needs of children and their families such as children recreation and play therapy areas, classrooms, family rest area, parent's support and spiritual support facilities; and
- (g) other general support and administrative services and facilities such as admission, medical records, theatre sterile supplies unit, pharmacy, linen, mortuary, procurement and supplies, housekeeping, hospital data centre, food services, café / restaurant, transportation, and staff accommodation, etc.
- 10. The overall design objective of the CEP is to create a non-institutional, home-like, child-friendly, comfortable and cozy environment that provides the best clinical practice under a patient-centered approach, facilitates multi-disciplinary and cross-specialty collaboration, and allows efficient and flexible use of facilities and resources with appropriate sharing. The CEP project will provide the following features
  - (a) a podium-free design consists of two separate towers interconnected by link bridges to facilitate internal circulation;
  - (b) the towers shall house an Integrated Rehabilitation Centre, main operating theatres, clinical laboratories, research laboratories, hospital data centre, education and training facilities, in-patient services facilities and ambulatory care services facilities. The basement will mainly accommodate general supporting services including sterile supplies unit, plant rooms, stores, linen services, kitchen, pharmacy and car parking spaces; and
  - (c) a landscaped courtyard will be featured on the ground floor near the main entrance, which is intended to be highly transparent with views through to the landscaped courtyard and the harbour beyond. It will integrate with the overall architectural settings and the outdoor spaces to make it a prominent gateway of the CEP.

## **Project implementation**

11. We completed the detailed technical assessments and studies (including traffic impact assessment) for hospital site selection in 2010, which supported to locate the CEP at the South Apron at the Kai Tak Development.

The report was subsequently refined in 2011 to enhance connectivity and site accessibility.

- 12. A design-and-build (D&B) approach will be adopted so that a single contractor will be selected to undertake both the design and construction works for the hospital buildings. We completed a pre-qualification exercise in April 2011 and invited tenders from the pre-qualified tenderers in April 2012. We completed the tender assessment in March 2013.
- 13. The estimated cost of the proposed CEP project is \$13.0 billion in money-of-the-day prices. We plan to seek funding approval from the Finance Committee (FC) in June/July 2013. Subject to FC's approval, we will award the D&B contract to the successful tenderer in September 2013. We expect that the design and construction works will commence in September 2013 and take around 46 months for completion by mid-2017. The duration of construction is considered appropriate in view of current scope and scale of works of the project.
- 14. We will review the demand for healthcare facilities in the Kowloon region. If necessary, we will expedite the development of other suitable sites at the Kai Tak Development for public hospital uses to address the needs of the Kowloon region, particularly the long-term needs for public healthcare facilities in East Kowloon, and provide better healthcare services to the community. Where appropriate, we will make provision for integrating the facilities of CEP with other future hospital developments in adjacent sites.

#### **Advice sought**

15. Members are invited to give their views on the funding approval for the CEP project before submission to the Public Works Sub-committee / Finance Committee.

Food and Health Bureau Hospital Authority April 2013

