

**For discussion
on 21 July 2014**

**Legislative Council Panel on Health Services
Redevelopment of Kwai Chung Hospital, phase 1**

Purpose

This paper briefs Members on the proposed redevelopment of Kwai Chung Hospital (KCH), phase 1.

Background

2. Mental health problems are caused by a variety of factors and require individualised patient treatment and management. The mental health problems, illnesses and disorders presented by patients are diverse with varying degrees of severity ranging from mood disorders such as anxiety and depression to severe mental illness such as schizophrenia and delusional disorders.

3. At present the Hospital Authority (HA) organises its services for patients with mental illness based on the seven geographical hospital clusters for provision of inpatient, outpatient, and community services. In 2013-14, a total of around 17 800 discharges and deaths were treated by psychiatric specialties at HA hospitals, and around 205 000 patients attended psychiatric specialist outpatient clinics.

4. Kwai Chung Hospital (KCH) is a psychiatric hospital located in the Kowloon West Cluster (KWC). While providing psychiatric services for the population of KWC, the hospital accounts for about a quarter of the HA's total psychiatric bed capacity. The hospital was established in 1981, with principles and models of care during that time focusing heavily on institutional custody of the mentally ill. Mental health services at KCH have undergone significant changes since its establishment, reflecting evolving global trends in treatment and management. At present, psychiatric services at KCH emphasise safe care from early detection to treatment and rehabilitation into the community.

5. KCH currently has 920 available beds. Multi-disciplinary teams provide psychiatric care to those with mental health problems in Kwai Chung, Tsing Yi, Tsuen Wan, and North Lantau districts, as well as Mong Kok, Sham Shui Po, and Wong Tai Sin districts.

6. KCH serves diverse communities, ranging in population density, median age, levels of education, employment, and affluence. The population of KWC in 2013 was 1 931 800 and is projected to reach 2 031 600 by 2021. The percentage of population aged over 65 years is anticipated to increase from 15.8% in 2013 to 19.7% in 2021. While population growth will increase psychiatric service need in the KWC, population ageing will also increase service demand due to the prevalence of age-related psychiatric disorders such as dementia.

Need for Redevelopment of KCH

Outdated Design and Unsatisfactory Building Conditions

7. KCH was designed primarily for inpatient services and its main

activity is general adult psychiatry, with acute and chronic services. The hospital has subsequently developed other psychiatric specialty services including Child and Adolescent Psychiatric Services, Psychogeriatric Services, a Substance Abuse Assessment Unit, and a Psychiatric Unit for Learning Disabilities. Community-based services such as Community Psychiatry including outreach services and telephone advisory programmes, Consultation Liaison Psychiatry, and Child and Adolescent Mental Health Support Programmes have also become important components of KCH's comprehensive service.

8. After several decades of heavy utilisation, the physical condition and facilities of KCH require significant improvement. The conditions of the facilities and the physical setting have become outdated over the years and the current premise does not have the necessary capability to facilitate the adoption of modern delivery of psychiatric care.

Proposed model of psychiatric services at KCH

9. The vision for mental health services at new KCH is to provide high quality person-centred care based on effective treatment and recovery of the individual. KCH will continue its role as the psychiatric hospital for the KWC and inpatient care will remain an important component of a comprehensive psychiatric service. Inpatient care apart, KCH is well positioned to develop a more integrated patient-centred service with a balance of in-patient service, ambulatory care, community outreach services and in-reach of partner organisations. Such integrated service will facilitate a coordinated approach to rehabilitation and social integration, addressing the social, spiritual and physical needs of patients. The proposed model of care will enable services better managed to cope with growing demand, deliver safe services of better quality, and nurture a skilled multidisciplinary

workforce.

10. As a principle, hospitalisation should be available only for those individuals with severe mental illness who require the highly specialised acute inpatient environment and services for recovery and rehabilitation, which cannot be provided in the community.

11. It is proposed that mental health services will be delivered via a hybrid model of hospital campus and district-level Community Mental Health Centres. The new KCH campus will form a hub to provide, support, and co-ordinate a full range of psychiatric services in collaboration with allied health professionals and partner organisations. Community Mental Health Centres under the management, co-ordination, and support of new KCH will provide more local services at district level. On top of the Community Mental Health Centre for Wong Tai Sin set up in 2013, HA plans to establish three new Community Mental Health Centres to serve the districts of Sham Shui Po/Mong Kok, Kwai Tsing, and Tsuen Wan/North Lantau upon completion of the redevelopment of KCH project. Community Mental Health Centres will bring a range of clinics, clinical specialties, allied health professionals, and multidisciplinary teams together in a flexible setting orientated to the holistic needs of service users. Together with the new KCH campus, Community Mental Health Centres will form a comprehensive and co-ordinated network of services and resources to meet the mental health needs of the KWC population.

12. An ambulatory centre will be developed at the new KCH. The ambulatory centre will provide dynamic space for a range of clinical specialties and multidisciplinary teams, as well as replicate the normal activities of daily living for different patient groups to help mentally ill patients to integrate into the community. With the shift of psychiatric services

towards a community model, the ambulatory centre within the new KCH campus will become an increasingly important thorough-fare of activity and will also serve as a key point of contact for patients living in the community. The ambulatory centre will facilitate support and education to families and carers and provide an accessible link between the hospital and wider community. The ambulatory centre will also host the Community Mental Health Centre serving Kwai Tsing district, and provide an office / administration area to support the other three centres serving the other districts mentioned in paragraph 11 above.

13. Optimising the developmental potential of children and adolescents is an important objective, and improving the safety and quality of mental health services to young people with mental disorders has always been a priority. New KCH child and adolescent psychiatric services will be supported by age and developmentally appropriate inpatient, outpatient, ambulatory, and community space organised within a dedicated purpose-built facility.

The Proposed Redevelopment Project

14. The scope of the proposed redevelopment project comprises the following:

- (a) renovation of Blocks L/M and J at KCH; Block N and the Nursing School and Quarters at Princess Margaret Hospital (PMH) for decanting purposes;
- (b) construction of a decantation building at the existing car park area of PMH for decanting KCH services before the existing KCH buildings are demolished;

- (c) demolition of all existing buildings of KCH except Block J; and
- (d) construction of a new hospital campus accommodating:
 - (i) the full range of psychiatric services, including:
 - inpatient wards and rehabilitation facilities with 1 000 beds for acute, sub-acute, extended care, long stay, and private patients;
 - ambulatory centre with facilities such as psychiatric outpatient department, psychiatric day hospital, community mental health centre, patient resource and social centre, etc.; and
 - child and adolescent psychiatric services to provide inpatient, outpatient, and ambulatory services in a hospital campus setting; as well as provision of Early Assessment Service for Young People with Psychosis (EASY) and school classrooms.
 - (ii) pharmacy, allied health and medical social services, and community health education;
 - (iii) ancillary facilities including administrative and supporting services;
 - (iv) provision of therapeutic and leisure activity spaces; and
 - (v) provision of convenient patient access including a lift tower from Lai King Hill Road to KCH Road.

Project Implementation

15. We propose to carry out the redevelopment of KCH in three phases. The proposed project implementation will comprise:

- (a) Phase 1, covering –
 - (i) construction of a decantation building at the existing car park area of PMH; and
 - (ii) renovation works at Blocks L/M and J of KCH; Block N and the Nursing School and Quarters of PMH for decanting purposes;

- (b) Phase 2, covering –
 - (i) decanting of major inpatient and clinical services to the decantation building and the renovated areas carried out in Phase 1;
 - (ii) demolition of all existing buildings of KCH except Blocks L/M and J;
 - (iii) construction of new hospital buildings; and
 - (iv) provision of lift tower.

- (c) Phase 3, covering –
 - (i) demolition of Block L/M;
 - (ii) construction of podium garden;
 - (iii) construction of a small block with link bridge connecting to main building blocks.

16. A site plan showing phase 1 of redevelopment of KCH is at
———— **Enclosure.**

17. We will seek funding in two stages, firstly for phase 1 and subsequently for phases 2 and 3, to dovetail with the implementation of the redevelopment project. The latest cost estimate of the proposed phase 1 works mentioned in paragraph 15(a) above is in the order of \$605 million in September 2013 prices. Phase 1 works will be delivered in the “Design and

Build” mode and we plan to invite tender in January 2015 and complete tender evaluation by the third quarter of 2015. The actual construction cost for phase 1 will only be known upon conclusion of the tender exercise when the detailed design proposed by the contractor is available. We will take into account the fee proposals in finalizing the cost estimate before making submission to the Public Works Subcommittee. Subject to funding approval of the Finance Committee (FC) in December 2015, we plan to commence phase 1 in February 2016 for completion in November 2017. Subject to the completion of phase 1 and decantation and funding approval of the FC, we plan to commence works in phases 2 and 3 in 2018 and 2021 respectively for completion of the whole redevelopment project in 2023. KCH will remain functional at all times and any disruption of services, if unavoidable, will be kept to a minimum.

Public Consultation

18. HA consulted the Kwai Tsing District Council (K&TDC) on the redevelopment of KCH, phase 1 project on 24 June 2014. Members of the K&TDC supported the redevelopment project.

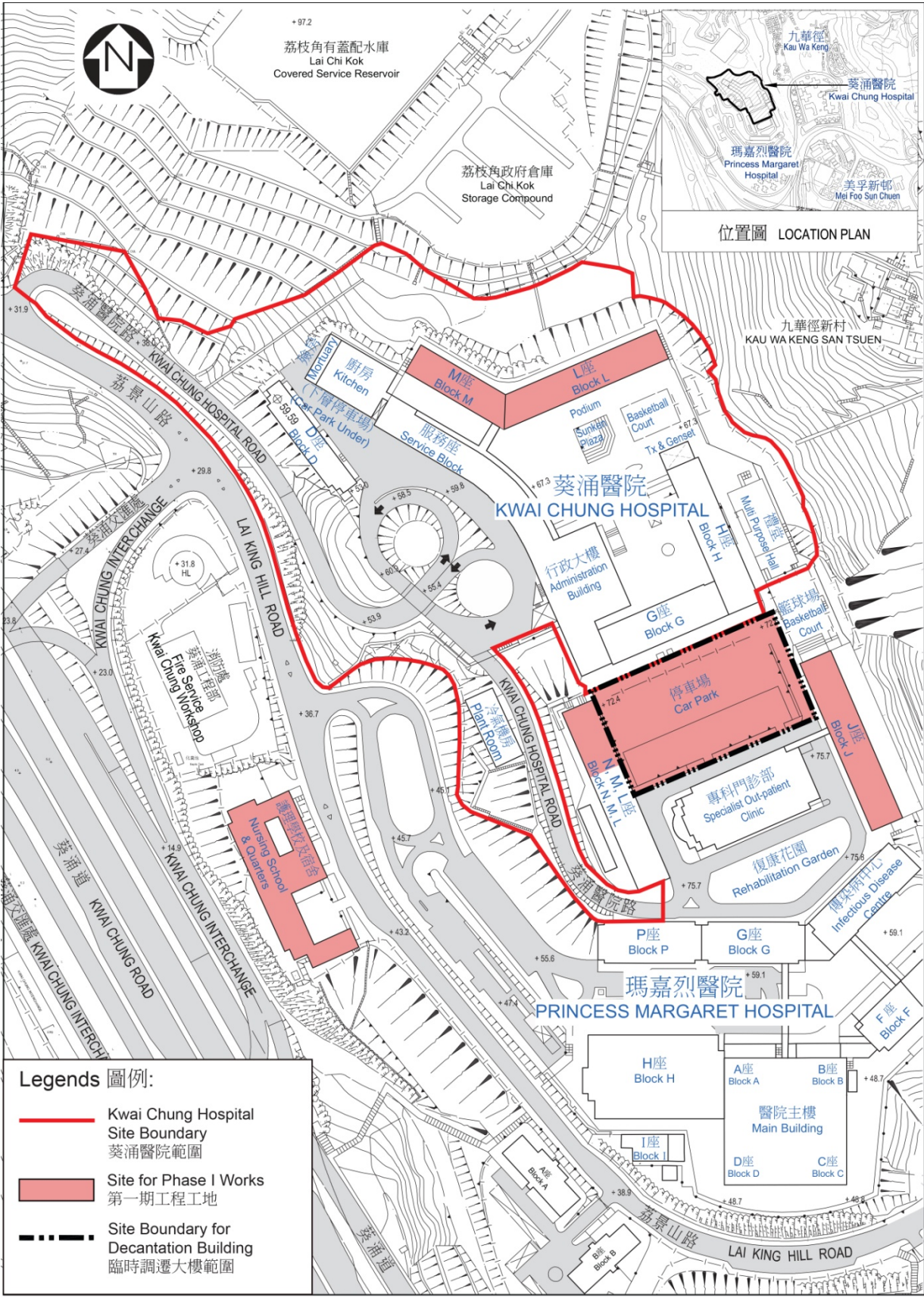
Advice Sought

19. Members are invited to comment on the proposed project as outlined in this paper.

Food and Health Bureau

Hospital Authority

July 2014



8081MM – Redevelopment of Kwai Chung Hospital 葵涌醫院重建工程

Site Location Plan for Works under Phase 1 (Not to Scale)

第一期工程工地平面圖 (不按比例)