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**Panel on Health Services**

**Background brief prepared by the Legislative Council Secretariat  
for the meeting on 15 February 2016**

**Redevelopment of Kwong Wah Hospital**

**Purpose**

This paper summarizes the views and concerns of members of the Panel on Health Services ("the Panel") on the redevelopment of Kwong Wah Hospital ("KWH").

**Background**

2. Established in 1911 as part of the Tung Wah Group of Hospitals ("TWGHs"), KWH is a major acute hospital offering a comprehensive range of acute care services to population in the catchment area of the Kowloon West ("KW") Cluster<sup>1</sup> covering Sham Shui Po, Mongkok, Wong Tai Sin<sup>2</sup>, Kwai Tsing, Tsuen Wan and North Lantau districts. The majority of the infrastructure of KWH is over 50 years old. Due to inadequate space provision and outdated building services installation, the capacity of KWH is inadequate to meet the increasing demand and requirements for healthcare services in KW Cluster. To

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<sup>1</sup> Other public hospitals in the KW Cluster include Caritas Medical Centre, Wong Tai Sin Hospital ("WTSH"), Our Lady of Maryknoll Hospital ("OLMH"), Kwai Chung Hospital, Princess Margaret Hospital and Yan Chai Hospital.

<sup>2</sup> The Steering Committee on Review of Hospital Authority recommended, among others, in its report published in July 2015 that the Hospital Authority ("HA") should consider re-delineating Wong Tai Sin ("WTS") district from the KW Cluster to the Kowloon Central ("KC") Cluster. According to HA's Action Plan for implementation of the recommendations of the Steering Committee, KWH, WTSH and OLMH will be re-delineated from the KW Cluster to the KC Cluster to support the new KC Cluster catchment districts which will cover Kowloon City, Yau Tsim Mong and WTS districts. The administrative arrangement for the regrouping exercise will be effective by late 2016 with the associated service reorganization to take place by phases thereafter, while redevelopment of KWH and the new acute hospital in the Kai Tak Development Area will be progressing in parallel.

ensure the provision of modern and safe services that could meet future healthcare needs of the community, the Financial Secretary announced in the 2012-2013 Budget Speech the redevelopment of KWH.

3. The scope of the redevelopment project comprises demolition of all the existing buildings of KWH, except for the TWGHs Tsui Tsin Tong Out-patient Building and the Tung Wah Museum which is a declared monument, for the construction of a new complex. The redevelopment project will be carried out in two phases, namely preparatory works and the main works. While the redeveloped KWH will maintain its role as a major acute hospital providing a full range of inpatient and ambulatory care services, the redevelopment will provide new and modernized facilities for service development of KWH, including the adoption of new models of care such as ambulatory and integrated care, introduction of emergency medicine ward, provision of non-radiation oncology services and integrated Chinese and Western medicine ("ICWM") services. The total bed capacity of KWH is planned to increase from about 1 200 to around 1 550 after redevelopment.

### **Deliberations of the Panel**

4. The Panel discussed the redevelopment of KWH in June 2012. Concern was raised over the impact caused by the redevelopment project on inpatient services of KWH during the Panel's discussion of the review on the Hospital Authority ("HA") in July 2015. The deliberations and concerns of members are summarized in the following paragraphs.

#### Service capacity of the redeveloped KWH

5. Pointing out that KWH was located in the Yau Tsim Mong district where there were a number of old buildings subjecting to redevelopment, members were concerned about whether the services provided by the redeveloped KWH could meet the future healthcare demand arising from the possible demographic change. The Administration explained that given the long history of KWH, many of its patients were residing outside the catchment area of the KW Cluster where KWH located. The estimation on the demand for healthcare services at KWH would take into account the above factor, as well as the demographic profiles of the residents of the KW Cluster and the population projections provided by the Census and Statistics Department and the Planning Department.

6. Members noted that there would be a multi-fold increase in the total floor area of the ambulatory care centre of the redeveloped KWH. The area for inpatient accommodation of KWH would, however, only be increased by nearly

20%. Question was raised about the enhancement of the ambulatory services and the inpatient services upon completion of the redevelopment of KWH.

7. The Administration advised that with the advancement of medical technology, the future model of care was to switch from inpatient care to ambulatory care. The redevelopment of KWH would embrace the philosophy of ambulatory care as a new model of service delivery. The existing scattered ambulatory services at KWH would be enhanced through the provision of one-stop multi-disciplinary services to patients with non-acute conditions at an ambulatory care centre. Given that as no day beds were currently provided by KWH, patients receiving ambulatory care had to use the inpatient beds. With the enhancement of the ambulatory care services at the redeveloped KWH, more inpatient beds would then be available for patients that needed admission.

8. Concern was raised about the healthcare manpower requirement to cope with the increase in service capacity upon redevelopment of KWH. The Administration advised that the whole redevelopment of KWH would complete in 2022. The healthcare manpower needs of the redeveloped KWH would be assessed when the project was close to completion taking into account an array of factors including, among others, changes in the delivery models for healthcare services and the latest development of medical technology.

#### Chinese medicine services of the redeveloped KWH

9. Members noted that the redeveloped KWH would accommodate reprovisioned facilities for enhanced Chinese and Western medicine hospital services, with initial focus on the provision of outpatient service with conjoined consultations by Chinese and Western medicine practitioners, and a Chinese and Western medicine shared ward with more than 50 beds. Some members were of the view that the proposal of providing the above Chinese medicine services by TWGHs on a self-financing basis ran contrary to the Administration's policy of fostering the development of Chinese medicine. In their view, HA should provide these services as part of its standard services. There was a further view that given the lack of clinical training grounds in the hospital setting for Chinese medicine graduates, KWH could be developed as a teaching hospital on ICWM in the long term.

10. According to the Administration, the provision of inpatient services of ICWM at the redeveloped KWH was a positive step forward to promote the development of Chinese medicine services. TWGHs had a long history of providing Chinese medicine services. The proposal that the future Chinese medicine services in the redeveloped KWH would be operated by TWGHs instead of HA followed the arrangement that the ICWM treatment centre and the

Chinese medicine general outpatient clinic in the existing KWH were operated by TWGHs on a self-financing basis. That said, the Administration adopted an open attitude towards the matter.

#### Impacts of the redevelopment on clinical services provided by KWH

11. Noting that the demolition and construction works would be carried out in phases after completion of the preparatory works, members expressed concern about the measures to be put in place by HA to ensure that patients would not be affected during the main works stage. There was a suggestion of purchasing services from the private hospitals nearby for the affected patients.

12. According to the Administration, the accident and emergency services of KWH would remain unchanged during redevelopment. To ensure that any unavoidable disruption of non-emergency services would be kept to a minimum, the main works of the redevelopment of KWH would commence in phases. The first phase of the main works involved the demolition of three existing hospital buildings for the phase one construction of the new complex which would be used to reprovision clinical services from the remaining buildings during their demolition in the second phase of the main works. Through decanting arrangement, the essential clinical services of KWH would be maintained on-site. Other ancillary facilities such as offices, stores and staff accommodation would be temporarily decanted off-site, so that the vacated space could be used to accommodate the affected clinical services to ensure the continuity of clinical services for patients. In addition, KWH would extend service hours of the operating theatres during redevelopment in order not to affect patients' waiting time for operations. To reduce the need for hospitalization, the ambulatory care services and support to patients in the local community would be strengthened. In the Administration's view, the public hospitals would be able to meet the healthcare needs of patients affected by the redevelopment through deployment of services under clustering arrangement.

13. At the meeting in July 2015, members noted with concern about the media reports on the crowded condition of the inpatient wards of KWH during the preparatory works stage. The Administration advised that given the lack of space at the site of KWH, it was necessary to temporarily relocate the affected clinical services to hospital buildings which were not yet demolished, so as to ensure that there would be no disruption to the continuity of services for patients during the implementation of the redevelopment project. Such arrangement was not uncommon for many redevelopment projects of public hospitals.

### Project cost estimate

14. Question was raised about the estimated cost for the redevelopment of KWH. The Administration advised that it was estimated that the preparatory works and the main works would respectively cost about \$525 million and \$8 billion in money-of-the-day ("MOD") prices in June 2012.

### **Latest developments**

15. The Finance Committee ("FC") approved on 8 February 2013 an amount of \$552.7 million in MOD prices for the carrying out of the preparatory works of the redevelopment project of KWH. The preparatory works, which started in March 2013, mainly included site investigation, building survey, decanting works, as well as consultancy services for outline sketch design, detailed design, tender documentation and tender assessment for the main works. According to the Administration, HA has substantially completed the site surveys and investigations as well as decanting works in 2015. Subject to funding approval by FC, the demolition and substructure works for the redevelopment project would be commenced in 2016 for completion of the whole project in 2022.

### **Relevant papers**

16. A list of the relevant papers on the Legislative Council website is in the **Appendix**.

**Relevant papers on the redevelopment of Kwong Wah Hospital**

<b>Committee</b>	<b>Date of meeting</b>	<b>Paper</b>
Panel on Health Services	11.6.2012 (Item III)	<a href="#">Agenda</a> <a href="#">Minutes</a> <a href="#">CB(2)55/12-13(01)</a>
	20.7.2015 (Item II)	<a href="#">Agenda</a> <a href="#">Minutes</a>

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