



中華人民共和國香港特別行政區政府總部食物及衛生局  
Food and Health Bureau, Government Secretariat  
The Government of the Hong Kong Special Administrative Region  
The People's Republic of China

Our Ref.: ( ) in FH/H/33/101/1

Tel.: 2973 8117

Your Ref.:

Fax.: 2840 0467

27 June 2008

Ms Angel SHEK  
Clerk to Public Works Sub-Committee  
Legislative Council  
Legislative Council Building  
8 Jackson Road  
Central  
Hong Kong

Dear Ms Shek,

**Public Works Sub-Committee (PWSC)  
Follow-up to Meeting on 13 June 2008**

I refer to your letter to the Secretary for Financial Services and the Treasury dated 16 June 2008. After consultation with the Hospital Authority (HA), we would like to provide below supplementary information on 66MM (provision of a general out-patient clinic (GOPC), an integrated community mental health support services centre and a long stay care home in Tin Shui Wai (TSW) Area 109).

**Provide round-the-clock out-patient services at the proposed GOPC**

At present, all public GOPCs in Hong Kong do not provide 24-hour out-patient services. Public can use the regular general out-patient services during daytime if they feel unwell. There is now a GOPC in TSW which provides out-patient services to TSW residents five days and a half each week. Its consultation hours are similar to those of other GOPCs under HA (i.e. from 9 a.m. to 5 p.m. and 6 p.m. to 10 p.m. on Mondays to Fridays, and from 9 a.m. to 1 p.m. on Saturdays). In the TSW area (including TSW North), there are also some clinics run by private

medical practitioners providing out-patient services seven days a week until very late hours.

Patients in acute and emergency conditions should always seek medical treatment from the accident and emergency (A & E) departments of hospitals. General out-patients services are not substitutes for A & E services. GOPCs' services are not targeted at patients in acute conditions and their facilities are not meant to provide emergency services. Both Tuen Mun Hospital and Pok Oi Hospital under the New Territories West Cluster of HA provide 24-hour A & E services. Records show that an average of 12 TSW residents were taken by ambulances to the A & E departments of public hospitals under the New Territories West Cluster for treatment between 10:00 p.m. and 9:00 a.m. every day in 2007-08. About half of them were classified as Triage I (critical case), Triage II (emergency case) and Triage III (urgent case), with the remaining half as Triage IV (semi-urgent case) and Triage V (non-urgent case).

HA plans to provide out-patient services at the proposed GOPC five days and a half each week (from 9 a.m. to 5 p.m. on Mondays to Fridays, and from 9 a.m. to 1 p.m. on Saturdays). The proposed GOPC will help further enhance out-patient services in TSW. As GOPCs are not meant to provide emergency services, to ensure effective use of the resources of GOPCs, the Administration has no plan at this stage to provide 24-hour out-patient services in Hong Kong (including at the proposed GOPC).

Regarding Members' proposal to provide "special evening out-patient service" at the proposed GOPC, similar to that of the Tung Chung GOPC, as mentioned at the meeting, such "special evening out-patient service" is currently provided as a pilot scheme. We will review the effectiveness of the scheme after the trial period. We will closely monitor the overall demand of TSW residents for general out-patient services and consider the provision of "special evening out-patient service" only where necessary.

#### **Consultation room at the Pok Oi Hospital Chinese Medicine Clinic located in Tin Wah Estate, Tin Shui Wai North**

At the PWSC meeting held on 13 June 2008, a Member said that during consultation with the Culture, Recreation, Community Service and Housing Committee of the Yuen Long District Council, the Administration had pledged to retain the GOPC services in Tin Wah Estate after the opening of the proposed GOPC. According to records, HA consulted the above Committee on the proposed GOPC on 11 March 2008, but future arrangements for the GOPC in Tin Wah Estate were not discussed at the meeting. As explained at the meeting of the Panel on Health Services on 14 April 2008, a review will be conducted on the need for retaining the GOPC in Tin Wah Estate after the opening of the proposed GOPC. Copies of the relevant minutes of meetings of the Panel on Health Services and the

- 3 -

Culture, Recreation, Community Service and Housing Committee of the Yuen Long District Council (Chinese version only) are attached for your reference.



(Bruno LUK)

for Secretary for Food and Health

c.c.: Chief Executive, Hospital Authority (Attn: Dr Raymond CHEN  
Dr AU Si-yan)

SFST, Financial Services and the Treasury Bureau (Attn: Ms Yvonne Yau  
Ms Jacqueline Kwan)

**立法會**  
**Legislative Council**

Ref : CB2/PL/HS

LC Paper No. CB(2)1936/07-08  
(These minutes have been seen  
by the Administration)

**Panel on Health Services**

**Minutes of meeting**  
**held on Monday, 14 April 2008, at 8:30 am**  
**in Conference Room A of the Legislative Council Building**

- Members present** : Hon LI Kwok-ying, MH, JP (Chairman)  
Dr Hon Joseph LEE Kok-long, JP (Deputy Chairman)  
Hon Fred LI Wah-ming, JP  
Hon Mrs Selina CHOW LIANG Shuk-yeet, GBS, JP  
Hon CHAN Yuen-han, SBS, JP  
Hon Mrs Sophie LEUNG LAU Yau-fun, GBS, JP  
Dr Hon YEUNG Sum, JP  
Hon Andrew CHENG Kar-foo  
Hon Audrey EU Yuet-mee, SC, JP  
Hon Vincent FANG Kang, JP  
Dr Hon KWOK Ka-ki  
Dr Hon Fernando CHEUNG Chiu-hung
- Member attending** : Hon WONG Kwok-hing, MH
- Member absent** : Hon LEUNG Kwok-hung
- Public Officers attending** : Items III, IV & V  
Mr Thomas CHAN  
Deputy Secretary for Food and Health (Health) Projects
- Items III, IV, V & VI  
Mr Bruno LUK  
Principal Assistant Secretary for Food and Health (Health) 3

Items III & IV

Dr Heston KWONG  
Assistant Director of Health (Special Health Services)

Mr CHEUNG Wai Man, Anthony  
Senior Systems Manager  
Hospital Authority

Items V & VI

Mrs Ingrid YEUNG  
Deputy Secretary for Food and Health (Health) 2

Dr S Y AU  
Service Director (Community Care)  
New Territories West Cluster  
Hospital Authority

Item V only

Dr W I. CHEUNG  
Director (Cluster Services)  
Hospital Authority

Dr K M CHOY  
Chief Manager (Service Transformation)  
Hospital Authority

Item VI only

Dr Raymond CHIEN  
Chief Manager (Strategy & Service Planning)  
Hospital Authority

**Clerk in attendance** : Miss Mary SO  
Chief Council Secretary (2)5

**Staff in attendance** : Ms Amy YU  
Senior Council Secretary (2)3

Ms Sandy HAU  
Legislative Assistant (2)5

---

Action

professionals in both public and private sectors. To that end, a Steering Committee on Electronic Health Record Sharing, comprising members from the healthcare professions in both the public and private sectors, had been set up to plan and steer for the development of the system. DSFH(Health) Projects further said that although the electronic health care voucher system presently would not provide access to HA's Electronic Patient Record System, healthcare providers participating in the Elderly Health Care Voucher Pilot Scheme would also be invited to participate in HA's Public/Private Interface-Electronic Patient Record (PPI-ePR) pilot project. Should these healthcare providers join the PPI-ePR pilot project, they could retrieve the medical records of the elders under their care if those elders had been HA patients. Eventually both the electronic voucher system to be used in the elderly health care voucher pilot scheme and the Electronic Patient Record Sharing Pilot System to be used in the current purchase pilot project should be part of the integrated electronic health record system.

Admin

50. At the request of Ms EU, the Administration undertook to provide responses in writing on the progress made on the development of the territory-wide electronic health record system, and the reasons why HA's Electronic Patient Record System could not be extended to the electronic health care voucher system at this stage.

51. In closing, the Chairman said that members were generally supportive of the pilot project.

**VI. Provision of general out-patient clinic in Tin Shui Wai Area 109**  
(LC Paper No. CB(2)1527/07-08(06))

52. DSFH(H)2 briefed members on the Administration's plan to build a GOPC in TSW Area 109, details of which were set out in the Administration's paper.

53. Dr Fernando CHEUNG and Dr YEUNG Sum noted the Administration's plan to construct the proposed GOPC in mid-2009 for completion by end-2011. They urged the Administration to expedite the construction of the proposed GOPC, so that the new facilities concerned could serve residents in TSW as early as possible.

54. DSFH(H)2 responded that the Administration would endeavour to expedite the project where feasible. DSFH(H)2 further said that with the implementation of the pilot project to purchase primary care services from the private sector in TSW in mid-2008, about 10 000 consultation quotas would be freed up each year to cope with demand for public GOP services in the district.

55. Dr Fernando CHEUNG noted that the proposed GOPC could provide about 55 000 attendances of GOP consultation services each year. Dr CHEUNG asked whether such a figure was in addition to the about 163 000 attendances presently

Action

provided by the TSW Health Centre located in TSW South and the GOPC located in Tin Wah Estate in TSW North each year. DSFH(H)2 replied that the 55 000 attendances of GOP consultation services that could be provided by the proposed GOPC each year would be in addition to the number of attendances of GOP consultation services that could be provided by the TSW Health Centre located in TSW South each year. Service Director (Community Care) New Territories West Cluster, HA (SD(CC) NTWC, HA) supplemented that the GOPC in Tin Wah Estate provided a total of some 4 100 attendances of GOP consultation services in 2007 against its planned attendances of about 4 900.

56. Dr Fernando CHEUNG enquired whether HA would close down the GOPC located in Tin Wah Estate in TSW North after the proposed GOPC had come into operation. In response, DSFH(H)2 said that upon the commissioning of the proposed GOPC in TSW Area 109, a review would be conducted on the need for retaining the GOPC in Tin Wah Estate. DSFH(H)2 pointed out that the operation of the GOPC clinic in Tin Wah Estate was not ideal, as it was not supported by a pharmacy due to physical constraint. The GOPC in Tin Wah Estate was inside an existing Chinese medicine clinic.

57. Whilst expressing support for the project, Dr KWOK Ka-ki said that it would be unacceptable if doctors in the proposed GOPC could only spend four to five minutes on each consultation, as was the case in many other GOPCs.

58. SD(CC) NTWC, HA responded that HA was well aware of the problem of the short consultation time spent on each patient in GOPCs and was actively working on ways to address the problem. He further said that the new GOPC in TSW Area 109 would have six consultation rooms, and would also have an Integrated Clinic with six consultation rooms and a Community Multi-specialty Clinic with two consultation rooms. It was envisaged that with the provision of these facilities, quality of GOP services in TSW should be greatly enhanced.

~~VII. Any other business~~

59. There being no other business, the meeting ended at 10:45 am.

元朗區議會文康、社區服務及房屋事務委員會  
二零零八年度第二次會議記錄

日期：二零零八年三月十一日(星期二)

時間：下午二時三十分至五時三十分

地點：元朗橋樂坊二號元朗政府合署十三樓  
元朗區議會會議廳

出席者	出席時間	離席時間
主席： 湛家雄議員, MH, JP	會議開始	會議結束
副主席： 于威信議員	會議開始	會議結束
委員： 陳美蓮議員	會議開始	會議結束
陳惠清議員	會議開始	會議結束
趙秀嫻議員	會議開始	下午 5:10
莊健成議員	會議開始	下午 5:10
周永勤議員	下午 2:40	下午 4:45
馮彩玉議員, MH	會議開始	會議結束
郭 強議員	會議開始	會議結束
鄺俊宇議員	會議開始	會議結束
鄺月心議員	下午 2:40	下午 4:50
李月民議員, MH	下午 3:50	會議結束
梁志祥議員, MH	下午 2:40	會議結束
羅建平議員, MH	下午 2:35	會議結束
陸頌雄議員	下午 2:45	下午 5:10
麥業成議員	下午 2:50	會議結束
文富穩議員, BBS	下午 2:35	下午 3:30
文祿星議員, MH	會議開始	下午 5:00
蕭浪鳴議員	會議開始	會議結束
鄧貴有議員	會議開始	會議結束
曾憲強議員	下午 2:35	下午 4:00
黃偉賢議員	會議開始	會議結束
邱帶娣議員, MH	下午 2:35	下午 5:10
姚國威議員	會議開始	會議結束
袁放兒議員	會議開始	會議結束

秘書： 溫麗雅小姐 元朗民政事務處行政主任(區議會)



## 列席者

馮萬山先生	元朗民政事務處高級聯絡主任(市區及天水圍)
林定楓先生	社會福利署元朗區助理福利專員 1
張織雯女士	社會福利署元朗區助理福利專員 2
周德榮先生	教育局高級學校發展主任(元朗)2
鄭啟源先生	房屋署房屋事務經理(物業管理)(屯門及元朗3)
李國強先生	康樂及文化事務署元朗區副康樂事務經理 1
江啟祖先生	香港警務處元朗警區警民關係主任
龍子茵女士	廉政公署新界西北辦事處廉政教育主任
區仕仁醫生	醫院管理局新界西醫院聯網服務總監
張復熾醫生	醫院管理局青山醫院精神科顧問醫生
李啟瑩小姐	醫院管理局新界西醫院聯網院務經理
曾麗霞女士	社會福利署社會工作主任(策劃及統籌)(元朗區)1
夏國鋒先生	教育局助理秘書長(延續教育)
勞虔基博士	職業訓練局副執行幹事(政策及發展)
區鑑雄先生	職業訓練局助理執行幹事
麥潔鈴女士	職業訓練局署理高級項目主任
鄺愷盈女士	職業訓練局外務處傳媒事務主任

## 缺席者

張文輝議員  
黃裕材議員

\* \* \* \* \*

### 第一項：通過二零零八年度第一次會議記錄

委員一致通過上述會議記錄。

### 第二項：通過文康、社區服務及房屋事務委員會二零零八年度會議時間表 (文委會文件 2008/第 2 號)

2. 委員一致通過上述會議時間表。

20. 鄭啓源先生回應，房屋署會考慮盡可能避免在炎夏進行電力檢查。另一方面，在電力檢查期間臨時供電予個別升降機，帶電環境會危害檢查人員的安全，因此，檢測期間暫停升降機服務實無可避免；不過，承辦商進行電力檢查時，可先行檢查升降機及後備發電機的供電部分，假如發生緊急事故，可立即重組起動後備發電機，為大廈安排最基本的升降機服務，以作支援。他並補充，天水圍北大部分公共屋邨均設有後備發電機。

**第七項：天水圍基層醫療服務－短期及中期計劃**  
**(文委會文件 2008／第 12 及 13 號)**

21. 主席歡迎下列人士出席會議：

醫院管理局

新界西醫院聯網服務總監

區仕仁醫生

青山醫院精神科顧問醫生

張復熾醫生

新界西醫院聯網院務經理

李啓瑩小姐

社會福利署

元朗區助理福利專員 1

林定楓先生

元朗區助理福利專員 2

張織雯女士

社會工作主任(策劃及統籌)(元朗區)1

曾麗霞女士

22. 區仕仁醫生簡介上述文件。

23. 委員就議題發表的意見摘錄如下：

- (1) 希望醫院管理局(醫管局)把向私營界別購買基層醫療服務的試驗計劃(試驗計劃)涵蓋的範疇擴大，連普通科門診服務及長者也包括在內，以及進一步在天水圍南、元朗市和鄉郊推行；
- (2) 不贊成試驗計劃限制受資助的診症次數，因為資助病人到私家醫生求診的成本較由公營門診診所提供診症服務為低；
- (3) 查詢試驗計劃的受助人是否只可向指定的私家醫生求診；
- (4) 查詢試驗計劃提供的 1,000 個名額佔區內長期病患者人數的百

分比；

- (5) 詢問醫管局會否協助區內私營診所安裝病歷記錄資訊系統，讓參與試驗計劃的私家醫生利用電腦系統把臨床資料輸入醫管局的病人資料庫；
- (6) 憂慮參與試驗計劃的病人獲處方的藥物與政府普通科門診提供的藥物不同，以致影響病情，故此詢問醫管局有否訂立機制，以監察參與試驗計劃的私家醫生處方藥物的質素；
- (7) 詢問醫管局將如何及於何時檢討試驗計劃，以及有否訂明試驗計劃的結束日期；
- (8) 希望醫管局在天水圍第 109 區普通科門診診所啓用後，仍會繼續在區內推行試驗計劃；另建議盡快落實天水圍醫院的興建計劃及選址；
- (9) 促請醫管局盡快在天水圍第 109 區興建醫務大樓，並建議把該醫務大樓提升為綜合專科診所，提供眼科等專科診症服務；另查詢擬建醫務大樓的「綜合醫療服務中心」會提供哪些醫療服務；
- (10) 希望在醫務大樓增建一層，以供設立婦女健康中心，方便區內婦女無需跨區接受婦科檢查；
- (11) 建議在醫務大樓附設骨科診症服務，方便區內學童無需跨區進行脊椎檢查；
- (12) 希望醫管局盡快在天水圍增設牙科服務(包括長者鑲牙服務)，以及增加元朗區的牙科診症名額；
- (13) 支持醫管局計劃興建精神病康復者綜合社區支援中心及長期護理院，並建議向公眾加強宣傳教育，鼓勵市民接納精神病康復者。委員反映有居民對於第 109 區興建上述支援中心暨長期護理院持保留意見，醫管局應諮詢地區意見後才落實大樓內的設施；
- (14) 查詢長期護理院的院友一般可入住多久；另指出有區內居民出現精神病初期病徵，醫管局應把計劃興建的精神病康復者綜合社區支援中心的服務範疇擴大，並增加屯門精神健康診所的人

手，以縮短輪候診症的時間；

- (15) 建議醫管局把第 109 區整幅土地調作醫務大樓用地，並在剩餘土地闢建休憩處，方便精神病康復者及輪候門診的病人休息；另促請避免興建屏風式樓宇；
- (16) 指出長者使用電話預約門診服務系統時感到困難，故此建議預留診症籌額，以供長者臨時到診所就醫；
- (17) 查詢博愛醫院的病床將於何時全面啓用；
- (18) 關注新界西的病床與人口比例較其他地區爲低，而且醫生的流失率偏高，希望醫管局設法改善。

24 · 區仕仁醫生綜合回應如下：

- (1) 醫管局在天水圍北推行上述試驗計劃，有助減輕天水圍南門診所現時承受的壓力。該局會把試驗計劃推行期間的數據提交相關部門參考，以決定應否增加資助名額及於其他地區推行。該局初步計劃在天水圍第 109 區的醫務大樓落成啓用後，仍會繼續推行試驗計劃；
- (2) 根據天水圍普通科門診的統計數字，天水圍北約有 2,000 至 3,000 位長期病患者。由於試驗計劃的資源有限，而且政府診所對急性病症的支援較爲完善，故此醫管局只安排病情較穩定的長期病患者參與試驗計劃。此外，鑑於部分長期病患者可能依然選擇到政府診所求診，而病情不穩定及求診次數頻密的病人可能影響計劃的成效，亦可能減低私家醫生參與計劃的意慾，故此試驗計劃的名額訂爲 1,000 個；
- (3) 每位參與計劃的病人每年最多可獲資助 10 次疾病治療，包括慢性疾病及偶發性疾病的治療；
- (4) 醫管局設有監察藥物數量的電子平台，以便參與試驗計劃的長期病患者獲得私家醫生處方與政府普通科門診相同的藥物；
- (5) 擬建醫務大樓內的綜合醫療服務中心設有八間診症室，提供兒科、內科及老人科、婦科和精神科的診治。該中心亦會向公眾提供物理治療、職業治療及營養學資訊；

- (6) 牙科及學童健康檢查的服務並非醫管局的管轄範圍，但該局會向衛生署反映委員就該兩類醫療服務提出的意見。

25. 張復熾醫生綜合回應如下：

- (1) 天水圍第 109 區擬建醫務大樓內附設的精神科分流診所，初步計劃由一位資深精神科醫生為病人分流。病情較輕微的患者，會安排在同一幢大樓的精神科跟進；病情較嚴重及需要藥物治療的患者，則會轉介至屯門精神健康診所治療；
- (2) 醫管局計劃於區內開設心理治療診所，由資深精神科護士、職業治療師及社工等專業人士提供心理輔導。該診所會因應求診者的情況，安排小組或個人的心理輔導，藉着面談及心理治療，幫助有精神病初期病徵及患有心理病的市民；
- (3) 擬建醫務大樓內的長期護理院與青山醫院的性質不同。護理院以宿舍形式服務精神病康復者，讓他們在住宿期間接受社區康復治療，而病情嚴重的患者仍會安排到青山醫院留醫；
- (4) 屯門精神健康診所設有分流制度，讓病情較緊急及嚴重的患者可於兩星期內接受治療，病情嚴重性較低的患者亦可於八星期內獲得診治，但病情較輕微的患者則需輪候較長時間。醫管局會設法縮短病人輪候診症的時間。

26. 張織雯女士綜合回應如下：

- (1) 擬建醫務大樓內的長期護理院，將會提供 75 個宿位，為已出院後的精神病康復者提供住宿照顧服務及生活技巧訓練，以便他們盡快融入社區的生活。由於服務使用者相當依賴住宿照顧服務，因此他們的流動量較少；
- (2) 社會福利署轄下的康復服務協調委員會社區教育工作小組每年都會舉辦推廣精神健康的活動，並鼓勵社區居民接納精神病康復者。精神病康復者綜合社區支援中心落成啓用後，亦會協助推廣社區教育。此外，該中心更會提供外展服務，主動接觸有精神病初期病徵的市民，以協助他們盡快獲得適切的服務。

27. 主席總結，委員支持推行上述試驗計劃，並希望盡快在天水圍第109區興建醫務大樓，亦促請醫管局在推出服務前考慮委員的意見。

第八項：在天水圍設立職業訓練局青年學院及訓練中心  
(文委會文件 2008 / 第 14 號)

28. 主席歡迎下列人士出席會議：

教育局

助理秘書長(延續教育) 夏國鋒先生

高級學校發展主任(元朗)二 周德榮先生

職業訓練局

副執行幹事(政策及發展) 勞虔基博士

助理執行幹事 區鑑雄先生

署理高級項目主任 麥潔鈴女士

29. 勞虔基博士及區鑑雄先生簡介上述文件。

30. 主席申報他本人是職訓局保安護衛訓練委員會主席。

31. 委員就議題發表的意見摘錄如下：

(1) 支持職訓局設立上述青年學院及訓練中心，並希望該院校盡快啓用，以減省青少年跨區就讀的交通費；

(2) 查詢青年學院擬於本年年底開辦第一季課程的內容、入學要求、可獲取的資格、課程年期等，以及會否開辦兼讀課程；

(3) 詢問職訓局會否推薦青年學院的學員到商業機構就業，另希望職訓局向業界宣傳課程的內容，好讓僱主更具信心聘請該院校的學員；

(4) 建議職訓局開辦迎合經濟發展趨勢及青少年喜好的課程，例如電腦程式和維修、中式廚藝訓練及水電維修等課程，並加強區內宣傳；但關注職訓局開辦的課程或會與志願團體的再培訓課