For discussion on

10 January 2014

Legislative Council Panel on Home Affairs

Signature Project of Kwai Tsing District

PURPOSE

This paper seeks Members' views on the Signature Project of the Kwai Tsing ("K&T") District, including its scope of service and mode of operation, as well as the relevant funding arrangements.

PROPOSALS AND JUSTIFICATIONS - KWAI TSING SPS PROJECT

2. Kwai Tsing District Council ("K&TDC") proposes to use the \$100 million from the Signature Project Scheme ("SPS") to undertake *Enhancement of Community Healthcare Service* as the Signature Project of K&T. The proposal will comprise the provision of: (A) community healthcare services; (B) community fitness equipment ("FE") and information kiosk ("IK"); and (C) publicity to mobilise community support/ participation in community health projects. The proposal has been endorsed by K&TDC after consultation with stakeholders such as district organizations, Area Committees and district residents. After a robust and fair selection process¹, K&TDC has decided to engage Yan Chai Hospital ("Yan Chai") and Kwai Tsing Safe Community and Healthy City Association ("the Association") as its SPS partners for the

¹ Invitation for non-profit-making organisations (NPOs) to submit proposals was posted in local newspapers as well as K&TDC's website in June 2013. Two submissions were received. Thereafter, a Vetting Committee comprising K&TDC Members, representatives of Government departments and two independent experts was formed to assess the submissions.

delivery of service, subject to funding approval by the Finance Committee ("FC") of the Legislative Council ("LegCo").

(A) Community healthcare services

(I) Elderly healthcare services

3. To improve the elderly's health, the local community sees a need to enhance the healthcare services for them in K&T. Furthermore, K&TDC also considers the proposed project a concrete act to highlight the community's recognition of the contributions made by the elderly. Among the healthcare needs of elderly, dental and ophthalmic care are the priority areas.

(i) Dental care service run by Yan Chai

- 4. Proper oral health habits are the key to prevent dental diseases. Under the prevailing policy, the Government has been allocating resources primarily to health promotion and disease prevention. Apart from oral health promotion and prevention, the Government also provides emergency dental treatment (such as pain relief and tooth extraction) for the public and special oral care services for in-patients and persons with special oral healthcare needs. While some charitable organisations also provide more affordable dental services, some members of the public particularly the elderly may be deterred from getting dental treatments by the high charges in the private sector. Recognising such needs of the elderly in K&T, K&TDC proposes to support Yan Chai to provide dental care service for K&T residents who are aged 60 or above (except for those who are eligible for subsidised dental services from other sources²).
- 5. The services will be provided through two mobile dental clinics.

² For example, recipients of Comprehensive Social Security Assistance (CSSA) and thus eligible for the dental grant under CSSA or beneficiaries of the Community Care Fund (CCF) Elderly Dental Assistance Programme.

Other than basic oral examination, pain relief and tooth extraction, the service items include scaling, tooth restoration, endodontic treatment, denture and tooth prosthesis. Besides, the mobile dental clinics will promote awareness and knowledge in oral health and ways of preventing dental problems. Details on the service, together with eligibility criteria and checking mechanism, are set out at Annex A.

6. Patients will need to share part of the cost of the services. This will enable more elderly to benefit from the proposed service and prevent abuse. Taking these considerations as well as the affordability issue into account, K&TDC proposes to cover most of the service cost while patients need to pay the rest, ranging from \$10 for scaling to \$400 for denture. Moreover, K&TDC has proposed to cap the subsidy for dental care for each eligible person at \$10,000, which should be adequate to address the dental need of most elderly.

(ii) Ophthalmic care service run by the Association

- 7. Regular eye checks can help minimize the adverse impacts of various eye diseases, including diabetic eye diseases and cataract. K&TDC proposes to support the Association to provide ophthalmic care service for K&T residents who are aged 60 or above. The service package includes ophthalmic checks, provision of corrective glasses and ophthalmologist consultation.
- 8. Under the proposal, the Association will engage optometrists to perform the eye checks at the Integrative Community Health Centre ("ICHC")³ or a mobile health station. The elderly⁴ suffering from problems such as presbyopia will be offered a pair of tailored-fit corrective glasses at a rate of \$100. Cases requiring consultation with specialists will be referred to a registered ophthalmologist engaged by the Association, who will provide

³ It is a health centre run by the Association in Kwai Tsing in collaboration with the Faculty of Health and Social Sciences of the Hong Kong Polytechnic University. The health centre now provides a wide range of services including ophthalmic checks.

⁴ Recipients of CSSA are excluded.

assessment, medication and further referral as appropriate. Similar to the case of dental care service, users of ophthalmic care service will share part of the service cost, namely \$10 for eye checks and \$100 for specialist consultation.

- 9. Furthermore, the elderly in K&T who are granted financial support under Hospital Authority's Cataract Surgeries Programme ⁵ ("CSP") will be eligible for an additional subsidy of up to \$5,000^{6&7} to help cover part of the remaining cost to be borne by the elderly. This is to encourage them to go to private clinics to undergo early cataract surgery. The subsidy will be reimbursed upon completion of the operation and submission of relevant CSP documentary proof. The Association will take up the administrative work, such as checking proof of residency, processing payment receipts and the related book-keeping. Details about the ophthalmic care service are also set out at Annex A.
- 10. To ensure the best use of resources, K&TDC proposes that each elderly may only receive each of the abovementioned ophthalmic care services and subsidy once.

(II) Community Healthcare

11. The value of community healthcare has gained increasing recognition in the medical profession. Health education can inculcate health messages into people's mind and alter their lifestyle to prevent/ delay the onset of chronic diseases. Health checks screen out diseases at an early stage so that patients can receive timely treatment. Taken together they can help control potential healthcare cost and relieve problems associated with an ageing population.

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⁵ The Cataract Surgeries Programme ("CSP") is an initiative of the Hospital Authority to help elderly who have been waiting to undergo cataract surgery in public hospitals/ clinics. Under CSP, the participating patients will get \$5,000 subsidy to receive cataract surgeries performed by private clinics, and contribute for not more than \$8,000 from their own pocket.

⁶ Recipients of CSSA are excluded.

⁷ This additional subsidy would be the actual cost of the cataract surgery minus the \$5,000 paid under CSP (i.e. the actual cost borne by patient) or \$5,000, whichever is less. The patients will not have any monetary gain through engaging cheaper services as a result.

- 12. Recognising the value of community healthcare, K&TDC proposes to support the two SPS partners to pursue a series of community healthcare initiatives. These include the setting up of five health centres in each sub-area in K&T and a mobile health station. These centres will offer a wide range of services open to all K&T residents, such as free health assessment⁸ and general health advice. Moreover, the centres will turn into nurse clinic, Chinese medicine clinic or pain management clinic operated by registered professionals at different times of a week, charging an affordable fee (\$50–\$100) per consultation. Subsidised seasonal influenza vaccination will also be available for K&T residents who are in the age group of 50 to 64 or pregnant women (but excluding recipients under the Government's vaccination programmes⁹).
- 13. Further initiatives include visits to households in need (for instance elderly residing alone) to provide services such as home cleansing and offer of health advice. Health talks on various topics will also be organised.
- 14. In order to guard against ineligible people using the service, self-declaration and provision of documentary proof by users will be required. For instance, users of the dental care services have to provide proof of residency in K&T and make a declaration that they are not enjoying support/ subsidy from other sources for the same services. On the other hand, K&TDC proposes not to introduce means tests, which could entail considerable administrative costs. Moreover, the use of means tests, if introduced, will deviate from K&TDC's objective of using the relevant services as a concrete act to highlight the community's recognition of the contributions made by the elderly. The NPOs

⁸ Health assessment includes blood pressure, pulmonary function, bone density assessment, etc
⁹ The two target groups are based on the recommendation of the Centre for Health Protection. Persons aged 65 or above are eligible for subsidised seasonal influenza vaccination under the Elderly Vaccination Subsidy Scheme. CSSA recipients and medical waiver certificate holders, who are aged 50 or above or pregnant, are among those who are already provided with free seasonal influenza vaccination under the Government Vaccination Programme. These are examples of persons who are proposed to be excluded.

will refer any abuse to the relevant authority, for instance the Police, for necessary follow-up action.

(B) Community fitness equipment and information kiosk

- 15. To complement the proposed services, K&TDC considers that there is a need to provide some hardware for district residents to obtain information on healthy lifestyle as well as equipment for them to improve their fitness.
- 16. The Signature Project in K&T will include the procurement and installation of 16 IKs and 120 pieces of FE. IKs will provide information on healthy lifestyle, district-related information and community activities. FE like stepping platforms, air walkers and horizontal ladders will be installed or upgraded. Samples of FE and IKs to be installed are shown in Annex B. We have identified 29 suitable locations (e.g. indoor area under proper management and with high pedestrian flow) under the management of Kwai Tsing District Office ("K&TDO") and the Leisure and Cultural Services Department ("LCSD")¹⁰ for providing the FE and IKs. K&TDO will oversee the design, construction and installation of the IKs and FE. K&TDO will also take up their management and maintenance responsibility.
- 17. In a nutshell, the salient quantifiable achievements or targets expected from the Signature Project of K&T for three years after commencement of each type of services include:
 - 30 000 doses of seasonal influenza vaccine
 - 16 200 visits of dental services
 - 9 000 ophthalmic checks

¹⁰ For instance, sports centres managed by LCSD or community halls/ centres run by K&TDO will be suitable for installing information kiosks. Open space in sitting-out areas and parks are potential locations for fitness equipment installation.

- 3 000 cases of spectacle fitting
- 2 400 sessions of eye consultation
- 3 000 families benefited by outreach service
- 180 sessions of health education covering up to 20 000 residents
- 120 pieces of FE
- 16 IKs

The above targets might be reviewed and adjusted in light of the experience gained after project launch.

18. Though the NPOs are responsible for the services they deliver, K&TDC and K&TDO will endeavour to ensure effective monitoring of the service quality. The required service scope or level, such as the minimum number of people served per year, will be set out in a service agreement to be signed between the respective NPOs and K&TDO. The two NPOs will also be required to put in place measures such as regular reports to K&TDC as well as hotlines to receive complaints with proper follow-up. Furthermore, K&TDC and K&TDO will perform on-site inspections to monitor service delivery and collect user feedback. A dedicated Working Group comprising K&TDC members, K&TDO representatives and independent professionals will be formed to steer the monitoring job.

(C) Publicity for the SPS

19. Publicity is essential in raising awareness and mobilising community support/ participation in community health projects. K&TDC proposes to launch a three-phase publicity programme in parallel with the progress of the SPS. K&TDO will advertise through a dedicated website and conventional media within the district to promote the project. The plan will also seek to ride on major district or territory-wide events with similar themes, such as the sixth Global Conference of the Alliance for Healthy Cities to be held in Hong Kong

in the fourth quarter of 2014.

SUSTAINABILITY

20. Despite that SPS funding is a one-off provision, K&TDC together with its NPO partners will endeavour to ensure the financial viability and sustainability of the Signature Project. The NPO partners have made plans to continue as far as practicable the services on a self-financing basis or with support from alternative sources. For instance, the dental service provided by Yan Chai will continue after the expiry of SPS funding and extend to all residents of K&T regardless of age on a full cost recovery basis 11. For the services provided by the Association, it will seek funding support from other sources, including donations, after the expiry of SPS funding. If such funding is not sufficient, the Association will seek to provide the service on a full cost recovery basis in respect of ophthalmic check, vaccination and community health centres. The Association will also explore the feasibility of soliciting volunteers among professionals (e.g. ophthalmologists) and tertiary students majoring in healthcare-related disciplines to support some of the services.

FINANCIAL IMPLICATION

21. The total estimated project cost will be \$100 million. \$80 million¹² will be used for the delivery of services detailed in paragraphs 3 to 14 above for three years with the exception of the dental care service which will last for up to five years. \$7.7 million (in money-of-the-day prices) is required for the procurement and installation of FE and IKs; \$4 million for K&TDO to hire non-civil service contract staff to assist in and monitor the implementation of

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¹¹ Charges will be the same as those at the prevailing time at Yan Chai's dental clinics. Patients aged 65 or above will receive a 20% discount and an offer of "\$10 for basic oral inspection".

¹² For the dental care service, the proposal put forth by Yan Chai only requires \$27.2 million for a 3-year service. K&TDC has decided to set aside \$12.8 million to extend the service by Yan Chai on a pro-rata basis if the service is satisfactory and taking into actual demand (both volume and mix) after service launch.

the project; and \$3.8 million for the publicity programme. The remaining \$4.5 million is earmarked as general reserve. A summary table on the estimated project cost is at <u>Annex C</u>. The total cash flow for the whole proposal is set out at <u>Annex C1</u>. For the breakdown of budget for services run by Yan Chai and the Association, please refer to <u>Annex C2</u>.

22. The recurrent cost for operating and maintaining the IKs and FE would be \$0.8 million per annum.

IMPLEMENTATION SCHEDULE

23. The tentative project implementation timetable is at <u>Annex D</u>. In short, different types of services will start to be available from six to 18¹³ months after funding approval from the FC has been obtained. The IKs and FE are expected to be ready for public use starting from mid-2015.

PUBLIC CONSULTATION

24. The proposed Signature Project has the unanimous support of K&TDC and received very favorable comments throughout K&T. Stakeholders and district organisations, e.g. Rotary Club, Lions Club, etc., have been briefed on the proposal. An open forum was held in April 2013. The five Area Committees in K&T were consulted in May 2013. Furthermore, K&TDC has been inviting views or suggestions from the public through its website. Overall, the community health theme is widely supported.

WAY FORWARD

25. Subject to Members' comments, we will submit the proposal for the

¹³ The service with the longest lead time is the dental care service. According to Yan Chai, at least 12 to 15 months are required before two vehicles can be modified to be operational mobile dental clinics.

consideration of the Public Works Sub-committee and the FC of LegCo.

BACKGROUND

26. The Chief Executive announced in his 2013 Policy Address that a one-off allocation of \$100 million would be earmarked for each district to initiate one to two projects under the SPS ("SPS projects"). All the SPS projects are proposed, discussed and agreed by the District Councils ("DCs") before they are put to implementation. The DC must be satisfied that the project(s) would address local needs, and have a visible and lasting impact on the community. Depending on the DC's views and needs of the district, an SPS project may be works or non-works in nature, or a mixture of both. All SPS projects will be subject to a lower limit of \$30 million and an upper limit of \$100 million.

All the 18 DCs have agreed on the preliminary proposals of their SPS projects. Similar to the project of K&T District which will be covered by this paper, the Home Affairs Department and respective District Offices are working closely with the DCs, relevant Government bureau and departments and other stakeholders in taking forward the other projects, including examining their technical feasibility, before seeking Members' views and the funding approval of the LegCo. A list of the proposed projects of the remaining 17 districts is at Annex E for reference.

Home Affairs Bureau
Home Affairs Department
January 2014

Services to be Provided by the Two NPOs

[(Tentative and adjustments may be made in the light of experience gained after service launch)]

Eligibility of Target Group	Target service	Cost-sharin	g (per user)	Service details	Sustainability	Mechanism for
	level (in the first	User	SPS Support			Checking Eligibility
	three years)	Contribution				
A. Dental care (Yan Chai)						
K&T residents aged 60 or above	16 200 visits of	Range from	Range from	Dental services would be provided through	With SPS funding, the	- Self-declaration by
(excluding existing beneficiaries	dental services	\$10 (scaling)	\$90 to	two mobile dental clinics.	mobile dental clinics will	users
under Comprehensive Social Security		to \$400	\$3,600		operate for three to five	- Proof of residency
Assistance (CSSA) and beneficiaries		(denture)		Besides basic oral examination, pain relief	years ¹ .	in K&T
of Community Care Fund Elderly				and tooth extraction, other service items		- Random checks
Dental Assistance Programme)				including scaling, tooth restoration,	Thereafter they will	with Government
				endodontic treatment, denture and tooth	continue to operate on a	departments or
				prosthesis would be provided under this	full cost recovery basis,	relevant
				project.	and serve K&T residents	organisations
					regardless of ages ² .	
				Cases which cannot be treated on the mobile		
				dental clinics will be referred to other dental		
				or specialist clinics.		
				K&TDC has decided to cap the subsidy for		
				dental care for each eligible person at		
				\$10,000.		

¹ The proposal put forth by Yan Chai requires \$27.2 million for a 3-year service. A funding of \$12.8 million with the agreement of K&TDC will be set aside to extend the service by Yan Chai on a pro-rata basis if the service is satisfactory. Based on the budget under the current proposal, the projected service period would be up to five years.

² Charges will be the same as the prevailing charges at Yan Chai's dental clinics. Patients aged 65 or above will receive a 20% discount and an offer of basic oral inspection for \$10.

Eligibility of Target Group	Target service	Cost-sharin	ng (per user)	Service details	Sustainability	Mechanism for		
	level (in the first	User	SPS Support			Checking Eligibility		
	three years)	Contribution						
B. Ophthalmic care ³ (The Associate	ion)	•			,	,		
(I) Comprehensive ophthalmic che	eck							
K&T residents aged 60 or above	9 000 visits of	\$10	\$200	Ophthalmic check will be performed at	Upon the expiry of the	- Same as Part A		
	ophthalmic check			Integrative Community Health Centre	SPS funding, the			
				("ICHC") ⁴ for early detection of common	Association will continue			
				eye diseases, such as cataract, glaucoma and	the service together with			
				diabetes retinopathy, etc.	the PolyU on a full			
					cost-recovery basis.			
				Free preliminary ophthalmic checks will				
				also be performed in mobile health station.				
				Patients of more complex cases will be				
				invited to the ICHC for detailed check.				
(II) Eye consultation and diagnosis								
K&T residents aged 60 or above	2 400 sessions of	\$100	\$400	Cases requiring consultation with specialists	Upon expiry of the SPS	- Same as Part A		
	eye consultation			after checking in ICHC, will be referred to a	funding, the Association			
				registered ophthalmologist engaged by the	will explore other			
				Association, who will provide assessment,	funding support and			
				medication and further referral as	consider soliciting			

³ K&TDC has decided to limit the number of time each person to receive the relevant services under ophthalmic care to one.

⁴ The Association now runs an Integrative Community Health Centre ("ICHC") in collaboration with the Faculty of Health and Social Sciences ("FHSS") of the Hong Kong Polytechnic University ("PolyU"). The ICHC provides a wide range of services including ophthalmic checks. Residents can also go to ICHC directly to have the checking.

Eligibility of Target Group	Target service	Cost-sharin	ng (per user)	Service details	Sustainability	Mechanism for		
	level (in the first	User	SPS Support			Checking Eligibility		
	three years)	Contribution						
				appropriate.	volunteers among			
					ophthalmologists.			
(III) Prescription of corrective glasses								
K&T residents aged 60 or	3 000 cases of	\$100	\$400	Elderly suffering from problems such as	Upon the expiry of the	- Same as Part A		
above(excluding CSSA recipients)	spectacle fitting			presbyopia after checking in ICHC will be	SPS funding, the			
				offered a pair of tailored-fit corrective	Association will continue			
				glasses.	the service together with			
					the PolyU on a full			
					cost-recovery basis.			
(IV) Subsidy for cataract surgeries	1	1	T		1	ı		
K&T residents who have been	450 people	Not more	Up to \$5,000	K&TDC proposes to ride on the CSP and	The subsidy will cease to	- Proof of successful		
successfully granted subsidy under		than \$3,000 ⁵		provide an additional subsidy of up to	be provided after the	enrollment in CSP		
Cataract Surgeries Program (CSP) of				\$5,000 to those who have got CSP support.	expiry of the SPS	in addition to items		
Hospital Authority (HA)					funding.	in Part A		
(excluding CSSA recipients)								

⁵ Under the CSP of HA, participating patients who choose to receive cataract surgeries performed by private ophthalmologists could receive a fixed subsidy of \$5,000, and may need to share the cost of not more than \$8,000 for the service package. K&TDC proposes to ride on the CSP and provide an additional subsidy of up to \$5,000 to those who have got CSP support. As a result, the beneficiaries will share a cost of not more than \$3,000.

Eligibility of Target Group	Target service	Cost-sharin	g (per user)	Service details	Sustainability	Mechanism for
	level (in the first	User	SPS Support			Checking Eligibility
	three years)	Contribution				
C. Influenza vaccination (The Association (The Associatio	ciation)					•
K&T residents who are in the age	30 000 doses of	\$30	\$70	The influenza vaccination would be injected	The Association will	- Self-declaration by
group of 50 to 64 or pregnant	influenza			at locations which are convenient and	consider seeking other	users
(excluding recipients under other	vaccination			accessible such as the Mobile Health Station	funding support and	
Government vaccination				and Community Health Centres.	soliciting volunteers.	
programmes ⁶)					Otherwise, the service	
					will continue on a full	
					cost recovery basis.	
D. Outreach service (The Association	on)					
Needy families, chronic disease	3 000 households to	Free of	Around	Target households will be identified with the	The Association will	- N/A
groups and the single-living elderly	be visited	charge	\$430	help of NGOs and primary care providers.	consider seeking other	
in K&T			(per		funding support and	
			household)	A range of services such as simple health	soliciting volunteers to	
				check, drug advice, home cleansing and	sustain the service.	
				minor repair works, would be provided.		

⁶ The two target groups are based on the recommendation of the Centre for Health Protection. Persons aged 65 or above are eligible for subsidised seasonal influenza vaccination under the Elderly Vaccination Subsidy Scheme. CSSA recipients and medical waiver certificate holders, who are aged 50 or above or pregnant, are among those who are already provided with free seasonal influenza vaccination under the Government Vaccination Programme. These are examples of persons who are proposed to be excluded.

Eligibility of Target Group	Target service	Cost-sharin	g (per user)	Service details	Sustainability	Mechanism for
	level (in the first	User	SPS Support			Checking Eligibility
	three years)	Contribution				
E. Community health centres and m	obile health station (Th	ne Association)				
Open to all K&T residents	Varies with	Range from	Range from	In the health centres and stations, a variety	The Association will	- Proof of residency
	different service	\$0 to \$100	\$10 to \$950	of services will be provided, ranging from	consider seeking other	in K&T
	item ⁷			health assessment to eye checks.	funding support and	
					soliciting volunteers to	
				The health centres will also make referrals to	sustain the service.	
				proper institutions for follow-up.	Otherwise, the service	
				Registered nurses, Chinese medicine	will continue on a full	
				practitioners and physiotherapists will	cost recovery basis as far	
				operate different clinics at different times of	as practicable.	
				a week.		
				The Association proposes to establish the		
				centres at the five sub-areas of Kwai Tsing		
				district.		

⁷ The following are the service target (persons): Health assessment (112 500), Nurse Clinic (7 500), Chinese medicine Clinic (7 500), Pain clinic (3 750), Rehabilitation class (1 800), Music therapy class (1 800), Health education (15 000), Patient Groups (3 750), Volunteer Training (1800), Carer Training (1 800); the following are the service target (persons) in mobile health station: Health assessment (60 000), Preliminary eye check (30 000), Health counseling (30 000) and Drug advise (15 000).

Eligibility of Target Group	Target service	Cost-sharin	g (per user)	Service details	Sustainability	Mechanism for
	level (in the first	User	SPS Support			Checking Eligibility
	three years)	Contribution				
F. Health education (The Association	n and Yan Chai)					
Open to all ⁸	A total of 180	Free of	Around \$60	Both NPOs will engage different health	Yan Chai Hospital will	- N/A
	sessions of health	charge	(per	professionals such as doctors, nurses,	cease to provide health	
	education covering		participant)	dentists and physiotherapists to provide	education after the first	
	up to 20 000			health education with various themes	three years.	
	residents, plus			ranging from mental health to oral health.		
	relevant booklets on				The Association will	
	health information				consider seeking other	
					funding support and	
					soliciting volunteers to	
					sustain the service.	

⁸ Depending on the theme of different sessions, the sessions would be targeted at different target groups (e.g. Anti-fall Talk will be targeted at the elderly).

Samples of community fitness equipment and information kiosks to be installed

Information Kiosks



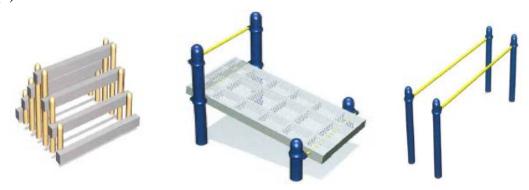


Community fitness equipment

(a) for use of the elderly



(b) for use of the adult



Overview of the cost of the Kwai Tsing SPS Project

Items	Budgeted amount (\$'000)
A) Community Healthcare Services	
1) Services provided by The Association	40,000
(Ophthalmic Care Service, Community Health Care Services and Health Education)	40,000
2) Services provided by Yan Chai (Dental Care Service and Health Education)	40,000
Subtotal (A)	80,000
B) Community Fitness Equipment and Information Kiosk	
1) Information Kiosk	2,500
2) Fitness Equipment	4,800
3) Contingency	400
Subtotal (B)	7,700
C) Non-civil service staff	
1) District Office	4,000
Subtotal (C)	4,000
D) Publicity	
1) Pre-Launch Stage	1,100
2) Launching Stage	1,300
3) Implementation Stage	1,400
Subtotal (D)	3,800
General Reserve	4,500
Total (A+B+C+D)	100,000

Note: The costs for part B are presented in money-of-the-day price.

Total cash flow for the Kwai Tsing SPS Project

Financial Year	Commun	nity Health	Commun	ity fitness	Non-civil	Publicity	Budget		
(FY)	Ser	vices	equipm	ent and	service staff	(\$'000)	(\$'000)		
	(\$'000)		informat	ion kiosk	(\$'000)				
			(\$'(000)					
	Yan Chai	Association	Fitness	Information	District Office				
	Tan Chai	Association	Equipment	Kiosk	District Office				
2014-15	4,000	11,000	1,500	2,500	1,000	2,400	22,400		
2015-16	8,800	12,000	3,300		1,000	1,400	26,500		
2016-17	6,400	11,000			1,000		18,400		
2017-18	6,400	6,000			1,000		13,400		
2018-19	6,400						6,400		
2019-20	6,400						6,400		
2020-21	1,600						1,600		
						Subtotal	95,100		
	400								
	4,500								
	Total								

Note:

¹⁾ Yan Chai has requested an upfront provision of \$4 million in FY 2014-15 for settling payment for the procurement of mobile dental clinics, equipment, furniture and appliances (i.e. 50% of the total cost). The remaining payment of \$4 million will be settled in FY 2015-16.

²⁾ The proposal put forth by Yan Chai only requires \$27.2 million for a 3-year service. K&TDC has decided to set aside \$12.8 million to extend the service by Yan Chai on a pro-rata basis if the service is satisfactory and taking into actual demand (both volume and mix) after service launch. The funding so earmarked can support the dental care service for up to five years.

³⁾ In FY 2015-16, Yan Chai will only provide services for nine months. In FY 2020-21, Yan Chai will only provide services for three months.

⁴⁾ For publicity, both pre-launch and launching stages lie in FY 2014-15; and the implementation stage lies in FY 2015-16.

Budget for the NPOs for the proposed services under the Kwai Tsing SPS Project

Services	Budget (\$'000)					
Yan Chai						
Dental Service (including two mobile dental clinics)	39,700					
Health Education	300					
Subtotal (A)	40,000					
The Association						
Ophthalmic Service	6,210					
Vaccination	2,450					
Health Education	930					
Outreach Service	1,300					
Community Health Centres	19,820					
Mobile Health Station	3,410					
Service Promotion	400					
Administration Office (renovation; rent; utilities; IT system; etc.)	1,640					
Administration Staff and Expenses (e.g. postage)	3,740					
Audit Fee	100					
Subtotal (B)	40,000					
Total (A+B)	80,000					

Annex D

			2014	1	Τ	20)15			2016	6		Τ	2	017			20)18		2019				2020			
Task	Target Date	Q2 (Starting from May)	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2		Q4
1 Publicity																												
1.1 PR activities	Apr 2014 – Sep 2015																	On-o	oing pul	olicity tl	hrough	promot	ional me	ans with	nin K&	т		
2 Community Healthcare Services					•	•		•	•		•	•		•	•		<u> </u>	011 8	ong put	menty ti	in ough	promot	ionai me	uns with	iiii ikee	1		
2.1 Delivery of services																												
- Dental care	Oct 2015 – Sep 2020																											
- Ophalmtical care	Oct 2014 – Sep 2017																											
- Community health services	Oct 2014 – Sep 2017																						ontinued ources as				sis or	
- Health education	Oct 2014 – Sep 2018																					T	T	r				
3 Community FE and IKs			•		•			•				•	•		•	•	•	•	•		•	•					-	
3.1 Procurement procedures	Jun – Oct 2014																											
3.2 Installation and testing of facilities	Nov 2014 – Jun 2016																											
3.3 Commissioning	Jul 2015 onwards																											

May 2014

Annex E

Signature Project Scheme List of Preliminary Proposals from the other 17 Districts

District	Description of Project
Central and Western	Enhancement and revitalization of the harbourfront area adjoining the Western Wholesale Food Market
	as a vibrant promenade and open space for public
	enjoyment, with myriad community involvement
	activities to promote vibrancy of the harbour.
Eastern	Construction of Eastern District Cultural Square to
	enhance the livelihood and promote the tourism of
	the Eastern District and to provide open space which
	could be used for, inter alia, cultural activities.
Southern	Development of seafood dining facilities near the
	Aberdeen Wholesale Fish Market with a view to
	promoting and highlighting the fishermen culture of
	the Southern District.
Wan Chai	Provision of a performance and activity venue at
	Moreton Terrace for organizing a wide range of
	community building, cultural and leisure activities
	for local residents.
Kowloon City	Revitalisation of the rear portion of the Cattle Depot
	to make available an open space for recreation
	purpose in the To Kwa Wan area, and to facilitate the
	promotion of arts and culture to the community.
	Arts and cultural activities will be organized with a
	view to promoting arts and culture in the community
	as well as the unique background of the Cattle
	Depot.
Kwun Tung	Construction of a music fountain with integration of
	dynamic lighting, musical features and special
	effects riding on the promenade of Kwun Tung with
	a view to making it a place for public leisure and
	enjoyment of harbour views.
	Construction of a lift tower at Shui Ning Street in

	Kwun Tong to enhance the overall barrier free access facilities at Hong Ning Road Recreation Ground which is a key pedestrian access connecting the nearby public rental housing estates where a large number of grassroot elderly residing and the Kwun Tong Town Centre so as to help the elderly and physically impaired integrate into the community.
Sham Shui Po	Construction of a community services centre in Shek Kip Mei to provide various community services to meet local needs and enhance service coverage in the district. Construction of a neighbourhood activity centre at Mei Foo with multi-purpose rooms for holding
Wong Tai Sin	various activities for local residents. Enhancement of leisure facilities of Morse Park with
	an aim to providing a better performance venue at Morse Park No. 4 for hosting district and territory-wide events. Expansion and improvement of Wong Tai Sin Square with a view to allowing organizations to better utilize this ideal venue of the district for hosting community events.
Yau Tsui Mong	Development of a multicultural activity venue at Battery Street to promote cultural diversity and enhance mutual understanding between different ethnic groups and the mainstream community in the district, and to illustrate the multicultural characteristics of the district.
Islands	Improvement works at Silvermine Bay Beach, Mui Wo with a view to improving the beach facilities so as to better serve the visiting public while adopting a more modern and aesthetically pleasing design. Redevelopment of the North Lama Public Library building at Yung Shue Wan, Lamma Island to increase the floor space to house the library and a showroom for relics and photos of Lamma Island to enable residents and tourists having an overview of

	the island's heritage and major scenic spots upon
	disembarking from the pier.
North	Improvement of trails and provision of facilities in
	areas in Sha Tau Kok adjoining the Double Haven
	Marine Park and Geo-Area of the Hong Kong
	Global Geopark of China to promote eco-tourism
	and support the continual recognition of the area by
	the Global Geoparks Network by United Nations
	Educational, Scientific and Cultural Organisation.
	Improvement of trails and provision of ancillary
	facilities at Wu Tip Shan and Wa Mei Shan in
	Fanling to encourage healthy living, promote
	tourism and establish a landmark in the district.
Sai Kung	Reconstruction of the Sharp Island Pier so as to
	respond to the strong district aspiration and promote
	local tourism in Sai Kung.
	Construction of the Tseung Kwan O Heritage Hiking
	Trail and History and Heritage Information Centre
	with a view to re-capturing the heritage of Tseung
	Kwan O.
Sha Tin	Revitalization of Shing Mun River promenade near
	Sha Tin town centre to enhance public enjoyment.
	Decking of Tai Wai Nullah in Sha Tin for provision
	of recreation facilities.
Tai Po	Improving the tourist facilities at Lam Tsuen
	Wishing Square with an aim to preserve and further
	promote the unique culture in Tai Po on
	wish-making through improving the tourist facilities
	at the Lam Tsuen Wishing Square.
	Establishment of an art development centre by
	retrofitting Tai Po Government Secondary School to
	facilitate the further development of arts and culture
	in Hong Kong, and in particular, Tai Po District.
Tsuen Wan	To redevelop the Sai Lau Kok Garden by raising a
	part of it to become a podium Garden with
	connection to the existing footbridge network
	outside the Tsuen Wan MTR station, and to
1	construct an indoor multi-purpose centre at ground

	level.
Tuen Mun	Revitalisation of Tuen Mun River and surrounding
	areas to make livelier areas along the shores of the
	Tuen Mun River and surrounding areas by
	incorporating cultural elements.
	Promotion of youth development to provide
	additional facilities and programmes for young
	people to explore and develop their different
	potential.
Yuen Long	Construction of Yuen Long District Community
	Services Building to provide more premises for
	delivering enhanced community services to meet the
	needs of the increasing population in the district,
	notably from the youth, ethnic minority and new
	arrival communities.