# 立法會 Legislative Council

LC Paper No. PWSC186/14-15 (These minutes have been seen by the Administration)

Ref: CB1/F/2/1(21)B

# Public Works Subcommittee of the Finance Committee of the Legislative Council

# Minutes of the 16th meeting held in Conference Room 1 of the Legislative Council Complex on Wednesday, 8 April 2015, at 8:30 am

### **Members present:**

Hon Alan LEONG Kah-kit, SC (Chairman)

Hon WU Chi-wai, MH (Deputy Chairman)

Hon Albert HO Chun-yan

Hon CHAN Kam-lam, SBS, JP

Hon LEUNG Yiu-chung

Hon Emily LAU Wai-hing, JP

Hon TAM Yiu-chung, GBS, JP

Hon Frederick FUNG Kin-kee, SBS, JP

Hon WONG Kwok-hing, BBS, MH

Prof Hon Joseph LEE Kok-long, SBS, JP, PhD, RN

Hon Ronny TONG Ka-wah, SC

Hon Cyd HO Sau-lan, JP

Hon CHAN Hak-kan, JP

Hon CHAN Kin-por, BBS, JP

Hon IP Kwok-him, GBS, JP

Hon Albert CHAN Wai-yip

Hon Michael TIEN Puk-sun, BBS, JP

Hon Frankie YICK Chi-ming

Hon Gary FAN Kwok-wai

Hon CHAN Chi-chuen

Dr Hon Kenneth CHAN Ka-lok

Hon CHAN Yuen-han, SBS, JP

Hon Alice MAK Mei-kuen, JP

Hon Christopher CHEUNG Wah-fung, SBS, JP
Dr Hon Fernando CHEUNG Chiu-hung
Hon SIN Chung-kai, SBS, JP
Dr Hon Helena WONG Pik-wan
Hon IP Kin-yuen
Ir Dr Hon LO Wai-kwok, BBS, MH, JP
Hon Christopher CHUNG Shu-kun, BBS, MH, JP
Hon Tony TSE Wai-chuen, BBS

#### **Members absent:**

Hon LEE Cheuk-yan

Hon James TO Kun-sun

Hon Abraham SHEK Lai-him, GBS, JP

Dr Hon LEUNG Ka-lau

Hon CHEUNG Kwok-che

Hon Paul TSE Wai-chun, JP

Hon LEUNG Kwok-hung

Hon Claudia MO

Hon Steven HO Chun-yin

Hon Charles Peter MOK, JP

Hon CHAN Han-pan, JP

Hon LEUNG Che-cheung, BBS, MH, JP

Hon Kenneth LEUNG

Dr Hon KWOK Ka-ki

Hon Dennis KWOK

Dr Hon Elizabeth QUAT, JP

Dr Hon CHIANG Lai-wan, JP

# **Public officers attending:**

Mr YEUNG Tak-keung, JP Deputy Secretary for Financial Services and

the Treasury (Treasury)3

Mr HON Chi-keung, JP Permanent Secretary for Development

(Works)

Mr Thomas CHOW Tat-ming, Permanent Secretary for Development

JP (Planning and Lands)

Ms Anissa WONG, JP Permanent Secretary for the Environment

Ms Jasmine CHOI Suet-yung Principal Assistant Secretary for Financial

Services and the Treasury (Treasury) (Works)

Professor Sophia CHAN Under Secretary for Food and Health

Siu-chee

Ms Angela LEE Chung-yan Principal Assistant Secretary for Food and

Health (Health)2

Mr LEUNG Kam-pui Chief Technical Adviser (Subvented Projects)

Architectural Services Department

Dr LEE Cheuk-kwong Deputized Chief Executive and Medical

Director, Hong Kong Red Cross Blood

Transfusion Service Hospital Authority

Mr Donald LI Chief Manager (Capital Planning)

**Hospital Authority** 

Ms Curia SHEK General Manager (Administrative Services),

Hong Kong Buddhist Hospital

**Hospital Authority** 

#### Clerk in attendance:

Ms Sharon CHUNG Chief Council Secretary (1)2

### **Staff in attendance:**

Mr Fred PANG
Mr Hugo CHIU
Ms Christina SHIU
Ms Christy YAU
Ms Haley CHEUNG
Senior Council Secretary (1)6
Legislative Assistant (1)2
Legislative Assistant (1)7
Legislative Assistant (1)9

#### Action

The Chairman advised that there were three funding proposals on the agenda for the meeting. He reminded members that in accordance with Rule 83A of the Rules of Procedure ("RoP") of the Legislative Council

("LegCo"), they should disclose the nature of any direct or indirect pecuniary interests relating to the funding proposals under discussion at the meeting before they spoke on the item. He also drew members' attention to Rule 84 of RoP on voting in case of direct pecuniary interest.

# Head 708 – Capital Subventions and Major Systems and Equipment PWSC(2015-16)1 67MM Expansion of the Hong Kong Red Cross Blood Transfusion Service Headquarters

- 2. <u>The Chairman</u> advised that the proposal, i.e. PWSC(2015-16)1, was to upgrade 67MM to Category A at an estimated cost of \$893.1 million in money-of-the-day ("MOD") prices for the expansion of the Hong Kong Red Cross Blood Transfusion Service ("BTS") Headquarters. The Panel on Health Services had been consulted on the proposal on 17 November 2014. Members of the Panel supported the proposed project. A report on the gist of the Panel's discussion had been tabled at the meeting.
- 3. At the invitation of the Chairman, <u>Under Secretary for Food and Health</u> ("USFH") briefed members on the proposal.

# Purpose and scale of the project

- 4. Mr IP Kwok-him referred to paragraph 11 of the discussion paper that the plan to expand the BTS Headquarters would address the current space shortage and outdated design of the building, which might pose potential risks of blood products contamination as well as occupational hazards. He enquired how the design of the Headquarters building under the proposed project could mitigate these risks and hazards. Mr Frankie YICK asked whether the proposed increase of the construction floor area, from 8 000 square metres to 18 000 square metres, was more than necessary.
- 5. <u>USFH</u> replied that the purpose of the proposed project was to expand the BTS Headquarters to bring its facilities up to the prevailing international standards, provide adequate space to cope with its projected level of services and to ensure a safe working environment. Upon completion of the expansion project, the BTS Headquarters would accommodate new or expanded services including a core blood bank, a cellular therapy laboratory, a bone marrow donor registry, etc.
- 6. <u>Chief Manager (Capital Planning)</u>, <u>Hospital Authority</u> ("CM(CP)/HA") advised that it was necessary for the BTS to expand its Headquarters, since the existing construction floor area of the building was far from adequate to

cater for the required operations and workflow. He explained that the BTS, after the expansion, would have sufficient space for providing a uni-directional flow of blood and plasma products in the production processes to minimize chances of contamination. In response to Mr YICK's enquiry about the height of the expanded area to be constructed near the main entrance of the BTS Headquarters under the project, <u>CM(CP)/HA</u> replied that the said expanded area was about 5 metres high.

7. <u>Ir Dr LO Wai-kwok</u> declared that he was a member of the Hospital Authority ("HA") Board. He enquired about the impact of the construction works of the expansion project on the day-to-day services provided by the BTS. <u>USFH</u> replied that the project would be carried out in two stages and would have no significant impact on the services provided by the BTS.

## Design of the Headquarters building

- 8. Mr Tony TSE said that the proposed project comprised the construction of a new eight-storey annex block connected to the existing building. He was concerned about the interface between the two buildings on each floor. Mr Frankie YICK asked about the total height of the new annex block.
- 9. <u>CM(CP)/HA</u> replied that the floor-to-floor height of each storey of the new annex block was 4.5 metres. He explained that although the floor-to-floor height of the new annex block would be higher than that of each storey of the existing building, the lower ground and ground floors of the two buildings would be connected despite the first and second floors, which mainly accommodated the office rooms, would not be connected.
- 10. <u>Mr TSE</u> requested the Administration to provide drawings, including floor plans, sectional drawings and a perspective view (artist's impression), for each floor of the BTS Headquarters.

(*Post-meeting note*: The Administration's supplementary information was circulated to members vide LC Paper No. PWSC180/14-15(01) on 18 May 2015.)

11. Mr TSE asked whether the scope of the project included the renovation of the existing building, and whether the renovation works covered both the building itself and the facilities in the building. He further enquired whether, instead of continuing to maintain the existing building, the Administration had any medium- or long-term plan to redevelop it. He opined that the redevelopment of the existing building would be an opportunity to make better use of the small piece of land, which was irregular

in shape, next to the Headquarters building and currently occupied by the King's Park Recreation Ground.

- 12. In response, <u>CM(CP)/HA</u> confirmed that the proposed project covered the renovation of the existing Headquarters building. As regards the King's Park Recreation Ground, he advised that the area was under the purview of the Leisure and Cultural Services Department ("LCSD"). He added that, with the consent of the Director of Leisure and Cultural Services, an area of the King's Park Recreation Ground had been incorporated into the BTS site on an "on loan" basis to the Hong Kong Red Cross ("HKRC"). In response to Mr Frankie YICK's enquiry, <u>CM(CP)/HA</u> advised that the relevant agreement had not specified the date for the return of the land to LCSD. <u>Mr YICK</u> requested the Administration to provide details, including plans/drawings, on the piece of land on loan to HKRC.
- 13. <u>Mr Tony TSE</u> requested the Administration to provide information on whether the existing building, in view of its age, height and design, had imposed any constraints on the planning and design of the new annex block in respect of optimizing the land use of the project site.

(*Post-meeting note*: The Administration's supplementary information was circulated to members vide LC Paper No. PWSC180/14-15(01) on 18 May 2015.)

# Cost of the project

- 14. Mr Christopher CHUNG referred to paragraph 12 of the Administration's paper on the expenditure items and sought clarification on whether the works covered by "additional energy conservation, green and recycled measures" overlapped with those under "soft landscaping works" or "building services works". Noting that \$215.5 million and \$35.4 million were provided for price adjustment and contingencies respectively, which in total represented more than 25% of the estimated cost of the proposed project, he enquired whether the provisions were in line with the general practice of other public works projects.
- 15. <u>CM(CP)/HA</u> replied that there was no overlap between the items covered by "additional energy conservation, green and recycled measures" and the items under "soft landscaping works" or "building services works". He advised that information was given in paragraph 15 of the Administration's paper on the basis of calculation for the provision for price adjustment. <u>USFH</u> advised that the provision for contingencies was about 6% of the total project cost, which was lower than the 10% generally adopted by other projects.

16. <u>Mr Christopher CHUNG</u> requested the Administration to provide a detailed breakdown on the items of works and expenditures under "building services works", "external works and soft landscaping works" and "additional energy conservation, green and recycled measures"; and the justifications for the proposed commitments for "provision for price adjustment" and "contingencies".

(*Post-meeting note*: The Administration's supplementary information was circulated to members vide LC Paper No. PWSC180/14-15(01) on 18 May 2015.)

- 17. Noting that the additional annual recurrent expenditure arising from the expansion project would be \$91.9 million, <u>Ir Dr LO Wai-kwok</u> enquired whether the BTS would increase its manpower following the expansion. <u>USFH</u> replied that the number of staff working in the BTS Headquarters was currently 241 and would increase to 264 after its expansion. The new positions would be mainly filled by executives and allied health professionals.
- 18. <u>Mr Christopher CHUNG</u> noted that the expenditure items of the proposed project included the remuneration of resident site staff. He enquired about the reasons for engaging resident staff in the project. <u>CM(CP)/HA</u> replied that the staff would be responsible for supervising the construction works on site. <u>Mr CHUNG</u> requested the Administration to provide a breakdown of the proposed remuneration expenditure by job types, and the justifications for the expenditure.
- 19. <u>Mr Albert CHAN</u> enquired about the estimated construction unit cost for the project in MOD prices. He opined that the information should have been provided in the discussion paper. <u>CM(CP)/HA</u> responded that the Administration would provide the information requested by Mr CHAN after the meeting.
- 20. Referring to the indicative list of furniture and equipment items set out in Enclosure 11 to the Administration's paper, Mr Christopher CHUNG requested the Administration to provide supplementary information about the "card access control system", including the purpose of introducing the system and its difference with the "security system" under the same list. In response to Mr Tony TSE's enquiry on whether the "card access control system" would be installed in both the new annex block and the existing building of the BTS Headquarters under the project, CM(CP)/HA replied in the affirmative.

(*Post-meeting note*: The Administration's supplementary information was circulated to members vide LC Paper No. PWSC180/14-15(01) on 18 May 2015.)

#### Funding arrangement

- 21. Noting that HKRC would contribute \$20 million towards the capital cost of the project and the Administration would finance the remaining funding required for the project, Mr Albert CHAN queried whether this funding arrangement was in line with the established practice and whether it was comparable to the funding approaches adopted overseas in similar projects. He questioned whether HKRC would be required to appoint the wife of the Chief Executive its President in return for the Administration's funding support for the project. Mr SIN Chung-kai enquired about the factors of consideration for determining whether the Administration would finance an expansion project involving HKRC or other international relief organizations.
- 22. <u>USFH</u> replied that the BTS was the only organization in Hong Kong responsible for collection and supply of fully-tested blood and haematopoietic stem cells. Its key users were the public and private hospitals in Hong Kong. She advised that the BTS was one of the organizations listed in Schedule 2 of the Hospital Authority Ordinance (Cap. 113) which was operated by HA with Government's subvention, similar to those hospitals listed in Schedule 2 of the Ordinance. While there were government guidelines for a subvented organization to contribute to the total cost of a capital works project where possible, the Administration allowed flexibility on the exact share having regard to relevant factors, such as the financial situation of the concerned organization.
- 23. <u>Deputized Chief Executive and Medical Director, Hong Kong Red Cross Blood Transfusion Service, Hospital Authority</u> supplemented that the BTS, as a part of the Hong Kong's healthcare system, was an institution committed to ensuring an adequate and safe blood supply in Hong Kong. HKRC, the parent organization of the BTS, was a branch of the Red Cross Society of China and had all along taken part in the events held by the International Federation of Red Cross and Red Crescent Societies.
- 24. <u>Mr Albert CHAN</u> requested the Administration to provide, as a cross reference to the proposed funding arrangement, details (with examples) on the funding approaches adopted by the governments of other cities/countries for projects related to the provision of BTS centres/facilities.

(*Post-meeting note*: The Administration's supplementary information was circulated to members vide LC Paper No. PWSC180/14-15(01) on 18 May 2015.)

### Ownership and use of the Headquarters building

- 25. Mr SIN CHUNG-kai enquired about the ownership of the Headquarters building in the event that BTS discontinued its services in Hong Kong. Mr Tony TSE asked about the relationship among the BTS, HKRC and HA. Considering that land had already been reserved at Hoi Ting Road of the West Kowloon Reclamation area for the construction of a new HKRC Headquarters building, he sought clarification on whether the land occupied by the BTS Headquarters was under the ownership of HKRC.
- 26. <u>CM(CP)/HA</u> replied that upon completion of the proposed project, the BTS Headquarters building would remain a property owned by HKRC. Although the land lot occupied by the BTS Headquarters was also owned by HKRC, it was granted to HKRC for providing the BTS only. In the event that HKRC no longer provided the BTS at the site, the Administration might resume the land. He advised that the BTS were part of the services run by HA. HKRC was not involved in the BTS' daily operation. In response to Mr SIN's enquiry on whether the staff working in the BTS were employed by HA, <u>CM(CP)/HA</u> advised in the affirmative.
- 27. The Chairman requested the Administration to provide information on the ownership of the land occupied by the BTS Headquarters and ownership of the Headquarters building (the existing building and proposed new annex block); the current regulatory regime over the operation of the BTS; and the respective powers/responsibilities of HKRC and HA with respect to the control, management, operation and administration of the BTS.

(*Post-meeting note*: The Administration's supplementary information was circulated to members vide LC Paper No. PWSC180/14-15(01) on 18 May 2015.)

- 28. <u>Mr WU Chi-wai</u> enquired whether HKRC would take the opportunity of the implementation of the proposed project to co-locate its administrative units/departments currently scattered across different locations in the BTS Headquarters to make a better use of land resources.
- 29. <u>USFH</u> replied that the purpose of the project was to expand the BTS Headquarters. While the BTS Headquarters was under the management of the Kowloon Central Cluster of HA, the operation of the administrative units/departments of HKRC was not under HA's purview. <u>Deputized Chief</u>

Executive and Medical Director, Hong Kong Red Cross Blood Transfusion Service, Hospital Authority advised that the new HKRC Headquarters building to be provided at Hoi Ting Road would accommodate the units/departments currently housed at the HKRC Headquarters at Admiralty.

30. Mr WU Chi-wai requested the Administration to provide information on whether there were plans to bring under one roof the administrative units/departments of HKRC currently scattered across different locations and whether these units/departments would be accommodated at the project site, the new HKRC Headquarters at Hoi Ting Road, or other sites.

(*Post-meeting note*: The Administration's supplementary information was circulated to members vide LC Paper No. PWSC180/14-15(01) on 18 May 2015.)

## Preclusion practices in blood donation

- 31. Mr CHAN Chi-chuen recalled that in July 2014, he had been refused by the BTS from donating blood because he was a male homosexual and had had homosexual sex in the past one year. He said that the United States Food and Drug Administration had announced last year that it would change its blood donor policy of lifetime deferral for men having sex with men ("MSM"). Australia, Japan, Britain and Italy had shortened the deferral for MSM to one year a long time ago. He commented that the current preclusion practices in blood donation adopted in Hong Kong were outdated and enquired whether HKRC would review the relevant guidelines.
- 32. <u>Deputized Chief Executive and Medical Director, Hong Kong Red Cross Blood Transfusion Service, Hospital Authority</u> replied that the BTS reviewed its blood donation guidelines on a periodic basis. The preclusion practices with respect to MSM had been a regular item for discussion at the relevant meetings of the BTS in the past two years. He advised that the BTS would further review the practices with reference to the findings regarding the local situation and the latest policy developments overseas, including the United States.
- 33. Mr CHAN Chi-chuen said that the BTS should actively pursue the issue and conduct the review in a timely manner. He considered that the review should take into account the fact that, with the enhancement of facilities at the Headquarters building following its expansion, it should be practicable for the BTS to put in place an effective and reliable screening process for blood donation to ensure blood safety.

- 34. Mr WONG Kwok-hing said that while he respected the view of Mr CHAN Chi-chuen on the existing preclusion practices in blood donation, members of the public, including blood recipients, were concerned about the changes, if any, to the practices in future. He requested the Administration to provide LegCo with written information on any such changes, including the justifications, and to conduct public consultation on the changes.
- 35. <u>USFH</u> replied that the BTS would follow its established procedures when considering and implementing any changes to the existing practices in blood donation. The Administration would brief LegCo Members on proposed changes, if any, in a timely manner.
- Mr Albert CHAN opined that if other "high-risk" sexual behaviours such as promiscuous behaviours were not included in the guidelines for blood donation, the practice of precluding people of specific sexual orientation such as male homosexuals from blood donation would involve discrimination. He said that he had been refused from donating blood in recent years since he was prescribed blood pressure lowering medication. He enquired whether the BTS would consider reviewing the relevant guidelines so that people with hypertension would not be precluded from blood donation if they had stopped the medication for a specified time period.
- 37. In reply, <u>Deputized Chief Executive and Medical Director</u>, <u>Hong Kong Red Cross Blood Transfusion Service</u>, <u>Hospital Authority</u> explained that the BTS had put in place the preclusion measures with respect to the prospective donors with hypertension to ensure the safety of both the donors themselves and the blood recipients. He advised that the BTS was considering a change to the relevant blood donation guidelines with respect to these donors having regard to the latest developments overseas. <u>Mr CHAN</u> said he hoped that the BTS would complete the review as soon as possible.
- 38. Mr SIN Chung-kai enquired whether the blood donation guidelines adopted by the BTS followed those adopted internationally. Deputized Chief Executive and Medical Director, Hong Kong Red Cross Blood Transfusion Service, Hospital Authority replied that while the BTS had followed the principle of "voluntary non-remunerated blood donation" adopted internationally, other parts of the blood donation guidelines including the preclusion measures were formulated by taking into account the best practices adopted overseas and the findings regarding communicable diseases in Hong Kong.
- 39. There being no further questions from members on the item, the Chairman put the item to vote.

40. The item was voted on and endorsed. <u>The Chairman</u> consulted members on whether the item would require separate discussion and voting at the relevant meeting of the Finance Committee ("FC"). <u>Mr Albert CHAN</u> suggested that members might consider requiring separate discussion and voting for the item at the relevant FC meeting after studying the supplementary information to be provided by the Administration. <u>Members</u> agreed to Mr CHAN's suggestion.

# PWSC(2015-16)2 3MQ Refurbishment of Hong Kong Buddhist Hospital

- 41. The Chairman said that the proposal, i.e. PWSC(2015-16)2, was to upgrade 3MQ to Category A at an estimated cost of \$563.3 million in MOD prices for refurbishing Hong Kong Buddhist Hospital ("HKBH"). The Panel on Health Services had been consulted on the proposal on 19 May 2014 and Panel members in general supported the submission of the proposal to the Subcommittee for consideration. The supplementary information requested by Panel members was provided in paragraphs 8 to 11 of PWSC(2015-16)2. A report on the gist of the Panel's discussion had been tabled at the meeting.
- 42. At the invitation of the Chairman, <u>USFH</u> briefed members on the proposal.

# Enhancement of the services of Hong Kong Buddhist Hospital

Provision of new services

43. <u>Miss CHAN Yuen-han</u> expressed support for the proposal. Pointing out that HKBH and the nearby Our Lady of Maryknoll Hospital currently did not provide any accident and emergency services ("A&E services") and evening outpatient services, <u>Miss CHAN</u> opined that the Administration should ride on the opportunity of undertaking the refurbishment project to enhance the services of HKBH, i.e. to provide the aforesaid services in future. <u>Mr WU Chi-wai</u> shared Miss CHAN's views. He recalled that the Wong Tai Sin District Council had requested the provision of A&E services in the district, yet the Administration had informed the District Council that both HKBH and Our Lady of Maryknoll Hospital could not provide A&E services owing to the lack of relevant facilities.

- 44. <u>USFH</u> advised that, for the effective and efficient operation of A&E services, a hospital was in general required to have a site area of not less than 20 000 m<sup>2</sup>. HA was aware of the healthcare needs of Wong Tai Sin residents. HA was reviewing the overall demand for and supply of medical services in the Kowloon region, taking into account of the positioning of hospitals in the region and their coordination with other hospitals. To meet the healthcare services demand in the long run, the Administration would proceed with the development of a major acute hospital in the Kai Tak Development Area ("KTD"). HA would also enhance the services of individual hospitals as far as possible.
- 45. <u>Miss CHAN Yuen-han</u> said that the new hospital in KTD, which would not come into operation in the next 10 years, could not meet the immediate needs of residents of Wong Tai Sin, in particular the elderly, for medical services. In the interim, the Administration should work out measures to address the great demand for medical services. <u>The Chairman</u> said that Miss CHAN might pursue the matter at the relevant Panel.
- 46. Responding to Mr WU Chi-wai's enquiry, <u>General Manager</u> (Administrative Services), <u>Hong Kong Buddhist Hospital</u>, <u>Hospital Authority</u> ("GM(AS)/HKBH") clarified that the existing 30 acute beds in HKBK were provided to accommodate the patients undergoing operations at the Joint Replacement Centre and were not intended to be used in association with A&E services.

# Positioning of Hong Kong Buddhist Hospital

47. Mr Tony TSE expressed support for the proposal. He enquired whether the positioning of HKBH would be changed after the refurbishment project so as to enhance its services. The Chairman asked whether the Administration's review on the operation of HA, including the cluster system, would lead to a change in the positioning of HKBH. USFH said that HKBH's positioning would remain unchanged after the refurbishment and the review.

## Improvement of existing services

48. Mr Albert CHAN expressed support for the refurbishment project. Pointing out that many hospitals were in shortage of medical equipment, he enquired whether HKBH, after it was refurbished, would procure more medical equipment, such as that for ear-nose-throat, gynaecology and medicine services to strengthen its specialist services.

Action

- 49. <u>Ir Dr LO Wai-kwok</u> declared that he was a member of the HA Board. He supported the proposal and called for its early implementation. Noting that around 79% of HKBH's patients were residents of the Wong Tai Sin and the Kowloon City districts, and the population aged 65 or above of the two districts might surge by around 40% from 2013 to 2023, <u>Dr LO</u> enquired how the services for the elderly in these two districts would be enhanced by the refurbishment of HKBH. He also considered it necessary to enhance the connectivity among the various facilities within HKBH.
- 50. <u>USFH</u> advised that HKBH, as a community hospital in the Kowloon Central Cluster, only played a supporting role in the provision of specialist services, e.g. ear-nose-throat, gynaecology and medicine, to complement the services of the Queen Elizabeth Hospital. However, upon the completion of the refurbishment project, a number of other services of HKBH would be Apart from providing 130 additional inpatient beds for enhanced. strengthening longer-term care and rehabilitation services for elderly patients suffering from chronic diseases, two floors of Block C would be converted for day rehabilitation, geriatric day services and pilot integrative medicine in These enhanced services could address the needs of the palliative care. elderly in the community. GM(AS)/HKBH added that one of the specialist The Joint Replacement Centre services of HKBH was joint replacement. commissioned in December 2012 had met the needs of many elderly patients.
- Mr Albert CHAN was dissatisfied with the Administration's response. He requested the Administration to provide information on: (a) how the facilities and equipment for the specialist services, including ear-nose-throat, gynaecology and medicine, provided by HKBH would be enhanced under the refurbishment project; (b) in respect of the Kowloon Central Cluster, (i) the respective waiting time for ear-nose-throat, gynaecology and medicine specialist out-patient services; and (ii) the respective waiting time for radio-diagnostic services relating to ear-nose-throat, gynaecology and medicine services; and (c) how the refurbishment project would contribute to shortening the waiting time for (b)(i) and (b)(ii).

(*Posting-meeting note:* The Administration's supplementary information was circulated to members vide LC Paper No. PWSC181/14-15(01) on 18 May 2015.)

# <u>Implementation of the refurbishment project</u>

52. <u>Miss CHAN Yuen-han</u> enquired about the impact of filibustering in meetings of the Subcommittee on the completion time of the refurbishment project. <u>USFH</u> advised that the project was originally scheduled for discussion at a PWSC meeting in the 2013-2014 legislative session. As the

discussion could not take place in the said session, and the validity period of the relevant tender had expired, a re-tendering exercise for the project had to be conducted and the whole project would be delayed by around 10 months.

- Mr CHAN Kam-lam said he supported the implementation of the refurbishment project. Noting that the scope of the project was extensive, he enquired what measures the Administration would take to minimize the adverse impact of the refurbishment works on HKBH's patients and staff. He called on the Administration to implement mitigation measures to control the dust and the noise generated from the works and asked whether some beds of HKBH would have to be deployed to other hospitals in the course of the works. Ms Emily LAU expressed concerns on the impact of the works on the service of HKBH and opined that, if necessary, more resources should be allocated to the implementation of mitigation.
- 54. <u>USFH</u> advised that the refurbishment works would be divided into 24 parts to be carried out in phases to minimize the impact of the works. The Administration and HA would implement suitable mitigation measures to minimize the impact as necessary. <u>GM(AS)/HKBH</u> added that the services of HKBH would remain normal during the refurbishment period.
- 55. <u>Mr Tony TSE</u> suggested that more greening features, which were beneficial to convalescents, should be provided for HKBH riding on the opportunity of the refurbishment project. <u>Chief Manager (Capital Planning), Hospital Authority</u> ("CM(CP)/HA") responded that the existing greening features in HKBH would not be affected. <u>USFH</u> added that HA would consider Mr TSE's suggestion.
- 56. Noting that the sixth floor of Blocks A and B currently used for accommodating staff facilities would be converted into inpatient wards to house 130 additional beds, Mr WU Chi-wai asked whether the staff facilities would be properly reprovisioned. He also asked whether the permitted plot ratio ("PR") of Block D had been fully utilized.
- 57. <u>USFH</u> responded that the staff facilities on the sixth floor of Blocks A and B would be reprovisioned in Block D. <u>CM(CP)/HA</u> added that as it was HA's policy not to provide quarters for staff, part of Block D was currently leased out. HA would terminate the concerned tenancies to facilitate the reprovisioning of the staff facilities currently provided in Blocks A and B. He also confirmed that the PR of Block D had been fully utilized.
- 58. Ms Cyd HO said that the Labour Party supported the proposal. Noting that the total floor area of HKBH would remain unchanged after the refurbishment, she was concerned whether the space between the beds in

HKBH would fail to comply with the relevant requirements after the addition of the 130 new inpatient beds.

- 59. <u>USFH</u> advised that the 130 additional inpatient beds would be located on the sixth floor of Blocks A and B in an area currently used for accommodating staff facilities. The existing beds of HKBH would not be affected. <u>CM(CP)/HA</u> added that all beds in HKBH complied with the relevant requirements of HA, i.e. the distance between two beds was at least three feet, before and after the refurbishment.
- 60. At Mr WU Chi-wai's request, the Administration agreed to provide information on the changes in the floor areas for various types of medical/surgical services provided by HKBH before and after the refurbishment project.

(*Posting-meeting note:* The Administration's supplementary information was circulated to members vide LC Paper No. PWSC181/14-15(01) on 18 May 2015.)

## Feasibility of expanding HKBH

- 61. Mr CHAN Kam-lam enquired whether the Administration had assessed the feasibility of rebuilding (instead of refurbishing) certain blocks of HKBH to optimize land use, given that the refurbishment project involved a substantial amount of time and money.
- 62. Noting that the overall population in Wong Tai Sin and Kowloon City was expected to increase by about 8% from 2013 to 2023, Ms Cyd HO queried why the Administration had decided to refurbish HKBH instead of expanding it. Ms HO further requested the Administration to provide information on whether the total area of land in Kowloon East for "hospital use" would be increased in future to cope with the growing demand for medical services; if yes, the details; if no, the reasons.
- 63. <u>CM(CP)/HA</u> responded that HA had conducted an assessment on the feasibility of redeveloping certain blocks of HKBH. As the site of HKBH was relatively small and subjected to a height restriction, it was concluded that the redevelopment of HKBH would not bring in a significant increase in the total floor area and the current proposal was most cost-effective.

(*Posting-meeting note:* The Administration's supplementary information was circulated to members vide LC Paper No. PWSC181/14-15(01) on 18 May 2015.)

Action

64. Mr WU Chi-wai enquired about the use of a piece of land adjacent to HKBH. CM(CP)/HA advised that HA had consulted the Government Property Agency ("GPA") on the use of the concerned site but had been informed that the site had been reserved for the use of a government department and therefore could not be deployed for other uses. At the request of the Chairman, the Administration would provide information about the communication between HA and GPA on the use of the site concerned.

(*Posting-meeting note:* The Administration's supplementary information was circulated to members vide LC Paper No. PWSC181/14-15(01) on 18 May 2015.)

65. At 10:24 am, the Chairman suggested that the meeting be extended for 15 minutes up to 10:45 am. Members raised no objection.

# Policy on reviewing the need for major refurbishment for hospitals

- 66. Noting that HKBH had not undergone any major refurbishment or renovation since its commissioning in 1970, Ms Emily LAU expressed dissatisfaction and asked whether the Administration had a policy on reviewing the need for major refurbishment or renovation for hospitals. She considered that more resources should be allocated to the refurbishment of hospitals that had been in use for a long time. Miss CHAN Yuen-han shared Ms LAU's view about the need for formulating a policy on assessing the need for major refurbishment for hospitals.
- 67. <u>USFH</u> responded that HA conducted regular reviews on the need for conducting major refurbishment works for hospitals. She said that FC had, in December 2013, approved a grant of \$13 billion to HA for minor works projects. <u>CM(CP)/HA</u> added that, to carry out major refurbishment works for a hospital, HA had to, apart from securing the necessary funding, coordinate the services of a number of hospitals so that the services of the hospital undergoing refurbishment could be decanted to other hospitals where necessary. <u>Ms Emily LAU</u> called on the Administration and HA to make better planning so that refurbishment works of hospitals could be conducted in a timely manner. <u>USFH</u> said that the Administration would review the issue.
- 68. There being no further questions from members on the item, the Chairman put the item to vote.
- 69. The item was voted on and endorsed.

- 70. <u>The Chairman</u> consulted members on whether the item would require separate voting at the relevant FC meeting. <u>Members</u> agreed that they would consider such need after studying the supplementary information to be provided by the Administration.
- 71. There being no other business, the meeting ended at 10:39 am.

Council Business Division 1
<u>Legislative Council Secretariat</u>
21 May 2015