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Panel on Health Services

**Background brief prepared by the Legislative Council Secretariat
for the meeting on 15 May 2017**

Development of the new acute hospital in Kai Tak Development Area

Purpose

This paper provides background information and summarizes the concerns of members of the Panel on Health Services ("the Panel") on the development of a new acute hospital in the Kai Tak Development Area ("KTDA").

Background

2. In the 2013 Policy Address, the Chief Executive announced that the Government would revisit the demand for medical facilities in Kowloon. If necessary, it would expedite the development of the reserved hospital site in KTDA. The development of a new acute hospital in KTDA was subsequently proposed, among others, for meeting the demand for medical services arising from the growing and aging population of the Kowloon City and Wong Tai Sin ("WTS") districts. It was planned that the new hospital would provide clinical services of major specialties, including accident and emergency ("A&E") services.

3. It was announced in the 2014 Policy Address that strategic studies on the planned acute hospital in KTDA were underway. According to the Administration, a review of healthcare facilities and services in the Kowloon region was conducted with a view to providing healthcare services that could better meet the long-term demand of residents in the region. It was planned that the new acute hospital in KTDA would house, among others, a neuroscience

centre.¹ In the 2015 Policy Address, the Chief Executive announced that the Government would pursue the development of an acute hospital in KTDA.

Deliberations of the Panel

4. The Panel discussed issues relating to the development of the new acute hospital in KTDA in different contexts at various meetings held between 2013 and 2016. The deliberations and concerns of members are summarized in the following paragraphs.

Healthcare service needs in the Kowloon region

5. Members noted that the Chief Executive had announced in the 2016 Policy Address that a dedicated provision of \$200 billion had been set aside for the implementation of a 10-year public hospital development plan. Noting that of the total 5 000 additional beds under the development plan, around 2 400 beds would be provided by the new acute hospital in KTDA which would belong to the Kowloon Central ("KC") Cluster, some members expressed concern about the service needs of the under-provided Kowloon East Cluster in terms of its catchment population size. There was another view that the Our Lady of Maryknoll Hospital ("OLMH") in the Kowloon West ("KW") Cluster should be redeveloped into a general hospital to better serve the healthcare needs of the residents in the WTS district.

6. The Administration advised that the Steering Committee on Review of the Hospital Authority had put forth, among others, the recommendation that the Hospital Authority ("HA") should adopt a refined population-based approach to enhance equality and transparency in allocating resources amongst hospital clusters in its report published in July 2015. To do so, resources allocated to each hospital cluster should be able to sustain the provision of core primary and secondary services, as well as any centralized and/or tertiary and quaternary

¹ It was announced in the 2007-2008 Policy Address that the Government would study, among others, the feasibility of setting up a multi-partite medical centre of excellence in neuroscience. The Government set up a Steering Committee under the Food and Health Bureau in 2008 to spearhead the project. After consideration, the Steering Committee agreed that the centre be built at KTDA, co-locating with another multi-partite medical centre of excellence in the specialty area of paediatrics (the latter, which was officially named as Hong Kong Children's Hospital in 2014, is targeted to commence services by phases from 2018). In 2013, the Administration advised that the development of the facilities for neuroscience services would be reviewed in the planning and development of other hospital sites in KTDA. In 2014, the Administration advised that a neuroscience centre would be set up under the new acute hospital at KTDA and in terms of operation, would make use of the support from various specialties in the new acute hospital.

services under its management. This apart, the Steering Committee had recommended that the administrative boundaries of the Kowloon Clusters should be refined in order to maximize coherence on vertical integration of services. HA would re-group Wong Tai Sin district and Mong Kok from the KW Cluster to the KC Cluster in December 2016. As such, the Kwong Wah Hospital, Tung Wah Group of Hospitals WTS Hospital and OLMH would be re-delineated from the KW Cluster to the KC Cluster to support the latter's new catchment districts covering Kowloon City, Yau Tsim Mong and WTS districts.

7. According to the Administration, the new acute hospital in KTDA would play a leading role providing a comprehensive range of services in the KC Cluster. The central administrative functions of the KC Cluster would be provided by the new acute hospital. In addition, it would support the adjacent Hong Kong Children's Hospital, which was being developed in KTDA. At present, HA was conducting a demand and capacity gap analysis for the three Kowloon Clusters, which was expected to be completed in the third quarter of 2016. The emergency and acute medical needs of the population in the Kowloon region, in particular that of the WTS district, would be met by the new acute hospital at KTDA. As regards OLMH, it would not be re-positioned as a general hospital because of its space constraints. It was planned to be redeveloped as a non-acute community hospital with focus on ambulatory care services, with a planned capacity of around 250 inpatient and day beds in total. The redeveloped OLMH would partner with the new acute hospital to provide appropriate medical services for the community, including the WTS district.

8. Members noted that while the redevelopment of Queen Elizabeth Hospital ("QEH"), which belonged to the KC Cluster, was not covered under the 10-year public hospital development plan, the plan of the Administration was that its redevelopment would be worked out in conjunction with the new acute hospital in KTDA given the proximity of their locations. Question was raised about whether QEH would continue its role as an acute hospital in the KC Cluster after the establishment of the new acute hospital in KTDA.

9. The Administration advised that redevelopment of QEH was considered a longer term strategy to meet the needs of the Kowloon region. The planning of the new acute hospital in KTDA in conjunction with QEH was to ensure the provision of effective and efficient healthcare services for the local community. During the future redevelopment of QEH, the clinical services of QEH would be decanted to the new acute hospital as in-situ redevelopment while maintaining the existing services with minimum disruption would be more time-consuming. The timetable of the QEH redevelopment project and the positioning of the redeveloped QEH would be worked out after the establishment of the new acute hospital in KTDA. QEH would continue to meet the A&E service needs of the

population of the KC Cluster before the full operation of the new acute hospital.

Timetable

10. Question was raised about the timetable for the development of the new acute hospital in KTDA. According to the Administration, the development of the new hospital would be carried out in two phases. Phase one would include the setting up of an oncology centre and the provision of inpatient and ambulatory services, with a capacity of some 800 beds. The Administration's plan was to complete the phase one development by 2021. The phase two development of the new acute hospital would be planned in parallel with the carrying out of the phase one construction works. When fully developed, the new hospital would provide clinical services of major specialties, including A&E services.

Recent developments

11. In terms of public hospitals, the KC Cluster currently comprises the Hong Kong Buddhist Hospital, Hong Kong Eye Hospital, Kowloon Hospital, Kwong Wah Hospital, OLMH, QEH and Tung Wah Group of Hospitals WTS Hospital. HA issued the Clinical Services Plan for the KC Cluster on 5 December 2016 to provide an overarching clinical strategy on future service developments and roles of the hospitals and facilities in the KC Cluster, and blueprint for the development of the new acute hospital in KTDA.²

12. According to the Strategic Plan 2017-2022 issued by HA in 2017,³ with the plan to decant the services of QEH to the new acute hospital in KTDA, HA will consider developing the vacated site at King's Park into a major ambulatory centre providing territory-wide one-stop services for diagnostics, assessment, treatment, interventions and other patient support services.

13. According to the Administration, subject to the funding approval by the Finance Committee of the Legislative Council, preparatory works for the construction of the new acute hospital in KTDA is planned to start in 2017. The whole project is expected to be completed in 2024. The new acute hospital will provide inpatient and ambulatory services of major specialties with about 2 400 beds, 37 operating theatres and 1.4 million annual capacity of

² The Clinical Services Plan for the KC Cluster can be accessed at the website of HA (<http://www.ha.org.hk/haho/ho/ap/CSP-KCC.pdf>).

³ HA's Strategic Plan 2017-2022 can be accessed at the website of HA (http://www.ha.org.hk/haho/ho/ap/HA-SP_1.pdf).

specialist outpatient clinic attendances. It will house an A&E department, an oncology centre and a neuroscience centre.

Relevant papers

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

Council Business Division 2
Legislative Council Secretariat
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**Relevant papers on the development of the new acute hospital
at Kai Tak Development Area**

Committee	Date of meeting	Paper
Panel on Health Services	15.7.2013 (Item II)	Agenda Minutes CB(2)2162/14-15(01)
	20.1.2014 (Item III)	Agenda Minutes
	19.5.2014 (Item III)	Agenda Minutes
	19.1.2015 (Item III)	Agenda Minutes
	18.1.2016 (Items IV and V)	Agenda Minutes
	20.6.2016 (Item II)	Agenda Minutes

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