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

**Minutes of the 6th meeting
held in Conference Room 1 of the Legislative Council Complex
on Wednesday, 12 December 2018, at 8:30 am**

Members present:

Ir Dr Hon LO Wai-kwok, SBS, MH, JP (Chairman)

Hon Charles Peter MOK, JP (Deputy Chairman)

Hon Abraham SHEK Lai-him, GBS, JP

Hon Tommy CHEUNG Yu-yan, GBS, JP

Hon Starry LEE Wai-king, SBS, JP

Hon CHAN Hak-kan, BBS, JP

Dr Hon Priscilla LEUNG Mei-fun, SBS, JP

Hon Claudia MO

Hon Michael TIEN Puk-sun, BBS, JP

Hon Frankie YICK Chi-ming, SBS, JP

Hon WU Chi-wai, MH

Hon MA Fung-kwok, SBS, JP

Hon CHAN Chi-chuen

Hon CHAN Han-pan, BBS, JP

Hon LEUNG Che-cheung, SBS, MH, JP

Dr Hon KWOK Ka-ki

Dr Hon Fernando CHEUNG Chiu-hung

Hon Alvin YEUNG

Hon Andrew WAN Siu-kin

Hon CHU Hoi-dick

Dr Hon Junius HO Kwan-yiu, JP
Hon HO Kai-ming
Hon Holden CHOW Ho-ding
Hon Wilson OR Chong-shing, MH
Hon HUI Chi-fung
Hon LUK Chung-hung, JP
Hon LAU Kwok-fan, MH
Dr Hon CHENG Chung-tai
Hon Jeremy TAM Man-ho
Hon Gary FAN Kwok-wai
Hon AU Nok-hin
Hon Vincent CHENG Wing-shun, MH
Hon Tony TSE Wai-chuen, BBS
Hon CHAN Hoi-yan

Member attending:

Hon IP Kin-yuen

Members absent:

Hon Alice MAK Mei-kuen, BBS, JP
Dr Hon Helena WONG Pik-wan
Hon Tanya CHAN
Hon CHEUNG Kwok-kwan, JP
Hon KWONG Chun-yu

Public officers attending:

Mr Raistlin LAU Chun, JP	Deputy Secretary for Financial Services and the Treasury (Treasury) ³
Mr LAM Sai-hung, JP	Permanent Secretary for Development (Works)
Ms Bernadette LINN, JP	Permanent Secretary for Development (Planning and Lands)

Mr Donald TONG Chi-keung, JP	Permanent Secretary for the Environment
Ms Margaret HSIA Mai-chi	Principal Assistant Secretary for Financial Services and the Treasury (Treasury) (Works)
Mr Michael HONG Wing-kit	Chief Civil Engineer (Public Works Programme) Transport and Housing Bureau
Mr Michael LI Kiu-yin	Project Director (2) Architectural Services Department
Ms Suzanna CHAN Chung-kwan	Senior Project Manager 229 Architectural Services Department
Ms Wendy AU Wan-sze	Principal Assistant Secretary for Food and Health (Health)5
Mr TAN Tick-ye	Assistant Director of Social Welfare (Elderly)
Ms Ann Mary TAM Kwai-ye	Chief Architect (2) Housing Department

Attendance by invitation:

Dr AU YEUNG Tung-wai	Service Director (Primary & Community Health Care) New Territories West Cluster Hospital Authority
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Clerk in attendance:

Mr Derek LO	Chief Council Secretary (1)5
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Staff in attendance:

Ms Anki NG	Council Secretary (1)5
Ms Christina SHIU	Legislative Assistant (1)2
Ms Christy YAU	Legislative Assistant (1)8
Ms Clara LO	Legislative Assistant (1)9

Action

The Chairman advised that there were three funding proposals on the agenda for the meeting. The first proposal was an item carried over from the previous meeting, while the second and third funding proposals were new submissions from the Administration. 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 proposals. He also drew members' attention to Rule 84 of RoP on voting in case of direct pecuniary interest.

Head 711 – Housing

PWSC(2018-19)33 75MC Community health centre-cum-residential care home for the elderly at Tuen Mun Area 29 West

2. The Chairman advised that the proposal sought to upgrade 75MC to Category A at an estimated cost of \$1,046.4 million in money-of-the-day ("MOD") prices. The Subcommittee had commenced deliberation on the proposal at the meeting on 28 November 2018 and would now continue with the deliberation.

Project cost and progress

Project cost

3. Noting the breakdown of the capital cost of the proposed works set out in paragraph 9 of [LC Paper No. PWSC\(2018-19\)33](#), Mr Tony TSE enquired about the proportion of cost apportionment between the Administration and the Hong Kong Housing Authority ("HKHA") for items 9(a) and (b) (i.e. site works and piling). He also enquired whether professional or consultancy fees were included in the cost concerned, and whether the on-cost payable to HKHA under item 9(h) was shown in MOD prices.

4. Chief Civil Engineer (Public Works Programme), Transport and Housing Bureau ("CCE(PWP)/THB"), replied that the three principles and proportion of cost apportionment between the Government and HKHA in respect of the proposed works were set out in paragraph 2(a) of the supplementary information paper ([LC Paper No. PWSC49/18-19\(01\)](#))

provided by the Administration. The on-cost under item 9(h) in LC Paper No. [PWSC\(2018-19\)33](#) covered the on-cost payable to HKHA (amounting to 12.5% of the construction cost), which included the costs of project design, administration and supervision. The on-cost was shown in MOD prices.

5. Dr Junius HO considered the on-cost payable to HKHA for the proposed project (amounting to 12.5% of the construction cost) too high, and suggested that the Administration should consider and compare, in parallel, the scope of services offered by external consultants and the cost required, so as to assess whether the on-cost paid was good value for money.

6. CCE(PWP)/THB replied that the on-cost at 12.5% of the construction cost was an established standard rate paid by the Government for building projects entrusted to HKHA, covering the costs of project design, administration and supervision. As the project under discussion was taken forward in an integrated design approach, entrusting the works to HKHA could ensure smooth interface in design coordination and works implementation, so that the proposed works could commence and complete timely.

7. Mr CHU Hoi-dick noted from paragraph 2 of the Administration's supplementary information paper ([LC Paper No. PWSC49/18-19\(01\)](#)) that the apportioned cost borne by the Administration for site works amounted to \$34.6 million. He enquired whether, in general, funding for infrastructure projects in support of public housing developments should be sought from the Finance Committee ("FC") separately, rather than being included in the capital cost of the proposed works.

8. CCE(PWP)/THB replied that while separate funding approval was required for infrastructure projects costing more than \$30 million, funding for ancillary infrastructure in general would be sought under the proposed works concerned.

9. Mr AU Nok-hin noted from paragraph 10 of [LC Paper No. PWSC\(2018-19\)33](#) that of the total estimated capital cost of \$1,046.4 million, about \$76.7 million was the apportioned construction cost for the residential care home for the elderly ("RCHE"), which would first be funded by the Capital Works Reserve Fund ("CWRF") under 75MC and then reimbursed from the Lotteries Fund ("LF") after project completion. He enquired whether there were any precedent cases in which the project cost was paid in this way.

10. Project Director (2), Architectural Services Department, replied that in the past, some RCHEs were constructed with funding first provided by

CWRF and then reimbursed from LF. Such examples included a project for the provision of a general out-patient clinic, an integrated community mental health support services centre and a long stay care home in Tin Shui Wai Area 109.

Maintenance and repair cost

11. Mr Gary FAN noted from paragraph 2 of the Administration's supplementary information paper ([LC Paper No. PWSC49/18-19\(01\)](#)) that the cost of shared facilities in the whole integrated development would be apportioned on a pro rata basis according to the construction floor area ("CFA"). As the CFA of the proposed project accounted for about 20% of the CFA of the whole development, the cost of the facilities shared with HKHA would be apportioned in accordance with this ratio. He enquired whether the repair and maintenance ("R&M") cost for the entire public housing, RCHE and community health centre ("CHC") development would also be apportioned on the basis of the floor area mentioned above, and whether the R&M cost of the RCHE was all borne by the outsourced operator.

12. Chief Architect (2), Housing Department ("CA(2)/HD"), replied that the apportionment of the R&M cost of the whole development and that of the capital cost of public works were different. In principle, R&M of general integrated developments comprising public works for the Government's own use and public housing were undertaken respectively by the works department of the Government (such as the Architectural Services Department) and HKHA. As the project also involved shared space and facilities, the Government would further discuss with the relevant departments the details of cost apportionment under the basic principle that user departments or organizations would undertake the R&M of the facilities concerned. Assistant Director of Social Welfare (Elderly) ("AD(E)/SWD") supplemented that SWD would outsource the operation of the RCHE service to a suitable organization which would undertake the management of the RCHE and bear the R&M cost.

Progress of ancillary works

13. Mr CHAN Chi-chuen said that the ancillary works of the proposed project mentioned in paragraph 3(d) of [LC Paper No. PWSC\(2018-19\)33](#) included such items as the associated drainage works, sewerage works, road works, slope upgrading works and modification works to the carpark area of a swimming pool. He enquired about the details and costs of those works, and whether the costs corresponded to that of the external works set out in paragraph 9(f) of the paper. He also enquired whether the time required to

complete the modification works to the swimming pool would be the same as that of the overall construction works, which would span five years, and whether the implementation of the ancillary works could be expedited.

14. CCE(PWP)/THB and CA(2)/HD replied that as shown in the site plan at Enclosure 1 to the paper, a roundabout which had to be built at the entrance of the proposed project would have minor implications on the area occupied by Tuen Mun North West Swimming Pool. The proposed project also included associated sewerage works, which would take less than five years to implement. The associated road works would have implications on the entrance area of the swimming pool, as well as some of its storage places, open space and on-site parking spaces. It would be necessary to carry out some relocation works. The Government hoped that the works could be completed as soon as possible. HD together with the Leisure and Cultural Services Department would work out a suitable timetable. While the relevant works were included under the overall construction contract, efforts would be made to minimize the impact on swimming pool users. The number of on-site parking spaces provided in the swimming pool area would not be affected by the relocation works.

Services and facilities

General outpatient and dental services

15. Mr CHU Hoi-dick enquired about the differences between a CHC and a District Health Centre ("DHC"); the reasons for developing the proposed CHC at the current location; and whether the Administration would provide other healthcare services, such as general and specialist outpatient services, for the local grassroots in the proposed community.

16. Principal Assistant Secretary for Food and Health (Health)5 ("PAS(H)5/FHB") replied that CHCs of the Hospital Authority ("HA") would be staffed by doctors to provide medical consultation, as well as multi-disciplinary teams comprising medical care professionals such as nurses, physiotherapists and nutritionists. It would also follow up on cases of chronic diseases and episodic illnesses of HA. On the other hand, DHCs of FHB would establish local networks of private healthcare personnel (including doctors and allied health professionals) within the communities comprising non-public sector organizations in each of the 18 districts, so as to strengthen the district-based primary healthcare services and relieve the burden on HA in providing healthcare services at the district level. Since currently there were only three general outpatient clinics in Tuen Mun, the Government decided to develop the CHC in Tuen Mun Area 29, with a view to bolstering the general outpatient services in the district and addressing the

service demand arising from the district's population growth in the next 10 years or so.

17. Noting that there were many private general outpatient clinics in the nearby Po Tin Estate and Leung King Estate, Dr CHENG Chung-tai enquired whether there would be any service overlaps with the CHC.

18. Service Director (Primary & Community Health Care), New Territories West Cluster, Hospital Authority ("SD(PCHC) NTWC/HA"), replied that the general outpatient services at the CHC focused mainly on district-level primary healthcare services, targeting low-income individuals, the elderly and patients with chronic diseases within the district. On the other hand, doctors of private clinics mostly served patients with episodic illnesses. HA had also been keeping track of the population growth, population ageing rate and demographic profile in Tuen Mun, which would be taken into consideration in planning additional district healthcare facilities to meet local demand.

19. Mr HUI Chi-fung expressed support for the proposed project. He enquired about the number of patients seeking treatment at the three general outpatient clinics in Tuen Mun who would be diverted to the new CHC after completion of the proposed CHC-cum-RCHE; how the pressure on the three clinics could be relieved; and the existing services and usage of RCHEs and the three general outpatient clinics in Tuen Mun, with specific information such as the number of people on the waiting list and waiting time.

20. SD(PCHC) NTWC/HA replied that the general outpatient services in Tuen Mun had reached its full capacity. The proposed CHC, after its completion, would not be able to achieve diversion of the general outpatient services in Tuen Mun. Given the population growth in Tuen Mun in the next 10 years or so, the proposed CHC could only cope with the demand for general outpatient services arising from the increased population. At the request of Mr HUI, the Administration would provide the requested supplementary information.

(Post-meeting note: The supplementary information provided by the Administration was circulated to members vide [LC Paper No. PWSC65/18-19\(01\)](#) on 31 December 2018.)

21. Ms CHAN Hoi-yan and Dr KWOK Ka-ki noted that the proposed CHC would set aside four floors for use as clinic facilities. They enquired whether emergency dental service would be provided at the CHC in addition to general outpatient services, or space be reserved for such purpose.

22. PAS(H)5/FHB and SD(PCHC) NTWC/HA replied that the existing dental care policy of the Government focused on the provision of dental services for the most needy members of the public, including the elderly and school children, while dental consultation service was currently provided by the Department of Health ("DoH"). The proposed CHC, which had four floors for use as clinic facilities, would provide various types of medical care services in addition to medical consultation by doctors. The provision of a separate dental clinic of DoH required further examination and might not be feasible given the space constraint. DoH currently operated one dental clinic in Tuen Mun. The elderly in the district could also use their health care vouchers to receive dental care services at private clinics. While the proposed CHC would focus on providing medical care services under HA, FHB could discuss with DoH the feasibility of enhancing emergency dental service in the district.

23. Ms CHAN Hoi-yan opined that one dental outpatient clinic was grossly inadequate for Tuen Mun and caused inconvenience to local residents (especially the elderly). As dental service was an integral part of primary healthcare, she urged the Administration to reserve space in the proposed project for emergency dental consultation facilities serving the grassroots.

24. Dr KWOK Ka-ki expressed support for the proposed project. However, he opined that the Government had the responsibility to arrange for the provision of both general outpatient and dental outpatient services by HA and DoH in the proposed CHC. He also requested the attendance of DoH officials responsible for dental services at the FC meeting for scrutinizing and approving the proposed project.

25. The Chairman advised that Members might continue to follow up on issues relating to dental services in Tuen Mun with the relevant Panel.

26. Ms Claudia MO was concerned that the proposed CHC might not be able to focus on addressing the healthcare needs of local residents. She enquired whether the scope of services offered by the proposed CHC would range from geriatrics to pediatrics. As an RCHE was included in the proposed project, the focus should be geriatric services.

27. SD(PCHC) NTWC/HA replied that as part of the primary care strategy, CHCs provided one-stop integrated healthcare services, including general outpatient services and other allied health services (e.g. physiotherapy, occupational therapy, consultation by nutritionists, patient resources centres and services and activities to support patient groups). By placing general medicine and integrated services under the same roof with resident geriatricians and family doctors, the medical needs and problems of geriatric

and pediatric healthcare could be taken care of. The Government planned its district-based healthcare services under the primary care concept, with specialist services providing the second-step solution to health problems. It was a strategy widely adopted in advanced countries in Europe and America as well as developing countries.

28. Dr KWOK Ka-ki noted the indicative list of furniture and equipment ("F&E") items required for the proposed project at Enclosure 12 to [LC Paper No. PWSC\(2018-19\)33](#). He enquired whether endoscopy service would also be provided in the proposed CHC in future; if so, about the service quota and the total number of consultation rooms. He also requested the Administration to explain the reasons for the high costs of those systems as set out on the indicative list of F&E items required at Enclosure 12, and questioned whether the Financial Services and the Treasury Bureau ("FSTB") had checked if the system costs were reasonable.

29. SD(PCHC) NTWC/HA replied that there would be 23 consultation rooms in the proposed CHC. As for the indicative list of F&E items required, such as the intruder detection system for monitoring the pharmacy and the shroff office, the costs should have been determined after going through all necessary procedures and taking into account the market prices. CCE(PWP)/THB said that there had been discussions with the relevant departments regarding the costs of the F&E items on the indicative list.

30. Deputy Secretary for Financial Services and the Treasury (Treasury)³ supplemented that the ancillary F&E items required for public works projects ("PWPs") were subject to stringent control. In general, these F&E items must be directly related to the PWP concerned and serve practical needs. For projects financed by capital subventions, such as schools, hospitals and clinics, the F&E items required often involved professional judgment and the approval was mainly undertaken by the relevant bureaux. At the request of Dr KWOK Ka-ki, the Administration would provide supplementary information on the need, scope of use and costs of the F&E items required for the proposed CHC as set out on the indicative list at Enclosure 12 to [LC Paper No. PWSC\(2018-19\)33](#), and the costs of similar equipment in other similar government projects for reference.

(Post-meeting note: The supplementary information provided by the Administration was circulated to members via [LC Paper No. PWSC65/18-19\(01\)](#) on 31 December 2018.)

Proposed residential care home for the elderly services

31. Dr Fernando CHEUNG expressed support for the proposed project and noted the Administration's response on the area of floor space per resident in the proposed RCHE. He said that in most RCHEs that were developed through the Government's funding allocation and commenced service in the past 10 years, the area of floor space per resident exceeded 16 square metres ("sq m"). According to the schedule of accommodation of elderly services laid down by SWD, the area of floor space per resident in a nursing home was about 15.6 sq m (excluding facilities such as bathrooms). The proposed RCHE, which served as a care and attention home for the elderly as well as a nursing home with a total of about 100 residential places, provided floor space of only about 11 sq m for each resident. As far as he knew, there were three types of residential care homes for the elderly, namely care-and-attention care homes, aged homes and self-care hostels. For a residential care home with more than half of its residents in need of care-and-attention care, the whole facility should meet the standard required of a care and attention home. He enquired—

- (a) about the reasons for the small area of floor space per resident in the proposed RCHE, which had more than 50% of its facilities designated as a nursing home and hence should meet the standard regarding the area of floor space for each resident in a nursing home;
- (b) whether the net usable floor area of the RCHE was the same as its internal floor area ("IFA");
- (c) why the area of floor space per resident in the proposed RCHE could not even meet the standard of a care and attention home for the elderly, which was about 13.5 sq m under the current schedule of accommodation; and
- (d) whether the area of floor space per resident in the proposed RCHE met the standard of a care and attention home for the elderly under the schedule of accommodation before September 2017.

32. AD(E)/SWD replied that—

- (a) the proposed RCHE had an IFA of about 1 689 sq m and a net operational floor area ("NOFA") of about 1 100 sq m, which were similar to RCHEs with about 100 residential care places that had been developed with government funding and commenced service in the past 10 years;

- (b) the area of floor space per resident in the proposed RCHE was provided based on the standard set out in SWD's schedule of accommodation for elderly services in early 2016. As the schedule of accommodation was updated in September 2017, the relevant area in the proposed RCHE might be slightly different from that prescribed in the new schedule. The standard NOFA, which was 1 100 sq m under the 2016 schedule, was revised to 1 350 sq m after September 2017. The proposed RCHE was planned in accordance with the schedule of accommodation applicable before September 2017 and met the prevailing requirement.
- (c) day care units were included in some RCHEs that were developed with government funding and commenced service in the past 10 years. The actual usable floor areas in those RCHEs varied depending on the shape of the premises, the width and length of built-in lift shafts and internal corridors, internal staircases, etc., leading to differences in the usable area shared by the residents in premises having the same area. As such, the area of floor space per resident in the proposed RCHE could be calculated only after completion of its construction and internal fitting-out works;
- (d) according to SWD's schedule of accommodation for elderly services, nursing homes provided a mix of subsidized and non-subsidized facilities in the ratio of 6:4. Among the 60% subsidized facilities in the proposed RCHE, 90% belonged to the nursing home. As the proposed RCHE was not entirely a nursing home, the items particulars in the schedule of accommodation for elderly services were not fully applicable; and
- (e) the Residential Care Homes (Elderly Persons) Ordinance (Cap. 459) provided for the area of floor space required for each resident in care and attention homes, aged homes and self-care hostels. For nursing homes, the design generally made reference to the standard of area of floor space per resident applicable to RCHEs. The proposed RCHE complied with the relevant legislation and requirements in terms of area of floor space per resident.

33. At the request of Dr Fernando CHEUNG, the Administration would provide supplementary information on the area of floor space per resident in the 20 RCHEs that were developed by SWD with government funding and commenced service in the past 10 years as set out in [LC Paper No. PWSC49/18-19\(02\)](#).

(Post-meeting note: The supplementary information provided by the Administration was circulated to members vide [LC Paper No. PWSC65/18-19\(01\)](#) on 31 December 2018.)

34. Dr Fernando CHEUNG enquired whether room facilities for end-of-life care would be provided in the proposed RCHE. AD(E)/SWD replied that SWD would require the provision of such facilities when awarding the relevant RCHE contract.

35. Mr AU Nok-hin noted that among the RCHEs that were developed with government funding and commenced service in the past 10 years as set out in [LC Paper No. PWSC49/18-19\(02\)](#), only about three had IFAs smaller than the proposed RCHE, which had an IFA of about 1 689 sq m according to the paper. He asked about the reasons.

36. AD(E)/SWD replied that the proposed RCHE was similar to the RCHEs that were developed with government funding and commenced service in the past 10 years in terms of floor area and the area of floor space per resident. The area of an RCHE depended on such factors as its intake capacity, number of floors, and whether day care units were included.

Car parking facilities

37. Mr Michael TIEN, Mr WU Chi-wai and Dr Junius HO expressed strong dissatisfaction with the small number of parking spaces provided for the proposed public housing development. Mr TIEN said that only 24 parking spaces were reserved for use by some 3 000 residents to be accommodated in the proposed public housing while 47 parking spaces were reserved for use by HA's healthcare professionals under the proposed project. He suggested that the Administration should finance the development of a multi-level mechanical car parking system under the proposed project to double the number of parking spaces and bear the R&M cost concerned. He also suggested that those parking spaces reserved for use by healthcare professionals should be opened to the public when not in use.

38. Mr Michael TIEN suggested that 80% of the area for parking should be used for development of multi-level (five-level) car parking system and the remaining 20% for provision of surface parking spaces. He also

requested the Administration to undertake that the proposal would be explored. Should the proposal be rejected, it should put forward a revised proposal or the reason for rejection. He also cautioned that in addition to reviewing the per-capita number of parking spaces in public housing in future, the Administration should also provide more parking spaces in public housing developments for use by the public in the vicinity.

39. SD(PCHC) NTWC/HA replied that the proposed CHC would provide one-stop primary healthcare services through its general outpatient services and multi-disciplinary team of professionals. Services would also be available in the evening and on public holidays. HA was open to the idea of making available the parking spaces reserved for healthcare professionals to the public when not in use as long as it was operated and managed smoothly, subject to the premise that some surface parking spaces should be reserved for use by emergency vehicles and heavy vehicles for delivery of supplies. CCE(PWP)/THB added that THB and HA would look into Mr Michael TIEN's proposal.

40. Mr WU Chi-wai expressed support for the proposed project. Noting the proposal for increasing parking space provision in the Chief Executive's 2018 Policy Address, he enquired about the criteria for determining the number of parking spaces in public housing developments; whether those criteria would evolve with time; whether the Administration would conduct a comprehensive review of the planning standards and policies regarding parking space provision; and whether a timetable and a road map were in place. Dr Junius HO concurred with Mr Michael TIEN's suggestion and opined that consideration should be given to providing more parking spaces under the proposed project.

41. CCE(PWP)/THB replied that the number of proposed parking spaces under the project was planned in accordance with the Hong Kong Planning Standards and Guidelines ("HKPSG"). The public housing portion of the proposed development would have 24 car parking spaces. THB would not conduct a comprehensive review of HKPSG in respect of individual projects.

42. In response to the enquiries of the Chairman, Permanent Secretary for Development (Planning and Lands) supplemented that HKPSG laid down the standards for facilities in different aspects. Respective bureaux would review those aspects under their policy purviews. THB was conducting a review on the provision standards of public parking spaces. HKPSG provided guidelines rather than fixed targets. As such, consideration could be given to increasing the number of parking spaces under individual projects in the light of the suggestion of the local community and the size of the site. However, the technical feasibility would be examined and determined by the

relevant departments. DEVB would relay to THB Members' views that the parking space policy review should be completed expeditiously and a report should be made to the relevant Panel(s).

43. The Chairman said that the Chief Executive had stated clearly the policy direction of increasing parking space in the 2018 Policy Address. He expected that THB would put forward more specific proposals on the policy at the relevant Panel(s).

44. Mr WU Chi-wai requested the Administration to give a serious reply, in its submission to FC, as to the number of additional parking spaces that would be provided under the proposed project. He said that given the ratio of one parking space to 35 public housing flats under HKPSG, the proposed public housing development which provided about 990 flats should have about 28 to 29 parking spaces, as opposed to the current 24. He enquired whether some flats were excluded when calculating the parking space ratio. He also enquired whether the proposed development was vested with HA under a vesting order; if so, whether a more relaxed approach could be adopted in dealing with the parking space provision under HKPSG.

45. CCE(PWP)/THB replied that under HKPSG, public housing units for one and two persons were excluded when calculating parking space provision. As far as the number of parking spaces was concerned, THB and the Transport Department ("TD") kept an open mind in the light of the conditions of individual project sites. Despite the small size of the site and the many constraints, the Government would endeavour to increase the number of parking spaces. There were also other individual projects under which the number of parking spaces provided had exceeded that laid down in HKPSG.

46. CA(2)/HD supplemented that the proposed development was vested with HA under a vesting order. However, the project design and relevant facilities must all comply with the requirements under the relevant legislation, including the Buildings Ordinance (Cap. 123). As for individual requests in relation to the design, HD could explore the feasibility with the relevant bureaux. HD understood that local communities would have their specific demands regarding public facilities. Subject to site constraints and the relevant legislation, the Government would satisfy the public's demands as far as practicable by giving serious consideration to community needs in project design and management.

47. Dr Junius HO enquired about the feasibility of developing underground parking spaces under the proposed project. CCE(PWP)/THB referred to the Government's response in paragraph 9 of its supplementary information paper (LC Paper No. CB(1)221/18-19(01)) which stated that

given the small site area, the presence of drainage reserves at the site, and the need to provide ramps for vehicle manoeuvring, the remaining space was extremely limited and hence, it was unsuitable to provide underground parking spaces there. Furthermore, the proposed project had been structurally integrated with the Tuen Mun Area 29 West public housing development. The construction of underground parking spaces would further lengthen the construction programme, which would inevitably defer the housing supply.

Shared and other ancillary facilities

48. Mr Jeremy TAM supported the proposed project and concurred with the Administration's approach of composite development in taking forward public housing development. He enquired whether there were/would be similar projects in the past and in future, and about the criteria used by the Administration in deciding the adoption of composite development for public housing projects.

49. CCE(PWP)/THB replied that although the proposed project was not the first integrated public housing development, it was the first of its kind to include a CHC. In applying the principle of "single site, multiple use", the Government had communicated with different stakeholders since the planning stage. The provision of community facilities in the public housing development would have positive impacts on the development of the local community and land resources could be optimized as well. The criteria for pursuing integrated development with public housing could not be generalized. Various government departments would hold discussions, consider the different needs of different districts and take into account the site coverage and constraints, with a view to optimizing land resources.

50. The Chairman declared that he was a member of HKHA. As a current practice, HKHA would communicate with relevant bureaux and departments in respect of all new public housing developments so as to explore the feasibility of incorporating public and social facilities in the developments.

51. Dr CHENG Chung-tai expressed the following concerns about the use and management of shared facilities—

- (a) he enquired whether the proposed CHC and RCHE would share the water and power supply facilities, etc., with the public housing, and about the number of lifts and escalators provided in the CHC and RCHE;

- (b) referring to the fifth floor plan at Enclosure 7 to [LC Paper No. PWSC\(2018-19\)33](#) which showed that a podium garden was located outside the scope of the CHC and RCHE, he enquired whether the podium garden was provided for the public housing or the RCHE, or it was a shared facility; and
- (c) he said that according to the floor plans at the enclosures to [LC Paper No. PWSC\(2018-19\)33](#), there was only one accessible toilet on each floor of the CHC and RCHE, which was actually inadequate for the some 50 000 Tuen Mun residents in future. He enquired whether the Administration would provide more toilets in the CHC and RCHE.

52. CA(2)/HD and AD(E)/SWD replied that—

- (a) the public housing, the CHC and the RCHE would have separate building services, but shared the water and power supplies, etc., connected to the site. For example, as the water inlet system would be shared among the three structures, all three structures would be affected in the event of cessation of water supply by the Water Supplies Department. Partial damage to the water inlet facility, however, would not affect the operation of other parts. The CHC had four lifts, as well as two sets of escalators leading up to the second floor;
- (b) the RCHE had an entrance leading directly to the podium garden. The podium garden was provided for use by residents of the public housing in principle, but the management office of the housing estate had the rights for the final decisions regarding its use on the basis of property management arrangements. Should the RCHE need to use the podium garden, the management office of the housing estate would make suitable arrangements after project completion in the light of the actual situation; and
- (c) the toilets shown on the floor plans only met the basic handover standard. The operator of the RCHE would certainly provide sufficient toilets and shower facilities when carrying out the internal fitting-out works of the RCHE. Accessible routes of access would also be provided for use by the elderly.

53. Mr LEUNG Che-cheung was concerned about hygiene issues and protection against communicable diseases in respect of the CHC. He

enquired whether the public housing, the CHC and the RCHE shared the same entrance/exit, and whether the use of the emergency vehicular access by the RCHE and the CHC would affect the access of residents of the public housing.

54. CA(2)/HD replied that as shown on the ground floor plan, people who entered the pedestrian access (covered but not enclosed) through its entrance located at the roundabout would first reach the ground floor lobby of the public housing, then the ground floor lobby of the RCHE, and finally the ground floor lobby of the CHC. All three structures had separate entrances/exits despite sharing the same covered access. SD(PCHC) NTWC/HA supplemented that the proposed CHC, which served the chronically ill or episodic patients from Tuen Mun, was not a designated clinic under HA to handle major outbreaks of infectious diseases. Basic facilities for protection against communicable diseases were also available at general outpatient clinics.

55. Mr AU Nok-hin enquired whether charging facilities for electric vehicles would be provided under the proposed project; whether parking spaces would be reserved at the RCHE for rehabilitation buses; and whether the provision of such facilities were included in the land lease conditions. He also enquired whether the Administration would provide additional transport support facilities correspondingly after completion of the proposed project; whether a traffic impact assessment ("TIA") had been conducted; whether the project was provided with dedicated refuse disposal facilities; and whether it would use the refuse collection point at the nearby Po Tin Estate.

56. CCE(PWP)/THB replied that THB had close liaison with TD and kept an open mind regarding the number of parking spaces to be provided under the proposed project. Transport and support facilities in Tuen Mun Area 29 were well developed, and the TIA conducted for the development revealed that the transport and support facilities in the area could complement the development. As the proposed project would have its own refuse disposal facilities, the refuse collection point at Po Tin Estate would not be used.

[At 10:25 am, the Chairman asked members if they agreed to extend the meeting for 15 minutes. Members present agreed. The Chairman directed that the meeting be extended for 15 minutes to 10:45 am.]

57. There being no further questions from members on the item, the Chairman put the item to vote.

58. The item was voted on and endorsed. Mr WU Chi-wai and Dr KWOK Ka-ki requested that the item, i.e. [PWSC\(2018-19\)33](#), be voted on separately at the relevant FC meeting.

59. The meeting ended at 10:36 am.

Council Business Division 1
Legislative Council Secretariat
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