

**For discussion  
on 18 March 2019**

**Legislative Council Panel on Health Services  
Four Hospital Projects under Ten-year Hospital Development Plan**

**Purpose**

This paper invites Members' comments on the following four proposed hospital projects under the First Ten-year Hospital Development Plan (hereafter referred to as the HDP) –

- (a) the redevelopment of Kwai Chung Hospital, phases 2 and 3 at an estimated cost of \$10,252.7 million in money-of-the-day (MOD) prices;
- (b) demolition and foundation works for the redevelopment of Prince of Wales Hospital, phase 2 (stage 1) at an estimated cost of \$2,781.3 million in MOD prices;
- (c) preparatory works for the expansion of North District Hospital at an estimated cost of \$573.8 million in MOD prices; and
- (d) preparatory works for the expansion of Lai King Building in Princess Margaret Hospital at an estimated cost of \$104.0 million in MOD prices.

The total commitment sought is \$13,711.8 million. Details of the four hospital projects are at Enclosures 1 to 4 respectively.

## **Background**

2. In the 2016 Policy Address, the Government announced that \$200 billion would be set aside for the Hospital Authority to implement the HDP. The HDP covers the redevelopment and expansion of 11 hospitals, the construction of a new acute hospital, three community health centres and one supporting services centre. Upon completion of all the projects under the HDP, it will provide more than 5 000 additional bed spaces, 94 additional operating theatres and increased capacity of specialist outpatient clinics and general outpatient clinics.

3. To date, the Government has upgraded the following projects (involving nine hospitals) under the HDP to Category A –

- (a) three projects in full –
  - (i) the extension of Operating Theatre Block for Tuen Mun Hospital;
  - (ii) the expansion of Haven of Hope Hospital; and
  - (iii) the redevelopment of Queen Mary Hospital, phase 1 – main works, and
- (b) eight projects in part –
  - (i) the redevelopment of Kwai Chung Hospital, phase 1;
  - (ii) the redevelopment of Kwong Wah Hospital, phase 1 – demolition and substructure works;
  - (iii) the redevelopment of Kwong Wah Hospital, phase 1 – superstructure and associated works;
  - (iv) New Acute Hospital at Kai Tak Development Area – preparatory works;

- (v) New Acute Hospital at Kai Tak Development Area – foundation, excavation and lateral support, and basement excavation works;
- (vi) the redevelopment of Prince of Wales Hospital, phase 2 (stage 1) – preparatory works;
- (vii) the redevelopment of Our Lady of Maryknoll Hospital – preparatory works; and
- (viii) the redevelopment of Grantham Hospital, phase 1 – preparatory works.

The total commitment approved for the items in paragraph 3(a) is \$18,525.9 million and that for paragraph 3(b) is \$19,431.6 million, totalling \$37,957.5 million or 19.0% of the \$200 billion. If the proposals in this submission are approved by the Finance Committee (FC), the cumulative commitment approved would amount to \$51,669.3 million or 25.8% of the package.

### **Way Forward**

4. Subject to Members' comments, we plan to seek funding support and approval for the four proposed hospital projects from the Public Works Subcommittee and FC respectively in the second quarter of 2019.

**Food and Health Bureau**

**Hospital Authority**

**March 2019**

## **Redevelopment of Kwai Chung Hospital, Phases 2 and 3**

### **Proposed Project Scope and Timeline**

We are carrying out a complete redevelopment of the Kwai Chung Hospital (KCH) as part of the modernisation of mental health services in Hong Kong. The redevelopment project comprises three phases. Phase 1 of the project<sup>1</sup> commenced in June 2016 and was substantially completed in July 2018. We propose to carry out phases 2 and 3 of the project as follows:

- (a) Phase 2 project scope includes –
  - (i) demolition of all existing buildings of KCH except Blocks L/M and J;
  - (ii) construction of a new Main Block and Child Block which will be interconnected by a two-storey half-basement structure at the bottom;
  - (iii) construction of a lift tower on Lai King Hill Road with a link bridge to connect the Main Block of the redeveloped KCH;
  - (iv) alteration and addition works to areas in PMH affected by the proposed redevelopment works of KCH; and
  
- (b) Phase 3 project scope includes –
  - (i) demolition of Block L/M; and
  - (ii) construction of therapeutic/rehabilitation garden.

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<sup>1</sup> Phase 1 of the redevelopment project comprises (i) construction of a decantation building at the existing car park area of Princess Margaret Hospital (PMH); and (ii) renovation works at Blocks L/M and J of KCH, as well as Block N and the Nursing School and Quarters of PMH and associated works for decanting purposes.

2. Upon completion of the redevelopment project, KCH will provide 80 additional beds and an additional annual capacity of 254 500 psychiatric specialist out-patient clinic attendances.

3. We plan to seek funding approval from the Legislative Council Finance Committee (FC) to upgrade phases 2 and 3 of the redevelopment of KCH to Category A in the current legislative session. The estimated cost is about \$10,252.7 million in money-of-the-day (MOD) prices<sup>2</sup>. The Architectural Services Department invited tenders for the proposed works of phase 2 in September 2018. Subject to FC's funding approval, we plan to award the contract to the successful tenderer with a view to commencing phase 2 of the redevelopment in the second to third quarter of 2019 for completion in the second quarter of 2023. Subject to the subsequent decanting arrangement, we aim to commence phase 3 of the redevelopment in the third quarter of 2023 for completion in 2024 tentatively. KCH will remain functional at all times during the works period and any disruption of services, if unavoidable, will be kept to a minimum.

4. A site plan showing the location of the proposed phases 2 and 3 of the redevelopment of KCH is at **Annex 1 to Enclosure 1**.

### **Background and Justifications**

5. Established in 1981, KCH is a psychiatric hospital located in the Kowloon West Cluster (KWC) of the Hospital Authority (HA), providing psychiatric care to those with mental health problems in Sham Shui Po, Kwai Tsing, Tsuen Wan, Lantau Island as well as Mong Kok and Wong Tai Sin areas or districts.

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<sup>2</sup> This figure represents the latest estimate of the capital cost pending tender return. We plan to update the cost estimate before submission to FC.

With 920 hospital beds as at 31 March 2018, the hospital accounts for about a quarter of HA's total psychiatric bed capacity. In 2017-18, there were around 4 500 psychiatric in-patient and day in-patient discharges and deaths, and around 233 400 psychiatric specialist out-patient clinical attendances at KCH and clinics under its management, which constitute about 26% and 27% respectively of that for all HA hospitals.

6. KCH was designed primarily for institutional custody of patients with mental illness. The hospital's main activity is general adult psychiatry, with both acute and chronic services. Over the years, the health service delivery model at KCH has transformed to align with the evolving global trend in treatment and management of mentally ill patients, with emphasis being placed on safe psychiatric care from early detection to treatment and rehabilitation into the community. Subsequently, psychiatric specialty services and community-based services have been developed as integral components of the current KCH's approach to psychiatric service delivery.

7. The need for mental health services, especially age-related psychiatric disorders such as dementia, from the population of KWC is ever increasing. According to the Planning Department, the population in Sham Shui Po, Kwai Tsing, Tsuen Wan and Lantau Island is anticipated to increase from 1 369 600 in 2017 to 1 455 100 in 2026 (representing a slight increase of about 6%), whereas the percentage of population aged 65 or above is projected to increase from about 16% in 2017 to about 23% in 2026.

8. HA formulated the Clinical Services Plan (CSP) for the redevelopment of KCH in 2012. The CSP outlines the model of service delivery, based on effective person-centred care, which is holistic and promotes recovery of the individuals. Redevelopment of KCH will facilitate its modernised model of psychiatric care by offering a campus with upgraded facilities and support. According to the CSP, KCH

will continue to be a psychiatric hospital in HA within its existing repertoire of services. The hospital will elicit the existing model of “whole-person” care, with the strengthening of community-based psychiatric care, reduction in avoidable hospital stay, provision of a less restrictive, more relaxed and homely environments for patients as well as a progressive shift toward co-ordinated and personalised treatment, recovery and community integration.

9. To achieve the above vision, HA proposes to adopt a hybrid model consisting of the redeveloped KCH and community mental health centres. In collaboration with allied health professionals and partner organisations, the new KCH campus will form a hub to provide, support and co-ordinate a full range of psychiatric services spanning from hospital to community care. Community mental health centres under the new KCH will provide extensive mental health services at district level.

10. In line with the transformation from an institutional to a therapeutic model, an ambulatory centre will be developed at the new KCH for clinical specialties and multi-disciplinary teams to provide a wide range of mental health services as well as replicating the daily life setting for different patient groups. The ambulatory centre will serve as a major link between the hospital and patients, their families and carers, and the community.

11. Furthermore, the redeveloped KCH will seek to provide a safe and quality therapeutic environment for young people with mental disorders by the provision of age and developmentally appropriate in-patient, out-patient, ambulatory and community zones organised within a dedicated purpose-built facility.

12. Through the integrated services, patients will receive co-ordinated treatment beneficial to rehabilitation and community integration. The model will

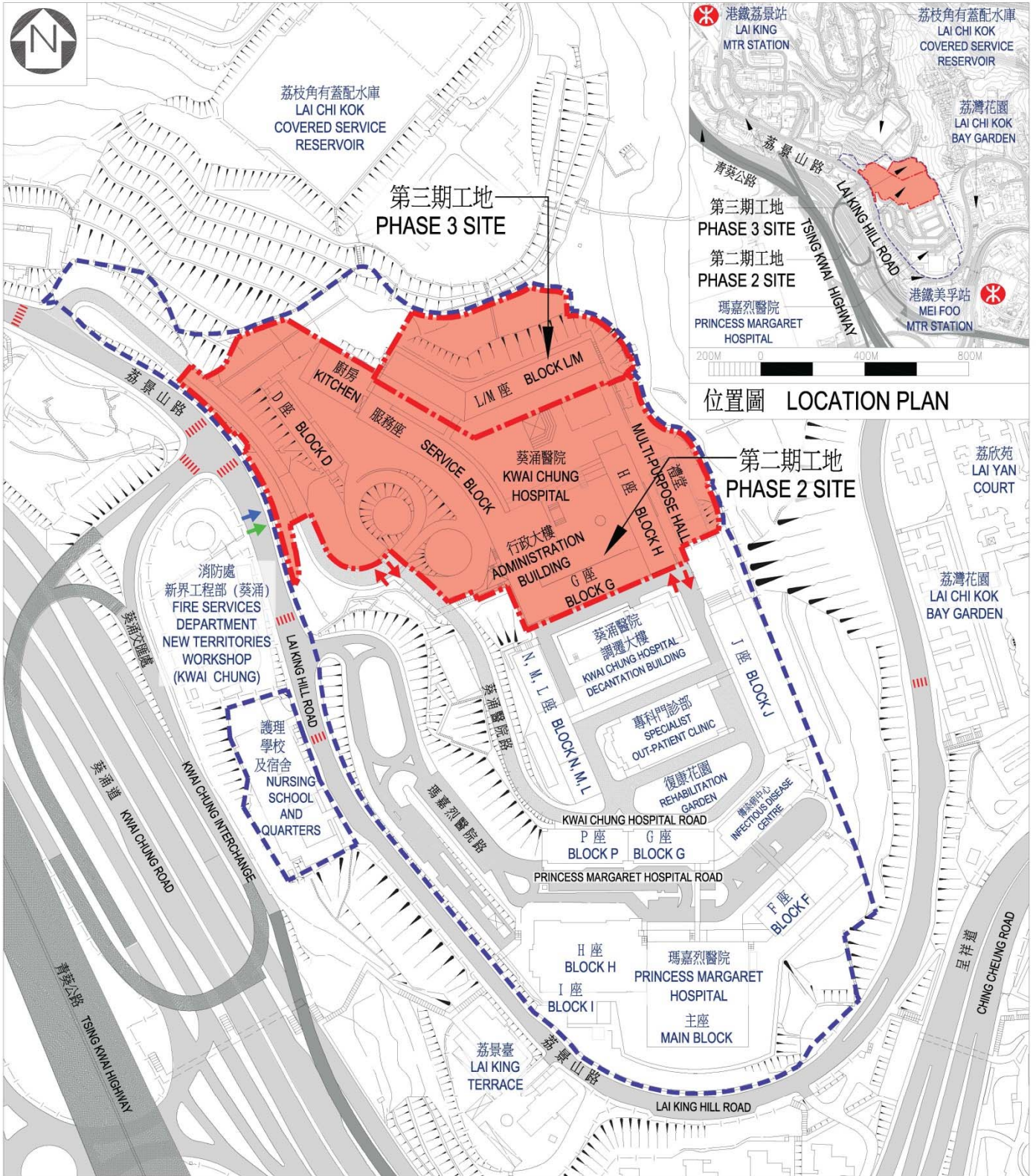
also allow early detection of mental illness and hospitalisation would be needed only for individuals with severe mental illness who require highly specialised acute in-patient environment and services for recovery and rehabilitation.

13. Phase 1 of the project was deliberated at this Panel on 21 July 2014 (Paper Ref: LC Paper No. CB(2)2048/13-14(03)) and the relevant funding application was approved by FC on 29 April 2016 at an estimated cost of \$750.8 million in MOD prices.

### **Public Consultation**

14. HA consulted the Community Affairs Committee (CAC) of Kwai Tsing District Council (KwTDC) on 12 February 2019 in respect of phases 2 and 3 of the project. Members of the CAC of KwTDC supported the proposed project.





圖例 LEGEND

- - - 工地範圍  
SITE BOUNDARY
- - - 醫院範圍  
HOSPITAL BOUNDARY

- ↑ 車輛出入口  
VEHICULAR INGRESS / EGRESS
- ↑ 無障礙出入口  
(經升降機及連接橋)  
BARRIER-FREE ENTRANCE / EXIT  
(VIA LIFT AND LINK BRIDGE)

- ↑ 行人出入口  
(經升降機及連接橋)  
PEDESTRIAN ENTRANCE / EXIT  
(VIA LIFT AND LINK BRIDGE)
- |||| 現有行人過路處  
EXISTING PEDESTRIAN CROSSING



工地平面圖  
SITE PLAN

81MM  
葵涌醫院重建工程第2及3期  
REDEVELOPMENT OF KWAI CHUNG HOSPITAL, PHASES 2 AND 3



ARCHITECTURAL  
SERVICES  
DEPARTMENT 建築署

**Redevelopment of Prince of Wales Hospital, Phase 2 (Stage 1)**

**Proposed Project Scope and Timeline**

As part of the redevelopment project of the Prince of Wales Hospital (PWH), we propose to carry out stage 1 of phase 2 which mainly comprises demolition and foundation works as follows –

- (a) foundation works, excavation and lateral support works, basement excavation works, pile cap construction works and base slab works for the new In-patient Extension Block;
- (b) foundation works, excavation and lateral support works and pile cap construction works for the link bridges for connecting the new In-patient Extension Block to the Main Clinical Block and Trauma Centre (MCBTC);
- (c) demolition works of Staff Quarters Blocks A and D, underground service tunnels and associated structures in PWH;
- (d) associated utilities diversion and minor alteration works in PWH;
- (e) related access and road works in PWH, including demolition of existing ramp and reprovisioning of a replacement ramp to serve the surrounding hospital blocks; and
- (f) consultancy services for contract administration for the demolition and foundation works, management of Resident Site Staff (RSS) and remuneration of RSS for the demolition and foundation works.

2. The estimated cost of the proposed works as described above is about \$2,781.3 million in money-of-the-day (MOD) prices<sup>1</sup>. The Hospital Authority (HA) invited tenders for the proposed works in February 2019. Subject to Legislative Council Finance Committee (FC)'s funding approval, we plan to award the contract to the successful tenderer with a view to commencing the proposed works in mid-2019. Subject to subsequent funding approval of FC for the main works, we plan to complete the entire stage 1 of phase 2 works in 2027. Upon completion, we aim to provide 450 additional beds and 16 additional operating theatres. PWH will remain functional at all times during the works period and any disruption of services, if unavoidable, will be kept to a minimum.

3. A site plan showing the location of the proposed demolition and foundation works is at **Annex 1 to Enclosure 2**.

### **Background and Justifications**

4. Established in 1984, PWH is a major acute hospital in the New Territories East Cluster (NTEC) of HA. PWH was designed and built in the 1970s. Currently, it provides a comprehensive range of secondary and tertiary services for the residents in NTEC as well as highly specialised quaternary services<sup>2</sup> for patients from other clusters of HA. It is also the teaching hospital for the Faculty of Medicine, the Chinese University of Hong Kong.

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<sup>1</sup> This figure represents the latest estimate of the capital cost pending tender return. We plan to update the cost estimate before submission to FC.

<sup>2</sup> Quaternary services refer to medical services that are highly complex in nature with respect to skills, technology and expertise. Service networks are set up to support patients from different HA clusters by designated centres. Typical examples of such services are transplant services and cardiothoracic surgery.

5. After several decades of heavy utilisation, the physical condition and facilities of PWH have become dilapidated and can no longer meet the service requirement of a modern tertiary acute hospital. The existing facilities at PWH become inadequate in terms of space, capacity and design to cope with the rising service demand, the present day service standard and future service requirement. Notwithstanding the completion of MCBTC in 2010 in phase 1<sup>3</sup>, which aimed at presenting the hospital with the opportunities to overcome the severe constraints on its ability to meet service and teaching demand at that time, many clinical services in PWH remain scattered in the old buildings under suboptimal conditions.

6. According to the latest population projection by the Planning Department, the population in Sha Tin District is projected to increase from 682 100 in 2017 to 708 600 in 2026 (representing a slight increase of about 4%), whereas the elderly population aged 65 years or above is projected to increase from 112 800 in 2017 to 167 600 in 2026, representing a significant increase of about 49%. The growing and ageing population in the district gives rise to increasing demand for both ambulatory and in-patient services.

### **Proposed Redevelopment of PWH**

7. HA formulated a Clinical Services Plan (CSP) for NTEC in 2015. The CSP maps out the cluster's clinical strategies and future service directions for meeting the long-term needs of the community and to facilitate and guide the redevelopment of PWH. Based on the CSP for NTEC, a Concept Plan for the redevelopment of PWH has been developed, which aims to position the hospital as a

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<sup>3</sup> Phase 1 of the redevelopment of PWH covers the construction, at the existing helipad and tennis court of PWH, of a new block of around 800 in-patient beds for the provision of all essential services for the acute, emergency and critical care of adult patients.

major acute hospital and a hub for the NTEC academic health sciences network. The phase 2 redevelopment will provide additional space to meet operational needs and service developments, and improve the quality of services and standard of care by integrating clinical services, research and training. In this redevelopment, PWH will adopt a patient-oriented design with well aligned and integrated services, as well as better accessibility for more efficient medical care to meet the long-term healthcare needs of the population of NTEC.

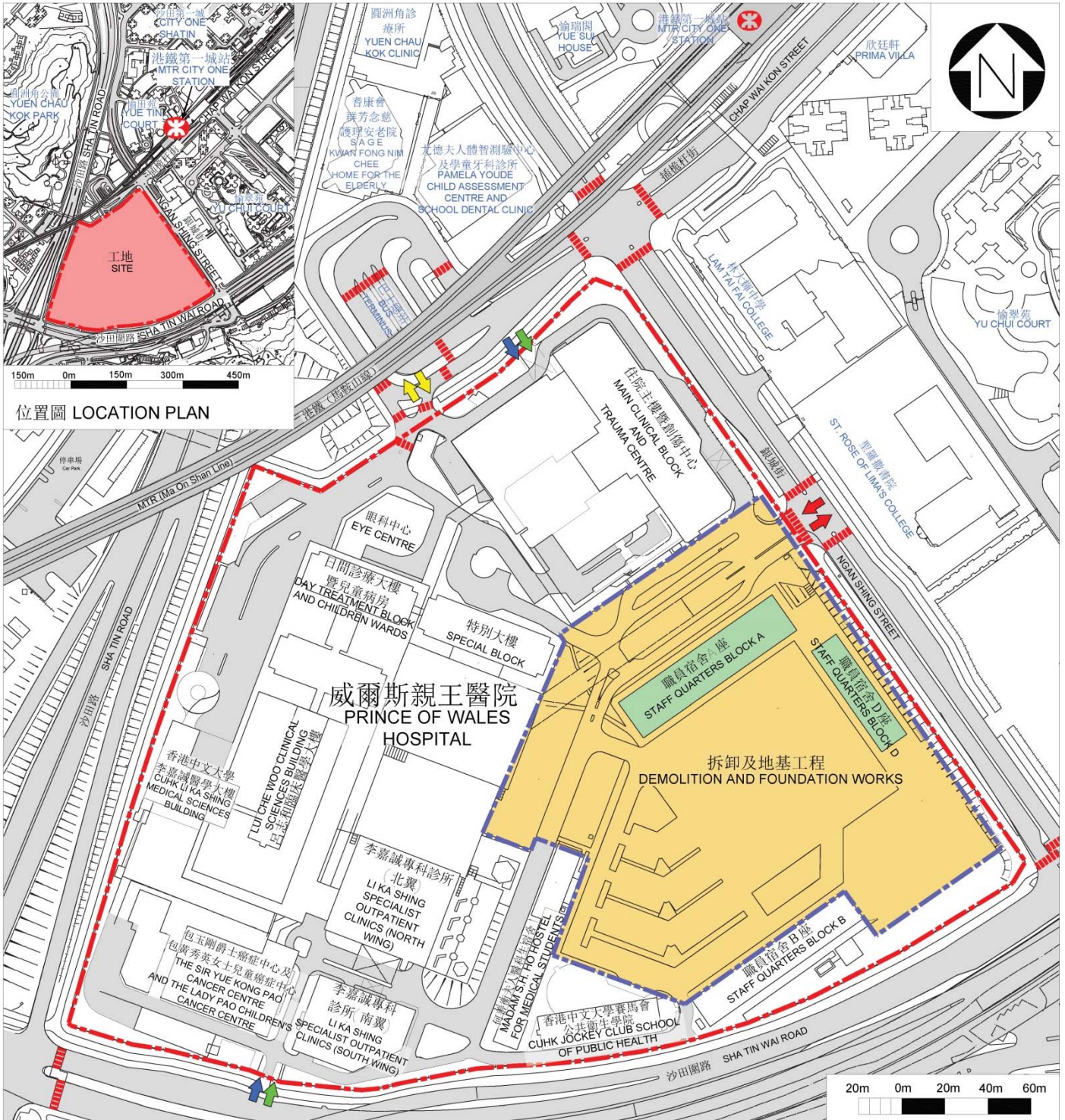
8. We propose to carry out the phase 2 redevelopment of PWH in two stages. Stage 1 involves renovation works at existing buildings and construction of an off-site decanting building at Shatin Hospital for decanting the facilities in the existing buildings of PWH to be demolished; demolition of Staff Quarters Blocks A, C, D and E and the Lecture Theatre Building for the construction of a new In-patient Extension Block; and refurbishment and renovation to the existing MCBTC. Stage 2 mainly involves demolition of the Hospital Old Buildings Group including the Day Treatment Block, Special Block, Clinical Sciences Building, Podium Block, Eye Centre and Li Ka Shing Specialist Clinics (North Wing), and the construction of a new Ambulatory Care Centre and a new Cancer Centre. Both stages 1 and 2 works involve the construction of link bridges and service tunnels to connect the new buildings with other hospital buildings for easy access by staff, patients and the public.

9. Stage 1 is being implemented in three packages, namely preparatory works, demolition and foundation works, and main works. The preparatory works of the project was deliberated at this Panel on 15 May 2017 (Paper Ref: LC Paper No. CB(2)1352/16-17(05)) and the relevant funding application was approved by FC on 19 July 2017 at an estimated cost of \$1,231.1 million in MOD prices covering initial surveys and site investigations; demolition works of Staff Quarters Blocks C and E, and Lecture Theatre Building and associated services diversion; construction








of an off-site decanting building at Shatin Hospital; on-site alteration and addition works/refurbishment to the existing buildings for decanting purpose; and consultancy services for outline sketch design, detailed design, preparation of tender documents, tender assessment for the entire stage 1 project, as well as contract administration for demolition and decanting works, management of RSS, and remuneration of RSS for demolition and decanting works. The preparatory works commenced in September 2017 and is expected to complete in mid-2021. Funding approval for the main works under stage 1 will be sought at a later stage to dovetail with the implementation programme. The scope of the main works will mainly comprise superstructure works of the new In-patient Extension Block.

### **Public Consultation**

10. HA consulted the Health and Environment Committee (HEC) of Sha Tin District Council (STDC) on 10 January 2019 in respect of the proposed stage 1 of phase 2 works. The HEC of STDC supported the proposed demolition and foundation works and urged HA to provide more comprehensive information on the proposed PWH redevelopment project when consulting HEC in the future.



圖例 LEGEND

- |                                                                                     |                                                                 |                                                                                     |                                                                  |                                                                                       |                                      |
|-------------------------------------------------------------------------------------|-----------------------------------------------------------------|-------------------------------------------------------------------------------------|------------------------------------------------------------------|---------------------------------------------------------------------------------------|--------------------------------------|
|  | 醫院及工地界線 <sup>1</sup><br>HOSPITAL AND SITE BOUNDARY <sup>1</sup> |  | 現有行人過路處<br>EXISTING PEDESTRIAN CROSSING                          |  | 車輛出入口<br>VEHICULAR INGRESS / EGRESS  |
|  | 拆卸及地基工程工地界線<br>SITE BOUNDARY OF DEMOLITION AND FOUNDATION WORKS |  | 行人出入口<br>PEDESTRIAN ENTRANCE / EXIT                              |  | 救護車出入口<br>AMBULANCE INGRESS / EGRESS |
|  | 擬拆卸的樓宇<br>BUILDINGS TO BE DEMOLISHED                            |  | 無障礙出入口 <sup>2</sup><br>BARRIER-FREE ENTRANCE / EXIT <sup>2</sup> |                                                                                       |                                      |

<sup>1</sup> 相關工程包括公用設施改道、通道及道路工程以及拆卸及地基工程  
Works involved include utilities diversion, access and road works, and demolition and foundation works

<sup>2</sup> 在工程設計階段將考慮加設無障礙出入口及通道，方便市民進出新醫院大樓  
Addition of new barrier-free entrance/exit and access will be considered at design stage to enhance the overall accessibility of the new hospital

工地平面圖  
SITE PLAN

3075MM  
威爾斯親王醫院重建計劃第二期(第一階段)  
REDEVELOPMENT OF PRINCE OF WALES HOSPITAL, PHASE 2 (STAGE 1)

## Expansion of North District Hospital

### Proposed Project Scope and Timeline

It is necessary to expand the North District Hospital (NDH) in order to meet the healthcare needs in North District in the long term. We plan to implement the expansion project in three packages, namely preparatory works, site formation and foundation works, and main works. The current funding application is for preparatory works as follows –

- (a) site investigations and minor studies;
- (b) demolition, re-provision and associated minor alteration works of existing buildings and facilities in NDH; and
- (c) consultancy services for outline sketch design, detailed design, tender documentation and assessment for the whole project as well as contract administration, management of Resident Site Staff (RSS) and remuneration of RSS for demolition and re-provisioning works.

2. The estimated cost of the proposed preparatory works is about \$573.8 million in money-of-the-day prices<sup>1</sup>. The Hospital Authority (HA) invited tenders for the proposed works in March 2019. Subject to the Legislative Council Finance Committee (FC)'s funding approval, we aim to award the contract to the successful tender with a view to commencing the preparatory works in the third quarter of 2019 for completion of the construction works of the whole project in 2027. NDH will remain functional at all times during the works period and any disruption of services, if unavoidable, will be kept to a minimum. Funding approval for the site formation,

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<sup>1</sup> This figure represents the latest estimate of the capital cost pending tender return. We plan to update the cost estimate before submission to FC.



foundation works, and main works of the NDH expansion project will be sought at a later stage to dovetail with the implementation programme.

3. A site plan showing the location of the proposed expansion of NDH is at **Annex 1 to Enclosure 3**.

### **Background and Justifications**

4. Established in 1998, NDH is an acute hospital in the New Territories East Cluster (NTEC) of HA, serving patients from Sha Tin, Tai Po and North districts with a planned capacity of 600 beds. It provides 24-hour accident and emergency (A&E) service and a wide range of secondary care services with emphasis on ambulatory care as well as community outreach services. According to the population estimates published by the Census and Statistics Department and the report of “Projections of Population Distribution 2018-2026” compiled by the Planning Department, the combined population in the three districts of Sha Tin, Tai Po and North District is expected to increase by about 12% from 1.31 million in 2017 to 1.47 million in 2026. In particular, the population in North District will increase by about 28% from 316 800 in 2017 to 405 800 in 2026. That aside, the elderly population in North District is also projected to increase by about 67% from 51 200 in 2017 to 85 400 in 2026.

5. Over the years, the existing facilities at NDH have become inadequate in terms of space, capacity and design to cope with the ever-increasing service demands, modern quality standards and developments in service delivery. Key challenges faced by NDH are as follows –

- (a) A&E Department, being the frontline of care for the injured and the ill, was designed over 20 years ago. The increasing demand for emergency

### Enclosure 3

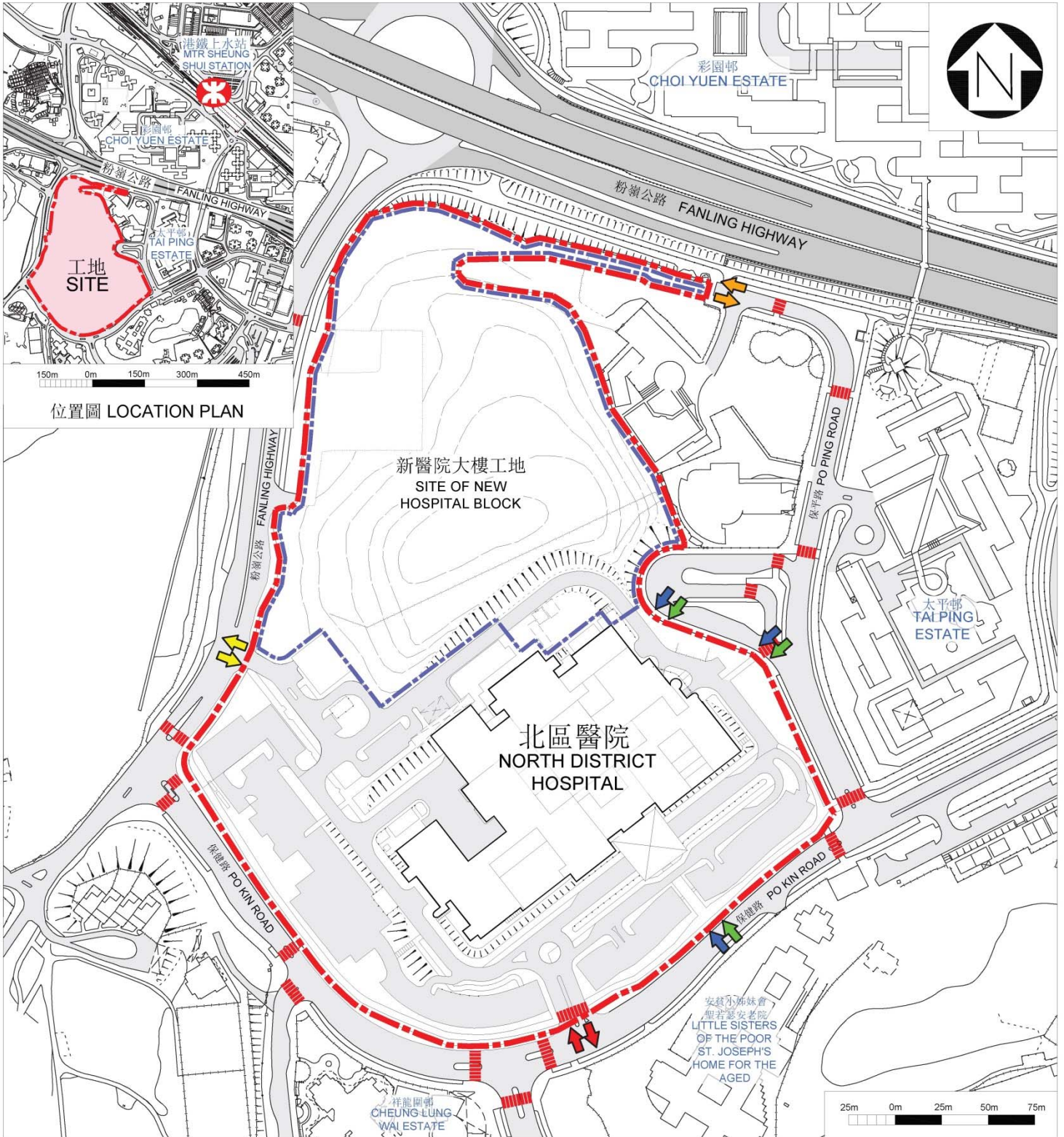
service has long outgrown the planned capacity of the A&E Department, with a perennial problem of overcrowding that poses risks to patient privacy, infection control and, most importantly, timeliness of care delivery;

- (b) being at the forefront of NTEC in handling port health issues particularly the management of cross-border infectious disease cases, there is a dire need to enhance the capability and capacity of NDH in the management of infectious and communicable diseases through increased provision of specially designed isolation rooms and infection control facilities;
- (c) diagnostic and treatment facilities at NDH, such as the endoscopy centre, cardiac interventional centre and renal dialysis centre, have all been operating at full capacity and will not be able to cope with the projected increase in demand. There is also an urgent need for upgrading the outdated facilities and equipment to the prevailing standards; and
- (d) with a view to reducing avoidable patient transfers among cluster hospitals, the Clinical Services Plan (CSP) for NTEC published in 2015 recommended that basic secondary care services should be available in each of the catchment districts in order to facilitate continuity of care and meet the healthcare needs of the local community. In this regard, it is noted that about 33% of the convalescent and rehabilitation patients discharged from Tai Po Hospital in 2017 came from and actually resided in North District, reflecting the existing limited provision of extended care facilities in NDH. In pursuance of the CSP recommendation, the development of convalescent and rehabilitation services in NDH is required.

6. Upon completion of the expansion project, NDH will provide around 1 500 additional beds.

**Public Consultation**

7. HA consulted the North District Council (NDC) on 14 February 2019 in respect of the expansion project. Members of the NDC supported the proposed project.



圖例 LEGEND

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|-------------------------------------------------------------------------------------|-----------------------------------------------------------------|-------------------------------------------------------------------------------------|------------------------------------------------|---------------------------------------------------------------------------------------|------------------------------------------------------------------|
|  | 醫院及工地界線 <sup>1</sup><br>HOSPITAL AND SITE BOUNDARY <sup>1</sup> |  | 車輛出入口<br>VEHICULAR INGRESS / EGRESS            |  | 無障礙出入口 <sup>2</sup><br>BARRIER-FREE ENTRANCE / EXIT <sup>2</sup> |
|  | 新醫院大樓工地界線<br>SITE BOUNDARY OF NEW HOSPITAL BLOCK                |  | 擬建車輛出入口<br>PROPOSED VEHICULAR INGRESS / EGRESS |  | 救護車出入口<br>AMBULANCE INGRESS / EGRESS                             |
|  | 現有行人過路處<br>EXISTING PEDESTRIAN CROSSING                         |  | 行人出入口<br>PEDESTRIAN ENTRANCE / EXIT            |                                                                                       |                                                                  |

<sup>1</sup> 相關工程包括工地勘測以及為隨後主要工程而進行之拆卸及翻新工程

Works involved include site investigations and the demolition and renovation of existing buildings and facilities for the main works

<sup>2</sup> 在工程設計階段將考慮加設無障礙出入口及通道，方便市民進出新醫院大樓

Addition of new barrier-free entrance/exit and access will be considered at design stage to enhance the overall accessibility of the new hospital

工地平面圖  
SITE PLAN

003MI  
北區醫院擴建計劃  
EXPANSION OF NORTH DISTRICT HOSPITAL

## Expansion of Lai King Building in Princess Margaret Hospital

### Proposed Project Scope and Timeline

It is necessary to redevelop the Princess Margaret Hospital (PMH) in phases to cope with the growing clinical service demand. The expansion of the Lai King Building (LKB) is planned to be part of the decanting arrangements for the redevelopment of PMH. It will be implemented in three phases, namely preparatory works, site clearance and foundation works, and main works. The current funding application is for preparatory works comprising the following –

- (a) site investigations, minor studies and associated service diversion and minor alteration works in LKB; and
- (b) consultancy services for outline sketch design and detailed design, as well as tender documentation and assessment for the whole project.

2. The estimated cost of the proposed preparatory works is about \$104.0 million in money-of-the-day prices<sup>1</sup>. The Hospital Authority (HA) invited tenders for the proposed works in March 2019. Subject to the Legislative Council Finance Committee (FC)'s funding approval, we aim to award the contract to the successful tenderer with a view to commencing the preparatory works in the third quarter of 2019 for completion of the construction works of the project by 2024. LKB will remain functional at all times throughout the project duration and any disruption of services, if unavoidable, will be kept to a minimum. Funding approval for the site clearance and foundation works, and main works of the project will be sought at a later stage to dovetail with the implementation programme.

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<sup>1</sup> This figure represents the latest estimate of the capital cost pending tender return. We plan to update the cost estimate before submission to FC.

3. A site plan showing the location of the proposed expansion of LKB in PMH is at **Annex 1 to Enclosure 4**.

### **Background and Justifications**

4. Established in 1975, PMH is a major acute hospital in the Kowloon West Cluster (KWC) of HA, serving patients from Kwai Tsing District and other districts in KWC. It provides a comprehensive range of acute, specialist and ambulatory services, including 24-hour accident and emergency service. Besides being a tertiary referral centre for infectious diseases, nephrology and urology, PMH is also the cluster referral centre for oncology, trauma, renal transplant and dialysis, lithotripsy, pulmonary medicine and tuberculosis, high risk obstetrics care as well as paediatric and neonatal intensive care. LKB, established in 2001, is an off-site facility of PMH providing convalescent, rehabilitation and infirmary in-patient services.

5. Over the years, the population in KWC has been growing considerably. According to the latest population projections by the Planning Department, the population in Sham Shui Po, Kwai Tsing, Tsuen Wan and Lantau Island areas or districts is projected to increase by about 6% from 1 369 600 in 2017 to 1 455 100 in 2026, whereas the elderly population aged 65 or above will surge from 222 900 in 2017 to 335 700 in 2026, representing a significant increase of about 51%. The aging population contributed to the increasing demand for comprehensive medical care, especially convalescent and infirmary support.

6. The utilisation of PMH's services has been consistently high. The bed occupancy rate in PMH was about 96% in 2017-18, as compared with the HA average of about 89%. The total number of in-patient and day in-patient discharges and deaths in PMH also escalated from 113 996 in 2009-10 to 156 556

in 2017-18, representing an increase of about 37% which outran the HA average of about 33%. The heavy service demand has aggravated the inadequacy in the existing capacity of PMH.

7. The design of PMH, which has a history of over 40 years, has become outdated and lagged behind the service requirements and workflow logistics of a modern tertiary acute hospital. The floor plates in clinical blocks are very small by current standards, rendering the advancement in medical technology difficult. In particular, the spacing between beds in wards is suboptimal from prevailing standard for quality patient care while nurse stations are provided at locations not convenient for close observation of patients. The physical conditions and structural capacity of the buildings are also exacerbated by heavy utilisation for decades, hindering the upgrading of building services systems to meet ever-increasing operational needs.

8. Apart from space limitations, the piecemeal developments in the past have resulted in the clinical blocks of PMH being scattered over the hospital site which impedes the provision of co-ordinated services and efficient workflow logistics conducive to good clinical outcomes. At present, the existing PMH compound is already packed with more than ten building blocks and there is no room for further expansion to meet the projected increase in service demands. The unsatisfactory geographical location and connectivity among the buildings have also undermined the development of PMH.

### **Proposed Expansion of LKB in PMH**

9. HA has developed a concept plan for the redevelopment of PMH, which aims to renew the hospital in phases to modernise its facilities to cope with the growing clinical service demand. To make available the redevelopment site, additional space and floor areas are required for decanting the existing services

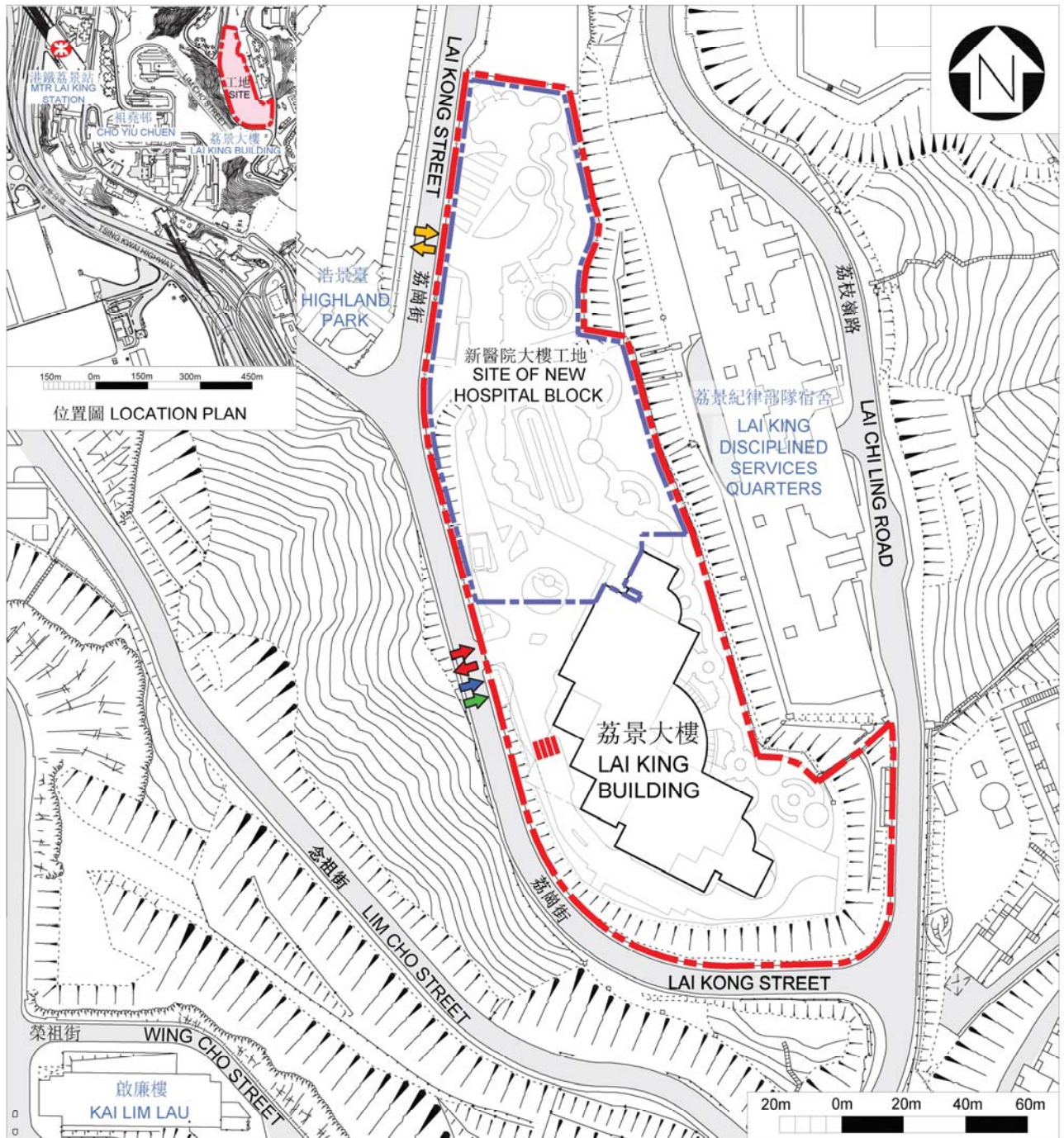
and supporting accommodation. In addition to facilitating the decanting of the existing PMH services, the proposed expansion of LKB also aims to enhance its ambulatory care services to reduce unnecessary hospitalisation and to ensure that its facilities comply with the infection control and service standards in modern health care settings.

10. The scope of the LKB expansion project comprises the following –
- (a) demolition of the existing structure at the rehabilitation garden and the transformer room and diversion of drainage reserve area;
  - (b) construction of a new extension block at the existing rehabilitation garden and car park of LKB;
  - (c) conversion/renovation of the space in the existing building including the existing gymnasium of Geriatric Day Hospital as well as the terraces/gardens on 1/F to 6/F of the existing building; and
  - (d) construction of link bridges connecting the new extension block and the existing building.
11. Upon completion of the expansion project, LKB will provide 400 additional beds.

### **Public Consultation**

12. HA consulted the Community Affairs Committee (CAC) of Kwai Tsing District Council (KwTDC) on 12 February 2019 on the LKB expansion project. While the Members of the CAC of KwTDC had comments on the scale of expansion, they supported the proposed project in principle.





圖例 LEGEND

- |                                                                                     |                                                                 |                                                                                     |                                                                  |                                                                                       |                                                          |
|-------------------------------------------------------------------------------------|-----------------------------------------------------------------|-------------------------------------------------------------------------------------|------------------------------------------------------------------|---------------------------------------------------------------------------------------|----------------------------------------------------------|
|  | 醫院及工地界線 <sup>1</sup><br>HOSPITAL AND SITE BOUNDARY <sup>1</sup> |  | 行人出入口<br>PEDESTRIAN ENTRANCE / EXIT                              |  | 車輛及救護車出入口<br>VEHICULAR AND AMBULANCE<br>INGRESS / EGRESS |
|  | 新醫院大樓工地界線<br>SITE BOUNDARY OF<br>NEW HOSPITAL BLOCK             |  | 無障礙出入口 <sup>2</sup><br>BARRIER-FREE ENTRANCE / EXIT <sup>2</sup> |  | 擬建車輛出入口<br>PROPOSED VEHICULAR<br>INGRESS / EGRESS        |
|  | 現有行人過路處<br>EXISTING PEDESTRIAN<br>CROSSING                      |                                                                                     |                                                                  |                                                                                       |                                                          |

<sup>1</sup> 相關工程包括工地勘測以及為隨後主要工程而進行之拆卸及翻新工程

Works involved include site investigations and the demolition and renovation of existing buildings and facilities for the main works

<sup>2</sup> 在工程設計階段將考慮加設無障礙出入口及通道，方便市民進出新醫院大樓

Addition of new barrier-free entrance/exit and access will be considered at design stage to enhance the overall accessibility of the new hospital

工地平面圖  
SITE PLAN

114MH  
瑪嘉烈醫院荔景大樓擴建計劃  
EXPANSION OF LAI KING BUILDING IN PRINCESS MARGARET HOSPITAL