



中華人民共和國香港特別行政區政府總部食物及衛生局  
Food and Health Bureau, Government Secretariat  
The Government of the Hong Kong Special Administrative Region  
The People's Republic of China

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9 June 2021

**(English translation)**

Clerk to Public Works Subcommittee  
Legislative Council Secretariat  
Legislative Council Complex  
1 Legislative Council Road  
Central, Hong Kong  
(Attn.: Miss Iris SHEK)

Dear Miss Shek,

**Legislative Council Public Works Subcommittee  
Follow-up to the meeting on 12 May 2021**

During the discussion of the three projects under the First Ten-year Hospital Development Plan (HDP) at the meeting of the Legislative Council Public Works Subcommittee held on 12 May 2021 (LC Paper No. PWSC(2021-22)9), Members requested the Administration to provide supplementary information on the projects of “New Acute Hospital (NAH) at Kai Tak Development Area (KTDA)”, “Expansion of North District Hospital (NDH)” and “Expansion of Lai King Building (LKB) in Princess Margaret Hospital (PMH)”. Having consulted the Hospital Authority (HA) and other relevant government departments, our reply is as follows:

***(1) New Acute Hospital at Kai Tak Development Area***

***(a) Transport and traffic arrangements***

2. To support the traffic network in the KTDA, the Government has been implementing a number of new strategic road projects in addition to the existing traffic planning, including the Central Kowloon Route (CKR) (expected to be completed in 2025) and the Trunk Road T2 and Cha Kwo Ling Tunnel (expected to be completed in 2026). In addition, the traffic network in the KTDA will be supported by a number of new local road projects, including the completed Shing Kai Road (Road D2), Shing Fung Road (Road D3A) and Shing Cheong Road (Road D4), and the partly completed Concorde Road (Road D1). Upon completion of the Shing Fung Road (Road D3B - Metro Park Section) in 2022, the traffic from the western side of Kai Tak will have direct access to the NAH via Road D3. Road signs giving route directions have been installed to facilitate access to the NAH by the ambulance or other vehicles as soon as possible. Moreover, the Government has been implementing a series of junction improvement works in Kowloon Bay to improve the traffic between the KTDA and the adjacent areas. The details of the above-mentioned strategic and local road projects and junction improvement works are at **Annex 1**.

3. Based on the above information, vehicles will be able to arrive at the NAH via the following routes after the completion of the works (see **Annex 2**)

- (a) From Lung Cheung Road, via Kwun Tong Road, Kai Cheung Road, Wang Chiu Road and Cheung Yip Street;
- (b) From King Fuk Street, via Concorde Road, Shing Kai Road, Wang Kwong Road, Wang Chiu Road and Cheung Yip Street;
- (c) From King Fuk Street, via Concorde Road, Shing Kai Road, Shing Fung Road, Kai Tak Bridge and Shing Cheong Road;
- (d) From Ma Tau Chung Road, via Sung Wong Toi Road, Shing Kai Road, Shing Fung Road, Kai Tak Bridge and Shing Cheong Road; and
- (e) The CKR is anticipated to be completed in 2025 for providing an alternative express route connecting the West Kowloon and the road network at the KTDA and Kowloon Bay in East Kowloon, alleviating the traffic volume along the existing major east-west corridors including Lung Cheung Road, Boundary Street, Prince Edward Road West, Argyle Street, Waterloo Road, Kwun Tong Road and Kwun Tong Bypass. There will be an exit on Shing Cheong Road from the eastbound from Yau Tsim Mong district of the CKR such that the linkage between Yau Tsim Mong district and the NAH will be more direct.

4. Regarding the public transport service, the Transport Department (TD) will continue to enhance the existing bus and minibus services network having regard to the future development of the KTDA, Kowloon Bay Business Area and Kwun Tong Business Area to meet the traffic needs of the public.

5. The HA has conducted a Traffic Impact Assessment (TIA) for the development of the NAH. Based on the findings of the TIA report, the traffic impact to the surrounding areas arising from the development is insignificant. The report also concluded that while traffic volume of the roads connecting to the NAH will increase during construction and future operation of the new hospital, the additional traffic volume generated is within the capacity of the local traffic network even under peak hours. The HA will continue to closely liaise with relevant government departments including the Kai Tak Office of the Civil Engineering and Development Department, TD and Highways Department (HyD), such that the traffic network and transportation system in the vicinity of the NAH can be further enhanced.

***(b) Ambulance arrangement (see Annex 3)***

6. The accident and emergency (A&E) department will be located on the Ground Floor on the east side of the Acute Block in Site A, which is completely segregated from the primary entrance for vehicles of the visitors located on Shing Cheong Road for effective diversion of the traffic of different kinds of vehicles. Ambulance coming from various districts can arrive direct at the A&E department via the Cheung Yip Street entrance. There will be a dedicated junction outside this entrance for ambulance to access the A&E department direct from southbound of Cheung Yip Street. Besides, there is also a vehicular access dedicated for emergency vehicles at Wang Chiu Road for the use of ambulance. In the event of traffic congestion, the ambulance crew will use audio and visual alarms to remind other road users to give way, or seek assistance from the Police through the Fire Services Communications Centre as needed.

***(c) Public light bus and Taxi Laybys***

7. Laybys for public transportation within the hospital sites including public light bus and taxi have been provided. The locations of the laybys are at Annex 4.

***(d) Private vehicles and carparking arrangement (see Annex 5)***

8. There are a total of 915 carparking spaces in the NAH, including 645 at two basement floors of Site A and 270 at one basement floor of Site B. For carpark at Site A, visitors can enter the main entrance plaza from Shing Cheong Road and drive towards the west, and access the carpark at Ground Level of

the Education Block; whereas for carpark at Site B, visitors can access the carpark at Ground Level of the Specialist Outpatient Clinic Block from the two entrances on the future Road L10 and drive towards the west, and leave the carpark at west side of the site via the future Road L18 roundabout. The transportation planning within the NAH adopts a unidirectional traffic flow concept by effectively utilising the available site area so as to alleviate traffic impact arising from vehicles going into/out of the carparks.

*(e) Accident and emergency services and average waiting time*

9. The HA adopts a triage system in its A&E departments, under which priorities for treatment are set according to the severity and nature of patients' medical conditions, so as to ensure that timely A&E services are provided to those with urgent needs. When patients attend the A&E departments, an experienced and specially trained triage nurse will first assess their conditions, with priority for treatment to be given to emergency cases. Patients are classified into five categories based on their clinical conditions, namely Triage Category I (critical), Triage Category II (emergency), Triage Category III (urgent), Triage Category IV (semi-urgent) and Triage Category V (non-urgent).

10. The HA has set performance pledges to ensure that patients who need urgent medical attention are treated within a reasonable time. Patients triaged as critical will be treated immediately by healthcare personnel without having to wait, while those with non-urgent conditions may have to wait longer. The table below sets out the average waiting time for A&E services in Kowloon Central Cluster (KCC) and Kowloon East Cluster (KEC) under the HA in 2020-21:

Hospital and Cluster	Average waiting time for A&E services (in minutes) [Provisional figures]				
	Triage I (Critical)	Triage II (Emergency)	Triage III (Urgent)	Triage IV (Semi-urgent)	Triage V (Non-urgent)
<b>Kwong Wah Hospital</b>	0	7	36	117	117
<b>Queen Elizabeth Hospital</b>	0	8	22	89	115
<b>KCC</b>	<b>0</b>	<b>8</b>	<b>27</b>	<b>101</b>	<b>116</b>
<b>Tseung Kwan O Hospital</b>	0	6	20	101	117
<b>United Christian Hospital</b>	0	11	30	197	241
<b>KEC</b>	<b>0</b>	<b>9</b>	<b>25</b>	<b>151</b>	<b>217</b>

Note: Owing to the emergence of the Coronavirus Disease 2019 epidemic in Hong Kong since early 2020, the HA has tightened infection control measures and adjusted its services in response to the epidemic. Hence, the service throughput across a wide range of services provided by the HA might have been reduced when compared with that of previous years.



11. To meet the long-term demand for A&E services in the Kowloon region, the HA is proceeding under the 9Ten-year HDP the construction works of three acute hospitals, including redevelopment of Kwong Wah Hospital, Phase 1, expansion of United Christian Hospital, and construction of NAH at KTDA. The related facilities will be enhanced as follows:

- Upon completion of redevelopment of Kwong Wah Hospital, Phase 1, the gross floor area (GFA) of the A&E department (including the emergency medicine (EM) ward) will be increased from currently about 1 800 square metres (m<sup>2</sup>) to about 5 000 m<sup>2</sup> with about 40 EM beds;
- Upon completion of expansion of United Christian Hospital, the GFA of the A&E department (including the EM ward) will be increased from currently about 2 000 m<sup>2</sup> to about 5 500 m<sup>2</sup> with about 70 EM beds; and
- The area of the A&E department of NAH at KTDA (including the EM ward) is about 13 450 m<sup>2</sup>, which is about thrice the current area of the A&E department of Queen Elizabeth Hospital (QEH) (about 4 250 m<sup>2</sup>).

***(f) Specialist out-patient clinics in New Acute Hospital at Kai Tak Development Area***

12. Regarding the specialist out-patient clinic (SOPC) services, the QEH (including SOPCs under QEH's purview) had an annual attendance of about 641 500<sup>1</sup> in 2020-21. Upon completion of the NAH at KTDA, there will be a total of 235 consultation rooms for SOPC services, which is an increase of about 70% as compared to the existing about 140 consultation rooms in the QEH. The NAH is expected to have an annual attendance capacity of 1 410 000. Regarding the waiting time for SOPCs, apart from provision of clinic facilities, it is also affected by such factors as demographic changes and healthcare manpower in the cluster. The HA has implemented a series of measures to manage SOPC waiting time, including introducing triage and prioritisation; enhancing public primary healthcare services; strengthening manpower and piloting public-private partnership. The HA will keep in view the service demand and allocate resources for service provision as appropriate to further improve the waiting time for SOPCs. In an effort to enhance the transparency of SOPC waiting time, the HA continues to upload the waiting time of individual SOPCs on its website to help patients make informed decisions on treatment options and plans. The HA will continue to monitor the waiting time and utilisation of SOPC services after the completion of the relevant SOPC facilities.

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<sup>1</sup> Owing to the emergence of the Coronavirus Disease 2019 epidemic in Hong Kong since early 2020, the HA has tightened infection control measures and adjusted its services in response to the epidemic. Hence, the service throughput across a wide range of services provided by the HA might have been reduced when compared with that of previous years.

**(2) Expansion of North District Hospital**

**(a) *Newly added medical services***

13. Upon completion of the NDH, the hospital facilities and services will be enhanced. The number of beds will be increased from currently 600 to 2 100, including the newly added in-patient services for paediatric and psychiatry as well as the expanded convalescent and rehabilitation services to enhance continuous care. In addition, the number of operating theatres will be increased to 20 and services at the A&E department, specialist outpatient department as well as ancillary facilities of ambulatory care services and radiology and diagnostic services will be expanded to cater for the local demand for healthcare services.

14. The main services to be provided after the completion of the expansion of NDH will include (i) specialist services such as A&E and emergency observation care, gastroenterology and hepatobiliary programme floor, endoscopy centre, cardiac catheterisation laboratory, intensive care services, psychiatric services, paediatric services and radiology and diagnostic services, etc.; (ii) ambulatory services including day surgery centre, day chemotherapy centre, diabetes and endocrine centre, breast centre, lithotripsy and urology centre, medical and surgical ambulatory care centre, renal haemodialysis centre and specialist out-patient clinics, etc.; and (iii) allied health and other services including medical social services department.

**(3) Healthcare manpower arrangements**

15. The HA attaches great importance to healthcare manpower planning during the enhancement of the hardware and service capacity of hospitals. The HA conducts projections on the service demand, which would translate into manpower requirements, taking into account various factors, including population growth and demographic change, service growth of individual specialties, and the long term goals and strategies of the HA's overall service development, etc. The First Ten-year HDP is also included in such projections.

16. Currently, the HA has around 6 500 doctors, 29 500 nurses and 8 800 allied health professionals. The HA anticipates that in 2026, about 8 500 doctors, 35 600 nurses and 10 300 allied health professionals will be required to support the service demand and development of the HA, including the First Ten-year HDP.

17. As at 31 March 2021, the QEH has about 4 049 healthcare professionals (including 647 doctors, 2 609 nurses and 793 allied health

professionals), the NDH has about 1 326 healthcare professionals (including 186 doctors, 892 nurses and 248 allied health professionals), and the PMH has about 3 050 healthcare professionals (including 442 doctors, 1 981 nurses and 627 allied health professionals). Upon completion of the NAH at KTDA, the healthcare professionals currently serving in the QEH will be deployed to work in the NAH along with the relocation of related services. The HA will, in the planning process of commissioning of services, work out the number of beds in different specialist departments and corresponding manpower required. The HA will also adopt a phased implementation approach in commissioning its services and will flexibly deploy its manpower and recruit additional manpower to meet the service demand.

#### **(4) Isolation wards and beds**

18. There are about 1 250 Tier-1 isolation beds and about 660 Tier-2 isolation beds currently available in the HA. The HA plans to provide about 320 additional Tier-1 isolation beds under the First Ten-year HDP. Taking into account the experience in combating COVID-19, the HA will review the design of hospital projects under the two Ten-year HDPs and incorporate the required provisions for two to three general wards in each selected hospital to be readily converted into Tier-2 isolation wards in epidemic situations. In the First Ten-year HDP, the HA plans to provide not less than 300 additional Tier-2 isolation beds from five ongoing hospital projects.

19. In addition, about 5 000 to 6 000 beds among the existing 30 000 beds in the HA can be upgraded to the new design standard (i.e. space available per bed increases from 5.5 m<sup>2</sup> to 9.0 m<sup>2</sup>, so that the number of beds accommodated in each cubicle could be increased from six to eight by about 30% when needed). The HA estimates that along with around 15 000 additional beds under the two Ten-year HDPs, about 6 000 additional buffer beds could be provided when needed, so as to cater for the service needs during the winter surge.

#### **(5) Number of beds and approved project estimates of projects under the First Ten-year Hospital Development Plan**

20. The existing number of beds and bed occupancy in 2020-21 for each hospital under the First Ten-year HDP as well as the approved project estimate (APE) (up to March 2021) and planned additional beds are summarised as follows:

Hospitals	Existing No. of Beds (as at March 2021)	Existing Bed Occupancy in 2020-21 <sup>1</sup> (Provisional)	First Ten-year HDP		
			Projects	APE (up to March 2021) (\$ million)	Planned Additional Beds <sup>2</sup>
Grantham Hospital	389	74%	Redevelopment of Grantham Hospital, phase 1	1,604.4	100
Queen Mary Hospital	1 639	67%	Redevelopment of Queen Mary Hospital, phase 1 - main works	13,556.0	-
Haven of Hope Hospital	521	94%	Expansion of Haven of Hope Hospital	2,073.0	160
United Christian Hospital	1 548	84%	Expansion of United Christian Hospital - main works	16,214.1	560
Kwong Wah Hospital	1 186	68%	Redevelopment of Kwong Wah Hospital - main works	10,704.1	520
Our Lady of Maryknoll Hospital	236	73%	Redevelopment of Our Lady of Maryknoll Hospital	197.0	201
QEH <sup>3</sup>	2 017	84%			
			NAH at KTDA <sup>3</sup>	6,126.1	2 400
Kwai Chung Hospital	920	76%	Redevelopment of Kwai Chung Hospital	8,202.9	80
PMH	1 760	83%	Expansion of LKB in PMH	104.0	572
NDH	683	83%	Expansion of NDH	481.3	1 500
Prince of Wales Hospital	1 807	79%	Redevelopment of Prince of Wales Hospital, phase 2 (stage 1)	2,956.1	450
Tuen Mun Hospital	2 036	89%	Extension of Operating Theatre Block for Tuen Mun Hospital	2,896.9	-
-	-	-	Hospital Authority Supporting Services Centre	3,788.0	-
-	-	-	Community health centre cum social welfare facilities at Pak Wo Road, North District	1,236.7 (HA's portion)	-
-	-	-	Community Health Centre in Shek Kip Mei	-	-
-	-	-	Community Health Centre at Anderson Road (tentative)	-	-
<b>Total</b>	<b>14 742</b>	<b>-</b>	<b>-</b>	<b>70,140.6</b>	<b>6 543</b>

- <sup>1</sup> Owing to the emergence of the Coronavirus Disease 2019 epidemic in Hong Kong since early 2020, the HA has tightened infection control measures and adjusted its services in response to the epidemic. Hence, the service throughput across a wide range of services provided by the HA might have been reduced when compared with that of previous years.
- <sup>2</sup> Actual number of additional beds of individual projects may be varied subject to detailed planning and design.
- <sup>3</sup> Upon completion of the NAH, most of the services of QEH will be relocated to the NAH and the planning of the development at the vacated King's Park site will commence as appropriate, and in alignment with the time table of the Second Ten-year HDP.

Yours sincerely,

*[Chinese version signed]*

( Ms Phyllis WONG )  
for Secretary for Food and Health

Encl. (Annexes 1 to 5)

c.c. Secretary for Financial Services and the Treasury  
(Attn.: Mr CHIU Kwong-kin, Assistant Secretary for Financial  
Services and the Treasury (Treasury) (Works)2)  
(Fax: 2147 5240)

Chief Executive, Hospital Authority  
(Attn.: Ms Dorothy LAM, Manager (Boards & Support))  
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Director of Architectural Services  
(Attn.: Mr Allen LEUNG, Project Director/4)  
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# 九龍灣及啟德的路口改善工程

## Junction Improvement Works in Kowloon Bay and Kai Tak Area



新增雙程雙線道路 - 協調道 (D1路)  
New 2-Way, 2-Lane Road – Concorde Road (Road D1)



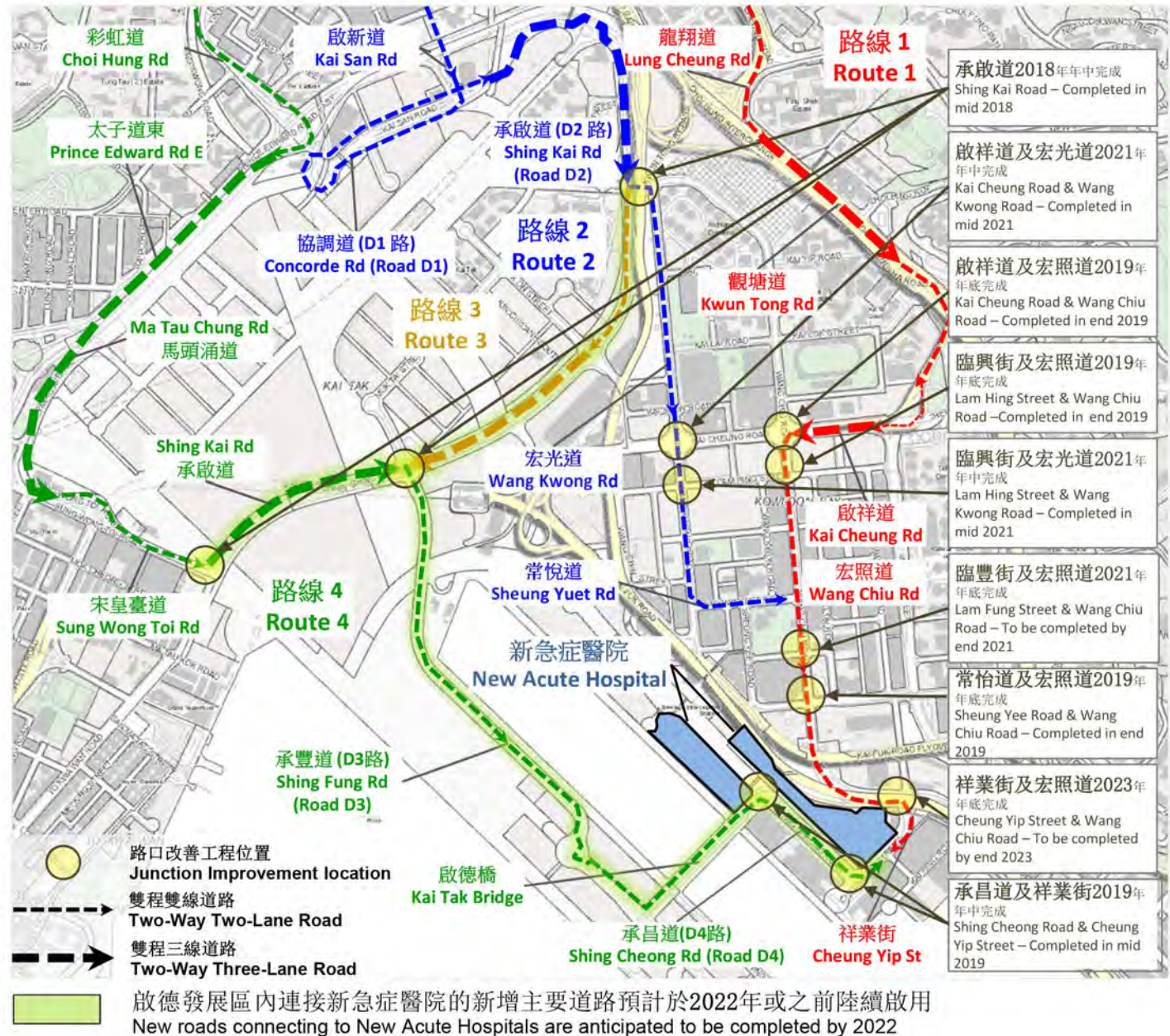
新增雙程三線道路 - 承啟道 (D2路)  
New 2-Way, 3-Lane Road – Shing Kai Road (Road D2)



新增雙程雙線道路 - 承豐道 (D3路)、啟德橋和承昌道 (D4路)  
New 2-Way, 2-Lane Road – Shing Fung Road (Road D3), Kai Tak Bridge and Shing Cheung Road (Road D4)

政府在九龍灣及啟德進行一系列路口改善工程，預計於2023年或之前陸續完成。改善工程包括擴闊行車道和增加左轉及右轉車道，以減少車輛等候時間，紓緩附近各區來往啟德發展區的交通。

A series of junction improvement works in Kowloon Bay and Kai Tak area implemented by the Government are anticipated to be completed by 2023. Improvement works include widening of carriageway and adding left-turn and right-turn lanes to reduce motorists' waiting time and relieve the congested traffic network to the Kai Tak Development Area from surrounding areas.









# 新急症醫院的交通規劃

## Planning of Traffic Arrangements for the New Acute Hospital

### 前往路線：

#### 路線 1：

龍翔道 → 觀塘道 → 啟祥道 → 宏照道 → 祥業街

- 彩雲邨、牛池灣 (H20-25)

#### 路線 2：

景福街 → 協調道 → 承啟道 → 宏光道 → 宏照道 → 祥業街

- 慈雲山、鑽石山、新蒲崗 (H04-H07, H16-H19)

#### 路線 3：

景福街 → 承啟道 → 承豐道 → 啟德橋 → 承昌道

#### 路線 4：

馬頭涌道 → 宋皇臺道 → 承啟道 → 承豐道 → 啟德橋 → 承昌道

- 竹園邨、黃大仙中心、橫頭磡、樂富 (H01-03, H08-H15)

#### 路線 5：

中九龍幹線 → T2主幹路及茶果嶺隧道

### Routes:

#### Route 1:

Lung Cheung Road → Kwun Tong Road → Kai Cheung Road → Wang Chiu Road → Cheung Yip Street

- Choi Wan Estate, Ngau Chi Wan (H20-H25)

#### Route 2:

King Fuk Street → Concorde Road → Shing Kai Road → Wang Kwong Road → Wang Chiu Road → Cheung Yip Street

- Tze Wan Shan, Diamond Hill, San Po Kong (H04-H07, H16-H19)

#### Route 3

King Fuk Street → Shing Kai Road → Shing Fung Road → Kai Tak Bridge → Shing Cheong Road

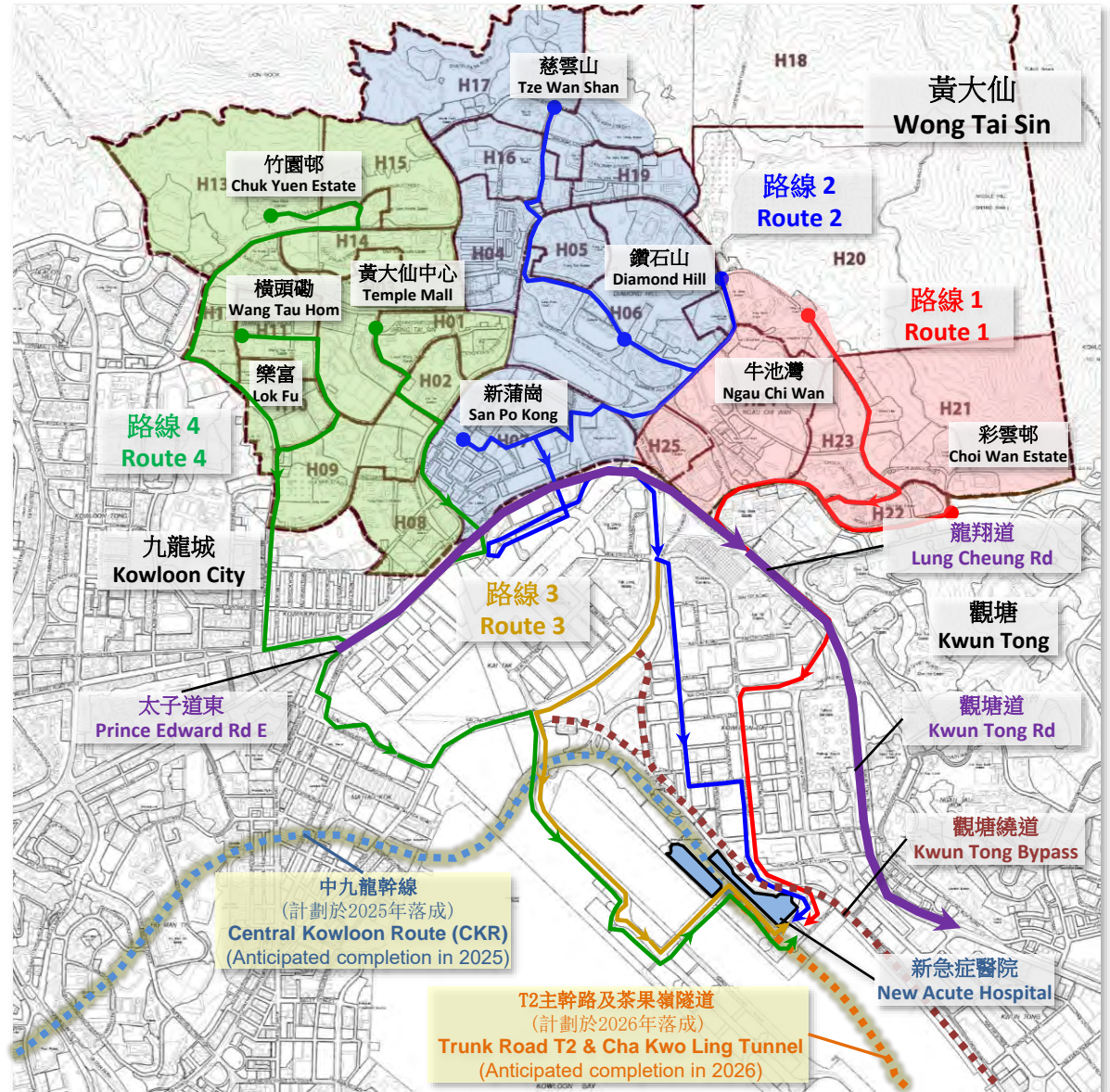
#### Route 4

Ma Tau Chung Road → Sung Wong Toi Road → Shing Kai Road → Shing Fung Road → Kai Tak Bridge → Shing Cheong Road

- Chuk Yuen Estate, Temple Mall, Wang Tau Hom, Lok Fu (H01-03, H08-H15)

#### Route 5

Central Kowloon Route (CKR) → Trunk Road T2 & Cha Kwo Ling Tunnel

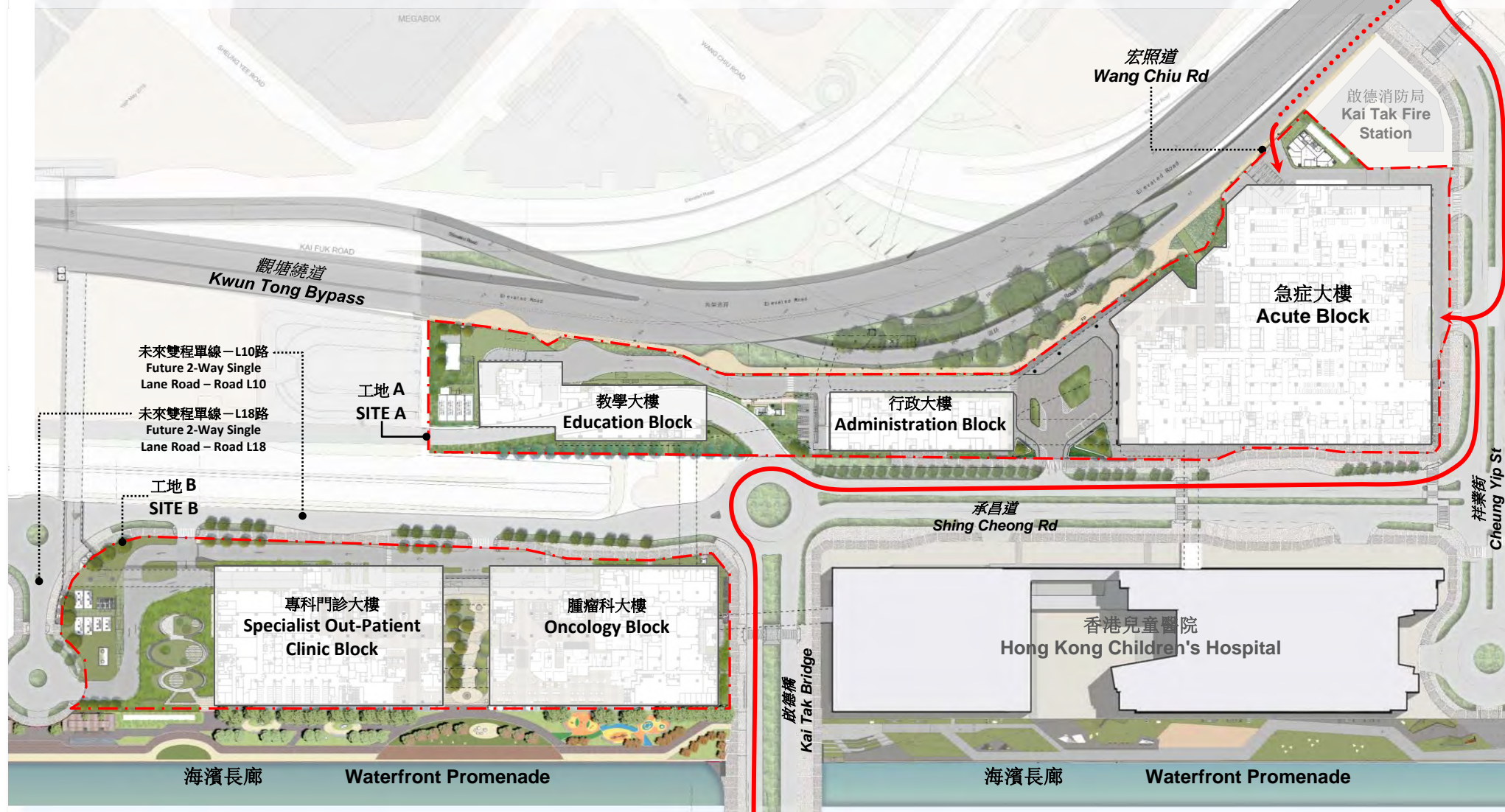


啟德發展區內連接新急症醫院的新增主要道路預計於2026年或之前陸續啟用  
New Roads connecting to New Acute Hospital in Kai Tak Development Area anticipated to be opened by 2026



# 新急症醫院的救護車交通安排

## Ambulance Arrangement at the New Acute Hospital



### 救護車安排

新急症醫院的主要救護車入口將設於祥業街。

此外，得到運輸署批准，在宏照道亦設有一個緊急車輛入口，供救護車使用。

### Ambulance Arrangement

Primary entrance of Accident & Emergency Department (AED) will be located at Cheung Yip Street. There is also a vehicular access dedicated for emergency vehicles at Wang Chiu Road for the use of ambulance.

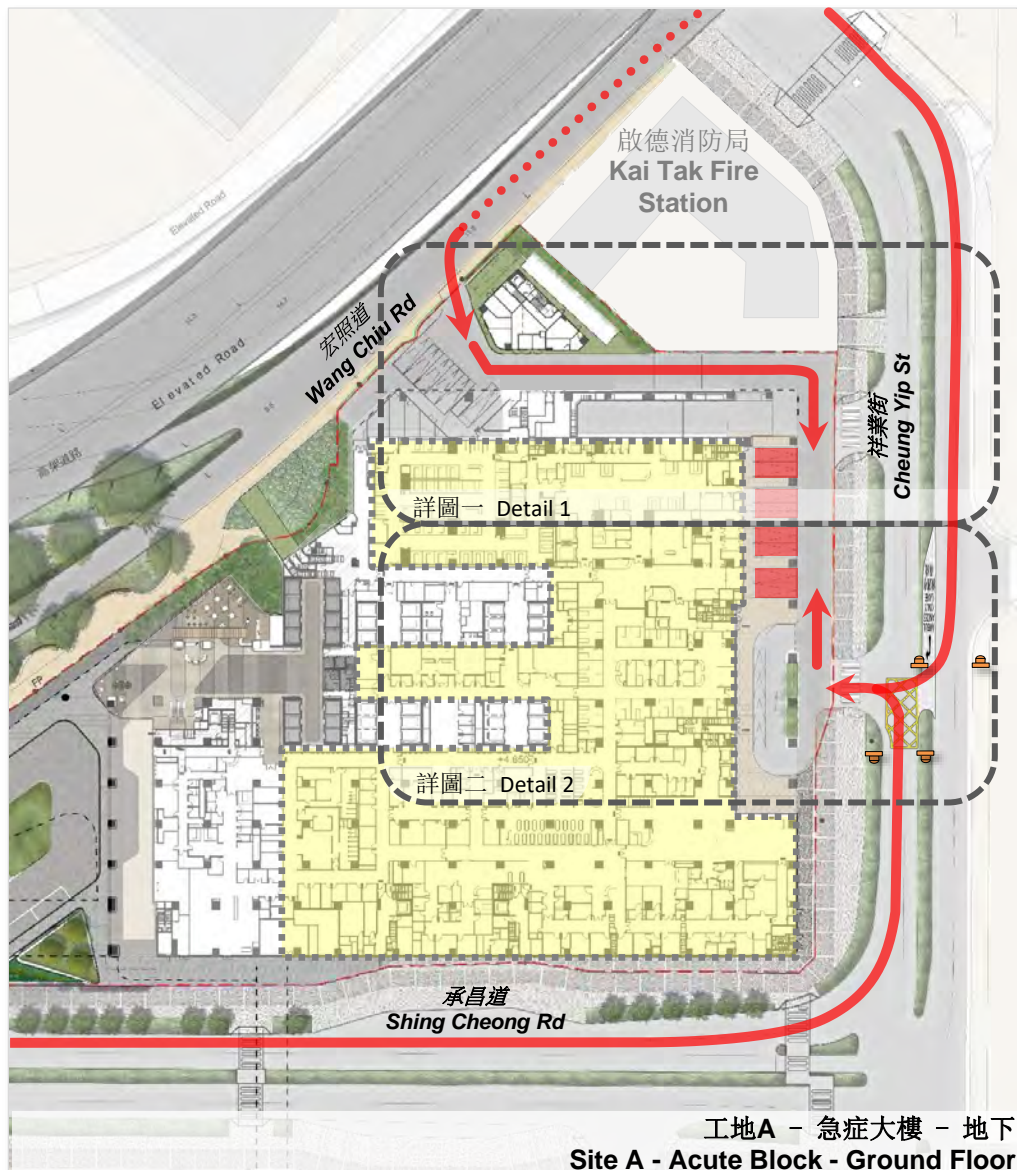
圖例  
LEGEND


→ 救護車入口路線  
Ambulance Run-in Route



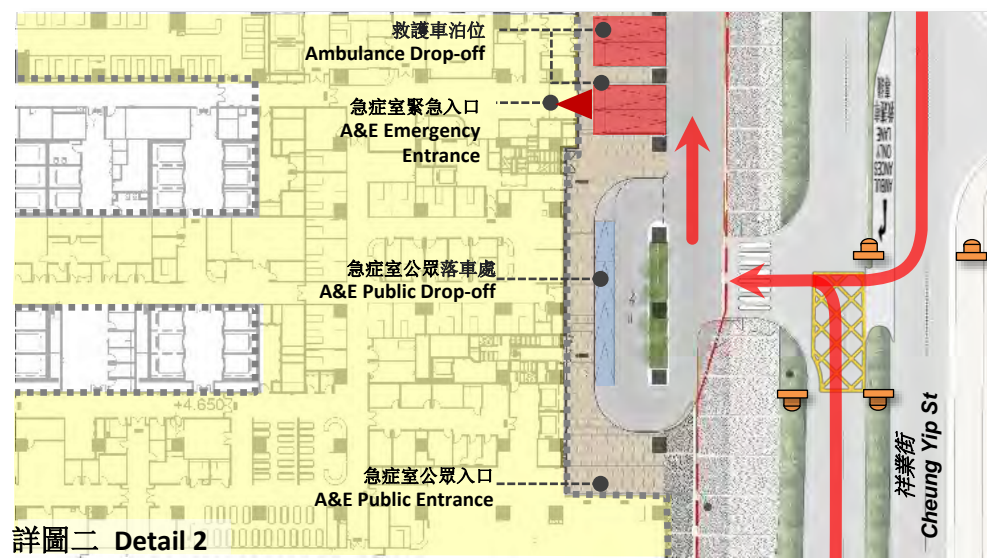
# 新急症醫院的救護車交通安排

## Ambulance Arrangement at the New Acute Hospital



 指定交通燈組透過裝置在道路表層的感應環路所控制，使救護車能迅速抵達急症室

Dedicated traffic light series detecting Ambulance by induction loop installed on surface layer of road for expedited ambulance service to AED



圖例  
LEGEND

-  救護車停車位  
Ambulance Parking
-  急症室  
A&E Department
-  急症室緊急入口  
A&E Emergency Entrance
-  救護車入口路線  
Ambulance Run-in Route



# 新急症醫院的公共小巴及的士站

## Public Light Buses and Taxi Arrangement at the New Acute Hospital



### 公共交通設施

新急症醫院內外亦已安排提供公共交通設施予巴士及小巴上落客使用

### Public Transportation Facilities

The New Acute Hospital have dedicated areas for passengers to alight public transportation, including bus and minibus services.

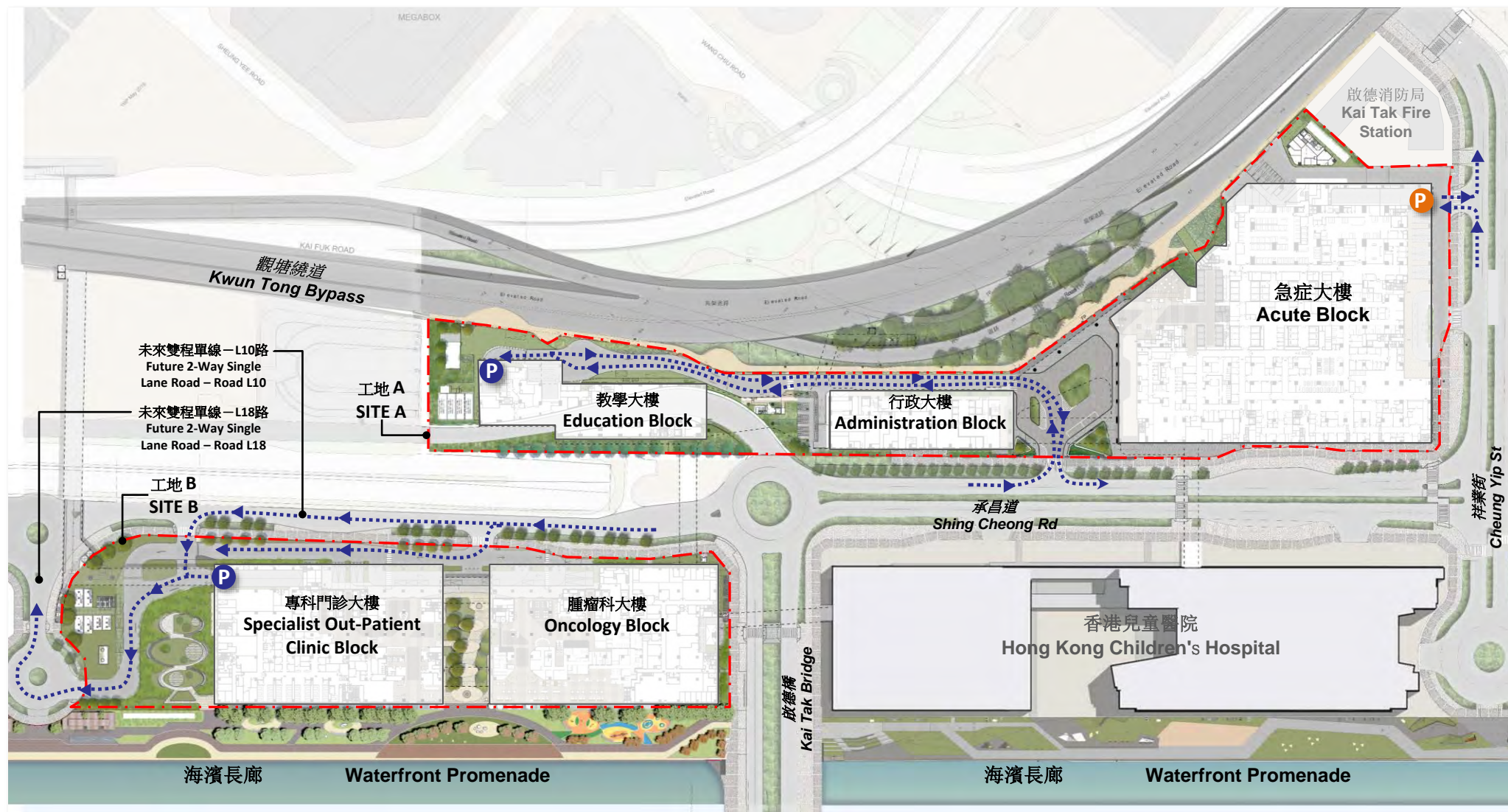
### 圖例 LEGEND

-  公共巴士站  
Public Bus Stop
-  公共小巴站  
Green Minibus Stop
-  的士站  
Taxi Stand



# 新急症醫院的私家車及停車場交通安排

## Private Vehicles & Carparking Arrangement at the New Acute Hospital



### 公眾車輛

新急症醫院會提供約915個私家車泊車位予醫院及公眾使用

### Public Vehicle Access

The New Acute hospital will provide 915 no. of carparking spaces for hospital staff and public use

### 圖例

### LEGEND

- 停車場進出路線  
Access To & Away From Carpark
- P 職員停車場入口  
Staff Carpark Entrance
- P 職員及訪客停車場入口  
Staff & Visitor Carpark Entrance



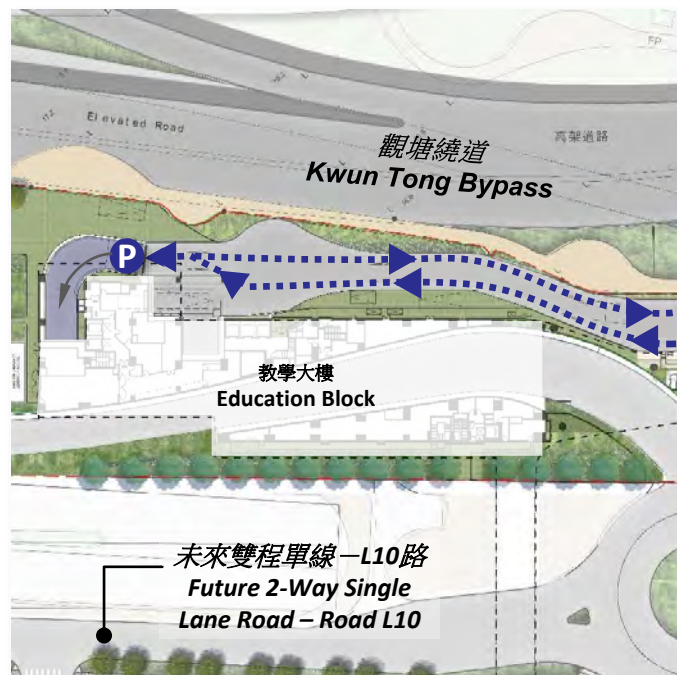
# 私家車及停車場交通安排 – 工地 A

## Private Vehicles & Carparking Arrangement at Site A

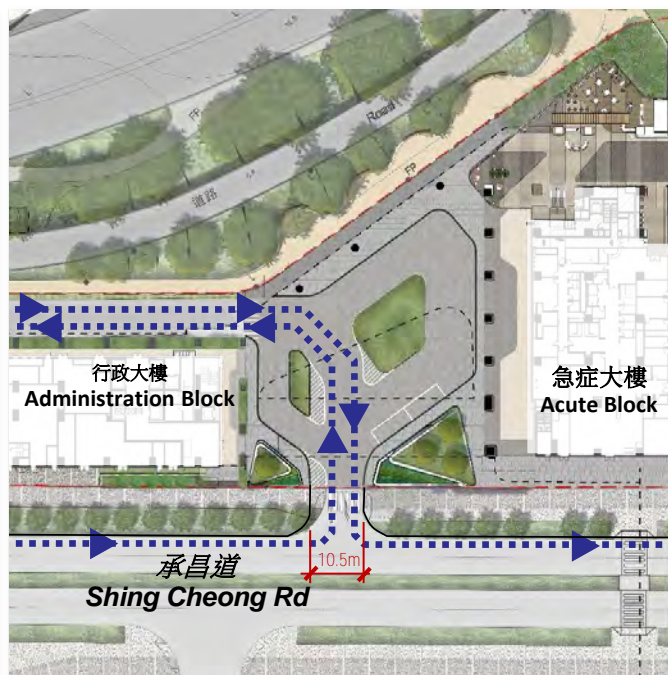


### 圖例 LEGEND

- 停車場進出路線  
Access To & Away From Carpark
- P 職員停車場入口  
Staff Carpark Entrance
- P 職員及訪客停車場入口  
Staff & Visitor Carpark Entrance



詳圖一 往地庫停車場  
Detail 1 Ramp down to basement carpark



詳圖二 主出入口設計從一般情況7.3米加寬至10.5米  
以應付緊急情況  
Detail 2 Primary run-in/out widened from typical 7.3m to 10.5m for mitigating emergency situations



詳圖三 往地庫停車場  
Detail 3 Ramp down to basement carpark



# 私家車及停車場交通安排 – 工地 B

## Private Vehicles & Carparking Arrangement at Site B



詳圖一 往地庫停車場  
Detail 1 Ramp down to basement carpark

圖例  
LEGEND

●●●▶

停車場進出路線  
Access To & Away From Carpark

P

職員及訪客停車場入口  
Staff & Visitor Carpark Entrance